

APPENDIX D

Ulster BOCES Administrators' Association

VACATION CASH VALUE EXCHANGE VOUCHER *Professional Organization Membership Dues*

At each unit member's discretion, the cash value of up to two (2) unused vacation days may be used to reimburse the unit member for their payment of professional membership dues. Within 45 days of submission of proof of payment, the District shall reimburse the unit member the cash value of up to two (2) unused vacation days.

Please Type or Print

<p>UNIT MEMBERS INFORMATION</p> <p>_____</p> <p style="text-align: center;">Employee Name</p> <p>_____</p> <p style="text-align: center;">Street Address</p> <p>_____</p> <p style="text-align: center;">City, State, Zip</p>	<p>PROGRAM DIRECTOR'S AUTHORIZATION</p> <p>_____</p> <p style="text-align: center;">Program Title</p> <p>_____</p> <p style="text-align: center;">Budget Code</p> <p>_____</p> <p style="text-align: center;">Program Director Signature</p>
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DATE	DESCRIPTION OF REIMBURSEMENT <i>(Please add the name of each Professional Organization and the amount that is being claimed.)</i>	TOTAL
<i>Receipts must be attached for all memberships being claimed.</i>		TOTAL:

UBAA Member Signature

Date Submitted

NUMBER OF VACATION DAYS REQUESTED TO CASH IN	DAILY RATE (CASH VALUE) <i>(Personnel Office)</i>	TOTAL DOLLAR AMOUNT <i>(Personnel Office)</i>	TOTAL REIMBURSEMENT REQUESTED <i>(Personnel Office)</i>	TOTAL DAYS (FTE) CASHED IN <i>(Personnel Office)</i>

<p><u>Business Office Approval</u></p> <p>_____</p> <p style="text-align: center;">Assistant Superintendent Date</p>	<p><u>Authorization to Pay</u></p> <p>_____</p> <p style="text-align: center;">District Superintendent Date</p>
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Personnel Office/Business Office

Date Vacation Days Reduced in WinCap	Date Payment Made to UBAA Member	Check Number	Total Amount of Check