Volun	teer - Mileage & Expens	es Claim								V	<b>Cum</b> l Wildli	<b>bria</b> fe Trust	
Name:		]	[	Payment via Bank transfer									
Address:				]		Account Name:							
				1		Sort Code:		-			-		
	_					Account Number:							
	Post Code:					Email address							
Receipt	Description of goods or service purchased			Budget holder to complete							Gross		
no.				Project			XGL			Code	£		
				•				Ex	penses	claim			
Date	Reason for Travel	From	То	Budget holder to complete				No	No. of		£		
					Projec	t	XGL miles			iles	@ 45p/mile		
									-				
Checklist (F	Enter a Y)							N	lileage	claim			
	Have you attached VAT receipts/invoices for t			T. (.)	<b></b>	. F .							
	I confirm that the expenditure claimed has be	en expended on behalf	of Cumbria Wildlife Tru	ust.		lotain	Mileage &	х Ехр	enses	ciaim			
			T										
Signed by claimant: Date:			Date:										
Authorised by Budget holder: Date:			Date:										
			l										