

MEMBERS ALLOWANCE CLAIM FORM



For the Month of APRIL..... 2014.

Name Cllr. MIKE C. J. BARRETT.....

DUTIES			ALLOWANCE CLAIMED			
Date	Description	Place	Place & Time of Departure	Place & Time of Return	Return Car Mileage	Fares & Other Payments/ Subsistence
15 th	MEETING OF THE COUNCIL	WYCHAVON CIVIC CENTRE CHAMBER	DROITWICH 17.15	DROITWICH 20.50	24	£10.50
24 th	PLANNING COMMITTEE	COUNCIL CHAMBER	12.30	17.20	24	£21.60

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

Cllr
 £32.70
 (0.45p)

