## ROCK

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## **BOLTON METROPOLITAN BOROUGH COUNCIL**

## MEMBERS ALLOWANCES CLAIM

Claim for Month of APR	<u> </u>	07	Name of Member <u>57</u> (Block capitals please)	EPHEN m Roct	Pay No.
Car (Make/Model) M 1 TS	WBISHI COL		Registration No.	Exact C	Cubic Capacity 1600 cc.
Metropolitan Borough Cour the rates determined by Bol I declare that the particulars	ncil; that I have actually p ton Metropolitan Borougl s inserted on this form are financial loss allowance of	aid the fares and made other n Council. correct. Except as shown, I h attendance allowance in cor	payments shown on this for ave not made, and will not n mection with the duties indic		are strictly in accordance with
	· F	OR OFFICIAL USE C	ONLY ( Completed by Com	mittee & Members Services)	
•	Amount £:p		Miles	,	
* Subsistence Allowance Subsistence Allowance (Taxable)	16 76	Normal Mileage		Details input onto I  By:	Payroll system:
Travel Reimbursement (e.g. Car Park, taxis)				Date: 3,5,07	
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.

	Particulars of Journeys	Tim		Mode of	Miles	Dependen Allow		Fares and Expens		Subsister Allowan	ıce
Date	Description of Approved Duties, including Locations (From & To)	Departure	Return	Travel	Claimed	£	P	£	P	£	P
·	MERTING WITH STEVE ARNEILED HORWICH TO BOLTON TIN	4.00	8.00	CAR	10						
· · · · · · · · · · · · · · · · · · ·	HOLLICH BOLTON RTN	4.00	8.00	CHR.	10	编				8	38
	MORNICH BOLTON TOTA ?	4.00	6.00	CAR	10						
17/4/07	HORNICH-BLACKROD RIN		2.00		L						138 
25/4/07	FULL COUNCIL HORVICH-BOLTON RIN										
											<u> </u>
					-					16	74
L	Travelling & Subsistence from any other A	uthorities or b	odies		50					10	

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

## MEMBERS ALLOWANCES CLAIM

Claim for Month of $MA$	/	20 <u>07</u>	Name of Member 5 (Block capitals please)	EPHEN M ROCK Pay No.
Car (Make/Model) M175	1815HI CO		Registration No.	Exact Cubic Capacity 1600 cc.
DECLARATION:  (a) I declare that I have actually Metropolitan Borough Courthe rates determined by Bolt	cil; that I have actua	lly paid the fares and made other	d subsistence for the purpose payments shown on this for	e of enabling me to perform duties as a Member of the Bolton m; and that the amounts claimed are strictly in accordance with
I declare that the particulars expenses or allowances, or f	inserted on this form nancial loss allowan	n are correct. Except as shown, I have or attendance allowance in con	ave not made, and will not mection with the duties indic	nake, any claim under any enactment for travelling or subsistence cated on this form.
(b) I am the holder of a curre	nt driving licence	and have adequate insurance o	· · · · · · · · · · · · · · · · · · ·	hicle on Council business. (For Car Allowance claimants only)  Date 16/6/07
Approved				Date
		FOR OFFICIAL USE O	NLY ( Completed by Com	mittee & Members Services)
	Amount		Miles	
	£:p		100-	Details input onto Payroll system:
* Subsistence Allowance	:	Normal Mileage	The l	Details input onto Payroll system:
Subsistence Allowance (Taxable)	:			
Travel Reimbursement (e.g. Car Park, taxis)	:			Date: DS.6.07 PENSIONS SECTION
Dependent Carer's Allowance	:			- SIND SECTION

### 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>

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Particulars of Journeys	T		Mode of	Miles	Dependen Allow		Fares and Exper		Subsistence Allowance
Description of Approved Duties, including Locations (From & To )	Departure	e of Return	Travel	Claimed	£	P	£	P !	£ P
4/6/07 ELECTED MEMBER DEVELOTENT MORNICH -BOUTON TOTA	1					1			
4/6/01 LENCH = TROLTON TOTA	5.00	8-30		10		<del>-</del>			
16/6/07 MAYOR MAKING BORNICH-BOLTON RTN	10.00	3.30	CAR	10	<u> </u>	<u> </u>		<u> </u>	
20/6/07 CIVIC SUNDAY HORWICH-BOLTON RIN		5.00		10	<del> </del>	<u> </u>		<u> </u>	
12/6/07 Banowe HORNICH-BOLTON TIN	3.30	8.00	CAR	10	<u> </u>	-	<u> </u>	<u> </u>	
- 1/6/V1 15/W P/V NO. P/V/CW/CF/ SUSSE	<u> </u>			<u> </u>	<del> </del>	<u> </u>		<del></del>	
				<u> </u>	<u> </u>	<del> </del> -		<u> </u>	
				<u> </u>	<u> </u>	<del></del>	<del></del>	<u> </u>	
		<u> </u>	<del> </del>		<del> </del>	<del>-</del>			
	<u> </u>		<u> </u>	<del> </del>	<del> </del> -	<u> </u>		╁	
		ļ	<u> </u>	<del> </del>	<del></del>	<u> </u>	-	<del></del>	
		<u> </u>	<del> </del>	<del> </del>		<u> </u>	<u> </u>		
			<del> </del>	<del> </del>		<u> </u>			
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		<del> </del>				<u> </u>		<u> </u>	
		<del> </del>	<del></del>		<del></del>				
		<del> </del>	<del></del>	<del>                                     </del>			<del> </del> -	<del></del> -	
		<del> </del>			<del> </del>				
	<u> </u>					_ <u> </u>			
D. L. thory amounts received by way of Travelling & Subsistence from any other Au	thorition or h	adies		40					

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

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

Car Claim Forms for Members.XLS 04/01/2006

## anda

## **BOLTON METROPOLITAN BOROUGH COUNCIL**

## MEMBERS ALLOWANCES CLAIM

Claim for Month of J	NE	20 07	Name of Member 5758 (Block capitals please)	PHEN M ROCK Pay No.
Car (Make/Model) M 75	UDISMI CE	DUT:	Registration No.	Exact Cubic Capacity / 600 cc.
	ncil; that I have actually	paid the fares and made other p		nabling me to perform duties as a Member of the Bolton nd that the amounts claimed are strictly in accordance with
_		ire correct. Except as shown, I ha or attendance allowance in conn		, any claim under any enactment for travelling or subsistence on this form.
(b) I am the holder of a curre	ent driving licence ar	nd have adequate insurance co	over for the use of my vehicle Dat	se 1/7/07
		FOR OFFICIAL USE OF	NLY ( Completed by Committ	ee & Members Services)
* Subsistence Allowance Subsistence Allowance (Taxable) Travel Reimbursement (e.g. Car Park, taxis) Dependent Carer's Allowance	Amount £:p :: 6:77	Normal Mileage	Miles	Details input onto Payroll system:  By: CM  Date: 26.7.07

### Notes:

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

<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.

-4	Particulars of Journeys			Mode	Miles	Dependen		Fares and		Subsiste Allowa		
Date	Description of Approved Duties, including Locations (From &	Tin Departure	e of Return	of Travel	Claimed	Allow £	p P	Expen £	p 1	£	£ p	
16	CHAIR AND VICE CHAIR FORM								<u> </u>		<u> </u>	
•	MEETING HORWICH BOLTON RIN	1.00	4.00	1	10		<del> </del>		<u>                                      </u>	<u> </u>	<del> </del>	
16	SCHOOL PLACE POE HOLWICH BOLTON DEN	2.30	5.30	CAR	<u> 10</u>				<u>:</u> :		+-	
1/6	SOMEON PLACES TONSAUTHTON COMMUNETY						-		<u>;</u>		+-	
· 10	COMESION MORNICH BOLTON TOTAL	9-30	11.30	CAR	10	<u> </u>	<del> </del>		<u> </u>		$\dotplus$	
3/6	RIVINGTON HERITAGE TRUST						<del>-</del>		<u>!</u>	8 4	+	
<u> </u>	MORNICH RIVINGTON RIN	9.00	1.15	CAR	8		<del></del>		<u>!</u>	6	4	
4/6	MO.M. FORUM HORWICH-TOUSEN TON	9.00	12.00	CAR	10	ļ	<u> </u>	<u> </u>	1	•	÷	
1/6	BEN ACTUAL MEANING MORNIGH -BOLTON TZTN	8.00	4.00	CAR	10	<u> </u>	<u> </u>		<u> </u>		╀	
0/6	PDP MEETING HORWICH-BOLTON DIN	2.00	4.30	CAR	10		<u> </u>	<u></u>	<u> </u>		1	
1/6	YOUNG PEOPLES SCRUTINY MORNICH-BOUTON PIN	3-00	5.30	CAR	10				<u> </u>	<u></u>		
116	JOHNG TONONS SOLUTION PROPERTY						<u> </u>		<u> </u>		<del> </del>	
							<u> </u>		<u> </u>		-	
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CLAIMS MUST BE SUBMITTED BY THE 2nd OF EACH MONTH TO GUARANTEE PAYMENT THAT MONTH.

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## MEMBERS ALLOWANCES CLAIM

Claim for Month of JUL	20	07_	Name of Member STEPY (Block capitals please)	IEN MROCK	Pay No.
Car (Make/Model) MITS	MBISMI COL	1	Registration No.	Exact Cubic C	apacity 1600 cc.
Metropolitan Borough Counciling the rates determined by Bolto	cil; that I have actually pa on Metropolitan Forough 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; an we not made, and will not make, ection with the duties indicated over for the use of my vehicle	on Council business. (For $\frac{3i}{7}$	ly in accordance with
•	F	OR OFFICIAL USE O	NLY (Completed by Committe	ee & Members Services)	
* Subsistence Allowance Subsistence Allowance (Taxable) Travel Reimbursement (e.g. Car Park, taxis) Dependent Carer's	Amount £:p : %:38.	Normal Mileage	Miles	Details input onto Payroll  By: CM  Date: 3 8 07	system:
Allowance	:				

### Notes:

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	Particulars of Journeys			Mode	Miles	Dependen		t	nd other enses	Subsist Allowa	
Date	Description of Approved Duties,	Tim	e of Return	of Travel	Claimed	Allow £	ance P	£	P	£	P
Date	. including Locations (From & To )	Departure	Return	1147							<u> </u>
17	MEETING WITH FORUM COORDINATOR				10		<del></del>				
		11m	1 pm	CAIL	70	<del> </del>					
17	BOLLON BOLLON RIN. HORWICH TIN	4 pm	8.30pm	CAR	10	<u> </u>			<u>†</u>		T
	TO COLOR A TROUGH AND MODIFIED TO THE	3 00/m	1 10 10	1000	<del>                                     </del>	┼	<u> </u>	┼──	<del></del>		
h	INFORMAL CEANCIL FLORWICH-BOLTON TUTN	4.00 pm	6.30 pm	CAR	10	<del> </del>				.8	3.4
	la	6.80 Pm	10pm	CAR	10	<del> </del>		<b>_</b>	<del>-                                    </del>	1.0	+
17_	BOLTON QUONE AREAL NEARING HORNICH-BOLTON PLTA	53.30 m	4.00pm	CAR	10			<del> </del>	+	<del> </del>	+
217	BOLTON QUANTE AREAL NEARING HOLLING TO THE	8.00m	12 on	CAR	10	<u> </u>		<u> </u>		<del> </del>	$\dotplus$
8/7_	TOLTON @ home 1/2 AWAY DAY HORWICH -BOLTON PIN	0.70	7 cm	CAR	10	<u> </u>	<u>- 1</u>	<u> </u>		<del> </del>	
1/7	TROLTON @ home /2 AWAY DAY HOPEWIGH - HOLTON JULIO	A Ma	1.3000	C14 B	10					<del> </del>	
3/7	TO SELL CONTROL TO ALL CONTROL TON	<u> </u>			10					<u> </u>	
10/7	INFORMATION TRAINING HURLICH-ROYON RIN	13-00pm	1 12 7 45	1-77-							<u> </u>
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CLAIMS MUST BE SUBMITTED BY THE 2nd OF EACH MONTH TO GUARANTEE PAYMENT THAT MONTH.

## MEMBERS ALLOWANCES CLAIM

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Claim for Month of Au6u	. 5 7 20	07	Name of Member 5.7	n. Roct		Pay No.
Car (Make/Model)M176A	BISHI COLT		Registration No.		Exact Cubic Capac	ity <u>/ 68 6</u> cc.
DECLARATION:  (a) I declare that I have actually a Metropolitan Borough Council the rates determined by Bolton	ril; that I have actually p	aid the fares and made othe	nd subsistence for the purpose or er payments shown on this form	of enabling me to pe i; and that the amou	erform duties as a Membe ints claimed are strictly in	r of the Bolton accordance with
expenses or allowances, or fir	nancial loss allowance of	attendance allowance in co	have not made, and will not ma onnection with the duties indica	ited on this form.		
(b) I am the holder of a curren	ntydriving licence and					Allowance claimants only)
Signed A		MEMBER	1	Date 3/8/07	/	
Approved			· · · · · · · · · · · · · · · · · · ·	Date	· ·	
	I	OR OFFICIAL USE	ONLY (Completed by Comp	nittee & Members S	Services)	
	Amount	·	Miles			
	£:p		100		•	
* Subsistence Allowance	:	Normal Mileage		Details	input onto Payroll sys	em:
Subsistence Allowance (Taxable)	:			Ву: 😅		

#### Notes:

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Travel Reimbursement

(e.g. Car Park, taxis)

Dependent Carer's

Allowance

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	Particulars of Journeys			Mode	Miles	Dependen		Fares and		Subsis	
Date	Description of Approved Duties, including Locations (From & To )	Tin Departure	e of Return	of Travel	Claimed	Allow £	ance P	Exper £	ses P	Allow £	rance P
4/8	FORUM MOCK INTERNEWS HORWICH-BOLTON RIN	2.00pm	4.30pm	CAR	10		ļ				<u> </u>
5/3	PERFORMANCE MANAGEMENT TRAINING HOLTON TITN	9.15m	1.00pm		( D				<u> </u>		
é /2	FORUM CONSULTATION HURWICH -BOLTON	12.00pm	3 30	CAL	5		<u>!</u>			<u> </u>	
6/8	CHILDRENS SCRUTINY BOLTON - MORWICH	13-30	5.30	CAR	5		<u> </u>				<del>-</del>
e/g	FORUM CHAIL + VICE CHAIL HORWICH-BOUTER RTN	10-15	12-30	CA2	10		<u> </u>				<u> </u>
2/8	MOCH INSPECTION MEGTING HORWICH-BOLTON TETN	11.00	3.00	CAR	10		<u> </u>				<u></u>
27/8	SCRUTINY WORKERTOR HORWICH - BOLTON PLTN	5.00	8-30	C14,2	10		ļ		<u>!</u>		<u> </u>
8/8	BOLTONEMONE BRIEFING HORNICH - BOLTON TOTA	9.00	12.00	CAR	.10				<u>!</u>		<u> </u>
9/8	STANDANTS WORKSHOP HORNICH-BOUTEN TO	3.00	6.00	CA 12	5		<u> </u>		<u> </u>		
9/8/	BASI COUNCIL BOLTON-HORWICH	6.30	10-30	CAR.	5			,		8	3,
018	FORUM BRIEFING HORNICH-BULTON TOTAL	4.00	7.00	CAR	10		<u> </u>				-
							<u> </u>		<u> </u>		<u> </u>
									<u> </u>		+
							<u> </u>		<u> </u>		-
							<u> </u>				+
									<u>:</u>	<u> </u>	+
							<u> </u>		<u> </u>	<u> </u>	-
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****							<u> </u>		<u> </u>		
	y amounts received by way of Travelling & Subsistence from any other Auth				90						-

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



## MEMBERS ALLOWANCES CLAIM

laim for Month of SEST.	2	<u> </u>		1EN M RECEPT Pay N	lo.
ar (Make / Model) M 175 N 1	1,541 COLT	•	lock capitals please) egistration No.	Exact Cubic Capacity 160	cc.
Metropolitan Borough Counci the rates determined by Bolton I declare that the particulars in	; that I have actually . Metropolitan Borou serted on this form a	paid the fares and made other pay gh Council.	ments shown on this form; not made, and will not ma	enabling me to perform duties as a Member of the Bo and that the amounts claimed are strictly in accordance ke, any claim under any enactment for travelling or su ed on this form.	ce with
•		d have adequate insurance cov	er for the use of my vehi		claimants only)
Approved		FOR OFFICIAL USE ON		ittaa & Mamhare Carriege)	
	Amount	FOR OFFICIAL USE OIL	Miles	ince o Michious solvices j	
	£:p		69.	•	
* Subsistence Allowance	:	Normal Mileage	00	Details input onto Payroll system:	
Subsistence Allowance (Taxable)	:			By: CM	
Travel Reimbursement	:		·	Date: 8 10.07	
(e.g. Car Park, taxis)	1				

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	Particulars of Journeys			Mode	Miles	Dependen	
Date	Description of Approved Duties, including Locations (From & To )	Tin Departure	ne of Return	of Travel	Claimed	Allow £	ance P
3/9	BOLLON WHENE MEETINE HORNICH FOLLON TIN	9.00	1.00	CAR	10	4	92
510	CRA INSPECTION (FORMS) HORNICH-TROUGH DEN	9.45	11.45	CAR	10	<u> </u>	-

