LOCAL________________

EXPENSE CLAIM SUMMARY

Payee: ___________________  Date: ___________________
Title: ____________________

Amount in currency:

Committee Day: $ __________
Lost Wages: $ __________
Office Supplies: $ __________
Phone: $ __________
Postage: $ __________
Copies: $ __________
Other: $ __________

Per Diem
___ Day(s) x _________ Rate
Per Diem Total: $ __________

ODO BEGIN ________________
ODO END ________________

Must attach Dates and Purpose when claiming mileage.

Mileage Rate: __________
Mileage Total: $ __________

NET TOTAL: $ __________

Salary, Lost Wages, and committee days are subject to income tax withholding.
Current SMART TD committee day is $297.78. Locals may establish their own committee day rate in accordance to SMART Constitution

Current Per Diem rate set by the SMART TD for meals and lodging is $191.00

Current Per Diem rate set by the SMART TD for meals only is $57

The maximum auto mileage rate is $0.545 per mile.

Original receipts must be submitted with expense summary for payment.

All expenses/lost time/salary MUST have proper approval prior to payment.

*If you need more room to write, add additional pages.

If a quorum of LCA members is not present at regular monthly meeting, expenses/lost time may be paid by obtaining five signatures of members in good standing that have jurisdiction over the fund to be used for payment. This only applies to the LCA.

Print Names
1. __________________________  1. __________________________
2. __________________________  2. __________________________
3. __________________________  3. __________________________
4. __________________________  4. __________________________
5. __________________________  5. __________________________

Signatures
1. __________________________  1. __________________________
2. __________________________  2. __________________________
3. __________________________  3. __________________________
4. __________________________  4. __________________________
5. __________________________  5. __________________________

Treasurer Use Only:
Check Number:  Check Amount:  Meeting Date:

Last Updated: 1/24/2018
Wage and Reimbursed Expense
(Required documentation)

Committee Day/Lost time:
- Request for payment (Letter, Form, LG3, etc.)
- For lost time, itemize dates claimed with Train or Job ID missed
- Purpose of lost time “Represent member Noyes at investigation”
- “Union business” or “Miscellaneous” are not acceptable descriptions

Lodging, airfare, other travel and expenses:
- Always the original receipt must be submitted
- Boarding passes for air travel
- Original receipt for lodging
- Itemized, dated register receipt for supplies or postage
- Description of the purpose or reason for travel or expense must be documented

Meal Expense:
- Original charge receipt/ and the itemized receipt from the restaurant
- Names of individuals present
- Names/ addresses of restaurant if not on the receipt
- Nature of the union business
- Missing information should be written on the back of the receipt at the time of the expense

Auto miles:
- Date of travel
- Names and locations traveled to and from (each leg of trip)
- Number of miles driven
- Union business or purpose of each use
- Odometer reading (beginning and ending for each leg)

Cell phone, home phone:
- The original copy of the complete phone bill must be submitted to the S&T for local records’

“Union business” or “Miscellaneous” are never acceptable descriptions

The approval for these salaries/reimbursements must be noted in the Local bylaws/LCA procedures, Local meeting minutes (in the absence of a meeting quorum a petition can be used). They should clearly spell out the circumstances and limits under which lost time and or expenses will be paid.

Anyone submitting a bill to the S&T should always keep a copy for their personal records