				T		
Item	Date Purchased	Description		Suj	oplier	Amount ££:pp
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
					Total of claim	
Signed				Date of Committee approval (if applicable)		
Authorised (GC member, if over £50)						
Payee Bank Account (BACS) preferred		Bank Account Number		Sort Code		
Payee (Cheque)		Address		Postcode		
1						

Name

Wivenhoe Sailing Club Expenses Claim Form

This form is to be completed by all WSC members who have purchased goods or services on behalf of the club from their own funds and wish to reclaim the cost. Either a paper form can be completed; blanks are kept in the Treasurers pigeon hole - or an electronic copy can be emailed to thetreasurerwsc@gmail.com In all cases supporting receipts or invoices must be attached to a paper based claim or scanned into the email.

It would reduce workload if only one claim per month is made, but if expensive items are purchased or reimbursement is urgent, please let the Treasurer know. All claims need to be approved by an appropriate GC member before submitting. A copied-in email and subsequent response is sufficient for electronic claims

Month