MEMBERS ALLOWANCE CLAIM FORM

WYCHAVON DISTRICT COUNCIL
good services, good value

For the Month of JANUARY 20~~14~~

Name J S SANDALS

DUTIES			ALLOWANCE CLAIMED			
Date	Description	Place	Place & Time of Departure	Place & Time of Return	Return Car Mileage	Fares & Other Payments/ Subsistence
2014 07.1.	EXECUTIVE MEETING	PERSHORE	HOME 5.30P.	HOME 7.30P.	12	
09.1.	SITE VISITS, PLANNING TRG. PLANNING MEETING,	" "	HOME 5.30.	HOME 7.30	12	
10.1.	SITE VISITS, PLANNING TRG.	PERSHORE	HOME. 8.15AM	~~HOME~~ 5PM.	12	
"	PLANNING COMMITTEE	" "		HOME 7.15PM.		
					36	£

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

NB: PLEASE COMPLETE AND SIGN THE DECLARATION OVERLEAF