



## REIMBURSEMENT FORM

Payable To:		
Address:		
City:	State:	Zip:

Purpose:

MEETING/EVENT (Class) (Select One)	EXPENSE CATEGORY (Select all that apply)		AMOUNT
Administration	5002-00	Annual National Institute	
Browns Event	5003-00	Regional Board Exp	
Career Fair Event	5004-00	Fall Presidents Mtg Exp	
Networking	5006-00	LTC Board Expense	
PFS Meeting	5009-00	Director & Planning Mtg	
Region Six	5101-00	Audio Visual	
Student Networking Event	5102-00	Program: Food & Beverage	
Summer Gala	5103-00	Meeting Space Rental	
Women In Leadership	5108-01	Speaker Fees <small>(1099 Reportable)</small>	
	5108-02	Speaker: Travel & Gifts	
	5211-00	Annual Recognition	
	5214-00	Networking Event	
	5300-00	Newsletter	
	5601-00	Member Recognition & Awards	
Other Budgeted Event:	5950-00	Web Site	
	6001-00	Printing & Supplies	
Other Non-Budgeted Event:	6003-00	Postage	
	6501-00	Secretarial Support	
		Other	
		<b>GRAND TOTAL</b>	

Submitted by:

Approved by:	Date:
--------------	-------

(Up to \$1,000 Committee Chair)

Approved by:	Date:
--------------	-------

(Over \$1,000 HFMA Officer)