

AFG Area 9: : Florida – North

Assembly May 20-22, 2016

Panel 55 - Reimbursement Form

NAME: (please print) _____

Coordinator ___ Officer ___ Past Delegate ___ Event Chair ___

Room Number _____ Roommate: (print) _____

Gasoline & Tolls Cost (round trip) : _____

Food _____

Officers and Coordinators only:
Expenses related to your position (copying, supplies, etc)

Expenses: _____

Total Reimbursement: _____

Member Signature: _____

REIMBURSEMENT GUIDELINES:

Hotel: Area will pay for your hotel room on the Master Bill. You must use a credit card for your incidentals. Area will pay for 1/2 of total room cost up to \$99 per room (double occupancy), 2 nights max. Any member staying alone will be required to pay 1/2 of the room cost before the end of the meeting.

Food: Area will reimburse \$10 per breakfast, \$15 per lunch and \$20 per dinner. Up to \$90.

Gas and Tolls: Area will reimburse actual cost of gas (round trip) and tolls. Please consider ride-sharing to save on these costs. You may figure this out as you see fit.

Treasurer Mailing Address: 1700 North Monroe Street, Suite 11-120
Tallahassee, FL 32303

PLEASE FILL THIS OUT AND PUT IN TREASURER In-Basket BEFORE THE END OF ASSEMBLY. IF THERE IS A CHANGE IN YOUR MAILING ADDRESS PLEASE NOTE IT ON THIS FORM.