HAYES

Claim for Reimbursement of (P) Bolto: Subsistence & Travelling Expenses Counce

Name Roder Hando Cons	
a deli.	Pay No
Department Sec	ction Nember Sec.
When submitting a claim for reimbursement which involves expend claimant must attach the appropriate receipts, e.g. hotel bill. The perpayment should satisfy himself that the expenses are reasonable, a appropriate cases.	liture approved by a responsible officer, the
Nature & Place of Business LGA Concern	ence
Dates & Times of Journey	-6/7/09
CODE: CE	00000 BN (2000)
Subsistence - Meals Please give details	£
vernight Provisions	
Holer Bill - 3 right	D. 315-V
relling Expenses	
(Velrot a) Car Parking	110.30
her Expenses	
ص. را محر . را	315
I certify that I have necessarily incurred additional expenditure, relational performing an official duty, and I acknowledge receipt of	
performing an official duty, and I acknowledge receipt of	ing to the above claim, in the course of the above mentioned sum
ned dc Dai	
proved	<u> </u>

The completed form must be signed, and should be sent to Payroli Centre of Excellence, 5th Floor, Paderborn House, Bolton BL1 1JW

E-C5

/02/2007

Date

CM 9.8.07

8.

, PLACE TICKET INSIDE WINDSCREEN WITH THIS SIDE CLEARLY VISIBLE FROM THE OUTSIDE - SEE OVER 8/HAM CITY COUNCIL BRINDLE" DRIVE 2 DEPARTURE TIME NOT TRANSFERABLE DATE MONTH HOUR MINUTE FEE PAID *****9:009 ARRIVAL TIME 05 JUL 10:45 SEE SIGNS FOR CLOSING TIMES 06 JUL 10:45 ******9:00 DATE MONTH HOUR MINUTE FEE PAID **DEPARTURE TIME** PLACE TICKET INSIDE WINDSCREEN WITH THIS SIDE CLEARLY VISIBLE FROM THE OUTSIDE - SEE OVER B/HAM CITY COUNCIL BRINDLE DRIVE 2 DEPARTURE TIME **NOT TRANSFERABLE** MINUTE DATE HOUR ARRIVAL TIME 04 JUL 11:14 SEE SIGNS FOR CLOSING TIMES 05 11:13 ******3.90 JUL FEE PAID DATE MONTH HOUR MINUTE **DEPARTURE TIME** PLACE TICKET INSIDE WINDSCREEN WITH THIS SIDE CLEARLY VISIBLE FROM THE OUTSIDE - SEE OVER B/HAM CITY COUNCIL BRINDLE" DRIVE 2 NOT TRANSFERABLE DEPARTURE TIME FEE PAID HOUR MINUTE MONTH DATE ******8.8 ARRIVAL TIME 12:11 JUL Ũ3 SEE SIGNS FOR CLOSING TIMES



·Mr Roger Hayes 4 Park Cottages, Smithills Dea Bolton, BL1 6JP

Room No.

: 442

Arrival

: 03.07.07

Departure : 06.07.07

Cashier

: 11/AR

Page

INVOICE NO. 56-376545/1

Copthorne Birmingham, 06.07.07 09:33

Date	Description	Debit	Credit	
03.07.	Room & Breakfast	."	. 105.00	
04.07.	Room & Breakfast		105.00	
05.07.	Room & Breakfast		105.00	
06.07.	XXXXXXXXXX	xx/xx		315.00

Amount Due £0.00

VAT Breakdown

Net at 17.5%	£	268.09	
Net at 0.0%	£	0.00	
Total Amount Net	£	268.09	0305
VAT 17.5%	£	46,91	
TOTAL BILL STERLING	3	315.00	
TOTAL BILL EURO		523.00	

GRAND BILL

315.00

Amount Due

£ 0.00

"Log onto www.millenniumhotels.co.uk to get your Best Rate Guarantee."

HIGSON

BOLTON METROPOLITAN BOROUGH COUNCIL

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<u>ب</u>	

MEMBERS ALLOWANCES CLAIM

Claim for Month of APR	20 ع	<u>07</u>	Name of Member	T. (A (R S O NOPay No
Car (Make/Model) C3	toen C 5		Registration No.	Exact Cubic Capacity 2000 cc.
Home Address / C	CAURNEORN	Or. Bocto	~	
Metropolitan Borough Counc the rates determined by Bolto I declare that the particulars in expenses or allowances, or fir	il; that I have actually pa in Metropolitan Borough inserted on this form are nancial loss allowance or	id the fares and made other p Council. correct. Except as shown, I ha attendance allowance in conn	ayments shown on this form; we not made, and will not malection with the duties indicate	
(b) I am the holder of a currer Signed Approved	nt driving licence and	have adequate insurance c		Date
]	FOR OFFICIAL USE	ONLY (Completed by Con	nmittee & Members Services)
	Amount £:p		Miles 36.	
* Subsistence Allowance	:	Normal Mileage	20.	Details input onto Payroll system:
Subsistence Allowance (Taxable)	:	•		By: CM
Travel Reimbursement (e.g. Car Park, taxis)	:			Date: 4.6.07
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.

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.

Deduct any amounts received by way of on the above dates and give particulars

			95		səip	horities or boo	uA namorne received by way of Travelling & Subsistence from any other Aut	
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đ 3	d 3	d 3	Claimed	ło Level	тите Жерипи Керипи	Time Departure	esting by vorqqA to notiquesQ (of A morth senties)	Date
Subsistence Allowance	Fares and other Expenses	Sependent Carers Allowance	Miles	Mode			Particulars of Journal	



HOLLICK

Members' Allowances Claim Bolton Council

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Name GUNG	LICATICHAEL HOLLICK Home Addre	155 62 NKH	TINGALE F	CAS	_ B	ACKROD	- K	JECT.	Pay	No.	
Car Make/Mo	del Registration			Exac				Mo	onth May-	No	v 2007
(b) (For Car Allow regard to the (c) (For Car Allow (d) I have actually other payment: (e) Except as show	vance claims only) I have actually and necessarily incurred the mileavance claims only) I am the holder of a full, current and valid driving se of my car on Council business. vance claims only) I will retain VAT receipts covering all journeys for and necessarily incurred expenditure in travelling and subsistence for a shown on this form, and that all amounts claimed are strictly in accover, I have not made, and will not make, any claim under any enactmen	six years in order the purpose of er rdance with the ra	certificate (whe to comply with pabling me to potes tes determined	re applica HMRC re erform du by Bolto	able), an egulation	d I have complied v s. Member of Bolton	with to Cou	nces. he Council' ncil, I have	s insurance rec	uireme	ents with
or allowances, (f) The particulars	or financial loss allowance or attendance allowance in connection wit inserted on this form are correct, and I understand that fraudulent claim	n the duties indica ms may result in di	ted on this form sciplinary action	ղ, n.	Subs	istence T	T		Total Miles	3	
Signed _	Member Date 29/	1102			Subs	istence NT	প্তি	1.24-	For Pa	yrol	l Use Only
1	examined this allowance sheet, the figures recorded are reasonable, a	nd the expense w	as necessary.]	Expe	nses NT			Input by	cm	
Authorised	Members' Services Date			Care	's Allowance			Date		30.11.07	
Date	Reason for Journey (including From and To)	Tim Departure		Mi Clai	les med	Subsisten Allowanc			es and Expenses		Dependent ers Allowance
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" Nev 07	12 MEETINGS AT 6.77 Permeeting					£	р	£	р	£	р
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*	enter the number of miles. Do not calculate an	·	' - L			£81·24	L	£	p j	£	р
If you require PAY-M1 12.10.2007	more lines, please use a Members' Allowances All claims must be signed and authorised by Payroll Share pervice C	Members' Sen	vices before			Number of a be made, and s on BL1 1JW	Add shou	litional ld be sen	Sheets Use It to	ed	



Members' Allowances Claim



Name C_{LLR}	MICHAEL HOLNICK	Home Addres	s 62 NIG	NTINGAL	er Rang	30	ACKROD		Pay	No.		
Car Make/Mo	del	Registration			Exact C			Į N	Month JANSARY 20087			
regard to the u (c) (For Car Allov (d) I have actually other payment (e) Except as show	wance claims only) I have actually and necessarily wance claims only) I am the holder of a full, curre use of my car on Council business. wance claims only) I will retain VAT receipts cover and necessarily incurred expenditure in travelling as shown on this form, and that all amounts claimed wn, I have not made, and will not make, any claim user financial loss allowance or attendance allowance.	nt and valid driving lic ring all journeys for sib and subsistence for th I are strictly in accorda nder any enactment for	ence and MOT or years in order ne purpose of er ance with the ra	certificate (whe to comply with nabling me to po tes determined	re applicable HMRC regul erform duties by Bolton C enses	e), and lations. s as a f ouncil.	I have complied winder of Bolton (FOR MEM	th the Counc Council, I hav	re actually paid ti ERVICES I	ne fares JSE (and made	
(f) The paniculars	inserted on this form are correct, and I understand	that fraudulent claims	may result in di	sciplinary action	n.		tence T	13.54	Total Miles	3		
Signed 4	. Member				tence NT		For Pa	ayrol	l Use Only			
Authorised	xamined this allowance sheet, the figures recorde		the expense w	as necessary.		•	ses NT		Input by		cm	
Additionsed	Members' Services	Date					Allowance		Date		5.2.08	
Date	Reason for Journey (including From and T	· ·o)	Time Departure		Miles Claime		Subsistenc Allowance		res and Expenses		Dependent ers Allowance	
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10/1/08	PLANNINE 8am - 17.40						£6.771	£	р	£	р	
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PAY-M1 12.10.2007	more lines, please use a Members All claims must be signed and Payroll Sha	d authorised by Mare ervice Cen	embers' Serv	rices before	payment o	can_he	Number of A e made, and sh on BL1 1JW	dditiona l ould be se	Sheets Usent to	ed		

BOLTON METROPOLITAN BOROUGH COUNCIL

MEMBERS ALLOWANCES CLAIM

Claim for Month of	<u>~</u>	7	Name of Member	ROSA KAY	Pay No.
Car (Make / Model)			(Block capitals please) Registration No	Exact Cubi	c Capacitycc.
Home Address 34 Ex	AMANUEL CLOS	E BOLTON,	B135BD	and the second s	A Company of the Comp
DECLARATION:			* ** *		TROLTON COUNCIL
Metropolitan Borough Cour the rates determined by Bol	ncil; that I have actually paid th ton Metropolitan Borough Cou	ne fares and made other p noil.	ayments shown on this I	oose of enabling me to perform duties as a N form; and that the amounts claimed are stric	3 1 JUL 2007
I declare that the particulars expenses or allowances, or i	s inserted on this form are com financial loss allowance or atte	ect. Except as shown, I handance allowance in conn	ve not made, and will no ection with the duties in	ot make, any claim under any enactment for dicated on this form.	SERVICE CEN RE
(b) I am the holder of a curr	ent driving licence and have	e adequate insurance co	over for the use of my	vehicle on Council business. (F	For Car Allowance claimants only)
Signed		MEMBER		Date	
Approved				Date 26 07 07	
	FOI	R OFFICIAL USE O	ONLY (Completed by	Committee & Members Services)	•
: b	Amount £:p		Miles		
* Subsistence Allowance		Normal Mileage		Details input onto Pay	roll system:
Subsistence Allowance (Taxable)	:			By: C►	
Travel Reimbursement (e.g. Car Park, taxis)	81:70			Date: 31.7.07	
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.

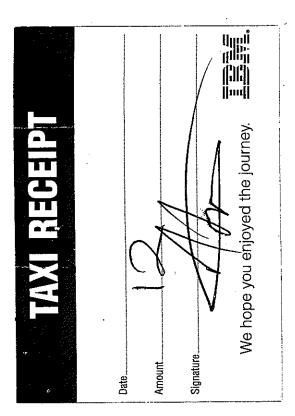
Please note that all Personal Details must be shown above and the form must be both signed and authorised. If any details are missing, the form will be returned and payment therefore delayed.



100			*				٠,			5 4 5			·		
		Partic	Mode	Miles	Dependent	Carers	Fares ar		Subsiste	ence					
Date		Description of Ap	proved Duti	proved Duties, Tir			of		Allowa	nce	Expe	nses	Allowa	ance	
		including Location	Departure	Return	Travel	Claimed	£	Р	£	P	£				
4/07/07	BOLTON -	Lonpon	AND	RETURN				٠,			<u> </u>			┸	
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				ence from any other Autho	الداما ممانين	ion					81	70	ı		

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.



Northern Rail BOLTON 02

CUSTOMER COPY Keep this copy for your records

see receipt Sales

£59.70 £59.70

TOTAL

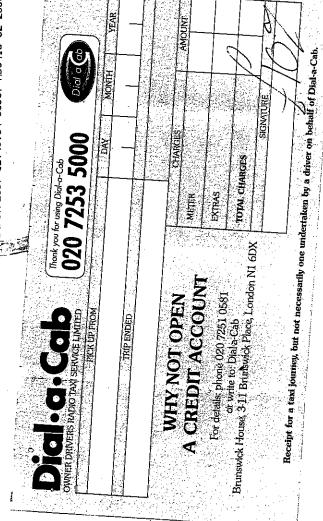
. 00

Expiry : 2007-11-30 Merchant No : 3847068 Auth code : 2314 ICC (Verified by PIN) IID : 423153831

Please debit my account by

£59.70

Date & Time of Transaction 114/07/2007 12:48:34 06987 HD6418 52 2599



Bolton Council

Members' Allowances Claim

Payroll Share

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

12,10,2007

M-YA9

d	3 q 03.7	3	d 3					sersi ixaT	21-Jan-2008
ers Allowance	xpenses Car	Other E	Allowance	Claimed	Return	Departure	•	T bns mora gribulari)	Date
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80.5.0	əlsC		Allowance	Carer's			Date	Services	Authorised
W)	ubnţ pλ	11:00:5	IN se	Exbeus	necessary.	sew esnedxe edt	are reasonable, and	amined/this allowance sheet, the figures recorded	l certify that Lave ex
VlnO əsU l	For Payrol		TM eans				Date		Signed
	Fotal Miles		T eone	isisduS . _n	sciplinary action	e may result in dis	in connection with the first	r financial loss allowance or attendance allowance nserted on this form are correct, and I understand	or allowances, o
(c) (For Car Allowance claims only) I have actually and necessarily incurred the mileage claimed in accordance with the Council's scheme of Motor Car Allowance claims only) I will retain VAT receipts covering all journeys for six years in order to comply with HMRC regulations. (d) (For Car Allowance claims only) I will retain VAT receipts covering all journeys for six years in order to comply with HMRC regulations. (d) I have actually and necessarily incurred expenditure in travelling and subsistence of enabling or subsistence expenses. (d) I have actually and the fares and made are strictly in accordance with the rates determined by Bolton Council, I have actually paid the fares and made of enabling or subsistence expenses. (d) I have actually and the fare as shown, I have not make, any claim under any enactment for travelling or subsistence expenses. (e) Except as shown, I have not make, any claim under any enactment for travelling or subsistence expenses.									
y 20 00	เธมตร หม ัก	Mor		Exact CC		A/N	Registration	A\V le	Car Make/Mod
	Pay No.		980	, Bolton, BL3	esolO leun	s 34 Emma	Home Addres	or Rosa Kay	Name Councill
SANT STATE AND STATE OF THE PARTY.		4.							9

Please only enter the number of miles. Do not calculate an amount for payment. 3 d d 3 | q 00.8 r Total Miles InuomA Isto InuomA IstoT InuomA Isto I d d d d \mathfrak{F} 3 d 3 d d $\overline{\mathcal{F}}$ d 3 d d 3 3 d d d 3 3 d \mathfrak{F} 3 3 3 d d 3 3 d 3 3 \mathfrak{F} d 3 d d 3 21-Jan-2008 d q 03.7 3 Taxi fares

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

WLL 134 nc Jervice Centre, 5th Floor, Paderborn House, F 2n BL1 1JW

Number of Additional Sheets Used



Dial/Flight 0870-366-2171 Huge savings on leisure and business fares from the country's No.1 flight retailer Date Date Dial/Flight LICENSED TAXI RECEIPT

MEMBERS ALLOWANCES CLAIM

BOLTON METROPOLITAN BOROUGH COUNCIL

(Block capitals please)

Claim for Month of MAY SUNE 2007

LORD Name of Member

Car (Make/Model) FORD MONDES

Registration No. _

Exact Cubic Capacity 1988. cc.

INCELED CLOS = FARNWORTH

DECLARATION:

(a) I declare that I have actually and necessarily incurred expenditure in travelling and subsistence for the purpose of enabling me to perform duties as a Member of the Bolton Metropolitan Borough Council; that I have actually paid the fares and made other payments shown on this form; and that the amounts claimed are strictly in accordance with the rates determined by Bolton Metropolitan Borough Council.

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 allowances, or financial loss allowance or attendance allowance in connection with the duties indicated on this form.

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

(For Car Allowance claimants only)



MEMBER

Date 27, 6 67

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

		Amount		Miles	
		£:p		11/2	•
*	Subsistence Allowance	:	Normal Mileage	103	Details input onto Payroll system:
•	Subsistence Allowance (Taxable)	:			By: CM
	Travel Reimbursement (e.g. Car Park, taxis)	:			Date: 3.7.07
	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.



A CONTRACTOR OF THE PARTY OF TH	Particulars of Journeys			Mode	Miles	Dependent	- 1	Fares and	- 1	Subsiste	
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25	SCRUTING WORKSHOP	3-75	6.00	CAR	9					····	-
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Deduct any amounts received by way of Travelling & Subsistence from any other Authorities or bodie on the above dates and give particulars

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

Qi UC

BOLTON METROPOLITAN BOROUGH COUNCIL

MEMBERS ALLOWANCES CLAIM

Claim for Month of ゴビムー	L/RUE :	20 0 7	Name of Member (Block capitals please)	JAMER	LORD	Pay No.	
Car (Make/Model)	D MON	50	Registration No.		Exact Cubic Cap	pacity 1988 cc.	
Home Address 22, Li	NG FIEL	a) CLUSE T	FARWWORT	(-1			
the rates determined by Bolto	l; that I have actually j n Metropolitan Boroug	paid the fares and made other p gh Council.	payments shown on this form;	and that the amour	nts claimed are strictly in	accordance with	•
I declare that the particulars in expenses or allowances, or fin	nserted on this form a ancial loss allowance	re correct. Except as shown, I ha or attendance allowance in cont	ave not made, and will not ma nection with the duties indicat	ke, any claim under ed on this form.	r any enactment for trave	lling or subsistence	
(b) I am the holder of a curren	it driving licence an	d have adequate insurance o	cover for the use of my veh	icle on Council b	usiness. (For Ca	ır Allowance claimants on	ıly)
Signed		MEMBER		Date 28 8			
Approved_				Date	· · · · · · · · · · · · · · · · · · ·	<i>;</i>	. 7
	,,,,	FOR OFFICIAL USE	ONLY (Completed by Con	mmittee & Member	s Services)		
	Amount		Miles				
	£:p		1119				
* Subsistence Allowance	:	Normal Mileage	140	Detai	ils input onto Payroll s	ystem:	
Subsistence Allowance (Taxable)	:			Ву: 5	3-lenoar		
Travel Reimbursement (e.g. Car Park, taxis)	;			Date:	1 Sep man	len 6.	•
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 Journal			Mode	Miles	Dependen		Fares and		Subsiste Allowa	
Date	Description of Approved Duties,	Tim Departure	e of Return	of Travel	Claimed	Allow:	ance P	Exper £	ises P	£	р
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12	FARNWORKE MANACEMEN (130 ARD	5-45	7.45		a				,		
47	MEDICAL DISMISSING APPEAR	8-30	11-30	1 -	70	<u> </u>		<u> </u>	1		1
18	ARIA WORKING P.D.C.	9.15	12-00	T .			<u> </u>			 	<u> </u>
23	HOUSING P.D. G	8.30		Car					<u> </u>		
24	HENLAN SCRUTINY	9.00	17.00		9	 	<u> </u>		!		
24	LIC ENV. COMMILLE	1-30			9,	<u> </u>	 		<u> </u>	: 1	5
30	ADULT YOMITBRING P.D.G	3-30	5:00	1	9	<u> </u>					†
AUG	LIC. EXVIR. COMM MESTING	1-15	4-00	1	9	<u> </u>					
164	DDULTS SCRUTINT CONU.	5.30	8.00	1	9	 	\dagger		<u> </u>		
1.5	ENVIR SCRULING COMM	5:30	8.12	CAR	6		+		 		
16	AD-O ENRUL CHAIR IV. C. MELLING	12.36	T	CAR	-4-	 	 -	 			\top
177	MACKNET CONSULTATIVE PANCE	9.30	11.45		 ~! 		-		-	 	\dagger
20	ARIN FORUM M.OM	3.30		CAR	7	<u> </u>	<u> </u>	 	+		
	CAB PARKING P. J.G	9.30		CAR	9			_		 	
62	LIC. SUB COMMITSE	1-30	5.00	CAR	9_	<u> </u>	 -			ļ	
28	7.0,000		<u> </u>			<u> </u>		 	1	 	-
					<u> </u>	 	- [<u> </u>	 	<u> </u>
 				<u> </u>		<u> </u>			<u> </u>	+	+
	Travelling & Subsistence from any other Aut	1	4:	•	148						

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.

BOLTON METROPOLITAN BOROUGH COUNCIL

MEMBERS ALLOWANCES CLAIM

			- Walnut		- 20	
Claim for Month of S	rl/och	20 <u>67</u>	Name of Member (Block capitals please)	DAMES L	ORD	Pay No.
Car (Make/Model) FO	RS MAI	u)=6	Registration No.		Exact Cubic Cap	pacity 1988 cc.
Home Address 22 1	INGFIE	LD CLOSE	FARWWOR-	di i		
the rates determined by Bolto	cil; that I have actually on Metropolitan Borot	paid the fares and made other p igh Council.	payments shown on this form	; and that the amounts co	amieu are suicuy iii	action distance was
I declare that the particulars expenses or allowances, or fi	inserted on this form nancial loss allowance	are correct. Except as shown, I ha cor'attendance allowance in cont	ave not made, and will not manection with the duties indica	ake, any claim under any ted on this form.	enactment for trave	lling or subsistence
(b) I am the holder of a curre	nt driving licence a	nd have adequate insurance o	cover for the use of my vel	hicle on Council busin	ess. (For Ca	r Allowance claimants only)
Signed		MEMBER		Date 25.10		C-Martiness Section for the section of the section
Approved		- -		Date		BOLTON COUNTY
		FOR OFFICIAL USE	ONLY (Completed by Co	mmittee & Members Ser	vices)	2 9 007 2277
	Amount		Miles			FAYEDIL SHARID
	£:p		131	. Date flate	mut date Dermell e	
* Subsistence Allowance	:	Normal Mileage	'-	Details in	put onto Payroll s	ystem.
Subsistence Allowance (Taxable)	; ;	,		By: C	m	
Travel Reimbursement (e.g. Car Park, taxis)	:			Date: 3	10.07	

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



	Particulars of J			Mode	Miles	Dependent		Fares and	i	Subsister Allowar	
Date	Description of Approved Duties,	i	e of Return	of Travel	Claimed	Allowa £	ince p	Expen £	ses p	£	p
AUG	including Locations (From & To)	Departure			9						
29,	FULL COUNCILL	6.15							<u>: </u>		
2500	HOUSING P. D. G	8-15		CAR	Ž —		-				<u> </u>
11	LIC. ENV. COMMITTEE	1.15	4.00	CAR	<u> </u>		<u> </u>				
18	AREN WORKING P.D.G	9-30	12.00	CHA	9				<u> </u>		
19	HEALTH SCRUTCHY	9-00	12-15	CAR	9	<u> </u>	<u> </u>			<u>-</u>	<u> </u>
001	AKING ON THE	3-30	3.30							<u></u>	
8	HOOSING P.D.G	1,30	3-30	CAR	9_					·	<u> </u>
9	LIC COMMITTEE	1.30	4.00	CAR	9	7					<u> </u>
3	ANULTS SCRUTING	5.15	7.30	CAR	9.		<u> </u>				
	ENVIR SERVICIY	575	7-45	CAR			<u> </u>				
10	LIC. APPEAL SUB. COHM	9-15	11.30	CAR	9_		<u> </u>	-	<u> </u>	 	
1/	AREN FORUM M.OM. MESKING	3.30	5.15	CAR	9		<u> </u>		<u> </u>		<u> </u>
15	NEIBOURHOOD WEST PANEL	5.15	7.36	CAR	14	<u> </u>	<u>!</u>	ļ <u>.</u>			-
16	FULL COUNCILL	6.15	9-15	CAR	0	<u> </u>	<u> </u>				₩
24	HACKNEY CARRIAGE PANEL	1-15	3.45	CAR	9		<u> </u>				<u> </u>
25	MACKNEY (MOUNTAGE TAKE						<u> </u>	<u> </u>			
									<u>!</u>		<u> </u>
			-						<u> </u>		<u> </u>
		1							<u> </u>	<u> </u>	
			1								
				<u> </u>	17,						
	to a second by way of Travelling & Subsistence from any other Aut	orities or bo	odies		131	MIL	_\ <u>}</u>			<u> </u>	ــــــــــــــــــــــــــــــــــــــ

Deduct any amounts received by way of Travelling & Subsistence from any other Authorities or bodie on the above dates and give particulars

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

BOLTON METROPOLITAN BOROUGH COUNCIL MEMBERS ALLOWANCES CLAIM ORD Pay No. Name of Member Claim for Month of (Block capitals please) Exact Cubic Capacity 101 \$ Registration No. Car (Make/Model) NGJEL CLOSE FARNWORTH Home Address_ DECLARATION: (a) I declare that I have actually and necessarily incurred expenditure in travelling and subsistence for the purpose of enabling me to perform duties as a Member of the Bolton Metropolitan Borough Council; that I have actually paid the fares and made other payments shown on this form; and that the amounts claimed are strictly in accordance with the rates determined by Bolton Metropolitan Borough Council. 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 allowances, or financial loss allowance or attendance allowance in connection with the duties indicated on this form. (b) I am the holder of a current driving licence and have adequate insurance cover for the use of my vehicle on Council business. (For Car Allowance claimants only) Date 29 · 11 · 07 · MEMBER Signed Approved FOR OFFICIAL USE ONLY (Completed by Committee & Members Services) Miles Amount BOLTON COUNCIL £:p 103 Details input onto Payroll system: Normal Mileage Subsistence Allowance Subsistence Allowance (Taxable) Travel Reimbursement Date: 30.11.07 (e.g. Car Park, taxis) 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 Ja			Mode	Miles	Dependent Allowa		Fares and Expen	i i	Subsiste Allowa	
Date .	Description of Approved Duties,	1	e of	of Travel	Claimed	£ Allowa	nice :	£	р	£	р
oct.	including Locations (From & To)	Departure	Return		9		1				
31	Soint P.D.G	2-30	4.45	1	7		-				-
31 Nov 5	40032WG P.O.G		11.00	CAR	-)		<u> </u>			···	
	FARN. KEARI AREN FORUM	1.12	8.15	CAR	4	<u> </u>		<u> </u>		<u> </u>	<u>!</u>
6	HEALTH SCRUTING	9.00	12.00	CAR	9	<u> </u>					<u> </u>
6	LIC. EXVID. COMMITTEE	1.30	3.30	CAR	9	<u> </u>					┿
	HOUSING P.D.G	1-30	2.45	CAR	9	<u> </u>	<u>.</u>				┼─
12	AUDIT COMMITTEE	3-30	6.30	CAR	9	ļ			,		┼
20 26	HOUSING P.D.G	9.00	10.00	CAR	9	ļ					ऻ—
	CAR PARKING P.D.C.	10.40	1230		9	1.24.22					┼
26	LIE EVIRON. CONVI 11==	1-30	3 +15	CAR	9		1.				ऻ
27	ADULTS SCRUTING COMM	5.30		CAR	9	<u> </u>			<u> </u>		ــــــ
21	ENVIRONMENT SCRUTING COMM		8.15		9						↓
28	ENVIRONACIONISTROVINO COMO										ــــــ
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Ĺ						1					
			-			 	1				T
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			<u> </u>	-	 	 		 	İ		<u> </u>
		<u></u>		<u> </u>	-	 					
	amounts received by way of Travelling & Subsistence from any other Aut	Lauitiaa on ba	dies		103		.				

