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BOLTON METROPOLITAN BOROUGH COUNCIL

No.			•		Notes:
رے	By: Cm			51:9	Travel Reimbursement Travel Reimbursement (e.g. Car Park, taxis) Dependent Carer's Allowance
Payroll system:	- Details input onto	səliM OQ	 9gesliM lam10M	finnomA q: ₹ : \$8: ≥	. Subsistence Allowance
	(esoiors & estimment	Completed by Cor	K OŁLICIYT NSE ONTX (OH	
	Date				Approved
(For Car Allowance claimants only)	nicle on Council business.	he use of my vel	ve adequate insurance cover for t	rad bine ence and hav	(b) I am the holder of a currer
nent for travelling or subsistence	make, any claim under any enacti cated on this form.	ade, and will not i ibni sətrub ərli dit	rrect. Except as shown, I have not m tendance allowance in connection w	inserted on this form are co nancial loss allowance or at	I declare that the particulars expenses or allowances, or fir
as a Member of the Bolton are strictly in accordance with	se of enabling me to perform dutit m; and that the amounts claimed	eoqruq ərli 10ì, əən sini no nworls	rpenditure in travelling and subsiste the fares and made other payments	cil; that I have actually paid	DECLARATION: (a) I declare that I have actually Metropolitan Borough Count the rates determined by Boltz
Pay No. Cubic Capacity 215 (cc.	Exact	of Member pitals please) ration No.	(Block ca		
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In all other circumstances, the reimbursement will be subject to deduction of both Income Tax & National Insurance. * Subsistence Allowance is paid non-taxable providing it is linked to a journey more than 5 miles from the normal place of employment, AND you are away for more than 5 hours.

If any details are missing, the form will be returned and payment therefore delayed. Please note that all Personal Details must be shown above and the form must be both signed and authorised.

	Particulars of Journeys Description of Approved Duties,	Time of		Mode of	Miles	Dependent Carers Allowance		Fares and other Expenses		Subsistence Allowance	
Date	including Locations (From & To)	Departure	Return	Travel	Claimed	£	p	£	p	£	p
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Deduct any amounts received by way of Travelling & Subsistence from any other Authorities or bodies on the above dates and give particulars

CLAIMS MUST BE SUBMITTED BY THE 2nd OF EACH MONTH TO GUARANTEE PAYMENT THAT MONTH.

They should be sent to Committee and Members Services for authorisation.



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	Member Date 9 karnined this allowance sheet, the figures recorded are reasonable	(() (O))	. Bassassan]	l		1			1	ayrol	Use Only
Authorised	Date	e, and the exper	ise was	necessary.]	Expe		owance	+	.00	Input by		CM
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you requițe m AY-M1	ore lines, please use a Members' Allowance All claims must be signed and authorised	s Additional by Members	al Sh e ' Servi	eet ices before	navmer	nt car ^	Nun	ber of A	ddit	tional S	Sheets Us	ed [

Payroll Shared rvice Centre, 5th Floor, Paderborn House, Boson BL1 1JW

WTH CODE : 9643

Parking TPA Arnhem

RECEIPT

Entry 12/04/07 10:36 Exit bef. 12/04/07 15:13 Paid 12/04/07 14:58 Amount GBP 4.00 Paid GBP 4.00 96T 17.5% GBP VAT NO 578 2177089 PDF 1 (4274)

Thank you

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PAY-M1

12.10.2007



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	el BMW-325 D ES		Registration			Exact	CC	199	5 1791	<u> </u>	Mo	onth MARCH	Dec	260b 20=00
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	mara linas niassa		' Allowances A	Additional S	heet	e paym	ent ca					I Sheets Us ent to	ed	

Payroll Share arvice Centre, 5th Floor, Paderborn House, B. in BL1 1JW

ASHCROFT

BOLTON METROPOLITAN BOROUGH COUNCIL

MEMBERS ALLOWANCES CLAIM

		IVILIANI	PERS ALLOWAINCES CLAI	IVI	
Claim for Month of Sc	tensel 2	o <u>07.</u>	Name of Member Hitti	ASHCROTT	Pay No.
Car (Make/Model)	ume X-T	re_	(Block capitals please) Registration No.	·	apacity 1998 . cc.
ome Address 83 J	WITCH !	lo borrer	, BLZ 4NF.		
ECLARATION: I declare that I have actually a Metropolitan Borough Counc the rates determined by Bolto	u, mar i nave actually p	aid the fares and made other p	d subsistence for the purpose of enablic payments shown on this form; and tha	ng me to perform duties as a Mem t the amounts claimed are strictly i	ber of the Bolton n accordance with
I declare that the particulars is expenses or allowances, or fin	nserted on this form are ancial loss allowance o	correct. Except as shown, I har r attendance allowance in con	ave not made, and will not make, any onection with the duties indicated on th	claim under any enactment for trav	relling or subsistence
I am the holder of a corren	t driving licence and	have adequate insurance o	over for the use of my vehicle on (Date_=	Council business. (For C	ar Allowance claimants only)
pproved			Date		
	_	FOR OFFICIAL USE	ONLY (Completed by Committee &	B Members Services)	•
	Amount £:p		Miles	,	
Subsistence Allowance Subsistence Allowance	:	Normal Mileage	54.	Details input onto Payroll s	system:
(Taxable) Travel Reimbursement (e.g. Car Park, taxis)	:		162	By: CM	
Dependent Carer's Allowance	:			Date: 7.1.08	
tes:			. , ,		
Subsistence Allowance is paid	non-taxable providing i he reimbursement w	t is linked to a journey more tl ill be subject to deduction c	nan 5 miles from the normal place of ea of both Income Tax & National Inst	mployment, AND you are away for urance.	r more than 5 hours.
	al Details must be sh	own above and the form 1	nust be both signed and authoris	i	BOLTON WIBC

Car Claim Forms for Members

They should be sent to Committee and Members Services for authorisation.

CLAIMS MUST BE SUBMITTED BY THE 2nd OF EACH MONTH TO GUARANTEE PAYMENT THAT MONTH.

on the above dates and give particulars

Deduct any amounts received by way of travelling & Subsistence from any other Authorities of bodies

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SOMERCE	səsuədxg	Allowance	20 6200	30	to:	əmiT	Date Description of Approved Duties,	
Subsistence	Fares and other	erient Carers	Miles De	9boM		···	Particulars of Journeys	

1100

BOLTON METROPOLITAN BOROUGH COUNCIL

C	•	MEM	BERS ALLOWANG	CES CLAIM		•	
Claim for Month of Des		00 <u>07.</u>	Name of Member (Block capitals please) Registration No.	Priced	ACHCE OFF	Pay No. R	_cc.
Home Address & \(\)	uncom D	o, boster	BUS HNF.				
DECLARATION: (a) I declare that I have actually a Metropolitan Borough Councithe rates determined by Bolto	il; that I have actually p n Metropolitan Boroug	oaid the fares and made oth h Council.	er payments shown on this	form; and that th	e amounts claimed are strictl	y in accordance with	
I declare that the particulars is expenses or allowances, or fin						ravelling or subsistence	
(b) I am the holder of a curlen	t driving licence and	l have adequate insurand MEMBER	e cover for the use of my	_	uncil business. (For	r Car Allowance claimants	s only)
Approved				Date			
		FOR OFFICIAL US	E ONLY (Completed by	Committee & N	Aembers Services)		
	Amount	•	Miles				
	£:p						
* Subsistence Allowance	:	Normal Mileage	108	'	Details input onto Payro	ll system:	
Subsistence Allowance (Taxable)	:		,		By:		
Travel Reimbursement (e.g. Car Park, taxis)	:				Date:	•	
Dependent Carer's Allowance	_						
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Notes:			·				
* Subsistence Allowance is paid In all other circumstances, i	non-taxable providing the reimbursement v	; it is linked to a journey mo vill be subject to deduction	re than 5 miles from the nor on of both Income Tax &	mal place of emp National Insura	loyment, AND you are away	formore than 5 hours.	11110/

Please note that all Personal Details must be shown above and the form must be both signed and authorised. If any details are missing, the form will be returned and payment therefore delayed.

7 - IAN 2008

PAYROLL SECTION

They should be sent to Committee and Members Services for authorisation.

CLAIMS MUST BE SUBMITTED BY THE 2nd OF EACH MONTH TO CUARANTEE PAYMENT THAT MONTH.

on the above dates and give particulars

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ээлэмэлсө	Allowance 'Expenses	.	Time of	Date Description of Approved Du
Subsistence	endent Carers Fares and other	Mode Miles Dep		Particulars of Journeys



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Name Phil Ash	ncroft Hom	e Addres	s 89 Juncti	on Road, D	eane, Bo	lton.	BL3 4NF			Pay	No.	
Car Make/Mod	lel Jaguar X-Type Regi	stration			Exact CO	C 1	998		M	onth J	anuar	y 20 08
I certify that:- (a) (For Car Allow (b) (For Car Allow regard to the us (c) (For Car Allow (d) I have actually a other payments (c) Froent as show	ance claims only) I have actually and necessarily incurrence claims only) I am the holder of a full, current and viet of my car on Council business. ance claims only) I will retain VAT receipts covering all just and necessarily incurred expenditure in travelling and substance on this form, and that all amounts claimed are strongly by the pot made, and will not make, any claim under an and will not make, any claim under an	alid driving lice ourneys for six esistence for th ictly in accorda y enactment fo	ence and MOT of the purpose of end ance with the rate or travelling or su	certificate (where to comply with I labling me to petes determined libsistence expe	re applicable) HMRC regula erform duties by Bolton Co enses), and i ations. as a N	nave complied	n Cou	ne Counci ncil, I have		e fares	and made
or allowances i	or financial loss allowance or attendance allowance in cor inserted on this formulare correct, and I understand that fra	nnection with t	he duties indicat	ted on this form	l. le	ıbsist	tence T			Total Miles	5	416
Signed		27 F				ıbsist	tence NT			For Pa	yrol	l Use Only
I certify that I have	kamined this allowance sheet, the figures recorded are re	•		as necessary.	Ex	pens	ses NT			Input by		cm
Authorised	Members' Services Date)			Ca	arer's	Allowance			Date		3.4.08
Date	Reason for Journey (including From and To)		Tim Departure	e of Return	Miles Claime	1	Subsiste Allowar			res and Expenses		Dependent ers Allowance
9-Jan-2008	North of England Education Conference	e, Cardiff	9:00		208		£	р	£	р	£	р
11-Jan-2008	North of England Education Conference	e, Cardiff		18:00	208		£	p	£	р	£	р
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Please only	enter the number of miles. Do not calc	ulate an a	amount for	payment.	416		£	р	£	р	£	р
If you require	more lines, please use a Members' Allo	owances A	Additional S	Sheet	. noumont	h				Sheets Us	sed	0

PAY-M1 12.10.2007 All claims must be signed and authorised by Members' Services before payment can be made, and should be sent t

Payroll Share ervice Centre, 5th Floor, Paderborn House, B on BL1 1JW

Bolton Council

Members' Allowances Claim

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Jependent ers Allowance		Fares an Other Exper	Subsistence Allowance	səliM √bəmisl⊃	of Return	Time Departure	. (0	Reason for Journey T bns mor∃ gnibuloni)	Date
	(Date	Allowance	Carer's A			Date	Phoers' Services	Authorised
	t by	ındul	TN se	Exbeuse	s necessary.	sw əsnəqxə ərif b	are reasonable, and	mined this allowance sheet, the figures recorded	// " " "
ylnO əsU l	or Payrol	4	TM eone	etsisdu	,	800K M	Date 8 1	Member.	Signed
	səliM lı			7-1-1-10	d on this form. ciplinary action.	ersonni serre sib ni fluser ysm s	that fraudulent claims	financial loss allowance or attendance allowance ented on this form are correct, and I understand	(f) The particulars ins
s and made	ly paid the fares	the Council's insura	save complied with t	s applicable), and I I IMRC regulations. From duties as a Me by Bolton Council. Ises	entificate (where H ith with H Bling me to per Saletemined b Saletense exper	ence and MOT ce x years in order to arce with the rate ance with the rate travelling or sub	it and valid driving lic ing all journeys for the are strictly in accord ste any enactment for	nce claims only) I have actually and necessarily occessarily current of a full, current of my car on Council business. I have not council business. I have not made, and that all amounts claimed that on this form, and that all amounts claimed that on this form, and that all amounts claimed that on this form.	(b) (For Car Anowar regard to the use (c) (For Car Allowar (d) I have actually an other payments si except as shown,
J 20 00	March	Month	86	Exact CC 19			Registration	I Jaguar X-Type	Car Make/Mode
	Рау Ио.		3F3 4NE	eane, Bolton. I	n Road, D	oitonul 68 e	Home Addres		Name Phil Ash

Payroll Shared inice Centre, 5th Floor, Paderborn House, Bc

If you require more lines, please use a Members' Allowances Additional Sheet

Please only enter the number of miles. Do not calculate an amount for payment.

All claims must be signed and authorised by Members' Services before payment can be made, and should be sent to

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12,10,2007

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BURROWS

BOLTON METROPOLITAN BOROUGH COUNCIL

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	f the Bolton	e to perform duties as a Member of	rpose of enabling me	nq art tot sonsteiedue bris grilley	ncurred expenditure in tran	actually and necessarily i	(a) I declare that I have
		·		Balkon	Kearsley	Dee Dime	Ноте Address
5	1285 city	Exact Cubic Capa		(Block captuls please) Registration No.	Makrix	Johnufil	Car (Make / Model)
	Pay No.	BURROMS	G//k.D.	Изме от Метре	<u> </u>	2000	Claim for Month of
			ICES CLAIM	MEMBERS ALLOWAY	,		

I declare that the particulars inserted on this form are correct. Except as shown, I have not made, and will not make, any claim under any enactment for travelling or subsistence expenses or allowance or attendance allowance in connection with the duties indicated on this form.

(For Car Allowance claimants only)

(b) I am the holder of a current driving licence and have adequate insurance cover for the use of my vehicle on Council business.

Signed MEMBER Date 0,7.07

FOR OFFICIAL USE ONLY (Completed by Committee & Members Services)

			:		Dependent Carer's Allowance
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Notes:

* Subsistence Allowance is paid non-taxable providing it is linked to a journey more than 5 miles from the normal place of employment, AMD you are away for more than 5 hours.

In all other circumstances, the reimbursement will be subject to deduction of both income Tax & National Insurance.

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	Particulars of Jour	Time		Mode of	Miles	. Dependent Allowa		Fares and Expens		Subsistence Allowance		
Date	Description of Approved Duties, including Locations (From & To)	Departure	Return	Travel	Claimed	£	p	£	р	£	р	
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8/6/07	Coalfields Community Campaign AGM Home address to Rotherham +	70.00	10.00									
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Deduct any amounts received by way of Travelling & Subsistence from any other Authorities or bodies on the above dates and give particulars

CLAIMS MUST BE SUBMITTED BY THE 2nd OF EACH MONTH TO GUARANTEE PAYMENT THAT MONTH.

They should be sent to Committee and Members Services for authorisation.

