

HALL

# Members' Allowances Claim

# Bolton Council

|                |                 |              |                               |          |            |
|----------------|-----------------|--------------|-------------------------------|----------|------------|
| Name           | WALTER HALL     | Home Address | 2 SANDOWN RD - HARWOOD BOLTON | Pay No.  | ██████████ |
| Car Make/Model | CITROEN PICASSO | Registration | ██████                        | Exact CC | 15 87 CC   |
|                |                 |              |                               | Month    | MAY 2008   |

I certify that:-

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

### FOR MEMBERS' SERVICES USE ONLY

|                   |  |                             |  |
|-------------------|--|-----------------------------|--|
| Subsistence T     |  | Total Miles                 |  |
| Subsistence NT    |  | <b>For Payroll Use Only</b> |  |
| Expenses NT       |  | Input by                    |  |
| Carer's Allowance |  | Date                        |  |

|        |            |        |      |           |
|--------|------------|--------|------|-----------|
| Signed | ██████████ | Member | Date | 3 JUNE 08 |
|--------|------------|--------|------|-----------|

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

|            |            |                   |      |  |
|------------|------------|-------------------|------|--|
| Authorised | ██████████ | Members' Services | Date |  |
|------------|------------|-------------------|------|--|

| Date    | Reason for Journey<br>(including From and To) | Time of   |        | Miles<br>Claimed |
|---------|---|-----------|--------|------------------|
|         |   | Departure | Return |                  |
| 21-5-08 | COUNCIL MEETING FROM HOME TO (TH)             | 6pm       | 7:45   | 6                |
| 27-5-08 | AREA WORKING INFO MEETING (TH)                | 6pm       | 8pm    | 6                |
| 15-5-08 | PLANNING HOME TO (TH)                         | 12-00     | 5-30   | 6                |
| 28-5-08 | PLANNING SITE VISITS HOME TO (TH)             | 9am       | 12-30  | 6                |
| 29-5-08 | PLANNING MEETING HOME TO (TH)                 | 9am       | 5-30   | 6                |
|         |   |           |        |                  |
|         |   |           |        |                  |
|         |   |           |        |                  |
|         |   |           |        |                  |
|         |   |           |        |                  |
|         |   |           |        |                  |
|         |   |           |        |                  |

| Subsistence Allowance | Fares and Other Expenses | Dependent Carers Allowance |
|-----------------------|--------------------------|----------------------------|
| £ p                   | £ p                      | £ p                        |
| £ p                   | £ p                      | £ p                        |
| £ 4.00p               | £ p                      | £ p                        |
| £ p                   | £ p                      | £ p                        |
| £ 4.00p               | £ p                      | £ p                        |
| £ p                   | £ p                      | £ p                        |
| £ p                   | £ p                      | £ p                        |
| £ p                   | £ p                      | £ p                        |
| £ p                   | £ p                      | £ p                        |
| £ p                   | £ p                      | £ p                        |
| £ p                   | £ p                      | £ p                        |

|             |              |              |              |
|-------------|--------------|--------------|--------------|
| Total Miles | Total Amount | Total Amount | Total Amount |
| 30          | £ 3 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  
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

*month 3*

# Members' Allowances Claim

# Bolton Council

|                                       |   |  |
|---------------------------------------|---|--|
| Name <b>WALTER HALL</b>               | Home Address <b>2 SANDOWN RD - HARWOOD - BOLTON B22 3QB</b> | Pay No. / <b>[REDACTED]</b>                            |
| Car Make/Model <b>CITROEN PICASSO</b> | Registration <b>[REDACTED]</b>                              | Exact CC <b>15.87 cc</b> Month <b>JUNE / JULY 2008</b> |

- 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.

15829

### FOR MEMBERS' SERVICES USE ONLY

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

Signed **[Signature]** Member Date **4 AUG 08**

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

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

| Date    | Reason for Journey (including From and To)             | Time of   |        | Miles Claimed |
|---------|--|-----------|--------|---------------|
|         |  | Departure | Return |               |
| 18 JUNE | HOME TO TOWN HALL - HEALTH AND CARE SOCIAL             | 1-30      | 3-45   | 6             |
| 23 JUNE | HOME TO TOWN HALL - DIANEY IN CARE ACTION PLAN         | 9am       | 4pm    | 6             |
| 24 JUNE | HOME TO TOWN HALL - ADULTS SERVICES                    | 5-30      | 8pm    | 6             |
| 26 JUNE | HOME TO TOWN HALL - PLANNING                           | 8-30      | 5-45   | 6             |
| 3 JULY  | HOME TO TOWN HALL - SINGLE LOCAL JOINT CONSULTATIVE    | 4pm       | 5-30   | 6             |
| 9 JULY  | HOME TO TOWN HALL - PLANNING                           | 8-30      | 5pm    | 6             |
| 9 JULY  | BLIND MANAGEMENT COMMITTEE CASTLE ST                   | 7pm       | 9-30   | 7             |
| 14 JULY | HOME TO TOWN HALL - HEALTH AND SOCIAL CARE PRG         | 12-30     | 2-30   | 6             |
| 22 JULY | HOME TO SMITHILLS HALL - WEST PENNINE INCORP COMMITTEE | 10-30     | 4pm    | 7             |
| 24 JULY | HOME TO TOWN HALL - PLANNING                           | 8-30      | 5-15   | 6             |

| 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                        |
| £4 p                  | £ p                      | £ p                        |
| £ p                   | £ p                      | £ p                        |
| £ p                   | £ p                      | £ p                        |
| £ p                   | £ p                      | £ p                        |
| £4 p                  | £ p                      | £ p                        |
| £ p                   | £ p                      | £ p                        |
| £ p                   | £ p                      | £ p                        |
| Total Amount          | Total Amount             | Total Amount               |

Total Miles **62**

£8 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

|                                       |  |                          |
|---------------------------------------|--|--------------------------|
| Name <u>WALTER HALL</u>               | Home Address <u>2 SANDOWN RD - HARWOOD BOLTON BL23QB</u> | Pay No.                  |
| Car Make/Model <u>CITROEN PICASSO</u> | Registration   | Exact CC <u>15-87</u>    |
|                                       |  | Month <u>AUGUST 2008</u> |

- 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 <u>3 OCT 2008</u> |
|--------|--------|------------------------|

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          |
| Subsistence NT    | For Payroll Use Only |
| Expenses NT       |                      |
| Carer's Allowance | Date                 |

| Date 2008 | Reason for Journey (including From and To)        | Time of          |        | Miles Claimed |
|-----------|---|------------------|--------|---------------|
|           |   | Departure        | Return |               |
| 4 AUG     | ADULTS AGENDA HOME TO TH                          | 10-30            | 12-30  | 6             |
| 5 AUG     | SCRUTINY CHAIRS HOME TO TH                        | 5 PM             | 7 PM   | 6             |
| 6 AUG     | PRESENTATION PLANNING HOME TO TH                  | <del>12-30</del> | 2-15   | 6             |
| 7 AUG     | PLANNING HOME TO TH                               | 9 AM             | 4-30   | 6             |
| 12 AUG    | HEALTH + SOCIAL CARE PDG HOME TO TH               | 10 AM            | 12 00  | 6             |
| 12 AUG    | ADULTS SERVICES SCRUTINY HOME TH                  | 5-30             | 8 00   | 6             |
| 18 AUG    | AREA WORKING Big ISSUES HOME TO TH                | 1- PM            | 3-30   | 6             |
| 19 AUG    | TRAINING REVUE ROUTH SEDDON HOME TO TH            | 1 PM             | 2-30   | 6             |
| 21 AUG    | PLANNING HOME TO TH                               | 9 AM             | 4-30   | 6             |
| 27 AUG    | MEETING OF COUNCIL                                | 6-30             | 10 30  | 6             |
| 28 AUG    | TOWN CENTRE TRANSPORT PLAN HOME TO TH             | 4 PM             | 5 15   | 6             |
| 28 AUG    | CEN TR FOR BLIND MANAGEMENT HOME TO CHARLY STREET | 7 PM             | 9-15   | 6             |

| Subsistence Allowance | Fares and Other Expenses | Dependent Carers Allowance |
|-----------------------|--------------------------|----------------------------|
| £ p                   | £ p                      | £ p                        |
| £ p                   | £ p                      | £ p                        |
| £ p                   | £ p                      | £ p                        |
| £ 4-                  | £ p                      | £ p                        |
| £ p                   | £ p                      | £ p                        |
| £ p                   | £ p                      | £ p                        |
| £ p                   | £ p                      | £ p                        |
| £ p                   | £ p                      | £ p                        |
| £ p                   | £ p                      | £ p                        |
| £ p                   | £ p                      | £ p                        |
| £ p                   | £ p                      | £ p                        |
| £ p                   | £ p                      | £ p                        |
| £ p                   | £ p                      | £ p                        |
| £ p                   | £ p                      | £ p                        |
| £ p                   | £ p                      | £ p                        |
| £ p                   | £ p                      | £ p                        |
| £ p                   | £ p                      | £ p                        |
| £ p                   | £ p                      | £ p                        |
| £ p                   | £ p                      | £ p                        |
| £ p                   | £ p                      | £ p                        |
| £ p                   | £ p                      | £ p                        |
| £ p                   | £ p                      | £ p                        |
| £ p                   | £ p                      | £ p                        |
| Total Amount          | Total Amount             | Total Amount               |
| £ 16. p               | £ p                      | £ p                        |

Total Miles  
**72**

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

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

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

# Members' Allowances Claim

# Bolton Council

Name WALTER HALL Home Address 2 SANDOWN RD HARWOOD BOLTON B223Q Pay No [REDACTED]  
 Car Make/Model CITROEN PICASSO Registration [REDACTED] Exact CC 15 87 Month SEPTEMBER 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.  
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 (f) The particulars inserted on this form are correct, and I understand that fraudulent claims may result in disciplinary action.

*On file  
 add notes*

### FOR MEMBERS' SERVICES USE ONLY

Signed [REDACTED] Member Date 3 OCT 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

|                   |  |                             |  |
|-------------------|--|-----------------------------|--|
| Subsistence T     |  | Total Miles                 |  |
| Subsistence NT    |  | <b>For Payroll Use Only</b> |  |
| Expenses NT       |  | Input by                    |  |
| Carer's Allowance |  | Date                        |  |

| Date       | Reason for Journey (including From and To) | Time of   |        | Miles Claimed |
|------------|--|-----------|--------|---------------|
|            |  | Departure | Return |               |
| 1 SEP 2008 | HEALTH + ADULTS SOC CARE POR.              | 10 AM     | 12.30  | 6             |
| 3 SEP      | AREA FORUM                                 | 6 PM      | 9.30   | 6             |
| 4 SEP      | PLANNING HOME TO T.H                       | 9 AM      | 5 PM   | 6             |
| 15 SEP     | SINGLE STATUS TASK GROUP HOME TO TH        | 2 PM      | 3.30   | 6             |
| 17 SEP     | PRESENTATION CHURCH WARF HOME TO TH        | 12.30     | 2.30   | 6             |
| 18 SEP     | PLANNING HOME TO T.H                       | 9 AM      | 4.30   | 6             |
| 19 SEP     | SINGLE LOCAL JOINT CONSULTATIVE HOME TO TH | 9 AM      | 11.45  | 6             |
| 24 SEP     | ADULT SCRUTINY AGENDA MEETING              | 1.30      | 3 PM   | 6             |
| 25 SEP     | BOLTON TRANSPORT PARTNERSHIP               | 9.30      | 12.30  | 6             |
| 24 SEP     | PAY + GRADING BRIEFING                     | 3.30      | 5 PM   | 6             |

| Subsistence Allowance | Fares and Other Expenses | Dependent Carers Allowance |
|-----------------------|--------------------------|----------------------------|
| £ p                   | £ p                      | £ p                        |
| £ p                   | £ p                      | £ p                        |
| £4 p                  | £ p                      | £ p                        |
| £ p                   | £ p                      | £ p                        |
| £ p                   | £ p                      | £ p                        |
| £4 p                  | £ p                      | £ p                        |
| £ p                   | £ p                      | £ p                        |
| £ p                   | £ p                      | £ p                        |
| £ p                   | £ p                      | £ p                        |
| £ p                   | £ p                      | £ p                        |
| £ p                   | £ p                      | £ p                        |
| £ p                   | £ p                      | £ p                        |
| £ p                   | £ p                      | £ p                        |
| £ p                   | £ p                      | £ p                        |
| £ p                   | £ p                      | £ p                        |
| Total Amount          | Total Amount             | Total Amount               |
| £ p                   | £ p                      | £ p                        |

Total Miles 54

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

Number of Additional Sheets Used

# Members' Allowances Claim

# Bolton Council

Name WALTER HALL Home Address 2 SANDOWN RD - HARWOOD - BOLTON Pay No. [REDACTED]  
BL23 9JF  
 Car Make/Model CITROEN PICASSO Registration [REDACTED] Exact CC 15 87 CC Month OCT 2008

I certify that:-

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

### FOR MEMBERS' SERVICES USE ONLY

|                   |      |                             |          |
|-------------------|------|-----------------------------|----------|
| Subsistence T     |      | Total Miles                 | 100 ✓    |
| Subsistence NT    | 20 ✓ | <b>For Payroll Use Only</b> |          |
| Expenses NT       |      | Input by                    | CM       |
| Carer's Allowance |      | Date                        | 23.12.08 |

Signed [REDACTED] Member Date 8 DEC 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<br>(including From and To) | Time of   |        | Miles<br>Claimed | Subsistence<br>Allowance | Fares and<br>Other Expenses | Dependent<br>Carers Allowance |
|---------------------|---|-----------|--------|------------------|--------------------------|-----------------------------|-------------------------------|
|                     |   | Departure | Return |                  |                          |                             |                               |
| 2 <sup>ND</sup> OCT | PLANNING                                      | 9 AM      | 5 PM   | 6                | £ 4 p                    | £ p                         | £ p                           |
| 6 OCT               | BOLTON WISE BOARD                             | 9 AM      | 12 PM  | 6                | £ p                      | £ p                         | £ p                           |
| 7 OCT               | AGENDA MEETING ADULTS SERVICES                | 5-30      | 8 PM   | 6                | £ p                      | £ p                         | £ p                           |
| 16 OCT              | PLANNING ADULTS SERVICES                      | 9 AM      | 5-30   | 6                | £ 4 p                    | £ p                         | £ p                           |
| 21 OCT              | FORUM MEMBERS MEETING                         | 2-30      | 4-15   | 6                | £ p                      | £ p                         | £ p                           |
| 22 OCT              | TRAINING ENVIRONMENT SUSTAIN                  | 4-30      |        |                  | £ p                      | £ p                         | £ p                           |
|                     | COUNCIL MEETING                               | 7 PM      | 10 PM  | 6                | £ p                      | £ p                         | £ p                           |
| 23 OCT              | PLANNING TRAINING / JOINT CONSULTATIVE        | 8-45      | 2-30   | 6                | £ p                      | £ p                         | £ p                           |
| 28 OCT              | BOLTON AT HOME - BRIGIATMET NORTH PANEL       | 1-30      | 4 PM   | 4                | £ p                      | £ p                         | £ p                           |
| 30 OCT              | PLANNING                                      | 8-45      | 4-30   | 6                | £ 4 p                    | £ p                         | £ p                           |
|                     |   |           |        |                  | £ p                      | £ p                         | £ p                           |
|                     |   |           |        |                  | £ p                      | £ p                         | £ p                           |

Total Miles

52

|              |              |              |
|--------------|--------------|--------------|
| Total Amount | Total Amount | Total Amount |
| £ 12 00p     | £ 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

1

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

# Members' Allowances Claim

# Bolton Council

Name WALTER HALL Home Address 2 SANDOWN RD HARWOOD-BOLTON BL2 3QB Pay No. [REDACTED]  
 Car Make/Model CITROEN PICASSO Registration [REDACTED] Exact CC [REDACTED] Month NOV 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. 15829  
 (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.  
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 (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          | 48 |
| Subsistence NT    | 8.00 | For Payroll Use Only |    |
| Expenses NT       |      |                      |    |
| Carer's Allowance |      | Input by             |    |
|                   |      | Date                 |    |

