

ROCK

MEMBERS ALLOWANCES CLAIM

DIA

Claim for Month of APRIL 2006 Name of Member S.M. ROCK Pay No. _____
(Block capitals please)

Car (Make/Model) MITSUBISHI COLT Registration No. [REDACTED] Exact Cubic Capacity 1500 cc.

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 [REDACTED] MEMBER Date 31/3/06

Approved [REDACTED] Date 05/06/06

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

	Amount		Miles	
* Subsistence Allowance	£ : p <u>8 : 38</u>	Normal Mileage	<u>20</u>	Details input onto Payroll system:
Subsistence Allowance <i>(Taxable)</i>	:			By:
Travel Reimbursement <i>(e.g. Car Park, taxis)</i>	:			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.

Date	Particulars of Journeys Description of Approved Duties, including Locations (From & To)	Time of		Mode of Travel	Miles Claimed	Dependent Carers Allowance		Fares and other Expenses		Subsistence Allowance	
		Departure	Return			£	p	£	p	£	p
18/4	PRE COUNCIL MEETING NORWICH-BOLTON	6.30		CAR	10 5						
	" " BOLTON-NORWICH		8.30	CAR	5						
19/4	BMBC MEETING NORWICH-BOLTON	6.00		CAR	5						
	" " BOLTON-NORWICH		10.00	CAR	5						
					20						
										8	30

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.

MEMBERS ALLOWANCES CLAIM

Claim for Month of MAY 20 06

Name of Member STEPHEN M ROCK
(Block capitals please)

Pay No. [REDACTED]

Car (Make / Model) MITSUBISHI COLT

Registration No. [REDACTED]

Exact Cubic Capacity 1500 cc.

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 [REDACTED] MEMBER

Date 31/5/06

Approved [REDACTED]

Date 05/06/06

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

	Amount £ : p		Miles	
* Subsistence Allowance	6 : 77	Normal Mileage	50	Details input onto Payroll system: By: Date:
Subsistence Allowance (Taxable)	15 : 15		70	
Travel Reimbursement (e.g. Car Park, taxis)	:			
Dependent Carer's Allowance	:			

Notes:

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

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

BOLTON METROPOLITAN BOROUGH COUNCIL

MEMBERS ALLOWANCES CLAIM

Claim for Month of JUNE 2006

Name of Member STEPHEN M LOCK

Pay No. [REDACTED]

Car (Make/Model) mitsubishi colt

(Block capitals please)

Registration No. [REDACTED]

Exact Cubic Capacity 1500 cc.

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 [REDACTED] MEMBER Date 30/6/06.

Approved [REDACTED] Date _____

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

	Amount £ : p		Miles	
* Subsistence Allowance	8 : 38	Normal Mileage	80	Details input onto Payroll system: By: Date:
Subsistence Allowance (Taxable)				
Travel Reimbursement (e.g. Car Park, taxis)				
Dependent Carer's Allowance				

Notes:

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

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

JUNE.

Date	Particulars of Jour Description of Approved Duties, including Locations (From & To)	Time of		Mode of Travel	Miles Claimed	Dependent Carers Allowance		Fares and other Expenses		Subsistence Allowance	
		Departure	Return			£	p	£	p	£	p
5/6/06	FORUM MEMBERS ONLY HORWICH/BOLTON RTN	5:00pm	7:10pm	CAR	10						
8/6/06	BOLTON @ HOME GUIDANCE HORWICH BOLTON RTN	1:30	4:00 ^{SR}	CAR	10						
8/6/06	BOLTON @ HOME BOARD MEETING HORWICH-BOLTON	5:30	9:30	CAR	10						
15/6/06	GDWP MEETING HORWICH-BOLTON RTN	4:00	7:30	CAR	10						
19/6/06	PROBITY TRAINING HORWICH-BOLTON RTN	5:00	9:00	CAR	10						
20/6/06	GDWP MEETING WITH STEVE BRUFIELD										
20/6/06	IT AND COMMUNICATION MEETING HORWICH-BOLTON	4:30	9:30	CAR	10						
30/6/06	IT AND COMMUNICATION MEETING HORWICH-BOLTON	9:00	1:00	CAR	10					8	38
30/6/06	BMSC SPECIAL COUNCIL HORWICH/BOLTON RTN	4:00	8:00	CAR	10						
										80	38

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.

BOLTON METROPOLITAN BOROUGH COUNCIL

MEMBERS ALLOWANCES CLAIM

Claim for Month of JULY 2006

Name of Member S.M. ZOCK
(Block capitals please)

Pay No. [REDACTED]

Car (Make/Model) MITUBISHI COLT

Registration No. [REDACTED]

Exact Cubic Capacity 1500 cc.

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 [REDACTED] MEMBER Date 31/7/06

Approved [REDACTED] Date _____

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

	Amount £ : p		Miles	
* Subsistence Allowance	:	Normal Mileage	14 10 <hr style="width: 50%; margin: 0 auto;"/> 24	Details input onto Payroll system: By: CM Date: S. 10. 06
Subsistence Allowance <i>(Taxable)</i>	:			
Travel Reimbursement <i>(e.g. Car Park, taxis)</i>	:			
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	Particulars of journey Description of Approved Duties, including Locations (From & To)	Time of		Mode of Travel	Miles Claimed	Dependent Carers Allowance		Fares and other Expenses		Subsistence Allowance	
		Departure	Return			£	p	£	p	£	p
31/7/06	REGEN PDG · HODWICK - BOLTON RLN.	2:15	4:30	CAR	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.

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

BOLTON METROPOLITAN BOROUGH COUNCIL

MEMBERS ALLOWANCES CLAIM

Claim for Month of August 20 06 Name of Member S. M. Rock Pay No. [REDACTED]

(Block capitals please)

Car (Make/Model) MIYUBISHI COLT Registration No. [REDACTED] Exact Cubic Capacity 1600 cc.

PAID

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 [REDACTED] MEMBER Date 31/8/06

Approved [REDACTED] Date _____

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

	Amount		Miles	
	£ : p			
* Subsistence Allowance	:	Normal Mileage	14	Details input onto Payroll system: By: Date:
Subsistence Allowance <small>(Taxable)</small>	:			
Travel Reimbursement <small>(e.g. Car Park, taxis)</small>	:			
Dependent Carer's Allowance	:			

Notes:

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

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

Particulars of Journeys						Mode of Travel	Miles Claimed	Dependent Carers Allowance		Fares and other Expenses		Subsistence Allowance	
Date	Description of Approved Duties, including Locations (From & To)	Time of						£	p	£	p	£	p
4/8/06	FORUM M.-D.-M MEETING NORWICH/BOLTON RTN	5.00	8.00	CAR	10								
23/8/06	BOLTON @ HOME MEETING WITH IAN ANKERS												
	NORWICH-BOLTON RTN.	2.30	4.30	CAR	4								

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.

MEMBERS ALLOWANCES CLAIM

Claim for Month of SEPTEMBER 20 06 Name of Member S.M. ZOLK Pay No. [REDACTED]
 (Block capitals please)
 Car (Make/Model) MITSUBISHI COLT Registration No. [REDACTED] Exact Cubic Capacity 1600 cc.

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 [REDACTED] MEMBER Date 30/9/06.
 Approved [REDACTED] Date _____

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

	Amount		Miles	
	£ : p			
* Subsistence Allowance	:	Normal Mileage	60	Details input onto Payroll system: By: CM Date: 5.10.06
Subsistence Allowance (Taxable)	8 : 38			
Travel Reimbursement (e.g. Car Park, taxis)	:			
Dependent Carer's Allowance	:			

Notes:

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

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

SEPT.

Date	Particulars of Journeys Description of Approved Duties, including Locations (From & To)	Time of		Mode of Travel	Miles Claimed	Dependent Carers Allowance		Fares and other Expenses		Subsistence Allowance	
		Departure	Return			£	p	£	p	£	p
6/9/06	FULL COUNCIL HORWICH-BOLTON RTN.	6.00	10.30	CAR	10					8	38
6/9/06	BOLTON@HOME GROUP EXEC HORWICH-BOLTON RTN	9.00	2.00	CAR	10						
12/9/06	BOLTON@HOME CUSTOMER INVOLVEMENT SUB GROUP HORWICH-BOLTON RTN	5.00	9.00	CAR	10						
15/9/06	PAY AND GRADING TRAINING BAK. HORWICH-BOLTON RTN	1.30	3.30	CAR	10						
19/9/06	TWO TOWNS MEMBERS BRIEFING HORWICH-BOLTON RTN	3.30	5.30	CAR	10						
28/9/06	BOLTON@HOME GROUP BOARD MEETING HORWICH-BOLTON RTN.	4.15	8.30	CAR	10						
					60					8	38

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.