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.

BOLTON METROPOLITAN BOROUGH COUNCIL

OP(D.

MEMBERS ALLOWANCES CLAIM

*					٠ ٨	~ ~		
Claim for Month of	+ A3	20 <u>08.</u>	Name of (Block capita		JAMES L	•	Pay No.	
Car (Make/Model) 706	RD MON	0=0	Registrat	_		Exact Cubic Ca	pacity <u>1988</u> cc.	
Home Address 22, U	INGFIE	J CLOSS	EARN	1 WORT	il.			
the rates determined by Bolto	il; that I have actually in Metropolitan Borou inserted on this form a	paid the fares and made other	payments show	wn on this form; , and will not ma	; and that the amounts da ake, any claim under any	amied are suichy m	acoldance wat	~ (
(b) I am the holder of a current SignedApproved						,	Car Allowance claimants only)
		FOR OFFICIAL USE	ONLY (C	ompleted by Co	mmittee & Members Ser	vices)		
,	Amount			Miles	1			•
	£:p			. 1				
* Subsistence Allowance	:	Normal Mileage		111.	Details in	put onto Payroll	system:	
Subsistence Allowance (Taxable)	:				. ву:	CM		
Travel Reimbursement (e.g. Car Park, taxis)		*	,		Date: S	5.2.08		
Dependent Carer's Allowance	:		- 1					

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 an	ŀ	Subsist	
Date	Description of Approved Duties,		ne of	of	Claimed	Allowa £		Expe £	l	Allowa £	ance p
DER	including Locations (From & To)	Departure	Return	Travel		L L	<u>р</u>		p		T P
12	FULL COUNCIL	6.15			9,		<u>!</u>				<u> </u>
7.7	ARON FORUM M.OM	3.15	5-30	CAR	<u> </u>						<u> </u>
18	LIC. APPEAR HEARING	9.15	12.00	COAR	9						<u> </u>
19	TEINACE SEE P.D.C	1-15	16-30	CAN	9		<u> </u>				<u> </u>
1 <u>2</u> 2	FARNWORTH PRECINCY SPA ROAD	9.30	11-15	CAR	9		<u> </u>				<u> </u>
10	FARNUORAU BOARN MELLING	5.45	8,00	CAR	<u> </u>		<u> </u>	,			<u> </u>
14	HOUSING P.D.C	3.00			9						<u> </u>
13	HEALTH SCRULING	9.00	12.00	CAR	9				•	,	<u> </u>
15	LIE. ENUIR. MESLING	1.30	£4 - €5	i 1	9_						<u> </u>
الما	AREA WORKING P.D.C.	8 .30	11.30	CAR	9	,	<u> </u>			-	
17	LIE. APPEAL BLACKPON B.L.	9.00	12-15	1	9		<u> </u>				
24	Lic. SUB CONUR. MINISTRA HOUSE	4.30	64-00	CAR	9						
30	HACKNET CARRIAGE COMM	1.15	4 115	1	9						
	RACEROST CARROLLES CONT.	**									
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D - 4t	amounts received by way of Travelling & Subsistence from any other Auth	orities or bo	dies		111,	YV.					

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.

Members' Allowances Claim

12,10,2007



			r					<u> </u>		/ Dev	Na	
Name 📆	AM EN	LORD	Home Address	; 22 L					アコンハ	JWOR (H Pay	NO.	20.0.63
Car Make/Mod	del FORD	MONDED	Registration (Exact C	C 1	98 P		Month Faß		20 ० ४
(b) (For Car Allow regard to the us	rance claims only) rance claims only) se of my car on Cour	I have actually and necessarily I am the holder of a full, currer noil business.	it and valid driving lice	nce and MOT c	enincate (where	MRC regulat	, and m	ave complied with	ir uie oou			
والمستقم والمستقالية	and passocribe inclu	will retain VAT receipts cover rred expenditure in travelling a	nd subsistence for the	numose oi enz	mind file to bei	101111 uuucs a	as a wici	mber of Bolton Co	ouncil, I h	ave actually paid the	fares ar	nd made
other payments	s shown on this form,	and that all amounts claimed and will not make, any claim u	are strictly in accorda nder anv enactment f	or travelling or s	ubsistence expe	enses	unch.	FOR MEM	<u>BERS</u>	' SERVICES L	ISE (ONLY
ar alloweness	or financial loce allow	vance or attendance allowance are correct, and I understand	e in connection with th	e duties indicate	ed on this form.	ie.	ubsist	ence T		Total Miles		O > 102
Signed 3		Member	Data 18		8 .	Sı	ubsist	ence NT		For Pa	yrol	Use Only
	xamined this allowar	Member nce sheet, the figures recorded		the expense wa	s necessary.	; E	xpens	es NT		Input by	Į	СМ
Authorised	Literato (azero) en ol	Members' Services	Date	•		C	arer's	Allowance		Date		3.4.08
Date	<u> </u>	Reason for Journey	7	Tim Departure	e of Return	Miles Claime		Subsistence Allowance	I .	Fares and her Expenses	Care	Dependent ers Allowance
5 ~	·	ARKING P.T	'SE	10.00	1-00	9.		£	p £	р	£	р
6	二N1/	IR SCRUTIX	17 COMON	5.30	7:45	G		£	p £	, p	£	р
12		ENVIR COI	чм.	1.15	4.15	9		£	p £	p	£	р
20	Coun		551	6.15	9-30	વ			p £	р	£	р
27	FULL			6:15	11-00	9°		£	p £	р	£	р
MARCH 3.	ARCO			6.15	8,30	4		£	p £	р	£	р
4	146101		Υ	8.45	12-00			£	p £	р	£	р
10	COUNC	. 1		5.30	7.45	9		£	p £	р	£	р
11	110, 81	_		1.15	4-00	9		£	p £	р	£	р
12	 	ELINE PLODDE		5.30	8-49	1		£	p £	р	£	р
17			BOARD	6.15	8.15	4		£	p £	р	£	p_
146		UB. COMM		4.00	5.45	9.		£	p £	р	£	р
17	140051K	6 P.V) C	•	8. 12-	11-00 9			Total Amou		Total Amount		otal Amount
Please only	enter the nun	nber of miles. Do no	t calculate an a	mount for	payment.			£	p £	р	£	p
If you require	more lines, p	lease use a Members	s' Allowances A	dditional S	heet	102	•			onal Sheets Us	ed	
PAY-M1	All	claims must be signed a	nd authorised by l hare - Rervice Ce	Members' Se	rvices before	e payment orn House	t can b	e made, and s on Bi 1 1.IW	inould b	e sent to		
12 10 2007		Pavroli S	nare vervice Ge	ande, Jui Fil	o, raudibl	VIII I IOUSC	u, L	A11 1-1 1-1 1-1 1-1 1-1 1-1 1-1 1-1 1-1				

MORRIS

CINC

BOLTON METROPOLITAN BOROUGH COUNCIL

MEMBERS ALLOWANCES CLAIM

-						
Claim fo	or Month of	pril	• • • • • • • • • • • • • • • • • • • •	Name of Member	Island Morris	Pay No.
Car (Mal	ke/Model) VU	1 (2017.	•	(Block capitals please) Registration No.	Exact Cubic C	apacity <u>3,000</u> -cc.
Home A	ddress					•
(a) I decl Metro the ra I decl exper	opolitan Borough Coun ates determined by Bolt are that the particulars ases or allowances, or fi	cil; that I have actually on Metropolitan Borou inserted on this form a inancial loss allowance	paid the fares and made other pay gh Council.	ments shown on this form; a not made, and will not mak tion with the duties indicate	·	in accordance with
Signed_	4	<u> </u>	MEMBER	•	Date	
Approve	d		-	. 1	Date	
		· · · · · · · · · · · · · · · · · · ·	FOR OFFICIAL USE ON	NLY (Completed by Com	nittee & Members Services)	-
		Amount £:p		Miles	•	
* Subsi	istence Allowance	-	Normal Mileage	70.	Details input onto Payroll	system:
Subsi (Taxabi	istence Allowance	:	•		Ву: СМ	
	el Reimbursement 17 Park, taxis)	:			Date: 3.5.07	
-	ndent Carer's vance	:				

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 Allowa		Fares and Expen		Subsister Allowar	
Date	Description of Approved Dub including Locations (From & To)	Tim Departure	ne of Return	of Travel	Claimed	£	р	£	P	£	p
27-11-07	\$ Home to Saferd Gwic Certal at Sw	and the same of th									
	and retuned.	·				<u></u>					-
						-					
27-4-07	Home to Manchester Aupoit Shoreholders Committee Meeting and return.	<u> </u>			70						\vdash
,	Committee Meeting and return.	<u> </u>			70			-			
		· ·									<u> </u>
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							an in 🍇	77.78		<u> </u>	
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							<u> </u>				
			<u> </u>				<u> </u>				1
											<u> </u>
	amounts received by way of Travelling & Subsistence from any other Autho	orities or boo	lies		70						

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.

Members' Allowances Claim Bolton Council



					· ·	A STATE OF MANAGE STREET		Pay	No	
Name Council		S 4			0000					20
Car Make/Mod	del VW Golf Registration		,	Exact CC	3000		IVIC	onth So	ept-No	ov 20
(b) (For Car Allow regard to the us (c) (For Car Allow (d) I have actually other payments (e) Except as show or allowances (c)	nance claims only) I have actually and necessarily incurred the mileage ance claims only) I am the holder of a full, current and valid driving lices of my car on Council business. ance claims only) I will retain VAT receipts covering all journeys for size and necessarily incurred expenditure in travelling and subsistence for the 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 or financial loss allowance or attendance allowance in connection with the	ence and MOT or x years in order to e purpose of ena ance with the rate for travelling or si ne duties indicate	o comply with H bling me to per as determined b absistence expect ad on this form.	MRC regulations form duties as a y Bolton Council.	i i nave com i. Member of E	Polton Counce MEMBE	il, I have a		fares ar	nd made
	inserted on this form are correct, and I understand that fraudulent claim	s may result in or	iscipiinary acito	11.	istence N	-		For Pa	vroll	Use Only
Signed A	Member Date amined this allowance sheet, the figures recorded are reasonable, and	the evence was	nocessar/		nses NT		.83.	Input by	.y. 0	CM
Authorised	Date	i tile expelise was	a necessary.	· ·	r's Allowa	<u> </u>	· <u> </u>	Date	.	30.11.07
Authoriseu	smbers' Services	T:		Miles		istence	Ear	es and	i i	Dependent
Date	Reason for Journey (including From and To)	Time Departure		Claimed	1 1	wance				ers Allowanc
27-Jul-2007	Home to AGMA Tamside (Dukinfield) and return	8:00	12:30	46	£	р	£	р	£	p
29-Jul-2007	Home to AGMA Stockport and return	8:00	12:30	30	£	р	£	р	£	p
31-Aug-2007	Home to AGMA Executive in Wigan and return	8:00	12:30	22	£	. р	£	р	£	. р
11-Sep-2007	Home to AGMA Leaders and SNR Meeting, Manchester and return	8:00	14:00	31	£	р	£	р	£	ŗ
28-Sep-2007	Home to AGMA Executive in Swinton and return	8:00	13:00	22	£	р	£	р	£	p
12-Oct-2007	Home to MIDAS Board, Trafford Park and return	12:00	14:00	14	£	р	£	р	£	p
15-Oct-2007	Home to Executive Away Day (Anderton Centre, Chorley) and return	8:30	13:00	14	£	р	£	р	£	p
17-Nov-2007	AGMA Leaders Sub-Group on Governance, Manchester Town Hall	10:00	12:00	31	£	р	£	р	£	p
19-Nov-2007	Greater Manchester meeting on congestion charge	9:00	10:00		£	р	£	2.80 p	£	p
15-Nov-2007	Health Commission Pre-Meeting, Bury Town Hall	9:00	10:00	16	£	р	£	р	£	p
23-11-07	NW Cowler Awards Ceremony	10-30	15.30.		£	р	£	603.P	£	p
				,	£	р	£	. р	£	p
	L			Total Miles		Amount		Amount	 	otal Amount
Please only	enter the number of miles. Do not calculate an a	mount for p	oayment.	226	£	р	£ 8.8	3 2=89 p	£	

