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		
expenditure is i	incurred. The	nust be submitted to the Gr form to request funding can be Leader Forms>Group Fundament	be printed from the U3A v		
Receipts must	be attached to	this form for all items (except	for travel and printing cos	ts).	
Itemise travel a	and printing clai	ms, identifying the purpose for	or the expense.		
•	•	ify (for each trip) the purpos Please use a seperate sheet		arture and arrival points	s and whether the
Whenever poss	sible expenditur	e should be supported by a F	Factura issued to	U3A Vall Del Pop - G54387774 Buzon 7, Partida Corbellot, 03792, Murla (Alicante)	
All approved c	laims will be p	aid by the Treasurer or Assist	ant Treasurer.		
DATE	ITEM No.	DESC	RIPTION OF EXPENSE		AMOUNT
		Travelling @ €0.40 per kil	ometer		
		Sheets of printing @ €0.1	0 per sheet		
				TOTAL	
Total in word	ls:				
Signature of	claimant		Data		
			Date		
Approved by Treasurer Asst. Treasurer			Date		
President / Vice President / Secretary			Date		
Approved at Committee meeting			Date		
RECEIPT BY	CLAIMANT				
Received the su	um of €				
Signed			Date		