

The Alan Turing Institute

EXPENSE CLAIM FORM

PLEASE REFER TO THE EXAMPLE COMPLETED FORM TAB ON HOW TO COMPLETE THIS FORM

Name:
Date:
Email:
Sort Code:
Bank Account Number:
Name of Bank:
Organisation Name if not an ATI Employee:

No	Reason for the Claim	Description	Type	Project Code if Known	Date	Net Value	VAT	Gross Total
1	Data Study Group expenses							-
2								-
3								-
4								-
5								-
6								-
7								-
8								-
9								-
10								-
11								-
12								-
		Mileage (see mileage tab)	Car Travel					

* Expense forms will be returned to the claimant if receipts are not submitted or VAT not recorded correctly.
** For entertainment claimed above, provide full details of nature, names and organisation of individuals.
*** If 'Type - Other' selected, please provide detailed description.

Requested by:

Name:
Title:
Date:
Signature:

Signing this form confirms all expenses have been incurred for business use only.

Authorised by:

Name:
Title:
Date:
Signature:

Leave this, for internal use