

## APPLICATION FOR EXPENSES

Name: \_\_\_\_\_ Expense Month/Year: \_\_\_\_\_

Location: \_\_\_\_\_

On completion, please email to [expenses@bostonair.co.uk](mailto:expenses@bostonair.co.uk) or fax to 00441482679091.

- Please fill out the form and send with proof of your expense(s).
- Expense receipts should be numbered and correspond to an expense reference number in the table.
- Expenses can be claimed on a monthly basis i.e. one expenses claim per month.
- Expenses must be submitted **within 2 months** following the end of the month in which they occurred.
- When payment requires the currency to be converted, an average rate for the month in which they occurred will be used.
- Expenses received up to and including the 10<sup>th</sup> will be paid into your account for the 20<sup>th</sup> of the same month.
- Expenses received after the 10<sup>th</sup> and up to and including the 20<sup>th</sup> will be paid by the 2<sup>nd</sup> of the following month.

**NB: Expenses will only be refunded with a fully completed form and evidence of payment.**

**If you have more than one bank account with us, please select which you wish to be paid into:-**

ENGLISH                  GERMAN                  EUROPEAN                  OTHER

Expense Reference	Expense Date	Expense Amount (please state currency)	Description	Office Use
1				
2				
3				
4				
5				
6				
<b>Total Claimed:</b>			<b>Comments (office use):</b>	
<b>Total Paid (office use):</b>				

Signed: \_\_\_\_\_ Date: \_\_\_\_\_  
Bostonair Employee

Signed: \_\_\_\_\_ Date: \_\_\_\_\_ (office use)  
Recruitment Representative

Signed: \_\_\_\_\_ Date of payment: \_\_\_\_\_ (office use)  
Payroll Representative