

Mandatory Information	School / Department or Division	Location (e.g. S/Bon, QMC., etc.)	Payroll Number
Claimants Name (Block Capitals)	Signature:	Job Title:	Date:
Contact Details for Claimant	Email Address:	Telephone Number (Extension)	
Car Details (if claiming mileage)	Registration number:	Engine size:	*Lease Car *Casual User
Authorised by (Block Capitals)	Signature:	Job Title:	Date:

Mileage

Date	Reason for and Details of Journey (Including Start and Finish Points)	Miles	Project	Activity
Total Miles Claimed =				
@ ppm =		£		

Other Items - (Additional Information is Required for Meetings and Entertainment- See form Finance.EXP1a)

Date	Details of and reason for Claim (for Subsistence Claims include Location)	Time Left	Time Re- turned	Amount in Foreign Currency	Amount in £(inc VAT)	Project	Activity
Total £Claimed =					£		

Finance Department Use Only	
Date Received:	Checked By:

Declaration by claimant

1. By signing this claim form, I certify that the expenses have been wholly, exclusively and necessarily incurred in the performance of my duties at the University of Nottingham.
2. I confirm that prior to undertaking a journey on University business: (a) I have valid business motor insurance, (b) the vehicle is road worthy and is either less than 3 years old or has a valid MOT certificate, (c) I have a valid UK driving license and know of no medical reason why I should not drive.

Summary
 (complete this section on Sterling only.)

£	
	Mileage
	Other Items
	Less Advance
	No. A

A falsely completed claim form will amount to gross misconduct.