

EXPENSE VOUCHER									
		Unifor Local 594 200 Hodsdman Rd REGINA, SK 306.721.4403				FOR OFFICE USE ONLY			
						CHEQUE #: _____ DATE ISSUED: _____			
Email form to treasurer@unifor594.com or return form to Kaleena Baulin in Lab									
NAME					DEPARTMENT				
UNION RELIEF	DATE	AMOUNT		REASON/PURPOSE					
12 HR SHIFT		\$375							
10.40 HR SHIFT		\$335							
9.20 HR SHIFT		\$300							
8.20 HR SHIFT		\$260							
	SUBTOTAL:								
LOST WAGES				REASON/PURPOSE					
DATE	HOURS	RATE/HR	TOTAL						
WAGES SUBTOTAL:									
PER DIEM					REASON/PURPOSE				
IN TOWN		OUT OF TOWN			MILAGE				
\$20.00 x DAYS	TOTAL	\$90.00 x DAYS	TOTAL	\$0.72 x KM	TOTAL				
PER DIEM SUBTOTAL:									
GRAND TOTAL:									
FOR OFFICE USE ONLY									
CHEQUE TOTAL:									
TREASURER:									
March 2025									