

The Friendship Force of Lincoln
PO Box 30334
Lincoln, NE 68503

REIMBURSEMENT FORM

Attached are receipts for items purchased with my funds for the business of The Friendship Force of Lincoln:

Date Purchased	Where Purchased	Items Purchased	Intended Use of Items	*Committee #	Cost
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Total Amount Requested for Reimbursement _____

Request for reimbursement submitted by:

Name	Address	Zip Code	Phone	Committee	Date submitted
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PLEASE GIVE TO THE CLUB TREASURER OR SUBMIT TO THE TREASURER THROUGH THE ABOVE PO BOX.
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Treasurer's Use: _____	_____	_____	_____
Date Paid	Check Number	Amount Paid	Treasurer's Signature

***Committee Numbers according to the budget**

50999 FFI Conference

51200 Regional Conference

52000 Social Committee & Meetings

52010 Membership

52012 Mentoring

52013 Directory

52014 Badges

52015 Courtesy

52020 Diversity and Community Service

52030 Marketing

52031 Newsletter

52032 Web Page

52033 Social Media

52034 Publicity/Recruitment

52040 Annual Meeting & Board Meeting Expenses

52070 P.O. Box Rental & Postage

52130 Misc Expenses

53032 Pins