



# St Joseph's Youth '88 Football Club



ORIGINALLY FOUNDED IN 1971 ★ FA CHARTER STANDARD CLUB ★ MIDDX COUNTY FA CHARTER STANDARD CLUB 2011

## OFFICIAL EXPENSE CLAIM & REQUISITION FORM

<b>Name:</b>		<b>Date of Claim:</b>	
<b>Position:</b>		<b>Team or Club:</b>	
<b>REASON FOR CLAIM / REQUISITION (REQUEST):</b> (please tick all that apply) <i>Please check the Club's Constitution &amp; Rules for details on Out of Pocket expenses. Expenditure claims should be for expenses actually incurred with receipts showing expenditure. All requests must be approved by the Executive Committee (not including the Treasurer) before reimbursement and/or before processing requisitions.</i>			
REFEREE FEES:	<input type="checkbox"/>	TEA BAR:	<input type="checkbox"/>
KIT & EQUIPMENT:	<input type="checkbox"/>	FESTIVAL:	<input type="checkbox"/>
CLUB EQUIPMENT:	<input type="checkbox"/>	FUN DAY:	<input type="checkbox"/>
SOCIAL EVENTS:	<input type="checkbox"/>	PRESENTATION DAY:	<input type="checkbox"/>
POSTAGE/TELEPHONE:	<input type="checkbox"/>	STATIONARY:	<input type="checkbox"/>
		PITCH/FACILITIES HIRE:	<input type="checkbox"/>
		NEWSLETTER:	<input type="checkbox"/>
		CRB CHECK/SAFEGUARDING:	<input type="checkbox"/>
		COACHING COURSES:	<input type="checkbox"/>
		OTHER (give full details below):	<input type="checkbox"/>
<b>EXPENSE CLAIM / REQUISITION DETAILS:</b>			
<b>REFEREE FEES</b> (for 11-a-side teams and for MCFA/HYFL/HGFPL appointed referees only):-			
DATE	HOME TEAM	AWAY TEAM	MATCH TYPE
<b>REFEREE FEES CLAIMED:</b>			<b>£</b>
<b>DETAILS OF OTHER OUT OF POCKET EXPENSES</b> (please attach receipts/proof of expenditure):-			
DATE	DESCRIPTION	AMOUNT	
<b>TOTAL OUT OF POCKET EXPENSES CLAIMED (INC. REFEREE FEES):</b>			<b>£</b>
<b>DETAILS OF REQUISITION</b> (please attach details, quotations etc.):-			
DATE	DESCRIPTION	AMOUNT	
<b>TOTAL COST TO BE APPROVED:</b>			<b>£</b>
<b>DO YOU WISH TO BE PAID BY CREDIT/ELECTRONIC TRANSFER (DIRECT INTO YOUR BANK ACCOUNT) OR BY PAYPAL?</b> YES <input type="checkbox"/> NO <input type="checkbox"/> <i>(The transaction reference will show as "STJ &amp; date of claim" e.g. STJ01JAN12)</i>			
SORT CODE: _____ - _____ - _____ A/C No: _____ A/C NAME: _____			
OR			
PAYPAL EMAIL: _____ PAYPAL MOBILE No.: _____			
<b>OFFICIAL USE:</b> <i>I have checked the request for reimbursement of actual expenditure incurred and/or requisition of goods/services, on behalf of the Executive Committee. I am satisfied that the claim is correct and can be processed.</i>			
<b>Name/Signature:</b> (unless emailed)			<b>Date:</b>