Signed [REDACTED] Member Date 8 DEC 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 |               |
| 5 <sup>th</sup> NOV | HEALTH ADULTS AND CARE                     | 12.45     | 3-30   | 6             |
| 10 NOV              | TRAINING (STANDARDS)                       | 4-30      | 7-30   | 6             |
| 13 NOV              | PLANNING                                   | 9.45      | 4pm    | 6             |
| 19 NOV              | ADULTS AGENDA MEETING                      | 1-30      | 4pm    | 6             |
| 25 NOV              | HEALTH ADULTS SOCIAL CARE                  | 10.00     | 11-30  | 6             |
| " "                 | T-F MEETING                                | 7pm       | 9-15   | 6             |
| 27 NOV              | PLANNING                                   | 9.45      | 4-15   | 6             |
| " "                 | CENTRE FOR BLIND MANAGEMENT                | 7pm       | 9-30   | 6             |
|                     |  |           |        |               |
|                     |  |           |        |               |
|                     |  |           |        |               |
|                     |  |           |        |               |
|                     |  |           |        |               |
|                     |  |           |        |               |

| Subsistence Allowance | Fares and Other Expenses | Dependent Carers Allowance |
|-----------------------|--------------------------|----------------------------|
| £ p                   | £ p                      | £ p                        |
| £ p                   | £ p                      | £ p                        |
| £ 4 p                 | £ p                      | £ p                        |
| £ p                   | £ p                      | £ p                        |
| £ p                   | £ p                      | £ p                        |
| £ 4 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 £ 8 p Total Amount £ p Total Amount £ 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

|                |                 |              |                             |          |             |
|----------------|-----------------|--------------|-----------------------------|----------|-------------|
| Name           | WALTER HALL     | Home Address | 2 SANDOWN RD HARWOOD BOLTON | Pay No   | [REDACTED]  |
| Car Make/Model | CITROEN PICASSO | Registration | [REDACTED]                  | Exact CC | 15-87 cc    |
|                |                 |              |                             | Month    | Dec 31 2008 |

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

|  |            |                   |      |           |
|--|------------|-------------------|------|-----------|
| Signed   | [REDACTED] | Member            | Date | 20/1/09.  |
| I certify that I have examined this allowance sheet, the figures recorded are reasonable, and the expense was necessary. |            |                   |      |           |
| Authorised   | [REDACTED] | Members' Services | Date | 27/01/09. |

|                                       |  |                             |         |
|---------------------------------------|--|-----------------------------|---------|
| <b>FOR MEMBERS' SERVICES USE ONLY</b> |  |                             |         |
| Subsistence T                         |  | Total Miles                 |         |
| Subsistence NT                        |  | <b>For Payroll Use Only</b> |         |
| Expenses NT                           |  | Input by                    | CM      |
| Carer's Allowance                     |  | Date                        | 27.1.09 |

| Date      | Reason for Journey<br>(including From and To) | Time of   |        | Miles Claimed | Subsistence Allowance | Fares and Other Expenses |   | Dependent Carers Allowance |   |
|-----------|---|-----------|--------|---------------|-----------------------|--------------------------|---|----------------------------|---|
|           |   | Departure | Return |               |                       |                          |   |                            |   |
| 10 DEC 08 | COUNCIL MEETING                               | 6-15      | 9PM.   | 6             | £                     | p                        | £ | p                          | £ |
| 11 DEC 08 | PLANNING                                      | 9AM       | 5PM    | 6             | £4.                   | p                        | £ | p                          | £ |
| 16 DEC 08 | EXECUTIVE (SUB)                               | 1PM       | 3:30   | 6             | £                     | p                        | £ | p                          | £ |
| 17 DEC 08 | FORUM MEMBER MEETING                          | 12-30     | 3:45   | 6             | £                     | p                        | £ | p                          | £ |
| 18 DEC 08 | SINGLE STATUS TASK GROUP                      | 12-30     | 3:30   | 6             | £                     | p                        | £ | p                          | £ |
|           |   |           |        |               | £                     | p                        | £ | p                          | £ |
|           |   |           |        |               | £                     | p                        | £ | p                          | £ |
|           |   |           |        |               | £                     | p                        | £ | p                          | £ |
|           |   |           |        |               | £                     | p                        | £ | p                          | £ |
|           |   |           |        |               | £                     | p                        | £ | p                          | £ |
|           |   |           |        |               | £                     | p                        | £ | p                          | £ |
|           |   |           |        |               | £                     | p                        | £ | p                          | £ |
|           |   |           |        |               | £                     | p                        | £ | p                          | £ |

|  |  |  |  |             |        |              |              |              |
|--|--|--|--|-------------|--------|--------------|--------------|--------------|
| Please only enter the number of miles. Do not calculate an amount for payment. |  |  |  | Total Miles | 30     | Total Amount | Total Amount | Total Amount |
|  |  |  |  |             | £4 00p | £            | p            | £            |

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



# Members' Allowances Claim

# Bolton Council

Name WALTER HALL Home Address 2 SANDOWN RD - HARWOOD BOLTON Pay No.

Car Make/Model CITROEN-PIASSO Registration Exact CC 15.87 CC Month JAN 2009

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.

Signed Member Date 1<sup>st</sup> AP 2009

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

Authorised Services Date 2/4/09

|                   |  |                             |  |
|-------------------|--|-----------------------------|--|
| Subsistence T     |  | Total Miles                 |  |
| Subsistence NT    |  | <b>For Payroll Use Only</b> |  |
| 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 |
| 9 JAN  | PLANNING                                   | 9pm       | 5pm    | 6             | £4                    | p | £                        | p | £                          | p |
| 12 JAN | HEALTH ADULT + SOCIAL CARE                 | 9:30      | 12pm   | 6             | £                     | p | £                        | p | £                          | p |
| 14 JAN | SINGLE LOCAL JOINT CONSULTATIVE            | 1-30      | 4pm    | 6             | £                     | p | £                        | p | £                          | p |
| 15 JAN | FORUM MEMBER MEETING                       | 12:30     | 3:30   | 6             | £                     | p | £                        | p | £                          | p |
| 22 JAN | PLANNING                                   | 8:45      | 5:30   | 6             | £4                    | p | £                        | p | £                          | p |
| 28 JAN | ADULTS SERVICES AGENDA MEETING             | 9 PM      | 11:30  | 6             | £                     | p | £                        | p | £                          | p |
| 29 JAN | TRAINING (PLANNING)                        | 11:30     | 2:30   | 6             | £                     | p | £                        | p | £                          | p |
| 30 JAN | WARD SURGERY                               | 7pm       | 9:30   | 4             | £                     | 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               |   |
|        |  |           |        | <b>46</b>     | £8                    | 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

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

Number of Additional Sheets Used

# Members' Allowances Claim

# Bolton Council

Name WALTER HALL Home Address 2 SANDOWN RD HARWOOD - BOLTON Pay No. [REDACTED]  
 Car Make/Model CITROEN PICASSO Registration [REDACTED] Exact CC 15.87 cc Month FEB 2009

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.
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- (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 1<sup>st</sup> AP 2009

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

Authorised [REDACTED] Members' Services Date 2/4/09

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

| Date   | Reason for Journey<br>(including From and To) | Time of   |        | Miles<br>Claimed |
|--------|---|-----------|--------|------------------|
|        |   | Departure | Return |                  |
| 2 FEB  | BOLTON WISE BOARD MEETING                     | 8-30      | 12-30  | 6                |
| 4 FEB  | AREA FORUM                                    | 6-PM      | 9-30   | 4                |
| 9 FEB  | TRANSPORT PARTNERSHIP                         | 11-30     | 2-30   | 6                |
| 10 FEB | ADULT SERVICES SCRUTINY                       | 5-15      | 7-45   | 6                |
| 12 FEB | CENTRE FOR BLIND MANAGEMENT                   | 7pm       | 9-30   | 6                |
| 17 FEB | HEALTH-ADULTS-CARE-CULTURE P.D.G              | 12-30     | 3-30   | 6                |
| 19 FEB | PLANNING                                      | 8-45      | 4-45   | 6                |
| 23 FEB | EX MEMBER-HEALTH ADULT SOL CARE               | 8-45      | 12-30  | 6                |
| 25 FEB | COUNCIL MEETING (BUDGET)                      | 6 PM      | 9 PM   | 6                |
| 27 FEB | WARD SURGERY                                  | 7pm       | 9-30   | 4                |
| 05 FEB | PLANNING                                      | 9 AM      | 5pm    | 6                |

| 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                        |
| £4 p                  | £ p                      | £ p                        |
| £ p                   | £ p                      | £ p                        |
| £ p                   | £ p                      | £ p                        |
| £4 p                  | £ p                      | £ p                        |
| £ p                   | £ p                      | £ p                        |

Total Miles 62 Total Amount £8 p £ Total Amount £ p £ Total Amount £ 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 Shared Service Centre, 5th Floor, Paderborn House, Bolton BL1 1JW

# Members' Allowances Claim

# Bolton Council

Name WALTER HALL Home Address 2 SANDOWN RD - HARWOOD BOLTON Pay No. [REDACTED]  
 Car Make/Model CITROEN CASSO Registration [REDACTED] Exact CC 15.87 cc Month MAR 2009

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

Signed [REDACTED] Member Date 1<sup>st</sup> AP 2009  
 I certify that I have examined this allowance sheet, the figures recorded are reasonable, and the expense was necessary.

Authorised [REDACTED] Members' Services Date 2/4/09

**FOR MEMBERS' SERVICES USE ONLY**

|                   |    |                             |        |
|-------------------|----|-----------------------------|--------|
| Subsistence T     | 24 | Total Miles                 | 170    |
| Subsistence NT    |    | <b>For Payroll Use Only</b> |        |
| Expenses NT       |    | Input by                    | CMJ    |
| Carer's Allowance |    | Date                        | 2.4.09 |

| Date   | Reason for Journey (including From and To)         | Time of   |        | Miles Claimed |    |
|--------|--|-----------|--------|---------------|----|
|        |  | Departure | Return |               |    |
| 2 MAR  | DEV-REGEN-HEALTH SOC CARE                          | 4 PM      | 6-15   | 6             |    |
| 4 MAR  | BREIGHTMET PARTNERSHIP BOLTON 27 HOME              | 2 PM      | 4 PM   | 6             |    |
| 4 MAR  | COUNCIL MEETING                                    | 6-30      | 10-30  | 6             |    |
| 5 MAR  | PLANNING   | 9-30      | 4-30   | 6             |    |
| 11 MAR | PUBLIC MEETING                                     | 6-30      | 9-30   | 4             |    |
| 18 MAR | FORUM MEMBER MEETING                               | 6 PM      | 8 PM   | 6             |    |
| 19 MAR | PLANNING   | 9-30      | 4-30   | 6             |    |
| 23 MAR | SCHOOLS PROGRAM P.D.G                              | 12-30     | 2-30   | 6             |    |
| 24 MAR | ADULTS SOCIAL CARE P.D.G                           | 12-30     | 3 PM   | 6             |    |
| 26 MAR | SINGLE STATUS TASK GROUP SINGLE JOINT CONSULTATIVE | 2-30      | 6 PM   | 6             |    |
| 27 MAR | WARD SURGERY                                       | 7 PM      | 9 PM   | 4             |    |
|        |  |           |        | Total Miles   | 62 |

| Subsistence Allowance | Fares and Other Expenses | Dependent Carers Allowance |
|-----------------------|--------------------------|----------------------------|
| £ p                   | £ p                      | £ p                        |
| £ p                   | £ p                      | £ p                        |
| £ p                   | £ p                      | £ p                        |
| £4 p                  | £ p                      | £ p                        |
| £ p                   | £ p                      | £ p                        |
| £ p                   | £ p                      | £ p                        |
| £4 p                  | £ p                      | £ p                        |
| £ p                   | £ p                      | £ p                        |
| £ p                   | £ p                      | £ p                        |
| £ p                   | £ p                      | £ p                        |
| £ p                   | £ p                      | £ p                        |
| £ p                   | £ p                      | £ p                        |
| £ p                   | £ p                      | £ p                        |
| Total Amount          | Total Amount             | Total Amount               |
| £8 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  
 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 Staff Service Centre, 5th Floor, Paderborn House Bolton BL1 1JW

Number of Additional Sheets Used

HAYES

# Members' Allowances Claim

# Bolton Council

|                                  |  |                      |                           |
|----------------------------------|--|----------------------|---------------------------|
| Name <b>ROGER HAYES</b>          | Home Address <b>4 PARK COTTAGES, SMITHILLS DEAN ROAD, BOLTON BL1 6JP</b> |                      | Pay No. <b>[REDACTED]</b> |
| Car Make/Model <b>CITROEN CS</b> | Registration <b>[REDACTED]</b>   | Exact CC <b>1997</b> | Month <b>JULY</b> 2008    |

I certify that:-

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

### FOR MEMBERS' SERVICES USE ONLY

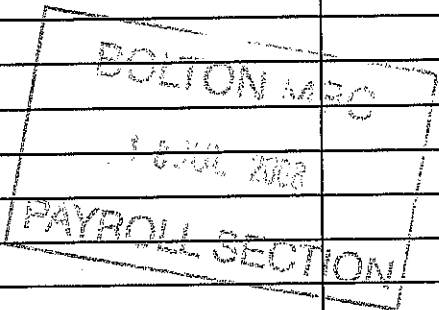
|                   |  |                             |            |
|-------------------|--|-----------------------------|------------|
| Subsistence T     |  | Total Miles                 | <b>526</b> |
| Subsistence NT    |  | <b>For Payroll Use Only</b> |            |
| Expenses NT       |  |                             |            |
| Carer's Allowance |  |                             |            |
|                   |  | Input by                    |            |
|                   |  | Date                        |            |

|                                 |                      |
|---------------------------------|----------------------|
| Signed <b>[REDACTED]</b> Member | Date <b>10/07/08</b> |
|---------------------------------|----------------------|

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

|  |                     |
|--|---------------------|
| Authorised <b>[REDACTED]</b> Members' Services | Date <b>14/7/08</b> |
|--|---------------------|

| Date     | Reason for Journey (including From and To) | Time of   |         | Miles Claimed |
|----------|--|-----------|---------|---------------|
|          |  | Departure | Return  |               |
| 30/06/08 | TRAVEL FROM BOLTON TO BOURNEMOUTH (LGA)    | 1:30 pm   |         | 263           |
| 3/07/08  | RETURN - BOURNEMOUTH TO BOLTON             | 3:30 pm   | 8:15 pm | 263           |
|          |  |           |         |               |
|          |  |           |         |               |
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|          |  |           |         |               |
|          |  |           |         |               |
|          |  |           |         |               |



| 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                        |
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| £ p                   | £ p                      | £ p                        |
| £ p                   | £ p                      | £ p                        |
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| £ p                   | £ p                      | £ p                        |
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| £ p                   | £ p                      | £ p                        |
| £ p                   | £ p                      | £ p                        |
| £ p                   | £ p                      | £ p                        |
| £ p                   | £ p                      | £ p                        |
| £ p                   | £ p                      | £ p                        |
| Total Amount          | Total Amount             | Total Amount               |
| £ p                   | £ p                      | £ p                        |

Total Miles **526**

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 **1**

HIGSON

# Members' Allowances Claim

# Bolton Council

|                |             |              |                           |          |               |
|----------------|-------------|--------------|---------------------------|----------|---------------|
| Name           | John Higson | Home Address | 1 Cairngorm Drive, Bolton | Pay No.  | [REDACTED]    |
| Car Make/Model | Citroen C5  | Registration | [REDACTED]                | Exact CC | 1997          |
|                |             |              |                           | Month    | April 20 0008 |

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.
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- (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 | 25/11/08 |
| I certify that I have examined this allowance sheet, the figures recorded are reasonable, and the expense was necessary. |                              |      |          |
| Authorised   | [REDACTED] Members' Services | Date | 05/01/09 |

|                   |  |                             |  |
|-------------------|--|-----------------------------|--|
| Subsistence T     |  | Total Miles                 |  |
| Subsistence NT    |  | <b>For Payroll Use Only</b> |  |
| Expenses NT       |  | Input by                    |  |
| Carer's Allowance |  | Date                        |  |

| Date                   | Reason for Journey<br>(including From and To) | Time of          |                  | Miles<br>Claimed |
|------------------------|---|------------------|------------------|------------------|
|                        |   | Departure        | Return           |                  |
| 8-Apr-2008             | h/a-t/a, health scrutiny                      | 9:00             | 11:00            | 6                |
| 8-Apr-2008             | h/a-t/h adult scrutiny                        | 17:30            | 19:30            | 6                |
| 16-Apr-2008            | h/a-friends mt hse, older peoples mt          | 9:30             | 11:00            | 6                |
| 17-Apr-2008            | unity house wigan - Reebok, BWFC steering gp  | 10:30            | 11:30            | 6                |
| <del>19-Apr-2008</del> | <del>h/a- w/h t/hall, surgery</del>           | <del>10:00</del> | <del>11:30</del> | <del>6</del>     |
| 23-Apr-2008            | h/a-t/h Prostitution PDG                      | 9:30             | 11:00            | 6                |
| 23-Apr-2008            | h/a-t/h Council                               | 18:00            | 22:00            | 6                |
|                        |   |                  |                  |                  |
|                        |   |                  |                  |                  |
|                        |   |                  |                  |                  |
|                        |   |                  |                  |                  |
|                        |   |                  |                  |                  |
|                        |   |                  |                  |                  |

| 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                        |
| Total Amount          | Total Amount             | Total Amount               |
| £ p                   | £ p                      | £ p                        |

