# Expenses incurred on University business: Application for reimbursement

**UNIVERSITY OF CAMBRIDGE EMPLOYEES ONLY**

This form must be completed in BLOCK CAPITALS. Claims will be settled by bank transfer using the bank account details held by Payroll. A remittance advice will be sent to your University email address. ALL SHADED FIELDS MUST BE COMPLETED BY THE CLAIMANT.

## LAST NAME

## FIRST NAME

## PAYROLL REFERENCE

## LAST FOUR DIGITS OF BANK ACCOUNT NUMBER USED BY PAYROLL

## DEPARTMENT NAME

## UNIVERSITY EMAIL ADDRESS

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## TRAVEL

*(See Chapter 5b of the Financial Procedures Manual for guidance on completion and the Finance Division website for current rates)*

<table>
<thead>
<tr>
<th>Ref</th>
<th>Date</th>
<th>Purpose of journey</th>
<th>From + time left</th>
<th>To + time arrived</th>
<th>Method eg Air/ Rail/ Car</th>
<th>Mileage claimed at 45p*</th>
<th>£</th>
<th>p</th>
</tr>
</thead>
</table>

*Mileage rates for Cambens vehicles may differ*

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## SUBSISTENCE/ACCOMMODATION ALLOWANCE/OTHER EXPENSES

*(For business entertainment claims please attach details re the purpose of the entertainment, the names of all those in attendance and their institutions)*

<table>
<thead>
<tr>
<th>Ref</th>
<th>Date</th>
<th>Nature of expense</th>
<th>£</th>
<th>p</th>
</tr>
</thead>
</table>

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I certify that I have incurred expenses of £ _____________ and the supporting vouchers are attached.

I hereby apply for a refund of £ _____________

Signature of Claimant ___________________________ Date _____________

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Authorised Departmental Signatory

Print Name

Date

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## TOTAL EXPENSES

## LESS ADVANCE TAKEN

## TOTAL CLAIM

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## LINE REF

## ACCOUNTING CODES

## AMOUNT