Children's Cancer PARTNERS OF THE CAROLINAS™
Supporting Families Through the Journey

Mail completed form to:
900 S. Pine St. Suite F
Spartanburg, SC, 29302

APPOINTMENT CONFIRMATION FORM

PATIENT NAME: _____ **PARENT/GUARDIAN NAME:** _____

HOME ADDRESS: _____ **CITY:** _____

STATE: _____ **ZIP:** _____ **PHONE:** _____ **New address/phone?** ☐ **Yes** ☐ **No**

INSTRUCTIONS

- Record all appointments/stays – even if not requesting mileage – and have medical staff initial.
- Mileage reimbursement: check "no" if you received reimbursement or transportation from Medicaid, private insurance, or another organization; check "yes" to request CCP mileage reimbursement.
- Please submit this form with meal and parking receipts monthly. CCP will not accept after 60 days.
- Receipts must be itemized and clearly show date, payment form, and total amount.
- Receipts must be in date order and match an appt date(s) listed below – one meal receipt per outpatient. appointment and three meal receipts per day for overnight travel/inpatient stay. Do not include gas receipts.

Request to medical staff: Please initial to confirm the patient was at your facility on the date listed so we may reimburse their travel costs. If you have questions, call Children's Cancer Partners at 864-582-0673. Thank you!

Date / Date Range	Inpatient or Outpatient?	Required overnight travel? *Check if yes*	Medical Facility (provide address if not primary treatment center)	Requesting CCP Mileage Reimbursement?	Initial by Medical Staff
Example: Jan 8	Out	☐ yes	Labcorp – 2505 Delaney Ave Wilmington, NC 28403	(Yes) / No	BS
Example: Jan 28 – Feb 2	In	☐ yes	UNC Hospital	(Yes) / No	AL
1.		☐ yes		☐ Yes / No ☐	
2.		☐ yes		☐ Yes / No ☐	
3.		☐ yes		☐ Yes / No ☐	
4.		☐ yes		☐ Yes / No ☐	
5.		☐ yes		☐ Yes / No ☐	
6.		☐ yes		☐ Yes / No ☐	
7.		☐ yes		☐ Yes / No ☐	
8.		☐ yes		☐ Yes / No ☐	
9.		☐ yes		☐ Yes / No ☐	
10.		☐ yes		☐ Yes / No ☐	
Notes:					

Parent/guardian signature: _____ Date: _____

To request more forms be mailed to you, please scan this QR code.To download your own, please go to: childrenscancerpartners.org/how-we-help/

Revised February 2024