LMS Scheme 3 Grant 31813

RESEARCH EXPENSES CLAIM/ADVANCEMENT REIMBURSEMENT FORM (REX1)

Incurred by: PRINT FULL NAME:	**BANK ACCOUNT DETAILS (evidence required for over £1,000)** *Not required for UOK Staff*	
Internal or external address:	**ACCOUNT NAME:**	
	ACCOUNT NO:	
	SORT CODE:	
	SWIFT CODE (BIC):	
	IBAN:	

DATE OF CLAIM:

University of Kent

If you are not an employee please can you detail your relationship to the University:

EXPENDITURE DETAILS: Please keep each budget type separate (travel, subsistence etc.)

Currency that expenses are to be reimbursed in, if not GBP:	

EXPENDITURE DATE	ACCOUNT	COST CENTRE	PROJECT	DA	SC	TC	AMOUNT (FOREIGN CURRENCY)	EXCHANGE RATE	AMOUNT £	FINANCE USE ONLY - DESCRIPTION FOR POSTING TO AGRESSO
					C1					
					C1					
					C1					
						GRAND TOTAL				

JUSTIFICATION OF EXPENSE CLAIM: Please provide a brief explanation of the purpose of the expense claim (how is this claim related to the research project):

CLAIMANT: SIGNATURE	**DECLARATION/CERTIFICATION**
	I declare that the expenses claimed are in accordance with the approved scales of payment as set out in both the University's and research funder's financial policies and procedures and that no other claim has been or will be made for this expenditure from the University or any other organisation.
AUTHORISED BY: (PRINT & SIGNATURE)	**DECLARATION/CERTIFICATION**
	I certify that the expenses claimed were necessarily incurred on University Research project business and comply with the Research funder's terms and conditions. I confirm all the original receipts are attached, have been checked and are legitimate including proof of any applicable exchange rates.