



Expenses Claim Form

<u>Claim for Event</u>
Event Name:
Event Code:
Event Date:

<u>Claim for Period</u>
Date From:
Date To:

Registered Charity no: 1028202

- Please claim within a month of an event or every quarter for expenses (March, June, September & early December), unless claim is under £10 we would prefer you to wait for it to raise above this level.
- Event codes are available from the county treasurer please ensure this is obtained as part of the event planning and included on ALL event expenses claim forms.
- Please ensure one of the above boxes ('Claim for Events' or 'Claim for Period') is completed.

Name:	Address (inc Postcode):	Phone Number:
Appointment Held:		Email Address:

Trustees please tick here:

	Details	Date/Event Code	Receipt Attached?	Amount (£)
Travel	_____ @ 40p per mile			
Admin				
Event				
Berwick OAA Training <small>(Delete as appropriate) Please detail as per budget</small>				
Total Claimed (£)				

All claims must be authorised by the relevant person, authorised signatures are one of: County Commissioner, County Treasurer, County Secretary, Berwick Chairman, OAA Chairman, Adult Support Chairman, Finance Chairman or Event Organiser with permission of the County Commissioner.

Signature of Claimant:	Cheque Number:
Date of Claim:	Cheque Date:
Authorised By: Chairman/Treasurer/Secretary	Supplier Code: