VOLUNTEER EXPENSE FORM

Please check expenses are valid and provide receipts for all claims. The STN expenses policy can be found on the Volunteer page of our website www.sheffieldtalkingnews.org.uk/volunteer.





By submitting a form, the claimant certifies that the contents are accurate and the claim is justified.

NAME					DATE	DATE	
EMAIL ADDRESS P					PHON	PHONE	
TYPE OF CLAIM	BRIEF I	DETAILS				AMOUNT	
MEAL after 4 hrs:							
POSTAGE:							
STATIONERY:							
EQUIPMENT:							
TRAVEL (FARES):	From:		To:				
	From:		To:				
	From:		To:				
	From:		To:				
TRAVEL (MILAGE):	From:		To:				
	Miles :		Rate				
OTHER EXPENSES:							
(Please give							
details)							
ADDITIONAL DETAILS TO SUPPORT CLAIM							
SIGNATURE (or sending the form from a known email address will suffice)						TOTAL CLAIM	
ACCOUNT INFORMATION							
Payments under £25 can be paid by cash, over £25 by bank transfer or cheque. If payment by bank transfer is required you may give your bank details below, or you may prefer to contact the treasurer directly.							
ACCOUNT NAME			SORT	CODE	ACCOUNT NUMBER		

>>> PLEASE REMEMBER TO ATTACH RECEIPTS <<<