



Manchester
Metropolitan
University

MMU STAFF CLAIM FORM FOR EXPENSES

(PAYMENT WILL BE MADE VIA THE PAYROLL SYSTEM)

FIN1A

For the Period: From: To:

Forenames:	Surname:
Department:	Primary Number: <i>(Printed on inside of Payslip)</i>
MMU ID:	Payroll Area: <i>(Printed on inside of Payslip e.g. MM, EM)</i>

Expense Type (<u>all</u> details must be included on the other tabs)	Total Amount
Mileage (from the appendix 2 tab)	£
Other Expenses (from appendix 1 / appendix 3 tabs for currency claims)	£
Less Amount of Currency Advance Already Received - if applicable	-£
Total Reimbursement Claimed / (Returned)	£ £0.00

I request reimbursement of the expenses, specified above, incurred *wholly, exclusively and necessarily* on University business & in accordance with the University's Financial Regulations. NOTE - this form should be printed, electronic signatures will not be accepted.

Signature of Claimant	(electronic signature not accepted)	Date
Approved for Payment (Budget Holder)	(electronic signature not accepted)	Date
Budget Holder Name (Please Print)		
Budget Code		
Checked (Finance)		Date

Shaded areas below are for Finance use only. All other sections must be completed prior to reaching Finance

Description Type*	SAP W/T	Miles Claimed	Total Amount	Cost Centre / Project / SIO	Bus. Area
Mileage Higher Rate	2182		Total mileage		
Mileage Lower Rate	2181		£		
Bus Travel	2515				
Train travel	2517				
Air Travel	2519				
Taxi travel	2518				
Conference Fees	2507				
Class Materials	2510				
Subsistence	2500				
TOTAL					

*This is not a full list of description types. For the full list, please visit the Financial and Legal Services website.