Total Miles

42

36

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

# Members' Allowances Claim

# Bolton Council

|                           |  |                    |           |       |
|---------------------------|--|--------------------|-----------|-------|
| Name John Higson          | Home Address 1 Cairngorm Drive, Bolton | Pay No. [REDACTED] |           |       |
| Car Make/Model Citroen C5 | Registration [REDACTED]                | Exact CC 1997      | Month May | 20 08 |

I certify that:-

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

### FOR MEMBERS' SERVICES USE ONLY

|   |               |
|---|---------------|
| Signed [REDACTED] Member                | Date 25/11/08 |
| Authorised [REDACTED] Members' Services | Date 05/01/09 |

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

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

| Date        | Reason for Journey<br>(including From and To) | Time of   |        | Miles<br>Claimed | Subsistence |                | Fares and        |  | Dependent |  |
|-------------|---|-----------|--------|------------------|-------------|----------------|------------------|--|-----------|--|
|             |   | Departure | Return |                  | Allowance   | Other Expenses | Carers Allowance |  |           |  |
| 8-May-2008  | h/a-Harvey centre, young mums mt              | 15:30     | 17:00  | 6                | £ p         | £ p            | £ p              |  |           |  |
| 21-May-2008 | h/a-t/h, appointments mt                      | 18:30     | 19:30  | 6                | £ p         | £ p            | £ p              |  |           |  |
| 27-May-2008 | h/a-t/h, area working mt                      | 18:00     | 19:30  | 6                | £ p         | £ p            | £ p              |  |           |  |
| 28-May-2008 | h/a-t/h scrutiny work agenda                  | 16:00     | 18:00  | 6                | £ p         | £ p            | £ p              |  |           |  |
| 29-May-2008 | h/a-t/h, area working mt                      | 17:00     | 18:30  | 6                | £ 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              |  |           |  |

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

|             |
|-------------|
| Total Miles |
| 30          |

|              |              |              |
|--------------|--------------|--------------|
| Total Amount | Total Amount | Total Amount |
| £ p          | £ p          | £ p          |

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

Number of Additional Sheets Used

PAY-M1  
12.10.2007

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

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



# Members' Allowances Claim

# Bolton Council

|                |             |              |                        |          |            |
|----------------|-------------|--------------|------------------------|----------|------------|
| Name           | John Higson | Home Address | 1 Cairngorm Dr, Bolton | Pay No.  | [REDACTED] |
| Car Make/Model | Citroen C5  | Registration | [REDACTED]             | Exact CC | 1987       |
|                |             |              |                        | Month    | June 2008  |

I certify that:-

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

### FOR MEMBERS' SERVICES USE ONLY

|                   |  |                             |  |
|-------------------|--|-----------------------------|--|
| Subsistence T     |  | Total Miles                 |  |
| Subsistence NT    |  | <b>For Payroll Use Only</b> |  |
| Expenses NT       |  | Input by                    |  |
| Carer's Allowance |  | Date                        |  |

|        |            |        |      |         |
|--------|------------|--------|------|---------|
| Signed | [REDACTED] | Member | Date | 25/6/08 |
|--------|------------|--------|------|---------|

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

|            |            |                   |      |              |
|------------|------------|-------------------|------|--------------|
| Authorised | [REDACTED] | Members' Services | Date | 05   01   09 |
|------------|------------|-------------------|------|--------------|

| Date        | Reason for Journey (including From and To)     | Time of   |        | Miles Claimed | Subsistence Allowance | Fares and Other Expenses | Dependent Carers Allowance |
|-------------|--|-----------|--------|---------------|-----------------------|--------------------------|----------------------------|
|             |  | Departure | Return |               |                       |                          |                            |
| 3-Jun-2008  | mt Helen Longwoth re are working h/a - t/h     | 16:00     | 17:00  | 6             | £ p                   | £ p                      | £ p                        |
| 10-Jun-2008 | B@H brief h/a-The valley                       | 17:30     | 19:00  | 12            | £ p                   | £ p                      | £ p                        |
| 11-Jun-2008 | cycling forum h/a-t/h                          | 17:00     | 19:00  | 6             | £ p                   | £ p                      | £ p                        |
| 12-Jun-2008 | inf council mt h/a-t/h                         | 17:00     | 18:30  | 6             | £ p                   | £ p                      | £ p                        |
| 16-Jun-2008 | area forum w/h, h/a-w/h                        | 18:00     | 21:00  | 6             | £ p                   | £ p                      | £ p                        |
| 20-Jun-2008 | mt malcolm cox,Wellsprings re Scrutiny h/a-t/h | 15:00     | 16:00  | 6             | £ p                   | £ p                      | £ p                        |
| 25-Jun-2008 | Enc scrutiny mt h/a-t/h                        | 18:00     | 22:30  | 6             | £ 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          | £ 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  
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

# Members' Allowances Claim

# Bolton Council

|                           |                                     |                    |
|---------------------------|-------------------------------------|--------------------|
| Name John Higson          | Home Address 1 Cairngorm Dr, Bolton | Pay No. [REDACTED] |
| Car Make/Model Citroen C5 | Registration [REDACTED]             | Exact CC 1987      |
|                           | Month July                          | 20 08/09           |

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 3/1/09 |
|--------------------------|-------------|

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

|   |               |
|---|---------------|
| Authorised [REDACTED] Members' Services | Date 05/01/09 |
|---|---------------|

|                   |  |                             |  |
|-------------------|--|-----------------------------|--|
| Subsistence T     |  | Total Miles                 |  |
| Subsistence NT    |  | <b>For Payroll Use Only</b> |  |
| Expenses NT       |  | Input by                    |  |
| Carer's Allowance |  | Date                        |  |

| Date        | Reason for Journey (including From and To) | Time of   |        | Miles Claimed |
|-------------|--|-----------|--------|---------------|
|             |  | Departure | Return |               |
| 1-Jun-2008  | h/a - t/h Env sers PDG                     | 9:00      | 11:00  | 6             |
| 4-Jul-2008  | h/a - t/h YP sport PDG                     | 10:00     | 12:00  | 6             |
| 5-Jul-2008  | H/A W/H TOWN HALL SURGERY                  | 10:00     | 11:30  | 6             |
| 9-Jul-2008  | h/a-t/h COUNCIL                            | 18:30     | 22:00  | 6             |
| 15-Jul-2008 | H/A-T/H CULTURE AND COM SERS pdg           | 9:00      | 11:00  | 6             |
| 15-Jul-2008 | H/A-T/H ENV SCRUTINY AGENDA MT             | 15:00     | 16:00  | 6             |
| 21-Jul-2008 | H/A-T/H tif BRIEFING ch EXEC               | 17:00     | 18:00  | 6             |
|             |  |           |        |               |
|             |  |           |        |               |
|             |  |           |        |               |
|             |  |           |        |               |
|             |  |           |        |               |
|             |  |           |        |               |
|             |  |           |        |               |
|             |  |           |        |               |

| 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 |

Total Miles

42

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

36, 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



# Members' Allowances Claim

# Bolton Council

|                |             |              |                        |          |         |            |                 |
|----------------|-------------|--------------|------------------------|----------|---------|------------|-----------------|
| Name           | John Higson | Home Address | 1 Cairngorm Dr, Bolton |          | Pay No. | [REDACTED] |                 |
| Car Make/Model | Citroen C5  | Registration | [REDACTED]             | Exact CC | 1987    | Month      | September 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 | 3-Jan-2009 |
|--------|-------------------|------|------------|

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

|            |                              |      |          |
|------------|------------------------------|------|----------|
| Authorised | [REDACTED] Members' Services | Date | 05/01/09 |
|------------|------------------------------|------|----------|

|                   |  |                             |  |
|-------------------|--|-----------------------------|--|
| Subsistence T     |  | Total Miles                 |  |
| Subsistence NT    |  | <b>For Payroll Use Only</b> |  |
| 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-Sep-2008            | h/a-t/h scrutiny agenda mt                 | 16:00            | 17:00            | 6             | £                     | p            | £                        | p            | £                          | p            |
| <del>6-Sep-2008</del> | <del>h/a-w/h town hall surgery</del>       | <del>10:00</del> | <del>11:30</del> | <del>6</del>  | <del>£</del>          | <del>p</del> | <del>£</del>             | <del>p</del> | <del>£</del>               | <del>p</del> |
| 10-Sep-2008           | h/a-w/h town hall Area Forum               | 18:00            | 21:00            | 6             | £                     | p            | £                        | p            | £                          | p            |
| 15-Sep-2008           | h/a-The Valley Bolton @ Home briefing      | 12:30            | 14:30            | 15            | £                     | p            | £                        | p            | £                          | p            |
| 17-Sep-2008           | h/a-t/h Church Wharf briefing              | 17:00            | 18:00            | 6             | £                     | p            | £                        | p            | £                          | p            |
| 23-Sep-2008           | h/a-t/h Scrutiny agenda mt                 | 16:30            | 17:30            | 6             | £                     | p            | £                        | p            | £                          | p            |
| 25-Sep-2008           | h/a-t/h YP&Sport PDG                       | 10:00            | 12:00            | 6             | £                     | p            | £                        | p            | £                          | p            |
| 25-Sep-2008           | h/a-Harvey Centre - Young Mums Unit Mt.    | 16:30            | 18:00            | 6             | £                     | p            | £                        | p            | £                          | p            |
| 29-Sep-2008           | h/a-t/h Pay review briefing                | 16:00            | 17:00            | 6             | £                     | p            | £                        | p            | £                          | p            |
|                       |  |                  |                  |               | £                     | p            | £                        | p            | £                          | p            |
|                       |  |                  |                  |               | £                     | p            | £                        | p            | £                          | p            |
|                       |  |                  |                  |               | £                     | p            | £                        | p            | £                          | p            |
|                       |  |                  |                  |               | £                     | p            | £                        | p            | £                          | p            |

|             |    |              |   |   |              |   |   |              |   |   |
|-------------|----|--------------|---|---|--------------|---|---|--------------|---|---|
| Total Miles | 63 | Total Amount | £ | p | Total Amount | £ | p | Total Amount | £ | 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

57 *Jan* 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, E Bolton BL1 1JW

# Members' Allowances Claim

# Bolton Council

|                           |                                     |               |               |                    |
|---------------------------|-------------------------------------|---------------|---------------|--------------------|
| Name John Higson          | Home Address 1 Cairngorm Dr, Bolton |               |               | Pay No. [REDACTED] |
| Car Make/Model Citroen C5 | Registration [REDACTED]             | Exact CC 1987 | Month October | 2009               |

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    |  | <b>For Payroll Use Only</b> |  |
| Expenses NT       |  | Input by                    |  |
| Carer's Allowance |  | Date                        |  |

|                          |                 |
|--------------------------|-----------------|
| Signed [REDACTED] Member | Date 3-Jan-2009 |
|--------------------------|-----------------|

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

|   |               |
|---|---------------|
| Authorised [REDACTED] Members' Services | Date 05/01/09 |
|---|---------------|

| Date                  | Reason for Journey (including From and To) | Time of          |                  | Miles Claimed |
|-----------------------|--|------------------|------------------|---------------|
|                       |  | Departure        | Return           |               |
| 1-Oct-2008            | h/a-t/h Cycling forum                      | 17:30            | 19:00            | 6             |
| <del>4-Oct-2008</del> | <del>h/a-w-h t/h surgery</del>             | <del>10:30</del> | <del>11:30</del> | <del>6</del>  |
| 8-Oct-2008            | h/a-t/h Env Scutiny                        | 17:30            | 22:00            | 6             |
| 14-Oct-2008           | h/a-t/h Member Only Mt                     | 17:30            | 19:00            | 6             |
| 17-Oct-2008           | h/a-t/h Env sers PDG                       | 9:30             | 11:00            | 6             |
| 22-Oct-2008           | h/a-t/h Council                            | 18:30            | 22:00            | 6             |
|                       |  |                  |                  |               |
|                       |  |                  |                  |               |
|                       |  |                  |                  |               |
|                       |  |                  |                  |               |
|                       |  |                  |                  |               |
|                       |  |                  |                  |               |
|                       |  |                  |                  |               |

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

Total Miles

|    |
|----|
| 36 |
|----|

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

30 09. 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 Service Centre, 5th Floor, Paderborn House, Bolton BL1 1JW

# Members' Allowances Claim

# Bolton Council

|                           |                                     |                    |
|---------------------------|-------------------------------------|--------------------|
| Name John Higson          | Home Address 1 Cairngorm Dr, Bolton | Pay No. [REDACTED] |
| Car Make/Model Citroen C5 | Registration [REDACTED]             | Exact CC 1987      |
|                           | Month November                      | 20 08/08           |

I certify that:-

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

### FOR MEMBERS' SERVICES USE ONLY

|                   |  |                             |        |
|-------------------|--|-----------------------------|--------|
| Subsistence T     |  | Total Miles                 | 291    |
| Subsistence NT    |  | <b>For Payroll Use Only</b> |        |
| Expenses NT       |  | Input by                    | CM     |
| Carer's Allowance |  | Date                        | 8.1.09 |

|                          |                 |
|--------------------------|-----------------|
| Signed [REDACTED] Member | Date 3-Jan-2009 |
|--------------------------|-----------------|

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

|   |               |
|---|---------------|
| Authorised [REDACTED] Members' Services | Date 05/01/09 |
|---|---------------|

| 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-Nov-2008             | h/a-t/h New Web site briefing              | 17:15            | 18:30            | 6             | £                     | p            | £                        | p            | £                          | p            |
| 10-Nov-2008            | h/a-t/h Standards Trg                      | 17:00            | 18:30            | 6             | £                     | p            | £                        | p            | £                          | p            |
| 12-Nov-2008            | h/a-t/h perf managemetn trg                | 18:00            | 20:00            | 6             | £                     | p            | £                        | p            | £                          | p            |
| <del>15-Nov-2008</del> | <del>h/a-w.h t/h Surgery</del>             | <del>10:30</del> | <del>11:30</del> | <del>6</del>  | <del>£</del>          | <del>p</del> | <del>£</del>             | <del>p</del> | <del>£</del>               | <del>p</del> |
| 18-Nov-2008            | h/a-t/h Scrutiny agenda mt                 | 16:30            | 17:30            | 6             | £                     | p            | £                        | p            | £                          | p            |
| 20-Nov-2008            | h/a-t/h Member Only mt.                    | 17:30            | 19:00            | 6             | £                     | p            | £                        | p            | £                          | p            |
| 25-Nov-2008            | h/a-t/h TIF briefing                       | 19:00            | 20:00            | 6             | £                     | p            | £                        | p            | £                          | p            |
|                        |  |                  |                  |               | £                     | p            | £                        | p            | £                          | p            |
|                        |  |                  |                  |               | £                     | p            | £                        | p            | £                          | p            |
|                        |  |                  |                  |               | £                     | p            | £                        | p            | £                          | p            |
|                        |  |                  |                  |               | £                     | p            | £                        | p            | £                          | p            |
|                        |  |                  |                  |               | £                     | p            | £                        | p            | £                          | p            |
|                        |  |                  |                  |               | £                     | p            | £                        | p            | £                          | p            |

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

|             |              |              |              |
|-------------|--------------|--------------|--------------|
| Total Miles | Total Amount | Total Amount | Total Amount |
| 42          | £ p          | £ p          | £ p          |

