The English Association of Snooker and Billiards

Expenses Claim Form

Name:	Period:
Address:	

General Expenses

Other than a fixed allowance, any item without a valid receipt will only be accepted at the discretion of EASB

Date	Description	Rcpt	Charge
		✓	£
	Total general expenses	£	

Motoring Expenses

Date	Journey from	To	Purpose	Mls	Charge
			Total motoring expenses	£	

TOTAL CLAIMED £

Signed (Claimant) _____ Authorised _____ Date: _____