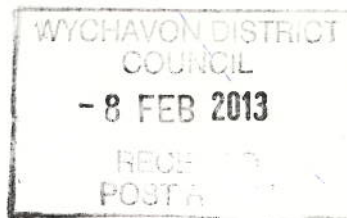


# MEMBERS ALLOWANCE CLAIM FORM

For the Month of JANUARY 2013

Name Jo Saunders



Date	DUTIES		ALLOWANCE CLAIMED			
	Description	Place	Place & Time of Departure	Place & Time of Return	Return Car Mileage	Fares & Other Payments/ Subsistence
<del>31</del>	SITE VISITS, PLANNING COMMITTEE & TRAINING.	DERBYS	HOME 8:45 AM	HOME 5:15	SWAPPO	TRANSPORT WIFE CAR TAKEN AWAY
<del>31</del>	SITE VISITS PLANNING TRG - PLANNING COMMITTEE	W. Y	HOME 8:30 AM	HOME 8:15 PM	12	

12. £

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