

# Collingham & District u3a

## Expenses Claim Form

Name..... Date.....

Group.....Event.....

Details of Claim.....

Date	Expenses	Receipt Attached	Value
		<b>Total</b>	

For Direct Bank Payment please supply		
Bank Account Name	Bank Sort Code	Bank Account Number

Payment Details if not a Direct Bank Payment		
Cheque Number	Value £	Date

I confirm that these expenses have been incurred essentially on behalf of Collingham & District u3a

Signed

Treasurer  
Budget Code