

NFAC - Expense Reimbursement Form NFAC

Fillable Forms/Print/Download from [NFAC Website-Documents](#) Receipts Required for ALL items, except mileage.

Office or Committee: _____ Date Submitted: _____

Obtain **EXPENSE ACCOUNT CODES/DESCRIPTIONS** by checking your budget's balance in the most recent minutes at [NFAC-Password Protected Area](#) Budget.vs.Actual. Add Expense Account Code/Description and explanation below.

<u>CODE</u>	<u>DESCRIPTION</u>	<u>EXPLANATION/DETAILS/DATE</u>	<u>TOTALS</u>
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____

_____ Miles for Officers Interim Meeting – Assembly – Mileage Worksheet
 = _____ Total miles at \$ _____ per mile
 + _____ Total tolls

CODE	DESCRIPTION	EXPLANATION/DETAILS	
9140	MILEAGE FOR PANEL	_____	\$ _____

Make check to: Name: _____ **GRAND TOTAL \$** _____

Mail to Address: _____

Office Use: Date Paid: _____ Check # _____
 Rev 2/2017

Please do not pay Florida sales tax. We are exempt. See the Treasurer for a sales tax exemption form.