MEMBERS ALLOWANCE CLAIM FORM

WYCHAVON DISTRICT COUNCIL
good services, good value

For the Month of MARCH 20 16

Name T. J. NOYES

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	WDC PERSHORE	HOME 10.30	HOME 5.15	26	
9/3	EXECUTIVE	"	HOME 5.15	HOME 7.30	26	
23/3	LICENSING	"	HOME 1.00			
4	O + S			HOME 9.45	26	
31/3	PLANNING	"	HOME 12.30	HOME 5.15	26	
					104	
						£

WYCHAVON DISTRICT COUNCIL
- 1 APR 2016
RECEIVED
POST ROOM

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