MEMBERS ALLOWANCE CLAIM FORM

WYCH
DISTRICT
good services,

For the Month of **May**

VICE CHAIRMANS EXPENSES

Name .. Liz Eyre

DUTIES			ALLOWANCE CL		
Date	Description	Place	Place & Time of Departure	Place & Time of Return	Return Car Mileage
19th May	Design exhibition Worcester University - 2 sites	University 2 sites	Broadway 17.00	Broadway 21.30	52
					52

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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