

MEMBERS ALLOWANCE CLAIM FORM

For the Month of June 2015

Name Mrs A. STEEL

WYCHAVON DISTRICT COUNCIL
24 JUL 2015
RECEIVED POST ROOM



DUTIES			ALLOWANCE CLAIMED			
Date	Description	Place	Place & Time of Departure	Place & Time of Return	Return Car Mileage	Fares & Other Payments/ Subsistence
✓ 9 th	Strong communities	C. Centre	Home 5:30pm	cc 8-3pm	22.2	
✓ 23 rd	Armed Forces Day	~ ~	Home 9:30am	cc 11-AM	22.2	
✓ 24 th	E.B.B. / part of meeting to discuss booklet	~ ~	~ 12 noon	cc 2-3pm	22.2	
					66	£

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

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RETURN EX