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· ·	MEMBER	S ALLOWIE		
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		Name of Member	HN HASSI	
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Claim for Month of	_ ₂₀ _ 37	(Block capitals please)	round Cubic C	apacity Co.
Claim for Month of			Exact Cubic C	-P 7
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Car (Make/ Mode)	1	HENTON BOLTE) /	
1 ,	ILANE	FERIUM		
Home Address 52 NEW DECLARATION: (a) I declare that I have actually and necessarily income actually actua	HALL LANE			est Dallon
Home Address	•		er and to perform duties as a Mer	mber of the bottom
Ttorre		wheistence for the purpose of ena	bling me to periodal are strictly	v in accordance with
TOT ADATION:	d aggenditure in travelling and	subsistence for this form; and	that the amounts claimed are succe	,
DECLARATION DE Controlly and necessarily inc	rurred experience and made other pa	syments shown on this form,		•
DECLARATION: (a) I declare that I have actually and necessarily income Metropolitan Borough Council; that I have actually and necessarily income Metropolitan Borough Politan	ally paid the fares and made	·		uing or subsistence
	TOTAL COMICS	1	at claim lilluct art crair	ravening or supplied
determined by Bolton Metropolitan De	Journal I ha	ve not made, and will not make, a	ily Claims ——	•
the rates determined	m are correct. Except as shown, I ha	the duties indicated o	n this form.	•
(a) I declare that I have actually and necessary the Metropolitan Borough Council; that I have actually and necessary the Metropolitan Borough Council; that I have actually and necessary that I have actually and necessary that I declare that the particulars inserted on this for the Metropolitan Borough Council I declare that the particulars inserted on this formula is a light and the metropolitan actually and necessary that I declare that I have actually and necessary that I declare that I have actually and necessary that I declare that I have actually and necessary that I declare that I have actually and necessary that I declare that I have actually and necessary that I declare that I have actually and necessary that I declare that I have actually and necessary that I declare that I have actually and necessary that I declare that I have actually and necessary that I declare that I have actually and necessary that I declare that I declare that the particulars inserted on this formula is a supplication of the I declare that the particulars inserted on this formula is a supplication of the I declare that the particulars inserted on this formula is a supplication of the I declare that the particular is a supplication of the I declare that I declare	Thi are standance allowance in cont	rection with the date		r Car Allowance claimants only)
I declare that the partial loss allow	ance of attendance	. 7.1-1-	an Council business. (Fo	r Car Allowands Carrier
the rates determined by Bolton Metropolitan of I declare that the particulars inserted on this fo expenses or allowances, or financial loss allow (b) I am the holder of a current driving licen		C the use of my vehicle	OIL CO.	
	og and have adequate insurance t	00001 100	ate 06 02 07	
is a bolder of a current driving licent	E Mid	Da	ite	•
(b) I am the Holder of the	MEMBER		1 -1	
	MINITED		. 06/02/0/	
Signed	· ·	D	ate	
Signed and the second s				
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Approved		TV / Completed by Comm	ittee & Members Services)	
	FOR OFFICIAL USE	ONLY (Completed by Comm	•	
	FOR OFFICE	Miles		
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	Normal Mileage	1		
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Subsistence Allowance		1		
		\ \ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	Date: 7.2.08	
(Taxable)	_ '		рис.	
Travel Reimbursement 30	_	, ,		
Travel Reinibut		1	ř.	

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. Notes:

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

(e.g. Car Park, taxis) Dependent Carer's

	Particulars of Journeys	Time of		Mode of	Miles	Dependent Carers Allowance		Expenses		Allowance £ P	
Date	Description of Approved Duties, including Locations (From & To)	Departure	Return	Travel	Claimed	£	P	£	Р		
2007											
- کوسان	100 P. C. Birminihan	7.30		CAR	216			.30		309	<u>ao</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.

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



From:

@marketingbirmingham.com]

Sent:

17 May 2007 11:40

To:

Subject: Updated Confirmation

strato do.

Please find below the updated confirmation, with regard to the payment you will need to contact the hotel directly to arrange payment details.

Amended Booking Confirmation from Allocation

Date: 17-May-2007

Booking Reference:TWN7766963 (Segment Ref: 1142864)

Company:

Bolton MBC

Contact:

Address:

Bolton Metropolitan Borough Council, P O Box 29, BOLTON, BL1 1RU, UNITED KINGDOM

Phone: (Home)+44 (0) 1204 331001

E-Mail:

changed to by phone 28.6.07.

Booking Status: Confirmed (5 adults) Copthorne Hotel Birmingham

Paradise Circus, Birmingham, West Midlands, ENGLAND, B3 3HJ, UNITED KINGDOM

Phone: +44 (0) 121 2002727 Fax: +44 (0) 121 2001197

Managing company:

Copthorne Hotel Birmingham

Departing: 6-Jul-2007 (3 nights) Travel details: Arriving: 3-Jul-2007

Travellers: Room No

Title

Name

Adult/Child

Age

Rate Type

Remarks

1 Мг

Clir Cliff Morris

Adult

17/05/2007

Double Ensuite	٠
Single Occupancy NAME CHANGE FROM	
2	
Mr	
Sean Harriss	
Adult	
Double Ensuite	
Single Occupancy WAS T B A NAME NOW AVAILABLE	
	•
Мг	
Clir John Walsh	
Adult	
·	
Double Ensuite	
Single Occupancy WAS T B A NAME NOW AVAILABLE	
4	٠
Mr	·
Clir Roger Hayes	
Adult	
Double Ensuite	
Double Occupancy Sharing with WAS T B A NAMES NOW AVA	AILABLE

17/05/2007

Booking Type: GBMBL5481EA LGA Annual Conference 2007

Rate Type: 4*Double Ensuite:Event Rate

Rate, 3 @ 105 GBP per unit or category of sale

Full English Breakfast(Inclusive)

3 x single occupancy, 3 nights @ -10 GBP per night (adult)

17.5% VAT (inclusive where applicable)

Total Cost: GBP 1170.00

Remarks 1: CC Guarantee expires 10/08

2: **Client to advise BCB of TBA names ASAP**

Payment Policy:

Credit card details are held as guarantee for the reservation - Guest must settle account on departure.

Consultant:

@ Operations (E-Mail:

@marketingbirmingham.com)

General Information: General Information

For **Birmingham Convention Bureau** contact Telephone: +44 (0121) 202 5005, Fax +44(0121) 202 5123 or E-Mail bcb.accommodation@marketingbirmingham.com

For **Birmingham Tourist Information Centres** contact Telephone:+44 (0870) 225 0127 or E-Mail birmingham@responseuk.co.uk

Change History

Ref

Date of Change

Change

Changed By

1

17-May-2007 11:19:00

Modify Booking: Double Ensuite: Event Rate options booked changed from single occupancy(1 adult) to single occupancy(3 adults)



2

18-Jul-2006 12:13:40

Add Remark/Priority NORMAL



Website: http://www.visitbirmingham.com

WHITE

BOLTON METROPOLITAN BOROUGH COUNCIL

,	P	MEMBE	RS ALLOWANCES CI	AIM		
Claim for Month of AY	+ JUNG 2	 	Name of Member ////	NN K WHITE	Pay No1	
Car (Make / Model)	NONDED		(Block capitals please) Registration No.	Exact Cı	abic Capacity <u>1800</u>	cc.
Home Address 23	DOUBTHLE	Rd Bolto	N BLZ SHT			
the rates determined by Bolt	cil; that I have actually p on Metropolitan Boroug	aid the fares and made other pay h Council.	ments shown on this form; an	d that the amounts claimed are s	trictly in accordance with	
I declare that the particulars expenses or allowances, or fi	inserted on this form are nancial loss allowance o	correct. Except as shown, I have r attendance allowance in connec	e not made, and will not make, ction with the duties indicated	any claim under any enactment on this form.	for travelling or subsistence	
(b) I am	g licence and	have adequate insurance cov			(For Car Allowance claiman	ts only)
Signed		MEMBER		ate 15 fue 2007	.	
Approved			Da	ate		
	· · · · · · · · · · · · · · · · · · ·	FOR OFFICIAL USE OF	NLY (Completed by Commi	ttee & Members Services)		
•	Amount		Miles			
	£:p				ř	
* Subsistence Allowance	:	Normal Mileage	11 20 -	Details input onto P	ayroll system:	
Subsistence Allowance (Taxable)	33 90			By: CM	BOLTON MBC	
Travel Reimbursement (e.g. Car Park, taxis)	;			Date: 25.6.07	95 1111 227	
Dependent Carer's Allowance	:				the same of the sa	
•				\PI	ENSIONS SECTI	1.614

Notes:

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

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

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	Particulars of Journeys			Mode	Miles	Dependent Carers		_		Subsistence Allowance	
Date	Description of Approved Duties,	Ti	of		Allowance		Expenses £ p		£	vance	
1	including Locations (From & To)	Departure	Return	Travel	Claimed	£	p i	£	р :	L	P
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1/5/07	EtEC + HR + COAM. SAKESY + EAM BOLDON	09.60	17-00				ļ		<u> </u>	6	72
15/67	CONTUNION RADIO + HR + BEN	09.00	15.00				<u> </u>		<u> </u>	6	72
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	amounts received by way of Travelling & Subsistence from any other At				156.				Z	<i>‡33</i>	61

