

Other Expenses	£	p	Amount Payable	
			Number of miles (A)	
			Rate (B)	
			Payable	£ p
			Mileage (A x B)	
			Other expenses (C)	
Total (C)			Total Claimed	

Payee certification		Receipt where paid in cash		
		£	p	
I certify that: <ul style="list-style-type: none"> the expenses overleaf have been necessarily incurred by me on school business; the VAT receipts attached cover the period of the claim and the numbers of miles travelled; and I hold a valid Driving Licence. 		Received the sum of		
		Signature		
Signature of payee		Print name		
Print name		Date		
Date				

Payment approval, or for imprest payments, authorisation		
Signature(s):	Name	
	Position	
	Department	
	Date	

User Guidance Notes
<ul style="list-style-type: none"> ✓ Please ensure that this form is fully completed in block capitals ✓ VAT receipts that cover the period of the claim and the numbers of miles travelled must be attached to this reimbursement claim ✓ The form must be signed by the clerk/the Headteacher/the Chair of Governors – where appropriate two signatures may be required. ✓ All claims must have relevant receipts attached. ✓ This form is attached to the policy for Governor Expenses. ✓ If you have any comments or suggestions about the design or functionality of this form contact the Chair of Governors. ✓ This form will be reviewed with the policy when required.