# Workforce Invoice Template

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| The Finance OfficerSport Structures Education CICSuite 8 The Cloisters12 George RoadEdgbastonBirminghamB15 1NP | **Your address:**  |
| **Account name:** |       | **Invoice date:**  | Click or tap to enter a date. |
| **Sort code:** |       | **Invoice number:** |       |
| **Account number:** |       | **Purchase Order No:** |       |
| If you have tutored/assessed/quality assured a programme, please complete the following:  |
| **Programme code** |       |
| **Programme delivered** |       |
| **Venue or delivery platform** |       |
| **Total mileage** |       |
| **Description** | **Amount** |
|       |       |
| **Total amount to be claimed:** |       |

Please note:

Expenses can be claimed at 30p per mile

 Without a valid purchase order number, your claim will not be processed.

All invoices are to be sent to finance@sportstructures.com

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| **SPORT STRUCTURES INTERNAL USE ONLY** |
| **DATE RECEIVED** |  / /  | **PO NO.** |  |
| **NOM. CODE** |  | **DEPARTMENT** |  |
| **ENTERED BY** |  | **AUTHORISED BY** |  |
| **PAID** |  / / **BACS / CARD / CHQ**  |