MEMBERS ALLOWANCE CLAIM FORM

WYCHAVON DISTRICT COUNCIL
good services, good value

For the Month of DECEMBER 2011

Name JO SANDALS

WYCHAVON DISTRICT COUNCIL
10 JAN 2012
RECEIVED
POST ROOM

DUTIES			ALLOWANCE CLAIMED			
Date	Description	Place	Place & Time of Departure	Place & Time of Return	Return Car Mileage	Fares & Other Payments/ Subsistence
5.12.	SITE VISITS	PERSHORE	HOME 9.30a		12	
" "	PLANNING TRAINING PLANNING MEETING	" "		HOME 5.30p		
12.12.	POLICE TROPHY AWARDS	" "	HOME 6.30PM		12	
"	FULL COUNCIL	" "		9.30PM		
					24	£

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

NB: PLEASE COMPLETE AND SIGN THE DECLARATION OVERLEAF