



### Official Payment & Travel Reimbursement Request

		Totals
<b>Mileage</b>	<input type="text"/> miles @ \$0.445	<input type="text"/>
<b>Tolls</b>		<input type="text"/>
<b>Other Expense</b>		<input type="text"/>
<b>Official Fee</b>	(A W-9 must also be attached)	<input type="text"/>
<b>Total due:</b>		<input type="text"/>

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

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

**Sport:** \_\_\_\_\_

**Signed:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Print Name:** \_\_\_\_\_

**Street Address:** \_\_\_\_\_

**City/St/Zip:** \_\_\_\_\_

Please complete, attach receipts for tolls and other items and send to:

MAIL:

Florida Sports Foundation, Inc.  
Attn: Accounts Payable  
101 N. Monroe Street, Suite 1000  
Tallahassee, Florida 32301  
(850) 922-8805 Telephone

EMAIL: [Accounting@flsports.com](mailto:Accounting@flsports.com)  
FAX: **850-922-0482**