

| Employee Number Name and Initials Christine Cutland | | | | Please | | as Approp | | | Base | e: Arno | ot Hill Ho | ise Veh | ehicle Details | | | | |
|---|--|-------------------------|----------|-----------------------|-------------|---------------|-----------|-------------|--------|---------|----------------|-----------------|----------------|--------|-----------------------|-----|--|
| Rank & C | Collar No | Division/Dept | | • | | rised Casu | | | Hom | ne to B | ase Milea | | e: Toyota | | | | |
| 3001823 | | NOPCC | | • | | c User | | | 5.6 | | | | No: | E | xact cc 1800 |) | |
| Sundry-F | Receipted E | xpenses – Please | attach, | on the | everse, | original va | at recei | pts (no | pho | tocop | ies or dire | ct/credit | card slips) | | | | |
| Date | Reason fo | r Claim | Amou | nt | VAT | | | Date | | Journ | ey Details | From – | Total Miles | | Total miles less home | | |
| | | | | | | | | | | To Re | | | | | to base | | |
| | | | | | | | L | 01.10.1 | | | | | 23.3 | | 23.3 | | |
| | | | | | | | | 01.10.1 | | | rk to Arno | t Hill | | | 23.3 | | |
| | | | | | | | L | 02.10.1 | | | to FHQ | | 9.5 | | 3.9 | | |
| | | | | | | | | 02.10.1 | | FHQ t | | | 7.8 | | 7.8 | | |
| | | | | | | | | 06.10.1 | | | Hill - Co | _ | 5 | | 5 | | |
| | | | | | | | L | 06.10.1 | | | y H – Arn | | 5 | | 5 | | |
| | | | | | | | L | 09.10.1 | | | /City/Hon | | 5.8 | | 5.8 | | |
| | | | | | | | L | 13.10.1 | _ | | Hill – Lo | ley | | | 4.3 | | |
| | | | | | | | | 14.10.1 | | | | | | | 3.9 | | |
| | | | | | | | | 14.10.1 | | | | | | | 4.3 | | |
| | | | | | | | | 15.10.1 | | | Hill - Not | | 4.1 | | 4.1 | | |
| | | | | | | | | 15.10.1 | 14 | Home | /NTU/Hor | ne | 5.8 | | 5.8 | | |
| Total | | | | | | L | | Total | | | | | | | 96.5 | | |
| I certify that | | claimed are in accorda | | ease mark idelines | (*) previou | isly approved | expenditu | ire in exce | ess of | | For Financ | e Use only | | | | | |
| | | ns or the current appro | oved | | | 1111 | 11/2 | <i>M</i> | | | | • | 1 | | | | |
| scheme | for support | staff and have b | een Ap | proved by | (signature | general g | 9 | mar | | 6 | Cost Centre | Account Code | Job Code | Amount | VAT | Tax | |
| necessa | | onably incurred on F | orce Po | sition/ | 0121 | generally | TOC. | Durta | m | | | | | | | | |
| | | apest practicable mod | e of | | | | | | | | 9102 | 3107 | | | | | |
| transpo | rt has been c | laimed for journeys ou | | tal Expens | es Claime | ed | Amour | | | | | | | | | | |
| force ar | | - November 1 | To | tal receipte | ed eynens | 88 | £ | р | | | | | 1 | | | | |
| | | policy covers business | use To | tal mileage | 96.5 | @ 45 | | 43 | 43 | 2 | | | 1 | | | | |
| and indemnifies the Office of the Police and Crime Commissioner against third party | | | party Es | sential use | r lump su | m | | 1 | | | | | | | | | |
| claims | claims | | | ss Advanc | | | | | | | | | | | | | |
| Where subsistence is claimed, I have actually incurred expenditure because I was prevented by | | | | nount Clair | ned | | | 43 | 4: | 3 | | | | | | | |
| incurred expenditure because I was prevented by official duties from taking my meal in the normal | | | | | | | | ` | | | | | | | | | |
| | way and VAT receipts for all costs are attached. | | | | | | | | | | | | | | | | |
