

UA LOCAL 290 TRAINING CENTER

Instructor Expense Voucher (JATC) -Attendance Report

Time sheets are due each Monday by 4:30pm to be paid on Friday

Name of Instructor: _____

Course Title: _____

Location: _____

Travel miles: _____ Miles @ **\$.58/Mile (2019 IRS RATE)**

Travel time – **BOTH WAYS:** _____ Hours

Dates:												
Class Hours:												

MISCELLANEOUS EXPENSES INSTRUCTOR ONLY (Please attach receipts)

DATE	DESCRIPTION	AMOUNT
	TOTAL	

I hereby certify the expenses and class hours detailed on this voucher are the proper and actual expenses I incurred in connection with teaching the above class.

Signature _____ Date: _____