



SEIU Local 1000  
 Accounting Department  
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# MEMBER EXPENSE CLAIM



## Accounting Use Only

Name (print)	Phone Number	Date
Mailing Address	City	Zip Code
Personal E-Mail Address		

Date					
Location					
Time Depart					
Time Return					
Description					
	LODGING	LODGING	LODGING	LODGING	LODGING
1. Preapproved Hotel	\$	\$	\$	\$	\$
2. Incidentals	\$	\$	\$	\$	\$
	MEALS	MEALS	MEALS	MEALS	MEALS
3. Breakfast	\$	\$	\$	\$	\$
4. Lunch	\$	\$	\$	\$	\$
5. Dinner	\$	\$	\$	\$	\$
	TRAVEL	TRAVEL	TRAVEL	TRAVEL	TRAVEL
6. Preapproved Airfare	\$	\$	\$	\$	\$
7. Airporter / Shuttle	\$	\$	\$	\$	\$
8. Personal Car (enter addresses below)	miles	miles	miles	miles	miles
10. Parking	\$	\$	\$	\$	\$
	MISCELLANEOUS	MISCELLANEOUS	MISCELLANEOUS	MISCELLANEOUS	MISCELLANEOUS
11. Taxi	\$	\$	\$	\$	\$
12. Telephone	\$	\$	\$	\$	\$
13. Other (explain)	\$	\$	\$	\$	\$
<b>TOTAL</b>					

I hereby certify that this is a true statement of travel expenses incurred by me in accordance with the current travel expense policy of Local 1000 during the period of this claim, that all items shown were for official business of Local 1000, and that no expenses herein were received from or paid by any other source.

Signature of Member

Title

Total expense this page

Total attached pages

Grand total expenses

Less - Travel advances

Balance due to Member

Balance due to SEIU

SIGNATURE OF APPROVER

Date	Item #	Comment