Candidate mileage claim for the use of own car on Company business

DATE _____ **FULL NAME** _____

VEHICLE REG _____ **ENGINE CC** _____

DATE	FROM	TO	MILEAGE	Reason for Journey (Including Site)

TOTAL MILEAGE 0

RATE PER MILE

TOTAL PER THIS CLAIM £

Signed (Candidate) _____ Date _____ Signed (Client) _____ Date _____

Print Name _____ Print Name _____

I declare that all information on this form is correct. I declare that these expenses are authorised for payment and receipts have been verified.

Mileage will be repaid at the rate displayed in your assignment sheet for business miles. Fraudulent Claims will be dealt with accordingly.

Signed (Mane Repersentive) _____ Date _____