

LOCAL 2829 EXPENSE FORM

REASON FOR EXPENSE _____

EXPENSES

Date				
Park				
Lodging*				
Breakfast*				
Lunch*				
Dinner*				
Other*				
Daily Totals				
Total Expenses				

(Meals follow current GSA M&IE. www.gsa.gov/mie)

NAME/ADDRESS

(Please Print)

Name _____

Address _____

City/State/Zip _____

Signature _____

Date _____ Work Phone (____) _____

MILEAGE

_____ miles at 65.5¢ miles = \$ _____

IRS Rate @ 65.5¢ eff. 1/1/23

plus

TOTAL EXPENSES \$ _____

equals

GRAND TOTAL \$ _____

(expenses plus mileage)

LOST WAGES

_____ hours at \$ _____ per hour

Return To:

Eric Mattson
3301 45th Avenue South
Minneapolis, MN 55406

LOCAL TREASURER USE ONLY:

Date Expenses Paid _____

Local Check # _____

Date Wages Forwarded _____

To Council 5 _____

Approved By _____