# Project Reimbursement Form

**Name:** _____

**Project Name:** NFU New Farm Project

| Date | *Expense Description (Vendor, Address, Activity) | TRAVEL/VEHICLE OPERATIONS | | | | | TRAINING | OTHER (e.g. taxi fees) |
|---|---|---|---|---|---|---|---|---|
| | | Personal Vehicle | | Car Rental | Lodging | Meals | | |
| | | **Miles | Total | | | | | |
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| | TOTALS | | | | | | | |

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|---|---|
| **Total Due to Member** | |

Please have Vice-president or other project officer with Bank Authorization sign the Reimbursement Form if the President is receiving the reimbursement.

**Member Signature:** _____ **Date:** _____

**President's Signature:** _____ **Date:** _____