MEMBERS

6

WYRE FOREST DISTRICT COUNCIL

Reg. No. .....

Payroll No. ..... Travelling and Subsistence Claim for month ending Feb - April 20..... Make & Model of car.....

NAME V. WIGGS Division..... C.C. Rating..... If car changed since previous claim state date.....

(BLOCK LETTERS)

Date	Details of Journeys				Miles	Purpose and Passengers Carried	Subsistence and other expenses				
	Description		Mileometer				Time Absent		State: Rail fare, Parking Fee, Breakfast, Lunch, etc.	Amount	
	From	To	From	To	1@6		From	To		£	p
~~23-2-12~~	~~Home~~	~~Civic~~			~~12~~	~~O. Scrutiny~~					
29.2.12	"	Civic			4	WFDC					
8-3-12	"	D Hse			12	O. Scrutiny					
14-3-12	"	Civic			4	Regeneration Meeting					
~~20-3-12~~	~~"~~	~~Civic~~			~~12~~	~~O. Scrutiny~~					
~~5-4-12~~	"	~~D Hse~~			~~12~~	~~O. Scrutiny~~					
11-4-12	"	D Hse			12	Members Meeting					
27-4-12	"	Civic			4	Licensing					
					202						
				Miles	~~252~~				Total Subsistence, etc.		

WYRE FOREST DISTRICT COUNCIL
6 - JUN 2012
RESOURCES DIRECTORATE

PAID
June 12

I certify that :
a) the above details are a correct record of official journeys, and that expenditure has actually been incurred on subsistence claimed and this has not been previously reimbursed.
b) During the period of this claim, the vehicle was insured, official use was specified in the insurance certificate * and I held a current driving licence, I have neither done nor omitted to do anything to reduce or invalidate the said insurance.

* Annual check of business-use car insurance checked by.....Date.....

Totals for each Expenditure Code

Item	Code	£	p
Mileage	3301	80	80
Train / Bus / Taxi	3501		
Subsistence	4701		
TOTAL		80	80

Mileage Rates

		£	p
202	miles at 40p	80	80
	miles at p		
	miles at p		
=	PAYABLE	80	80

Signed..... (Claimant)

Authorised..... (Authorised Signatory)

Date authorised 1.6.12

Please note claims must be received by the Human Resources Division on or before the 6th of the month in which payment is required.