# Monthly

#### TRAVEL & ASSOCIATED EXPENSES CLAIM FORM FOR AFC RULES 1ST JULY 2013

NHS Greater Glasgow and Clyde

CRIGH TO COMPLETION OF THIS FORM PLEASE REFER TO THE GUIDANCE NOTES.

FORM MUST MOT BE COMPLETED BY LEASED CAR DRIVERS OR HIS DISTAFT)

SCOTLAND

109.00

CLAIM FOR THE MONTH OF	Feb/Mar/May 2016
EMPLOYEE DETAILS (Comp	letion of these fields are mandatory. Please use BLOCK CAPITALS )
NAME (as per current paysig)	Jennifer Armstrong

TOTALS

Feb/Mar/May 2016

ALL SHADED AREAS MUST BE COMPLETED OR CLAIM FORM MAY BE RETURNED AND PAYMENT DELAYED

VEHICLE DETAILS (WHERE MILEAGE BEING CLAIME) EXCESS TRAVEL (See Guidance)

NAME (de per current payslip). HOME ACORESS		155	Jennifer Armstrong		CARREGISTR	ATION NUMBER				TEMPORARY / PERMANENT BASE	* CHANGE OF			
		201 4707	ENG#6 925							EXCESS RETURN WILEAGE ( COST * FOR (A) HOME TO BASE				
DESIGNATION			130	Medical Director							NO OF DAYS / OCCASIONS TRAVELLED /			
BASE				JB Russell House		COZ EMISSIONS LEVEL  MOT EXPREY DATE					TOTAL MILES/COST* (A			
SINGLE DISTANCE FROM HOME TO PERMANENT WORKPLACE MLES		E				IODEL			χ.					
GAR CHANGED	SINCE	LAST C	LAM? Y	EU NO '	IF 'YES' PLEASE ATTACH A COPY O	F YOUR INSUR	ANCE POLIC	Y			DATE OF CHANGE?	1 1		
						MILI	AGE			_	EXPENSES			
DATE	PON PONT	STARTA STARTA	SURING DOM	DETAILS OF JOJUHNEY (INCLUDING NAMES OF PASSENGERS) OR DESCRIPTION OF CLAM	FIAL JOURNEY MILEAGE	CALL-OUT OVERTIME AND RESERVE RATE	PASSENGER MLEAGE	USE ONLY	TIME	RETURN	DETAILS OF SUBSISTENCE OR OTHER EXPENSES CLAMED	AMOUNT CLAMES		
08.03.18	B	N	N	Glasgow - Edinburgh - Glasgow (Train Ticket)	M	п	M		(+0)	[77]	ra .	24.00		
21.03.18	В	N		Glasgow - Edinburgh - Glasgow (Train Ticket)						-		24.00		
26.04.18	В	N	N	Glasgw - Edinburgh - Glasgow (Train Ticket)								24.00		
08.05.18	В	N	N	Glasgow - Edinburgh - Glasgow (Train Ticket)								24.00		
31.05.18	В	N	N	Glasgow - Edinburgh (Train Ticket)								13.00		
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						-	41.000	Sharmer T			4			
			1 15											
		4												



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NHS Greater Glasgow and Clyde

(PRIOR TO COMPLETION OF THIS FORM PLEASE REFER TO THE GUIDANCE NOTES.
FORM MUST NOT BE COMPLETED BY LEASED CAR DRIVERS OR HINAD STAFF)

SCOTLAND

TEMPORARY / PERMANENT \* CHANGE OF BASE

VEHICLE DETAILS (WHERE MILEAGE BEING CLAIMEI EXCESS TRAVEL (See Guidance)

CLAIM FOR THE MONTH OF August 2018

EMPLOYEE DETAILS (Completion of these fields are mandatory, Please use BLOCK CAPITALS)

