NHS GRAMPIAN

**REIMBURSEMENT FOR MORAY MATERNITY PATIENTS’ TRAVELLING EXPENSES**

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| Patients Name, Address and Telephone Number: D O B:.  |
| Name & DOB of your baby:Name of your community midwife: |
|  |
| Date of Travel : | Date of Return : |
| Mode of Travel : |
| Cost of Rail Ticket or Mileage Claimed by Car: Please include receipts for rail/ bus travel.DATE SENT TO FINANCE:  |
| **OVER NIGHT ACCOMMODATION**: 1. The cost of accommodation for partners travelling for a birth in Aberdeen of up to £75 per night for a maximum of two nights can also be reimbursed.  Please include a receipt along with this travel form. Please tick here to confirm midwife authorised reimbursement: 2. Costs are for patient and partner only.Please return this form to: * **General Office Manager, Aberdeen Royal Infirmary, Forsterhill, Aberdeen, AB25 2ZN**

Claims should be processed within four weeks. If you have not received payment within four weeks, please call NHS Grampian’s General Office for advice on 01224 554150. |

General Office Use Only

Authorised for Payment: Name: ...............................................................................

 Designation: .......................................................................