## Co-opted Member Travelling & Subsistence Allowances Claim Form 1) Submit claims within 3 months of duty with fuel VAT receipt 2) Return form to <u>democracy@swansea.gov.uk</u>

Co-opted		Beth Allender				Vehicle Reg.					Month Ending:		30/11/22		
Member Name:						Engine Size									
Address:						Fuel Type					Post Code:				
						(e.g. Petrol / Diesel)		•••••							
	Start & End of Duty	Time of Meeting		Location (Place) of Duty	Description of Approved D	uties	Travel Allowances			Co-opted Member Allowance Rate					
Date of Place e.g. Meeting Home		Start	End	e.g. Civic Centre	Name of meeting please indicate with (C) if you C meeting	Chaired the Travel Miles				Set by IRPW (See Rates Below)		Totals (Column 9+10)			
(1)	(2)	(3)	(4)	(5)	(6)		(7)	(8)	£ (	9) q	(10) £ p		(11) £   p		
17/10/2 2	Home	4pm	5pm	Home online	Attendance and pre-reading pre-Scrutiny meeting (18 <sup>th</sup> )				•				•		
18/10/2 2	Home	4.30 pm	5.30p m	Home online	Scrutiny committee					105	00	105	00		
27/10/2 2	Home	4pm	6pm	Home online	Attendance and pre-reading at October Education Scrutiny Performance Panel						105	00	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:Amount21000> 4 hrs = £268, < 4 hrs = £134															
<ul> <li>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.</li> <li>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</li> </ul>													For Office Use Checked by: DC Payroll No:		
Date										Month	/onth Paid:				