

**DEFENCE  
POLICE  
FEDERATION**

|            |
|------------|
| Voucher No |
| Account    |
| Folio No   |
| Date       |
| Cheque No  |

**TRAVELLING & EXPENSES CLAIM FORM**

|               |
|---------------|
| FULL NAME:    |
| FULL ADDRESS: |
| STATION:      |

Please tick:    **CHEQUE**     **BACS** (please complete below):     **ADVANCE** (please choose payment option)

|                           |                    |
|---------------------------|--------------------|
| <b>SORT CODE:</b>         | <b>ACCOUNT NO:</b> |
| <b>NAME ON ACCOUNT:</b>   |                    |
| <b>BANK &amp; BRANCH:</b> |                    |

**REASON FOR CLAIM:** ANNUAL CONFERENCE     NEC     CASOC     OTHER  .....

**IN RECEIPT OF HONORARIA?**    YES     NO

| DATE | FROM | LEAVING TIME | TO | ARRIVAL TIME |
|------|------|--------------|----|--------------|
|      |      |              |    |              |
|      |      |              |    |              |
|      |      |              |    |              |
|      |      |              |    |              |

|   |                       |                               |
|---|-----------------------|-------------------------------|
| <b>1. RAIL FARE from</b>                                | <b>To</b>             |                               |
| <b>2. AIR FARE from</b>                                 | <b>To</b>             |                               |
| <b>3. OTHER FARES – 1. PUBLIC TRANSPORT    2. TAXI</b>  | <b>1. £</b>           |                               |
| <b>3. CAR FUEL</b>                                      | <b>2. £</b>           |                               |
|   | <b>3. £</b>           |                               |
| <b>4. PRIVATE CAR ALLOWANCE MILES**</b>                 | <b>at 45 pence</b>    | <b>Per Mile</b>               |
| <b>a) PASSENGER    b) CARRIAGE OF EQUIPMENT</b>         | <b>a) 3p    b) 2p</b> | <b>Per Mile</b>               |
| <b>5. SCALED ALLOWANCE</b>                              | <b>No of nights</b>   | <b>at £ 5.00    Per Night</b> |
| <b>6. ACCOMMODATION</b>                                 | <b>No of nights</b>   | <b>At £    Per Night</b>      |
| <b>7. RECEIPTED MEALS</b>                               | <b>Lunch/Dinner</b>   | <b>At £</b>                   |
| <b>8. ADVANCEMENT PAID UP TO 90% of estimated costs</b> | <b>At £</b>           | <b>Date paid</b>              |
| <b>9. LESS ADVANCEMENT PAID</b>                         | <b>Date paid</b>      |                               |
| <b>TOTAL</b>  |                       |                               |

\*\* Mileage is restricted to the cost of non-first-class travel. Proof may be required of the cost of such a journey. Passengers are to be identified and are to be representative persons.  
**Where it is appropriate CLAIMS ARE TO BE RECEIPTED and receipts are to be full receipts. If fully itemised receipt has not been attached an explanation should be provided.**

I certify that the above claim was for attendance on Federation business. When accommodation is claimed it is necessary in respect of nights spent away from home. I acknowledge that if I am in receipt of a **TRANSFER GRANT/ALLOWANCE** I have read the appropriate PRG and have informed the DPF of my transfer status.

**CLAIMANT SIGNATURE:** .....    **DATE:**    /    /

**OFFICE USE ONLY**

I certify that the above claim is correct and that the expenses claimed are for attendance at a meeting on Federation business.

**AUTHORISING SIGNATURE:** .....    **DATE:**    \_\_ / \_\_ / \_\_\_\_