## **EXPENSE VOUCHER**



Claimant name:	Local Uni		on number:	
Mailing address:				
REASON FOR EXPENSE Check one of the following: Executive Board Meeting Other, please specify:	Tri-Uni	on Meeting		
EXPENSE DETAILS  Date(s) of event:		City/Town	event held:	
Event name:	· ·		Place of event:	
TRAVEL				
Claimant travel from		to	Return trip	
Total number of kilometres travelled	:	Tot	al kms x \$0.45 rate = \$	
ACCOMMODATION				
Name of hotel:		Nu	mber of nights in hotel:	
Total accommodation expense (Rece	eipts attached): \$			
PER DIEM	_			
Travel day before meeting	(\$20) x	Number of days =	\$	
In town meeting	(\$25) x	Number of days =	\$	
Out of town meeting	(\$45) x	Number of days =	\$	
Misc. Expense(s):  List and explain with attached receipts.			Misc. Expense Subtotal \$ \$	
LOST WAGES AND BENEFITS				
Employer will forward invoice	e to CBO Steerin	g Committee.	TOTAL OF EXPENSE VOUCHER:	
Copy of invoice from Employer attached.			\$	
Local Union will forward was	ge verification.			
		Date:		
Signature of claiman				
► <b>Submit by mail:</b> Attn: CBO Work CUPE Saskatchewan, 3725 E Eastga REGINA SK S4Z 1A5	-		nit by email: CUPE Saskatchewan Office reavley.cupe@sasktel.net	
AUTHORIZED BY:	- OF	FICE USE ONLY -	CHEQUE NO	
			Payments or Invoices make out to: "CUPE CBO Workers of Saskatchewan"	