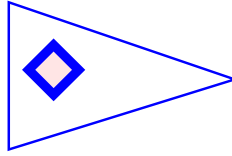


PAPERCOURT SAILING CLUB

EXPENSE CLAIM FORM



Please attach all receipts to the form

Your name		
Your contact number		
Your email address		
Date of claim		
What for (description)		£
	Total £	
Who to pay		
Bank account number		
Sort code		

For Treasurer Use Only

Approved	
Amount paid	
Date paid	
Cheque number (if applic)	
Cost Category	
Notes	