FORM 106

NEW JERSEY STATE FIREMEN'S ASSOCIATION

DELEGATE (OR ALTERNATE)

EXPENSE ALLOWANCE VOUCHER

ASSOCIATION_____ ASSOCIATION NO._____

THIS FORM MUST BE RECEIVED, COMPLETE, AT THE STATE OFFICE BY THE DEADLINE DUE DATE OF NOVEMBER 1, 2023, OR POSTMARKED NOVEMBER 1, 2023
FORMS CAN BE SCANNED AND EMAILED TO: LocalReports@NJSFA.com

The undersigned certify they have received allowance for sessions attended and expenses incurred.

NAME - PRINT	LINE NO.#	SIGNATURE	CHECK NO.#	AMOUNT PAID

TOTAL DELEGATE $_____

The undersigned certify the above Delegates attended all sessions and incurred expenses for which payment is received.

APPROVED BY: DATE APPROVED:_____

PRESIDENT (SIGNATURE) SECRETARY (SIGNATURE) TREASURER (SIGNATURE)