MEMBERS ALLOWANCE CLAIM FORM

WYCHAVON DISTRICT COUNCIL
good services, good value

For the Month of ..July..... **20**15

Name ...Cllr. Ken Barclay....

DUTIES			ALLOWANCE CLAIMED			
Date	**Description**	**Place**	**Place & Time of Departure**	**Place & Time of Return**	**Return Car Mileage**	**Fares & Other Payments/ Subsistence**
8th	Executive meeting	Wychavon	12.00 Evesham	6.15 - 8.45 Evesham	21	~~9.45~~
22nd	Overview / Scrutiny	—"—	pm 5.30 —"—	pm 8.15 —"—	21	~~9.45~~
23rd	Planning	—"—	pm 8.30 —"—	pm 8.40 —"—	21	~~9.45~~
24th	Licensing + Council	—"—	12.00 —"—	pm 5.00 —"—	21	~~9.45~~
					84	£ ~~37.80~~

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

NB: PLEASE COMPLETE AND SIGN THE DECLARATION OVERLEAF