



Travel/Subsistence/Other Claim Form – Parent/Carer Delegate

Please submit completed form to:
the Finance Clerk at the locality managing the care of the child or young person

Name:	
Address:	
Postcode:	

I am claiming expenses for this period: from _____ to _____

Please give us details of each journey and attach receipts
- your Social Worker can help if you are unsure what you can claim

On this date _____ I drove _____ miles at 30p per mile

To go to _____ My route was _____

The reason for my journey was _____

Other costs (childminding, bus fares, etc) _____

On this date _____ I drove _____ miles at 30p per mile

To go to _____ My route was _____

The reason for my journey was _____

Other costs (childminding, bus fares, etc) _____

Total claimed: £

Please complete this section if this is your first claim or you change your car

National Insurance Number:	<table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>																				
Date commenced as a foster carer:	<table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>																				
Vehicle c.c. (eg. 1198cc) _____ c.c. and registration number:																					

I certify that I was actually undertaking an authorised journey and that the particulars of my journey are as stated. **Please sign here:** _____