

RB22CF - East Midlands Seminar in Geometry (EmSG)

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

Payee Details

First Name(s) <small>(Block Capitals)</small>	
Surname <small>(Block Capitals)</small>	
Address (Block Capitals)	

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

If left blank, a cheque will be arranged

Bank Name	_____
Account Number	_____
Sort Code	_____ - _____
Account 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)	Time Left	Time Returned	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 to Reimburse