

## **Montgomery Trust Lectures**Expenses Claim form

	I			
NAME:				
ADDRESS:				
DOCTCODE.				
POSTCODE:				
PHONE:				
EMAIL:				
	TI	RAVEL		TOTAL
MILEAGE	MILEAGE COST	RAIL	TAXI	IUIAL
WIILEAGE	WILLEAGE COST	KAIL	IAAI	
	SUBS	ISTENCE		
ACCOMMODATION MEALS			OTHER	
ACCOMMO	DATION	WEALS	OTHER	
		• • • • • • • • • • • • • • • • • • • •	,	
LE	CTURERS FEE (£	200 online, £300 in p	,	
			TOTAL CLAIM	
If you wish to be reimbu provided below.	rsed by BACS payn	nent, please fill in yo	ur bank account number and	l sort code in the space
BANK DETAILS FOR BACs PAYMENT:			SIGNED:	
SORT CODE:				
ACCOUNT No.				
CHEQUES MADE PAYABL	E TO:			
-			DATED:	
Claim details: Travel clair			d class fare.	
EXPENSES RATES				
MILEAGE	£0.45	BREAKFAST	£10.00	
Accommodation London	up to £180.00	LUNCH	£10.00	
Accommodation Elsewhere	up to £108.00	DINNER	£30.00	
All expense claims (excep attached to this form	t mileage) MUST bo	SUBSISTENCE e supported by appro	ppriate receipts or other docur	nentation
OFFICE USE ONLY		Nominal code:		
		Date:		
		Authorised by:		