

Expenses claim form - Diocese of Sodor and Man

Exp 1

Name and addres	s of claimant (<i>please print</i>	·)			
Claim for the	month of:				
					1 .
	· ·	m to become a carbon neutral Diocese, cycle (B) or eVehicle (eV). Use C for non		age every	one to
		Mileage DETAILS OF CLAIM			
Date of meeting	Purpose of meeting	Place where meeting held	Car mileage		
C	,		@ 57p per mile on-Island @ 45p per mile - UK		
			# Miles	Mode	Amount £
		 Total			
				4	



Non-Mileage DETAILS OF CLAIM					
Purpose of Expense		Amount £			
	Total				
Claimant's signature	Date				
Approved by Bishop, Archdeacon or Line Manager	Date				
Payment will be sent directly to the bank specified by claimant. Account number:					
Sort Code:					
Account Name:					
For Diocesan Administration					
DBF a/c					
Ref No					

Authorised Date paid