UFEA IEA | NEA
UNIT FIVE EDUCATION ASSOCIATION

CHECK NO:

EXPENSE VOUCHER

DATE:_____ **BUDGET LINE/CATEGORY (choices below):** _____

Expense Description	*Expense Amount*
	$
	$
	$
	$
TOTAL AMOUNT	$

NAME TO GO ON CHECK: _____ **HOMEBASE:** _____ **DATE:** _____

If the check is to be mailed directly to the creditor, provide the information below:

NAME
ADDRESS
CITY **STATE** **ZIP**

OR

If the check is to be returned to you, please indicate your school OR home address:

SCHOOL NAME
ADDRESS
CITY **STATE** **ZIP**

Please send your voucher to the UFEA President for approval. The voucher will then be routed to the UFEA Treasurer. Checks are written on the first and fifteenth of each month.

PRESIDENT'S SIGNATURE: _____ **DATE:** _____

BUDGET CATEGORIES

1 Governance & Operation
- 1.1 Executive Committee
- 1.2 Supplies & Postage
- 1.3 Office Expenses (Pres. Phone)
- 1.4 Officer Stipends
- 1.4.1 President
- 1.4.2 Vice President
- 1.4.3 Secretary
- 1.4.4 Treasurer
- 1.4.5 Committee Chairs
- 1.5 Full-time Release
- 1.6 CEC
- 1.7 Audit
- 1.8 Association Days
- 1.9 Representative Council

2 Conventions& Prof. Dev.
- 2.1 SLA
- 2.2 WAC
- 2.3 IEA Rep Assembly
- 2.4 NEA Rep Assembly

3 Membership
- 3.1 Fall Membership Mtg.
- 3.2 Spring Membership Mtg.

4 Council & Committees
- 4.1 Grievance / Arbitration
- 4.2 Collective Bargaining
- 4.3 Hospitality / Social
- 4.4 New Teachers

4 Council & Committees, cont.
- 4.5 Website
- 4.6 History
- 4.7 Scholarship
- 4.7.1 NCHS
- 4.7.2 NCWHS
- 4.7.3 UFEA Member's Child
- 4.7.4 IEA-NEA Sch. Fund
- 4.8 Public Relations
- 4.8.1 Beyond the Books
- 4.8.2 Diversity Project

5 Memorials
- 5.1 Pat Kaczynski Memorial Fund

** All IPACE funds and related documents are maintained separately.*