MEMBERS ALLOWANCE CLAIM FORM

WYCHAVON DISTRICT COUNCIL
good services, good value

For the Month of MAY/JUNE..... 2016

Name Cllr. Mrs. F. S. Smith.....

DUTIES			ALLOWANCE CLAIMED			
Date	**Description**	**Place**	**Place & Time of Departure**	**Place & Time of Return**	**Return Car Mileage**	**Fares & Other Payments/ Subsistence**
18/5/16	Annual Council	Civic Centre Pershore	Evesham 4.30	Evesham	13	
23/5/16	Planning Enforcement	Civic Centre Pershore	Evesham 2.30	Evesham 5.25	13	
26/5/16	Planning Committee	"	Evesham 1.20	Evesham 3.10	13	
13/6/16	Planning Enforcement	"	Evesham 3pm	Evesham 5.30	13	
15/6/16	O/S	"	Evesham 5.45pm	Evesham 8.30	13	
30/6/16	HOSC	County Hall Worcester	Evesham 9.00am	Evesham 12.45	30	
					95	
					@45p.	
						£42-75

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

NB: PLEASE COMPLETE AND SIGN THE DECLARATION OVERLEAF