



# MEMBER TRAVEL REIMBURSEMENT

**SUBMIT WITHIN TWO WEEKS OF TRAVEL**

Name: \_\_\_\_\_ Committee: \_\_\_\_\_  
 Florida Bar #: \_\_\_\_\_ Travel Dates: \_\_\_\_\_  
 Purpose: \_\_\_\_\_ City: \_\_\_\_\_

**TRANSPORTATION:**

\* Air: \_\_\_\_\_ airlines (coach, 21-day advance purchase) \$ \_\_\_\_\_  
 Personal Car: \_\_\_\_\_ miles at **.70¢** per mile \$ \_\_\_\_\_  
 \* Car Rental: \_\_\_\_\_ company (# of days \_\_\_\_\_) \$ \_\_\_\_\_  
**Detailed rental car receipts are required.**

**FOOD EXPENSES:** Actual expenses, not to exceed **\$60** per travel day  
**Any AMOUNT \$25.00 AND OVER requires a receipt.**

Record actual amount per meal:	DAY 1	DAY 2	DAY 3
Breakfast (example \$14 / day)	\$ _____	\$ _____	\$ _____
Lunch (example \$16 / day)	\$ _____	\$ _____	\$ _____
Dinner (example \$30 / day)	\$ _____	\$ _____	\$ _____
			\$ _____

**OTHER EXPENSES:** **Any AMOUNT \$25.00 AND OVER requires a receipt.**

\*\* Hotel (Room and tax only, at lowest rate available) \$ \_\_\_\_\_  
 Taxi \$ \_\_\_\_\_  
 Tolls \$ \_\_\_\_\_  
 Parking \$ \_\_\_\_\_  
 Itemize: \_\_\_\_\_ for a total of \$ \_\_\_\_\_  
 \_\_\_\_\_ for a total of \$ \_\_\_\_\_  
 \_\_\_\_\_ for a total of \$ \_\_\_\_\_

**TOTAL AMOUNT DUE SPEAKER:** \$ \_\_\_\_\_

**Payment Method:**

- ACH/Direct Deposit (one time account setup)  
Call 1-850-561-5832
- Check Paid to me firm
- \*Receipts Required
- \*\*Actual Hotel Bill, Not Charge Slip

**Mailing Information**

\_\_\_\_\_  
 (Name)  
 \_\_\_\_\_  
 (Address)  
 \_\_\_\_\_  
 (City/State/Zip)

Department:  
 ATTN:  
 The Florida Bar  
 651 East Jefferson Street  
 Tallahassee, Florida 32399-2300

<p><b>FOR OFFICE USE ONLY</b></p> <p>Account #: _____</p> <p>Approval: _____</p> <p>Date: _____</p>
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## TRAVEL EXPENSE REIMBURSEMENT POLICIES

***Requests for reimbursement must be submitted within 2 weeks after your completed travel.***

*We appreciate your agreeing to volunteer on behalf of The Florida Bar. We understand this requires a substantial expenditure of time on your part for which there is no payment. We can, however, reimburse you for your actual expenses directly related to incurred costs.*

The following are policies governing the reimbursement of travel expenses. If you have any questions as to whether an expense is reimbursable, please contact your staff liaison, in advance, to avoid any misunderstandings.

### **A. Transportation**

Air Fare - We will reimburse up to the cost of a 21-day advance purchase. Please make your reservations early to obtain the lowest rate. Submit the original airline ticket (or copy of ticket) with your reimbursement request. First class air fare will not be reimbursed.

Mileage - Automobile mileage will be reimbursed at the maximum rate per mile allowed by the IRS.

Ground Transportation - The cost of ground transportation (taxicabs, airport shuttles, and ride shares) will be reimbursed.

Rental Cars – ***A Receipt is Required with rental car details and type of vehicle.***

The one-day cost of a rental car, if necessary or if more economical than cab fare, will be reimbursed. If special circumstances warrant a rental car, prior approval of the staff liaison is needed. In addition, parking fees, tolls, etc., will also be reimbursed. Include originals or copies of your invoices and receipts with reimbursement request. **The full rental car cost may not be reimbursed without full details and vehicle type.**

### **B. Meals**

Meals will be reimbursed on an actual expenditure basis for up to \$60 per day (24-hours) per speaker. If more than one speaker is included on a meal charge, please list all the names and provide a receipt. A receipt is required for any expense exceeding \$25.

### **C. Lodging - Receipt Required (or copy)**

Lodging will be reimbursed for no more than the lowest rate (single/regular) room plus applicable taxes at the host hotel and will be paid for no more than one night. If special circumstances warrant additional nights, prior approval of the staff liaison is needed. Lodging expenses will not be reimbursed for lecturers speaking in the general vicinity of their home. Please include a copy of the hotel bill with your reimbursement request.

### **D. Family Members**

We cannot reimburse expenses of your spouse, children or other family members should you choose to have them accompany you to the course.



# The Florida Bar

651 East Jefferson Street  
Tallahassee, FL 32399-2300

Joshua E. Doyle  
Executive Director

850/561-5600  
www.FLORIDABAR.org

## The Florida Bar Electronic Payment Initiative

Dear Valued Vendor:

The Florida Bar (TFB) is in the process of switching current vendors and customers from paper checks to electronic payment options. As part of this transition, we ask that your organization accept future invoice payments by one of the following options: credit card or ACH/Direct Deposit, rather than by check.

### There are two electronic payment options:

- 1) Single-Use Virtual Mastercard
- 2) ACH (Direct Deposit)

This change will simplify your processes, provide you with faster invoice payment, and improved cash flow. The major difference between the electronic payment types and standard check/corporate credit card reimbursement is that the Single-Use Virtual Mastercard and ACH options will result in faster payment reimbursement. There are no fees associated with electronic payments.

### Electronic Option 1- Single-Use Virtual Mastercard

1. Determine if you are able to accept credit card transactions and an email address/contact to receive payment information.
2. Send an email containing the requested information above to [accounting@floridabar.org](mailto:accounting@floridabar.org). A reply will be sent confirming receipt.
3. For each payment, you will receive a unique single-use account number, the payment amount, and remittance advice related to your payment. You will use this information to process the payment following your normal credit card process.

## Electronic Option 2- ACH (Direct Deposit)

1. Determine that you have an email address/contact to receive remittance information.
2. Gather the following information from a canceled check, voided check or bank letter:  
Bank name, address, phone number and Routing (transit/ABA) number, type of account and account number.
3. Either call 1-850-561-5832 or email a request for a call back to [accounting@floridabar.org](mailto:accounting@floridabar.org).
4. For each payment, you will receive remittance advice via email.

Additional items to consider before choosing a payment option:

- Choose Electronic Option 2, if you do not have the ability to receive payments via credit card
- Choose Electronic Option 2, if there is a reason (dollar value, multiple locations processing payments, etc.) why any payment cannot be processed via credit card.
- Only one payment option may be selected.

**Questions?** If you have any questions about the new payment options, please contact us at [accounting@floridabar.org](mailto:accounting@floridabar.org). Our accounting team will be glad to assist you.