

VISITING EXAMINER INVOICE

Name:	Invoice Number:
Address:	Date:
Email:	

INVOICE	
Sub-Board:	Date of Sub-Board:
<i>Description</i>	<i>Amount (£)</i>
Visiting Examiner Fees	£
Expenses incurred from attending Exam Sub-Board, detailed on reverse	£
TOTAL DUE	£

Signature:

BANK OR BUILDING SOCIETY DETAILS

Name of bank:

Bank address:

Sort Code number: __ __ - __ __ - __ __ Account number: __ __ __ __ __ __ __ __

Please note: if you do not include your bank details payment will be made by cheque.

Expenses

Please enclose appropriate receipts in support of your claim for expenses.

Rail Fare (Standard Class) / Economy Airfare (Airmiles will be paid only for travel from Scotland and Ireland, unless otherwise pre-approved.)		Amount Claimed	
		£	p
Date(s)	Description		

Travel by Underground / Public Transport

Date(s)	Description		

Car Mileage Allowance

(For journeys where public transport is not available, a mileage allowance by private car may be claimed of 45p per mile)

Date(s)	Miles		

Car Parking at Railway Station / Airport:

Date(s)	Parking Fee		

Subsistence/ Accommodation Allowances For Time Away over 5 hours:

Time Away between 5 & 10 hours: Up to £5

Time Away greater than 10 hours in one day: Up to £10

Time Away of 24 hours or greater: Up to £105 per 24 hour period

(of which, £85 is the maximum for accommodation costs)

Date(s)	Description		

Postage and/or Telephone Expenses:

Date(s)	Description		

TOTAL CLAIMED

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