

MEMBERS ALLOWANCE CLAIM FORM

For the Month of AUGUST 2012

Name CLLR PETER TOMLINSON

DUTIES			ALLOWANCE CLAIMED			
Date	Description	Place	Place & Time of Departure	Place & Time of Return	Return Car Mileage	Fares & Other Payments/ Subsistence
<u>6</u>	<u>MEMBERS COUNCIL MEETING</u>	<u>PERSHORE</u>	<u>LINEHOLT 3.30pm</u>	<u>PERSHORE 6.45pm</u>	<u>35</u>	
					<u>35</u>	£

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