

# CLAIM FOR TRAVEL EXPENSES

for student members of UACES who have attended a qualifying event

Your name: ..... Cheque payable to (if different): .....

Address to which the cheque should be sent: .....

.....

I have read all the terms and conditions that appear on the website and I certify that the travel expenses were necessarily incurred by me.

Date: ..... Signed: .....

Please return this form by post,  
with your receipts attached, to:  
**UACES**  
Woburn House  
20 Tavistock Square  
London WC1H 9HQ  
United Kingdom

DATE OF EVENT	NAME OF EVENT	FULL DETAILS OF TRAVEL EXPENSES Please state where FROM and TO and MODE of TRANSPORT	AMOUNT	CURRENCY
Total travel expenses				
50% of total travel expenses				
Amount of claim awarded (office use only)				

For office use only:

Cheque No:                      Account name:                      Date posted:                      Initials:

Source:                              Date:                                      From:                                      To:                                      Exchange rate: