

T: 0161 713 1730 • F: 0161 713 1731

PLEASE NOTE: If you are claiming expenses for work carried out with more than one agency you MUST submit an Expense Claim Form for EACH agency you work for. All original supporting evidence must be provided with your expense claim form



Personal details

Full Name	<input type="text"/>	M-U Reference No.	<input type="text"/>
Telephone	<input type="text"/>	Period End Date	<input type="text" value="day/month/year"/>
Agency	<input type="text"/>	Pay Cycle	<input type="checkbox"/> Weekly <input type="checkbox"/> Two Weekly <input type="checkbox"/> Four Weekly <input type="checkbox"/> Monthly

Please tick **ONE** option

Travel

TOTAL

Mileage (Remember you must keep a log of your mileage)	Car/ Van <input type="checkbox"/>	Motorbike/ Scooter <input type="checkbox"/>	Bicycle <input type="checkbox"/>	<input type="text" value="miles"/>	@	<input type="text" value="pence"/>	£ <input type="text" value=""/>	<input type="text" value=""/>
Fares (Air, Rail, Taxi etc.)	Receipts						£	<input type="text" value=""/>
Parking	Receipts						£	<input type="text" value=""/>
BREAKFAST (Leaving home for work before 6am)	No Receipts		<input type="text" value="days"/>	@	£5.00 per day		£	<input type="text" value=""/>
	Receipts						£	<input type="text" value=""/>
ONE MEAL RATE (Working longer than five hours)	No Receipts		<input type="text" value="days"/>	@	£5.00 per day		£	<input type="text" value=""/>
	Receipts						£	<input type="text" value=""/>
TWO MEAL RATE (Working longer than ten hours)	No Receipts		<input type="text" value="days"/>	@	£10.00 per day		£	<input type="text" value=""/>
	Receipts						£	<input type="text" value=""/>
EVENING MEAL (If you finish after 8pm and is not your usual finish time)	No Receipts		<input type="text" value="days"/>	@	£15.00 per day		£	<input type="text" value=""/>
	Receipts						£	<input type="text" value=""/>

Accommodation

TOTAL

Hotel / Bed & Breakfast	Receipts						£	<input type="text" value=""/>
Rented Accommodation & Associated Utilities (Rental agreement to be provided with first claim)	Receipts						£	<input type="text" value=""/>
PERSONAL INCIDENTAL EXPENSES (Not to exceed £5.00 per night)	No Receipts		<input type="text" value="days"/>	@	£5.00 per day		£	<input type="text" value=""/>

Miscellaneous Expenses

TOTAL

Use of home as office	No Receipts		<input type="text" value="weeks"/>	@	£3.00 per week		£	<input type="text" value=""/>
Car hire	Receipts						£	<input type="text" value=""/>
Stationery (including postage & photocopying)	Receipts						£	<input type="text" value=""/>
Training courses	Receipts						£	<input type="text" value=""/>
Books & journals	Receipts						£	<input type="text" value=""/>
Subscriptions	Receipts						£	<input type="text" value=""/>
Other (please specify)	Receipts <input type="text"/>						£	<input type="text" value=""/>

Signed **Date**

Please refer to the allowable expenses guidelines to ensure you are offsetting the correct expenses for the duration of your contract