DATE SUBMITTED: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Personal Email Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

### Mileage Reimbursement Form

Name : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**\_\_\_\_\_\_\_\_\_\_\_\_\_** Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **UNIT# 1936:** \_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Postal Code \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Date mileage incurred | Location:From | **Location:****To**  | **Location:****To** | **Location:****To** | **Purpose** | **KM** | **.58** | **TOTAL** |
|  |  |  |  |  |  |  | .68 |  |
|  |  |  |  |  |  |  | .68 |  |
|  |  |  |  |  |  |  | .68 |  |
|  |  |  |  |  |  |  | .68 |  |
|  |  |  |  |  |  |  | .68 |  |
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|  |  |  |  |  |  |  | .68 |  |
|  |  |  |  |  |  |  | .68 |  |
|  |  |  |  |  | **TOTAL of this page** |  | .68 |  |

|  |
| --- |
| **Distribution of Charges (office use only)**  |
|  | **Purpose** | $ |
| 04 | Operating Expenses |  |
| 05 | Special Purchase |  |
| 06 | Executive Expenses |  |
| 07 | Bargaining Committee  |  |
| 08 | Grievances / Arbitration |  |
| 09 | Committee  |  |
| 10 | Convention / Conferences |  |
| 11 | Education |  |
| 12 | Donations / Gifts |  |
| 13 | Other |  |
| TOTAL |  |  |

#### CERTIFICATE: This is to certify that the amounts shown on this

#### statement was Incurred by me on behalf of CUPE Local 1936 #\_\_\_\_\_

Member Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Payment recommended by

Approved by:

Paid by Cheque No.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Total of Cheque : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_# of pages\_\_\_\_\_

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

**Scan to** **sec.trea1936@gmail.com** **/ 604 781-6864**

**or Mail to: CUPE 1936 208 – 800 McBride Blvd.,**

**New Westminster, BC. V3L 2B8**

**Fax 604 777-0297**