

IWDTS - EXPENSE CLAIMS FORM (Revised April 17)

Name:	
Date of travel/vehicle usage:	
Venue/Activity:	
Reason:	
Expenses Claimed: (please attach receipt where appropriate)	
(Number of Miles at £0.50 per mile and amount claimed)	
Payment Method: Cheque	<p>Yes No</p> <p>– if no please complete details for bank transfer below if not held by Treasurer</p> <p>- or confirm that payment has been received from cash held by activity financial focal point <input type="checkbox"/></p>
Bank Transfer:	
Bank Name:	
Name on the account:	
Bank Account number:	
Sort Code:	
Signature	
Date	

