Mission Sortie Finance – Long Form	
Mission Number *:	Mission
	Symbol *:
All WMIRS Sortie Numbers f	or this fuel receipt:
Data of Sortia (if other than	data on receipt):
Date of Sortie (if other than date on receipt):	
Contact, Pilot or Driver's Name:	
Contact, Pilot or Driver's Pho	one:
Contact, Pilot or Driver's e-N	1ail:
Type of Aircraft or Veh. Make & Model:	
Corporate Owned: Member Owned:	
Tail Number (if not on receip	
A/C Hobbs Hours Or Veh. M	iles:
Reimburse to: Wing Credit Card:	NHQ Credit Card :
Unit: Vendor: Member:	
Reimburse to Unit, Mem	
Member – CAPID, OR if Unit	- Unit – Number:
Name if other than Contact/	Pilot/Driver:
	N
Member Street Address:	New:
Member City, State, Zip:	
Member City, State, Zip.	
*Refueling cannot be prorate	d between missions.
Remarks (attach sheets if necess	
108 Task Force Use Only:	
Reimburse Claimant \$	
Signed:	
JIGHEU.	

Mission Sortie Finance – Short Form			
Mission Number *:	Mission		
	Symbol *:		
All WMIRS Sortie Numbers for this fuel receipt:			
Date of Sortie (if other than date on receipt):			
Contact, Pilot or Driver's Name:			
Contact, Pilot or Driver's Phone:			
Contact, Pilot or Driver's e-Mail:			
Type of Aircraft or			
Veh. Make & Model:			
Corporate Owned:	Member Owned:		
Tail Number (if not on receipt):			
A/C Hobbs Hours OR Veh. Miles:			
Reimburse to: Wing Credit Card:	NHQ Credit Card :		
Unit: Vendor : Member:	Direct to Bank Acct:		
Reimburse to Unit, Member or Vendor below.			
IF Member – CAPID OR IF Unit - Number:			
Name if other than Contact/Pilot/Driver:			
Member Street Address:	New:		
Member City, State, Zip:			

*Refueling cannot be prorated between missions. Remarks (attach sheets if necessary):

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