BOLTON METROPOLITAN BOROUGH COUNCIL

MEMBERS ALLOWANCES CLAIM

DATE

Claim for Month of OCT. 20 06

Name of Member S.M. Roche.
(Block capitals please)

Pay No. [REDACTED]

Car (Make/Model) MITSUBISHI COOL

Registration No. [REDACTED]

Exact Cubic Capacity 1600 cc.

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 [REDACTED] MEMBER Date 31/10/06

Approved [REDACTED] Date _____

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

	Amount		Miles	
* Subsistence Allowance	£ : p	:	124.	Details input onto Payroll system: By: SC Date: 1.11.06
Subsistence Allowance <i>(Taxable)</i>	16	:76		
Travel Reimbursement <i>(e.g. Car Park, taxis)</i>		:		
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		Time of		Mode of Travel	Miles Claimed	Dependent Carers Allowance		Fares and other Expenses		Subsistence Allowance	
Date	Description of Approved Duties, including Locations (From & To)	Departure	Return			£	p	£	p	£	p
2/10/06	BOLTON @ HOME, AWAY DAY MEETING										
	MORWICH TO BROMLEY CROSS RTN	8.30	2.00	CAR	14						
3/10/06	MORWICH TO BOLTON TOWN HALL TO CHECK E-MAILS DUE TO BROKEN P.C.	11.30	2.30	CAR	10						
6/10/06	AS ABOVE	10.30	11.30	CAR	10						
12/10/06	AS ABOVE	3.00	4.30	CAR	10						
16/10/06	FORUM CHAIRS MEETING / GROUP MEETING MORWICH - BOLTON RTN.	4.30	7.30	CAR	10						
17/10/06	MEMBERS ONLY MEETING TWO TOWNS FORUM MORWICH - BOLTON RTN.	3.30	6.30	CAR	10						
19/10/06	CHECK E-MAILS DUE TO BROKEN P.C. MORWICH - BOLTON RTN.	1.30	3.00	CAR	10						
23/10/06	AS ABOVE	12.00	1.30	CAR	10						
24/10/06	PICK UP P.C. MORWICH - BOLTON RTN.	11.00	12.00	CAR	10					8	38
25/10/06	FULL COUNCIL	6.00	11.45	CAR	10					8	38
27/10/06	Bolton @ home Governance appeal MORWICH - BOLTON RTN.	9.00	4.30	CAR	10						
31/10/06	MEETING - STEVE ADAMFIELD MORWICH - BOLTON RTN	4.15		CAR	10						
					124					16	76

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.

PAD

BOLTON METROPOLITAN BOROUGH COUNCIL

MEMBERS ALLOWANCES CLAIM

Claim for Month of NOV 2006

Name of Member S.M. ZOCK

Pay No. [REDACTED]

(Block capitals please)

Car (Make/Model) MITSUBISHI COLT

Registration No. [REDACTED]

Exact Cubic Capacity 1600 cc.

DECLARATION: Address: 64 Ainsworth Avenue, Horwich, Bolton, BL6 6LX.

(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 [REDACTED] MEMBER

Date 30/11/06

Approved [REDACTED]

Date _____

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

	Amount £ : p		Miles	
* Subsistence Allowance	:	Normal Mileage	38	Details input onto Payroll system: By: <u>CM</u> Date: <u>7.12.06</u>
Subsistence Allowance <i>(Taxable)</i>	8 : 38.			
Travel Reimbursement <i>(e.g. Car Park, taxis)</i>	:			
Dependent Carer's Allowance	:			

Notes:

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

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

Particulars of Journeys				Mode of Travel	Miles Claimed	Dependent Carers Allowance		Fares and other Expenses		Subsistence Allowance	
Date	Description of Approved Journeys including Locations (From & To)	Departure	Return			£	p	£	p	£	p
6/11/06	HORWICH-BOLTON TOWN. INFORMAL COUNCIL	4.15	6.15	CAR	10						
7/11/06	HORWICH-BOLTON TOWN. BOVI PERSONS SUB	1.30	3.15	CAR	10						
14/11/06	HORWICH-BLACKFORD TOWN. AREA FORUM	5.30	9.30	CAR	8						8 38
16/11/06	HORWICH-BOLTON TOWN. EQUAL PAY BRIEF	5.15	8.15	CAR	10						
27/11/06	HORWICH-BOLTON TOWN BOVINE MEETING	11.30	2.30	CAR	10						
					38					8	38

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.

BOLTON METROPOLITAN BOROUGH COUNCIL

MEMBERS ALLOWANCES CLAIM

Claim for Month of DECEMBER 20 06

Name of Member S. M. ROCK
(Block capitals please)

Pay No. [REDACTED]

Car (Make/Model) MITSUBISHI COLT

Registration No. [REDACTED]

Exact Cubic Capacity 1600 cc.

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 [REDACTED] MEMBER Date 4/1/07

Approved [REDACTED] Date _____

DHR

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

	Amount £ : p		Miles	
* Subsistence Allowance	:	Normal Mileage	60	Details input onto Payroll system:
Subsistence Allowance (Taxable)	16 : 76.			By: CM
Travel Reimbursement (e.g. Car Park, taxis)	:			Date: 25.1.07
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											
Date	Description of Approved Duties including Locations (From & To)	Time of		Mode of Travel	Miles Claimed	Dependent Carers Allowance		Fares and other Expenses		Subsistence Allowance	
		Departure	Return			£	p	£	p	£	p
4/12	HORWICH-BOLTON RTN. INFORMAL COUNCIL	4:00	6:00	CAR	10						
6/12	BOLTON@HOME HORWICH-BOLTON RTN	4:15	7:30	CAR	10						
11/12	BOLTON-HORWICH RTN. CHIEF EXEC. PRESENTATION	12:45	5:00	CAR	10						
13/12	BMBL MEETING. HORWICH-BOLTON RTN.	6:00	10:30	CAR	10						
14/12	ALLOCATION POLICY MEETING HORWICH-BOLTON RTN.	5:30	8:30	CAR	10					8	38
18/12	EXECUTIVE MEETING & HORWICH-BOLTON RTN	2:30	7:00	CAR	15						
18/12	FORUM MEMBERS ONLY MEETING. RTN BOLTON-HORWICH.		7:00	CAR	5					8	38
										60	18 76

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.

1
2
3

BOLTON METROPOLITAN BOROUGH COUNCIL

MEMBERS ALLOWANCES CLAIM

Claim for Month of JANUARY 20 07

Name of Member STEPHEN M ROCK

Pay No.

(Block capitals please)

Car (Make/Model) MITSUBISHI COLT

Registration No.

Exact Cubic Capacity 16.00 cc.

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

MEMBER

Date 8/3/07

Approved

Date _____

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

	Amount		Miles	
	£ : p			
* Subsistence Allowance	:	Normal Mileage	20	Details input onto Payroll system:
Subsistence Allowance <i>(Taxable)</i>	8 : 38			By:
Travel Reimbursement <i>(e.g. Car Park, taxis)</i>	:			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											
Date	Description of Approved Duties, including Locations (From & To)	Time of		Mode of Travel	Miles Claimed	Dependent Carers Allowance		Fares and other Expenses		Subsistence Allowance	
		Departure	Return			£	p	£	p	£	p
22/1/07	LDSTOCKE LIASON GROUP MIDLVICH-BOLTON	5.15	9.15	CAR	10					8	38
31/1/07	INFORMAL CRANCIL MIDLVICH-BOLTON	4.15	6.30	CAR	10						
JBB-04										8	38

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.

BOLTON METROPOLITAN BOROUGH COUNCIL

MEMBERS ALLOWANCES CLAIM

Claim for Month of FEBRUARY 2007

Name of Member S.M. Rock

Pay No. [REDACTED]

Car (Make/Model) mitsubishi Colt

Registration No. [REDACTED]

Exact Cubic Capacity 1600 cc.