| Signature of Claimant: | | | د | | | | | | | | | | | | | | |



| Employee Number Name and Initials 3001823 Christine Cutland | | | | Please | | as Approp | | | Bas | e: Arno | | | | | | |
|---|----------------------------------|---|----------|--------------|-------------|-----------------|----------|--------|-------|----------|-------------|------------|-------------|--------|-------------|-------------|
| | Sallar No | | a | • | | rised Esse | | - | Цоп | no to D | ase Milea | ma Mak | e: Toyota | Mode | I. Aurie | |
| Rank & C 3001823 | oliar No | Division/Dept NOPCC | | | Ad Ho | rised Casu | aı | | 5.6 | ile to b | ase willea | | No: | | xact cc 180 | 0 |
| | Pagaintad E | xpenses – Please | attach | | | | t roce | | | otoconi | ies or dire | | | | Audt 00 100 | |
| Date | Reason fo | | Amour | | VAT | Original va | it rece | Date | piic | | ey Details | | Total Mile | 9 | Total mile | s less home |
| Date | ixeason io | i Olallii | Allioui | | VAI | | 24.0 | | | To Re | | / | Total Willo | 3 | to base | |
| | | | | | | | 16.10 | | 14 | | /Shire Ha | I/Home | 4 | | 4 | |
| | | | | | | | | 27.10. | | | | 1 | 4.1 | | 4.1 | |
| | | | | | | | | | | | Arnot Hil | | 4.1 | | 4.1 | |
| | | | | | | | | 30.10. | 14 | Home | - FHQ | | 9.5 | | 3.9 | |
| | | | | | | | | 30.10. | 14 | FHQ - | - Home | | 9.5 | | 3.9 | |
| | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | |
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| | | | | | | | | | - | | | | | | | |
| Total | | | | | | | | Total | | | | | | | 20 | |
| I certify that | | | Ple | ase mark | (*) previou | ısly approved e | expendit | | ess o | f | For Financ | e Use only | | | 20 | |
| Travelling | ng expenses | claimed are in accorda | ance gui | delines | () p | , | | 101 | | | | | | | | |
| with Po | lice Regulation | ns or the current appro t staff and have b | oved An | nroved by | (signature | Cons. | 100 | HALLO | in | en | Cost | Account | Job Code | Amount | VAT | Tax |
| | | onably incurred on F | orce Po | sition | Mana | genert 1 | tecc | DUNG | nit | 2 | Centre | Code | | | | |
| busines | s. | eapest practicable mod | Da | te | 10/2 | 2(1.5 | | / " | | | 9102 | 3107 | | | | |
| transpo | rt has been c | laimed for journeys or | | tal Expens | es Claime | d | Amou | nt | | | | | | | | |
| force ar | | policy covers business | usa To | tal receipte | ed expens | es | £ | р | T | | | | | | | |
| | | fice of the Police | To | tal mileage | 20 | @ 45 | | 9 | e | 0 | | | | | | |
| and Crime Commissioner against third party | | | | sential use | | | | | - | | | | | | | |
| claims | | | | ss Advano | | | - | | +- | | | | | | | |
| Where subsistence is claimed, I have actually incurred expenditure because I was prevented by | | | ually | iouni oiun | 1100 | | | ~ | | | | | | | | |
| official duties from taking my meal in the normal | | | rmal | | | | | 9 | 0 | 0 | | | | | | |
| way and VAT receipts for all costs are attached. | | | | | | | | | | | | | | | | |
| Signature of | Signature of Claiman Club Cutano | | | | | | | | | | | | | | | |



| Employee Number 3001823 Name and Initials Christine Cutland | | | | Please Delete as Appropriate • Authorised Essential | | | | | | | ot Hill Ho | use Veh | nicle Details | | | | | |
