

Iowa Postal Workers Union AMERICAN POSTAL WORKERS UNION, AFL-CIO

PO Box 539
Des Moines, IA 50302

EXPENSE VOUCHER For Designated Representatives

******* ATTACH ALL RECEIPTS *******

Name: _____ Social Security Number: _____
Address: _____

Assignment Dates: _____ Authorized By: _____
Trip Purpose: _____

Authorizing Signature/Date _____

Date Check was Issued/Check Number _____