# AUPE CHAPTER TREASURERS SUBMITTING REQUESTS FOR REINBURSEMENTS

# STEP 1: IMPREST RECONCILIATION FORM 1A

- A. Enter Chapter Number-
- B. Enter Quarterly Period Ending:
  - a. March
  - b. June
  - c. September
  - d. December
- C. Enter Opening Bank Balance on bank statement
- Enter by date all banking transactions listed on your banking statements (+credit/-debit)
  - see example
- E. Enter Total of entered banking transactions
- F. Enter NEW Bank Balance this balance should equal what is ending balance on Bank Statement

# Follow STEP 2. - NEXT PAGE

### STEP 3.

- G. Enter Reimbursement Amount from FORM 1B
- H. Total Ending Bank Balance + Reimbursement Amount = FINAL BANK TOTAL

# STEP 4.

Submit to:

Curtis Hopkins, Local 118 Treasurer

ad Foxborn Close, Sherwood Park AB, TRA 661

OR

scanned copies

Merc 6801@ yahso.ca Pes: 760-863-6811

#### IMPREST BANK RECONCILIATION FORM 1A

AUPE Local 118, Chapter\_\_\_\_\_

For Quarterly Period Ending:

. 20

		NKING TRANSACTIONS that have been ment submitted.	incurred since last	\$ 634.
DATE	CHK#	PAYFF	AMOUNT	
pr 01		Business Deposit	243.19	
pr 15	137	Brock AGM	(440.91)	
pr 30		Service Fee	(1.50)	
pr 30		Stmt Service Charge	(1.00)	
May 31		Stmt Service Charge	(1.00)	
		an INVOICE TOTAL of all above entered b		s (201
		ANCE from INVOICE TOTAL for ENDING		s 432.

<sup>\*</sup>See sample Bank Statements included

#### IMPREST ACCOUNT REIMBURSEMENT FORM 1B STEP 2: IMPREST ACCOUNT REINBURSEMENT AUPE Local 118, Chapter\_\_ FORM 1B For Quarterly Period covering: A. Enter Chapter Number -CHAPTER TREASURER: (Name) MAILING ADDRESS: B. Enter Quarterly Period Covering: a. January to March b. April to June TREASURER EMAIL: c. July to September AMOUNT DATE CHK# PAYEE Brock AGM 440.91 Apr 15 137 d. October to December-C. Enter Treasurer Info D. Enter Info of items requesting chapter reimbursement - see example E. Enter Total of entered items The following items need to be included with FORM 1B ✓ Member Expense Claim Form along with any receipts to back up expenditures. ✓ Invoices paid directly from bank account ✓ All Receipts for any expenditures being claimed by ADD for an INVOICE TOTAL for REINBURSEMENT \$ 440.91

Note: Any gifts provided to union members as gift cards or tangible must be accompanied with members name and signature after receiving gift.

Note: AUPE Finance is requesting that all bank accounts currently be moved to an ATB bank account as they are waiving all service charges for AUPE Chapters banking. If you require assistance in doing this please contact Jason Heistad

j.heistad@aupe.org

Chapter Treasurer.

F. Enter Total from FORM 1B to FORM 1A



AUPE

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\*00006001903412921\*

City Centre Branch D201, 10200 - 102 Avenue Edmonton, Alberta T5J 4B7 Tel: 780.496.2063

number of cheques enclosed

All in One® Statement

For the period ending April 30, 2014

explain Deposit à Spending.

# "Mortgagnificent"

How to describe our unique Profit Share® Mortgage.

servus.ca/ProfitShareMortgage

Servus'

**Business Manager #1** 

Date Description	Withdrawals(\$)	Deposits(\$)	Balance(\$)
Apr 01 Opening Balance		¥	634.05
Apr 14 Business Deposit		243.19	877.24
Apr 15 Cheque #137	(440.91)		436.33
Apr 30 Service Fee	(1.50)		434.83
Apr 30 Stmt Service Chg.	(1.00)		433.83

Total (443.41) 243.19

# MEMBERSHIP SUMMARY

Deposit & Investment Accounts	Balance(\$)	<b>Borrowing Accounts</b>	Balance(\$)
Chequing Accounts	433.83		
Common Shares			

If you find any errors in this statement, please contact your branch within 30 days of the statement date.

