



EXPENSES CLAIM

U3A VALL DEL POP – G54387774

CLAIM NUMBER *For office use* _____

Name of Claimant _____ Dates: from _____ to _____

Type of expense *(delete not applicable)* _____ Committee / Group name _____

Group funding: Requests must be submitted to the Groups Co-ordinator and approved by the Committee BEFORE the expenditure is incurred. The form to request funding can be printed from the U3A website

Receipts must be attached to this form for all items (except for travel and printing costs).

Itemise travel and printing claims, identifying the purpose for the expense.

Travel expenses should specify (for each trip) the purpose of the journey, the departure and arrival points and whether the journey was one or two way. (Please use a separate sheet if necessary).

Whenever possible expenditure should be supported by a Factura issued to

U3A Vall Del Pop - G54387774
Buzon 7, Partida Corbellot,
03792, Murla (Alicante)

All approved claims will be paid by the Treasurer or Assistant Treasurer.

DATE	ITEM No.	DESCRIPTION OF EXPENSE	AMOUNT
		Travelling @ €0.40 per kilometer	
		Sheets of printing @ €0.10 per sheet	
TOTAL			
Total in words:			

Signature of claimant _____

Date _____

Approved by Treasurer
Asst. Treasurer _____

Date _____

President / Vice President /
Secretary _____

Date _____

Approved at Committee meeting _____ Date _____

RECEIPT BY CLAIMANT

Received the sum of € _____

Signed _____

Date _____