



4Pay Ltd
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Non-Mileage Expense Claim Form

Name : **Insert Name**

Employee Code: **Insert Code**

PLEASE DO NOT FAX THIS FORM TO US AS WE NEED ALL ORIGINAL RECEIPTS – PHOTOCOPIES CANNOT BE ACCEPTED

1. Please fill in this form with the date, detailed description of the purchase and the total spent.
2. Number the original receipts and mail them to 4Pay Ltd along with this form.
Please Note: Items claimed without an original receipt are not deductible under Inland Revenue rules.
3. **ALL ACCOMMODATION CLAIMS MUST BE ON A FULL RECEIPT WITH A FULL NAME, ADDRESS AND TELEPHONE NUMBER.**
4. Sign at the bottom to confirm all details are correct.

Receipt No.	Date	Description	Total £'s Spent	For Office Use Only
Example 1	01/01/2008	Train Receipt – Southampton to Portsmouth x 5 days	£42.50	
Example 2	01/01/2008	TOOLS - JIGSAW	£149.00	
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
Total				

All vehicle costs are covered by the mileage rate prescribed by the Inland Revenue. This includes fuel, MOT, servicing, Repairs and the cost of providing the vehicle.

The cost of protective clothing, safety clothing and any works tools or equipment may be claimed with the original receipt from purchase.

The cost of business telephone calls may be claimed if individually highlighted on an itemised phone bill. Other telephone costs are not tax deductible.

If required to stay away from home the cost of overnight accommodation may be claimed, providing the claim is accompanied by the original, formal, detailed receipt. Subsistence and a miscellaneous allowance of £5.00 per night away from home may then be claimed. Accommodation receipts must state the full name, address, telephone number and dates of accommodation, The number and names of people covered and, if handwritten, be signed by the hotel.

To qualify, expenditure must have been incurred wholly and exclusively in the performance of the duties of the assignment.

I hereby certify that the above is a true and accurate record of allowable expenses incurred whilst on assignment (signed)..... DATE.....

UNSIGNED EXPENSES CANNOT BE PROCESSED