

**INTERNATIONAL BROTHERHOOD
OF ELECTRICAL WORKERS**

**I.B.E.W.
Local Union #2067**

1234

Name: _____
Position: _____

Date: _____
Unit#: _____

Section 1

Personal Expenditures

	Sun	Mon	Tues	Wed	Thurs	Fri	Sat	
Date								Amount Claimed
Details of Union Business								
Meals								
Hotel								
L.O.A.								
Conv. Allowance								
Bus/Taxi								
Airfare								
Parking								

Section 1 Total:

Section 2

Telephone Service / Expenses for Month(s) of: _____								
Date:	Details of Other Expense: _____							

Section 2 Total:

Section 3

Vehicle Utilization Record

Date:	From:	To:	KM:	Rate:	

Enter Mileage Rate:

Section 3 Total:

Section 1, 2 & 3 TOTAL:

Less Advance:

Total Expenses:

Signature: _____
Address: _____

Approved: _____
Cheque #: _____