

ROCK

PAID

BOLTON METROPOLITAN BOROUGH COUNCIL

MEMBERS ALLOWANCES CLAIM

Claim for Month of APRIL 20 07

Name of Member STEPHEN M ROCK
(Block capitals please)

Pay No.

Car (Make/Model) MITSUBISHI COLT

Registration No.

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

MEMBER

Date 30/4/07

Approved

Date _____

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

	Amount		Miles	
	£ : p			
* Subsistence Allowance	:	Normal Mileage	50	Details input onto Payroll system: By: <u>CM</u> Date: <u>3.5.07</u>
Subsistence Allowance <small>(Taxable)</small>	16 : 76			
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.

PAID

BOLTON METROPOLITAN BOROUGH COUNCIL

MEMBERS ALLOWANCES CLAIM

Claim for Month of MAY 20 07

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 16/6/07

Approved [REDACTED]

Date _____

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

	Amount £ : p		Miles
* Subsistence Allowance	:	Normal Mileage	40
Subsistence Allowance <i>(Taxable)</i>	:		
Travel Reimbursement <i>(e.g. Car Park, taxis)</i>	:		
Dependent Carer's Allowance	:		

Details input onto Payroll system:

By: CM

Date: 25.6.07

BOLTON MBC
 25 JUN 2007
PENSIONS SECTION

Notes:

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

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
14/6/07	ELECTED MEMBER DEVELOPMENT											
	MIDWICH-BOLTON RTN		5.00	8.30	CAR	10						
16/6/07	MAYOR MAKING MIDWICH-BOLTON RTN		10.00	3.30	CAR	10						
20/6/07	CIVIC SUNDAY MIDWICH-BOLTON RTN		1.30	5.00	CAR	10						
22/6/07	B@HOME MIDWICH-BOLTON RTN		3.30	8.00	CAR	10						
						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.

DAD

BOLTON METROPOLITAN BOROUGH COUNCIL

MEMBERS ALLOWANCES CLAIM

Claim for Month of JUNE 20 07

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 7/7/07

Approved [REDACTED]

Date _____

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

	Amount £ : p		Miles	
* Subsistence Allowance	:	Normal Mileage	<u>78</u>	Details input onto Payroll system: By: <u>CM</u> Date: <u>26.7.07</u>
Subsistence Allowance <i>(Taxable)</i>	<u>6</u> : <u>77</u>			
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

BOLTON METROPOLITAN BOROUGH COUNCIL

MEMBERS ALLOWANCES CLAIM

Claim for Month of JULY 20 07

Name of Member STEPHEN M ROCK

Pay No.

(Block capitals please)

Car (Make/Model) MIYUBISHI COLT

Registration No.

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

MEMBER

Date 31/7/07

Approved

Date _____

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

	Amount		Miles	
* Subsistence Allowance	£ : p	Normal Mileage	100.	Details input onto Payroll system: By: <u>cm</u> Date: <u>3.8.07</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.

BOLTON METROPOLITAN BOROUGH COUNCIL

MEMBERS ALLOWANCES CLAIM

Claim for Month of AUGUST 20 07

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

Pay No. [REDACTED]

Car (Make / Model) MITSUBISHI COE

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 31/8/07

Approved [REDACTED]

Date _____

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

	Amount £ : p		Miles	
* Subsistence Allowance	:	Normal Mileage	90	Details input onto Payroll system: By: <u>S. C. [REDACTED]</u> Date: month to 1 st Sept
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		
		Departure	Return										
14/8	FORUM MOCK INTERVIEWS HORWICH-BOLTON RTN	2.00pm	4.30pm	CAR		10							
15/8	PERFORMANCE MANAGEMENT TRAINING HORWICH-BOLTON RTN	9.15am	1.00pm	CAR		10							
16/8	FORUM CONSULTATION HORWICH-BOLTON	12.00pm	3.30	CAR		5							
16/8	CHILDRENS SCRUTINY BOLTON-HORWICH	3.30	5.30	CAR		5							
20/8	FORUM CHAIR+VICE CHAIR HORWICH-BOLTON RTN	10.15	12.30	CAR		10							
22/8	MOCK INSPECTION MEETING HORWICH-BOLTON RTN	11.00	3.00	CAR		10							
22/8	SCRUTINY WORKSHOP HORWICH-BOLTON RTN	5.00	8.30	CAR		10							
28/8	BOLTON@HOME BRIEFING HORWICH-BOLTON RTN	9.00	12.00	CAR		10							
29/8	STANDARDS WORKSHOP HORWICH-BOLTON RTN	3.00	6.00	CAR		5							
29/8	BM&L COUNCIL BOLTON-HORWICH	6.30	10.30	CAR		5						8	38
30/8	FORUM BRIEFING HORWICH-BOLTON RTN	4.00	7.00	CAR		10							
							90						

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 SEPT. 20 07

Name of Member STEPHEN M ROOK
(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 2/10/07

Approved [REDACTED]

Date _____

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

	Amount £ : p		Miles
* Subsistence Allowance	:	Normal Mileage	68
Subsistence Allowance (Taxable)	:		
Travel Reimbursement (e.g. Car Park, taxis)	:		
Dependent Carer's Allowance	:		

Details input onto Payroll system:

By: CM

Date: 8.10.07

Notes:

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

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

Members' Allowances Claim

Bolton Council

Name Stephen M Rock	Home Address 64 Ainsworth Ave. Horwich. Bolton		Pay No.
Car Make/Model Mitsubishi Colt	Registration	Exact CC 1600	Month October 20 00

I certify that:-

- (a) (For Car Allowance claims only) I have actually and necessarily incurred the mileage claimed in accordance with the Council's scheme of Motor Car Allowances.
- (b) (For Car Allowance claims only) I am the holder of a full, current and valid driving licence and MOT certificate (where applicable), and I have complied with the Council's insurance requirements with regard to the use of my car on Council business.
- (c) (For Car Allowance claims only) I will retain VAT receipts covering all journeys for six years in order to comply with HMRC regulations.
- (d) I have actually and necessarily incurred expenditure in travelling and subsistence for the purpose of enabling me to perform duties as a Member of Bolton Council, I have actually paid the fares and made other payments shown on this form, and that all amounts claimed are strictly in accordance with the rates determined by Bolton Council.
- (e) Except as shown, I have not made, and will not make, any claim under any enactment for travelling or subsistence expenses or allowances, or financial loss allowance or attendance allowance in connection with the duties indicated on this form.
- (f) The particulars inserted on this form are correct, and I understand that fraudulent claims may result in disciplinary action.

FOR MEMBERS' SERVICES USE ONLY

Subsistence T	16.76	Total Miles	54 ✓
Subsistence NT		For Payroll Use Only	
Expenses NT			
Carer's Allowance			
		Input by	CM
		Date	22.11.07

Signed	Member	Date 4/11/07
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I certify that I have examined this allowance sheet, the figures recorded are reasonable, and the expense was necessary.

Authorised	Members' Services	Date
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Date	Reason for Journey (including From and To)	Time of		Miles Claimed	Subsistence Allowance		Fares and Other Expenses		Dependent Carers Allowance	
		Departure	Return		£	p	£	p	£	p
2-Oct-2007	Bolton@Home meeting Vicky Ramsden	9:15	0:15	10	£	p	£	p	£	p
9-Oct-2007	Housing strategy meeting	16:45	14:30	10	£	p	£	p	£	p
22-Oct-2007	Meeting Trevor McKeen B@Home	14:00	17:30	4	£	p	£	p	£	p
22-Oct-2007	Lostock Liason Committee	17:00	21:00	10	£	8.38 p	£	p	£	p
23-Oct-2007	Pre Council group meeting	17:00	21:00	10	£	p	£	p	£	p
23-Oct-2007	BMBC Council	18:00	18:00	10	£	8.38 p	£	p	£	p
					£	p	£	p	£	p
					£	p	£	p	£	p
					£	p	£	p	£	p
					£	p	£	p	£	p
					£	p	£	p	£	p
					£	p	£	p	£	p
					£	p	£	p	£	p
					£	p	£	p	£	p
					£	p	£	p	£	p
					£	p	£	p	£	p
					£	p	£	p	£	p
					£	p	£	p	£	p
					£	p	£	p	£	p
					£	p	£	p	£	p
					£	p	£	p	£	p

BOLTON COUNCIL
13 NOV 2007
PAYROLL SHARED SERVICE CENTRE

Total Miles	54	Total Amount	£ 16.76 p	Total Amount	£	Total Amount	£
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Please only enter the number of miles. Do not calculate an amount for payment.

If you require more lines, please use a Members' Allowances Additional Sheet Number of Additional Sheets Used
 PAY-M1 All claims must be signed and authorised by Members' Services before payment can be made, and should be sent to
 12.10.2007 Payroll Shared Service Centre, 5th Floor, Paderborn House, Bolton BL1 1JW

PAID

Members' Allowances Claim

Bolton Council

Name	stephen rock	Home Address	64 ainsworth ave. horwich bolton bl6 6lx	Pay No.	[REDACTED]
Car Make/Model	mitsubishi colt	Registration	[REDACTED]	Exact CC	1600
				Month	november 20 00

I certify that:-

(a) *(For Car Allowance claims only)* I have actually and necessarily incurred the mileage claimed in accordance with the Council's scheme of Motor Car Allowances.

(b) *(For Car Allowance claims only)* I am the holder of a full, current and valid driving licence and MOT certificate (where applicable), and I have complied with the Council's insurance requirements with regard to the use of my car on Council business.

(c) *(For Car Allowance claims only)* I will retain VAT receipts covering all journeys for six years in order to comply with HMRC regulations.

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

(e) Except as shown, I have not made, and will not make, any claim under any enactment for travelling or subsistence expenses or allowances, or financial loss allowance or attendance allowance in connection with the duties indicated on this form.

(f) The particulars inserted on this form are correct, and I understand that fraudulent claims may result in disciplinary action.