另是一

RL M37L ₹

AID : .34 T1036080329 A00000000031010

EXP 11.709

START 12/06 ISSUE 03

SALE

CARDHOLDER ODPY

PLEASE KEEP THIS FUR VOLUME RECORDS RECEIPT

Verified by PIN

00.863

THANK YOU 09:07 08/06/07 AUTH CODE: (401F3:00

008234

RECEIPT 0342

6189754

Bolton Council

Name D BURF	ROWS	Home Addres	s -5 DE-DRI	VE KEAR	SLEY				****	Pay I		
	10110	Registration			Exact CC	; 1	599		Month	Sep	tembe	er 20 07
I certify that:- (a) (For Car Allowa (b) (For Car Allowa regard to the use (c) (For Car Allowa (d) I have actually a other payments	nnce claims only) I have actually and necessarily ince claims only) I am the holder of a full, current e of my car on Council business. Ince claims only) I will retain VAT receipts covering the necessarily incurred expenditure in travelling an shown on this form, and that all amounts claimed and the state any claim up	g all journeys for six d subsistence for the re strictly in accordant	years in order to e purpose of enab nce with the rates or travelling or sub	comply with HI ling me to peri determined by osistence expe	MRC regulation form duties as y Bolton Coun- enses	ons. a Me cil.	mber of Bolton C	ouncil, l	have actually	paid the fa	eres and	made NLY
	r financial loss allowance or attendance allowance nserted on this form are correct, and I understand t				_] . Su		tence T			al Miles		500
Signed		Date	11-Oct-2007	7	Su		tence NT				yroll	Use Only
I certify that I have ex	amined this allowance sheet, the figures recorded	are reasonable, and	the expense was	necessary.	1 1	•	ses NT			ut by	F	
Authorised	Members' Services	Date			Ca	rer's	Allowance	<u> </u>	Да			
Date	Reason for Journey (including From and T		Time Departure	of Return	Miles Claime	d	Subsisten Allowand	ce e (Fares a Other Exp		D Care	ependent 's Allowance
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Please only	enter the number of miles. Do not	calculate an a	mount for p	ayment.	50		£	р :	Ε	р	£	p
	more lines, please use a Members	Allowances A	Additional Si	heet	- naumont		Number of				ed [0

PAY-M1 12.10.2007 All claims must be signed and authorised by Members' Services before paymen

Members Mowances Claim

Payroll S

(e) Except as shown, I have not made, and will not make, any claim under any enactment for travelling or subsistence expenses

			2000 appropriate and appropriate and		• • • • • • • • • • • • • • • • • • • •	manufacture of the second seco	معد المعاون المعاون والمعاون المعاون في المعاون والمعاون والمعاون والمعاون والمعاون والمعاون والمعاون والمعاون	- 4	-: certify that:
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·	Old You			712 12 21		1 10 10 10 10 10 10 10 10 10 10 10 10 10			

(For Car Allowance claims only) I am the holder of a full, current and valid driving licence and MOT certificate (where applicable), and I have complied with the Council's insurance requirements with (a) (For Car Allowance claims only) I have actually and necessarily incurred the mileage claimed in accordance with the Council's scheme of Motor Car Allowances.

LOK MEMBERS, SERVICES USE ONLY other payments shown on this form, and that all amounts claimed are strictly in accordance with the rates determined by Bolton Council. (d) I have actually and necessarily incurred expenditure in travelling and subsistence for the purpose of enabling me to perform duties as a Member of Bolton Council, I have actually paid the fares and made (For Car Allowance claims only) I will retain VAT receipts covering all journeys for six years in order to comply with HMRC regulations. regard to the use of my car on Council business.

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roll Use Only	-			isisans.		L0/01/	// Date //	Signed
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3d Service Centre, 5th Floor, Paderborn Hous 30lton BL1 1JW All claims must be signed and authorised by Members' Services before payment can be made, and should be sent to If you require more lines, please use a Members' Allowances Additional Sheet Number of Additional Sheets Used

rM-YA9

72,10,2007



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Name DBUR	ROWS Home Addre	ess 5 DEE D	RIVE KEAI	RSLEY			Pay	No.	
Car Make/Mod	del HYUNDIA MATRIX Registration			Exact CC	1599	N	lonth	NOV	/ 20 007
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Signed	Member Date	2-Jan-200		7 -	istence NT		For Pa	yro	II Use Only
	examined this allowance sheet, the figures recorded are reasonable,	and the expense w	as necessary.	Expe	nses NT		Input by		cm
Authorised 🌡	Members' Services Date			Care	's Allowance		Date		7.1.08
Date	Reason for Journey (including From and To)	Tim Departure	e of Return	Miles Claimed	Subsistence Allowance		res and r Expenses		Dependent ers Allowance
8-Nov-2007	EXT ORGANISATION COMMITTEE				£	p £	р	£	. р
	HOME TO BOLTON AND RETURN	13:00	16:00	10	£	p £	р	£	р
					£	p £	р	£	р
23-Nov-2007	ALLIANCE NORTH WEST				£	p £	р	£	р
	HOME TO KNOWSLEY AND RETURN	10:00	15:30	54	£	p £	р	£	р
			-		£	p £	р	£	р
27-Nov-2007	ADULT SERVICES COMMITTEE				£	p £	р	£	р
	HOME TO BOLTON AND RETURN	17:00	20:00	10	£	p £	р	£	р
					£	p £	р	£	р
28-Nov-2007	YOUTH CHALLENGE					p £	р	£	· p
	HOME TO BOLTON AND RETURN	16:00	18:30	10	£	p £	р	£	р
	1.10000	****			£	p £	р	£	р
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If you require PAY-M1 12.10.2007	more lines, please use a Members' Allowances All claims must be signed and authorised by Payroll Sharer Pervice C	/ Members' Sei	vices before				al Sheets Us ent to	ed 7 –	JAN 2008

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20 OR

Allowances Claim

3-Mar-2008

's *UI£6t* der of a full, current and valid driving licence and MOT certificate (where applicable), and I have complied with the Council's insurance requirements with ally and necessarily incurred the mileage claimed in accordance with the Council's scheme of Motor Car Allowances. EXP 02/09 START 01/06 Exact CC Registration 669L Home Address 5 DEE DRIVE KEARSLEY 500 314. 910 : 80000000000000 30 % MS064469 11036028630 MHILEHUNEN

vance or attendance allowance in connection with the duties indicated on this form. and will not make, any claim under any enactment for travelling or subsistence expenses **LOK MEMBERS, SERVICES USE ONLY** and that all amounts claimed are strictly in accordance with the rates determined by Bolton Council. rred expenditure in travelling and subsistence for the purpose of enabling me to perform duties as a Member of Bolton Council, I have actually paid the fares and made -whire the comply with HMRC regulations.

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Adult services Scrutiny 08:61 00:71 Departure Return Cla (oT bas mora gaid To) Time of Reason for Journey Members' Services 8015150 Date

ice sheet, the figures recorded are reasonable, and the expense was necessary.

are correct, and I understand that fraudulent claims may result in disciplinary action.

Date

Member

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RECEIPT

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Number of Additional Sheets Used

All claims must be signed and authorised by Members' Services before payment can be made, and should be sent to If you require more lines, please use a Members' Allowances Additional Sheet

Payroll Share: Fivice Centre, 5th Floor, Paderborn House, B In BL1 1JW

12,10,2007

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FOR YOUR RECORDS PLERSE KEEP THIS

M-YA9

BYRNE J

BOLTON METROPOLITAN BOROUGH COUNCIL

Date:			:	nent	Travel Reimburse (e.g. Car Park, taxis)
BΛ:			:	ла <i>пс</i> е	Subsistence Allov (Taxable)
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(exions? ersolmals! & sattin	Tompleted by Comm	PETCIAL USE ONLY	FOR C		
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le on Council business. (For Car Allowance claimants only)	r the use of my vehic	equate insurance cover for	icence and have ad	f a current driving l	o reblori en the holder o
e, any claim under any enachment for travelling or subsistence I on this form.	isde, and will not make rift the duties indicated		his form are correct.	rticulars inserted on t	I declare that the pa
enabling me to perform duties as a Member of the Bolton fine amounts daimed are strictly in accordance with	nce for the purpose of 6	res and made other payments	e actually paid the fa	s actually and necessar igh Council; that I hav d by Bolton Metropoli	Metropolitan Borou
-m1328 '00	NOV 3449	solph sp	מ חורר	Supril	У ssəxppA эшоН
Exact Cubic Capacity 1984	capitals please) oN notheris		Q224219	Mosni	Car (Make/Model)_
ON ART 36742 CH	29 C Member 75 CT	msV	FO 02	Aueust	Claim for Month of
MIAJ	TEOMYNCES C	MEMBEKS Y			

Motes:

* Subsistence Allowance is paid non-taxable providing it is linked to a journey more than 5 miles from the normal place of employment, AND you are away for more than 5 hours.

In all other circumstances, the reimbursement will be subject to deduction of both Income Tax & Mational Insurance.

Please note that all Personal Details must be shown above and the form must be both signed and authorised. If any details are missing, the form will be returned and payment therefore delayed.

22 k Abor;

Dependent Carer's



	Particulars of Journ			Mode	Miles	Depender		Fares an		Subsis	
Date	Description of Approved Duties,	1	e of	of Travel	Claimed	Allow £	адсе р	Expe £	nses p	Allow £	rance p
· · · · · · · · · · · · · · · · · · ·	including Locations (From & To)	Departure	Return		Claimed	24	P		P		
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1-1	Bury To Home.				<u> </u>				1		<u> </u>
8/08/02	JOINS POG BURY TO BURY	11-50	14-10	12							
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14 000	LAOS AND GRES CLEB ROSE NATO BLEME	15-30	18-25	9			<u> </u>				
16/08/01	CUILDAKUS SCRVICES SCRUTNY BUNY BUNY	15-30	18-10	(2					<u> </u>		
0/00/01	EXECUTIVE BRIGHOUG. SCHOOLS APPEALS.	08-30	16-60	. 6						6	7
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CLAIMS MUST BE SUBMITTED BY THE 2nd OF EACH MONTH TO GUARANTEE PAYMENT THAT MONTH.

They should be sent to Committee and Members Services for authorisation.

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Members' Allowances Claiman Bolton Inouncil

	262 Tevroll A 1970 1040 A 3c expedience of the state of t	i certify that:-
September 20 00	Registration Fermion Exact CC 1984 Month	Car Make/Model Citroen Xsara Picasso
Pay No.	Home Address 2 Manor Villas, Manor Gate Road, Breightmet, Bolton	Name Cllr John Byrne

regard to the use of my car on Council business. (b) (For Car Allowance claims only) I am the holder of a full, current and valid driving licence and MOT certificate (where applicable), and I have complied with the Council's insurance requirements with (For Car Allowance claims only) I have actually and necessarily incurred the mileage claimed in accordance with the Council's scheme of Motor Car Allowances.

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If you require more lines, please use a Members' Allowances Additional Sheet Number of Additional Sheets Used Please only enter the number of miles. Do not calculate an amount for payment. d 16

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All claims must be signed and authorised by Members' Services before payment can be made, and should be sent to

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SRB event (Home To Home)

Little Lever Youth Council MTG (Home to Home)

Childrens Serv. & YP & Sport Exec. (W to Work)

Executive Breifing (Work to Home)

Area Forum (Prestwich to Home)

12,10,2007 **IM-YA9**

79-Sep-2007

26-Sep-2007

25-Sep-2007

7002-q92-42

20-Sep-2007

Payroll Shar Service Centre, 5th Floor, Paderborn House, NCh BL1 1JW



Name Cilr Joh	n Byrne	Home Address	s 2 Manor	Villas, Man	or Gate Roa	d, Bre	ightmet, B	olton	Pay	y No.	
	el Citroen Xsara Picasso	Registration			Exact CC	1984			Month	Octob	er 20 0
(b) (For Car Allowa regard to the usi (c) (For Car Allowa (d) I have actually a other payments (e) Except as shown	ance claims only) I have actually and necessarily ance claims only) I am the holder of a full, curren e of my car on Council business. ance claims only) I will retain VAT receipts covering necessarily incurred expenditure in travelling as shown on this form, and that all amounts claimed an, I have not made, and will not make, any claim ure financial loss allowance or attendance allowance	t and valid driving lice ng all journeys for six nd subsistence for the are strictly in accordan ader any enactment fo	nce and MOT or years in order to purpose of ena nce with the rate or travelling or su	ertificate (where comply with H bling me to per s determined b ubsistence expe	e applicable), and MRC regulations form duties as a y Bolton Council. anses	I have o	complied with to of Bolton Cou OR MEME	he Counc ncil, I have	e actually paid the	e fares a	ind made
(f) The particulars i	nserted on this form are correct, and I understand	that fraudulent claims	may result in di	sciplinary action	n.	istenc	کا کا	: 38	Total Mile		45.
Signed Signed	Member	Date 27/1	2/2007		Subs	istenc	e NT		For P	ayrol	Use Only
	amined this allowance sheet, the figures recorded	are reasonable, and t	he expense was	necessary.	Expe	nses l	VT _		Input by		-
Authorised	Members' Services	Date			Care	r's Allo	wance		Date		
Date	Reason for Journey (including From and T		Time Departure		Miles Claimed		bsistence llowance		ares and or Expenses		Dependent ers Allowance
1-Oct-2007	Executive and Exec Breifing (Bur	y to Home)	13:00	17:10	9	£	р	£	p	£	р
3-Oct-2007	Cycle Forum (Bury to Hor	ne)	17:00	19:00	9	£	р	£	р	£	р
23-Oct-2007	Executive Childrens & Sport (Bur	y to Home)	16:00	18:00	9	£	р	£	р	£	р
24-Oct-2007	Director meeting (Bury to H	ome)				£	р	£	p	£	p.
24-Oct-2007	Full Council	·	17:00	21:45	9	£	8.38 p	£	р	£	р
29-Oct-2007	Exec Breifing & Exec (Bury to	Home)	12:30	17:00	9	£	р	£	р	£	р
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If you require n	nore lines, please use a Members' All claims must be signed and				payment can				al Sheets Us sent to	ed	

Payroll Sharer Pervice Centre, 5th Floor, Paderborn House, B

12.10.2007

Council

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Members' Allowances Claim

SC	November	Month	Exact CC 1984	noits	Registr	Car Make/Model Citroen Xsara Picasso
4	Pay No.		s, Manor Gate Road, Breightmet, Bolton	Adress 2 Manor Villa:	A amoH	႔ցաe Cllւ Ղօրս Bλւսe

regard to the use of my car on Council business. (b) (For Car Allowance claims only) I am the holder of a full, current and valid driving licence and MOT certificate (where applicable), and I have compiled with the Council's insurance requirements with (a) (For Car Allowance claims only) I have actually and necessarily incurred the mileage claimed in accordance with the Council's scheme of Motor Car Allowances. I certify that:-

other payments shown on this form, and that all amounts claimed are strictly in accordance with the rates determined by Bolton Council. I have actually and necessarily incurred expenditure in travelling and subsistence for the purpose of enabling me to perform duties as a Member of Bolton Council, I have actually paid the fares and made (For Car Allowance claims only) I will retain VAT receipts covering all journeys for six years in order to comply with HMRC regulations.

Total Miles inuomA laio Total Amount InuomA IstoT Exec Breif, Exec & Exec memb (Bury to Home) 3 26-Nov-2007 18:30 12:30 3 - 6 Area Forum Tonge (Home to Home) d 21-Nov-2007 d 3 3 3 21:50 08:81 Anti-bullying launch (Bury to Home) d đ 3 19-Nov-2007 d 3 3 6 18:50 16:00 Executive Breifing (Bury to Bury) 19-Nov-2007 d d 3 3 3 12:20 9:30 15 Art Gallery opening (Home to Home) 3 d 3 ď 3 ď 19:30 17:30 16-Nov-2007 d Joint PDG Children and Sports (Bury to Home) 14-Nov-2007 d 3 3 d 00:61 00:71 3 6 Director Breifing (Bury to Home) 13-Nov-2007 d 3 3 3 6 18:20 16:30 d d 3 Adults & Culture PDG (Bury to Home) 12-Nov-2007 d 3 3 24:91 15:30 M. Asquiths Performance appraisal (Bury to Home) | d đ 3 3 00:81 16:30 7002-voN-8 3 6 Director Breifing (Bury to Home) 7-Nov-2007 d 3 d 3 01:61 00:71 Childrens Trust & YMCA AGM (Bury to Home) 6-Nov-2007 d d q 88.8 21:00 16:00 3 3 6 Executive Breifing (Bury to Bury) 5-Nov-2007 13:20 15 00:01 Departure Return (including From and To) Claimed Carers Allowance Other Expenses Allowance Date Reason for Journey Time of Dependent SəliM Fares and Subsistence Members' Services Carer's Allowance Date Authorised Date certify that I have examined this allowance sheet, the figures recorded are reasonable, and the expense was necessary. TM sesneqx∃ λα indul 七2 ets C Signed For Payroll Use Only TM epistence MT The particulars inserted on this form are correct, and I understand that fraudulent daims may result in disciplinary action. Total Miles Subsistence T or allowances, or financial loss allowance or attendance allowance in connection with the duties indicated on this form. Except as shown, I have not made, and will not make, any claim under any enactment for travelling or subsistence expenses **LOK MEMBERS, SERVICES USE ONLY**

All claims must be signed and authorised by Members' Services before payment can be made, and should be sent to 1M-YA9 If you require more lines, please use a Members' Allowances Additional Sheet Number of Additional Sheets Used

901

q 8£.8

12,10,2007

Payroll Share ervice Centre, 5th Floor, Paderborn House, E 3n BL1 1JW

Please only enter the number of miles. Do not calculate an amount for payment.

