UNISON

Angus Council Branch

EXPENSES CLAIM FORM

DATE	FULL DETAILS	AMOUNT (£)
	TOTAL EXPENSES CLAIMED	

I confirm that I have incurred expenditure in attending or pursuing the above duties and that the amounts claimed are determined by the Executive Committee.

Total Claimed (in words) .....

.....

Signed: .....

UNISON Job Title: .....

Name: .....

Address: .....

.....

Postcode: .....

OFFICE USE ONLY

Paid by Cheque No.: .....

Date: .....

Signed: .....