

03 JUL 2014

Councillors ICT Claim Form

City and County of Swansea
Dinas a Sir Abertawe

Councillor Name:	BOB CLAY
Address:	
Post Code:	

Please provide details of ICT items or support purchased. In accordance with the Independent Remuneration Panel for Wales (IRPW) payments will only be made to Councillors following the completion of this form **together with the relevant receipt(s)**.

Date Purchased	Item / Service Purchased	Cost
Various	As per attached sheet	
Total Amount Claimed		£ 985.41

- A. I have incurred these costs to enable me to fulfil my duties as a Councillor in accordance with the IRPW determination.
 B. I understand that I am entitled to an ICT allowance not exceeding £800 per political term (2013-2017).

Councillor Signature:		Date:	3.7.14
------------------------------	--	--------------	--------

For Office Use	
Checked By:	
Payroll No.:	
Month Paid:	

Councillors ICT Claim Form

02 SEP 2014

City and County of Swansea
Dinas a Sir Abertawe



Councillor Name:	BOB CLAY		
Address:			
Post Code:			

Please provide details of ICT items or support purchased. In accordance with the Independent Remuneration Panel for Wales (IRPW) payments will only be made to Councillors following the completion of this form **together with the relevant receipt(s)**.

Date Purchased	Item / Service Purchased	Cost
20.5.2014	Printer Ink	22.59
Total Amount Claimed		£ 22.59

- A. I have incurred these costs to enable me to fulfil my duties as a Councillor in accordance with the IRPW determination.
- B. I understand that I am entitled to an ICT allowance not exceeding £800 per political term (2013-2017).

Councillor Signature:		Date:	31.7.14
-----------------------	--	-------	---------

For Office Use	
Checked By:	GAD
Payroll No.:	
Month Paid:	

03 JUL 2014

Councillors ICT Claim Form

City and County of Swansea
Dinas a Sir Abertawe

Councillor Name:	BOB CLAY
Address:	
Post Code:	

Please provide details of ICT items or support purchased. In accordance with the Independent Remuneration Panel for Wales (IRPW) payments will only be made to Councillors following the completion of this form **together with the relevant receipt(s)**.

Date Purchased	Item / Service Purchased	Cost
Various	As per attached sheet	
Total Amount Claimed		£ 985.41

- A. I have incurred these costs to enable me to fulfil my duties as a Councillor in accordance with the IRPW determination.
B. I understand that I am entitled to an ICT allowance not exceeding £800 per political term (2013-2017).

Councillor Signature:		Date:	3.7.14
------------------------------	--	--------------	--------

For Office Use	
Checked By:	
Payroll No.:	
Month Paid:	

Councillors ICT Claim Form

02 SEP 2014

City and County of Swansea
Dinas a Sir Abertawe



Councillor Name:	BOB CLAY		
Address:			
Post Code:			

Please provide details of ICT items or support purchased. In accordance with the Independent Remuneration Panel for Wales (IRPW) payments will only be made to Councillors following the completion of this form **together with the relevant receipt(s)**.

Date Purchased	Item / Service Purchased	Cost
20.5.2014	Printer Ink	22.59
Total Amount Claimed		£ 22.59

- A. I have incurred these costs to enable me to fulfil my duties as a Councillor in accordance with the IRPW determination.
- B. I understand that I am entitled to an ICT allowance not exceeding £800 per political term (2013-2017).

Councillor Signature:		Date:	31.7.14
-----------------------	--	-------	---------

For Office Use	
Checked By:	GAD
Payroll No.:	
Month Paid:	

03 JUL 2014

Councillors ICT Claim Form

City and County of Swansea
Dinas a Sir Abertawe

Councillor Name:	BOB CLAY
Address:	
Post Code:	

Please provide details of ICT items or support purchased. In accordance with the Independent Remuneration Panel for Wales (IRPW) payments will only be made to Councillors following the completion of this form **together with the relevant receipt(s)**.

Date Purchased	Item / Service Purchased	Cost
Jan 14	As per attached sheet	
Total Amount Claimed		£ 985.41

- A. I have incurred these costs to enable me to fulfil my duties as a Councillor in accordance with the IRPW determination.
 B. I understand that I am entitled to an ICT allowance not exceeding £800 per political term (2013-2017).

Councillor Signature:		Date:	3.7.14
------------------------------	--	--------------	--------

For Office Use	
Checked By:	
Payroll No.:	
Month Paid:	

Councillors ICT Claim Form

02 SEP 2014

City and County of Swansea
Dinas a Sir Abertawe



Councillor Name:	BOB CLAY		
Address:			
Post Code:			

Please provide details of ICT items or support purchased. In accordance with the Independent Remuneration Panel for Wales (IRPW) payments will only be made to Councillors following the completion of this form **together with the relevant receipt(s)**.

Date Purchased	Item / Service Purchased	Cost
20.5.2014	Printer Ink	22.59
Total Amount Claimed		£ 22.59

- A. I have incurred these costs to enable me to fulfil my duties as a Councillor in accordance with the IRPW determination.
- B. I understand that I am entitled to an ICT allowance not exceeding £800 per political term (2013-2017).

