

# Volunteer Expenses Claim Form

Please complete the following with exact details and enclose all receipts. **Forms will be returned** if they do not contain the correct receipts / substantiation and committee authorisation. Expenses should be submitted **within three months of being accrued**.

Name: \_\_\_\_\_

Committee \_\_\_\_\_

Car Registration	
Engine Size *	

Expenses Only **				
Date	Description	Meeting	Receipt (Y/N)	Amount
19 <sup>th</sup> Jan 2016	Train ticket, Lunch, Parking, etc. (EXAMPLE)	Type of Committee (EXAMPLE)	Y / N (EXAMPLE)	€10 (EXAMPLE)
			Y / N	€
			Y / N	€
			Y / N	€
			Y / N	€
			Y / N	€
			Y / N	€
<b>TOTAL (A)</b>				€

Car Mileage (Kilometres) Only					
Date	Journey Details	Meeting	No. of Km's	Kilometre Rate*	Total
19 <sup>th</sup> Jan 2016	IACP Dun Laoghaire to Gresham Hotel, City Centre (EXAMPLE)	Type of Committee (EXAMPLE)	25 (EXAMPLE)	39c / 46c (EXAMPLE)	€11.50 (EXAMPLE)
				39c / 46c	€
				39c / 46c	€
				39c / 46c	€
				39c / 46c	€
				39c / 46c	€
				39c / 46c	€
<b>TOTAL (B)</b>					€

\* (39c engine 1.5L or less, 46c engine greater than 1.5L)

<b>Total Claim</b> (Total A+ Total B)	€
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Signature of Claimant: \_\_\_\_\_

Date \_\_\_\_\_

Signature of Committee Expenses Officer \_\_\_\_\_

Date \_\_\_\_\_

FOR IACP OFFICE USE ONLY	
Approved for payment by:	_____
Date: _____	Date of Payment: ___/___/___
Amount of Payment: € _____	Chq. No : _____