Members' Allowances Additional Sheet

Bolton Council

Please note this is only an additional sheet, and must be submitted with a Members' Allowance Claim Form.

Name Cllr Jol	nn Byrne			Pay No.		Month Nover	nber 20 07
Signed 🕖	[-, 00]	12/07	Authorise	d	h	Members' Services Date	
Date	Reason for Journey (including From and To)	Tim Departure	e of Return	Miles Claimed	Subsistence Allowance	Fares and Other Expenses	Dependent Carers Allowance
27-Nov-2007	Lads and Girls Board meeting (Bury to Home)	15:30	20:10	9.	£ p	£ p	£ p
30-Nov-2007	Mytham Rd School Young MP's (Home to Home)	13:00	15:00	5	£ p	£ p	£ p
					£ p	£ p	£ p
				·	£ p	£ p	£ p
	· · · · · · · · · · · · · · · · · · ·		***********		£ p	£ p	£ p
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				Total Miles	£ p Total Amount	£ p Total Amount	Total Amount
.	() ()	mount for:	navment	14	£ p	£ p	£ p
Please only	enter the number of miles. Do not calculate an a	Members' Se	rvices before			<u> </u>	

PAY-M2 12.10,2007

Members' Allowances Claim and Bolton Ilonno Spec Gouncil BOLTON MBC

				, 0			1		l certify that:-
Z0 00	December	Month	1981	DD toex3		Registration	Picasso	Citroen Xsara	Car Make/Model
4	Рау Ио.		id, Breightmet, Bolton	Manor Gate Ros	2 Manor Villas,	Home Address		λιυe	Name Cllr John B

regard to the use of my car on Council business. (b) (For Car Allowance claims only) I am the holder of a full, current and valid driving licence and MOT certificate (where applicable), and I have complied with the Council's insurance requirements with (For Car Allowance claims only) I have actually and necessarily incurred the mileage claimed in accordance with the Council's scheme of Motor Car Allowances.

I have actually and necessarily incurred expenditure in travelling and subsistence for the purpose of enabling me to perform duties as a Member of Bolton Council, I have actually paid the fares and made (For Car Allowance claims only) I will retain VAT receipts covering all journeys for six years in order to comply with HMRC regulations.

Input by TN sesnedx3 certify that I have examined this allowance sheet, the figures recorded are reasonable, and the expense was necessary. Date For Payroll Use Only Subsistence NT The particulars inserted on this form are correct, and I understand that fraudulent daims may result in disciplinary action. Total Miles Subsistence T or allowances, or financial loss allowance or attendance allowance in connection with the duties indicated on this form. Except as shown, I have not made, and will not make, any claim under any enactment for travelling or subsistence expenses **LOB MEMBERS, SERVICES USE ONLY** other payments shown on this form, and that all amounts daimed are strictly in accordance with the rates determined by Bolton Council.

Carer's Allowance

Date

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d	3	d	3	d	3	11	04:61	17:30	Castle Hill sports meeting (Bury to Home)	20-Dec-2007
d	3	d	3	d	3	12	14:10	11:30	Executive Breifing (Bury to Bury)	17-Dec-2007
d	3	d	3	d	3	Z	15:00	13:30	Breightmet Nth Area panel MTG (Home to Home)	14-Dec-2007
d	3	d	3	d.	3	6	00:61	00:71	Directors Breifing Sport (Bury to Home)	13-Dec-2007
d	3	d	3	d	3	9	22:10	16:30	Full Council (Home to Home)	12-Dec-2007
d	3	d	3	d	3	7	21:20	18:42	Bolton Lad/Girls Presentation (Home to Home)	11-Dec-2007
d	3	d	3	d	3	6	34:71	00:91	Exec Member Child/Sport (Bury to Home)	11-Dec-2007
d	3	d	3	d	3	7	21:00	18:30	Bridges & HHa Bolton Arts centre(Home to Home)	10-Dec-2007
d	3	d	3	d	3	6	00:۲۱	12:30	Exec & Exec Breifing (Bury to Home)	10-Dec-2007
d	3	·d	3	d	3	6	00:61	15:30	Childrens Forum Cycle forum (Bury to Home)	2-Dec-2007
d	3	d	3	d	3	6 .	00:۲۱	15:30	Childrens Scrutiny (Bury to Home)	4-Dec-2007
ndent ndent			Fares : Other Exp		swollA	Miles DemislO	of Return	Time Departure	Reason for Journey (oT bris moral pribulori)	Date
									CONTROL CINCING -	

M-YA9 All claims must be signed and authorised by Members' Services before payment can be made, and should be sent to It you require more lines, please use a Members' Allowances Additional Sheet Number of Additional Sheets Used

Payroll Share of ervice Centre, 5th Floor, Paderborn House, E an BL1 1JW

12.10,2007

Authorised



Name Cilr Joh	n Byrne I	Home Addres	s 2 Manor	Villas, Man	or Gate	Road	l, Breigh	tmet, B	olton	Pay	No.	
	del Citroen Xsara Picasso	Registration			Exact 0	CC .	1984		M	onth J	anuai	y 20 0 g
(b) (For Car Allow regard to the us (c) (For Car Allow d) I have actually other payments (e) Except as show	vance claims only) I have actually and necessarily vance claims only) I am the holder of a full, current see of my car on Council business. vance claims only) I will retain VAT receipts covering and necessarily incurred expenditure in travelling are shown on this form, and that all amounts claimed and, I have not made, and will not make, any claim under the claim of	and valid driving lice g all journeys for six nd subsistence for the te strictly in accorda der any enactment for	ence and MOT of x years in order ne purpose of er ance with the ra or travelling or so	certificate (whe to comply with abling me to pe tes determined absistence expe	re applicable HMRC reguerform dutie by Bolton Censes	le), and ulations es as a	I have cor Member of	nplied with Bolton Co	the Council		ne fares	and made
or allowances.	or financial loss allowance or attendance allowance inserted on this form are correct, and I understand the	in connection with t	he duties indica	ted on this form). C	Subsis	stence T			Total Miles	3	10(t.
Signed (Member	Date	28-May-20	08	S	Subsis	stence N	IT L		For Pa	ayrol	l Úse Only
I certify that I have	examined this allowance sheet, the figures recorded	are reasonable, and	the expense w	as necessary.	, E	Expen	ses NT			Input by	-	
Authorised	Members' Services	Date				Carer'	s Allowa	ince		Date		
Date	Reason for Journey (including From and To	o)	Tim Departure	e of Return	Mile Claim			istence wance		res and Expenses		Dependent ers Allowance
4-Jan-2008	Executive Briefing to and fror	n Bury	10:00	12:20	12		£	р	£	р	£	р
7-Jan-2008	Directors Appraisal Bury to Bolto	n to Home	16;00	18:00	9		£	р	£	р	£	р
8-Jan-2008	Speed reading Training Bury to B	/N to home	17:30	21:00	9		£	р	£	р	£	р
9-Jan-2008	Executive & Exec Briefing B/Y to E	3/N to Home	11:00	17:00	9		£	р	£	р	£	р
16-Jan-2008	Adul-Cult PDG/Informal C/cil B/Y to I	3/N to Home	15:00	19:00	9		£	р	£	р	£	р
21-Jan-2008	Swimming Pool Briefing B/Y	to B/Y	10:00	12:00	12		£	р	£	р	£	р
21-Jan-2008	Young People & Sport PDG B/Y to	B/N to Home	16:00	18:00	9		£	р	£	р	£	р
22-Jan-2008	Young People and Sport Exec B/Y to	B/N to Home	16:00	17:40	9		£	р	£	р	£	p
28-Jan-2008	Exec Briefing B/Y to B/Y	′	10:00	13:10	12		£	р	£	р	£	р
28-Jan-2008	Bsmart Card Launch B/Y to B/N	to Home	15:30	17:45	9		£	р	£	р	£	. р
30-Jan-2008	Area Forum Little Lever Home t	o Home	16:30	19:20	5	-	£	р	£	р	£	р
							£	р		p	£	р
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Please only enter the number of miles. Do not calculate an amount for payment.

20 00	Month	786L	Exact CC	Registration	Car Make/Model Citroen Xsara Picasso
	Рау Ио.	id, Breightmet, Bolton	nor Gate Roa	-lome Address 2 Manor Villas, Mar	Name Clir John Byrne

regard to the use of my car on Council business. (For Car Allowance claims only) I am the holder of a full, current and valid driving licence and MOT certificate (where applicable), and I have compiled with the Council's insurance requirements with (a) (For Car Allowance claims only) I have actually and necessarily incurred the mileage claimed in accordance with the Council's scheme of Motor Car Allowances.

LOB MEMBERS, SERVICES USE ONLY other payments shown on this form, and that all amounts daimed are strictly in accordance with the rates determined by Bolton Council. I have actually and necessarily incurred expenditure in travelling and subsistence for the purpose of enabling me to perform duties as a Member of Bolton Council, I have actually paid the fares and made (For Car Allowance claims only) I will retain VAT receipts covering all journeys for six years in order to comply with HMRC regulations.

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d	3	d	3	d	3	9	21:00	18:30	Full Council(Budget) Home to Home	20-Feb-2008
d	3	d	3	d	3	.6	00:61	15:30	Lads and Girls Club mtg B/Y to B/N to Home	19-Feb-2008
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d	3	d	3	d	3	6	18:00	16:30	Briefing YP & Sp, & Child Ser B/Y to B/N to Home	7-Feb-2008
d	3	d	3	d	3	t	00:61	18:00	Thomleigh School event Home to Home	5-Feb-2008
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Name Cllr Joh	n Byrne Home Addres	s 2 Manor	Villas, Man	or Gate	Road,	Breightmet,	Bol	ton	Pay	No.	
	lel Citroen Xsara Picasso Registration			Exact C	C 1	984		Mor	nth [/larch	20 08
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or allowances, o	or financial loss allowance or attendance allowance in connection with t inserted on this form are correct, and I understand that fraudulent claims	he duties indicat	ed on this form		ubsis	tence T			Total Miles		117·
Signed	Date	30-Jun-200			ubsis	tence NT		<i>y</i> .	For Pa	yroll	Use Only
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Authorised	Members' Services Date				arer's	Allowance			Date:		
Date	Reason for Journey (including From and To)	Time Departure	e of Return	Mile Claim		Subsisten Allowanc			s and xpenses		ependent rs Allowance
3-Mar-2008	Exec/Executive Briefing Bury to B/N to Home	12:30	17:20	9		£	р	£	р	£	p
6-Mar-2008	Youth MP's ceremony Home to Home	18:00	21:00	6		£	р	£	, р	£	р
9-Mar-2008	Carol James Briefing Bury to B/N to Home	15:30	17:00	9		£	р	£	р	£	р
9-Mar-2008	Sports award at the Reebok Home to Home	18:00	23:00	16		£	р	£	р	£	р
10-Mar-2008	Executive Briefing Bury to Bury	10:00	13:00	12		£	р	£	р	£	р
10-Mar-2008	Informal Council meeting Bury to B/N to Home	17:30	19:20	9		£	р	£	р	£	р
12-Mar-2008	Childrens Trust Bury to B/N to Home	16:00	17:30	9		£	р	£	р	£	р
14-Mar-2008	Fathers event Bolton Wise B/Y to Bolton	12:30	14:00	6		£	р	£	р	£	р
14-Mar-2008	Reebok GM radio interview B/N to R/bok to Home	14:00	16:00	11		£	р	£	р	£	р
17-Mar-2008	Joint PDG B/Y yo B/N to B/Y	9:00	11:15	12		£	р	£	р	£	р
25-Mar-2008	Education assistance panel Home to Home	12:30	14:20	6		£	р	£	р	£	р
31-Mar-2008	Executive Briefing Bury to Bury	12:30	15:35	12		£	р	£	р	£	р
Please only	enter the number of miles. Do not calculate an	amount for	payment.	Total M		Total Amou	ınt p	Total /	Amount p	£	otal Amount p
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Payroll Sha Service Centre, 5th Floor, Paderborn House, Iton BL1 1JW

12.10,2007

BOLTON METROPOLITAN BOROUGH COUNCIL

MEMBERS ALLOWANCES CLAIM

Claim for Month of May	4	20 <u>67</u>	Name of Member	BYRNE L. Pay No.
Car (Make/Model) Peu	-	06 cc	(Block capitals please) Registration No.	Exact Cubic Capacity \- 8cc.
Metropolitan Borough Counci the rates determined by Bolto: I declare that the particulars in	and necessarily incurre il; that I have actually in Metropolitan Borou inserted on this form a	ed expenditure in travelling and paid the fares and made other p gh Council.	subsistence for the purpos ayments shown on this for we not made, and will not	se of enabling me to perform duties as a Member of the Bolton rm; and that the amounts claimed are strictly in accordance with make, any claim under any enactment for travelling or subsistence icated on this form.
(b) I am the holder of a guyren Signed Approved	at driving licence an	MEMBER		Date
		FOR OFFICIAL USE	ONLY (Completed by C	Committee & Members Services)
	Amount	•	Miles	
* Subsistence Allowance Subsistence Allowance (Taxable) Travel Reimbursement (e.g. Car Park, taxis) Dependent Carer's Allowance	£:p : :	Normal Mileage	83	Details input onto Payroll system: By: CM Date: 28.6.07

Notes:

* Subsistence Allowance is paid non-taxable providing it is linked to a journey more than 5 miles from the normal place of employment, AND you are away for more than 5 hours.

In all other circumstances, the reimbursement will be subject to deduction of both Income Tax & National Insurance.

Please note that all Personal Details must be shown above and the form must be both signed and authorised. If any details are missing, the form will be returned and payment therefore delayed.

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POMENOIIA q 3	səsuədxg	Allowance	' ' ' '	10	1	erniT 1	Description of Approved Duties	Date
			I				Latucmara of Journeys	

Dependent Carers Fares and other

Subsistence

They should be sent to Committee and Members Services for authorisation.

CLAIMS MUST BE SUBMITTED BY THE 2nd OF EACH MONTH TO GUARANTEE PAYMENT THAT MONTH.

on the above dates and give particulars

(1) A(

BOLTON METROPOLITAN BOROUGH COUNCIL

MEMBERS ALLOWANCES CLAIM

laim for Month of 5)		Name of Member (Block capitals please)	ynda Syrne. Pay No.	
ar (Make/Model) <u></u>	ugeok	206 cc	Registration No.	Exact Cubic Capacity 6. cc.	
ECLARATION: a) I declare that I have actually	and necessarily inc	illas Breight			•
Metropolitan Borough Courthe rates determined by Bol	ncil; that I have actua ton Metropolitan Bo	ally paid the fares and made other pay	yments shown on this form; a	enabling me to perform duties as a Member of the Bolton nd that the amounts claimed are strictly in accordance with	
expenses or allowances, or fi	inserted on this for inancial loss alloware of driving licence	m are correct. Except as shown, I have nce or attendance allowance in connec	e not made, and will not mak tion with the duties indicate	e, any claim under any enactment for travelling or subsistence I on this form.	
	THE THEFT	and have adequate insurance cov	er for the use of my vehic	0 On Comment 1	
Since The second	,	and have adequate insurance cov MEMBER		e on Council business. (For Car Allowance claimants only) ate 31.7.07.	
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	, ,	MEMBER	ם	ateate	
	Amount		D NLY (Completed by Comm	ateate	
proved		MEMBER	ם	ateate	
Subsistence Allowance	Amount	MEMBER	D NLY (Completed by Comm	ate 31.7.07. ate ttee & Members Services)	·
Subsistence Allowance Subsistence Allowance (Taxable)	Amount	FOR OFFICIAL USE ON	DILY (Completed by Comm	ateate	-
Subsistence Allowance Subsistence Allowance (Taxable) Travel Reimbursement	Amount	FOR OFFICIAL USE ON	DILY (Completed by Comm	ate 31.7.07. ate ttee & Members Services)	·
Subsistence Allowance Subsistence Allowance (Taxable) Travel Reimbursement (e.g. Car Park, taxis) Dependent Carer's Allowance	Amount	FOR OFFICIAL USE ON	DILY (Completed by Comm	ate 31.7.07. ate ttee & Members Services) Details input onto Payroll system:	·

* Subsistence Allowance is paid non-taxable providing it is linked to a journey more than 5 miles from the normal place of employment, AND you are away for more than 5 hours. In all other circumstances, the reimbursement will be subject to deduction of both Income Tax & National Insurance.

Please note that all Personal Details must be shown above and the form must be both signed and authorised. If any details are missing, the form will be returned and payment therefore delayed.

Date Description of Approved Duties, including Locations (Firm) 11.7.07 Full Council Home - Town How - Council Home - Council	Dependent Carers Fares and other Subsistence Allowance Expenses Allowance	Miles	Mode	Time of		Time of		Particulars of Journeys	
11.7.07 free Council Home-Town How Home. 12.7.07 Planning Home-Town How-Home. (6.7:07 North Breighthout Neighbourhood Planes Work > Town How CAR 11 24.7.02 Health arriver Scrutny — How-Town LAR 6 26.7.07 Planning — Home-Town How-Thore 30.7.07 Bouton at Home — Town How-Thore (AR 6)	, F P	Claimed	1 1	1	i .	Description of Approved Duties,	Date		
12.7.07 Planning Hore-Town Hau-Town (6.7.07 North Breightner Neighbourhand Freightner Libra (6.7.07 North Breightner Neighbourhand Freightner Libra (AR 6 24.7.07 Health arriver Scruting Thome (AR 6 30.7.07 Bollon at Horse maintaing Group (AR 6		6	CAR.			ful council there town the tore.	11 7 07		
16.707 North Breightnot Reightbourhead Flatel. 24.7.07 Health arriver Scruting Hours Hours 26.7.07. Planning Home-Train Hau-Home CAR 6 30.7.07 Bolton at Home maniforing Group (AR 6			CAR			The state of the s	1 1		
26.7.07. Planning thome - Train Hall - Home CAR 6 30.7.07 Balton at Home maintaing Group.				<u> </u>		1 Post have a dish book - Chercher and a	(6.7.5)		
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30.7.07 Balton at Horse maniforing Grove				1.		Planning thome - Train Hall - thome	267.01.		
		<u> </u>	CAR			Bouton at Horse Maritoring Group	35.7,07		
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CLAIMS MUST BE SUBMITTED BY THE 2nd OF EACH MONTH TO GUARANTEE PAYMENT THAT MONTH.

OPP.

BOLTON METROPOLITAN BOROUGH COUNCIL

MEMBERS ALLOWANCES CLAIM

***************************************		_,,_	
Claim for Month of 50	2	0	Name of Member Lynn Byrne. Pay No.
Car (Make/Model)	lg sat	<u> 706</u> cc	Registration No. Exact Cubic Capacity \ \cdot \cdot \ dot \
Home Address 2 M	uiv none	as Breight	met Fold Boldon,
DECLARATION: (a) I declare that I have actually a Metropolitan Borough Counci the rates determined by Bolton	il; that I have actually p	aid the fares and made other pa	I subsistence for the purpose of enabling me to perform duties as a Member of the Bolton payments shown on this form; and that the amounts claimed are strictly in accordance with
I declare that the particulars in expenses or allowances, or fin	nserted on this form are ancial loss allowance o	e correct. Except as shown, I have attendance allowance in conne	ave not made, and will not make, any claim under any enactment for travelling or subsistence nection with the duties indicated on this form.
(b) I am the holder of a curren	it driving licence and	l have adequate insurance co	cover for the use of my vehicle on Council business. (For Car Allowance claimants only)
Signed		MEMBER	Date 31.7.07.
Approved			Date
		FOR OFFICIAL USE (ONLY (Completed by Committee & Members Services)
	Amount		Miles
	£:p		
* Subsistence Allowance	:	Normal Mileage	Details input onto Payroll system:
Subsistence Allowance (Taxable)	:		Ву:
Travel Reimbursement (e.g. Car Park, taxis)	:		Date:
Dependent Carer's Allowance	:		

Notes:

* Subsistence Allowance is paid non-taxable providing it is linked to a journey more than 5 miles from the normal place of employment, AND you are away for more than 5 hours.

In all other circumstances, the reimbursement will be subject to deduction of both Income Tax & National Insurance.

Please note that all Personal Details must be shown above and the form must be both signed and authorised. If any details are missing, the form will be returned and payment therefore delayed.



	Particulars of Journeys	e of	Mode of	Miles	Dependent Carers		Fares and Exper	- 1	Subsiste Allowa		
Date	Description of Approved Duties, including Locations (From & To)	Departure	e or Return	Travel	Claimed	£	p	£	<u>р</u>	£	p
11.7.67	Council - Home > Town Hall > Home.	6.45	9.	CA)R	<u>b</u>				-		-
12 7 67	Pig 2010 G . " " "			CAR	6		ļ				<u> </u>
16.7.07	Planaing "" Planaing "" North Breightner Teighbourhand Panel. Health overview Scrutiny Work-Town How- Planaing three - Town Hau - Horse			CAR	11	<u></u>	<u> </u>				<u> </u>
24:7.67	Health overview Scrution Wark-Town Hall-	1300K.		CAR	16						<u> </u>
26(7.6)	Planning, Home - Town Hall - Home			CAR	Q.		<u> </u>			<u> </u>	<u> </u>
30.7.07	Planning. Home - Town Hall - Home Borton a Home Monitoring Group - store			CAB	0		<u> </u>]	a .	┼
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				<u> </u>			-	<u> </u>	-		+
<u> </u>	gamounts received by way of Travelling & Subsistence from any other Auth				51						

CLAIMS MUST BE SUBMITTED BY THE 2nd OF EACH MONTH TO GUARANTEE PAYMENT THAT MONTH.

Members' Allowances Claim Bolton Gouncil

12.10.2007



							A CONTRACTOR OF THE PERSON OF			
Name Cllr. Lyı	nda Byrne Home Addres	ss 2 Manor	Villas, Man	or Gate Roa	d, Brei	ghtmet, Bo	olton	Pay	No.	
Car Make/Mod	del Puegeot 206cc Registration			Exact CC	1598		M	onth Se	pteml	oer 20ය7
(b) (For Car Allow regard to the us (c) (For Car Allow (d) I have actually other payments (e) Except as show	vance claims only) I have actually and necessarily incurred the mileactuance claims only) I am the holder of a full, current and valid driving like of my car on Council business. vance claims only) I will retain VAT receipts covering all journeys for stand necessarily incurred expenditure in travelling and subsistence for a shown on this form, and that all amounts claimed are strictly in according I have not made, and will not make, any claim under any enactment for financial loss allowance or attendance allowance in connection with	cence and MOT of ix years in order the purpose of endance with the rate for travelling or su	certificate (whe to comply with abling me to po tes determined obsistence expe	re applicable), an HMRC regulation erform duties as a by Bolton Counc enses	d I have o s. a Member il. FO	of Bolton Cou	the Council Incil, I have ERS' SI	e actually paid to	ne fares	and made
(f) The particulars	inserted on this form are correct, and I understand that fraudulent claim	s may result in dis		n.	istence	<u>, , , , , , , , , , , , , , , , , , , </u>	<u>۰02</u> ٠	Total Mile		(57) 182
Signed	Member Date 24/	• • •			istence			-1	ayroli	l Use Only
	xamined this allowance sheet, the figures recorded are reasonable, an	id the expense wa	as necessary.	1 1	nses N	******		Input by		
Authorised	Members' Services Date			<u> </u>	's Allo			Date		
Date	Reason for Journey (including From and To)	Time Departure	e of Return	Miles Claimed		sistence owance		es and Expenses		Dependent ers Allowance
6-Sep-2007	Planning frome work to home	13:00	17:00	9	£	р	£	р	£	р
18-Sep-2007	Area Working Traing. Home to Home	16:30	19:00	6	£	р	£	р	£	þ
19-Sep-2007	Health Overview Scutiny. Work to Work (Bury)	9:00	12:30	12	£	р	£	р	£	р
20-Sep-2007	Planning from work to home	12:30		9	£	р	£	р	£	р
20-Sep-2007	followed by Area Forum (breightmet)		21:00	.9	£	11.05 p	£	р	£	р
24-Sep-2007	Adults PDG Work to Home	15:00	18:30	12	£	р	£	р	£	р
					£	р	£	p-	£	р
					£	р	£	р	£	р
					£	. р	£	р	£	р
					£	p	£	р	£	р
					£	р	£	р	£	р
					£	р	£	p	£	р
			_	Total Miles		l Amount	· ·	Amount		otal Amount
Please only	enter the number of miles. Do not calculate an	amount for	payment.	57	£	11.05 p	£	р	£	b
If you require I	more lines, please use a Members' Allowances A All claims must be signed and authorised by I			payment can				Sheets Us nt to	ed	Ø

ervice Centre, 5th Floor, Paderborn House, B on BL1 1JW

12.10.2007



Name Cllr Lyr	nda Byrne Home A	ddress	2 Manor	Villas, Man	or Gate R	load,	, Breightmet,	Bolt	on	Pay	No.	
	del Puegeot 206cc Registra	ition ¶	rik Siperamaki bilandari		Exact CC	1	598		Mont	h C	ctobe	er 2007
(b) (For Car Allow regard to the us (c) (For Car Allow (d) I have actually other payments (e) Except as show	rance claims only) I am the holder of a full, current and valid of se of my car on Council business. rance claims only) I will retain VAT receipts covering all journe and necessarily incurred expenditure in travelling and subsistes shown on this form, and that all amounts claimed are strictly in, I have not made, and will not make, any claim under any ena	riving licer ys for six y nce for the n accordan ctment for	ree and MOT of rears in order to purpose of en ice with the rate travelling or su	certificate (when to comply with abling me to pe tes determined absistence expe	re applicable), HMRC regulat erform duties a by Bolton Cou enses	, and I tions. as a N	I have complied water	ith the Counc	Council's ins	ially paid th	ne fares	and made
or allowances, (f) The particulars	or financial loss allowance or attendance allowance in connect inserted on this form are correct, and I understand that fraudule	on with the nt claims n	e duties indicat nay result in dis	ed on this form sciplinary action	Sul	bsis	tence T		To	tal Miles	\$	9
Signed	Member Date 2	4/1	2/07		Sul	bsist	tence NT			For Pa	ayrol	l Use Only
I certify that I have e	<i>!</i>	able, and t	he expense wa	as necessary.	Exp	pens	ses NT		Inp	out by		
Authorised	bers' Services Date				Car	rer's	Allowance		Da	ıte		
Date	Reason for Journey (including From and To)				Miles Claimed	d						
2-Oct-2007	Standards Training workshop Home to Ho	me	17:30	19:00	6		£	p :	£	.p	£	р
4-Oct-2007	Planning Work to home		12:30	17:15	9		£	p :	£	р	£	р
18-Oct-2007	Planning work to Home		12:30	17:30	9		£	p :	£	р	£	р
24-Oct-2007	Council Home to Home		18:30	21:45	6		£	p :	£	р	£	р
Control Table Control Contro										q		
Carr Make/Model Puegeot 206cc Registration Exact CC 1598 Month October 2000											р	
Car Make/Model Puegeot 206cc Registration Exact CC 1598 Month Council's that:					р	£	р					
						\neg	£	p !	2	р	£	р
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			·				£	p !	2	р	£	р
					·		£	p ;	2	р	£	р
							£	p 1	3	р	£	р
			•		Total Mile	es	Total Amou	nt	Total An	nount	To	otal Amount
Please only	enter the number of miles. Do not calculat	e an an	nount for p	payment.	49		£ .	p 1	<u> </u>	р	£	р
if you require					payment ca						ed	0

Payroll Share Dervice Centre, 5th Floor, Paderborn House, I on BL1 1JW



Name Cllr Lyne	da Byrne	Home Address	2 Manor	√illas, Man	or Gat	e Roa	ıd,	Breightmet,	Bolt	on	Pay		
	el Puegeot 206cc	Registration)	Exact	CC	15	98		Mo	onth No	vembe	er 20 <i>0</i> 7
I certify that:- (a) (For Car Allowa (b) (For Car Allowa regard to the us (c) (For Car Allowa (d) I have actually a	ance claims only) I have actually and necessarily ance claims only) I am the holder of a full, currer e of my car on Council business. ance claims only) I will retain VAT receipts cover and necessarily incurred expenditure in travelling shown on this form, and that all amounts claimed n, I have not made, and will not make, any claim u	ing all journeys for six and subsistence for the	years in order to e purpose of en	o comply with I abling me to pe es determined	-IMRC re erform du by Bolto	gulation	ns. a Me	•	Counc	cil, I have	actually paid th	e fares a	and made
or allowances, o	or financial loss allowance or attendance allowance inserted on this form are correct, and I understand	e in connection with a	ie uulies illuivat		•	Subs	iste	ence T			Total Miles		19
1	nseried on all salorit are correct, and i diderstand	Date 24/1	2/07			Subs	iste	ence NT			For Pa	yrol <u>l</u>	Use Only
Signed Legrify that I have ex	Member	d are reasonable, and	the expense wa	as necessary.	ļ ,	Expe	ens	es NT			input by		
Authorised	embers' Services	Date				Care	r's	Allowance			Date		
Date	Reason for Journey (including From and 1	′	Time Departure	e of Return		les med		Subsisten Allowanc			es and Expenses	D Care	ependent rs Allowance
1-Nov-2007	Planning work (Bury) to		12:30	17:15		9		£	р	£	р	£	р
6-Nov-2007	Health Overview Scrutiny Hom	e to Home	9:00	12:30	(3		£	р	£	р	£	p
15-Nov-2007	Planning work (Bury) to I	nome	12:30	17:30	9	9		£	p	£	р	£	р
21-Nov-2007	Leverhulme Area Forum Home	e to Home	18:30	21:00		4		£	<u> </u>	£	р	£	p
27-Nov-2007	Adult Services Home to F	lome	17:30	18:30		3		£	' 	£	р	£	p
28-Nov-2007	Environmental Services Services	cutiny	17:30	19:00	(3] [£		£	р	£	р
29-Nov-2007	Planning work (Bury) to I	nome	12:30	17:00		9	┨╏	£	-	£	р	£	р
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<u> </u>						Miles	; ¬ г	Total Amou			Amount		otal Amount
Please only	enter the number of miles. Do no	t calculate an a	amount for	payment.	4	9] [£		£	р	£	p
If you require	more lines, please use a Members All claims must be signed an	s' Allowances And authorised by I	Additional \$ Members' Se	Sheet vices before	e paym	ent ca		Number of e made, and				sed	