4.30

1.15

3-50

4-30

4-15

5.30

6.30

7.45

CAL OA SZ

CA 2

CAR

10

10

78

Fares and other

Expenses

£

Subsistence

Allowance

£

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

BQ home masting norman-Beston TITN

AREA WORKING TRAINING TOMORHORWICH

TWO TOWNS FORMN MORNICH-TOLACKROTO TETN

MEETING WITH JON GONTON HORWICH - TROTTON

BQHOME HORWICH-BONON RIN

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

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

Car Claim Forms for Members XLS 04/01/2006

# Members' Allowances Claim



Name Stepher	n M Rock	Home Addres	s 64 Ainsw	orth Ave. F	lorwich	ı. Bolt	on	·		Pay	/ No.	
Car Make/Mod	lel Mitsubishi Colt	Registration			Exact	CC	1600		Мс	onth	Octobe	r 20 00
(b) (For Car Allow regard to the us (c) (For Car Allow other payments (e) Except as show	ance claims only) I have actually and necessaril ance claims only) I am the holder of a full, currer e of my car on Council business. ance claims only) I will retain VAT receipts cover and necessarily incurred expenditure in travelling shown on this form, and that all amounts claimed n, I have not made, and will not make, any claim up or financial loss allowance or attendance allowance	nt and valid driving lic ing all journeys for siz and subsistence for th are strictly in accord ader any enactment fo	ence and MOT of x years in order the purpose of entile ance with the rate or travelling or su	ertificate (where to comply with abling me to pe es determined bsistence expe	re applica HMRC re erform du by Boltor enses	ible), an gulation ties as a i Counc	d I have comes.  a Member of I il.  FOR I	plied with the Bolton Cou <b>MEMBE</b>	ne Council <sup>a</sup> ncil, I have <b>RS' SE</b>	actually paid	the fares	and made
(f) The particulars	inserted on this form are correct, and I understand	that fraudulent claims	may result in dis	ciplinary action	ı. n. 1		istence T		6.7b	Total Mile	s	54 V
Signed	Member	Date 4 / / /	107				istence N	Г		1	ayroll	Use Only
	xamined this allowance sheet, the figures recorde	I	d the expense wa	s necessary.	- 1 · i	٠ .	nses NT	<u> </u>		Input by	<u> </u>	cm
Authorised <b>A</b>	Members' Services	Date					's Allowai			Date		22.11.07
Date	Reason for Journey (including From and T		Time Departure	e of Return	Mil Clair		Subsi: Allow	stence rance		es and Expenses		ependent rs Allowance
2-Oct-2007	Bolton@Home meeting Vicky	Ramsden	9:15	0:15	1	5	£	p:	£	р	£	р
9-Oct-2007	Housing stratergy meet	ing	16:45	14:30	10	5	£	<b>p</b> .,	£	р	£	q
22-Oct-2007	Meeting Trevor McKeen B@	)Home	14:00	17:30	4		£	p.	£	p	£	p i
22-Oct-2007	Lostock Liason Commit	iee	17:00	21:00	1(	)	£	3.38 p	£	p	£	. p
23-Oct-2007	Pre Council group meet	ing	17:00	21:00	1(		£	p	£	р	£	р
23-Oct-2007	BMBC Council		18:00	18:00	10	5	£	3.38 p	£	p	£	p
		,					£	р	£	р	£	p
					wi		£	р	£	p	£	р
			3 354 9 0				£	р	£	p	£	p
			WOIL !			•	£	р	£	р	£	p
		13 NOV 2007			*		£	р	£	р	£	р
		1404 700/					£	р	£	p	£	p
		CHOLL SHARE	ED /		Total	Viles	Total A	mount	Total .	Amount	To	tal Amount
Please only	enter the number of miles Do no	calculate an a	mount for p	oayment.	54	<u> </u>	£ 16	6.76 p	£	р	£	р
If you require	more lines, please use a Members All claims must be signed an				navme	nt can				Sheets Us	sed	

Payroll Shared Service Centre, 5th Floor, Paderborn House, Ton BL1 1JW

12.10.2007



## Members' Allowances Claim



Name stepher		s 64 ainsw	orth ave. h	orwich	bolto	n bl	6 6lx			Pa	y No.		
	del mitsubishi colt Registration		-	Exact	CC	16	00		Mo	onth r	ovemi	ber 2	0 00
regard to the uregard	vance claims only) I have actually and necessarily incurred the mileaguance claims only) I am the holder of a full, current and valid driving lices of my car on Council business.  vance claims only) I will retain VAT receipts covering all journeys for significant and necessarily incurred expenditure in travelling and subsistence for the shown on this form, and that all amounts claimed are strictly in according the not made, and will not make, any claim under any enactment for financial loss allowance or attendance allowance in connection with	ence and MOT of x years in order in the purpose of en lance with the rate for travelling or su	certificate (whe to comply with abling me to p tes determined	re applica HMRC re erform du by Boltor	ible), an gulation	id I h is. a Me	ave complied	with i	the Council' incil, I have	actually paid	the fares	ents with	
(f) The particulars	inserted on this form are correct, and I understand that fraudulent claims	the duties indicat s may result in di	ied on this form sciplinary actio	Դ. n.	Subs		nce T			Total Mile		98	
Signed	Member Date	30-Nov-200	)7		Subs	iste	nce NT			For F	ayrol	II Use C	Only
	examined this allowance sheet, the figures recorded are reasonable, an	d the expense w	as necessary.	,	Expe	nse	s NT	Г		Input by	· .	cm	1
Authorised	Members' Services Date				Care	's A	Allowance	Г		Date		28.	80.1
Date	Reason for Journey (including From and To)	Time Departure	e of Return	Mil Clair			Subsisten Allowanc			es and Expenses	Care	Dependers Allo	ent wance
2-Nov-2007	Horwich market briefing horwich-bolton rtn.	14:15	16:40	1(		Γ	£	р	£	р		2.07110	n
12-Nov-2007	appeals training horwich-bolton rtn	17:15	19:00	10	)		£	a	£	p	£		р
13-Nov-2007	bolton at home horwich-bolton rtn	13:00	15:30	10	5		£	p	£	p	£		<u>р</u>
14-Nov-2007	forum members only horwich-bolton rtn	9:00	13:00	10	)		£	р	£	р	£		p
14-Nov-2007	childrens pdg horwich bolton rtn	16:45	19:00	10	5		£ .	p	£	p	£		p
20-Nov-2007	group presentation city status horwich-bolton rtn	17:15	19:30	10	)		£	p	£	р	£		p
22-Nov-2007	bolton at home horwich-bolton rtn	16:15	18:30	10	5		E	p	£	p	£		p
28-Nov-2007	web access training horwich-bolton rtn	12:00	13:30	10	,	<u> </u>	E	p	£	p	£		р
29-Nov-2007	rivington trust horwich-anderton trn	8:15	13:00	. 8			<u> </u>	p	£	р	£		P P
29-Nov-2007	chair and vice chair forum meeting horwich-bolton rtn	15:15	17:30	10	<del>,                                    </del>	<u> </u>	<u> </u>	g	£	<u>Р</u>	£		— <del>Р</del>
						┈		p	£	<u>Р</u>	£		
				*		$\vdash$		p	£	p	£		p
			W.W.J.	Total N	/liles		otal Amou			Amount		tal Amo	p punt
Please only	enter the number of miles. Do not calculate an a	mount for	payment.	98		1	?	p	£	р	£		р
If you require PAY-M1 12.10.2007	more lines, please use a Members' Allowances A All claims must be signed and authorised by M Payroll Shared Service Cel	lembers' Serv	ices before	paymer	nt can	be r	umber of A made, and s BL1 1JW	<b>Adc</b> hou	litional : ld be sen	Sheets Us	sed [		]

## MEMBERS ALLOWANCES CLAIM

Claim for Month of JANNARY 20 03	Name of Member 5. M ROEK	Pay No.
	(Block capitals please)	
Car (Make/Model) MITSIBISMI COLT	Registration No.	Exact Cubic Capacity / 6 97cc.

#### 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)

Signed 4	
<u> </u> 	
Approved	

**MEMBER** 

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

**			` .	
	Amount		Miles	•
	£:p			
* Subsistence Allowance	15:15	Normal Mileage	46	Details input onto Payroll system:
Subsistence Allowance (Taxable)	BUS			Ву:
Travel Reimbursement (e.g. Car Park, taxis)	:			Date:
Dependent Carer's Allowance	•			

#### Notes:

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

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

	Particulars of Journeys		6	Mode of	Miles	Dependent Allows		Fares and Expen		Subsis Allow	
Date	Description of Approved Duties, including Locations (From & To )	Departure	e of Return	Travel	Claimed	£	P	£	P	£	. P
21.100	TWO TOWNS MEMBERS ONLY BLIEFING HORNICH		1.00	CAR	10						<u> </u>
8/1/08	7WO TOWNS MEMORIES ONLY ISLIEPING ISLUDICION	5.00	9.00	CAR	1.0				<u> </u>	8	38
9/1/08	COMMUNITY TRAINING MORWICH-BOLTON TOTAL	5.00	8-00	CAR	10					<u> </u>	
10/1/08	BUTGET BREFING HORVICH-BOWEN TUN										<u> </u>
18/1/08	FORMM ARMBAND PRESENTATIONS TO SCHOOLS	8-15	3.45	CAR	16			·		6	77
	HORWICH SCHOOLS AND HORWICH BLACKROD	0 17	1 7 7								
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					<u> </u>	-				-	<del>-</del>  -
	ny amounts received by way of Travelling & Subsistence from any other Aut				46	-	ĺ				

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

## ROLLON METKOLOFITMA DOVOGGL COOMO!F

## MEMBERS ALLOWANCES CLAIM

Claim for Month of FEBR	UANY 20	<u>04</u> _	Name of Member (Block capitals please)	s.m. Rock		Pay No	
Car (Make / Model) M 175U	BISMI COLT		Registration No.		Exact Cubic Ca	pacity 1600	cc.
DECLARATION:  (a) I declare that I have actually a  Metropolitan Borough Counc  the rates determined by Bolto	ril; that I have actually pa on Metropolitan Borough	id the fares and made othe Council.	r payments shown on this	form; and that the amoun	ts claimed are stricu	y in accordance with	
' I declare that the particulars i expenses or allowances, or fi	nancial loss allowance or	attendance allowance in co :	nnection with the duties i	ndicated on this form.			
(b) I am the holder of a curre	nt driving licence and l	nave adequate insurance	cover for the use of my	vehicle on Council bus	siness. (For C	ar Allowance claimants	only)
and the same of th		MEMBER		Date 1/3/08		:	
Signed **		MEMIDER		ναια <u>.γ</u> ν			
Approved				Date <u>() 4/3/0</u>	<u>&amp;</u>		
	F	OR OFFICIAL USE	ONLY (Completed by	Committee & Members S	ervices)		,
	Amount		Miles				, •
	£:p		48				•
* Subsistence Allowance	21 .68	Normal Mileage	94	— Details i	input onto Payroll	system:	
Subsistence Allowance	36:83 1						
(Taxable)				Ву:	CM		
Travel Reimbursement (e.g. Car Park, taxis)				Date:	5.3.08		-
Dependent Carer's							

#### Notes:

Allowance

\* 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 Journ						t Carers ance	Fares and Exper	nses	Subsist Allows £	
Date	Description of Approved Duties, including Locations (From & To )	Departure	Return	Travel	Claimed	£	P	£	P		1
( ( )	TOWN TO THE TOWN TO THE	N 11.45	4.30	CAR	8		<del>-</del>		<u> </u>	e e	3
2/08 RIVIN	670N TRUST HORNICH -TUVINGTON TUT	RTA 6.00	10.15	CAR	10.						_ <del></del>
12/08 COUN	CIL BUDGET MEETING MORNICH -BOLTON		11.30	CAR	10.				<del> </del>	8	3
12/08 cona	CIL MEETING MORWICK-BOLTON 727A	·		CAN	10.			-		14	1
12/08 MENS	BERS ONLY FORUM MEETING MORNICH-BOO	12N 4-30	<u> </u>		10			l		<u> </u>	
12/08 CHILD	NGNS PDG HORWICK-BOLTON TOTA	14.30	1700	CVI (-	-, <del>'</del>						
			-	<del> </del>	<del> </del>	4		September 1991			
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		<u> </u>			48	,				21	

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

## Members Allowances Claim



Name stephen	rock H	ome Addres	s 64 ainsw	orth ave. ho	rwich.boltor	ı. bl6 6l	x		Pay	No.	
	el mitsubishi colt	egistration (			Exact CC	1600		Mic	onth r	narch	20 0
(b) (For Car Allowaregard to the us (c) (For Car Allowa (d) I have actually a other payments (e) Eveent as show	ance claims only) I have actually and necessarily in the claims only) I am the holder of a full, current are of my car on Council business.  I ance claims only) I will retain VAT receipts covering and necessarily incurred expenditure in travelling and shown on this form, and that all amounts claimed are, I have not made, and will not make, any claim under financial loss allowance or attendance allowance is	and valid driving lice  all journeys for six  subsistence for the  strictly in accorda  ar any enactment for	ence and MOT of years in order the purpose of en ance with the rate or travelling or su	ertificate (wher to comply with I abling me to pe tes determined absistence expe	e applicable), and HMRC regulation erform duties as a by Bolton Counci enses	d I have c s. a Member il. FOF	omplied with to of Bolton Cou R MEMBE	the Council incil, I have	actually paid the	e fares	and made
(f) The particulars i	nserted on this form are correct, and I understand the	at fraudulent claims	may result in dis	sciplinary action	ı. Cubo	istence		C-2	Total Miles		30·
Signed	Welliber	ate 3014	108			istence	<u> </u>	<u>38</u>	2	ayrol	l Use Only
	xamined this allowance sheet, the figures recorded a		the expense w	as necessary.	l <b>a</b> `	nses N	ļ		Input by		
Authorised	Members' Services	)ate				's Allov			Date		
Date	Reason for Journey (including From and To	)	Time Departure		Miles Claimed				Fares and Other Expenses C		Dependent ers Allowance
10-Mar-2008	extraordinary council meeting horwing		17:00	19:30	10 .	£	р	£	р	£	р
13-Mar-2008	external organisations scrutiny horwi	ch-bolton rtn	13:00	16:30	10	£	р	£	p	£	д р
18-Mar-2008	area forum horwich-blackroo	d rtn	17:30	21:30	10	£	8.38 p	£	р	£	р
·						£	·p	£	р	£	р
						£	р	£	р	£	р
						£	р	£	р	£	р
,						£	р	£	d	£	р
						£	р	£	p	£	q
						£	р	£	р	£	р
		:				£	р	£	р	£	р
						£	р	£	р	£	р
						£	р	£	р	£	р
				· · · · ·	Total Miles		l Amount	7.	Amount		otal Amount
Please only	enter the number of miles. Do not	calculate an a	amount for	payment.	30	£	8.38 p	£	р	£	p
If you require	more lines, please use a Members'	Allowances A	Additional S	Sheet		Num	ber of Ad	ditional	Sheets Us	ed	0

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

Payroll Shared Service Centre, 5th Floor, Paderborn House Bolton BL1 1JW

of month

## **RUSHTON**

## SHIP OF THE

## **BOLTON METROPOLITAN BOROUGH COUNCIL**

## MEMBERS ALLOWANCES CLAIM

Claim for Month of APRIL	2	0 <u>07</u>			A RUSHTON	Pay No.
Car (Make/Model) Vい・	COLF	· · · · · · · · · · · · · · · · · · ·	(Block capitals Registrati	s please) on No.		Exact Cubic Capacity 17 81 cc.
Home Address ( ARD)	the close L	MARVIDGE	Boccon 813	400		
Metropolitan Borough Counci the rates determined by Bolton	I; that I have actually p n Metropolitan Boroug nserted on this form ar	aid the fares and mad h Council. e correct. Except as sho	e other payments show own, I have not made, a	n on this form; and will not ma	and that the amounts cla ke, any claim under any	n duties as a Member of the Bolton aimed are strictly in accordance with enactment for travelling or subsistence
(b) I am the holder of a current Signed	t driving licence and	l have adequate insu MEMBER	urance cover for the	ase of my veh	Date 2/5/07	ess. (For Car Allowance claimants only)
Approved					Date	
		FOR OFFICIAL	USE ONLY ( Co	mpleted by Con	nmittee & Members Ser	vices)
	Amount £:p			Miles		
* Subsistence Allowance	:	Normal Mile	eage	28.	Details in	put onto Payroll system:
Subsistence Allowance (Taxable)	:				ву: С	<sup>2</sup> M
Travel Reimbursement (e.g. Car Park, taxis)	:				Date: 4	1.5.07
Dependent Carer's	•	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.

<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.



	Particulars of Journey	Mode of	Miles		Dependent Carers Allowance		Fares and other Expenses		nce		
Date APRIL	Description of Approved Duties, including Locations (From & To )	Tin Departure	e of Return	Travel	Claimed	£	P	£	p_	£	p
2~3	CORP issues Scruting	5-30	8 10	CAR	6	<u> </u>	<u> </u>				
16	EXECUTIVE followed by meeting with policemen bas	Z · Š · S	630	1.6	6		<u> </u>				<u> </u>
23	chief offices - pointment pointed	8.30	io	١.	6.		<u> </u>				<u> </u>
<del></del>	ortecty will that Exoc + Corol James and police the	3-30 )			2		<u> </u>	<u> </u>			
23		}	7-15		76		<u>!</u>				<u> </u>
	+ Informed Council 5:15	9-15	1.0		6		<u> </u>			<del></del>	<u> </u>
24	Visuo For France [at Smithills Hall]	3.35	2.50		G		<u>!</u>			·	<u> </u>
24	STANDARDS BOARD	2.30	5.0		10		1808				<u> </u>
25	Siegists want water Bois	6.0	9.45		<b>Ç</b>		A CONTRACTOR OF THE PARTY OF TH	a and an and an an			<u> </u>
25	Face Control	8.0	19.42		6						<u> </u>
30	Chaf affres appared commettee + proof received							`		<u> </u>	<u> </u>
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			<u> </u>	1 .	1	+					
	1 by year of Travelling & Subsistence from any other Aut	horifies or bo	odies		58						

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

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

13



## MEMBERS ALLOWANCES CLAIM

Claim for Month of MA	Υ 2	20 27		. A. RUSHTON	Pay No.
Car (Make/Model) V·W	GOLF		(Block capitals please) Registration No.	Exact Cubic C	Capacity 1781 cc.
Home Address / A	RAN CUSE	LANGE			
Metropolitan Borough Counc the rates determined by Bolto I declare that the particulars	cil; that I have actually p on Metropolitan Boroug inserted on this form ar	paid the fares and made other p th Council.	eayments shown on this form; ave not made, and will not mal	f enabling me to perform duties as a Mem and that the amounts claimed are strictly ke, any claim under any enactment for tra	in accordance with
(b) I am the holder of a current			over for the use of my vehi	icle on Council business. (For	Car Allowance claimants only)
Signed		MEMBER	. '	Date 30/5/07	
Approved				Date	·
		FOR OFFICIAL USE	ONLY ( Completed by Com	ımittee & Members Services)	<u> </u>
	Amount		Miles		
	£:p		20.		
* Subsistence Allowance	:	Normal Mileage		Details input onto Payrol	l system:
Subsistence Allowance (Taxable)	:			ву: СМ	
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.



