VOLUNTEER

Expenses and Mileage - Claim Form

Name _____

Address _____

Site, Superviser or Role _____

We would like to pay your expenses by BACS direct into your Bank or Buildling Society, if you are happy for us to do this please provide your bank details below otherwise payment will be by cheque.

Bank / Building Society: _____

Account Name: _____

Account No.: _____

Sort Code: _____

We would like to confirm payment by email if this is possible please provide your email address.

Email: _____

Mileage

Date	Journey Details	Mileage Details			Total Cost £'s	Accounts Codes *(Authoriser to Complete)*
		Code	Distance	Rate		
					-	
					-	
					-	
					-	
					-	
					-	
					-	
					-	
					-	
					-	
					-	
					-	
					-	
					-	
					-	
					Mileage Total 'V1'	**0**
					Mileage Total	**£ -**

Mileage rates:

Vehicles (Code: V1) - first 10,000 miles @ £ 0.45

NB: Rate increased from 25p WEF 01/10/2022

Thereafter (Code: V3) @ £ 0.25

Return journeys over 150 miles - first 150 miles (Code: V1) @ £ 0.45

and thereafter (Code: V2) @ £ 0.25 ***NB: V2 mileage not in below calculation***

Motorcycles (Code: M) @ £ 0.24 ***NB: Rate increased from 22p WEF 01/10/2022***

Bicycles (Code: B) @ £ 0.20

Expenses

Date	Details (please attach receipts)	*Net £'s	*Vat £'s	Total Cost £'s	Accounts Codes (Authoriser to Complete)
				-	
				-	
				-	
				-	
				-	
				-	
				-	
				Expenses Total	**£ -**

**** If unsure of Net/VAT breakdown, complete Total Cost only - HO will calculate.***

Total Amount of Claim	**£ -**

Signature of Claimant: _____ **Date:** _____

I authorise the above mileage claim and I confirm that the claimant's vehicle has a valid MOT if required and their insurance covers them for business use if applicable.

Authorised by: _____ **Date:** _____

Finance to Complete for Vehicle Mileage V1 Only (*mileage year starts 6th April);

Mileage b/fwd (*current mileage year only): _____

Add - 'V1' Miles this claim: **0**

Mileage c/fwd to next claim: **0**