

Expenses Claim Form (To be returned to Head Office: info@bfawu.org)

	All sections must be completed using BLOCK CAPITALS		
Event/Meeting Title		Event Date	
Name			
Membership No.		Branch No.	
Address			
		Postcode	
Bank Account Name			
Sort Code		Account No	
	Travel		
Own Car	If you drove, please state the total mileage:		If you were a passenger, please tick here:
Local Fare(s)			
Rail Fare			
Taxi			
Other (Specify)			
If food is being supplied, please indicate any dietary requirements here			

Reimbursement will be with relevant receipts only. Fuel will be paid at 20p per mile based on the Governments advisory fuel rates.