FOR MEMBERS' SERVICES USE ONLY

Subsistence T		Total Miles	98
Subsistence NT		For Payroll Use Only	
Expenses NT		Input by	cm
Carer's Allowance		Date	28.1.08

Signed	[REDACTED]	Member	Date	30-Nov-2007
I certify that I have examined this allowance sheet, the figures recorded are reasonable, and the expense was necessary.				
Authorised	[REDACTED]	Members' Services	Date	

Date	Reason for Journey (including From and To)	Time of		Miles Claimed	Subsistence Allowance	Fares and Other Expenses		Dependent Carers Allowance		
		Departure	Return			£	p	£	p	
2-Nov-2007	Horwich market briefing horwich-bolton rtn.	14:15	16:40	10	£	p	£	p	£	p
12-Nov-2007	appeals training horwich-bolton rtn	17:15	19:00	10	£	p	£	p	£	p
13-Nov-2007	bolton at home horwich-bolton rtn	13:00	15:30	10	£	p	£	p	£	p
14-Nov-2007	forum members only horwich-bolton rtn	9:00	13:00	10	£	p	£	p	£	p
14-Nov-2007	childrens pdg horwich bolton rtn	16:45	19:00	10	£	p	£	p	£	p
20-Nov-2007	group presentation city status horwich-bolton rtn	17:15	19:30	10	£	p	£	p	£	p
22-Nov-2007	bolton at home horwich-bolton rtn	16:15	18:30	10	£	p	£	p	£	p
28-Nov-2007	web access training horwich-bolton rtn	12:00	13:30	10	£	p	£	p	£	p
29-Nov-2007	rivington trust horwich-anderton trn	8:15	13:00	8	£	p	£	p	£	p
29-Nov-2007	chair and vice chair forum meeting horwich-bolton rtn	15:15	17:30	10	£	p	£	p	£	p
					£	p	£	p	£	p
					£	p	£	p	£	p

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

Total Miles	98	Total Amount	£	p	Total Amount	£	p	Total Amount	£	p
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If you require more lines, please use a Members' Allowances Additional Sheet

Number of Additional Sheets Used

PAY-M1 All claims must be signed and authorised by Members' Services before payment can be made, and should be sent to
12.10.2007 Payroll Shared Service Centre, 5th Floor, Paderborn House, Bolton BL1 1JW

MEMBERS ALLOWANCES CLAIM

Claim for Month of JANUARY 20 08

Name of Member S. M. ROCK

Pay No. [REDACTED]

(Block capitals please)

Car (Make / Model) MITSUBISHI COLT

Registration No. [REDACTED]

Exact Cubic Capacity 1600cc.

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 1/3/08

Approved [REDACTED]

Date 04/3/08

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

	Amount		Miles	
* Subsistence Allowance	£ : p	Normal Mileage	46	Details input onto Payroll system: By: Date:
Subsistence Allowance (Taxable)	15 : 15			
Travel Reimbursement (e.g. Car Park, taxis)	15 : 15			
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 FEBRUARY 2008

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 1/3/08

Approved [REDACTED] Date 04/3/08

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

	Amount		Miles	
* Subsistence Allowance	£ : p 21 : 68	Normal Mileage	48	Details input onto Payroll system:
Subsistence Allowance (Taxable)	<u>15 : 15</u> 36 : 83 ²¹		<u>46</u> 94	
Travel Reimbursement (e.g. Car Park, taxis)	:			By: CM
Dependent Carer's Allowance	:			Date: 5.3.08

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

Bolton Council

Name	stephen rock	Home Address	64 ainsworth ave. horwich.bolton. bl6 6lx	Pay No.	[REDACTED]
Car Make/Model	mitsubishi colt	Registration	[REDACTED]	Exact CC	1600
				Month	march 20 08

I certify that:-

- (a) (For Car Allowance claims only) I have actually and necessarily incurred the mileage claimed in accordance with the Council's scheme of Motor Car Allowances.
- (b) (For Car Allowance claims only) I am the holder of a full, current and valid driving licence and MOT certificate (where applicable), and I have complied with the Council's insurance requirements with regard to the use of my car on Council business.
- (c) (For Car Allowance claims only) I will retain VAT receipts covering all journeys for six years in order to comply with HMRC regulations.
- (d) I have actually and necessarily incurred expenditure in travelling and subsistence for the purpose of enabling me to perform duties as a Member of Bolton Council, I have actually paid the fares and made other payments shown on this form, and that all amounts claimed are strictly in accordance with the rates determined by Bolton Council.
- (e) Except as shown, I have not made, and will not make, any claim under any enactment for travelling or subsistence expenses or allowances, or financial loss allowance or attendance allowance in connection with the duties indicated on this form.
- (f) The particulars inserted on this form are correct, and I understand that fraudulent claims may result in disciplinary action.

FOR MEMBERS' SERVICES USE ONLY

Subsistence T		Total Miles	30
Subsistence NT	8.38	For Payroll Use Only	
Expenses NT			
Carer's Allowance			
		Input by	
		Date	

Signed	[REDACTED] Member	Date	30/4/08
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I certify that I have examined this allowance sheet, the figures recorded are reasonable, and the expense was necessary.

Authorised	[REDACTED] Members' Services	Date	
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Date	Reason for Journey (including From and To)	Time of		Miles Claimed	Subsistence Allowance		Fares and Other Expenses		Dependent Carers Allowance	
		Departure	Return		£	p	£	p	£	p
10-Mar-2008	extraordinary council meeting horwich-bolton rtn	17:00	19:30	10	£	p	£	p	£	p
13-Mar-2008	external organisations scrutiny horwich-bolton rtn	13:00	16:30	10	£	p	£	p	£	p
18-Mar-2008	area forum horwich-blackrod rtn	17:30	21:30	10	£	8.38 p	£	p	£	p
					£	p	£	p	£	p
					£	p	£	p	£	p
					£	p	£	p	£	p
					£	p	£	p	£	p
					£	p	£	p	£	p
					£	p	£	p	£	p
					£	p	£	p	£	p
					£	p	£	p	£	p
					£	p	£	p	£	p
					£	p	£	p	£	p
					£	p	£	p	£	p
				Total Miles	Total Amount		Total Amount		Total Amount	
				30	£	8.38 p	£	p	£	p

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

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

Number of Additional Sheets Used

0

PAY-M1
12.10.2007

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

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

sc month
3

RUSHTON

PAID

BOLTON METROPOLITAN BOROUGH COUNCIL

MEMBERS ALLOWANCES CLAIM

Claim for Month of APRIL 2007

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

Pay No. [REDACTED]

Car (Make/Model) VW GOLF

Registration No. [REDACTED]

Exact Cubic Capacity 1781 cc

Home Address 1 ARDAN CLOSE LINDAROSE 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 2/5/07

Approved [REDACTED]

Date _____

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

	Amount £ : p		Miles	
* Subsistence Allowance	:	Normal Mileage	58.	Details input onto Payroll system: By: <u>CM</u> Date: <u>4.5.07</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	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
2 nd	COMP ISSUES Scrutiny	5:30	8:0	CAR	6						
16	EXECUTIVE allowed by meeting with policemen 625	2:30	6:30	"	6						
23	Chief officers appointment panel	8:30	10	"	6						
23	Meeting with Chief Exec + Carol Jarvis and police etc	3:30									
"	+ Informal Council 5:15		7:15		6						
24	Vision for Future [at Sun. Hills Hall]	9:15	1:0		6						
24	STANDARDS BOARD	3:35	5:20		6						
25	ARENA Board meeting REF 2018	2:30	5:0		10						
25	Full Council	6:0	9:45		6						
30	Chief officer appraisal committee + proof reading some	8:0	10:45		6						
					58						

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 MAY 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

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 30/5/07

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>4.6.07</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.

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BOLTON METROPOLITAN BOROUGH COUNCIL

MEMBERS ALLOWANCES CLAIM

Claim for Month of JUNE 2007

Name of Member F. ALAN RUSHTON

Pay No. [REDACTED]

(Block capitals please)

Car (Make/Model) VW 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 2/7/07

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: 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.

BOLTON METROPOLITAN BOROUGH COUNCIL

MEMBERS ALLOWANCES CLAIM

Claim for Month of JULY 20 07 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 ARRAN CLOSE LADYBRIDGE BOLTON BL34PP

BOLTON COUNCIL
 11 OCT 2007
 PAYROLL SHARED
 SERVICE CENTRE

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 SEPT 30th 07.
 Approved [REDACTED] Date _____

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

	Amount £ : p		Miles	
* Subsistence Allowance	:	Normal Mileage	24.	Details input onto Payroll system: By: <u>CM</u> Date: <u>29.10.07</u>
Subsistence Allowance (Taxable)	:		85	
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 AUG. 20 07

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

BOLTON COUNCIL
11 OCT 2007
PAYROLL SHARED
SERVICE CENTRE

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 SEPT 30th '07

Approved [REDACTED]

Date _____

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

	Amount £ : p		Miles
* Subsistence Allowance	:	Normal Mileage	37.
Subsistence Allowance <i>(Taxable)</i>	:		
Travel Reimbursement <i>(e.g. Car Park, taxis)</i>	:		
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.

PAID

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BOLTON METROPOLITAN BOROUGH COUNCIL

MEMBERS ALLOWANCES CLAIM

Claim for Month of SEPT 20 07

Name of Member F. A. RUSHTON

Pay No. [REDACTED]

Car (Make / Model) VW GOLF

Registration No. [REDACTED]

Exact Cubic Capacity 1781 cc.

Home Address 1 ARRAW CLOSE LADYBRIDGE BOLTON BL3 4PP

BOLTON COUNCIL

 11 OCT 2007
 PAYROLL SHARED
 SERVICE CENTRE

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 30th SEPT 07

Approved [REDACTED]

Date _____

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

	Amount £ : p		Miles
* Subsistence Allowance	:	Normal Mileage	24
Subsistence Allowance (Taxable)	:		
Travel Reimbursement (e.g. Car Park, taxis)	:		
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.

BOLTON METROPOLITAN BOROUGH COUNCIL

MEMBERS ALLOWANCES CLAIM

Claim for Month of OCTOBER 20 07 Name of Member F. A. RUSHTON Pay No. [REDACTED]
 Car (Make/Model) VW GOLF Registration No. [REDACTED] Exact Cubic Capacity 1781 cc.
 Home Address 1 HERMAN CASE 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 2 NOV 07
 Approved [REDACTED] Date _____

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

	Amount £ : p		Miles	
* Subsistence Allowance	:	Normal Mileage	49.	Details input onto Payroll system: By: <u>CM</u> Date: <u>5.11.07</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.

PAID

Members' Allowances Claim

BOLTON
DEC 2007

Bolton Council

Name	F. ALAN RUSHTON	Home Address	1 ARRAN CLOSE BOLTON BL2 4 PP	Pay No.	[REDACTED]
Car Make/Model	VW GOLF	Registration	[REDACTED]	Exact CC	1781
				Month	NOV 20 07

I certify that:-

(a) *(For Car Allowance claims only)* I have actually and necessarily incurred the mileage claimed in accordance with the Council's scheme of Motor Car Allowances.

(b) *(For Car Allowance claims only)* I am the holder of a full, current and valid driving licence and MOT certificate (where applicable), and I have complied with the Council's insurance requirements with regard to the use of my car on Council business.

(c) *(For Car Allowance claims only)* I will retain VAT receipts covering all journeys for six years in order to comply with HMRC regulations.

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

(e) Except as shown, I have not made, and will not make, any claim under any enactment for travelling or subsistence expenses or allowances, or financial loss allowance or attendance allowance in connection with the duties indicated on this form.