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

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

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

Date	Home/Town		Month: MAY+ JUNE 2007]	C
May	Hall	Mileage	Business journey description	Mil	eage	gradients a	<u> </u>
8			CASTLE HILL YOUTH CLUB + RETURN	-	2	(13 (13 (14	SE FC W
9			AGE GNEEKN MEETING	7	Ó	ett 1756 En 173 En 174 En 174 En 174	
<u> 14</u>	+ RETURN	7	H.R.+ILOCO + CHARTER			L."3	C
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<u> </u>		7	EXEC. + HR. + EAM BOCKEN				
21 22 23	••		COMMUNITY RAND + RETURN	8			
3		7	H.R+Com.RAD. + BEN	1.			
	**	7	COUNCIL MEETING	 		-	
4	~	7	H.R. + Com 1	<u> </u>			
9		<u> </u>	STAFF MEABERS FUNCARE CO BURY	10			
9		7	H.R + COMMINMY RADIO				
UNE		7	RACINE HARMONT FORUM				
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,-		4	PHAISH CHUNCH MEMORINE SERVICE				
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-4	~	7	14 th. + YON'T INC. + TONGEN + YEAROUT TAN.				
	,		Bushing Horse AWANS + P.D.P.+ BAST B.				
tal Mil	eage /	21					
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15 June 2007

DAC

BOLTON METROPOLITAN BOROUGH COUNCIL

·		ME	MBERS ALLOWANC	ES CLAIM	0		
cut (intuite) intouch,	n MONDEO		Name of Member _ (Block capitals please) Registration No.	NHINE	Exact Cubic	Pay No	_cc.
Home Address 23	PONEDALE V	Ed BOLTON	BL2 SH1				
DECLARATION: (a) I declare that I have actually Metropolitan Borough Count the rates determined by Bolt	cil; that I have actually	paid the fares and made oth	and subsistence for the purponer payments shown on this fo	ose of enabling me to	o perform duties as a Me nounts claimed are strictl	mber of the Bolton y in accordance with	
expenses of allowances, or f	inancial loss allowance	e or attendance allowance in	I have not made, and will no connection with the duties inconection with the duties inconece cover for the use of my	dicated on this form		ravelling or subsistence · Car Allowance claimant	s only)
	· · · · · · · · · · · · · · · · · · ·	FOR OFFICIAL US	SE ONLY (Completed by	Committee & Mem	bers Services)		•
* Subsistence Allowance	Amount £:p	/ Normal Mileage	Miles		etails input onto Payro	ll system:	
Subsistence Allowance (Taxable)	20:16	, 1011111111111111111111111111111111111		Ву	•		
Travel Reimbursement (e.g. Car Park, taxis)	:			Da	te:		
Dependent Carer's Allowance	:		appropriate to				

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 Journals			Mode	Miles	Dependen		Fares and		Subsist	
Date	Description of Approved Duties,		ne of Return	of Travel	Claimed	Allow:	ance P	Exper £	ises P	Allowa £	ance p
	including Locations (From & To)	Departure	Return	118467	119		<u> </u>				T
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				<u> </u>	72						+
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	amounts received by way of Travelling & Subsistence from any other Author	.(ct 1 4	L:		1141					l	

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

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

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

Name	: FRANT WA	1100	Month: Cuite 2004	<u> </u>
Date	Home/Town		3.02/ 2001	
JULY	Hall	Willeage	Business journey description	Mileage
2140	+ RETURN	7	Etec Bailt + 15tec	
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1484	- -k	7	HR MOSING	
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7111	Home+Ren		REGGOOD TOWN TWINING RECEPTON	17
824	You then		Town Tainwise Brether + Concern	7
921	~	7	ETEC. BRIEF + SHET AWARDS + SPECIAL CONCE	
Die		7	CORP. PERFORM, MESTINE	,
llan	Home + RET		COAL PERFORM. TEAL TOUR REESSION	17
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12111		7	CORP. PERTORMANO DAM + COM)	
134	<u>.</u>	7	4-R. MEENING	
1514	lton6+167.	ė.	CENOCIAB DAY SEAVICE	7
1690	Ç.	7	EtEL BAIEF + HOS + SLJCC	-
1814	r	7	HR Ette + DIRFURN EDUCATION	
1914	~	7	COM ! METINE	
19212	Home+Re1.	,	WITHING GOV / SMIT RECEIPTON HOLET BA.	77
20	<u>.</u>	7	AWARD CEREMONY	
23		7	ETEC BRIEFING + PERFORM. I'M.	
24	ئر	7	CASILEHILL + CON. A. RAMO + LIEE ENV.	
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24 26 30 31	N	7	EtEL BAIEFING	
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BOLTON METROPOLITAN BOROUGH COUNCIL

ACCREDED SALLOWANCES CLAIM

		MEMBER	2 WILLOWWILCED C				
Claim for Month of HUC Car (Make/Model) Font	CUST O MONDED DOVERALL	red expenditure in travelling and subsistence for the purpose of enabling me to perform duties as a Member of the Bolton paid the fares and made other payments shown on this form; and that the amounts claimed are strictly in accordance with light Council. are correct. Except as shown, I have not made, and will not make, any claim under any enactment for travelling or subsistence or attendance allowance in connection with the duties indicated on this form. Indicate 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 Normal Mileage Details input onto Payroll system: By: CM Date: 26 9.07					
Home Address 💢 🔰	DOUCHIFUC	700					
Metropolitan Borough Counc the rates determined by Bolto	il; that I have actually in Metropolitan Borou inserted on this form a ancial loss allowance	paid the rares and made once payingh Council. re correct. Except as shown, I have or attendance allowance in connected have adequate insurance covid have adequate insurance covid.	not made, and will not mak tion with the duties indicate er for the use of my vehic	te, any claim under any old on this form. cle on Council busine Date 5	enactment for travel	ling or subsistence	ıly)
Approved	- Ab-			11. C. Marchana Car	nicae)		
,		FOR OFFICIAL USE OF		mittee & Members Sen	onces)		
* Subsistence Allowance Subsistence Allowance (Taxable)	Amount £:p (20:16) 20:16	Normal Mileage		•	· , ·	/stem:	
Travel Reimbursement (e.g. Car Park, taxis) Dependent Carer's	:	Worsta	43.	Date: 2	6.9.07		

Notes:

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

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

Allowance



	Particulars of Journeys			Mode	Miles	Dependent Carers		Fares and other		Subsistence	
Date	Description of Approved Duties,	Tin	ne of	of		Allowance `		Expenses		Allow	
2007	including Locations (From & To)	Departure	Return	Travel	Claimed	£	P	£	P F	t.	<u> </u>
UCU37	Much of Hors - Town HALL US DEA WITHERED			<u></u>	49						╬
vision.	MILEACE IN COURSE OF DUTIES OF LON WITHERED				43				 		+-
										8	170
+ Auc	POLICE PAES PALA THAME - LIC + ENV.	900	1630				_				22
S AUC	PEAFORM, I PAN. + VJ SQUARE + HR POG + HA BLEC. + MAR CHARS	9-00	1800		-				_	6	
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	y amounts received by way of Travelling & Subsistence from any other Auth					j ·			:	20	1

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

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

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

Name:	FRANK WH	116	Month: AVGUST	2007
Date HVCt37	Home/Town Hall	Mileage	Business journey description	Mileage
20	,		VISIT TO SCHOLEYS' POLICE STATIONAL	8
3~			VISIO 85 SCHOLEY ST POLICO SAMO!	8
<u> </u>	+ REPURN	4	EtEC. BRIEFING + EtEC.	·
881			BUICE PRESENTION SCHOLLY ST	8
8			14. C.P. MEMINE + SUNCERT	8
13"	+ RETURN	7 :	EtEC- BAVEFINE	
140			Pouce PRESENDION + LIC + ENV.	8
14			CARRIE HILL YOSAN CLUB	5
1500	1 RENIN	7	PERFURN. MAN. + HR POG + HA EXEC+ FIN.	
2001	+ Phenum	7	EtEC. BAIET. + VALQ DIV. + CONT. SCAUR.	
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BOLTON METROPOLITAN BOROUGH COUNCIL MEMBERS ALLOWANCES CLAIM Name of Member Claim for Month of (Block capitals please) **Exact** Cubic Capacity Registration No. Car (Make / Model) Home Address (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 of allowances, or financial loss allowance or attendance allowance in connection with the duties indicated on this form. (For Car Allowance claimants only) icence and have adequate insurance cover for the use of my vehicle on Council (business (b) I am the MEMBER Signed Approved FOR OFFICIAL USE ONLY (Completed by Committee & Members Services) Miles Amount 137 £:p Details input onto Payroll system: Normal Mileage Subsistence Allowance Subsistence Allowance (Taxable) 8.10.07 Travel Reimbursement Date: (e.g. Car Park, taxis) 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 Journal Control		***************************************	Mode	Miles	Dependent	Carers	Fares and	l other	Subsist	tence
) Date	Description of Approved Duti	Tir	ne of	of		Allowa	nce	Expen	ses	Allowa	ance
つ Date ピアフ、	including Locations (From & To)	Departure	Return	Travel	Claimed	£	p	, £	p .	£	1
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	AS PEN ATTACKED SHEET			CAR	98						┷
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lan V	Parentono Thinky Visit - Strittings			 ,			<u> </u>				
7	11.2 + SUSCC + S.S. Hone	1030	Ho-18 17-30	lar			<u> </u> 			6	7
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Deduct any amounts received by way of Travelling & Subsistence from any other Authorities or bodies on the above dates and give particulars