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

Number of Additional Sheets Used

PAY-M1 12,10,2007 All claims must be signed and authorised by Members' Services before payment can be made, and should be sent to

STD BOLTON * MANCHESTER CTLZ STD DAY SINGLE 4 Start Date 19.NOV.07 Route Valid until ANY PERMITTED 19·NOV·07 Number 35271 NIC Child Validits ON DATE SHOWN 0025e2599N53 H08·23 SGL Price

Members' Allowances Claim



Name Councill	or Cliff Morris Hon	ne Addres:	s (Pay		
Car Make/Mod	el VW Golf Reg	istration			Exact CC	3000		Nonth Fe	bruar	y 20 00
(b) (For Car Allowaregard to the us (c) (For Car Allowaregard to the us other payments (e) Except as shown or allowances, control of the cont	ance claims only) I have actually and necessarily incurrence claims only) I am the holder of a full, current and very end of an actual of a full, current and very end of a full, current and very end of a full, current and very enditure in travelling and sultand necessarily incurred expenditure in travelling and sultand on this form, and that all amounts claimed are strongly in the full of the full o	yalid driving lick journeys for six bsistence for th rictly in accorda ny enactment for projection with the	ence and MOT ce cyears in order to be purpose of ena ance with the rate or travelling or sub the duties indicate	comply with holing me to pe s determined sistence expe	HMRC regulation duties as a by Bolton Councinses	s. a Member of Bolton	Council, I ha		ie fares i	and made
Company of the compan		Date			Subsistence NT		For Pa		yroll	Use Only
I certify that I have examined this allowance sheet, the figures recorded are reaso			reasonable, and the expense was necessary.			Expenses NT		Input by		
Authorise	Members' Services Date			•	Care	r's Allowance		Date		
Date	Reason for Journey (including From and To)		Time Departure	of Return	Miles Claimed	Subsisten Allowand		ares and r Expenses	D Care	ependent ers Allowance
15-Feb-2008	Greater Manchester Health Commission (Manchester Cathedral	Visitors Centre)	10:30	12:30	16	£	p £	p	£	р
20-Feb-2008	AGMA Leaders Sub-Group (Manchester	Town Hall)	11:30	1:30	16	£	p £	р	£	р
22-Feb-2008	LGA National Policy Seminar (Manchester	Town Hall)	10:00	1:15	16	£	p £	р	£	р
29-Feb-2008	AGMA Leaders Away Day (Lancashire Co	unty Club)	10:00	3:00	10	£	p £	. р	£	. b
·						£	p£.	р	£	р
		***				£	p £	р	£	р
			AN to the control of			£	p £	р	£	р
		OLIUN	CUUNC	-		£	p £	р	£	р
						£	p £	р	£	р
	·	20 M	7 200			£	p £	р	£	р
		PAYRIY	Constant of the constant of th			£	p £	р	£	р
		SERV	CON TRE	V. January		£	p £	р	£	p
					Total Miles	Total Amo	ınt To	tal Amount	To	otal Amount
Please only	enter the number of miles. Do not cal	culate an a	amount for p	oayment.	58	£	p £	р	£	р
· -	more lines, please use a Members' All	lowances /	Additional S	heet				al Sheets U	sed	
PAY-M1 12.10.2007	All claims must be signed and au Payroll Share	thorised by I	Members' Ser	vices before	e payment car orn House, F	n be made, and on BL1 1JW	should be	sent to	-	

Members' Allowances Claim



Name Council	lor Cliff Morris Home Address	s E					Pay		
Car Make/Mod	lel VW Golf Registration	9		Exact CC	3000	<u>,</u>	Month	March	20 08
(b) (For Car Allow regard to the us (c) (For Car Allow other payments) other payments	ance claims only) I have actually and necessarily incurred the mileage ance claims only) I am the holder of a full, current and valid driving lice e of my car on Council business. ance claims only) I will retain VAT receipts covering all journeys for six and necessarily incurred expenditure in travelling and subsistence for the shown on this form, and that all amounts claimed are strictly in accordan, I have not made, and will not make, any claim under any enactment for	years in order to the purpose of endance with the rate or travelling or su	o comply with habling me to pe es determined labsistence expe	HMRC regulation rform duties as by Bolton Coun nses	ons. a Member of Boltor	Council,	I have actually paid the	ne fares JSE (and made
	or financial loss allowance or attendance allowance in connection with the inserted on this form are correct, and I understand that fraudulent claims	he duties indical	ea on this torm.	Cub.	Subsistence T		Total Miles	Total Miles	
Signed Member Date				Sub	Subsistence NT			ayrol	l Use Only
I certify that I have e	xamined this allowance sheet, the figures recorded are reasonable, and	the expense w	as necessary.	Expenses NT		Input by		·	
Authorised	nbers' Services Date			Care	er's Allowance	's Allowance		Date	
Date	Reason for Journey (including From and To)	Tim Departure	e of Return	Miles Claimed	Subsister Allowand	e O	Fares and ther Expenses	Care	Dependent ers Allowance
28-Mar-2008	AGMA Council and Executive (Rochdale Town Hall)	9:30	2:00	30	£	р£	р	£	р
28-Mar-2008	M.P. Meeting (Manchester CIS Building	4:00	5:30	13	£	p £		£	р
					£	p £	р	£	р
					£	p £	р	£	р
	·				£	р£	р	£	р
					£	p £	р	£	р
					£	р£	р	£	р
	[DOITON COUNCI	V			£	р£	, b	£	р
	- I BULLUR CUSINO			,	£	р£	р	£	р
	Grave state of o				£	р£	р	£	р
	20 MAY DAIR				£	p £	р	£	р
	PAYNUL STANED				£	p £	р	£	р
	SERVIE CENTRE			Total Mile	s Total Amo		Total Amount		otal Amount
Please only enter the number of miles. Do not calculate an amount for payment.					£	рĘ	р	£	р
	more lines, please use a Members' Allowances All claims must be signed and authorised by Payroll Share Service Ce	Additional Members' Se	Sheet rvices before	e payment ca orn House, I	an be made, and	should	tional Sheets U be sent to	sed	gc m

MURRAY

BOLTON METROPOLITAN BOROUGH COUNCIL

MEMBERS ALLOWANCES CLAIM

Claim for Month of	94	2007	Name of Member NADELINE MURRAY Pay No. (Block capitals please)
Car (Make/Model) V.W.	Polo	-	Registration No. Exact Cubic Capacity 1.2 cc.
Home Address 224, Le	EE LANE,	HORWICH BLb	75f
DECLARATION: (a) I declare that I have actually Metropolitan Borough Counther rates determined by Bolt	icil; that I have actual	ly paid the fares and made other p	d 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 expenses or allowances, or f	inserted on this form inancial loss allowand	are correct. Except as shown, I have or attendance allowance in cons	nave not made, and will not make, any claim under any enactment for travelling or subsistence under the duties indicated on this form.
(b) I am the holder of a curre	ent driving licence a	nd have adequate insurance o	cover for the use of my vehicle on Council business. (For Car Allowance claimants only)
Signed		MEMBER	Date 29.06.07
Approved			Date
		FOR OFFICIAL USE	ONLY (Completed by Committee & Members Services)
	Amount	1	Miles
	£ : p		1/iQ-
* 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.





- Age 1	Particulars of Journeys	Tim		Mode of	Miles	Dependent Allowa		Fares and Expen		Subsistence Allowance		
Date	Description of Approved Duties; including Locations (From & To)	Departure	e or Return	Travel	Claimed	£ p		£ p		£		
9.5.07	TRAINING HORWICH tO BOLTON			CAR	12		ļ				ـــــ	
4.	INDUCTION (DIRECTORS) HORWICH - BOLTON			''	12		<u> </u>				<u> </u>	
15	tr III	·		<u>''</u>	12		<u> </u>				1	
16	COUNCIL AGM + MAYORAL IN. " "			11	12						<u> </u>	
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				l	48	,						

Deduct any amounts received by way of Travelling & Subsistence from any other Authorities or bodie on the above dates and give particulars

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

BOLTON METROPOLITAN BOROUGH COUNCIL

MEMBERS ALLOWANCES CLAIM

							·
Claim for Month of	NE 2	0.7	Name of Member (Block capitals please)	MADELINE	murra y	Pay No	
Car (Make / Model) V. W	. POLO	•	Registration No.		Exact Cubic Capac	ity <u>1 · 2</u> cc.	-
Home Address 224,1	-ee lane	HORWICH, B	1726				
DECLARATION: (a) I declare that I have actually Metropolitan Borough Countherrates determined by Bolt	icil; that I have actually p	aid the fares and made other	d subsistence for the purpo payments shown on this fo	se of enabling me to perform; and that the amounts of	m duties as a Member o	of the Bolton cordance with	
I declare that the particulars expenses or allowances, or fi	inserted on this form are inancial loss allowance o	correct. Except as shown, I h attendance allowance in con	ave not made, and will not mection with the duties ind	make, any claim under an icated on this form.	y enactment for travellir	ng or subsistence	
(b) I am the holder of a curre	ent driving licence and	have adequate insurance	cover for the use of my v			llowance claimants only)	
Signed		MEMBER		Date_ 29.06	07		
Approved				Date			
		FOR OFFICIAL USE	ONLY (Completed by	Committee & Members Sei	vices)		•
.* 	Amount £:p		Miles		,		
* Subsistence Allowance	:	Normal Mileage	147	Details in	put onto Payroll syst	em:	
Subsistence Allowance (Taxable)	:			Ву:	cm		
Travel Reimbursement	l : l	•					

3.7.07

Date:

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 of	Miles	Dependent Allowa		Fares and other Expenses		Subsistence Allowance	
Date	Description of Approved Duties, including Locations (From & To)	Departure	e of Return	Travel	Claimed	£	P	£	Р	£	P
5: 0b:07	STANDARDS TRAINING HORWICH - BOUTON	, .		CAR	12		ļ				—
-7th	EXTERNAL ORGS. SCRUTINY " 1			p 5	12						-
	PERSONAL DEV. HORWICH-CASTLEHLL-BOGTON			1/	/3_		<u> </u>				
31	SITEVISIT (K. DOWD+ W. WARING) HORWICH -MAN. RC			п	14						<u> </u>
3.0M	SOUTH AREA FORUM HORWICH - PIKES WANG			CI	12						ــــــــــــــــــــــــــــــــــــــ
20 21	HEALTH SCRUT, + CHLDS, YMG PER, SCRUT, HORW-BO	J	•	17	12						╙
-IL	HEALTH SCRUT + SCRUTTRAINING HOR-BOL.			()	12		<u> </u>				<u> </u>
26 th	ADULT SERVICES SCRUTINY HOR- BOUTON	•	-	a	12						ــــــ
20 18th	MEETING T. WATTS (RETOWN C. TRUEGO) HOR-BOL			ti	12						-
20	MEET 1100 1. WHITS THE TOUR C. TIMETER						<u> </u>	<u> </u>			<u> </u>
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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.

