

MEA-Retired Expense Voucher

Name \_\_\_\_\_ City or Town \_\_\_\_\_

Mailing Address \_\_\_\_\_ ZIP \_\_\_\_\_

Date	Description of Expense	Amount
_____	_____ Round Trip Miles @ .56	\$ _____
	<b>NON-Mileage Expenses</b>	
_____	_____	\$ _____
_____	_____	\$ _____
	<b>Subtotal</b>	\$ _____

Voluntary Contributions: FC&PE \_\_\_\_\_ Ritter \_\_\_\_\_ Sheehan \_\_\_\_\_ Minus \$ \_\_\_\_\_

Robert Souther, MEA-R Treasurer  
 4 Applewood Lane  
 Camden, ME 04736

I certify that the above amount is due me for expenses incurred in carrying out duties for the MEA-Retired.

Signature \_\_\_\_\_

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