

To submit your claim, please complete the information below and attach the supporting receipts and documents and email to finance@ese-hormones.org. Your claim must be submitted within 6 weeks of when the expenses were incurred.

Please note: Evidence of your bank account is now required, this is in order to prevent potential fraudulent payments. Evidence can include a copy of your bank statement or an image but must include your name and the bank details and this should be provided together with your receipts. Payments will not be processed until this information is received.

Name of claimant:		
Address:		
Email:		
Telephone number:		
ESE reason for claim		
Bank Name		
Your name on Account		
Swift Code		
IBAN Number		
Evidence of bank account	Evidence of your bank account is now required, this is in order to prevent potential fraudulent payments (please see the note at the top of this form).	
	☐ Tick this box to confirm that you have attached evidence of your bank account details.	
Travel from / to:		
Dates:		
	Details	Amount Claimed (€uro)
Travel costs (€uro)		
Flights		
Train		
Metro		
Taxis		
Travel sundries:		
Car park		
Car	GBP 0.55 per mile equating to €0.40 per kilometre	
Accommodation		
Food & subsistence		
Other costs		
Total amount claimed		€

Claimant's signature:	Date
Approved by (ESE Office Only):	