MEMBERS' MILEAGE CLAIM FORM

ROYAL BOROUGH OF WINDSOR AND MAIDENHEAD

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

CLAIM BY COUNCILLOR: .....Lynne Jones.....

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

FOR ALLOWANCES FOR THE MONTH OF:November 16.....

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
10/11/16	18.30	19.30	Town Hall	Members briefing BLP		19		
21/11/16	17.00	19.00	Guildhall	Corporate Serv		5		
22/11/16	18.30	20.30	Town Hall	Corporate Parenting		19		
16/11/16	18.30	21.00	Town Hall	Childrens Services		19		
23/11/16	19.00	21.00	Town Hall	Adult Services		19		
29/11/16	18.30	19.30	Town Hall	Employment Panel		19		
					SUB TOTAL	100		
					TOTALS CLAIMED	100		

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.....

For Office Use Only					
Democratic Services:	Authorised for Payment: [redacted]		Date: 5/12/17		
Payroll:	Input by:	Date:	Batch No:	Checked by:	Date:

MEMBERS' MILEAGE CLAIM FORM

ROYAL BOROUGH OF WINDSOR AND MAIDENHEAD

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

CLAIM BY COUNCILLOR: .....Lynne Jones.....

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

FOR ALLOWANCES FOR THE MONTH OF:December16.....

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
06/12/16	18.30	20.30	Town Hall	Corporate Serv		19		
08/12/16	18.30	21.00	Guildhall	Childrens Serv		5		
12/12/16	13,50	14.50	Town Hall	Appeals panel		19		
13/11/16	19.30	21.00	Town Hall	Full Council		19		
					SUB TOTAL	62		
					TOTALS CLAIMED	62		

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.....

For Office Use Only					
Democratic Services:	Authorised for Payment: [redacted]		Date: 5/1/17		
Payroll:	Input by:		Batch No:	Checked by:	Date:

MEMBERS' MILEAGE CLAIM FORM

ROYAL BOROUGH OF WINDSOR AND MAIDENHEAD

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

CLAIM BY COUNCILLOR: .....Lynne Jones.....

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

FOR ALLOWANCES FOR THE MONTH OF January 17.....

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
05/01/17	18.30	20.30	Town Hall	Employment Panel		19		
06/01/17	09.30	10.30	Town Hall	Staff forum		19		
09/01/17	17.00	18.00	Guildhall	Highways call in		5		
19/01/17	19.30	21.00	Guildhall	Corporate Serv		5		
24/01/17	18.30	19.30	Town Hall	Employment panel		19		
25/01/17	18.30	21.00	Guildhall	Childrens Services		5		
					SUB TOTAL	72		
					TOTALS CLAIMED	72		

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.....

For Office Use Only					
Democratic Services:	Authorised for Payment: [redacted]		Date: 5/1/17		
Payroll:	Input by:	Date:	Batch No:	Checked by:	Date:

MEMBERS' MILEAGE CLAIM FORM

ROYAL BOROUGH OF WINDSOR AND MAIDENHEAD

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

CLAIM BY COUNCILLOR: .....Lynne Jones.....

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

FOR ALLOWANCES FOR THE MONTH OF February 17.....

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
01/02/17	19.00	21.00	Town Hall	Adults Services		19		
14/02/17	17.00	19.00	Town Hall	Corporate Serv		19		
16/02/17	17.00	19.00	Guildhall	Audit and Performance		5		
21/02/17	19.30	22.00	Town Hall	Council		19		
					SUB TOTAL	62		
					TOTALS CLAIMED	62		

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.....

For Office Use Only					
Democratic Services:	Authorised for Payment [redacted]		Date: 5/4/17		
Payroll:	Input by:	Date:	Batch No:	Checked by:	Date:

MEMBERS' MILEAGE CLAIM FORM

ROYAL BOROUGH OF WINDSOR AND MAIDENHEAD

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

CLAIM BY COUNCILLOR: .....Lynne Jones.....

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

FOR ALLOWANCES FOR THE MONTH OF March 17.....

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
14/03/17	18.30	19.30	Town Hall	Employment Panel		19		
15/03/17	19.30	21.30	Town Hall	Corporate services		19		
16/02/17	17.00	19.00	Town Hall	Adult Services		19		
22/03/17	19.30	21.00	Guildhall	Childrens Serv		5		
30/03/17	19.30	10.20	Guildhall	Council		5		
20/03/17	18.30	19.00	Guildhall	Member briefing – highways		5		
28/03/17	18.30	20.30	Town Hall	Corporate parenting		19		
					SUB TOTAL	91		
					TOTALS CLAIMED	91		

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.....

For Office Use Only					
Democratic Services:	Authorised for Payment: [redacted]		Date: 5/4/17		
Payroll:	Input by:	Date:	Batch No:	Checked by:	Date:

MEMBERS' MILEAGE CLAIM FORM

ROYAL BOROUGH OF WINDSOR AND MAIDENHEAD

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

CLAIM BY COUNCILLOR: .....Lynne Jones.....

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

FOR ALLOWANCES FOR THE MONTH OF July 17.....

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
10//07/17	09.30	10.30	Town Hall	Leader of Opposition Meeting Senior Officer	Alison Alexander/ Andy Jeffs	19		
18/07/17	18.30	21.30	Town Hall	Childrens Services O&S		19		
20/07/17	18.30	21.00	Town Hall	Corporate services		19		
25/07/17	19.30	21.30	Town Hall	Council		19		
					SUB TOTAL	76		
					TALS CLAIMED	76		

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 jou and showing the petrol company's VAT registration number and identify the amount paid for fuel.]

[redacted]

TTACHED **YES / NO***

***Please delete as appropriate**

Signature of Member:... [redacted] .....

Date.....29/11/17.....

For Office Use Only					
Democratic Services:	Authorised for Paymen [redacted]		Date: 14/12/17		
Payroll:	Input by:	Date:	Batch No:	Checked by:	Date: