

# Florida Fellows Institute

of the American College of Trust and Estate Counsel



FLORIDA FELLOWS INSTITUTE  
AMERICAN COLLEGE OF TRUST AND ESTATE COUNSEL  
90115th Street NW, Suite 525  
Washington, DC 20005  
(202) 684-8460 Fax: (202) 684-8459

## POLICY FOR REIMBURSEMENT OF EXPENSES BY SPEAKERS



Policies, policies, everywhere.  
While we'd prefer the laissez faire,  
experience teaches us that direction  
will eliminate the need for correction.

For your participation in FFI,  
we offer gratitude, and now codify  
how you get paid back for meals,  
lodging, travel, using our good deals.

First, there is a form, required by the College.  
No departures, not even for those with inside knowledge.  
Second, as to transportation, IRS rate for mileage or fly coach.  
Third, use the group rate at the FFI hotel, stay above reproach!  
Fourth, dine with FFI on Thursday night  
And for lunch be with us to take a bite.

Common sense, not just by Thomas Paine  
Also for speakers - use your brain!  
You are among the best!  
Don't submit an embarrassing request.



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REQUEST FOR REIMBURSEMENT OF EXPENSES

PLEASE TYPE OR PRINT

Purpose: \_\_\_\_\_

Dates: \_\_\_\_\_

Air Transportation (Attach Receipts): \$ \_\_\_\_\_

To and From Terminals (Taxi, Uber, etc.): \_\_\_\_\_

Automobile (Attach map printout showing mileage and parking or toll receipts):

Mileage: \_\_\_\_\_ @ \_\_\_\_\_ per mile    Parking: \_\_\_\_\_    Tolls: \_\_\_\_\_

Lodging and Meals (Attach Receipts): \_\_\_\_\_

Other Miscellaneous Expenses (Include description below):  
\_\_\_\_\_

Less reimbursements received from other sources: \_\_\_\_\_

Total Reimbursement Requested: \$ \_\_\_\_\_

RECEIPTS ARE REQUIRED FOR AIR TRAVEL, HOTELS AND FOR ANY OTHER INDIVIDUAL EXPENDITURES THAT EXCEED \$25.00. GOOGLE OR BING MAPS PRINTOUTS ARE REQUIRED TO SUPPORT MILEAGE REIMBURSEMENTS REQUESTS.

Make Check Payable to: \_\_\_\_\_  
(Individual, Firm or Company)

Print Name: \_\_\_\_\_    Signature: \_\_\_\_\_

Payment Address: \_\_\_\_\_  
(Street Address or P.O. Box)

\_\_\_\_\_  
(City, State and Zip Code)

Phone: \_\_\_\_\_    Email: \_\_\_\_\_

PLEASE EMAIL COMPLETED REQUEST FORMS ALONG WITH RECEIPTS:  
FFI.ACCOUNTPAYABLE@BILL.COM.

A REQUEST FOR REIMBURSEMENT MUST BE RECEIVED ON A FLORIDA FELLOWS INSTITUTE REIMBURSEMENT FORM WITHIN THREE MONTHS AFTER THE EXPENSE WAS INCURRED. OTHERWISE, THE REQUEST WILL BE DENIED. PAYMENT TERMS ARE NET 30 UNLESS OTHERWISE SPECIFIED.