

COUNCILLORS TRAVELLING AND SUBSISTENCE ALLOWANCES CLAIM FORM

(PLEASE COMPLETE THIS FORM IN BLACK INK)

05 JUN 2014

Councillor:		Uta Clay		Vehicle Registration Number:				Month Ending:		May 2014	
Address:								Post Code:			

Date of Meeting (1)	Start & End of Duty	Time of Meeting		Location of Duty	Description of Approved Duties (If not a Standard Council Diary meeting please provide the name of the officer present) (6)	Travelling Allowances				Subsistence		Totals (12) £ p			
	Place e.g. Home (2)	Start (3)	End (4)	Place e.g. Civic Centre (5)		Travel by Vehicle		Fares, Tolls, Parking, etc (9) £ p	Total Travelling Allowance Claimed (10) £ p	Outside the Authority's Area Only (11) £ p					
						Miles (7)	Rate (8) p								
8/5/14	Home	5.00	6.30	Civic	Annual Council	14	45						6	30	
12/5/14	"	2pm	4.45	"	Scrutiny: Wellbeing	14							6	30	
27/5/14	"	2	4	"	Area 1	14							6	30	
/ /															
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/ /															
/ /															
/ /															
TOTAL														18	90
Less payment received or Claimed from any other body or authority															
Amount Claimed														18	90

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:	4.6.14	Signature of Councillor:	
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For Office Use

Checked by:

Payroll No: _____

Month Paid: _____

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

COUNCILLORS TRAVELLING AND SUBSISTENCE ALLOWANCES CLAIM FORM

(PLEASE COMPLETE THIS FORM IN BLACK INK)

7102 TOP 10

Councillor:		Uta Clay		Vehicle Registration Number:				Month Ending:		June 2014	
Address:								Post Code:			

Date of Meeting (1)	Start & End of Duty		Time of Meeting		Location of Duty Place e.g. Civic Centre (5)	Description of Approved Duties (If not a Standard Council Diary meeting please provide the name of the officer present) (6)	Travelling Allowances				Subsistence		Totals (12) £ p				
	Place e.g. Home (2)	Start (3)	End (4)	Travel by Vehicle (7)			Rate (8) p	Fares, Tolls, Parking, etc (9) £ p	Total Travelling Allowance Claimed (10) £ p	Outside the Authority's Area Only (11) £ p							
											Miles (7)	Rate (8) p			Fares, Tolls, Parking, etc (9) £ p	Total Travelling Allowance Claimed (10) £ p	Outside the Authority's Area Only (11) £ p
2/6/14	Home	2pm	4pm	Civic	Scouting, Wellbeing	16	45							7	20	✓	
3/6/14	"	2	4	CFRymor	Comm. Dist	6								2	70	✓	
6/6/14	"	10.30	12.15	Llanfair Hl	Rata Visit: feth Cllr Hake Singel.	21								21	00	✓	
1/1				SA3 STP	Hosp., Mumbles Civic												
9/6/14	"	9.30	11.30	Civic	Corporate Parity	16								7	20	✓	
16/6/14	"	1.30	4.00	Civic C.	Wellbeing Scouting Panel	16								7	20	✓	
17/6/14	"	1.30	4.00	Guild H	Soc. Care at Home " " " "	14								6	30	✓	
18/6/14	"	5.00	7.00	Civic	DMCC	16								7	20	✓	
1/1																	
1/1																	
TOTAL														58	80		
Less payment received or Claimed from any other body or authority																	
Amount Claimed														58	80		

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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.

For Office Use

Checked by:

Payroll No: _____

Month Paid: _____

Date:	30.6.2014	Signature of Councillor:	
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Please, Submit claims within 3 months of duty with fuel VAT receipt

* No evidence available at time of submission

COUNCILLORS TRAVELLING AND SUBSISTENCE ALLOWANCES CLAIM FORM

(PLEASE COMPLETE THIS FORM IN BLACK INK)

31 JUL 2014

Councillor:		Uta Clay		Vehicle Registration Number:		Month Ending:		July 2014	
Address:								Post Code:	

Date of Meeting (1)	Start & End of Duty Place e.g. Home (2)	Time of Meeting (3) (4)		Location of Duty Place e.g. Civic Centre (5)	Description of Approved Duties (If not a Standard Council Diary meeting please provide the name of the officer present) (6)	Travelling Allowances				Subsistence		Totals (12) £ p			
		Start	End			Travel by Vehicle		Fares, Tolls, Parking, etc (9) £ p	Total Travelling Allowance Claimed (10) £ p	Outside the Authority's Area Only (11) £ p					
						Miles (7) (7)	Rate (8) p								
3/7/14	Lome	5pm	6.30	Civic	DMCC	16	45							7	20
8/1/	"	2.30	3.00	"	Soc Care at Home Scrubbing	16								7	20
14/1/	"	1.30	4.00	"	Wellbeing	16								7	20
15/1/	"	1pm	3.00	"	Soc Care	16								7	20
22/1/	"	10.15		99 Pennerd Dr.	Scrubby visit 99 Pennerd Dr										
1/1/			4pm	Civic	Areal 543 20w	27								12	15
25/1/	"	1.30	2.15	Llwynnwr Rd.	Site visit, road safety officers	3								1	35
28/1/	"	1	3pm	Civic	meet w. Lee Rogers (Wlousy)	16								7	20
30/1/	"	10.00	11.30	"	Comm. First: claims + Cllfs	16								7	20
1/1/					(Council)										
TOTAL														56	70
Less payment received or Claimed from any other body or authority															
Amount Claimed														56	70

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.

For Office Use

Checked by:

Payroll No: _____

Month Paid: _____

Date: 31.7.14

Signature of Councillor: 31.7.2014

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

* Could not obtain confirmation of fuel VAT receipt

COUNCILLORS TRAVELLING AND SUBSISTENCE ALLOWANCES CLAIM FORM

(PLEASE COMPLETE THIS FORM IN BLACK INK)

02 SEP 2014

Councillor:	Uta Clay	Vehicle Registration Number:		Month Ending:	August 2014	
Address:				Post Code:		

Date of Meeting (1)	Start & End of Duty		Time of Meeting		Location of Duty	Description of Approved Duties	Travelling Allowances				Subsistence	Totals	
	Place e.g. Home (2)	Start (3)	End (4)	Place e.g. Civic Centre (5)	(If not a Standard Council Diary meeting please provide the name of the officer present) (6)	Travel by Vehicle		Fares, Tolls, Parking, etc (9)	Total Travelling Allowance Claimed (10)	Outside the Authority's Area Only (11)			
						Miles (7)	Rate (8)						
19/8/14	Home	1.15	4.15	Civic	Area 1	16	45						7 20
20/ /	Home	9.45	12.15	Brynmarch	Comm. Fleet	6							2 70
/ /													
/ /													
/ /													
/ /													
/ /													
/ /													
/ /													
/ /													
/ /													
TOTAL													9 90
Less payment received or Claimed from any other body or authority													
Amount Claimed													9 90

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For Office Use

Checked by:

Payroll No: _____

Month Paid: _____

Date:	29.8.14	Signature of Councillor:	
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Please, Submit claims within 3 months of duty with fuel VAT receipt

COUNCILLORS TRAVELLING AND SUBSISTENCE ALLOWANCES CLAIM FORM

(PLEASE COMPLETE THIS FORM IN BLACK INK)

06 OCT 2014

Councillor:	Uta Clay	Vehicle Registration Number:		Month Ending:	September 14
Address:				Post Code:	

Date of Meeting	Start & End of Duty	Time of Meeting		Location of Duty	Description of Approved Duties	Travelling Allowances				Subsistence		Totals	
		Place e.g. Home	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		
	Miles			Rate					£	p			
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)	(14)
2/9/14	Home	10.00	12.00	Civic	Social Care at Home	16	45					7	20
9/1/1	"	5pm	7pm	"	Council	16						7	20
17/1/1	"	10	12	Wannarwyle	Rota Visit	21						9	45
16/1/1	"	2	4	Civic	Area 1	16						7	20
29/1/1	"	1.30	4	"	Screening Wellbeing children	16						7	20
30/1/1	"	11	12	"	Peer Review Interview	16						7	20
30/1/1	"	5	7	"	Council	16						7	20
1/1/1													
1/1/1													
1/1/1													
TOTAL												52	65
Less payment received or Claimed from any other body or authority													
Amount Claimed												52	65

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.

