

WALSH J

MEMBERS ALLOWANCES CLAIM

Claim for Month of JULY 20 07

Name of Member JOHN WALSH
(Block capitals please)

Pay No. [REDACTED]

Car (Make/Model) ROVER 75

Registration No. [REDACTED]

Exact Cubic Capacity 1998 cc.

Home Address 52 NEW HALL LANE HENTON BOLTON

DECLARATION:

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

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

(For Car Allowance claimants only)

(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 31.07.07

Date 06/02/07

Approved [REDACTED]

PAID

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

	Amount	Normal Mileage	Miles	Details input onto Payroll system:
* Subsistence Allowance	£ : p		216 ✓	By: CM
Subsistence Allowance (Taxable)	:			Date: 7.2.08
Travel Reimbursement (e.g. Car Park, taxis)	30: -			
Dependent Carer's Allowance	+309			
	<u>339</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.

[Redacted]

From: [Redacted] ([Redacted]@marketingbirmingham.com)
Sent: 17 May 2007 11:40
To: [Redacted]
Subject: Updated Confirmation

Need to do.

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

Amended Booking Confirmation from Allocation

Date: 17-May-2007

Booking Reference: TWN7766963 (Segment Ref: 1142864)

Company: Bolton MBC

Contact: [Redacted]

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

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

E-Mail: [Redacted]

Booking Status: Confirmed (5 adults)

Copthorne Hotel Birmingham

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

Phone: +44 (0) 121 2002727

Fax: +44 (0) 121 2001197

Managing company: Copthorne Hotel Birmingham

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

Travellers: Room No

*changed to
cert. paid
by phone
28.6.07.*

Title

Name

Adult/Child

Age

Rate Type

Remarks

1

Mr

Cliff Morris

Adult

*S
E
R
V
E
R*

17/05/2007

Double Ensuite

Single Occupancy NAME CHANGE FROM [REDACTED]

2

Mr

Sean Harriss

Adult

Double Ensuite

Single Occupancy WAS T B A NAME NOW AVAILABLE

3

Mr

Clr John Walsh

Adult

Double Ensuite

Single Occupancy WAS T B A NAME NOW AVAILABLE

4

Mr

Clr Roger Hayes

Adult

Double Ensuite

Double Occupancy Sharing with [REDACTED] WAS T B A NAMES NOW AVAILABLE

17/05/2007

Booking Type: GBMBL5481EA LGA Annual Conference 2007

Rate Type: 4*Double Ensuite:Event Rate

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

Full English Breakfast(Inclusive)

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

17.5% VAT (inclusive where applicable)

Total Cost: GBP 1170.00

Remarks 1: CC Guarantee expires 10/08

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

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

Consultant: [REDACTED] @ Operations (E-Mail: [REDACTED]@marketingbirmingham.com)

General Information: General Information

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

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

Change History

Ref

Date of Change

Change

Changed By

1

17-May-2007 11:19:00

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

[REDACTED] @ Operations

2

18-Jul-2006 12:13:40

Add Remark/Priority NORMAL

[REDACTED] @ Operations

Website: <http://www.visitbirmingham.com>

17/05/2007

WHITE

BOLTON METROPOLITAN BOROUGH COUNCIL

MEMBERS ALLOWANCES CLAIM

Claim for Month of MAY + JUNE 2007 Name of Member FRANK R WHITE Pay No. [REDACTED]
 (Block capitals please)
 Car (Make / Model) FORD MONDEO Registration No. [REDACTED] Exact Cubic Capacity 1800 cc.
 Home Address 23 DOUGLAS RD BOLTON BL2 5HT

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

Signed [REDACTED] MEMBER Date 15 June 2007
 Approved [REDACTED] Date _____

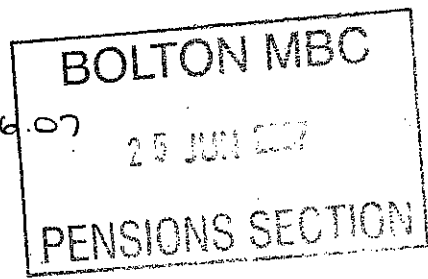
PAID

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

	Amount £ : p			Miles
* Subsistence Allowance	:	Normal Mileage	:	156
Subsistence Allowance (Taxable)	33 60			
Travel Reimbursement (e.g. Car Park, taxis)	:			
Dependent Carer's Allowance	:			

Details input onto Payroll system:

By: CM
 Date: 25.6.07



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.

Particulars of Journeys				Mode of Travel	Miles Claimed	Dependent Carers Allowance		Fares and other Expenses		Subsistence Allowance	
Date	Description of Approved Duties, including Locations (From & To)	Departure	Return			£	p	£	p	£	p
MAY/JUNE	MILEAGE FROM HOME TO TOWN HALL + RET. (ATTACH FORM)				126						
"	MILEAGE DURING COURSE OF DUTIES (ATTACH FORM)				30						
14/5/07	HR + INST. COO + CHARTER TRAINING LUNCH	09:30	18:00							6	72
21/5/07	ETEC + HR + COMM. SAFETY + EAVY BOLSON	09:00	17:00							6	72
23/5/07	COMMUNITY RADIO + HR + BEN	09:00	15:00							6	72
13/6/07	HR + HR ETEC + L/HULME	09:30	18:00							6	72
14/6/07	HR + SPORTS + INC + TOWNENP + PERFORM. MANDT	09:30	17:00							6	72
					156					£33	60

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

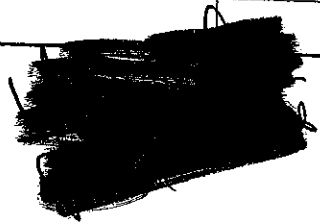
CLAIMS MUST BE SUBMITTED BY THE 2nd OF EACH MONTH TO GUARANTEE PAYMENT THAT MONTH.

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

Car travelling expenses claim

Name: FRANK WHITE		Month: MAY + JUNE 2007	
Date	Home/Town Hall	Mileage	Business journey description
MAY			
8			CASTLE HILL YOUTH CLUB + RETURN
9			AGE CONCERN MEETING
14	+ RETURN	7	H.R. + ILOCO + CHARTER
15	+ RETURN	7	H.R. + STANDARDS TRAINING
16	+ RETURN	7	MAYORS INSTALLATION
17	"	7	INT. DAY OF HONO + COM 2
20	"	7	MAYORAL SUNDAY
21	"	7	EXEC. + HR. + EMM BOLTON
22	"		COMMUNITY RADIO + RETURN
23	"	7	H.R. + COM. RAD. + BEN
23	"	7	COUNCIL MEETING
24	"	7	H.R. + COM 1
29			STAFF MEMBER'S FUNERAL @ BURY
29	"	7	H.R. + COMMUNITY RADIO
30	"	7	RACIAL HARMONY FORUM
JUNE	"		
9 th	"	7	BOLTON FM COMMUNITY RADIO
9 th	"	7	PARISH CHURCH MEMORIAL SERVICES
11 th	"	7	EXEC. + HR. + SINGLE STATUS
12	"	7	FUTURE HOUSING
13	"	7	H.R. + H.R. EXEC + L/HULME MEMBERS
14 th	"	7	H.R. + SPONSORING + TONGENT + PERFORMANCE
15 th	"	7	BURY @ HOME AWARDS + P.D.P. + EAST B.
Total Mileage		126	
@ rate			30
Allowance			

BOLTON MBC
 25 JUN 2007
PENSIONS SECTION


 15 June 2007

PAD

BOLTON METROPOLITAN BOROUGH COUNCIL

MEMBERS ALLOWANCES CLAIM

Claim for Month of JULY 20 07 Name of Member WHING F.R. Pay No. [REDACTED]
 Car (Make / Model) FORD MONDEO EST. Registration No. [REDACTED] Exact Cubic Capacity 1799 cc.
 Home Address 23 DOVEDALE RD BOLTON BL2 5HT

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 6 August 2007
 Approved [REDACTED] Date _____

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

	Amount £ : p		Miles	
* Subsistence Allowance	<u>20 : 46</u>	Normal Mileage	<u>191</u> ✓	Details input onto Payroll system:
Subsistence Allowance (Taxable)	<u>20 : 16</u>			By:
Travel Reimbursement (e.g. Car Park, taxis)	:			Date:
Dependent Carer's Allowance	:			

Notes:

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

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

Particulars of 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		Return				£	p	£	p	£	p
JULY	MILEAGE FROM HOME TO TOWN HALL AS PER APPROVED						119						
JULY	MILEAGE IN SUPPORT OF DUTIES AS PER APPROVED						72						
4 JULY	H.R. MEETING WITH DIRECTOR AND COLLEAGUES	9.30	17.00									6	72
10 JULY	PERFORMANCE APPRAISAL + HR MEETING	8.30	15.00									6	72
12 JULY	CONT. PERFORMANCE DATA MEETING + CONT 2	9.00	20.00									6	72
							191						

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.