(f) The particulars inserted on this form are correct, and I understand that fraudulent claims may result in disciplinary action.

FOR MEMBERS' SERVICES USE ONLY

Subsistence T	3.88	Total Miles	50 ✓
Subsistence NT	✓	For Payroll Use Only	
Expenses NT		Input by	
Carer's Allowance		Date	

Signed	[REDACTED] Member	Date	4 DEC '07
I certify that I have examined this allowance sheet, the figures recorded are reasonable, and the expense was necessary.			
Authorised	[REDACTED] Members' Services	Date	

Date	Reason for Journey (including From and To)	Time of		Miles Claimed	Subsistence Allowance	Fares and Other Expenses	Dependent Carers Allowance
		Departure	Return				
1	SITE VISITS + PLANNING Sub for Gunc MORGAN	9.0	5.15	6	£ 3.88 p	£ p	£ p
2	SEMINAR AFFORDABLE WARMTH	9.30	2.0	6	£ p	£ p	£ p
7	AREA FORUM	6.15	9.45	2	£ p	£ p	£ p
8	EXTERNAL ORGANISATION SEEDINGS CONFEE	1.30	4.30	6	£ p	£ p	£ p
13	POD GRP STRATEGY + FINANCE	2.0	4.0	6	£ p	£ p	£ p
14	YOUNG PEOPLES + SPORT POD	5.0	7.0	6	£ p	£ p	£ p
19	STANDARDS COMMITTEE	2.30			£ p	£ p	£ p
19	POD Corp Affairs		6.0	6	£ p	£ p	£ p
23	Representing Council of Employers (EDELSTEIN CENTRE) CHARTER AWARDS LOWRY	9.0	3.30	6	£ p	£ p	£ p
30 *	Appeals Panel - "Employee Discipline"	8.45		6	£ p	£ p	£ p
					£ p	£ p	£ p
					£ p	£ p	£ p

Total Miles	50	Total Amount	£ 3.88 p	Total Amount	£ p	Total Amount	£ p
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Please only enter the number of miles. Do not calculate an amount for payment.

If you require more lines, please use a **Members' Allowances Additional Sheet** Number of Additional Sheets Used

PAY-M1 All claims must be signed and authorised by Members' Services before payment can be made, and should be sent to
12:10.2007 Payroll Share Service Centre, 5th Floor, Paderborn House, B in BL1 1JW SC month 9

Members' Allowances Claim

Bolton Council

Name	RUSHTON	Home Address	1 ARRAN CLOSE LADYBRIDGE	Pay No.	[REDACTED]
Car Make/Model	VW GOLF	Registration	[REDACTED]	Exact CC	1781
				Month	DEC / JAN 2007

08 up to 17/16

I certify that:-

- (a) *(For Car Allowance claims only)* I have actually and necessarily incurred the mileage claimed in accordance with the Council's scheme of Motor Car Allowances.
- (b) *(For Car Allowance claims only)* I am the holder of a full, current and valid driving licence and MOT certificate (where applicable), and I have complied with the Council's insurance requirements with regard to the use of my car on Council business.
- (c) *(For Car Allowance claims only)* I will retain VAT receipts covering all journeys for six years in order to comply with HMRC regulations.
- (d) I have actually and necessarily incurred expenditure in travelling and subsistence for the purpose of enabling me to perform duties as a Member of Bolton Council; I have actually paid the fares and made other payments shown on this form, and that all amounts claimed are strictly in accordance with the rates determined by Bolton Council.
- (e) Except as shown, I have not made, and will not make, any claim under any enactment for travelling or subsistence expenses or allowances, or financial loss allowance or attendance allowance in connection with the duties indicated on this form.
- (f) The particulars inserted on this form are correct, and I understand that fraudulent claims may result in disciplinary action.

FOR MEMBERS' SERVICES USE ONLY

Subsistence T	3.88	Total Miles	62
Subsistence NT		For Payroll Use Only	
Expenses NT		Input by	CM
Carer's Allowance		Date	3.4.08

Signed	[REDACTED]	Member	Date	26/02/08
I certify that I have examined this allowance sheet, the figures recorded are reasonable, and the expense was necessary.				
Authorised	[REDACTED]	Members' Services	Date	

Date	Reason for Journey (including From and To)	Time of		Miles Claimed	Subsistence Allowance	Fares and Other Expenses		Dependent Carers Allowance		
		Departure	Return			£	p		£	p
4 DEC 07	Childrens Services PDG etc by <i>Followed Secretary Committee Young people</i>	1:30	6:35	6	£	p	£	p		
7 " "	Balmoor + Heaton Fold PDG	1:30	2:30	6	£	p	£	p		
12 " "	Planning Site Visits - deputy for Counc Mergan	9:30	12:30	6	£	p	£	p		
12 " "	Full Council	6:30	10:30	6	£	p	£	p		
13 " "	Planning - sub for Counc Mergan	9:0	5:30	6	£ 3-88	p	£	p		
18 " "	Presentation 1000	10:30	1:0	6	£	p	£	p		
19 " "	Briefing on JAR + Corp Assess by Chief Exec	9:0	10:30	6	£	p	£	p		
11 JAN 08	Corp Rest + Finance PDG	1:30	3:30	6	£	p	£	p		
16	Informal Council PCT followed by	4:30	9:20	6	£	p	£	p		
16	Heaton+Loxlock Area Forum at Sother Community Centre			2	£	p	£	p		
17	External organisation Secretary Committee	1:30	?	6	£	p	£	p		
Total Miles					Total Amount		Total Amount		Total Amount	

Total Miles	62	Total Amount	£ 3.88	p	£	p	£	p
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Please only enter the number of miles. Do not calculate an amount for payment.

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

Number of Additional Sheets Used

Members' Allowances Claim

BOLTON

Bolton Council

Name <i>RUSHTON F. A.</i>	Home Address <i>1 ARRAN CLOSE Bolton BL5 4PP</i>	Pay No. [REDACTED]
Car Make/Model <i>V. W GOLF</i>	Registration [REDACTED]	Exact CC <i>1781</i> Month <i>MARCH</i> 20 <i>08</i>

- I certify that:-
- (a) (For Car Allowance claims only) I have actually and necessarily incurred the mileage claimed in accordance with the Council's scheme of Motor Car Allowances.
 - (b) (For Car Allowance claims only) I am the holder of a full, current and valid driving licence and MOT certificate (where applicable), and I have complied with the Council's insurance requirements with regard to the use of my car on Council business.
 - (c) (For Car Allowance claims only) I will retain VAT receipts covering all journeys for six years in order to comply with HMRC regulations.
 - (d) I have actually and necessarily incurred expenditure in travelling and subsistence for the purpose of enabling me to perform duties as a Member of Bolton Council, I have actually paid the fares and made other payments shown on this form, and that all amounts claimed are strictly in accordance with the rates determined by Bolton Council.
 - (e) Except as shown, I have not made, and will not make, any claim under any enactment for travelling or subsistence expenses or allowances, or financial loss allowance or attendance allowance in connection with the duties indicated on this form.
 - (f) The particulars inserted on this form are correct, and I understand that fraudulent claims may result in disciplinary action.

FOR MEMBERS' SERVICES USE ONLY

Signed: [REDACTED] Member	Date <i>31 March 2008</i>
I certify that I have examined this allowance sheet, the figures recorded are reasonable, and the expense was necessary.	
Authorised: [REDACTED] Members' Services	Date

Subsistence T	Total Miles	
Subsistence NT	For Payroll Use Only	
Expenses NT		Input by
Carer's Allowance		Date

Date	Reason for Journey (including From and To)	Time of		Miles Claimed
		Departure	Return	
<i>4 March</i>	<i>Home to T/Hall Health Screening Sub for Council</i>	<i>9.0</i>	<i>12.10</i>	<i>6</i>
<i>4</i>	<i>Home to Westhough Ln. Complex Centre west Management Committee</i>	<i>3.30</i>	<i>6.0</i>	<i>7</i>
<i>5</i>	<i>Home to Lashkott Parish Hall Area Forum</i>	<i>6.15</i>	<i>9.15</i>	<i>2</i>
<i>10</i>	<i>Special Council meeting - home to T/Hall</i>	<i>5.30</i>	<i>8.30</i>	<i>6</i>
	<i>followed by presentation to Group from Housing Dept</i>			
<i>11</i>	<i>Home to T/Hall Children Serv PDG</i>	<i>9.0</i>	<i>11.0</i>	<i>6</i>
<i>13</i>	<i>Home to T/Hall Ext Organisation Scrutiny Committee</i>	<i>1.30</i>	<i>4.30</i>	<i>8</i>
<i>17</i>	<i>Home to T/Hall STANDARDS COMMITTEE</i>	<i>3.30</i>	<i>5.20</i>	<i>6</i>
<i>19</i>	<i>Home to T/Hall PDG Corp Affairs</i>	<i>3.0</i>	<i>5.30</i>	<i>6</i>
<i>20</i>	<i>Home to Thorn Lea Close Charles New Rd SITE VISIT</i>	<i>9.45</i>	<i>11.15</i>	<i>3</i>

Subsistence Allowance	Fares and Other Expenses	Dependent Carers Allowance
£ p	£ p	£ p
£ p	£ p	£ p
£ p	£ p	£ p
£ p	£ p	£ p
£ p	£ p	£ p
£ p	£ p	£ p
£ p	£ p	£ p
£ p	£ p	£ p
£ p	£ p	£ p
£ p	£ p	£ p
£ p	£ p	£ p
£ p	£ p	£ p
£ p	£ p	£ p
£ p	£ p	£ p
£ p	£ p	£ p
£ p	£ p	£ p
£ p	£ p	£ p
£ p	£ p	£ p
£ p	£ p	£ p
£ p	£ p	£ p
Total Amount	Total Amount	Total Amount

Total Miles
48

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

£ p	£ p	£ p
-----	-----	-----

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

Number of Additional Sheets Used

PAY-M1
12:10.2007

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

SHAW

PAID

BOLTON METROPOLITAN BOROUGH COUNCIL

MEMBERS ALLOWANCES CLAIM

7 - JUN 2007
Payroll Section

Claim for Month of MAY 2007

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 valid 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 1/06/07

Approved [REDACTED]

Date _____

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

	Amount		Miles	
	£ : p			
* Subsistence Allowance	:	Normal Mileage	30	Details input onto Payroll system: By: <u>cm</u> Date: <u>8.6.07</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.

PAID

BOLTON METROPOLITAN BOROUGH COUNCIL

MEMBERS ALLOWANCES CLAIM

Claim for Month of JUNE 2007

Name of Member COLIN SHAW
(Block capitals please)

Pay No.

