



GMFA Expenses Claim Form

Date	Description	Project	Group	Amount
Total expenses				
Amount donated back to GMFA				
Amount claimed				

for office use only		
Budget Line	Contract	Budget Holder

Please attach all receipts to the back of the form and put them in the same order as you have listed them above.

All claims must be made within three months of the expenditure.

Name Signature

Paid by

Received by