Car travelling expenses claim

Name: <u>FRANK WHITE</u>		Month: <u>JULY 2007</u>		
Date	Home/Town Hall	Mileage	Business journey description	Mileage
2nd	+ RETURN	7	ETEC. BRIEF + ETEC.	
3rd	"	7	HR PDG	
4th	"	7	HR MEETING	
4th	Home + Ret.		LEVERHULME AREA FORUM LITTLE LIVEN	8
5th	Home + Ret.		MEETING POLICE ASPECT BOARD	6
7th	Home + Ret.		RECEPTION TOWN TWINNING RECEPTION	17
8th	Home + Ret.		TOWN TWINNING BUFFET + CONCERT	7
9th	"	7	ETEC. BRIEF + STAFF AWARDS + SPECIAL COMM.	
10th	"	7	CORP. PERFORM. MEETING	
11th	Home + Ret.		CORP. PERFORM. TEAM TOWN RECEPTION	17
11th	"	7	COUNCIL MEETING	
12th	"	7	CORP. PERFORMED DATA + COM 2	
13th	"	7	H-R. MEETING	
15th	Home + Ret.		GENOCIDING DAY SERVICES	7
16th	"	7	ETEC. BRIEF + HQS + SLSCC	
18th	"	7	HR ETEC + DIRECTOR EDUCATION	
19th	"	7	COM 1 MEETING	
19th	Home + Ret.		WILKINS COV./STAFF RECEPTION ASPECT BR	7
20	"	7	AWARD CEREMONY	
23	"	7	ETEC. BRIEFING + PERFORM. IYAS.	
24	"	7	CAROL HILL + COM. RADIO + LIC & ENV.	
26	"	7	REPAIRS COVERING MASSIVE MATRONS PARKWAY	
30	"	7	ETEC. BRIEFING	
31	"	7	COMMUNITY RIMON - SCHALES ST BRUCE STATION	3
Total Mileage		119		72
@ rate				
Allowance				



August 2007

BOLTON METROPOLITAN BOROUGH COUNCIL

MEMBERS ALLOWANCES CLAIM

DIPED

Claim for Month of AUGUST 2007 Name of Member F. White Pay No. [REDACTED]
 (Block capitals please)
 Car (Make/Model) FORD MONDEO Registration No. [REDACTED] Exact Cubic Capacity 1799 cc.
 Home Address 23 DOVEDALE RD BOLTON BL2 5HT

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 5 Sep 2007
 Approved [REDACTED] Date _____

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

	Amount £ : p		Miles	
* Subsistence Allowance	(20 : 16)	Normal Mileage	49	Details input onto Payroll system: By: <u>cm</u> Date: <u>26.9.07</u>
Subsistence Allowance (Taxable)	20 : 16			
Travel Reimbursement (e.g. Car Park, taxis)	:	<u>Non tax</u>	43.	
Dependent Carer's Allowance	:		9 2	

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 2007	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
August	MILEAGE HOME - Town Hall via ...				49						
August	MILEAGE in course of duties at ...				43						
14 Aug	Police Pres. - Fair Trade - Lec + Env.	9.00	16.30							6	72
15 Aug	Perform. + V.S. Square + HR. PDC + HR. EXEC. + STAA ...	9.00	18.00							6	72
20 Aug	Exec. Brief. + VAL. DIV. W.P. + CORP. SECURITY	8.30	19.30							6	72
										20	16

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

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

Name: <i>FRANK WHITE</i>		Month: <i>AUGUST 2007</i>		
Date	Home/Town Hall	Mileage	Business journey description	Mileage
<i>2nd</i>			<i>VISIT TO SCHOLEY Sth POLICE STATION</i>	<i>8</i>
<i>3rd</i>			<i>VISIT TO SCHOLEY Sth POLICE STATION</i>	<i>8</i>
<i>6th</i>	<i>+ RETURN</i>	<i>7</i>	<i>EXEC. BRIEFING + EXEC.</i>	
<i>8th</i>			<i>POLICE PRESENTATION SCHOLEY Sth</i>	<i>8</i>
<i>8th</i>			<i>H.C.P. MEETING + SURVEY</i>	<i>8</i>
<i>13th</i>	<i>+ RETURN</i>	<i>7</i>	<i>EXEC. BRIEFING</i>	
<i>14th</i>			<i>POLICE PRESENTATION + LIC + ENV.</i>	<i>8</i>
<i>14th</i>			<i>CARRLE HILL YOUTH CLUB</i>	<i>5</i>
<i>15th</i>	<i>+ RETURN</i>	<i>7</i>	<i>PERFORM. MAN. + HR PDG + HA EXEC + FIN.</i>	
<i>20th</i>	<i>+ RETURN</i>	<i>7</i>	<i>EXEC. BRIEF. + VIAL & DIV. + CONT. SERV.</i>	
<i>21st</i>	<i>+ RETURN</i>	<i>7</i>	<i>CONT. PERFORM. ASSESS. - TRIBAL</i>	
<i>22nd</i>	<i>+ RETURN</i>	<i>7</i>	<i>ICOCO MEETING</i>	
<i>29th</i>	<i>+ RETURN</i>	<i>7</i>	<i>STANDARDS TRAINING + COUNCIL</i>	
Total Mileage		<i>49</i>		<i>43</i>
@ rate				
Allowance				

DIPED

BOLTON METROPOLITAN BOROUGH COUNCIL

MEMBERS ALLOWANCES CLAIM

Claim for Month of SEPTEMBER 2007 Name of Member FRANK WHITE Pay No. [REDACTED]
 Car (Make / Model) ROAD MONDEO GHIA Registration No. [REDACTED] Exact Cubic Capacity 1800 cc.
 Home Address 23 DOVERIDGE RD

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 28 Sept 2007
 Approved [REDACTED] Date _____

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

	Amount		Miles	
* Subsistence Allowance	£ : p	Normal Mileage	137	Details input onto Payroll system: By: <u>cm</u> Date: <u>8.10.07</u>
Subsistence Allowance (Taxable)	<u>67</u> : <u>00</u>		<u>118</u>	
Travel Reimbursement (e.g. Car Park, taxis)	:	<u>NON-TAX</u>	<u>BA</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 Jour Description of Approved Duties including Locations (From & To)	Time of		Mode of Travel	Miles Claimed	Dependent Carers Allowance		Fares and other Expenses		Subsistence Allowance	
		Departure	Return			£	p	£	p	£	p
1-30th	TOTAL MILES FROM HOME TO T/HALL + RETURN AS PER ATTACHED SHEET			CAR	98						
1-30th	TOTAL MILES TRAVELLED IN COURSE OF DUTIES AS PER ATTACHED SHEET			CAR	39						
5th	CHIEF OFFICER + CIA TR. + HR EXEC.	Home 8:00	Home 17:00	CAR						6	72
18th	H.R. MEETINGS + CENTRAL HONOR + STAFF	Home 9:30	Home 18:00	CAR						6	72
19th	DBB RADIO + HR + HR DOC	Home 9:00	Home 17:00	CAR						6	72
21st	H.R. MEETINGS + ASS. CHIEF + HR CONC. HON	Home 9:30	Home 16:30	CAR						6	72
25th	BOSTON FUND GROUP + RADIO FET + H.R.	Home 10:00	Home 18:00	CAR						6	72
26th	H.R. + CHIEF EXECUTIVE OFFICER + HR EXEC + HONOR HONORARY	Home 10:00	Home 18:30	CAR						6	72
26th	PARSONS BOARD TRAVELLING VISIT - STAFF										
27th	HR + SEC CC + S.S.	Home 10:30	Home 17:30	CAR						6	72

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.

Car travelling expenses claim

Name: <u>FRANK WHITE</u>		Month: <u>SEPTEMBER</u>		
Date	Home/Town Hall	Mileage	Business journey description	Mileage
3rd	+ RETURN	7	HR + EXECUTIVE	
4th	+ "	7	SPORTS HOMEROTIC AMMAD	
5th	+ "	7	CHEEK + COAL ASSESS + HR EXEC	
6th	+ "	7	MEETINGS + EVENING MEET H.C.P.	7
7th	+ "	7	CPH	
8th			HCP EVENT + GYMNASIUM TRIP	14
10th	--	7	EXEC. PANEL	
18th	--	7	H.R. + CENT. H&S	
19th	--	7	DBS RADIO + HR PDC	
20th			AREA FORUM	2
21st	--	7	H.R. + ACC CONCERN HELM	
24th	--	7	EXEC + WITHINS GOV.	
25th	--	7	FIBRO GROUP + RADIO + YOUTH CLUB EVEN.	4
26th	--	7	RADIO + TRAINING + HR EXEC + HANUT + PARENTS	6
27th	--	7	H.R. + SLSL + S.S. + VEMMS CONCERN	6
28th	--	7	PROVISIONAL + UPTON + CONCERN + H.R.	
Total Mileage		98		39
@ rate				
Allowance				

28 Sept 2007

PAID

BOLTON METROPOLITAN BOROUGH COUNCIL

MEMBERS ALLOWANCES CLAIM

Claim for Month of October 2007 Name of Member FRANK R WHITE Pay No. [REDACTED]
 Car (Make/Model) FORD MONDEO GRAME Registration No. [REDACTED] Exact Cubic Capacity 1800 cc.
 Home Address 23 DORNBERG RD BOLTON

DECLARATION:

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

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

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

Signed [REDACTED] MEMBER Date 31/08/2007

Approved [REDACTED] Date 31/10/07

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

	Amount £ : p		Miles	
* Subsistence Allowance	<u>2</u> :	Normal Mileage	<u>77</u>	Details input onto Payroll system: By: <u>cm</u> Date: <u>2.11.07</u>
Subsistence Allowance (Taxable)	<u>46</u> : <u>90</u>		<u>52</u>	
Travel Reimbursement (e.g. Car Park, taxis)	<u>5</u> : <u>40</u>			
Dependent Carer's Allowance	:		<u>129</u>	

Notes:

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

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

Particulars of Journeys		Time of		Mode of Travel	Miles Claimed	Dependent Carers Allowance		Fares and other Expenses		Subsistence Allowance	
Date	Description of Approved Duties including Locations (From & To)	Departure	Return			£	p	£	p	£	p
Oct	Mileage Travelling To + From Work as Director			Car	77						
Oct	Mileage Travelling in course of Duties			Car	52						
16 Oct	H.R. Meeting to discuss etc	Home 10:00	Home 18:00	Car						6	70
18 Oct	Concom Meeting + Ad Comand + Sharon + Com 2	Home 10:00	Home 20:00	Car						8	70
23 Oct	H.R. Meeting + Executive Business	Home 9:30	Home 18:00	Car						8	70
25 Oct	Sharon Meeting + E.C. + H.R.	Home 9:30	Home 17:00	Car						8	70
26 Oct	Pay + Granting Review Meetings	Home 10:00	Home 17:00	Car						8	70
30 Oct	Concom Meeting + H.R. + Community Radio	Home 9:30	Home 17:00	Car						8	70
31 Oct	H.R. + H.A. Exec. + Hospital Protocol	Home 9:45	Home 18:00	Car						8	70
29 Oct	Community Radio Meeting with Oxford City Council	Car	Home	Car				5	40		
								5	40	46	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.

