



HMSailing.org.uk

Expenses Claim Form

E-mail (preferable as pdf file) to
treasurer@hmsailing.org.uk

Name of Claimant:	Date Prepared:
Event:	Event Date:
Address for Payment:	
Post Code:	

Details of Outlays

Name/Self :	Travel Car @ 40p/mile Miles	£	
	Travel Car with trailer @ 48p/mile Miles		
	Other Travel		
	Subsistence		
	Other Expenses		
	Sub Total		£
Name:	Travel Car @ 40p/mile Miles	£	
	Travel Car with trailer @ 48p/mile Miles		
	Other Travel		
	Subsistence		
	Other Expenses		
	Sub Total		£
Name:	Travel Car @ 40p/m Miles.....	£	
	Travel Car with trailer @ 48p/mile Miles		
	Other Travel		
	Subsistence		
	Other Expenses		
	Sub Total		£
TOTAL CLAIMED			£