

NASUWT Meeting Attendance Claim Form

Form F6 (side a)

Meeting purpose:										
Meeting venue:								Date:		
		ŕ	* Please note original rec	eipts mu	st be prov	<mark>ided for no</mark>	n mileage costs	•		
Attendee details								Treasurer's use		
			Travel from (postcode)	Mileage		Other	0:			
Name	Membe	er#		No.	£	costs*	Signature	Bank ref	Cheque #	Date paid
NASUWT The Teachers' Union			TOTALS							
					45p					
			TOTAL CLAIM					7		
To be completed by	y local officer pro	cessir	ng the claim							
	h of the following t		m is being made to and ir	nsert nar	me and co					
LA	Fed		Reg Com			Exec N	NI/Scot/Cymru		Code	
LOCAL OFFICER DETAILS: Nam								Signature		