MEMBERS ALLOWANCE CLAIM FORM

For the Month of July 20 14.

Name JO SANDALLS

WYCHAVON DISTRICT COUNCIL
13 AUG 2014
RECEIVED
POST ROOM

WYCHAVON DISTRICT COUNCIL
good services, good value

DUTIES			ALLOWANCE CLAIMED			
Date	Description	Place	Place & Time of Departure	Place & Time of Return	Return Car Mileage	Fares & Other Payments/ Subsistence
2.7.	NEW SERVICE PROVIDER TRG BRIEFING ON 5TH HAND SUPPLY	PERSHORE	HOME 4 PM	HOME 8.30	12	
"	EXECUTIVE MEETING	" "				
17.7	PLANNING TRAINING PLANNING MEETING.	" "	HOME 12. PM	HOME.	12.	
29.7	GYPSY & TRAVELLERS. PRESENTATION.	" "	HOME 3-30PM		12.	
"	FULL COUNCIL.	" "		HOME 8-30PM		
31.7	1 PAD TRG. DROP IN SESSION SWDP.	" "	HOME 2.PM	HOME 5.30	12	
					48	£

The front of this claim form will be available for members of the public to view

NB: PLEASE COMPLETE AND SIGN THE DECLARATION OVERLEAF

8