

CLAIM FOR COUNCILLORS' ALLOWANCES

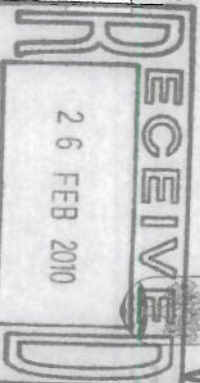
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Worcestershire
County Council

NAME: **PAM DAVEY**

31 MAR 2010

This claim must be made within two months of the date of the duty carried out.



I CLAIM

DATE	DESCRIPTION OF DUTY	LOCATION OF DUTY	PLACE & TIME OF DEPARTURE		PLACE & TIME OF RETURN		MODE OF TRANSPORT	TRAVELLING		SUBSISTENCE		
			PLACE	TIME	PLACE	TIME		PRIVATE VEHICLE MILES	FARES PARKING ETC.			
19.1.10	Highway Services	CIVIC CTR. Worcester	"	"	"	"	Bus	28	19	19		
14.1.10	Downhill	C. HALL	"	"	"	"	"	19	19	19		
19.1.10	Adult Well-Being D+S.	"	"	"	"	"	"	19	19	19		
20.1.10	Health D+S.	"	"	"	"	"	"	19	19	19		
14.2.10	Community Co. Review.	"	"	"	"	"	"	19	19	19		
18.2.10	Cardinal's Office mtg, 2.00. Bodd.	"	"	"	"	"	"	19	19	19		
18.2.10	Health D+S.	"	"	"	"	"	"	19	19	19		
18.2.10	Downhill.	"	"	"	"	"	"	19	19	19		
20.2.10	Local forum pre mtg. Community Strategy	"	"	"	"	"	"	19	19	19		
Details of Private Vehicle (if used) MAKE & MODEL: Vauxhall Astra EXACT C.C.: 1598								TOTALS	Rate per mile	136	39.5p	53.72

Particulars of amount received or claimed from any other authority or body:

I DECLARE that:-

- (a) I have necessarily incurred expenditure on travelling and subsistence for the purpose of enabling me to perform approved duties as a Councillor of Worcestershire County Council
- (b) I have actually paid the fares and made the other payments shown and attach relevant receipts.
- (c) The amounts claimed are strictly in accordance with the rates determined by Worcestershire County Council.

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 relates, other than those indicated above. I am not entitled to receive remuneration in respect of the duties to which the claim relates, other than the payment of allowances.

Signature

Date: **26th February 10**

Total amount claimed £ **53.72**

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THIS COPY TO BE RETURNED TO MEMBER SUPPORT UNIT, COUNTY HALL, SPETCHLEY ROAD, WORCESTER WR5 2NP