

COUNCILLORS TRAVELLING AND SUBSISTENCE ALLOWANCES CLAIM FORM

(PLEASE COMPLETE THIS FORM IN BLACK INK)

14 MAR 2017

Councillor:	Jan Curtice			Vehicle Reg:		Month:	Feb 2017
Address:				Engine Size:		Engine:	
				Fuel Type:		Post Code:	

(1)	(2)	Time of Meeting		(5)	(6)	Travelling Allowances				Subsistence		Totals				
		Start	End			Place e.g. Civic Centre	(If not a Standard Council Diary meeting please provide the name of the officer present)	Travel by Vehicle		Fares, Tolls, Parking, etc (9)	Total Travelling Allowance Claimed (10)			Outside the Authority's Area Only (11)		
								Miles (7)	Rate (8)		£			p	£	p
10/2/17				Guildhall	Gen Recurring	14	45			6	30			6	30	
13/2/17		9:30	10:30	"	Corporate Planning	14	45			6	30			6	30	
16/2/17		2:00	2:00	"	Ex Council	14	45			6	30			6	30	
20/2/17		4:00	6:00	"	Readiness for School	14	45			6	30			6	30	
22/2/17		5:00	7:00pm	"	Council	14	45			6	30			6	30	
13/2/17		6pm	6:30pm	"	Appointments	14	45			6	30			6	30	
					Ex Council		45									
						TOTAL				37.80		37.80				
						Less payment received or Claimed from any other body or authority										
						Amount Claimed				37.80		37.80				

A) I declare that I have necessarily incurred expenditure on travelling and subsistence for the purpose of enabling me to perform approved duties as an Elected Member of this Authority and that I have actually and necessarily incurred the actual mileage in column 7 above. The amounts claimed are in accordance with the rates determined by the Independent Remuneration Panel for Wales.

B) I declare that the statements above are correct. Except as shown above I have not made, and will not make, any claim under any enactment for travelling or subsistence expenses in connection with the duties indicated above.

C) If using a private vehicle whilst on Council business, Councillors should ensure that they have a valid driving licence, MOT and comprehensive vehicle insurance specifically including business and commuting use.

D) An e-mail from the Councillor will be accepted as a signature providing the name of the Councillor is included.

Date:	14-3-17	Signature of Councillor:	
For Office Use Checked by: Payroll No: _____ Month Paid: _____			

Please, Submit claims within 3 months of duty with fuel VAT receipt

14/3/17