Payroll Share Service Centre, 5th Floor, Paderborn House, I

12.10.2007

Payroll Share

12.10.2007



		Home Address	2 Manor \	/illas. Man	or Gate Ro	oad,	Breightme	t, Bolt	on	Pay	No. \neg	
Name Cilr Lynd		Registration •	2 19101101		Exact CC	; 15	598		Mo	nth De	cembe	er 2007
Car Make/Mode	el Puegeot 206cc							11				
regard to the use (c) (For Car Allowa (d) I have actually a	nce claims only) I have actually and necessarily nce claims only) I am the holder of a full, curre of my car on Council business. Ince claims only) I will retain VAT receipts cove nd necessarily incurred expenditure in travelling shown on this form, and that all amounts claimer	ring all journeys for six and subsistence for the	years in order to	comply with I	HMRC regulaterform duties a	tions. as a Me	ember of Bolto	n Coun	cil, I have	s insurance req actually paid th	e fares a	and made
(e) Except as shown	, I have not made, and will not make, any claim of	na in connection with th	e duties indicate	ed on this form	i. Cui		ence T			Total Miles		27·
(f) The particulars in	iserted on this form are correct, and i understand	that haddalent diame.			. 1	bsist	ence NT			For Pa	yroll	Use Only
Signed	Membe	Date 24/	12/07	v nocessarv			es NT		· · · · · · · · · · · · · · · · · · ·	Input by		
Γ'''''	amined this allowance sheet, the figures record	Date	the expense w	13 110000001.31	7 I '	•	Allowance			Date		
Authorised	Members' Service	S	· · · · · · · · · · · · · · · · · · ·		Miles		Subsiste		Far	es and	D	ependent
Date	Reason for Journe (including From and		Time Departure	e or Return_	Claime		Allowan			Expenses	Care	rs Allowance
4-Dec-2007	Adults PDG work to work	: -/	10:00	13:00	12		£	р	£	р	£	p_
12-Dec-2007	Council. Home to Hor		18:30	10:30	6		£	p	£	. p	£	p
13-Dec-2007	Planning Work to Hor		13:00	17:00	9		£	р	£	р	£	p
10-200 2007							£	р	£	р	£	р
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				I	Total Mil	les	Total Am	ount		l Amount	T	otal Amount
Please only	enter the number of miles. Do no	ot calculate an a	amount for	payment.	27		£	р	£	р	<u></u>	<u>q</u>
		- Allowoncoe /	Additional 9	Sheet			Number o	of Ad	ditiona	I Sheets U	sed	
PAY-M1	All claims must be signed 8	and authorised by N	Mellineia ae	AICE2 DOLOI	e payment orn House	can.b , E	e made, an on BL1 1J'	d shou N	ıld be s	ent to		



Name Lynda B	Syrne	Home Address	2 Manor \	/illas, Man	orgate	Road	Bolton. Bl	_2 6PS		Pay	No.	
Car Make/Mod	·	Registration			Exact		1598		M	onth Fe	bruar	y 200 ණ රි
l certify that:- (a) (For Car Allowa (b) (For Car Allowa regard to the use (c) (For Car Allowa (d) I have actually a	ance claims only) I have actually and necessarily in ance claims only) I am the holder of a full, current be of my car on Council business. I ance claims only) I will retain VAT receipts covering the necessarily incurred expenditure in travelling an shown on this form, and that all amounts claimed and, I have not made, and will not make, any claim under the claims of the claim	ncurred the mileage and valid driving lice g all journeys for six d subsistence for the	years in order to purpose of enal	comply with Historian me to per	MRC reg form dution (ulations. es as a M	lember of Bo	iton Counc	l, I have a		ares an	d made
	- fill siel lees allowance of offendance allowance	IN CONSECTION WITH TH	a nunes moicale	3 08 1115 101111.		Subsi	stence T			Total Miles		
(f) The particulars i	inserted on this form are correct, and I understand t	Date 7/5/6	may result in the	scipanary action	j	Subsi	stence N	г		For Pa	yroll	Use Only
Signed	Member Kamined this allowance sheet, the figures recorded			necessary.]	Exper	ses NT			Input by	[
Authorised		Date		***************************************	1		's Allowar	nce		Date		
Date	Reason for Journey (including From and To		Time Departure	e of Return		les med		stence /ance		res and Expenses	Care	Dependent ers Allowance
5-Feb-2008	Adult Services Scrutiny		17:00	19:00	(ŝ	£	р	£	р	£	<u> </u>
6-Feb-2008	Environmental Services Sc	rutiny	17:00	19:00	•	6	£	р	£	р	£	p
7-Feb-2008	Planning		13:00	17:00	(6	£	р	£	р	£	p
20-Feb-2008	Council		18:30	21:30	(6	£	р	£	р	£	p
21-Feb-2008	Planning		13:00	17:00	(6	£	р	£	р	£	p
27-Feb-2008	Council		18:30	21:00	(6	£	р	£	р	£	<u> </u>
							£	р	£	р	£	p
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-	1		<u> </u>	<u> </u>	F	Miles		Amount		al Amount		otal Amount
Please only	enter the number of miles. Do not	calculate an a	mount for p	oayment.	3	36	£	р	£	p	£	
	more lines, please use a Members						Numbe			ıl Sheets Us	ed	

All claims must be signed and authorised by Members' Services before payment can be made, and should be sent to



Name Lynda E	Byrne	Home Address	2 Manor V	/illas, Man	orgate	Road I	Bolton.	BL2 6PS		Pay	No.	
Car Make/Mod		Registration			Exact		1598		Mo	onth N	/larch	20 🎏 පි
(b) (For Car Allowa regard to the us (c) (For Car Allowa (d) I have actually a other payments (e) Except as show	ance claims only) I have actually and necessarily ance claims only) I am the holder of a full, current e of my car on Council business. ance claims only) I will retain VAT receipts covering necessarily incurred expenditure in travelling a shown on this form, and that all amounts claimed in, I have not made, and will not make, any claim u	t and valid driving licer ng all journeys for six y nd subsistence for the are strictly in accordan nder any enactment for	rears in order to purpose of enabore with the rates or travelling or suite travelling or suites.	comply with H ling me to per determined by osistence expe	MRC regi form dutie y Bolton (ne), and i ulations. es as a M Council.	ember of E	Bolton Counci	I, I have a	ctually paid the f	ares an	d made
or allowances, of the particulars in	or financial loss allowance or attendance allowance inserted on this form are correct, and I understand	that fraudulent claims	may result in dis	ciplinary action	n.		stence -		-	Total Miles		
Signed	Member	Date 5 - 5	- <i>ං</i> ලි ,				tence l	<u> </u>			yroll	Use Only
I certify that I have e	ramined this allowance sheet, the figures recorded	1	ne expense was	necessary.	- 1		ses NT			Input by		
Authorised 2	embers' Services	Date	<u>.</u> -			Carer'	s Allow			Date		
Date	Reason for Journey (including From and I		Time Departure	of Return	Mii Clai	les med		istence wance	Far Other	es and Expenses	Care	Dependent ers Allowance
6-Mar-2008	Planning		13:00	17:30	6	3	£	р	£	р	£	р
20-Mar-2008	Planning		13:00	17:00	(3	£	р	£	p	£	р
							£	р	£	р	£	p
							£	р	£	р	£	р
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-, <u></u>							£	р	£	р	£	р
,							£	р	£	р	£	р
						Miles		Amount		l Amount		otal Amount
Please only	enter the number of miles. Do no	calculate an ai	mount for p	ayment.	1	2	£	р	£	р	£	<u>p</u>
If you require	more lines, please use a Members	' Allowances A	dditional S	neet						Sheets Us	ed	
PAY-M1 12.10.2007	All claims must be signed a	nd authorised by N lare	ilembers' Ser n tre, 5th Flo e	vices before or, Paderbe	e paym orn Hou	ent caņ use, B	pe mad n BL	e, and snot 1 1JW	iid De St	SUL IO		St.

HALL

BOLTON METROPOLITAN BOROUGH COUNCIL

MEMBERS ALLOWANCES CLAIM

					·
Claim for Month of MAV	1 SUNG		Name of Member (Block capitals please)	JALTER HALL	Pay No
Car (Make/Model)	20EN P	ICASO	Registration No.	Exact Cubic Cap	-
Home Address 2	JANDOWA	1 Ro HARN	<u> 2000 </u>	DOLTON BLZ	3QB
DECLARATION: (a) I declare that I have actually Metropolitan Borough Coun the rates determined by Bolt	cil; that I have actuall	y paid the fares and made other pay	ubsistence for the purpose of the pu	of enabling me to perform duties as a Membe; and that the amounts claimed are strictly in	er of the Bolton accordance with
I declare that the particulars expenses or allowances, or fi	inserted on this form nancial loss allowanc	are correct. Except as shown, I have e or attendance allowance in connec	e not made, and will not ma ction with the duties indica	ake, any claim under any enactment for travented on this form.	lling or subsistence
(b) I am the holder of a curre Signed	nt driving licence a	nd have adequate insurance cov MEMBER	ver for the use of my veh	Date	r Allowance claimants only)
		FOR OFFICIAL USE OF	NLY (Completed by Con	nmittee & Members Services	
•	Amount		Miles	I	
	£:p		i		
* Subsistence Allowance	~ · P	Normal Mileage	(78)	Details input onto Payroll sy	ystem:
Subsistence Allowance (Taxable)	:			By: ←	
Travel Reimbursement	;			Date: 23.7.07	

Notes:

* Subsistence Allowance is paid non-taxable providing it is linked to a journey more than 5 miles from the normal place of employment, AND you are away for more than 5 hours. In all other circumstances, the reimbursement will be subject to deduction of both Income Tax & National Insurance.

Please note that all Personal Details must be shown above and the form must be both signed and authorised. If any details are missing, the form will be returned and payment therefore delayed.

Dependent Carer's Allowance



Description of Approved to algest			1		Dependent Carers Allowance		Fares and other Expenses		Subsistence Allowance	
including Locations (From & To)	Tin Departure	ne of Return	of Travel	Claimed	Allowa £	ance P	Exper £	ises P	Дцоwа £	ance P
menuing Locations (Front e 10)				6						
Provide Tomber 1) and Town Har	4-15	(0-20)	CAR	6						
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DEANTING FOME - 16000	11 9-30	12-30	CAR					,		Ī
ADDETS FOR HOME TOWN IN	11 3 30	1-30	CAR							T
SCRUTING RAINING HOME - 16WID AN		92.60	C 002							T
MEMBERS // TOWN HA	011 - 25	740	C 9 8		l	 				$\overline{}$
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1770000	PLANNING TRAINING HOME — TOWN HAZ OLANNING HOME — TOWN HA ADULTS POG HOME — TOWN HA SCRUTINY TRAINING HOME — TOWN HA ADULTS SCRUTINY HOME — TOWN HA REATERUM MEETING HOME — TOWN HI PLANNING HOME — TOWN H	PLANNING TRAINING HOME — TOWN HALL 4-15 OLANNING HOME — TOWN HALL 8-30 ADULTS PDG HOME — TOWN HALL 9-30 SCRUTINY TRAINING HOME — TOWN HALL 3-30 ADULTS SCRUTINY HOME — TOWN HALL 5-15 REATERUM MERTING HOME — TOWN HALL 5-30	PLANNING TRAINING HOME - TOWN HALL 4-15 6-30 OLANNING HOME - TOWN MALL 8-30 5-30 ADULTS PDG HOME - TOWN MALL 9-30 12-30 SCRUTINY TRAINING HOME - TOWN MALL 3 30 6-30 ADULTS SCRUTINY HOME - TOWN HALL 5-15 8-60 AREA FORM MERSERS HOME - TOWN HALL 5-30 7-45 PLANNING HOME - TOWN HALL 8-30 5-15	OLANNING HOME - TOWN WALL 8-30 5-30 CAR ADULTS POG HOME - TOWN WALL 9-30 12-30 CAR SCRUTINY TRAINING HOME - TOWN WALL 330 6-30 CAR ADULTS SCRUTINY HOME - TOWN HALL 5-15 8-00 CAR AREA FROM MEMBERS HOME - TOWN HALL 5-30 7.45 CAR PLANNING HOME - TOWN WALL 8-30 5-15 CAR	PLANNING TRAINING HOME — TOWN HALL 4-15 6-30 CAR 6 OLANNING HOME — TOWN HALL 8-30 5-30 CAR 6 ADULTS PDG HOME — TOWN HALL 9-30 12-30 CAR 6 SCRUTINY TRAINING HOME — TOWN HALL 3-30 CAR 6 ADULTS SCRUTINY HOME — TOWN HALL 5-15 8-00 CMR 6 AREA FERDM MERSENS HOME — TOWN HALL 5-30 745 CAR 6 PLANNING HOME — TOWN HALL 8-30 5-15 CAR 6	PLANNING TRAINING HOME - TOWN HALL 4-15 6-30 CAR 6 OLANNING HOME - TOWN HALL 8-30 5-30 CAR 6 ADULTS POG HOME - TOWN HALL 9-30 12-30 CAR 6 SCRUTINY TRAINING HOME - TOWN HALL 3-30 6-30 CAR 6 ADULTS SCRUTINY HOME - TOWN HALL 5-15 8-00 CAR 6 AREATERUM MERTING HOME - TOWN HALL 5-30 7-55 CAR 6 PLANNING HOME - TOWN HALL 8-30 5-15 CAR 6 PLANNING HOME - TOWN HALL 8-30 5-15 CAR 6	PLANNING TRAINING HOME — TOWN HALL 4-15 6-30 CAR 6 OLANNING HOME — TOWN HALL 8-30 5-20 CAR 6 ADULTS POG HOME — TOWN HALL 9-30 12-30 CAR 6 SCRUTINY TRAINING HOME — TOWN HALL 3 30 6-30 CAR 6 ADULTS SCRUTINY HOME — TOWN HALL 5-15 8-00 CAR 6 AREATERUM MERSENS HOME — TOWN HALL 5-30 7.75 CAR 6 PLANNING HOME — TOWN HALL 8-30 5-15 CAR 6 PLANNING HOME — TOWN HALL 8-30 5-15 CAR 6	PLANNING HOME - TOWN HALL 4-15 6-30 CAR 6 OLANNING HOME - TOWN MALL 8-30 5-30 CAR 6 ADULTS PDG HOME - TOWN MALL 9-30 12-30 CAR 6 SCRUTINY TRAINING HOME - TOWN MALL 3-30 6-30 CAR 6 ADULTS SCRUTINY HOME - TOWN HALL 5-15 8-00 CAR 6 ACRET FROM MERSENS HOME - TOWN HALL 5-30 7-45 CAR 6 PLANNING HOME - TOWN HALL 8-30 5-15 CAR 6 PLANNING HOME - TOWN HALL 8-30 5-15 CAR 6	PLANNING TRAINING HOME - TOWN HALL 4-15 6-30 CAR 6 OLANNING HOME - TOWN WALL 8-30 5-30 CAR 6 ADULTS PDG HOME - TOWN WALL 9-30 12-30 CAR 6 SCRUTINY TRAINING HOME - TOWN WALL 3-30 6-30 CAR 6 ADULTS SCRUTINY HOME - TOWN WALL 5-15 8-00 CAR 6 AREA FRAM MERSENS HOME - TOWN HALL 5-30 7-55 CAR 6 PLANNING HOME - TOWN WALL 8-30 5-15 CAR 6 PLANNING HOME - TOWN WALL 8-30 5-15 CAR 6	PLANNING TRAINING HOME — TOWN HALL 4-15 6-30 CAR 6 OLANNING HOME — TOWN WALL 8-30 5-20 CAR 6 ADULTS POG HOME — TOWN WALL 9-30 12-30 CAR 6 SCRUTINY TRAINING HOME — TOWN WALL 3 30 6-30 CAR 6 ADULTS SCRUTING HOME — TOWN HALL 5-15 800 CAR 6 AREA FORW MERSTING HOME — TOWN HALL 5-30 745 CAR 6 PLANNING HOME — TOWN WALL 8-30 5-15 CAR 6

CLAIMS MUST BE SUBMITTED BY THE 2nd OF EACH MONTH TO GUARANTEE PAYMENT THAT MONTH.

BOLTON METROPOLITAN BOROUGH COUNCIL

		MEMBE	RS ALLOWANCES CLAIM
Claim for Month of SUL	_	20 <u>07</u> ASSO	Name of Member WMTER HALL Pay No. (Block capitals please) Registration No., Exact Cubic Capacity 15-87 cc.
Home Address 2 SNA DECLARATION: (a) I declare that I have actually a	and necessarily incurre	ed expenditure in travelling and s	3223 QB subsistence for the purpose of enabling me to perform duties as a Member of the Bolton yments shown on this form; and that the amounts claimed are strictly in accordance with
expenses or allowances, or fir	nancial loss allowance	or attendance allowance in conne	re not made, and will not make, any claim under any enactment for travelling or subsistence ection with the duties indicated on this form. Ver for the use of my vehicle on Council business. (For Car Allowance claimants only) Date
		FOR OFFICIAL LISE O	NLY (Completed by Committee & Members Services)
ı	A-rount 1	FOR OFFICIAL OBE O	Miles /
	Amount £:p		
* Subsistence Allowance Subsistence Allowance (Taxable)	:	Normal Mileage	Details input onto Payroll system: By:
Travel Reimbursement (e.g. Car Park, taxis)	:		Date:
Dependent Carer's Allowance	:		

Notes:

* Subsistence Allowance is paid non-taxable providing it is linked to a journey more than 5 miles from the normal place of employment, AND you are away for more than 5 hours. In all other circumstances, the reimbursement will be subject to deduction of both Income Tax & National Insurance.

