MEMBERS ALLOWANCE CLAIM FORM

WYCHAVON DISTRICT COUNCIL
good services, good value

For the Month of FEB **20**13

Name Charles Homer

* Due to Flooding I had to take a diverted route.

DUTIES			ALLOWANCE CLAIMED			
Date	**Description**	**Place**	**Place & Time of Departure**	**Place & Time of Return**	**Return Car Mileage**	**Fares & Other Payments/ Subsistence**
11	LOCALISM ADVISORY COMM.*	ECKINGTON PARISH HALL.	HOME WR11 4QY	WORK B50 4EP	36.3*	
12	O&S Committee	CIVIL CENTRE	WORK WR11 B50 4EP	HOME WR11 4QY	20.	
13	HARVINGTON PC	HARVINGTON VILLAGE HALL	HOME WR11 4QY	HOME WR11 4QY	8.	
					64	£

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

NB: PLEASE COMPLETE AND SIGN THE DECLARATION OVERLEAF