

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

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

Position: \_\_\_\_\_

(Ensure all supporting documentation is attached.)

Date	Expense Details	Amount
<b>Total:</b>		<b>\$</b>

**CERTIFICATE**

This is to certify that the amounts shown on this statement were incurred by me on behalf of CUPE FVDC:

Signature:

\_\_\_\_\_

Payment Approved By (Bylaws, Constitution, Motion):

\_\_\_\_\_

Approved by President/General Vice Pres:

\_\_\_\_\_

Cheque #: \_\_\_\_\_ Date: \_\_\_\_\_

<b>For Office Use Only:</b>	
Acct (eg: conf., meals, telephone)	
	\$
	\$
	\$
	\$
	\$
	\$
	\$