· 	Particulars of Journey			Mode	Miles	Dependent Allowa		Fares and Expen	1	Subsist Allowa	
Date	Description of Approved Duties, including Locations (From & To )	Tin Departure	e of Return	of Travel	Claimed	£	P .	£	p	£	p
MAY		5.0	80	CAR	6		<u> </u>			1	
14	Lauren of Manter Training	₹.30	多)	1+			<u> </u>	<u>.</u>			<del>-</del>
is	Standards Comillian followed by		1.45 }		6	<u> </u>			<u> </u>		<del> </del> —
15	Informal Carral on S. Ambanas existes	10:45	3. 5	"	6						ᆜ
16	Informal Casnel on ST AMBARDS repediate HAYOR MAKING AMBURE Heating of Count	650	8.0	-	6		<u> </u>				<u> </u>
23	Approx Testing (Appointments)	930	120	F N	6						
25	Area for in Menhas only menting	1 2/2	700	<u> </u>	<u> </u>						
29	Annua Testing (Appointments)  Anaforum Membes only menting Planning Training [PROBITY] Cancelled		<u> </u>	<u> </u>							
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	to resize the way of Travelling & Subsistence from any other At	1thorities or b	odies		30		<u> </u>		<u> </u>		



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

## 000

## **BOLTON METROPOLITAN BOROUGH COUNCIL**

## MEMBERS ALLOWANCES CLAIM

Claim for Month of	TUP C	20 <u>27</u>	Name of Member	ALAN RUSHTON	Pay No.
Car (Make/Model) V W	GOLF		Registration No.	Exact Cubic C	Capacity 178/_cc.
Home Address   ARR	AN CLOS	E LAZIBRIOGE	becom price	LP3	
Metropolitan Borough Counc the rates determined by Bolto	il; that I have actually on Metropolitan Borou	paid the fares and made other p agh Council.	ayments shown on this form;	enabling me to perform duties as a Mem and that the amounts claimed are strictly i te, any claim under any enactment for tra	in accordance with
expenses or allowances, or fit	nancial loss allowance	or attendance allowance in conn	ection with the duties indicate	d on this form.	
(b) I am the holder of a curren	nt driving licence ar	nd have adequate insurance c	over for the use of my vehi	cle on Council business. (For	Car Allowance claimants only)
Signed F		MEMBER	•	Date $\frac{2/7/07}{}$	. •
Approved				Date	
		FOR OFFICIAL USE	ONLY ( Completed by Com	mittee & Members Services)	
	Amount		Miles		
	£:p		62	7°	
* Subsistence Allowance	:	Normal Mileage	04	Details input onto Payrol	i system:
Subsistence Allowance (Taxable)	:			By:	
Travel Reimbursement (e.g. Car Park, taxis)	:			Date:	
Dependent Carer's Allowance	:				

### Notes:

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

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



	Particulars of Journa		ne of	Mode of	Miles	Dependent Carers Allowance	Fares and other Expenses	Subsistence Allowance
Date Juli	Description of Approved Duties, including Locations (From & To )	Departure	ie or Return	Travel	Claimed	£ p	£ p	£ p
5	STAS BOARD TRAINING ETC.	ತ 2್ರಿವಿ	5-7-5	CAR	6			
6	PARTHER SHAP GOVERNING - LEASING HILL]	630	9-30	( )	il			
7	EXERCISE ORGAN SCREAMY CONTRACT	7 ⋅ 30	3.20	2.4	6			
	Wasterchion land Ret UNIT Participal	3 30	5 35	<i>y</i> .	6.3			
/3	AREA FORENT (SUTTON GUARNOUTH CENTALE)	6:15	9.20		.9.3			
/3 .		4:30	6.30		Ç			<del></del>
14	Semenar will Charge Exec in Congestine Charging			)				
<u>2í</u>	CHILDRENS GRV. etc Schenny Committee }	2.60	6.0	}	6			
-'21	+ GOVERNOR APPINET PANEL	3.30	60		6			
25	SCRETTLY TRATICALS	9.0	10.45		6			
24	MENSER DEVEROPHENT INITIAL INTERVIEW	12.0	2-0		6			
27	EDUCATION ASSISTANCE PANT							
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	the very of Travelling & Subsistence from any other Auth	amition on be	diae		62			

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

## MEMBERS ALLOWANCES CLAIM

Claim for Month of	JULY	20 0기	Name of Member	A. RUSHTON	Pay No.
Car (Make/Model)	W GOLF		(Block capitals please)  Registration No.	Exact Cubic Cap	BOLTON COUNCIL
Home Address   AR	RAN CLOS	E LADYBRIDGE	Bown BL36	+PP	
the rates determined by Bo	olton Metropolitan Boro	ugh Council.	•	enabling me to perform duties as a Memb nd that the amounts claimed are strictly in	L SERVICE CENTRE
expenses or allowances, or	financial loss allowand	e or attendance allowance in conn	ection with the duties indicated		
(b) I am the holder of a cur	rent driving licence a	nd have adequate insurance co	over for the use of my vehicl		r Allowance claimants only)
Signed 7		MEMBER	D	ate SERT 30 # 07.	
Approved			D	ate	
		FOR OFFICIAL USE O	ONLY ( Completed by Comm	ittee & Members Services)	
	Amount	[ ·	Miles		•
	£:p		121		
* Subsistence Allowance	:	Normal Mileage	<u> </u>	Details input onto Payroll s	ystem:
Subsistence Allowance (Taxable)	:		85	By: CM	
Travel Reimbursement (e.g. Car Park, taxis)	:			Date: 29.10.07	
Dependent Carer's					

#### Notes:

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

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



Allowance

	Particulars of Journeys	Mode	Miles Dependent Carers Allowance		Fares and		Subsistence Allowance				
Date TULY	Description of Approved Duties, including Locations (From & To )	Tin Departure	e of Return	of Travel	Claimed	£	ince P	Expens £	es P	£	P P
5	Keil Davis + Group presentation the growing ithbest Hell	4.30	7.30	< AR	6						
9	Contra North Pupil Referral Unit Wathoughton	1-0	3-0	14	6		<u> </u>				
9	Informal Paincel AGMA TIP funding ate	4.30	7.30	۴,	<u> </u>						<u> </u>
N	Informal Pouncil AGNA Tif funding etc. FULL COUNCIL	630	10.0	1.^	6		<u> </u>				
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CLAIMS MUST BE SUBMITTED BY THE 2nd OF EACH MONTH TO GUARANTEE PAYMENT THAT MONTH.

## MEMBERS ALLOWANCES CLAIM

				- 0 0	
Claim for Month of	2 (ي. 2	0 <u>07</u>		F. A. RUSHTON	Pay No.
Car (Make/Model)	W. GOLF	·	(Block capitals please)  Registration No.	Exact Cubic C	Capacity 1781 cc.
Home Address \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	ead close	LANGRIDGE	E foctow BL	3 4PP	BOLTON COUNCIL
Metropolitan Borough Coun the rates determined by Bolt I declare that the particulars	icil; that I have actually point Metropolitan Boroug inserted on this form are inancial loss allowance o	vaid the fares and made other p th Council. e correct. Except as shown, I ha r attendance allowance in cons	we not made, and will not mection with the duties indic	·	mber of the Bolton 1 OCT 2007 y in accordance with PAYROLL SHARED aveiling or subsistence CE CENTRE  Car Allowance claimants only)
		FOR OFFICIAL USE	ONLY ( Completed by Co	mmittee & Members Services)	
	Amount		Miles		·
	£ : p		27		
* Subsistence Allowance	:	Normal Mileage	37.	Details input onto Payrol	ll system:
Subsistence Allowance (Taxable)	:			By:	
Travel Reimbursement (e.g. Car Park, taxis)	:			Date:	
Dependent Carer's Allowance	:				

### Notes:

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

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

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THE RESERVE OF THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TO THE PERSON NA	Particulars of Journeys			Mode	Miles	Dependent Carers		Fares an		Subsiste	
Date AUG	Description of Approved Dutes including Locations (From & To )	Tin Departure	ne of Return	of Travel	Claimed	Allowa £	ance P	Exper	rses p	Allowance £ p	
&	Planning Transing Post office presentation	15.30	3-0	C AR	6					-	
13	Children's Services PDC	8:30	1045	٠,	(چ						
16	Childrens Services Serving Committee	3-30	6.0	n	6				<u> </u>	1	<u> </u>
20	Education Assist, Panel	12-30	2.15	••	6						
21	Standards Board	3.30	.2-25		6.		4				<u> </u>
22	Heaten + Costock Axea forum Loshak Hall	6-10	9.50	1.	ſ						
29	FUL COUNCIL	6.30	9.40	**	Ø.				İ		
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CLAIMS MUST BE SUBMITTED BY THE 2nd OF EACH MONTH TO GUARANTEE PAYMENT THAT MONTH.

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

(3)

## 0) A

## **BOLTON METROPOLITAN BOROUGH COUNCIL**

## MEMBERS ALLOWANCES CLAIM

Claim for Month of	EPT	20_07		F. A. RUSHTON	Pay No.
Car (Make/Model) V	W GOLF		(Block capitals please)  Registration No.	Exact	Cubic Capacity 178/ cc.
Home Address   AC	RAN CEOS	E LADYBRID	gé Bocton	BL3 4PP	BOLTON COUNCIL
Metropolitan Borough Count the rates determined by Bolto I declare that the particulars expenses or allowances, or fi	cil; that I have actuall on Metropolitan Boro inserted on this form nancial loss allowanc	y paid the fares and made other ugh Council.	payments shown on this for ave not made, and will no nection with the duties inc	t make, any claim under any enactin licated on this form.	ent for travelling or subsistence  (For Car Allowance claimants only)
		FOR OFFICIAL USE	ONLY ( Completed by	Committee & Members Services)	
	Amount		Miles		
	£:p		1 21		
* Subsistence Allowance	:	Normal Mileage	24.	Details input ont	o 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.

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Particulars of Journeys			ne of	Mode of	Miles	Dependent Carers Allowance		Fares and other Expenses		Subsiste Allowar	
Date SEPT	Description of Approved Durice including Locations (From & To )	Departure	Return	Travel	Claimed	£	P	£	Р	£	þ
13	External Organisation Scruting Committee	t-30	4.35	CAR	6						ļ
18	Production of the second second for the facility	§∙ 3°	7.45	7 7	6						
16	Paratetin to Group - Housing - Chief Exac Jeff Small base Cover for Come Haberoff- Homen Russausen ale School Gov Appointments Penal	20	4.25	ę,	6					<u> </u>	
19	Cover for Come His Kerger Homes resolution	12.0	1.45		6			*			
26	School Gov Appointments remail		, 13		,		-				
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CLAIMS MUST BE SUBMITTED BY THE 2nd OF EACH MONTH TO GUARANTEE PAYMENT THAT MONTH.

## MEMBERS ALLOWANCES CLAIM

Claim for Month of	TOBER	_20 <u>_07</u>	Name of Member	F. A. RUSHTON Pay No.
Car (Make/Model)	V GOLF	<u>, '</u>	Registration No.	Exact Cubic Capacitycc.
Home Address / ARRA	nc cosé	LASYBRIDGE BOCK	FON BL34PP	
DECLARATION:		•		
(a) I declare that I have actually Metropolitan Borough Coun- the rates determined by Bolta	cil; that I have actuall	y paid the fares and made other	id subsistence for the purpos payments shown on this for	se of enabling me to perform duties as a Member of the Bolton rm; and that the amounts claimed are strictly in accordance with
I declare that the particulars expenses or allowances, or fit  (b) I am the holder of a current	nancial loss allowanc	e or attendance allowance in cor	nnection with the duties indi	•
(b) I am the holder of a curre	iir driving acence a		cover for the use of my v	Date 2 NOV 07
Signed		MEMBER		Date 2 /200
Approved				Date
		FOR OFFICIAL USE	ONLY ( Completed by C	Committee & Members Services)
•	Amount		Miles	
	£:p		1.0	
* Subsistence Allowance	:	Normal Mileage	149.	Details input onto Payroll system:
Subsistence Allowance (Taxable)	• :			By: CM
Travel Reimbursement (e.g. Car Park, taxis)	:	٠.		Date: 5.11.07
Dependent Carer's		·		

### Notes:

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

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

Allowance



Particulars of Journeys				Mode	Miles	Dependent Carers		Fares and other		Subsistence	
Date	Description of Approved Duties	Time of		of		Allowance		Expenses		Allowance £	
OCT	including Locations (From & To )	Departure	Return	Travel	Claimed	£	P	£	P		
9	Education Missist. Panel	Home 4.0	11.0	<a 2<="" th=""><th>6</th><th>ļ</th><th>_</th><th></th><th></th><th>-</th><th>-</th></a>	6	ļ	_			-	-
j	Children Sent + Young paper Sonting Commented	1,50 J.30	6.0	r-	. 6	ļ					_
6	Popil refined one ! Compaso Centre Noill Phenograd Come. The	him 3.30	5.30		7					ļ	_
7	Hamber or by muckey [ARTA FORVOY 7	h 0,10	12.0	j.	. 6				<u> </u>	<u>.</u>	_
. 7	39 Newport St Town of Wostlshops	h 9.30	11.30	۲۰	6.	<u></u>			-		_
2 2	Linear Meeting with residute bourder Actionity	5.30	. 8.30		€.		BC	LTO	$\mathbf{M}$	BC	
2+	FULL COURCE	6.30	10'0		6				4 19	7.00	-
3/	Planing Sile VISI'S & 6 for Com HingAn	10.30	12:0		6,			5 NOV	2007		1
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CLAIMS MUST BE SUBMITTED BY THE 2nd OF EACH MONTH TO GUARANTEE PAYMENT THAT MONTH.

# Members' Allowances Claim Bolton Council

				- A	BO WONL BY		Pay No	
	TRAN RUSHTON Home Addre		AN OLO	<del></del>			<del></del>	
	iel Vw GoL 戸 Registration			Exact CC	C 178/	l P	Month Not	20 0 7
(b) (For Car Allow regard to the use (c) (For Car Allow I have actually other payments.	rance claims only) I have actually and necessarily incurred the milea rance claims only) I am the holder of a full, current and valid driving I se of my car on Council business.  rance 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 according the latter of the council o	six years in order to the purpose of ena lance with the rate t for travelling or su	comply with H bling me to per s determined b ubsistence expe	e applicable), a IMRC regulatio form duties as y Bolton Counc enses	ons. s a Member of Bolton G	Council, I have		s and made
or allowances,	or financial loss allowance or attendance allowance in connection with inserted on this form are correct, and I understand that fraudulent clai	the duties indicate	ed on this form.	C	ıbsistence T	3.5%:	Total Miles	50· V
Signed		Date 4 DEC 07			ubsistence NT		For Pay	roll Use Only
	xarhined this allowance sheet, the figures recorded are reasonable, ar	d the expense was	s necessary.	Exp	penses NT		Input by	
Authorised	Members' Services Date			Cal	arer's Allowance		Date	
Date	Reason for Journey (including From and To)	Tim Departure		Miles Claimed			ares and r Expenses C	Dependent arers Allowance
7	SITE VISITS + PLANNING Subfox Come MORGAN	90	5.15	6	£ 3=88	p £	p £	p p
2	SEMINAR AFFORDABLE WARMIN	9.30	2.5	6	£	p £	p £	р_
7	ARIA FORUM	6-15	9.45	2	£	p £	p: £	р
8	EXERNAL ORGANISATION SERVITING CHTER	1.30	4.38	6	£	p £	p £	
13	POG and STATEGY + FINANCE	2.0	4.0	6	£	p £	p. £	<u>p</u>
14	Young PEOPLEST STORT PDG	5-0	7-0	6	£	p £	p. £	р р
19	STANDARDS CONDITTEE	2.30	)		£	p £	p £	
29	DDG Grp Affairs		6.0}	6	£	p £	p £	р
23	Representing Concilat Grancos ( E) Elliton CENTRE	9.0	3.30	6	£	p £	p: £	
30 *	Appeals Panel - "Employee Discipline"	8.45		6	£	p £	p £	
					£	p £	p £	
					<u>  £</u>	p £	p £	
				Total Mile			al Amount	Total Amount
-	enter the number of miles. Do not calculate an			50	£ 3-88		p £	*
	more lines, please use a Members Allowances	Additional S	heet		• • •		al Sheets Used	
PAY-M1 12:10:2007	All claims must be signed and authorised by Payroll Share arvice C	riviempers: Ser Centre, 5th Flo	or, Paderbo	e payment c orn House,	can be made, and , B n BL1 1JW	SHOULD DE S	mandh 9	*

