



National Association of Letter Carriers Branch 725

617 W. MacDade Blvd. Milmont Park, PA 19033-3204 Phone 610-461-8333 Fax 610-461-1283

Statement of Expenses

PLEASE ATTACH ALL RECEIPTS FOR PAYMENT

Assigned to Attend: _____

Date(s): _____ thru _____ **Totals**

Lodging: _____ Day(s) @ _____ Per Day- - - - - _____

Per Diem: _____ Day(s) @ _____ Per Day- - - - - _____

Paid Union Time: _____ Day(s) @ _____ Per Day- - - - - _____

Mileage: _____ Miles @ _____ Per Mile- - - - - _____

Airfare/Train: - - - - - _____

Tolls/Parking: - - - - - _____

Total Reimbursement Due: - - - - - (_____)

Submitted By: _____

Signature: _____

Cell/Phone #: _____

Roommate: _____

Approved By: _____

(TREASURER)

(RECORDING SECRETARY)

DATE PAID _____ CHECK # _____ AMOUNT PAID _____

Representing 31 Locations

Ardmore, Bala Cynwyd, Broomall, Bryn Mawr, Chester, Clifton Heights, Coatesville, Darby, Folcroft, Folsom, Gladwyne, Glenolden, Havertown, Kennett Square, Marcus Hook, Media, Morton, Narberth, Newtown Square, Norwood, Oxford, Prospect Park, Ridley Park, Sharon Hill, Springfield, Swarthmore, Upper Darby, Villanova, Wayne, West Chester, Wynnewood.