

Tur Langton Parish Council

Expenses Claim Form

This form is to be completed electronically and then printed off to be signed and submitted to the clerk.

Name: Alison Gibson

Please confirm your position in the council: Clerk

Please indicate which sections you are completing:

Part 1 <input type="checkbox"/>	Part 2 <input type="checkbox"/>	Part 3 <input type="checkbox"/>	Part 4 <input checked="" type="checkbox"/>
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Part A Travelling

- Mileage** - Please enter details of the travel you are claiming for here. Mileage should be taken from AA Route Planner (<http://www.theaa.com/route-planner/index.jsp>) and accompanied by a print out. Where prior approval was agreed at a Parish Council meeting enter the date in the last column, otherwise leave blank.

Date of travel	Description of travel	Miles	£ per mile	Total £	Approval date
Click here to enter a date.	Click here to enter text.	Click here to enter text.	£0.45	Click here to enter text.	Click here to enter a date.
Click here to enter a date.	Click here to enter text.	Click here to enter text.	£0.45	Click here to enter text.	Click here to enter a date.
Click here to enter a date.	Click here to enter text.	Click here to enter text.	£0.45	Click here to enter text.	Click here to enter a date.
Click here to enter a date.	Click here to enter text.	Click here to enter text.	£0.45	Click here to enter text.	Click here to enter a date.
Click here to enter a date.	Click here to enter text.	Click here to enter text.	£0.45	Click here to enter text.	Click here to enter a date.
Total	Enter the total mileage claim here:			Click here to enter text.	

- Associated Travel Expenses** – for example parking. Please submit receipt with your claim. Where prior approval was agreed at a Parish Council meeting please enter the date in the last column otherwise leave blank.

Date of travel	Description of travel	Amount £	Approval date
Click here to enter a date.	Click here to enter text.	Click here to enter text.	Click here to enter a date.
Click here to enter a date.	Click here to enter text.	Click here to enter text.	Click here to enter a date.
Click here to enter a date.	Click here to enter text.	Click here to enter text.	Click here to enter a date.
Click here to enter a date.	Click here to enter text.	Click here to enter text.	Click here to enter a date.
Click here to enter a date.	Click here to enter text.	Click here to enter text.	Click here to enter a date.

Total	Enter total claimed for here	Click here to enter text.
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Part B Other expenses

3. **Telephone calls.** All claims for telephone expenses must be supported by an itemised bill clearly identifying the calls that make up the amount claimed.

Date of call	Reason for call	Amount claimed £
Click here to enter a date.	Click here to enter text.	Click here to enter text.
Click here to enter a date.	Click here to enter text.	Click here to enter text.
Click here to enter a date.	Click here to enter text.	Click here to enter text.
Click here to enter a date.	Click here to enter text.	Click here to enter text.
Click here to enter a date.	Click here to enter text.	Click here to enter text.
Total	Enter total claim for phone calls here	Click here to enter text.

4. **Other expenses allowed for in the Council's Travel and Expenses Policy.** Claims to be accompanied by receipt, made out to East Langton Parish Council. Where prior approval was agreed at a Parish Council meeting please enter the date in the last column otherwise leave blank.

Date of purchase	Details of purchase	Amount claimed £	Approval date
18/12/2023	Namecheap email domains / mail boxes	40.50	
			Click here to enter a date.
Click here to enter a date.	Click here to enter text.	Click here to enter text.	Click here to enter a date.
Click here to enter a date.	Click here to enter text.	Click here to enter text.	Click here to enter a date.
Click here to enter a date.	Click here to enter text.	Click here to enter text.	Click here to enter a date.
Total	Enter total claimed here	40.50	

5. Total Claim

Category	Amount
1. Mileage	Click here to enter text.
2. Associated Travel Expenses	Click here to enter text.
3. Telephone calls	Click here to enter text.
4. Other Expenses	40.50
Total Claim	40.50

Please print this form off, sign and date it and submit to clerk with AA Route Planner print out / receipts / itemised phone bill as appropriate

Signature _____

Date 30/12/23

For completion at meeting

Approved (meeting date)	
Signature (Chair)	
Minute reference / EXP reference	