

Torrington Education Association

DATE _____

ISSUE CHECK TO: NAME _____
 ADDRESS _____

Itemized list of actual expenditures (ATTACH PAID RECEIPTS):

MILES TRAVELED _____ @ \$. _____ per mile \$ _____
 (Authorized travel only)

LODGING (ATTACH RECEIPTS) _____ \$ _____

FOOD (LIST MEALS AND COST) _____ \$ _____

OTHER _____ \$ _____

TOTAL EXPENDITURES \$ _____

PURPOSE OF EXPENSE _____

REQUESTED BY _____

TITLE _____

APPROVED BY _____
 (Name and Title)

DATE _____ CHECK NO. _____ ACCT NO. _____

IRS mileage reimbursement rate for calendar year 2010 is 50 cents per mile.

0100	GOVERNANCE	0300	MEMBERSHIP	0600	OTHER COMMITTEES
0110	Meetings	0310	Secretary	0610	Constitution
0120	Presidential	0320	Committee	0620	Negotiations
0130	County Councils			0630	P R R & E
0140	NEA & CEA RA's	0400	FINANCE	0640	Scholarship
		0410	Audit & Bonding	0650	Specials
0200	PUBLIC RELATIONS	0420	Treasurer	0700	OPERATIONS
0210	Publicity	0430	Committee	0710	Salaries & FICA
0220	Retired/Holiday	0440	CEA/NEA Dues	0720	Legal Fund
0230	Retirees/Spring	0500	I P D	0730	Contingency
0240	Committee	0510	Conferences	0740	Stationery
		0520	Committee		