Specimen IV (a)

 Cash Receipt Journal

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 |
|  |  |  | 300 | 310 | 320 | 330 | 340 | 350 | 360 | 370 |
| Date | Account #/Description. | Total | Local Dues | AgencyFee | Interest-SavingsAcct. | Assess-ments | Donations | Income from Dinners | Strength Locals | Misc. |
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 Specimen IV (b)

Cash Disbursement Journal

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Date | Check # | Payee | Office Maint. | Admin.Salaries | Negotia-tions | ContractEnforce. | Legislative | PR &Membership | I.P.D. | ConventionWorkshop | Social Activities | Gifts | Misc. |
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 Specimen IV (c)

# Expense Voucher

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Association Voucher No**. 1**

 **2** \_ **3** \_

 Date Check No. Amount

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Explanation

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **5**

Approved for Payment Received by (Payee)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 President Signature

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Treasurer

**(Attach to Receipt/Invoice)**

## Expense Distribution

|  |  |  |
| --- | --- | --- |
| **Acct. No.** | **Expense Classification** | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 410 | Office Maintenance | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 420 | Administration Salaries, Expenses & Taxes | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 430 | Negotiations | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 440 | Professional Rights & Responsibilities | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 450 | Legislative | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 460 | Public Relations – Membership | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 470 | Instructional/Prof. Development | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 480 | Contributions | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 490 | Miscellaneous | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

 Sub-Classification Account

Office Maintenance

Budget vs. Actual Specimen lV (d)

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Date | **Rent** | **Phone** | **Utilities** | **Supplies** | **Postage** | **Equip.** | **Subscript.****Fees/dues** | **Insurance** | **Other** | **Total** | **Budget** |
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**Cash Disbursement Detail** Specimen IV (e)

(For current fiscal year)

Breakdown by Major Account

**Budget Actual**

**Expenditures** (for current fiscal year)

**Office Maintenance**

 Rent $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Telephone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Utilities \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Supplies \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Postage \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Equipment \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Subscriptions – Fees – Dues \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Insurance \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 **Total $ \_\_\_\_\_\_\_\_\_\_\_ $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Administration, Salary Expenses & Taxes**

Officer and Committee Chairman Salaries $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Officer Expenses \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Secretarial Services \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 State Unemployment Tax (Employer) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Social Security Contributions (Employer) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 **Total $ \_\_\_\_\_\_\_\_\_\_\_ $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Negotiations**

Committee Member Expense \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Legal Fees \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Fact-Finder Fees \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 **Total $ \_\_\_\_\_\_\_\_\_\_\_ $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Professional Rights & Responsibilities**

Committee Member Expenses \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Legal – Arbitration Fees \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 PR&R Assistance \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Materials \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 **Total $ \_\_\_\_\_\_\_\_\_\_\_ $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Legislative**

Committee Member Expenses \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 County Dinner \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Legislative Conference \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Materials \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 **Total $ \_\_\_\_\_\_\_\_\_\_\_ $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Grand Total**  **$ \_\_\_\_\_\_\_\_\_\_\_ $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 Specimen IV (f)

#### PETTY CASH VOUCHER

Voucher #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Paid To \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Amount \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Purpose\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Account # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Received by:

\_\_\_\_\_\_\_\_\_\_\_\_

 (Signature)

Attach receipt if available.

Specimen IV (g)

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Education Association**

**Bank Reconciliation**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20 \_\_\_\_**

Bank Statement Balance $\_ 1 \_ Checkbook Balance $ 2 \_

Plus: Deposits in Transit Plus: Corrections

 $ 3 \_ Description Amount

 $\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_ $ 4 \_

Total Deposits in Transit $\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_ 5 \_

 Subtotal $\_\_\_\_\_\_\_\_ Total Additions $\_\_\_\_\_\_\_

 Subtotal $\_\_\_\_\_\_\_

Less: Outstanding Checks

Number Amount Less: Service Charge & Corrections

\_\_\_\_\_\_\_ $ 7 \_ Description Amount

\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_ $ 6 \_

\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_ \_\_\_\_8\_\_

\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_

Total Outstanding Checks $ \_\_\_\_\_\_\_\_\_\_\_ Total Deductions $ \_\_\_\_\_\_\_\_\_\_

Adjusted Bank Statement Adjusted Checkbook

 Balance $ \_\_\_\_\_\_\_\_\_\_\_\_ Balance $ \_\_\_\_\_\_\_\_\_\_

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 These Amounts Must Agree

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| **Specimen IV (h)** |  |  |  |  |  |
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|  |
| **Mileage Log**  |
|  |  |  |  |  |  |
| **Employee Name:** |  |  |  |  |  |
| **SS # or Employee #:** |   |   |  |  |  |
| **Period Covered:** |   |   |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
| **Date (mm/dd/yy)** | **Department** | **Project/Description** | **Starting Mileage** | **Ending Mileage** | **Miles Traveled** |
|  |   |   |  |  |  |
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Specimen IV ( i )

**Travel Expense Voucher**

**Request for Payment**

Name of Requestor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date Submitted: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Purpose of Request: Reimbursement \_\_\_\_\_\_\_\_\_ or Travel Advance \_\_\_\_\_\_\_\_\_

(Check One)

Description (destination, purpose of travel, explanation of amount of travel advance):

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Date:  | Sunday | Monday | Tuesday | Wednesday | Thursday | Friday | Saturday |
| (mm/dd/yy) |   |   |   |   |   |   |   |
| Breakfast |   |   |   |   |   |   |   |
| Lunch |   |   |   |   |   |   |   |
| Dinner |   |   |   |   |   |   |   |
| Business Meal \* |   |   |   |   |   |   |   |
| Airfare |   |   |   |   |   |   |   |
| Hotel |   |   |   |   |   |   |   |
| Taxi/Shuttle |   |   |   |   |   |   |   |
| Auto Rental |   |   |   |   |   |   |   |
| Mileage \*\* |  |  |  |  |  |  |  |
| Parking |   |   |   |   |   |   |   |
| Telephone |   |   |   |   |   |   |   |
| Tips |   |   |   |   |   |   |   |
| Other |   |   |   |   |   |   |   |

* Requires explanation of business purpose of meal and participants.\*
* As of June 2006, allowable rate is 44.5 cents per mile for business miles driven. Refer to www.IRS.gov for up-to-date allowable mileage reimbursement. \*\*
* Attach applicable receipts.

Check Payable to: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Dept & Acct #: ­­­­­­­­­­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Vendor #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ SS# or Tax ID #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date Needed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mailing Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Requestor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Approver: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_