Bursary Expenses Form

Student Name	
Date	

Date	Shop/Supplier	Description	TOTAL
		Please return, with scanned copy of receipts to bursary@cws.foliotrust.uk	
		TOTAL	

Notes

1. Supporting receipts must be attached to this form.
2. Please return with scanned copy of receipts to bursary@cws.foliotrust.uk

Claimant Signature:…… Finance Manager Signature:……

Date: …… Date: ……