**Meeting Expenses Claim**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Name** | |  | | | | | | |
| **Address** | |  | | | | | | |
| **Bank Account** | |  | | | | **Sort Code** |  | |
| **Meeting Date** | | Saturday 18th October 2025 | | | | | | |
| **Meeting Purpose** | | Synod Meeting | | | | | | |
| **Meeting Venue** | | The Priory Centre, Abergavenny | | | | | | |
| **Travel** | | | | | | | | **£ : p** |
| **a) Mileage Claim** | |  | miles @ 25p per mile (driver only) | | | | |  |
|  | miles @ 30p per mile (with one passenger) | | | | |  |
|  | miles @ 35p per mile (with two passengers) | | | | |  |
|  | miles @ 40p per mile (with three passengers) | | | | |  |
| **b) Public Transport** | |  | | | | | |  |
|  | | | | | |  |
|  | | | | | |  |
| **Other Disbursements** | | | | | | | | **£ : p** |
| **Please specify:** | |  | | | | | |  |
|  | | | | | |  |
| **TOTAL** | | | | | | | |  |
| **Date** |  | | | **Signature** |  | | | |

**Office use only:**

|  |  |
| --- | --- |
| Authorisation 1 |  |
| Authorisation 2 |  |
| Payment Date |  |
| Reference / Cheque No. |  |
| Payment Authorisation 1 |  |
| Payment Authorisation 2 |  |
| Amount |  |
| Nominal Code(s) |  |

**Charity Gift Aid Declaration  
(Multiple Donation)**

**Boost your donation by 25p of Gift Aid for every £1 you donate**

Gift Aid is reclaimed by the charity from the tax you pay for the current tax year. Your address is needed to identify you as a current UK taxpayer.

In order to Gift Aid your donation, you must tick the box below:

* I want to Gift Aid my donation of £ and any donations I make in the future or have made in the past four years to The United Reformed Church (Wales) Trust.

I am a UK taxpayer and understand that if I pay less Income Tax and / or Capital Gains Tax than the amount of Gift Aid claimed on all my donations in that tax year it is my responsibility to pay any difference.

|  |  |
| --- | --- |
| **My Details** | |
| **Title** |  |
| **First Name or Initial(s)** |  |
| **Surname** |  |
| **Full Home Address** |  |
| **Postcode** |  |
| **Date** |  |

Please notify us if you:

* want to cancel this declaration;
* change your name or home address;
* no longer pay sufficient tax on your income and / or capital gains.

If you pay Income Tax at the higher or additional rate and want to receive the additional tax relief due to you, you must include all your Gift Aid donations on your Self-Assessment tax return or ask HM Revenue and Customs to adjust your tax code.