



New York-New Jersey Trail Conference
 600 Ramapo Valley Road, Mahwah, NJ 07430 (201-512-9348) volunteer@nynjtc.org

Volunteer Expense Statement from (start date)_____ to (end date)_____

For expenses for the _____ Committee/Crew/Region

1. Follow the [Volunteer Reimbursement Guidelines](#).
 2. As a nonprofit organization we are exempt from sales tax and **cannot** reimburse for tax.* Please ask your Program Coordinator or Staff Liaison for our tax-exempt form before making any purchases.
 3. A Procurement is required for any purchase over \$250
 4. Driving Expenses: State purpose, destination. Cost = 14¢/mile + tolls & parking fees
 5. **Please indicate a committee above and attach all receipts and supportive documents.**
 6. Expense reports should be submitted within 15 days of a quarter or year-end (12/31.)
 7. If you are on a crew member, please ensure your crew leader is aware of purchases made.
- Thank you!

Date of Purchase	Item(s) Purchased	Receipt Attached (check box)	Cost (*without tax!)	Office Use Only Expense Item	Office Use Only Class

TOTAL \$ _____

Less amount given as a tax-deductible contribution (if any) \$ _____

BALANCE REQUESTED \$ _____

Volunteer Name _____ Date Submitted: _____

Address _____ City/State _____ Zip _____

Staff Approval _____ Staff Use: (Funding Source) _____