



**INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS  
LOCAL UNION 953  
WAGE & EXPENSE STATEMENT  
PRESENTED FOR APPROVAL & PAYMENT**

JANUARY 2018

NAME \_\_\_\_\_ DATE \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_ EMPLOYER \_\_\_\_\_

CITY STATE \_\_\_\_\_  
ZIP CODE \_\_\_\_\_

GIVE A **DETAILED** EXPLANATION OF THE PURPOSE AND PLACE FOR THE WAGES LOST AND/OR THE EXPENSES YOU INCURRED WHILE ON UNION BUSINESS: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ITEMIZE YOUR STRAIGHT-TIME WAGES LOST AND/OR YOUR EXPENSES INCURRED:**

HOURLY WAGE RATE \$ \_\_\_\_\_ TIMES \_\_\_\_\_ HOURS OF WORK MISSED..... \$ \_\_\_\_\_

MEAL EXPENSES: (You **MUST** have receipts)..... \$ \_\_\_\_\_

**YOUR TRIP MILEAGE:** \_\_\_\_\_ @ 54.5 CENTS PER MILE YOU TRAVELED:  
**FROM** \_\_\_\_\_ **TO** \_\_\_\_\_ **BACK TO** \_\_\_\_\_ ..... \$ \_\_\_\_\_

LIST ALL OTHER RELATED EXPENSES: \_\_\_\_\_ \$ \_\_\_\_\_

**OFFICE USE ONLY**

IBEW 953 – MAY 26, 1919

\_\_\_\_\_ \$ \_\_\_\_\_  
\_\_\_\_\_ \$ \_\_\_\_\_  
MOTEL: Attach Receipts ..... \$ \_\_\_\_\_

**SUBTOTAL**..... \$ \_\_\_\_\_

DEDUCT ANY ADVANCE MONEY RECEIVED..... \$ ( \_\_\_\_\_ )

IBEW 953 COPE CONTRIBUTION..... \$ ( \_\_\_\_\_ )

IBEW 953 EXECUTIVE BOARD  
**APPROVAL**

**TOTAL WAGES & EXPENSES**--- [ ]

I ATTEST TO THE ACCURACY OF THIS EXPENSE STATEMENT.  
PLEASE SIGN BELOW:  
  
**X** \_\_\_\_\_