

CCFA Budget Requisition Form

Name of Recipient _____

Amount of Expense _____

Receipts?

must be attached

Date Submitted _____

(staple behind this cover sheet
Or attach as a pdf to the e-mail)

Description of Expense:

Participants:

Budget code* _____

Approved by CCFA President _____

Date

Check# _____

Treasurer _____

Date

***codes**

Expenses

2-200	Conferences	4-400	Operations/Administration
2-210	CCA conference	4-410	Office supplies
2-220	Other conference	4-420	P.O. Box
2-230	Summer Institute	4-430	Media (web)
2-240	Presidents Conference	4-440	Goodwill
3-300	Meeting Expenses	5-500	Programs
3-310	Representative Council	5-510	Member Training
3-320	Bargaining Team	5-520	Membership Promotion
3-330	Executive Board	5-530	Welfare
3-340	End of Mid Year Meeting	5-540	Scholarships
3-350	End Of Year Meeting	5-550	Grievance Processing
3-360	Honorarium	5-560	Arbitration
		5-570	CCFA PAC
		5-580	Other: Simply Voting
		5-590	Other: Member Engagement