Durham Northumberland CUPE District Council
Local 9112

EXPENSE VOUCHER

Name _____ Date Submitted _____

Address _____ Reason for Expense _____

_____ _____

Date Expense Incurred	Full Details of Expense	Receipt "R" Attached	TOTAL

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

CERTIFICATE

This is to certify that the amounts shown on this statement were incurred by me on behalf of Durham Northumberland CUPE District Council.

Signature _____

Payment Recommended by: _____

Approved by: _____

Paid by Cheque No.: _____

Date _____

Distribution of Charges		
Account	$	
Total		