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# EXPENSE CLAIM FORM

Please use block capitals. A VAT receipt detailing items purchased must be attached to the form or expense will not be paid. The receipt must be written 28 days of purchase for claims £30 or over. The payment will be paid into the claimant banks account. This can take 10 days to process. Please return form to student activities office and place in completed expense claim form. Please pick up your cheque 5 days after submitting form.

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| **Contact Information** |
| Society |  |
| Claimant Name |  | Date |  |
| Claimant Student Number |  | Claimant Phone Number |  |

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| **Expense Claim** |
| A full description of expense claimCar mileage allowance: 25p for the first 100 miles, then 18p a mile  | Date ofActivity | £ |
| Total Amount Claimed | £ |
|  Claimant Signed |  |
| Authorised (President) |  |

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| **Payment Information** |
| Name on Card (capital letters) |  |
| Account Number (8 Digits) |  |  |  |  |  |  |  |  |
| Sort Code |  |  | - |  |  | - |  |  |
| Payment by ChequeName (if applicable) |  |

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| **OFFICE USE ONLY** |
| Amount Granted | £ | Social |
| Account(s) to be debited  |
| Auth Signature (Student Activity Manager) Date / /  |
| Claim Number  |
| Received By: | Finance Code: |