

# Congresbury Community Transport Expenses Claim Form

Name.....

Address.....

**Expenses Claimed:**

	Dates	Sum
1. Petrol @ 40p/mile (Mileage _____) )	from _____ to _____	£ _____
2. Bluey Spare parts (oil etc)	from _____ to _____	£ _____
3. Maintenance costs	from _____ to _____	£ _____
4. Postage + Stationery	from _____ to _____	£ _____
5. Telephone Calls	from _____ to _____	£ _____
6. E-mail, Internet	from _____ to _____	£ _____
7. Computer Printer	from _____ to _____	£ _____
8. Disability transport needs	from _____ to _____	£ _____
9. Overnight accommodation	from _____ to _____	£ _____
10. Subsistence allowance	from _____ to _____	£ _____
11. Specify Other	From _____ to _____	£ _____

---

Total of Claim

£

---

**All of the above are legitimate claims for expenses incurred whilst on CCT business and are recognised as legitimate by the Charity Commission.**

Claimant's Signature..... Date.....

**Return to Mike Sweeting, 29 Stonewell Lane, Congresbury, Bristol BS49 5DN**

Treasurer's Signature..... Date.....