Voucher #:

(optional)

Ontario Secondary School Teachers' Federation District 7, Bluewater 104 1st Avenue South, Chesley, ON N0G 1L0

Date:	1		1	
_	dd	mm	уууу	

GROUP MILEAGE VOUCHER

Event or Committee Meeting: _____

Location: _____

Note: Mileage is paid from worksite, to event or committee meeting site, and then to home.

	ants (please print). If carpooling, please indicate with whom under claimant.			FOR OFFICE USE ONLY	
<u>CLAIMANT</u>	HOME MAILING ADDRESS	KILOMETRES	<u>AMOUNT</u>	<u>CHEQUE</u>	

Signing Authority's Signature: ____

All payments to members require the signed authorization of the District or Bargaining Unit President, as applicable. Payments to Presidents require the signed authorization of another duly-elected member of their related Executive/Council.