

Expense Form

Equipes Notre-Dame	Expense Claim
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Name:	
Date of Claim:	
Sector:	
Region:	

Item	Date of Expense	Expense Type	Description of Expense or Item Purchased	Purpose of Expense (e.g., Teams Event, Activity, or Business Item)	Expense Amount
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					

Totals: £-

Cheque Made Payable To/Bank Acc Name, Number & Sort Code

Date Actioned: