

UK Athletics Limited

EXPENSES CLAIM FORM

Name: _____

Month: _____ **200** _____

Address: _____

E-mail: _____

By providing an E-mail address it will enable UK:A to send electronic notification of payment.

To be completed in accordance with the UKA Expenses Policy effective from 1st January 2008 . Please use block capitals where appropriate.

Receipts are to be provided to support each element of the claim

I certify that:

- a) All the particulars set out by me on the reverse of this form are correct and that the mileage covered in each case was necessary for the fulfilment of my duties.
- b) In all cases, where expenditure has been claimed it has been incurred.
- c) Where my private vehicle has been used it is insured so to do
- d) My BACS details as currently held by the finance team are correct (if not please amend below)

| | | | | | |
|-----------------|----------------------------------|--|-----------------------------|----------------------------------|--|
| Claimant | Signed: | | Authorised Signatory | Signed: | |
| | Date: | | | Date: | |
| | Name: (block capitals) | | | Name: (block capitals) | |

Amendment to BACS details: By NOT notifying UK Athletics of your bank details / or of any changes, we shall assume you wish to be paid by cheque on a monthly basis. BACS payments are generally made on a weekly basis.

| | | | |
|------------------------|--|----------------------------|--|
| Bank Name: | | Account in Name of: | |
| Account Number: | | Sort Code: | |

FOR OFFICE USE ONLY

| | | | | | |
|-------------------|-----------|------------------------|----------|------------------------|--|
| Sup A/C | | Inv. Date | | | |
| Invoice No | | Sup. Inv. No | | | |
| Code | CC | V | £ | Budget Approval | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| Total | | | | | |
| Checked By | | Fin. Approval | | | |
| Chq / BACS | | Chq / BACS Date | | | |

| | |
|--------------------------|--|
| Received Accounts | |
| Entry | |
| Appr 1 | |
| Appr 2 | |
| Paid | |

| Item No. | DATE | EVENT / REASON | LOCATION | FROM WHICH BUDGET? | MILEAGE | DETAILS OF CLAIM | TOTAL £ | VAT (office Use Only) £ |
|----------|------|----------------|----------|--------------------|---------|------------------|---------|-------------------------|
| 1 | | | | | | | | |
| 2 | | | | | | | | |
| 3 | | | | | | | | |
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| 19 | | | | | | | | |
| 20 | | | | | | | | |

TRAVEL (Reason why WGT is not used)
Please enter applicable Item Number in the relevant box.

Not enough time to arrange

No suitable availability

Approached WGT, but did not get a response

Other (please specify):

Cost too high (please enclose WGT quote)

Version: Draft1

GRAND TOTAL

Please identify mileage rate usage

Mileage Rates

Employees < 8000 in financial year £0.40 per mile
 Employees > 8000 in financial year £0.15 per mile
 Others – Travelling alone £0.20 per mile
 Other – Shared vehicle £0.25 per mile
 (state other travellers)

Company Car Mileage Rates

| CC | Petrol | Diesel |
|---------------|--------|--------|
| Up to 1400 | 11ppm | 11ppm |
| 1401 – 2000 | 13ppm | 11ppm |
| 2001 and over | 19ppm | 14ppm |