MEMBERS ALLOWANCE CLAIM FORM

WYCHAVON DISTRICT COUNCIL
good services, good value

For the Month of MARCH/PT.APRIL 20.16

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**
3/3	Planning Committee	Pershore	Evesham	Evesham	15 R	
14/3	Flag Raising (UN)	"	"	"	15 R	
30/3	Licensing Cmt.	"	"	"	15 R	
31/3	Planning Cmt.	"	"	"	15 R	
13/4	Executive	"	"	"	15R	
15/4	Guildhall SWOP WK Shop	Works.	"	"		
	+ Cllr. Jo. Saundells	"		38 V2	76R	
					151	£ 67.95

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

NB: PLEASE COMPLETE AND SIGN THE DECLARATION OVERLEAF