The Royal College of Ophthalmologists

18 Stephenson Way, London, NW1 2HD

Expenses Reimbursement Form (Updated August 2020)

This excel form allows for automated calculations of the entries

Email form + receipts to: accounts@rcophth.ac.uk

Please tick appropriate box(es)

Committee Meetings at 18 Stephenson Way

Trustees		Finance	
Council		Prof. Standards*	
Education *		Scientific*	
Examinations*		Training *	
Executive		Lay Advisory	
OTG		SAS Group	
International			

* Includes sub-committees

College Events & Courses

Skill Centre Courses		Seminars	

Examinations (including paper setting)

Part 1 FRCOphth		Refractive Surgery	
Refraction Certificate		Part 2 FRCOphth	
Certificate in Laser			

Date of meeting	Mileage @ 45p mile Enter # miles	Rail & air fare £	Tubes, taxis & parking £	Overnight stay £	Other expenses £**	**TOTAL £**
						0
						0
						0
						0
						0
						0
						0
						0
						0
						0
						0
						0
						0
						0
TOTAL MILES	0					
TOTAL £	0	0	0	0	0	0

Supporting receipts should be attached and expenses must be claimed within 3 months of the meeting

Other Meetings/Other expenses**

Expenses will be paid in accordance with the College Expenses Policy. See College website. The key elements include:

Rail fare: The standard rail fare is paid. Where Trustees/Council Members have to work during the journey, first class is allowed.

Air fare: This will be paid to members when the air travel relates solely to the College's activities. Business class fares are permitted for flights over 5 hours in duration.

Mileage: This is paid at 45p a mile. The College reserves the right to subsitute the equivalent of the standard class rail fare.

Overnight: Members may only claim for overnight hotel accommodation including breakfast, if it is strictly necessary. Maximum B&B rate limit is £165 a night, inclusive of VAT.

The College encourages payment by **BACS direct to your bank account**. Please download the BACS payment form from the College website or complete the following details:

Bank account number

Bank sort code

Name on Bank account

Name _____ Signed _____

Address _____

Address _____ Date _____

Post code _____