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 [REDACTED]

MEMBER

Date 8/3/07

Approved [REDACTED]

Date _____

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

	Amount £ : p		Miles
* Subsistence Allowance	8 : 30	Normal Mileage	70. +20 90
Subsistence Allowance (Taxable)	23 : 53		
Travel Reimbursement (e.g. Car Park, taxis)	31 : 91		
Dependent Carer's Allowance	:		

Details input onto Payroll system:

By: CM

Date: 22.3.07

* underpaid £10 on subsistence, April '07
paid May '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 Travel	Miles Claimed	Dependent Carers Allowance		Fares and other Expenses		Subsistence Allowance	
Date	Description of Approved Duties, including Locations (From & To)	Time of		Departure			Return	£	p	£	p	£
6/2/07	PLANNING APPASAL MORWICH-BOLTON RTN	9.00	3.00	CAR	10					6	77	
8-2/07	BOLTON @ HOME BOARD MORWICH-BOLTON RTN	4.30	9.00	CAR	10							
13/2/07	BUDGET MEETING MORWICH-BOLTON RTN	6.00	8.00	CAR	10							
15/2/07	MOM FORUM MEETING MORWICH-BOLTON RTN	5.00	8.00	CAR	10							
20/2/07	BUDGET MEETING MORWICH-BOLTON RTN	6.15	8.30	CAR	10							
21/2/07	FULL COUNCIL MORWICH-BOLTON RTN	6.00	10.15	CAR	10					8	38	
28/2/07	FULL COUNCIL MORWICH-BOLTON RTN	5.45	10.00	CAR	10					8	38	
						28.14				23	53	

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.

BOLTON METROPOLITAN BOROUGH COUNCIL

MEMBERS ALLOWANCES CLAIM

Claim for Month of MARCH 2007

Name of Member STEPHEN M ROCK

Pay No. [REDACTED]

(Block capitals please)

Car (Make/Model) MITSUBISHI COLT

Registration No. [REDACTED]

Exact Cubic Capacity 1600 cc.

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 [REDACTED]

MEMBER

Date 31/3/07

Approved [REDACTED]

Date _____

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

	Amount £ : p		Miles	
* Subsistence Allowance	:	Normal Mileage	30	Details input onto Payroll system: By: <u>CM</u> Date: <u>19.4.07</u>
Subsistence Allowance (Taxable)	:			
Travel Reimbursement (e.g. Car Park, taxis)	:			
Dependent Carer's Allowance	:			

Notes:

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

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

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

RUSHTON

PAID

MEMBERS ALLOWANCES CLAIM

Claim for Month of APRIL 2006 Name of Member FRANK ALAN RUSHTON Pay No. [REDACTED]
 (Block capitals please)
 Car (Make/Model) V.W. GOLF Registration No. [REDACTED] Exact Cubic Capacity 1797 cc.

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 [REDACTED] MEMBER Date 1st May '06
 Approved [REDACTED] Date 2nd May '06

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

	Amount		Miles	
	£ : p			
* Subsistence Allowance	:	Normal Mileage	72.6	Details input onto Payroll system: By: Date:
Subsistence Allowance (Taxable)	:			
Travel Reimbursement (e.g. Car Park, taxis)	:			
Dependent Carer's Allowance	:			

Notes:

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

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

Particulars of Journeys					Mode of Travel	Miles Claimed	Dependent Carers Allowance		Fares and other Expenses		Subsistence Allowance	
Date	Description of Approved Duties, including Locations (From & To)	Time of		Travel			Claimed	£	p	£	p	£
APRIL		Departure	Return									
3.	THE EXECUTIVE home - Town Hall + return	2.30	4.10	CAR	6							
4	VISION FOR THE FUTURE home - Rebook + return	9.0	1.10	"	10.6							
4	SCHOOL PLACES REVIEW PDG home - Town Hall + return	3.30	5.45	"	6							
4	HATTON + LOSTOCK AREA FORUM home - Sutton Estate + return	6.15	9.15	"	2							
5	INTERVIEWS LEGAL SERVICES Appmnt - home - T/H + return	12.45	4.30	"	6							
5	followed by 3 leaders GMDA waste disposal presentation	5.0	7.30	"	6							
5	PDG's - amalgamation GRP Ras PDG home - T/H + return	9.0	12.0	"	6							
6	DIRECTOR EDUCATION + Leaders re Ladybridge high school	4.30	6.15	"	6							
13	CONSTITUTION SUB COMMITTEE home - T/H - return	11.0	12.45?	"	6							
18	Special Corp Affairs home - T/H - return	1.30	4.10	"	6							
19	3-Leaders with D. Winstanley + S. Hinfield home - T/H - return	3.0	5.30	"	6							
19	FULL COUNCIL home - T/H - return	6.30	10.25	"	6							
24	EASTER CELEBRATION [STRUCTURE] home - T/H - return	12.0	2.30	"	6							
						72.6						
						miles						

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.

BOLTON METROPOLITAN BOROUGH COUNCIL

MEMBERS ALLOWANCES CLAIM

DHD

Claim for Month of MAY 2006 Name of Member F. ALAN RUSHTON Pay No. [REDACTED]

Car (Make / Model) V.W. GOLF Registration No. [REDACTED] Exact Cubic Capacity 1797 cc.

Home Address 1 ARRAN CLOSE LADYBRIDGE - BOLTON BL3 4PP

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 [REDACTED] driving licence and have adequate insurance cover for the use of my vehicle on Council business. *(For Car Allowance claimants only)*

Signed [REDACTED] MEMBER Date 10 JULY '06

Approved [REDACTED] Date _____

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

	Amount		Miles	
	£ : p			
* Subsistence Allowance	:	Normal Mileage	76	Details input onto Payroll system: By: Date:
Subsistence Allowance <i>(Taxable)</i>	:			
Travel Reimbursement <i>(e.g. Car Park, taxis)</i>	:			
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.

MEMBERS ALLOWANCES CLAIM

Claim for Month of JUNE 2006

Name of Member F. ALAN RUSHTON

Pay No. [REDACTED]

Car (Make/Model) VW GOLF

Registration No. [REDACTED]

Exact Cubic Capacity 1797 cc.

Home Address 1 ARDEN CLOSE LADYBRIDGE

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 [REDACTED]

MEMBER

Date 10 JULY '06

Approved [REDACTED]

Date _____

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

	Amount		Miles	
	£ : p			Details input onto Payroll system:
* Subsistence Allowance	:	Normal Mileage	<u>183</u>	
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.

BOLTON METROPOLITAN BOROUGH COUNCIL

MEMBERS ALLOWANCES CLAIM

DID

Claim for Month of JULY 2006

Name of Member F. A. RUSHTON
(Block capitals please)

Pay No. [REDACTED]

Car (Make/Model) V.W GOLF [DRIVER]

Registration No. [REDACTED]

Exact Cubic Capacity 1787 cc.

Home Address 1 ARRAN CLOSE LADYBRIDGE BOLTON BL3 4AA

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 [REDACTED] MEMBER

Date AUG 1ST '06

Approved [REDACTED]

Date _____

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

	Amount			Miles
* Subsistence Allowance	£ : p 10 : 00	Normal Mileage:		540
Subsistence Allowance <i>(Taxable)</i>	:			
Travel Reimbursement <i>(e.g. Car Park, taxis)</i>	:			
Dependent Carer's Allowance	:			

Details input onto Payroll system:

By: ces

Date: 4/8/06

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	Particulars of Journeys		Time of		Mode of Travel	Miles Claimed	Dependent Carers Allowance		Fares and other Expenses		Subsistence Allowance	
	Description of Approved Duties, including Locations (From & To)	Departure	Return	£			p	£	p	£	p	
JULY												
Tue 4 th	LGA Conference BOURNE MOUTH	home	12-20	car	250							
Wed 7 th		home	12-20	car	250			10	11			
Thurs 7 th		home	12-20	car	250							
	12 th	Transform your Space	home 1:30	home 3:15		6						
Wed 19 th	Executive Member Corp. Strategy + Finance - missed											
	19	FULL COUNCIL	home 6:30	home 8:30		6						
	20	PLANNING Sub for Goune Morgan	home 1:30	home 5:15		4						
	20	AGMA - presentation on CITY REGIONS - At REEBOK	home 9:30	home 1:15		10						
	24	EXECUTIVE	home 2:30	home 4:15		6						
	28	Interfaith Council [Bolton Business Centre]	home 12:0	home 2:30		6						
						540					10	11

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.

