

Client First Name	Client Last Name	Middle Initial	Client ID

Date of Trip	Service Type	Origin	Destination	# of Miles	Rate per Mile	Total Amount
	<input type="checkbox"/> Gas Card <input type="checkbox"/> Bus Pass <input type="checkbox"/> Taxi Voucher <input type="checkbox"/> Bus Token <input type="checkbox"/> Other _____					

Justification	Round Trip?	Voucher Number
	<input type="checkbox"/> Y <input type="checkbox"/> N	See Attached

Provider Verification/Signature

Date of Trip	Service Type	Origin	Destination	# of Miles	Rate per Mile	Total Amount
	<input type="checkbox"/> Gas Card <input type="checkbox"/> Bus Pass <input type="checkbox"/> Taxi Voucher <input type="checkbox"/> Bus Token <input type="checkbox"/> Other _____					

Justification	Round Trip?	Voucher number
	<input type="checkbox"/> Y <input type="checkbox"/> N	

Provider Verification/Signature

By signing this form, I acknowledge the following:

- I am aware that it is **prohibited** to redeem cards, vouchers or tokens for cash or to purchase alcohol, tobacco, illegal drugs or other substances, or firearms. Failure to comply with this directive will make me ineligible for further support for these services.
- I am aware that upon utilizing a card, token, or voucher I must provide verification of my arrival to the destination(s) recorded above to my case manager for review prior to receiving more assistance.

Client Signature

Date

Case Manager

Date