Car travelling expenses claim

Name: <i>FRANK WHITE</i>		Month: <i>OCTOBER 2007</i>		
Date	Home/Town Hall	Mileage	Business journey description	Mileage
<i>15th</i>	<i>+ RETURN</i>	<i>7</i>	<i>EXECUTIVE BRIFG. AWAY DAY RIVINGTON</i>	<i>16</i>
			<i>CONTRACTS SCRUTINY + H.R.</i>	
<i>16</i>	<i>+ RETURN</i>	<i>7</i>	<i>H.R. MEETINGS</i>	
<i>18</i>	<i>+ RETURN</i>	<i>7</i>	<i>H.R. + AGG GROUND + COM 1</i>	
<i>22</i>	<i>+ RETURN</i>	<i>7</i>	<i>H.R + EXEC. BRIFG</i>	
<i>23</i>	<i>+ RETURN</i>	<i>7</i>	<i>H.R. DISPUTE / MEETING</i>	
<i>24</i>	<i>+ RETURN</i>	<i>7</i>	<i>COUNCIL</i>	
<i>25</i>	<i>+ RETURN</i>	<i>7</i>	<i>H.R. + SHAWTON + EON + HR</i>	<i>4</i>
<i>26</i>	<i>+ RETURN</i>	<i>7</i>	<i>HR + PAY + GRADING</i>	
<i>29</i>	<i>+ RETURN</i>	<i>7</i>	<i>EXECUTIVE OFFCOM MEETING H/C</i>	<i>32</i>
<i>30</i>	<i>+ RETURN</i>	<i>7</i>	<i>WATKINS SEC COMMS + COMMUNITY RURAL H.R.</i>	
<i>31</i>	<i>+ RETURN</i>	<i>7</i>	<i>H.R. COMMUNITY RURAL HR EXEC TRAINING</i>	
Total Mileage		<i>77</i>		<i>52</i>
@ rate				
Allowance				

NCP

NCP Manchester LTD.

21 Bryanston Street, London W1H 7AB
Tel: 0870 606 7050 VAT No. 239 0546 59

THANK YOU, PLEASE CALL AGAIN

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



9/10/07
17:50

5049/055205000/053725
29/10/07 Entry 1
Central Undercroft

By VISA Card
£5.60



255702

PAID

Members' Allowances Claim

BOLTON

Bolton Council

Name <i>FRANK R. WHITE</i>	Home Address <i>23 DOVERDALE RD BOLTON BL2 5HT</i>	Pay No. <i>[Redacted]</i>
Car Make/Model <i>FORD MONDEO</i>	Registration <i>[Redacted]</i>	Exact CC <i>1799</i>
	Month <i>NOVEMBER</i>	<i>2007</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 *[Signature]* Member **Date** *5TH Nov 2007*

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

Authorised *[Signature]* Members' Services **Date** _____

Subsistence T	<i>40.32</i>	Total Miles	<i>141</i> ✓
Subsistence NT		For Payroll Use Only	
Expenses NT			
Carer's Allowance			
		Input by	
		Date	

Date	Reason for Journey (including From and To)	Time of		Miles Claimed
		Departure	Return	
<i>Nov 2007</i>	<i>MILEAGE HOME - TOWNHALL AS PER ATTACHED LIST</i>			<i>112</i>
<i>Nov 2007</i>	<i>MILEAGE DURING COURSE OF VOICES AS ATTACHED LIST.</i>			<i>29</i>
<i>5 Nov</i>	<i>H.R. MEETING - ADMIN - MATRONS MEETING</i>	<i>Home 10:00</i>	<i>Home 17:00</i>	
<i>6 Nov</i>	<i>H.R. + PREP + LICENSING & ENVIRONMENT</i>	<i>Home 10:00</i>	<i>Home 17:30</i>	
<i>7 Nov</i>	<i>H.R. Pres MEETING + VIAL & DIVERSITY P. DRG</i>	<i>Home 9:30</i>	<i>Home 16:30</i>	
<i>12 Nov</i>	<i>INTERVIEWS + H-N + QUIDS IN</i>	<i>Home 8:30</i>	<i>Home 18:00</i>	
<i>21 Nov</i>	<i>Occ. MEETING + INTERVIEWS</i>	<i>Home 9:00</i>	<i>Home 16:00</i>	
<i>26 Nov</i>	<i>H.R. + Ex. Budget + Exec + STAFF</i>	<i>Home 10:00</i>	<i>Home 17:00</i>	

Subsistence Allowance	Fares and Other Expenses	Dependent Carers Allowance
£ p	£ p	£ p
£ p	£ p	£ p
£ p	£ p	£ p
£ <i>6.72</i> p	£ p	£ p
£ <i>6.72</i> p	£ p	£ p
£ <i>6.72</i> p	£ p	£ p
£ <i>6.72</i> p	£ p	£ p
£ <i>6.72</i> p	£ p	£ p
£ p	£ p	£ p
£ p	£ p	£ p
£ p	£ p	£ p

Total Miles	Total Amount	Total Amount	Total Amount
<i>141</i>	<i>£40.32 p</i>	£ 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

month 9 sc

Car travelling expenses claim

Name: <i>FRANK WHITE</i>		Month: <i>NOVEMBER 2007</i>		
Date	Home/Town Hall	Mileage	Business journey description	Mileage
<i>5th</i>	<i>+ RETURN</i>	<i>7</i>	<i>K&EC. B&ET + Rem. CONCERN</i>	
<i>6th</i>	<i>-</i>	<i>7</i>	<i>H.R + LICENSING</i>	
<i>7th</i>	<i>-</i>	<i>7</i>	<i>H.R + VAL& DIVERSITY</i>	
<i>10th</i>	<i>-</i>	<i>7</i>	<i>MAYORS REMEMBRANCE CONCERN</i>	
<i>11th</i>	<i>-</i>	<i>7</i>	<i>ARMY'S PARADE</i>	
<i>12th</i>	<i>-</i>	<i>7</i>	<i>SITORUSANK + CREDIT UNION</i>	
<i>13th</i>	<i>-</i>	<i>7</i>	<i>ACE CONCERN</i>	
<i>14th</i>	<i>-</i>	<i>7</i>	<i>SURGERY</i>	
<i>15th</i>	<i>-</i>	<i>7</i>	<i>H.R + DIVALI 3D'S CENTRE</i>	<i>6</i>
<i>17th</i>	<i>-</i>	<i>-</i>	<i>DIVERSITY AWARDS - REEBORN</i>	<i>17</i>
<i>19th</i>	<i>-</i>	<i>7</i>	<i>H.R. REMEMBRANCE CONCERN</i>	
<i>21st</i>	<i>-</i>	<i>7</i>	<i>Occ. HEALTH + INTERVIEWS + L/H/HR + FORMS</i>	<i>6</i>
<i>26th</i>	<i>-</i>	<i>7</i>	<i>K&EC. B&ET + EXECUTIVE + STAFF</i>	
<i>27th</i>	<i>-</i>	<i>7</i>	<i>LICENSING + COMM. RADIO</i>	
<i>28th</i>	<i>-</i>	<i>7</i>	<i>H.R. + H.R. K&EC.</i>	
<i>29th</i>	<i>-</i>	<i>7</i>	<i>H.R. + ACE CONCERN + MAYORS</i>	
<i>30th</i>	<i>-</i>	<i>7</i>	<i>H.R. + MERRILL + PUNJAB</i>	
Total Mileage		<i>112</i>		<i>29</i>
@ rate				
Allowance				

John Oaasis



5 Dec 2007

Members' Allowances Claim

BOLTON MBC
11 JAN 2008
PAYROLL SECTION

Bolton Council

Name	FRANK WHITE	Home Address	23 DOUGLAS RD BOLTON BL2 5HT	Pay No.	[REDACTED]
Car Make/Model	FORD MONDEO	Registration	[REDACTED]	Exact CC	1799
				Month	DECEMBER 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	20.16	Total Miles	77 110 33		
Subsistence NT		For Payroll Use Only			
Expenses NT				Input by	cm
Carer's Allowance				Date	28.1.08

