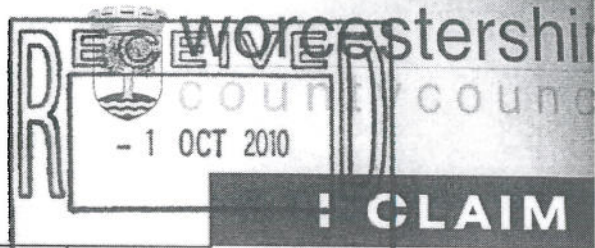


# CLAIM FOR COUNCILLORS' ALLOWANCES



NAME: LYNNE DUFFY [REDACTED]

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

DATE	DESCRIPTION OF DUTY	LOCATION OF DUTY	PLACE & TIME OF DEPARTURE		PLACE & TIME OF RETURN		MODE OF TRANSPORT	TRAVELLING		SUBS
			PLACE	TIME	PLACE	TIME		PRIVATE VEHICLE MILES Self Passenger	FARES PARKING ETC. £ p	
<del>11/10</del>	<del>SAGE</del>	<del>WCC</del>	<del>Home</del>	<del>1.30</del>	<del>Home</del>	<del>4</del>	<del>CAR</del>	<del>20</del>		<del>outside of my house.</del>
<del>20/10</del>	<del>CAR</del>	<del>WCC</del>	<del>Home</del>	<del>1.30</del>	<del>Home</del>	<del>4</del>	<del>CAR</del>	<del>20</del>		
8/9	CAR	WCC	Home	1.30	Home	4	CAR	20		
9/9	COUNCIL	WCC	Home	9.00	Home	3	CAR	20		
30/9	ADULT SCRUTINY	WCC	Home	9.30	Home	1	CAR	20		

*Matt  
14/10/10*

Details of Private Vehicle (if used) MAKE & MODEL: \_\_\_\_\_ EXACT C.C.: \_\_\_\_\_

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

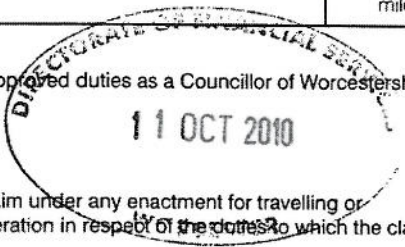
TOTALS  
Rate per mile  
60  
~~100~~  
39.5 p

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 expenses or allowances in connection 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 Council's current scheme for the payment of allowances.

Signature: [REDACTED] Date: 30.9.10



FOR OFFICE ONLY

Total amount claimed £ .....

Attendances verified and claim ce for payment