## Members' Allowances Claim

PAY-M1

12.10.2007



Name	RUS	SHTON		Home Address	s · }	ARRAN S	2265 ق	2A-i	97	3R109E			Pay		
		el VW	GOLF	Registration	4		Exac	LCC	1	781		Mo	onth DEC	<u> </u>	JAN 2007
licertify that: (a) (For Car (b) (For Car regard to (c) (For Car (d) I have ac	r Allowa r Allowa o the use r Allowa ctually a	nce claims only) nce claims only) of my car on Cou nce claims only) nd necessarily inc	I will retain VAT receipts co urred expenditure in travellin	rrent and valid driving lice vering all journeys for six ng and subsistence for the	years in ord e purpose of	er to comply with H enabling me to per rates determined b	MRC reg form duti	ulations. es as a N	/lem	ber of Bolton C	ounc	il, I have a	ctually paid the f	ares an	nd made
(e) Except a	Except as shown, I have not made, and will not make, any claim.				cetin connection with the duties indicated on this form.				ubsistence T		_	.NO OL 3,88	Total Miles		67.
(f) The part	iculars i	nserted on this for	m are correct, and i underst	and that traudulent claims	may resuit	in discipiniary acto	n. <b>7</b>			ence NT		<del></del>			Use Only
Signed		and the second s	Mer	nber Date 26/	12/08	}	_	Exper			<u> </u>		Input by	( V ) ( V )	CM
certify that I have examined this allowance sheet, the figures recorded are			Date	tne expense	was necessary.	1	i '		Allowance	-	·	Date		3.4.08	
Authorise Date	· · · · · ·		Reason for Journ	iey	T Departu	ime of ire Return		les med		Subsisten Allowanc		Far Other	es and		Dependent ers Allowance
		0 11	including From an) المساطرة	Schwilling Company	1-3 o	6.35	6	·		£	p	£	р	£	р
	cil	Lhibbens y	rucio PDG et by	Jorng teaple	1.30	7.30	6			£	p	£	p:	£	р
1	3.		4 Houton Fold PD	and the second s	900	12.30	6			£	p	£	p.	£	р
<i>i</i> 2			Sile Visile-deputy	to me inides	6.30	10.30	6			£	p	£	p.	£	р
12	J	FOLL CO.		*\\\\ - \	9.0	5.30	6			£ 3- 88	р	£	p:	£	·p
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16			shock Area forward		1-30	<del>3</del> 1 20	6		<u> </u>	£	р	£	p.	£	р
i 7		Erternel	organisation School	ey committee	1, 20			Miles	1 L	Total Amo			Amount	l	otal Amount
Disease	Jones	enter the mu	mber of miles. Do	not calculate an a	mount f	or payment.	6		Ìſ	£ 3.88	р	£	р	£	р
			please use a Memb				- nav	ont con					Sheets Us	ed	

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

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

# Members' Allowances Claim Bolton Council



Name F. A	LAN RUSHTON Home A	ddress I A	RRAD CLO.	SE LAS	YBRIDG	E Bocton				حريب
Car Make/Mod		ation <b>William</b>		Exact CC	1781		Mo	onth Feb		20 0.8
(b) (For Car Allow regard to the us	rance claims only) I have actually and necessarily incurred the rance claims only) I am the holder of a full, current and valid on the first confidence of a full, current and valid of the first confidence claims only) I will retain VAT receipts covering all journers and necessarily incurred expenditure in travelling and subsister	inving licence and inc	or to comply with F	e applicable), al IMRC regulation	ns i nave coi	nplied with th	e counciis			
other payments	s shown on this form, and that all amounts claimed are strictly in	n accordance with the actment for travelling	e rates determined t or subsistence exp	enses	FOR	MEMBE		RVICES L	JSE (	ONLY
or allowances, (f) The particulars	or financial loss allowance or attendance allowance in connection inserted on this form are correct, and I understand that fraudule	ent claims may result	in disciplinary action	<u>γ</u> π.	sistence '	<b>⊢</b>		Total Miles		94
Signed <i>3</i>		10 Merch o		Sub	sistence	NT		<b>a</b> '	yrol	Use Only
I certify that I have e	xamined this allowance sheet, the figures recorded are reasona	able, and the expense	e was necessary.	Ехр	enses NT	•		input by	.	CM
Authorised	Members' Services Date			Car	er's Allow	ance		Date		3.4.08
Date	Reason for Journey (including From and To)	how T Departs	ime of home are Return	Miles Claimed	Allo	sistence wance	Other	es and Expenses	Care	Dependent ers Allowance
6 Feb	Planning Presentation Bornthwaite	12.30	3.0	6	£	р	£	р	£	р
7 "	Site Visit Burnttwaite	10.30	1)-30	4	£	р	£	р	£	р
12	Corporate Strategy + Finance PDG	3,6	5- 15	6	£	p	£	р	£	р
rs	Childrens Services + Young People + Spirks Scrutt	NO (onn. 1.30	4.0	6	£	р	£	р	£	р
20	COUNCIL [BUdget]	6.30	9.15	6	£	p	£	р	£	р
26	APPEALS - re conveyed	8,30	2,05	6	£	р	£	р	£	р
27	FULL COONCIL	6.30	10.20	6	£	р	£	р	£	. р
28	Young People + Spails PD C.	5'00	7.0	6	£	р	£	; p	£	р
	J .				£	р	£	р	£	р
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	1		_	Total Mile		Amount	Т.	l Amount		otal Amount
Please only	enter the number of miles. Do not calculate	te an amount f	or payment.	46	£	р	£	·   p	£	р
If you require PAY-M1 12.10.2007	more lines, please use a Members' Allowa All claims must be signed and authori Payroll Share e	sed by Members'	Services before	e payment ca orn House, I	an be mad	e, and sho		Sheets Us nt to	ed	

# Members' Allowances Claim Bolton Council



Name Ruc	HTON F. A. Home	ddress	1 ARG	SAN CL	osé i	Bal	(000 BE				No.	
Car Make/Mod		ation			Exact CC		ገ 8 (		Mo	onth 📉	A RCH	2008
certify that:- a) (For Car Allowa b) (For Car Allowa regard to the us c) (For Car Allowa d) I have actually a	ance claims only) I have actually and necessarily incurred the ance claims only) I am the holder of a full, current and valid of e of my car on Council business.  ance claims only) I will retain VAT receipts covering all journed and necessarily incurred expenditure in travelling and subsisters shown on this form, and that all amounts claimed are strictly in n, I have not made, and will not make, any claim under any entertains.	eys for six to	years: in order to	comply with Hi	MRC regulations form:duties as a	s. :Mem	•	ounci	l, I have ac	ctually paid the	fares la	nd made
<ul> <li>e) Except as show or allowances, or</li> </ul>	n, I have not made, and will not make, any claim under any en or financial loss allowance or attendance allowance in connect	ion with the	e duties indicated	on this form.	Subs	siste	ence T			Total Mile		
(f) The particulars	inserted on this form are correct, and I understand that hadden	CH Claims	artay rodate in are	orbition) arters	i I	siste	ence NT			For P	ayro	li Use Only
Signed:	Member Date 3	able and	たん 200% the expense was	necessary	Expe	ense	es NT			Input by	•	
	amined this allowance sheet, the figures recorded are reason  Date	able, and	ille expellae was	necoodary.	7 '		Allowance			Date		
Authorised Date	Reason for Journey (including From and To)		Time Departure	of Return	Miles Claimed		Subsisten Allowanc			es and Expenses		Dependent rers Allowan
	Home to THAIN Healt Scroting Sub for FA	عمر <i>د</i>	9 - 0	12.10	6	<b>-</b>	£	р	£	þ.	£	
4 March	Upono for Wasthoughbor. Courses Contra west Co	agrant muther	3,30	6.0	7	7 [	£	р	£	p.	£	
4		MALL ROL	6' 15	9.15	5	7	£	р	£	p	£	
5	home to Lashack Parish Hall. Area Forum.	-1)	5:30 >	<u> </u>		<b>1</b>	£	р	£	þ	£	
10	Special Coursel meeting - home to T/4		\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	8,3	6	<b>1</b>	£	р	£	р	£	
• •	followed by presentation to Group from House	nd hals	90	11.0	6	7	£	р	£	,p	£	
]{	50822 /	7117	1.30	£130	S	7	£	р	£	p	£	
/3	home to THEIL Ext Dog contention come		3/30	5.20	6		£	р	£	р	£	
f7	HOW LAND GAMENAR NOW IT I ARRIVED		30	5.30 ?	<del></del>	<b>-</b>	£	р	£	р	£	
19	how to THAIL PDG Corp Affects home to Thorn Lea Clock chorley was Red	·	9,45	11.15	3	<b>-</b>	£	р	£	р		
20	home to Thorn Lee Close chorby Ben 120	NEW.	, ( ,	11 13		─  <sup>*</sup>	£	р	£	p		
				· ·		<del> </del>	£	р	£	p		
			<u> </u>		Total Miles	I- Լ Տ	Total Amo			l Amount		Total Amount
Dlones sinhy	enter the number of miles. Do not calcula	ate an la	mount for p	ayment.	4-8	7 [	£	р	£	þ	£	
	Ilman placacius autilembars Allows	ances A	Additional S	heet			Number of				sed	
PAY-M1 12:10.2007	All claims must be signed and author  Payroll Shared	rsea :bv 'i	Members Sei	AICES DEIOL	e payment ca orn House, I	an b	e made, and	sho				<u> </u>

### SHAW

### **BOLTON METROPOLITAN BOROUGH COUNCIL**

MEMBERS ALLOWANCES CLAIM

1		٠ [ ر
7-1	IUN 2007	
Payroll	Section	<i>,</i>
Deve Me		

		The state of the s
Claim for Month of MAY 20 07	Name of Member COLIN SHAW	Pay No.
	(Block capitals please)	
Car (Make/Model) JAGUAR XJ8	Registration No. <u>Exact</u> Cubic Capacit	y <u>4200 cc.</u>

### 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.

l have adequate insurance cover for the use of my vehicle on Council business.

(For Car Allowance claimants only)

(b) I am	riving licence and
Signed	
Approved	

**MEMBER** 

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

		Amount	·	wines	
		£:p		70	
*	Subsistence Allowance	:	Normal Mileage		Details input onto Payroll
	Subsistence Allowance (Taxable)	:			By: CM
	Travel Reimbursement (e.g. Car Park, taxis)				Date: & 6.07
	Dependent Carer's Allowance	:			

ll system:

### 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		ent Carers Fares and other		Subsistence	
		HOME Tim	e of HOME	of		Allow	апсе	Exper	ses	Allowa	nce
WEY	. including Locations (From & To)	Departure	Return	Travel	Claimed	£	p :	£	P :	£	; P
141	(FADER) & WHIPS	3.00	5-00		3		<u> </u>				<u> </u>
141	MANGER DEVEROPENTENT	5.00	7.00	5	<u></u>					<u></u>	
ISH	COPE OF CONDICT	400	6.30		3	:					
16h	MAYOR MAKING.	'								-	
1812	WIEWENS GREENFOD (THE ORCHANDS	10-30	12-30		5						
2111	SHORTLISTING (THE ORCHANDS)		5-70		5						
21	LICENSING AGENDA METERING.	9.30	<u> </u>							<del></del>	
	CRETING TO DES GROSSIO		1.00		3						Í
13 rd	ANNUAL MEETING COLOCIA	6.30	8,00	<u> </u>	2		İ				-
15h	MEMBER ONLY MEETING (FORUM)		11.30		3						
25/2	WIEMPER GOOD NEETING (FORCHTEPS)		_		7		1				<del></del>
LON	CONTENDENDS (THE ORCHAPEDS)	1200	560				<u> </u>	·			<del>                                     </del>
			`!				<u>:</u>				<del></del>
,											
1											<u> </u>
<u>.</u>	BOLTON	MBC					<u> </u>				<del> </del>
						<u> </u>	-				
		nya ngin Kanad					!				<u> </u>
				, <u></u>			<u> </u>				<u> </u>
	PENSIONS :	SECTIO	NI				<u> </u>				<u>!</u>
	Tuesday of the state of the sta										
<u> </u>					@ <sup>30</sup> 43·1	12	93				

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.

## OPPO

### **BOLTON METROPOLITAN BOROUGH COUNCIL**

### MEMBER'S ALLOWANCES CLAIM

Claim for Month of	JU16	2007	Name of Member (Block capitals please)	COLIN	SHAW	Pay No.	7
Car (Make/Model)	JAGUAR	XIS	Registration No.		<u>Exact</u> Cub	ic Capacity 4200_cc.	
the rates determined by B I declare that the particula	ouncil; that I have act olton Metropolitan I ars inserted on this for r financial loss allow	tually paid the fares and made Borough Council. orm are correct. Except as sho vance or attendance allowance	e other payments shown on thi wn, I have not made, and will a in connection with the duties	s form; and that t not make, any cla indicated on this	the amounts claimed are some im under any enactment form.  uncil business.	strictly in accordance with	ıly)
Signed		MEMBER		Date	30/06/07	•	
Approved				Date		•	. '
		FOR OFFICIAL U	JSE ONLY ( Completed by	Committee & M	embers Services)	· · · · · · · · · · · · · · · · · · ·	·
	Amount		Miles	1			
* Subsistence Allowance	£:p	Normal Milea	ge SQ		Details input onto Pay	roll system:	
Subsistence Allowance (Taxable)	:				By: CM	,	
Travel Reimbursement (e.g. Car Park, taxis)	:				- Date: 24.7.C	57	
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.

<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.

	Particulars of Journeys			Mode	Miles	Dependen		Fares an	i	Subsist	
21/5/21	Description of Approved Duties, including Locations (From & To )	HONE Tin	ne of HOME	of Travel	Claimed	Allowa £	ince p	Expe £	nses p	Allowa £	ance T
5K	ENVIRO EXEC	900	11.00		3						1
S.K	LICENSING COMMITTEE	1.30	5.15		3					<del></del>	T
6th	LICENSING TRAINING	4.30	7.30		Š						Ī
7K .	CONRE TOR BUND AGM	7.00	9.45		13 609	ssengek Ri Chinel	Cilian	(۲)			
_	INTERVIEWS S. GERMANNE NURIERY	1.00	4.00		5			•			
1115		<del>                                     </del>	10.45		3						
IL	GOVERNORS MEETING THE ORCHARDS	1	4.30		5						T
1314	GEMAS (DEROTY) CASTLE HILL	1.45	4.30		5						
131	HTL FORUM (DUTTON TRUST)	600	10.00	•	4				_		-
141-	CONGRESION CHARGE METATING	4.20	7.00	4.	?						
1412	R.A.F. PRESENTION	600	10.00	•	3						
18VL	THE EXEC	2.30	4.30		3						
191h	PERSONAL DEV MEETING CAPTIETHILL	230	4.30	-	5						
20 cm	THRAUGHTS WITH OFTED CHECKSTHEE		4.30		5						
2156		9.00	12:30	•	5	,					
211V	TIF MEETING	2.3=	5-00		3			·			_
2-22		8.3 =	11.30		3						-
A .	PERUTAT TRAINING	345	6-15		3						_
26 27	PLICENSIAS COMMITTEE BULIERO SERUTINI	(30 (30	4.30 95.00		3					···	
28	TIP MEETING- CATARCHENS CENTRE FOR BUILD	4.00	6.30		3 689 43-10						

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	JULY	_20 <u>6_7</u>	<del> </del>	COUN JA	AW.	Pay No.	
		-0	(Block capitals please)			11.9	
Car (Make/Model)	aguar X	18	Registration No		Exact Cubic Capac	ity <u>4200                                   </u>	•
DECLARATION:  (a) I declare that I have actually Metropolitan Borough Couthe rates determined by Bol	ncil; that I have actua	lly paid the fares and made othe					·
		n are correct. Except as shown, I ce or attendance allowance in co			any enactment for travel	lling or subsistence	
(b) I am the bolder of	driving licence	and have adequate insurance	cover for the use of my v	rehicle on Council bu	siness. (For Car A	Allowance claimants only)	
Signed		MEMBER	•	Date 31/07	07		
Approved				Date			
		FOR OFFICIAL USE	ONLY ( Completed by Co	mmittee & Members S	ervices)		
	Amount		Miles	1	,		
•	£:p		60			•	
* Subsistence Allowance		Normal Mileage	109	Details	input onto Payroll syst	tem:	
Subsistence Allowance (Taxable)	:			Ву:	cm		
Travel Reimbursement (z.g. Car Park, taxis)	<u>.</u>			Date:	3.8.07		
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.

<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.

	Particulars of Journeys			Mode	Miles	Dependent Carers				Subsistence		
	Description of Approved Duties,	Tin	e of	of	,	Allow	ance	Exper		Allowai £	nce.	
<b>として</b>	. including Locations (From & To )	Departure	Return	Travel	Claimed	£	. P	£	P :	<u></u>	<del>-</del>	
2nd	Executive	2-30	4-43		3	<u> </u>				<u></u>	H	
2nd	GMWDA PRESENTATION	6-00	9.00		3		<u> </u>				ŀ	
3.071	CHINESE DELETATION	2.30	5.00		3				<u>i</u>		1	
al	GOVERNORS MEETING THE ORGHAND		5.30		ځ						÷	
) HC	TIP MEETING	2.30		_			<u> </u>		<u>.                                    </u>		╀	
٠ د	IN FRAMER COUNCIL		7.30		3						1	
OH,	EXEL MEMBER < 95	1.30	4.30		3	<u> </u>					1	
111	FILL CURCIL	<u>6.30</u>	1000		3		<u> </u>		<u> </u>		<u> </u>	
lbtk.	SPECIAL FORWIN WH HIGH.	6:30	60.00		5				<u>i                                     </u>		+	
18	BRIEFING SESSON NE INSPECTION	9.00	11-00		3		<u>,                                      </u>	*			+	
18m	BEMAS	1.30	K-00		4	1.00		5 00 3 3	<u> </u>		+	
1916	CONTRE FOR XIND COMMITTEE	7,00	10.00			ASSENCE	AC NYK	y WKI	324		1	
196	LEADERS & WAMPS	3.30	4.45		3	<u> </u>					-	
23	TIF MEETING	1.30							<u>i                                     </u>	<del></del>	1	
23 6	EVEL MEGTING				3	<u> </u>			<u> </u>		1	
4 1	(CEDSING	1.30	4.30	· ·	3	<u> </u>			<u> </u>		-	
7	C95 850	8.30	10.30		3		<u> </u>		-		-	
27	THE ORCHARD AT PADELLOW HOUSE	1-30	8.30		3		<del>-</del>		<u>.</u>		-	
3 (	ENURO SCOTTING AGEND MAETING	9-30	11.00		3		<u> </u>				-	
5 1	MOCK INTERVIEW JESSION GRINSKETON	230	5:30		3						4	
<u></u>	amounts received by way of Travelling & Subsistence from any other Auth		•		@69 4301	29	74					

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 AU	190ST	2007		COUN SHAW	Pay No.	<u> </u>
Car (Make/Model) A	GUAR XJ	8	(Block capitals please)  Registration No.	Exact	Cubic Capacity 4200 cc.	
Metropolitan Borough Cou the rates determined by Bol I declare that the particular	ncil; that I have actually Iton Metropolitan Borou s inserted on this form a financial loss allowance	paid the fares and made other gh Council. re correct. Except as shown, I h or attendance allowance in con	payments shown on this ave not made, and will no nection with the duties in		are strictly in accordance with	
Approved		FOR OFFICIAL USE C	NIY (Completed by C	DateCommittee & Members Services)		
		· ·		1		
	Amount		Miles			
* Subsistence Allowance	£:p	Normal Mileage	31.	Details input onto	Payroll system:	
Subsistence Allowance (Taxable)				By: 5 Cawan		
Travel Reimbursement (e.g. Car Park, taxis)	:	•		Date: MonJoh	6 186pt.	
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.