Jennifer Armstrong

ALL SHADED AREAS MUST BE COMPLETED OR CLAIM FORM MAY BE RETURNED AND PAYMENT DELAYED

CAR REGISTRATION NUMBER

HOME ACCRESS					ENGINE SIZE					EXCESS RETURN MILEAGE / COST * FOR HOME TO BASE	(A)	
DESIGNATION			( a)	Medical Director								(9)
			B	JB Russell House		COZ EMISSIONIS LEVEL  MOT EXPRY DATE  MAKE AND MODEL					TOTAL MRES / COST . (A : CLAIMED	
SINGLE DISTANCE FROM HOME TO PERMANENT WORKPLACE MILES												
CAR CHANGED	SINCE L	AST CL	AM7 Y	EN NO * IF YES PLEAS	SE ATTACH A COPY O	F YOUR INSUI	RANCE POLIC	Υ			DATE OF CHANGE?	1
						WIL	EAGE		EXPENSES			
DATE	PEASON FOR TOWNS	STANT.	DO 47 PO 41	DETALE OF COURSE PROCESSOR OF COURSE	FULL JOURNEY MLEAGE	CALL-OUT OVERTIME AND RESERVE RATE	PASSENGER MLEAGE	USE ONLY	DEPART.	ME OF		AMOUNT CLAMED
22,08,18	B	N	N	Glasgow - Edinburgh - Glasgow (Train Ticket)	- A		M	(9)	(10)	Pro	ft.th	24.70
03.09.18	В	N	N	Glasgow - Edinburgh - Glasgow (Train Receipt, ticket not available)								24.70
						1						
	_											
										P.		
	CHIPTON.						-					
					_		-			1000		
TOTALS												49.40



HOME ADDRESS

TOTALS

## TRAVEL & ASSOCIATED EXPENSES CLAIM FORM FOR AFC RULES 1ST JULY 2013

### NHS Greater Glasgow and Clyde

(PRIOR TO COMPLETION OF THIS FORM PLEASE REFER TO THE GUIDANCE NOTES.
FORM MUST NOT BE COMPLETED BY LEASED CAR DRIVERS OR HM AD STAFF)

ENGNE SIZE

VEHICLE DETAILS (WHERE MY

CAR REGISTRATION NUMBER

NHS

98.85

MEI EXCESS TRAVEL (See Guidance)

EXCESS RETURN MLEAGE / COST \* FOR HOME TO BASE

TEMPORARY / PERMANENT \* CHANGE OF BASE

CLAIM FOR THE MONTH OF Sept/Oct 2018

EMPLOYEE DETAILS [Completion of these fields are mandatory, Please use BLOCK CAPITALS]

IAME

Jennifer Armstrong

ALL SHADED AREAS MUST BE COMPLETED OR CLAIM FORM MAY BE RETURNED AND PAYMENT DELAYED

DESIGNATION  BASE  SINGLE DISTANCE FROM HOME			Medical Director						NO OF DAYS / DCGASIONS TRAVELLED /							
		100	JB Russell House  MOTEMPHY DATE  MAKE AND MODEL						TOTAL MEES/COST*							
TO PERMANENT WORKPLACE MILES																
CAR CHANGED	SINCE	LAST CI	AIM7 VI	E/NO* F7E	S' PLEASE ATTACH A COPY O	F YOUR INSUI	LANCE POLICE			1	DATE OF CHANGE?	1 1				
	5.5	25				MILI	EAGE		EXPENSES							
DATE STATE		START START HOME JOURNE ENDA	START START HOME JOURNAL HOME	ACART START HOME JOARS	SOURCE START HOME	HONE JOSEP EVO.	HOAR HOAR HOAR HOAR HOAR	DETAILS OF JOURNEY IPACLUPING NAMES OF PASSINGERS OF DESCRIPTION OF CLAIM	JOURNEY MLEAGE	EY AND	PASSENGER MILEAGE	OFFICIAL USE ONLY	TIME OF DEPARTURE RETURN		DETALS OF SUBSISTENCE OR OTHER EXPENSES CLAMED	AMOUNT CLAMED
10.09.18	B	N P	N	Classes Barth (Table 21 and 15)					(vol	[11]	P-21	JE FJ				
900000000000000000000000000000000000000		- 30	7000	Glasgow - Perth (Train Ticket)								31.50				
03.10.18	В	N	N	Glasgow - Edinburgh (Train)								24.70				
25.10.18	В	N	N	Edinburgh - (Train & Taxi)								22.00				
30.10.18	В	N	N	Edinburgh - (Train & Taxi)								20.65				
	-	-														
		-														
	-		-													