MEMBERS ALLOWANCE CLAIM FORM

WYCHAVON DISTRICT COUNCIL
- 1 OCT 2012
PERSONNEL & PAYROLL

WYCHAVON DISTRICT COUNCIL
good services, good value

For the Month of ~~September~~ October **20**12

Name M C J BARRATT

DUTIES			ALLOWANCE CLAIMED			
Date	**Description**	**Place**	**Place & Time of Departure** (DROITWICH)	**Place & Time of Return** (DROITWICH)	**Return Car Mileage**	**Fares & Other Payments/ Subsistence**
~~4th~~	EXECUTIVE BOARD.	CIVIC CENTRE	17.00.	21.06	2M	✓
~~18th~~	OVERVIEW & SCRUTINY	CIVIC CENTRE	17.00	20 45	2M	✓
~~26th~~	LICENSING SUB. COMMITTEE	CIVIC CENTRE	13.00	15 36	2M	✓
OCTOBER 1st	JE APPEAL.	JACK HEGARTY'S OFFICE	10 15	12 35	2M.	✓
					96	£

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

NB: PLEASE COMPLETE AND SIGN THE DECLARATION OVERLEAF