

CUPE NS UPE EXPENSE VOUCHER

Name:		Date:				
Address:	Reason:					
Date Expense Incurred	Full Details of Expense		Receipt Attached "R"	Attached IOTAL		
Certificate This is to certify the above	· · · · · · · · · · · · · · · · · · ·					
This is to certify the above-noted expenses were incurred on behalf of CUPE.		Distrik For of	Distribution of Charges For office use only			
Signature:		Account		\$	¢	
Date:				 		
Payment Recommended by	y:					
Approved by:						
Paid by Cheque No.:				 	 	
COPE 491		ТС	OTAL	+		