0140

BOLTON METROPOLITAN BOROUGH COUNCIL

MEMBERS ALLOWANCES CLAIM

Claim for Month of	IIM .	20 0 7	Name of Member <u>M</u> .	MURRAY	Pay No.
Claim for Within or			(Block capitals please)		
Car (Make/Model) VOU	W POCO		Registration No.	Exact	Cubic Capacitycc.
Home Address 224,	LEELAN	E , HORWICH	BL6 73 F	· .	
the rates determined by Bolt I declare that the particulars expenses or allowances, or fi	cil; that I have actuall on Metropolitan Boro inserted on this form inancial loss allowanc	y paid the fares and made other p ugh Council. are correct. Except as shown, I ha e or attendance allowance in con	payments shown on this form; ave not made, and will not mal nection with the duties indicate	and that the amounts claimed are ke, any claim under any enactme ed on this form.	strictly in accordance with
(b) I am the holder of a curre	nt driving licence a	na nave adequate insurance o			(10) Cas 21stoches Carlinates Clary,
Signed		MEMBER		Date 29.8.07	
Approved			•	Date	month 6 SC.
		FOR OFFICIAL USE	ONLY (Completed by Com	mittee & Members Services)	-
•	Amount		Míles		
•	£:p		1270	•	
* Subsistence Allowance	:	Normal Mileage	179	Details input onto	Payroll system:
Subsistence Allowance (Taxable)	:			By: S. Censon	n
Travel Reimbursement (e.g. Car Park, taxis)	:	·		Date: 186 Sept	e monton 6
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	Carers	Fares and	i other	Subsiste	ence
including Locations (From & To) Departure Return Travel Claimed & P & P & P & P & P & P & P & P & P &	Date	Description of Approved Dugardan Company	Tim	e of	of		Allowa	nce	Exper	ıses	Allowa	nce
12 12 12 12 12 12 12 12 12 12 12 12 12 1		" " " " " " " " " " " " " " " " " " "	Departure	Return	Travel	Claimed	£	P	£	P	£	F
12 12 12 12 12 12 12 12 12 12 12 12 12 1	3-7- 07										·_/_	1
11.7.07 Flamming & Highways (ap L. Thomas) 12.7.07 Plamming & Highways (ap L. Thomas) 12.7.07 Enformation religibles Training 6.07.07 Opendary Summy Side Resordents 11.107 Statesfield Residente (Carrington dr) 12.10.07 Statesfield Residente (Carrington dr) 12.10.07 B.C. MASS (coarte Hill) 12.10.7.07 P.C. Training (coarte Hill) 12.10.7.07 P.C. Training (coarte Hill) 12.10.7.07 Peath Oransen & Sconting 13.7.07 Piake assessment Training 14.7.07 Health Oransen & Sconting 15.1.1 Meeting Carring (Meeting Phica refficers) 12.10.7.07 Planming Carring Hall	8-7-07	Informal Council				12						<u> </u>
3.7.07 Instruction + Rights Training 105.07.07 Openday Sumy side Residents 11	11.7.07					12					· · · · · · · · · · · · · · · · · · ·	<u> </u>
13.7.07 Enjormation Alghis Traming 15.07.07 Enday Sunny Side Residents 11 11 11.07 Statesfield Residents (Carrington dr) 12 13.7.07 B.C. MAS (coarte Hill) 12 13.7.07 P.C. Training (coarte Hill) 12 13.7.07 Pick assissment Francing 13 14.7.07 Health Overnew & scruting 15.7.07 Health Overnew & scruting 15.7.07 Meeting flancaster Class with River tofficers 12 15.7.07 Planning theirsenge 16.7.07 Problitation Event (Fewering) Hall) 12	12-7-07	Planning + Highways (dep L. Thomas)						<u> </u>				╄
15.07.07 Community panel (Statespield residents) 17.1.07 Statespield Residents (Carrington dr) 18.7.07 B.C. MAS (coakle Hill) 19.7.07 P.C. Training (coakle Hill) 12.12 13.7.07 Pick assissment Training 17.12 18.7.07 Health Overniew & scruting 18.7.07 Health Overniew & scruting 18.7.07 Health Overniew & Scruting 18.7.07 Meeting & Lancaster Clock with Prince Tofficers 12.12 13.7.07 Produtition Event (Feedrical Hall) 12.12		1 · · · · · · · · · · · · · · · · · · ·				12						┡
7-7-07 Staterfied Residente (Carrington dr) 12 18.7.07 B.C. MAS (coarle Hill) 19.7.07 P.C. Training (coarle Hill) 12 13.7.07 Pick assissment Francing 14.7.07 Health Overnew & scruting 15.7.07 Meeting flancaster (locu with Price tofficers) 15.7.07 Planning the inserts 16.7.07 Planning the inserts 12 13 15.7.07 Prophitution Event (Festival Hall)	15-07-57	Openday Sumy Side Residents									····	╀
7-1.07 Statesfied Residente (Carrington dr) 18.7.07 B.C. MAS (coarle Hill) 19.7.07 P.C. Training (coarle Hill) 12 13.7.07 Piak assissment Training 12 14.7.67 Health Overnew & scruting 15.1.1 Meeting & Lancaster Cloth with Prince + Officers 16.7.07 Planning + Highway 17 18.7.07 Produktion Event (Festival Hall) 19.7.07 Produktion Event (Festival Hall)	16.7.69	Community panel (Staterfield residents)				12		1				ऻ_
18.7.07 B.C. Mys.S (coarle Hill) 19.7.07 P.C. Training (marke Hill) 12. 13.7.07 Piak assisament Francisco 12. 14.7.07 Health Overnien & scruting 15.7.1 Meeting & Lancaster Clock with Police + Officers 12. 13.7.07 Prophitution Event (Fewerical Hall) 12. 13.7.07 Prophitution Event (Fewerical Hall)	11.7.07	statogical Residente (Carrington dr)										⊢
3.7.67 Piake assument Francing 4.7.67 Health Overnew & scruting 12 25.7.1 Meeting & lancaster Clack with Prince + Officers 12 26.7.07 Prophitution Event (Festival Hall) 12												<u> </u>
4.7.67 Health Overnew & scruting 12 15.7.07 Meeting flamcoster Clock with Police Tofficers 12 16.7.07 Prostitution Event (Festival Hall) 17 18	19.7.07	P.C. Training (cookle Hill)			'			-				l-
26-7.07 Produtation Event (Festival Hall)	13.7.67	Piak assissment Training				12						⊢
26-7.07 Produtation Event (Festival Hall)	4.7.07	Health Ovennew + screeting										├-
26-7.07 Produtation Event (Festival Hall)	<u> </u>	Meeting of Cancaster Clock with Police + Officers										⊢
50. (10) Trademickan Event (Festival Hour)												
	30.7.07	Prophitution Event (Festival Hall)				12						-
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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.

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BOLTON METROPOLITAN BOROUGH COUNCIL

MEMBERS ALLOWANCES CLAIM

Claim for Month of Ave	,७६४	20 6 7	Name of Member _ (Block capitals please)	MINURRAY	Pay No.
Car (Make/Model) V\W	POLO		Registration No.	Exact Cu	bic Capacity 1.2 cc.
Home Address 224, 1	LEELANE	HORWICH	BL67JF		
Metropolitan Borough Counthe rates determined by Bolt I declare that the particulars	cil; that I have actually on Metropolitan Boro inserted on this form	y paid the fares and made other ugh Council.	payments shown on this for nave not made, and will no	ose of enabling me to perform duties as a orm; and that the amounts claimed are st t make, any claim under any enactment f dicated on this form.	rictly in accordance with
(b) I am the holder of a curre	nt driving licence a	nd have adequate insurance	cover for the use of my	vehicle on Council business.	(For Car Allowance claimants only)
Signed		MEMBER		Date 29.8.6)	
Approved					
	•	FOR OFFICIAL USE	ONLY (Completed by	Committee & Members Services)	·
·	Amount		Miles		
	£:p		175		
* Subsistence Allowance	:	Normal Mileage	100	Details input onto Pa	yroll system:
Subsistence Allowance (Taxable)	:	•		By: &- Cowo	
Travel Reimbursement (e.g. Car Park, taxis)	:			Date: \ Sepic (nonth 6.
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	Dependen	t Carers	Fares and other		Subsistence	
Date	Description of Approved Duties	Tim	e of	of		Allowa		Exper		Allowar	
	including Locations (From & To)	Departure	Return	Travel	Claimed	£	P	£	P	£	<u>р</u>
2.00.07	GT Lever Readers Neighborhood Board				13		-				₩
1.Aug	Staterfield Residents				12	-	-				-
3m	cueds PD.9				2		-				╂-
7ês	Liceising (pep cere write)		·		12		1		<u> </u>		<u> </u>
(Ly ³⁴⁾	Adult Senices Seruting	<u></u>			12		<u>.</u>				-
15	Performance Nanagament Training				12		<u> </u>				_
16%	Performance Nanagament Training Weds Sensies, Ing Reple + Sport Scruding		·		12		 				<u> </u>
2026	Explainer Pamb (Valley)				14						<u> </u>
اللاهد	Corporate Tesus Sentiny				12		-				-
2/1 3/	Brefing (B)Burch) + Paul Conneil	-			12		—				_
29 m	Breting (B)Burch) + Parl Connere				12	·					L
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	amounts received by way of Travelling & Subsistence from any other Auth				135	•					

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.

BOLTON METROPOLITAN BOROUGH COUNCIL

MEMBERS ALLOWANCES CLAIM

Claim for Month of 56	PTEMBER	20 0 7	Name of Member (Block capitals please)		Pay No.	
Car (Make/Model) VW	POLO:		Registration No.	Exac	t Cubic Capacity 1'2 cc	
Home Address 224, C	EE LANE,	HORWICH , BLG -	rJf			. *
the rates determined by Bolto	ril; that I have actuall on Metropolitan Boro	y paid the fares and made other p ugh Council.	ayments shown on this for	m; and that the amounts claimed a	are strictly in accordance with	
I declare that the particulars i expenses or allowances, or fir	inserted on this form nancial loss allowanc	are correct. Except as shown, I ha e or attendance allowance in conr	we not made, and will not i nection with the duties indi	make, any claim under any enactri cated on this form.	ent for travelling or subsistence	
(b) I am the holder of a currer Signed Approved	nt driving licence a	nd have adequate insurance c	over for the use of my v	Pate 31/10/2007	(For Car Allowance claimants or	ily)
		FOR OFFICIAL USE O	ONLY (Completed by C	ommittee & Members Services)		
· · · · · · · · · · · · · · · · · · ·	Amount	1	Miles	1		
	£:p					•
* Subsistence Allowance	:	Normal Mileage	158-	Details input ont	to Payroll system:	
Subsistence Allowance (Taxable)		, , , , , , , , , , , , , , , , , , ,	+159 317	By: Cm		
Travel Reimbursement (e.g. Car Park, taxis)	:			Date: 2.11.0	ກ	
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	Dependen		Fares and		Subsister	
Date	Description of Approved Duties,	· ·	e of	of Travel	Claimed	Allowa £	unce P	Expen £	ses p	Allowar £	nce P
	including Locations (From & To)	Departure	Return				<u> </u>		<u> </u>		<u> </u>
Ļ ⁴ Κ	HORNICH-T.HALL INSPECTOR (WELL SPRINGS)	9,00	il· 30	COR	12		 	<u> </u>			├
4th	" - HIGHST LIBEARY (GT. LEVER LOMM. FORUM)	4.00	6.00		10		<u> </u>				
5 ^{TL}	" - FARNWORTH (SOUTH AREA FORUM)				į l		<u> </u>		<u> </u>		<u> </u>
11#	" - T. HALL CLICENSING + ENVIRONMENT/DEP.)				12		<u> </u>				<u> </u>
124	H - AREA HOUSING OFFICE/IAN PLATT.	10.00	11.30.		17 .		<u> </u>				
12"	" - STLEWER - SUNNY SIDE RESIDENTS (189, PAULHAMST	7.00	8.30		14		<u> </u>				
13"	" - T. HALL (EXT. ORY, SCRUTINY COMM)	1			1.2		ļ				<u> </u>
14-1	11 - 11 (LORPORATE ASSESS. FEEDBACK.				12						<u> </u>
,7 H	" J.A.RFEEDBACK (LECTURE THELATRE)			·	12						<u> </u>
19TL	" + HEALTH, OVERVIEW & SCRUTINT	9.00	12.30		12		Second Second				<u> </u>
1914	BOUTSH - SHARPLES , B.E.M.A.S	12.45	3100		6		ļ		•		
20 ^{.tt}	HORWICH-BOLTON (PCLANNING & HIGHWAYS)				12					· ·	<u> </u>
24th	" - VALLEY (FOSTERING PANEL)				13						
26"	" - T. HALL (INTERVIEW FOR CHARTER	1[-00	12,30		12_						
26#-	SAFER [CLEARER (HOLMESONOODRU)	1:30	4.15.		3 _						<u> </u>
											<u> </u>
										· .	<u></u>
<u></u>											
	amounts received by way of Travelling & Subsistence from any other Autho				158						

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.

BOLTON METROPOLITAN BOROUGH COUNCIL

MEMBERS ALLOWANCES CLAIM

Claim for Month of OCT Car (Make/Model)		<u>20 0 7</u>	Name of Member	M. MURRAY Ex	Pay Nocc.
Home Address 22(4)(DECLARATION: (a) I declare that I have actually a Metropolitan Borough Counce the rates determined by Bolto	and necessarily incurre	ed expenditure in travelling a paid the fares and made othe	and subsistence for the purpo	se of enabling me to perform dut rm; and that the amounts claime	ties as a Member of the Bolton d are strictly in accordance with
I declare that the particulars is expenses or allowances, or fir b) I am the holder of a current signed	nancial loss allowance	or attendance allowance in c	onnection with the duties ind	icated on this form.	tment for travelling or subsistence (For Car Allowance claimants only)
Approved		FOR OFFICIAL US	E ONLY (Completed by (Committee & Members Services	<u> </u>
	Amount £:p		Miles SC		
* Subsistence Allowance Subsistence Allowance (Taxable)	:	Normal Mileage		Details input o	nto Payroll system:
Travel Reimbursement (e.g. Car Park, taxis) Dependent Carer's	:			Date:	

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.

<u>Please note that all Personal Details must be shown above and the form must be both signed and authorised.</u>

If any details are missing, the form will be returned and payment therefore delayed.

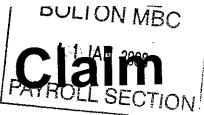
Allowance

CALIFORNIA CONTRACTOR	Particulars of Journeys			Mode	Miles	Dependen		Fares and		Subsiste	
Date	Description of Approved Duties including Locations (From & To)	Tim Departure	e of Return	of Travel	Claimed	Allowance £ p		Expen £	ses P	Aliowai £	ince F
3 nd	HORWICH-THALL LIAC SCRUTINY PANEL		·	CAR	i 2		 				-
11 th	MA. " - " MID.M. S. AREA FORUM				12		-			 	lacksquare
5 th	11 - LEONARD ST SURESTHET (CAMINEETING)		<u></u>		14		<u> </u>				+
g #-	" -T. HALL. (K. DAVIES BRIEFING STANLEYST CAMPUS)				12		<u> </u>			-	┼-
9 12	" " (LICENSING COMM - DEPFOR CLLRWHITE)+				15		<u> </u>				-
912	(ADULT SERVICES SCRUTINY)		-		4		<u> </u>				╬-
10 11	11 " SCHOOL ORGANISATION COMM:				12		<u> </u>				-
11 12	11 - SCHOLEY ST (POLICE OPERATIONS)	9,30	1.00.		(2		ļ				╄
11 th	11- THALLCHERS SERVICES, YN PERS +SPORT SCRUT	4.00	7.30		12		and the second		**		╄-
1574	" " CORP, ISSUES SCRUTTINT COMM				1.5	#### #################################					╄
22nd	" - " THE WORKSHOP BREIGING	4.47			12		<u> </u>	-	-		╄
24+6	" II FULL COUNCIL + M.O.M. MEETING				12					,	┡
2914	" VALLET - FOSTERING PANEL				<u>. 13</u>		<u> </u>				
31 ⁵⁵	11 - THALL - MEMBER DEVELOPMENT FEEDBA	CR.			12		<u> </u>				<u> </u>
							-				-
-					· · · · · · · · · · · · · · · · · · ·		<u> </u>				<u> </u>
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							-				1
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											<u> </u>
	amounts received by way of Travelling & Subsistence from any other Autho				159						

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.

