Newmarket Kings Theatre

EXPENSE CLAIM FORM

PLEASE USE THIS FORM FOR RE-CLAIMS OF EXPENSES INCURRED ON BEHALF OF NOMADS LTD.

Name (Please use capitals);

PLEASE NOTE - Payments will be made by BACS or cheque within 7 days. If you wish to have payments into your bank account by BACS please contact The Treasurer with your bank details. For security reasons do not write these down and leave in their tray, thank you.

PLEASE STAPLE ALL RECEIPTS TO THE BACK OF THIS FORM, THANK YOU.

Address (if you wish to be paid by cheque which will be posted;

Item Purchased	Date	Show/Area Expenses Incurred For	£
		Total £	

I certify that I have actually incurred expenses as described above and hereby apply for a refund of that amount. Supporting receipts are attached to show proof of purchase.

Signature;

Date;

When completed, this form should be sent to the Treasurer for approval and payment.

***Approval Signature*;**

Date;