|---|----------------|-------------------------|---------------|--|-------------|----------------|-------------|-----------|---|------------|----------------|-----------------|---------------|------------------------|-----------------------|-----|--|--|
| Rank & C | Collar No | Division/Dept | - | • | | rised Casua | | | Hom | ne to B | ase Milea | | | e: Toyota Model: Auris | | | | |
| 3001823 | | NOPCC | | 7101100 0001 | | | | | | | | | cact cc 1800 |) | | | | |
| Sundry-F | Receipted E | xpenses – Please | attach, | on the r | everse, | original va | t receip | ts (no | no photocopies or direct/credit card slips) | | | | | | | | | |
| Date | Reason fo | r Claim | Amou | nt | VAT | | 1 | Date | | | ey Details | s From – | Total Mile | s | Total miles less home | | | |
| | | | | | | | | | | To Re | | | | | to base | | | |
| | | | | | | _ | 03.11.1 | | | Hill – Lox | | 4.3 | | 4.3 | | | | |
| | | | | | | | | 03.11.1 | | | y Hs – Arı | | 4.3 | | 4.3 | | | |
| | | | | | | | | 03.11. | | | Hill – MA | SH | 9.9 | | 9.9 | | | |
| | | | | | | | | 03.11.1 | | | | | 10.8 | | 10.8 | | | |
| | | | | | | | _ | 04.11.1 | | | - Arnot I | | 3.8 | | 3.8 | | | |
| | | | | | | | _ | 05.11.1 | - | | Hill – FH | | 4.3 | | 4.3 | | | |
| | | | | | | | _ | 05.11.1 | - | | - Arnot Hi | | 4.3 | | 4.3 | | | |
| | | | | | | | | 10.11.1 | | | | | 5 | | 5 | | | |
| | | | | | | 11.11. | | | | | 5 | | 5 | | | | | |
| | | | | | | | | 11.11. | | | | | 1.5 | | 1.5 | | | |
| | | | | | | | | 12.11. | | | | | 25.7 | | 25.7 | | | |
| | | | | | | | _ | 12.11.1 | 14 | Newa | rk – Arno | t Hill | 25.7 | | 25.7 | | | |
| Total | | | | | (A) 1 | | | Total | | | | | | | 104.6 | | | |
| I certify that | | claimed are in accorda | | ease mark iidelines | (*) previou | sly approved e | expenditure | e in exce | ess of | r | For Financ | e Use only | | | | | | |
| | | is or the current appro | beve | | | Gen! | 2/40. | | | | | | | | | | | |
| scheme | for support | staff and have b | een Ap | proved by | (signature | 9 110 | ryjeg | nov | <u></u> | · k | Cost Centre | Account Code | Job Code | Amount | VAT | Tax | | |
| necessa | | onably incurred on F | orce Po | ate | · N.CU. | agement. | y the | 200 | 000 | | 0103 | 2.4~ | , | | | | | |
| The co | sts of the che | apest practicable mod | e or <u> </u> | | | | | • | | | 9102 | 3107 | | | | | | |
| | | laimed for journeys or | it of To | tal Expens | es Claime | d | Amount | n | | | | | | | | | | |
| force ar | | policy covers business | To | tal receipte | ed expense | es | | Р | Т | | | | | | | | | |
| | | fice of the Police | | tal mileage | | | 4 | 17 | | 07 | | | | | | | | |
| and Crime Commissioner against third party | | | | sential use | | | | | | | | | | | | | | |
| claims | | | | ess Advano mount Clair | | | | | - | _ | | | | | | | | |
| Where subsistence is claimed, I have actually incurred expenditure because I was prevented by | | | | nount Glair | nea | | | 47 | (| 7 | | | | | | | | |
| official duties from taking my meal in the normal | | | | | | | | | | | | | | | | | | |
| way and VAT receipts for all costs are attached. | | | | | | | | | | | | | | | | | | |
| Signature of | of Claimant: | | | | | | | | | | | | | | | | | |