PAGE: 1 of 1

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Thank you

# PARLOUR

ITALIAN KITCHEN & BAR

10334 108 Street Edmonton, AB GST# 813175427 RT0001

#### 108 KRISTEN ...

Tb1 31/5 A <sub>l</sub>	00 Chk 14.,04°Chr		t 20
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100 % LSBP Subto		10. 357.	00- 00
357,00 G		66. 17. <b>40.9</b>	85

THE PARLOUR ITHLIAM BAR % KITCHEM 10334 NW 108 Street Edmonton, AB TÖJ 1L9 780-990-0404

\*\* TRANSACTION RECORD (4

Tran. #: 19174

RUC: Main Table #: 31 Check #: 348 Group #: 5 Employee #: 108 Employee Hame: KRISTEN

DISA Pre-Auth Poichaid Markankara8544 t AID: A0000000031010

Amount CAD\$440.91

HPPROVED 047331 00-001 047331 PKLRUS02 PRLRUC02 153001001004

TVR: 0000008000 781: F800

Customer Copy

THANK YOU Come Asain

AGM Dinner The Parlour April 8,2014 Cheque to Brock# 137



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City Centre Branch D201, 10200 - 102 Avenue Edmonton, Alberta T5J 4B7 Tel: 780.496.2063

Servus'

number of cheques enclosed: 0

Member Number;

# All in One® Statement

For the period ending May 31, 2014

## 104 Branches. 1 Banking System.

We've always considered you family. Now it's official. Thank you for your patience as we brought all of our branches onto a single banking system. We're proud to offer our member-owners fast, efficient and competitive inter-branch services province-wide.

# Business Manager #1

Date Description	Withdrawals(\$)	Deposits(\$)	Balance(\$)
May01 Opening Balance		٠.	433.83
May 31 Stmt Service Chg.	(1.00)		432.83
Total	(1.00)	0.00	

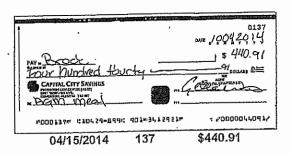
#### MEMBERSHIP SUMMARY

Deposit & Investment Accounts	Balance(\$)	Borrowing Accounts	Balance(\$)
Chequing Accounts	432.83		
Common Shares			

If you find any errors in this statement, please contact your branch within 30 days of the statement date.



Account Number: 3412921 Period Ending: April 30, 2014





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# **IMPREST BANK RECONCILIATION FORM 1A**

AUPE Loc	al 118, <b>C</b>	Chapter		
For Quar	terly Per	iod Ending:		, 20
BANK BAL	ANCE (per	bank statement prior to entries following below	)	, 10 <b>4</b> 146 i
	ENTER BELOW all <b>BANKING TRANSACTIONS</b> that have been incurred since last quarterly bank statement submitted.			
DATE	СНК#	PAYEE	AMOUNT	
				•
				-
				**************************************
				Ė
***************************************	*************************************			
ADD/SUBT	RACT for a	n INVOICE TOTAL of all above entered banking t	ransactions	\$
SUBTRACT	BANK BAL	ANCE from INVOICE TOTAL for <b>ENDING BANK BA</b>	LANCE	\$
ENTER REI	NBURSEM	ENT AMOUNT from Reimbursement Request For	m 1B	\$
CURRENT	BANK BALA	ANCE INCLUDING REINBURSEMENT REQUEST SHO	OULD EQUAL	Ś
	ure bank s	tatements or scanned copies are attached prior t	o sending in f	or reconciliation
purposes.				

# **IMPREST ACCOUNT REIMBURSEMENT FORM 1B**

		Chapter			
For Quarterly Period covering:to					
CHAPTER	TREASURE	R: (Name)			
MAILING	ADDRESS:				
		AMARIAN AMARIA			
		THE STREET AND ADDRESS AS A STREET AS		***************************************	
TREASUR	ER EMAIL:				
DATE	СНК#	PAYEE	AMOUNT		
<del>vice vals deut (deut (deut ) deut (deut (deut ) de</del> ut (deut ) deut (deut ) deut (deut ) deut (deut ) deut (deut ) de					
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400 f	n INVOICE	 TOTAL for REINBURSEMENT		\$	

Please ensure all receipts or scanned copies are attached prior to sending in for reimbursement.