

MEMBERS ALLOWANCE CLAIM FORM

For the Month of JULY 2015

Name G. O' DONNELL

①

Date	DUTIES		ALLOWANCE CLAIMED			
	Description	Place	Place & Time of Departure	Place & Time of Return	Return Car Mileage	Fares & Other Payments/ Subsistence
1/7	MEETING RE Early hearing	WDC	HOME 1400			
"	Prevention Workshop	COUNTY HALL		HOME 1800	32	
6/7	MEETING WITH RICHARD WHITTALL + WYCHAVON LEISURE	DROITWICH	HOME 1100	HOME 1430	38	
8/7	MEDIA TRAINING + EXEC BOARD	WDC	HOME 1430	HOME 1945	16	
9/7	FOLLOW-UP STRATEGY MTG	WDC	HOME 1500	HOME 1830	16	
10/7	MEETING WITH Fiona NARBERTH	WDC	HOME 1200	HOME 1400	16	
13/7	A+A PRESENTATION	WDC	HOME 0930	HOME 1300	16	
14/7	COUNTY PORTFOLIO MTG - S. CAMPION	COUNTY HALL	HOME 1130	HOME 1700	32	
15/7	HEALTH + W.B. BOARD	WDC	HOME 1330	HOME 1630	16	
21/7	LEADERSHIP ESSENTIALS COURSE	ROFFEY PARK W. SUSSEX	HOME 1400			2 DAY COURSE LGA PAID ACCOM.
					182	
					(CARRIED FWD)	£

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