Signed	[REDACTED] Member	Date	7 JAN 2008
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 2007	Reason for Journey (including From and To)	Time of Departure	Time of Return	Miles Claimed
Dec 1st	MILEAGE FROM HOME TO T/HOME + RETURN AS PER ATTENDANCE			77
	MILEAGE INCURRED DURING DUTIES AS PER ATTENDANCE			33
5 Dec	TRIP TO DISABILITY + H.R. + SPORTS SYSTEM	Home 9.15	Home 16.30	
6 Dec	LEADER BRIEFING CHAIRMAN + COMM. MEETING + COM 2	Home 9.30	Home 20.00	
18 Dec	FCCO + HR EXEC + COMM. RADIO	Home 9.30	Home 17.00	

Subsistence Allowance	Fares and Other Expenses	Dependent Carers Allowance
£ p	£ p	£ p
£ p	£ p	£ p
£ p	£ p	£ p
£ 6.72 p	£ p	£ p
£ 6.72 p	£ p	£ p
£ 6.72 p	£ p	£ p
£ p	£ p	£ p
£ p	£ p	£ p
£ p	£ p	£ p
£ p	£ p	£ p
£ p	£ p	£ p

Total Miles	110	Total Amount	£ 20.16 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
12.10.2007

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

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

Car travelling expenses claim

Name: FRANK WHITE		Month: December 2007		
Date	Home/Town Hall	Mileage	Business journey description	Mileage
3rd	+ Return	7	Exec. Brief + Corp. Seminar	
4th			Evening Meeting Central Hill Youth Club	6
5th	~	7	INTERNATIONAL 2007 DISABLED + SIGNATURE	
6th	~	7	EARLY BIRDS GRANT + CENT. H & S + Com 1	
10th	~	7	HR EXEC.	
12th			TRIPS UEA + MEETING ON SITE	6
12th	~	7	COUNCIL MEETING	
13th	~	7	INTERVIEWS	
14th	~	7	ICOCO MEETING	
15th			OPENING ST ANDREW'S COM. CENTRE + 1 MARQUEE REP.	11
17th	~	7	Exec. BRIEFING	
18th	~	7	ICOCO + HR EXEC + COMM. RADIO	
19th	~	7	INTERVIEWS + HAULAGE SURVEY	
20th	~	7	H.R. MEETINGS + Hon. Acc. FUNCTION	4
~			CENTRAL HILL YOUTH CLUB MEETING	6
Total Mileage		77		33
@ rate				
Allowance				

John Cross

 Jan 2008

PAID

Members' Allowances Claim

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

9/06/08 10:18
 5135/055308100/030649
 23/01/08 Entry 1
 SFR fields

V.A.T. 17.5% 0.89
 £ 6.00 PDF 1
 23/01/08 13:08

Name FRANK R WHITE Home Address 23 DOVENALB ROAD BOLTON
 Car Make/Model FORD MONDEO BEN Registration [REDACTED] Exact CC 1799 CC

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 shown on this form are correct, and I understand that fraudulent claims may result in disciplinary action.

FOR MEMBERS' SERVICES USE ONLY

Subsistence T	33.60	Total Miles	157
Subsistence NT		For Payroll Use Only	
Expenses NT	6.00		
Carer's Allowance		Date	5.2.08

Signed [REDACTED] Member Date 1 Feb 2008
 I certify that I have examined this allowance sheet, the figures recorded are reasonable, and the expense was necessary.
 Authorised [REDACTED] Services Date

Date	Reason for Journey (including From and To)	Time of		Miles Claimed
		Departure	Return	
JAN 2008	TOTAL MILEAGE FROM HOME TO WORK + RET.	AS PER ATTACHED		90
JAN 2008	TOTAL MILEAGE ON COURSE OF DUTIES	AS PER ATTACHED		67
9 JAN 08	MARCOM MEETING + ET BRIEF. EXEC + L/HALVING HUBA	HOME 09:15	HOME 18:00	
15 JAN 08	HR + OBA RADIO + LICENSING + GROUP	HOME 10:00	HOME 18:30	
23 JAN 08	N.W. EMPLOYER ASSOC. M/C + HR PDC (No Lunch Provided)	HOME 09:00	HOME 17:00	
30 JAN 08	RESEARCH MEET + TRAINING + HR EXEC + WITHINS + L/HALVING FOR	HOME 08:30	HOME 18:30	
31 JAN 08	HR + AOC CONCERN + COM 1	HOME 10:00	HOME 19:00	

Subsistence Allowance	Fares and Other Expenses	Dependent Carers Allowance
£ p	£ p	£ p
£ 6.72 p	£ p	£ p
£ 6.72 p	£ p	£ p
£ 6.72 p	£ 6.00 CAR PARK	AS PER ATTACHED p
£ 6.72 p	£ p	£ p
£ 6.72 p	£ p	£ p
£ p	£ p	£ p
£ p	£ p	£ p
£ p	£ p	£ p
£ p	£ p	£ p

Total Miles	Total Amount	Total Amount	Total Amount
157	£33.60 p	£ 6.00 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

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

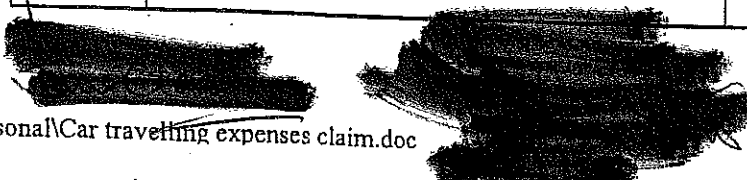
Payroll Share Service Centre, 5th Floor, Paderborn House, Bolton BL1 1JW

Number of Additional Sheets Used

Car travelling expenses claim

Name: <u>FRANK WHITE</u>		Month: <u>JANUARY 2008</u>		
Date	Home/Town Hall	Mileage	Business journey description	Mileage
7th	+ RETURN	7	H.R. Reception + CHIEF EX + GROUP	
8th	+ RETURN	7	HOLOCAUST DAY + COMM. RADIO	
9th	-	7	MARCOM + EX. BRIEF + EX + T/HOME HALL	
10th	-	7	Tony SIMMONSON + PLANNING + VEAN COOKS	
14th	-	7	EXEC. BRIEF + HR	
15th	-	7	T/HALL + DBB RADIO + LICENSING	
15th	-	-	CASUALTY CLUB COMMITTEES	4
16th	-	7	SJCC + SINGLE SUPPLIES + JNF. COUNCIL	
21st	-	7	H.R. Meeting	
22nd	-	7	COMMUNITY RADIO + GROUP	
23rd	-	-	NORTH WEST EMPLOYERS ASSOC. in 1/2	34
23rd	Town/Home	3	HA PDG	
24th	-	7	DRUGS + ALCOHOL + PLANNING + HOUSING + COM 1 + BAEC	
28th	-	7	SUE CURRAN + HOUSING + COMM RADIO	4
30th	-	-	REBOOT ASD CONFERENCE	17
30th	Town/Home	3	MEMBER TRAIN. + HA EXEC + WITHIN + AREA	8
31	-	7	H.R. + AOB CONCERN + COM 2	
Total Mileage		90		67
Home/Town Hall @ rate				
Allowance				

Total Mileage in course of duties



1st Feb 2008

Members' Allowances Claim

BOLTON MBC
26 FEB 2008

Bolton Council

Name	FRANK R. WHITE	Home Address	23 DOVEDALE Rd	Pay No.	[REDACTED]
Car Make/Model	FORD MONDEO	Registration	[REDACTED]	Exact CC	1799
				Month	FEB 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 of my claim are true, and I understand that fraudulent claims may result in disciplinary action.

FOR MEMBERS' SERVICES USE ONLY

Signed: *[Signature]* Member Date: 26 FEB 2008

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

Authorised: *[Signature]* Members' Services Date: _____

Subsistence T	20.16	Total Miles	63
Subsistence NT	0	For Payroll Use Only	
Expenses NT			
Carer's Allowance		Input by	cm
		Date	3.3.08

Date	Reason for Journey (including From and To)	Time of		Miles Claimed
		Departure	Return	
FEB 200	MILEAGE FROM HOME to Work + RETURN AS PER ATTACHED FORM			63
5 FEB	HR VACATION SHOW - HAUGH MOUNTAIN H.R. + GOUGHNAS	9.15	18.00	
6 FEB	H.R. + PLANNING PRESENTATION + HOUSING + BAEC	10.00	19.45	
21 FEB	H.R. + INTERFAITH	9.15	15.00	

Subsistence Allowance	Fares and Other Expenses	Dependent Carers Allowance
£ p	£ p	£ p
£ p	£ p	£ p
£ p	£ p	£ p
£ 6.72 p	£ p	£ p
£ 6.72 p	£ p	£ p
£ 6.72 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
£ 20.16 p	£ p	£ p

