



CANADIAN UNION OF PUBLIC EMPLOYEES



Education Worker's Steering Committee

Personnal Expense Voucher

Name: _____

Date: _____

Address: _____

Reason for Expense: _____

Date of Expense	Full Details of Expense	Reciept "R" Attached	Sub - Total
	Per diem: \$35.00/day X days		
	Location:		
	Per diem: \$50.00/day X days		
	Location:		
	Per diem: \$75.00/day X days		
	Location:		
	Mileage(@.55/km) from: to:		
	Other:		
		Total	

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

This is to certify that I incurred the amounts shown on this statement on behalf of CUPE EWSC

Signature: _____

Payment approved by : _____

Payment approved by : _____

Paid by Cheque No.: _____

Date: _____