## EXPENSES CLAIM FORM CIPFA In the Midlands

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| --- |
| Name:  |
| Address: |
| Tel No: |
| Reason: |
| Venue: |
| Date(s): |
| *Bank account details for payment:*Sort code:Account Number: |

|  |  |
| --- | --- |
| Expenses Claimed: | £ |
| Rail Fare:(Standard Class Return) |  |
| From: |  |
| To: |  |
| Tube Fare/ Other Fare: |  |
| Car Mileage allowance |  | Miles @ 45p / mile |  |
| Car park charges |  |
| Other expenses: (Please give details below and provide receipts) |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
| **TOTAL** |  |

|  |  |
| --- | --- |
| **Signature of claimant:** | **Date:** |

The Chartered Institute of Public Finance and Accountancy

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