<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.

	Particulars of Journeys			Mode	Miles	Dependen	t Carers	Fares and	l other	5ubsisten	
Date	Description of Approved Duties,	HOME Tim		of		Allow	ance	Expen		Allowan	
NG.	including Locations (From & To )	Departure	Return	Travel	Claimed	£	p :	£	P ·	£	_
312	LKENSING APPEAL	9.30	11.45		3		<u> </u>	· · · · · · · · · · · · · · · · · · ·			_
6 th.	THE EXECUTIVE	2.30	4.00		3						
711	EXEC MEMBER ENVIRO SERVICES	1.30	3.30		3						Ļ
1412	LICENSING COMMITTEE	1.30	400		3	<u> </u>					_
	OLDER PEDILES PARTNERSHIP	9-30	12.30		7		<u> </u>				_
	ENVIRO SCROTINY	5.30	8:30		3		<u>!</u>				-
16/2	ENVIRO GD	9.00	11.30		3				<u> </u>		-
	TAXI - PIE HIRE CONSULT PANEL	9.30	11:30		2				<u> </u>		
17n	PERFORMANCE MAN. TRAINING	12-10	4.00				<u> </u>			<u> </u>	-
	CANTRE SCIND	7,00	530	·····	3	ļ			<u> </u>		I
				·		<u> </u>				<b></b>	_
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	105.								<u> </u>		
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					31						-
					43.1	13	36		ľ		-

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.

## DAID.

### **BOLTON METROPOLITAN BOROUGH COUNCIL**

### **MEMBERS ALLOWANCES CLAIM**

EMBER 200	<del></del>	ne of Member k capitals please)	DLIN J	HA W	Pay No.	
NAK XJ8	·			Exact Cubic	Capacity 4200 cc.	
that I have actually paid Metropolitan Borough C erted on this form are co ncial loss allowance or at	the fares and made other paymouncil.  rrect. Except as shown, I have notendance allowance in connection	ents shown on this for ot made, and will not r n with the duties indic	m; and that the amo nake, any claim und cated on this form.	unts claimed are st er any enactment f	rictly in accordance with or travelling or subsistence	
	MEMBER	``` <b>`</b>				
FO	R OFFICIAL USE ONLY	( Completed by Con	ımittee & Members	Services)		
Amount     £:p     :     :	Normal Mileage	Miles 23	Details By: Date:	s input onto Payr	roll system:	
	d necessarily incurred exthat I have actually paid Metropolitan Borough Control loss allowance or attriving licence and har FO	d necessarily incurred expenditure in travelling and subset that I have actually paid the fares and made other paym Metropolitan Borough Council.  The erted on this form are correct. Except as shown, I have not actual loss allowance or attendance allowance in connection driving licence and have adequate insurance cover MEMBER  FOR OFFICIAL USE ONLY  Amount £: p	Registration No.  d necessarily incurred expenditure in travelling and subsistence for the purpose that I have actually paid the fares and made other payments shown on this form Metropolitan Borough Council.  erted on this form are correct. Except as shown, I have not made, and will not remainable to a shown allowance or attendance allowance in connection with the duties indicated driving licence and have adequate insurance cover for the use of my very members.  FOR OFFICIAL USE ONLY (Completed by Company Amount Amount Amount But I will be a substitute of the purpose of	Registration No.  d necessarily incurred expenditure in travelling and subsistence for the purpose of enabling me to per that I have actually paid the fares and made other payments shown on this form; and that the amount of the form are correct. Except as shown, I have not made, and will not make, any claim underical loss allowance or attendance allowance in connection with the duties indicated on this form.  driving licence and have adequate insurance cover for the use of my vehicle on Council by MEMBER  Date  FOR OFFICIAL USE ONLY (Completed by Committee & Members Amount for the form of the form o	Registration No. Exact Cubic Registration No.	Registration No.  Exact Cubic Capacity 4200 cc.  d necessarily incurred expenditure in travelling and subsistence for the purpose of enabling me to perform duties as a Member of the Bolton 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 Metropolitan Borough Council.  erted 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 notal loss allowance or attendance allowance in connection with the duties indicated on this form.  driving licence and have adequate insurance cover for the use of my vehicle on Council business.  (For Car Allowance claimants only)  MEMBER  Date  Date  FOR OFFICIAL USE ONLY (Completed by Committee & Members Services)  Miles  Exact Cubic Capacity 4200 cc.

### 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	other	Subsiste	nce
Daig	Description of Approved Duties,	HOWE Tim	le of Home	of		Allowa	nce	Expen	ses	Allowar	uce
EM (5)	. including Locations (From & To )	Departure	Return	Travel	Claimed	£	p	£	P	£	P
3-0	ENDIED EXEC	10-00	12.00		3						<u> </u>
3 1	Exec.	2.30	<i>५</i> 30		3						
412	backs silver intervenis	5.00	12-00		3						
in the	THE ERCHARDS (CONFRINGES)	(0,00	2-00		57.						<u> </u>
(- 4=	REM CONSCIENT MIRROWS	1.30	3 20		3					-	<u> </u>
idk	LICENSING COMMITTEE )	1.00	4.00	>	<u>گ</u>				,		<u> </u>
116-	LEMOURS + WARS.			5	-						
136	Licrosing Sib-committee	9.30	11.45		3		<b>El</b> izora,	and the second second			
								Turks of the second	- Transfer		
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		<u> </u>		l	23.6						1
Deduct any	amounts received by way of Travelling & Subsistence from any other Autho	orities or boo	lies		43-1	9	91			:	

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.

### SILVESTER

BOLTON METROPOLITAN BOROUGH COUNCIL

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*	STA

MEMBERS ALI, OWANCES CLAIM

14 major	*	MEMBERS	
		-110 A	TO IA S
00	011 20007	Name of Member CLLR	V///
Claim for Month of	20 120	(Block capitals please)	
12 nasc	A CIVICAVI	Registration No. 🗘	
Car (Make / Model) [U/V]	)11 011		

Exact Cubic Capacity

(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

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.

ine licence and have adequate insurance cover for the use of my vehicle on Council business. (b) lam MEMBER Signed

(For Car Allowance claimants only)

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

	•	FOR OFFICIAL USE ONL	Miles	
1	Amount		1006	n II medari'
	£:p		86.	Details input onto Payroll system:
Subsistence Allowance	:	Normal Mileage		cm cm
Subsistence Allowance	:			Ву:
(Taxable)				Date: 4.6.07
Travel Reimbursement (e.g. Car Park, taxis)	:			
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.



HOME = H WM = WESTH TOWN HARR

	Particulars of Journeys	TH		Mode	Miles	Dependen		Fares and		Subsister Allowan	ļ
Date	Description of Approved Duties,	Tim Departure	e of Return	of Travel	Claimed	£	p p	£	p	£	p
	including Locations (From & To)		8-0UM	CAR	7						
2/4/07	CORP SCRUTINY FROM HOME TOWN HALL	9-30	1400	OAR	7		<u> </u>				<u> </u>
4/4/07	H/R SHADON MOUTING (DAVID WINSTAMBY) "	1-30	3-30	CAR	7		<u> </u>		<u> </u>		<u>:</u>
44101	MEMBERS DEV GROUP H TH.	3-30	6-00	OAR	7			<del> </del>	1		<del> </del>
2/4/07	Vijovi	900	11-30	٨	7		<del>-</del>	<del> </del>	<u> </u>	<del> </del>	<del></del>
19/2/0 7	PROSTITUTION FORUM 11	900	12.00	и	1 7						<u> </u>
17/8/07	3/60/1/2000	12-00	1-00	n	17	<u> </u>					-
18/4/07	BMAS (STARTING POINT) FROM TH	1-30	400	ι(	3						<del></del>
18/4/0/	STARTING POINT TO HOME	4-00		и	3_			-	<b></b>		<del></del>
2010/07	10000 MOUTING N-7 TH	10-30		n.	7.	<del>                                     </del>	<u> </u>			<del> </del>	+
20/4/07	FUSION EMANT REUBOR 17 -7 REUBOR	6-00	11-80	<u>u</u>	4		<u>-</u> i			<del> </del>	1
24/4/07 24/4/07	HIREXEC HOTH	9-30	1200		<del> </del>				<u>:                                      </u>	1	
2014/07	SLICC	6-00	10-15	u		<del> </del>		<del>                                     </del>		1.	
25/4/07		<u> </u>	<del> </del>	<del> </del>	+ 7		<u> </u>			1	
24/007	LOCAL PLANNING MING -CHUNDOR WITH	5-30	7.30	<u> </u>	6	<del> </del>	<u> </u>	+-			
ON TIUT						-					
					-	_					
-					+						
					70						
	CT. W. & C. beietenes from any other Au	thorities or h	odies		186	>					

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**

ik-		* MEMBER!	S ALLOWA NCES CLA	IM	4:	
Claim for Month of MA	DA CINC 1	007 N	Name of Member Charles Block capitals please) Registration No.	INIA	SILUSTUR Pay No.  Exact Cubic Capacity 1803 cc.	
DECLARATION:  (a) I declare that I have actually an Metropolitan Borough Council the rates determined by Bolton I declare that the particulars in expenses or allowances, or final (b) I am the bolden of a correct Signed	d necessarily incurred ex ; that I have actually pai Metropolitan Borough ( serted on this form are c	Council. correct. Except as shown, I hav attendance allowance in conne	e not made, and will not make ection with the duties indicated ver for the use of my vehicl	, any claim under a I on this form.	rm duties as a Member of the Bolton claimed are strictly in accordance with my enactment for travelling or subsistence iness.  (For Car Allowance claimants only the contract of the contract	1)
Approved		CTRICIAL LICE O	NLY ( Completed by Commi	ttee & Members Se	rvices)	
	F	OR OFFICIAL USE O.	Miles			
	Amount £:p	Normal Mileage	#5	Details:	input onto Payroll system:	
* Subsistence Allowance Subsistence Allowance (Taxable)	:	Mother Amore		Ву:	CM	•
Travel Reimbursement	•			Date:	1.6.07	

\* 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. Notes: 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 Journe		Mode	Miles	Dependent Carers				Subsistence Allowance		
	Description of Approved Duties,	Tim	e of	of		Allow		Exper	- 1	£	p
Date	including Locations (From & To )	Departure	Return	Travel	Claimed	<u>£</u>	<u>Р</u>	£	P E		
14/5/07	ILOCO HATH	200	400	CAR	7						<u>!</u> !
19/5/07	LAUNCH MEMBERS DEV CHARTER 4-TH	500	700		7				<u> </u>		<del>!</del>
16/5/07	MAYOR MAKING	10.30	500		7	<u> </u>	<u> </u>		<u> </u>	<u> </u>	<u> </u>
17/5/07	CON 2 H-WEWONITY C	500	7-00		7		<u> </u>	<del>                                     </del>	<del></del>		1
21/2/07	JOHN HOLT MEETING	4-30	8-00	-	17_			<del> </del>	<u> </u>		<u> </u>
3/3/0/	LCP,			<u> </u>					<u> </u>		<del></del>
73 K/67	COUNCIL	5-00	8-30		7				<u> </u>	<del>                                     </del>	
<i>ار اداد</i> م									<u> </u>	<del>                                     </del>	<del></del>
			<u> </u>			<u> </u>		<u> </u>	<u> </u>	<del> </del>	<del>                                     </del>
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`			<u> </u>		<u> </u>	<del> </del>		<del></del>	<u> </u>	+	<u> </u>
						<u> </u>			+-	1	+
			<u> </u>			-			<del></del> -	<del> </del>	<u> </u>
<u></u>					<del> </del>						<del></del>
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		'							<u> </u>	1	-
			1				<u> </u>	<u> </u>	<u> </u>	+	
					-				<u> </u>	+	
											+
<u> </u>	I seeized by way of Travelling & Subsistence from any other As				4	2					

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**

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### MEMBERS ALLOWANCES CLAIM

Claim for Month of JUN	re	20 <u>07</u> N	ame of Member	TULIA SILVESTER Pay No.
·			ock capitals please)	10118
Car (Make/Model) HUN	DA CIVIC	R	egistration No.	Exact Cubic Capacity 545 cc.
Metropolitan Borough Counc the rates determined by Bolto	ril; that I have actuall on Metropolitan Boro	y paid the fares and made other pay ugh Council.	ments shown on this for	of enabling me to perform duties as a Member of the Bolton n; and that the amounts claimed are strictly in accordance with
I declare that the particulars i expenses or allowances, or fir	nserted on this form nancial loss allowanc	are correct. Except as shown, I have : e or attendance allowance in connect	not made, and will not m ion with the duties indic	nake, any claim under any enactment for travelling or subsistence ated on this form.
Signed	at-driving licence a	nd have adequate insurance cove	er for the use of my vel	hicle on Council business. (For Car Allowance claimants only)  Date 28/07/07  Date
Approved		FOR OFFICIAL USE ON	LY ( Completed by Com	
ı	Amount	,	Miles	
	£:p			
* Subsistence Allowance	:	Normal Mileage	111	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.

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



T. M = TOWN MALL

	Particulars of Journeys	122.		Mode of	Miles	Dependent Carers Allowance		Fares and Expens	ľ	Subsiste Allowar	
Date	Description of Approved Duties, including Locations (From & To )	MO MOTim Departure	e of Return	Travel	Claimed	£	p	£	· p	£	P
5/6/07	MEETING WITH KETTY DAVIES - T'H	9-00		CAR	7.			į			ऻ—–
216100	LAUNCH EMBRACE PROTECT	5-30	8-30		7		1				<del>!</del>
6/6/07	mem TH.	5-00	7-30		7	ļ	<u> </u>			<del></del>	<u>i                                     </u>
3///07	SSTG TH.	2.30	430		7		<del> </del>				<del>-</del> -
12/6/07	CONSULT RE HOUSING FUTURES T.H	200	400		7		ļ	<u> </u>			┼
13/6/07	TON FURENCE RETHURNWELL WESTY TH	10-30	12-00		7					<u> </u>	<u> </u>
B/6/07	EXEC HIR TH	2.30	500		7				<u> </u>	<del></del>	
10/6/07	YP POLITRY ARTS LAUNCY COTAGON	500	600		17		<u> </u>	<u> </u>	<u> </u>		<u> </u>
18/6/07	LANNCH REDUCEE EXHIB UNITY CENTRE	4-30 =	7~30		17	<u> </u>	<u> </u>				-
19/6/07	JOHN HOLT COMMITTEE WESTH HIGH SCHL	4-30	9-30		6	<u> </u>	╂		<u> </u> 		-
110101	[ & FOR IM )				ļ <u>.</u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<del> </del>	<del></del>
20/6/07	MEETING MEMBERDEN TH	3-00	400		7	<u> </u>	<u> </u>	<del> </del>	<u> </u>	<del> </del>	+
20/6/07	TIF MEZTING - CHIEF XEC. TH	5-30			17_	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<del> </del>	<del>-</del>
21/6/07	MEATIN SCRUT AGENDA SETTING	900	11-00		1-/_		<del></del>	<del></del>	<u>!                                      </u>	<del> </del> -	+
21/6/07	MEMBER DEV GROUP PLANNING TRY	100	3-00		<del>                                     </del>			<u> </u>	<u> </u>	<del> </del>	
25/6/07	HEALTH SCRUT			<u> </u>	<u> </u>	<u> </u>	<del>-</del>	<del> </del>	<u> </u>	<del> </del>	+-
25/6/07	CORP SCRUT	5-30			1-7-				<u>!</u>	<del> </del>	$\dotplus$
11.7	NOW EMPLOYERS MEMBERS DEV REMEN TH.	300	500	1-	17_		<del></del>		<u> </u>	<del> </del> -	
26/6/07	7000-370-70-0-7						-	-	<u>i                                     </u>	<del> </del>	+-
						-		<u> </u>			<del>-</del>
	11		1.		1111	1	İ				<u></u>

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**

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### MEMBERS ALLOWANCES CLAIM

Claim for Month of	ruy	20	Name of Member <u>TV</u> (Block capitals please)	LIA SILVESTER	Pay No.
Car (Make/Model) HO	NDA CIUC	- <u>DX</u>	Registration No.	Exact Cubic Cap	pacity /545_cc.
Metropolitan Borough Count the rates determined by Bolto	cil; that I have actuall on Metropolitan Boro	y paid the fares and made other ugh Council.	payments shown on this form,	f enabling me to perform duties as a Mem and that the amounts claimed are strictly	In accordance with
I declare that the particulars expenses or allowances, or fi	inserted on this form nancial loss allowanc	are correct. Except as shown, I ha e or attendance allowance in com	eve not made, and will not ma nection with the duties indicat	ke, any claim under any enactment for tra ed on this form.	evelling or subsistence
(b) I am the holder of a curre. Signed Approved	nt driving licence a	nd have adequate insurance o	I	CateOate	nr Allowance claimants only)
		FOR OFFICIAL USE C	NLY ( Completed by Comn	uittee & Members Services)	
·	Amount	,	Miles		
* Subsistence Allowance Subsistence Allowance (Taxable) Travel Reimbursement	£ : p : :	Normal Mileage	91.	Details input onto Payroll s	system:
(e.g. Car Park, taxis)  Dependent Carer's  Allowance	:			Date: 3.8.07	

