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| --- |
| ALL EXPENSES TO BE CLAIMED AS PER THE EXPENSES PROTOCOL WHICH CAN BE FOUND ON THE LAA WEBSITE |

|  |  |
| --- | --- |
| ***DATE OF CLAIM SUBMITTED:*** |  |
| ***CLAIMANT NAME:*** |  |
| ***DATE OF EVENT / REASON:*** |  |
| ***EVENT NAME / REASON:*** |  |
| ***Archery GB No:*** |  |

|  |  |  |
| --- | --- | --- |
|  | ***Total Mileage @ 35p per mile*** | ***Total of Claim*** |
| ***Car Travel*** | ***\_\_\_\_\_\_*** ***miles*** | ***£*** |

|  |  |
| --- | --- |
| ***Specially sanctioned Overnight Expenses*** | ***Total of Claim*** |
| ***Allowance of £50.00 per night*** | ***£*** |

|  |  |  |
| --- | --- | --- |
| ***Details of any other expenses eg. Camping / Public Transport / Stationery / Engraving etc.*** | | |
|  | ***ITEM DESCRIPTION*** | ***CLAIM AMOUNT*** |
| ***1*** |  | **£** |
| **2** |  | **£** |
| ***3*** |  | **£** |
| **4** |  | **£** |
| **5** |  | **£** |
| **6** |  | **£** |
| **TOTAL OF CLAIM** | | **£** |

***\*\* PLEASE ENSURE ALL RELEVANT RECEIPTS ARE ATTACHED / SCANNED, WHEN SUBMITTING YOUR CLAIM \*\****

|  |  |
| --- | --- |
| ***Claimant Signature:*** |  |
| ***Claimant Telephone Number:*** |  |

|  |  |
| --- | --- |
| ***BANK DETAILS: if not previously supplied.*** | |
| ***ACCOUNT NAME:*** |  |
| ***SORT CODE:*** |  |
| ***ACCOUNT NUMBER:*** |  |

ALL PAYMENTS WILL BE MADE DIRECTLY INTO THE CLAIMANTS BANK ACCOUNT UNLESS OTHERWISE REQUESTED

|  |  |
| --- | --- |
| ***1)*** | ***Claims up to £50 can be approved by the Treasurer*** |
| ***2)*** | ***Claims for £50 - £100 needs approval by the Treasurer & 1 other officer*** |
| ***3)*** | ***Claims over £100, needs approval by the Treasurer & 2 other officers*** |

|  |  |
| --- | --- |
| ***Authorised by signature:*** |  |
| ***Authorised by name (printed):*** |  |
| ***Authorised by position*** |  |
| ***Date:*** |  |

|  |  |
| --- | --- |
| ***Authorised by signature:*** |  |
| ***Authorised by name (printed):*** |  |
| ***Authorised by position*** |  |
| ***Date:*** |  |

|  |  |
| --- | --- |
| ***Authorised by signature:*** |  |
| ***Authorised by name (printed):*** |  |
| ***Authorised by position*** |  |
| ***Date:*** |  |

***AUTHORISATIONS FOR TEAM EVENTS WILL BE APPROVED BY THE TEAM MANAGER – ALL OTHER AUTHORISATIONS WILL BE MADE BY THE TREASURER / LAA COMMITTEE***