EXPENSES CLAIM FORM

NAME: _____   **MONTH END DATE:** _____

DEPARTMENT: _____   **PAID DATE:** _____

USE OF *EMPLOYEES OWN CAR / * EMPLOYEES COMPANY CAR / * COMPANY POOL CAR
* please delete as appropriate

MAKE	MODEL		ENGINE SIZE (cc)	REGISTRATION No.	

DATE	MILOMETER		ITINERARY OF BUSINESS JOURNEY	MILEAGE CLAIMED	AMOUNT CLAIMED (attach VAT receipt)
	START	FINISH		Miles	£
			TOTAL BUSINESS MILEAGE		

SUBSISTENCE EXPENSES (including accommodation, meals etc.)

DATE	DESCRIPTION OF CLAIM (attach all relevant receipts and enter amounts in total column)	NET £	VAT £	TOTAL £
	TOTAL SUBSISTENCE CLAIM			

ENTERTAINMENT EXPENSES

DATE	DESCRIPTION OF CLAIM (attach all relevant receipts and enter amounts in total column)	NET £	VAT £	TOTAL £
	TOTAL ENTERTAINING CLAIM			

OTHER WORK RELATED EXPENSES

DATE	DESCRIPTION OF CLAIM (attach all relevant receipts and enter amounts in total column)	NET £	VAT £	TOTAL £
	TOTAL EXPENSE CLAIM			

GRAND TOTALS

NET £	VAT £	TOTAL £

DECLARATION

I DECLARE THAT ALL EXPENDITURE CLAIMS WHERE INCURRED **"WHOLLY, EXCLUSIVELY AND NECESSARILY IN THE PERFORMANCE OF MY DUTIES"**

EMPLOYEE SIGNED: _____   **DATE:** _____

EXPENSES APPROVED: _____   **DATE:** _____
(by Line Manager)

SP11/05.04