MEMBERS ALLOWANCE CLAIM FORM

WYCHAVON DISTRICT COUNCIL
31 OCT 2012

WYCHAVON DISTRICT COUNCIL
good services, good value

For the Month of October **20**12

Name T. J. NOYES

DUTIES			ALLOWANCE CLAIMED			
Date	Description	Place	Place & Time of Departure	Place & Time of Return	Return Car Mileage	Fares & Other Payments/ Subsistence
3/10	DELEGATED DECISIONS	WDC PERSHORE	1.15 HOME	4.30 HOME	26	
11/10	PLANNING COMMITTEE	— .. —	9.15 HOME	8.45 HOME	26	
16/10	PLANNING TRAINING // EXEC	— .. —	3.15 HOME	8.15 HOME	26	
23/10	HOUSING TRAINING	— .. —	4.45 HOME	7.00 HOME	26	
30/10	O&S COMMITTEE	— .. —	5.30 HOME	8.30 HOME	26	
					130	£

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

NB: PLEASE COMPLETE AND SIGN THE DECLARATION OVERLEAF