| Employee Name and Initials | | | s | Please | Delete | as Approp | riate | | Base | : Arno | ot Hill House | Vehi | cle Details | ; | | | |
|--|--------------|--|--------|---|-------------|---------------|---------|------------------|-------------|--------|---------------------------|-----------------|---------------------------|--------------|------------------|-----|--|
| Number | | Christine Cutlan | d | • | Autho | rised Esse | ntial | | | | | | | | | | |
| 3001823 | | | | • | Autho | rised Casu | al | | | | | | Make: Toyota Model: Auris | | | | |
| | Collar No | Division/Dept | | • | Ad Ho | c User | | | | e to B | Base Mileage | Reg | xact cc 18 | 800 | | | |
| 3001823 | | NOPCC | | | | | | | 5.6 | | | | | | | | |
| | | Expenses – Pleas | | | | e, original | vat rec | eipts (r Date | | | | | | | | | |
| Date | Reason fo | or Claim | Amou | ınt | VAT | | 1 | | | | ey Details Fr | om – To | Total Mile | s | Total miles less | | |
| | | | | | | - | Reas | | | | | 0.4 | | home to base | | | |
| | | | | | | | | 40.44 | | | Hill - Broxto | owe | 8.1 | | 8.1 | 8.1 | |
| | | | | | | | - | | | | igh Council owe – Home | | 6.9 | | 1.3 | | |
| | | | | | | | - | 13.11. | | | Arnot Hill/H | | 11.2 | | 11.2 | | |
| | | | | | | | - | 14.11.1 | | | Arnot Hill/H | | 11.2 | | 11.2 | | |
| | | | | | | | | 18.11.1 | | | - Derby | onie | 18.6 | | 13 | | |
| | | | | | | | ł | 18.11. | _ | | – Derby – Arnot Hill | | 18.9 | | 18.9 | | |
| | | | | | | | ŀ | 19.11. | | | Arnot Hill | | 4.4 | | 4.4 | | |
| | | | | | | | ŀ | 19.11.1 | | | Hill -Shire F | lall | 3.8 | | 3.8 | | |
| | | | | | | | ı | 20.11.1 | | | Bobbersmil | | 8.2 | | 8.2 | | |
| | | | | | | | | 21.11.1 | _ | | /Fire HQ/Hor | | 12.4 | | 12.4 | | |
| | | | | | | | İ | 22.11.1 | 14 | Home | High Schoo | I/Home | 6 | | 6 | | |
| | | | | | | | 1 | 25.11.1 | | Home | | | 9.5 | | 3.9 | | |
| Total | | | | | | | | Total | | | For Finance Us | | | | 102-1 | + | |
| I certify that | | | | | (*) previou | usly approved | expendi | ture in exc | cess of | f | | | | | | | |
| | | claimed are in accordants or the current appro | | uidelines | | 101 | 201 | | | | | | | | | | |
| | | t staff and have b | een A | Approved by (signature) Approved by (signature) | | | | | <u>`</u> ,, | /_ | Cost Centre | Account Code | Job Code | Amount | VAT | Tax | |
| | | sonably incurred on F | orce P | osition | Mara | gnone | 179 | con | tan (| 5 | ~ | | | | | | |
| busines | | apest practicable mod | e of | ate | | 2-1-15 | ; | ••• | | | 9102 | 3107 | | | | | |
| | | claimed for journeys or | | otal Expens | ses Claime | ed | Amou | | | | | | | | | | |
| force ar | | | T/ | otal receipt | ed evnens | 200 | £ | р | _ | | - | | | | | | |
| | | policy covers business office of the Police | | otal mileage | | | | 46 | 08 | 3 | | | | | | | |
| | | sioner against third p | arty E | ssential use | er lump su | m | | | | | | | • | | | | |
| claims | claims | | | ess Advano mount Clair | | | | | - | | - | | | | | | |
| Where subsistence is claimed, I have actually incurred expenditure because I was prevented | | | | mount Cial | mea | | | 46 | 08 | 5 | | | | | | | |
| by official duties from taking my meal in the | | | | | | | | 4 | | | | | | | | | |
| normal way and VAT receipts for all costs are | | | | | | | | | | | | | | | | | |
