

**STUDY LEAVE EXPENSES FORM USING CRMS  
ST RICHARD'S CONSULTANTS**

To be completed **IN BLOCK CAPITALS** within 6 WEEKS of course/conference

**NAME:** ..... **GRADE:** ..... **EXT:** .....

**MEETING TITLE:** ..... **DATES:**.....

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CLAIMS CAN ONLY BE MADE IF THE LEAVE IS ON CRMS - SYSTEM TO START 1 AUGUST 2011  
RECEIPTS ARE REQUIRED FOR ALL CLAIMS (EXCEPT MILEAGE)

I wish to claim the following **EXPENSES:**

**COURSE/CONFERENCE FEE:** £.....

**TRAVEL:**

Rail fair (including underground) £.....

Air £.....

Taxi £.....

Private car: Miles ..... @ 0.25pm per mile £.....

**SUBSISTENCE:** Accommodation (max. £60 per night): No nights: ..... £.....

Meals (£5 lunch, £15 evening meal): £.....

<b>TOTAL EXPENSES REQUESTED</b> (all claims <u>MUST</u> be supported by receipts):	£.....
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**SIGNED:** ..... (Claimee) **DATE:** .....

<b>RETURN COMPLETED CLAIM TO BEBBA SMITHERS - MEM - CMEC</b>
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Office use only:

**AUTHORISED BY:** ..... **DATE** .....

**CONSULTANT LEAVE COST CODE:** H45771 7300 **AMOUNT:** £.....

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