

MINNESOTA STATE ASSOCIATION OF LETTER CARRIERS

PAYROLL and EXPENSE REPORT

Period Ending _____

EXPENSES

mo/dd/yr DATE	EXPLANATION / DESCRIPTION	Miles or Quantity	COST	TOTAL
TOTAL EXPENSES				

PAYROLL

DATE	EXPLANATION / DESCRIPTION	HOURS	RATE	GROSS PAY
TOTAL GROSS PAY				

ATTACH ADDITIONAL EXPLANATION SHEET, if needed

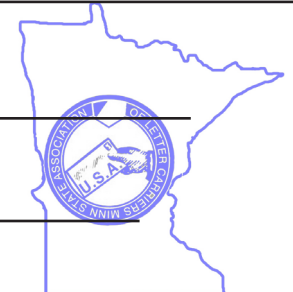
Add'l Explanation of EXPENSES

MAIL MY CHECK TO:

Signature of **CLAIMANT** _____

Presidential Approval _____

E-Board Chair Approval _____



Note: Use One Form for Expenses and an additional Form for Payroll
Form: MSALC Payroll and expense.pdf **revised May,2018**

Draft _____

Warrant _____