

NUFA

Nipissing University Faculty Association STATEMENT OF EXPENSES

CHEQUE PAYABLE TO: _____

ADDRESS: **Cheques will be put in your NU mailbox (if you have one) unless an address is provided in the space below.**

PURPOSE: _____

| Date | Description | Auto KM | Travel | Meals | Accom. | Other | Total |
|------|-------------|---------|--------|-------|--------|-------|-------|
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I hereby certify that this claim is correct and that the expenditures were necessarily incurred.

DATE _____ SIGNATURE _____

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| TOTAL EXPENSES | | |
| LESS ADVANCE | | |
| BALANCE DUE | | |
| BALANCE RETURNED | | |

President or Vice President
Of NUFA

Treasurer