Car (Make/Model) JAGUAR XJS

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 30/06/07

Approved

Date _____

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

	Amount £ : p		Miles	
* Subsistence Allowance	:	Normal Mileage	89	Details input onto Payroll system:
Subsistence Allowance <i>(Taxable)</i>	:			By: <u>CM</u>
Travel Reimbursement <i>(e.g. Car Park, taxis)</i>	:			Date: <u>24.7.07</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.

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)	HOME Departure			HOME Return	£	p	£	p	£
JUNE 07										
5K	ENVIRO EXEC	9.00	11.00		3					
5K	LICENSING COMMITTEE	1.30	5.15		3					
6K	LICENSING TRAINING	4.30	7.30		3					
7K	CENTRE FOR BLIND AGM	7.00	9.45		13					
8K	INTERVIEWS ST GERMAINE NURSERY	1.00	4.00		5					
11K	ENVIRO SCRUTINY AGENDA MEETING	9.30	10.45		3					
11K	GOVERNORS MEETING THE ORCHARDS	1.30	4.30		5					
13K	BEMAS (DEPT) CASTLE HILL	1.45	4.30		5					
13K	H & L FORUM (JUTTON TRUST)	6.00	10.00		4					
14K	CONGESTION CHARGES MEETING	4.30	7.00		3					
14K	R.A.F. PRESENTATION	6.00	10.00		3					
18K	THE EXEC	2.30	4.30		3					
19K	PERSONAL DEV MEETING CATREHILL	2.30	4.30		5					
20K	INTERVIEWS WITH OFTED CHECKITREE	2.30	4.30		5					
21K	INTERVIEWS ST GERMAINE ST	9.00	12.30		5					
21K	TIF MEETING	2.30	5.00		3					
22K	ENVIRO RD JUNT RD GREATER PGD	8.30	11.30		3					
25	SCRUTINY TRAINING	3.45	6.15		3					
26	LICENSING COMMITTEE	1.30	4.30		3					
27	PRESENTATION ODEON ENVIRO SCRUTINY	1.30	5.00		3					
28	TIF MEETING	4.00	6.30		3					
29	INTERVIEWS CENTRE FOR BLIND				3					
					38		36			

@89
+3.1p

38 36

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.

PAID

BOLTON METROPOLITAN BOROUGH COUNCIL

MEMBERS ALLOWANCES CLAIM

Claim for Month of JULY 2007

Name of Member COLIN JHAW

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 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 31/07/07

Approved [REDACTED]

Date _____

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

	Amount		Miles	
	£ : p			
* Subsistence Allowance	:	Normal Mileage	69	Details input onto Payroll system: By: CM Date: 3.8.07
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		Time of		Mode of Travel	Miles Claimed	Dependent Carers Allowance		Fares and other Expenses		Subsistence Allowance	
JULY	Description of Approved Duties, including Locations (From & To)	Departure	Return			£	p	£	p	£	p
2nd	EXECUTIVE	2.30	4.43		3						
2nd	GMWDA PRESENTATION	6.00	9.00		3						
3rd	CHINESE DELEGATION	2.30	5.00		3						
3rd	GOVERNORS MEETING THE ORCHARD	3.30	5.30		5						
9th	TIF MEETINGS	2.30									
	INFORMAL COUNCIL		7.30		3						
10th	EXEC MEMBER CGS	1.30	4.30		3						
11th	FULL COUNCIL	6.30	10.00		3						
16th	SPECIAL FORUM W/ HGH.	6.30	10.00		5						
18	BRIEFING SESSION RE INSPECTION	9.00	11.00		3						
18th	BEMAS	1.30	4.00		4						
19th	CENTRE FOR BLIND COMMITTEE	7.00	10.00		13						
19th	LEADERS & UNMPS	3.30	4.45		3						
23	TIF MEETINGS	1.30									
23	EXEC MEETING				3						
24	LICENSING	1.30	4.30		3						
27	CGS PSD	8.30	10.30		3						
27	THE ORCHARD AT PAVELGOWN HOUSE	1.30	4.30		3						
31	ENVIRO SCOUTING AHEAD MEETING	9.30	11.00		3						
31	MOCK INTERVIEW SESSION FOR INSPECTION	2.30	5.30		3						
					69						
					431			29	74		

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

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

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

BOLTON METROPOLITAN BOROUGH COUNCIL

MEMBERS ALLOWANCES CLAIM

Claim for Month of AUGUST 2007

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:

(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 30/08/07

Approved [REDACTED]

Date _____

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

	Amount		Miles	
	£ : p			
* Subsistence Allowance	:	Normal Mileage	31	Details input onto Payroll system: By: S Cowan Date: month to 1 Sept.
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 AUG.	Particulars of Journeys Description of Approved Duties, including Locations (From & To)	HOME		Mode of Travel	Miles Claimed	Dependent Carers Allowance		Fares and other Expenses		Subsistence Allowance	
		Departure	Time of Return			£	p	£	p	£	p
3rd	LICENSING APPEAL	9.30	11.45		3						
6th	THE EXECUTIVE	2.30	4.00		3						
7th	EXEC MEMBER ENVIRO SERVICES	1.30	3.30		3						
14th	LICENSING COMMITTEE	1.30	4.00		3						
15th	OLDER PEOPLE'S PARTNERSHIP	9.30	12.30		7						
15th	ENVIRO SCOUTING	5.30	8.30		3						
16th	ENVIRO PGD	9.00	11.30		3						
17th	TAXI + PTE HIRE CONSULT. PANEL	9.30	11.30		3						
17th	PERFORMANCE MAN. TRAINING	12.30	4.00		3						
30th	CENTRE FOR BLIND	7.00	9.30		3						
NO S.											
					31						
					@						
					43.1	13	36				

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.

PAID

BOLTON METROPOLITAN BOROUGH COUNCIL

MEMBERS ALLOWANCES CLAIM

Claim for Month of SEPTEMBER 2007

Name of Member COLIN SHAW
(Block capitals please)

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 1/10/07

Approved [REDACTED]

Date _____

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

	Amount £ : p		Miles	
* Subsistence Allowance	:	Normal Mileage	23	Details input onto Payroll system:
Subsistence Allowance <i>(Taxable)</i>	:			By: <u>CM</u>
Travel Reimbursement <i>(e.g. Car Park, taxis)</i>	:			Date: <u>8.10.07</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

BOLTON METROPOLITAN BOROUGH COUNCIL

MEMBERS ALLOWANCES CLAIM

Claim for Month of APRIL 2007

Car (Make / Model) HONDA CIVIC DV

Name of Member CLR JUVIA SILVESTER

Pay No. [REDACTED]

(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 [REDACTED] holding a valid 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 24/5/07

Approved [REDACTED]

Date _____

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

	Amount £ : p	Normal Mileage	Miles	Details input onto Payroll system:
* Subsistence Allowance	:		86.	By: <u>CM</u>
Subsistence Allowance (Taxable)	:			Date: <u>4.6.07</u>
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.

HOME = H WTM = WESTTOWN PLAZA
 [REDACTED] ML - TH

Date	Particulars of Journeys Description of Approved Duties, including Locations (From & To)	Time of		Mode of Travel	Miles Claimed	Dependent Carers Allowance £ p		Fares and other Expenses £ p		Subsistence Allowance £ p	
		Departure	Return			£	p	£	p	£	p
2/4/07	CORP SCRUTINY FROM HOME → TOWN PLAZA	5-00	8-00PM	CAR	7						
4/4/07	H/R SHADOW MEETING (DAVID WINSTANLEY) "	9-30	11-00	CAR	7						
9/4/07	MEMBERS DEV GROUP H → TH	1-30	3-30	CAR	7						
12/4/07	VDWP H → TH	3-30	6-00	CAR	7						
16/4/07	PROSTITUTION FORUM "	9-00	11-30	"	7						
17/4/07	SPECIAL OSC H → TH	9-00	12-00	"	7						
18/4/07	EASTER CELEBS "	12-00	1-00	"	7						
18/4/07	BMAS (STARTING POINT) FROM TH	1-30	4-00	"	3						
	STARTING POINT TO HOME	4-00	/	"	3						
20/4/07	1000 MEETING H → TH	10-30	12-30	"	7						
22/4/07	FUSION EVENT REUBOK H → REUBOK	6-00	11-30	"	4						
24/4/07	H/R EXEC H → TH	9-30	12-00	"	7						
	SLJCC	6-00	10-15	"	7						
25/4/07	COUNCIL										
26/4/07	LOCAL PLANNING MTNG - CHW MOOR RE WTM	5-30	7-30	"	6						
					86						

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.

DL

BOLTON METROPOLITAN BOROUGH COUNCIL

MEMBERS ALLOWANCES CLAIM

Claim for Month of MAY 2007

Name of Member CHRISTINA SILVESTER Pay No. [REDACTED]

(Block capitals please)

Car (Make / Model) HONDA CIVIC DX

Registration No. [REDACTED] Exact Cubic Capacity 1303 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 24/5/07

Approved [REDACTED]

Date _____

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

	Amount £ : p		Miles
* Subsistence Allowance	:	Normal Mileage	42
Subsistence Allowance (Taxable)	:		
Travel Reimbursement (e.g. Car Park, taxis)	:		
Dependent Carer's Allowance	:		

Details input onto Payroll system:

By: CM

Date: 1.6.07

Notes:

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

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

PAID

BOLTON METROPOLITAN BOROUGH COUNCIL

MEMBERS ALLOWANCES CLAIM

Claim for Month of JUNE 2007

Name of Member JULIA SILVESTER Pay No.

Car (Make/Model) HONDA CIVIC DX

Registration No. 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 MEMBER Date 28/07/07

Approved Date _____

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

	Amount £ : p		Miles	
* Subsistence Allowance	:	Normal Mileage	111	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.

