



**UNIVERSITY OF MINES AND TECHNOLOGY,
TARKWA**

CAR KILOMETRAGE AND TRAVELLING ALLOWANCES CLAIMS (ALL STAFF)

For Prof./Dr./Mr./Mrs./Miss/ Ms.: Car No.

DATE		PARTICULARS OF JOURNEY		Reason
20.....	FROM	TO	No. of Km	Nights
				Attach Permission to Travel Form

Details of journey within any Town/City should be given at the back of the form. I hereby certify that the mileage/journeys detailed above were performed by me on university business:

Kilometrage Claim:Km @GH¢

Travelling Allow:Nights @GH¢

1:GH¢

2:GH¢ _____

Signed:
Officer Submitting Claims

Date:.....

I certify that the above claim is genuine and that the journey was necessary and authorised by me.

Signed:
Head of Department/Unit

Date:.....

Approved:
Pro Vice-Chancellor

Date:.....