Please note that all Personal Details must be shown above and the form must be both signed and authorised. If any details are missing, the form will be returned and payment therefore delayed.

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	Particulars of Journeys	Mode	Miles	Dependen	t Carers	Fares and	Subsiste				
Date	Description of Approved	Tin	e of	of		Allowa	ance	Exper	1	Allowar	
	including Locations (From & To)	Departure	Return	Travel	Claimed	£	Р	£	P	£	p
2-7-07	HOME - TOWN HALL AND REGENERA	10 5-3) 88p~	CAR	6_	,	 				-
9-7-07	HOME - TOWN HALL - INFORMAL COUNCIL	4-15	SpM	1	<u> </u>		<u> </u>				-
11-707		6-pm	10-30		ص _						<u> </u>
12-7-07	HOME - FOUN HALL - PLANNING COMMITTEE	8-300	M 5 PM	CAR	<u>ط</u>		-				<u> </u>
16-7-07	HOME -TOWN HALL - PLANNING COMMITTEE HOME -TOWN HALL SINGLE-LOCAL JOINT	3-pm	4.30	CAR	6		ļ				<u> </u>
	HOME-CASTLEHILL 1. TIRPINING	12-30	Agn	CAR	4						<u> </u>
	HOME - TOWN HALL PLANNING COMMITTE	7 98-30	Som		6		<u> </u>				
30-707	HOME - BOLTON WISE AT QUEST CONTRE	gan	11-30	CAR	4						
	7 HOME - TOWNHOLL INFOTRAINING	5-30		CAR	6						
50_/-0	7,0,10		·								<u> </u>
	·										
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·		-						11.00			
		<u> </u>									
				-							
Doduct any	amounts received by way of Travelling & Subsistence from any other Autho	rities or bod	ies		\mathcal{X}						<u> </u>

CLAIMS MUST BE SUBMITTED BY THE 2nd OF EACH MONTH TO GUARANTEE PAYMENT THAT MONTH.

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BOLTON METROPOLITAN BOROUGH COUNCIL

MEMBERS ALLOWANCES CLAIM

		IVIEIVI	DERS ALLOWANCES C	1.7211171	
Claim for Month of Car (Make/Model)	ROEN P	20 <u>0</u> 9 (ASS 0	Name of Member	ALTER HALL Exact Cubic C	Pay Noapacity 15- 87 cc.
DECLARATION: (a) I declare that I have actually	cil; that I have actually	red expenditure in travelling a paid the fares and made other	DOOD BOLTO BL23 (and subsistence for the purpose of e r payments shown on this form; ar	enabling me to perform duties as a Mem and that the amounts claimed are strictly	ber of the Bolton in accordance with
I declare that the particulars expenses or allowances, or fi (b) I am the holder of a curre Signed Approved	nancial loss allowance	or attendance allowance in co	nnection with the duties indicated cover for the use of my vehicl		velling or subsistence Car Allowance claimants only)
*		FOR OFFICIAL USE	ONLY (Completed by Comm	ittee & Members Services)	•
* Subsistence Allowance Subsistence Allowance (Taxable)	Amount £:p :	Normal Mileage	Miles 54	Details input onto Payroll By: CM	system:
Travel Reimbursement (e.g. Car Park, taxis) Dependent Carer's	-			Date: 26.9.07	

Notes:

* Subsistence Allowance is paid non-taxable providing it is linked to a journey more than 5 miles from the normal place of employment, AND you are away for more than 5 hours. In all other circumstances, the reimbursement will be subject to deduction of both Income Tax & National Insurance.

Please note that all Personal Details must be shown above and the form must be both signed and authorised. If any details are missing, the form will be returned and payment therefore delayed.

Allowance

·	Particulars of Journeys	Mode	Miles	Dependent Carers				Subsistence Allowance			
Date	Description of Approved Banes		e of	of	 . ,	Allow		Exper £	l	Allowa £	ance
	including Locations (From & To)	Departure	Return	Travel	Claimed	£	P	E.	P		-
AUG	PLANNING	8-30a	_	CAR	6	 	-				╁
L Austa	DEVELOPMENT REGENERATION	5-30p	n 8-30/	mCAR.	ص _		 				╁
Aug	DOUTS SERVICES SCRUTING NEEDLARMEN DREA WORKING WORKSHOP FOR CHARMEN	5-30	830p	CAR	<u> </u>		 				┿
D. T.G	DREA WORKING WORKSHOP FOR CHARMEN	12-30	4-15	CAR	6					· · · · · ·	+
7 Nuice	AREA WORKING FORUM MEMBER MEGTING	2-30	4-30	CAR	6						╀
	PLANNING	8-30pm	5-000	CAR	6				ļ		╀
NO CO	(TRAINING) STANDARDS/COUNCIL MEETING	3-30	10-30	CAR	6		<u> </u>				1
. A.v.	CENTREFOR BLIND MANAGEMENT	7 pm	9-30	CAR	<i>b</i>		<u> </u>		-		∔
7.40.01	(TRAINING) PERFORMANCE MANAGEMENT	12-30	3-pm	CAR	6						1
409	(Media d. 4)		ı				1				+
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CLAIMS MUST BE SUBMITTED BY THE 2nd OF EACH MONTH TO GUARANTEE PAYMENT THAT MONTH.

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BOLTON METROPOLITAN BOROUGH COUNCIL

MEMBERS ALLOWANCES CLAIM

Claim for Month of SEY	MEMBER:	20	Name of Member _	WALTER HALL	Pay No.
Car (Make/Model) (17	•	· ·	(Block capitals please) Registration No. 🚣	Exact Cubic C	Capacity 15-87 cc.
Home Address 2 SAA	1DOWN RD	- HARWOND-BOLT	70N		BOLTON COUNCIL
Metropolitan Borough Counc the rates determined by Bolto	il; that I have actually p in Metropolitan Boroug	oaid the fares and made other pay h Council.	ments shown on this fo	se of enabling me to perform duties as a Men rm; and that the amounts claimed are strictly make, any claim under any enactment for tra	PAYROLL SHARED
expenses or allowances, or fir (b) I am the holder of a currer	nancial loss allowance o	r attendance allowance in connec	tion with the duties inc	vehicle on Council business. (For	Car Allowance claimants only)
Approved		MEMBER		Date	
		FOR OFFICIAL USE ON	NLY (Completed by	Committee & Members Services)	•
	Amount £:p	•	Miles		
* Subsistence Allowance	:	Normal Mileage	18.	Details input onto Payrol	l system:
Subsistence Allowance (Taxable)	:			By: CM	
Travel Reimbursement (e.g. Car Park, taxis) Dependent Carer's	:			Date: 29.10.0)
Allowance	:				

Notes:

* Subsistence Allowance is paid non-taxable providing it is linked to a journey more than 5 miles from the normal place of employment, AND you are away for more than 5 hours. In all other circumstances, the reimbursement will be subject to deduction of both Income Tax & National Insurance.

Please note that all Personal Details must be shown above and the form must be both signed and authorised. If any details are missing, the form will be returned and payment therefore delayed.



	Particulars of Journeys	Mode	Miles	Dependent		Fares and		Subsistence Allowance			
Date	Description of Approved Dung		e of	of Travel	Claimed	Allowa £	nce	Expen £	ses p	Allowa £	ince P
	including Locations (From & To)	Departure	Return			L	<u> </u>		P		T
5-SEP	BOETON WISE	MAOL		1 1	_3_		 				╄
-SEP	QLANNING	48-450	м 6 рм	CAR	3		<u> </u>				-
I-SEP	AREA FORUM	6-30	Q pm	CAR	2					···	<u> </u>
اعكر-ن	PLONNING	045	GOM	CAR	ß						<u> </u>
	ADULTS POG	4-pm	6 pm	CAR	3						
1-SEP	(TRAINING) AREA WORMING	4.30	6-30		3	-					
USEP ((ISTUINA) BICEL POPIETING	7-30	6-30	7/2/10							1
<u>1-509</u>					1		<u> </u>				╁
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		<u> </u>			^ @**						
1	nounts received by way of Travelling & Subsistence from any other Au	thorities or bod	ies		18						

CLAIMS MUST BE SUBMITTED BY THE 2nd OF EACH MONTH TO GUARANTEE PAYMENT THAT MONTH.

12,10,2007



	TER HALLPAYRO! Home Addres	2 581	NUOCIT	スロー	HAI	ZWOO	D-1	50L70	Pay	No	
Name WA	A LA COMPANIE OF THE COMPANIE			Evact (C /	518	7	Ma	onth OCT		2007
	del CITRON PICASSORVIC Registration										
(b) (For Car Allow regard to the use (c) (For Car Allow (d) I have actually other payments.	(For Car Allowance claims only) I have actually and necessarily incurred the mileage claimed in accordance with the Council's scrience of Motol Car Allowances. (For Car Allowance claims only) I am the holder of a full, current and valid driving licence and MOT certificate (where applicable), and I have complied with the Council's insurance requirements with regard to the use of my car on Council business. (For Car Allowance claims only) I will retain VAT receipts covering all journeys for six years in order to comply with HMRC regulations. (For Car Allowance claims only) I will retain VAT receipts covering all journeys for six years in order to comply with HMRC regulations. I have actually and necessarily incurred expenditure in travelling and subsistence for the purpose of enabling me to perform duties as a Member of Bolton Council, I have actually paid the fares and made other payments shown on this form, and that all amounts claimed are strictly in accordance with the rates determined by Bolton Council. Except as shown, I have not made, and will not make, any claim under any enactment for travelling or subsistence expenses FOR MEMBERS' SERVICES USE ONLY										
or offermone	or financial loss allowance or attendance allowance in connection with t inserted on this form are correct, and I understand that fraudulent claims	ne dulles indica	lea on una ioni:	1. IC	Subsis	stence T	5	<u>3.00 :</u>			.216
Signed 🧖	Member Date /2-//-	-07				stence N	т	<u> </u>	1	ayroli	l Use Only
I certify that I have	examined this allowance sheet, the figures recorded are reasonable, and	the expense w	as necessary.		Expen	ises NT			Input by		cm
Authorised	mbers' Services Date				Carer'	s Allowa			Date		೩೩ ೧೯.೮೧
Date	Reason for Journey (including From and To)	Tim Departure	e of Return	Mile Claim		Allov	stence vance	Other	es and Expenses	Care	Dependent ers Allowance
1-10-07	BOLTON WISE BOARD	MAP	1130			£	р	£	p	£	р
4-10-67	PLANNING (ALL DAY)	arm	5-15	3		£4-	<i>00</i> p	£	р	£	р
8-10-07	DEVELOPMENT AND REGENERATION		BON	3		£	p	£	р	£	р
10 10 07	MEMBER AREA FORUM MEETING	4-130	6-30	3		£	р	£	р	£	p
17-10-01	PRESENTATION (MANOR COBRT)	12-30	245	3		£	р	£	р	£	р
19-10-07	PLANNING (AZL DAY)	ann	5.30	3		£ 4.	<i>00</i> p	£	р	£	р
24 10-07	COUNCIL MEETING	6-30	945	3		£	р	£	<u>p</u>	£	р
						£	р	£	р	£	р
						£	р	£	р	£	р
						£	р	£	р	£	р
						£	p	£	р	£	р
	·					£	р	£	р	£	р
				Total N	/liles		Amount	Tota	l Amount		otal Amount
Please only	enter the number of miles. Do not calculate an	amount for	payment.	21		£8	р	£	р	£	р
_	more lines, please use a Members' Allowances All claims must be signed and authorised by Payroll Shared-Service Ce	Additional Members' Se	Sheet rvices before	e paymer	nt can se, B	be made,	and sho		I Sheets Usent to	sed	

12.10.2007



Bolton Council

lame MAL	TER HALL HO	ne Address	2 SA			4RWOOD-					
		gistration 🔏	rakura jiyo ilika loola mooninta kaasaa		Exact CC	<u> 15,87.</u>	Mo	onth A)c	<u> </u>	200~	
certify that:- a) (For Car Allowa regard to the use (For Car Allowa) (For Car Allowa) b) (For Car Allowa) have actually a other payments	(For Car Allowance claims only) I have actually and necessarily incurred the mileage claimed in accordance with the Councils scheme of whole Car Allowance claims only) I am the holder of a full, current and valid driving licence and MOT certificate (where applicable), and I have complied with the Council's insurance requirements with regard to the use of my car on Council business. (For Car Allowance claims only) I will retain VAT receipts covering all journeys for six years in order to comply with HMRC regulations. I have actually and necessarily incurred expenditure in travelling and subsistence for the purpose of enabling me to perform duties as a Member of Bolton Council, I have actually paid the fares and made other payments shown on this form, and that all amounts claimed are strictly in accordance with the rates determined by Bolton Council. Except as shown, I have not made, and will not make, any claim under any enactment for travelling or subsistence expenses FOR MEMBERS' SERVICES USE ONLY										
	r financial loss allowance or attendance allowance in conserted on this form are correct, and I understand that f	onnection with the	aunes maicai	Eu on wis ioiii	. 10	stence T		Total Miles			
Signed		te 5-/2	- 07.		Subs	stence NT nses NT		For Pay	yroll Use	Only	
Authorised	Da mbers' Services				Care	's Allowance		Date			
Date	Reason for Journey (including From and To)		Time Departure		Miles Claimed	Subsistence Allowance		es and Expenses	Depen Carers All		
1 1/5V	PLANING		945	SPM	6	£4-00	p £	р	£	р	
7 200	MEMBER ONLY FORUM		1-30	4-PM	6	£	p £	I"	£	р	
7 NOV	CENTRE FOR BLIND		7 pm	9-15	6		p £		£	р	
12 NOV	1001-5 P-0-0		3-30	530	6		p £	J-	£	р	
15 NOV	PLANNING		045	5pm	6	£4.00			£	р	
16 Nov	SECIAL PLANNING MEETIN	10	OIPM	11 30	6		p £	1"	£	p	
14 NOV	NOTE BESIDATING MEETING		Lpn	Gpm	4		p £	1-	£	р	
Q LO NOV	DEUELOPMENT AND REGENER	ATION	530	9-30	6		p £		£	р	
27 NOV	NOULTS SERVICES SC	RUTINY	5-30	93 Pm	6	·	p £		£	р	
28 NOV	PLANNING VISITS		CLAM	ipm	6		p £		£	р	
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/ - /		,			<u> </u>		p £	1-	£	р	
Please only	enter the number of miles. Do not ca	lculate an ar	nount for	payment.	Total Miles	E/2 00		Amount p	Total Ar	mount p	
If you require PAY-M1 12.10.2007	more lines, please use a Members' A All claims must be signed and as Payroll Share	uthorised by Me	embers' Ser	vices before	e payment can orn House, Bo	Number of A be made, and s n BL1 1JW			∌d		

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lame WAL	-TER HALL	Home Addre		AN DOU		-HARU	BOTON UCOD 7 IN	Pay No.	C 2007
ar Make/Mode	CITYOUT IT	Registration	/ Chapter and the control of the con	<u> </u>	Exact CC	No S Matar Car All	oueness		
(For Car Allowa (For Car Allowa regard to the use (For Car Allowa) I have actually as other payments	nnce claims only) I have actually and necessarily ance claims only) I am the holder of a full, currence of a full, currence claims only) I will retain VAT receipts covered not necessarily incurred expenditure in travelling shown on this form, and that all amounts claimed a, I have not made, and will not make, any claim up to the claims of the claims	ing all journeys for and subsistence for are strictly in acco	six years in order to the purpose of endance with the rate to for travelling or su	to comply with I abling me to pe es determined lbsistence expe	HMRC regulations erform duties as a by Bolton Council enses	Member of Bolton	Council, I hav	re actually paid the far	es and made ONLY
	r financial loss allowance or attendance allowand nserted on this form are correct, and I understand	a in connection wit	n me mmes mulcas	100 OH 0110 101111	Subsis	tence T	4.00	Total Miles	28
igned	Membe	Date 197	JAN	08	Subsis	stence NT		_	oll Use Only
	amined this allowance sheet, the figures recorde		and the expense wa	as necessary.	1 1 '	ses NT	· ·	Input by	cm
uthorised 🥁	Members' Services	Date 30	80/10		J	s Allowance		Date	S.2.08
Date	Reason for Journey (including From and		Time Departure	e of Return	Miles Claimed	Subsister Allowand		res and r Expenses Ca	Dependent arers Allowance
4/12/07	ROULTS P.D.G		IDAM	12-15	6	£	p £	p £	р
12/107	CENTRE FOR SLIND M	ANAGEMEN	7 7 PM	9-30	6	£	p £	p £	<u>p</u>
2112/07	COUNCIL NEETING		6-30	9-30	6	£	p £	p £	<u>p</u>
2/12/07	PLANNING		9-30	5-30	<u></u>	£4	p £	p £	p
3/12/07	FORUM CONSULTATION -CAN	UNON SLADO	5 6-30	9 pm	4	£	p £	p £	p_
7/5/	·			, 0		£	p £	p £	р
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	James American	marine a sign of the control of the control of				£	p £	p £	p
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12.10.2007

Members' Allowances Claim 2008 PAYROLL SECT!

Bolton Council

Name	WAL	TER	HA	<u></u>		Home Addres	ss 2	SA	NO 0W	N 120	·-/-	ARWOO	2 - B	000	7/ Pa	/ No.,	
		PITRO	<u> </u>	Q. / A	SSO	Registration				Exact	CC I	5 · 8	7 cc	M	onth 🦵	EB	200号
I certify that (a) (For Ca (b) (For Ca regard t (c) (For Ca (d) I have a	:- ir Allowar ir Allowar to the use ir Allowar actually an	nce claims or nce claims or of my car on nce claims or d necessarily	nly) I have nly) I am I Council br nly) I will r incurred	e actually an the holder of business. retain VAT re expenditure	d necessari a full, curre eceipts cove in travelling	y incurred the mileacent and valid driving life ring all journeys for sand subsistence for the restrictly in according to the control of the restrictly in according to the control of the	ge claimed cence and ix years in the purpo	n order to	rdance with the ertificate (where comply with healing me to pe	e Council's e applicat HMRC reg erform duti	s scheme ole), and gulations. les as a f	e of Motor I have con Member of	Car Allowan oplied with the Bolton Cou	ncil, I hav	*	the fare	es and made
		for an about lands		A AF AHLANGAP	へん つけんはんつい	inder any enactment ce in connection with that fraudulent claim	THE CURR	S IIIIIIGau	50 OH BIJS (OH)		Subsis	tence T			Total Mile		27
	ticulars in	serted on tals	torm are	correct, and		Data O D					Subsis	tence N	IT _		For	ayro	II Use Only
Signed Learning that	I have exa	imined this al	lowance s	sheet, the fig	Membe	ed are reasonable, a					Expen	ses NT			Input by		cm
Authoris		No. of the last of			bers' Service	Date Od	3/6	280			Carer's	s Allowa	ınce		Date		5.3.08
Date	e			eason for luding Fr	Journe	y	Depa	Time arture		Mile Clain			istence wance	Fa Other	res and Expense:		Dependent rers Allowance
4-2-	08	Frank				ON WISE		OAM	11.45	. 3		£	р	£	ŗ	_	р
5-2		FROM L		- 2	· ·		<u>-</u> 5-	15	745	3		£	р	£	<u> </u>		р
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7-2		PLAN					12	45	6 pm	3	,	£	р	£	ŗ		р
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	208	QLPN)					8	45	6-15		}	£	р	£	<u>, , , , , , , , , , , , , , , , , , , </u>		р
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If you re PAY-M1 12.10.200		more line	s, plea All clair	ms must be	e sianed a	rs' Allowances and authorised by Share ' Service (/ Iviemb	ers: Se	rvices befor	e payme orn Hou	ent can u se, F	be made	e, and sho		al Sheets sent to	usea	

HAMILTON

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BOLTON METROPOLITAN BOROUGH COUNCIL

MEMBERS ALLOWANCES CLAIM

Claim for Month of 50%	4	20 💍	Name of Member	1. HAMICTON Pay No.
Car (Make/Model) Kli			(Block capitals please) Registration Noi	Exact Cubic Capacity 1086 cc.
Home Address 52, L7	MBRIDGE DAW	FLACUADO		
Metropolitan Borough Coun the rates determined by Bolt I declare that the particulars	icil; that I have actually on Metropolitan Boron inserted on this form	paid the fares and made other pay righ Council.	ments shown on this for not made, and will not	se of enabling me to perform duties as a Member of the Bolton rm; and that the amounts claimed are strictly in accordance with make, any claim under any enactment for travelling or subsistence icated on this form.
(b) I am the holder of a curre	nt driving licence as	nd have adequate insurance cov	er for the use of my v	rehicle on Council business. (For Car Allowance claimants only)
Signed 4		MEMBER		Date 27/7/07
Approved				Date
	· · · · · · · · · · · · · · · · · · ·	FOR OFFICIAL USE OF	NLY (Completed by C	Committee & Members Services)
	Amount		Miles	
	£:p			
* Subsistence Allowance	; [Normal Mileage		Details input onto Payroll system:
Subsistence Allowance (Taxable)	:		·	By:
Travel Reimbursement (e.g. Car Park, taxis)	:			Date:
Dependent Carer's Allowance	:	•		

Notes:

* Subsistence Allowance is paid non-taxable providing it is linked to a journey more than 5 miles from the normal place of employment, AND you are away for more than 5 hours. In all other circumstances, the reimbursement will be subject to deduction of both Income Tax & National Insurance.

Please note that all Personal Details must be shown above and the form must be both signed and authorised. If any details are missing, the form will be returned and payment therefore delayed.

	Particulars of Journeys			Mode	Miles	Dependent Car Allowance		Fares and Expen	1	Subsiste Allowa	
Date	Description of Approved Duties, (From & To)	Departure	e of Return	of Travel	Claimed	1	p	£	p P	£	р
JUH 07	Hone to Tanylor										<u> </u>
23	RISIZ MANAGEMENT TRANSIC - ARTHURPASUITE T.H.		1200	CAIL	17						<u> </u>
24	LERC 4	1315	1510	CATL	<u>i7</u>	ŀ					<u> </u>
25	CULTURE PDG 4	0930	1115	CARL	(7_						
26	PLANNING (DEP FOR J. ROTHWEE) "	1230	1600	CAR	17.						<u> </u>
27	CLEARIED CASENED SAFER POG "	0815	1000	CANZ	17						<u> </u>
27	CLEARIER, GABENER SAFER POE " TWO TOWNS MEMBERS ENLY MIG (LOTAS)					مس		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			<u> </u>
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	recursts received by way of Travelling & Subsistence from any other Autho			<u> </u>	426						

CLAIMS MUST BE SUBMITTED BY THE 2nd OF EACH MONTH TO GUARANTEE PAYMENT THAT MONTH.

BOLTON METROPOLITAN BOROUGH COUNCIL

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MEMBERS ALLOWANCES CLAIM

Claim for Month of JUNE / Car (Make/Model) IC/A Home Address S2, LYMB	MCANTO		Block capitals please) Registration No.	B. HAMILTON Exact Cubic Ca	Pay Nocc.
Metropolitan Borough Council the rates determined by Bolton I declare that the particulars in expenses or allowances, or fina	; that I have actually of Metropolitan Boroug serted on this form a ancial loss allowance	th Council. The correct. Except as shown, I have or attendance allowance in connect the connect that the co	e not made, and will not m ction with the duties indica ver for the use of my vel	Date 30/7/07	I ROLTON SOUNDL
		FOR OFFICIAL USE C	NLY (Completed by Co	mmittee & Members Services)	
	Amount £:p		Miles	Details input onto Payrol	1 svetem:
* Subsistence Allowance Subsistence Allowance (Taxable)	:	Normal Mileage	426	By: CM	·
Travel Reimbursement (e.g. Car Park, taxis) Dependent Carer's Allowance	:			Date: 31.7.07	

Notes:

* Subsistence Allowance is paid non-taxable providing it is linked to a journey more than 5 miles from the normal place of employment, AND you are away for more than 5 hours. In all other circumstances, the reimbursement will be subject to deduction of both Income Tax & National Insurance.

Please note that all Personal Details must be shown above and the form must be both signed and authorised. If any details are missing, the form will be returned and payment therefore delayed.



	Particulars of Journeys		Time	-f	Mode of	Miles	Dependen Allowa		Fares an Expe	1	Subsiste	
Date	Description of Approved Duties,		Departure	Return	Travel	Claimed	£	p	£	p	£	
SUNE	including Locations (From & To)	11 110	1300	1530	CAIZ	17		<u> </u>				-
05	LERC	HOME TO	1315	1602	CAR	17						+
06	TWO TOWNS FORWH CHAIN VICE CHAIR MISTERIA	TOWNSTAKE		1520	can	17						
07	EXTERNAL OPERATIONS SCRUTINY		1315	il 30	CAP2	12						-
11	MEAGER DENELDOMENT (SUE THETTER) CASTLE HILL	CASTETLL			can	17						_
13	CULTURE ME	TOWN HALL		1230	cm	(7						_
	TWO TOWNS FORMY MEMBERS ONLY MESTINE	и	0915	1215	CAN_	17						_
<i>14</i> 19	ADULT SQUAGES PIG	<u> </u>	0915	1120	care	17						_
20	AREA MEETING (CAMA JAMES ROOM)	н	1515	1700	GML	17	1					
22	CLEANER, GREENER, SAFEZ DOS-	<u>u</u>	09/5	1110	gan	17						_
25	AUDIT COMMITTEE & SCRUTING TOG	v	1415	1830	 	17	 			Í		_
26	& LERC + ABOUT SERVICES	<u> </u>	1320	1930	CARL	17.		<u> </u>				
	ENVIRONMENT SCRUTINY	м	1715	1920	CAR	(7		-				
27	LERC (HEARING)	ч	0920		CM	<u> </u>	 -	_ _				
05_	RED ROSE FOREST MEETING - SALESON	D QUH'S	1230	1615	CAR	23			 			
06		TOWNHALL	0820	1100	CML	17						
09	ADUK SEMICES CUTURE	4	1620	1830	CAN	·						
09	INFORMAL COUNCIL STO SOUTE	и	0915	1100	CAVZ	 			_			
11.	LEAC (HEARLING SUB COMMITTEE)	n	1140	2115	CML	<u> </u>						
H	FULL COUNCIL	и	0820	1130	CAIZ				_			
18_	CONTRACTE ASSESSMENT - LANCASTER SOTE	и	1320	1530	CAN	17						
19	EXTERNAL GREATS SATIONS - SCRUTINY				SUB	341	Į					

CLAIMS MUST BE SUBMITTED BY THE 2nd OF EACH MONTH TO GUARANTEE PAYMENT THAT MONTH.

They should be sent to Committee and Members Services for authorisation.

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BOLTON METROPOLITAN BOROUGH COUNCIL

MEMBERS ALLOWANCES CLAIM

Claim for Month of Au	i-ust	2007	Name of Member 1 - 4	B. HAMILTON	Pay No	A.
Car (Make/Model) K/A	+ PICANT	<u> </u>	Registration No.	<u>Exact</u> (Cubic Capacity 1086	cc.
Home Address 52, LYr	1812/DGE DIZIV	E, BLARKERD, BO	LTON BL6 575		•	•
DECLARATION: (a) I declare that I have actually Metropolitan Borough Counce the rates determined by Bolto	cil; that I have actually	paid the fares and made other p	l subsistence for the purpose of e	mabling me to perform duties and that the amounts claimed are	s a Member of the Bolton e strictly in accordance with	
expenses or allowances, or fi	nancial loss allowance	are correct. Except as shown, I have or attendance allowance in con	nection with the duties indicated	on this form.	nt for travelling or subsistence (For Car Allowance claima	
(b) I am the holder of a current		nd have adequate insurance of MEMBER		ate 29/08/07	(10) Cai Pritoduite Caina	
Approved_		<u> </u>	D.	ate	Mouth	6 50.
		FOR OFFICIAL USE	ONLY (Completed by Comm	ittee & Members Services)		•
	Amount £:p		Miles 187	, •		
* Subsistence Allowance	:	Normal Mileage	191.	Details input onto	Payroll system:	
Subsistence Allowance (Taxable)	# ************************************			By: S- Ceno	-31)	
Travel Reimbursement			!			

Notes:

* Subsistence Allowance is paid non-taxable providing it is linked to a journey more than 5 miles from the normal place of employment. AND you are away for more than 5 hours. In all other circumstances, the reimbursement will be subject to deduction of both Income Tax & National Insurance.

Please note that all Personal Details must be shown above and the form must be both signed and authorised. If any details are missing, the form will be returned and payment therefore delayed.



(e.g. Car Park, taxis)

Dependent Carer's

Allowance



·	Particulars of Journeys			Mode	Miles	Dependent		Fares an		Subsist	
Date	Description of Approved Duties	Tim	e of	of		Allowa	nce	Expe		Allowa	
UGUST	including Locations (From & To)	Departure	Return	Travel	Claimed	£	. P	£	P	£	-
06	ADOLF SCOTINY	Ø 830	1130	CAR	17		ļ		ļ		\dotplus
<u>ರಿ</u>	ADVITICUITURE PIC	1145	1400	can	17		<u> </u>		-		_
lo	LIBRARY MX	1030	1230	can	17					<u> </u>	\dotplus
140	LERC	1315	1500	can	17						\dotplus
H	Amer										\dotplus
15	ENVIRONMENTAL SERVI	1715	1900	can	17.						_
16	AREA NORICING REVIEW	1215	1500	CAR	ין		!				_
7	HACKNEY CARRIAGE	6915	1200	CAR	7	The water land			- Autobalean		+
<i>u</i>	2 TOWNS ROPUM CHAIR VICECHAIR MISETUR	1015	1230	CAR	,				- Automore	f	\dotplus
23	PEANNING (DEATY J. ROTHWELL)	1245	1630	can	T		řiości				+
24	MEMBERS CALL EDEUM NEBTING	- 0915	U30	CAN					<u> </u>		+
28	ADULT SEMICES / CULTURE SECHEMBERS	0830	1000	CAR	17				-	<u>,</u>	+
29	Council	5.00	2100	cm	17	:					1
									-		+
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				<u> </u>				<u> </u>			$\frac{1}{1}$
				<u></u>					<u> </u>		+
	amounts received by way of Travelling & Subsistence from any other				187						

CLAIMS MUST BE SUBMITTED BY THE 2nd OF EACH MONTH TO GUARANTEE PAYMENT THAT MONTH.

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BOLTON METROPOLITAN BOROUGH COUNCIL

MEMBERS ALLOWANCES CLAIM

Claim for Month of SEP		2067	Name of Member	B HAMILICA Exact Cubic Ca	Pay No
Home Address 52 Lyl		E BLACKARD POOL	120 BLG 575		
DECLARATION:					BOLTON COUNCIL
(a) I declare that I have actually a Metropolitan Borough Counc the rates determined by Bolto	ril; that I have actually p on Metropolitan Boroug	paid the fares and made other p gh Council.	ayments shown on this form; a	enabling me to perform duties as a Memb and that the amounts claimed are strictly it e, any claim under any enactment for trav	n accordance with OCT 2007
expenses or allowances, or fir	nancial loss allowance	or attendance allowance in conn	ection with the duties indicate	d on this form.	SERVICE CENT.5
(b) I am the holder of a currer Signed		мемвек	I	Date 30/9/2007	
•	•	FOR OFFICIAL USE O	ONLY (Completed by Comm	nittee & Members Services)	·
	Amount	•	Miles		
* Subsistence Allowance	£:p	Normal Mileage	196	Details input onto Payroll s	system:
Subsistence Allowance (Taxable)	:			By: C₩	
Travel Reimbursement (e.g. Car Park, taxis)	:			Date: 1.10.07	
Dependent Carer's Allowance	. :			•	

Notes:

* Subsistence Allowance is paid non-taxable providing it is linked to a journey more than 5 miles from the normal place of employment, AND you are away for more than 5 hours. In all other circumstances, the reimbursement will be subject to deduction of both Income Tax & National Insurance.

