

"Thank you" payment monthly claim form

Month of claim:	
Name of sponsor:	
Address of accommodation:	
Telephone number of sponsor:	
Email of sponsor:	
Name of all Guests:	
Date Guest(s) first lived in accommodation:	
Please make payment of (choose the relevant amount):	
£500	
£600	
£700	
£900	
for the month of 20	23.
I confirm that I have provided accommodation to my guest for the whole of the month claimed.	
I confirm that I am not charging rent to my gue	sts.
I agree to notify the Council immediately of any changes in circumstances.	
Signature:	Dated:

Please send this form when fully completed to HomesforUkrainians@bexley.gov.uk