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# CSU SOCIETY EXPENSE CLAIM FORM

Please use block capitals. A VAT receipt detailing items purchased must be attached to the form or expenses will not be paid. The payment will be paid into the claimant banks account. This can take 10 days to process. Please return form to [studentopps@chester.ac.uk](mailto:studentopps@chester.ac.uk)

|  |  |  |  |
| --- | --- | --- | --- |
| **Contact Information** | | | |
| Society |  | | |
| Claimant Name |  | Date |  |
| Claimant Student Number |  | Claimant Phone Number |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Expense Claim** | | | |
| A full description of expense claim  . | | Date of  Activity | £ |
| Total Amount Claimed | £ | | |
| Claimant Signed |  | | |
| Authorised (President/Treasurer) |  | | |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Payment Information** | | | | | | | | |
| Name on Card  (capital letters) |  | | | | | | | |
| Account Number  (8 Digits) |  |  |  |  |  |  |  |  |
| Sort Code |  |  |  |  |  |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **OFFICE USE ONLY** | | | |
| Amount Granted | £ | | Social |
| Account(s) to be debited | | | |
| Auth Signature (Student Groups Coordinator) Date / / | | | |
| Claim Number | | | |
| Received By: | | Finance Code: | |