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

36 *da* Number of Additional Sheets Used

HOLICK

# Members' Allowances Claim

# Bolton Council

Name MICHAEL HOLLICK Home Address 62 NIGHTINGALE ROAD BLACKROD BUBSEA Pay No. [REDACTED]  
 Car Make/Model LAND ROVER FREELANDER Registration [REDACTED] Exact CC 1951 Month OCTOBER 2008

I certify that:-

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

### FOR MEMBERS' SERVICES USE ONLY

Signed [REDACTED] Member Date 21/10/08  
 I certify that I have examined this allowance sheet, the figures recorded are reasonable, and the expense was necessary.  
 Authorised [REDACTED] Members' Services Date 22/10/08

|                   |  |                      |    |
|-------------------|--|----------------------|----|
| Subsistence T     |  | Total Miles          | 88 |
| Subsistence NT    |  | For Payroll Use Only |    |
| Expenses NT       |  | Input by             |    |
| Carer's Allowance |  | Date                 |    |

| Date     | Reason for Journey (including From and To)  | Time of   |        | Miles Claimed |
|----------|---|-----------|--------|---------------|
|          |   | Departure | Return |               |
| 20/10/08 | NORTH WEST HOME SAFETY COUNCIL<br>LIVERPOOL | 08.45     | 15.00  | 88            |
|          |   |           |        |               |
|          |   |           |        |               |
|          |   |           |        |               |
|          |   |           |        |               |
|          |   |           |        |               |
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|          |   |           |        |               |
|          |   |           |        |               |
|          |   |           |        |               |
|          |   |           |        |               |
|          |   |           |        |               |

| 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                        |

|             |              |              |              |
|-------------|--------------|--------------|--------------|
| Total Miles | Total Amount | Total Amount | Total Amount |
| 88          | £ 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 N/A

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

*[Handwritten initials]*



# Members' Allowances Claim

# Bolton Council

|   |   |                           |
|---|---|---------------------------|
| Name <b>MICHAEL HOLLICK</b>                     | Home Address <b>62 NIGHTINGALE RD. BLACKROD. BOLTON</b> | Pay No. <b>[REDACTED]</b> |
| Car Make/Model <b>LAND ROVER FREELANDER TDi</b> | Registration <b>[REDACTED]</b>                          | Exact CC <b>1951</b>      |
|   | Month <b>MARCH</b>                                      | 2009                      |

- 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. \* No receipt
  - (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. acceptable
  - (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                 | <b>110</b>    |
| Subsistence NT    |  | <b>For Payroll Use Only</b> |               |
| Expenses NT       |  | Input by                    | <b>CM</b>     |
| Carer's Allowance |  | Date                        | <b>1.4.09</b> |

|                          |        |                     |
|--------------------------|--------|---------------------|
| Signed <b>[REDACTED]</b> | Member | Date <b>11/3/09</b> |
|--------------------------|--------|---------------------|

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

|                              |                   |      |
|------------------------------|-------------------|------|
| Authorised <b>[REDACTED]</b> | Members' Services | Date |
|------------------------------|-------------------|------|

| Date           | Reason for Journey<br>(including From and To) | Time of   |        | Miles<br>Claimed |
|----------------|---|-----------|--------|------------------|
|                |   | Departure | Return |                  |
| <b>11/3/09</b> | <b>MEETING IN ST HELENS N.W.H.S.C</b>         |           |        | <b>40</b>        |
|                | <b>TRAVEL + PARKING.</b>                      |           |        |                  |
|                |   |           |        |                  |
|                |   |           |        |                  |
|                |   |           |        |                  |
|                |   |           |        |                  |
|                |   |           |        |                  |
|                |   |           |        |                  |
|                |   |           |        |                  |
|                |   |           |        |                  |
|                |   |           |        |                  |
|                |   |           |        |                  |
|                |   |           |        |                  |

| Subsistence Allowance | Fares and Other Expenses | Dependent Carers Allowance |
|-----------------------|--------------------------|----------------------------|
| £ p                   | £ 4.00 * 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                        |

|  |             |              |              |              |
|--|-------------|--------------|--------------|--------------|
| Please only enter the number of miles. Do not calculate an amount for payment. | Total Miles | Total Amount | Total Amount | Total Amount |
|  | <b>40</b>   | £ p          | £ 4.00 p     | £ p          |

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

**HORNBY**

# Members' Allowances Claim

# Bolton Council

|  |  |                      |                           |
|--|--|----------------------|---------------------------|
| <b>Name</b> Councillor Sean Hornby     | <b>Home Address</b> 32 Elder Drive, Darcy Lever, Bolton, BL3 1AT |                      | <b>Pay No.</b> [REDACTED] |
| <b>Car Make/Model</b> Citroen Berlingo | <b>Registration</b> [REDACTED]                                   | <b>Exact CC</b> 1900 | <b>Month</b> August 20 08 |

I certify that:-

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

### FOR MEMBERS' SERVICES USE ONLY

|                   |       |                             |       |
|-------------------|-------|-----------------------------|-------|
| Subsistence T     | 17.39 | Total Miles                 | 177.6 |
| Subsistence NT    |       | <b>For Payroll Use Only</b> |       |
| Expenses NT       |       |                             |       |
| Carer's Allowance |       |                             |       |
|                   |       | Input by                    |       |
|                   |       | Date                        |       |

**Signed** [REDACTED] Member **Date** 31/10/08

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

**Authorised** [REDACTED] Members' Services **Date** 31/10/08

| 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 |   |
| 5-Aug-2008  | Children's Services PDG   | 10:00     | 12:00  | 4.8           | £                     | p                        | £ | p                          | £ | p |
| 6-Aug-2008  | Planning Presentation   | 13:00     | 14:30  | 4.8           | £                     | p                        | £ | p                          | £ | p |
| 7-Aug-2008  | Planning Site Vites and Committee                               | 9:00      | 17:00  | 4.8           | £                     | 6.77 p                   | £ | p                          | £ | p |
| 8-Aug-2008  | Planning Agenda and Connexions meeting                          | 10:30     | 13:30  | 4.8           | £                     | p                        | £ | p                          | £ | p |
| 11-Aug-2008 | Development and Regeneration PDG                                | 10:00     | 12:30  | 4.8           | £                     | p                        | £ | p                          | £ | p |
| 12-Aug-2008 | Health and Adult Care PDG                                       | 10:30     | 12:30  | 4.8           | £                     | p                        | £ | p                          | £ | p |
| 13-Aug-2008 | Environmental Services PDG                                      | 18:00     | 20:00  | 4.8           | £                     | p                        | £ | p                          | £ | p |
| 14-Aug-2008 | Children's Services , Young People and Sport Scrutiny Committee | 16:00     | 18:00  | 4.8           | £                     | p                        | £ | p                          | £ | p |
| 18-Aug-2008 | Corporate Issues Scrutiny                                       | 18:00     | 20:00  | 4.8           | £                     | p                        | £ | p                          | £ | p |
| 19-Aug-2008 | Environmental Services PDG                                      | 10:00     | 12:00  | 4.8           | £                     | p                        | £ | p                          | £ | p |
| 21-Aug-2008 | Planning Site Vites and Committee                               | 10:00     | 17:30  | 4.8           | £                     | 6.77 p                   | £ | p                          | £ | p |
| 22-Aug-2008 | Planning Agenda and Appraisal meeting                           | 10:30     | 12:30  | 4.8           | £                     | p                        | £ | p                          | £ | p |

|             |      |              |           |              |   |              |   |
|-------------|------|--------------|-----------|--------------|---|--------------|---|
| Total Miles | 57.6 | Total Amount | £ 13.54 p | Total Amount | £ | Total Amount | £ |
|-------------|------|--------------|-----------|--------------|---|--------------|---|

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

Calman

# Members' Allowances Additional Sheet

# Bolton Council

Please note this is only an additional sheet, and must be submitted with a Members' Allowance Claim Form.

| Name Councillor Sean Hornby |   |           | Pay No. [REDACTED] |                  |                          | Month August 20 00          |                   |                               |              |   |   |
|-----------------------------|---|-----------|--------------------|------------------|--------------------------|-----------------------------|-------------------|-------------------------------|--------------|---|---|
| Signed [REDACTED]           |   | Member    | Date 31/10/08      | Authorised       |                          |                             | Members' Services |                               | Date         |   |   |
| Date                        | Reason for Journey<br>(including From and To) | Time of   |                    | Miles<br>Claimed | Subsistence<br>Allowance | Fares and<br>Other Expenses |                   | Dependent<br>Carers Allowance |              |   |   |
|                             |   | Departure | Return             |                  |                          | £                           | p                 |                               | £            | p |   |
| 27-Aug-2008                 | Executive Meeting                             | 9:00      | 11:00              | 4.8              | £                        | p                           | £                 | p                             | £            | p |   |
| 27-Aug-2008                 | Full Council                                  | 19:00     | 22:00              | 4.8              | £                        | p                           | £                 | p                             | £            | p |   |
| 28-Aug-2008                 | Planning Improvement Working Group            | 9:15      | 12:00              | 4.8              | £                        | 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 |   |
|                             |   |           |                    |                  | £                        | p                           | £                 | p                             | £            | p |   |
|                             |   |           |                    |                  | £                        | p                           | £                 | p                             | £            | p |   |
|                             |   |           |                    | Total Miles      | 14.4                     | Total Amount                |                   | Total Amount                  | Total Amount |   |   |
|                             |   |           |                    |                  |                          | £                           | p                 | £                             | p            | £ | p |

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

Total Miles 14.4  
 Total Amount £ p £ p £ p



# Members' Allowances Claim

# Bolton Council

|                                 |   |                    |
|---------------------------------|---|--------------------|
| Name Councillor Sean Hornby     | Home Address 32 Elder Drive, Darcy Lever, Bolton, BL3 1AT | Pay No. [REDACTED] |
| Car Make/Model Citroen Berlingo | Registration [REDACTED]                                   | Exact CC 1900      |
|                                 | Month Oct-Nov   | 20 08              |

I certify that:-

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

### FOR MEMBERS' SERVICES USE ONLY

|                   |         |                             |         |
|-------------------|---------|-----------------------------|---------|
| Subsistence T     | 20.31   | Total Miles                 | 83.6 ✓  |
| Subsistence NT    | 20.31 ✓ | <b>For Payroll Use Only</b> |         |
| Expenses NT       |         |                             |         |
| Carer's Allowance |         | Input by                    | CM      |
|                   |         | Date                        | 9.12.08 |

|                          |               |
|--------------------------|---------------|
| Signed [REDACTED] Member | Date 27/11/08 |
|--------------------------|---------------|

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 |               |
| 27-Oct-2008 | Executive Brief and Full Exec  | 10:00     | 15:00  | 4.8           |
| 28-Oct-2008 | Youth and Sport PDG  | 9:00      | 10:00  | 4.8           |
| 30-Oct-2008 | Planning Site Visits and Committee                                     | 9:30      | 17:30  | 4.8           |
| 31-Oct-2008 | Planning Agenda and MOM Meeting  | 10:00     | 11:30  | 4.8           |
| 3-Nov-2008  | Executive Brief and Culture and Community Services PDG                 | 10:00     | 1:30   | 4.8           |
| 13-Nov-2008 | Planning Site Visits and Committee                                     | 9:30      | 17:30  | 4.8           |
| 14-Nov-2008 | AGMA (Haigh Hall, Wigan)   | 10:00     | 12:00  | 26            |
| 17-Nov-2008 | Executive Briefing   | 10:00     | 12:30  | 4.8           |
| 18-Nov-2008 | Planning Improvement Working Group                                     | 14:00     | 16:00  | 4.8           |
| 24-Nov-2008 | Executive Brief and Full Exec  | 13:00     | 17:00  | 4.8           |
| 25-Nov-2008 | Health and Adult Social Care PDG / Joint Env. and Cleaner, Green Safer | 12:00     | 14:00  | 4.8           |
| 27-Nov-2008 | Planning Site Visits and Committee                                     | 9:00      | 17:30  | 4.8           |

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

Total Miles

78.8

Total Amount Total Amount Total Amount

£ 20.31 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  
12.10.2007

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

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

# Members' Allowances Additional Sheet

Please note this is only an additional sheet, and must be submitted with a Members' Allowance Claim Form.

|                             |                    |                       |                        |
|-----------------------------|--------------------|-----------------------|------------------------|
| Name Councillor Sean Hornby | Pay No. [REDACTED] | Month November        | 20 08                  |
| Signed [REDACTED] Member    | Date 24/11/08      | Authorised [REDACTED] | Members' Services Date |

| Date        | Reason for Journey (including From and To) | Time of   |        | Miles Claimed | Subsistence Allowance |   | Fares and Other Expenses |   | Dependent Carers Allowance |   |
|-------------|--|-----------|--------|---------------|-----------------------|---|--------------------------|---|----------------------------|---|
|             |  | Departure | Return |               | £                     | p | £                        | p | £                          | p |
| 28-Nov-2008 | Children's Services PDG                    | 14:00     | 16:00  | 4.8           | £                     | 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 |
|             |  |           |        |               | £                     | 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               |   |
|             |  |           |        | 4.8           | £                     | p | £                        | p | £                          | p |

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

# Members' Allowances Claim

# Bolton Council

|  |  |                      |                            |
|--|--|----------------------|----------------------------|
| <b>Name</b> Councillor Sean Hornby     | <b>Home Address</b> 32 Elder Drive, Darcy Lever, Bolton, BL3 1AT |                      | <b>Pay No.</b> [REDACTED]  |
| <b>Car Make/Model</b> Citroen Berlingo | <b>Registration</b> [REDACTED]                                   | <b>Exact CC</b> 1900 | <b>Month</b> October 20 08 |

I certify that:-

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

### FOR MEMBERS' SERVICES USE ONLY

|                   |  |                             |  |
|-------------------|--|-----------------------------|--|
| Subsistence T     |  | Total Miles                 |  |
| Subsistence NT    |  | <b>For Payroll Use Only</b> |  |
| Expenses NT       |  | Input by                    |  |
| Carer's Allowance |  | Date                        |  |

|                                 |                      |
|---------------------------------|----------------------|
| <b>Signed</b> [REDACTED] Member | <b>Date</b> 31/10/08 |
|---------------------------------|----------------------|

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

|  |             |
|--|-------------|
| <b>Authorised</b> [REDACTED] Members' Services | <b>Date</b> |
|--|-------------|

| Date        | Reason for Journey (including From and To)                      | Time of   |        | Miles Claimed | Subsistence Allowance | Fares and Other Expenses | Dependent Carers Allowance |
|-------------|---|-----------|--------|---------------|-----------------------|--------------------------|----------------------------|
|             |   | Departure | Return |               |                       |                          |                            |
| 2-Oct-2008  | Planning Site Vites and Committee                               | 10:00     | 17:30  | 4.8           | £ 6.77 p              | £ p                      | £ p                        |
| 6-Oct-2008  | Development and Regeneration Scrunity Committee                 | 18:00     | 20:00  | 4.8           | £ p                   | £ p                      | £ p                        |
| 7-Oct-2008  | Library PDG   | 10:00     | 12:00  | 4.8           | £ p                   | £ p                      | £ p                        |
| 8-Oct-2008  | Highways Services meeting                                       | 9:00      | 10:30  | 4.8           | £ p                   | £ p                      | £ p                        |
| 9-Oct-2008  | Children's Services , Young People and Sport Scrutiny Committee | 16:00     | 18:00  | 4.8           | £ p                   | £ p                      | £ p                        |
| 10-Oct-2008 | Planning Peace Centre meeting                                   | 14:00     | 15:30  | 4.8           | £ p                   | £ p                      | £ p                        |
| 13-Oct-2008 | Executive Briefing  | 10:30     | 12:30  | 4.8           | £ p                   | £ p                      | £ p                        |
| 13-Oct-2008 | Housing Mointoring and Corporate Issues                         | 16:00     | 19:30  | 4.8           | £ p                   | £ p                      | £ p                        |
| 16-Oct-2008 | Planning Site Vites and Committee                               | 10:00     | 17:30  | 4.8           | £ 6.77 p              | £ p                      | £ p                        |
| 17-Oct-2008 | Environmental Services PDG                                      | 9:00      | 11:30  | 4.8           | £ p                   | £ p                      | £ p                        |
| 21-Oct-2008 | Childrens PDG   | 9:30      | 11:00  | 4.8           | £ p                   | £ p                      | £ p                        |
| 23-Oct-2008 | Planning Training   | 12:00     | 14:00  | 4.8           | £ p                   | £ p                      | £ p                        |

Total Miles  
**57.6**

|              |              |              |
|--------------|--------------|--------------|
| Total Amount | Total Amount | Total Amount |
| £ 13.54 p    | £ p          | £ p          |

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

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

Number of Additional Sheets Used

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



# Members' Allowances Additional Sheet

# Bolton Council

Please note this is only an additional sheet, and must be submitted with a Members' Allowance Claim Form.

|   |        |  |               |                   |
|---|--------|--|---------------|-------------------|
| Name Councillor Sean Hornby   |        | Pay No. <span style="background-color: black; color: black;">XXXXXXXXXX</span> | Month October | 20 00             |
| Signed <span style="background-color: black; color: black;">XXXXXXXXXX</span> | Member | Date 31/10/08  | Authorised    | Members' Services |

| Date        | Reason for Journey<br>(including From and To) | Time of   |        | Miles<br>Claimed | Subsistence  | Fares and      | Dependent        |
|-------------|---|-----------|--------|------------------|--------------|----------------|------------------|
|             |   | Departure | Return |                  | Allowance    | Other Expenses | Carers Allowance |
| 27-Oct-2008 | Executive Meetings                            | 9:00      | 15:00  | 4.8              | £ p          | £ p            | £ p              |
| 28-Oct-2008 | Youth and Sport PDG                           | 9:00      | 10:00  | 4.8              | £ p          | £ p            | £ p              |
| 30-Oct-2008 | Planning Site Vists and Committee             | 9:00      | 17:30  | 4.8              | £ 6.77 p     | £ p            | £ p              |
|             |   |           |        |                  | £ p          | £ p            | £ p              |
|             |   |           |        |                  | £ p          | £ p            | £ p              |
|             |   |           |        |                  | £ p          | £ p            | £ p              |
|             |   |           |        |                  | £ p          | £ p            | £ p              |
|             |   |           |        |                  | £ p          | £ p            | £ p              |
|             |   |           |        |                  | £ p          | £ p            | £ p              |
|             |   |           |        |                  | £ p          | £ p            | £ p              |
|             |   |           |        |                  | £ p          | £ p            | £ p              |
|             |   |           |        |                  | £ p          | £ p            | £ p              |
|             |   |           |        |                  | £ p          | £ p            | £ p              |
|             |   |           |        |                  | £ p          | £ p            | £ p              |
|             |   |           |        |                  | £ p          | £ p            | £ p              |
|             |   |           |        |                  | £ p          | £ p            | £ p              |
|             |   |           |        |                  | £ p          | £ p            | £ p              |
|             |   |           |        |                  | £ p          | £ p            | £ p              |
|             |   |           |        |                  | £ p          | £ p            | £ p              |
|             |   |           |        |                  | £ p          | £ p            | £ p              |
|             |   |           |        |                  | £ p          | £ p            | £ p              |
|             |   |           |        | Total Miles      | Total Amount | Total Amount   | Total Amount     |
|             |   |           |        | 14.4             | £ 6.77 p     | £ p            | £ p              |

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

PAY-M2  
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

# Members' Allowances Claim

|                                 |                |
|---------------------------------|----------------|
| Name Councillor Sean Hornby     | Home Address   |
| Car Make/Model Citroen Berlingo | Registration M |

|                 |  |
|-----------------|--|
| Bolton, BL3 1AT | Pay No. <span style="background-color:black; color:black;">[REDACTED]</span> |
| 1900            | Month December 20 08   |

I certify that:-

(a) **(For Car Allowance claims only)** I have actually and necessarily incurred the mileage of

(b) **(For Car Allowance claims only)** I am the holder of a full, current and valid driving licence 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 ye

(d) I have actually and necessarily incurred expenditure in travelling and subsistence for the p other payments shown on this form, and that all amounts claimed are strictly in accordanc

(e) Except as shown, I have not made, and will not make, any claim under any enactment for t 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.

*PAID*

*March*

scheme of Motor Car Allowances.  
 a), and I have complied with the Council's insurance requirements with  
 lations.  
 s as a Member of Bolton Council, I have actually paid the fares and made  
 ouncil.

**FOR MEMBERS' SERVICES USE ONLY**

|                   |       |                             |        |
|-------------------|-------|-----------------------------|--------|
| Subsistence T     | 27.08 | Total Miles                 | 158    |
| Subsistence NT    | 27.08 | <b>For Payroll Use Only</b> |        |
| Expenses NT       | 2.80  | Input by                    | CM     |
| Carer's Allowance |       | Date                        | 2.3.09 |

Signed [REDACTED] Member Date 26/2/09

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 |               |
| 1-Dec-2008  | Executive Briefing/Health Adult Social Care PDG | 10:30     | 14:00  | 4.8           |
| 2-Dec-2008  | Audit Committee/Environmental Services PDG      | 10:00     | 13:30  | 4.8           |
| 3-Dec-2008  | Environmental Services PDG                      | 18:00     | 19:30  | 4.8           |
| 4-Dec-2008  | Children's Services PDG                         | 16:00     | 18:30  | 4.8           |
| 5-Dec-2008  | Sports Club Meeting, Town Hall                  | 12:00     | 1:30   | 4.8           |
| 9-Dec-2008  | Library PDG                                     | 11:00     | 13:00  | 4.8           |
| 10-Dec-2008 | Full Council                                    | 19:00     | 21:00  | 4.8           |
| 11-Dec-2008 | Planning Site Visits and Committee              | 9:30      | 17:30  | 4.8           |
| 12-Dec-2008 | TIF Referendum Meeting (Manchester)             | 12:30     | 14:30  |               |
| 15-Dec-2008 | Executive Briefing                              | 10:30     | 12:30  | 4.8           |
| 16-Dec-2008 | Executive                                       | 9:00      | 10:30  | 4.8           |
| 17-Dec-2008 | Planning Appeal Costs Meeting                   | 16:00     | 17:30  | 4.8           |

| 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                        |
| £ 6.77 p              | £ p                      | £ p                        |
| £ p                   | £ 2.80 p                 | £ p                        |
| £ p                   | £ p                      | £ p                        |
| £ p                   | £ p                      | £ p                        |
| £ p                   | £ p                      | £ p                        |

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

Total Miles 52.8

|                       |                       |                  |
|-----------------------|-----------------------|------------------|
| Total Amount £ 6.77 p | Total Amount £ 2.80 p | Total Amount £ p |
|-----------------------|-----------------------|------------------|

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

Number of Additional Sheets Used

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



round  London Underground  London Underground

0501R03 DRY SINGLE 4.00 STD

0501R03 MTR003

015002 14 0790 0501R03 0907 24000

This side up. Not for resale. Issued subject to conditions - see over. This side up. Not for resale. Issued subject to conditions.

# Members' Allowances Claim

# Bolton Council

|                                 |   |                    |
|---------------------------------|---|--------------------|
| Name Councillor Sean Hornby     | Home Address 32 Elder Drive, Darcy Lever, Bolton, BL3 1AT | Pay No. [REDACTED] |
| Car Make/Model Citroen Berlingo | Registration [REDACTED]                                   | Exact CC 1900      |
|                                 | Month January   | 2009               |

- 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 26/2/09 |
| 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    |  | <b>For Payroll Use Only</b> |  |
| 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 |               |                       |                          |     |                            |  |
| 5-Jan-2009  | Executive Briefing                         | 10:30     | 12:30  | 4.8           | £ p                   | £ p                      | £ p | £ p                        |  |
| 8-Jan-2009  | Planning Site Visits and Committee         | 9:30      | 18:30  | 4.8           | £ 6.77 p              | £ p                      | £ p | £ p                        |  |
| 9-Jan-2009  | Agenda meeting - planning                  | 11:30     | 12:30  | 4.8           | £ p                   | £ p                      | £ p | £ p                        |  |
| 12-Jan-2009 | Health and Adult Social Care PDG           | 10:00     | 11:00  | 4.8           | £ p                   | £ p                      | £ p | £ p                        |  |
| 15-Jan-2009 | External Organisations Scrutiny            | 14:00     | 15:30  | 4.8           | £ p                   | £ p                      | £ p | £ p                        |  |
| 19-Jan-2009 | Childrens Services PDG                     | 16:00     | 17:30  | 4.8           | £ p                   | £ p                      | £ p | £ p                        |  |
| 20-Jan-2009 | Meeting with Parking Services              | 12:30     | 14:00  | 4.8           | £ p                   | £ p                      | £ p | £ p                        |  |
| 22-Jan-2009 | Planning Site Visits and Committee         | 9:30      | 17:30  | 4.8           | £ 6.77 p              | £ p                      | £ p | £ p                        |  |
| 26-Jan-2009 | Housing PDG                                | 14:00     | 15:30  | 4.8           | £ p                   | £ p                      | £ p | £ p                        |  |
| 27-Jan-2009 | Planning Improvement Working Group         | 14:00     | 15:30  | 4.8           | £ p                   | £ p                      | £ p | £ p                        |  |
| 28-Jan-2009 | Queens Park meeting with Director          | 13:30     | 14:30  | 4.8           | £ p                   | £ p                      | £ p | £ p                        |  |
|             |  |           |        |               | £ p                   | £ p                      | £ p | £ p                        |  |

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

|             |              |              |              |
|-------------|--------------|--------------|--------------|
| Total Miles | Total Amount | Total Amount | Total Amount |
| 52.8        | £ 13.54 p    | £ p          | £ p          |

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

Number of Additional Sheets Used

PAY-M1  
12.10.2007

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

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

# Members' Allowances Claim

# Bolton Council

|                                 |   |                    |
|---------------------------------|---|--------------------|
| Name Councillor Sean Hornby     | Home Address 32 Elder Drive, Darcy Lever, Bolton, BL3 1AT | Pay No. [REDACTED] |
| Car Make/Model Citroen Berlingo | Registration [REDACTED]                                   | Exact CC 1900      |
|                                 | Month February  | 20 09              |

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 26/2/09 |
| I certify that I have examined this allowance sheet, the figures recorded are reasonable, and the expense was necessary. |              |
| Authorised [REDACTED] Members' Services  | Date         |

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

| Date        | Reason for Journey (including From and To) | Time of   |        | Miles Claimed |
|-------------|--|-----------|--------|---------------|
|             |  | Departure | Return |               |
| 2-Feb-2009  | Executive Briefing and Executive           | 13:00     | 17:30  | 4.8           |
| 3-Feb-2009  | Environmental Services PDG                 | 14:00     | 15:30  | 4.8           |
| 5-Feb-2009  | Planning Site Visits and Committee         | 9:30      | 17:30  | 4.8           |
| 9-Feb-2009  | Executive Briefing                         | 10:30     | 12:30  | 4.8           |
| 11-Feb-2009 | Environmental Services Scrutiny            | 18:00     | 20:00  | 4.8           |
| 12-Feb-2009 | Childrens Services Scrutiny                | 16:00     | 18:00  | 4.8           |
| 13-Feb-2009 | Executive (Budget)                         | 11:00     | 12:30  | 4.8           |
| 19-Feb-2009 | Planning Committee                         | 14:00     | 18:00  | 4.8           |
| 20-Feb-2009 | Full Council                               | 19:00     | 21:30  | 4.8           |
|             |  |           |        |               |
|             |  |           |        |               |
|             |  |           |        |               |
|             |  |           |        |               |

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

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

|             |      |
|-------------|------|
| Total Miles | 43.2 |
|-------------|------|

|              |              |              |
|--------------|--------------|--------------|
| Total Amount | Total Amount | Total Amount |
| £ 6.77 p     | £ p          | £ p          |

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 Centre, 5th Floor, Paderborn House, Bolton BL1 1JW

LORD

# Members' Allowances Claim

# Bolton Council

|                                   |   |                        |
|-----------------------------------|---|------------------------|
| Name <u>CLR. JAMES LORD</u>       | Home Address <u>22, LINGFIELD CLOSE FARNWORTH</u> | Pay No.                |
| Car Make/Model <u>FORD MONDEO</u> | Registration                                      | Exact CC <u>1988</u>   |
|                                   |   | Month <u>JUNE 2008</u> |

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                 | <u>98</u> |
| Subsistence NT    |  | <b>For Payroll Use Only</b> |           |
| Expenses NT       |  | Input by                    |           |
| Carer's Allowance |  | Date                        |           |

|        |        |      |
|--------|--------|------|
| Signed | Member | Date |
|--------|--------|------|

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

|            |                   |      |
|------------|-------------------|------|
| Authorised | Members' Services | Date |
|------------|-------------------|------|

| Date          | Reason for Journey (including From and To) | Time of     |              | Miles Claimed |
|---------------|--|-------------|--------------|---------------|
|               |  | Departure   | Return       |               |
| <u>JUNE 3</u> | <u>HEALTH SCREENING</u>                    | <u>9.06</u> | <u>12.30</u> | <u>9</u>      |
| <u>" 5</u>    | <u>OUTSIDE BODY SCREENING</u>              | <u>1.15</u> | <u>3.30</u>  | <u>9</u>      |
| <u>" 11</u>   | <u>ADULT SCREENING</u>                     | <u>2.00</u> | <u>3.00</u>  | <u>9</u>      |
| <u>" 12</u>   | <u>INFORMAL COUNCIL</u>                    | <u>4-30</u> | <u>7.00</u>  | <u>9</u>      |
| <u>24</u>     | <u>LIC. ENVIA COMMITTEE</u>                | <u>1.15</u> | <u>4.30</u>  | <u>9</u>      |
| <u>24</u>     | <u>ADULT SCREENING</u>                     | <u>5.15</u> | <u>7.30</u>  | <u>9</u>      |
| <u>25</u>     | <u>AUDIT COMMITTEE</u>                     | <u>1.00</u> | <u>3.30</u>  | <u>9</u>      |
| <u>25</u>     | <u>ENVIRONMENT SCREENING</u>               | <u>5.15</u> | <u>8.15</u>  | <u>9</u>      |
| <u>JULY 7</u> | <u>FARNWORTH AREA FORUM</u>                | <u>5.15</u> | <u>8.30</u>  | <u>4</u>      |
| <u>9</u>      | <u>FULL COUNCIL</u>                        | <u>6.15</u> | <u>10.45</u> | <u>9</u>      |
| <u>10</u>     | <u>FARNWORTH MANAGEMENT BOARD</u>          | <u>5.45</u> | <u>8.00</u>  | <u>4</u>      |
| <u>14</u>     | <u>AUDIT COMM TRAINING</u>                 | <u>1.15</u> | <u>4.30</u>  | <u>9</u>      |

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

|             |           |                                  |                      |
|-------------|-----------|----------------------------------|----------------------|
| Total Miles | <u>98</u> | Number of Additional Sheets Used | <input type="text"/> |
|-------------|-----------|----------------------------------|----------------------|

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



# Members' Allowances Claim

# Bolton Council

|                                   |   |                           |
|-----------------------------------|---|---------------------------|
| Name <b>JAMES LORD</b>            | Home Address <b>22, LINGFIELD CLOSE FARNWORTH</b> | Pay No. <b>[REDACTED]</b> |
| Car Make/Model <b>FORD MONDEO</b> | Registration <b>[REDACTED]</b>                    | Exact CC <b>1788</b>      |
|                                   |   | Month <b>AUG/SEP/2008</b> |

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                 | <b>80</b> |
| Subsistence NT    |  | <b>For Payroll Use Only</b> |           |
| Expenses NT       |  | Input by                    |           |
| Carer's Allowance |  | Date                        |           |

|                                 |                     |
|---------------------------------|---------------------|
| Signed <b>[REDACTED]</b> Member | Date <b>29.9.08</b> |
|---------------------------------|---------------------|

