|  |  |
| --- | --- |
|  | NALC Branch 791 Snohomish  2812 Lombard Ave Suite 209  Everett WA 98201    ***EXPENSE REPORT*** |
|  |  |

Employee: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  ***If claiming no expense:* Initial \_\_\_\_\_\_\_\_\_\_**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Date  (mm/dd/yy) | Union Purpose | Driving  (to – from) | Miles | Other | Total |
|  |  |  |  |  |  |
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|  |  |  |  |  |  |
| **Check Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Amount: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Approved by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_** | | | | Subtotal |  |
| Less Cash Advanced |  |
| Total Owed to You |  |
| **Total Due** |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Date  (mm/dd/yy) | Union Purpose | LWOP Hours | Total | **Gross Income**  **Grade/Step**  **Day Off** |
|  |  |  |  |
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| **Check Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Amount: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Approved by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_** | | |  | **Total Due** |
| **Please attach Form 3971.** | |

***\*\*\*\*\*Please do not fill out shaded part\*\*\*\*\****