

**COUNCILLORS TRAVELLING AND SUBSISTENCE ALLOWANCES CLAIM FORM**  
(PLEASE COMPLETE THIS FORM IN BLACK INK)

02 OCT 2015

Councillor:	Andrew Jones	Vehicle Registration Number & Engine Size		Month Ending:	September
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)			
		Start (3)	End (4)			Travel by Vehicle		Fares, Tolls, Parking, etc (9)	Total Travelling Allowance Claimed (10)		Outside the Authority's Area Only (11)				
						Miles (7)	Rate (8) p		£	p	£			p	£
18/09/15	Home	10.00	12.30	LGDU Offices Cardiff	Meeting of the Local Government Data Unit	103	45			46	35			46	35
/ /															
/ /															
/ /															
TOTAL										46	35			46	35
Less payment received or Claimed from any other body or authority															
Amount Claimed										46	35			46	35

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:	02/10/2015	Signature of Councillor:	
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Please, Submit claims within 3 months of duty with fuel VAT receipt