**WHUA (SOUTH REGION) - UMPIRING EXPENSES CLAIM FORM**

|  |  |
| --- | --- |
| **Name:** |  |
| **Address:** |  |
|  |  |
|  |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Date | Match | Venue | Mode of travel | Total Mileage**Per match** | Claim @ 30p per mile | **Claim @ 24p per mile****Please name passenger** |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
| Please indicate Total Mileage and Total Amount claimed under relevant heading |

|  |  |  |  |
| --- | --- | --- | --- |
| Number of Appointed games umpired |  | @ £10 per game = Total cost | £ |

|  |  |
| --- | --- |
| **TOTAL CLAIM (Expenses + Umpire Fee)**  | **£** |

Please send to WHUA (South Region Treasurer) - MRS ANNE MULLIN, 1, WHITE HART LANE, CAERLEON, NEWPORT, NP18 1AB

 EMAIL: mullinanne@yahoo.com