

U3A Mapperley and District Committee Member Expenses Claim

Date..... Name..... Office held.....

Please enclose copies of receipts, circling relevant spends.

| Date of Expenditure | Description | Amount Claimed £ |
|---------------------|----------------------|---------------------|
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| | Total Amount Claimed | |

I declare that any mileage claimed was in a vehicle appropriately insured for MaD u3a purposes.

Mileage claimed @ 45p per mile Vehicle reg. number.....

| Signed | Date |
|--------------------------|------|
| Approved by Committee on | |
| Paid by BACS | Date |

Expenses will be paid on or near 25th of the month