Members' Allowances Claim



Bolton Council

			004 LEE I	ANE HOE	SWICH				A Comment Same		, ,	No.	1		
Name M.MURF	U (1	Home Address	224, LEE		Evact	CC /	20	00 66		Mo	nth NC)VEM	BER	20 07	
Car Make/Mode	ei vv.i olo	Registration	التاريسيين												
certify that:- (a) (For Car Allowa (b) (For Car Allowa regard to the use (c) (For Car Allowa	nnce 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 ance claims only incurred expenditure in travelling a	ng all journeys for six and subsistence for the	years in order to	comply with Hi bling me to per	IMRC reg rform dut	gulations.	Meml		Counc	cil, I have	actually paid	the rare:	5 and 11)8
other payments:	I have not made, and will not make, any claim un	nder any enactment fo	or travelling or suc	od on this form.	1300	Subsis					Total Mile	∋s	H	B C	A
or allowances, o	nserted on this form are correct, and I understand t	that fraudulent claims	may result in dis	ciplinary action.				nce NT	_		For	ayro		e Only	
ر ا		Date 1,01,0	08			Exper			-	_	Input by	•	1	CM.	
I certify that I have ex	xamined this allowance sheet, the figures recorded	d are reasonable, and	the expense wa	s necessary.	'	-		llowance			Date		2	8.1.0	8
Authorised	33.	II)ate						Subsisten	Cal	Far	es and	T	Depe	ndent	
Deta	Reason for Journey		Time Departure	of Return	Mil Clai	nes med		Allowanc	:е	Other	Expense	s Ca	rers /	llowan	
Date	(including From and T SCRUTINY PANEL+GT.LEVER PAN	IEL IROSEHILLI		11010111		6	£	2	р	£		o £			p
l	SCRUTINY PANEL+G1.LEVER PAN L.A.C SCRUTINY				1	2	£	£	р	£		p £			<u>p</u>
5-Nov-2007		SLITINA			1	2	Į Įŧ	£	р	£		p £			р
6-Nov-2007	HEALTH OVERVIEW & SCF		 		 1	14	\	£	р	£		p £		<u></u>	p
7-Nov-2007	GT.LEVER MEETING[WIRRAL	TEXT CODIT			<u> </u>	14	!	£	р	£		p £			р
8-Nov-2007	C.A.M [GT.LEVER SURE SRART]		 		<u> </u>	11	}	£	р	£		p £			р
14-Nov-2007	SOUTH AREA FORU				J	11	⇃┝┉	<u></u> £	p	£		p £			р
15-Nov-2007	POLICE COMM. MEET!NG[H.	AYWARD]			<u> </u>	12	↓ 	<u>£</u>	p	£		p £			р
19-Nov-2007	SPEED RATING		<u> </u>		<u> </u>	12	— ا ا	£	p	£		p £			р
21-Nov-2007	VULN. ADULTS SCRUTINY					14	4 ├ ─	£	<u>р</u>	£		p £			p
22-Nov-2007	GT,LEVER NEIGHBORHOOD	[C.KELLY]				12	↓ ├─	£	<u>р.</u> р	£		p £			p
23-Nov-2007	DIRECTORS BRIEFING[K.I	DAVIES]		<u></u>		12	4 ⊢	£	р	 £		p £			p
26-Nov-2007	GT.LEVERHOUSING PA	NEL	1			13 I Miles		Total Amo		1	al Amount	<u></u>	Total	Amour	t
<u></u>	<u></u>		amount for	navment		153		£	р	£		p £			p
Please only	enter the number of miles. Do no	ot calculate an	amount for	Payment	<u> </u>					ditions	al Sheete	lleed		2	

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

PAY-M1 12.10.2007 All claims must be signed and authorised by Members' Services before payment can be made, and should be sent to

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 M.MUR	RAY			Pay No.		Month NOVE	MBER 20 00
Signed	Member Date		Authorise	d	Ŋ	Members' Services Date	
Date	Reason for Journey (including From and To)	Tim Departure	e of Return	Miles Claimed	Subsistence Allowance	Fares and Other Expenses	
27-Nov-2007	ADULT SERVICES SCRUTINY			12	£ p	£ b	£ p
28-Nov-2007	MTNG HOUSING MANAGER+ P.C. TRAINING			16	£ p	£ b	£ p
29-Nov-2007	CHILD ACTION MEETING[LEONARD ST SURE ST			14	£ p	£ p	£ p
30-Nov-2007				12	£ p	£ p	£ p
					£ p	£ p	£ p
			,		£ p	£ p	£ p
<u> </u>	tolog .				£ p	£ . p	£ p
					£ p	£ p	£ p
- <u>-</u>					£ p	£ p	£ p
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		4,000,000			£ p	£ p	£ p
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3					£ p	£ p	£ p
					£ p	£ p	£ p
<u> </u>				- 	£ p	£ p	£ p
.,,					£ p	£ p	£ p
					£ p	£ p	£ p
		<u> </u>	<u> </u>	 	£ p	£ p	£ p
			 	1	£ p	£ p	£ p
		<u>L</u>	1	Total Miles	Total Amount	Total Amount	Total Amount
Please only	y enter the number of miles. Do not calculate an	amount for	payment.	.54	£ p	£ p	£ p
				a naumant aan	he made, and she	ould be sent to	

PAY-M2 12.10.2007 All claims must be signed and authorised by Members' Services before payment can be made, and

12.10.2007

Members' Allowances Claim



		Home Address	224 I FF I	ANE HOE	WICH					Pay I	Vo.	
Name M.MURI			ZZT LLL.		Exact C	C 1	200		Mont	h DEC	EMB	R 20 00
Car Make/Mod		Registration 1										
regard to the use (c) (For Car Allowation (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 a shown on this form, and that all amounts claimed	ing all journeys for six	years in order to purpose of end	comply with babling me to pe	HMRC reguerform dutie	ılations. ıs as a M		Council	i, i have acti	ually paid the	e fares a	and made
(e) Except as showr	1, I have not made, and will not make, any claim of	- in connection with th	a duties indicate	ed on this form			tence T		To	tal Miles		101.
(f) The particulars i	or financial loss allowance or attendance allowance inserted on this form are correct, and I understand	mai naddulent olamo.	114, 155	<u> </u>	Subsistence NT					For Pa	or Payroll Use Onl	
Signed 🕌	Member 1		1 · 200		l 1		ses NT		In	put by	Ī	
	xamined this allowance sheet, the figures recorde	d are reasonable, and the expense was necessary. Date			1	•	Allowance		Da	ate		
Authorised J	Members' Services				Mile		Subsisten	ce i	Fares	and	D	ependent
Date	Reason for Journey (including From and I		Time Departure	Return	Claim		Allowanc	<u>e C</u>	Other Ex	penses	Care	rs Allowance
3-Dec-2007	CORPORATE ISSUES SCI	· · · · · · · · · · · · · · · · · · ·			12		£	p £		р	£	р
5-Dec-2007	L.A.C MEETING AT GIRL & LA	ADS CLUB	,		12		£	p £		р	£	Р
6-Dec-2007	BRIEFING ON MURDER[CHIEF	-& POLICE]			12		£	p £		p	£	р
11-Dec-2007	COMMISSION ST CONSUL				12		£	p f		р	£	p
12-Dec-2007	FULL COUNCIL				12	-	£	p £		р	£	р
15-Dec-2007	HIGH ST RESIDENTS				11		£	p £		р	£	p
17-Dec-2007	L.A.C. SCRUT+FOSTERING	PANEL			16		£		<u> </u>	р	£	. p
18-Dec-2007	XMAS CONCERTHAYWARD [SU	INNING HILL]			14		£		<u> </u>	р	£	p
				· 			£	р <u>ғ</u>		р	£	<u>p</u>
							£		<u>E</u>	р	£	<u>p</u>
							£		<u>E</u>	р	£	p :
					<u> </u>		£	F	£	pp	£	p otal Amount
					Total N		Total Amo		Total A £	mount p	£	p p
	enter the number of miles. Do no				101		£	•				
If you require	more lines, please use a Member	s' Allowances A	Additional	Sheet		at can l	Number of	Addi should	itional S d he sent	neets Us to	sea [
PAY-M1	All claims must be signed a	nd authorised by N har Service Ce	Members Ser	AICES DEIOL	e paymer <mark>orn Hous</mark>	se,	ton BL1 1JW	SHOUN	d De delit			

Members' Allowances Claim

12.10.2007



Name m.murr	ay Home Addres	s 224,lee la	ane,Horwic	h BL6 //JF∀		u	Pay	No.	
	del VW POLO Registration)	Exact CC		I	Month JA	NUAR	Y 20 00
(b) (For Car Allow regard to the use (c) (For Car Allow d) I have actually other payments (e) Except as show	vance claims only) I have actually and necessarily incurred the mileagy vance claims only) I am the holder of a full, current and valid driving like se of my car on Council business. vance claims only) I will retain VAT receipts covering all journeys for some claims only I will retain VAT receipts covering all journeys for some and necessarily incurred expenditure in travelling and subsistence for the solution on this form, and that all amounts claimed are strictly in according to the product of the solution of the solu	cence and MOT of ix years in order the purpose of endiance with the rate for travelling or su	certificate (whe to comply with abling me to pe tes determined absistence expe	re applicable), and HMRC regulations erform duties as a by Bolton Counci enses	d I have complied wi s. Member of Bolton C	h the Coun		e fares :	and made
(f) The particulars	or financial loss allowance or attendance allowance in connection with inserted on this form are correct, and I understand that fraudulent claim	the duties indicat s may result in di	ed on this form sciplinary action	n. Subsi	stence T		Total Miles		304
Signed	Member Date 2 9	02.0	S &	Subsi	stence NT		For Pa	yroll	Use Only
1	examined this allowance sheet, the figures recorded are reasonable, an	d the expense w	as necessary.	Expe	nses NT		Input by		CM .
Authorised .	Members' Services Date			Carer	's Allowance	·	Date		4.3.08
Date	Reason for Journey (including From and To)	Time Departure		Miles Claimed	Subsistenc Allowance		ares and er Expenses		ependent rs Allowance
10-Jan-2008	PLANNING&HIGHWAYS			12	£	£	р	£.	р
14-Jan-2008	L.A.C.SCRUTINY PANEL+VULN.ADULTS SCRUT			12	£	£	р	£	q
15-Jan-2008	HEALTHOVERVIEW&SCRUTINY			12	£.	£	р	£	р
16-Jan-2008	INFORMAL COUNCIL			12	£	£	р	£	р
17-Jan-2008	EXTERNAL ORGANISATION SCRUTINY			12 .	£	£	р	£	р
18-Jan-2008	DIRECTOR BRIEFING(K.DAVIES)			12	£ ļ	£	р	£	р
21-Jan-2008	CHLDRN SERVICES & SPORT P.D.G:			12	£	£	р	£	р
23-Jan-2008	SOUTH AREA FORUM			10	£	£	р	£	р
24-Jan-2008	C.A.M.(LEONARD ST CHLDNS CENTRE)			14	£ ļ	£	р	£	р
28-Jan-2008	FOSTERING PANEL(ENDEAVOR HOUSE)			14	£	£	р	£	р
29-Jan-2008	OSCI(CASTLE HILL)			16	£	£	р	£	р
					£	£	р	£	р
				Total Miles	Total Amour	it Tot	al Amount	То	tal Amount
Please only	enter the number of miles. Do not calculate an	amount for	payment.	138	£	£	р	£	р
If you require PAY-M1	more lines, please use a Members' Allowances All claims must be signed and authorised by I			payment can			al Sheets Us sent to	ed [0