BOLTON METROPOLITAN BOROUGH COUNCIL

MEMBERS ALLOWANCES CLAIM

- 0110

Claim for Month of August 2006 Name of Member F. A. RUSHTON Pay No. _____
 (Block capitals please)
 Car (Make/Model) VW GOLF Registration No. [REDACTED] Exact Cubic Capacity 1797 cc (1800 cc)
 Home Address 1 ARDEN CLOSE LADYBRIDGE BOLTON BC3 7AF

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 [REDACTED] MEMBER Date 3 OCT 06
 Approved [REDACTED] Date _____

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

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

Notes:

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

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

BOLTON METROPOLITAN BOROUGH COUNCIL

MEMBERS ALLOWANCES CLAIM

Claim for Month of SEPT 2006

Name of Member F.A. RUSHTON

Pay No. [REDACTED]

(Block capitals please)

Car (Make/Model) VW GOLF

Registration No. [REDACTED]

Exact Cubic Capacity 1797 cc.

Home Address 1 ARDEN CLOSE LADYBRIDGE BOLTON BL3 4PP

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 [REDACTED]

MEMBER

Date 3rd 09th 06

Approved [REDACTED]

Date _____

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

	Amount		Miles	
	£ : p			
* Subsistence Allowance	:	Normal Mileage	24	Details input onto Payroll system: By: <u>CM</u> Date: <u>3.10.06</u>
Subsistence Allowance (Taxable)	7 : 00		112	
Travel Reimbursement (e.g. Car Park, taxis)	:		136	
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 DEPT	Particulars of Journeys Description of Approved Duties, including Locations (From & To)	Time of		Mode of Travel	Miles Claimed	Dependent Carers Allowance		Fares and other Expenses		Subsistence Allowance	
		Departure	Return			£	p	£	p	£	p
5	CAROL JAMES - Re VISION FOR FUTURE	8:30									
5	Exec Jan Childrens Serv. Dep for Mrs Bramley		11:0	CAR	6						
5	Nailborough Renewal Strat - Lancaster South	5:30	7:0	"	6						
6	Exec Jan's Corp. Strategy	8:30	10	"	6						
6	Exec Source	6:30	10:30	"	6						
7	Proof Reading Score	9:30	11:30	"	6						
12	VISION FOR FUTURE at Reebok.	9:30	1:0	"	10						
13	TRANSFORM YOUR SPACE Southdown Wellspring	3:00	5:30	"	6						
15	Meeting with New Legal Office - Alan Eastwood	8:0	11:0	"	6						
18	Seminar on Enterprise Centre Focus Group?	4:30	7:10	"	6						
20	AIR at forum at Ladybridge School	8:0	9:15	"	2						
21	SITE VISITS followed by planning ^{500 FOR} _{same targets}	8:30	6:0	"	6					3	50 Lunch
25	Shortlisting Best Dir Corp Proposals	12:30									
	+ Health Strategy Festival Hall		6:15		6						
	+ Special Pdg										
26	Exec Jan's Schools (Sub for Mrs Bramley)	9:0	11:15		6						
27	Middlebrook PDG followed by PDS Corp Strat	9:0									
	Followed by Constitutional panel followed by Informal Cn		6:50		6					3	50 Lunch
29	Interim's Corp Prop. Asst Director	1:45	4:45		6						
29	AGM at Meeting with	10:15	1:30		22						
					112					7	=

27 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.

BOLTON METROPOLITAN BOROUGH COUNCIL

MEMBERS ALLOWANCES CLAIM

PAID

Claim for Month of OCT 2006 Name of Member F. A. RUSHTON Pay No. [REDACTED]
 Car (Make/Model) V.W. GOLF Registration No. [REDACTED] Exact Cubic Capacity 1781 cc.
 Home Address 1 ADRIAN CLOSE LADYBRIDGE, BL3 4PP

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 [REDACTED] MEMBER Date 3 NOV '06
 Approved [REDACTED] Date _____

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

	Amount £ : p		Miles	
* Subsistence Allowance	:	Normal Mileage	191.	Details input onto Payroll system: By: <u>SC.</u> Date: <u>1. 11. 06</u>
Subsistence Allowance <i>(Taxable)</i>	3 : 50			
Travel Reimbursement <i>(e.g. Car Park, taxis)</i>	:			
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		Time of		Mode of Travel	Miles Claimed	Dependent Carers Allowance		Fares and other Expenses		Subsistence Allowance	
Date	Description of Approved Duties, including Locations (From & To)	Departure	Return			£	p	£	p	£	p
2 nd	Proof Reading Scene.	hms 11:30	1.0	CAR	6						
2	Dev + Regeneration Scrutiny	hms 5:30	7:45	"	6						
3	AGHA Select Committee Stockport	hms 9:30	1:10	"	50						
9	MEETING OF 3 LEADERS followed by Corp issues Scrutiny	hms 4:0	7:45	"	6						
10	Leaders meeting - Arena with Dir of Finance	hms 4:0	6:30	"	6						
11	members only meeting followed by Chief officers Appt panel Arena Forum	hms 12:30	5:40	"	6						
12	Childrens Services/Schools Scrutiny Comm	hms 3:30	6:15		6						
13	Vision for its future at Reebok	hms 1:0	4:30		10						
16	Childrens Services followed by 3 Leaders followed by + Exe Member PDS in Memo Exec Corp + RESERV	hms 9:30	6:30		6					3	50
17	3 Leaders re - Chief Exec Appt procedure	hms 8:45	12:0		6						
18	Licensing Unit [sub for Corp STHAW]	hms 9:30	11:40		6						
19	Transform Your Space - presentation [New Build Centre]	hms 9:30	1:30		11						
23	members only meeting - Arena Forum	hms 1:30	4:45		6						
23	Presentation by Dir of Finance to Group	Tue 7:0	est 8:30 - 8:30		6						
24	Exec Member Childrens Services sub for Diana Brierley	hms 9:0	11:30		6						
24	Leaders + MD's	hms 4:30	6:30		6						
25	Exec Member Corp Strategy + Finance	hms 8:30	hms 11:30		6						
25	Arena Board AGM Middlebrook FULL COUNCIL	2:30 hms 6:30	5:0 10:30		10 6						
30	Castle Hill - Visit Powers Royal.	11:45	2:45		11						
31	Presentation to Group by Chief Exec following Seminar "Affordable Warmth"	hms 5:0	8:30		6						
					191					3	50

(26)

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.

BOLTON METROPOLITAN BOROUGH COUNCIL

MEMBERS ALLOWANCES CLAIM

PAID

Claim for Month of NOV 20 06

Name of Member F. A. Rushton
(Block capitals please)

Pay No.

Car (Make/Model) VW GOLF

Registration No.

Exact Cubic Capacity 1797 cc.

Home Address 1 ARRAN CLOSE LADYBRIDGE

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

MEMBER

Date 30 NOV 06

Approved

Date _____

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

	Amount £ : p		Miles	
* Subsistence Allowance	:	Normal Mileage	137	Details input onto Payroll system:
Subsistence Allowance (Taxable)	:			By: <u>CM</u>
Travel Reimbursement (e.g. Car Park, taxis)	:			Date: <u>7.12.06</u>
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.

11-
10
3
137

Particulars of Journeys					Mode of Travel	Miles Claimed	Dependent Carers Allowance		Fares and other Expenses		Subsistence Allowance	
Date	Description of Approved Duties, including Locations (From & To)	Time of		£			P	£	P	£	P	
Nov		Departure	Return									
2 NOV	Meeting with Carol Davies re finance of River at LINDSAY	9.30	11.45	CAR	6							
6	Proof Read Scene - followed by DWAL & KCEC's Mayor opening Community Transport Forward - Mayor opening + meeting with bus companies at Victoria Hall followed by Single status - with 3 leaders followed by 1a formal council	9.00	12.30	CAR	6							
		10.00		CAR	6							
				7.0								
8	Area Forum at St Bades school.	6.15	9.15	-	4							
9	Planning Training	11.30	2.0	-	6							
13	Corp Strategy + Future PDC	10.30	12.00	-	6							
13	Executive followed by Constitutional Panel	2.30	5.0	-	6							
14	Vision for Future at Bebook	8.45	12.0	-	10							
14	Childrens Serv/Schools PDC.	1.0	3.0	-	6							
15	Exec Member Schools/childrens serv sub for Mrs Breiby	9.0	11.45	-	6							
15	Standards Committee followed by Group with chief officers ^{single} _{status}	3.30	7.20	-	6							
16	Corp Affairs Executive Member	8.30	10.30	-	6							
20	Special Executive followed by Const Panel follow ^{by leading} _{with drawing}	2.30	7.45	-	6							
22	Strategy Launch ET12 Lounge	9.30	11.30	-	6							
22	Sustainable Development form at LWT Resource Centre	12.45	4.0	-	10							
23	Performance Training Castle Hill cancelled on arrival back of number	9.30	10.30	-	6							
23	Childrens Serv Scrutiny Committee followed by Anti Soc Behaviour	3.30	5.30	-	6							
24	Long listing Chief Exec Post	3.0	5.0	-	6							
27	Corp Issues Scrutiny Committee	5.30	7.0	-	6							
29	3 leaders with Chief Exec	1.30	3.0	-	6							
30	International day disabled people - E Red Centre Mayor opening	10.30	12.0	-	6							
					137							

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.

