

WYBEKS ALLOWANCE CLAIM FORM

For the Month of October 2016

Name G.O' DAVRELL

good services, good value

Date	DUTIES			ALLOWANCE CLAIMED			
	Description	Place	Place & Time of Departure	Place & Time of Return	Return Car Mileage (206)	Fares & Other Payments/ Subistence	
21/10	"SAFE PLACE" LAUNCH	DRITWICH	HOME 1030	HOME 1415	38		
27/10	S. Works. SAFETY Partnership	WDC	HOME 0930				
"	STATION WORKSHOP	WDC		HOME 1800	16		
					260		
						£	

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

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