RMT
PORTSMOUTH
1259

Claim for monies to be paid

Name		Member No	

Occasion	Dates	Monies	Authorisation * , if relevant
	Total amount	£	

Comments	

Signature	Date

* Authorisation i.e. Branch / Regional Council Minute or Circular reference confirming Branch will cover these expenses.

Please attach any receipts for listed expenses, sign the form and send to the Branch Secretary.

For Branch Sec use

Date in Cash	No/ChequeNo	Description Authorisation / Meeting	Paid Out	
			£	