# PLYMOUTH ADVANCED MOTORCYCLISTS

## EXPENSES CLAIM

Name: Telephone:

Address: Date

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**Notes**

- All expenses should be cleared with the Committee before they are incurred and **MUST** be supported by a validated supplier's receipt showing the correct amount for the purchase. Where claims involve more than one expense category, a separate form must be used for each category. Please contact the treasurer to confirm the correct category for your expense
- Expenses **MUST** be claimed within 2 months of being incurred.

**The group may refuse to pay expenses claims which are older than older than 2 months**
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| Authorised: | | Paid on: | | Cheque no. | |

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| **Expense category:-** |
| **Auditor checked:-** |