MEMBERS ALLOWANCE CLAIM FORM

WYCHAVON DISTRICT COUNCIL
good services, good value

For the Month of OCTOBER 20 11

Name MCJ BARRATT

DUTIES			ALLOWANCE CLAIMED			
Date	Description	Place ~~DROIT~~	Place & Time of Departure DROITWICH	Place & Time of Return DROITWICH	Return Car Mileage	Fares & Other Payments/ Subsistence
11TH	EXECUTIVE BOARD	CIVIC CENTRE	16 50	21 00	24	—
19TH	STANDARDS COMMITTEE	CIVIC CENTRE	17 00	20 05	24	—
24TH	MEETING RM 23 JACK HEGART VIC ALLISON TOM JUDITH PEARCE	CIVIC CENTRE	17 15	19 40	24	—
25TH	OVERVIEW & SCRUTINY	CIVIC CENTRE	16 50	21 05	24	—
					96	£

WYCHAVON DISTRICT COUNCIL
27 OCT 2011
RECEIVED
POST ROOM

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

NB: PLEASE COMPLETE AND SIGN THE DECLARATION OVERLEAF

83