

Communications Workers of America Local 2201
5809 Lakeside Avenue
Richmond, VA 23228

Name: _____ Date: _____

Address: _____

City: _____ State: _____ Zip: _____

Complete this section for Expenses, (Receipts required)

Date	Reason	Amount
Total		

Complete this section for Mileage, (Use attachments as needed)

Date	Reason	Miles Traveled
(_____ miles x .55 per mile = \$ _____) <i>effective January 1, 2009</i>		

Signature: _____ Date: _____

Amount of Check: _____ Check Number: _____

 President/EVP

 Secretary Treasurer