

## **SOUTH EAST OPEN STUDIOS**

### **AREA CO-ORDINATOR INTRODUCTORY MEETING EXPENSES CLAIM FORM FOR SEOS 2008**

**Name:**

**ACO Area:**

**Date of Introductory Meeting:**

**Address for payment:**

**Amount Claimed (up to £25):  
(Receipt must be attached)**

**Please return whole sheet to:-**

**Sam Cherrill  
475 Willington Street  
Maidstone  
Kent  
ME15 8HA**

**NB. Claims must be submitted within a month of the meeting for which the claim is made or by end of March 2008 (whichever is soonest) and be accompanied by the receipt(s) for the items being claimed.**

**Any claim queries, please call Sam on 01622 355979 or by email at [sammi.c@blueyonder.co.uk](mailto:sammi.c@blueyonder.co.uk)**

**Any queries regarding the meeting please contact Felicity Flutter on 01580 240580 or by email at: [flic.flutter@talk21.com](mailto:flic.flutter@talk21.com)**

**Office use only:-**

**Date received:**

**Amount paid:**

**Date paid:**

**Cheque no.:**