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

For Office Use

Checked by: 

Payroll No: _____

Month Paid: _____

Date: 6.10.2014 Signature of Councillor: _____

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

* unable to obtain invoice at time of processing

COUNCILLORS TRAVELLING AND SUBSISTENCE ALLOWANCES CLAIM FORM

(PLEASE COMPLETE THIS FORM IN BLACK INK)

05 NOV 2014

Councillor:		Uta Clay		Vehicle Registration Number:				Month Ending:		Oct 2014	
Address:								Post Code:			

Date of Meeting (1)	Start & End of Duty Place e.g. Home (2)	Time of Meeting (3) (4)		Location of Duty Place e.g. Civic Centre (5)	Description of Approved Duties (If not a Standard Council Diary meeting please provide the name of the officer present) (6)	Travelling Allowances				Subsistence		Totals (12) £ p			
		Start	End			Travel by Vehicle		Fares, Tolls, Parking, etc (9) £ p	Total Travelling Allowance Claimed (10) £ p	Outside the Authority's Area Only (11) £ p					
						Miles (7)	Rate (8) p								
3/10/14	home	10am	12	Morr. Police	Meet w. Chief Insp Morris	8	45							3	60
6/10/14	"	11.15	12.15	Civic	meet w. Head Dem. Services	16								7	20
7/10/14	"	12.45	4.15	"	Soc Care at Home, Scunth	16								7	20
8/10/14	"	2.15	5.45	"	Chr. Training, email phone	16								7	20
9/10/14	"	4.15	7.30	"	DMCC	16								7	20
13/10/14	"	1.15	5.30	"	Wellbeing Scunth	16								7	20
20/10/14	"	9.00	5.00	Glandur Rd	Whistlebrow to establish Jane	11								4	95
27/10/14	"	12.45	4.45	Civic	Wellbeing Scunth	16								7	20
24/10/14	"	10.15	12.45	"	meet w. D. McKenna Scunth	16								7	20
28/10/14	"	1.45	5.30	"	Soc Care at Home Scunth	16								7	20
TOTAL														66	15
Less payment received or Claimed from any other body or authority															
Amount Claimed														66	15

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For Office Use

Checked by:

Payroll No: _____

Month Paid: _____

Date:	5.11.2014	Signature of Councillor:	
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Please, Submit claims within 3 months of duty with fuel VAT receipt

COUNCILLORS TRAVELLING AND SUBSISTENCE ALLOWANCES CLAIM FORM

(PLEASE COMPLETE THIS FORM IN BLACK INK)

24 NOV 2014

Councillor:		Uta Clay			Vehicle Registration Number:				Month Ending:		Nov 14	
Address:									Post Code:			

Date of Meeting (1)	Start & End of Duty Place e.g. Home (2)	Time of Meeting		Location of Duty Place e.g. Civic Centre (5)	Description of Approved Duties (If not a Standard Council Diary meeting please provide the name of the officer present) (6)	Travelling Allowances				Subsistence		Totals (12) £ p			
		Start (3)	End (4)			Travel by Vehicle Miles (7)	Rate (8) p	Fares, Tolls, Parking, etc (9) £ p	Total Travelling Allowance Claimed (10) £ p	Outside the Authority's Area Only (11) £ p					
4/11/14	home	2.45	8.30	Civic	Council (2 meetings)	16	45						7	20	
7/ /	"	11.45	2.00	Oldway C.	Meet w. Cathy Murray + Cllr Jane H	12							4	5	
11/ /	"	1.15	4.00	Civic	Area 1	16							7	20	
13/ /	"	8.45	12.15	"	Interview, Wales Audit	16							7	20	
17/ /	"	4.40	5.30	Trafford School	Child Protection Training	4							1	50	
19/ /	"	8.45	11.30	Bordesley Vic	Evangelism w. Janet										
20/ /	"			Parkway + Tradesglo	Alison - letter	21							9	45	
31/10/14	"	9.15	1.45	Civic	Training Safeguarding	16							7	20	
TOTAL														43	20
Less payment received or Claimed from any other body or authority															
Amount Claimed														43	20

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.

