

## ACSUM/MEA/NEA Statement of Expenses

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

Mailing Address: \_\_\_\_\_

Please place a checkmark next to the appropriate activity as listed below:

410 - Office Maint. Expense	----	480 - Gift/Contributions	----
415 - Other	----	490 - Ad Hoc Committee	----
420 - Admin/Officer/Expense	----	500 - Chapter Dues	----
430 - Negotiations/Bargaining	----	510 - Executive Bd. Expense	----
435 - Grievance/Professional Responsibilities Expense	----	520 - ACSUM Delegate Assembly	----
440 - Ratification Expense	----	540 - Membership Recruitment	----
445 - Negotiations/Non Policy 1.3	----		----
450 - Communication Comm.	----	Other: (please explain if using 415)	----
460 - NEA Rep. Assembly	----	_____	
470 - Training Workshop	----	_____	

Place, description and date of ACSUM activity: \_\_\_\_\_

From (TOWN): \_\_\_\_\_ To (TOWN): \_\_\_\_\_

Mileage: \_\_\_\_\_ miles @ .40¢ per mile \$ \_\_\_\_\_

Meals: (Attach receipts) \$ \_\_\_\_\_

Room: (Attach receipts) \$ \_\_\_\_\_

Other: \_\_\_\_\_ \$ \_\_\_\_\_

Total Requested: \$ \_\_\_\_\_

Signature of member: \_\_\_\_\_ Campus: \_\_\_\_\_

Approved by: \_\_\_\_\_

Please return to Treasurer, Dina Goodwin-Short, 29 Blake Hill, Phillips, ME 04966

Check # \_\_\_\_\_ Date Paid: \_\_\_\_\_