

Xxx Scout Group Expense Policy

It is the policy of xxx Scout Group to reimburse volunteers for allowable expenses incurred whilst on Scout Group business, providing those expenses are incurred in line with this expenses policy.

Expense policy

Expenses incurred by any member of the Group who holds a position or appointment or where carrying out activities on behalf of the Group will be reimbursed by the Group once:

- Expenditure is agreed by budget holder in advance;
- Expenditure is claimed within the financial year that the expense has been incurred;
- Expenditure is within an approved budget and the budget is not overspent;
- The group has the money to pay the expense;
- Expense claim is approved correctly.

The general principle is that no person will obtain a benefit from expenses payments. Expense payments will be a reimbursement of actual costs, which are reasonable and are incurred wholly, exclusively and necessarily for the carrying out of the member role in relation to the task agreed with the Group. All expense claims need be written documents, including all details of the expenditure incurred, the date, nature and amount of expenditure

Note: Phone costs will only be paid on the basis of itemised phone bills or based on a list of phone calls.

Approval:

All expense claims must be signed by the claimant and approver.

Before any large expense is incurred our Group Executive Committee members must give consideration to the most cost effective method of incurring that expense. They should also consider whether the expenditure represents 'value for money' for the Scout Group.



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Registered Charity Number 303883

For further advice and support contact: hello@glscoutyscouts.org.uk

XXX SCOUT GROUP EXPENSE CLAIM FORM

Claimant's Name:	
Budget/Project	

TRAVEL	Receipt Attached		Total
Mileage Number of Miles _____@ ___per KM/Miles			
Bus/Rail/Taxi	YES	NO	
Parking	YES	NO	

DESCRIPTION	RECEIPT ATTACHED		AMOUNT
	YES	NO	
	YES	NO	
	YES	NO	
	YES	NO	
	YES	NO	
	YES	NO	
	YES	NO	
	YES	NO	
	YES	NO	
	YES	NO	

TOTAL CLAIMED	£
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SIGNATURES	NAME	DATE
Claimant:		
Budget Holder:		

Cheque Number	Date	Payee	Amount
			£