



STRATFORD-ON-AVON GLIDING CLUB LTD



Expenses Claim Form

Date	Supplier	Details of Item (including, where applicable, which glider / vehicle / project this item was purchased for)	Amount (inc VAT)	Receipt Attached?
Total Claimed				

To the Club Bursar	
Please credit the account as detailed below with the amount shown.	
Enter on normal payment entry screen, but select 'Club Cheque' as payment method.	
Please ensure that this voucher has been countersigned by two Club signatories.	
To be returned to the Treasurer after entry.	
Membership Number :	
Club Cheque Number :	
Amount :	£ .

Name:	
Membership Number:	
Date:	

Payment Options:	<input type="checkbox"/> Credit Flying Account <input type="checkbox"/> Issue Cheque

Authorised by:
1)
2)

I declare that the expenses and allowances claimed on this form were incurred wholly through my activities on behalf of Stratford on Avon Gliding Club Ltd.

Signature:	
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Date :