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

|  |      |
|--|------|
| Authorised <b>[REDACTED]</b> Members' Services | Date |
|--|------|

| Date    | Reason for Journey (including From and To) | Time of   |        | Miles Claimed | Subsistence Allowance |   | Fares and Other Expenses |   | Dependent Carers Allowance |   |
|---------|--|-----------|--------|---------------|-----------------------|---|--------------------------|---|----------------------------|---|
|         |  | Departure | Return |               | £                     | p | £                        | p | £                          | p |
| 19.8.08 | LICENSING ENVIR COMM                       | 1.15      | 4.15   | 9             | £                     | p | £                        | p | £                          | p |
| 27.8.08 | TRAINING APPOINTMENT                       | 2.30      | 4.15   | 9             | £                     | p | £                        | p | £                          | p |
| " " "   | FULL COUNCIL                               | 6.15      | 10.30  | 9             | £                     | p | £                        | p | £                          | p |
| 28.8.08 | AREA FORUM MEMBER MEETING                  | 3.30      | 5.00   | 9             | £                     | p | £                        | p | £                          | p |
| 9.9.08  | AUDIT COMMITTEE                            | 9.30      | 11.45  | 9             | £                     | p | £                        | p | £                          | p |
| 10.9.08 | PRIVATE HIRE CON. COMM                     | 10.30     | 12.30  | 9             | £                     | p | £                        | p | £                          | p |
| 11.9.08 | FARNWORTH MANAGEMENT BOARD                 | 5.30      | 8.15   | 4             | £                     | p | £                        | p | £                          | p |
| 15.9.08 | AREA FORUM                                 | 6.00      | 8.30   | 4             | £                     | p | £                        | p | £                          | p |
| 16.9.08 | LIC ENVIR CON COMM                         | 1.15      | 4.45   | 9             | £                     | p | £                        | p | £                          | p |
| 29.9.08 | PAY - GRADING MEETING                      | 3.30      | 5.15   | 9             | £                     | p | £                        | p | £                          | p |
|         |  |           |        |               | £                     | p | £                        | p | £                          | p |
|         |  |           |        |               | £                     | p | £                        | p | £                          | p |

Total Miles **80**

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

12.10.2007

# Members' Allowances Claim

|                                   |  |                                   |
|-----------------------------------|--|-----------------------------------|
| Name <b>JAMES LORD</b>            | Home Address <b>22, LINGFIELD CLOSE, FARNWORTH</b> | Pay No. <b>[REDACTED]</b>         |
| Car Make/Model <b>FORD MONDEO</b> | Registration <b>[REDACTED]</b>                     | Exact CC <b>1789</b>              |
|                                   |  | Month <b>Oct/Nov</b> 20 <b>08</b> |

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

### FOR MEMBERS' SERVICES USE ONLY

|                   |  |                             |          |
|-------------------|--|-----------------------------|----------|
| Subsistence T     |  | Total Miles                 | 98       |
| Subsistence NT    |  | <b>For Payroll Use Only</b> |          |
| Expenses NT       |  | Input by                    | cm       |
| Carer's Allowance |  | Date                        | 21.11.08 |

|  |                      |
|--|----------------------|
| Signed <b>[REDACTED]</b> Member  | Date <b>14.11.08</b> |
| I certify that I have examined this allowance sheet, the figures recorded are reasonable, and the expense was necessary. |                      |
| Authorised <b>[REDACTED]</b> Members' Services   | Date                 |

| Date   | Reason for Journey<br>(including From and To) | Time of   |        | Miles<br>Claimed | Subsistence<br>Allowance | Fares and<br>Other Expenses |   | Dependent<br>Carers Allowance |   |   |
|--------|---|-----------|--------|------------------|--------------------------|-----------------------------|---|-------------------------------|---|---|
|        |   | Departure | Return |                  |                          | £                           | p | £                             | p |   |
| OCT 1  | PLODDER LANE GOVERNMENT                       | 5.45      | 9.15   | 4                | £                        | p                           | £ | p                             | £ | p |
| 8      | HACKNEY CAROLINE / MAXI COMM                  | 10.30     | 12.30  | 9                | £                        | p                           | £ | p                             | £ | p |
| 7      | ADULT SERV SCRUTINY COMM                      | 5.30      | 8.00   | 9                | £                        | p                           | £ | p                             | £ | p |
| 8      | ENVIR SERV SCRUTINY COMM                      | 5.30      | 8.15   | 9                | £                        | p                           | £ | p                             | £ | p |
| 21     | LIC. ENVIR COMM                               | 1.15      | 4.30   | 9                | £                        | p                           | £ | p                             | £ | p |
| 22     | HARPER GREEN SCHOOL RIDE on GE                | 3.45      | 5.15   | 4                | £                        | p                           | £ | p                             | £ | p |
| 22     | FULL COUNCIL                                  | 6.15      | 10.00  | 9                | £                        | p                           | £ | p                             | £ | p |
| 29     | HOUSING REPORT VACANT PROPERTIES              | 6.00      | 8.30   | 9                | £                        | p                           | £ | p                             | £ | p |
| NOV. 3 | FORUM MEMBER MEETING                          | 3.30      | 6.00   | 9                | £                        | p                           | £ | p                             | £ | p |
| 4      | LIC-ENVIR MEETING                             | 1.30      | 4.45   | 9                | £                        | p                           | £ | p                             | £ | p |
| 11     | LIC. 1. 2                                     | 1.30      | 6.00   | 9                | £                        | p                           | £ | p                             | £ | p |
| 10     | PLANS FOR FARNWORTH PRECINCT                  | 1.30      | 2.30   | 9                | £                        | p                           | £ | p                             | £ | p |

Total Miles **98**

|              |              |              |
|--------------|--------------|--------------|
| Total Amount | Total Amount | Total Amount |
| £            | 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

|                |                  |              |                              |              |            |
|----------------|------------------|--------------|------------------------------|--------------|------------|
| Name           | CLERK JAMES HORD | Home Address | 22 LINGFIELD CLOSE FARNWORTH | Pay No.      | [REDACTED] |
| Car Make/Model | FORD MONDEO      | Registration | [REDACTED]                   | Exact CC     | 1988       |
|                |                  |              | Month                        | JAN/FEB 2009 |            |

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 | 25 - 2 - 09 |
| I certify that I have examined this allowance sheet, the figures recorded are reasonable, and the expense was necessary. |            |                   |      |             |
| Authorised   | [REDACTED] | Members' Services | Date |             |

|                   |  |                      |        |
|-------------------|--|----------------------|--------|
| Subsistence T     |  | Total Miles          | 84     |
| Subsistence NT    |  | For Payroll Use Only |        |
| Expenses NT       |  | Input by             | CM     |
| Carer's Allowance |  | Date                 | 23.09. |

| Date  | Reason for Journey<br>(including From and To) | Time of   |        | Miles Claimed | Subsistence Allowance |   | Fares and Other Expenses |   | Dependent Carers Allowance |   |
|-------|---|-----------|--------|---------------|-----------------------|---|--------------------------|---|----------------------------|---|
|       |   | Departure | Return |               | £                     | p | £                        | p | £                          | p |
| JAN 8 | FARNWORTH MANAGEMENT BOARD                    | 5.30      | 8.30   | 4             | £                     | p | £                        | p | £                          | p |
| 9     | MEETING WELLINGTON ST RESIDUAL (J. PYE)       | 1.30      | 2.45   | 4             | £                     | p | £                        | p | £                          | p |
| 12    | AREA FORUM MEMBERS MEETING                    | 9.30      | 11.45  | 9             | £                     | p | £                        | p | £                          | p |
| 13    | LIC. ENVIR. REGULATION COMM.                  | 1.30      | 5.15   | 9             | £                     | p | £                        | p | £                          | p |
| 22    | BUDGET REPORT FARN TOWN HALL                  | 6.30      | 8.15   | 4             | £                     | p | £                        | p | £                          | p |
| FEB 3 | AREA FORUM AGENDA MEETING                     | 2.30      | 4.00   | 9             | £                     | p | £                        | p | £                          | p |
| 10    | LIC. ENVIR. REGULATION COMM                   | 1.30      | 4.45   | 9             | £                     | p | £                        | p | £                          | p |
| 10    | ADULT SERV. SCRUTINY COMM                     | 5.15      | 8.00   | 9             | £                     | p | £                        | p | £                          | p |
| 11    | ENV. SERV. SCRUTINY                           | 5.15      | 7.30   | 9             | £                     | p | £                        | p | £                          | p |
| 25    | FARNWORTH PRECINCT MEETING RECEPTION ROOM     | 10.15     | 11.45  | 9             | £                     | p | £                        | p | £                          | p |
| 25    | FULL COUNCIL BUDGET MEETING                   | 6.15      | 8.15   | 9             | £                     | p | £                        | p | £                          | p |

Total Miles

84

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

MORRIS

# Members' Allowances Claim

# Bolton Council

MMP

|                |                         |              |            |          |         |                   |
|----------------|-------------------------|--------------|------------|----------|---------|-------------------|
| Name           | Councillor Cliff Morris | Home Address | [Redacted] |          | Pay No. | [Redacted]        |
| Car Make/Model | VW Golf                 | Registration | [Redacted] | Exact CC | 3000    | Month April 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**

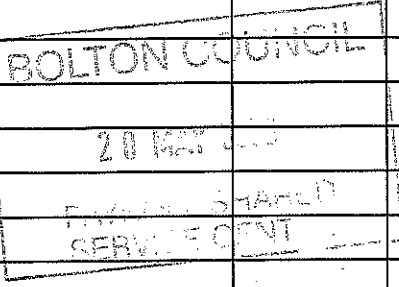
|                   |  |                             |             |
|-------------------|--|-----------------------------|-------------|
| Subsistence T     |  | Total Miles                 | 13.         |
| Subsistence NT    |  | <b>For Payroll Use Only</b> |             |
| Expenses NT       |  |                             |             |
| Carer's Allowance |  |                             |             |
|                   |  | Input by                    | [Signature] |
|                   |  | Date                        |             |

Signed [Redacted] Member Date [Redacted]

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

Authorised [Redacted] Members' Services Date [Redacted]

| Date        | Reason for Journey (including From and To)                               | Time of   |        | Miles Claimed |
|-------------|--|-----------|--------|---------------|
|             |  | Departure | Return |               |
| 4-Apr-2008  | Urban Splash/Urban Village Discussion (Urban Splash Offices, Manchester) | 14:00     | 17:00  | 28            |
| 25-Apr-2008 | AGMA Executive (Wigan Investment Centre)                                 | 9:30      | 12:30  | 15            |
|             |  |           |        |               |
|             |  |           |        |               |
|             |  |           |        |               |
|             |  |           |        |               |
|             |  |           |        |               |
|             |  |           |        |               |
|             |  |           |        |               |
|             |  |           |        |               |
|             |  |           |        |               |
|             |  |           |        |               |



| 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 |

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

Total Miles **43**

|              |              |              |
|--------------|--------------|--------------|
| Total Amount | Total Amount | Total Amount |
| £ p          | £ p          | £ p          |

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

# Members' Allowances Claim

# Bolton Council

|                              |                         |                       |
|------------------------------|-------------------------|-----------------------|
| Name Councillor Cliff Morris | Home Address [REDACTED] | Pay No. [REDACTED]    |
| Car Make/Model VW Golf       | Registration [REDACTED] | Exact CC 3000         |
|                              |                         | Month September 20 08 |

I certify that:-

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

**FOR MEMBERS' SERVICES USE ONLY**

|  |      |
|--|------|
| Signed [REDACTED] Member   | Date |
| 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                 | 179. |          |         |
| Subsistence NT    |  | <b>For Payroll Use Only</b> |      |          |         |
| Expenses NT       |  |                             |      | Input by | CM      |
| Carer's Allowance |  |                             |      | Date     | 9.12.08 |

| Date        | Reason for Journey (including From and To)                  | Time of   |        | Miles Claimed |
|-------------|---|-----------|--------|---------------|
|             |   | Departure | Return |               |
| 26-Sep-2008 | AGMA Executive (Trafford)                                   | 9:30      | 12:00  | 35            |
| 10-Oct-2008 | GM Health Commission (Manchester Cathedral Visitors Centre) | 10:00     | 13:00  | 30            |
| 31-Oct-2008 | AGMA Executive (Manchester Town Hall)                       | 9:30      | 13:00  | 30            |
| 13-Nov-2008 | MAG Shareholders Meeting                                    | 13:00     | 15:00  | 42            |
| 28-Nov-08   | AGMA Exec. (Oldham)   | 9:30      | 12:00  | 42.           |
|             |   |           |        |               |
|             |   |           |        |               |
|             |   |           |        |               |
|             |   |           |        |               |
|             |   |           |        |               |
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|             |   |           |        |               |
|             |   |           |        |               |
|             |   |           |        |               |
|             |   |           |        |               |

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

Total Miles  
~~137~~  
179.

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-d Service Centre, 5th Floor, Paderborn House, Bolton BL1 1JW

# Members' Allowances Claim

# Bolton Council

|                               |              |                                 |
|-------------------------------|--------------|---------------------------------|
| Name: Councillor Cliff Morris | Home Address | Pay No.                         |
| Car Make/Model VW Golf        | Registration | Exact CC 3000 Month December 20 |

- 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    |
|  |                   | 26/2/09 |
| 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          | 92     |
| Subsistence NT    | For Payroll Use Only |        |
| Expenses NT       | Input by             | CM     |
| Carer's Allowance | Date                 | 6.3.09 |

| Date        | Reason for Journey<br>(including From and To)               | Time of   |        | Miles<br>Claimed | Subsistence Allowance |   | Fares and<br>Other Expenses |   | Dependent<br>Carers Allowance |   |
|-------------|---|-----------|--------|------------------|-----------------------|---|-----------------------------|---|-------------------------------|---|
|             |   | Departure | Return |                  | £                     | p | £                           | p | £                             | p |
| 9-Dec-2008  | Vision Steering Group Meeting (Reebok Stadium)              | 9:00      | 14:00  | 8                | £                     | p | £                           | p | £                             | p |
| 10-Dec-2008 | GM Health Commisson Conference (City of Manchester Stadium) | 9:00      | 15:00  | 38               | £                     | p | £                           | p | £                             | p |
| 19-Dec-2008 | AGMA Executive (Wigan Investment Centre)                    | 9:00      | 14:30  | 20               | £                     | p | £                           | p | £                             | p |
| 30-Jan-2009 | AGMA Executive (Bury Town Hall)                             | 9:30      | 13:30  | 18               | £                     | p | £                           | p | £                             | p |
| 10-Feb-2009 | Bolton Councils Economic Summitt (Reebok Stadium)           | 13:00     | 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 |

|             |              |              |              |
|-------------|--------------|--------------|--------------|
| Total Miles | Total Amount | Total Amount | Total Amount |
| 92          | £ 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 Shared Service Centre, 5th Floor, Paderborn House, Bolton BL1 1JW

MURRAY



# Members' Allowances Claim

# Bolton Council

*MURRAY*

|                                     |   |                    |
|-------------------------------------|---|--------------------|
| Name Madeline murray                | Home Address 224, Lee Lane, Horwich BL6 7JF | Pay No. [REDACTED] |
| Car Make/Model Mercedes A class 150 | Registration [REDACTED]                     | Exact CC 1498      |
|                                     | Month April                                 | 20 08              |

I certify that:-

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

## FOR MEMBERS' SERVICES USE ONLY

|                   |                      |     |
|-------------------|----------------------|-----|
| Subsistence T     | Total Miles          | 102 |
| Subsistence NT    | For Payroll Use Only |     |
| Expenses NT       | Input by             |     |
| Carer's Allowance | Date                 |     |

|                          |               |
|--------------------------|---------------|
| Signed [REDACTED] Member | Date 30.05.08 |
|--------------------------|---------------|

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

|   |      |
|---|------|
| Authorised [REDACTED] Members' Services | Date |
|---|------|

| Date        | Reason for Journey (including From and To)   | Time of   |        | Miles Claimed | Subsistence Allowance | Fares and Other Expenses | Dependent Carers Allowance |
|-------------|--|-----------|--------|---------------|-----------------------|--------------------------|----------------------------|
|             |  | Departure | Return |               | £ p                   | £ p                      | £ p                        |
| 1-Apr-2008  | BEMAS (castle hill)                          |           |        | 18            | £ p                   | £ p                      | £ p                        |
| 8-Apr-2008  | special health overview & scrutiny           |           |        | 12            | £ p                   | £ p                      | £ p                        |
| 8-Apr-2008  | adult services scrutiny                      |           |        | 12            | £ p                   | £ p                      | £ p                        |
| 10-Apr-2008 | chldns services, yng people & sport scrutiny |           |        | 12            | £ p                   | £ p                      | £ p                        |
| 14-Apr-2008 | corporate issues scrutiny                    |           |        | 12            | £ p                   | £ p                      | £ p                        |
| 15-Apr-2008 | gt. Lever community group (high st)          |           |        | 10            | £ p                   | £ p                      | £ p                        |
| 16-Apr-2008 | Police briefing (Scholey st)                 |           |        | 14            | £ p                   | £ p                      | £ p                        |
| 17-Apr-2008 | Planning & highways+ Police debrief          |           |        | 12            | £ p                   | £ p                      | £ p                        |
| 23-Apr-2008 | Full Council                                 |           |        |               | £ p                   | £ p                      | £ p                        |
|             |  |           |        |               | £ p                   | £ p                      | £ p                        |
|             |  |           |        |               | £ p                   | £ p                      | £ p                        |
|             |  |           |        |               | £ p                   | £ p                      | £ p                        |
|             |  |           |        |               | £ p                   | £ p                      | £ p                        |
|             |  |           |        |               | £ p                   | £ p                      | £ p                        |