T.H = TOWN HALL

Date	Particulars of Journeys Description of Approved Duties, including Locations (From & To)	Home time of		Mode of Travel	Miles Claimed	Dependent Carers Allowance		Fares and other Expenses		Subsistence Allowance	
		Departure	Return			£	p	£	p	£	p
5/6/07	MEETING WITH KEITH DAVIES - T.H	9:00	-	CAR	7						
5/6/07	LAUNCH EMBRACE PROTECT	5:30	8:30	-	7						
6/6/07	MCM TH	5:00	7:30	-	7						
11/6/07	SSTG T.H.	2:30	4:30	-	7						
12/6/07	CONSULT RE HOUSING FUTURES T.H	2:00	4:00	-	7						
13/6/07	CONFERENCE RE THORNWELL WESTH TH	10:30	12:00	-	7						
13/6/07	EXEC H/R TH	2:30	5:00	-	7						
14/6/07	YP POLTRY ARTS LAUNCH OCTAGON	5:00	6:00	-	7						
18/6/07	LAUNCH REFUGEE EXHIB UNITY CENTRE	4:30	7:30	-	7						
19/6/07	JOHN VOLT COMMITTEE WESTH HIGH SCH L	4:30	9:30	-	6						
	(9 FORUM)										
20/6/07	MEETING MEMBER DEV TH	3:00	4:00	-	7						
20/6/07	TIF MEETING CHIEF EXEC TH	5:30	-	-	7						
21/6/07	HEALTH SCRUT AGENDA SETTING	9:00	11:00	-	7						
21/6/07	MEMBER DEV GROUP PLANNING TH	1:00	3:00	-	7						
25/6/07	HEALTH SCRUT TH										
25/6/07	CORP SCRUT TH	5:30	6:30	-	7						
26/6/07	NW EMPLOYERS MEMBERS DEV REVIEW TH	3:00	5:00	-	7						
					111						

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 JULY 20 07

Name of Member JULIA SILVESTER

Pay No. [REDACTED]

Car (Make/Model) HONDA CIVIC DX

(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 31/7/07

Approved [REDACTED]

Date _____

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

	Amount £ : p		Miles	
* Subsistence Allowance	:	Normal Mileage	91.	Details input onto Payroll system: By: <u>CM</u> Date: <u>3.8.07</u>
Subsistence Allowance (Taxable)	:		111	
Travel Reimbursement (e.g. Car Park, taxis)	:		202	
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		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
2/7/07	LCP	WESTM JOHN HOLT	4-00									
		✓ JOHN HOLT STEERING		8-00	CAR	7						
3/7/07	H/R PD G	TH	2-30	4-00	-	7						
9/7/07	INFORMAL COUNCIL	TH	5-30	7-30	-	7						
11/7/07	COUNCIL	TH	6-00	9-00	-	7						
12/7/07	MERE HALL BOARD	MERE HALL	9-30	11-30	-	7						
15/7/07	GENOCIDE MEMORIAL DAY	TH	7-30	3-30	-	7						
	(SHADOW PORTFOLIO HOLDER)											
16/7/07	CH & S COMM	TH	1-30									
	SLICC	TH		5-00	-	7						
18/7/07	MEETING JON GORTON	TH	11-30	12-00	-	7						
18/7/07	H & W B P	TH	12-30	2-00	-	-						
19/7/07	T P STEERING GROUP	PAD HSE	10-00	12-00	-	7						
24/7/07	HEALTH SCRUTINY	TH	9-00	11-30	-	7						
25/7/07	MEMBER DEV TRAINING	TH	12-30	3-30	-	7						
30/7/07	PROSTITUTION FORUM EVENT/MEETING	TH	10-30	-	-	7						
31/7/07	MEMBER DEV TRAINING	TH	9-30	-	-	7						
						91						

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

Name of Member JULIA SILVESTER

Pay No. [REDACTED]

Car (Make/Model) VW POLO SC 55

(Block capitals please)
Registration No. [REDACTED]

Exact Cubic Capacity 1200 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 29/08/07

Approved [REDACTED]

Date _____

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

	Amount		Miles	
	£ : p			
* Subsistence Allowance	:	Normal Mileage	49	Details input onto Payroll system:
Subsistence Allowance (Taxable)	:			By: S Cowson
Travel Reimbursement (e.g. Car Park, taxis)	:			Date: month 6
Dependent Carer's Allowance	:			

Notes:

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

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

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

Date	Particulars of [Redacted]		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
13/8/07	JOHN HOLT STEERING LCP	JOHN HOLT n	4-00 6-30	6-00 8-30	CAR -	7						
15/8/07	H/R PDG H/R EXEC	TOWN HALL	12-30	4-00	-	6						
16/8/07	MOM FORUM		5-00	7-00	-	6						
20/8/07	VDWP		3-00	4-30	-	6						
20/8/07	CORP SCRUTINY		5-45	7-30	-	6						
22/8/07	ICOCO (DAVID WINSTANLEY)		3-00	4-30	-	6						
22/8/07	SCRUTINY TRAINING		5-45	8-00	-	6						
24/8/07	STANDARDS TRAINING OF COUNCIL		4-00	6-00	-	6						
						409						

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

Bolton Council

Name Councillor Julia Silvester	Home Address [REDACTED]	Pay No. [REDACTED]
Car Make/Model VW Polo SC55	Registration [REDACTED]	Exact CC 1200
	Month OCT	2007

I certify that:-

- (a) *(For Car Allowance claims only)* I have actually and necessarily incurred the mileage claimed in accordance with the Council's scheme of Motor Car Allowances.
- (b) *(For Car Allowance claims only)* I am the holder of a full, current and valid driving licence and MOT certificate (where applicable), and I have complied with the Council's insurance requirements with regard to the use of my car on Council business.
- (c) *(For Car Allowance claims only)* I will retain VAT receipts covering all journeys for six years in order to comply with HMRC regulations.
- (d) I have actually and necessarily incurred expenditure in travelling and subsistence for the purpose of enabling me to perform duties as a Member of Bolton Council, I have actually paid the fares and made other payments shown on this form, and that all amounts claimed are strictly in accordance with the rates determined by Bolton Council.
- (e) Except as shown, I have not made, and will not make, any claim under any enactment for travelling or subsistence expenses or allowances, or financial loss allowance or attendance allowance in connection with the duties indicated on this form.
- (f) The particulars inserted on this form are correct, and I understand that fraudulent claims may result in disciplinary action.

FOR MEMBERS' SERVICES USE ONLY

Signed [REDACTED] Member Date 30/12/07

I certify that I have examined this allowance sheet, the figures recorded are reasonable, and the expense was necessary.

Authorised [REDACTED] Members' Services Date _____

Subsistence T		Total Miles	
Subsistence NT		For Payroll Use Only	
Expenses NT			
Carer's Allowance			
		Date	

Date	Reason for Journey (including From and To)	Time of Departure	Return	Miles Claimed	Subsistence Allowance	Fares and Other Expenses	Dependent Carers Allowance
11/10/07	JOHN HOLT STEERING HOME TO WESTH PLCP	4-00	8-00	7	£ p	£ p	£ p
3/10/07	REVIEW AREA WORKING HOME TO T.HALL	5-00	6-30	7	£ p	£ p	£ p
4/10/07	PCT MEETING HOME " "	1-30	5-30	7	£ p	£ p	£ p
4/10/07	HOUSING "BIG ISSUES" HOME " "	4-45	6-30	7	£ p	£ p	£ p
11/10/07	WESTH MARKET MEETING HOME TO WESTH	8-30	10-00	7	£ p	£ p	£ p
15/10/07	CORP ISSUES SCRUT " TOT4.	5-30	7-15	7	£ p	£ p	£ p
18/10/07	CON (CASIAN) HOME TO TH	5-00	6-30	7	£ p	£ p	£ p
24/10/07	COUNCIL " " "	6-00	9-30	7	£ p	£ p	£ p
25/10/07	KID CLUBS LIB DEM REP " B D'S	10-30	2-30	6	£ p	£ p	£ p
25/10/07	MDM - FORUM HOME TO TH	5-00	7-00	7	£ p	£ p	£ p
26/10/07	BAA AWARDS (LIB DEM REP) HOME TO	7-00	11-00	7	£ p	£ p	£ p
31/10/07	MEMBER DEV GROUP EXECUTIVE TH.	12-30	3-30	7	Total Miles		
	Please only enter the number of miles. Do not calculate an amount for payment.			83	Total Amount	Total Amount	Total Amount
					£ p	£ p	£ p

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

Number of Additional Sheets Used NIL

BOLTON MBC
 11 JAN 2008
 PAYROLL SECTION

Bolton Council

Members' Allowances Claim

Name Councillor Julia Silvester	Home Address	Pay No.
Car Make/Model VW Polo SC55	Registration	Exact CC 1200
Month		NOV 2007

I certify that:-

- (For Car Allowance claims only) I have actually and necessarily incurred the mileage claimed in accordance with the Council's scheme of Motor Car Allowances.
- (For Car Allowance claims only) I am the holder of a full, current and valid driving licence and MOT certificate (where applicable), and I have complied with the Council's insurance requirements with regard to the use of my car on Council business.
- (For Car Allowance claims only) I will retain VAT receipts covering all journeys for six years in order to comply with HMRC regulations.
- I have actually and necessarily incurred expenditure in travelling and subsistence for the purpose of enabling me to perform duties as a Member of Bolton Council, I have actually paid the fares and made other payments shown on this form, and that all amounts claimed are strictly in accordance with the rates determined by Bolton Council.
- Except as shown, I have not made, and will not make, any claim under any enactment for travelling or subsistence expenses or allowances, or financial loss allowance or attendance allowance in connection with the duties indicated on this form.
- The particulars inserted on this form are correct, and I understand that fraudulent claims may result in disciplinary action.

FOR MEMBERS' SERVICES USE ONLY

Subsistence T	Total Miles	217
Subsistence NT	For Payroll Use Only	
Expenses NT		
Carer's Allowance	Input by	CM
		Date
		28.1.08

Signed	Member	Date 30/12/07
I certify that I have examined this allowance sheet, the figures recorded are reasonable, and the expense was necessary.		
Authorised	Members' Services	Date

Date	Reason for Journey (including From and To)	FROM HOME	Departure	Return	Miles Claimed
6/11/07	HEALTH SCRVT	TOWN HALL	9-00		
	YOUNGAGE SH SCRVT			3-00	7
15/11/07	DIWAZI CLIB DEM REP)	30'S	11-00	1-30	6
15/11/07	BRÉC		6-00	8-00	7
16/11/07	MERIE HALL	MERIE HALL	9-30	11-00	7
16/11/07	CARERS CONSULTATION	JUBILEE	12-30	2-00	7
17/11/07	APNA AWARDS	REDBOK	7-00	11-00	6
18/11/07	XMAS SWITCH ON	T.H.	4-00	7-00	7
19/11/07	JOHN HOLT STEERING	WESTH.	3-30	6-30	7
20/11/07	S. HARRIS CITY REGION S	T.H.	5-30	7-00	7
28/11/07	MEMBER DEV YH/REXÉC	T.H.	12-30	3-30	7
28/11/07	FIRE AWARDS PRINCES TRUST	TH.	6-45	9-30	7

Subsistence Allowance	Fares and Other Expenses	Dependent Carers Allowance
£ p	£ p	£ p
£ p	£ p	£ p
£ p	£ p	£ p
£ p	£ p	£ p
£ p	£ p	£ p
£ p	£ p	£ p
£ p	£ p	£ p
£ p	£ p	£ p
£ p	£ p	£ p
£ p	£ p	£ p
£ p	£ p	£ p
£ p	£ p	£ p
£ p	£ p	£ p
£ p	£ p	£ p

Total Miles	Total Amount	Total Amount	Total Amount
74	£ p	£ p	£ p

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

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

Number of Additional Sheets Used

PAID

Members' Allowances Claim

Bolton Council

Name Councillor Julia Silvester	Home Address [REDACTED]	Pay No. [REDACTED]
Car Make/Model VW Polo SC55	Registration [REDACTED]	Exact CC 1200 Month DEC 2007

I certify that:-

- (a) (For Car Allowance claims only) I have actually and necessarily incurred the mileage claimed in accordance with the Council's scheme of Motor Car Allowances.
- (b) (For Car Allowance claims only) I am the holder of a full, current and valid driving licence and MOT certificate (where applicable), and I have complied with the Council's insurance requirements with regard to the use of my car on Council business.
- (c) (For Car Allowance claims only) I will retain VAT receipts covering all journeys for six years in order to comply with HMRC regulations.
- (d) I have actually and necessarily incurred expenditure in travelling and subsistence for the purpose of enabling me to perform duties as a Member of Bolton Council, I have actually paid the fares and made other payments shown on this form, and that all amounts claimed are strictly in accordance with the rates determined by Bolton Council.
- (e) Except as shown, I have not made, and will not make, any claim under any enactment for travelling or subsistence expenses or allowances, or financial loss allowance or attendance allowance in connection with the duties indicated on this form.
- (f) The particulars inserted on this form are correct, and I understand that fraudulent claims may result in disciplinary action.

