KIRANT SUNUWAR WELFARE SOCIETY

UNITED KINGDOM
ESTD. 2007
"Social Harmony for a Better Society"

K.S.W.S UK – EXPENSE CLAIM FORM

Name: _____

Membership No: _____

Contact No: _____

Date of Claim: _____

Expense Details:

1. Description of Expense:

_____

_____

_____

2. Amount (£): _____

Travel Claims (If Applicable):

(Mileage above 20 miles and train fare above £10 only)

Miles Travelled: _____

Eligible Miles (above 20 miles): _____

Train Fare (£): _____

Attachments: (Receipts / Invoices / Tickets)

Attached: Yes / No

Declaration:

I hereby confirm that the expenses listed above were associated solely for official KSWS UK activities.

Signature: _____ **Date:** _____

For Office Use Only

Reviewed By: _____

Approved Amount (£): _____

Remarks: _____

Authorised Signature: _____