Total Miles: 63

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

Number of Additional Sheets Used: 1

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


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

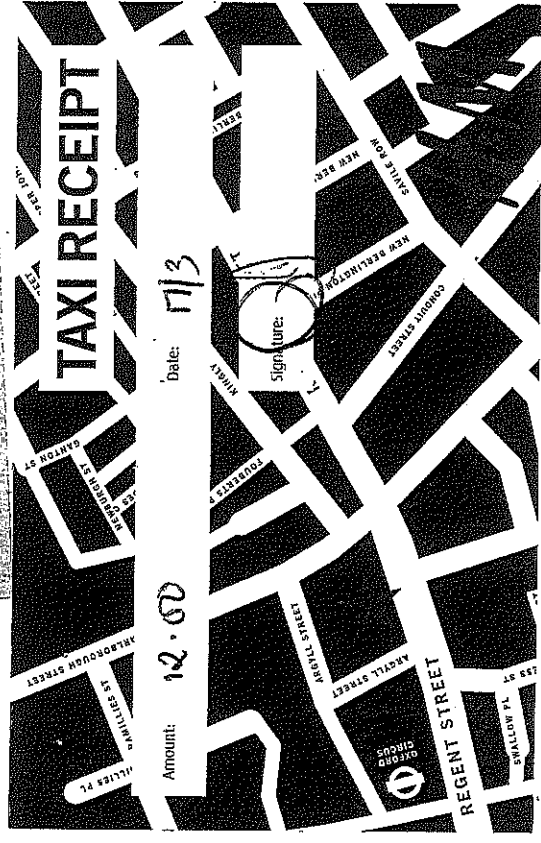
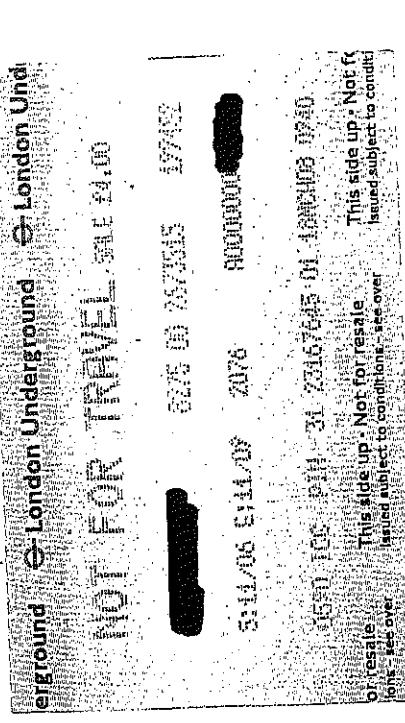
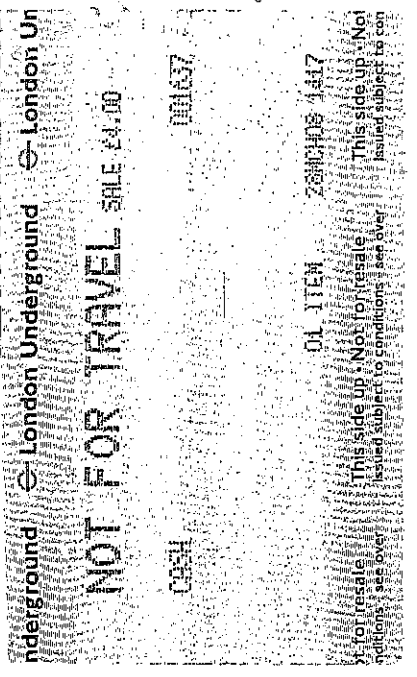
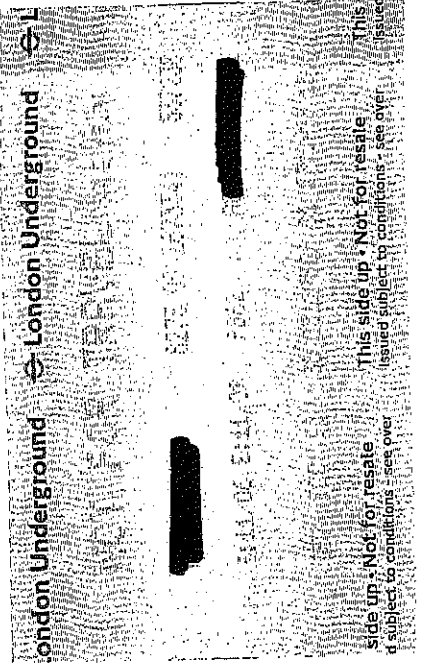
PAY-M1
12.10.2007

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

Car travelling expenses claim

Name: <u>White F.R.</u>		Month: <u>FEBRUARY 2008</u>		
Date <u>FEB</u>	Home/Town Hall	Mileage	Business journey description	Mileage
<u>4th</u>	<u>+ RETURN</u>	<u>4</u>	<u>H.R. + EXECUTIVE + SCRUTINY</u>	
<u>5th</u>	<u>-</u>	<u>7</u>	<u>H.R. Road Show + GOVERNORS</u>	
<u>6th</u>	<u>-</u>	<u>7</u>	<u>H.R. + PLANNING + HAUGH HOUSING + BREC</u>	
<u>7th</u>	<u>-</u>	<u>7</u>	<u>LINNS MAYOR PRESENTATION</u>	
<u>18th</u>	<u>-</u>	<u>7</u>	<u>H.R. EXEC + H.R.</u>	
<u>19th</u>	<u>-</u>	<u>7</u>	<u>L.G.C VISIT + CAROL COMBAT + RADIO</u>	
<u>20th</u>	<u>-</u>	<u>7</u>	<u>PLANNING MEETING</u>	
<u>21st</u>	<u>-</u>	<u>7</u>	<u>INTERVISTA + HR</u>	
<u>25th</u>	<u>-</u>	<u>7</u>	<u>H.R. + EXEC. BRIEF</u>	
Total Mileage		<u>63</u>		
@ rate				
Allowance				


26 Feb 2008



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H87504 26/01/09

Licensed Taxi Receipt

Date: 20th Amount: £10

Signed: T. Johns Thank you

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WILKINSON

BOLTON METROPOLITAN BOROUGH COUNCIL

MEMBERS ALLOWANCES CLAIM

Claim for Month of APRIL 20 07

Name of Member DAVID A WILKINSON Pay No. [REDACTED]

(Block capitals please)

Car (Make / Model) _____

Registration No. _____

Exact Cubic Capacity _____ cc.

Home Address R THE COSSLEY, WESTHOUGHTON

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 25/4/07

Approved [REDACTED]

Date _____

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

	Amount £ : p	Miles	
* Subsistence Allowance	:	Normal Mileage	Details input onto Payroll system: By: Date:
Subsistence Allowance <i>(Taxable)</i>	:		
Travel Reimbursement <i>(e.g. Car Park, taxis)</i>	5 : 65		
Dependent Carer's Allowance	:		
	:		

Notes:

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

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


Particulars of Journeys											
Date	Description of Approved Duties, including Locations (From & To)	Time of		Mode of Travel	Miles Claimed	Dependent Carers Allowance		Fares and other Expenses		Subsistence Allowance	
		Departure	Return			£	p	£	p	£	p
12/9/07	E.M.P.T.A										
	DAISY HILL TO MANCHESTER	8-22	1-00 p	TRAIN				5	65		
	AND RETURN										
								5	65		

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.

Class	Ticket type	Adult	Child	
	STD STD DAY RETURN	ONE	NIL	OUT
From		Number		
DAISY HILL *		34574	00556277N51	
To		Valid until	Disc	Price
MANCHESTER CTLZ		13·APR·07		£5·65M
		Route	Validity	
		ANY PERMITTED	ON DATE SHOWN	



Class	Ticket type	Adult	Child	
	STD STD DAY RETURN	ONE	NIL	RTN
From		Number		
MANCHESTER CTLZ		34574	00556277N51	
To		Valid until	Disc	Price
DAISY HILL *		13·APR·07		£5·65M
		Route	Validity	
		ANY PERMITTED	ON DATE SHOWN	



BOLTON METROPOLITAN BOROUGH COUNCIL

MEMBERS ALLOWANCES CLAIM

Claim for Month of MAY 20 07 Name of Member DAVID A. WILKINSON Pay No. [REDACTED]

(Block capitals please)

Car (Make / Model) _____ Registration No. _____ Exact Cubic Capacity _____ cc.

Home Address 12 THE CRESCENT, WESTBOUGHTON

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 25/6/07

Approved [REDACTED] Date _____

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

PAID

	Amount £ : p	Miles		
* Subsistence Allowance	:	Normal Mileage		Details input onto Payroll system:
Subsistence Allowance <i>(Taxable)</i>	:			By:
Travel Reimbursement <i>(e.g. Car Park, taxis)</i>	2 90.			Date:
Dependent Carer's Allowance	:			

Notes:

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

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


Particulars of Journeys											
Date	Description of Approved Duties, including Locations (From & To)	Time of		Mode of Travel	Miles Claimed	Dependent Carers Allowance		Fares and other Expenses		Subsistence Allowance	
		Departure	Return			£	p	£	p	£	p
25/5/07	G.M.P. TA.										
	DAIST HILL & MANCHESTER	11:05	2pm	TRAIN				2	90		
	AND RETURN										
								2	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.

Class Ticket type Adult Child
STD CHEAP DAY RTN ONE NIL RTN
 Start Date 25·MAY·07 39633 00550277N51
 Valid until 25·MAY·07 Disc Price
MANCHESTER CTLZ 25·MAY·07 £2·90M
 To DAISY HILL * ANY PERMITTED Validity
 SEE RESTRICTNS



Class Ticket type Adult Child
STD CHEAP DAY RTN ONE NIL OUT
 Start Date 25·MAY·07 39633 00550277N51
 Valid until 25·MAY·07 Disc Price
DAISY HILL * 25·MAY·07 £2·90M
 To MANCHESTER CTLZ ANY PERMITTED Validity
 SEE RESTRICTNS



BOLTON METROPOLITAN BOROUGH COUNCIL

MEMBERS ALLOWANCES CLAIM

Claim for Month of JUNE 2007 Name of Member DAVID A WILKINSON Pay No. [REDACTED]
(Block capitals please)

Car (Make / Model) _____ Registration No. _____ Exact Cubic Capacity _____ cc.