FOR MEMBERS' SERVICES USE ONLY

Signed [REDACTED] Member	Date 30/12/07
Authorised [REDACTED] Members' Services	Date

Subsistence T	Total Miles
Subsistence NT	For Payroll Use Only
Expenses NT	Input by
Carer's Allowance	Date

Date	Reason for Journey (including From and To)	Time of		Miles Claimed
		Departure	Return	
3/12/07	BRH FROM HOME TO TOWN HALL (PRE PHOTO SHOOT MEMBER DEV)	12:00	4:00	7
3/12/07	CORPORATE SCRUTINY	5:30	7:00	7
5/12/07	OLDER PPL P BOARD FR MTING HSE	9:30	11:30	7
5/12/07	INT DAY DISABLED EXCEL C	1:30	3:30	7
6/12/07	RESIDENTS GROUP (WAFRA) WESTH	1:00	4:00	7
6/12/07	WESTH SPATIAL STRAT W. HIGH SCHL	6:30	9:00	6
10/12/07	LATOKER CP STET	11:30	1:00	7
11/12/07	TOWN HOLT STEERING JOHN HOLT	3:30	6:00	7
12/12/07	COUNCIL T.H.	6:00	10:00	7
13/12/07	ETUNIC UNEMPLOY SOMENAR TH	2:00	2:30	7
14/12/07	100CO MEETING (REPORT) TH	3:30	5:00	7
18/12/07	EXEC HIR TH	7:30	2:30	7
19/12/07	BMAS CASTLE HILL	1:00	3:00	7

Subsistence Allowance		Fares and Other Expenses		Dependent Carers Allowance	
£	p	£	p	£	p
£	p	£	p	£	p
£	p	£	p	£	p
£	p	£	p	£	p
£	p	£	p	£	p
£	p	£	p	£	p
£	p	£	p	£	p
£	p	£	p	£	p
£	p	£	p	£	p
£	p	£	p	£	p
£	p	£	p	£	p
£	p	£	p	£	p
£	p	£	p	£	p
£	p	£	p	£	p
£	p	£	p	£	p
£	p	£	p	£	p
£	p	£	p	£	p
£	p	£	p	£	p
Total Amount		Total Amount		Total Amount	
£	p	£	p	£	p

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

Total Miles 90

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

Number of Additional Sheets Used

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

12.10.2007 Payroll Share Service Centre, 5th Floor, Paderborn House, Bolton BL1 1JW

WALSH A

PAID

BOLTON METROPOLITAN BOROUGH COUNCIL

MEMBERS ALLOWANCES CLAIM

Claim for Month of April 2007 Name of Member CLLR. ALAN J. WALSH Pay No. [REDACTED]
 (Block capitals please)
 Car (Make / Model) SHODA Registration No. [REDACTED] Exact Cubic Capacity 1390 cc.
 Home Address S REYNOLDS CLOSE BL51HD

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] 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 MAY 07
 Approved [REDACTED] Date _____

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

	Amount £ : p		Miles	
* Subsistence Allowance	:	Normal Mileage	56	Details input onto Payroll system:
Subsistence Allowance (Taxable)	13 : 54			By: CM
Travel Reimbursement (e.g. Car Park, taxis)	+ 6 : 77			Date: 30.5.07
Dependent Carer's Allowance	20 : 31			

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		
3	Forum Chairs & V. Chairs	4:40 PM		CAR	7								
4	EMVRO SCRUTINY	6:00 PM		-	7								6.77
5	P&H - SITE VISITS COMMITTEE	9:40 AM	4:30 PM	-	7								6.47
19	P&H - SITE VISITS COMMITTEE	9:00 AM	4:30 PM	-	7								
19	SPOUSE RECEPTION	7:00 PM		-	7								
23	INFORMAL COUNCIL	4:45 PM		-	7								
24	SINGLE LOCAL SOLID C.C	11:00 AM		-	7								
25	COUNCIL	7:00 PM		-	7								
								BOLTON WRO					
								8 MAY 2007					
								PENSIONS SECT					
						56.00	40.27					13.54	

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

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

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

10/10/07

BOLTON METROPOLITAN BOROUGH COUNCIL

MEMBERS ALLOWANCES CLAIM

Claim for Month of MAY 20 07

Name of Member Cllr. ALAN J. WALSH Pay No. [REDACTED]

(Block capitals please)

Car (Make / Model) SKODA - FABIA

Registration No. [REDACTED]

Exact Cubic Capacity 1390 cc.

Home Address S REYNOLDS CLOSE BL51HD

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 1/7/07

Approved [REDACTED]

Date _____

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

	Amount £ : p		Miles	
* Subsistence Allowance	:	Normal Mileage	56	Details input onto Payroll system: By: <u>CM</u> Date: <u>24.7.07</u>
Subsistence Allowance (Taxable)	13 : 54		+ 20	
Travel Reimbursement (e.g. Car Park, taxis)	+ 13 : 54		76	
Dependent Carer's Allowance	27 : 08			

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

BOLTON METROPOLITAN BOROUGH COUNCIL

MEMBERS ALLOWANCES CLAIM

Claim for Month of June 2007 Name of Member CLERK ALAN J WALSH Pay No. [REDACTED]
 (Block capitals please)
 Car (Make / Model) SHODA - FABIA Registration No. [REDACTED] Exact Cubic Capacity 1390 cc.
 Home Address S REYNOLDS CLOSE BL51HD

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

Signed [REDACTED] MEMBER Date 1/7/07
 Approved [REDACTED] Date _____

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

	Amount £ : p		Miles	
* Subsistence Allowance	:	Normal Mileage	20	Details input onto Payroll system: By: Date:
Subsistence Allowance (Taxable)	13 : 56			
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.

PAIC

BOLTON METROPOLITAN BOROUGH COUNCIL

MEMBERS ALLOWANCES CLAIM

Claim for Month of July 2007 Name of Member CLL. ALAN J. WALSH Pay No. [REDACTED]

Car (Make / Model) SHODA Registration No. [REDACTED] Exact Cubic Capacity 1390 cc.

Home Address S REYNOLDS CLOSE BL51HD

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

Signed [REDACTED] MEMBER Date 13/9/07

Approved [REDACTED] Date _____

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

	Amount £ : p		Miles	
* Subsistence Allowance	:	Normal Mileage	119.	Details input onto Payroll system:
Subsistence Allowance (Taxable)	13 : 56			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
2	DEV8 REGION SCRUTINY	5:30pm		CAR	7						
7	TOWN TWINNING - REBOY	9:30		-	7						
9	INFORMAL COUNCIL	4:40		-	7						
11	P&M - SITE VISITS	10:30		-	7						
11	FULL COUNCIL	7:00pm		-	7						
15	TRAINING @ CASTLE HILL	1:00pm		-	7						
16	S. L. S. C. C	3:30pm		-	7						
18	AREA WORKING P.D.S	10:30		-	7						
19	FORUM @ ST. ANDREWS	7:00pm		-	7						
23	HOUSING P.D.S	9:00		-	7						
24	DOFFCOCHER LODGE L.M.R.	7:00pm		-	7						
25	MEMBERS ONLY (M L M FORUM)	10:00		-	7						6 77
26	P&M - SITE VISITS & COMMITTEE	9:00	5:00	-	7						6 77
12	P&M - SITE VISITS & COMMITTEE	9:00	5:00pm	-	7						
27	CLEANER, GREENS, SAFER P.D.S	9:00		-	7						
30	D&R. SCRUTINY - AGENDA	6:00pm		-	7						
30	BO M. MONITORING	4:00pm		-	7						
					119						
					0						
					43.11						
					51.29						13 54

P
to 119.

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 authori on.

PAID

BOLTON METROPOLITAN BOROUGH COUNCIL

MEMBERS ALLOWANCES CLAIM

Claim for Month of AUGUST 20 07 Name of Member CLLR. ALAN J. WALSH Pay No. [REDACTED]

Car (Make / Model) SHODA Registration No. [REDACTED] Exact Cubic Capacity 1390 cc.

Home Address S REYNOLDS CLOSE BL51HD

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

Signed [REDACTED] MEMBER Date 13/9/07

Approved [REDACTED] Date _____

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

	Amount £ : p		Miles	
* Subsistence Allowance	13 : 54	Normal Mileage	105	Details input onto Payroll system:
Subsistence Allowance (Taxable)	6 : 77		119	
Travel Reimbursement (e.g. Car Park, taxis)	20 : 31		824	By: <u>CM</u>
Dependent Carer's Allowance	:			Date: <u>26.9.07</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.

43.1P/R

LWJGR
6.77

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
2.	COTACRE DEVELOPMENT (LOYALS)	2.00PM		CAR	7						
7.	P&M - SITE VISITS	9.00		-	7						
8	P&M - PRESENTATION (A)	1.00PM		-	7						
9	P&M - SITE VISITS & COMMITTEE	9.00	5.00	-	7						6.77
13	D&R - SCRUTINY	6.00PM		-	7						
14	FORUM CHAIRS - MOCA FOCUS	2.00PM		-	7						
16	ENVIRONMENT & G.S. P.D.S	9.30		-	7						
16	ARBA WORKING @ OCTAGON	1.00PM		-	7						
16	FAIRNESS - TRAINING	4.00PM		-	7						
20	CHAIRS & V. CHAIRS (ARTIL)	10.00		-	7						
22	HATTON, LOOSTOCK & MILTON. Forum	6.30PM		-	7						
23	P&M - COMMITTEE	2.00PM		-	7						
29	FULL COUNCIL	7.00PM		-	7						
30	E.P.A. BRIEFING (RM 209)	5.00PM		-	7						
31	TRAINING - PERFORMANCE APPRAISAL	10.00		-	7						
					105						
					0						
					43.1P						
					45.26						6.77

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.

