

MEMBERS ALLOWANCE CLAIM FORM

For the Month of MAY - JULY 2011

Name LYNNE DUFFY

WYCHAVON
COUNCIL
11 AUG 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
7/5	Signing in	Pershore	Home 10.00	Home 1	30	
29/5	Exec Board	"	Home 5.00	Home 8.00	30	
7/6	Exec Board	"	Home 5.00	Home 8.00	30	
4/6	Special council	"	Home 4.00	Home 8.00	30	
22/6	APEST	"	Home 2.00	Home 6.00	30	
27/6	GRANTS	"	Home 1.00	Home 5.00	30	
28/6	Council + training	"	Home 4.00	Home 9.00	30	
5/7	Special Council	"	Home 5.30	Home 9.00	30	
12/7	Exec Board	"	Home 5.30	Home 8.30	30	
26/7	O+S	ic	Home 5.30	Home 8.30	30	
					300	£

The front of this claim form will be available for members of the public to view
NB: PLEASE COMPLETE AND SIGN THE DECLARATION OVERLEAF

WYCHAVON DISTRICT COUNCIL
11 AUG 2011
PERSONNEL & PAYROLL