South East Open Studios

Area Coordinators Claim Form

Expenses for travel which is requested by SEOS

Name:

Area:

Date of Journey:

Purpose of journey:

Return journey from **to**

By car: Return mileage:

By public transport: Return Fares (total)**: £**

Please attach receipt(s)

Address for payment:

Signed: **Date:**

Please return whole sheet to:-

Hazel Addley (Treasurer)
The Flat, 156 The Street
Boughton-Under Blean
Nr Faversham, Kent
ME15 8HA

NB. Claims must be submitted within a month of the journey for which the claim is made and be accompanied by the receipt(s), where applicable, for the expenses being claimed.
Any claim queries, please call Sam on 07763 064484 or by email at hazel101@btopenworld.com.

Any queries regarding the journey (e.g. whether it is eligible to claim for) please contact Felicity Flutter on 01580 240580 or e-mail at; flic.flutter@talk21.com

Office use only:-
Date received: **Amount paid:**
Date paid: **Cheque no.:**