Total Miles

102

|              |              |              |
|--------------|--------------|--------------|
| 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 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 Shar Service Centre, 5th Floor, Paderborn House, Bolton BL1 1JW**

*month 3 sc*

# Members' Allowances Claim

# Bolton Council

|                                    |   |                                |
|------------------------------------|---|--------------------------------|
| Name <b>MADLINE MURRAY</b>         | Home Address <b>224, LEE LANE, HORWICH BL6 7JF.</b> | Pay No. <b>[REDACTED]</b>      |
| Car Make/Model <b>MER. A150 SE</b> | Registration <b>[REDACTED]</b>                      | Exact CC <b>1498</b>           |
|                                    |   | Month <b>JUNE</b> 20 <b>08</b> |

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 <b>[REDACTED]</b> Member | Date <b>2.7.08</b> |
|---------------------------------|--------------------|

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

|  |      |
|--|------|
| Authorised <b>[REDACTED]</b> Members' Services | Date |
|--|------|

|                   |                        |          |
|-------------------|------------------------|----------|
| Subsistence T     | Total Miles <b>216</b> |          |
| 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 |
| 2 <sup>nd</sup> 6 <sup>th</sup> 08 | C.C.MS (HAWWARDSCH) + EXECUTIVE                    |           |        | 14            | £                     | p | £                        | p | £                          | p |
| 4 <sup>th</sup>                    | AREA WORKING BRIEF                                 |           |        | 12            | £                     | p | £                        | p | £                          | p |
| 5 <sup>th</sup>                    | P.C.T. + HEALTH + WELLBEING PARTNER                |           |        | 12            | £                     | p | £                        | p | £                          | p |
| 6 <sup>th</sup>                    | SCHOOLS CAPITAL P.D.G                              |           |        | 12            | £                     | p | £                        | p | £                          | p |
| 9 <sup>th</sup>                    | EXECUTIVE BRIEFING                                 |           |        | 12            | £                     | p | £                        | p | £                          | p |
| 10 <sup>th</sup>                   | DIRECTORS BRIEFING                                 |           |        | 12            | £                     | p | £                        | p | £                          | p |
| 11 <sup>th</sup>                   | DEMENTIA SUPPORT GROUP (TONGE)                     |           |        | 14            | £                     | p | £                        | p | £                          | p |
| 12 <sup>th</sup>                   | INFORMAL COUNCIL                                   |           |        | 12            | £                     | p | £                        | p | £                          | p |
| 16 <sup>th</sup>                   | EXECUTIVE BRIEFING                                 |           |        | 12            | £                     | p | £                        | p | £                          | p |
| 17 <sup>th</sup>                   | SKARE DMT BRIEFING                                 |           |        | 12            | £                     | p | £                        | p | £                          | p |
| 20 <sup>th</sup>                   | BIG HEALTH CHECK + SKARE VISITS                    |           |        | 12            | £                     | p | £                        | p | £                          | p |
| 23 <sup>rd</sup>                   | DIGNITY IN CARE (T.H) + EXEC AWAY DAY (CASTLEHILL) |           |        | 18            | £                     | p | £                        | p | £                          | p |
|                                    |  |           |        | Total Miles   | Total Amount          |   | Total Amount             |   | Total Amount               |   |
|                                    |  |           |        | <b>154</b>    | £                     | 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

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

# Members' Allowances Additional Sheet

# Bolton Council

Please note this is only an additional sheet, and must be submitted with a Members' Allowance Claim Form.

|                             |  |        |      |            |                                       |
|-----------------------------|--|--------|------|------------|---------------------------------------|
| Name <u>MADÉLINE MURRAY</u> |  |        |      | Pay No.    | Month <u>JUNE 2008</u>                |
| Signed                      |  | Member | Date | Authorised | Members' Services Date <u>2.07.08</u> |

| Date             | Reason for Journey<br>(including From and To) | Time of   |        | Miles<br>Claimed | Subsistence Allowance |   | Fares and Other Expenses |   | Dependent Carers Allowance |   |
|------------------|---|-----------|--------|------------------|-----------------------|---|--------------------------|---|----------------------------|---|
|                  |   | Departure | Return |                  | £                     | p | £                        | p | £                          | p |
| 24 <sup>th</sup> | AREA FORUM BRIEF + D.M.T. BRIEF               |           |        | 12               | £                     | p | £                        | p | £                          | p |
| 24 <sup>th</sup> | HEALTH + SOCIAL CARE SCRUTINY                 |           |        | 12               | £                     | p | £                        | p | £                          | p |
| 26 <sup>th</sup> | VISIT TO TELECARE FLAT (BN)                   |           |        | 10               | £                     | p | £                        | p | £                          | p |
| 27 <sup>th</sup> | EXECUTIVE                                     |           |        | 12               | £                     | p | £                        | p | £                          | p |
| 30 <sup>th</sup> | EXECUTIVE BRIEF + FOSTERING PANEL             |           |        | 16               | £                     | 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      | Total Amount          |   | Total Amount             |   | Total Amount               |   |
|                  |   |           |        | 62               | £                     | p | £                        | p | £                          | p |

Please only enter the number of miles. Do not calculate an amount for payment. 62

# Members' Allowances Claim

# Bolton Council

Name **M. MURRAY** Home Address **224, LEE LANE HORWICH BLBTG** Pay No. **[REDACTED]**  
 Car Make/Model **MERCEDES S CLASSISD** Registration **[REDACTED]** Exact CC **[REDACTED]** Month **JULY** 20**08**

I certify that:-

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

### FOR MEMBERS' SERVICES USE ONLY

|                   |  |                             |  |
|-------------------|--|-----------------------------|--|
| Subsistence T     |  | Total Miles                 |  |
| Subsistence NT    |  | <b>For Payroll Use Only</b> |  |
| Expenses NT       |  | Input by                    |  |
| Carer's Allowance |  | Date                        |  |

Signed **[REDACTED]** Member Date **01.09.08**

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 Departure | Time of Return | Miles Claimed | Subsistence Allowance | Fares and Other Expenses | Dependent Carers Allowance |
|-----------------------------------|--|-------------------|----------------|---------------|-----------------------|--------------------------|----------------------------|
| 1 <sup>st</sup>                   | DIRECTORS BRIEFING                           |                   |                | 12            | £ p                   | £ p                      | £ p                        |
| 3 <sup>rd</sup>                   | FIRE AUTHORITY "                             |                   |                | 12            | £ p                   | £ p                      | £ p                        |
| 7 <sup>th</sup>                   | EXEC FOR HEALTH + ADULT S/CARE               |                   |                | 12            | £ p                   | £ p                      | £ p                        |
| 8 <sup>th</sup>                   | DIRECTORS BRIEFING                           |                   |                | 12            | £ p                   | £ p                      | £ p                        |
| 9 <sup>th</sup>                   | FULL COUNCIL                                 |                   |                | 12            | £ p                   | £ p                      | £ p                        |
| 14 <sup>th</sup> 21 <sup>st</sup> | EXEC BRIEFING + TIF BRIEFINGS                |                   |                | 12            | £ p                   | £ p                      | £ p                        |
| 22 <sup>nd</sup>                  | DIRECTORS BRIEF + GLAVER NEIGHBOURHOOD BRIEF |                   |                | 16            | £ p                   | £ p                      | £ p                        |
| 25 <sup>th</sup>                  | THURKETFORD HSE (MAYOR) + EXECUTIVE          |                   |                | 17            | £ p                   | £ p                      | £ p                        |
| 28 <sup>th</sup>                  | EXEC BRIEF + FOSTERING PANEL                 |                   |                | 18            | £ p                   | £ p                      | £ p                        |
| 30 <sup>th</sup>                  | HOSPITAL MEETING (CHAIR + CHIEF EXEC)        |                   |                | 14            | £ p                   | £ p                      | £ p                        |
| 29 <sup>th</sup>                  | DIRECTORS BRIEFING                           |                   |                | 12            | £ p                   | £ p                      | £ p                        |

Total Miles **149**


|              |              |              |
|--------------|--------------|--------------|
| 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 **[REDACTED]**

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

|   |               |                |              |
|---|---------------|----------------|--------------|
| Class   | Ticket type   | Adult          | Child        |
| STD   | CHEAP DAY RTN | ONE            | NIL          |
|   | Start date    | Number         |              |
|   | 22·AUG·08     | 98633          | 002302599N51 |
| From  | Valid until   | Price          |              |
| BOLTON *  | 22·AUG·08     | £7·70M         |              |
| To  | Route         | Validity       |              |
| PRESTON LANCS *   | ANY PERMITTED | SEE RESTRICTNS |              |
|  |               |                |              |
| NIR   |               |                |              |
| EIGHTH AVENUE, LONDON, W1P 8LP  |               |                |              |
| 020 7596 2000   |               |                |              |
| www.nir.com   |               |                |              |

# Members' Allowances Claim

# Bolton Council

|                |                      |              |                               |          |             |
|----------------|----------------------|--------------|-------------------------------|----------|-------------|
| Name           | M. MURRAY            | Home Address | 224, LEE LANE HORWICH BL6 7JF | Pay No.  | [REDACTED]  |
| Car Make/Model | MERCEDES SICLASS 150 | Registration | [REDACTED]                    | Exact CC | 1498        |
|                |                      |              |                               | Month    | AUGUST 2008 |

I certify that:-

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

### FOR MEMBERS' SERVICES USE ONLY

|                   |      |                      |     |
|-------------------|------|----------------------|-----|
| Subsistence T     |      | Total Miles          | 294 |
| Subsistence NT    |      | For Payroll Use Only |     |
| Expenses NT       | 7.70 |                      |     |
| Carer's Allowance |      | Input by             |     |
|                   |      | Date                 |     |

Signed [REDACTED] Member Date 1-09-08

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

Authorised [REDACTED] Members' Services Date

| Date             | Reason for Journey (including From and To) | Time of   |        | Miles Claimed | Subsistence Allowance |   |        | Fares and Other Expenses |   |   | Dependent Carers Allowance |   |  |
|------------------|--|-----------|--------|---------------|-----------------------|---|--------|--------------------------|---|---|----------------------------|---|--|
|                  |  | Departure | Return |               | £                     | p | £      | p                        | £ | p | £                          | p |  |
| 4 <sup>th</sup>  | EXEC MEMBER HEALTH / ADULT SICARE          |           |        | 12            | £                     | p | £      | p                        | £ | p | £                          | p |  |
| 7 <sup>th</sup>  | DIRECTORS BRIEF + G. LEVER BOARD           |           |        | 16            | £                     | p | £      | p                        | £ | p | £                          | p |  |
| 11 <sup>th</sup> | EXECUTIVE BRIEF                            |           |        | 12            | £                     | p | £      | p                        | £ | p | £                          | p |  |
| 12 <sup>th</sup> | P.D.G.                                     |           |        | 12            | £                     | p | £      | p                        | £ | p | £                          | p |  |
| 12 <sup>th</sup> | ADULTS SCRUTINY                            |           |        | 12            | £                     | p | £      | p                        | £ | p | £                          | p |  |
| 15 <sup>th</sup> | VISIT TO HELP DESK                         |           |        | 12            | £                     | p | £      | p                        | £ | p | £                          | p |  |
| 18 <sup>th</sup> | EXEC BRIEF + FOSTERING PANEL               |           |        | 17            | £                     | p | £      | p                        | £ | p | £                          | p |  |
| 19 <sup>th</sup> | STAR CHAMBER                               |           |        | 12            | £                     | p | £      | p                        | £ | p | £                          | p |  |
| 22 <sup>nd</sup> | OLDER PERSONS CHAMPION (PRESTON)           |           |        | —             | £                     | p | £ 7.70 | p                        | £ | p | £                          | p |  |
| 26 <sup>th</sup> | DIR/BRIEF + Gt LEVER BIG ISSUES (Gt LEVER) |           |        | 16            | £                     | p | £      | p                        | £ | p | £                          | p |  |
| 27 <sup>th</sup> | COUNCIL                                    |           |        | 12            | £                     | p | £      | p                        | £ | p | £                          | p |  |
| 28 <sup>th</sup> | INFORMAL COUNCIL                           |           |        | 12            | £                     | p | £      | p                        | £ | p | £                          | p |  |

Total Miles 145

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

# Members' Allowances Claim

# Bolton Council

|                                     |   |                    |
|-------------------------------------|---|--------------------|
| Name Madeline murray                | Home Address 224, Lee Lane, Horwich BL6 7JF | Pay No. [REDACTED] |
| Car Make/Model Mercedes A class 150 | Registration [REDACTED]                     | Exact CC 1498      |
|                                     |   | Month SEPT. 20 08  |

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

### FOR MEMBERS' SERVICES USE ONLY

|  |               |
|--|---------------|
| Signed [REDACTED] Member   | Date 30.10.08 |
| 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          | 136 |
| 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 <sup>st</sup>                 | EXEC MEMBER ADULTS + FULL EXECUTIVE         |           |        | 12            | £                     | p | £                        | p | £                          | p |
| 2 <sup>nd</sup>                 | DIRECTORS BRIEF + RBH GOVS MEETING          |           |        | 16            | £                     | p | £                        | p | £                          | p |
| 5 <sup>th</sup>                 | INSPECTION INTERVIEW (S/S)                  |           |        | 12            | £                     | p | £                        | p | £                          | p |
| 8 <sup>th</sup> 9 <sup>th</sup> | DIRECTORS BRIEF                             |           |        | 12            | £                     | p | £                        | p | £                          | p |
| 15 <sup>th</sup>                | EXEC BRIEF + DISABILITY BOARD               |           |        | 12            | £                     | p | £                        | p | £                          | p |
| 16 <sup>th</sup>                | CON. CARE (S/S)                             |           |        | 12            | £                     | p | £                        | p | £                          | p |
| 17 <sup>th</sup>                | BEST. V. M + PERFORMANCE TRAINING           |           |        | 12            | £                     | p | £                        | p | £                          | p |
| 22 <sup>nd</sup>                | EXEC BRIEF + SLATERFIELD HSE PANEL          |           |        | 12            | £                     | p | £                        | p | £                          | p |
| 23 <sup>rd</sup>                | DIR/BRIEF (ADULT SOCIAL CARE)               |           |        | 12            | £                     | p | £                        | p | £                          | p |
| 29 <sup>th</sup>                | EXEC MEM ADULT SOCIAL CARE + FULL EXECUTIVE |           |        | 12            | £                     | p | £                        | p | £                          | p |
| 30 <sup>th</sup>                | DIR/BRIEF                                   |           |        | 12            | £                     | p | £                        | p | £                          | p |
|                                 |   |           |        |               | £                     | p | £                        | p | £                          | p |

Total Miles

136

|              |              |              |
|--------------|--------------|--------------|
| 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 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

*Madeline Murray*

# Members' Allowances Claim

# Bolton Council

|                                     |   |                    |
|-------------------------------------|---|--------------------|
| Name Madeline murray                | Home Address 224, Lee Lane, Horwich BL6 7JF | Pay No. [REDACTED] |
| Car Make/Model Mercedes A class 150 | Registration [REDACTED]                     | Exact CC 1498      |
| Month SEPT. April                   |   | 20 08              |

