## **Expenses claim form**



Name:					nocese of Norw	ICH
Job title:				or Bo	ard/Committee attende	ed)
Address:						
Telephone:						
E-mail:						
Claim for the period:			to			
Re-imbursements are administ authorised by this date for paymonth. 'Other expenses' car staff expenses must be authorised by the completed form should be the Finance Department, Diodorical Please itemise each expense.	ment to be reimland be reimland by you sent to: cesan House	nade, therefor bursed without r line manag e, 109 Dereha	ore we suggest so out relevant suppo er. If you have ro am Road, Easton	ubmission orting doc egular exp Norwich	s are made by the 7th umentation (i.e. rece benses we ask that y NR9 5ES 01603 88	h of each lipts) and rou make
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Claim summary		P	ayment deta	ails		
A. Car mileage	£	Ple	ease reimburse n	•		
Bike mileage	£	[]		•	• •	
B. Other expenses	£	[ ]	[ ] Bank details as follows (if not provided before or have changed):			e or
Total claimed		Ac	count No.:			
		So	rt code:			
			count in the me of:			
I confirm that the above expended board of Finance Ltd.  Signed:	enditure has	wholly beer	n incurred carryin	g out dut	ies for the Norwich [	Diocesan
For Office use only	Initials	Date				
Calculations and additions checked			Expenses A/C	No.		
Authorised by appropriate senior officer			Journal No.		Date:	
Approved for processing			Chq No.		Date:	1

Approved for processing

## A. Car mileage (or bike mileage)

Add account code and cost centre if known

Date	Journey (to/from)	Reason for claim	No of miles	Account code & cost centre

The current rate of car mileage reimbursement is 45.0p per mile if you claim less than 10,000 miles a year, and 25.0p for every mile over. For bike mileage it is 24.0p for motorbikes and 20.0p for bicycles.

	Total miles	Total cost
<b>Car:</b> (x 0.45 / 0.25)		£
<b>Bike:</b> (x 0.24 / 0.20)		£

## **B.** Other expenses

(e.g. postage, telephone, etc.) with receipts or other supporting documentation

Date	Detail / reason for claim	Cost	Account code
			& cost centre

B. Total cost:	£