



MILEAGE EXPENSE FORM

Contractor Name:

Week Ending:

Car reg (if app)

Car Make

Car Model

Engine Size

Please tick one of the boxes below to claim your expenses:-

- Travel in performance of my duties (excluding travel between home and work)
- No fixed place of work (no more than 40% of time spent at any one location)
- Working outside of Supervision, Direction and Control (this has been agreed with my MyPay Account Manager)

Mileage (Please include VAT fuel receipt)

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	£	£	£	£	£	£	£

Mileage (Please include VAT fuel receipt)

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	£	£	£	£	£	£	£

Mileage (Please include VAT fuel receipt)

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	£	£	£	£	£	£	£

FOR OFFICE USE ONLY

Total Mileage claim	£
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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