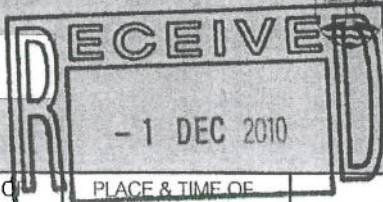


CLAIM FOR COUNCILLORS' ALLOWANCES

worcestershire
countycouncil



NAME: MARY DRINKWATER

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		
4/10/10	Monthly Update with John Jordan/Kathernie Clough	County Hall	Home	12.05	Home	4.00	Car	14					
4/10/10	Official Opening of new Performing Arts Studios	Berkley Perseve College	Home	5.30	St Barnabas School	6.50	Car	-	NO CLAIM				
5/10/10	Chairman's Business	County Hall	Worcester Physio Centre	10.40	Home	12.45	Car	-	NO CLAIM				
5/10/10	PACT meeting	St Georges CE School	Home	6.30	Home	8.20	Car	-	NO CLAIM				
8/10/10	Chairman's business - correspondence etc	County Hall	Home	1.50	Home	3.35	Car	-	NO CLAIM				
9/10/10	Medal Ceremonies - Summer Reading Challenge	Worcester Midway	Home	9.55	Home	11.20	Car	6					
12/10/10	Chairman's business	County Hall	Home	12.30	Home	5.30	Car	-	NO CLAIM				
14/10/10	Chairman's business	County Hall	Smith Bank Hospital	11.45	Home	1.05	Car	-	NO CLAIM				
15/10/10	Chairman's business	County Hall	Home	12.00	Home	14.30	Car	-	NO CLAIM				
18/10/10	Hungarian Visitors to County Hall	County Hall	Home	9.15	Home	11.40	Car	14					
19/10/10	Local Democracy Conference	County Hall	Home	9.30	Home	1.05	Car	14					
20/10/10	Citizenship Ceremony	County Hall	Home	9.25	County Hall	12.00	Car	7					
Details of Private Vehicle (if used) MAKE & MODEL:			EXACT C.C.: 15.98			TOTALS	55						
Particulars of amount received or claimed from any other authority or body:							Rate per mile	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: _____ Date: 29-10-2010

FOR OFFICE USE ONLY

Total amount claimed £ 21.73

Attendances verified and claim certified for payment

_____ Certifying Officer

FOR COUNCILLORS' ALLOWANCES



Worcestershire
county council

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		
21/10/10	Appointment with Simon Mallinson + Chairman's business	County Hall	Southbank Hospital	1:40	Southbank Hospital	4:40	Car	-	NO	CLAIM			
26/10/10	Chairmans duties	"					Car		No	claim			
27/10/10	Chairmans duties						Car		No	claim			
29/10/10	Chairmans duties						Car		No	claim			

Details of Private Vehicle (if used) MAKE & MODEL: _____ EXACT C.C.: _____ TOTALS: £ - £

Particulars of amount received or claimed from any other authority or body: _____ Rate per mile: _____

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.

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Signature: _____ Date: 29-10-2010

FOR OFFICE USE ONLY

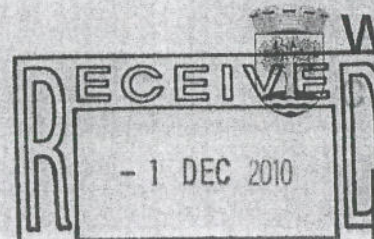
Total amount claimed £

Attendances verified and claim certified

.....
 Certifying Officer

FOR COUNCILLORS' ALLOWANCES

MARY DRINKWATER



worcestershire
County Council

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			
21.11.2010	Chairmans Duties	County Hall						No claim						
5.11.2010	Chairmans Business	"	"					No claim						
11.11.2010	Briefg with John Jordan	County Hall						No claim						
	Rememberance Service	"	"					"						
11.11.2010	Briefg ref Carol Concert	"	"					"						
15.11.2010	Chairmans Briefg for Council	"	"			County Hall	12.00							
"	Briefg Simon Mallinson	"	"				1.00	2.00						
17.11.2010	Citizenship	County Hall		10.00			1.00							
18.11.2010	Full Council	"	County Hall	10.00	Home		3.00	1.50						
19.11.2010	Computer Training	"	"	10.00	"			12.30						
22.11.2010	Chairmans Business	"	"	2.30	"			3.45						
24.11.2010	Jan BAYFORD & Simon Mallinson	"	"	2.30	"			3.45						
Details of Private Vehicle (if used) MAKE & MODEL: <i>Meeky</i>							EXACT C.C.:		TOTALS		-			
Particulars of amount received or claimed from any other authority or body:							Rate per mile							

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.
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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: 30-11-2010

FOR OFFICE USE ONLY

Total amount claimed £ - £

Attendances verified and claim certified for payment

[Redacted Signature]

Certifying Officer