



EXPENSES CLAIM FORM

NAME:	
ADDRESS:	
POSTCODE:	
EXPENSES FOR ATTENDING:	
HELD AT:	
ON THE (DATE):	
CLAIM ➤ Lunch ➤ Dinner ➤ Accommodation ➤ Travel ➤ Placed travelled from: TOTAL:	£ : P : : : : _____

<u>RATES:</u>	
Lunch	£6.00
Dinner	£8.00
Accommodation	£75.00 (Receipt required)
Travel: Mileage 40p per mile; Or rail/bus fare (standard class or cheap day return)	