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

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

Name:	TRANK TYH	17E	Month: SEPTEMBER	
Date	Home/Town Hall	Mileage	Business journey description	Mileage
Bus	+ RETURN	7	HR + KAECUNIE	
Lite	+	7	SPORTS HORDENTICE ANIMO	
514	+ ~	7	CHIEF X + GAP HESSESS + HA EXEC	
bai	+ ~	M	MCENNES + EVENUL MEN 4.C.P.	
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80			409 KUENT + GHANA IND. PAT	1,,-
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192	•	7	PBB RADIO + 4R PDG	
70.		- '	AREA FEAUNT	
2/57		7	14. R. + Her Concern HELM	2
2421		9	Ette + WITHING GOV.	
251	~ ,	7	Figs Con D. R. 4 C.	1.
761		7	FIBRO GLOV, + RASIO + YOUR CLUB EVEN.	4
272	٧.	7	RAMO + TAGINING + 14 R Exec. + HAWAT + PARENDOIN	6
282	ς,	7	HR.+ SZSC +SS. + VERNING GARGET PADITITION + MATOR + CONTERT + H. R.	6
			INVITION + "177011 HONGERT + H. K.	
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28 Fapt 2007

BOLTON METROPOLITAN BOROUGH COUNCIL

	·	МЕМВ	ERS ALLOWANG	CES CLAIM			· · · · · · · · · · · · · · · · · · ·
Claim for Month of Car (Make/Model) For Model	CAUBEN O MONREO E DOMENNE A	2007 Serme [Bolow	Name of Member (Block capitals please) Registration No.	FRANK WIH	Exact Cubic Capac	Pay No	c.
DECLARATION: (a) I declare that I have actually Metropolitan Borough Courthe rates determined by Bol	ncil; that I have actually	paid the fares and made other p	subsistence for the purpayments shown on this	pose of enabling me to perfo form; and that the amounts	orm duties as a Member of claimed are strictly in ac	of the Bolton cordance with	
I declare that the particulars expenses of allowances, or (b) I am the Signed	mancial loss allowance	re correct. Except as shown, I ha or attendance allowance in cont d have adequate insurance c MEMBER	nection with the duties i	ndicated on this form.		ng or subsistence Allowance claimants o	nly)
		FOR OFFICIAL USE	ONLY (Completed by	Committee & Members S	ervices)	•	•
,	Amount £:p		Miles 77				
* Subsistence Allowance Subsistence Allowance (Taxable)	46 90	Normal Mileage	52		input onto Payroll syst	em:	
Travel Reimbursement (e.g. Car Park, taxis)	5 :40			Date:	2.11.67		
Dependent Carer's Allowance	:		12.9				

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 an	d other	Subsis	
Date	Description of Approved Duties	Tin	ie of	of		Allowa	nce	Exper		Allow	
	including Locations (From & To)	Departure	Return	Travel	Claimed	£	p	£	P	£	P
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1001	14. P. + If I BARC. + HOSPAT VASTOCI. H	er 9.45	1602 1800	Can	**					6	20
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		<u> </u>						5	40	46	0

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

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

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

TAMILLO.	FRANK WI		Month: Octobren 2007	
Date	Home/Town Hall	Mileage	Business journey description	Mileag
15	+ RETURN	7	Exercise BAIEL. AWAY DAY KINKEDS	16
			CONTORMO SCRUINT +H.A.	10
16	+ KENUAN	7	H.R. MEETINGS	
8	+ RETURN	7	4. R. + ALD GICAN + COM 1	
22	+ Revan	7	11.R + Exec. Bailt	
73	+ levan	7	H.A. DISPURE / TOOME	
24	+ ResuiN	4	Corneil	
25	+ Revin	7	4. R. + SHADOW + En + 4R	4
76	+ ROWN	7	HA + PAY+ CRAPINE	
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21 Bryanston Street, London W1H 7AB Tel: 0870 606 7050 VAT No. 239 0546 59 THANK YOU, PLEASE CALL AGAIN

NCP Manchester LTD.

TERNS AND CONDITIONS - Entry to or use of this car park is at your own ris
Copies are exhibited and a copy is available for inspection on request.

5049,95525090,955,755 29/10/07 Entry 1 Central Undercroft 9/13676 17:58

AS-40-40D

Members' Allowances Claim Bolton



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Name FRA	NN R. WHITE	Home Addres	s 23 1	LOVEDA	16 1	d	FUTON B	12 3	147	Pay No	
Car Make/Mo	del Ford MONNEO	Registration	Maria de Caracteria de Caracte		Exact	CC	1799		Month	North	16th 2007
regard to the u (For Car Allo regard to the u (c) (For Car Allo d) I have actually other palymen	wance claims only) I have actually and necessar wance claims only) I am the holder of a full, currouse of my car on Council business. wance claims only) I will retain VAT receipts covey and necessarily incurred expenditure in travelling ts shown on this form, and that all amounts claime own, I have not made, and will not make, any claim	ent and valid driving lic ering all journeys for six and subsistence for th d are strictly in accorda	ence and MOT or x years in order to e purpose of ence ance with the rat	certificate (where to comply with F abling me to per es determined to	e applicab HMRC regi rform dutie by Bolton (ole), and ulations. es as a N	I have complied w Member of Bolton	vith the (Council,	Council's insura	paid the fare	es and made
or allowations	, or financial loss allowance or attendance allowands sinserted on this form are correct, and I understan	ce in connection with the	ne duties indicat	ed on this form.		Subsi	stence T	AO		l Miles	141
Signed T		Data # 14	Des	2017	T	Subsi	stence NT	<u> </u>	F	or Pavi	roll Use Only
- \ \ \ \ \	Memb examined this allowance sheet, the figures recorded		the expense wa	s necessary.		Exper	nses NT		lnpu	•	
Authorised	Members' Service	Date				Carer	's Allowance		Date	,	
Date	Reason for Journe	У	Tim Departure	e of Return	Mil Clair		Subsister Allowand		Fares ar		Dependent arers Allowand
Nev. 2007	TILLEAGE BOTE HOME - Townt	0.7	MARKED	T .	112		£		£ .	p £	
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7 - 1							£	p 1	£	p £	
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3 New	It. A. + PAEL - LICENSING & EX	VINON-TENT	toys lover	10×61730			£6.72	рЯ	3	p £	
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1 Nov	Occ. HEACH + IMERUSUS	4	546 9 6U	Tone 16.00	,		£672	p £	2	p £	
16 NOV	H.R. + Ex. BRIEF + EXEC + SMIT	· 1-10	18 1000	1600 1700			£6.72	p £	2	р£	
							£	p £	2	p £	
							£	p £		р£	•
							£	p £		p £	, •
					Total I	Miles	Total Amo		Total Amo		Total Amount
Please only	enter the number of miles. Do no	t calculate an a	mount for	payment.	1/1		£40:32	р	<u> </u>	p £	
	e more lines, please use a Members All claims must be signed a	s' Allowances A	dditional S	heet	a navme	nt can	Number of			ts Used:	
PAY-M1 12.10.2007		harer arvice Ce						a ivulu	De sentio		

march 9 SC

Date	FRAND W. Home/Town		Month: November 2007	
	Hall	Mileage	Business journey description	Mileag
574	+ RETURN	7	KHEC. BALLY + PEM. CONTERT	
5	<u> </u>	7	H.R + LICENSING	
7	~	7	H.R + VAL& DIVERSITY	
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//~		7	Hanismes Farade.	
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7	-		DIVERSITY ANMOS - REESOON	17
9	<u></u>	7	14. R. REMENRATUR GICAN	1/
7/	N.S.	7	Occ. HEARTH + INTERVIEWS + L/Kun CFORUM	6
8		7	EtEC. BRIEF + ETECUTIVE + STAFF.	
7	· .	7	LICENSING + Cons. RADIO	
8		7	4.R. + 11.R. Bec.	
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5 Dec 2007

Members' Allowances Claim JAN 2008 Home Address 73 DONEMALO WHITE Name FRANK Exact CC TORID MONDED Registration Car Make/Model I certify that:-(a) (For Car Allowance claims only) I have actually and necessarily incurred the mileage claimed in accordance with the Council's scheme of Motor Car Allowances. (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. FOR MEMBERS' SERVICES USE ONLY Except as sown, 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. 20.16 |Total Miles Subsistence T The particulars inserted on this form are correct, and I understand that fraudulent claims may result in disciplinary action. For Payroll Use Only Subsistence NT Signed Date Input by Expenses NT CM certify that I have examined this allowance sheet, the figures recorded are reasonable, and the expense was necessary Date -Carer's Allowance Date 28-1.08 Authorised Members' Services

Dependent Time of Fares and Subsistence Reason for Journey Miles Date 7007 **Carers Allowance** Other Expenses Departure Return Claimed Allowance (including From and To) £ £ MILLEGER MON HOME TO THAKE & RETURN AS ION AMARILENS Mamoria £ £ MILLEYER INCURSOR DUNING DUNIES AS POR р £ р 16mx 16-30 £ INT. AM DISABLUS + H.A. + SUDMUST INTEN. р р GARRET BAIP ON GHAMITY + CEM. HENRIUS. + COM I £ £ fort 20.00 р р Horas 17.00 £ ICOCO + IHA EXEC + Com. RADIO р £ р £ р £ £ £ р £ £ р £ £ £ р £ £. Total Amount Total Miles Total Amount Total Amount £ Please only enter the number of miles. Do not calculate an amount for payment. £20.16

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

Number of Additional Sheets Used

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

PAY-M1 12.10.2007

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

110

	FRANK WH	114	Month: December 2007	
Date	Home/Town Hall	Mileage	Business journey description	Mileage
300	+ Renn	7	Eter. BAIEF + CORP. SCAUTING	
424			Esenial Meenas Cysristen Yourton	6
Zei.	u	7.	ENCAMANIONAL DAY DISARED + SHOWNING	0
1011	<u>۸</u>	7	EAGLET BALAGE CHAMITY + CEUX 1485 + Con 1	
10a		7	4R Exec.	
2n		*	Peace VCAN MERINE ON SIZE	6
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<u>5</u> ²		Λ.	BRENING S" HINENS COIN. CONNE + 1 YATOROL Ref.	11
74		7	ELEC. BRIEFINE	
82	<u>.</u>		ICOCO + HABAGE + COMM. RAMO	
9n		7	INTERVIEWS + HAULGH SULCERY.	
0 14	<u>.</u>	/	H. R. MEETINGS + HOW. ACD. FUNCTION	4
			CASILO HILE TORN CLUB MERSTIAL	6
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Members' Allowances Claim

TERMS AND CONDITIONS - Entry to or use of this car park is at your own records are exhibited and a copy is available for inspection.