| attached. | | | | | | | | | | | | | | | | | |
| Signature of | of Claimant. | Lh3Cuxum | | | | | | | | | | | | | | | |



| Employee Number Name and Initials 3001823 Christine Cutland | | | | Please | | as Appropr | | | Base | | | | | | | |
|---|---|--|---------|-------------|---------------------|----------------|-----------|------------|---------|----------|----------------|-----------------|------------------|--------|-------------------------------|-----------|
| | | Christine Cutland | d | • | | rised Essen | | H | Ham | - 4- D | ann Milan | Mak | a. Tayata | Model | · Aurio | |
| Rank & C 3001823 | ollar No | Division/Dept NOPCC | | • | | rised Casua | ai | | 5.6 | ie to B | ase Milea | | e: Toyota No: | | xact cc 1800 | 1 |
| | Pagainted 5 | | ottooh | on the | Ad Ho | | t rocoir | | | tocon | oc or dire | | | | Addt 00 100t | , |
| | Reason fo | xpenses – Please | Amou | | VAT | original va | | Date | | | ey Details | | Total Mile | | Total miles | loce home |
| Date | Reason to | r Claim | Amoui | ΠL | VAI | | | Date | | To Re | | s Fioiii – | TOTAL MILLE | • | Total miles less home to base | |
| 17.12.14 | ca Pa | 1/1/ | | .00 | 1-00 | | - | 25.11.1 | | | o Arnot H | iili | 4.3 | | 4.3 | |
| 17.16.14 | Co ra | | | 5.00 | ι ω | | | 20.11. | 17 | i ii Q t | O AIIIOCII | | 4.0 | | 4.0 | |
| 20.1.15 | Car P | am_ | - 1 | .70 | | | F | | | | | | | | | |
| 20 | | | - | | | | | | | | | | | | | |
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| | | | | | | | - | | _ | | | | | | | |
| | | | | | | | H | | _ | | | | | | | |
| Total | | | - | 7.70 | | | _ h | Total | | | | | | | 4.3 | |
| I certify that | | | Ple | ease mark | (*) previou | sly approved e | xpenditur | re in exce | ess of | | For Financ | e Use only | | | | |
| | | claimed are in accordants or the current appro | | idelines | | 1.00 | 11/2 | | | | | | | | | |
| scheme | for suppor | t staff and have b | An An | proved by | (signature | ortia | Mey | mor | <u></u> | 6 | Cost Centre | Account Code | Job Code | Amount | VAT | Tax |
| | | onably incurred on F | orce Po | sition | Man | agement | 1.6.12 | cou | Sol | V | | | | | | |
| busines The co | | eapest practicable mod | e of | | | | | | | | 9102 | 3107 | | | | |
| transpo | rt has been o | laimed for journeys or | | tal Expens | es Claime | d | Amount | t | | | | | | | | |
| force ar | | policy covers business | use To | tal receipt | ed expens | es | 2 | р | T | _ | | | | | | |
| | | fice of the Police | To | tal mileage | 43 | @ 45 | | 1 | 9 | EL. | | | | | | |
| | rime Commiss | sioner against third p | | | er lump sur e No | | | | - | , | | | | | | |
| | claims | | | nount Clair | | | | _ | - | 4. | | | | | | |
| | Where subsistence is claimed, I have actually incurred expenditure because I was prevented by | | | | | | | 9 | 0 | 弘 | | | | | | |
| | official duties from taking my meal in the normal | | | | | | | | | | | | | | | |
| way and | way and VAT receipts for all costs are attached. | | | | | | | | | | | | | | | |
| Signature of | of Claimant: | | | | | | | | | | | | | | | |



| Employee Number Name and Initials | | | Please | | as Appropi | | | Base | e: Arno | ot Hill Hou | ise Ve | hicle I | Details | | | | | |
