

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 41 5)	----
460 - NEA Rep. Assembly	----	_____	
470 - Training Workshop	----		

Place, description and date of ACSUM activity: _____

From (TOWN): _____ To (TOWN): _____

Mileage: _____ miles @ .45¢ per mile (*individual*) \$ _____

Mileage: _____ miles @ .50¢ per mile (*carpooling*) \$ _____

Meals: (Attach receipts) \$ _____

Room: (Attach receipts) \$ _____

Other: \$ _____

Total Requested: \$ _____

Signature of member: _____ Campus: _____

Approved by: _____

Please return to Treasurer, Katherine Wing, 35 Getchell St, Brewer, ME 04412

Check # _____ Date Paid: _____