

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

## CO-OPTED MEMBER TRAVELLING AND SUBSISTENCE ALLOWANCES CLAIM FORM

<b>Co-opted Member Name:</b> Margaret Williams		<b>Vehicle Reg.</b> .....		<b>Month Ending:</b> February 2021	
<b>Address:</b> [REDACTED]		<b>Engine Size</b> .....		<b>Post Code:</b> [REDACTED]	
		<b>Fuel Type</b> (e.g. Petrol) .....			

  

Date of Meeting  (1)	Start & End of Duty	Time of Meeting		Location (Place) of Duty	Description of Approved Duties  Name of meeting please indicate with (C) if you Chaired the meeting  (6)	Travel Allowances			Co-opted Member Allowance Rate		Totals  (Column 9+10)  (11)  £      p		
	Place e.g. Home	Start	End	e.g. Civic Centre		Travel by own vehicle		Allowance Claimed (Column 7x8)	Set by IRPW (See Rates Below)				
	(2)	(3)	(4)	(5)		Miles	Rate		£	p			£
	(7)	(8)	(9)	(10)		(11)							
18-2-21	Home	14.00	14.35	Online	Standards Committee		45p			99	00	99	00
/ /							45p						
/ /							45p						
/ /							45p						

  

Co-opted Member Allowance Rates (As set by the Independent Remuneration Panel for Wales (IRPW)):			Amount Claimed:	99.00
Chair of Audit /Standards Cttee: > 4 hrs = £256, < 4 hrs = £128	Chair of Community/Town Council Standards Sub Cttee: > 4 hrs = £226, < 4 hrs = £113	Other Ordinary Co-opted Member: > 4 hrs = £198, < 4 hrs = £99		

  

<p>A) I declare that I have necessarily incurred expenditure on travelling and subsistence for the purpose of enabling me to perform approved duties as a Co-opted 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.</p> <p>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.</p> <p>C) If using a private vehicle whilst on Council business, Co-Opted Members should ensure that they have a valid driving licence, MOT and comprehensive vehicle insurance specifically including business and commuting use.</p> <p>D) <a href="#">An e-mail from the Co-opted Member will be accepted as a signature providing the name of the Co-opted Member is included.</a></p>	<p><b>For Office Use</b></p> <p>Checked by: <b>DC</b></p> <p>Payroll No: _____</p>
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Date .....22 <sup>nd</sup> February, 2021... Signature of Co-opted Member [REDACTED]	Month Paid: _____
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