

Human Resources Center, Inc.  
 Transportation Invoice  
 Month- July Year- 2018

Name: \_\_\_\_\_  Parent /Guardian  Employee

Address: \_\_\_\_\_

Telephone # - \_\_\_\_\_

Individuals Name: \_\_\_\_\_ Rate: **\$.545/mile**

Updated Jan 2018

**Complete the following with addresses in their entirety**

Week 1 Dates	To	From	Reason	Total Miles
7-1				
<b>Week 2 Dates</b>			Total Miles for Wk 1 :	
7-2				
7-3				
7-4				
7-5				
7-6				
7-7				
7-8				
<b>Week 3 Dates</b>			Total Miles for Wk 2 :	
7-9				
7-10				
7-11				
7-12				
7-13				
7-14				
7-15				
			Total Miles for Wk. 3 :	

**FOR OFFICE USE ONLY:**

Plan Miles \_\_\_\_\_ Non-Plan Miles \_\_\_\_\_ Total \_\_\_\_\_

Human Resources Center, Inc.  
 Transportation Invoice  
 Month- July Year- 2018

Name: \_\_\_\_\_

Individuals Name: \_\_\_\_\_ Rate: \$0.545/ Mile

**Complete the following with addresses in their entirety**

Week 4 Dates	To	From	Reason	Total Miles
7-16				
7-17				
7-18				
7-19				
7-20				
7-21				
7-22				
<b>Week 5 Dates</b>			Total Miles for Wk. 4 :	
7-23				
7-24				
7-25				
7-26				
7-27				
7-28				
<b>Week 6 Dates</b>			Total Miles for Wk. 5:	
7-29				
7-30				
7-31				
			Total Miles for Wk. 6:	

Total Number of Miles for Month- \_\_\_\_\_ Amount Due \$ \_\_\_\_\_

I verify that miles submitted are in compliance with the authorized Individual Support Plan and that I am in compliance with all waiver requirements. Any hours submitted that are **not** consistent with the authorized Individual Support Plan will not be processed

Employee Signature- \_\_\_\_\_ Date- \_\_\_\_\_

Approved by - \_\_\_\_\_ Date- \_\_\_\_\_

Relationship to Consumer - \_\_\_\_\_

\*\*(Invoices must be **approved/verified** by the Consumer himself/herself, or Primary Caretaker **before** it is submitted for payment. Invoices that are not signed cannot be paid.)

**Signed invoices must be received in our office by the Fifth (5th) of each month:**  
 Payroll Specialist- or fax to: (570) 872-9959  
 Human Resources Center, Inc.  
 PO Box 77  
 Effort, PA 18330