Home Address 12 THE CRESCENT WESTHOUGHTON

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 25/6/07

Approved [REDACTED] Date _____

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

DID

	Amount £ : p			Miles
* Subsistence Allowance	:	Normal Mileage		
Subsistence Allowance <i>(Taxable)</i>	:			
Travel Reimbursement <i>(e.g. Car Park, taxis)</i>	<u>5 : 65</u>			
Dependent Carer's Allowance	<u>14.20</u>			
	<u>19.85</u>			
	<i>Reidy</i>			

Details input onto Payroll system:
By:
Date:

Notes:

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

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


Particulars of Journeys											
Date	Description of Approved Duties, including Locations (From & To)	Time of		Mode of Travel	Miles Claimed	Dependent Carers Allowance		Fares and other Expenses		Subsistence Allowance	
		Departure	Return			£	p	£	p	£	p
22/6/06	EMPTY										
	BAISH HILL TO MANCHESTER	7:15	3pm	TRAIN				5	65		
	AND RETURN										
								5	65		

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.

Class	Ticket type	Adult	Child	
STD	STD DAY RETURN	ONE	NIL	OUT
From	Start Date	Number	Disc	Price
DAISY HILL *	22·JUN·07	42823		£5·65X
To	Valid until	Route	Validity	
MANCHESTER CTLZ	22·JUN·07	ANY PERMITTED	ON DATE SHOWN	



Class	Ticket type	Adult	Child	
STD	STD DAY RETURN	ONE	NIL	RTN
From	Start Date	Number	Disc	Price
MANCHESTER CTLZ	22·JUN·07	42823		£5·65X
To	Valid until	Route	Validity	
DAISY HILL *	22·JUN·07	ANY PERMITTED	ON DATE SHOWN	





BOLTON METRO

MEMBERS ALLOWANCES

Claim for month of JULY 2007

PAID.

Surname WILKINSON Initials J. A

Pay no: [REDACTED]

CAR ALLOWANCE	
Car Make _____	Model _____
Reg. No. _____	Exact CC _____

FORM 2

G.M.P.T.A.

Date	Description of Approved Duties	Place and Time of Departure	Place and Time of Return	Mode of Travel	Official Passengers	Miles	Fares and Incidental Expenses (see over)		Subsistence Allowance		Attendance Allowance	
							£	p	£	p	£	p
13/7/07	E.M.P.T.A	DAISY HILL	DAISY HILL	TRAIN			2	90				
		11.55a	3-30p									
27/7/07	E.M.P.T.A	DAISY HILL	DAISY HILL	TRAIN			2	90				
		11.47a	3-30p									

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

CLAIMS MUST BE SUBMITTED AS SOON AS POSSIBLE AFTER THE END OF EACH MONTH AND BY NO LATER THAN THE 5TH OF EACH MONTH.


Passed for payment by [REDACTED]


Total


@ 5 80


Grand Total

£ 5 80 ✓

Class **STD** Ticket type **CHEAP DAY RTN** Adult **ONE** Child **NIL** **OUT**
 Start Date **27-JLY-07** Number **46679** Disc **00556277N51** Price **£2.90X**
 Valid until **27-JLY-07** Route **ANY PERMITTED** Validity **SEE RESTRICTNS**
 From **DAISY HILL *** To **MANCHESTER CTLZ**


Class **STD** Ticket type **CHEAP DAY RTN** Adult **ONE** Child **NIL** **RTN**
 Start Date **13-JLY-07** Number **45253** Disc **00556277N51** Price **£2.90M**
 Valid until **13-JLY-07** Route **ANY PERMITTED** Validity **SEE RESTRICTNS**
 From **MANCHESTER CTLZ** To **DAISY HILL ***


Class **STD** Ticket type **CHEAP DAY RTN** Adult **ONE** Child **NIL** **RTN**
 Start Date **27-JLY-07** Number **46679** Disc **00556277N51** Price **£2.90X**
 Valid until **27-JLY-07** Route **ANY PERMITTED** Validity **SEE RESTRICTNS**
 From **MANCHESTER CTLZ** To **DAISY HILL ***


Class **STD** Ticket type **CHEAP DAY RTN** Adult **ONE** Child **NIL** **OUT**
 Start Date **13-JLY-07** Number **45253** Disc **00556277N51** Price **£2.90M**
 Valid until **13-JLY-07** Route **ANY PERMITTED** Validity **SEE RESTRICTNS**
 From **DAISY HILL *** To **MANCHESTER CTLZ**




BOLTON METRO

Surname WILKINSON Initials J. A

MEMBERS ALLOWANCES

Claim for month of SEPTEMBER 20 07

CAR ALLOWANCE

Car Make _____ Model _____

Reg. No. _____ Exact CC _____

FORM 2
G.M.P.T.A.

Date	Description of Approved Duties	Place and Time of Departure	Place and Time of Return	Mode of Travel	Official Passengers	Miles	Fares and Incidental Expenses (see over)		Subsistence Allowance		Attendance Allowance	
							£	p	£	p	£	p
14/9/07	G.M.P.T.A	DAISY HILL	DAISY HILL									
		8-53am	1-30pm	TRAIN			5	65				
28/9/07	G.M.P.T.A	DAISY HILL	DAISY HILL	TRAIN			2	90				
		12-47pm	4-00pm									
<div style="border: 1px solid black; padding: 5px; width: fit-content; margin: auto;"> BOLTON COUNCIL 13 NOV 2007 PAYROLL SHARED SERVICE CENTRE </div>												
Total							@	8	55			
Grand Total							£	8	55			

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

CLAIMS MUST BE SUBMITTED AS SOON AS POSSIBLE AFTER THE END OF EACH MONTH AND BY NO LATER THAN THE 5TH OF EACH MONTH.

Passed for payment by 

Date	Details of incidental expenses claimed	£	p

DECLARATION

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

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

- (b) (For car allowance claimants only - delete if not applicable.)
I am the holder of a current driving licence and have adequate insurance cover for the use of my vehicle on Council business.

Date _____ 20 _____ Signature of Member _____

NOTES

1. CONDITIONS AND METHOD OF CLAIM

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

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

2. TRAVELLING ALLOWANCES

- (i) Rate for travel by public service shall not exceed lower available first class fare. Rail Travel Warrants, which are provided should be used whenever possible.
- (ii) The following rates apply for motor car or tri-car where cylinder capacity:
- | | |
|--|--------------|
| (a) not exceeding 999cc | 32.5p a mile |
| (b) exceeding 999cc but not exceeding 1199cc | 36.3p a mile |
| (c) exceeding 1199cc | 44.8p a mile |

- (iii) Increase of 1.0p a mile of each passenger to whom travelling expenses would otherwise be payable to a maximum of four.
Rates for motor cycle travel are available on request. Mileage is to be calculated by reference to the shortest practicable route unless use of a motorway results in substantial saving of time, details of which must be given.

3. SUBSISTENCE ALLOWANCES

- For an absence not involving an absence overnight from the usual place of residence of four hours:
- | | |
|--|------|
| (a) the whole of which is before 11.00 a.m. (Breakfast Allowance) | £4.7 |
| (b) which includes the whole of the period between 12 noon and 2.00 p.m. (Lunch Allowance) | £6.5 |
| (c) which includes the whole of the period between 3.00 p.m. and 6.00 p.m. (Tea Allowance) | £2.5 |
| (d) which extends beyond 7.00 p.m. (Evening Meal Allowance) | £8.1 |

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

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

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

Standard rate of £32.50 per day.

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

Class Ticket type

STD STD DAY RETURN Adult Child
ONE NIL RTN

Start Date

14-SEP-07 51865 00559277N51

From MANCHESTER CTLZ

Valid until 14-SEP-07 Disc Price

£5.65M

To DAISY HILL *
Route ANY PERMITTED
Validitys ON DATE SHOW



Class Ticket type

STD CHEAP DAY RTN Adult Child
ONE NIL RTN

Start Date

28-SEP-07 53590 00559277N51

From MANCHESTER CTLZ

Valid until 28-SEP-07 Disc Price

£2.90M

To DAISY HILL *
Route ANY PERMITTED
Validitys SEE RESTRICTNS



Class Ticket type

STD CHEAP DAY RTN Adult Child
ONE NIL OUT

Start Date

28-SEP-07 53590 00559277N51

From DAISY HILL *

Valid until 28-SEP-07 Disc Price

£2.90M

To MANCHESTER CTLZ
Route ANY PERMITTED
Validitys SEE RESTRICTNS



Class Ticket type

STD STD DAY RETURN Adult Child
ONE NIL OUT

Start Date

14-SEP-07 51865 00559277N51

From DAISY HILL *

Valid until 14-SEP-07 Disc Price

£5.65M

To MANCHESTER CTLZ
Route ANY PERMITTED
Validitys ON DATE SHOW





BOLTON METRO

Surname WILKINSON Initials D. A

MEMBERS ALLOWANCES

Claim for month of October 2007

CAR ALLOWANCE

Car Make _____ Model _____

Reg. No. _____ Exact CC _____

FORM 2
G.M.P.T.A.

PAID

Date	Description of Approved Duties	Place and Time of Departure	Place and Time of Return	Mode of Travel	Official Passengers	Miles	Fares and Incidental Expenses (see over)		Subsistence Allowance		Attendance Allowance	
							£	p	£	p	£	p
5/10/07	EMPTA	DAIST HILL	DAIST HILL	TRAIN			5	65				
		8-51	1-30 pm									
16/10	EMPTA	DAIST HILL					2	80				
	LONDON LOBBY	10.47 am										
17/10	EMPTA	MANCHESTER					2	80				
	LONDON LOBBY	13.15 pm										
19/10	EMPTA	DAIST HILL	DAIST HILL				5	65				
		8.41 am	1-30 pm									

BOLTON COUNCIL
13 NOV 2007
PAYROLL SHARED SERVICE CENTRE

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

CLAIMS MUST BE SUBMITTED AS SOON AS POSSIBLE AFTER THE END OF EACH MONTH AND BY NO LATER THAN THE 5TH OF EACH MONTH.