BOLTON METROPOLITAN BOROUGH COUNCIL

PAID

MEMBERS ALLOWANCES CLAIM

Claim for Month of DEC 2006 Name of Member F. A. RUSHTON Pay No. [REDACTED]

Car (Make/Model) V. W GOLF Registration No. [REDACTED] Exact Cubic Capacity 1781 cc.

Home Address 1 ARRAW CLOSE LADYBRIDGE BOLTON BL3 4PP

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 [REDACTED] MEMBER Date 9th JAN 2007

Approved [REDACTED] Date _____

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

	Amount £ : p		Miles	
* Subsistence Allowance	:	Normal Mileage	92.	Details input onto Payroll system:
Subsistence Allowance (Taxable)	:			By: <u>CM</u>
Travel Reimbursement (e.g. Car Park, taxis)	:			Date: <u>25.1.07</u>
Dependent Carer's Allowance	:			

Notes:

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

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

Particulars of Journeys					Mode of Travel	Miles Claimed	Dependent Carers Allowance		Fares and other Expenses		Subsistence Allowance	
Date	Description of Approved Duties, including Locations (From & To)	Departure	Return	£			p	£	p	£	p	
4	WHPS+ LEADERS. home to Bick T/H } followed by Informat Council }	3.0	7.0	CAR	6							
5	Vision for Future Conf. home to Resbook	8.30	1.30	CAR	10							
5	Short listing Chief Exec. home to Fow. Hall	2.15	5.0	"	6							
7	Planning Training home to T/H	11.30	2.0	"	6							
8	Opening of New Police Station home to West of ASDA	12.15	3.0	"	7							
11	Interviews Chief Exec post home to T/H	1.0	5.75	"	6							
12	Formal Interviews Chief Exec home to T/H	8.30	5.15	"	6							
13	EXEC Member Coop Strategy etc home to T/H	9.30	11.15	"	6							
14	Training re Performance Appraisal home to Castle Hill	4.0	7.40	"	11							
18	Special POG Children/Schools Sub for Com Biology home to T/H	10.30	12.30	"	6							
18	THE EXECUTIVE home to T/H	2.30	4.0	"	6							
20	Transfer New Spere home to Welwyn	9.30	12.0	"	6							
20	AREA A BOARD Meeting home to Arden - Resbook	2.30	5.15	"	10							
					92							

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.

3/10/06

BOLTON METROPOLITAN BOROUGH COUNCIL

MEMBERS ALLOWANCES CLAIM

PAID

Claim for Month of JAN 2007 Name of Member F.A. RUSHTON Pay No. [REDACTED]
 Car (Make/Model) GOLF VW Registration No. [REDACTED] Exact Cubic Capacity 1781 cc.
 Home Address 1 ARRAW CLOSE LADYBRIDGE BOLTON

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 [REDACTED] MEMBER Date 5/1/07
 Approved [REDACTED] Date _____

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

	Amount £ : p		Miles	
* Subsistence Allowance	:	Normal Mileage	124.	Details input onto Payroll system: By: <u>CM</u> Date: <u>6.2.07</u>
Subsistence Allowance <i>(Taxable)</i>	:		+ 92	
Travel Reimbursement <i>(e.g. Car Park, taxis)</i>	:		216	
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.

BOLTON METROPOLITAN BOROUGH COUNCIL

MEMBERS ALLOWANCES CLAIM

Claim for Month of FEB 2007

Name of Member F. A. RUSHTON

Pay No. [REDACTED]

Car (Make / Model) VW GOLF

(Block capitals please)
Registration No. [REDACTED]

Exact Cubic Capacity 1781 cc.

Home Address 1 AARAN CLOSE LAYBRIDGE BOLTON BL34PP

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 [REDACTED]

MEMBER

Date 13/3/07

Approved [REDACTED]

Date _____

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

	Amount £ : p		Miles	
* Subsistence Allowance	:	Normal Mileage	106-	Details input onto Payroll system: By: <u>CM</u> Date: <u>22.3.07</u>
Subsistence Allowance <i>(Taxable)</i>	:			
Travel Reimbursement <i>(e.g. Car Park, taxis)</i>	:			
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 FEB.	Particulars of Jour Description of Approved Duties, including Locations (From & To)	Time of		Mode of Travel	Miles Claimed	Dependent Carers Allowance		Fares and other Expenses		Subsistence Allowance	
		Departure	Return			£	p	£	p	£	p
1	PLANNING TRAINING.	11.30	2.0	CAR	6						
1	CHILDREN'S SERVICES SCRUTINY	3.30	5.40	"	6						
5	EXECUTIVE	2.30	4.15	"	6						
5	CORPUSCLES SCRUTINY COMMITTEE	5.30	7.30	"	6						
6	Meeting with Engineers re Traffic Calming Hartland Hill	3.30	5.30	"	6						
7	Corp Strategy + Finance PDS	9.30	11.0	"	6						
12	THE EXECUTIVE (BUDGET) followed by Whips + Leaders	2.30	6.30	"	6						
13	Meeting with Director re Town Centre Development (Leaders)	10.30	12.30	"	6						
14	Senior ORGANISATION Comm Sub for Committee Briefing	9.30	11.30	"	6						
15	Meeting with Director Keith Davies + Leaders	1.30	3.30	"	6						
20	Vision for future special meeting	4.45	7.40	"	6						
21	Arena Brand at Reebok.	2.30	5.0	"	10						
21	GOV. MEETING BUDGET	6.30	9.20	"	6						
26	Meeting 3 Leaders	9.0	11.0	"	6						
27	Exec Member meeting Schools/Childrens	9.0	12.0	"	6						
28	Exec Member meeting Corp Strategy + Finance	8.30	10.30	"	6						
28	Full Council	6.30	9.45	"	6						
					106						

(18)

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.

2/1/06

PAID

BOLTON METROPOLITAN BOROUGH COUNCIL

MEMBERS ALLOWANCES CLAIM

Claim for Month of MARCH 2007

Name of Member F. A. RUSHTON

Pay No. [REDACTED]

(Block capitals please)

Car (Make/Model) V.W GOLF

Registration No. [REDACTED]

Exact Cubic Capacity 1781 cc.

