

# Worthys Youth Football Club: Expenses Claim Form

Sheet Ref. No.

Claim by:

Team:

Date	Expense Type	Reason	Amount	Total	Receipt Attached
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
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					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>

Total Expenses:	<input type="text"/>
Less Outstanding Advance:	<input type="text"/>
Amount Due:	<input type="text"/>

I confirm that this claim complies with procedures and the expenses were necessarily incurred for Worthys YFC purposes. I have not previously claimed for any of these items.

To the best of our knowledge, this claim complies with procedures and the expenses were necessarily incurred for Worthys YFC purposes.

Claimant Signature:

Date:

Approved by:

Date: