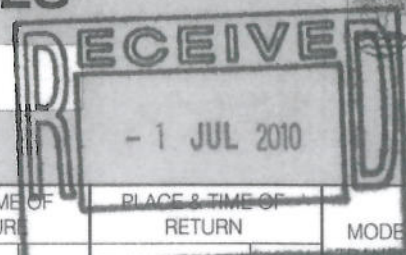


CLAIM FOR COUNCILLORS' ALLOWANCES

worcestershire
county council

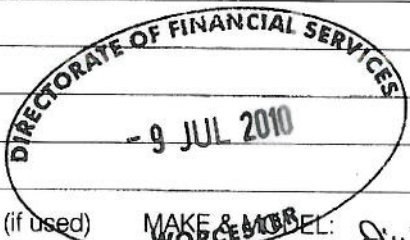
NAME: John Thomas - 1021381



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.		£	p
								Self	Passenger	£	p		
10/06/10	Childrens Services Bd	County	Stowport	1330	Stowport	1616	Car	32					
11/06/10	Briefing Biodiversity	County	Stowport	0923	Stowport	1340	Car	32					
13/06/10	Briefing Adults Community Service Eddleclark	County	Stowport	1326	Stowport	1558	Car	32					
16/06/10	Briefing PEP. Diane Tully	County	Stowport	1359	Stowport	1611	Car	32					
22/06/10	County Council	County	Stowport	1231	Stowport	1359	Car	32					
25/06/10	Highways Forum Dale House	County Dale House	Stowport	1535	Stowport	1738	Car	12					
28/06/10	Dementia Briefing	County	Stowport	0915	Stowport	1259	Car	34	34				
Details of Private Vehicle (if used) MAKE & MODEL: <u>Audi A4 TDI</u> EXACT C.C.: <u>2498</u>								TOTALS	20	6	34		
Particulars of amount received or claimed from any other authority or body: <u>WFDC H/W FRA</u>								Rate per mile		p		p	



paid July

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 in accordance with the rates determined by Worcestershire County Council.

I DECLARE that the subsistence expenditure claimed above, except as shown above I have not made, and will not make, any claim under any enactment for travelling or subsistence with 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 scheme for the payment of allowances.

Signature: _____

Date: 01/07/10

FOR OFFICE USE ONLY

Total amount claimed £ 82.39

Attendances verified and claim certified for payment

Certifying Officer

THIS COPY TO

SUPPORT UNIT, COUNTY HALL, SPETCHLEY ROAD, WORCESTER WR5 2NP

CR1376