..EMBERS' MILEAGE CLAIM FOR..

..AL BOROUGH OF WINDSOR AND MAIDENHEAD

..MS MUST BE FORWARDED TO DEMOCRATIC SERVICES BY THE 1st EACH MONTH

RECEIVED
14 APR 2011

CLAIM BY COUNCILLOR: MRS C ENDACOTT
COUNCILLOR (EMPLOYEE) NUMBER (as found on payslip).....
FOR ALLOWANCES FOR THE MONTH OF: MARCH / APRIL

PERIOD COVERED BY CLAIM			REASON(S) FOR CLAIM			TRAVEL ALLOWANCE CLAIMED		
DATE	TIME FROM	TIME TO	PLACE WHERE DUTY WAS PERFOMED	DESCRIPTION OF APPROVED DUTY	PLEASE STATE WHICH OFFICER ARRANGED THIS MEETING IF NOT DEMOCRATIC SERVICES	PRIVATE CAR Mileage	PUBLIC TRANSPORT (Receipts must be attached) £	p
15.3	7.30	10.30	M'Head	O&S Scrutiny	✓	14		
16.3	7.00	10.00	WIN.	D.C	✓	4		
29.3	5.30	6.30	M'Head	O&S Scrutiny	✓	14		
4.4	5.00	6.30	M'HEAD	OLYMPIC WORKING GROUP	✓	14		
13.4	7.00	10.00	WIN	D.C	✓	4		
					SUB TOTAL	✓ 50		
					TOTALS CLAIMED	✓ 50		

PLEASE COMPLETE ONE LINE FOR EACH MEETING, CONFERENCE ETC YOU HAVE ATTENDED AND SIGN BELOW AFTER READING THE DECLARATION OVERLEAF.

Less any amount claimed/received from any other Authority/Body.

[N.B. Please ensure that you have attached (a) valid VAT receipt(s) - i.e. a till receipt pre dating the first journey claimed, and showing the petrol company's VAT registration number and identify the amount paid for fuel.]

VAT RECEIPT ATTACHED YES / ~~NO~~*
*Please delete as appropriate

Signature of Member:.....✓..... ✓.....

Date..13.4.11.....

For Office Use Only					
Democratic Services:	Authorised for Payment:	Date: 14/04/11			
Payroll:	Input by:	Batch No:	Che..d by:	Date:	

EMBERS' MILEAGE CLAIM FOR

ROYAL BOROUGH OF WINDSOR AND MAIDENHEAD

RECEIVED 19 AUG 2011

CLAIMS MUST BE FORWARDED TO DEMOCRATIC SERVICES BY THE 1st OF EACH MONTH

CLAIM BY COUNCILLOR: MRS C ENDACOTT

COUNCILLOR (EMPLOYEE) NUMBER (as found on payslip) .....

FOR ALLOWANCES FOR THE MONTH OF: MAY – AUGUST

PERIOD COVERED BY CLAIM			REASON(S) FOR CLAIM			TRAVEL ALLOWANCE CLAIMED		
DATE	TIME FROM	TIME TO	PLACE WHERE DUTY WAS PERFOMED	DESCRIPTION OF APPROVED DUTY	PLEASE STATE WHICH OFFICER ARRANGED THIS MEETING IF NOT DEMOCRATIC SERVICES	PRIVATE CAR Mileage	PUBLIC TRANSPORT (Receipts must be attached) £	p
24.5	7.30	9.30	M-HEAD	COUNCIL	✓	14		
15.6	7.30	9.30	WIN	D.C PANEL	✓	4		
22.6	12.00	2.00	WIN	TOWN CENTRE PARTNERSHIP	✓	4		
28.6	7.30	10.00	M-HEAD	COUNCIL	✓	14		
5.7	6.00	5.30	M-HEAD	OLYMPIC W. GROUP	✓	14		
10.8	7.30	7.60	WIN	D.C PANEL	✓	4		
					SUB TOTAL	54		
					TOTALS CLAIMED	54		

PLEASE COMPLETE ONE LINE FOR EACH MEETING, CONFERENCE ETC YOU HAVE ATTENDED AND SIGN BELOW AFTER READING THE DECLARATION OVERLEAF.

Less any amount claimed/received from any other Authority/Body.

[N.B. Please ensure that you have attached (a) valid VAT receipt(s) - i.e. a till receipt pre dating the first journey claimed, and showing the petrol company's VAT registration number and identify the amount paid for fuel.]

VAT RECEIPT ATTACHED **YES / ~~NO~~***

***Please delete as appropriate**

Signature of Member:..... Date 19-8-11

For Office Use Only					
Democratic Services:	Authorised for Payment:		Date: 19/08/11		
Payroll:	Input by:	Date:	Batch No:	Checked by:	Date:

RECEIVED WITH THANKS

DATE: 24.1.2012

FROM: Dedworth

TO: Maidenhead

THE SUM OF: £ 12

DRIVERS NO:

DRIVERS SIGNATURE:

MEMBERS' MILEAGE CLAIM FORM

AND MAIDENHEAD

THE 1st

CLAIM BY COUNCILLOR: MRS C ENDACOTT

COUNCILLOR (EMPLOYEE) NUMBER (as found on payslip) .....

FOR ALLOWANCES FOR THE MONTH OF: JAN

DATE	FROM	TO	VIA	REASON(S) FOR CLAIM: DUTY CLAIMED	DESCRIPTION OF APPROVED DUTY	PLEASE STATE WHICH OFFICER ARRANGED THIS MEETING IF NOT DEMOCRATIC SERVICES	TRAVEL ALLOWANCE CLAIMED: PRIVATE CAR Mileage	PUBLIC TRANSPORT (Receipts must be attached) £	p	
12-1-12	4.30	6.00	DORNEY		OLYMPIC UPDATE MEETING	✓	16			D.O.
17.1.	5.00	6.00	M'HEAD		OLYMPIC WORKING GROUP	✓	14			
24.1	6.30	8.30	"		O-S. JOINT MEETING (informal meeting) Andy Scott	✓		[illegible]	—	TAXI
30.1.	7.30		"		O.S ADULT SERVICES	✓	14			
1.2	6.00		"		PLANNING	✓	[illegible]	5	—	TAXI
						SUB TOTAL	44	27	00	
						TOTALS CLAIMED	44	27	—	

PLEASE COMPLETE ONE LINE FOR EACH MEETING, CONFERENCE ETC YOU HAVE ATTENDED AND SIGN BELOW AFTER READING THE DECLARATION OVERLEAF.

Less any amount claimed/received from any other Authority/Body.

[N.B. Please ensure that you have attached (a) valid VAT receipt(s) - i.e. a till receipt pre dating the first journey claimed, and showing the petrol company's VAT registration number and identify the amount paid for fuel.]

VAT RECEIPT ATTACHED ~~YES~~ / NO*

*Please delete as appropriate

Signature of Member: .....

Date 2.2.12

For Office Use Only					
Democratic Services:	Authorised for Payment:		Date: 06/2/12.		
Payroll:	Input by:	Date:	Batch No:	Checked by:	Date:

..EMBERS' MILEAGE CLAIM FO. 1

ROYAL BOROUGH OF WINDSOR AND MAIDENHEAD

CLAIMS MUST BE FORWARDED TO DEMOCRATIC SERVICES BY THE 1st OF EACH MONTH

CLAIM BY COUNCILLOR: MRS C R ENDACOTT

COUNCILLOR (EMPLOYEE) NUMBER (as found on payslip).....

FOR ALLOWANCES FOR THE MONTH OF: MARCH/APRIL

PERIOD COVERED BY CLAIM			REASON(S) FOR CLAIM			TRAVEL ALLOWANCE CLAIMED		
DATE	TIME FROM	TIME TO	PLACE WHERE DUTY WAS PERFOMED	DESCRIPTION OF APPROVED DUTY	PLEASE STATE WHICH OFFICER ARRANGED THIS MEETING IF NOT DEMOCRATIC SERVICES	PRIVATE CAR Mileage	PUBLIC TRANSPORT (Receipts must be attached) £	p
6.3.12	12.15	2.00	WINDSOR	TOWN PARTNERSHIP	✓	4		
13.3.12	5.00	6.15	MAIDENHEAD	OLYMPIC WORKING GROUP	✓	14		
28.3.12	7.00	8.30	WINDSOR	WINDSOR D.C.	✓	4		
3.4.12	6.30	7.30	MAIDENHEAD	JOINT O-S	✓	14		
16.4.12	5.00	6.30	MAIDENHEAD	OLYMPIC WORKING GROUP	✓	14		
24.4.12	5.45	6.15	WINDSOR	SITE VISIT	✓	2		
25.4.12	7.00	9.00	WINDSOR	D.C. PANEL	✓	4		
					SUB TOTAL	✓ 56		
					TOTALS CLAIMED	✓ 56		

PLEASE COMPLETE ONE LINE FOR EACH MEETING, CONFERENCE ETC YOU HAVE ATTENDED AND SIGN BELOW AFTER READING THE DECLARATION OVERLEAF.

Less any amount claimed/received from any other Authority/Body.

[N.B. Please ensure that you have attached (a) valid VAT receipt(s) - i.e. a till receipt pre dating the first journey claimed, and showing the petrol company's VAT registration number and identify the amount paid for fuel.]

VAT RECEIPT ATTACHED ✓ **YES / NO***

***Please delete as appropriate**

Signature of Member:.....

Date 25.4.12

For Office Use Only					
Democratic Services:	Authorised for Payment:		Date: 26/04/12.		
Payroll:	Input by:	Date:	Batch No:	Checked by:	Date: