



English Schools Cricket Association

Umpire Expenses Claim Form

1. Umpire details

Name: _____

Address:

Email: _____

2. Match information

Date of Match: _____

Location of match: _____

Number of overs: _____

Rates: Single match £40 / £70 for 2xT20

Amount claimed: £ _____

3. Payment and bank details

Bank name: _____

Account holder name: _____

Account number: _____

Sort code: _____

4. Declaration

I certify that the above expenses were incurred for official ESCA umpiring duties.

Signature: _____

Date: ___/___/___

6. Return to

ESCA Treasurer: Malcolm Blackburn

Email: malcolm.blackburn59@gmail.com

