

EXPENSE VOUCHER



Unifor Local 594  
 200 Hodson Rd  
 REGINA, SK  
 306.721.4403

FOR OFFICE USE ONLY

CHEQUE #: \_\_\_\_\_

DATE ISSUED: \_\_\_\_\_

If possible, email form to [treasurer@unifor594.com](mailto:treasurer@unifor594.com) or return form to Kaleena Baulin in Lab

NAME		DEPARTMENT	
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UNION RELIEF	DATE	AMOUNT	REASON/PURPOSE
12 HR SHIFT		\$300	
10.40 HR SHIFT		\$275	
9.20 HR SHIFT		\$250	
8.20 HR SHIFT		\$225	
	SUBTOTAL:		

LOST WAGES				REASON/PURPOSE
DATE	HOURS	RATE/HR	TOTAL	
WAGES SUBTOTAL:				

PER DIEM				REASON/PURPOSE	
IN TOWN		OUT OF TOWN		MILAGE	
<b>\$20.00 x DAYS</b>	TOTAL	<b>\$90.00 x DAYS</b>	TOTAL	<b>\$0.48 X KM</b>	TOTAL
PER DIEM SUBTOTAL:					
<b>GRAND TOTAL:</b>					

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CHEQUE TOTAL:								
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TREASURER: \_\_\_\_\_