Councillor Signature:		Date:	31.7.14
-----------------------	--	-------	---------

For Office Use	
Checked By:	GAD
Payroll No.:	
Month Paid:	

Councillors ICT Claim Form

04 SEP 2015

City and County of Swansea
Dinas a Sir Abertawe



Councillor Name:	BOB CLAY
Address:	[REDACTED]
Post Code:	[REDACTED]

Please provide details of ICT items or support purchased. In accordance with the Independent Remuneration Panel for Wales (IRPW) payments will only be made to Councillors following the completion of this form together with the relevant receipt(s).

Date Purchased	Item / Service Purchased	Cost
14.4.2015	Printer ink	33.45
4.4. "	"	6.50
5.5. "	"	26.00
29.5. "	Computer Technical Support	20.00
Total Amount Claimed		£145.95

- A. I have incurred these costs to enable me to fulfil my duties as a Councillor in accordance with the IRPW determination.
 B. I understand that I am entitled to an ICT allowance not exceeding £800 per political term (2013-2017).

Councillor Signature:	[REDACTED]	Date:	5.6.15
------------------------------	------------	--------------	--------

For Office Use	
Checked By:	[Signature]
Payroll No.:	
Month Paid:	

Councillors ICT Claim Form

05 OCT 2015

City and County of Swansea
Dines a Sir Abertawe



Councillor Name:	BOB CLAY
Address:	[REDACTED]
Post Code:	[REDACTED]

Please provide details of ICT items or support purchased. In accordance with the Independent Remuneration Panel for Wales (IRPW) payments will only be made to Councillors following the completion of this form together with the relevant receipt(s).

Date Purchased	Item / Service Purchased	Cost
26.10.15	Printer ink cartridge World	6.50
1.8. "	" "	27.50
29.9	" "	37.50
15.9.	Printer Currys PC World	49.00
Total Amount Claimed		£ 130.50

- A. I have incurred these costs to enable me to fulfil my duties as a Councillor in accordance with the IRPW determination.
- B. I understand that I am entitled to an ICT allowance not exceeding £800 per political term (2013-2017).

Councillor Signature:	[REDACTED]	Date:	4.10.15
------------------------------	------------	--------------	---------

For Office Use	
Checked By:	[Signature]
Payroll No.:	
Month Paid:	

Councillors ICT Claim Form

FILE COPY

City and County of Swansea
Dinas a Sir Abertawe



Councillor Name:	BOB CLAY
Address:	[REDACTED]
Post Code:	[REDACTED]

Please provide details of ICT items or support purchased. In accordance with the Independent Remuneration Panel for Wales (IRPW) payments will only be made to Councillors following the completion of this form together with the relevant receipt(s).

Date Purchased	Item / Service Purchased	Cost
04.12.15	Cartridge World	21.50 ✓
07.01.16	Cartridge World	21.50 ✓
21.01.16	Cartridge World	33.50 ✓
27.01.16	J. Parkins Computing	45.00 ✓
29.01.16	Cartridge World.	22.50 ✓
01.03.16	Cartridge World.	35.00 ✓
Total Amount Claimed		£ 179.00

- A. I have incurred these costs to enable me to fulfil my duties as a Councillor in accordance with the IRPW determination.
- B. I understand that I am entitled to an ICT allowance not exceeding £800 per political term (2013-2017).

Councillor Signature:	[REDACTED]	Date:	31.3.16
------------------------------	------------	--------------	---------

For Office Use	
Checked By:	[Signature]
Payroll No.:	
Month Paid:	

4/4/16

Councillors ICT Claim Form

28 APR 2016 and County of Swansea Dinas a Sir Abertawe



FILE COPY

Councillor Name:	BOB CLAY
Address:	[REDACTED]
Post Code:	[REDACTED]

Please provide details of ICT items or support purchased. In accordance with the Independent Remuneration Panel for Wales (IRPW) payments will only be made to Councillors following the completion of this form together with the relevant receipt(s).

Date Purchased	Item / Service Purchased	Cost
4.4.2016	Printer ink, Cartridge World	42.00
25.4.2016	J. Parkins, Computer Services	45.00
Total Amount Claimed		£ 87.00

- A. I have incurred these costs to enable me to fulfil my duties as a Councillor in accordance with the IRPW determination.
- B. I understand that I am entitled to an ICT allowance not exceeding £800 per political term (2013-2017).

Councillor Signature:	[REDACTED]	Date:	26.4.16
------------------------------	------------	--------------	---------

For Office Use	
Checked By:	[Signature]
Payroll No.:	
Month Paid:	

3/5/16

Councillors ICT Claim Form

31 OCT 2016

City and County of Swansea
Dinas a Sir Abertawe



Councillor Name:	BOB CLAY		
Address:	[REDACTED]		
Post Code:	[REDACTED]		

Please provide details of ICT items or support purchased. In accordance with the Independent Remuneration Panel for Wales (IRPW) payments will only be made to Councillors following the completion of this form together with the relevant receipt(s).

Date Purchased	Item / Service Purchased	Cost
14-6-16	Technical Support from JP Computing.	90.00
Total Amount Claimed		£ 87.55

- A. I have incurred these costs to enable me to fulfil my duties as a Councillor in accordance with the IRPW determination.
- B. I understand that I am entitled to an ICT allowance not exceeding £800 per political term (2013-2017).

Councillor Signature:	[REDACTED]	Date:	31-10-16
------------------------------	------------	--------------	----------

For Office Use	
Checked By:	[Signature]
Payroll No.:	
Month Paid:	

11/11/16