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Name //				Exact		706	f 5	.Т. 17.5% -ЙИ РОГ 1	Ø.89	SF in 1	no Entry j Prields
Car Make/Mod	del Tonn MonfEO Est. Registr	ration 🐔	المريخ	Exact	GG 2,	1/700	- 6376	71/08 13:0	18		of the state of
(h) (For Car Alloy	vance claims only) I have actually and necessarily incurred to the vance claims only) I am the holder of a full, current and valid se of my car on Council business.	he mileage claimed in acc I driving licence and MOT o	ordance with the certificate (where	Council' applicat	s scheme o ole), and I h	of Motor Car Alic lave complied w	wance ith the	es. : Council's i	- nsurance requ	irement	s Witn
(c) (For Car Allow (d) I have actually	vance claims only) I will retain VAT receipts covering all journ and necessarily incurred expenditure in travelling and subsiste a shown on this form, and that all amounts claimed are strictly	ence for the purpose of ena in accordance with the rat	abling me to perf es determined by	orm dution v Bolton	es as a Me						
(-) Evacet as abou	wn I have not made, and will not make, any claim under any e	enactment for traveilling or s	subsistence expe	enses		FOR MEN					
or allowances,	or financial loss allowance or attendance allowance in connec	ulent claims may result in o	lisciplinary action	٦.	Subsist	ence I	_33	3.60	Total Miles		157
Signed	Member Date /	8 /ren 200	2	:	Subsist	ence NT		· ·	For Pa	ayrol	Use Only
	xamined his allowance sheet, the figures recorded are reason	nable, and the expense wa	s necessary.		Expens	es NT	ص ا	.00	Input by		CM
Authorised	Services Date	,			Carer's	Allowance			Date		5.2.08
Date	Reason for Journey (including From and To)	Tim Departure	e of Return	Mil Clai		Subsisten Allowand	- 1		s and xpenses		Dependent ers Allowance
SAN 2008	Toran Mucanet Par Home is Won			90	0	£	р	£	р	£	р
CAN 2008	Tom Muches on GUASO OF DUT		-	61		£	р	£	р	£	р
17: 7:00						£	р	£	· p	£	p ·
9 JAN'08	MARION MONTHE + Et BAIEF. Exec + L/Hazo	or HABA HOME 09-15	Hore 18-00			£6.72	р	£	р	£	р
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23 JAN 08	N. W. EmPLOYER PSSEC. MICHHAPDE Nolven	Provincy Home 09-00	Her 6 17-00			£6.72	р	£ 6000	AN MAR	998	lea VIMAAP
30 Jan 08	REEROOM APRO + TRAINING + HA EXEC + NITHINS + 4/1	HULME FOR HOME 08-30	1098 18-30			£6.72	р	£	<u>р</u>	£	р
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177						£	р	£	· p	£	р
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Please only	enter the number of miles. Do not calcula	ate an amount for	payment.	۱۶	٦	£33 · 60	þ	£ 6 - 6	90 p	£	р
If you require PAY-M1	more lines, please use a Members' Allowa All claims must be signed and autho	rised by Members' Se	ervices before	payme	ent can <u>b</u>	Number of e made, and	shou			ed	
12.10.2007	Payroll Share	rvice Centre, 5th Fl	oor, Paderbo	rn Hot	ıse, B∵	n BL1 1JW					•

		/	- ching capenses claim	•	
Name:		VIHAG	Month: SANVARY 2008		· _
Date SAN	Home/Town Hall	Mileage	Business journey description	Mileage	_
714	+ RETURN	7	4R RECEMPON + CHIEF EX + GROVE	-	
X TH	+ RG10AV	7.	HOLOCAUS DAY + COMM. RAND	<u> </u>	
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Members' Allowances Claim Pay No Home Address 23 Dovenhue 2008 FEB Month Exact CC Name Registration #YONDEO FORD Car Make/Model (a) (For Car Allowance claims only) I have actually and necessarily incurred the mileage claimed in accordance with the Council's scheme of Motor Car Allowances. (b) (For Car Allowance claims only) I have actually and necessarily mounted the milegage damled in accordance with the Council's insurance requirements with 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 20-16 Total Miles or allowances or financial loss allowance as attendance allowance in connection with the duties indicated on this form. Subsistence T t, and I understand that fraudulent claims may result in disciplinary action. For Payroll Use Only Subsistence NT The particulars Date CW Input by Expenses NT Member Signed I certify that I have examined this allowance sheet, the figures recorded are reasonable, and the expense was necessary. 3.3.08 Date Carer's Allowance Date Dependent Members' Services Fares and Authorised Subsistence Miles Carers Allowance Time of Other Expenses Reason for Journey Allowance Claimed Departure Return (including From and To) £ р Date £ MILEHED FADY HOME TO THE + RETURN £ р FEH 200 £ р PER ATTHEHEN FORM р £ £ р £ р £ р р HR VACE SHOW. HADLGH VYBERING H. A. + GOVENOUS 18.00 р £ р H.R. + PLANNING MESEMAMON + HOUSING + BAES 10.00 19-65 £ р £ р 15.00 9.15 H.R. + TWIENFAMH р £ FEB £ D £ р £ р £ £ р £ р £ р р £ £ q £ р a £ р а £ Total Amount Total Amount Total Amount

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

Number of Additional Sheets Used

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

PAY-M1 12.10.2007

Payroll Share Prvice Centre, 5th Floor, Paderborn House, B

£20-

Total Miles

Date	Home/Town	Mileage	Month: MENVING 2008 Business journey description	Mileage
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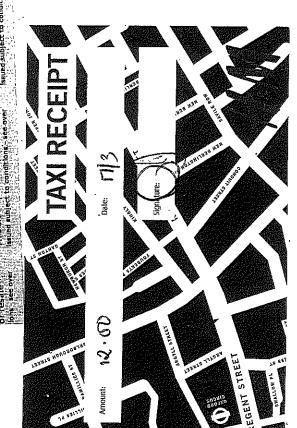
Members' Allowances Claim Bolton Council

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ertify that:- (For Car Allowa (For Car Allowa regard to the use	nce claims only) I have actually and neces nce claims only) I am the holder of a full, c of my car on Council business.	overing all journeys for six	years in order t	o comply with HN	ARC regulation	ns. a Mem	ber of Bolton C	ouncii,	I have actually	paid the it	ges an	u IIIauc	
I have actually at	nd necessarily incurred expenditure in the	med are strictly in accorda	nce with the rat	es determined by	nses	J		BEF	S' SERV	ICES U	SE C	SO	
Except as shown	n, I have not made, and will not make, and on r financial loss allowance or attendance alor	vance in connection with the	e duties indicat s may result in o	ed on this form. disciplinary action	. Sub	siste	nce T	20	. i lo √ Tot	ai Miles			
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igned	M rainined this allowance sheet, the figures rec	orded are reasonable, and	the expense w	as necessary.			s NT	<u> </u>	.30 V Inp			3.4.08	
ertify that I have ex uthorised	Members' Se	l Date			Car	rer's	Allowance		Da			Dependent	
	Reason for Jour	ney	i	ne of Return	Miles Claimed	,	Subsisten Allowanc		Fares a Other Exp		Care	ers Allowan	
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All claims must be signed and authorised by Members' Services before payment can be made Payroll Share Pervice Centre, 5th Floor, Paderborn House, Bon BL1 1JW PAY-M1

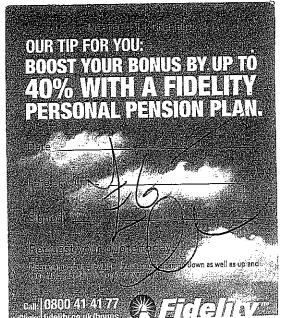
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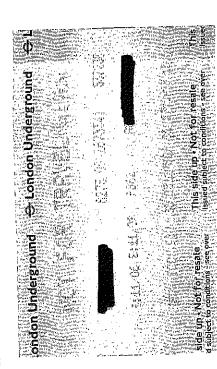
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Date:(Signed:







WILKINSON

BOLTON METROPOLITAN BOROUGH COUNCIL

MEMBERS ALLOWANCES CLAIM

Claim for Month of	211	-	of Member	Pay No. Pay No.
Car (Make / Model)			ration No	Exact Cubic Capacitycc.
Home Address	~ co	ESCENT WEST	ment.	
Metropolitan Borough Cour the rates determined by Boli	ncil; that I have actually ton Metropolitan Boro	y paid the fares and made other payments s ugh Council.	shown on this form	of enabling me to perform duties as a Member of the Bolton; and that the amounts claimed are strictly in accordance with ake, any claim under any enactment for travelling or subsistence
expenses or allowances, or f	inancial loss allowance	e or attendance allowance in connection wit	th the duties indica	ted on this form.
(b) I am the holder of a curre Signed Approved	ent driving licence at	nd have adequate insurance cover for t MEMBER	he use of my vel	Date
		FOR OFFICIAL USE ONLY (Completed by Con	nmittee & Members Services)
	Amount £:p		Miles	
* Subsistence Allowance	:	Normal Mileage		Details input onto Payroll system:
Subsistence Allowance (Taxable)	:			Ву:
Travel Reimbursement (e.g. Car Park, taxis)	5 :65.			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.





