# NATCA Local Voucher

Date: ________________ Payee: ______________________________________

* Union Officer ☐

Voucher# ____________

Purpose: ____________________________________

Check# ______________

Debit Card ☐ EFT ☐ Travel Dates: ____________________________

☐ Income ☐ Expense

| Date | Description | Amount |
|---|---|---|
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | Mileage | 0.00 |
| | Total Requested: | $ 0.00 |
| Reason: | Not Reimbursed: | |
| | Total: | $ 0.00 |

**Itemized receipts <u>must</u> be included for expense vouchers.**

I certify the above expenses, incurred with my official NATCA duties, are correct and have not been previously submitted for reimbursement. In accordance with NATCA Standing Rule F-18, I agree to repay any reimbursed expenses if I take an FAA supervisory or management position within 12 months of attending a NATCA-sponsored function or event.

Signature: ______________________________ Date: ____________

For mileage, enter the starting and ending odometer readings. **Rate of 76¢ valid from Jul 2026**

| Date: | Beginning: | Ending: | Total Miles: | Rate: | Total Expense: | From/To |
|---|---|---|---|---|---|---|
| | | | 0 | .76 | $ 0.00 | |
| | | | 0 | .76 | $ 0.00 | |

Authorizing Signature: ______________________________ Date: ____________

Officer #1

Authorizing Signature: ______________________________ Date: ____________

Officer #2

Comments:

*Select Union Officer only if a check is written to an elected officer, this will also be tallied in box 19 of the LM-4

Mobile Payment

Platform: ________________ Local Username: ____________________ Payee Username: ____________________