

**Expense Voucher Compte de dépenses**

Name Date Submitted

*Nom*…………………………………………………… *Date de présentation*……………………..

Address Reason for Expense

*Adresse*……………………………………………..… *Raison de dépenses*……………………….

|  |  |  |  |
| --- | --- | --- | --- |
| Date Expense  Incurred  *Dates des*  *Dépenses*  *encourues* | Full Details of Expense *Détails des dépenses* | *Receipt*  *“R”*  *Attached*  *Reçu “R” Inclus* | TOTAL |
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|  |  |  |  |

Please attach necessary receipts and mark “R” in appropriate column where receipt applies. *Veuillez joindre vos reçus et inscrire “R” dans la colonne réservée à cet effet.*

|  |  |  |
| --- | --- | --- |
| Distribution of Charges  *Répartition des Frais* |  |  |
| Account – Compte | $ | ¢ |
|  |  |  |
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|  |  |  |
| **TOTAL** |  |  |
|  |  |

CERTIFICATE – CERTIFICAT

This is to certify that the amounts shown on this statement were incurred by

Me on behalf of CUPE and/or its Local …………………………….............…

*Je certifie que les montants ci-dessus ont été dépensés par moi pour le compte du SCFP et/ou de la section locale…………………………………….…………….….*

Signature………………………………………….………………

Payment recommended by:

*Paiement recommandé par:…………………………………………………….…….*

Approved by:

*Approuvé par:……………………………………………………………………..……*

Paid by Cheque No.:

*Payé par chèque no……………………………………………………….…*

Datee…..*……………………………………………………………………...*

*:mb/opeiu-siepb 491 (November 2000)*