Passed for payment by [Signature]

Total	@	16.90				
Grand Total	£	16.90				
		+ 8.55				

25-45

Date	Details of incidental expenses claimed	£	p

DECLARATION

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

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

(b) (For car allowance claimants only - delete if not applicable.)
I am the holder of a current driving licence and have adequate insurance cover for the use of my vehicle on Council business.

Date _____ 20 _____ Signature of Member _____

NOTES

1. CONDITIONS AND METHOD OF CLAIM

(a) Claims should be completed to the end of the calendar month and submitted to Committee and Members Services.

(b) Notwithstanding (a) no claim can be paid where it is submitted more than two calendar months after the day of the specific duty has taken place.

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

2. TRAVELLING ALLOWANCES

(i) Rate for travel by public service shall not exceed lower rates available first class fare. Rail Travel Warrants, which are provided should be used whenever possible.

(ii) The following rates apply for motor car or tri-car where cylinder capacity:

- (a) not exceeding 999cc 32.5p a mile
- (b) exceeding 999cc but not exceeding 1199cc 36.3p a mile
- (c) exceeding 1199cc 44.8p a mile

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

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

3. SUBSISTENCE ALLOWANCES

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

- (a) the whole of which is before 11.00 a.m. (Breakfast Allowance) £4.77
- (b) which includes the whole of the period between 12 noon and 2.00 p.m. (Lunch Allowance) £6.57
- (c) which includes the whole of the period between 3.00 p.m. and 6.00 p.m. (Tea Allowance) £2.59
- (d) which extends beyond 7.00 p.m. (Evening Meal Allowance) £8.13

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

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

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

Standard rate of £32.50 per day.

FOR OFFICIAL USE ONLY									
Pay Ref				Expend Code	Job Code	Pay Code	£	p	Class
				Attendance Allowance	434 46 30	15200	21		2
				Subsistence Allowance (Taxable)	434 46 31	15200	22		2
				Subsistence Allowance	434 46 31	15200	22		6
				Travel Reimbursement	434 46 31	15200	25		6
				Travel Allowance	434 46 31	15200	26		6

Class **STD** Ticket type **STD DAY RETURN** Adult **ONE** Child **NIL** **RTN**
Start Date **05-OCT-07** Number **54407** **00550277N51**
From **MANCHESTER CTLZ** Valid until **05-OCT-07** Disc
To **DAISY HILL *** Route **ANY PERMITTED** Price **£5.65M**
Validities **ON DATE SHOWN**



Class **STD** Ticket type **STD DAY RETURN** Adult **ONE** Child **NIL** **OUT**
Start Date **05-OCT-07** Number **54407** **00550277N51**
From **DAISY HILL *** Valid until **05-OCT-07** Disc
To **MANCHESTER CTLZ** Route **ANY PERMITTED** Price **£5.65M**
Validities **ON DATE SHOWN**



Class **STD** Ticket type **STD DAY RETURN** Adult **ONE** Child **NIL** **OUT**
Start Date **19-OCT-07** Number **56360** **00550277N51**
From **DAISY HILL *** Valid until **19-OCT-07** Disc
To **MANCHESTER CTLZ** Route **ANY PERMITTED** Price **£5.65X**
Validities **ON DATE SHOWN**



Class **STD** Ticket type **CHEAP DAY SGL** Adult **ONE** Child **NIL** **SGL**
Start Date **16-OCT-07** Number **55953** **00550277N51**
From **DAISY HILL *** Valid until **16-OCT-07** Disc
To **MANCHESTER CTLZ** Route **ANY PERMITTED** Price **£2.80M**
Validities **SEE RESTRICTNS**

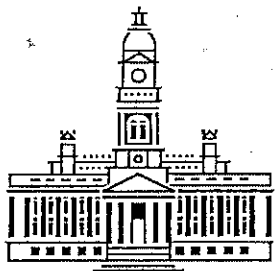


Class **STD** Ticket type **STD DAY RETURN** Adult **ONE** Child **NIL** **RTN**
Start Date **19-OCT-07** Number **56360** **00550277N51**
From **MANCHESTER CTLZ** Valid until **19-OCT-07** Disc
To **DAISY HILL *** Route **ANY PERMITTED** Price **£5.65X**
Validities **ON DATE SHOWN**



Class **STD** Ticket type **CHEAP DAY SGL** Adult **ONE** Child **NIL** **SGL**
Start Date **17-OCT-07** Number **99347** **014602970N52**
From **MANCHESTER STNS** Valid until **17-OCT-07** Disc
To **DAISY HILL *** Route **ANY PERMITTED** Price **£2.80M**
Validities **SEE RESTRICTNS**





BOLTON METRO

MEMBERS ALLOWANCES

Claim for month of NOVEMBER 20 07

PAID

Surname WILKINSON Initials DA

CAR ALLOWANCE

Car Make _____ Model _____

Reg. No. _____ Exact CC _____

FORM 2
G.M.P.T.A.

Date	Description of Approved Duties	Place and Time of Departure	Place and Time of Return	Mode of Travel	Official Passengers	Miles	Fares and Incidental Expenses (see over)		Subsistence Allowance		Attendance Allowance	
							£	p	£	p	£	p
9/11/07	EMPTA	BOLTON	DAISY HILL									
		12-53	4 pm				3	50				
16/11/07	EMPTA	DAISY HILL	DAISY HILL	TRAIN			5	65				
		8-54 am	2:30 pm									
23/11/07	EMPTA	DAISY HILL	DAISY HILL				5	65				
		8-26	1-30 pm									

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

CLAIMS MUST BE SUBMITTED AS SOON AS POSSIBLE AFTER THE END OF EACH MONTH AND BY NO LATER THAN THE 5TH OF EACH MONTH.

Passed for payment by _____

Total

@

14 80

@

Grand Total

£

14 80

Date	Details of incidental expenses claimed	£	p

DECLARATION

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

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

(b) (For car allowance claimants only - delete if not applicable.)
I am the holder of a current driving licence and have adequate insurance cover for the use of my vehicle on Council business.

Date 5/12 20 07 Signature of Member 

NOTES

1. CONDITIONS AND METHOD OF CLAIM

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

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

2. TRAVELLING ALLOWANCES

- (i) Rate for travel by public service shall not exceed lowers available first class fare. Rail Travel Warrants, which are provided should be used whenever possible.
- (ii) The following rates apply for motor car or tri-car where cylinder capacity:
 - (a) not exceeding 999cc 32.5p a mile
 - (b) exceeding 999cc but not exceeding 1199cc 36.3p a mile
 - (c) exceeding 1199cc 44.8p a mile

- (iii) Increase of 1.0p a mile of each passenger to whom travelling expenses would otherwise payable for a maximum of four.
Rates for motor cycle travel are available on request. Mileage is to be calculated by refer to the shortest practicable route unless use of a motorway results in substantial saving of details of which must be given.

3. SUBSISTENCE ALLOWANCES

- For an absence not involving an absence overnight from the usual place of residence of four hours
- (a) the whole of which is before 11.00 a.m. (Breakfast Allowance) £4.
 - (b) which includes the whole of the period between 12 noon and 2.00 p.m. (Lunch Allowance) £6.
 - (c) which includes the whole of the period between 3.00 p.m. and 6.00 p.m. (Tea Allowance) £2.
 - (d) which extends beyond 7.00 p.m. (Evening Meal Allowance) £8.

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

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

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

Standard rate of £32.50 per day.

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

Class Ticket type Start date
STD DAY RANGER 09·NOV·07 £3·50M

Valid until
09·NOV·07 0024e2599N52

Issued at
BOLTON *
Available
G M RAIL RANGER
Valid
AS ADVERTISED·ONEDAY



Class Ticket type Adult Child
STD STD DAY RETURN ONE NIL RTN

Start Date
16·NOV·07 60084 0055e2777N51

From MANCHESTER CTLZ Valid until 16·NOV·07 Disc Price
To DAISY HILL * ANY PERMITTED ON DATE SHOWN £5·65M

Validity
ON DATE SHOWN



Class Ticket type Adult Child
STD STD DAY RETURN ONE NIL OUT

Start Date
16·NOV·07 60084 0055e2777N51

From DAISY HILL * Valid until 16·NOV·07 Disc Price
To MANCHESTER CTLZ ANY PERMITTED ON DATE SHOWN £5·65M

Validity
ON DATE SHOWN



Class Ticket type Adult Child
STD STD DAY RETURN ONE NIL RTN

Start Date
23·NOV·07 61048 0055e2777N51

From MANCHESTER CTLZ Valid until 23·NOV·07 Disc Price
To DAISY HILL * ANY PERMITTED ON DATE SHOWN £5·65X

Validity
ON DATE SHOWN



Class Ticket type Adult Child
STD STD DAY RETURN ONE NIL OUT

Start Date
23·NOV·07 61048 0055e2777N51

From DAISY HILL * Valid until 23·NOV·07 Disc Price
To MANCHESTER CTLZ ANY PERMITTED ON DATE SHOWN £5·65X

