

EXPENSE SHEET

MICHIGAN POSTAL WORKERS UNION

Name _____ Assignment/Trip Dates _____

Purpose of Assignment/Trip: Code _____

Authorized by: _____

Description of Assignment/Trip Purpose: (Explain in Detail) _____

Others Present: _____

Pay Grade Level _____ Step _____

Lost Time (Explain)	DATE FROM	DATE TO	SUN. PREM.	NIGHT PREM.	TOTAL HOURS	RATE	GROSS	FICA	FED W/H	STATE	MED	TOTAL
Mileage: ODOMETER	BEGIN		END			TOTAL MILES						

	DATE FROM	DATE TO	ORGANIZ. AND GRIEV. TRIP	EXEC. BD. MEETINGS	DISTRICT MEETINGS	STATE CONVENTIONS	OTHERS (DESIGNATE)	TOTALS
HOTELS								
MEALS								
TELEPHONE								
GAS, OIL, PARKING & TOLLS								
POSTAGE								
OFFICE SUPPLIES								
PRINTING								
OTHERS (DESIGNATE)								
TOTALS								

SECRETARY-TREASURER O.K. NO. _____

ALL EXPENSES AND LOST TIME TO BE SUBMITTED MONTHLY.

COMPLETE FORM AND MAIL NO LATER THAN THE 25TH OF MONTH.

GARY VAN HOOGSTRATEN, President
P.O. Box 645 • Bay City, Michigan

DARREN JOYCE, Secretary-Treasurer
P.O. Box 1124 • Flint, Michigan