Home Address 1 ARRAN CLOSE LADYBRIDGE BOLTON BL3 4PA

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 [REDACTED] MEMBER

Date 2/5/07

Approved [REDACTED]

Date _____

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

	Amount		Miles	
* Subsistence Allowance	£ : p	Normal Mileage	192.	Details input onto Payroll system: By: CM Date: 4.5.07
Subsistence Allowance (Taxable)	3 : 50			
Travel Reimbursement (e.g. Car Park, taxis)	:			
Dependent Carer's Allowance	:			
	:			

Notes:

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

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

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

Particulars of Journeys											
Date MARCH	Description of Approved Duties, including Locations (From & To)	Time of		Mode of Travel	Miles Claimed	Dependent Carers Allowance		Fares and other Expenses		Subsistence Allowance	
		Departure	Return			£	p	£	p	£	p
2	Meeting of Leaders + Developes Wilson Road N	10.30	1.45	CAR	6						
5	THE EXECUTIVE	2.30	4.15		6						
6	AGMA Select Committee Stockport	7.0.0	1.15		48						
8	GRAN JAMES + G STETUNSI Presentation [NEF] to Group	5.0	6.45		6						
10	Middlebrook Valley Trail opening with Mayor	10	1.0		4						
12	Children's Schools PDG + Develop PDS subgr. bus. breakfast	12.30	4.55		6						
14	Informal Council followed by Area Forum - at Ladybridge High School	5.0	6.30	7 5							
			9.30		6						
15	Public Art cover for Cwm A. Walsh	1.30	3.0		6						
15	Both West Cluster Group Management Meeting Westhough	3.30	5.15		7						
20	Bolton Arena Board meeting Reebok	1.30	4.30		10						
21	Transfer Your Space followed by Exe Member Corp Strate	9.30	4.0		6					3	50
23	3 Leaders re WITHINS settee + Keith Davis	11.30	- 30		6						
26	Witness CARE Unit Presentation	10	12.30		6						
26	Dev + Ragen Scrutiny Committee	5.30	8.0		6						
27	Exec Member Schools followed by Corp Strategy PDG	9.0	12.45		6						
27	3 leaders meet Emersons plus group meet S. Anfield	30.0	7.15		6						
28	Short listing of Developes	9.30	12.0		6						
30	AGMA meeting OLDHAM	1.15	4.0		45						
					192					3	50

Lunch

(23)

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.

134.6 = 78 } 192
48
45

SHAW

D.H.P.

MEMBERS ALLOWANCES CLAIM

Claim for Month of APRIL 2006

Name of Member COLIN SHAW

Pay No. [REDACTED]

Car (Make/Model) JAGUAR XJS

(Block capitals please)
Registration No. [REDACTED]

Exact Cubic Capacity 4200. cc.

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 [REDACTED]

MEMBER

Date 30/04/06

Approved [REDACTED]

Date _____

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

	Amount £ : p		Miles	
* Subsistence Allowance	:	Normal Mileage	22.	Details input onto Payroll system: By: Date:
Subsistence Allowance <i>(Taxable)</i>	:			
Travel Reimbursement <i>(e.g. Car Park, taxis)</i>	:			
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.

PAID.

MEMBERS ALLOWANCES CLAIM

Claim for Month of MAY 2006

Name of Member COLIN SHAW

Pay No.

Car (Make/Model) JAGUAR XJS

Registration No.

Exact Cubic Capacity 4200 cc.

DECLARATION: Home: 109 Albert Road West, Bolton, BL1 5ED.

(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

MEMBER

Date 25/05/06

Approved

Date 26/05/06

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

	Amount		Miles	
	£ : p			
* Subsistence Allowance	:	Normal Mileage	10.	Details input onto Payroll system:
Subsistence Allowance (Taxable)	:			By:
Travel Reimbursement (e.g. Car Park, taxis)	:			Date:
Dependent Carer's Allowance	:			

Notes:

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

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

Date	Particulars of Journeys Description of Approved Duties, including Locations (From & To)	Time of		Mode of Travel	Miles Claimed	Dependent Carers Allowance		Fares and other Expenses		Subsistence Allowance	
		Departure	Return			£	p	£	p	£	p
MAY											
2nd	CHERRY TREE GOVERNORS	3.30	6.00		5						
18th	CHERRY TREE GOVERNORS	4.00	6.30		5						
						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.

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

MEMBERS ALLOWANCES CLAIM

Claim for Month of JUNE 2006

Name of Member COLIN SHAW
(Block capitals please)

Pay No. [REDACTED]

Car (Make/Model) JAGUAR XJ8

Registration No. [REDACTED]

Exact Cubic Capacity 4200 cc.

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 [REDACTED]

MEMBER

Date 30/06/06

Approved [REDACTED]

Date 03/07/06

DIRECTOR OF
CENTRAL SERVICES
- 3 JUL 2006
BOLTON

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

	Amount		Miles	
	£ : p			
* Subsistence Allowance	:	Normal Mileage	62	Details input onto Payroll system: By: Date:
Subsistence Allowance <i>(Taxable)</i>	:			
Travel Reimbursement <i>(e.g. Car Park, taxis)</i>	:			
Dependent Carer's Allowance	:			

Notes:

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

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

Particulars of Journeys					Mode of Travel	Miles Claimed	Dependent Carers Allowance		Fares and other Expenses		Subsistence Allowance	
Date	Description of Approved Duties, including Locations (From & To)	Time of		Departure			Return	£	p	£	p	£
JUNE/06												
5th	CLARKE CONVALESCENT FUND AGM	2.30	4.15	CAR		3						
5th	INITIAL MEETING WITH OFFICERS ADULTS SCRUTINY	3.30	5.15			3						
6th	TAXI SCRUTINY	9.30	11.30			3						
6th	LICENSING COMM.	1.30	4.00			3						
6th	CHERRY TREE GOVERNORS.	4.30	6.00			5						
7th	ADULTS PGD	1.30	3.00			3						
8th	PRIVATE SECTOR GRANTS	10.00	1.00			3						
15th	THE ORCHARDS GOVERNORS	2.30	5.00			5						
19th	EXCEL MEMBER MEETING ADULT SERV	9.00	10.15			3						
19th	THE ORCHARD GOVERNORS	5.00	6.30			5						
20th	ADULT SERV SCRUTINY AGENDA MEETING	3.30	5.00			3						
22nd	EXCLUSIONS MEETING THE ORCHARDS	12.30	2.15			5						
26th	FRANK ARNFIELD PRESENTATION	4.30	6.00			3						
27th	LICENSING COMM	1.30	5.00			3						
28th	AUDIT TRAINING	4.30	6.30			5						
28th	FORUM	7.00	9.00			3						
29th	MEETING JOHN RUTHERFORD AS CHAIR SCRUTINY	3.00	4.15			3						
30th	SPECIAL COUNCIL	4.30	6.00			3						

62

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.

BOLTON METROPOLITAN BOROUGH COUNCIL

MEMBERS ALLOWANCES CLAIM

DND

Claim for Month of JULY 2006

Name of Member COLIN SHAW
(Block capitals please)

Pay No. [REDACTED]

Car (Make/Model) JAGUAR XJ8

Registration No. [REDACTED]

Exact Cubic Capacity 4200 cc.

DECLARATION: Address: 109 Albert Street, Bolton

(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 [REDACTED] MEMBER

Date 31/07/06

Approved [REDACTED]

Date _____

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

	Amount £ : p	Miles	
* Subsistence Allowance	:	Normal Mileage	Details input onto Payroll system: By: <u>CS</u> Date: <u>4/8/06</u>
Subsistence Allowance <i>(Taxable)</i>	:	28	
Travel Reimbursement <i>(e.g. Car Park, taxis)</i>	:		
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	Particulars of Journeys		Mode of Travel	Miles Claimed	Dependent Carers Allowance		Fares and other Expenses		Subsistence Allowance	
	Description of Approved Duties, including Locations (From & To)	Time of			£	p	£	p	£	p
JUL/06										
4th	ADULT SERV PGD	9.30	11.30		3					
4th	ADULT SERV SERVING	5.30	7.15		3					
10th	BMAS	1.30	4.30		5					
12th	HR PGD	9.30	11.30		3					
13th	COUNCIL FOR BUWIA COM.	7.00	9.30		3					
17th	ADULT SERV EXEC	8.45	10.45		3					
19th	INTERVIEWS BMAS	9.30	11.45		5					
19th	FULL COUNCIL	6.30	9.00		3					
					28					

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.

BOLTON METROPOLITAN BOROUGH COUNCIL

MEMBERS ALLOWANCES CLAIM

PAID

Claim for Month of August 2006 Name of Member COUN SHAW Pay No. [REDACTED]
 Car (Make / Model) JAGUAR XJ8 Registration No. [REDACTED] Exact Cubic Capacity 4200 cc.

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 [REDACTED] MEMBER Date 31/08/06
 Approved [REDACTED] Date _____

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

	Amount		Miles	
	£ : p			
* Subsistence Allowance	:	Normal Mileage	32.	Details input onto Payroll system: By: Date:
Subsistence Allowance <i>(Taxable)</i>	:			
Travel Reimbursement <i>(e.g. Car Park, taxis)</i>	:			
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.

PAID

MEMBERS ALLOWANCES CLAIM

Claim for Month of SEPTEMBER 2006

Name of Member COLIN SHAW

Pay No. [REDACTED]

Car (Make/Model) JAGUAR XJS

Registration No. [REDACTED]

Exact Cubic Capacity 4200 cc.

