	EXPENS	SE CLAIM FORM - THE INLAN	D WATER	WAYS	ASSOCIATIO	N
Name:		Office or Committee:				Date:
Date	Details of Claim, travel from / to, nature of business, etc		Mileage rate	Car Miles	Amount Claimed	Bookkeeping Code
I certify that all these expenses were wholly and exclusively incurred for the business of The Inland Waterways Association. I further certify that for any claim in respect of use of a motor vehicle, other than one owned by the company, I am able to produce on request a valid and up-to-date driving licence, valid insurance and a current MOT Certificate (where required).		Mileage claim rate		0	<u>£</u> -	
		TOTAL OF CLAIM		See over/below for guidance		
		Please return this form to the relevant expense authoriser/budget holder.				Please enter Engine size of vehicle and type of fuel used for VAT reclaim purposes
		Payment Authorisation				
		Budget Holder:				
Signed:		Head Office checks:				
					ENGINE SIZEPetrol/Diesel	
PLEASE E	ENSURE ALL RECEIPTS INCLUDI	NG FUEL VAT RECEIPTS ARE STAPLED 1	IO THE BACK	OF THE F	UKM.	

Updated February 2024

EXPENSES							
Reasonable out-of-pocket expenses are offered by the Association. For a full details of IWA's expenses policy, please read the full guidance note at:							
https://waterways.org.uk/volunteer hub/downloads/admin-essentials/expenses							
Travel Costs:							
Where possible please endeavour to find the most cost effective way of travelling including using public transport or hiring a vehicle							
Mileage rates from 1st January 2018:							
Motors Cars							
Maximum per mile for all engine sizes 33p							
Petrol only rate 16p Diesel only rate 13p							
The mileage rates set by the Association are intended to cover fuel and other running costs.							
Where claimants are in the position either to waive their claim or to recover expenditure at less than maximum rates, their additional contribution is recognised and much							
appreciated.							
If you are unclear who the relevant budget holder (i.e. who can approve payment of your expense) is, the please contact the finance team for clarification. Once authorised							
please send your completed form to:							
Finance Team, The Inland Waterway Association, Unit 16B, Chiltern Court, Asheridge Road, Chesham, Bucks, HP5 2PX Tel: 01494 783453							
NEW CLAIMANT							
If you are a new claimant please can you complete the section below, so we can correct record your details and make payment by electronic transfer:							
Surname:	First Name:						
HOME ADDRESS	BANK DETAILS						
Address Line 1	Bank Name:						
Address Line 2	Account Name:						
Town:	Account Number:						
County:	Sort code:						
Postcode:							
Email Address:							