

TRUSTEE EXPENSE VOUCHER

NAME: _____

REASON FOR VOUCHER:

EXPENSES IN CONNECTION WITH ATTENDANCE AT TRUST MEETING AT _____ (Location)
HELD ON _____ (Date(s) of Meeting)

EXPENSES IN CONNECTION WITH ATTENDANCE AT EDUCATIONAL MEETING AT _____ (Location)
HELD ON _____ (Session Date(s))
SPONSORED BY _____ (Meeting Sponsor)

OTHER: (Describe Reason for Incurring Expenses) _____

MY DATE OF DEPARTURE _____ MY DATE OF RETURN _____

EXPENSES

TRANSPORTATION EXPENSES:

Airfare, Train, Bus _____ \$ _____
 Rental Car Expense _____ \$ _____
 Hotel _____ \$ _____

DAILY EXPENSES:

DAILY EXPENSES (FROM REVERSE SIDE OF VOUCHER) _____ \$ _____

MEETING REGISTRATION FEE:

MEETING REGISTRATION FEE EXPENSE (ATTACH RECEIPT) _____ \$ _____

SETTLEMENT

TOTAL EXPENSES WHICH I INCURRED \$ _____

LESS THE AMOUNT I RECEIVED AS AN ADVANCE (IF ANY) \$ _____

EQUALS \$ _____

REFUND WHICH I OWE TO TRUST FUND. MY CHECK IS ATTACHED. \$ _____

OR

AMOUNT OWING ME BY TRUST FUND. I REQUEST REIMBURSEMENT. \$ _____

I HEREBY CERTIFY THAT THE EXPENSES DETAILED ON THIS VOUCHER ARE THE PROPER AND ACTUAL EXPENSES WHICH I INCURRED IN CONNECTION WITH THE TRUST FUND ACTIVITY NOTED ABOVE.

DATED THIS _____ DAY OF _____, 20 ____.

(Signature of Trustee)

(Full Address)

NOTE TO TRUSTEE: This voucher is for expenses personally incurred by you as a Trustee. If transportation charges, hotel deposits, registration fees or any other item has been paid directly by the Trust Fund, do not list on this voucher. If you travel with a family member or other person not connected with the Trust Fund, the expenses of such person are not reimbursable. If such expenses are included on any of the attached bills or receipts, you should note the necessary adjustments on the bill or receipt. (For example: If a restaurant bill contains a charge for a meal for one or more family members, subtract that amount and indicate on the bill that only the balance is being charged to the trust fund.) If any expense item requires an explanation, mark the item with an asterisk and write the explanation on the reverse side of this voucher. Reimbursement of expenses claimed on this voucher is subject to any expense policy or limitation which may have been adopted by the Board of Trustees.

DAILY EXPENSES (ATTACH RECEIPTS FOR ALL MEAL EXPENSES AND ANY SINGLE ITEM OF \$25 OR MORE):

| | | |
|---|---|---|
| DATE: _____ | DATE: _____ | DATE: _____ |
| HOTEL ROOM PLUS TAX \$ _____ | HOTEL ROOM PLUS TAX \$ _____ | HOTEL ROOM PLUS TAX \$ _____ |
| BREAKFAST & TIP \$ _____ | BREAKFAST & TIP \$ _____ | BREAKFAST & TIP \$ _____ |
| LUNCH & TIP \$ _____ | LUNCH & TIP \$ _____ | LUNCH & TIP \$ _____ |
| DINNER & TIP \$ _____ | DINNER & TIP \$ _____ | DINNER & TIP \$ _____ |
| BEVERAGES & TIP \$ _____ | BEVERAGES & TIP \$ _____ | BEVERAGES & TIP \$ _____ |
| PORTERS—BELLMEN \$ _____ | PORTERS—BELLMEN \$ _____ | PORTERS—BELLMEN \$ _____ |
| LIMOS-TAXIS-BUSES \$ _____ | LIMOS-TAXIS-BUSES \$ _____ | LIMOS-TAXIS-BUSES \$ _____ |
| _____ \$ _____ | _____ \$ _____ | _____ \$ _____ |
| (Other) | (Other) | (Other) |
| TOTAL THIS DATE \$ _____ | TOTAL THIS DATE \$ _____ | TOTAL THIS DATE \$ _____ |

| | | |
|---|---|---|
| DATE: _____ | DATE: _____ | DATE: _____ |
| HOTEL ROOM PLUS TAX \$ _____ | HOTEL ROOM PLUS TAX \$ _____ | HOTEL ROOM PLUS TAX \$ _____ |
| BREAKFAST & TIP \$ _____ | BREAKFAST & TIP \$ _____ | BREAKFAST & TIP \$ _____ |
| LUNCH & TIP \$ _____ | LUNCH & TIP \$ _____ | LUNCH & TIP \$ _____ |
| DINNER & TIP \$ _____ | DINNER & TIP \$ _____ | DINNER & TIP \$ _____ |
| BEVERAGES & TIP \$ _____ | BEVERAGES & TIP \$ _____ | BEVERAGES & TIP \$ _____ |
| PORTERS—BELLMEN \$ _____ | PORTERS—BELLMEN \$ _____ | PORTERS—BELLMEN \$ _____ |
| LIMOS-TAXIS-BUSES \$ _____ | LIMOS-TAXIS-BUSES \$ _____ | LIMOS-TAXIS-BUSES \$ _____ |
| _____ \$ _____ | _____ \$ _____ | _____ \$ _____ |
| (Other) | (Other) | (Other) |
| TOTAL THIS DATE \$ _____ | TOTAL THIS DATE \$ _____ | TOTAL THIS DATE \$ _____ |

TOTAL OF ALL DAILY EXPENSES \$ _____ (Amount transfered to front side of voucher)

EXPLANATIONS (IF NEEDED):

“Reimbursable expenses” shall not include expenses of a personal nature or those expenses which are not related to fund business. For example, personal recreational expenses such as golf, tennis, rental of fishing boat and in-room movies are not reimbursable expenses.

SPACE FOR USE OFFUND OFFICE FOR APPROVAL OF TRUST OFFICERS (IF REQUIRED).

PLEASE Submit ALL Receipts to Fund Office - Attn: Diana Sabal (dianas@ibew701fbo.com) with Expense Form