



Kinross Cycling Club

Club Expenses

Date of Expenses re-claim

Name of Claimant

Address 1

Address 2

County

Postcode

Date	General Description of Expense	Item Value			Receipt Yes / No
		Gross	Nett	VAT	
Sub -Total					

Date	Fuel Costs (Mileage)	Mileage	Rate	Item Value			Receipt Yes / No
				Gross	Nett	VAT	
Sub -Total							

Total Claim			
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Claimant

Approved

Cheque No