MEMBERS ALLOWANCE CLAIM FORM

WYCHAVON DISTRICT COUNCIL
good services, good value

For the Month of JANUARY 2015

Name Jo SANDALS

DUTIES			ALLOWANCE CLAIMED			
Date	Description	Place	Place & Time of Departure	Place & Time of Return	Return Car Mileage	Fares & Other Payments/ Subsistence
16.1	EXECUTIVE MTG	PERSHORE	HOME 5.30PM	HOME 7.AM.	12	
21.	PLANNING TRAINING / PLANNING MEETING	" "	HOME 12.PM	HOME 4 PM.	12	
					24	£

WYCHAVON DISTRICT COUNCIL
-9 FEB 2015
RECEIVED
POST ROOM

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

NB: PLEASE COMPLETE AND SIGN THE DECLARATION OVERLEAF