### Notes:

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

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

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



	Particulars of Journeys	Mode Miles Dependent Car					Fares and other Expenses		Subsistence Allowance		
Date	Description of Approved Duties. including Locations (From & To)	HOMO Tim Departure	e of Return	of Travel	Claimed	£	P :	£	p	£	<u> P</u>
2/7/07	LCP NESTA JOHN HOLT	4-00					<u>!</u>		<u>;                                    </u>	<u> </u>	┼—
1// -/	NJOHN HOUT STEERING		8-00	CAR	7_		<u> </u>			ļ	╬
3/7/07	HIR PD G TH.	2.30.	400		7	<u> </u>	<u> </u>		<u> </u>	<b></b>	╄
1/107	INFORMAL COUNCIL TH.	530	7-30		7		<u> </u>		<u> </u>		<u> </u>
1/1/07	COUNCIL TH.	6-00	9-00		7		<u> </u>				<u>!</u>
	MERE HALL BOARD MERE HALL	9-30	11.30		7				<u> </u>	<u> </u>	<u> </u>
12/7/07	GENOCIDE MEMORALDAY TH	1-30	3-30		7						<u> </u>
15/7/07	(SHADOW PORTFOLIO HOWER)						<u> </u>	<u> </u>	<u> </u>		ᆜ_
11 12	CH 45 COMM TH	1-30					ļ	, ,			<u> </u>
16/7/07		1	500		7			<u> </u>	<u> </u>		<u> </u>
ia) / -	SLICC 17. MGSTING JON GORTON TH.	11-30	1200		7			<u> </u>	<u> </u>		ᆜ_
18/7/07			200						<u> </u>		<u> </u>
18/2/07	1710011	10-00		<u> </u>	7						
19/7/07	TOTELICI - U.C.	9-00	11-30	<b>—</b>	7						
24/7/07			<del> </del>		7						<u> </u>
25/7/07					17						
30/7/07	PROSTITUTION FORUM EVENT MEETING TH.	10-30 9-30			7						
31/7/07	MEMBERDEN TRAINING TH	1730			<del>                                     </del>						
					<del>                                     </del>		<u> </u>		İ		
			<del>                                     </del>			<del>                                     </del>	$\dot{\top}$	1	<u> </u>		
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	amounts received by way of Travelling & Subsistence from any other Au	thorities or bo	odies		91			<u> </u>			

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

						The state of the s
Claim for Month of AV	GUST POLOS(1)		Name of Member (Block capitals please) Registration No.	UUA SILVESTER Exact Cubic Ca	Pay No	
DECLARATION:  (a) I declare that I have actually a Metropolitan Borough Councillation the rates determined by Bolton	and necessarily incur cil; that I have actuall on Metropolitan Borc	rred expenditure in travelling and s ly paid the fares and made other pa ough Council.	subsistence for the purpose ayments shown on this form	of enabling me to perform duties as a Me a; and that the amounts claimed are strict ake, any claim under any enactment for t	mber of the Bolton by in accordance with	
expenses or allowances, or fi	nancial loss allowand	e or attendance allowance in conn	ection with the duties indica	ated on this form.		
(b) I am the holder of a current Signed Approved	nt driving licence a	and have adequate insurance co  MEMBER		Date $\frac{29/08/07}{0}$	Car Allowance claimants only)	
		FOR OFFICIAL USE OF	NLY (Completed by Com	mittee & Members Services)		
·	Amount £:p		Miles			
* Subsistence Allowance	:	Normal Mileage	14	Details input onto Payroll	system:	
Subsistence Allowance (Taxable)	:			By: S Cowoon		
Travel Reimbursement (e.g. Car Park, taxis)	:			Date: monkin & 1		
Dependent Carer's						

### Notes:

Allowance

\* 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>

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



· · · · · ·	Particulars of a	Particulars of			Mode Miles		Dependent Carers Allowance		Fares and othe Expenses		ner Subsist	
Date	Description of Approved Dune	S.	Tim Departure	e of Return	of Travel	Claimed	. Allowa	p p	£	р	£	p
10/-7	including Locations (From & T	JOHN HOLT	4-00	6-00	CAR							ᆜ
3 <i> 8 07</i>		n	6-30	8.30		7_						<u> </u>
15/00	LCP.	TOWNHALL	12-30	•				<u> </u>				┷
5/8/07	HIR PDG	10001011112		400		6		<u> </u>		<u>!</u>		-
1101.0	HIR EXEC		5-00	7-00		6	<u> </u>					ᆜ
6/8/07	MOM FORUM:		300	4-30		6		<u> </u>		<u> </u>		<del> </del> -
0/8/07	and a scouttonil		5-45	7-30	-	6				a francisco de la composición de la composición de la composición de la composición de la composición de la co	15.	$\dotplus$
0/9/07	LORGE CAMA CONST	ANLGY	3-00	# 30		6	1				466 4	$\dot{+}$
2/8/07	COLOR Y TRAIN OF		5-45	8-00		6						
2/8/07 4/8/07	10000 (DAND WINST) SCRUTTNY TRAINING STANDARDS TRAINING	•	400	6-00		6		<u> </u>		<u> </u>		<del>-</del>
4/8/0/	of COUNCIL				•		<u> </u>	<u> </u>	<u> </u>			<del>-</del>  -
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	y amounts received by way of Travelling & Subsi			<u> </u>		1001						

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.

### Members' Allowances Claim

PAY-M1

12.10.2007



Name Council	lor Julia Silvester	Home Address								Pay	NO.	الريبي الم
Car Make/Mod	lel VW Polo SC55	Registration			Exact	CC	1200		Mo	onth OCT	GARLES .	2007
(b) (For Car Allowaregard to the used (c) (For Car Allowaregard to the used (d) I have actually a other payments (e) Except as show a conclusion of the control of the cont	ance claims only) I have actually and necessarily ance claims only) I am the holder of a full, current se of my car on Council business.  ance claims only) I will retain VAT receipts covering and necessarily incurred expenditure in travelling an shown on this form, and that all amounts claimed a m, I have not made, and will not make, any claim unor financial loss allowance or attendance allowance inserted on this form are correct, and I understand to	and valid driving lice g all journeys for six d subsistence for the re strictly in accorda der any enactment fi in connection with th	years in order to purpose of enal nce with the rate or travelling or su e duties indicate	eruncate (where comply with H bling me to per s determined b ubsistence expe d on this form.	MRC reg form duti- y Bolton enses	pie), and pulations. es as a N Council.	r nave complied dember of Boltor	Coun	cil, I have a		fares ar	nd made
(f) The particulars Signed		Date /	AMA 30	1. /		Subsi	stence NT			For Pa	yrol	Use Only
I certify that I have ex	camined this allowance sneet, the figures recorded	are reasonable, and				Exper	ises NT			Input by		1
Authorised 🖣		Date				Carer'	s Allowance	,		Date		
Date	Reason for Journey (including From and To	)	Time Departure	e of Return	Mil Clair		Subsiste Allowar			es and Expenses		Dependent ers Allowance
1/10/07	JOHNHOUT STEERING HOM	E TOWESTH	4-00				£	р	£	р	£	р
7 /	YLCP			8.00	フ	'	£	р	£	р	£	p
3/10/07	REMEW AREA WORKING H	OME TO THA	u 500	630	4		£	р	£	p	£	р
4/10/07	PCT MEDITING H	ome a a	1-30	5-30	7		£	р	£	р	£	р
9/10/07	HOUSING "BIG ISSUES" ME	ome a n	4-45	6-30	Ź		£	р	£	р	£	р
11/10/07	WESTU MARKET MEETING ME	OINE TO WEST	4 830	10-00	7		£	р	£	р	£	р
15/16/07	and the second s	TOTU.	5.30	7-15	7		£	р	£	р	£	р
18/10/07	CON ( CASIAN) H	OME TO TH	500	6-30	Ź		£	р	£	р	£	p
24/10/07	COUNCIL	N U H	6-00	9-30	7		£	р	£	р	£	р
25/10/07	KIN CLIEBS HB DUMPER	" ~ 43 0's	10-30	2-30	Ĺ		£	р	£	р	£	р
25/10/07		10 MI TO TH	5-00	7-00	7		£	р	£	р	£	р
26/10/07	BAA AW ARDS (LIB DUM RE	A HOMETO	700	11-00	7		£	p	£	р	£	р
3/10/07	MUMBUR DEN GROOP YOUR	TEIR TH.	12-30	3-30	Total	Miles	Total Am	ount	Total	Amount	T <u>r</u>	otal Amount
Please only	MUMBER DEV GROUP TEXE enter the number of miles. Do not	calculate an a	mount for p	ayment.	8	3	£	р	£	р	£	р
if you require	more lines, please use a Members' All claims must be signed and	Allowances A	<b>dditional Sl</b> ⁄lembers' Ser	<b>neet</b> vices before	payme	ent can_				Sheets Us	ed [	NIL

Payroll Share Pervice Centre, 5th Floor, Paderborn House, Fon BL1 1JW

# Members' Allowances Claim JAN 2008 Bolton PAYROLL SECT Council

Name Councillor Julia Silvester	Home Addres	s 🚄							Pay	No.	
Car Make/Model VW Polo SC55	Registration	•		Exact	CC	1200	· · · · · · · · · · · · · · · · · · ·	Me	onth /	JOV	2007
Certify that:-     (a) (For Car Allowance claims only)   have actually and necessaril     (b) (For Car Allowance claims only)   am the holder of a full, curreregard to the use of my car on Council business.     (c) (For Car Allowance claims only)   will retain VAT receipts covered in the catually and necessarily incurred expenditure in travelling a other payments shown on this form, and that all amounts claimed except as shown, I have not made, and will not make, any claim in the case of	nt and valid driving lic ing all journeys for si und subsistence for th are strictly in accorda under any enactment	ence and MOT of x years in order to be purpose of ena ance with the rate for travelling or s	ertificate (wher o comply with habling me to per es determined batters	re applicable  IMRC regulation of the control of th	ele), and ulations.	I have comp Member of B	olied with th olton Counc	e Council's cil, I have a	insurance requ	irement	s with
or allowances, or financial loss allowance or attendance allowance  (f) The particulars inserted on this form are correct, and I understand	e in connection with the that fraudulent claim	ne duties indicate is may result in d	ed on this form. isciplinary actio	on.	Subsi	stence T		··	Total Miles	\$	207-
Signed	Date 30/	12/07	7	] [	Subsi	stence N	Т		For Pa	ayroll	Use Only
certify that I have examined this allowance sheet, the figures recorded		the expense wa	s necessary.	<u> </u>	Exper	nses NT			Input by	<b>•</b> [	cm
Authorised Members' Services	Date				Carer	's Allowai	nce		Date	ļ	80.1.8G
Date Reason for Journey (including From and I	O) FROM HOME	Tim Departure	e of Return	Mile Clain			stence /ance		es and Expenses		Pependent ers Allowance
6/11/07 HEMON SERVE	TOWNHAM	1900				£	р	£	р	£	р
YTENAGE SH SCRUT			3-00	ブ		£	р	£	р	£	р
15/11/07 DIWAZI CLIB DUM REP)	30's	11-00	1-30	6		£	р	£	р	£	p
15/11/07 BREC		6-00	800	7		£	р	£	р	£	р
16/11/07 MERE HALL	MERIS HALL	9-30	11-00	フ		£	р	£	р	£	р
16/11/07 CARIORS CONSULT ATION	JUBILEE	12-30	200	7		£	р	£	р	£	p :
MILIOT APNA AWARDS.	REUBOK	700	11-00	*	P	£	р	£	р	£	. p
18/11/07 XMAS SWITCHON	T.H.	4-00	7-00	7		£	р	£	р	£	р
19/11/07 JOHN HOLT STEERING	WESTH.	3-30	6-30	7		£	р	£	р	£	р
20/11/07 SIMARRIS CITY REGION S	T.H.	5-30	7-00	7		£	р	£	р	£	p
28/11/07 MEMBER DEV VH/REXE	CT.H.	12:30	3-30	Ź		£	р	£	р	£	р
28/11/07 MRE AWARDS PRINCES	M.	6-45	9-30	7		£	р	£	p	£	р
TRUST				Total M	liles	Total A	mount	Total	Amount	То	tal Amount
Please only enter the number of miles. Do not	calculate an a	mount for p	ayment.	75		£	р	£	р	£	р
If you require more lines, please use a Members'				' 1		Numbe	r of Add	litional	Sheets Us	ed	
PAY-M1 All claims must be signed an 12.10.2007 Payroll Sh	d authorised by № are <a>ervice Ce</a>							d be sen	t to	_	

## Members' Allowances Claim



Name Council	or Julia Silvester	Home Address	5							P	ay No.	
Car Make/Mod	el VW Polo SC55	Registration	4		Exact	CC	120	0		Month $\int$	KC	2007
(b) (For Car Allow regard to the us (c) (For Car Allow other payments (a) Except as show	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 n, I have not made, and will not make, any claim u	at and valid driving lice ing all journeys for six and subsistence for the are strictly in accorda ander any enactment f	ence and MOT co years in order to purpose of enal ince with the rate for travelling or su	comply with Holing me to perform to perform the comply with Holing me to perform the complete th	e applicab MRC regi form dutie y Bolton (	ie), and ulations es as a l	i navi Memb	e compiled with	tne Col uncil, I h		the fares	and made
or allowances of	or financial loss allowance or attendance allowance inserted on this form are correct, and I understand	in connection with the	e duties indicate	on this form.		Subsi	isten	ice T		Total M	iles	
Signed	Member	Date 🥱 🗸	1/2/05	Í		Subsi	isten	ice NT		For	Payro	II Use Only
( - / <b>-</b>	camined this allowance sheet, the figures recorded	are reasonable, and	the expense was	necessary.		Expe	nses	NT		Input by	1	,
Authorised.	embers' Services	Date				Carer	's Al	lowance		Date		·
Date	Reason for Journey (including From and T	L FROM	Time Departure	of Return	Mile Clain			ubsistenc Allowance		Fares and her Expens	es Ca	Dependent rers Allowance
3/12/07	BRHFORUM	TOWN YALL	1200	4-00		7.	£		£		p £	р
, , , , ,	( PRE PHOTO SHOOT MEMBE	ROW)			,		£	]	£		p £	р
3/12/07	CORPORATE SCRUTINY	b	5-30	7-00	7	•	£	: 1	£		p £	р
5/12/07		R MTING USE	9-30	11-30	7		£	. ]	£		p £	р
5/12/07		EXCEL C	1-30	3-30	7		£		£		p £	р
6/12/07	RESIDENTS GROUP (MA	FRA) WESTM	100	4-00	7		£		£		p £	р
6/12/07	•	HIGH SCHL	6-30	900	6		£		£		p £	р
10127	THEATOCK CPSTET		11-30	1-00	7		£		£		p £	р
11/12/07	JOHN HOLT STERING	JOHN HOLT	- 3-30	6-00	7		£		£		p £	p
12/12/07	COUNCIL	T·H·	6-00	10-00	7		£		£		p £	р
13/12/07	IN ETUNIC UNEMPROY SOMEN	AR TH	2-00	2·30	7_		£		£		p £	р
14/12/07	ICOCO MIZITING CROPORT	) TH	3-30	5-00	Ŧ		£	1			p £	р
18/12/07	AKEC HIRU	TH	1-30	2307	Total I	Viles		otal Amour		otal Amount		Total Amount
Please only	enter the number of miles. Do not	calculate an a	mount for p	ayment. 7	C	10	£		£	·····	p £	p
If you require	more lines, please use a Members	Allowances A	dditional St	neet	Å					onal Sheets	Used	
DAY 144	All claims must be signed an	nd authorised by N	Jembers' Sen	rices before	navmer	nt can	be m	nade, and sh	ould be	e sent to		

12.10.2007

### WALSH A

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### **BOLTON METROPOLITAN BOROUGH COUNCIL**

### MEMBERS ALLOWANCES CLAIM

Car (Make/Model) 57  Home Address 5  DECLARATION:  (a) I declare that I have actually and	that I have actuall	red expenditure in travelling y paid the fares and made ot	Name of Member (Block capitals please) Registration No.  251HD  3 and subsistence for the purher payments shown on this	rpose of enabling me	Exact Cubic Capacity 139  Exact Cubic Capacity 139  e to perform duties as a Member of the Bolton amounts claimed are strictly in accordance with	i <b>o</b> _cc.
I declare that the particulars inseexpenses or allowances, or finances.  (b) I am the holder.  Signed	ncial loss allowand	e or attendance allowance in and have adequate insurarMEMBER	connection with the duties	indicated on this form  ny vehicle on Cour  Date	ncil business. (For Car Allowance cla	•
		FOR OFFICIAL U	SE ONLY (Completed	by Committee & Me	embers Services)	
* Subsistence Allowance Subsistence Allowance (Taxable)  Travel Reimbursement (e.g. Car Park, taxis)  Dependent Carer's Allowance	Amount £:p ::54 :57 :50:31	Normal Mileaga	, Mile 56		Details input onto Payroll system:  By: C+  Date: 30.5.07	

### Notes:

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

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

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



	Particulars of Journeys			Mode of	Miles	Dependent Carers Allowance		s Fares and other Expenses		Subsiste Allowa	
Date	Description of Approved Duties, including Locations (From & To )	Tim Departure	e of Return	or Travel	Claimed	£	р	£	Р	£	P !
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23	Single LOCAL BOLAT C.C	11-10 Am		·	7		<u>!</u>			<u> </u>	
24	Council	7.00 PM			7		<del> </del>	<del> </del>	1	<del> </del>	+
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	y amounts received by way of Travelling & Subsistence from any other Au			٠	560 4011	>				13	. 5

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

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

They should be sent to Committee and Members Services for  $\varepsilon$  ``orisation.

