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| CRAWLEY DISTRICT SCOUTSDISTRICT TEAM – EXPENSES CLAIM |
|  |
| **Name** |  | **Appointment** |  |
| Period from |  | **to** |  |   |
| Note: Please cross out all personnel Items on receipts and amend the total to reflect that |
|  | DETAILS | **Section or Function** | **£** |
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|  | Total |  |
| **Please give details of expenditure and attach all receipts** |
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| These expense payments are a reimbursement of actual costs, which are reasonable and are incurred wholly, exclusively and necessarily for the carrying out of the member role in relation to the task agreed with the District. All expense claims need to be written documents, including all details of the expenditure incurred, the date, nature and amount of expenditure. |
| Signed |  | Date |  |
| Approved by |  | Date |  |