

OVERSEAS TRAVEL FINANCE FORM

You must have an approved Overseas Visit Proposal (OVP) submitted alongside this form. Please visit <http://ovp.leedsbeckett.ac.uk>

TO BE SIGNED OFF PRIOR TO A TRIP SO PROPOSED COSTS ARE APPROVED & AFTER A TRIP IF THERE ARE CLAIMABLE COSTS
SUBMIT THIS FORM TO THE PAYMENTS TEAM, 202 QUEEN SQUARE HOUSE OR payments@leedsbeckett.ac.uk

TRIP DETAILS

Name	Project Code	ID/Res no	OVP Number
<input style="width: 90%;" type="text"/>	<input style="width: 90%;" type="text"/>	<input style="width: 90%;" type="text"/>	<input style="width: 90%;" type="text"/>
Date(s) of Visit(s) From - To	Visit To	<input style="width: 100%; height: 40px;" type="text"/>	
<input style="width: 90%;" type="text"/>	Purpose		
<input style="width: 100%; height: 40px;" type="text"/>			

PLANNED EXPENDITURE AND CLAIM

For travel quotes and information please contact Key Travel at leedsbeckett@keytravel.com or 0161 8199762
To confirm bookings you should forward details to stafftravel@leedsbeckett.ac.uk after your OVP and this form have been approved

1. PROPOSED NON-CLAIMABLE COSTS (BEING PAID DIRECTLY BY LEEDS BECKETT)

eg. Things booked prior to the trip, Flights, Car Hire, Pre-paid hotels and so on

Please Specify Supplier	Details	Proposed Costs	Purchase Card/PO Number

2. PROPOSED CLAIMABLE COSTS

eg. Expenses paid for by STAFF initially and reclaimed back from Leeds Beckett after the visit – Receipts **MUST** be provided upon return

Proposed Costs £ Claim Costs £

Subsistence	Breakfast	Lunch	Dinner		
Accommodation Costs	Number of Nights	At cost £			
Travel Costs (Taxi / Vehicle hire / Mileage)					
Other (Please specify)					
Tick to confirm you are insured to use your vehicle for business use (if applicable)	<input type="checkbox"/>			GROSS VALUE OF CLAIM	
Tick if you require an 80% advance	<input type="checkbox"/>			Less Advance payment received	
Bank details already provided to Financial Services	<input type="checkbox"/>			NET VALUE OF CLAIM	

For Subsistence Rates refer to the University's Staff Travel and Expenses Procedure

Claimant Signature

Costs PROPOSAL Approved By

Signature (Authorised Signatory Prior to Trip)

Print Name

Date

Costs CLAIM Approved By

Signature (Authorised Signatory After Trip)

Print Name

Date

By signing the above you authorise payment to be made as per the claim amount

FINANCE OFFICE USE ONLY

Account code	£ (Net)	£ (VAT)	Total (£)
21205			
21206			
Total			

Transaction Number

Date

DAILY LOG OF EXPENDITURE

TRAVEL (21205)

Receipt No	Date	Description	<i>example</i>	Foreign Currency Type A	Foreign Currency Type B	£
			<i>Euro</i>			
1			1.00			
2			2.00			
3			3.00			
4						
5						
6						
7						
8						
9						
10						
11						
12						
		Subtotals	6.00			
		Currency Conversion	1.15			
		Total Cost of Travel £	5.22			

EXPENSES (21206)

Receipt No	Date	Description	<i>example</i>	Foreign Currency Type A	Foreign Currency Type B	£
			<i>Euro</i>			
1			1.00			
2			2.00			
3			3.00			
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
16						
17						
18						
19						
20						
		Subtotals	6.00			
		Currency Conversion	1.15			
		Total Cost of Travel £	5.22			

NOTE: PLEASE CONTINUE ON ANOTHER SHEET IF THERE IS NOT ENOUGH ROOM ABOVE