Non-Staff expenses claim form for payment bank transfer - UK based banks only

Nov.2015

Payee Details

First Name(s) (Block Capitals)

Surname (Block Capitals)

Address (Block Capitals)

Email:

Declaration by Claimant

By signing this claim form, I certify that the expenses have been wholly, exclusively and necessarily incurred in the performance of my duties for The University of Nottingham

Claimant Bank Details

Bank Name:

Account Number (must be 8 digits)

Sort Code (must be 6 digits)

Beneficiary name:

Mileage

Date	Reason for and Details of Journey (Including Start and Finish Points)	Miles	Account	Project	Activity
			4500		
			4500		
			4500		
			4500		
			4500		
			4500		
			4500		

Total Miles Claimed

@ _____ ppm. £ | 1

Other Items

Date	Details of and Reason for Claim (for Subsistence Claims include Location)	Currency	Exchange rate	GBP Amount (Inc Vat)	Account	Project	Activity

Total Other Items £ | 2

Claimed By (Block Capitals)	Signature	Date
Authorised By (Block Capitals)	Signature	Date
Department of Authorising Signatory		Contact Number for Signatory

Summary

£	1	Mileage
£	2	Other Items
£	3	*Total GBP to Reimburse*