

off No. MA 54308  
 RE MA SAKER  
 (BLOCK LETTERS)

Division Travelling and Subsistence Claim for month ending  
 C.C. Rating MA-1

2011  
 Reg. No. MA 1  
 Make & Model of car MA 1  
 If car changed since previous claim state date \_\_\_\_\_

**WYRE FOREST DISTRICT COUNCIL**

*Members*

Date	Description	Mileometer From	Mileometer To	Miles	Purpose and Passengers Carried	Subsistence and other expenses	
						From	To
10/3	Sunderland			10 ✓	Purchase Sweets		
10/3				10 ✓	Admission		
23/5				10 ✓	Admission		
24/5				10 ✓	Secretary Telephone		
				10 ✓			

**PAID**  
 SUND 2011

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			Mileage Rates		
Item	Code	£	p	£	p
Mileage	3301			40	00
Tran / Bus / Tax	3501				
Subsistence	4701				
<b>TOTAL</b>				<b>PAVABLE</b>	<b>16 00</b>

Signed: \_\_\_\_\_  
 (Chairman)

Authorised: \_\_\_\_\_  
 (Authorised Signatory)

Date authorised: \_\_\_\_\_

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