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

Members' Allowances Claim Bolton Council



	RAY Home Address	2241FF1	ANE HOR	WICH BL6 7	JF			Pay I	lo.	
Name M.MURI					1.200		Мо	nth FEB	RUARY	∕ 20 0 ©
Car Make/Mod	el FORD FIESTA STYLE Registration									
regard to the use (c) (For Car Allowa (d) I have actually a	nce 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 only or or Council business. Ince claims only) I will retain VAT receipts covering all journeys for six and necessarily incurred expenditure in travelling and subsistence for the shown on this form, and that all amounts claimed are strictly in accordance.	years in order to order to order to or purpose of enab	comply with HM ling me to perf determined by	MRC regulations. form duties as a N Bolton Council.	lember of Bo	lton Council	l, I have ac		ires and m	nade
(e) Except as showi	1, I have not made, and will not make, any claim under any enaction with the	e duties indicated	on this form.	Cultori	stence T			Total Miles		
(f) The particulars i	nserted on this form are correct, and i understand that tradebient obtains		ciplinary action		stence N	┰ ├─		For Pa	vroll U	se Only
Signed	Member Date 29 C		nocecent/	1	ises NT			Input by	_	
	amined this allowance sheet, the figures recorded are reasonable, and	the expense was	necessary.	1 8 '	's Allowa	nce		Date		
Authorised J						stence	Far	es and	De	pendent
Date	Reason for Journey (including From and To)	Time Departure	e of <u>Return</u>	Miles Claimed	1	vance	Other	Expenses	Carers	Allowance
4-Feb-2008	DEVELOPMENT®EN PDG(DEP)			12	£	р	£	р	£	р
4-Feb-2008	CORPORATE ISSUES SCRUTINY			12	£	р	£	р	£	p
5-Feb-2008	ADULT SERVICES SCRUTINY			12	£	р	£	р	£	p
7-Feb-2008	PLANNING &HIGHWAYS			12	£	p -	£	р	£	<u>р</u>
12-Feb-2008	SITE VISIT PRESTON ST.(JOE FOX)			14	£	р	£	p	£	p
14-Feb-2008	GREAT LEVER BOARD			14	£	р	£	р	£	p
15-Feb-2008	SPECIAL CHILDREN&YOUNG PERSONS SCRUT			12	£	р	£	р	£	р
20-Feb-2008	COUNCIL(BUDGET)			12	£	р	£	p	£	p
21-Feb-2008	PLANNING &HIGHWAYS	'		12	£	р	£	ģ	£	p
25-Feb-2008	FOSTERING PANEL(ENDEAVERHSE)+TRAINING(CASTLEHILL)			18	£	р	£	<u>p</u>	£	p
27-Feb-2008	EDUC.ATTAINMENT(LAC)PANEL+COUNCIL+			24	£	p '	£	р	£	<u> </u>
28-Feb-2008	THE PARTY OF THE P			12	£	p Amount	£	p I Amount	£	p al Amount
			4	Total Miles	£	Amount	£	r Amount p	£	p
Please only	enter the number of miles. Do not calculate an	amount for I	payment.	166	J 1	p			<u> </u>	
	The second of th	Additional S	heet		Numb	er of Ad	ditional	I Sheets Us	ea	

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

PAY-M1 12.10.2007 All claims must be signed and cuthorised by Members' Services before payment cobe made, and should be sent to

Payroll Sha. A Service Centre, 5th Floor, Paderborn House, Luiton BL1 1JW

Members' Allowances Claim



		Home Address	2241661	ane.Horwid	h BL6	7JF			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Pay	Vo.	
lame madeline			5 ZZ-7,LCC L		Evact	CC 1	1498		N	onth N	larch	20 08
	Mercedes A 150 classic	Registration						- C-+ Allows	nces			
regard to the use (For Car Allowal) (For Car Allowal) I have actually ar other payments s	nce claims only) I have actually and necessarily nce claims only) I am the holder of a full, currently of my car on Council business. Ince claims only) I will retain VAT receipts covered necessarily incurred expenditure in travelling shown on this form, and that all amounts claimed I have not made, and will not make, any claim use the standard of	ing all journeys for six and subsistence for the lare strictly in according	years in order to be purpose of end ance with the rate	o comply with habiling me to per es determined to haistence exper	IMRC re rform du by Boltor nses	gulations ties as a n Council.	Member o	of Bolton Co	uncil, I ha	ve actually paid th SERVICES L Total Miles	e fares	and made
or allowances, or	, I have not made, and will not make, any claim u financial loss allowance or attendance allowand serted on this form are correct, and I understand	e in connection with t that fraudulent claims	he duties indicati may result in dis	ciplinary action			stence '	├ ─-			كنيسه	
		Data Za	05.0	Q)		Subsi	stence	NT _		 6	yroı	Use Only
Signed 📲	Membe amined this allowance sheet, the figures recorde	ed are reasonable, and	d the expense wa	as necessary.		Exper	ises N7			Input by		
Authorised		Nata				Carer	's Allow	ance		Date		
	Members' Service Reason for Journe	/ /	Time	e of Return		les med		sistence owance		ares and er Expenses	Car	Dependent ers Allowan
Date	(including From and		Departure	Return		2	£	р		р	£	
4-Mar-2008	health overview&scrut					2	£	p		р	£	
10-Mar-2008	extra ordinary counc					12	£	p		р	£	
11-Mar-2008	licensing &environme	nt			<u> </u>	16	£	<u>~</u> p		p	£	
12-Mar-2008	south area forum					12	£			р	£	
13-Mar-2008	external organisation sc		ļ		 	-	£			p	£	
26-Mar-2008	education attainment for LAC so	rutiny panel +	<u> </u>				├	<u>_</u>		<u> </u>	£	
	child action meeting(gt l	_ever)				16	£	<u> </u>		<u>р</u>	£	
31-Mar-2008	fostering panel(endeavor	house)				14	£	<u> </u>			£	
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lf voquiro	·	rs' Allowances	Additional	Sheet			Nun	nper of A	sautuo hould he	nai Onecta C		

All claims must be signed and authorised by Members' Services before payment

PAY-M1 12,10,2007 Payroll Sharer prvice Centre, 5th Floor, Paderborn House, Boon BL1 1JW

PEEL

BOLTON METROPOLITAN BOROUGH COUNCIL

MEMBERS ALLOWANCES CLAIM

		14111141	/210/1220///21/02	0 0212		•
Claim for Month of	APRIL IER (MPRESS	20 <u>07</u> 10N	Name of Member	NICK	PEEL Exact C	Pay No. Pay No. Cubic Capacity / 4 cc.
Home Address 45 DECLARATION:	BIRKDALE	GONS, BL3	565			
(a) I declare that I have actually	ncil; that I have actually	paid the fares and made other	d subsistence for the purpos payments shown on this for	e of enabling me m; and that the a	to perform duties as mounts claimed are	s a Member of the Bolton strictly in accordance with
I declare that the particulars expenses or allowances, or f	inserted on this form a financial loss allowance	re correct. Except as shown, I h or attendance allowance in cor	ave not made, and will not r mection with the duties indi	make, any claim i cated on this for:	ınder any enactmen n.	at for travelling or subsistence
(b) I am the holder of a curr	icence an	d have adequate insurance	cover for the use of my vo	ehicle on Coun	cil business.	(For Car Allowance claimants only)
Signed		MEMBER		Date 18	16/07	
Approved	<u>.</u>	•		Date		
		FOR OFFICIAL USE	ONLY (Completed by C	ommittee & Mer	nbers Services)	
	Amount		Miles			
* Subsistence Allowance Subsistence Allowance (Taxable) Travel Reimbursement	£:p 16 . 21 7 6 . 77 22 . 98	Normal Mileage	18-	В	Details input onto I	BOLTON MBC
(e.g. Car Park, taxis) Dependent Carer's					Date:	25 1111 227

Notes:

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 Journal of Journal of Journal of Journal of Journal of Journal of State of Sta			Mode	Miles	Dependen	t Carers	Fares an	d other	Subsis	
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	including Locations (From & To)	Departure	Return	Travel	Claimed	£	P	£	P i	£	1
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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.

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`.	, <u></u>	BOLTON I	METRO			Surname	PEEL		Initials		5 7		
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DECLARATION

(a) I declare that I have actually and necessarily incurred expenditure in travelling and subsistence for the purpose of enabling me to perform duties as a member of the Bolton Metropolitan Borough Council; that I have actually paid the fares and made other payments shown overleaf; and that the amounts claimed are strictly in accordance with the rates determined by Bolton Metropolitan Borough Council.

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 allowances, or financial loss allowance or attendance allowance in connection with the duties indicated overleaf.

(b) (For car allowance claimants only - delete if not applicable.)

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

14 Tu14

20 OZ

Signature of



NOTES

1. CONDITIONS AND METHOD OF CLAIM

- (a) Claims should be completed to the end of the calendar month and submitted to Committee and Members Services.
- (b) Notwithstanding (a) no claim can be paid where it is submitted more than two calendar months after the day of the specific duty has taken place.

Payment will be made by cheque/bank transfer credit each month.

2. TRAVELLING ALLOWANCES

- (i) Rate for travel by public service shall not exceed lowers available first class fare. Rail Travel Warrants, which are provided should be used whenever possible.
- (ii) The following rates apply for motor car or tri-car where cylinder capacity:
 - (a) not exceeding 999cc

32.5p a mile

(b) exceeding 999cc but not exceeding 1199cc

36.3p a mile

(c) exceeding 1199cc

44.8p a mile

i) Increase of 1.0p a mile of each passenger to whom travelling expenses would otherwise be
payable for a maximum of four.
 Rates for motor cycle travel are available on request. Mileage is to be calculated by reference

to the shortest practicable route unless use of a motorway results in substantial saving of time; details of which must be given.

SUBSISTENCE ALLOWANCES

3.

For an absence not involving an absence overnight from the usual place of residence of four hours:

(a) the whole of which is before 11.00 a.m. (Breakfast Allowance)

(b) which includes the whole of the period between 12 noon and 2.00 p.m.

(Lunch Allowance)

(c) which includes the whole of the period between 3.00 p.m. and 6.00 p.m.

(Tea Allowance)

(d) which extends beyond 7.00 p.m. (Evening Meal Allowance)

£2.59

All rates of Subsistence Allowance are to be reduced by the appropriate amount (see above) in respect of any meal provided free of charge by the Authority or other body during the period to which the allowance relates. (Where a tea is provided the sum of £2.59 should be deducted from any claim for Evening Meal Allowance).

The rate of absence overnight from the usual place of residence covering a continuous period of 24 hours is not to exceed the sum of £77.43 with the proviso that for an absence in London or attendance at Annual Conference of the LGA (or such other body approved by the Secretary of State) the rate may be increased by a supplementary allowance not exceeding £10.88. These rates shall be reduced by the amount shown in 3(a) above in respect of any meal provided free of charge by an authority or body during the period in which the allowance relates.

4. ATTENDANCE ALLOWANCE - GREATER MANCHESTER PASSENGER TRANSPORT AUTHORITY (GMPTA)

Standard rate of £32.50 per day.

					OFFICIA	L USE C	NLY			
Pa	y R	ef			Expend Code	Job Code	Pay Code	£	p	Class
			•	Attendance Allowance	434 46 30	15200	21			2
				Subsistence Allowance (Taxable)	434 46 31	15200	22			2
				Subsistence Allowance	434 46 31	15200	22			6
			,	Travel Reimbursement	434 46 31	15200	25			6
				Travel Allowance	434 46 31	15200	26			. 6
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BOLTON * MANCHESTER CTLZ Route ANY PERMITTED ON DATE SHOLN Validity

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BOLTON * MANCHESTER CTLZ ANY PERMITTED Valid until 02-APR-07 Route Disc Validity SEE RESTRICTNS Price £2·65M

Start Date 02.APR.07 0025e2599N53

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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 allowances, or financial loss allowance or attendance allowance in connection with the duties indicated overleaf.

(b) (For car allowance claimants only - delete if not applicable.)

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

18 June

20 07

Signature of Member



NOTES

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 - (a) not exceeding 999cc

32.5p a mile

(b) exceeding 999cc but not exceeding 1199cc

36.3p a mile

(c) exceeding 1199cc

44.8p a mile

Increase of 1.0p a mile of each passenger to whom travelling expenses would otherwise to payable for a maximum of four.

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SUBSISTENCE ALLOWANCES

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(a) the whole of which is before 11.00 a.m. (Breakfast Allowance)
(b) which includes the whole of the period between 12 noon and 2.00 p.m.

(Lunch Allowance)
(c) which includes the whole of the period between 3.00 p.m. and 6.00 p.m.

(c) which includes the whole of the period between 3.00 p.m. and 6.00 p.m. (Tea Allowance)

(d) which extends beyond 7.00 p.m. (Evening Meal Allowance) £8.13

£6.57

£2.59

All rates of Subsistence Allowance are to be reduced by the appropriate amount (see above) in respe of any meal provided free of charge by the Authority or other body during the period to which the allowance relates. (Where a tea is provided the sum of £2.59 should be deducted from any claim for Evening Meal Allowance).

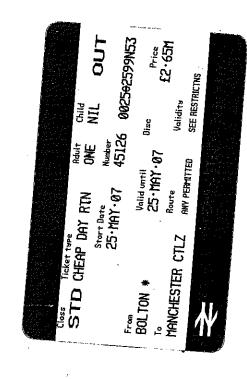
The rate of absence overnight from the usual place of residence covering a continuous period of 2 hours is not to exceed the sum of £77.43 with the proviso that for an absence in London or attendanc at Annual Conference of the LGA (or such other body approved by the Secretary of State) the rai may be increased by a supplementary allowance not exceeding £10.88. These rates shall be reduce by the amount shown in 3(a) above in respect of any meal provided free of charge by an authority cody during the period in which the allowance relates.

4. ATTENDANCE ALLOWANCE - GREATER MANCHESTER PASSENGER TRANSPORT AUTHORITY (GMPTA)

Standard rate of £32.50 per day.

FOR OFFICIAL USE ONLY

]	Pay R	ef		Expend Code	Job Code	Pay Code	£ . p	, Class
			Attendance Allowance	434 46 30	15200	21		2
			Subsistence Allowance (Taxable)	434 46 31	15200	22		2
			Subsistence Allowance	434 46 31	15200	22		6
	1		Travel Reimbursement	434 46 31	15200	25		6
			Travel Allowance	434 46 31	15200	26		, 6
			-					



BOLTON METROPOLITAN BOROUGH COUNCIL

MEMBERS ALLOWANCES CLAIM

Claim for Month of			(Block capitals please) Registration No.	NICK PEEL Exact Cu	Pay No
Home Address DECLARATION: (a) I declare that I have actuall Metropolitan Borough Cou the rates determined by Bo	y and necessarily incurnicil; that I have actually lton Metropolitan Borou	red expenditure in travellir paid the fares and made cards Council.	ng and subsistence for the purp ther payments shown on this f	ose of enabling me to perform duties as a form; and that the amounts claimed are st	rictly in accordance with
expenses or allowances, or igned approved	financial loss allowance	e or attendance allowance in and have adequate insura MEMBER	n connection with the duties in	vehicle on Council business. Date	(For Car Allowance claimants only)
	•	FOR OFFICIAL U	SE ONLY (Completed by	Committee & Members Services)	
* Subsistence Allowance Subsistence Allowance	Amount £:p::	Normal Mileag	e Miles	Details input onto Pa By:	yroll 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.



