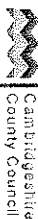


BUSINESS AND TRAINING JOURNEYS AND RELATED EXPENSES



PLEASE USE A SEPARATE CLAIM FORM FOR EACH JOB, VEHICLE AND CLAIM PERIOD

SECTION A: To be completed by Claimant - All boxes MUST be completed in this section otherwise claims may be returned

Oracle Payroll Number [REDACTED] Assignment No. [REDACTED] Title M R [REDACTED] Initials R M [REDACTED] Surname LLOYD

Registration Number [REDACTED] Type (Car, Motorcycle, Bicycle) Car C.C. 2000 Make and Model [REDACTED]

Vehicle Status (Please mark appropriate box) EMPLOYEE OWNED LEASED FROM 19 / 4 / 2011 TO 18 / 5 / 2011 Claim Period

DECLARATION OF CLAIMANT: Please read carefully before signing this form. I certify that I hold a current driving licence for the class of vehicle identified on this claim form and a motor vehicle insurance policy which covers me for business use. I agree to maintain the vehicle stated on this claim form in a roadworthy condition and, where applicable, hold a current MOT certificate. I declare that the claim itemised overhead is a correct record of journeys made on authorised Council business. I claim reimbursement of actual cost incurred for allowance for all eligible expenses when engaged on Council Business.

IMPORTANT RULE CHANGES: From 1st April 2006 the HM Revenue Customs require at least one VAT receipt for fuel purchased to be attached to each claim. This receipt MUST pre-date the first journey made. Please ensure that VAT receipts are attached to each claim.

Signature of Claimant [REDACTED]

Date Signed 18/5/11

SECTION B: To be completed by Spending Department - Please ensure ALL details have been transferred from Section C

Mileage Related Claims	Number of Passengers	Expenditure Code: Complete only if different from payroll default codes		Subjective	Objective	Number of Miles Claimed
		Cost Centre	Subjective			
Business Mileage	1			The subjective codes are no longer held or can be changed by Employee Expenses		18
Business Mileage						57
Business Mileage						
Training Mileage						
Motorbike / Bicycle						
TOTAL MILEAGE CLAIMED						105

Allowances / Expenses Related Claims	Expenditure Code: Complete only if different from payroll default codes	Subjective	Objective	NET Total	V.A.T.	TOTAL
				£ : p	£ : p	£ : p
Sandwich Allowance - Number 0 @ £ 3.07						0.00
Receipted Subsistence - with VAT						
Receipted Subsistence - No VAT						
Parking						
Other - State Type						
Other - State Type						
TOTAL ALLOWANCES CLAIMED						

Section B completed by PHARONS Telephone Number [REDACTED]

CERTIFIED FOR PAYMENT AS CORRECT AND LAWFUL

Signature of Authorising Officer [REDACTED]

PIN Number [REDACTED] Date Signed 18/5/11

SECTION C: DETAILS OF TRAVELLING ALLOWANCES AND EXPENSES CLAIMED

Home Address: [REDACTED] Home to Work Mileage - 1 Way: 3 Office/Work Address: Shire Hall, Cambridge

Details of Journeys and Allowances / Expenses Claimed. Please state the start and finish points and the purpose of each journey. Specify expenses claimed and attached receipts where applicable.

Date	Start Time	Finish Time	Starting Place - Place(s) Visited - End Destination - Purpose	No. of Passengers	Mileage Claimed					Other Expenses								
					Total Miles	LESS Home to Work Miles	Business Miles	Training Miles	M/Bike or Bicycle	Sandwich Allowance	Received Subsistence	Parking	Other - Including Fares					
19.04.11	13.30	18.00	SH-Knuston Hall - Home (LGSS Jr Committee Meeting)		87	3	84											
20.04.11	9.30	11.30	Home - CPDC - SH (Corporate Induction)		6	3	3											
10.05.11	14.00	16.00	SH-SCDC-SH (CEX/leader mtg with South Cambs)	1	18		18											
					Total of this Sheet													
					111	6	105	0	0	0	0	0.00	0.00	0.00	0.00			
					Total of Continuation Sheet													
					0	0	0	0	0	0	0	0.00	0.00	0.00	0.00			
Total of all Sheets (to be transferred to Section B of Claim Form by Authorising Department)																		
SECTION D: AUTHORISING DEPARTMENTS USE ONLY																		
Total Business Miles this Claim			Journeys / Other Expenses Verified and Approved by:															
Miles to End of previous Claim			[REDACTED]															
Total Miles this Financial Year			0															

When ALL Sections (A to D) have been fully completed and the claim Authorised for payment, please send claims to Employee Expenses, RES 1505, Shire Hall, Castle Hill, Cambridge CB3 0AP