

# MEMBERS ALLOWANCE CLAIM FORM

For the Month of 1<sup>st</sup> Jan. 31<sup>st</sup> Jan 2012

Name RON DAVIS

WYCHAVON DISTRICT COUNCIL  
- 8 FEB 2012

**WYCHAVON DISTRICT COUNCIL**  
good services, good value

PERSONNEL & PAYROLL

Date	DUTIES Description	Place	ALLOWANCE CLAIMED			
			Place & Time of Departure	Place & Time of Return	Return Car Mileage	Fares & Other Payments/ Subsistence
10/12	EXEC BOARD - GVA BRIEFING ECKINGTON + DEFFORD PC	CIVIC CENTRE ECKINGTON	DEFFORD 1500	DEFFORD 2210	11	—
17/11	WEST MIDLANDS COUNCILS HEALTH	COUNCIL HSE BIRMINGHAM	DEFFORD 1000	DEFFORD 1730	78	7.00
18/11	HEALTH CLUSTER MEETING	COURTNEY HALL	DEFFORD 0845	DEFFORD 1200	23	—
23/11	WESTMERCIA CLUSTER BRIEFING	CIVIC CENTRE	DEFFORD 1400	DEFFORD 1600	6	—
25/11	EXEC BOARD BRIEFING	—	DEFFORD 0900	DEFFORD 1400	6	—
27/11	NHS BOARDS MEETING	SIX WAYS	DEFFORD 1000	DEFFORD 1430	24	—
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					148	7.00

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

NB: PLEASE COMPLETE AND SIGN THE DECLARATION OVERLEAF

WYCHAVON DISTRICT COUNCIL  
- 8 FEB 2012  
RECEIVED  
POST ROOM