



IATSE Local 798
 70 West 36th Street, Suite 4A
 New York, NY 10018
 Fax 212-627-0664

Secretarytreasurer@local798.net

Local Expense Voucher

Receipts **must** be attached for all items listed

Name	
Address	
City, ST & Zip	
Company	
Title	

Paid with local Credit Card	
Paid By Me Personally (To be Reimbursed)	
Not Paid Yet (Request a check to be written)	

Please Check One

Date	Amount	Items and Reason for Purchase or Charge Do NOT Use This Voucher For UAN	Which Budget	Mileage
Sub Total			Total Miles	
			Mileage Rate	\$0.725
			Mileage Sub Total	

Date:

Signature: This is to certify that the amounts shown on this statement were incurred by me on behalf of IATSE Local 798.

Total

Approved By: _____