

BANGOR UNIVERSITY - TRAVEL & SUBSISTENCE EXPENSES REIMBURSEMENT FORM

Use this form to claim travel and associated subsistence costs whilst on University business. Do not claim private or non-university business. There are regulations regarding what may be claimed and what evidence is required to support a claim, please fill in this form in conjunction with the University travel and subsistence policy and financial regulations. Further information on travel & subsistence claims is available from the finance website <https://www.bangor.ac.uk/finance/pl>. NOTE: Your car insurance must cover business travel to claim mileage allowance.

| | | | |
|--|---|---|--|
| 1 Full name of Claimant: | Staff/Student/Supplier/ResourceID: | Casual Work(Y/N)? Yes: <input type="checkbox"/> No: <input type="checkbox"/> | Status : (Tick one) Employee: <input type="checkbox"/> Student: <input type="checkbox"/> Council Member: <input type="checkbox"/> Other: <input type="checkbox"/> |
| * with employment contract = No else Yes | | | |

2 Email:

3 University Department or Home Address (for non staff):

| | | |
|----------------------------------|--|----------------------|
| 4 Your Bank Sort Code: | | Account Name: |
| Your Bank Account Number: | | |

Or, if you require payment to a foreign bank, please complete the additional detail here:

SWIFT:

IBAN:

| | |
|-------------------------------------|--------------------------|
| 5 Business Reason for Claim: | CostC (if known): |
|-------------------------------------|--------------------------|

(Please be specific, places, projects/events and the names of staff, students or family members who have accompanied you.)

6 Period covered by this claim:

| | | | | | | |
|--------------------|--|------|------------------|--|------|---------------------|
| Start Date: | | 20__ | End Date: | | 20__ | No. of Days: |
|--------------------|--|------|------------------|--|------|---------------------|

7 Complete the reverse of this form by listing all receipts and information required to make a claim. Once complete, transfer the total costs to the summary below in section 8 and add the Cost Codes to be charged.

8 Calculation of this mileage claim (Remember to add your total car miles to the cumulative record)

| | | | | Cumulative Car Miles this year | |
|--|------------|----------------|----|--------------------------------|----------------|
| Higher Rate Car Mileage: Up to 10,000 annual miles | miles | @ 45p per mile | =£ | 0.00 | B/f Miles |
| Lower Rate Car Mileage: Over 10,000 annual miles | miles | @ 25p per mile | =£ | 0.00 | Add this Claim |
| | | | | | 0 |
| | | | | | C/fwd Miles |
| | | | | | 0 |
| Total: | 0.00 miles | | | 0.00 | |

| Project | Account | Category Description | Amount | |
|---|---------|---|--------|----|
| | | | £ | pp |
| | 550 | Mileage Allowance (Cars) | 0.00 | |
| | 550 | Mileage Allowance @ 20p per m (Bicycles: Complete details on the back of the claim) | 0.00 | |
| | 542 | Rail Fares - Standard | 0.00 | |
| | 551 | Other Travel Expenses - UK | 0.00 | |
| | 552 | Other Travel Expenses - Foreign | 0.00 | |
| | 555 | Hotels, Food & Subsistence | 0.00 | |
| | 556 | Conference Fees | 0.00 | |
| | 557 | Hospitality | 0.00 | |
| | 810 | Fuel for Hire Cars/Company Vehicles | 0.00 | |
| | | Other | 0.00 | |
| Total Amount Claimed for this Trip/Event | | | 0.00 | |

9 Please read this certification carefully. No claim can be approved without the signature of the claimant

I certify that I have actually and necessarily incurred the expenses in this claim and that the amounts claimed are in accordance with college regulations and current rates. I also certify that these expenses are wholly as a result of the discharge of my duties for the University and they have not and will not be claimed from another source.

| | | | |
|-------------------------------|--------------|--------------|------|
| Signature of Claimant: | Date: | | 20__ |
| Authorising Signature: | Name: | Date: | 20__ |

Finance Office Use Only: Checked By:

