

**AFGE LOCAL 1309**  
EXPENSE VOUCHER

**NAME:** \_\_\_\_\_

Voucher Period (Dates): \_\_\_\_\_

DATE	1. TRANS.	2. POST.	3. TRAINING	4. SUPPLIES	5. OTHER	ITEMIZE ALL EXPENSES IN COLUMNS 1,2,3,4 &5
<b>TOTALS</b>						

Please attach all receipts.

I certify this report to be a true and accurate report of my expenses on behalf of AFGE Local 1309.

SIGNATURE: \_\_\_\_\_ DATE \_\_\_\_\_

\_\_\_\_\_  
Voucher Paid by:                      Date:                      Check No. \_\_\_\_\_ or Cash \_\_\_\_\_