

MEMBERS ALLOWANCE CLAIM FORM

For the Month of ...MARCH..... 2014

Name ...M.C.J BARRATT.....



DUTIES			ALLOWANCE CLAIMED			
Date	Description	Place	Place & Time of Departure	Place & Time of Return	Return Car Mileage	Fares & Other Payments/ Subsistence
(MARCH) 7/14	MEDIA TRAINING.	WYCHAVON COMMITTEE ROOM	DROITWICH 13.00	DROITWICH 16.45	41	16.81
26/14	JOB EVALUATION	WYCHAVON ROOM 23	12.00	16.30	28	11.79

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

66 £28.60p
 0.45p

MEMBERS ALLOWANCE CLAIM FORM

For the Month of MARCH 2014.

Name M. C. J. BARRATT

WYCHAVON DISTRICT COUNCIL
28 MAR 2014
RECEIVED
POST ROOM



Date	DUTIES		ALLOWANCE CLAIMED			
	Description	Place	Place & Time of Departure	Place & Time of Return	Return Car Mileage	Fares & Other Payments/ Subsistence
7th	MEDIA TRAINING.	WYCHAVON COMMITTEE ROOM	DL01TWICH 13.00.	DL01TWICH 16.45	41	—
26th	JOB EVALUATION	WYCHAVON ROOM 23	12.00	16.30	25	—

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66 E 29-70
D. O. MSP