

MEMBERS ALLOWANCE CLAIM FORM

For the Month of April..... 2013

Name Judy Pearce.....

DUTIES			ALLOWANCE CLAIMED			
Date	Description	Place	Place & Time of Departure	Place & Time of Return	Return Car Mileage	Fares & Other Payments/ Subsistence
<u>24.4.</u>	<u>9.30 SWDA sign off Meeting.</u>	<u>Malvern Road County Hall</u>	<u>Pershore</u>		<u>14</u>	

1
 £

The front of this claim form will be available for members of the public to view
 NB: PLEASE COMPLETE AND SIGN THE DECLARATION OVERLEAF