MEMBERS ALLOWANCE CLAIM FORM

WYCHAVON DISTRICT COUNCIL
good services, good value

For the Month of APRIL 2015

Name J.A. SANDALLS

DUTIES			ALLOWANCE CLAIMED			
Date	Description	Place	Place & Time of Departure	Place & Time of Return	Return Car Mileage	Fares & Other Payments/ Subsistence
2.4	PLANNING MTG. SITE VISITS. TRAINING.	PERSHORE	HOME 9.30AM	HOME 6.45PM	12.	
21.4	FULL COUNCIL MEETING	" "	HOME 5.30P.	HOME 8.30P.	12	
30.4	PLANNING MEETING	PERSHORE TOWN HALL	HOME 1.PM.	HOME 5.30PM	12	
					36	£

WYCHAVON DISTRICT COUNCIL
11 MAY 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