



# SIMPLEX

FINANCIAL SOLUTIONS

## FIRE FIGHTERS

**GENERAL EXPENSES**

BEDDING \$.....  
 DRIVER LICENSE RENEWAL \$.....  
 LEGAL & ATTORNY FEES \$.....  
 SLEEPING AIDS \$.....  
 EQUIPMENT \$.....  
 BADGES, NAME TAGS & INSIGNIA \$.....  
 BINOCULARS \$.....  
 FLASHLIGHT \$.....  
 DUFFLE BAG \$.....  
 BULB & BATTERIES \$.....  
 ID CASE \$.....  
 NOTE BOOKS \$.....  
 OFFICE SUPPLIES \$.....  
 SMALL TOOLS \$.....  
 RECORDERS & TAPES \$.....  
 POLISHING SUPPLIES \$.....  
 SAFTEY GEAR \$.....  
 WATCH & REPAIRS \$.....  
 WHISTLES \$.....

**UNIFORMS**

BOOTS, SHOES & SOCKS \$.....  
 BELTS \$.....  
 GLOVES \$.....  
 HATS & HELMETS \$.....  
 JACKETS \$.....  
 PANTS \$.....  
 SHIRTS & UNDERSHIRTS \$.....  
 WORKOUT GEAR \$.....  
 ALTERATIONS \$.....  
 EMBLEMS \$.....  
 DRY CLEANING \$.....

**TELEPHONE**

CELL PHONE \$.....  
 CELL PHONE (MOTHLY) \$.....  
 CELL PHONE ACCESSORIES \$.....  
 LONG DISTANCE FEES \$.....  
 REPAIRS \$.....

**MEALS**

FIREHOUSE DUES \$.....  
 MEALS ON THE JOB \$.....

**DUES**

UNION DUES \$.....  
 PROFESSIONAL DUES \$.....  
 NFPA MEMBERSHIP \$.....  
 GYM MEMBERSHIP \$.....

# SIMPLEX

OTHER: \_\_\_\_\_

I (WE) CERTIFY THAT ALL EXPENSES CLAIMED ABOVE ARE TRUE AND ACCURATE:

|                 |                  |             |
|-----------------|------------------|-------------|
| TAXPAYER: _____ | SIGNATURE: _____ | DATE _____  |
| TAXPAYER: _____ | SIGNATURE: _____ | DATE: _____ |