# Mothers' Union Coventry Diocese Expense Claim Form 2023

### Name: Role: £ Travel: Tube/bus/taxi/train/coach (where possible book in advance) miles @45p/mile\* Car Conferences Telephone Postage Photocopying 3p a sheet Other TOTAL Signed: Date Countersigned: Date (DP/VP) Please let me have your bank account details for a bank transfer:-Account No: Sort Code: Account Name: Please attach invoices or receipts if possible

Return to Gary Askew, Mothers' Union Office, 1 Hill Top Coventry. CV1 5AB

\* mileage schedule overleaf

## Mothers' Union Coventry Diocese Expense Claim Form 2023

£

Name:

Role: _		
Travel:	Tube/bus/taxi/train/coach (where possible	
rravei.	book in advance)	
	Car miles @45p/mile*	
Confere	nces	
Telepho	ne	
Postage		
	opying 3p a sheet	
Other		
TOTAL		
TOTAL		
Signed:		Date
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Please Accoun	let me have your bank details for a bank tra t No.:	ınsfer:-
Sort Co	de:	
Accoun	t Name:	
	attach invoices or receipts if possible age schedule overleaf	
	to Gary Askew, Mothers' Union Office,	

#### Mileage Form

Date	From	То	Purpose	Mileage	
			Total miles		
		Contact 45 a man mile			
		Cost at 45	Cost at 45p per mile		

## Mileage Form

Date	From	То	Purpose	Mileage		
			Total miles			
		Cost at 4	Cost at 45p per mile			