

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>	Mrs Jill Burgess	<b>Vehicle Registration Number:</b>	█	<b>Month Ending</b>	30 June 2021
<b>Address:</b>	█			<b>Post Code:</b>	█

Date of Meeting	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	Travel Allowances				Co-opted Member Allowance Rate		Totals (Column 9+10)	
	Place e.g. Home	Start	End	e.g. Civic Centre		Travel by own vehicle		Allowance Claimed (Column 7x8)		Set by IRPW (7 Hours)			
						Miles	Rate						
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	£	p	
30/6/21	Home	8.45	12.45	Guildhall by (Teams)	Meet Tracey Meredith	10	45p	4	50			4	50
30/6/21	Home	8.45	12.45	Guildhall Teams meeting of Standards	Standards Committee					128	00	128	00
24/6/21	Home	14	15	To GuildHall Security Desk	To collect print Paper copies of Report (350 pages)	10	45p	4	50			4	50

### Co-opted Member Allowance Rates (As set by the Independent Remuneration Panel for Wales (IRPW)):

<b>Chair of Audit /Standards Cttee:</b> > 4 hrs = £256, < 4 hrs = £128	<b>Chair of Community/Town Council Standards Sub Cttee:</b> > 4 hrs = £226, < 4 hrs = £113	<b>Other Ordinary Co-opted Member:</b> > 4 hrs = £198, < 4 hrs = £99	<b>Amount Claimed:</b>  137                      00
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<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) <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: <span style="color: red;">DC</span></p> <p>Payroll No: █</p>
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Date .....30 <sup>th</sup> June 2021..... Signature of Co-opted Member █	Month Paid: _____
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