

# Community Area Partnership Agreement 2010/11:

## *Claim for running costs*

### Your Details:

Name:	
Partnership:	
Address:	
Phone:	
Email:	

### Bank Account Details:

Account name:	
Sort code:	
Account no.	
Balance of funds at beginning of year:	£

### Details of Claim:

<b>Administrator / Project Officer (inc travel) costs:</b> ▪ <i>details</i>	Cost: £
<b>Consultation activities, public events, analysis, etc:</b> ▪ <i>details</i>	£
<b>Advertising &amp; promotion (inc websites):</b> ▪ <i>details</i>	£
<b>Plans, questionnaires, other printing costs:</b> ▪ <i>details</i>	£
<b>Office expenses, consumables, etc.:</b> ▪ <i>details</i>	£
<b>Other costs:</b> ▪ <i>details</i>	£
<b>Total claim for year</b>	<b>£</b>

I confirm that the costs claimed for here will be incurred by the [insert] Community Area Partnership in accordance with the commitments agreed within the Community Area Partnership Agreement, 2010/11 and hereby apply for the first 50% of the funding to be released.

**Signed:** .....

**Date:** .....

**Please post your Annual Workplan and Claim Form for running costs to:**

Andrew Jack, Communities, Libraries, Heritage & Arts, Wiltshire Council, County Hall,  
Trowbridge BA14 8JN