NORTH YORKSHIRE POLICE

BUSINESS MILEAGE CLAIM FORM

(This form is not for re-location claims)

Name	Jo Coles	**Month**	September
Pin No		**Year**	2025
Collar No		**Car Reg**	
		Date of change of car (If applicable)	
		Engine CC	
		Home post code	

Cost Centre

This must be the actual Engine CC from your V5 Reg document

FORM REF: 31

Date	Journey Start Location	Start Time 00:00	Post Code	Places visited	Journey Finish Location	Finish Time 00:00	Post Code	Reason/s for Journey eg: Meeting (Drop Down fields)	A Miles Travelled	B Home to Work Mileage to Deduct Ref: Point 1	Miles Claimed (A minus B)
01/09/2025	West Offices	08:45	HOME	Easingwold Planning College	Easingwold	09:30	YO61 3EG	Conference	12	0	12
01/09/2025	Easingwold	12:00	YO61 3EG	Easingwold Planning College	West Offices	12:45	HOME	Conference	12	0	12
05/09/2025	Home	13:00	HOME	Upper Poppleton	Upper Poppleton	13:30	YO26 6DD	Filming	4	0	4
05/09/2025	Upper Poppleton	14:30	YO26 6DD	Upper Poppleton	Home	15:00	HOME	Filming	4	0	4
										Total Miles	**32**