

DISBURSEMENT VOUCHER

PAYROLL PERIOD ENDING _____ 20 _____

Form A-136 — Rev. 9/04 

Fill out the 8 circled areas
LOCAL UNION 602 JAW

NAME _____
STREET _____
CITY _____ **STATE** _____ **ZIP** _____

Phone Number: _____
SOCIAL SECURITY NO. _____
 CANADA - SOCIAL INS. NO. _____

	DATE	TIME		NO. OF HOURS		REASONS FOR CLAIM - GIVE FULL DETAILS FOR "UNION BUSINESS," AS TO PEOPLE, PURPOSE AND PLACE.
		FROM	TO	STRAIGHT	OVERTIME	
SUNDAY						Refund of initiation fee (\$20.00) - transfer card received Return voucher and appropriate check stub to: Connie Swander, Local 602, 2510 W Michigan, Lansing MI 48917 or fax to: (517) 372-6909
MONDAY						
TUESDAY						
WEDNESDAY						
THURSDAY						
FRIDAY						
SATURDAY						
HOURLY RATE \$		TOTAL				CODE L AMOUNT

(INCLUDE COLA IF ANY)

GROSS LOST TIME OR WAGES	\$
TAXABLE EXPENSE ALLOWANCES AND PER DIEM	\$
TOTAL	\$
DEDUCTIONS:	
Fed. Income Taxes	\$
Soc. Sec. Taxes:	
- OASDI	
- HI	
State/Provincial Taxes	
Local Taxes	
TOTAL DEDUCTIONS	\$
NET INCOME	\$
NON-TAXABLE PER DIEM	\$
OTHER REIMBURSEMENTS	\$
ACCOUNTS PAYABLE	\$
AMOUNT OF CHECK	\$

I hereby certify that lost time hours claimed are in reimbursement for ACTUAL TIME LOST FROM WORK.
 By definition, lost time is a reimbursement to a member - on a no-loss, no-gain basis - of earnings actually lost because of doing authorized work for the union.

Signature _____
 MUST BE SIGNED BY CLAIMANT
 *Authorized By _____ Date _____
 Approved By _____ Date _____
 PRESIDENT
 Approved By _____ Date _____
 RECORDING SECRETARY

* Payment must not be made on voucher unless PRVIOUSLY AUTHORIZED.

Paid by Check No. _____ Date _____

NOTE
 File vouchers in check number order. Attach all invoices and receipts.

LM-2 FILERS ONLY

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PAYROLL DISBURSEMENTS BY HOURS

Hours are the actual hours worked performing a service to the Local Union in your official capacity whether compensated or not.
 For LM-2 purposes, the following classifications are considered payroll items:
 Wages, Lost Time, Expense Allowances, Per Diem or Reimbursements of Travel, Supplies, Refreshments, etc.

REPRESENTATIONAL OR ORGANIZING ACTIVITIES	POLITICAL ACTIVITIES AND LOBBYING	CONTRIBUTIONS, GIFTS, AND GRANTS	GENERAL OVERHEAD	UNION ADMINISTRATION
HOURS	HOURS	HOURS	HOURS	HOURS

If the accounts payable amount cannot be applied to any of the classifications listed below, it is a functional expense and must be recorded on Form WS-3 (Functional Disbursement Itemization Worksheet) or WS-4 (Functional Disbursements Under \$5000 Worksheet).

BENEFITS	PER CAPITA TAX	STRIKE BENEFITS	FEES, FINES, ASSESSMENTS, ETC.	SUPPLIES FOR RESALE	PURCHASE OF INVESTMENTS AND FIXED ASSETS
\$	\$	\$	\$	\$	\$
LOANS MADE	REPAYMENT OF LOAN PRINCIPAL (NOT MORTGAGES)	TO AFFILIATES OF FUNDS COLLECTED ON THEIR BEHALF	ON BEHALF OF INDIVIDUAL MEMBERS	ALL DIRECT TAXES	ALL WITHHOLDING TAXES & PAYROLL DEDUCTIONS DISBURSED
\$	\$	\$ NOT USED	\$	\$	\$