NON-STAFF

Expenses Claim Form

Personal Details

Surname (as appears on bank account)	
Forename(s)	
Address	
Office/personal telephone no.	
Email Address	

UK Bank Accounts

Bank		
Branch		
Sort code (6 digits)		
Account number (8 digits)		

Non-UK Bank Accounts

Bank	
Branch	
Branch address	
IBAN	
Account Number	
Routing / Clearing number	
SWIFT number	
Currency	

Authorisation To be signed by attendee

By signing this form you are declaring that the expenses being claimed are:

1. In accordance with the University's Financial Regulations and Procedures
2. In respect of expenses wholly necessarily and exclusively incurred whilst engaged on the business of the University
3. No other claim has been made or will be made to this or any other organisation for the expenses claimed

Signature of Claimant	
Date	

Expense enquiries should be emailed to expenses@kcl.ac.uk

Details of Expenses Claimed

NB: Please submit **original** receipts (not copies) for each item claimed. Items of expenditure that are not permitted include but are not limited to:

- Computer equipment and phone bills for personal use that have not been incurred wholly and exclusively for College business.
- First class travel/Business Class/Premium Economy travel without prior approval by Head of Department or Head of Faculty as appropriate.
- Hotel bookings where a payment receipt cannot be provided.

Purpose of expense:	Attend COST Action CA21115 Scientific meeting 5, Portugal

Mileage Claim						
Which rate should I use? Check one only To be filled by						
Or/Van =45p per mile		Motorcycle = 24p per mile		Bicycle = 20p per mile		
Journeys	1	2	3	4	5	6
No. of Miles						
From						
To						
Total Mileage £						

Travel and other expenses: (only Standard/Economy Travel can be claimed). to be filled by attendee		**Amount £** or Euro	Receipts* Y /
Expense Details	Travel		Y
Euro or GBP			

**Receipts/proof of payment must be attached*

Total of Expenses Claimed £	To be filled by Action chair

GDPR statement can be found here - https://www.kcl.ac.uk/terms/privacy.aspx

Budget/Grant Holder signature: To be completed by BUDGET or GRANT HOLDER, who is not the claimant, against the finance coding detailed below. (To be completed by Action Chair)	
Please Print Full Name	
Signed	
Date	

WHERE DO YOU WANT THIS CHARGED TO? Please use valid King's Finance codes: (To be completed by Action Chair)

Cost Centre (Nominal / Activity)	Subjective / Account	Amounts
	Total of Expenses to be paid £	