This section must be fully filled in and **signed by applicant and MP**

Fill in your car CC and circle the appropriate payment per KM

Name_____ Employee Signature_____

Pharmacy Name_____

Staff Number_____ MP Signature_____

TM Name_____ Date_____

Mileage Guide

Up to 1.2cc	39.12c
1.2 - 1.5cc	46.25c
1.5cc +	59.07c

State your car CC below if claiming mileage

CC.=

ALL RECEIPTS MUST BE ATTACHED

Date	Detailed description of claim reason	MEETINGS	TRAINING	PSI	DELIVERIES	BANKING	OTHER	TOTAL
07/05/2015	Return Journeyl to Liffey Valley for Regional Meetings (24km)	€11.04						€11.04
07/05/2015	2 x toll charge for Journey to Liffey valley for reginoal meeting	€4.20						€4.20
10/06/2015	Taxi to rathmines for Inhaler technique training (approved by TM)		€10.00					€10.00
11/06/2015	Travel to customer house to deliver medication (10km)				€4.60			€4.60
11/06/2015	PSI registration			€400.00				€400.00
13/06/2015	Travel to the bank to drop off lodgements (4km)					€1.84		€1.84

TOTAL =

- Expense forms must now be **itemised** as per columns above. This is to allow finance to keep an eye on budgets for training etc. Expenses have to be factored into the budget.
- **Full detail of 'reason for claim'** must be given. Where you are claiming for mileage the number of KM should be put in brackets as per above.
- This section can be filled in using excel or it can be manually entered.
- The form should then be **printed** > **the top bit should be filled out** > **posted or 'scanned to email' to Norabeth**

Fill in **ALL totals**