MEMBERS ALLOWANCE CLAIM FORM

WYCHAVON DISTRICT COUNCIL
good services, good value

For the Month of JUNE **20**15

Name A. P. MILLER

DUTIES			ALLOWANCE CLAIMED			
Date	**Description**	**Place**	**Place & Time of Departure**	**Place & Time of Return**	**Return Car Mileage**	**Fares & Other Payments/ Subsistence**
9/06	PARISH COUNCIL MEETING	AMLEY LOVETT	HOME 7.30PM	HOME 9.30PM	15	
10/06	TRAINING (CAR SHARE)	WDC	HOME 4.15PM	HOME 9.00PM	28	
17/06	LICENSING TRAINING	WDC	HOME 1.00PM	HOME 4.30PM	28	
24/06	LICENSING SUB COMMITTEE	WDC	HOME 12.30PM	HOME 6.00PM	28	
25/06	PLANNING + SITE VISIT	WDC	HOME 9.30PM.	HOME 6.00PM	28	
26/06	MEETING WITH OFFICERS	WDC	HOME 12.30PM	HOME 6-00PM	28	
					154	£

WYCHAVON DISTRICT COUNCIL
30 JUN 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