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

## **Co-opted Member Travelling & Subsistence Allowances Claim Form**

Co-opted Member Name: Address:		JULIE	MARY	DAVIES	Vehicle Reg. Engine Size					Month E	nding:	02/2023		
							L			2 12			_	
						Fuel Type (e.g. Petrol / Diesel)					Post Code:			
	Start & End of Duty	(Pla		Location (Place) of Duty	Description of Approved D			Travel Allowances			Co-opted Member Allowance Rate			
Date of Meeting	Place e.g. Home	Start (3)	End (4)	e.g. Civic Centre	Name of meeting please indicate with (C) if you Chaired th		Travel by own vehicle  Miles Rate		Allowance Claimed		Set by IRPW		Totals (Column 9+10)	
(1)					meeting (6)		(7)	(8)	(	(Column 7x8)		(See Rates Below)		(11)
06/02/ 23	HOME	09: 30	13:05	HOME	Governance & Audit Committee meeting prep + submission of questions to Chair		0		£	р	£ 210	00	210	<b>p</b>
08/02/ 23	HOME	12: 30	16:04	HOME	Governance & Audit Comm meet + meeting	ittee pre-	0							
19/02/ 23	HOME	15:0 0	15:26	HOME	Completion of Self-Assessment of Good Practice questionnaire		0							
21/02/ 23	HOME	10.3 0	11.20	HOME	Governance & Audit Committee mandatory training: Complaints & Cyber Security (recorded on 24/01/23)		(0)	ombine	d train	ing, pre	viously p	aid for)		
Chair of		e & Aud	it / Chair o	ance Rate of Standards	S (As set by the Independe Cttee: Ordinary Statutory Co- > 4 hrs = £210, < 4 hrs	opted Memb					ee:	Amount Claimed:		210.00

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<ul> <li>A) I declare that I have necessarily incurred expenditure on travelling and subsistence for the purpose of enabling me to perform approved duties 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 travelling or subsistence expenses in connection with the duties indicated above.</li> <li>C) If using a private vehicle whilst on Council business, Co-Opted Members should ensure that they have a valid driving licence, MOT and comprehensive vehicle insurance specifically including business and commuting use.</li> <li>D) An e-mail from the Co-opted Member will be accepted as a signature providing the name of the Co-opted Member is included.</li> </ul>	For Office Use Checked by: DC Payroll No:
Date 20/02/23 Signature of Co-opted Member	Month Paid: