

**THE ROYAL BRITISH LEGION WOMEN'S SECTION**  
**Charity No. 219279**

**Women's Section Welfare Expenses Claim Form**  
**Re: Women's Section Welfare Schemes**  
**(RECEIPTS FOR ALL EXPENSES CLAIMED MUST BE ATTACHED)**

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Date	Journey to / from	Name of beneficiaries / scheme	W/A No. or new case	Authorisation e.g. H.Q., County Co-ordinator	No. of Miles
1					
2					
3					
4					
5					

TOTAL MILES to a. below \_\_\_\_\_

**CHEQUE NO**  
**TRAVEL COSTS**

£ . p

<b>a. Private Car</b>		Miles @ 40p	
<b>b. Bus/Rail Fare</b>	1		
	2		
	3		
	4		
<b>c. Taxis</b>			
<b>POSTAGE/TELEPHONE/STATIONERY</b>	(Please itemize)		
<b>OTHER EXPENSES</b>	(Please itemize)		
		Total: £	

I confirm that I have a valid driver's license and insurance, my car has been maintained in accordance with the manufacturer's recommendations and has a valid MOT certificate (where appropriate).

SIGNATURE: \_\_\_\_\_

AUTHORISED BY: \_\_\_\_\_

DATE: \_\_\_\_\_

CHEQUE NO: \_\_\_\_\_

CODE: 3141 B/CWID