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

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

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

OUT Price £5·65M Number 34574 0055e2777N51 ON DATE SHOUN Validits Child NIL Disc Valid until 13.APR-07 Route ANY PERMITTED 를 등 Start Date 13·APR·07 Class Ticker type STD STD DAY RETURN TO MANCHESTER CTLZ From DAISY HILL *

RTN Number 34574 005562777N51 Price £5-65M Validity ON DRIE SHOWN Child Disc ONE + Valid until 13·APR·07 Route ANY PERMITTED Stort Date 13.APR-07 Closs Ticket type STD STD DAY RETURN From MANCHESTER CTLZ To DAISY HILL

MEMBERS ALLOWANCES CLAIM

BOLTON METROPOLITAN BOROUGH COUNCIL

		MILMID	EKS ALLOWANCES	CLAIM		
Claim for Month of MA	Υ.	20_07	Name of Member \(\sum_{\text{R}}\) (Block capitals please)	WALLOW A COLON	CINISON Pay N	0.
Car (Make/Model)	<u>. </u>		Registration No.	<u>Exac</u>	t Cubic Capacity	cc.
Home Address 12 TH	s cres	cent, wes	Moughto	7		
the rates determined by Bolto	il; that I have actually n Metropolitan Borou	paid the fares and made other p	ayments shown on this form,	and that the amounts claimed	are strictly in accordance w	ith
expenses or allowances, or fin	ancial loss allowance	or attendance allowance in con	nection with the duties indica	ed on this form.		
(b) I am the holder of a current	t driving licence an	d have adequate insurance c	over for the use of my veh	Date 25 6	(For Car Allowance c	aimants only)
Approved		_		Date		
		FOR OFFICIAL USE	ONLY (Completed by Com	mittee & Members Services)		
	Amount £:p		Miles			
* Subsistence Allowance	: ,	Normal Mileage		Details input ont	to Payroll system:	. •

	•	Amount		Miles	. `
		£:p		·	,
*	Subsistence Allowance	: ,	Normal Mileage		Details input onto Payroll system:
.•	Subsistence Allowance (Taxable)	:			Ву:
	Travel Reimbursement (e.g. Car Park, taxis)	2 90.			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.



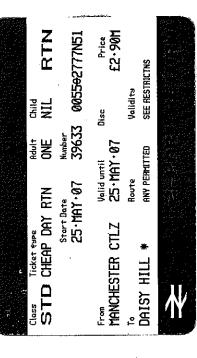


	ranktuais or journeys		Mode of	Miles	Dependent Carers Allowance		Fares and other Expenses		Subsistence Allowance		
Date	Description of Approved Duties, including Locations (From & To)	Departure	e or Return	Travel	Claimed	£	P	£ p		£ p	
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Deduct any amounts 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.

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



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Start Date
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DAISY HILL * 25-MAY-07 Route
To Route
MANCHESTER CTLZ ANY PEPMITTED SEE RESTRICTNS

BOLTON METROPOLITAN BOROUGH COUNCIL

MEMBERS ALLOWANCES CLAIM

Claim for Month of SUNS 2007	Name of Member DAULT A WILKINGTO Pay No.
Car (Make/Model)	Registration No. <u>Exact</u> Cubic Capacitycc.
Home Address 12 THE CRESCENT WE	COMPURATE
Metropolitan Borough Council; that I have actually paid the fares and made other the rates determined by Bolton Metropolitan Borough Council.	
FOR OFFICIAL USE	E ONLY (Completed by Committee & Members Services)
Amount £:p	Miles
* Subsistence Allowance : Normal Mileage	Details input onto Payroll system:
Subsistence Allowance : (Taxable)	Ву:
Travel Reimbursement (e.g. Car Park, taxis) Dependent Carer's Allowance	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.



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	Particulars of Journeys			Mode	Miles	Dependent Carers Allowance		Fares an Expe		Subsistence Allowance	
Date	Description of Approved Duties, including Locations (From & To)	Tin Departure	ne of Return	of Travel	Claimed	£			£ p		21100
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Deduct any amounts received by way of Travelling & Subsistence from any other Authorities or bodies on the above dates and give particulars

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

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

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STD DAY RETURN ONE NIL OUT
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To Route
To

Class Ticker type
STD STD DAY RETURN ONE NIL RTN
Start Date Number
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TO ROUTE WHILL * ROUTE NUMBER ON DRIE SHOWN

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-		BOLTON	METRO S ALLOWANCES			Surname Will	KINS	on.	nitials	<u>A. C</u>			
		<u></u>	month of <u>SW</u>		07						FOR G.M.F		•
	Date ,	Description of Approved Duties	Place and Time of Departure	Place and Time of Return	Mode of Travel	Official Passengers	Miles	Fares and Inci Expenses (see		Subsister Allowar £		Attend Allowa £	
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	CLAIMS I	or bodies on the above date MUST BE SUBMITTED ONTH AND BY NO LAT	AS SOON AS PO	OSSIBLE AFTER T			@		<u> </u> 				
	Passed for p		EXTRANTILE:	TH OF EACH MA	OITEU,	Grand Total	£	5	80				

Date	Details of incidental expenses claimed	£	p
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DECLARATION

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

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

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

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

Date	20	Signature of Member	

NOTES

1. CONDITIONS AND METHOD OF CLAIM

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

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

2. TRAVELLING ALLOWANCES

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

exceeding 999cc but not exceeding 1199cc

32.5p a mile 36.3p a mile

(c) exceeding 1199cc

44.8p a mile

Jenease of 1.0p a mile of each passenger to whom travelling expenses would otherwise but the for a maximum of four.

Rates for motor cycle travel are available on request. Mileage is to be calculated by referenc to the shortest practicable route unless use of a motorway results in substantial saving of time details of which must be given.

3. SUBSISTENCE ALLOWANCES

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

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

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

(Lunch Allowance)

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

(Tea Allowance)

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

£2.59

£8.13

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

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

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

Standard rate of £32.50 per day.

•		,		FOR	OFFICIA	LUSE			·.	
,	Pay	y Ref		,	Expend Code	Job Code	Pay Code	£	р	Class
				Attendance Allowance	434 46 30	15200	21			2
				Subsistence Allowance (Taxable)	434 46 31	15200	22			2
		.		Subsistence Allowance	434 46 31	15200	22			6
			<u> </u>	Travel Reimbursement	434 46 31	15200	25			. 6
				Travel Allowance	434 46 31	15200	26			, 6



RIN

Number 45253 005592777N51

Price £2.90M

Disc

SEE RESTRICTNS

Validity

Price £2·90M OUT Number 45253 805592777N51 SEE RESTRICTNS Validity Child NIL Disc Valid until Route ANY PERMITTED Start Date 13·JLY·07 Class Ticket type
STD CHEAP DAY RIN MANCHESTER CTLZ From DAISY HILL * 松

MANCHESTER CTLZ

Valid until 27.JLY-07

Disc

Price **£2.90X**

STD CHEAP DAY RTN

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RTN

Start Date 27-JLY-07

Number 46679

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SEE RESTRICTNS Validity

<u>±</u>

Date

BOLTON METRO

Surname WILKINSON

Reg. No. _

Official

Initials

A. a

Fares and Incidental Subsistence Attendance

MEMBERS ALLOWANCES

Description of Approved Place and Time Place and Time

		~ 60	_
Claim for month of	128128V	20	<u>o (</u>

CAR ALLOWANCE

Car Make _____ Model ____

Exact CC

FORM 2

G.M.P.T.A.

	Duties	of Departure	of Return	Travel	Passengers		Expenses (se	e over) ·	Allowa	ance	Allow	ance
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Mode of

Date	Details of incidental expense	£	p	
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DECLARATION

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

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

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

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

Date	1	20	Signature of Member	

NOTES

1. CONDITIONS AND METHOD OF CLAIM

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

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

2. TRAVELLING ALLOWANCES

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

32.5p a mile

(b) exceeding 999cc but not exceeding 1199ca

36.3p a mile

(c) exceeding 1199cc

44.8p a mile

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

Rates for motor cycle travel are available on request. Mileage is to be calculated by refere to the shortest practicable route unless use of a motorway results in substantial saving of ti details of which must be given.

£6.5

£2.5

£8.1

3. SUBSISTENCE ALLOWANCES

For an absence not involving an absence overnight from the usual place of residence of four hou (a) the whole of which is before 11.00 a.m. (Breakfast Allowance) £4.7

- (b) which includes the whole of the period between 12 noon and 2.00 p.m. (Lunch Allowance)
 - which includes the whole of the period between 3.00 p.m. and 6.00 p.m. (Tea Allowance)

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

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

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

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

Standard rate of £32.50 per day.

			FOR	OFFICIA	L USE (ONLY			
Pay	Ref			Expend Code	Job Code	Pay Code	£	p	Clas
\prod			Attendance Allowance	434 46 30	15200	21			2
			Subsistence Allowance (Taxable)	434 46 31	15200	22			2
			Subsistence Allowance	434 46 31	15200	22	ŀ		6
		 	Travel Reimbursement	434 46 31	15200	25			6
			Travel Allowance	434 46 31	15200	26			, 6

Adult Child
ONE NIL OUT
Number
51865 005592777N51 Number 53590 005562777NSI OUT Price £2.99H RTN Price **E2.90M** Number 53590 005502777N51 SEE RESTRICTNS SEE RESTRICTNS ON DATE SHOUN Validits Validity Child NIL Validits Disc Disc child NIL Disc Adult ONE Valid until 14·SEP·07 Valid until 28·SEP·07 Route ANY PERMITTED Adult ONE ANY PERMITTED Valid until 28-SEP-07 ANY PERMITTED RNY PERMITTED Start Date 28-SEP-07 Start Date 14.SEP-07 Class Ticker type STD STD DAY RETURN Route Closs Ticket Fame .

