



LLANDUDNO CRICKET CLUB CLAIMS FORM

YOU MUST SEND THIS FORM TO YOUR LINE MANAGER, WHO WILL AUTHORISE

YOUR NAME: **Signed** **Date**

Your Current Level of Coaching Qualification: **JUNIOR / FOUNDATION / CORE / ADVANCED** *(please circle/highlight)*

Your Bank Account Number Sort Code Telephone No: Email.....

Date	Type of Coaching/Tutoring	Venue	Level of Tutoring	Coaching rate per hour (£)	No. of hours	Total (Hrs * Rate)	Other Expenses (Receipts required)	Miles travelled	Miles travelled Cost (0.25p)	Approver initials	
						TOTAL HOURS	TOTAL AMOUNT £	TOTAL OTHER EXPENSES - £	TOTAL MILES	TOTAL COST OF MILEAGE	CLAIM AMOUNT £

For Approver to complete:

Total of Claim: £ **Approved by:** **Date**