105.

BOLTON METROPOLITAN BOROUGH COUNCIL

MEMBERS ALLOWANCES CLAIM

PAID

Claim for Month of Sept 2007 Name of Member CLLR. ALAN J. WALSH Pay No. [REDACTED]
 (Block capitals please)
 Car (Make/Model) SHODA Registration No. [REDACTED] Exact Cubic Capacity 1390 cc.
 Home Address 5 REYNOLDS CLOSE BL51HD

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.

Signed [REDACTED] MEMBER Date 22.10.07
 Approved [REDACTED] Date _____

BOLTON COUNCIL
 29 OCT 2007
 (For Car Allowance claimants only)
 PAYROLL SHARED
 SERVICE CENTRE

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

	Amount £ : p		Miles	
* Subsistence Allowance	:	Normal Mileage	49.	Details input onto Payroll system: By: <u>CM</u> Date: <u>30.10.07</u>
Subsistence Allowance <i>(Taxable)</i>	6 : 77.			
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 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
10	HOUSING P.D.S.	8.30	11.30	CAR	7						
10	ALLOCATIONS POLICY	5.30pm	8.00pm	-	7						
18	AREA WORKING P.D.S.	9.30	11.30	-	7						
20	PLANNING & HIGHWAYS SITE VISITS COMMITTEE	8.45	4.30pm	-	7						6.74
24	D&R SCRUTINY - AGENDA	5.30pm	8.00pm	-	7						
25	AREA WORKING - WORKSHOP	1.30pm	3.30pm	-	7						
27	SINGLE LOCAL J.E.C	2.30pm	5.00pm	-	7						
					49						
					490						
					431P						
					21-12						6.74

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

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

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

Members' Allowances Claim

Bolton Council

PAID

Name ALAN S. WALSH	Home Address REYNOLDS CLOSE BL5 1HD	Pay No. [REDACTED]
Car Make/Model SKODA FABIA	Registration [REDACTED]	Exact CC 1400
Month OCT		2007

I certify that:-

- (a) *(For Car Allowance claims only)* I have actually and necessarily incurred the mileage claimed in accordance with the Council's scheme of Motor Car Allowances.
- (b) *(For Car Allowance claims only)* I am the holder of a full, current and valid driving licence and MOT certificate (where applicable), and I have complied with the Council's insurance requirements with regard to the use of my car on Council business.
- (c) *(For Car Allowance claims only)* I will retain VAT receipts covering all journeys for six years in order to comply with HMRC regulations.
- (d) I have actually and necessarily incurred expenditure in travelling and subsistence for the purpose of enabling me to perform duties as a Member of Bolton Council, I have actually paid the fares and made other payments shown on this form, and that all amounts claimed are strictly in accordance with the rates determined by Bolton Council.
- (e) Except as shown, I have not made, and will not make, any claim under any enactment for travelling or subsistence expenses or allowances, or financial loss allowance or attendance allowance in connection with the duties indicated on this form.
- (f) The particulars inserted on this form are correct, and I understand that fraudulent claims may result in disciplinary action.

FOR MEMBERS' SERVICES USE ONLY

Signed [REDACTED] Member	Date 21/11/07
I certify that I have examined this allowance sheet, the figures recorded are reasonable, and the expense was necessary.	
Authorised [REDACTED] Members' Services	Date

Subsistence T		Total Miles	84
Subsistence NT	13.54	For Payroll Use Only	
Expenses NT		Input by	CM
Carer's Allowance		Date	30.11.07

Date	Reason for Journey (including From and To)	Time of		Miles Claimed
		Departure	Return	
3	CLEANER, GREENER, SAFER	8.30		7
3	DIFFERENTIAL LODGE L.N.R	5.30PM		7
4	PLANNING & HIGHWAYS	9.00	4.30PM	7
8	HOUSING P.D.G. / ROYAL P.D.S	1.30PM		7
8	DEV & REGEN SURV	6.00PM		7
16	DIXON GREEN & RIDGOT CHARITY	4.00PM		7
17	MEMBERS ONLY.	9.30		7
17	PSM - RE MANOR COURT	1.00PM		7
18	PSM	9.00	4.30PM	7
24	FULL COUNCIL	6.30PM		7
25	CUTACRE MISSION COMM	6.00PM		7
31	PSM - SITE VISITS	10.00		7

Subsistence Allowance	Fares and Other Expenses	Dependent Carers Allowance
£ p	£ p	£ p
£ p	£ p	£ p
£ 6.77 p	£ p	£ p
£ p	£ p	£ p
£ p	£ p	£ p
£ p	£ p	£ p
£ p	£ p	£ p
£ p	£ p	£ p
£ p	£ p	£ p
£ p	£ p	£ p
£ 6.77 p	£ p	£ p
£ p	£ p	£ p
£ p	£ p	£ p
£ p	£ p	£ p

Total Miles	Total Amount	Total Amount	Total Amount
84	£ 13.54 p	£ p	£ p

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

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

Number of Additional Sheets Used **0**

PAY-M1
12.10.2007

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

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

Members' Allowances Claim

BOLTON METRO

Bolton Council

Name	A. S. WALSH	Home Address	5 REYNOLDS CLOSE	Pay No.	
Car Make/Model	SUZUKI FABIA	Registration		Exact CC	1400
		Month	Nov	2007	

I certify that:-

(a) (For Car Allowance claims only) I have actually and necessarily incurred the mileage claimed in accordance with the Council's scheme of Motor Car Allowances.

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

(c) (For Car Allowance claims only) I will retain VAT receipts covering all journeys for six years in order to comply with HMRC regulations.

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

(e) Except as shown, I have not made, and will not make, any claim under any enactment for travelling or subsistence expenses or allowances, or financial loss allowance or attendance allowance in connection with the duties indicated on this form.

(f) The particulars inserted on this form are correct, and I understand that fraudulent claims may result in disciplinary action.

FOR MEMBERS' SERVICES USE ONLY

Subsistence T	20.31	Total Miles	84
Subsistence NT		For Payroll Use Only	
Expenses NT			
Carer's Allowance			
		Input by	CM
		Date	31.12.07

Signed	[Signature]	Member	Date	15/12/07
I certify that I have examined this allowance sheet, the figures recorded are reasonable, and the expense was necessary.				
Authorised	[Signature]	Members' Services	Date	

Date	Reason for Journey (including From and To)	Time of		Miles Claimed
		Departure	Return	
1	PLANNING & HIGHWAYS - SITE VISITS - COX HILL	9:00	4:30 PM	7
5	HOUSING P.D.G & FORUM CHAIRS & VIEW	8:30	12:00	7
6	AREA WORKING P.D.G.	10:30	12:00	7
7	H, L & H FORUM	6:30 PM	9:30 PM	7
8	CLEANER GREENER P.D.S	8:30	10:00	7
11	REMOVAL SERVICE	10:40		7
12	HOUSING P.D.G	2:00 PM		7
15	PLANNING & HIGHWAYS - SITE VISITS - COX HILL	9:30	4:30 PM	7
26	HOUSING P.D.G	9:00	11:00	7
26	DEV & REGEN SCRUTINY	5:30 PM	7:00 PM	7
28	WEB - REMOTE ACCESS + EXECUTIVE	12:00	3:30 PM	7
29	PLANNING & HIGHWAYS	9:00	4:30 PM	7

Subsistence Allowance	Fares and Other Expenses	Dependent Carers Allowance
£ 6.77 p	£ p	£ p
£ p	£ p	£ p
£ p	£ p	£ p
£ p	£ p	£ p
£ p	£ p	£ p
£ p	£ p	£ p
£ p	£ p	£ p
£ p	£ p	£ p
£ p	£ p	£ p
£ p	£ p	£ p
£ p	£ p	£ p
£ p	£ p	£ p
£ 6.77 p	£ p	£ p

Total Miles	84	Total Amount	£ 20.31 p	Total Amount	£ NIL p	Total Amount	£ NIL p
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Please only enter the number of miles. Do not calculate an amount for payment.

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

Number of Additional Sheets Used: NIL

PAY-M1
12.10.2007

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

Members' Allowances Claim

BOLTON MBC
11 JAN 2008
PAYROLL SECTION
Bolton Council

Name	ALAN S. WALSH	Home Address	5 REYNOLDS CLOSE BL51AD	Pay No.	
Car Make/Model	SKODA FABIA	Registration		Exact CC	1398
				Month	DEC 2007

I certify that:-

- (a) (For Car Allowance claims only) I have actually and necessarily incurred the mileage claimed in accordance with the Council's scheme of Motor Car Allowances.
- (b) (For Car Allowance claims only) I am the holder of a full, current and valid driving licence and MOT certificate (where applicable), and I have complied with the Council's insurance requirements with regard to the use of my car on Council business.
- (c) (For Car Allowance claims only) I will retain VAT receipts covering all journeys for six years in order to comply with HMRC regulations.
- (d) I have actually and necessarily incurred expenditure in travelling and subsistence for the purpose of enabling me to perform duties as a Member of Bolton Council, I have actually paid the fares and made other payments shown on this form, and that all amounts claimed are strictly in accordance with the rates determined by Bolton Council.
- (e) Except as shown, I have not made, and will not make, any claim under any enactment for travelling or subsistence expenses or allowances, or financial loss allowance or attendance allowance in connection with the duties indicated on this form.
- (f) The particulars inserted on this form are correct, and I understand that fraudulent claims may result in disciplinary action.

