FEES CLAIM FORM FOR VISITING LECTURER / CONSULTANT / TEACHING SUPPORT

For payment by the end of the month, please submit completed and authorised forms to Payroll by the 5th working day of the month via **payroll@edgehill.ac.uk**. If this is your first claim, please complete and submit the following two forms:

1. Form SRPPS-V1: New Payee Set Up Form for Lecturers, Consultants or Teaching Support payees.
2. [HMRC’s Starter Checklist](https://www.gov.uk/government/publications/paye-starter-checklist) form.

Please note payment will not be processed where appointment documents are outstanding.

| **Title:** |  | **Forename:** |  | **Surname:** |  |
| --- | --- | --- | --- | --- | --- |
| **Payroll Number (if known):** |  | **National Insurance (NI) Number:** |  |
| **Are you a PSC or Sole Trader?** |  | **Are you claiming for a ‘one off lecture’ only?** |  |

## **Section A: Claim Detail:**

| **Row ID** | **Date** | **Subject Area** | **Details of Work** | **Hours** | **Fee** **(£)** | **Non-Taxable expenses (£)** | **Taxable Expenses (£)** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 1 |  |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |  |
| 4 |  |  |  |  |  |  |  |
|  | **Hours** | **Fee** **(£)** | **Non-Taxable expenses (£)** | **Taxable Expenses (£)** |
| **Please input Totals for each column** |  |  |  |  |
| Claimant Signature: |  | Claim Date: |  |

**Section B: for Edge Hill University use only**: Certified for payment and calculations checked by:

| Head of Subject Signature: |  | Print Name: |  | Date: |  |
| --- | --- | --- | --- | --- | --- |
| Dean of Faculty/ Head of Service Signature: |  | Print Name: |  | Date: |  |

| **Cost Centre** | **Activity Code** | **Job Code** | **Account Code** | **Total Claim Value** |
| --- | --- | --- | --- | --- |
|  |  |  | 50021 |  |