	Particulars o			Mode	Miles	Dependen	t Carers	Fares and	d other	Subsist	
Date	Description of Approved Dute.	ŧ	e of	of		Allow		Exper		Allow	
	including Locations (From & To)	Departure	Return	Travel	Claimed	£	P	£	<u>p</u>	£	P
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14/5	EXEC BRIEF "	10.00	12-00	1 (2		<u> </u>		<u> </u>		
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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.

and for Reimbursement of PPI Bolton Jubsistence & Travelling Expenses Council

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	performing	an official duty,	and Lacknowled	nditure, relating to ge receipt of the a	the above me	e claim, in ntioned su	the course m.	of
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CE-C5 2/02/2007	Payro	The complete	ed form must be sig ellence, 5 th Floor, l	ned, and should be Paderborn House,	sent to	C L1 1JW	M 1.8.07	

MHLS



CIT Nork Peel Mr Cliff Morris 45 Birkdale Gardens Bolton, BL3 5ES

Room No.

: 441

Arrival

: 03.07.07

Departure : 05.07.07

Cashier

: 11/AR

Page

INVOICE NO. 56-376429/1

Copthorne Birmingham, 05.07.07 10:25

Date	Description		D-1-11	
			Debit	Credit
03.07.	Room & Breakfast			
04.07.	Cafe Bar		105.00	
04.07.	Room & Breakfast		12.90	
05.07.	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX		105.00	•
	**************************************	XX/XX		222.90

Amount Due £0.00

VAT Breakdown

Net at 17.5%	£	189.70	
Net at 0.0%	£	0.00	
Total Amount Net	£	189.70	0605
VAT 17.5%	£	33.20	
TOTAL BILL STERLING		222.90	
TOTAL BILL EURO		370.20	

GRAND BILL Amount Due

222.90

£ 0.00

We trust your stay has been enjoyable and look forward to your return.
"Log onto www.millennium.otels.co.uk to get your Best Rate Guarantee."

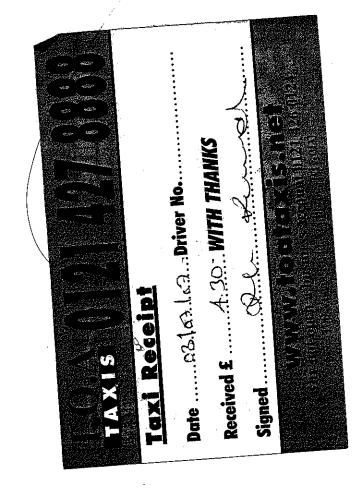
COPTHORNE BIRMINGHAM HOTEL

Paradise Circus, Birmingham B3 3HJ, England * T 0121 200 2727 * F 0121 200 1197

Registered Office: Copthorne Hotel (Birmingham) Limited, Victoria House, Victoria Road, Horley, Surrey RH6 7AF.

Registered Number: 1816493 England and Wales. VAT Registration Number: GB 644 6995 88

www.millenniumhotels.com



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Members' Allowances Claim

Marine property of the second		
B	olt	on
C	owi	acil

Name	NICK	PEEL	Home Addres	s 45	BIR	SOALE (DONS		BUSFU	ŢÆ.				
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(b) (For Car Allow regard to the u (c) (For Car Allow other payments of Except as shown in the case of	vance claims only se of my car on Co vance claims only and necessarily in s shown on this for yo. I have not mad	 r) I will retain VAT receipts cove curred expenditure in travelling m, and that all amounts claimed le, and will not make, any claim 	nt and valid driving lic ring all journeys for six and subsistence for th I are strictly in accorda under any enactment	ence and I cyears in ce e purpose ance with the for travellir	MOT ce order to of enab he rates ng or su	rtificate (where comply with Haling me to per determined b bsistence exp	e applicable), IMRC regulati form duties as ov Bolton Cou	ions. is a Me	nave complied ember of Bolton	With th	cil, I have a		fares a	nd made
or allowances, (f) The particulars	or financial loss al inserted on this to	lowance or attendance allowand rm are correct, and I understand	e in connection with the that fraudulent claim	ne duties ir s may rest	ndicated ult in dis	on this form. sciplinary actio	_{n.} Su	ıbsist	tence T			Total Miles	3	13
Signed	A	Membe	Date 3/12	107	7		Su	ıbsist	tence NT	13	· 42.	1	ayrol	Use Only
certify that I have e	xamined this allow	vance sheet, the figures recorde		the expen	se was	necessary.	Ex	pens	ses NT	Ś		Input by		
Authorised		embers' Service	Date				Са	arer's	Allowance			Date		
Date		Reason for Journe (including From and		Depar	Time ture	of Return	Miles Claime		Subsiste Allowar	ce		es and Expenses		Dependent ers Allowance
3/8	STAR CHAMBER	PENV EXEC/EXEC BRI	EF/EXEC/SPA	8.0		4.00	2		£ 67		£.	p	£	р
20/9	SITE VIS	175+ PLANNING		9.00	2	5.00	2		£ 6-70	^{>} р	£	p	£	р
24/9	EXEC .	BRIEF		10.0	0	12.00	2_		£.	р	£	р	£	p
25/9	ENV EXE	TC + BRIEF		1-30	2	4.30	2		£	р	£	р	£	р
26/9	N.C.P	(TONGE VC)	<i>4~</i>)	12.4	۷ ـ ـ ـ	330	5		£	р	£	р	£	р
,									£	р	£	р	£	р
			•						£	р	£	р	£	р
						•			£	р	£	p	£	р
								.]	£	р	£	. р	£	р
									£	р	£	р	£	р
	·								£	р	£	р	£	р
									£	р	£	р	£	р
			-	-			Total Mile	es	Total Amo	ount		Amount		otal Amount
Please only	enter the nu	mber of miles. Do no	t calculate an a	mount	for p	ayment.	13		£	р	£	р	£	_ p
If you require PAY-M1 12.10.2007	more lines, p	please use a Members Il claims must be signed a Payroll S	s' Allowances A nd authorised by i harr Service Ce	Members	s' Serv	ices before			e made, and	shou		Sheets Us nt to	ed	

month 9 SC.

Members' Allowances Claim Bolton Council

					LDAVDO	() E E E E E E E E E E E E E E E E E E	Y	LLLLUL.
Name	MICK PEEL Home Addre	ss 45 B	IRKOALE	GONS	B13	"SES	Pay	No.
Car Make/Mo	del ROVER IMPRESSION Registration			Exact CC	1.4	IM	onth OCT	
regard to the u (c) (For Car Allon (d) I have actually other payment (e) Except as sho or allowances	wance claims only) I have actually and necessarily incurred the mileaguence claims only) I am the holder of a full, current and valid driving lifuse of my car on Council business. wance claims only) I will retain VAT receipts covering all journeys for serving and necessarily incurred expenditure in travelling and subsistence for the 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 or financial loss allowance or attendance allowance in connection with a light of the strength on this form are corrected.	ix years in order the purpose of er lance with the ra for travelling or	to comply with habling me to pe tes determined subsistence exp	e Council's scheme applicable), and HMRC regulations form duties as a low Bolton Council.	I have complied with	ances. the Council's	s insurance requir	rements with
ij ino paraodiare	s inserted on this form are correct, and I understand that fraudulent claim	ns may result in	ted on this form, disciplinary action	_{on.} Subsi	stence T		Total Miles	27.
Signed	Member Date 3/	12/07	7	Subsi	stence NT	26.88.	For Pa	yroll Use Only
certify that I have a	xamined this allowance sheet, the figures recorded are reasonable, and	the expense w	as necessary.	Exper	nses NT		Input by	,
Authorised	Members' Services Date			Carer	's Allowance		Date	
Date	Reason for Journey		ne of	Miles	Subsistence	∍ Far	res and	Dependent
1/10	(including From and To) EXEC BRIEF + EXEC	Departure		Claimed	Allowance	Other	Expenses	Carers Allowance
3/10	GCS PD6	8.45	10.30	2	£ p		· · · · · · · · · · · · · · · · · · ·	<u>£</u> p
310	L.C.P (FONGE WAN)	12.30	3.30	<u> </u>	£ p			£ p
4/10	SITE VISTST PLANNING COM	9-00	500	2	£ p			£ p
8/10	EXEC BRIEF/DAR POB/FRIM MEMBERS	10.00	6-30	$\frac{Z}{Z}$	£ 6-72p			£ p
16/10	ENV BRIEF	300			£ 672p		·	£ p
18/10	SITE VISTS + PLANWING	9.00	5.30	2	£ p			£ p
22/10	EXEC BRIEF + PLANNED INDRUNG PTY	' -	5.00	2	£ 6-72 p			£ p
23/10	ENV EXEC + BRIEF	10.00	3.30		£ p		p :	£ p
24 110	COUNCIL	1-30	6.30	2	£ ? p		. р :	£ p
29/10	EXEL BRIEF + EXEC	6.30	10.00	2	£ p	+	р :	£ p
31/10	SITE VISTS /ENV. PD6 / FORUM MEMBES	1-00	4.00	2	£ p	£	p !	£ p
5,770	THE CLOTS PERCOT DO PROCEST MEMBERS	10.00	645	2 Total Miles	£ 672p			£ p
Please only	enter the number of miles. Do not calculate an a	mount for r	ravment Î	Total Miles	Total Amount	7	Amount	Total Amount
	more lines, please use a Members' Allowances A		_ L		<u> </u>	£		<u>Е</u> р
AY-M1	All claims must be signed and authorised by N	dembers' Ser	n eet vices before	payment can b	Number of Ade made, and sho	iditional : uld be sen	Sheets Used to	d

Payroll Share Prvice Centre, 5th Floor, Paderborn House, B On BL1 1JW

12.10.2007

month 9

Members' Allowances Claim

A Property of Appleanance -	
Boltor	1
Counci	1

Name /	VICK PEEL	Home Addres	s 45 BIR	KDALE G	ARDENS	-13	L3 3	5 E G 🔻			
Car Make/N	Model ROVER IMPRESSION	Registration			Exact CC	1.4		М	onth Nov	EMBE.	え 20 0 フ
I certify that:- (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. (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 regard to the use of my car on Council business. (c) (For Car Allowance claims only) I will retain VAT receipts covering all journeys for six years in order to comply with HMRC regulations. (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 other payments shown on this form, and that all amounts claimed are strictly in accordance with the rates determined by Bolton Council. (e) Except as shown, I have not made, and will not make, any claim under any enactment for travelling or subsistence expenses or allowances, or financial loss allowance or attendance allowance in connection with the duties indicated on this form. Subsistence T											
or allowanc (f) The particul	es, or financial loss allowance or attendance allow lars inserted on this form are correct, and I unders	rance in connection with the tand that fraudulent claim	n connection with the duties indicated on this form. nat fraudulent claims may result in disciplinary action			Subsistence T			Total Miles		30
Signed Date			te 11/12/07			Subsistence NT			For Payrol		Use Only
I certify that I have	ve examined this allowance sheet, the figures reco		sonable, and the expense was necessary.			Expenses NT			Input by		ЭИ
Authorised			Carer's Allowance		nce		Date		31.12.67		
Date	Reason for Journey (including From and To)		Time of Departure Return		Miles Claimed	Subsistence Allowance		Fares and Other Expenses			ependent rs Allowance
1/1		WING (T:H)	9.00	5.00	2	£V	р	£ 🗸	p	£	р
8/11	C.G.S POB/ENN BRIEF/ENN	P06 1.	8-30	5.00	2	£✓	р	£ 🗸	р	£	р
12/11	BRIEF BRIEF	ť v	10.00	12.30	2	£	р	£✓	р	£	р
12/11	DTR DOG	. 15	2-30	5.00	2	£	р	£✓	р	£	р
4/11	NEIGHBORHOW PANEL (TO	ONCE UCAN)	12.30	3.00	5	£	р	£	р	£	р
15/11	SITE VISITS + PLANNING		9.30	5.00	2	£	р	£	р	£	' p
19/11	EXEC BRIEF/ENV. POG/EN	N- EXEC	10-00	5-30	2	£✓	р	£	р	£	p
21/11		UE KAN)	6.00	8.30	5	£	р	£	p	£	р
22/1	ENU. BRIEF		3-30	6.00	2	£	- р	£✓	р	£	. p
26/11	CAR PARKING PD6/EXEC BRID	EF / EXEC	10.30	4.30	2	£	р	£	р	£	р
28/11	ENU. SCRUTINY		5.30	8.00	2	£	р	£	р	£	p
29/11	SITE VISITS + PLANNING	ENU-BRIEF	9.00	6. 3 0	Z_ Total Miles	£	р	£	р	£	р
							Amount		Amount	Y	tal Amount
Please only enter the number of miles. Do not calculate an amount for payr					30	£	р	£	р	£	р
If you require more lines, please use a Members' Allowances Additional Sheet PAY-M1 All claims must be signed and authorised by Members' Services before payment can be made, and should be sent to Payroll Share' Service Centre, 5th Floor, Paderborn House, Fon BL1 1JW											