State of New Jersey
Department of Military and Veterans Affairs
Phone: 609-530-7067
Fax: 609-530-7193
Web: www.state.nj.us/military/fiscal/accounting.html

Mail To:
NJ Dept. of Military & Veterans Affairs
Fiscal Division-A
P.O. Box 340
Trenton, NJ 08625-0340

TOLL REIMBURSEMENT - NATIONAL GUARD

Total Amount $0.00

FY	FUND	AGCY	ORGN	APU	ACTV	OBJT	TV Number
	100	067			PNGS	3010	

NAME AND ADDRESS OF NATIONAL GUARD PERSON	Social Security Number
Name/ Street/ City/ State/ Zip Code	

Do you have Direct Deposit with the State of NJ for Travel?
YES ☐ NO ☐

NAME AND ADDRESS OF UNIT OF ASSIGNMENT

This Toll Reimburesement is for active National Guard members while on any training or activation status. It covers all New Jersey toll roads only.

DATE	Desciption of Travel Point to Point (from xxx to xxx)	TOLLS via Cash	 via EZPASS	
				$0.00
				$0.00
				$0.00
				$0.00
				$0.00
				$0.00
				$0.00
				$0.00
				$0.00
				$0.00
				$0.00
				$0.00
				$0.00
		$ 0.00	$ 0.00	$0.00
			$	$0.00 -

NATIONAL GUARD PERSON CERTIFICATION

I CERTIFY that the above expenses are correct in all respects; that the tolls showed are true and that the amount as charged has been actually paid for by me for traveling expenses; that no part of the account has been paid by the State.
I have not or will not seek any federal reimbursement of tolls submitted to the State of NJ.
I also CERTIFY that on the date(s) when the above items of expense were incurred the vehicle I was using on National Guard business was covered by liability insurance as follows:

Insurance Co. _____
Coverage _____

Signature _____

Military Position

UNIT COMMANDER OR REPRESENTATIVE

SIGNATURE / DATE

APPROVED: **For Fiscal Division USE ONLY**

(AUTHORIZED SIGNATURE)

Approval Officer/ DATE

ATTACH ORIGINAL RECEIPTS or EZ PASS STATEMENT WITH HIGHLIGHTED CHARGES

AR 54-2A(10/2001)

RESET