



Contractor Name:

Week Ending:

Car reg (if app)

Car Make

Car Model

Engine Size

Additional Mileage

Date							
Mileage							
Post Code (left)							
Post Code (Destination)							
One Way/ Return	One Way Return	One Way Return	One Way Return	One Way Return	One Way Return	One Way Return	One Way Return
Total	£	£	£	£	£	£	£

Additional Mileage

Date							
Mileage							
Post Code (left)							
Post Code (Destination)							
One Way/ Return	One Way Return	One Way Return	One Way Return	One Way Return	One Way Return	One Way Return	One Way Return
Total	£	£	£	£	£	£	£

Additional Mileage

Date							
Mileage							
Post Code (left)							
Post Code (Destination)							
One Way/ Return	One Way Return	One Way Return	One Way Return	One Way Return	One Way Return	One Way Return	One Way Return
Total	£	£	£	£	£	£	£

Additional Mileage

Date							
Mileage							
Post Code (left)							
Post Code (Destination)							
One Way/ Return	One Way Return	One Way Return	One Way Return	One Way Return	One Way Return	One Way Return	One Way Return
Total	£	£	£	£	£	£	£

Total Additional Mileage	£
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FOR OFFICE USE ONLY

Mileage		
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I confirm that these expenses are wholly, necessarily and exclusively for business use and comply with the 24 month rule*.

Print Name Signature

PLEASE INCLUDE THE ADDITIONAL MILEAGE ON THE EXPENSES FORM TOTAL