



Expenses Claim.

Name: Group:

Address:

Item (please make sure that receipts are attached)	£
Total	

Signed.....Date.....

Return to Marian Corbishley, Hon.Treasurer, 4 Lomond Grove, Cheadle, Staffs ST101SZ

Cheadle u3a **Charity Number 1072364** **www.cheadleu3a.org**