



THE SOCIETY FOR
VASCULAR TECHNOLOGY OF
GREAT BRITAIN AND IRELAND

Society for Vascular Technology of Great Britain and Ireland

Expenses Claim Form

Return to Treasurer:

Blood Flow Lab.
Northwick Park Hospital
Watford Road, Harrow
Middx. HA1 3UJ

Work Tel: 020 8869 2771
E-mail: kmodaresi@nhs.net

Name: Steven Rogers

Address for correspondence: Vascular Studies Unit, University Hospital of South Manchester, Southmoor Road,
Manchester:

Post Code: M23 9LT

Meeting attended/ reason for claim: SVT research committee meeting at St Georges Hospital 29th Jan 2018

Please enter details of expenditure	Amount
Travel fares/parking etc (car mileage 40p per mile)	£206.50
Accommodation and subsistence	
Sundries telephone calls/postage etc	
	Total: £206.50

I wish to be paid in (*please delete) *  Sterling

IMPORTANT - PLEASE NOTE

All claims should be accompanied by bills/ receipts to support the claim.

I confirm that the above expenses have been incurred on SVTGBI business only.

Claimant's signature: 

FOR OFFICE USE ONLY Amount paid: _____ Date: _____ Initials: _____