

EXPENSES CLAIM

Date	Item details*	Postage	Printing & stationery	Equipment	Consumables & other
		£	£	£	£
		£	£	£	£
		£	£	£	£
		£	£	£	£
		£	£	£	£
		£	£	£	£
		£	£	£	£
		£	£	£	£
		Totals:	£	£	£

* Please attach receipts wherever possible

Car travel allowance: 45p/mile

TOTAL claim: £

If you would like a direct transfer to your bank or building society account, please complete the following details:

Bank/BS name: Account name: Sort code: Account No:

Your name:	<input type="text"/>	Signed:	<input type="text"/>
Email:	<input type="text"/>	Date:	<input type="text"/>

Please pass your claim directly to:
 Treasurer, u3a Shoreham & Southwick
treasurer@shorehamandsouthwicku3a.org.uk

Approved by:	Date:	Cheque No:	Received by / Bank Transfer:
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