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 [REDACTED] MEMBER

Date 30/09/06

Approved [REDACTED]

Date _____

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

	Amount		Miles	
	£ : p			
* Subsistence Allowance	:	Normal Mileage	46	Details input onto Payroll system: By: <u>cm</u> Date: <u>3.10.06</u>
Subsistence Allowance (Taxable)	:			
Travel Reimbursement (e.g. Car Park, taxis)	:			
Dependent Carer's Allowance	:			

Notes:

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

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

Date		Particulars of Journeys Description of Approved Duties, including Locations (From & To)	Time of		Mode of Travel	Miles Claimed	Dependent Carers Allowance		Fares and other Expenses		Subsistence Allowance	
SEPT 2006	HOME Departure		HOME Return	£			p	£	p	£	p	
4th		EX MEETING ADULTS Soc CARE - HEALTH	8.45	11.00	CAR	3						
5th		NRF Birming	4.30	6.30	"	3						
6th		Full Council	6.30	10.30	"	3						
11th		Joint Meeting Dev + Regen + Enviro Serv	8.00	10.00	"	3						
13th		Appeal panel (HR) Castle Hill	10.30	3.00	"	5						
19th		HR PDG	2.00	4.00	"	3						
20th		COURSE BIRMINGHAM UNIV.	6.00 ^{Am}	8.00 ^{Pm}								
22 nd		Licensing Training	9.30	11.15	"	3						
25th		EXEC Meeting Adults Soc Care + Health	8.45	10.45	"	3						
25th		Homes for Bolton	12.30	2.00	"	3						
25th		Housing Management Review	2.30	4.30	"	1						
25th		Special EX Meeting Taxi Panel	4.30	5.30	"	1						
26th		Meeting for Centre blind sitting Applications	9.00	11.30	"	3						
26th		Cherry Tree School Governors Meeting	4.00	5.30	"	5						
27th		Middlebuck Rd	9.00	12.30	"	3						
27th		Scouting chairs Agenda Meeting Adult Serv.	3.30	4.45	"	3						
27th		Internal Council	4.30	7.00	"	1						
28th		GRADING Appeal (HR) Ante Room North	8.30	12.00	"	3						
						46	18	58				
* EXTRA ALLOWANCE *						40.40						

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.

MEMBERS ALLOWANCES CLAIM

Claim for Month of OCTOBER 2006

Name of Member COLIN SHAW
(Block capitals please)

Pay No. [REDACTED]

Car (Make/Model) JAGUAR XJ8

Registration No. [REDACTED]

Exact Cubic Capacity 4200 cc.

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 [REDACTED]

MEMBER

Date 2/11/06

Approved [REDACTED]

Date _____

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

	Amount		Miles	
	£ : p			
* Subsistence Allowance	:	Normal Mileage	24	Details input onto Payroll system: By: <u>cm</u> Date: <u>22.11.06</u>
Subsistence Allowance (Taxable)	:			
Travel Reimbursement (e.g. Car Park, taxis)	:			
Dependent Carer's Allowance	:			

Notes:

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

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

Date		Particulars of Journeys Description of Approved Duties, including Locations (From & To)	Time of		Mode of Travel	Miles Claimed	Dependent Carers Allowance		Fares and other Expenses		Subsistence Allowance	
Oct/06			HOME Departure	HOME Return			£	p	£	p	£	p
5th		COMMITTEE MEETING CENTRE FOR BLIND	7.00	9.30		3						
6th		MEETING WITH CHIEF	10.30	12.30		3						
6th		ADULT SERV SCRUTINY	5.30	7.30		3						
12th		ADULT PARTNERSHIP BOARD	9.30	11.30		3						
12th		MEETING WITH STEF CROCKET	1.00	3.00		3						
17th to 20th		ADULT SERV CONFERENCE BRIGHTON	/		}	1						
23rd		ADULT SERV EXEC MEMBER MEETING	8.45	10.30		3						
25th		INTERVIEWS CENTRE FOR BLIND	9.45	12.30		3						
27th		FOUN COUNCIL	6.30	10.30		3						
26th		Appeal Pm only Mene-Hall Coltapes. #										
						24 @40.40	9	70				

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

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

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

MEMBERS ALLOWANCES CLAIM

Claim for Month of NOVEMBER 2006 Name of Member COLIN SHAW Pay No. [REDACTED]
 (Block capitals please)
 Car (Make / Model) JAGUAR XJ8 Registration No. [REDACTED] Exact Cubic Capacity 4200 cc.

DECLARATION: Address: 109 Albert Road West, Bolton BL1 5ED.

(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 [REDACTED] MEMBER Date 1/12/06
 Approved [REDACTED] Date _____

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

	Amount £ : p		Miles	
* Subsistence Allowance	:	Normal Mileage	75.	Details input onto Payroll system: By: <u>CM</u> Date: <u>7.12.06</u>
Subsistence Allowance (Taxable)	:			
Travel Reimbursement (e.g. Car Park, taxis)	:			
Dependent Carer's Allowance	:			

Notes:

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

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

Particulars of Journeys		Time of		Mode of Travel	Miles Claimed	Dependent Carers Allowance		Fares and other Expenses		Subsistence Allowance	
Date	Description of Approved Duties, including Locations (From & To)	Home Departure	Home Return			£	p	£	p	£	p
3rd	DISMISSAL PANEL (CASTLEHILL)	9.00	3.00		1						
6th	INTERVAL COUNCIL	4.45	6.30		3						
8th	GRUARANZE PANEL	9.00	11.00		3						
8th	FUTURE TAXI CONSULTATIVE PANEL	1.00	2.30		3						
8th	HEALTH & SAFETY JCL	4.00	6.30		3						
8th	FORUM	7.00	9.30		4						
9th	STEWARDS MEETING THE STEWARDS	5.00	7.30		1						
13th	EXEC MEMBER ADULTS SERV.	10.30	12.00		3						
14th	DEV + REVIEW PDG (FOR GENERAL ASSEMBLY)	9.30	11.30		3						
14th	AGENDA MEETING ADULTS SERV. STAFF	3.45	4.45		3						
15th	HR PDG	5.30	11.30		4						
15th	SINGLE STAFFS	3.30	5.30		2						
16th	GENERALIST FOR BOUND COMM.	7.00	9.30		3						
20th	DEV MEETING THE STEWARDS	4.00	6.00		5						
21st	JOINT MEETING ADULTS EXECUTIVE + GENERAL SERV PDG	9.00	11.00		3						
21st	SPECIAL MEETING EXEC MEMBER ADULTS + HEALTHY CULTURE	-	-								
21st	LICENSING COMMA (FOR GENERAL ASSEMBLY)	1.30	3.30		3						
23rd	INCIDENT PANEL GENERALIST	9.30	12.00		3						
23rd	GENERAL APPEAL TRAINING CASTLEHILL	12.30	4.00		3						
23rd	ANTI-SOC BEHAVIOUR (SITTING AT HOME)	5.30	8.30		3						
23rd	ADULT SERV PDG	9.30	11.00		3						
23rd	ADULT SERV SUBSTANT	5.30	8.30		3						
23rd	TAXI CONSULTATIVE PANEL	9.30	11.00		3						
					752						
					40.40	30	30				

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

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

nt to Committee and Members Services for authorisation.

PAID

MEMBERS ALLOWANCES CLAIM

Claim for Month of DECEMBER 2006

Name of Member COLIN SHAW
(Block capitals please)

Pay No. [REDACTED]

Car (Make / Model) JAGUAR XJ8

Registration No. [REDACTED]

Exact Cubic Capacity 4200 cc.

