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Locum Expense Invoice

Knights Chemist Limited
9 Palmers Rd
Redditch
B98 0RF

Name:

Address:
GPHC No:

Date(s) and branch(es) worked:

Total Hours worked:

Hourly rate:

Mileage @28p per mile if over 20 miles each way:

Total Claimed:

Signed by Locum:

Date:

Print name:

Bank account Name:

Sort code:

Account no:

Email address (to confirm when payment has been made):

Please complete fully, then scan and e-mail to finance.midlands@knightspharmacy.co.uk at the end of your working period.

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