

**St Andrews Voluntary Service: Expense Reimbursement Form C**

***For non-transport reimbursements only***

Please complete the form in BLOCK CAPITALS.

Name	
University Email Address	
Project Name	
Date of Claim	

OFFICE USE ONLY	
Checked	
Cheque No.	
Dated	

**Purchase Information**

You can list multiple purchases on this form.

Date of Purchase	Purchase Description	Notes	Amount (£)
Total Claim			£

Your Signature:

Date:

Please obtain the project officer signature. Please note that the project officer is not your project leader – if you're not sure who is, send us an email using the contact form on our website.

Project Officer Signature:

Date:

Please print this form, fill it in, then hand it to the SVS office for the attention of the treasurer.

When your cheque is ready to be picked up you will receive an email.

Only claims with receipts will be processed, unless special circumstances have been arranged beforehand. Please attach these onto the back of this form.