

CLAIM FOR COUNCILLORS' ALLOWANCES

NAME: **TERRY SPEDDER - 1021379.**

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



Worcestershire
County Council

1 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.	1	2	3	4
7/4/10	Redditch Library opening	Redditch	Home	13-45	Home	16-20	CAR	25		1.20			
"	PACT. GENERAL/SOUTHWEST	"	"	18-30	"	20-55	"	24					
19/4	CABINET	W.C.C.	"	9-15	"	12-35	"	19					
28/4	STANBURY & ETHICS COMMITTEE	"	"	8-45	"	11-50	"	18					
13/5/10	COUNCIL AND CHILDREN'S BUS	"	"	8-30	"	16-20	"	19					
17/5	HOLLYHURST LEADS FIRST SIGHT - TOUR & PARRISHURST. REDDITCH	REDDITCH	"	10-45	W.C.C.	13-50	"	-					
"	CHILDREN'S BUS. BODDLETT STATIONERY	W.C.C.	W.C.C.	15-45	Home	16-15	"	49					
26/5	HEALTH O/S.	W.C.C.	Home	12-45	"	17-10	"	18					
27/5	CABINET	W.C.C.	"	19-30	"	19-50	"	19					
"	POLICING MATTERS FORUM REDDITCH	P.B.C.	"	18-15	"	21-40	"	26					
Particulars of amount received or claimed from any other authority or body:													
Details of Private Vehicle (if used) MAKE & MODEL: FORD MONDEO EXACT C.C.: 1999.							TOTALS	Rate per mile	217		1.20		
I DECLARE that:-							£85.72		FOR OFFICE USE ONLY				

paid June 10

- (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 expenses in respect of the duties indicated above. I am not entitled to receive remuneration in respect of the duties to which the claim relates, otherwise than under the current scheme for the payment of allowances.

Signature: _____

Date: *01/06/10*

Total amount claimed £ **86.92**

Attendances verified and claim certified for payment

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