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For Office Use

Checked by:

Payroll No: _____

Month Paid: _____

Date:

25.11.2014

Signature of Councillor:

[Signature]

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

COUNCILLORS TRAVELLING AND SUBSISTENCE ALLOWANCES CLAIM FORM

(PLEASE COMPLETE THIS FORM IN BLACK INK)

06 JAN 2015

Councillor:	Uta Clay	Vehicle Registration Number:		Month Ending:	Dec. 2014
Address:				Post Code:	

Date of Meeting	Start & End of Duty	Time of Meeting		Location of Duty	Description of Approved Duties	Travelling Allowances				Subsistence		Totals
		Place e.g. Home	Start			End	Place e.g. Civic Centre	Travel by Vehicle		Fares, Tolls, Parking, etc	Total Travelling Allowance Claimed	
	Miles			Rate				£	p			
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	
							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 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.
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- 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.

For Office Use

Checked by:



Payroll No:

Month Paid:

Date: 5.1.2015

Signature of Councillor:

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

COUNCILLORS TRAVELLING AND SUBSISTENCE ALLOWANCES CLAIM FORM

(PLEASE COMPLETE THIS FORM IN BLACK INK)

Councillor:		Uta Clay		Vehicle Registration Number:				Month Ending:		Jan. 2015	
Address:								Post Code:			

Date of Meeting (1)	Start & End of Duty Place e.g. Home (2)	Time of Meeting		Location of Duty Place e.g. Civic Centre (5)	Description of Approved Duties (If not a Standard Council Diary meeting please provide the name of the officer present) (6)	Travelling Allowances				Subsistence		Totals (12) £ p.		
		Start (3)	End (4)			Travel by Vehicle Miles (7)	Rate p (8)	Fares, Tolls, Parking, etc £ p (9)	Total Travelling Allowance Claimed £ p (10)	Outside the Authority's Area Only £ p (11)				
5/1/15	home	1.00	4.45	Civic	TASS scrutiny panel	16	45						7	20
6/1/15	"	4.15	8.15	"	Council	16							7	20
9/1/15	"	12.30	4.45	"	TASS	16							7	20
12/1/15	"	1.15	4.30	"	Services CAC	16							7	20
19/1/15	"	1.00	3.30	"	Wellbeing Scrutiny	16							7	20
20/1/15	"	4.15	7.00	"	Combined (present scrutiny report)	16							7	20
26/1/15	"	8.45	1.30	"	Extra visit Singleton, Heston, Heston	22							9	90
1/1/15					Civic									
1/1/15														
1/1/15														
TOTAL													53	10
Less payment received or Claimed from any other body or authority														
Amount Claimed													53	10

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Date:	5.1.2015	Signature of Councillor:		
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For Office Use

Checked by: AM

Payroll No: _____

Month Paid: _____

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

* NO evidence available at time of processing

COUNCILLORS TRAVELLING AND SUBSISTENCE ALLOWANCES CLAIM FORM

(PLEASE COMPLETE THIS FORM IN BLACK INK)

03 MAR 2015

Councillor:	Uta Clay	Vehicle Registration Number:		Month Ending:	February 2015
Address:				Post Code:	

Date of Meeting (1)	Start & End of Duty Place e.g. Home (2)	Time of Meeting (3) (4)		Location of Duty Place e.g. Civic Centre (5)	Description of Approved Duties (If not a Standard Council Diary meeting please provide the name of the officer present) (6)	Travelling Allowances				Subsistence		Totals (12)			
		Start (7)	End (8)			Travel by Vehicle Miles (9)	Rate p (10)	Fares, Tolls, Parking, etc £ p (11)	Total Travelling Allowance Claimed £ p (12)	Outside the Authority's Area Only £ p (13)					
2/2/15	Home			1.15	4.45						Civic	WASS meeting	16	45	
4/2/15	"	11.00	12.45	Bangor	Comm. First East Clerk	6								2	70
9/1/15	"	1.30	4.30	Civic	CAC Services	16								7	20
16/1/15	"	12.45	4.45	Civic	Scriming: Child & Fam	16								7	20
24/1/15	"	4.15	9.30	Civic	Council	16								7	20
1/1/15															
1/1/15															
1/1/15															
1/1/15															
TOTAL														31	50
Less payment received or Claimed from any other body or authority															
Amount Claimed														31	50

