

# ACSUM/MEA/NEA Statement of Expenses

Name:

Date:

Mailing Address:

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

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

***For Treasurer Use Only:***

Approved by:

Check #:

Date paid:

Place, description and date of ACSUM activity:

From (Town):

Mileage: \_\_\_\_\_ miles @ \$0.45 per mile (individual)

Mileage: \_\_\_\_\_ miles @ \$0.50 per mile (carpool)

Meals (please attach receipts)

Room (please attach receipts)

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

To (Town):

\$ \_\_\_\_\_

\$ \_\_\_\_\_

\$ \_\_\_\_\_

\$ \_\_\_\_\_

\$ \_\_\_\_\_

TOTAL: \$ \_\_\_\_\_

Signature of member:

Campus: