MEMBERS ALLOWANCE CLAIM FORM

WYCHAVON DISTRICT COUNCIL
good services, good value

For the Month of December 20 16

Name MARTIN KING

DUTIES			ALLOWANCE CLAIMED			
Date	**Description**	**Place**	**Place & Time of Departure**	**Place & Time of Return**	**Return Car Mileage**	**Fares & Other Payments/ Subsistence**
14/12	Council	~~Evesham~~ Pershore	16.00 Evesham	20.30 Evesham	18	
15/12	~~Cou~~ Planning Committee	Pershore	15.45 Evesham	17.30 Evesham	18	
					36	£ 16-20

WYCHAVON DISTRICT COUNCIL
5 JAN 2017
RECEIVED POSTROOM

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

NB: PLEASE COMPLETE AND SIGN THE DECLARATION OVERLEAF