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 [REDACTED] MEMBER Date 26/12/06

Approved [REDACTED] Date _____

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

	Amount £ : p		Miles	
* Subsistence Allowance	:	Normal Mileage	26.	Details input onto Payroll system: By: Date:
Subsistence Allowance (Taxable)	:			
Travel Reimbursement (e.g. Car Park, taxis)	:			
Dependent Carer's Allowance	10.50			

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 Travel	Miles Claimed	Dependent Carers Allowance		Fares and other Expenses		Subsistence Allowance	
Date	Description of Approved Duties, including Locations (From & To)	HOME Departure	Time of HOME Return	£			p	£	p	£	p	
DEC/06	licensing TRAINING.	9.30	12.30		3							
4th	HOUSING MANAGEMENT AGREEMENT REVIEW PDC	2.30	4.30		3							
4th	INSURANCE COUNCIL	4.15	7.15		3							
7th	ADULTS PARTNERSHIP BOARD.	9.30	11.30		3							
7th	TEACHER INTERVIEW ST GERMAINES ST NJRS.	10.30	1.30		5							
11th	EXEC. MEMBER ADOLT JCV	8.45	10.45		3							
11th	PRESENTATIONS BY PROSPECTIVE CHAIRS	12.45	2.45		3							
11th	SCRUTINY CHAIRS MEETING	4.00	6.30		-							
13th	FULL COUNCIL	6.30	10.00		3							
						200						
						400	10	50				

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.

DID

BOLTON METROPOLITAN BOROUGH COUNCIL

MEMBERS ALLOWANCES CLAIM

Claim for Month of FEBRUARY 2007

Name of Member COLIN SHAW
(Block capitals please)

Pay No.

Car (Make / Model) JAGUAR XJ8

Registration No.

Exact Cubic Capacity 4200 cc.

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 MEMBER

Date 28/02/07

Approved

Date _____

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

	Amount		Miles	
* Subsistence Allowance	£ : p	Normal Mileage	36	Details input onto Payroll system:
Subsistence Allowance <small>(Taxable)</small>	:			By: <u>CM</u>
Travel Reimbursement <small>(e.g. Car Park, taxis)</small>	:			Date: <u>2.3.07</u>
Dependent Carer's Allowance	<u>100.50</u>			

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 Travel	Miles Claimed	Dependent Carers Allowance		Fares and other Expenses		Subsistence Allowance	
Date	Description of Approved Duties, including Locations (From & To)	Departure	Return	£			p	£	p	£	p	
1-28 Feb	Car Journey to Ann from Town Hall / Home (18 Vicarage Street)					95						
1-28 Feb	Car Journey in course of Council duties as per vouchers less					36						
8 Feb	H.R. Duties + Caretaker Meeting + Planning Committee	10.00	17.00								6	72
28 Feb	H.R. Duties + Technical Vendors + Director	9.30	16.00								6	72
						131					13	44

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.

10
2007

BOLTON METROPOLITAN BOROUGH COUNCIL

MEMBERS ALLOWANCES CLAIM

Claim for Month of MARCH 2007

Name of Member COWIN SHAW

Pay No. [REDACTED]

(Block capitals please)

Car (Make/Model) JAGUAR XJS

Registration No. [REDACTED]

Exact Cubic Capacity 4200 cc.

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 [REDACTED] 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 [REDACTED] MEMBER

Date 31/03/07

Approved [REDACTED]

Date _____

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

	Amount £ : p		Miles	
* Subsistence Allowance	:	Normal Mileage	62.	Details input onto Payroll system:
Subsistence Allowance (Taxable)	:			By: <u>CM</u>
Travel Reimbursement (e.g. Car Park, taxis)	:			Date: <u>19.4.07</u>
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.

SILVESTER

MEMBERS ALLOWANCES CLAIM

Claim for Month of APRIL 2006 Name of Member JULIA SILVESTER Pay No. [REDACTED]
 Car (Make/Model) HONDA CIVIC 1-4 Registration No. [REDACTED] Exact Cubic Capacity 1-4 cc.

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 [REDACTED] MEMBER Date 12-6-06
 Approved [REDACTED] Date 29.6.06

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

	Amount		Miles
* Subsistence Allowance	£ p	Normal Mileage	83
Subsistence Allowance (Taxable)	:		+ 21
Travel Reimbursement (e.g. Car Park, taxis)	:		104
Dependent Carer's Allowance	:		

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.

MEMBERS ALLOWANCES CLAIM

Claim for Month of MAY 2006 Name of Member JULIA SILVESTER Pay No. [REDACTED]
 (Block capitals please)
 Car (Make / Model) HONDA CIVIC Registration No. [REDACTED] Exact Cubic Capacity 1.4 cc.

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.

PAID

(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 [REDACTED] MEMBER Date 12.6.06
 Approved [REDACTED] Date 29.6.06

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

	Amount £ : p		Miles	
Subsistence Allowance	:	Normal Mileage	21.	Details input onto Payroll system: By: Date:
Subsistence Allowance (Taxable)	:			
Travel Reimbursement (e.g. Car Park, taxis)	:			
Dependent Carer's Allowance	:			

Notes:

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

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

BOLTON METROPOLITAN BOROUGH COUNCIL

MEMBERS ALLOWANCES CLAIM

PAID

Claim for Month of JUNE 2006

Name of Member JULIA SILVESTER

Pay No. [REDACTED]

Car (Make / Model) HONDA CIVIC

(Block capitals please)
Registration No. [REDACTED]

Exact Cubic Capacity 1343 cc.

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 [REDACTED]

MEMBER

Date 2/7/06

Approved [REDACTED]

Date 4/7/06

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

	Amount £ : p		Miles	
* Subsistence Allowance	:	Normal Mileage	76.	Details input onto Payroll system:
Subsistence Allowance (Taxable)	:			By:
Travel Reimbursement (e.g. Car Park, taxis)	:			Date:
Dependent Carer's Allowance	:			

Notes:

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

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

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

Date	Particulars of _____ _____		Time of Departure	Return	Mode of Travel	Miles Claimed	Dependent Carers Allowance		Fares and other Expenses		Subsistence Allowance	
	Description of Approved Duties, including Locations (From & To)	TO					FROM	£	p	£	p	£
7/6/06	HEALTHY WELLS PARTNERSHIP	TOWN HALL	HOME	12:00	3:00	CAR	7					
8/6/06	JOHN HOLT MEETING	See below	WESTM	=								
	DAISY HILL RESIDENTS	↓		6:00	9:30	CAR	7					
9/6/06	HEALTH SCRUTINY	TOWNH	-	9:00	1:00	-	7					
14/6/06	NEIGHS PANEL	WESTM	-	9:30	11:30	-	6					
14/6/06	MOM FORUM	TOWNH	-	5:00	7:00	-	7					
15/6/06	BOLTON MUSEUM	TOWNH	-	5:30	7:30	-	7					
21/6/06	EATOCK GOVS	WESTM	-	6:30	9:30	-	7					
27/6/06	HEALTH SCRUTINY	TOWNH	-	9:00	12:00	-	7					
28/6/06	EXEC H/R	TOWNH	-	9:30	11:30	-	7					
30/6/06	SPECIAL COUNCIL	"	-	4:00	7:30	-	7					
28/6/06	JOHN HOLT MEETING	WESTM	-	6:00	8:30	-	7					

Re-jiggered

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

69
76

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.

MEMBERS ALLOWANCES CLAIM

0453

Claim for Month of JULY 20006

Name of Member JULIA SILVESTER

Pay No. [REDACTED]

Car (Make/Model) HONDA CIVIC

(Block capitals please)
Registration No. [REDACTED]

Exact Cubic Capacity 1400 cc.

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 [REDACTED]

MEMBER

Date 31/7/06

Approved [REDACTED]

Date 15/08/06

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

	Amount		Miles	
	£ : p			
* Subsistence Allowance	:	Normal Mileage	80.	Details input onto Payroll system: By: <u>CM</u> Date: <u>30/8/06</u>
Subsistence Allowance (Taxable)	:			
Travel Reimbursement (e.g. Car Park, taxis)	:			
Dependent Carer's Allowance	:			

Notes:

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

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

SWARBRICK

BOLTON METROPOLITAN BOROUGH COUNCIL

MEMBERS ALLOWANCES CLAIM

Pay No. [REDACTED]

Claim for Month of JANUARY 2007

Name of Member CAROLE SWARBRICK
(Block capitals please)

Car (Make/Model) B.M.W 116i

Registration No. [REDACTED]

Exact Cubic Capacity 1600 cc.

Home Address 176 CHORLEY NEW RD. BOLTON B.L.1 4PF.

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 [REDACTED]

Approved [REDACTED]

MEMBER

Date 19/2/07

Date _____

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

	Amount £ : p	Normal Mileage	Miles		Details input onto Payroll system:
* Subsistence Allowance	:		48		By: CM
Subsistence Allowance <i>(Taxable)</i>	:				Date: 27.2.07
Travel Reimbursement <i>(e.g. Car Park, taxis)</i>	:				
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.

