

MEMBERS ALLOWANCE CLAIM FORM

For the Month of SEPT-DEC 2014 WCL

Name LIZ EYRE

WYCHAVON DISTRICT COUNCIL
- 2 DEC 2014
RECEIVED
POST ROOM



Date	DUTIES Description	Place	ALLOWANCE CLAIMED				
			Place & Time of Departure	Place & Time of Return	Return Car Mileage	Fares & Other Payments/ Subsistence	
2/9	Executive	Civic Centre	B'way 17:00	B'way 21:00	28		
25/9	Joint MD/Executive Appt Panel	Claimed on County Council timesheet					
30/9	WDC Full Council	Civic Centre	B'ham 16:00	B'way 22:00	39 14	Apologies received	
2/10	Joint Shared MD/CEXC Appt	Civic Centre	Northleach 16:00	B'way 19:00	32 14		
8/10	Delegated Decisions	Civic Centre	Chall & 1:30 Pershore	B'way 6:00pm	23		
14/10	Joint Shared MD/CEXC Appt Executive	Civic Centre	Claimed on C. Council				
					150		
					97	£	

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