STD CHEAP DAY RTN Start Date 28.SEP.07 Route Class Ticket type '
STD CHEAP DAY RTN TO MANCHESTER CTLZ MANCHESTER CTLZ From MANCHESTER CTLZ From DAISY HILL * From DAISY HILL * DAISY HILL * DAISY HILL *

ON DATE SHOLN

Number 51865 00559-2777N51

Start Date 14.SEP-07

Price £5·65M

Disc

Valid until

From MANCHESTER CTLZ

Validits

Route

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Child NIL

Class Ticker Taye STD STD OMY REJUGN

4	

Passed for payment by

BOLTON METRO

Surname WILKINGON

Reg. No. _

Initials D. A

MEMBERS ALLOWANCES

	Claim for month	of DETOSSEL	200
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CAR ALLOWANCE

Car Make _____ Model _____

Exact CC _

FORM 2

G.M.P.T.A.

Date	Description of Approved	Place and Time	Place and Time	Mode of	Official Passengers	Miles	Fares and Inc Expenses (se		Subsist		Attend	
	Duties	of Departure	of Return	Travel	rassengers		£	p	£	р	£	ano.
5/10/07	ENSTA	BURT HICK	BARST HILL	RAIN	· · · · · · · · · · · · · · · · · · ·		క	165		 		T L
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);		DAR! HILL				JOUNG	5	165		 	<u> </u>	!
19/10	EMPTA	8141m	1-30 p		13 NO	<u> 2007 - </u>		<u> </u>				1
				,	PAYROLL	SHARED	<u> </u>	1		<u> </u>		<u> </u>
!					SERVICE	CENTRE						
								! 				
	amounts received by way of a rounds on the above date			other	Total	@	16.	190]
CLAIMS I	MUST BE SUBMITTED ONTH AND BY NO LAT	AS SOON AS PO	SSIBLE AFTER		: _	@]]]		 		
Passed for r				•	Grand Total	£	16	50				

Date	Details of incidental expenses c ¹⁻ⁱ med	£	p
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4			•
			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 overleaf; and that the amounts claimed are strictly in accordance with the rates determined by Bolton Metropolitan Borough Council.

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

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

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

D-4-	•	20	Signature of Mem.		
Date		20	 Signature of Men	0-04	20

NOTES

1. CONDITIONS AND METHOD OF CLAIM

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

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

2. TRAVELLING ALLOWANCES

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

32.5p a mile

(b) exceeding 999cc but not exceeding 1199cc

36.3p a mile

(c) exceeding 1199cc

44.8p a mile

(iii) Increase of 1.0p a mile of each passenger to whom travelling expenses would otherwise t paya! or a maximum of four.

Rates for motor cycle travel are available on request. Mileage is to be calculated by reference to the shortest practicable route unless use of a motorway results in substantial saving of times.

. SUBSISTENCE ALLOWANCES

details of which must be given.

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

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

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

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

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

£2.59

£6.57

(Evening Meal Allowance) £8.13

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

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

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

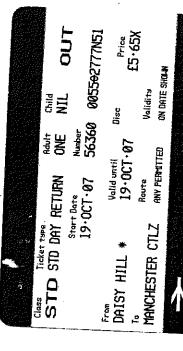
Standard rate of £32.50 per day.

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



RIN Price £5-65M Number 54407 005502777N51 ON DATE SHOUN Validity Child NI Disc Pagust ONE page Valid until 05·0CT·07 ANY PERMITTED Start Date 05·0CT·07 Route Class Ticket type STD STD DAY RETURN MANCHESTER CTLZ * DAISY HILL

Price **E5·65M** 0055e2777N51 ON DATE SHOUN Validity Ę Disc Number 54407 Valid until 05·0CT·07 불봉 ANY PERMITTED Route Start Date 05.0CT-07 Class Ticket type STD DAY RETURN MANCHESTER CTLZ From DAISY HILL *



Class Ticker type
STD STD DAY RETURN ONE NIL RTN
Start Date Number
19.0CT-07 56360 005562777N51
From Valid until Disc Price
To Route Validity
DAISY HILL * RNY PEPRITTED ON DATE SHOWN

Price £2.80M 0055e2777N51 SGL SEE RESTRICTNS Validity ₽ H Disc Number 55953 Valid until 16·0CT·07 ANY PERMITTED Start Date 16·0CT·07 Route Class Ticket type
STD CHEAP DAY SGL TO MANCHESTER CTLZ From DAISY HILL

Class Ticket type

STD CHEAP DAY SGL ONE NIL SGL

Start Date Number

17.0CT.07 99347 0146e2970N52

From Valid until Disc Price

MANCHESTER STNS 17.0CT.07

To Route Validity

DAISY HILL ** ANY PERMITTED SEE RESTRICTNS

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MEMBERS	ALL	OWANG	TES

MEMBERS ALLOWANCES

Claim for month of Nousant 20 27

CAR ALLOWANCE									
Car Make		Model							

FORM 2

G.M.P.T.A.

					Reg. No							
Date	Description of Approved Duties	Place and Time of Departure	Place and Time of Return	Mode of Travel	Official Passengers	Miles	Fares and Inc Expenses (se		Subsist Allowa		Attend Allow	
							£.	, p .	£	p _.	£	p
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16/11/0	CMPTA	BRIST HIL	South Hill	KAI W			5	165				
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23/11/5	AT.S. M.S.	DAIST HILL	DAISY HILL	and the state of t			5	165	·	İ		<u> </u>
		375.8	1-30p									<u></u>
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	amounts received by way o or bodies on the above date			other	Total	@	12	80	,			
	MUST BE SUBMITTED . ONTH AND BY NO(LAT					@	,		,			
Passed for p	ayment by		<u> </u>		Grand Total	£	14	8				

Date	Details of incidental expenses claime	d	£	p
<u>····</u>				
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(b) (For car allowance claimants only - delete if not applicable.)

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

Date 5

20 <u>D</u>

Signature of Member

NOTES

1. CONDITIONS AND METHOD OF CLAIM

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b) exceeding 999cc but not exceeding 1199cc

36.3p a mile

(c) exceeding 1199cc

44.8p a mile

3. SUBSISTENCE ALLOWANCES

details of which must be given.

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

£6.

£2.

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

(Lunch Allowance)

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

(d) which extends beyond 7.00 p.m. (Evening Meal Allowance) £8.

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

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ATTENDANCE ALLOWANCE - GREATER MANCHESTER PASSENGER TRANSPORT AUTHORITY (GMPTA)

Standard rate of £32.50 per day.

FOR OFFICIAL USE ONLY

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Pay	y Ref		Expend Job Code Cod		Pay Code	£ p	Cla						
		Attendance Allowance	434 46 30	15200	21		2						
		Subsistence Allowance (Taxable)	434 46 31	15200	22		2						
		Subsistence Allowance	434 46 31	15200	22		6						
		Travel Reimbursement	434 46 31	15200	25		6						
		Travel Allowance	434 46 31	15200	26		6						
		-											
				<u> </u>			2						

3 raint date 09 · NOV · 07 Said until 09·NOV·07 STD DAY RANGER Available G M RAIL RANGER Sound of BOLTON *

£3.50M

0024e2599N52

AS ADVERTISED.ONEDAY

RIN Price £5·65M 0055e2777N51 ON DATE SHOUN Validity Child NIC Disc Number 60084 를 **등** Valid until 16·NOV·07 ANY PERMITTED Stort Date 16.NOV.07 Route GLOSS Ticket type
STD STD DAY RETURN From MANCHESTER CTLZ ™ DAISY HILL

Price £5·65M PU₂ 0055e2777N51 ON DATE SHOUN Validity Child NIL Disc Number 60084 Valid until 16·NOV·07 ANY PERMITTED Cloass Ticker type STD STD DAY RETURN Route 16·NOV·07 Start Date 16 MANCHESTER CTLZ From DAISY HILL *

RIZ Price £5·65X 0055e2777N51 ON DATE SHOUN Validity Disc Number 61048 edert ONE Valid until 23·NOV·07 ANY PERMITTED Start Date
23.NOV.07 Route Class Ticket type STD STD DAY RETURN From MANCHESTER CTLZ * DAISY HILL

PUO 61048 0055e2777N51 Adult Child Start Date 23·NOY·07 Class Ticket type STD STD DAY RETURN

