

Presbytery of Dunfermline
www.dunfermlinepresbytery.org.uk

Travelling & Other Expenses Claim Form

Name _____ Expenses Claim _____ £
 Address _____ Mileage Claim is _____ miles @25p _____
 _____ Total £ _____
 Committee _____

DETAILS

A. EXPENSES CLAIM

Details	Postage – Telephone- Photocopies - Other	Amount
Total		

B. MILEAGE CLAIM

Date	Destination	Purpose of Visit	Miles
Total Mileage			