Validity
ON DATE SHOWN



WOODWARD

Members' Allowances Claim

Bolton Council

Name	Cllr Mary Woodward	Home Address	33 Lincoln Avenue, Little Lever, Bolton BL3 1EX	Pay No.	
Car Make/Model	CITROEN	Registration		Exact CC	9982
				Month	Sept 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

Signed		Member	Date	26.11.07
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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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Subsistence T		Total Miles	64 + 48 = 112
Subsistence NT		For Payroll Use Only	
Expenses NT			
Carer's Allowance		Input by	CM
		Date	30.11.07

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
8-Oct-2007	Development and Regeneration PDG	18:00	19:30	8	£	p	£	p	£	p
8-Oct-2007	Housing PDG - Home to Town Hall	15:00	16:00	8	£	p	£	p	£	p
16-Oct-2007	Site Vist - Home to Town Hall	11:00	12:30	8	£	p	£	p	£	p
18-Oct-2007	Planning and Visits - Home to TH	9:30	17:00	8	£	p	£	p	£	p
22-Oct-2007	Agenda - Home to Town Hall	10:30	11:30	8	£	p	£	p	£	p
22-Oct-2007	Planning Improvement - Home to Town Hall	14:00	15:00	8	£	p	£	p	£	p
24-Oct-2007	Council - Home to Town Hall	19:00	21:00	8	£	p	£	p	£	p
31-Oct-2007	Positive Action - Home to Town Hall	16:00	17:00	8	£	p	£	p	£	p
					£	p	£	p	£	p
					£	p	£	p	£	p
					£	p	£	p	£	p
					£	p	£	p	£	p
					£	p	£	p	£	p

Total Miles	64	Total Amount		Total Amount		Total Amount	
		£	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

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

PAID

Members' Allowances Claim

BOLTON

Bolton Council

PAYROLL

Name Cllr Mary Woodward	Home Address 33 Lincoln Avenue, Little Lever, Bolton, BL3 1EX	Pay No.		
Car Make/Model CITROEN	Registration	Exact CC 998 cc	Month Sept	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

Signed	Member	Date 26.4.07
I certify that I have examined this allowance sheet, the figures recorded are reasonable, and the expense was necessary.		
Authorised	Members' Services	Date

Subsistence T	Total Miles 48
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	Subsistence Allowance	Fares and Other Expenses	Dependent Carers Allowance
		Departure	Return		£ p	£ p	£ p
1-Nov-2007	Planning - Home to Town Hall	9:00	17:00	8	£ p	£ p	£ p
2-Nov-2007	Agenda - Home to Town Hall	10:30	11:30	8	£ p	£ p	£ p
5-Nov-2007	Housing PDG - Home to Town Hall	9:00	10:30	8	£ p	£ p	£ p
7-Nov-2007	Kearsley Panel	10:00	12:00	8	£ p	£ p	£ p
12-Nov-2007	Development and Regeneration PDG	15:00	16:00	8	£ p	£ p	£ p
15-Nov-2007	Planning - Home to Town Hall	10:00	16:00	8	£ 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 Miles 48	Total Amount	Total Amount	Total Amount
	£ 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

Members' Allowances Claim

Bolton Council

PAYROLL SECTION

Name Cllr Mary Woodward	Home Address 33, Lincoln Ave Little Lever, Bolton BL3 1EX	Pay No. [REDACTED]
Car Make/Model Citroen c1	Registration [REDACTED]	Exact CC 998
		Month Jan 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

Signed [REDACTED] Member	Date 31 st March 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
--	-------------

Subsistence T	Total Miles	168
Subsistence NT	For Payroll Use Only	
Expenses NT		
Carer's Allowance	Input by	
	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	£	p
3 rd Jan	site visit	10:00	11:30	8	£	p	£	p	£	p
9 th Jan	forum members	17:00	18:00	8	£	p	£	p	£	p
10 th Jan	planning	9:15	17:00	8	£	p	£	p	£	p
11 th Jan	planning agenda	10:30	11:30	8	£	p	£	p	£	p
15 th Jan	licensing	14:00	15:00	8	£	p	£	p	£	p
24 th Jan	planning	9:30	17:00	8	£	p	£	p	£	p
25 th Jan	planning agenda	10:30	11:30	8	£	p	£	p	£	p
28 th Jan	housing PDG	8:30	9:15	8	£	p	£	p	£	p
28 th Jan	development and regen	18:00	19:15	8	£	p	£	p	£	p
					£	p	£	p	£	p
					£	p	£	p	£	p
					£	p	£	p	£	p
					£	p	£	p	£	p

Total Miles	72
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Total Amount	Total Amount	Total Amount
£ p	£ p	£ p

Number of Additional Sheets Used	0
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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

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

month 3
sc

^{Wtd} Members' Allowances Claim

Bolton Council

Name	Cllr Mary Woodward	Home Address	33 Lincoln Ave Little Lever Bolton BL3 1EX			Pay No.	[REDACTED]		
Car Make/Model	Citroen c1	Registration	[REDACTED]	Exact CC	998	Month	Feb	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	
Subsistence NT		For Payroll Use Only	
Expenses NT		Input by	
Carer's Allowance		Date	

Signed	[REDACTED]	Date	31 st March 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
		Departure	Return	
4 th Feb	development and regen PDG	10:30	11:30	8
6 th Feb	positive action	15:00	16:45	8
7 th Feb	planning	9:30	17:00	8
8 th Feb	planning agenda	10:30	11:15	8
21 st Feb	planning	9:30	17:00	8
27 th Feb	council	19:00	22:45	8

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
£ p	£ p	£ p
£ p	£ p	£ p
£ p	£ p	£ p
£ p	£ p	£ p
£ p	£ p	£ p
£ p	£ p	£ p

Total Miles	48	Total Amount	£ 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

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

Number of Additional Sheets Used 0

sc mon 3

Members' Allowances Claim

Bolton Council

Name Cllr Mary Woodward	Home Address 33, Lincoln Ave Little Lever Bolton BL3 1EX	Pay No.
Car Make/Model Citroen c1	Registration [redacted]	Exact CC 998
Month March		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

Signed [redacted] Member	Date 31st March 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

Subsistence T		Total Miles	
Subsistence NT		For Payroll Use Only	
Expenses NT			
Carer's Allowance		Input by	
		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	£	p
3 rd March 08	sustainable development	9:30	10:45	8	£	p	£	p	£	p
5 th 08	site visit	13:00	14:15	8	£	p	£	p	£	p
6 th 08	planning	9:30	16:30	8	£	p	£	p	£	p
10 th 08	development and regen	15:00	16:30	8	£	p	£	p	£	p
17 th 08	housing PDG	9:00	10:30	8	£	p	£	p	£	p
20 th 08	planning	9:30	5:00	8	£	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
48				£	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

see member 3

ZAMAN

PAID

BOLTON METROPOLITAN BOROUGH COUNCIL

MEMBERS ALLOWANCES CLAIM

Claim for Month of June 2007

Name of Member AKHTAR ZAMAN

Pay No. [REDACTED]

(Block capitals please)

Car (Make / Model) Mercedes Benz C220

Registration No. [REDACTED]

Exact Cubic Capacity 2155 cc.

Home Address _____

DECLARATION:

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

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

(b) I am the holder of a current driving licence and have adequate insurance cover for the use of my vehicle on Council business. *(For Car Allowance claimants only)*

Signed [REDACTED]

MEMBER

Date 22/07/07

Approved [REDACTED]

Date _____

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

	Amount £ : p		Miles	
* Subsistence Allowance	:	Normal Mileage	175	Details input onto Payroll system: By: <u>cm</u> Date: <u>24.7.07</u>
Subsistence Allowance <i>(Taxable)</i>	<u>6</u> : <u>77</u>		<u>17.00</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.

BOLTON METROPOLITAN BOROUGH COUNCIL

MEMBERS ALLOWANCES CLAIM

Claim for Month of July 2007 Name of Member Akhtar Zaman Pay No. [REDACTED]
 (Block capitals please)
 Car (Make/Model) Mercedes Benz C220 Registration No. [REDACTED] Exact Cubic Capacity 2155 cc.
 Home Address 131 MAYOR ST BOLTON BL1 4SJ

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 31/07/07
 Approved [REDACTED] Date _____

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

	Amount £ : p		Miles	
* Subsistence Allowance	:	Normal Mileage	27	Details input onto Payroll system: By: <u>CM</u> Date: <u>29.10.07</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.

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
02/07/07	Home to Town Hall (Exec D+R)	10.00	12.30	Car	1						
02/07/07	Home to Town Hall (The Exec)	2.30	4.00	Car	1						
02/07/07	Home to Town Hall (D+R Scrutiny Cttee)	5.45	8.30	Car	1						
04/07/07	Home to Reflection Restaurant De Wivre Hotel (Return)	7.15	9.00	Car	9						
07/07/07	Home to Town Hall (Return) Civic Dinner	9.15	10.00	Car	1						
09/07/07	Home to Town Hall (Return)	9.15	2.00	Car	1						
11/07/07	Home to Town Hall (Return) Full Council	6.30	9.30	Car	1						
16/07/07	Home to Town Hall (Return)	9.00	10.00	Car	1						
16/07/07	Home to Reebok Stadium (Return) (Tourism Seminar)	10.15	11.15	Car	9						
23/07/07	Home to Town Hall (Return)	8.50	4.00	Car	1						
30/07/07	Home to Town Hall (Return)		5.00	Car	1						
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Deduct any amounts received by way of Travelling & Subsistence from any other Authorities or bodies on the above dates and give particulars

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

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