

Trefriw Outdoors

VOLUNTEER CLAIM FORM

Please return to: the Treasurer *(with receipts or proof of mileage)* **Name of Claimant**

email to : gelthomas@gmail.com **Address**

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Date	Method of transport e.g. car, bus, train	Mileage per round trip First 60 miles @ 45p thereafter at 25p	Other costs (e.g. parking, fares, etc.)	Reason for Journey/expenditure	Total claim £
Totals					

For Official Use:

_____ Miles @ _____ £ _____

Any Other _____ £ _____

Total claimed £ _____

Certified by: _____

Please supply your bank details for reimbursement:

- Account name
- Account sort code
- Account number

Signature: _____

Date: _____