MEMBERS ALLOWANCE CLAIM FORM

For the Month of SEP – NOV 20 11

Name LYNNE DURY

WYCHAVON DISTRICT COUNCIL
29 DEC 2011
RECEIVED
POST ROOM

WYCHAVON DISTRICT COUNCIL
good services, good value

DUTIES			ALLOWANCE CLAIMED			
Date	Description	Place	Place & Time of Departure	Place & Time of Return	Return Car Mileage	Fares & Other Payments/ Subsistence
7/9	APEST		HOME 2.00	HOME 6.00	30	
16/11	APEST		"	HOME 6.00	30	
29/11	COUNCIL + EXEC		HOME 4.30	HOME 9.00	30	
30/11	APEST		HOME 3.00	HOME 6.00	30	
13/12	O+S		HOME 5.30	HOME 9.00	30	
7/12	LSP		HOME 9.30	HOME 1.00		£3 PARKING
20/12	COUNCIL		5.00	9.30	30	
					180	£ 3.00

The front of this claim form will be available for members of the public to view

NB: PLEASE COMPLETE AND SIGN THE DECLARATION OVERLEAF