

FT Ref No.

Transferred from FT1
form and issued via
Chief Executive's Office

Foreign Travel Reconciliation Form (FT2)

Team and Directorate: _____

Dates of Visit: _____

Destination (Place and Country): _____

Lead Officer (for coordination purposes): _____

Benefits of Visit: (Separate report attached) Yes No

Original Estimated Total Cost: _____	Sub Totals	Travel	_____
		Accommodation/Meals	_____
		Other	_____
		Total Actual Cost	_____

NB if the actual cost is higher than estimated cost please provide an explanation below:

Please indicate if any entertainment was provided for third parties: Yes No

If yes please give a brief description:

If the visit was covered by external funding, please confirm that the appropriate claim has been submitted: Yes No Not Applicable

If No, please provide a brief explanation:

FT2 form checked by relevant accountancy section

Finance Manager Signature: _____

Date: _____

Completed FT2 form received by the Chief Executive's Office

Chief Executive Signature: _____

Date: _____

Summary of Expenditure Details

– to be completed collectively for all members of the delegation

1. Amounts pre-paid by the Authority (by purchase order or purchase card) – receipts must be provided in all cases

Details	Travel £	Meals/ Accommodation £	Other £
Sub Totals			

2. Amounts paid by individuals and reimbursed on return to UK e.g. local travel to/from airport (please attach a copy of claim form)

Details	Travel £	Meals/ Accommodation £	Other £
Sub Totals			
Totals			

If relevant, show contributions from other bodies (name of body and details/amount):

NB - Employee Code of Conduct Form 7 should be completed by each individual for any hospitality and/or gifts received during visit

Foreign Currency Reconciliation

– to be completed collectively for all members of the delegation

Currency in hand from previous visit (if applicable)		
Initial foreign currency advance (if applicable)		<i>Please attach appropriate documentation for purchase of currency*</i>
Further advances from Authority funds during visit (if applicable)		<i>Please attach appropriate documentation for purchase of currency</i>
Total foreign currency taken on visit		
Foreign currency balance at end of visit		
Foreign currency expenditure Travel Meals/Accommodation Other Total	<hr/> <hr/>	<i>Please give a detailed breakdown on a separate spreadsheet and attach with this form along with copies of all receipts**</i>
Sterling Equivalent Travel Meals/Accommodation Other Total	<hr/> <hr/>	Please indicate exchange rate used below: £1 =
Currency paid back to bank (if applicable)		Please attach appropriate documentation
Currency on hand for future visits (if applicable)		

Lead Officer Signature:

Date:

Sum in hand verified by:

Date:

*Currency advances can be arranged from Council resources (see section 4.8 of Foreign Travel Policy)

**This should be prepared by the Lead Officer for the Visit on behalf of the delegation as a whole (see section 4.6 of the FT Policy).

Summary of Allowances

– to be completed by each individual member of the delegation

Breakfast £6.49
Lunch £8.93
Afternoon Tea £3.52
Dinner £11.06

Name: _____ Visit Date: _____ Destination (place and country): _____

Date	Please tick individual meals provided so that the appropriate deductions can be made or tick 'all meals provided' if appropriate.				Subsistence (Q £30 per day (non-taxable) £	Deductions for meals provided £	Total amount due to claimant for Subsistence (non-taxable) £	Out of Pocket Allowance (Q £22 per 24 hour period (taxable) £
	Breakfast <input type="checkbox"/>	Lunch <input type="checkbox"/>	Afternoon Tea <input type="checkbox"/>	Dinner <input type="checkbox"/>		All Meals Provided <input type="checkbox"/>		
	Breakfast <input type="checkbox"/>	Lunch <input type="checkbox"/>	Afternoon Tea <input type="checkbox"/>	Dinner <input type="checkbox"/>		All Meals Provided <input type="checkbox"/>		
	Breakfast <input type="checkbox"/>	Lunch <input type="checkbox"/>	Afternoon Tea <input type="checkbox"/>	Dinner <input type="checkbox"/>		All Meals Provided <input type="checkbox"/>		
	Breakfast <input type="checkbox"/>	Lunch <input type="checkbox"/>	Afternoon Tea <input type="checkbox"/>	Dinner <input type="checkbox"/>		All Meals Provided <input type="checkbox"/>		
	Breakfast <input type="checkbox"/>	Lunch <input type="checkbox"/>	Afternoon Tea <input type="checkbox"/>	Dinner <input type="checkbox"/>		All Meals Provided <input type="checkbox"/>		
	Breakfast <input type="checkbox"/>	Lunch <input type="checkbox"/>	Afternoon Tea <input type="checkbox"/>	Dinner <input type="checkbox"/>		All Meals Provided <input type="checkbox"/>		
	Breakfast <input type="checkbox"/>	Lunch <input type="checkbox"/>	Afternoon Tea <input type="checkbox"/>	Dinner <input type="checkbox"/>		All Meals Provided <input type="checkbox"/>		
	Breakfast <input type="checkbox"/>	Lunch <input type="checkbox"/>	Afternoon Tea <input type="checkbox"/>	Dinner <input type="checkbox"/>		All Meals Provided <input type="checkbox"/>		
	Breakfast <input type="checkbox"/>	Lunch <input type="checkbox"/>	Afternoon Tea <input type="checkbox"/>	Dinner <input type="checkbox"/>		All Meals Provided <input type="checkbox"/>		
	Breakfast <input type="checkbox"/>	Lunch <input type="checkbox"/>	Afternoon Tea <input type="checkbox"/>	Dinner <input type="checkbox"/>		All Meals Provided <input type="checkbox"/>		
Please indicate if any personal benefits were obtained (e.g. air miles, hotel loyalty points) Yes <input type="checkbox"/> No <input type="checkbox"/>					Totals		£	£
					Non Taxable		Taxable	
					-£		-£	
					Deduction for personal expenditure met from Local Authority Purchase Card or Local Authority Currency (if applicable) – see section 4.7 of Foreign Travel Policy		Deduction for any personal advance in relation to Out of Pocket Allowances (if applicable)	

I declare that my claim is correct and that where claimed I have actually and necessarily incurred expenditure as indicated. Except as shown I have not made and will not make any claim for travelling or subsistence allowance or any other expenditure in connection with the duties indicated.

Signature: _____ I approve the above expenditure Chief Officer: _____

Please note:

1. Receipts must be provided for all expenditure over and above the amounts claimed as allowances wherever possible. A reason must be given when a receipt is not attached.
2. Expenses claimed on page 2 can relate to cash transactions or payments via individual's own credit card.
3. 'Other expenditure' on travel, accommodation or miscellaneous expenses shown on page 2 should wherever possible be met by the Lead Officer for the visit through an Authority Purchase Card.