



**Knights of
Columbus®**
Florida
State Council



Knights of Columbus Florida State Council

Electronic Submission Process of Form 267DD



Knights of
Columbus®
Florida
State Council



- Requires you to install Acrobat Reader DC (FREE)
- Form 267DD is a pdf-fillable form
- Download the basic form from Supreme and store on your computer (suggest creating a folder)

https://www.kofc.org/en/forms/state/DD_Miles.pdf



Fill out the bottom part of the form with your information
Save this file as your template

				TOTALS	0.00	0.00	0.00	0.00	0.00

***Receipts are required for all items**

I hereby certify the foregoing to be a true and correct statement of expenses incurred by me.

Approved by _____
(State Deputy)

(Date)

Signature

John Doe

Name

4357 Main St

Street

Sunshine FL 33333

City State/Prov. Zip/Postal Code

9876543 99

Membership Number District Number



**Knights of
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Florida
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Sample of electronically signed expense form



Knights of Columbus
Expense Account of District Deputy or Conferring Officer



Date	Travel		Purpose/Council Number	Round Trip Mileage	Transportation at .30 per mile	*Room	*Meals	*Misc.	Total
	From	To							
1/4/2022	Sunshine, FL	Sundown, FL	Council 99999 Bus Mtg	48	14.40			2.10	16.50
1/6/2022	Sunshine, FL	Lakefront, FL	Council 88888 Bus Mtg	12	3.60				3.60
1/10/2022	Sunshine, FL	Dawn, FL	Council 77777 Bus Mtg	25	7.50				7.50
1/12/2022	Sunshine, FL		Council 55555 Bus Mtg	18	5.40				5.40
2/1/2022	Sunshine, FL	Sundown, FL	Council 99999 Bus Mtg	48	14.40			2.10	16.50
2/3/2022	Sunshine, FL	Lakefront, FL	Council 88888 Bus Mtg	12	3.60				3.60
2/9/2022	Sunshine, FL		Council 55555 Bus Mtg	18	5.40				5.40
2/14/2022	Sunshine, FL		Council 77777 Bus Mtg	25	7.50				7.50
3/1/2022	Sunshine, FL	Sundown, FL	Council 99999 Bus Mtg	48	14.40			2.10	16.50
3/3/2022	Sunshine, FL	Lakefront, FL	Council 88888 Bus Mtg	12	3.60				3.60
3/9/2022	Sunshine, FL		Council 55555 Bus Mtg	18	5.40				5.40
3/14/2022	Sunshine, FL		Council 77777 Bus Mtg	25	7.50				7.50



Knights of Columbus
Expense Account of District Deputy or Conferring Officer



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1/6/2022	Sunshine, FL	Lakefront, FL	Council 88888 Bus Mtg	12	3.60				3.60
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1/12/2022	Sunshine, FL		Council 55555 Bus Mtg	18	5.40				5.40
2/1/2022	Sunshine, FL	Sundown, FL	Council 99999 Bus Mtg	48	14.40			2.10	16.50
2/3/2022	Sunshine, FL	Lakefront, FL	Council 88888 Bus Mtg	12	3.60				3.60
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3/9/2022	Sunshine, FL		Council 55555 Bus Mtg	18	5.40				5.40
3/14/2022	Sunshine, FL		Council 77777 Bus Mtg	25	7.50				7.50
				TOTALS	92.70	0.00	0.00	6.30	99.00

*Receipts are required for all items

I hereby certify the foregoing to be a true and correct statement of expenses incurred by me.

John Doe
Signature

John Doe
Name

4357 Main St
Street

Sunshine FL 33333
City State/Prov. Zip/Postal Code

9876543 99
Membership Number District Number

Approved by _____
(State Deputy)

(Date)



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Submit this form for reimbursement from Supreme for:

Quarterly Mileage
Organizational Meeting
Mid-year Meeting

Supreme does not reimburse for the State Convention



Organizational and Mid-Year Meetings, DDs are authorized to expense the following:

- Round trip mileage and tolls
- One or two nights for hotel
 - Depending on authorization received by the State Deputy from Supreme
- Up to two meals per day
- Parking
 - If free parking at the hotel is not available
- One or two days of spouse per diem at \$35 per day



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DO's and Don'ts:

You can type a signature. This is the most common option

Receipts must be submitted as pdf files, not as image files

You cannot include your wife's meal expenses

Spouse per diem does not require receipts



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Submit expense report via email to:

Marc R. Andersen
Florida State Council Executive Administrator

ExecutiveAdministrator@floridakofc.org