



CANADIAN UNION OF PUBLIC EMPLOYEES

LOCAL 1048
 #206-300 Brunswick St
 PRINCE GEORGE
 BC V2L 2B5

EXPENSE VOUCHER

NAME: _____

ADDRESS: _____

POSTAL CODE: _____

DATE SUBMITTED: _____
REASON FOR EXPENSE: _____

Date Expense Incurred	Full Details of Expense	Receipt "R" Attached	Total
		R	
		R	
		R	
		R	
		R	
		R	
		R	
	<i>Motion passed:</i>		
			\$

Please attach necessary receipts and mark "R" in appropriate column where a receipt applies.

CERTIFICATE

This is to certify that I incurred the amounts shown on this statement on behalf of CUPE and/or its CUPE Local 1048.

Employee signature: _____

Payment recommended by: _____

Approved by: _____

Paid by Cheque No: _____

Dated: _____

OFFICE USE ONLY DISTRIBUTION OF CHARGES	
Total	\$