



# The Florida Bar 2020 Section/Division Reimbursement

Name: \_\_\_\_\_ Atty. No.: \_\_\_\_\_

Firm: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

In accordance with the policies outlined on the reverse of this form and the policies of the Section/Division, please reimburse the following:

### **Office Expenses**

Telephone Charges (attach itemization if more than \$50)	\$ _____
Photocopies _____ copies at _____ per copy (not to exceed 10¢ per copy)	\$ _____
Postage	\$ _____
Printing	\$ _____
Other (please explain) _____	\$ _____
<b>Total Office Expense</b>	<b>\$ _____</b>

### **Travel Expenses**

Date of Travel: \_\_\_\_\_

Purpose of Travel: \_\_\_\_\_

Airfare (receipt of photocopy of ticket required) \$ \_\_\_\_\_

Personal Car: \_\_\_\_\_ miles at **.575** per mile \$ \_\_\_\_\_

Taxi \$ \_\_\_\_\_

\*Car Rental: \_\_\_\_\_ company (# of days \_\_\_\_\_) \$ \_\_\_\_\_

(Both the rental car agreement and the rental car receipt are required.)

Meals (maximum: \$60 per day) \$ \_\_\_\_\_

Lodging (hotel receipt required, **not** credit card slip, room and tax only) \$ \_\_\_\_\_

Other (please explain) \_\_\_\_\_ \$ \_\_\_\_\_

**Total Travel Expense** \$ \_\_\_\_\_

**TOTAL** \$ \_\_\_\_\_

### **Payment Method:**

Credit Card                       ACH/Direct Deposit  
(one time account setup)

Check payable to  me  firm.

Professional Development Department  
The Florida Bar  
651 East Jefferson Street  
Tallahassee, Florida 32399-2300

Officer's Approval:  
Signature: \_\_\_\_\_  
Date: \_\_\_\_\_

# The Florida Bar Section Reimbursement Policies

Outlined below is an excerpt from Florida Bar Standing Board Policy 5.61, Section Disbursement Policies.

- (e) **Section Reimbursement Policy.** Sections may separately budget a fixed amount to be paid annually to section officers for reimbursement for all expenses incurred as opposed to reimbursing expenses on an item-by-item basis. Except for the expense allowance herein provided for section officers, all reimbursement of expenses must be in accordance with the following or be on a more restrictive basis as determined by individual sections:
- (1) **Telephone Charges.** All conference call charges must identify the parties called and the amount and purpose of the call. Telephone calls of up to \$50 per month may be reimbursed without itemization. If charges exceed that amount, all charges must be identified as to at least one of the following:
- a. party called,
  - b. telephone number called, or
  - c. purpose of the call.
- (2) **Copy Costs.** Office copy costs are not to exceed 10¢ per copy and must be itemized by number of copies and purpose. Miscellaneous, general, etc. is an appropriate description for a small number of copies.
- (3) **Postage.** Any large mailings must be itemized as to what was mailed to whom and at what cost. Mailings should be done by section staff at the Bar headquarters when possible.
- (4) **Printing.** All printing shall be done at The Florida Bar headquarters unless, for the benefit of the section and the Bar, circumstances warrant otherwise.
- (5) **Travel Expenses.** Travel expense reimbursement is essentially the same as for Bar employees.
- a. Air fare in all instances shall be “coach”.
  - b. Mileage is reimbursed at the maximum rate permissible by IRS without reporting such reimbursement to the Internal Revenue Service or some lower figure set by the section.
  - c. When taxis or limousines are not practical, a rental car may be used. The rental car shall be a subcompact or compact, or any other vehicle at a rate no greater than the rates for a subcompact or compact.
  - d. The method of travel should be the most economical, considering both time and travel costs.
  - e. Meals shall be reimbursed at the same rate as is then applicable for expense by staff members of The Florida Bar. If there is a group meal function which is paid for by the section, no individual meal reimbursement shall be permitted.
  - f. Copies of receipts for lodging, out-of-town travel expenses (airline tickets, etc.) and all other charges of \$25 or more (other than mileage and authorized meal allowances) must be attached.
  - g. When paying expenses (meals, etc.) for other individuals, the names of the other parties must be indicated and the relation to Bar activity disclosed.
  - h. The travel expenses of the spouse, companion or associate of a Florida Bar CLE speaker may be reimbursed in the same amounts and for the same items of expenditures as otherwise allowed for the speaker; however, reimbursement shall not be allowed unless provided for in the section’s annual budget as an “excess speaker expense” under SBP 5.60(k).
- (6) **Time Limits For Reimbursement Requests.** Expenses to be considered for reimbursement must be submitted at least quarterly within 30 days of the end of the quarter for any quarter the cumulative unreported expenses exceed \$100. Expense reports due for periods ending on June 30 must be filed by July 15. A section may elect to hold actual payment of such expense statements until July 15 after the end of the fiscal year.
- (f) **Conflicting Policies.** Any existing policy of The Florida Bar that is in conflict with this policy shall not be controlling and should be amended. These policies are minimal umbrella policies for sections to operate within. Sections shall establish policies specific to the individual section within the umbrella policies.

NOTE: As stated above, these are minimal umbrella policies. Each section/division may or may not provide for member reimbursement of expenses. If you have questions, please contact your section administrator.



# The Florida Bar

651 East Jefferson Street  
Tallahassee, FL 32399-2300

Joshua E. Doyle  
Executive Director

850/561-5600  
[www.FLORIDABAR.org](http://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 check to either corporate credit card or electronic payment options. As part of this transition, we ask that your organization accept future invoice payments via credit card (if applicable) or electronically, rather than by check.

Please check here to receive payments via credit card. Return this form with the response to [finance@floridabar.org](mailto:finance@floridabar.org).

### 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 [finance@floridabar.org](mailto:finance@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.

# THE FLORIDA BAR

## Electronic Option 2- ACH (Direct Deposit)

1. Determine that you have an email address/contact to receive payment information.
2. Complete and sign the included Authorization Agreement, providing a canceled check; voided check or bank letter.
3. Return the executed agreement to [finance@floridabar.org](mailto:finance@floridabar.org). A reply will be sent confirming receipt.
4. For each payment, you will receive remittance advice at the email address provided.

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.

We appreciate your cooperation in this change, which will be advantageous for everyone.

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

Sincerely,

Misty L. Dilmore, Controller



## The Florida Bar

651 East Jefferson Street  
Tallahassee, FL 32399-2300

Joshua E. Doyle  
Executive Director

850/561-5600  
www.FLORIDABAR.org

### AUTHORIZATION AGREEMENT FOR PREAUTHORIZED TRANSACTIONS

Name: \_\_\_\_\_

I (we) authorize **The Florida Bar** herein after called **COMPANY**, to initiate deposits to my (our) account indicated below in accordance with the selected invoice frequency.

Financial Institution Name: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Phone: \_\_\_\_\_

Account Number: \_\_\_\_\_

Routing Number (Transit/ABA Number): \_\_\_\_\_

Select One:     Checking     Savings

I (we) acknowledge that the origination of ACH transactions to or from my (our) account must comply with the U.S. law. I also acknowledge and authorize **COMPANY** to initiate corrective debit or credit entries as necessary. This authority is to remain in full force and effect until **COMPANY** has received written notification from me (or either of us) of its termination in such time and in such manner as to afford **COMPANY** a reasonable opportunity to act on it.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*Attach a voided or canceled check below.*