

Mileage, subsistence and expenses claim form

Please see notes and conditions on reverse of this form.



Employee Reference no (as on Pay advice Slip)		Month	Year	Vehicle registration of vehicle to which this claim relates				Relocation miles/fare claim Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>			
A U G 2 0 1 3											
Initials: J P		Surname: Masters		Service: Chief Executive's		Vehicle: Car <input checked="" type="checkbox"/> M/cycle <input type="checkbox"/> P/cycle <input type="checkbox"/>		Travelling base: New County Hall			
Date	Start time	Details of route Include start and finish points, using additional lines as necessary	Finish time	Milometer reading		Miles claimed	Passen ger miles	Receipted subsistence £	Receipt expenses (non taxable) £	Receipt expenses (taxable) £	Please give full details of (using additional lines as necessary) • subsistence and accommodation claims • other expenses (including public transport, course fees etc) • attach receipts where required • names of passengers
				Start	Finish						
1/8/13	0730	Home to CORMAC Offices, Bodmin and onward to NCH, Truro (includes personal deduction)	1130			34					Meeting with Arthur Hooper, MD of CORMAC
7/8/13	1500	NCH to St Clare Offices, Penzance and onward to home (includes personal deduction)	1930			54					Meeting with Local Members
16/8/13	1730	Home to Trengwainton, Penzance and return to home (includes personal deduction)	2100			68					Evening Reception with Lord Lieutenant
Final milometer reading						156					
Totals claimed / carry forward to next page											

Vehicle details		Complete this section if it is the first claim since April 2010 or if it is the first claim for the vehicle	
Cubic capacity (as on reg. document)	Make	Alfa Romeo	Model Spider
First year of registration: 2011	Fuel type:	Diesel <input type="checkbox"/>	Petrol <input type="checkbox"/>
CO2 emission:	Are you the main user of this vehicle? (Y/N)		
Is this your main vehicle? (Y/N)			
If you are no longer the owner of the vehicle for which your last claim was made, please enter registration number of that vehicle here:			
Date of registration			
I certify that the above details are correct, the expenses claimed were actually and necessarily incurred and receipts are attached. I also certify that my vehicle was used in accordance with the conditions overleaf and authorise the Council to make checks with the DVLA as may be required.			
Signed			
Date	page 1 of 1		

Items to be completed by the administrative officer or clerk						
Final milometer reading	Duty miles	Taxable miles	Subsistence	Expenses	Passengers	VAT
Mileage rate code						
Total for special sun coding					Sun code	
User type						
Totals and relevant details checked by						
Initials	Date					
Input	Initials					
Claim approved	Date	Name (in capitals)				
Signature					Designation	