UNITED STAFF UNION
EXPENSE VOUCHER

Louise Uphoff, Treasurer
2475 Lalor Rd
Oregon WI 53575

PAY TO:

_____ Date_____
Name

_____
Street

_____ _____
City State Zip Function: Meeting/conference/training/etc.

Date of Expense	Itemized Statement (Attach hotel bills, receipts from airlines, etc.)	CHARGE TO Account Number	Amount
	2009 IRS MILEAGE RATE .55		

TOTAL_____

Approved by:
_____

For office use only:
CK #_____

DATE_____