

Policy and Forms approved 28 Jan. 2017

Reimbursements >\$200 need pre-approval 21 days before date of expense.

Travel Reimbursement Request Form



Please make check

payable to: Member Name: _____

Member Address: _____

City/State/Zip _____

Event Attended: _____ Depart Date: _____

NFA Purpose for Travel: _____ Return Date: _____

Actual Expenses:	Notes	Amount
Airfare	If loyalty miles used, report only cash paid.	\$
Lodging	Room plus tax, resort fee	\$
Parking (hotel charge / other fees)	Hotel parking charge or other parking fees	\$
Auto Mileage to/from destination	# of miles _____ rate / mile _____	\$
Ground transport at destination	public transit, shuttle, taxi, etc.	\$
Meals	food, non-alcoholic beverage, tips	\$
Other (explain in "Notes")		\$
	Total Reimbursement Amount	\$

Please attach original receipts and submit form within 30 calendar days of return date.

Check one to elect to make this expense a contribution/donation to NFA:

I would like to contribute the total amount to NFA

I would like to contribute \$ _____ to NFA

An acknowledgement letter will be sent if your donation is over \$250.

Member Signature: _____ Date: _____

Approved by: _____ Date: _____

Officer Title: _____

Check # _____	Check Date _____	Mail Date _____
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End of fiscal year travel reimbursement requests due by September 15th.