FOR MEMBERS' SERVICES USE ONLY

Subsistence T	6.77	Total Miles	56
Subsistence NT		For Payroll Use Only	
Expenses NT			
Carer's Allowance			
		Input by	
		Date	

Signed		Member	Date	2/1/08
I certify that I have examined this allowance sheet, the figures recorded are reasonable, and the expense was necessary.				
Authorised		Members' Services	Date	

Date	Reason for Journey (including From and To)	Time of		Miles Claimed
		Departure	Return	
3	HOUSING P.D.S	8:00		7
3	CORPORATE ISSUES - SCRUTINY	5:30PM		7
11	VISION COM FRENCH	8:30		7
12	PLAN & HIGHWAYS SITE VISITS	8:30		7
12	FULL COUNCIL	6:30PM		7
13	PLANNING & HIGHWAYS SITE VISITS COMMITTEE	9:30	4:30PM	7
17	EFFECTIVE SURGRIES	5:30PM		7
18	DOFFCOCKER LODGE PICTURE FOR RSPD	1:45PM		7

Subsistence Allowance	Fares and Other Expenses	Dependent Carers Allowance
£ p	£ p	£ p
£ p	£ p	£ p
£ p	£ p	£ p
£ p	£ p	£ p
£ p	£ p	£ p
£ 6.77 p	£ p	£ p
£ p	£ p	£ p
£ p	£ p	£ p
£ p	£ p	£ p
£ p	£ p	£ p
£ p	£ p	£ p
£ p	£ p	£ p
£ p	£ p	£ p

Total Miles	Total Amount	Total Amount	Total Amount
56	£ 6.77 p	£ p	£ p

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

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

Number of Additional Sheets Used MILE

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

12.10.2007 Payroll Shared Service Centre, 5th Floor, Paderborn House, Bc 1 BL1 1JW

Members' Allowances Claim

26 FEB 2008

Bolton Council

Name	ALAN S. WALSH	Home Address	5 REYNOLDS CLOSE	Pay No.	[REDACTED]
Car Make/Model	SKODA FABIA	Registration	[REDACTED]	Exact CC	1400
				Month	JAN. 2008

- I certify that:-
- (a) (For Car Allowance claims only) I have actually and necessarily incurred the mileage claimed in accordance with the Council's scheme of Motor Car Allowances.
- (b) (For Car Allowance claims only) I am the holder of a full, current and valid driving licence and MOT certificate (where applicable), and I have complied with the Council's insurance requirements with regard to the use of my car on Council business.
- (c) (For Car Allowance claims only) I will retain VAT receipts covering all journeys for six years in order to comply with HMRC regulations.
- (d) I have actually and necessarily incurred expenditure in travelling and subsistence for the purpose of enabling me to perform duties as a Member of Bolton Council, I have actually paid the fares and made other payments shown on this form, and that all amounts claimed are strictly in accordance with the rates determined by Bolton Council.
- (e) Except as shown, I have not made, and will not make, any claim under any enactment for travelling or subsistence expenses or allowances, or financial loss allowance or attendance allowance in connection with the duties indicated on this form.
- (f) The particulars inserted on this form are correct, and I understand that fraudulent claims may result in disciplinary action.

FOR MEMBERS' SERVICES USE ONLY

Subsistence T	6.77	Total Miles	63
Subsistence NT		For Payroll Use Only	
Expenses NT		Input by	CM
Carer's Allowance		Date	33.08

Signed _____ Member Date 20/2/08

I certify that I have examined this allowance sheet, the figures recorded are reasonable, and the expense was necessary.

Authorised _____ Members' Services Date

Date	FROM HOME Reason for Journey (including From and To)	Time of		Miles Claimed
		Departure	Return	
8	CLEANER GREENDALE SAFER RDG	3.30PM		7
10	PLANNING & HIGHWAYS SITE VISITS COMMITTEE	8.45	4.30PM	7
14	HOUSING P.D.G	3.00PM		7
15	VAL CLOYMES / FORUM PRE MEET	11.00		7
16	AREA WORKING P.D.G	8.30		7
16	SINGLE LOCAL SOIR E.C	1.00PM		7
26	INFORMAL COUNCIL	5.00PM		7
16	MEETINGS, LOG BOOK, HUTTON FORUM	7.00PM		7
22	JOINT ENVIRONMENT & C.C.S. P.D.G	12.30		7

Subsistence Allowance	Fares and Other Expenses	Dependent Carers Allowance
£ p	£ p	£ p
£ 6.77 p	£ p	£ p
£ p	£ p	£ p
£ p	£ p	£ p
£ p	£ p	£ p
£ p	£ p	£ p
£ p	£ p	£ p
£ p	£ p	£ p
£ p	£ p	£ p
£ p	£ p	£ p
£ p	£ p	£ p
£ p	£ p	£ p
£ p	£ p	£ p
£ p	£ p	£ p
£ p	£ p	£ p
£ p	£ p	£ p
Total Amount	Total Amount	Total Amount
£ 6.77 p	£ p	£ p

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

Total Miles 63

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

Number of Additional Sheets Used NIL

Members' Allowances Claim

Bolton Council

Name	<i>ALAN S. WALSH</i>	Home Address	<i>5 REYNOLDS CLOSE BL5 1MD</i>	Pay No.	
Car Make/Model	<i>SADDA FABIA</i>	Registration		Exact CC	<i>1399</i>
				Month	<i>FEB 2008</i>

I certify that:-

- (a) **(For Car Allowance claims only)** I have actually and necessarily incurred the mileage claimed in accordance with the Council's scheme of Motor Car Allowances.
- (b) **(For Car Allowance claims only)** I am the holder of a full, current and valid driving licence and MOT certificate (where applicable), and I have complied with the Council's insurance requirements with regard to the use of my car on Council business.
- (c) **(For Car Allowance claims only)** I will retain VAT receipts covering all journeys for six years in order to comply with HMRC regulations.
- (d) I have actually and necessarily incurred expenditure in travelling and subsistence for the purpose of enabling me to perform duties as a Member of Bolton Council, I have actually paid the fares and made other payments shown on this form, and that all amounts claimed are strictly in accordance with the rates determined by Bolton Council.
- (e) Except as shown, I have not made, and will not make, any claim under any enactment for travelling or subsistence expenses or allowances, or financial loss allowance or attendance allowance in connection with the duties indicated on this form.
- (f) The particulars inserted on this form are correct, and I understand that fraudulent claims may result in disciplinary action.

FOR MEMBERS' SERVICES USE ONLY

Subsistence T	<i>13.54</i>	Total Miles	<i>49</i>
Subsistence NT		For Payroll Use Only	
Expenses NT		Input by	<i>CM</i>
Carer's Allowance		Date	<i>3.4.08</i>

Signed Member Date *16-3-08*

I certify that I have examined this allowance sheet, the figures recorded are reasonable, and the expense was necessary.

Authorised Members' Services Date

Date	Reason for Journey (including From and To)	Time of		Miles Claimed	Subsistence	Fares and	Dependent
		Departure	Return		Allowance	Other Expenses	Carers Allowance
<i>6</i>	<i>P&H - SITE VISIT</i>	<i>1-00PM</i>		<i>7</i>	£ p	£ p	£ p
<i>7</i>	<i>P&H - SITE VISIT^s COMMITTEE</i>	<i>9-00</i>	<i>4-30PM</i>	<i>7</i>	£ <i>6.77</i> p	£ p	£ p
<i>20</i>	<i>AREA WORKING P.D.G</i>	<i>9-30</i>		<i>7</i>	£ p	£ p	£ p
<i>20</i>	<i>COUNCIL</i>	<i>6-30PM</i>		<i>7</i>	£ p	£ p	£ p
<i>21</i>	<i>P&H - SITE VISIT^s COMMITTEE</i>	<i>9-00</i>	<i>4-30PM</i>	<i>7</i>	£ <i>6.77</i> p	£ p	£ p
<i>27</i>	<i>PRE MEETING - FORUM (VIR CLOYMER)</i>	<i>2-00PM</i>		<i>7</i>	£ p	£ p	£ p
<i>27</i>	<i>COUNCIL</i>	<i>6-30PM</i>		<i>7</i>	£ p	£ p	£ p
					£ p	£ p	£ p
					£ p	£ p	£ p
					£ p	£ p	£ p
					£ p	£ p	£ p
					£ p	£ p	£ p
					£ p	£ p	£ p
					£ p	£ p	£ p
					£ p	£ p	£ p
					£ p	£ p	£ p
Total Miles				<i>49</i>	Total Amount	Total Amount	Total Amount
					£ <i>13.54</i> p	£ p	£ p

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

Expenses
paid taxable
as no receipt is
available.

Members' Allowances Claim

21 APR 2008

Bolton Council

PENSIONS SECTION

WALSH	Home Address	5 REYNOLDS CLOSE BL5 1HD	Pay No.	
FABIA	Registration		Exact CC	1399
			Month	MARCH 2008

I certify that:-
 (a) (For Car Allowance claims only) I have actually and necessarily incurred the mileage claimed in accordance with the Council's scheme of Motor Car Allowances.
 (b) (For Car Allowance claims only) I am the holder of a full, current and valid driving licence and MOT certificate (where applicable), and I have complied with the Council's insurance requirements with regard to the use of my car on Council business.
 (c) (For Car Allowance claims only) I will retain VAT receipts covering all journeys for six years in order to comply with HMRC regulations.
 (d) I have actually and necessarily incurred expenditure in travelling and subsistence for the purpose of enabling me to perform duties as a Member of Bolton Council, I have actually paid the fares and made other payments shown on this form, and that all amounts claimed are strictly in accordance with the rates determined by Bolton Council.
 (e) Except as shown, I have not made, and will not make, any claim under any enactment for travelling or subsistence expenses or allowances, or financial loss allowance or attendance allowance in connection with the duties indicated on this form.
 (f) The particulars inserted on this form are correct, and I understand that fraudulent claims may result in disciplinary action.

FOR MEMBERS' SERVICES USE ONLY

Subsistence T	6.77	Total Miles	78
Subsistence NT		For Payroll Use Only	
Expenses NPT	5.00	Input by	cm
Carer's Allowance		Date	04.4.08

Signed	[Signature]	Member	Date	10/4/08
I certify that I have examined this allowance sheet, the figures recorded are reasonable, and the expense was necessary.				
Authorised	[Signature]	Members' Services	Date	

Date	Reason for Journey (including From and To)	Time of Departure	Time of Return	Miles Claimed	Subsistence Allowance	Fares and Other Expenses	Dependent Carers Allowance	
3	BUS STOP CLEARWAYS WITH ANNE M. DARBISHIRE	2:00 PM		6	£ p	£ p	£ p	
4	— D —	10:30		6	£ p	£ p	£ p	
5	PLAN 3 HIGHWAYS - SITE VISIT	1:05 PM		6	£ p	£ p	£ p	
5	HUTTON, LOSTOCK & HULTON FORUM	6:30 PM		6	£ p	£ p	£ p	
10	DEV & REG P.D.G	3:00 PM		7	£ p	£ p	£ p	
10	FULL COUNCIL	5:30 PM		7	£ p	£ p	£ p	
12	ENVIRO SERVICE P.D.G	3:00 PM		7	£ p	£ p	£ p	
13	CUTACRE LIASIER COMM	6:00 PM		6	£ p	£ p	£ p	
17	G.M. WASTE @ THISTLE MARCH	9:45		—	£ p	£ 5.00 p	£ p	
20	PLAN 3 HIGHWAYS - SITE VISITS COMM 177	9:00		7	£ 6.77 p	£ p	£ p	
1-31	CASE WORK OVER MONTH			20	£ p	£ p	£ p	
Total Miles					78	Total Amount		
Total Miles					78	£ 6.77 p	£ 5.00 p	£ p

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

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

Number of Additional Sheets Used Nil

PAY-M1
12.10.2007

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

Payroll Shared Vice Centre, 5th Floor, Paderborn House, Bol BL1 1JW