Coachella Valley Teachers Association (CTA/NEA)



Request for Reimbursement

→ Requested b	y:		T .	
→Email:		Date of	Date of reimbursement:	
→Phone #:		Authorized by: Check number:		
		Checky		
1.				
Always attac	ch receipts!			3
Mileage Calculati		reled miles	В	alance Due:
<u>VIIIeage Calculau</u> Please explain destii	on: Distance trav nation & purpose above.)	@ \$per mile		
•		otal: \$.e.	5
	×	Budget Codes		
	2-200 General Leadership 2-205 Rep Council Meals 2-210 Executive Board Meals 2-215 Stakeholder Meals 2-220 Mileage 2-240 Rep Incentive 2-250 Miscellaneous 2-300 Officers 2-330 Telephone 2-340 Sub/Release Time 2-360 Miscellaneous 2-400 Leadership 2-410 Presidents' Conference 2-420 National 2-430 Regional	2-440 Local 2-450 Summer Institute 2-460 Good Teaching Conference 2-470 Miscellaneous 2-500 Activities & Programs 2-510 Membership 2-520 IPD 2-525 PAC 2-530 Bargaining 2-540 Communications 2-550 Elections 2-560 Organizing 2-570 Arbitrations 2-580 Social	2-585 Public Relations 2-590 Miscellaneous 2-600 Operations 2-610 Rent/Office 2-620 Rent/Purchase Eq 2-630 Paper/Supplies 2-650 Postage 2-660 Utilities 2-665 Cleaning Services 2-670 Audit 2-680 Insurance 2-690 Miscellaneous	uipment