

IMPORTANT: Instructions to complete the Expense Form.

- Please retain all travel related receipts.
- In the top right corner of the form please write your study team name in block capitals
- Complete claimant/payee details
- Complete payment details for reimbursement of funds
- Mileage claims – please attach a google map route indicating return mileage and complete the first tabulated box under Travel Expenses. This is calculated at 0.45 per mile.
- Please attach ORIGINAL receipts to your expense claim. If you are unable for any reason to be able to do so, please attach a covering note giving reason(s).
- List any subsistence
- Claimant Signature – sign and date.
- The bottom table will be completed by office staff.
- Postal Address for all expenses:
 - Include “If Undelivered” address on reverse of envelope
 - You may wish to send via Recorded Delivery due to personal sensitive information being contained on the form.
 - **For the Attention of:**

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