

# MEMBERS ALLOWANCE CLAIM FORM

For the Month of AUGUST / SEPT. 2015

Name Jo Sandalls

WYCHAVON DISTRICT COUNCIL  
- 7 OCT 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
<del>08/8</del>	SWOP BRIEFING	COUNTY HALL WORCESTER	NONE 5:50P	NONE 7:30AM	30'	
<del>20/8</del>	PLANNING TRAINING PLANNING MEETING	PERSHORE	NONE 12:00M	NONE 12:30PM	12	
<del>20/8</del> <del>29/8</del>	MERCHANT NAVY DAY FLAG RAISING	" "	NONE 9:00M	NONE 11:00M	12	
<del>2/9</del>	SWOP BRIEFING	" "	NONE 6:00M	NONE 7:30P	12	
<del>8/9</del>	GOVERNANCE TRG.	" "	NONE 5:00M	NONE 8:00M	12	
<del>9/9</del>	EXECUTIVE BOARD. MTE.	" "	NONE 5:00M	NONE 8:00M	12	
<del>16/9</del>	LICENSING COM. MTE.	" "	NONE 1:30P	NONE 4:00M	12	
<del>14/9</del>	SITE VISITS. PLANNING TRG. PLANNING MEETING	" "	NONE 10:30AM	NONE 5:30PM	12	
<del>23/9</del>	LICENSING MEETING	" "	NONE 1:30PM	NONE 4:00M	12	
<del>20/9</del>	BRIEFING. SWOP. STM. Full Council.	" "	NONE 4:30PM	NONE 7:45PM	12	
					138	£

The front of this claim form will be available for members of the public to view

NB: PLEASE COMPLETE AND SIGN THE DECLARATION OVERLEAF