Instructions to complete the EXPENSES CLAIM FORM For ACST-2 Collaborators' Meeting 2025

- Please read the instructions and use EXAMPLE (page 2) as a reference when filling out your EXPENSES CLAIM FORM
- 2. Please retain <u>all</u> travel related receipts and attach scanned receipt to your expense claim. Receipt must be ORIGINAL (i.e Self-made receipts or simplified versions are not acceptable) If you are unable for any reason to be able to do so, please attach a covering note giving reason(s).
- 3. Name of Department you are claiming from is NDPH
- 4. In the top right corner of the form please write your study team name in block capitals
- 5. Complete CLAIMANT/PAYMENT DETAILS. CLAIMANT's name must match bank account name.
- 6. Complete PAYMENT DETAILS for reimbursement of funds
- 7. Accommodation is already provided, so please do not include it on the form. Travel and airport transfers via public transport can be re-imbursed.
- 8. Claimant Signature Please sign and date
- 9. The bottom table (BUDGET/COST CODING) will be completed by Oxford staff (i.e. leave it blank)
- 10. Create an email containing, within the body of the email, the following statement.
 - 'I (name) confirm that the claim for reimbursement of (amount £0000.00) whilst on University business during the period (date range) is in respect of bona fide business expenses, incurred wholly, exclusively and necessarily on behalf of the University.'
- 11. Please send your EXPENSES CLAIM FORM to: acst@nds.ox.ac.uk
- 12. Please address any queries via email to: acst@nds.ox.ac.uk

EXPENSES CLAIM FORM - CLAIMANTS EXTERNAL TO THE UNIVERSITY

Staff and students claiming reimbursement of expenses should submit claims via SAP Concur.

Please download form - completing the form in your web browser may not retain all data.





Form: R12 ExpExternal v1.0

Feb-22

Please see guide to completion at the end of this document to assist you in correctly completing this form. Name of Department you are claiming from: DPH ABC-Trial. CLAIMANT / PAYEE DETAILS (see note 1) Name: John Smith B House, Portland Place ondor Address: E-Mail: Johns 4 (a) nhs. com Tel. Number: PAYMENT DETAILS (note 2) UK Bank Sort Code: UK Bank Account Number: Either IBAN: Swift: Non UK Bank Account Number: Name on Account: Non UK Bank Name & Address: Non UK Bank Code: Further Credit(if applicable): TRAVEL EXPENSES (continue on 'Extra Lines' sheet as required) (note 3) End Date Travel From 40,00 15/May /2025 15/May / 2025 Newquay GBP London Gatwick Air 1 Purpose of Journey: Joint Annual Meeting Collaborators 16/May/2025 16/May/2025 London Gatwick GBP 75.00 Newquay 2 Purpose of Journey: Joint Annual Collaborators' Meeting 2025 15 May / 2025 16 / May / 2025 London Gatwick Victoria Train GBP 35. Purpose of Journey: Joint Annual Collaborators Meeting 2025 / Gatwick Express Train (Return SUBSISTENCE / OTHER EXPENSES (continue on 'Extra Lines' sheet as required) (note 4) Start Date End Date Curr Amount GBP GBP GBP GRP GBP GBP 20 TOTAL: (this sheet - note 5) 150 Declaration (note 6): I confirm this claim is in respect of bona fide business expenses, incurred wholly, exclusively and necessarily on behalf of the University and are in line with the University's expenses principles. Plus: sub-total extra sheets Date: 20/May / 2025 John Less: funded from non-University sources 20 BALANCE NOW CLAIMED (note 5) 150 Budget-holder Check: Authorisation (note 7): Date: BUDGET / COST CODING (for department use only) (note 8) VAT AMOUNT COST CENTRE NATURAL ACCT ACT SOURCE of FUNDS FUTURE ORG (note 9) 000000 000000 000000 000000 000000 GROSS AMOUNT CODE (note 9) VAT AMOUNT PROJECT TASK EXPENDITURE TYPE EXPENDITURE ORG PROJECTS

< Checksum: this total should agree with the Balance Now Claimed