BRITISH DALMATIAN WELFARE

Registered Charity No 1086519

CLAIM FOR EXPENSES

Your Name:…….

Your Address:…….

…….

Postcode:……**Telephone Number**:……

Please provide your bank details so that we can pay the expenses direct into your account. This payment method is more cost effective for British Dalmatian Welfare. Thank you .

Bank Sort Code: _ _ - _ _ - _ _ **Bank Account number:**……

Account name:…….....

PURPOSE OF CLAIM: *(delete as appropriate)*

- Assessment of Dog
- Assessment of Prospective Home
- Transportation of Dog

Details of Journey/Person Visited:…….

And/or name of dog……

Mileage @ 30p per mile£…… **Total miles traveled**……

Other expenditure: -

Postage £…….*(receipt must be attached)*

Telephone £……..

Other costs £……. **Detail of costs**:……

TOTAL CLAIM: £_____

To reflect the true cost of operating British Dalmatian Welfare, you are encouraged to claim your expenses

Please return your claim form to:
Mrs Anne Gurnsey, Lower Orchard, Ramscote Lane, Bellingdon, Nr Chesham, Bucks, HP5 2XP

Authorised By……Cheque No:…….Dated……..