

Co-opted Member Travelling & Subsistence Allowances Claim Form

1) Submit claims within 3 months of duty with fuel VAT receipt

2) Return form to democracy@swansea.gov.uk

Co-opted Member Name:		Carlo Rabaiotti				Vehicle Reg. Engine Size Fuel Type <small>(e.g. Petrol / Diesel)</small>		Month Ending:		January 2024					
Address:		[REDACTED]						Post Code:							
	Start & End of Duty	Time of Meeting		Location (Place) of Duty	Description of Approved Duties	Travel Allowances		Co-opted Member Allowance Rate							
Date of Meeting	Place e.g. Home	Start	End	e.g. Civic Centre	Name of meeting please indicate with (C) if you Chaired the meeting	Travel by own vehicle		Allowance Claimed (Column 7x8)		Set by IRPW (See Rates Below)		Totals (Column 9+10)			
(1)	(2)	(3)	(4)	(5)	(6)	Miles	Rate	(9)		(10)		(11)			
								£	p	£	p	£	p		
19/01/24	Home	10.00	11.00	Guildhall	Standards Committee							105	00		
Co-opted Member Allowance Rates (As set by the Independent Remuneration Panel for Wales (IRPW)):															
Chair of Governance & Audit / Chair of Standards Cttee:					Ordinary Statutory Co-opted Member (inc. C/T Cllr on Standards Cttee:					Amount		105 00			
> 4 hrs = £268, < 4 hrs = £134					> 4 hrs = £210, < 4 hrs = £105					Claimed:					
<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) An e-mail from the Co-opted Member will be accepted as a signature providing the name of the Co-opted Member is included.</p>										For Office Use					
										Checked by: A Lowe					
										Payroll No: [REDACTED]					
Date: ...28 January 2024.....										Signature of Co-opted Member: [REDACTED] (Typed signature accepted and approved by DS)				Month Paid: _____	