



LANCASHIRE ARCHERY ASSOCIATION EXPENSES CLAIM FORM

ALL EXPENSES TO BE CLAIMED AS PER THE EXPENSES PROTOCOL
WHICH CAN BE FOUND ON THE LAA WEBSITE

DATE OF CLAIM SUBMITTED:	
CLAIMANT NAME:	
DATE OF EVENT / REASON:	
EVENT NAME / REASON:	
Archery GB No:	

	Total Mileage @ 35p per mile	Total of Claim
Car Travel	_____ miles	£

Specially sanctioned Overnight Expenses	Total of Claim
Allowance of £50.00 per night	£

Details of any other expenses eg. Camping / Public Transport / Stationery / Engraving etc.

	ITEM DESCRIPTION	CLAIM AMOUNT
1		£
2		£
3		£
4		£
5		£
6		£
TOTAL OF CLAIM		£

**** PLEASE ENSURE ALL RELEVANT RECEIPTS ARE ATTACHED / SCANNED,
WHEN SUBMITTING YOUR CLAIM ****



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Claimant Signature:	
Claimant Telephone Number:	

BANK DETAILS: if not previously supplied.	
ACCOUNT NAME:	
SORT CODE:	
ACCOUNT NUMBER:	

ALL PAYMENTS WILL BE MADE DIRECTLY INTO THE CLAIMANTS BANK
ACCOUNT UNLESS OTHERWISE REQUESTED

- | | |
|----|--|
| 1) | Claims up to £50 can be approved by the Treasurer |
| 2) | Claims for £50 - £100 needs approval by the Treasurer & 1 other officer |
| 3) | Claims over £100, needs approval by the Treasurer & 2 other officers |

Authorised by signature:	
Authorised by name (printed):	
Authorised by position	
Date:	

Authorised by signature:	
Authorised by name (printed):	
Authorised by position	
Date:	

Authorised by signature:	
Authorised by name (printed):	
Authorised by position	
Date:	

**AUTHORISATIONS FOR TEAM EVENTS WILL BE APPROVED BY THE TEAM
MANAGER – ALL OTHER AUTHORISATIONS WILL BE MADE BY THE
TREASURER / LAA COMMITTEE**