

# MEMBERS ALLOWANCE CLAIM FORM

For the Month of MARCH 2013

Name MRS AUDREY STEEL



Date	DUTIES		ALLOWANCE CLAIMED			
	Description	Place	Place & Time of Departure	Place & Time of Return	Return Car Mileage	Fares & Other Payments/ Subsistence
6 <sup>th</sup>	TRAINING RE-CONSTITUTION	C. CENTRE	Home 1-30pm	c.c. 5pm.	22-2	
8 <sup>th</sup>	MEET WITH HARRIET BALDWIN M.P.	- -	Home 2-30pm	cc 5pm.	22-2	
10 <sup>th</sup>	EXEC BOARD	- -	Home 4pm.	cc 7-30pm	22-2	
26 <sup>th</sup>	" " + O+S.	" "	Home 5pm.	cc 7-30pm	22-2	
27 <sup>th</sup>	WYCHAVON STRATEGIC P'SHIP	" "	Home 9-30pm	cc 1-30pm.	22-2	
28 <sup>th</sup>	SITE VISITS + PLANNING COMMITTEE	" "	Home 8 AM	cc 5-30pm	22-2	
11 <sup>th</sup>	CHURCH LENCH P.C.				<del>22-2</del>	
12 <sup>th</sup>	COOKHILL P.C.				<del>22-2</del>	
13 <sup>th</sup>	STOCK + BRADLEY P.C.				48-00	
24 <sup>th</sup>	ABBOTS MORTON P.C.					
25 <sup>th</sup>	HANBURY P.C.				<del>22-2</del>	

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