

Name:					Unit:		
Address:					Expense Dates:		
Phone #:							
SSN/EIN:							

### Expense Form

Date	Purpose (see below)	Airfare	Car Rental / Miles Driven	Parking / Tolls / Bart	Lodging	Meals	Lost Wages	Miscellaneous	Total
								Total:	

Purposes: Mobilizing, Bargaining, Office Supplies, EC/RA Meetings

This certifies that the amounts shown on this Expense Form were incurred by me on behalf of PMWG.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Office use only:

ALL expenses must be documented by a receipt or will not be paid. Lost receipts under \$20 dollars may be handwritten with explanations.