Price £5-65X Disc Valid until 23·NOV·@7 From DAISY HILL

ON DATE SHOUN Validity ANY PERMITTED Route MANCHESTER CTLZ

WOODWARD

Members' Allowances Claim Bolton Council



						ġ						
Name Clir Mai	ry Woodward Home Addre	ss 33 Linco	In Avenue,	Little L	ever, E	3ol	fon/BL3.1	ĘX ,	(2) (m) (m)	Pay	No.	
Car Make/Mod	lel Circeon Registration	Salar Salar Salar		Exact	CC	Sar Marrie	998		Mc	nth	Sept	20 00
(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 incurred the mileance claims only) I am the holder of a full, current and valid driving se of my car on Council business. ance claims only) I will retain VAT receipts covering all journeys for and necessarily incurred expenditure in travelling and subsistence for shown on this form, and that all amounts claimed are strictly in accorn, I have not made, and will not make, any claim under any enactment.	six years in order the purpose of en dance with the rai at for travelling or	certificate (wher to comply with habling me to per tes determined to subsistence exp	e applical IMRC reg form duti by Bolton enses	ble), and julations. es as a l	l ha Mem	eve complied of the state of Bolton	with th	e Council's cil, I have a	·	fares a	nd made
(f) The particulars	or financial loss allowance or attendance allowance in connection with inserted on this form are correct, and I understand that fraudulent cla	ms may result in o	ed on this form. disciplinary actic	<u>n</u> .	Subsi	ste	nce T			Total Miles	6	64+48=112
Signed	Member Date 26	1107			Subsi	ste	nce NT			For P	ayroll	l Use Only
	camined this allowance sheet, the figures recorded are reasonable, a	nd the expense wa	is necessary.		Exper	nse	s NT			Input by	i	CM
Authorised	Members' Services Date				Carer	's A	Allowance			Date	ļ	30.11.07
Date	Reason for Journey (including From and To)	Tim Departure	e of Return	Mil Clair			Subsister Allowan			es and Expenses		Dependent ers Allowance
8-Oct-2007	Development and Regeneration PDG	18:00	19.30	٤	,	Γ	£	р	£	p	£	р
8-Oct-2007	Housing PDG - Home to Town Hall	15:00	16:00	8		Γ	£	р	£	р	£	р
16-Oct-2007	Site Vist - Home to Town Hall	11:00	12:30	8		Γ	£	р	£	р	£	р
18-Oct-2007	Planning and Visits - Home to TH	9:30	17:00	8			£	р	£	р	£	р
22-Oct-2007	Agenda - Home to Town Hall	10:30	.11:30	8			£	р	£	p	£	р
22-Oct-2007	Planning Improvement - Home to Town Hall	14:00	15:00	8			£	р	£	p	£	р
24-Oct-2007	Council - Home to Town Hall	19:00	21:00	8			£	р	£	р	£	p
31-Oct-2007	Positive Action - Home to Town Hall	16:00	17:00	8			£	р	£	р	£	p
				·		-	£	р	£	р	£	р
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Please only e	enter the number of miles. Do not calculate an	amount for p	payment.	64	<u> </u>		<u>E</u>	р	£	р	£	р
f you require r PAY-M1 12.10.2007	nore lines, please use a Members' Allowances. All claims must be signed and authorised by Payroll Share ^{, —} ervice C	Members' Se	vices before	paymei	nt can t se. B	oe i	made, and	Ado shou	ditional s ld be sen	Sheets Us t to	ed	

Members' Allowances Claim Bolton Council



Name Cllr Mar	y Woodward Home Add	Iress 33 Line	oln Avenue,	Little L	ever, l	3olto	n, BL3 1E	Х	T - Whitely & was pass	Pay	No.	
Car Make/Mod	lel GITREGY Registrati	on 🔑		Exac	t CC	Q	9.2		Mo	onth	Sept	20 00
(a) (For Car Allow) (b) (For Car Allow) regard to the us (c) (For Car Allow) (d) I have actually a other payments (e) Except as show	ance claims only) I have actually and necessarily incurred the mance claims only) I am the holder of a full, current and valid drivie of of my car on Council business. ance claims only) I will retain VAT receipts covering all journeys and necessarily incurred expenditure in travelling and subsistence shown on this form, and that all amounts claimed are strictly in actually in the control of t	ng licence and MO for six years in order for the purpose of ecordance with the ment for travelling of	T certificate (when er to comply with enabling me to per rates determined or subsistence exp	re applica HMRC re- erform dut by Bolton penses	ble), and gulations les as a l	l have vlembe	complied wi	th the ounc	e Council's il, I have a		fares a	nd made
or allowances, of The particulars in	or financial loss allowance or attendance allowance in connection vinserted on this form are correct, and I understand that fraudulent	with the duties indic claims may result i	ated on this form n disciplinary acti	on.	Subsi	sten	ce T			Total Miles	3	48
Signed	Member Date	2 W O	-		Subsi	sten	ce NT			For Pa	ayrol	l Use Only
certify that I have ex	camined this allowance sheet, the figures recorded are reasonable	, and the expense	was necessary.	- ¬	Expe	Expenses NT				Input by		
Authorised	's All	owance			Date							
Date	Reason for Journey (including From and To)	Ti Departu	me of re Return		les med		ubsisten Allowanc			es and Expenses		Dependent ers Allowance
1-Nov-2007	Planning - Home to Town Hall	9:00	17:00		3	£		р	£	, p	£	р
2-Nov-2007	Agenda - Home to Town Hall	10:30	11:30		3	£		р	£	р	£	р
5-Nov-2007	Housing PDG - Home to Town Hall	9:00	10:30	3	3	£		р	£	р	£	р
7-Nov-2007	Kearsley Panel	10:00	12:00		3 [£		р	£	р	£	р
12-Nov-2007	Development and Regeneration PDG	15:00	16:00	3	3	£		р	£	р	£	р
15-Nov-2007	Planning - Home to Town Hall	10:00	16:00	8	3	£		р	£	p ,	£	р
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			****		Miles		ital Amou	nt	Total	Amount		otal Amount
Please only e	enter the number of miles. Do not calculate a	in amount fo	payment.	4	8	£		p	£	р	£	p
	nore lines, please use a Members' Allowance									Sheets Us	ed [

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

12.10.2007

Members' Allowances Claim



Name Clir Mai	ny Moodward	0011		·	Section and there is the distribution of the the	and the second state of	sametra e e un como como	VV		LELVE
Car Make/Mod		ess 33,Linco	n Ave Litt					Pay	No.	
certify that:-				Exact CC				onth	Jan	20 00
regard to the us (c) (For Car Allow (d) I have actually a other payments (e) Except as show or allowances.	rance claims only) I have actually and necessarily incurred the mile rance claims only) I am the holder of a full, current and valid driving 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 shown on this form, and that all amounts claimed are strictly in according to the property of t	six years in order r the purpose of en ordance with the rai	to comply with abling me to pless determined absistence exp	ere applicable), a HMRC regulation perform duties as d by Bolton Count penses	nd I have compli ns. a Member of Bo cil. FOR M I	ed with ton Co	the Council' uncil, I have	actually paid t	he fares	s and made
(f) the particulars of Signed	inserted on this topp are correct, and i understand that fraudulent clai	ms may result in di	sciplinary action		sistence T	.		Total Mile	S	(68-
	xamined this allowance sheet, the figures recorded are reasonable, a	Morda c	<u> </u>		sistence NT			For P	ayrol	l Use Only
Authorised		and the expense w	as necessary.		enses NT			Input by		
	Members' Services Date				r's Allowanc			Date		
Date	Reason for Journey (including From and To)	Time Departure		Miles Claimed	Subsiste Allowa			es and		Dependent
3rd San	site visit	10:00	11:30	8	£	р	£	p	£	ers Allowanc
9ª5an	forum members	17:00	18:00	8	£	p	£	<u>р</u>	£	<u> </u>
10 5an	planning .	9:15	17:00	8	£	<u></u> -р	£	<u>р</u> р	£	
11 can	planning agenda	10:30	11:30	8	£	p ·	£	<u> </u>	£	<u></u>
15 San	licensing	14:00	15:00	8	£	p	£	p p	£	ŗ
245an	planning	9:30	17:00	8	£	p	£	p p	£	<u> </u>
25° San	planning agenda	10:30	11:30	8	£	p	£	р	£	<u> </u>
28 San	housing PDG	8:30	9:15	8	£	<u>р</u>	£	р р	£	p
28 San	development and regen	18:00	19:15	8	£	<u>-</u> Р	£		£	p
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					£	р	£	р	£	. р
					£	р	£	<u>р</u>	£	р
				Total Miles	Total Amo			p Amount		p otal Amount
Please only e	enter the number of miles. Do not calculate an	amount for p	ayment.	72	£	р	£	р	£	p p
<mark>lf you require :</mark> PAY-M1 12.10.2007	more lines, please use a Members' Allowances All claims must be signed and authorised by Payroll Shared Service C	Members' Serv	ices before	payment can	Number of be made, and	f Ad	ditional S	- 11 - t- 11-		0

month³

Members' Allowances Claim



Exact CC 998 Month Feb 20 00 Certify that Country that Certify that C	Name Clir Mary	Woodward	Home Address	s 33 Lincoln						Pay		
a) for Car Allowance claims only have actually and necessarily incurred the mileage claimed in accordance with the Council singular complete with the Council singular council singular			Registration (Exact CC	998	3		Month	Feb	20 00
Carefivences, or financial loss allowance or attendance allowance in consection with the ducies indicate on the subtraction of the particular inserted on this jogn are correct, and I underect, (b) (For Car Allowan regard to the use (c) (For Car Allowan (d) I have actually an other payments should be contained by the	or ce claims only) I am the holder of a full, currer of my car on Council business. Ince claims only) I will retain VAT receipts cover decessarily incurred expenditure in travelling a nown on this form, and that all amounts claimed I have not made, and will not make, any claim to	ing all journeys for six and subsistence for the are strictly in accorded	ence and MOT c vears in order to be purpose of end ance with the rate or travelling or su	o comply with I abling me to pe es determined bsistence expe	HMRC regulation reform duties as by Bolton Countries.	ns. a Men	nber of Bolton C	ouncil, I I	have actually paid th	e fares	and made	
Signed Coertify that I have examined ensual wanter sheet, the figures recorded are reasonable, and the expense was necessary. Authorised Members' Services Date Time of (including From and To) Departure of (including From and To) Departure of (including From and To) Departure of (including From and To) Departure of Reason for Journey (including From and To) Departure of Return Departure of Return Departure of Return Departure of Return Departure of Return Departure of Return Departure of Return Departure of Return Allowance Expenses NT Expenses NT Carer's Allowance Fares and Other Expenses Carers Allowance £ p £ p £ p £ p £ p £ p £ p £ p £ p £	Name and Am	fine maint land allowance or attendance allowance	e in connection with t	ne duties indicat	ea on this form		siste	nce T		Total Miles	}	
Authorised Reason for Journey (including From and To) Departure Relation of the positive action planning agenda planning planni			ر گھری ہے جا		25/	Sub	sister	nce NT		For Pa	ayrol	Use Only
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Date (including From and To) Departure Return Claimed Allowance Other Expenses Carers Allowance	Authorised	Members' Services	Date	•		Care	er's A	llowance		Date		
Feb development and regen PDG 10:30 11:30 8 £ p £ p £ p £ p £ p £ p £ p £ p £ p £	Date	Reason for Journey	1				1 1				Care)ependent ers Allowance
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Please only enter the number of miles. Do not calculate an amount for payment. Please only enter the number of miles. Page 19 Pa	C/4 - 1	planning agenda		10:30	11:15	8	_ :	£		. р		р
19:00 22:45 8 £ p £ p £ p £ p £ p £ p £ p £ p £ p £	in day	planning		9:30	17:00	8	┉┨╷┝╾			р		· p
Figure F		council		19:00	22:45	8		<u> </u>	£ c	р		р
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If you require more lines, please use a Members' Allowances Additional Sheet Number of Additional Sheets Used 0	_			•		48						

