Expense Claim form



For queries about this form, please contact the Finance Service Desk on FinanceServiceDesk@sussex.ac.uk

Are you a visitor or student? Please tick one of the below.

- This form is for student and visitor expenses only expense claims for members of University staff should be submitted via the finance system.
- In submitting this form, you are certifying that the information you have provided is accurate and reflects actual business expenses that you paid for using your own funds.

| Visitor ⊔ | Stu | den | tЦ | | | | | | | | | | | | | | | | | | | | | | |
|---------------------------------------------------------------------------|----------|--------|--------|--------|--------|--------|------|----------|-----|-------|-----|------|------|------|------|------|------|------|------|-------|-------|------|-------|-------|-------|
| Section 1: Personal det | :ails - | - to | be c | om | ple | ted | by | clai | m | ant | t | | | | | | | | | | | | | | |
| Title (e.g. Mr, Mrs, Miss) | | | | | | | | | | | | | | | | | | | | | | | | | |
| Full name | | | | | | | | | | | | | | | | | | | | | | | | | |
| Address | | | | | | | | | | | | | | | | | | | | | | | | | |
| Telephone number | | | | | | | | | | | | | | | | | | | | | | | | | |
| Email address | | | | | | | | | | | | | | | | | | | | | | | | | |
| Today's date | | | | | | | | | | | | | | | | | | | | | | | | | |
| Student registration number (Students only) | | | | | | | | | | | | | | | | | | | | | | | | | |
| Section 2: Bank accoun | it de | tails | (Fo | r Vi | isito | ors o | nly | ') | | | | | | | | | | | | | | | | | |
| Visitors – Please enter your bank ac Students – Your claim will be rei | | | | | y acc | count | dota | ile he | ald | on (| Suc | cco. | v Di | roct | DI | 226 | 0 0 | ncı | ırc | \ + b | at t | hoc | o ar | 2 COI | rract |
| Students – Tour Claim will be re | iiiibuis | eu III | to the | : Dali | ik acc | Journe | ueta | 1115 116 | :IU | 011 3 | ous | 33E | X DI | rect | . PI | :a5 | e e | 1150 | JI E | : (11 | iat t | Hest | z art | : COI | Tect. |
| UK BANK ACCOUNT | : If yo | ur ba | nk a | ccou | nt is | base | d in | the | UK | , pl | ea | se | COI | npl | ete | th | e ir | ıfo | rn | nat | tion | be | low | | |
| Name of account holder | | | | | | | | | | | | | | | | | | | | | | | | | |
| Name of bank | | | | | | | | | | | | | | | | | | | | | | | | | |
| Account number | | | | | | | | | | | | | | | | | | | | | | | | | |
| Sort code | | | | | | | | | | | | | | | | | | | | | | | | | |
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| NON-UK BANK ACCO | DUNT: | If yo | u hav | ⁄e a | non- | -UK b | ank | acco | un | t, p | lea | ase | e co | mp | lete | e th | ıe i | nfo | orı | ma | itio | n be | lov | ı | |
| Name of account holder | | | | | | | | | | | | | | | | | | | | | | | | | |
| Full name and address of ba | nk | | | | | | | | | | | | | | | | | | | | | | | | |
| Account number | | | | | | | | | | | | | | | | | | | | | | | | | |
| Routing number or SWIFT co | ode | | | | | | | | | | | | | | | | | | | | | | | | |
| IBAN code – Please check th | e IBAN | ١ | | | | | | | | | | | | | | | | | | | | | | | |
| code here before completing | g | | | | | | | | | | | | | | | | | | | | | | | | |
| https://www.iban.com/ | | | | | | | | | | | | | | | | | | | | | | | | | |
| Currency | | | | | | | | | | | | | | | | | | | | | | | | | |

Section 3: Details of claim(s) – to be completed by claimant and School/Division

- Receipts are required for all items claimed. Please send these to the relevant School Office/Division, along with this form.
- Claims are paid in Euros, Dollars and GBP. If your claim is in another currency, it will be converted and paid in GBP based on the exchange rate at the date of transaction.
- The Account and Subproject Code columns will be completed by the relevant School Office/Division.

| | To be completed by School/Division | | | | | |
|-------------|----------------------------------------------------------|---------|------------|------|--|--|
| Date of | Please give a full description of your expense and state | Account | Subproject | | | |
| transaction | how this relates to official University business | | code | code | | |
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| | Total | | | | | |
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BSMS STUDENTS: If you are a BSMS student, please now email this form and direct any queries to:

- Accommodation and travel expenses (clinical NHS bursary forms): placementlogistics@bsms.ac.uk. Note that the student travel expenses policy is available at https://www.bsms.ac.uk/undergraduate/fees-and-funding/index.aspx
- ACF/CL Students bursary expenses: <u>bsmsfinance@sussex.ac.uk</u>

ALL OTHER CLAIMANTS: Please email this form and the associated receipts to the School Office/Division who are managing your claim.

Section 4: Authorisation - To be completed by the School/Division

- Please add the Account and Subproject Codes in the boxes in Section 3 above, and the Budget Holder's details in the box below.
- If the claim is for a visitor who attended an interview, please add the post reference into the expense description field in Section 3 above.
- Only one claim should be submitted per claimant.

| Budget Holder's Full Name and Name of School | |
|----------------------------------------------|--|
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Please send a PDF copy of the form and receipts as one attachment to FinanceServiceDesk@sussex.ac.uk. Please ensure that the document is under 5MB in size.