Important!

Expenses Claim Form

# Dear Mentor,

# Thank you for completing your Basic Disclosure. Please fill in your bank details below.

# **Thank you very much for your help, we really appreciate it!**

|  |  |
| --- | --- |
| Your Name |  |
| Current AddressPost Code |  |
| Tel |  |
| Mobile |  |
| Email |  |
| Bank Account Name (as it appears on your statement) |  |
| Bank Account Number (8 digits) |  |
| Sort Code (6 digits) |  |

|  |  |
| --- | --- |
| Type of expense | Amount |
| Basic Disclosure Certificate | £25 |
| **For Staff use only****TOTAL:** |  |
| **For Staff use only****Signature:** |  |
| **For Staff use only****Date:** |  |

Checklist:

Have I enclosed all receipts?

Have I forwarded the Basic Disclosure Certificate?

**Please return this form to Project Trust via email at Claudia.Bettson-Burdett@projecttrust.org.uk or mentoring@projecttrust.org.uk**

**Thanks!**