

MEMBERS ALLOWANCE CLAIM FORM



For the Month of June 2015

Name Elizabeth Eyre

Date	DUTIES		ALLOWANCE CLAIMED			
	Description	Place	Place & Time of Departure	Place & Time of Return	Return Car Mileage	Fares & Other Payments/ Subsistence
10/6	Executive	Civic Centre	B'way 17:00	B'way 21:30	28	
17/6	Panel Agenda Setting Meeting of Members	Civic Centre	B'way 14:30	B'way 17:30	28	
24/6	Meet with Executive	Civic Centre	B'way 11:00			
24/6	Overview and Scripting ^{Train/1st meet}	Civic Centre		B'way 21:00	28	
					84	£

WYCHAVON DISTRICT COUNCIL
-2 JUL 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

(Handwritten signature)