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, Botton BL1 1JW

ec cons

Members' Allowances Claim



Name Clir Mary	Woodward	Home Addres	s 33, lind	oln ave little	e lever l	olton l	BL3 1E	X		Pay	No.	
Car Make/Mode	I Çitroen c1	Registration		那	Exac	t CC	998		M	onth	March	20 00
(b) (For Car Allowan regard to the use of the use of the common of the car Allowan of the payments of the payments of the payments of the common of the car allowances, or the car allowances, or the car allowances of the	nce claims only) I have actually and necessarily nce claims only) I am the holder of a full, current of my car on Council business. Ince claims only) I will retain VAT receipts covering the council of the council business. I have not his form, and that all amounts claimed I have not made, and will not make, any claim ur financial loss allowance or attendance allowance.	t and valid driving lic ng all journeys for si nd subsistence for t are strictly in accord der any enactment f s in connection with	cence and MO ix years in ordine purpose of lance with the contraction travelling or travelling or the duties indi	T certificate (where to comply with enabling me to rates determiner subsistence excated on this fo	nere applic h HMRC ri perform di ed by Bolto penses rm.	able), and egulations uties as a in Counci	d I have c s. Member I. FOF	omplied with of Boiton Col R MEMB	the Counci uncil, I have	e actually paid the	ne fares JSE C	and made
	serted on this form are correct, and Lunderstand		. 1		lon.		stence	<u> </u>		Total Miles		
Signed	Carrie Meniner		Morch				stence	ļ		-1	ayroll T	Use Only
Authorised	mined this allowance sheet, the figures recorded	nare reasonable, an Date	a tne expense	was necessary	<u>'</u>		nses N		······································	Input by	-	
Authorised	Members' Services	Date				<u> </u>	's Allow			Date		
Date	Reason for Journey (including From and T	o) ·	Departui	me of re Return		les med		sistence owance		res and Expenses		ependent rs Allowance
3" March 08	sustainable developme	nt	9:30	10:45		8	£	р	£	р	£	p
5 4 08	site visit		13:00	14:15		8	£	р	£	р	£	р
6 408	planning		9:30	. 16:30		8	£	р	£	р	£	р
10 000	development and rege	<u>n</u>	15:00	16:30		8	£	р	£	р	£	p
17,108	housing PDG		9:00	10:30	,	3	£	р	£	р	£	р
20,08	planning		9:30	5:00	,	3	£	р	£	р	Ŧ	р
							£	р	£	р	£	р
							£	р	£	р	£	р
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	•						£	р	£	р	£	р
		٠.					£	<u></u> р	£	р	£	p
1						Miles		Amount	· · · · · · ·	Amount	To	tal Amount
Please only e	nter the number of miles. Do not	calculate an	amount fo	r payment	. 4	8	£	р	£	р	£	р
If you require m	nore lines, please use a Members All claims must be signed an				o novem	ant con				Sheets Us	ed	0

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

12.10.2007

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ZAMAN

BOLTON METROPOLITAN BOROUGH COUNCIL

	MEMBERS ALLOWANCES CLAIM	
Claim for Month of June 20 07	(Rlack conitals please)	
Car (Make/Model) Mercedes Benz C2	20 Registration No	Exact Cubic Capacity 2155 cc.
Home Address		
Metropolitan Borough Council; that I have actually paid the the rates determined by Bolton Metropolitan Borough Council.	nditure in travelling and subsistence for the purpose of enabling me to perf fares and made other payments shown on this form; and that the amount cil. t. Except as shown, I have not made, and will not make, any claim under a	s claimed are strictly in accordance with
expenses or allowances, or financial loss allowance or attend	lance allowance in connection with the duties indicated on this form.	-,
(b) I am the holder of a current driving licence and have a	adequate insurance cover for the use of my vehicle on Council bus	iness. (For Car Allowance claimants only)
Signed	MEMBER Date 2.2 07	107
Approved	Date	·

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

•	Amount		Miles	·
* Subsistence Allowance Subsistence Allowance (Taxable)	£:p : 6:77	Normal Mileage	175.	Details input onto Payroll system:
Travel Reimbursement (e.g. Car Park, taxis)	:		-	Date: 24.7.07
Dependent Carer's Allowance	:	i i		•

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.

W

	Particulars of Journeys	Tin	ne of	Mode of	Miles	Dependent		Fares and Expen		Subsiste	
Date	Description of Approved Duties, ************************************	Departure	Return	Travel	Claimed	£	P P	£	р	£	р
04/06/07	Home to Adelaide House Meeting with Tim Highms	9.25	10.20	Car	1.						
	House to theworthath Adelpide House to Town Hall to Home	10.20	11.30	Car	1.4		ļ		<u> </u>		
	Home to Town Hall (Peturn) Re: Exec Briefing	13.20	1500	COX	<u> </u>		<u> </u>				
04/06/07	Home to Town Hall (Return) Exec Member Meeting	1745	2000	Car	ľ		<u> </u>			- 98	G
05/01/07	Home to Town Hall (Return) LERC Meeting	1350	1600	Car	1						ــــــ
11/06/07	l	1015	1630	Car						6	77
1 1	Home to Town Hall (Peturn)	10.15	1600	Car	1			' 		<u> </u>	+77
	Home to Town Hall (leturn)	10.30	16.30	Cay	-		ļ				ــــــ
29/06/07		12 45	13.30	Carr	Ŗ						ļ
	Home to Rechok (Business Awards) (Pitara)	6.30	11.00	Car	a						
02									·		
- 1											ऻ
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- 1	amounts received by way of Travelling & Subsistence from any other Autho	rities or had	ies		17.5					6	77

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.

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

BOLTON METROPOLITAN BOROUGH COUNCIL

MEMBERS ALLOWANCES CLAIM

	<u> </u>			A +	
Claim for Month of	July	20_07	Name of Member	Akhtar Zanan	Pay No.
Car (Make/Model)	Nevcedes B	Zenz C220	(Block capitals please) Registration No.	Exact Cubi	c Capacity 2155 cc.
Cai (Make/ Model)					BOLTON COUNCIL
Home Address 13) /	MAYOR.	ST BOLTON	BL1 455		DOLION OCCINGIE
DECLARATION:		•	и		1 1 OCT 2007
(a) I declare that I have actually	and necessarily inc	ırred expenditure in travelli	ng and subsistence for the purpos	e of enabling me to perform duties as a M	dember of the Bolton
Metropolitan Borough Counc	il; that I have actua	lly paid the fares and made (other payments shown on this for	m; and that the amounts claimed are stric	ctly in accordance with L SHARED
the rates determined by Bolto				nake, any claim under any enactment for	SERVICE CENTRE
(b) I am the holder of a currer Signed	nt driving licence	and have adequate insura MEMBER	ance cover for the use of my ve	Date 3 / / 67 / 67	For Car Allowance claimants only)
		FOR OFFICIAL U	JSE ONLY (Completed by Completed ommittee & Members Services)		
	Amount		Miles		
·	£:p		77		
* Subsistence Allowance	:	Normal Milea	= 2 + .	Details input onto Pay	roll system:
Subsistence Allowance (Taxable)	:			By: CM	
Travel Reimbursement (e.g. Car Park, taxis)	:			Date: 29.10.0	n
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.

	season	
4-11-2	STATE OF THE PARTY OF	

	Particulars of Journeys			Mode of	Miles	Depende		Fares an		Subsiste	
Date	Description of Approved Duties,	Tim Departure	Time of Departure Return		Claimed	Allowance £ p		Expenses £ p		Allowance £ 1	
4 5	including Locations (From & To)			Travel	4		T -				
-01/07	 	10-00	12.30	Car	1		-				╁
107/07	Home to Town Hall (The Exec)	2.30	4.00	Car	1					•	+
10/07		5.45	8.30	Car	1						1
07/07	, , , , , , , , , , , , , , , , , , ,	7-15	9.00	Car	9			·			1
107/02		7.15	10.00	Car	<u> </u>						
(*		9-15	2.00	Cerr	1						
07/07		6.30	9.30	Car	,						
07/07	Home to Town Hall (Return) Full Council										-
70/10		9.00	10.00	Car			-				Ť
107/07	Home to Reebok Stadium (Retorn) (Tonsim	10.15	/1.15	Car	4	7-					Ŧ
107/07		8.50	4.00	Cen	1	- ·					1
107/07	Home to Town Hall (Return)	4 ·	5-00	car					·		-
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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.

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