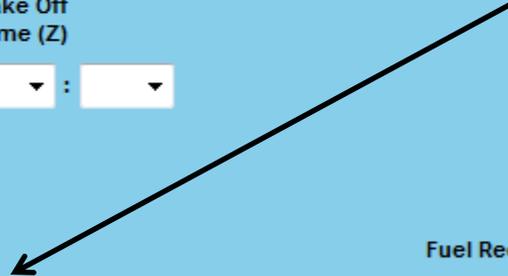


Pilot CAPID <input type="text" value="125920"/> Stephen L Knapper CAPID Look Up	<input type="checkbox"/> NON-CAP Observer <input type="text"/> CAPID Look Up	<input type="checkbox"/> NON-CAP Scanner 1 <input type="text"/> CAPID Look Up	<input type="checkbox"/> NON-CAP Scanner 2 <input type="text"/> CAPID Look Up	Type of FAA Flight Plan <input type="text" value="None"/>	
*Tail Number Tail Number Lookup <input type="text" value="N4742N"/>	*Aircraft Type <input type="text" value="182"/>	*Callsign <input type="text" value="4825"/>	*Take Off Airport Airport Lookup <input type="text" value="MGM"/>	*Landing Airport Airport Lookup <input type="text" value="MGM"/>	*Area A Or Rout <input type="text"/>
*Est. Sortie Hours <input type="text" value="1.0"/>	*Est. Take Off Time (Z) <input type="text" value="19"/> : <input type="text" value="00"/>	*Objective <input type="text" value="test"/>			
Hobbs NOTE! End <input type="text"/> Start <input type="text"/>	Tach NOTE! End <input type="text"/> Start <input type="text"/>	*Actual Sortie Hours (Hobbs) <input type="text" value="1.2"/>	*Actual Take Off Time (Z) <input type="text"/> : <input type="text"/>		
Fuel/Oil(\$) <input type="text" value="162.5"/> <input type="checkbox"/> No Fuel	Gallons <input type="text" value="42"/>	Reimbursed To (CAPID or Unit) <input type="text" value="WI"/> <input type="text" value="129874"/> <input checked="" type="checkbox"/> Pay To Member Stephen L Knapper CAPID Look Up	Fuel Receipt Receipt Uploaded Delete Receipt <input type="button" value="Upload Direct Deposit"/>		
*Sortie Flown/Not Flown <input type="text" value="Flown Successful"/>	Reason not Flown/Not Successful <input type="text" value="Please Select Reason"/>				
<input type="button" value="Update"/> <input type="button" value="Reset"/>	<input type="button" value="Report/View Discrepancies"/>	<input type="button" value="Delete Sortie"/>	<input type="button" value="Unapprove"/>		

On the sortie page in WMIRS, add the member's CAPID and check "Pay To Member"



Sortie Data

Multiple Wings/Members Involved. Select Wing or Member for Form 108

WI
RAYMOND T member

Select Member

Sortie/ Tracking No.	Date	A/C or Veh	Rate Type	A/C ID/ Veh ID	Corp	Mbr	Hours/ Miles	A/C MX	A/C Cost	Fuel/Oil	Su	Form 108 Ready	Wing for Fuel Reimbursement	
<input type="button" value="Edit"/>	A001	03/01/2011	182Q	182	N4742N	X	1.2	37.00	MX Test	0.00	0.00	<input checked="" type="checkbox"/>	<input type="radio"/> YES <input type="radio"/> NO <input type="radio"/> Yes <input type="radio"/> No	N/A
Total										0.00	0.00	0.00		

Additional Expenses:

[Select Wing to Add/Edit Expenses](#)

5 Remaining of 5 nights Lodging/per diem authorized for this mission.

[Select Wing to Add/Edit Lodging](#)

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Get Form 108

On the e108 Worksheet, select the member from the drop down list.

Sortie Data

Multiple Wings/Members Involved. Select Wing or Member for Form 108 RAYMOND T ▾

	Sortie/ Tracking No.	Date	A/C or Veh	Rate Type	A/C ID/ Veh ID	Corp	Mbr	Hours/ Miles	A/C MX	A/C Cost	Fuel/Oil	Sub Total	Pay to Member	Form 108 Ready	Wing for Fuel Reimbursement
														Select All <input type="radio"/> YES <input type="radio"/> NO	
<input type="button" value="Edit"/>	A001	03/01/2011	182Q	182	N4742N	X		1.2	37.00	MX Test	<u>162.50</u>	162.50	<input checked="" type="checkbox"/>	<input type="radio"/> Yes <input type="radio"/> No	N/A
Total										0.00	162.50	162.50			

Initially, members will only be reimbursed directly for fuel and oil. Other expenses will be processed on a wing e108. Once the process is established, additional expenses and lodging will be added to the member reimbursements.

*** Do not fax or send to CAP HQ. ***

CAP PAYMENT / REIMBURSEMENT DOCUMENT FOR AVIATION / AUTOMOTIVE / MISCELLANEOUS EXPENSES										FOR CAP-USAF USE ONLY							
1. Mission Number: 11-T-3032-B				Start Date: 03/01/2011				Stop Date: 03/31/2011									
2. Mission Type: SAR TRAINING				3. Member: Terry M Raymond													
4A. Mailing Address: 123 Main St. Montgomer, AL 36112				4B. Phone Number and E-Mail Address: traymond@capnhq.gov													
5. Invoice: PARTIAL				Estimate Outstanding: \$0.00													
A. Line Item	B. Date	Sortie No.	C. Acft Type or Veh Make/Model	D. Acft ID or Veh ID or License	E. Owner	F. Hours Flown/ No. Miles	G. Hourly Rate Acft Minor MX	H. Acft Cost Claimed	I.(a) Aircraft Fuel and Oil Cost Claimed	I.(b) Vehicle Fuel and Oil Cost Claimed	J. Lodging/ Per Diem Claimed	K. Comm/ Other Cost Claimed	L. Comm/ Other Cost Desc.	M. Sub Total Claimed	N. Reimburse To:	Receipt	
1	03/01/2011	A001	182Q	N4742N	Corp	1.2	\$ 37.00		\$ 162.50					\$ 162.50		Receipt	
									\$ 162.50					\$ 162.50			
11. CERTIFICATIONS. The party signing in Blocks 11A is responsible for the accuracy and validity of the facts recited in the claims and supporting documentation. The party shall not claim costs on this reimbursement form if expenses are being reimbursed from another source. Dual compensation is prohibited.																	
A. WING COMMANDER OR DESIGNATED OFFICIAL (PRINTED/TYPED NAME): I CERTIFY THE ABOVE EXPENSES ARE A DIRECT RESULT OF SUPPORT/PARTICIPATION IN THE ABOVE LISTED USAF AUTHORIZED MISSION AND THAT THIS CLAIM IS TRUE AND PROPER FOR PAYMENT.								<input type="button" value="Approve"/> <input type="button" value="Disapprove"/>									
B. CONTRACT/COOPERATIVE AGREEMENT NUMBER: F41689-00-2-0001								C. OTHER FUNDING SOURCE: FY11 AF Training GLR-WI									

1 Receipt File(s) available for viewing.

[Sortie 11-T-3032 001.pdf](#)

The member e108 is approved as any other e108. Once approved at the wing, the e108 will be reviewed and approved at CAP National HQ, batched, that paid to the member. The batch notice E-Mail will be noted as paying to the member to avoid confusion at the wing.