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

Co-opted Member Travelling & Subsistence Allowances Claim Form

Co-opted		JULIE MARY DAVIES				Vehicle Reg.					Month	Month Ending:		01/2023	
Member Name:					Engine Size										
Address:						Fuel Type				Post Code:					
	Start & End of Duty		Time of Meeting Location (Place) of Duty		(e.g. Petrol / Di		esel) 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 I vehi Miles		Allowance Claimed (Column 7x8)		Set by IRPW (See Rates Below)		Totals (Column 9+10)		
(1)	(2)	(3)	(4)	(5)	(6)		(7)	(8)	9) £	9) p	(10) £ p		(11) £ p		
09/01/ 23	HOME	13: 30	16:03	HOME	Governance & Audit Committee meeting prep + submission of questions to Chair			45p			105	5 00	105	00	
11/01/ 23	HOME	14: 00	15:	HOME	Governance & Audit Comm meeting	ittee		45p							
								45p							
								45p							
								45p							
								45p							
								45p							
								45p							
								45p							
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> 4 hrs = £268, < 4 hrs = £134											00				
as a (claim B) I decl travel C) If usir comp	Co-opted Me ed are in ac are that the lling or subs ng a private orehensive v	ember of cordance stateme istence e vehicle v ehicle in:	this Authors with the nts above expenses i whilst on C surance sp	brity and that I rates determin are correct. E n connection v Council busines becifically inclu	ure on travelling and subsistence for have actually and necessarily incu- led by the Independent Remunerat xcept as shown above I have not m with the duties indicated above. ss, Co-Opted Members should ens uding business and commuting use pted as a signature providing the n	rred the actua ion Panel for ^v nade, and will ure that they I	al mileage Wales. not make have a va	e in colun e, any cla lid driving	nn 7 abo im undei g licence	ve. The a r any ena e, MOT a	amounts actment f	Check	ffice Use ted by: DC		

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Date21/02/2023	Signature of Co-opted Member	Month Paid:

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