COMMITTEE / ACTIVITY EXPENSE REPORT

Café Debit or Credit Card Purchase

R1 - 04/2024

Date _____

COMMITTEE NAME <u>CAFE</u>

Account Posting Code 6XX= 616 (XX= Committee Account Number)

Expense Description Attach receipts for each purchase. List each purchase on the attached form.	Tax- able? Y/N*	\$ Sales Tax Paid*	\$ Total Amount Paid	Accounting Code (6XXA)
Credit card purchases (see attached list)	Ν			6162
Debit Card Purchases (See attached list)				

* If an item is purchased for resale, or to be served at a ticketed event, it is **NOT** taxable. All taxes paid on these items must be recorded in the Sales Tax Credit below in order to be deducted from actual sales tax paid to Florida each month.

1	(These	Expenses w	ere include	əd in)
1	(the bu	dget for this	year Yes	No)

Sales	Tax	Credit	* \$		

Total Expense

Committee Treasurer

Committee Chairperson

\$_____

MAC Treasurer _____

Date _____

 Date funds were transferred from Master Account to Café Debit Card Account.

Use this form to report all credit or debit card purchases

CAFÉ DEBIT/CREDIT CARD PURCHASE SUMMARY

DATES INCLUDED ______ to _____

Check One: Debit Card □ Credit Card □

Receipt Number (See note)	Date	Purchaser Name	Items Purchased (Food, Beverages, Condiments, Non-consumables)	Tax Paid \$	Total Cost \$

NOTE:

Give each purchase receipt a number (ie, 1,2,3,4)

And attach the receipt to this form

Total Tax Paid	\$
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Total of all Debits \$_____

Submitted By:

Attach to Expense Report Form (Cafe Debit/Credit Card Purchase)