### JAM.

### **BOLTON METROPOLITAN BOROUGH COUNCIL**

### MEMBERS ALLOWANCES CLAIM

		•				
Claim for Month of	MAY	20 <u><b>0</b>7</u>		PLLR. ALAM	J. WALSH Pay No	
Car (Make/ Model)	SUODA - FA	1BIA	(Block capitals please)  Registration No	Exac	t Cubic Capacity 1390	cc.
Home Address	RELHOLOS	CLOSI BL	SIHD			
DECLARATION:  (a) I declare that I have actually Metropolitan Borough Courthe rates determined by Bol	ncil; that I have actually	red expenditure in travelling and y paid the fares and made other p ugh Council.	subsistence for the purpose o ayments shown on this form;	f enabling me to perform duties and that the amounts claimed a	as a Member of the Bolton re strictly in accordance with	
I declare that the particulars expenses or allowances, or	s inserted on this form financial loss allowance	are correct. Except as shown, I ha e or attendance allowance in conn	ve not made, and will not ma ection with the duties indicate	ke, any claim under any enactmo ed on this form.	ent for travelling or subsistence	
(b) I am the holder of a sure Signed	glicence a	nd have adequate insurance c MEMBER	over for the use of my veh	icle on Council business.  Date 1/7/67  Date	(For Car Allowance claima	nts only)
		FOR OFFICIAL USE	ONLY ( Completed by Con	nmittee & Members Services)		
	Amount £:p		Miles			
* Subsistence Allowance	:	Normal Mileage	) N	Details input ont	o Payroll system:	
Subsistence Allowance (Taxable)	13:54		76	By: CM	•	•
Travel Reimbursement (e.g. Car Park, taxis)	27- 28	<del> </del>		Date: 24.7.	<u>.</u> 07	
Dependent Carer's						

### 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.



Date  Description of Approved Duties, including Locations (From & To)  Departure  Peparture  Return  Travel  Claimed  E  P  E		Particulars of Journeys			Mode	Miles	Dependent		Fares and		Subsist	
14 CHAR TEX M 2M BEXTS 5178 V15173 900 4 566 CHR Y 15 Rem & Highwards 5178 V15173 900 4 566 CHR Y 16 Mine Manne 500 1185	Date		1 1			Claimed	ŧ		_			
14 CHARTER/MENDES 5775 V15/75 15 Rem & Humways 5775 V15/75 16 MARIE MANING 11 B STAIN MOSS - TRA IMING 15 STAIN MOSS - TRA IMING 17 PLAN & HUMWAYS - STAIN V15/75 17 PLAN & HUMWAYS - STAIN V15/75 23 COUNCIL 25 MAN BARS CHAY - FORM 10 CH 25 MAN BARS CHAY - FORM 10 CH 25 MAN BARS CHAY - FORM 10 CH 26 MAN BARS CHAY - FORM 10 CH 27 CHANN (HIGHWAYS - TSWMITTER) 9 CH 4 CO 7 CH 8 TY 17 CAR 17 CAR 18 TY 18 T	Date	including Locations (From & To )					<u> </u>	<u> </u>				
15 Rem & Highways State State 1 15	fΔ	CHARTER MEMBERS						<u> </u>			E	7
16 MARCH MARING 15 STAND MOS - TRAINING 15 STAND MOS - TRAINING 17 PARK BHIGHNAYS - \$128 VISITS 10 D 4 20 h - 7  25 COURCE 25 MARCH BASE CHAY - FERM 10 20  31 PARK L'HIGHNAYS - \$75 VISITS 9 20 4 20 - 7  31 PARK L'HIGHNAYS - \$75 VISITS 9 20 4 20 - 7  31 PARK L'HIGHNAYS - \$75 VISITS 9 20 4 20 - 7  13 S	<del></del>		9.00	400						1		<del>† 1/-</del>
15 STAND MOS - TRAINING 500 1030 4 20 - 7			11.45					<u> </u>				┼┤
17 PLAN 8 HIGHWAYS - STEE VISITS 1030 4 vols - 7 23 COUNCIL 7.000 - 7 25 May 13-13 CMAY - FORUM 1000 - 7 31 PLANUM & HIGHWAYS - STEE VISITS 9.00 4.00 - 7 31 PLANUM & HIGHWAYS - STEENMANTY ON 9.00 4.00 - 7 31 STEENMANT		<u></u>	Sicolar			<u> </u>						i-p f-p
23 COUNCIL 7.00/a - 7 25 M. M. B. M. S. CHAY - FORM 1000 - 7 31 PLANUE ( MIGNUMS) - COUNTY TEX 9.00 4.00 - 7  10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	15	STANDINGS - TRAINER		4 rocky		7	<u> </u>		<u> </u>	<u> </u>		(/
25 Mark Salay - Ferrar 1000 - 7 31 Papari & Highward - STENNI TOWN 9.00 4.00 - 7					-	7	_			<u> </u>	<u> </u>	<u>.                                    </u>
25 Mari Strawars Straward 9.00 4.00 - ) 6 7) 31 Proper & Highwars Straward 11 20 4.00 - ) 6 7)	23	COUNCIL		·	,	5						
31 PLANE & HIGHWAIS SEGMAN 47 00 700 400	25	Marchants only - Follow			<del> </del>	15					6	27
		PLANUE & MIGHWAIS - CONDIG TOR	7.00	4.00	<u> </u>	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.

They should be sent to Committee and Members Services for autho tion.

Co- Claim Forms for Members XIS 28/09/2006

DA (O.

### **BOLTON METROPOLITAN BOROUGH COUNCIL**

### MEMBERS ALLOWANCES CLAIM

Claim for Month ofCar (Make / Model)		20 <u>07</u> ArsiA.	Name of Member (Block capitals please)  Registration No.	Pila. A	Exact Cubic Capacity 1390 cc.
Home Address 5	RETHOLOS	CLOSE BL	SIHD	•	
Metropolitan Borough Coun the rates determined by Bolt I declare that the particulars	ncil; that I have actually ton Metropolitan Borou inserted on this form a inancial loss allowance	paid the fares and made other p gh Council.	wayments shown on this form;  we not made, and will not ma  nection with the duties indicat	and that the amount it.  ke, any claim under the conthis form.	form duties as a Member of the Bolton ts claimed are strictly in accordance with any enactment for travelling or subsistence siness. (For Car Allowance claimants only)
		FOR OFFICIAL USE	ONLY ( Completed by Com	nmittee & Members	Services)
	Amount £:p		Miles		
* Subsistence Allowance Subsistence Allowance (Taxable)	13:5L	Normal Mileage	20	Detail By:	s input onto Payroll system:
Travel Reimbursement (e.g. Car Park, taxis) Dependent Carer's	:			Date:	
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	a company

	Particulars of Journeys			Mode	Miles	Dependen Allow		Fares and Exper	F	Subsiste Allowa	
Date	Description of Approved Duties, including Locations (From & To )	Tim Departure	e of Return	of Travel	Claimed	£	P	£	P	£	p
12	NEW HOUSING	230 FH		CAR	7		<u> </u>				
13	DSR SCRUTING (AGOIDA)	4014			7	1					
13	House LAGROCK HULTON FORUM	6.3084			>					6	07:7
14	PERMA & HISHWAYS 80:11 11 17 25	9.00	4 colu		7		<u> </u>			6	1//
14	CUTACRE LIAGON GRESP	50084			4						-
15	VAL LIVINGS TONE (Q) CASTLE HILL	11.00			10	<u> </u>	<u> </u>	<u> </u>	-		1
22	CLEAN GREEN SAFE P.D.G	10.00		<u> </u>	7		┼		<u>!</u>	<del></del>	┼─┤
25	Scholing TRAINING	4.0084			2		<u> </u>				-
27	(84- Ros. A)	2 00/4			7	<u> </u>	<u> </u>		<u> </u>	6	Legy
28	19H - 517+ VIG175	900	400		7_	<u> </u>	<u> </u>		<u> </u>		
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	6 The Line & Subsistance from any other Au	th without on he	dies	•	20 04318					13	54

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. 2nd OF EACH MONTH TO GUARANTEE PAYMENT THAT MONTH.

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### **BOLTON METROPOLITAN BOROUGH COUNCIL**

### MEMBERS ALLOWANCES CLAIM

Claim for Month ofCar (Make / Model)	SHORA.		(Block capitals please)  Registration No.	Exact Cubic Capacity 1390 cc.
Home Address 5	REYMOLOS	CLOSE BLE	SIHD	
Metropolitan Borough Coun the rates determined by Bolt I declare that the particulars	cil; that I have actually p on Metropolitan Borougi inserted on this form are inancial loss allowance or	aid the fares and made other pa n Council.	ryments shown on this form we not made, and will not me ection with the duties indica	
	-	FOR OFFICIAL USE C	ONLY ( Completed by Co	mmittee & Members Services)
* Subsistence Allowance Subsistence Allowance (Taxable) Travel Reimbursement (e.g. Car Park, taxis) Dependent Carer's Allowance	Amount £:p : : : : : : : : : : : : : : : : : :	Normal Mileage	Miles	Details input onto Payroll system: By: 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.



	Particulars of Journeys			Mode	Miles	Dependent		Fares and Exper		Subsiste Allowa	
Date	Description of Approved Duties,	Tim	e of Return	of Travel	Claimed	Allowa £	ince. P	£	P	£	p
	including Locations (From & To )	Departure	Ketanı		7. Jr						
2.	DENS REGION SCRUTINY	5.30/m		CAR	<del>/</del>	<u></u>	<u>:                                    </u>			· ·	Ī
7	Town Twining - REBOX	9.30			$-\langle$		<u> </u>				<del></del>
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/	DRH- SITE VISITS	1030		~	<u> </u>		<u> </u>	<u> </u>	<u> </u>		÷
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19	FORUM ON ST. PANDROTUS	900			>			<u> </u>			<u> </u>
23	Housing 1.D.S				>				<u> </u>		Ļ
24	DOFFECULAR LODGE L.N.K.	7.00fn			5						
25	Minisons ONW (MLAM FORUM)	10.00		<b>,</b>	5		İ			6	
26	184-5170 VISITS & COMMITTEE	9.00	500	<del> </del>	5		-		1	6	17
12	PSH - 5172 VISITS & Comm, 1728	9.00	5.00/4		-			<del> </del>	<del></del>		1
27	CLEANER GREENER, SAFER P.D.S	9.00					<u> </u>	<u> </u>		<del> </del>	十
	D&R. SCRUTING - AGENDA	6:00 Pi4			12			<del> </del>		<del> </del>	╅
30		Acchy			2		<u> </u>	<b></b>	<u> </u>	<del> </del>	+
30	Ba H. MONITORING				119				<del>-                                    </del>	<del> </del>	<del>-</del>
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					43.11.			<u> </u>			_
			<u> </u>	ÿ	51.29					13	2
	amounts received by way of Travelling & Subsistence from any other Aut	horities or bo	odies	t	119-						<u></u>

Deduct any amounts received by way of Travelling & Subsistence from any other 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

		MEM	DEKS ALLOWATICE	CIMIN	
Claim for Month of  Car (Make/Model)	AUGUST NonA.	20 <u>67</u>	Name of Member (Block capitals please) Registration No.	Cir.	ALAM S. WALSH Pay No
Home Address 5	RETHOLOS	CLOSI BL	51 HD.		
Metropolitan Borough Coun the rates determined by Bolt I declare that the particulars	cil; that I have actually on Metropolitan Borou inserted on this form a	paid the fares and made other j gh Council.	payments shown on this form ave not made, and will not m	n; ănd that the a nake, any claim 1	to perform duties as a Member of the Bolton mounts claimed are strictly in accordance with under any enactment for travelling or subsistence
(b) I am the holder of SignedApproved	•	nd have adequate insurance MEMBER	•		•
		FOR OFFICIAL USE	ONLY ( Completed by Co	ommittee & Me	nbers Services)
* Subsistence Allowance Subsistence Allowance (Taxable) Travel Reimbursement (e.g. Car Park, taxis) Dependent Carer's Allowance	Amount  £:p  13 :54 6 :77  20 31	Normal Mileage	Miles 105 119 24	F	Details input onto Payroll system:  By: CM  Date: 26.9.27

### 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.



7. P8 8 P3 9 P8 13 E 14 F- 16 P8 16 F6 20 C 22 F 23 F 29 F	Particulars of Journeys  Description of Approved Duties, including Locations (From & To)  WTACRE DEVILOR MENT (LOYALS)  SH- SITE VISITS  SH- PRESENTATION (A)  SH- SITE VISITS & COMMITTED  DSR SCRUTINY  FORUM CHAIRS- MOCH FOCUS  CHUIRGHMENT & G.S. D.D.S  REAL WORMING & GETAGON	Tim Departure  2.26 M  9.00  1.00 M  9.00  6.00 M  2.00 M  2.00 M  1.00 M  1.00 M  1.00 M	e of Return	of Travel	Claimed  7  7  7  7	Allowa £	P	Exper	P	Allowar £	P - 7-7
7. P8 8 P3 9 P8 13 E 14 F- 16 P8 16 F6 20 C 22 F 23 F 29 F	SH-SITE VISITS  SH-SITE VISITS  SH-SITE VISITS  SH-SITE VISITS & COMMITTEE  DSR SCRUTINY  FORUM CHAIRS- MOCH FOCUS  SHUIRGHMENT & E.G.S. D.D.S	9.00 1.0014 9.00 60012 2.0014 9.30	5.40		7 7 7 7 2					6	·7°,
7. P8 8 P3 9 P8 13 E 14 F- 16 P8 16 F6 20 C 22 F 23 F 29 F	SH- SITE VISITS  SH- PRESENTATION (A)  SK-SITE VISITS & COMMITTIES  DSR SCRUTINY  FORUM CHAIRS- MOCH FOCUS  THUIRGHMENT & E.G.S. P.D.S.	1.00 lu 9.00 600 lu 2.00 lu 9.30	5.00		7					6	.7%
8 P3 9 P3 13 D 14 F 16 A 16 A 16 F 20 C 22 A 23 P 29 F	SH- PRESENTATION (A) SK-SITE VISITS & COMMITTIES D&R SCRUTIMY FORUM CHAIRS- MOCH FOCUS PHUIRGHMENT & E.G.S. P.D.S	9.00 600 fr 200 fr 9.30	5.40		7					6	7.
9 P3 13 D 14 F-16 16 AK 16 F/16 20 C 22 A 23 F 29 F	D&R SCRUTINY FORUM EMAIRS - MOCA FOCUS EMUIROMMENT & E.G.S. P.D.S	600 fm 200 fm 9.30	5.00		>	,			<del>!                                    </del>	بس	
13 D 14 F-16 16 AK 16 F-16 10 C 22 A 23 F	D&R SCRUTINY FORUM EMAIRS - MOCA FOCUS EMUIROMMENT & E.G.S. P.D.S	2.00/m 9.30							; [		
16 Ax 16 Ax 16 Fin 20 C 22 A 23 F 29 F	HUIRGHMENT 889.5. P.D.S	9.30	·				•		1		<u> </u>
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16 AK 16 F/3 20 C 22 A 23 F 29 F	la la la serie de Contra	1 0.0.		<u></u>	7		1	<u></u>			
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22 A 23 f 29 F	SUAIRS & V. CHAIRS (ARTIL	10:00			7		<del></del>				
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29 F	P&H- COMMITTEE	2.00 Pu			5		†			i	
300	FUNE COUNCIL	7.00/4			5		<del>                                     </del>				
31 7	P. A. PSRIETING (Rm 209)	Scope		<del>                                     </del>	5	·	-				
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Deduct any amounts received by way of Travelling & Subsistence from any other Authorities or bodies on the above dates and give particulars

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

They should be sent to Committee and Members Services for author ion.

7 --- Tome for Members XI.S 28/09/2006

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### **BOLTON METROPOLITAN BOROUGH COUNCIL**

### MEMBERS ALLOWANCES CLAIM

Claim for Month of  Car (Make / Model)	Seg 20:	-7	Name of Member (Block capitals please) Registration No.		C Capacity 1390 cc.
Home Address 5	RELHOLDS	CLOSE BLS	SIHD		
Metropolitan Borough Coun the rates determined by Bolt I declare that the particulars	cil; that I have actually pai ton Metropolitan Borough inserted on this form are o inancial loss allowance or a	d the fares and made other pa Council. orrect. Except as shown, I hav ttendance allowance in conne	yments shown on this form; are not made, and will not make, action with the duties indicated over for the use of my vehicle.		tly in accordance with BOLTON COUNCIL
	· F	OR OFFICIAL USE C	NLY ( Completed by Comm	ittee & Members Services)	
	Amount £:p		Miles		
* Subsistence Allowance Subsistence Allowance (Taxable) Travel Reimbursement (e.g. Car Park, taxis)	6 77	Normal Mileage	IL.	Details input onto Pay  By: CM  Date: 30.10.0	
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.



Date  10 10 18 20 24 25 27	Particulars of Journeys  Description of Approved Duties, including Locations (From & To)  Howsing P. D.G.  PLANDENTIONS POLICY  PLEA WORNING P.D.G.  PLANNING RIGHWAYS COMMITTEE  D&R SCRUTINY- HEADA  AREA WORNING- WORNSMEF	Tim Departure  8 30  5 30 pm  9 30  8 45  5 30 pm	Return 11-30 8:00/A 11-30 4:30/A	of Travel	Claimed 7 7	Allowa:	p p	Expen	p P	Allowar £	nce P
10 1 10 1 18 20 24 25	Including Locations (From & To)  Housing P. D.G.  PLACE ATIONS POLICY  PLANNING P. D.G.  PLANNING & HIGHWAYS COMMITTEE  D&R SCRUTINY - HEEMDA  AREA WORKING - WORKSHOF	8 30 5 30 pm 9 30 8 45 5 30 pm	11-30 8001a 11-30 4'301a		7 7 7 7	£	p		P	£	P
18 20 24 25	PLAMING & HIGHWAYS - COMMITTED  DER BERUTINY - HEAMDA  AREA WORKING - WORKSHEF	5.30 pm 9.30 8.45 <b>5</b> -30 pm	8:00 fm 11:30 4:30 fm	CAR	7						
18 20 24 25	PLAMING & HIGHWAYS - COMMITTED  DER BERUTINY - HEAMDA  AREA WORKING - WORKSHEF	9.30 8.45 <b>5</b> -30py	11-30 4'3084		7			(	}		<u>:</u> !
18 20 24 25	PLANNING P.D.G. PLANNING & HIGHWAYS - COMMITTEE  D&R SCRUTINY - HEADA  AREA WORKING - WORKSHOF	8-45 5-30 pm	4 3084					(			
20 24 25	PLANNING & HIGHWAYS - COMMITTED D&R SCRUTINY- AGENDA AREA WORKING- WORKSHOF	3-30 My					7		<del>)</del>		*774
24 25	AREA WORKING- WORKSHOF				7	<del>(</del>	<u> </u>		<del>}</del> -	<u>(5)</u>	1//
25	AREA WORKING - WORKSHOF		3.wim		<i>Z</i>		) -		<u> </u>	<u> </u>	<u>                                      </u>
		1.3084			2	(	<u>{                                    </u>		>		<u> </u>
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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.

