MEMBERS ALLOWANCE CLAIM FORM

WYCHAVON DISTRICT COUNCIL
13 SEP 2016
RECEIVED POSTROOM

WYCHAVON DISTRICT COUNCIL
good services, good value

For the Month of AUGUST 2016

Name MARTIN THOMAS KING

DUTIES			ALLOWANCE CLAIMED			
Date	**Description**	**Place**	**Place & Time of Departure**	**Place & Time of Return**	**Return Car Mileage**	**Fares & Other Payments/ Subsistence**
31/8/16	Council	Pershore	17-25 Evesham		18	
					18	£ 8-10

8

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

NB: PLEASE COMPLETE AND SIGN THE DECLARATION OVERLEAF