CLAIMS MUST BE FORWARDED TO DEMOCRATIC SERVICES BY THE 25th OF EACH MONTH.

CLAIM BY COUNCILLOR: JOHN LOW COUNCILLOR NUMBER (as found on payslip)...
FOR ALLOWANCES FOR THE MONTH OF: JANUARY 2019

REASON(S) FOR CLAIM							
DATE	PLACE WHERE DUTY WAS DESCRIPTION OF APPROVED DUTY						
	PERFOMED	(Please indicate officer arranging meeting if not Democratic Services)					
16/1/19	WINDSON GUIDHAN	TAX LICENSING APPEALS					
<u>C</u>	1						
		TOTAL CLAIMED	£30				

I DECLARE THAT the claims are strictly in accordance with the rates determined by the Council and by the Local Government Allowances and (Allowances to Members) Regulation

Signature of Member

For Office Use Only

Democratic Services: Authorised for Payment:

Payroll: Date: 25/1/9

Batch No: Checked by: Date:

CLAIMS MUST BE FORWARDED TO DEMOCRATIC SERVICES BY THE 25th OF EACH MONTH.

CLAIM BY COUNCILLOR:
COUNCILLOR NUMBER (as found on payslip)
FOR ALLOWANCES FOR THE MONTH OF

REASON(S) FOR CLAIM					
DATE	PLACE WHERE DUTY WAS PERFOMED	DESCRIPTION OF APPROVED DUTY (Please indicate officer arranging meeting if not Democratic Services)	CLAIMED		
12/11/	18 MAI) ENHEAD	TAXI LICENCE APPEAL	530		
		TOTAL CLAIMED			

I DECLARE THAT the claims are strictly in accordance with the rates determined by the Council and by the Local Government Allowances and (Allowances to Members) Regulation

Signature of Members

For Office Use Only

Democratic Services: Authorised for Payment:

Payroll: Input by: Date: 19/12/18

Batch No: Checked by: Date:

CLAIMS MUST BE FORWARDED TO DEMOCRATIC SERVICES BY THE 25th OF EACH MONTH.

CLAIM BY COUNCILLOR: Sourier
COUNCILLOR NUMBER (as found on payslip)
FOR ALLOWANCES FOR THE MONTH OF

AMOUNT **CLAIMED**

	ACE WHERE DUTY WAS		DESCRIPTION OF APPROVE	CD DUTY	CLAIMED
PE	RFOMED	(Please indicate	officer arranging meeting if	not Democratic Services)	
-1/13/18 M	AMENUEAD THAL	- TAXI	APPEALL		£30
				TOTAL CLAIMED	
ECLARE THAT the embers) Regular	claims are strictly in accordance	with the rates determi		the Local Government Allowance	s and (Allowances to
			7	8)(1)	
gnature of Mem		*****	Date	////	
or Office Use On					
Democratic Services:	Authorised for Payment:		Date: 3 /10/19	8	
Payroll:	Input by:	Date.	Batch No:	Checked by:	Date:

REASON(S) FOR CLAIM

CLAIMS MUST BE FORWARDED TO DEMOCRATIC SERVICES BY THE 25th OF EACH MONTH.

D .
CLAIM BY COUNCILLOR: Bowley
COUNCILLOR NUMBER (as found on payslip)
FOR ALLOWANCES FOR THE MONTH OF

		R	EASON(S) FOR CLA	IM			AMOUNT
DATE	PLACE WHER	E DUTY WAS		DESCRIPTION	N OF APPROVE	DDUTY	CLAIMED
	PERFOMED	ZZOTI WIID					
11			(Flease indicate (micer arrang	ing meeting it r	not Democratic Services)	0
31/8/2018	M.T	to T	axi lieo	ns.vol	anne	est.	F30
1 1					J. F.	V	A
							Par
						TOTAL CLAIMED	FSO
I DECLARE THAT	Γ the claims are	strictly in accordance v	with the rates determin	ned by the Co	ouncil and by t	he Local Government Allowan	age and (Allowanaes to
Members) Regulat			Gotoriii	ned by the C	ouncil and by t	ne Local Government Anowan	ces and (Anowances to
					- Ś	2/	
Signatura of Manul					- 38	1/2	
Signature of Memi			*****		Date		
For Office Use Onl							
Democratic Servi				Date	14/9/18		
Payroll:	Input	by:	Date:	Batch No:	CHOILD	Checked by:	Date:

CLAIMS MUST BE FORWARDED TO DEMOCRATIC SERVICES BY THE 25th OF EACH MONTH.

T day day
CLAIM BY COUNCILLOR: 2000
COUNCILLOR NUMBER (as found on payslip)
FOR ALLOWANCES FOR THE MONTH OF

			REASON(S) FOR CLA	IM			AMOUNT CLAIMED
DATE	PLACE V PERFOM	WHERE DUTY WAS IED	(Please indicate	officer ar		D DUTY not Democratic Services)	
26.6.18	MAZ	ENHEAS THALL	ScHOOL	TRA	NSBRT	ARALS	30
							2
DECLARE THA Members) Regulati	T the clain	ns are strictly in accordance	with the rates determine	ned by t		the Local Government Allowan	ces and (Allowances to
Signature of Memb			**********		Date	6.6.18	
Democratic Servi		Authorised for Payment:			Date: 26/6/18		
Payroll:		Input by:	Date:	Batch 1		Checked by:	Date: