AFSCME LOCAL 3688 EXPENSE REPORT

Name:		,	44	Signature:			· •
Address:			_	Date:			·
City	State Zip						
Area Code	ode Telephone No.			Approvai:			i
Date	Place and Purpose	Mileage Miles	ge Cost	Per Diem	Lodging (Attach Receipt)	Other Explain & Attach Receipts	Amount
							į
TOTALS							
Explanation/Comments:	ents:	For Treas	For Treasurer's Use Only	ly		Total Expense:	
		Date Paid: Check Number:	, 			Less Advance: Less Amount Pd by Local:	
		Treasurer's Initials:	nitials:			Reimbursement:	

^{*} Reimburse at _____ cents per mile.