

Financial Processing }

Transaction No.

Registration No.



Validation Claim Summary Sheet

Please write or print clearly & attach to claim

Member Supplier ID

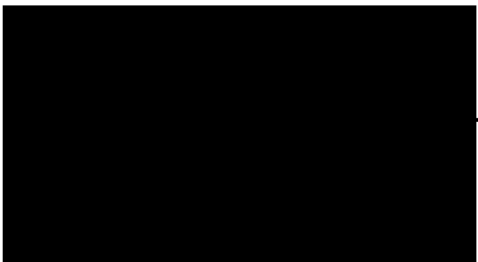
Pay recipient

(NB Financial Processing to check whether a dedicated a/c exists)

Text

(i.e. period of claim)

Invoice No.



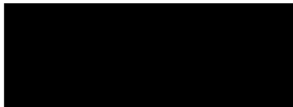
Account code / Allowance

Members cost centre (Cat1)

Financial Year/PIRO (Cat2)

04_05 / 05_06

Expenditure type (Cat5) :



** Validation purposes only (please tick to indicate compliance)*

Mortgage documentation held
Addresses comply with central records
Invoices relate to 2 nd home address
Budget checked
Claim signed
Claim correctly dated

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

** Financial Processing purposes only*

Registered by (initials & date)

Posted by (initials & date)



23 Mar