Please note that all Personal Details must be shown above and the form must be both signed and authorised. If any details are missing, the form will be returned and payment therefore delayed.



Description of Approved Duties,				4		Dependent			3		ence
		Tin Departure	ne of Return	of Travel	Claimed	Allowa £	nce p	Expen £	ses p	Allowai £	nce
including Locations (From & To)		· · · · · · · · · · · · · · · · · · ·		CAR	i 7	-	P				Τ
FOCUS GROUP DIMTROOM - INSPECTION	Candille	1	123c	 	 	<u></u>					╁
BUTTON SALES PROMISES MEMBERGATERS	RESTMON	1332	1530	CARL	26						+
LERC	Townit	1315	1602	car	17		<u> </u>				1
SCRUTINI - ENTERNAL EQ.	TOUH	1315	1530	CAR	7						╀
	Н	1200	1500	can	17 .						+
ADULT SELLICIES/ CLUTURE BOCK HOWAR	tj	<i>0</i> \$30	103c	can				•			ł
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	ADULT SERVICES / CULTURE OPEC MEMBER ADULT SERVICES PDG AUDIT COHMITTEE CHARTER ASSISSMENT ALCENCING APPEAL AREA WORKING	ADULT SELLICES / CUTURE BOCK HENNER ADULT SELLICES PDG AUDIT COHHITTEE CHARTER ASSESSMENT ALCENCING APPEAL AREA WORKING H	ADULT SERVICES P.DG 4 1515 AUDIT COMMITTEE 4 0905 CHARTER ASSESSMENT 4 130E LICENCING AMERICA 4 0915 ATLEA WORKING 11 0915	ADULT SELLICES POEC MEMBER 11 0930 1030 ADULT SELLICES POEC MEMBER 11 1515 1715 AUDIT COMMITTEE 11 0905 1200 CHARTER ASSESMENT 11 1300 1415 LICENCING AMERIC 12 0915 1130 AREA WORKING 11 15	ADOLT SELLICES CUTTURE OF CHEMPS II OSSO 1030 CAM ADOLT SELLICES PDG II IS 1715 CAM AUDIT COHMITTEE II OGCS 1200 CAM CHARTER ASSESSMENT II 1300 1415 CAM ALCENCING AMERIC II OGS 1175 CAM AREA WORKING III OGS 1175 CAM AREA WORKING III OGS 1175 CAM	ADOLT STANCES POG MEMBE 1 0830 1030 CAM 17 ADOLT STANCES POG MEMBE 1 1515 1715 CAM 17 AUDIT COMMITTE 1 0905 1200 CAM 17 CHARTER ASSESSMENT 11 1300 1415 CAM 17 LICENCING AMERICA 1 0915 1155 CAM 17 ARZEA WORLING 11 0915 1115 CAM 17	ADUIT SERVICES POE HEAVE 11 0830 1030 CAN 17 ADUIT SERVICES POE 11 1515 1715 CAN 17 AUDIT COHHITTE 1 0905 1200 CAN 17 CHARTER ASSESSMENT 11 1300 1415 CAN 17 LICENSING AMERICA 10 0915 1130 CAN 17 ATZEA WORLING 10 0915 1115 CAN 17	ADUIT SELUCISE CUTURE BACK HENDER ADUIT SECUCISE PDG AUDIT COHMITTE CHARTER ASSESSMENT ALCENCING AMERIC ALCENCING AMERIC H 0915 H3C CAM 17 ACEA WORLING H 0915 H175 CAM 17 ACEA WORLING	ADUIT SELLICES POGE HOUSE IN OSSO 1030 CAM 17 ADUIT SELLICES POG I SIST 1715 CAM 17 AUDIT COHHITTE I OSC 1200 CAM 17 CHARTER ASSEMBLY II OSS 1300 CAM 17 ALCENCING AREAL I OSS 1175 CAM 17 AREA WORKING II OSS 1175 CAM 17	ADOLT SELECTE POSE HENDE II OS30 1030 CAN 17 ADOLT SELECTE POSE HENDE II OS30 1030 CAN 17 ADOLT SELECTE POSE II ISIS 1715 CAN 17 AUDIT COMMITTE II OSSO 1200 CAN 17 CHARTER ASSOCIATED II OSSO 1415 CAN 17 ALCENCING AREAC II OSSO 115 CAN 17 AREA WORLING II OS 115 CAN 17 AREA WORLING II OS 115 CAN 17	ADUIT SELUCES CUTURE BACK NEWSON 11 0830 1030 CAN 17 ADUIT SELUCES PDG 11 1515 1715 CAN 17 AUDIT COHHITTE 11 0905 1200 CAN 17 CHARTER ASSESSMENT 11 1300 1415 CAN 17 ALCENCING AMEAL 11 0915 115 CAN 17 AREA WORK INC 11 0915 1115 CAN 17

CLAIMS MUST BE SUBMITTED BY THE 2nd OF EACH MONTH TO GUARANTEE PAYMENT THAT MONTH.



Name IAN HA	MILTON Home Addres	s 52 LYMBI	RIDGE DR	IVE,BL	ACKR	OD,BOLTON			Pay	No.		
- · · - · · · · · · · · · · · · · · · ·	el KIA PICANTO Registration			Exact		1086		Mor	ith OC	тов	ER	20 00
certify that:- a) (For Car Allowa b) (For Car Allowa regard to the us c) (For Car Allowa d) I have actually a other payments e) Except as show	ance claims only) I have actually and necessarily incurred the mileage ince claims only) I am the holder of a full, current and valid driving lice of my car on Council business. Ince claims only) I will retain VAT receipts covering all journeys for signature claims only) I will retain VAT receipts covering all journeys for signature claims only incurred expenditure in travelling and subsistence for the shown on this form, and that all amounts claimed are strictly in accordant, I have not made any enactment for the strength of the stren	ence and MOT ce e purpose of enak nce with the rates or travelling or su ne duties indicates	comply with Holing me to per determined by bistence expended on this form.	MRC required form duties y Bolton Conses	lations. s as a M ouncil.	. Have complice wit	ouncil,	l have actu	ally paid the	fares ar	nd mad	e Y
f) The particulars i	nserted on this form are correct, and I understand that fraudulent claim	s may result in dis 2-Nov-2007	cipilitary action	¹ . ■		stence NT			For Pa		LUse	Only
Signed	Member Date amined this allowance sheet, the figures recorded are reasonable, and				-	ses NT		1	nput by	.,		m
Authorised	Date	the expense mae	,	1 [•	s Allowance			Date			.11.07
Date	Reason for Journey	Time Departure	of Return	Mile Clain		Subsisten			s and xpenses	Car	Depe ers A	ndent Ilowanc
3-Oct-2007	(including From and To) CLEANER/GREENER PDG	8:00	10:30	17		£		£	р	£	00	p
5-Oct-2007	LIBRARY PDG VISITS	9:30	13:30	17	7	£	p :	£	р	£	2	ניז ג
9-Oct-2007	LICENSING	13:15	15:30	17	7	£	p :	£	р	£	ō	8 F
22-Oct-2007	ADULTSERVICES/CULTURE	8:15	10:30	17	7	£	p :	£	р	£	Z 2	V 2
22-Oct-2007	LOSTOCK RESIDENTS/PLANNING MEETING	17:10	20:10	17	7	£	p :	£	р	£	180	007
24-Oct-2007	COUNCIL	17:45	21:20	17	7	£	p :	£	р	£		<u> </u>
						£	p	£	р	£		ķ
						£	p :	£	р	£		
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		- ·		Total		Total Amou			Amount	T	otal A	Amount
=	enter the number of miles. Do not calculate an a			10	2	£	*	£	р	£		<u> </u>
f you require	more lines, please use a Members' Allowances A All claims must be signed and authorised by	Additional S l Members' Ser	h eet vices befor	e pavme	nt can	Number of be made, and				ed		

Deventi Strand Camina Canton Eth Place Bodosham Harran Balton Bi 4 4 881

PAY-M1 10 10 0007

Members' Allowances Claim Bolton



				7 3 1 2.	The state of the s	a Barbara Carre	· ·	<u>مارس</u>	
Name IAN HAN	MILTON Home Addre	ss 52 LYMBF			OD,BOLTON		Pay I	EMBER	20 00
Car Make/Mode	el KIA PICANTO Registration			Exact CC	1086	<u>N</u>	Month NOV	CIVIDEI	20 00
/h) /Car/Car/Minu/à	nce claims only) I have actually and necessarily incurred the mileacture claims only). I have actually and necessarily incurred the mileacture claims only). I have actually and necessarily incurred the mileacture of my car on Council business.			•			's insurance requir	ements wi	h
(c) (For Car Allowa (d) I have actually a	e of my car on Council business. Ince claims only) I will retain VAT receipts covering all journeys for some claims only) I will retain VAT receipts covering all journeys for some necessarily incurred expenditure in travelling and subsistence for the shown on this form, and that all amounts claimed are strictly in account.	he purpose of enab	ling me to perf determined by	form duties as a M y Bolton Council.	emper of Bolton Co	nuncii, i nave		ICE ON	II V
other payments	shown on this form, and that an amounts claimed are shown in adder-	for travelling or sul	sistence expe	nses	FOR MEN stence T	BERS S	Total Miles	ISE OIL	199.
or allowances, or (f) The particulars in	n, I have not made, and will not make, any claim under any enaction or r financial loss allowance or attendance allowance in connection with nserted on this form are correct, and I understand that fraudulent claim	ns may result in dis	ciplinary action	n. Jaubsi				woll	se Only
Signed	Member Date	2-Nov-2007	7	Subsi	stence NT			yron C	Se Only
certify that have ex	amined this allowance sheet, the figures recorded are reasonable, ar			1 ·	nses NT		Input by	<u></u>	
Authorised	Members' Services Date 4+	December ?	200 7.	Carer	's Allowance		Date		
Date	Reason for Journey	Time	of Return	Miles Claimed	Subsisten		ares and r Expenses	Carers	pendent Allowance
	(including From and To) CLEANER/GREENER/SAFER PDG	Departure 9:00	10:15	17	£	p £	р	£	р
8-Nov-2007		13:30	15:00	17	£	p £	р	£	р
8-Nov-2007	EXTERNAL ORGANISATIONS PDG	9:45	13:00	12	£	p £	р	£	р
9-Nov-2007	LIBRARY SUB COMMITTEE		17:30	17	£	p £	р	£	р
12-Nov-2007	ADULTSERVICES/CULTURE	15:15		17	£	p £	p	£	р
14-Nov-2007	LICENSING	13:15	16:00	17	£	·	p	£	р
19-Nov-2007	ADULTSERVICES/CULTURE	8:20	10:15			<u> </u>		£	p
19-Nov-2007	CLEANER/GREENER/SAFER PDG	13:30	16:00	17	£	' 	p ·	£	<u> </u>
20-Nov-2007	AUDIT TRAINING	15:20	17:50	17	£	p £	<u>p</u>	£	
23-Nov-2007	LIBRARY SUB COMMITTEE	9:45	12:45	17	£	p £	<u>p</u>	£	p
27-Nov-2007	LICENSING	13:10	19:30	17	£	p £	<u>p</u>		р
28-Nov-2007	ENVIRONMENTAL SCRUTINY	17:00	19:00	17	£	p £	р	£	p
29-Nov-2007	TWO TOWNS CHAIR/VICE CHAIR	15:20	17:30	17	£	p £	p tal Amount	£	p al Amount
<u></u>				Total Miles	Total Amou		tal Amount p	£	ם
Please only	enter the number of miles. Do not calculate an	amount for p	oayment.	199	£		P Ial Sheets Us	<u> </u>	
If you require	- Branchard Allowances	S isnoitibha:	heet						
PAY-M1	All claims must be signed and authorised b	y Members' Sel	vices befor	e payment can	Lipe made, and	SHOULD DE	SUIT TO		

SC mouth 9.



Name IAN HAI	MILTON	Home Address	52 LYMB	RIDGE DR	IVE,BLAC	KRC	D,BOLTON			Pay		
	el KIA PICANTO	Registration			Exact CC	10)86		Mo	nth M	ARCH	20 00
certify that:- a) (For Car Allowa ib) (For Car Allowa regard to the use (c) (For Car Allowa (d) I have actually a other payments	ance claims only) I have actually and necessarily ance claims only) I am the holder of a full, current e of my car on Council business. ance claims only) I will retain VAT receipts covering the necessarily incurred expenditure in travelling any shown on this form, and that all amounts claimed in the necessarily incurred expenditure in travelling any claim.	ng all journeys for six to all journeys for six to a subsistence for the are strictly in accordance and a subsistence for the areas of	years in order to purpose of enal ice with the rates	comply with HI bling me to pen determined by bsistence expe	MRC regulation form duties as Bolton Countries	ons. s a Mer acil.	nber of Bolton C	ouncil	i, I have ac	tually paid the f	ares and	l made
	n, I have not made, and with not make, any claim of ir financial loss allowance or attendance allowance inserted on this form are correct, and I understand	an connection with the	e unites illuitate	u un ano ioni.	_] . Su		ence T			Total Miles		
Signed	Member	Date on 04 Zo			Su		ence NT	<u> </u>	· · · · · · · · · · · · · · · · · · ·	١.	yroli	Use Only
certify that I have ex	ramined this allowance sheet, the figures recorded	are reasonable, and t	he expense was	necessary.] [•	es NT			Input by	-	CM
Authorised 📥	Members' Services	Date			Са	rer's	Allowance			Date		3,4.08
Date	Reason for Journey (including From and T		Time Departure		Miles Claime		Subsisten Allowand	- 1		es and Expenses	D Care	ependent rs Allowanc
3-Mar-2008	VOLUNTARY SECTOR GRANTS		10:15	12:00	17		£	р	£	р	£	<u> </u>
7-Mar-2008	AUDIT COMMITTEE		9:15	11:00	17		£	р	£	р	£	<u> </u>
10-Mar-2008	CULTURE AND COMMUN	ITY S	8:20	11:00	12		£	р	£	р	£	
10-Mar-2008	COUNCIL		15:30	22:45	17		£	р	£	р	£	<u></u>
11-Mar-2008	VOLUNTARY SECTOR GRANTS	PRESENT.	10:15	12:30	17		£	р	£	р	£	
11-Mar-2008	AREA WORKING		13:30	17:00	17		£	р	£	p	£	<u>.</u>
12-Mar-2008	CLEANER/GREENER/SAFE	R PDG	13:30	17:00	17		£	р	£	р	£	<u> </u>
18-Mar-2008	ADULT SERVICES		8:15	11:30	17		£	р	£	р	£	
26-Mar-2008	LIBRARY SUB COMMIT	TEE	9:00	12:45	17		£	р	£	р	£	·
31-Mar-2008	ADULT SERVICES		8:30	11:30	17		£	р	£	р	£	
							£	р	£	р	£	
							£	р	£	р	£	1 A
					Total Mil	les	Total Amo			l Amount		otal Amount
Please only	enter the number of miles. Do not	t calculate an a	mount for	payment.	165		£	р	£	р	£	
If you require	more lines, please use a Members	' Allowances A	dditional S	heet			Number of	Ad	ditional	Sheets Us	ed	

12 10 2007

All claims must be signed and authorised by Members' Services before payment can be made, and should be sent to Pauroll Sharer Arvice Centre 5th Floor Paderhorn House Re in RI 1 1 W