

IPSA - Expenses Claim Form

Claimant Details

Name

Department

Email

Bank Name

Sort Code

Account Number

Staff Number

Phone

Claimant Declarations

I confirm that I have complied with the IPSA Expenses Claim Policy

Yes / No

I have provided receipts and/or supporting evidence (e.g. route planner data for mileage) for all amounts claimed

Yes / No

I confirm that the costs claimed were incurred entirely on official duties

Yes / No

DETAILS OF EXPENSE					SUBSISTENCE & OTHER				TRAVEL (using the lesser rule where applicable)					Total for Trip
Narrative / Reason for Expense	Date		Journey From	Journey To	Subsistence Rate & Other	Costs Actually Incurred	Hotel Rate	Hotel Costs Actually Incurred	Taxi	Rail	Private Vehicle		Air	
	Start	End									Miles	Cost		
												£ -		£ -
												£ -		£ -
												£ -		£ -
												£ -		£ -
												£ -		£ -
												£ -		£ -

Signed

Date

Form Reference Number

Claim Total £ -

Details of Authorisation

Name

Staff Number

Email

Phone

Signed

Date

Authorisation Checks

Check that for all amounts claimed matching receipts have been provided

Yes / No

Check no single taxi journey is above £80

n/a

Check air travel was appropriately pre-approved

n/a

Confirm 'other' expenses were incurred entriely for the purpose of completing official duties

n/a

Form Reference Number

Finance Use Only

Finance Use Only			Account Code								
	Cost Centre		Net								Net
			VAT								VAT