

OUT OF POCKET REIMBURSEMENT CLAIM FORM

Instructions for completion

Complete all relevant areas shaded in green
Print off form and sign
Attach Invoices / Receipts for all items claimed
Submit to Society Treasurer

Name:

Month / Year:

Address to return cheque:

A) Travel Costs - Bus, Train, Taxi

Date	Transport	Address From AND Address To

B) Catering / Entertainment

Date	Number Of People Present At Event (Names if feasible)

C) Parking

Date	Location

D) Telephone and Other

Date	Description

Total Claim (A + B + C + D)

I certify the above expenditure/allowance claims for official duties perform

Signed

Authorised.....



The Society for the
Study of French History

Send to:

Dr Karine Varley
SSFH Treasurer
School of Humanities
Level 4 Lord Hope Building
University of Strathclyde
141 St James Road
Glasgow
G4 0LT

Purpose of Journey	Amount
	£0.00

Purpose of Event	Amount
	£0.00

Meter OR Pay & Display	Amount
	£0.00

	Amount £/p
	£0.00

£0.00

ned on behalf of the Society

Date.....