|-----------------------------------|--|--|---------|-----------------------|-------------|-----------------|----------|------------|-----------|-------------|----------------|-----------------|---------|---------|---------|-----------------------|-----|--|
| 3001823 | | Christine Cutlan | d | • | Autho | rised Esser | ntial | L | | | | | | | | | | |
| Rank & C | ollar No | Division/Dept | | • | Autho | rised Casua | al | | | ne to B | ase Milea | | | | Model: | | | |
| 3001823 | | NOPCC | | • | Ad Ho | | | | 5.6 | | | | _ | | Ex | act cc 1800 | | |
| Sundry-F | Receipted E | xpenses – Please | attach, | on the | | original va | t receip | ots (no | pho | tocop | ies or dire | ect/credi | card | slips) | | | | |
| Date | Reason fo | r Claim | Amour | nt | VAT | | | Date | | | ey Details | From – | Tota | al Mile | S | Total miles less home | | |
| | | | | | | | | | To Reason | | | | | | to base | | | |
| | | | | | | | | | | | Hill to Br | | 8 | | | 8 | | |
| | | | | | | | _ | 01.12. | | | igh Cound | | | | | | | |
| | | | | | | | _ | 01.12. | _ | | owe to Ho | me | | 6.5 | | 0.9 | | |
| | | | | | | | | 02.12. | | | to FHQ | | 9.5 | | | 3.9 | | |
| | | | | | | | | 02.12. | | | o Arnot H | | 4.3 | | | 4.3 | | |
| | | | | | | | | 02.12. | | | Hill to Cit | | 3.5 | | | 3.5 | | |
| | | | | | | | _ | 02.12. | _ | | /Sneinton | | 3.6 | | | 3.6 | | |
| | | | | | | | _ | 03.12. | _ | | Hill to Co | | 5 | | | 5 | | |
| | | | | | | | _ | 04.12. | | | /City/Home | | | 4.8 | | 4.8 | | |
| | | | | | | | _ | 05.12. | | | /City/Home | | 4.4 | | | 4.4 | | |
| | | | | | | _ | 06.12. | | | /City/Hom | | 4 | | | 4 | | | |
| | | | | | | | _ | 09.12. | | | County | | 1.7 | | | 1.7 | | |
| | | | | | | | _ | 17.12. | 14 | Arnot | Hill to Cit | :y | 3.1 | | | 3.1 | | |
| Total | | | | | | | | Total | | | | | | | | 47.2 | | |
| I certify that | | | | ease mark idelines | (*) previou | isly approved e | xpenditu | re in exce | ess of | f | For Financ | e Use only | | | | | | |
| | | claimed are in accordants or the current appro | how | | | (1) | 11.11 | | | | | | | | | | _ | |
| scheme | for suppor | t staff and have b | een Ap | proved by | (signature | agener F | Maryn | egor | m | 1 | Cost Centre | Account Code | Joh | b Code | Amount | VAT | Tax | |
| necessa | | onably incurred on F | orce Po | sition | .p.v.lary | agement. | Page C, | pent | ant | | | | _ | | | | | |
| | | eapest practicable mod | | | | | y | | | | 9102 | 310 | | | | | | |
| | | laimed for journeys or | | tal Expens | es Claime | d | Amoun | | | | | | | | | | | |
| force ar | | | To | tal receipte | ad avnanc | 96 | £ | р | _ | | | | | | | | | |
| | | policy covers business fice of the Police | | tal mileage | | | | 21 | 2 | 4 | | | | | | | | |
| | | | arty Es | sential use | er lump su | m | | | | | | | | | | | | |
| claims | | | | ss Advanc | | | | | | | | | | | | | | |
| | Where subsistence is claimed, I have actuall | | | nount Clair | ned | | | 21 | 2 | 4 | | | | | | | | |
| official | incurred expenditure because I was prevented by official duties from taking my meal in the normal | | mal | | | | | | | , | | | | | | | | |
| | way and VAT receipts for all costs are attached. | | | | | | | | | | | | | | | | | |
| Signature of Claimant: | | | | | | | | | | | | | | | | | | |