

## Oxfordshire & North Buckinghamshire Counties ASA Affiliated to ASA South East Region

## **EXPENSES CLAIM FORM V3.0**

Please complete in BLOCK CA		ity Treasurer at ONBTreasurer@	gmail.com	
Your forename and surname	FIIALS			
roal forename and samane				
Event name and date				
Your role at the event				
When claiming mileage, you r	nust include			
the postcode & address details of the start				
and end points of each journey claimed				
for, together with the mileage	for each.			
Your email address				
Note:				
1. Claims can only be made that comply with the ONB County Expenses Policy & British Swimming				
Volunteers and Officials Expenses Policy on Travel.				
2. Google maps are used for guidelines to travel claims for private car. If anything is unclear in the ONB				
County Travel Expenses Policy, please also refer to British Swimming Volunteers & Officials Expenses				
Policy on Travel, and Swim England Policy. Their web links are here (please note: the sites may be				
· · · · · · · · · · · · · · · · · · ·		ime) – <u>British Swimming Policy</u> a	nd <u>Swim England Policy</u> .	
	•	of the last day of the event.		
4. Failure to complete th	is claim form co	orrectly may result in delayed pay	yment.	
Travel			Expense £	
	s @ 45p per m	ile)		
Rail		-,		
Public Transport				
Car park				
Meals (To be agreed in advance by event budget holder)				
Other (eg hotels, <b>To be agreed in advance by event budget holder)</b>				
	•	TOTAL	£	
Bank Name				
Account name				
Account name				
Sort Code				
Account Number				
Your Signature			1	
Tour Signature				
Date				



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For County Treasurer Use Only		
Event budget holder's authorisation to pay the claim		
Date claim paid via bank transfer		