

**60<sup>TH</sup> CONFERENCE OF LOCAL DENTAL COMMITTEES  
FRIDAY 10 JUNE 2011**

**EXPENSES CLAIM - GDPC REPRESENTATIVES**

Name (please print) \_\_\_\_\_ Title \_\_\_\_\_

Address in full \_\_\_\_\_  
(including county  
and postcode) \_\_\_\_\_

Tel No \_\_\_\_\_

Air Fare £ \_\_\_\_\_

Standard Class Return Rail Fare £ \_\_\_\_\_

Any sleeper charges £ \_\_\_\_\_

Car mileage (40p per mile) £ \_\_\_\_\_

Hotel costs necessarily incurred £ \_\_\_\_\_  
(if not booked through Fresh Reservations)  
£120.00 one night only

Claim if staying with friends/relatives £ \_\_\_\_\_  
£25 one night

Total expenses claimed £ \_\_\_\_\_

I claim payment of the above expenses necessarily incurred in attending the 58th Annual Conference of Local Dental Committees. I am not claiming reimbursement from any other source.

Signature \_\_\_\_\_

**Please hand this form in as early as possible during the meeting and no later than 1.00 pm on 10 June.**

**If you fail to do so send it immediately to Will Newport at the British Dental Association, 64 Wimpole Street, London, W1G 8YS; Tel: 020 7563 4158**

**Please attach receipts for all expenses incurred.**