

# MEMBERS ALLOWANCE CLAIM FORM

For the Month of 1st Nov to 30th Nov 2012

Name RON DAVIS

Date	DUTIES Description	Place	ALLOWANCE CLAIMED			
			Place & Time of Departure	Place & Time of Return	Return Car Mileage	Fares & Other Payments/ Subsistence
1/11/12	CIL PRESENTATION	COUNTY HALL.	DEFFORD 1700	DEFFORD 2015	23	—
6/11/12	HWB - BRIEF. MARCUS HART	—do—	DEFFORD 1230	—	—	—
6/11/12	GROW - SAVE - CHANGE WORKSHOP	EVERHAM TOWN HALL	—	DEFFORD 1915	41	—
7/11/12	EXEC BOARD BRIEFING.	CIVIC CENTRE	DEFFORD 0900	DEFFORD 1400	6	—
8/11/12	H.W.B. BOARD - 1	COUNTY HALL	DEFFORD 1200	DEFFORD 1400	—	—
8/11/12	POLICE CRIME ANALYSIS WORKSHOP.	WORE'S UNIVERSITY	DEFFORD 1700	DEFFORD 2045	46	2.00
21/11/12	HWB - STAKEHOLDER. ITS TIME TO TALK ABOUT DRINK	WYREFOREST D.C.	DEFFORD 0830	DEFFORD 1320	57	—
22/11/12	RECEIVE WORE'S WORKS WELL WORKPLACE HEALTH SCHEME	WORE'S COUNTY CRICKET GROUND	DEFFORD 1400	DEFFORD 1615	26	—
27/11/12	EXEC BOARD & TENANCY TRAINING.	CIVIC CENTRE	DEFFORD 1500	DEFFORD 2130	6	—
29/11/12	SWSPJC - MEETING.	M.H.D.C.	DEFFORD 1230	DEFFORD 1815	37	—
					242	£ 2.00

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

NB: PLEASE COMPLETE AND SIGN THE DECLARATION OVERLEAF