Compton Little Theatre – Expenses Claim Form Compton Little Theatre – Expenses Claim Form Production/Event/ Production/Event/ Capital/Miscellaneous Expense _______ Capital/Miscellaneous Expense Name: ______ Date: _____ Name: Date: Total amount Claimed: £ Total amount Claimed: £ Broken down as follows (Please indicate amount against each heading) Broken down as follows(Please indicate amount against each heading) Set: _____ Costumes: Costumes: Light & Sound: _____ Make-Up: Light & Sound: Make-Up: Catering (D&D only): Catering (D&D only): Props: Props: Raffle: Raffle: Bar: Ice Cream: Ice Cream: Other (Phone, Gifts, Cast Refreshments, ETC – Please specify) Other (Phone, Gifts, Cast Refreshments, ETC – Please specify) For Payment by electronic transfer, details required below: For Payment by electronic transfer, details required below: Account No: Account No: Sort Code: Sort Code:

Please attach all receipts where possible to this Claim Form

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