oaklee housing

CLAIM FOR TRAVELLING AND INCIDENTAL EXPENSES

Claims *must* be made on a monthly basis. Attach any relevant receipts.

Name : ______________________ Post : ______________________ Scheme: ______________________

Private Address : ______________________ Date ______________________

Casual/Essential User: ______________________ Make & CC : ______________________

Month Year: ______________________ Vehicle Registration: ______________________

DAY	DATE *	LEAVING TIME *	RETURN TIME *	PARTICULARS OF JOURNEY **	WHY DID YOU GO THERE?	MILEAGE	SUBSISTENCE		FARES, CAR PARK, SUNDRIES		SPENT ON

					TOTAL						

** State the route taken, showing all places called at. This, together with the times on the left, will be used to determine your eligibility for subsistence payments. Where the journey begins or ends at home, this should be stated.

I declare that I have spent any expenses claimed. These expenses agree with the approved scales.

Signature of claimant : _____ **Date:** _____ Certified by: _____ Date: _____