# Members' Allowances Claim Bolton Council



Name /	FLAN. S. WALSH	lome Address	5	REYMOLD	بن خ	205	ني	BL	5 1H	▶ P	ay No.	
Car Make/Mod	lel SKODA. FABIA F	Registration	1		Exac	t CC	1400			Month (	CT	2 <b>0</b> 0 7
(b) (For Car Allow regard to the us (c) (For Car Allow d) I have actually other payments (e) Except as show	ance claims only) I have actually and necessarily in ance claims only) I am the holder of a full, current a se of my car on Council business. ance claims only) I will retain VAT receipts covering and necessarily incurred expenditure in travelling and shown on this form, and that all amounts claimed aren, I have not made, and will not make, any claim under the claims of the clai	nd valid driving lices all journeys for six y subsistence for the strictly in accordan er any enactment fo	nce and MOT or years in order to purpose of ena ce with the rate r travelling or su	ertificate (where comply with HI bling me to pert determined by bsistence expe	e applical MRC reg form duti ≀ Bolton (	ole), and ulations es as a i	I have o	omplied wit	n the Cou ouncil, I h		the fares a	and made
or allowances, (f) The particulars	or financial loss allowance or attendance allowance in inserted on this form are correct, and I understand the	i connection with the at fraudulent claims	e duties indicate may result in di	d on this form. sciplinary action	ì.	Subs	istenc	еT		Total M	iles	8 j.
Signed			107			Subs	istenc	e NT	13:5	以 For	Payro	Use Only
certify that I have e	kamined this allowance sheet, the figures recorded ar	e reasonable, and t	ne éxpense was	necessary.		Expe	nses i	NT		Input by	1	cm
Authorised	Members' Services	ate				Care	's Allo	wance		Date		30.11.07
Date	Reason for Journey (including From and To		Time Departure	e of Return	Mil Clai	les med		bsistend Iowance		Fares and her Expense		Dependent ers Allowance
3	CLEAMER, GREZHER, SAFE	-X-	8-30	•	! \	7	£		p £		p £	р
2	DUFFEDENER LODGE.	L-N.R	5-30fu		7		£		p £	•	p £	р
merchi.	PERSONAL & HIGHWAYS		9-00	4-30pm	ム		£	6-77	p £		p £	p
Ŝ	Houseing P. D.G. SREGER	P.DS	1-30PM		<b>一</b> フ		£		p £		p £	р
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17	MEMBERS ONLY.		9.30		7		£		p £		p £	р
17	PSH- RE MANOR	COURT	1-008M		フ		£	_	o £		p £	р
/8	18H		9.00	4-3094	フ		£	6-77	p £		p £	р
24	FULL COUNCIL		6-308m		7		£		o £		p £	р
25	CUTACRE WIASION	Comm	6 worm		7		£		o £		р£	р
31	PSH - SITE VISITS		10.00		7		£		£		p £	q
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lf vou require :	more lines, please use a Members' A	Howances Ad	Iditional Si	neet	,		Nun	nber of A	dditio	nal Sheets	Used	

All claims must be signed and authorised by Members' Services before payment can be made, and should be sent to Payroll Shared vice Centre, 5th Floor, Paderborn House, Bol BL1 1JW

12.10.2007

# Members' Allowances Claim Bolton Council



Name	A. S. WALSH Home Addr	ess 🗲 <i>K</i>	eymour	<u>ځ</u>	Chos		į.	1	Pay	No.	
Car Make/Mod	del SUODA FABIA Registration	n 🔏	<b>1</b>	Exact	CC	1400		Mo	onth /	Mov	2007
(b) (For Car Allow regard to the us (c) (For Car Allow d) I have actually other payments (e) Except as show	vance claims only) I have actually and necessarily incurred the mile- vance claims only) I am the holder of a full, current and valid driving see 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 accor- on, I have not made, and will not make, any claim under any enactmen	licence and MOT of six years in order to the purpose of end rdance with the rate ont for travelling or s	ertificate (when comply with H abling me to per s determined b ubsistence expe	e applicab IMRC regu rform dutie by Bolton C enses	ole), and ulations. es as a l	i I have com Member of I	plied with th Bolton Coun	e Council's cil, I have a	·	fares a	and made
	or financial loss allowance or attendance allowance in connection wit inserted on this form are correct, and I understand that fraudulent cla				Subs	istence "	7	<u>18:0</u>	Total Miles		80
Signed	Member Date / S	12/07			Subs	istence l	NT 🔼		For Pa	ayro	II Use Only
certify that I have	xamined this allowance sheet, the figures recorded are reasonable, a	ind the expense wa	s necessary.	- -	Expe	nses NT			Input by		cm
Authorised	Members' Services Date	<u> </u>		] ]	Care	's Allowa	ance		Date		31.12.07
Date	Reason for Journey (including From and To)	Tim Departure	e of Return	Mil Clair			istence wance		es and Expenses		Dependent ers Allowance
j	PLANH WIGH HIGH WAYS - COMMITTEE	900	430 Ps4	フ		£	6377 P	£	р	£	р
-55	Housing P.D. G & FORUM CHAIRS & VIC	نة 8°3 ننا	12.00	7		£	р	£	р	£	р
6	AREA WORKING P.D.G.	10.30	12.00	7		£	р	£	р	£	р
7	H, L&H FORM	6.30 PH	9-30 FM	7		£	р	£	р	£	р
Ŝ	CLEANER GREDIER P.DS	830	10-00	7		£	р	£	р	£	p
LI	REMORBINANCE SINVICE	10-40		フ		£	р	£	р	£	р
12	Housing P.D.S	2.00 fm		7		£	р	£	р	£	р
15	PLAMMING & HIGHWAYS -COMMITTE	9.30	4.3000	7		£	5-77 p	£	р	£	р
26	HOUSING P.D.G	4.00	11.00	>		£	р	£	р	£	р
76	DEN & RESED SCRUTING	5.30 FM	7-0084	7		£	р	£	р	£	р
28	Was - REMOTE HERES + EXECTIVE	12.00	3.30 Pic	7		£	р	£	р	£	р
29	Pinnoning d. Highways	9.00	4-30.5W	7			6.77 P	£	р	£	р
			, 1	Total I			Amount		Amount		otal Amount
Please only enter the number of miles. Do not calculate an amount for payment. $84$							20-31 p	£	MIL P	£	Note p
If you require	more lines, please use a Members' Allowances	Additional S	heet			Numb	er of Add	ditional	Sheets Use	ed	NIL

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

Payroll Shared Service Centre, 5th Floor, Paderborn House, Bo 1 BL1 1JW

PAY-M1

12.10.2007

# Members' Allowances Claim LI SEC Council

Name	ALAH S.	WALSH	Home Addres	s 5 K	EYHOLDS	ĈL	058	•	Bu	SIAT	> Pa	y No.	
Car Make/Mod	del Skobi	4. FABIA	Registration			Exact		139	8		Month 7	سى تىر	_ 20@7
(b) (For Car Allow regard to the use (c) (For Car Allow other payments (e) Except as show or allowances.	vance claims only) se of my car on Cour vance claims only) and necessarily incu s shown on this form, vn, I have not made, or financial loss allov	I have actually and necessar I am the holder of a full, curre cil business. I will retain VAT receipts covered expenditure in travelling, and that all amounts claimer and will not make, any claim wance or attendance allowante correct, and I understan	ent and valid driving lice ering all journeys for six and subsistence for the d are strictly in accordar under any enactment for the in connection with the	ence and MOT years in order e purpose of en nce with the rat or travelling or s ne duties indicate	certificate (when to comply with H abling me to per es determined b subsistence experted on this form.	e applical MRC reg form duti y Bolton ( enses	ole), and ulations. es as a f Council.	I have com	plied with t Bolton Cour MEMB	he Counci		e fares a	and made
Signed	American de la constantina della constantina del	Memb	Date 7 / /	043		7	Subsi	stence i	VT	(	For	ayroi	I Use Only
I certify that I have e	amineo mis allowar	ice sheet, the figures recorde	- 1 / /	the expense wa	as necessary.		Expe	nses NT			Input by		
Authorised	-1-	Members' Service	Date				Carer	's Allowa	ance		Date		
Date	(i	Reason for Journe ncluding From and		Tim Departure	ne of Return	Mil Clair			istence wance		ares and r Expense:		Dependent ers Allowance
3	Housin	5 P.D.S		8.00		フ		£	р	£	p	£	p
3	CORPORI	778 /SSVES - S	O SCRUTMY	5.308M		フ		£	p	£	p	£	р
11	VISIOM	COM FLEDHER	5	8.30		フ		£	р	£	p	£	р
12	PLAM &	MIGH WATE SITE	V15175	8.30		7		£	р	£	р	£	р
12	FULL	COUNCIL		6.308M	,	フ		£	р	£	p	£	р
13	PLAMMING	L MICHWAYS E	OTEVISITS OMMITTES	9.30	4.301n	フ		£ 6	77 p	£	р	£	р
. 17	EFFECTIVE	& SURGERIES		5.308m		ク		£	р	£	p	£	р
18	DUFFCOCAL	& LODGE. PICTU	es Fun RSPA	1.45PM		ל <u>'</u>		£	p	£	р	£	р
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If you require	more lines, ple	ease use a Members	' Allowances A	dditional S	heet			Numb	er of Ad	ditiona	l Sheets U	sed	NUB

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 Claim Bolton



Name	ALAn	S.	WALSM	Home Address	s 5	REYMOLDS		- - 205	<u> </u>			Pay	No.	
Car Make/M		1010A		. Registration /	<b>T</b>		Exact (	CC	1400		M	onth 5	AH,	2008
T certify that:- (a) (For Car All (b) (For Car All regard to the (c) (For Car All (d)   have actua	owance class owance class e use of my co owance class lly and nece	ims only ims only car on Co ims only ssarily in	I have actually and necessity   I am the holder of a full, cubuncil business.     I will retain VAT receipts concurred expenditure in travelling and that all amounts claims.	rrent and valid driving lice vering all journeys for six g and subsistence for the ed are strictly in accordar	years in ore years in ore purpose once with the	der to comply with the fenabling me to per traces determined	HMRC regulation of the regulat	ations.	mave complicement	on Counc	cil, I have a	ctually paid the	fares a	and made
(a) Eveent as sh	nown I have	not mad	le, and will not make, any clair llowance or attendance allowa	n under anv enactment to	or traveiling	or subsistence exp	enses					Total Miles		
(f) The particular	ars inserted	on this fo	orm are correct, and I understa	and that fraudulent claims	may result	in disciplinary acti	<u></u>		tence T	6	<u>. 77.</u>			<u>  63.</u>
Signed			Men	nber Date 20/2/	08				tence NT			-1	ayro	Il Use Only
certify that I have	e examined	this allov	vance sheet, the figures recor	1	the expens	e was necessary.	ר וו	•	ses NT		•	Input by		cm
Authorised		Santa Comment of the	Members' Serv	Date				Carer's	s Allowan			Date	<del>,</del>	30.8.8
Date	FLOR	n E	Reason for Journ (including From and		Depart	Time of ure Return	Mile Claim	_	Subsis Allow			es and Expenses	Ca	Dependent rers Allowance
8		AM CM	<del>, , , , , , , , , , , , , , , , , , , </del>		3.301		17		£	þ.	£	р	£	р
10	PLAN	AH WA	LHISHWAYS (3)		8 45		7		£ 6.0	77 p	£	р	£	р
14		0032	^ -		3.001		7		£	´ p	£	р	£	р
15				PRE MEET	11-00		7		£	р	£	р	£	p_
16		EA	Working P.D.	<i>n</i>	8.30		7		£	р	£	р	£	р
16		146 4		147 C.C	1-00 F		7		£	р	£	р	£	р
26	į	MFO A	~		500	j	7		£	р	£	р	£	р
16		ist 700		LTON FORUM	7.00		>		£	р	£	р	£	р
22			,	CS RDS	12.30		7		£	р	£	р	£	р
7.8-		51 M.7	ZAVIKSAMBA) K						£	р	£	р	£	р
									£	р	£	p	£	р
		<del></del>							£	р	£	р	£	р
					<u> </u>	L	Total N	/liles	Total A	mount	Tota	l Amount		Total Amount
Please on	ly enter	the nu	ımber of miles. Do ı	not calculate an a	mount i	for payment.	63		£ 6-	77 p	£	р	£	p
			please use a Membe					_	Numbe	r of Ad	ditional	Sheets Us	sed	NIL

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PAY-M1

12.10.2007

## Members' Allowances Claim



Name (	LAM S WALSH	Home Address	5 5 1	REY NOLI	<u>) ده</u>	-205	خخ	1524	5 1HE		No.	
Car Make/Mod		Registration			Exact	CC )	399		<u>  M</u>	lonth 万年	<u> </u>	20০প্ত
T certify that:- (a) (For Car Allowa (b) (For Car Allowa regard to the use (c) (For Car Allowa (d) I have actually a	ance claims only) I have actually and necessarily ance claims only) I am the holder of a full, current e of my car on Council business.  ance claims only) I will retain VAT receipts covering the cessarily incurred expenditure in travelling at shown on this form, and that all amounts claimed an, I have not made, and will not make, any claim under the claims of the	t and valid driving lices ng all journeys for six t nd subsistence for the	years in order to purpose of enal	comply with Hi bling me to ped defermined by	MRC regi form dutie v Bolton (	ulations. es as a M	lember of	Bolton Cour	ncil, I have a		fares ar	nd made
	n, I have not made, and without make, any claim of or financial loss allowance or attendance allowance inserted on this form are correct, and I understand	in connection with the	e duties indicated	e on this form.		Subsis	stence		3.5L	Total Miles		49.
		D-4- 1/ 2			]	Subsi	stence	NT F		For P	ayrol	l Use Only
Signed	Member camined this allowance sheet, the figures recorded			necessary.	]	Exper	nses NT	г		Input by	·	CM.
Authorised	Members' Services	Date		:		Carer'	's Allow	ance _		Date	ļ	3.4.08
Date	Reason for Journey (including From and T		Time Departure		Mil Clai	les med		sistence owance		res and Expenses		Dependent ers Allowance
6	P&H- Sne VIS		1-008m		ny	7	£	р		р	£	р
7	PSH 2778 VISITE	-22	9-00	4.3080	7			<u> ジーフフ P</u>		p	£	р
20	AREA WORKING P.1.		9-30		ゔ		£	р		р	£	p
20	Coon our		6-30Pm		7		£	р		р	£	р
2)	P&H SITE VISITI	ž.	9-00	4.30cm	7		£ 6	5-77 p	£	р	£	р
27	PRE MEETING - FORUM ()		2 worm		ラ		£	р	£	р	£	р
27	COUMEIL		6.30PM		7		£	р	£	р	£	р
							£	р	£	р	£	р
							£	q	£	р	£	р ,
			-				£	р	£	р	£	, b
							£	р	£	р	£	р
							£	р		р	£	р
1					Total	Miles	, <u>, , , , , , , , , , , , , , , , , , </u>	l Amount	,	al Amount		otal Amount
Please only	enter the number of miles. Do not	calculate an a	mount for բ	oayment.	4	9	£	13+54 p	£	р		<u>р</u>

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

Number of Additional Sheets Used

MIL

All claims must be signed and authorised by Members' Services before payment can be made, and should be sent to Payroll Shared Struce Centre, 5th Floor, Paderborn House, Bo! BL1 1JW

PAY-M1 12.10.2007 Expenses available.

| Udi Wake/mowe

## ers' Allowances Claim Claim

	-				The second second second second second		
WALSH	Home Address	5	REYHOLD	5 CL052	B251HD	Pay No.	
FABIA	Registration		Exac	ct CC / 399	Month	MARCH	2008

I certify that:-(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.

(For Car Allowance claims only) I am the holder of a full, current and valid driving licence and MOT certificate (where applicable), and I have complied with the Council's insurance requirements with

regard to the use of my car on Council business.

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

other payments shown on this form, and that all amounts claimed are strictly in accordance with the rates determined by Bolton Council. Except as shown, I have not made, and will not make, any claim under any enactment for travelling or subsistence expenses

or allowances, or financial loss allowance or attendance anowance in connection with the duties indicated on this form.  The particulars inserted on this form are correct, and I understand that fraudulent claims may result in disciplinary action.	Subsistence I	0.77V	lotal ivilles	ナハ・
Signed Member Date 10/4/08	Subsistence NT		For Payrol	l Use Only
T certify that I have examined this allowance sheet, the figures recorded are reasonable, and the expense was necessary.	Expenses NTT	500	Input by	Ctv/
Authorised Members' Services Date	Carer's Allowance		Date	34.4.08

	Reason for Journey		Time of		Subsistence				Dependent	
Date	(including From and To)	Departure	Return	Claimed	Allow	ance	Other Expens	ses	Carers A	llowance
3	BUS STOP. CLEANWAYS WITH AME M. DARBISHIE	2-00/4		6	£	р	£	р	£	р
4	b,	10-32		6	£	р	£	p	£	р
	Pape & HIGHWAYE - SITE VISIT	1.05 PM		6	£	р	£	р	£	р
16	HESTER LOSTOCK & HULTER FORUM	6-30 fm		6	£	р	£	р	£	р
10	Per & Region P.D.G	3-00 PM		フ	£	р	£	p	£	р
10	FULL COOKER	5-30/M		7	£	р	£	р	£	р
12	EHVIRO BERVICE P.D.G	3.00 Pm		フ	£	đ	£	р	£	р
13	CUTACRE LIASION COMM	6.00 Pm		6	£	р	£	р	£	р
17	G.M. WASTER THISTLE MAMER	9.45			£	р	£5-00	р	£	р
1/	1 5 175 11 5175	9.00		-7	£ 6	77 p	£	р	£	р
20				20	£	р	£	р	£	р
1-31	CASE WORK OVER MORTH			-	£	р	£	р	£	р
		<u> </u>	· · · · · · · · · · · · · · · · · · ·	Total Miles	Total A	mount	Total Amour	nt	Total /	Amount

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

**Number of Additional Sheets Used** 

FOR MEMBERS' SERVICES USE ONLY

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

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