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For Office Use

Checked by:

Payroll No: _____

Month Paid: _____

Date:	3.3.2015	Signature of Councillor:	
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Please, Submit claims within 3 months of duty with fuel VAT receipt *if evidence not available at time of submission*

COUNCILLORS TRAVELLING AND SUBSISTENCE ALLOWANCES CLAIM FORM

(PLEASE COMPLETE THIS FORM IN BLACK INK)

30 MAR 2015

Councillor:		Uta Clay		Vehicle Registration Number:				Month Ending:		March 2015	
Address:								Post Code:			

(1) Date of Meeting	(2) Start & End of Duty Place e.g. Home	(3) Time of Meeting		(5) Location of Duty Place e.g. Civic Centre	(6) Description of Approved Duties (If not a Standard Council Diary meeting please provide the name of the officer present)	(7) Travelling Allowances				(8) Subsistence		(9) Totals		
		(3) Start	(4) End			(7) Travel by Vehicle Miles	(8) Rate p	(9) Fares, Tolls, Parking, etc £ p	(10) Total Travelling Allowance Claimed £ p	(11) Outside the Authority's Area Only £ p				
2/3/15	Home	12.30	4.45	Civic	TASS scrutiny	16	45						7	20
3/3/15	"	4.15	7.45	Guildhall	Council	14							6	30
12/3/15	"	12	1.30	Bangor	Comm. Hst. Visits. Minis	6							2	70
16/3/15	"	12.45	5.00	Civic	Scrutiny Panel, Children + Fam	16							7	90
18/3/15	"	8.15	1.00	Guildhall	week w. Leader Stuart Davies etc	14							6	30
26/3/15	"	1.15	4.30	"	Interactive LDP									
30/3/15	"	12.30	4.45	"	Meehy SSD SW's / Fiona Larsen	14							6	30
31/3/15	"	4.15		"	TASS	14							6	30
1/4/15	"			"	Council	14							6	30
TOTAL													48	60
Less payment received or Claimed from any other body or authority														
Amount Claimed													48	60

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.

For Office Use

Checked by:

Payroll No: _____

Month Paid: _____

Date:	31.3.2015	Signature of Councillor:	
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Please, Submit claims within 3 months of duty with fuel VAT receipt

COUNCILLORS TRAVELLING AND SUBSISTENCE ALLOWANCES CLAIM FORM

(PLEASE COMPLETE THIS FORM IN BLACK INK)

02 JUN 2015

Councillor:		Uta Clay			Vehicle Registration Number:				Month Ending:		April 2015 May 2015	
Address:								Post Code:				

(1) Date of Meeting	(2) Start & End of Duty Place e.g. Home	(3) Time of Meeting		(5) Location of Duty Place e.g. Civic Centre	(6) Description of Approved Duties (If not a Standard Council Diary meeting please provide the name of the officer present)	(7) Travelling Allowances				(8) Subsistence		(12) Totals		
		(3) Start	(4) End			(7) Miles	(8) Rate	(9) Fares, Tolls, Parking, etc	(10) Total Travelling Allowance Claimed	(11) Outside the Authority's Area Only				
											(9) £		p	(10) £
7/4/15	Home	1.15	4.45	Guildhall	TASS	14	45						6	30
13/ /	"	1.15	4.45	"	Child & Fam. Scmt panel	14							6	30
14/ /	"	1.15	1.45	"	TASS subgroup; supp. f. core rs	14							6	30
28/ /	"	3.45	7.45	"	Council	14							6	30
1 /														
MAY 15														
11/5/15	Home	1.15	4.45	"	Child & Fam. Scmtg	14							6	30
14/ /	"	1.30	4.45	Civic	TASS session w. ministers	14							6	30
19/ /	"	4.15	7.30	Guildhall	Council AGM	14							6	30
1 /														
TOTAL													37	80
Less payment received or Claimed from any other body or authority														
Amount Claimed													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.

For Office Use

Checked by:

Payroll No: _____

Month Paid: _____

Date:	1.6.2015	Signature of Councillor:	
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Please, Submit claims within 3 months of duty with fuel VAT receipt