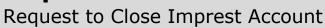
## Revenue Services

## **Imprest**





Complete sections 1-3, sign the form and return it to the address at the bottom of the page.

Please use black ink and block capital letters or typescript.

1) Establishm	nent				
Establishment Name					
Imprest Holder					
2) Bank Details (if applicable)					
Bank	Virgin Money	Virgin Money Branch			
Account Number		Sort C			
3) Current Imprest Amount					
	•				
Signed			Date		
(to be signed by the Imprest Holder named above)					
4) Cash Imprest Reimbursement					
4) Cash Imprest Reimbursement					
Reimbursed by:		(to be completed by Establishment)			
				Date	
Signature	_	Print Name		_	
Received by:		(to be completed by Rev	enues)		
				Date	
Signature		Print Name			
For Revenue Services use only					
Database Updated	Bank Notified	Actioned b	<i>y</i> :	Date	

Please return to : Revenues Performance Team
Tel : 0141 578 8202 Email : <a href="mailto:revenues.performance@eastdunbarton.gov.uk">revenues.performance@eastdunbarton.gov.uk</a>