I certify that:-

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

### FOR MEMBERS' SERVICES USE ONLY

|                   |  |                             |     |
|-------------------|--|-----------------------------|-----|
| Subsistence T     |  | Total Miles                 | 136 |
| Subsistence NT    |  | <b>For Payroll Use Only</b> |     |
| Expenses NT       |  | Input by                    |     |
| Carer's Allowance |  | Date                        |     |

|  |               |
|--|---------------|
| Signed [REDACTED] Member   | Date 30.10.08 |
| 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 |               |
| 1 <sup>st</sup>                 | EYEC MEMBER ADULTS + FULL EXECUTIVE         |           |        | 12            |
| 2 <sup>nd</sup>                 | DIRECTORS BRIEF + RBH GOVS MEETING          |           |        | 16            |
| 5 <sup>th</sup>                 | INSPECTION INTERVIEW(S)                     |           |        | 12            |
| 8 <sup>th</sup> 9 <sup>th</sup> | DIRECTORS BRIEF                             |           |        | 12            |
| 15 <sup>th</sup>                | EYEC BRIEF + DISABILITY BOARD               |           |        | 12            |
| 16 <sup>th</sup>                | CON. CARE (S/S)                             |           |        | 12            |
| 17 <sup>th</sup>                | BEST. V. M + PERFORMANCE TRAINING           |           |        | 12            |
| 22 <sup>nd</sup>                | EYEC BRIEF + SLATERFIELD HSE PANEL          |           |        | 12            |
| 23 <sup>rd</sup>                | DIR/BRIEF (ADULT SOCIAL CARE)               |           |        | 12            |
| 29 <sup>th</sup>                | EYEC MEM ADULT SOCIAL CARE + FULL EXECUTIVE |           |        | 12            |
| 30 <sup>th</sup>                | DIR. BRIEF                                  |           |        | 12            |

| 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 |

|             |              |              |              |
|-------------|--------------|--------------|--------------|
| Total Miles | Total Amount | Total Amount | Total Amount |
| 136         | £ 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  
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

*Caroline*



# Members' Allowances Claim

BOLTON COUNCIL  
- 4 NOV 2008  
PAYROLL SHARED  
SERVICE CENTRE

# Bolton Council

|                                     |   |                      |
|-------------------------------------|---|----------------------|
| Name Madeline murray                | Home Address 224, Lee Lane, Horwich BL6 7JF | Pay No. [REDACTED]   |
| Car Make/Model Mercedes A class 150 | Registration [REDACTED]                     | Exact CC 1498        |
|                                     |   | Month OCT Year 20 08 |

I certify that:-

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

### FOR MEMBERS' SERVICES USE ONLY

|                   |                      |     |
|-------------------|----------------------|-----|
| Subsistence T     | Total Miles          | 370 |
| Subsistence NT    | For Payroll Use Only |     |
| Expenses NT       |                      |     |
| Carer's Allowance | Input by             |     |
|                   | Date                 |     |

|  |               |
|--|---------------|
| Signed [REDACTED] Member   | Date 30.10.08 |
| I certify that I have examined this allowance sheet, the figures recorded are reasonable, and the expense was necessary. |               |
| Authorised [REDACTED] Members' Services  | Date          |

| Date             | Reason for Journey (including From and To) | Time of   |        | Miles Claimed | Subsistence Allowance |   | Fares and Other Expenses |   | Dependent Carers Allowance |   |
|------------------|--|-----------|--------|---------------|-----------------------|---|--------------------------|---|----------------------------|---|
|                  |  | Departure | Return |               | £                     | p | £                        | p | £                          | p |
| 6.10.08          | EXECUTIVE BRIEFING                         |           |        | 12            | £                     | p | £                        | p | £                          | p |
| 7 <sup>th</sup>  | DIRECTORS BRIEF + ADULT SCRUTINY           |           |        | 12            | £                     | p | £                        | p | £                          | p |
| 9 <sup>th</sup>  | GT. LEVER NEIGHBOURHOOD BOARD              |           |        | 14            | £                     | p | £                        | p | £                          | p |
| 13 <sup>th</sup> | EXEC BRIEF + SHAUNA MORTON (B&H)           |           |        | 12            | £                     | p | £                        | p | £                          | p |
| 14 <sup>th</sup> | DIRECTORS BRIEFING                         |           |        | 12            | £                     | p | £                        | p | £                          | p |
| 15 <sup>th</sup> | M.O.M. (AREA FORUM) + STARTING POINT       |           |        | 16            | £                     | p | £                        | p | £                          | p |
| 20 <sup>th</sup> | EXECUTIVE BRIEF + AREA CO-ORDINATOR        |           |        | 12            | £                     | p | £                        | p | £                          | p |
| 21 <sup>st</sup> | CHLDS PDG + D/BRIEF                        |           |        | 12            | £                     | p | £                        | p | £                          | p |
| 22 <sup>nd</sup> | FULL COUNCIL                               |           |        | 12            | £                     | p | £                        | p | £                          | p |
| 23 <sup>rd</sup> | LIVERPOOL ADASS CONFERENCE                 |           |        | 84            | £                     | p | £                        | p | £                          | p |
| 27 <sup>th</sup> | EXEC BRIEF + EXECUTIVE                     |           |        | 12            | £                     | p | £                        | p | £                          | p |
| 28 <sup>th</sup> | EXEC BRIEFING S/CARE + AREA FORUM          |           |        | 24            | £                     | p | £                        | p | £                          | p |

Total Miles  
234

|              |              |              |
|--------------|--------------|--------------|
| 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 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

*Aden murray*

# Members' Allowances Claim

# Bolton Council

|                                     |   |                      |
|-------------------------------------|---|----------------------|
| Name Madeline murray                | Home Address 224, Lee Lane, Horwich BL6 7JF | Pay No. [REDACTED]   |
| Car Make/Model Mercedes A class 150 | Registration [REDACTED]                     | Exact CC 1498        |
|                                     |   | Month NOVEMBER 20 08 |

I certify that:-

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

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

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

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

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

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

### FOR MEMBERS' SERVICES USE ONLY

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

|  |               |
|--|---------------|
| Signed [REDACTED] Member   | Date 30.01.09 |
| I certify that I have examined this allowance sheet, the figures recorded are reasonable, and the expense was necessary. |               |
| Authorised [REDACTED] Members' Services  | Date          |

| Date             | Reason for Journey (including From and To)             | Time of   |        | Miles Claimed | Subsistence Allowance |   | Fares and Other Expenses |   | Dependent Carers Allowance |   |
|------------------|--|-----------|--------|---------------|-----------------------|---|--------------------------|---|----------------------------|---|
|                  |  | Departure | Return |               | £                     | p | £                        | p | £                          | p |
| 3 <sup>rd</sup>  | EXEC BRIEFING + <del>EDUCATION</del> WEB PAGE BRIEFING |           |        | 12            | £                     | p | £                        | p | £                          | p |
| 5 <sup>th</sup>  | P.D.G.   |           |        | 12            | £                     | p | £                        | p | £                          | p |
| 10 <sup>th</sup> | ED BUDGET + EXEC BRIEFING                              |           |        | 12            | £                     | p | £                        | p | £                          | p |
| 11 <sup>th</sup> | DIRECTORS BRIEF  |           |        | 12            | £                     | p | £                        | p | £                          | p |
| 17 <sup>th</sup> | EXEC BRIEFING  |           |        | 12            | £                     | p | £                        | p | £                          | p |
| 18 <sup>th</sup> | DIRECTORS BRIEFING + ASIAN ELDERS                      |           |        | 12            | £                     | p | £                        | p | £                          | p |
| 19 <sup>th</sup> | BUDGET P.D.G. (3.30)                                   |           |        | 12            | £                     | p | £                        | p | £                          | p |
| 21 <sup>st</sup> | SCHOOL CAPITAL PROGRAMME                               |           |        | 12            | £                     | p | £                        | p | £                          | p |
| 24 <sup>th</sup> | EXEC MEMBER HI ADULT CARE + FOSTERING                  |           |        | 18            | £                     | p | £                        | p | £                          | p |
| 25               | HI ADULT CARE P.D.G.                                   |           |        | 12            | £                     | p | £                        | p | £                          | p |
| 27 <sup>th</sup> | VISIT QUEBEC HALL / CLARENDAWN SCH.                    |           |        | 12            | £                     | p | £                        | p | £                          | p |
| 28 <sup>th</sup> | CHLDNS SERVICES BUDGET P.D.G.                          |           |        | 12            | £                     | p | £                        | p | £                          | p |

|             |              |              |              |
|-------------|--------------|--------------|--------------|
| Total Miles | Total Amount | Total Amount | Total Amount |
| 150         | £ p          | £ p          | £ p          |

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

If you require more lines, please use a Members' Allowances Additional Sheet Number of Additional Sheets Used 0

# Members' Allowances Claim

# Bolton Council

|                                     |   |                      |
|-------------------------------------|---|----------------------|
| Name Madeline murray                | Home Address 224, Lee Lane, Horwich BL6 7JF | Pay No. [REDACTED]   |
| Car Make/Model Mercedes A class 150 | Registration [REDACTED]                     | Exact CC 1498        |
|                                     |   | Month DECEMBER 20 08 |

I certify that:-

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

### FOR MEMBERS' SERVICES USE ONLY

|                          |               |
|--------------------------|---------------|
| Signed [REDACTED] Member | Date 30.01.09 |
|--------------------------|---------------|

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 |
| 1 <sup>st</sup>  | EXEC BRIEF + P.D.G                         |           |        | 12            | £                     | p | £                        | p | £                          | p |
| 2 <sup>nd</sup>  | ADULT SERVICES SCRUTINY + D/BRIEF          |           |        | 12            | £                     | p | £                        | p | £                          | p |
| 3 <sup>rd</sup>  | B + HIF PDG                                |           |        | 12            | £                     | p | £                        | p | £                          | p |
| 4 <sup>th</sup>  | SCRUTINY (10.00) + CONNECTING CARE (VCH)   |           |        | 12            | £                     | p | £                        | p | £                          | p |
| 5 <sup>th</sup>  | EXEC BRIEF + EXECUTIVE                     |           |        | 12            | £                     | p | £                        | p | £                          | p |
| 9 <sup>th</sup>  | VISION CONFERENCE + DIRECTORS BRIEF        |           |        | 12            | £                     | p | £                        | p | £                          | p |
| 10 <sup>th</sup> | FULL COUNCIL                               |           |        | 12            | £                     | p | £                        | p | £                          | p |
| 11 <sup>th</sup> | HEALTH + S/CARE AWARDS                     |           |        | 12            | £                     | p | £                        | p | £                          | p |
| 15 <sup>th</sup> | <del>EXEC BRIEF</del>                      |           |        |               | £                     | p | £                        | p | £                          | p |
|                  |  |           |        |               | £                     | p | £                        | p | £                          | p |
|                  |  |           |        |               | £                     | p | £                        | p | £                          | p |
|                  |  |           |        |               | £                     | p | £                        | p | £                          | p |
|                  |  |           |        |               | £                     | p | £                        | p | £                          | p |
|                  |  |           |        |               | £                     | p | £                        | p | £                          | p |
|                  |  |           |        |               | £                     | p | £                        | p | £                          | p |
|                  |  |           |        |               | £                     | p | £                        | p | £                          | p |
|                  |  |           |        |               | £                     | p | £                        | p | £                          | p |
|                  |  |           |        |               | £                     | p | £                        | p | £                          | p |
|                  |  |           |        |               | £                     | p | £                        | p | £                          | p |
|                  |  |           |        |               | £                     | p | £                        | p | £                          | p |
|                  |  |           |        |               | £                     | p | £                        | p | £                          | p |

|             |              |              |              |
|-------------|--------------|--------------|--------------|
| Total Miles | Total Amount | Total Amount | Total Amount |
| 96          | £ p          | £ p          | £ p          |

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

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

Number of Additional Sheets Used 0

PAY-M1  
12.10.2007

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

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

# Members' Allowances Claim

# Bolton Council

PAID

|                                     |   |               |                      |
|-------------------------------------|---|---------------|----------------------|
| Name Madeline murray                | Home Address 224, Lee Lane, Horwich BL6 7JF |               | Pay No. [REDACTED]   |
| Car Make/Model Mercedes A class 150 | Registration [REDACTED]                     | Exact CC 1498 | Month JANUARY 20 009 |

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          | 871    |
| Subsistence NT    | For Payroll Use Only |        |
| Expenses NT       |                      |        |
| Carer's Allowance | Input by             | CM     |
|                   | Date                 | 5.2.09 |

**Signed** [REDACTED] Member **Date** 30.01.09

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 |               |
| 5 <sup>th</sup>  | EXEC BRIEFING.                                |           |        | 12            |
| 6 <sup>th</sup>  | DIRECTORS BRIEFING + CONTRACTS                |           |        | 12            |
| 7 <sup>th</sup>  | STARTING POINT (OLDAMS SCH)                   |           |        | 13            |
| 9 <sup>th</sup>  | PRIMARY CARE TRUST                            |           |        | 12            |
| 12 <sup>th</sup> | EXECUTIVE + P.D.G                             |           |        | 12            |
| 13               | DIRECTORS (S/CARE) BRIEFING                   |           |        | 12            |
| 14 <sup>th</sup> | BUDGET PDG.                                   |           |        | 12            |
| 15 <sup>th</sup> | DIRECTORS APPRAISAL + CONNECTED CARE          |           |        | 12            |
| 20 <sup>th</sup> | S/CARE DIRECTORS BRIEF + ST LEVER AREA FORUM. |           |        | 26            |
| 26 <sup>th</sup> | EXEC BRIEF / STAR CHAMBER / DIS BOARD         |           |        | 12            |
| 27 <sup>th</sup> | LONDON - CSC I CONFERENCE                     |           |        | 478           |
| 28 <sup>th</sup> | EXEC MEMBER H / ADULTS / CARE                 |           |        | 12            |

| 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                        |
| Total Amount          | Total Amount             | Total Amount               |
| £ p                   | £ p                      | £ p                        |

Total Miles 625

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, Bol BL1 1JW

Number of Additional Sheets Used 0

# Members' Allowances Claim

# Bolton Council

|                                     |   |                      |
|-------------------------------------|---|----------------------|
| Name Madeline murray                | Home Address 224, Lee Lane, Horwich BL6 7JF | Pay No. [REDACTED]   |
| Car Make/Model Mercedes A class 150 | Registration [REDACTED]                     | Exact CC 1498        |
|                                     |   | Month FEBRUARY 20 09 |

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                 | 166    |
| Subsistence NT    |  | <b>For Payroll Use Only</b> |        |
| Expenses NT       |  | Input by                    | CM     |
| Carer's Allowance |  | Date                        | 1.4.09 |

Signed [REDACTED] Member Date 4.03.09

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

Authorised [REDACTED] Members' Services Date

| Date             | Reason for Journey (including From and To) | Time of   |        | Miles Claimed | Subsistence Allowance |   | Fares and Other Expenses |   | Dependent Carers Allowance |   |
|------------------|--|-----------|--------|---------------|-----------------------|---|--------------------------|---|----------------------------|---|
|                  |  | Departure | Return |               | £                     | p | £                        | p | £                          | p |
| 2 <sup>nd</sup>  | P.D.G. EXECB + EXECUTIVE                   |           |        | 12            | £                     | p | £                        | p | £                          | p |
| 3 <sup>rd</sup>  | SICARE DIRECTORS BRIEFING                  |           |        | 12            | £                     | p | £                        | p | £                          | p |
| 9 <sup>th</sup>  | EXEC BRIEFING + MAKING IT HAPPEN           |           |        | 12            | £                     | p | £                        | p | £                          | p |
| 10 <sup>th</sup> | DIRECTORS BRIEF + ADULT SCRUTINY           |           |        | 12            | £                     | p | £                        | p | £                          | p |
| 12 <sup>th</sup> | IDEA LEAD MEMBER TRAINING (WRIGHTINGTON)   |           |        | 18?           | £                     | p | £                        | p | £                          | p |
| 13 <sup>th</sup> | EXECUTIVE BUDGET                           |           |        | 12            | £                     | p | £                        | p | £                          | p |
| 16 <sup>th</sup> | SCHOOLS CAP PROGRAMME PDG                  |           |        | 12            | £                     | p | £                        | p | £                          | p |
| 17 <sup>th</sup> | DIRECTOR BRIEF + JOINT PDG                 |           |        | 12            | £                     | p | £                        | p | £                          | p |
| 18 <sup>th</sup> | 'THINK FAMILY' LAUNCH (TIC)                |           |        | 16            | £                     | p | £                        | p | £                          | p |
| 23 <sup>rd</sup> | H/ADULTSICARE EXECUTIVE                    |           |        | 12            | £                     | p | £                        | p | £                          | p |
| 24 <sup>th</sup> | EXEC BRIEF + MOM                           |           |        | 12            | £                     | p | £                        | p | £                          | p |
| 25 <sup>th</sup> | COUNCIL                                    |           |        | 12            | £                     | p | £                        | p | £                          | p |
| 26 <sup>th</sup> | EXEC AWAY DAY                              |           |        | 12            | £                     | p | £                        | p | £                          | p |

Total Miles 166

|              |              |              |
|--------------|--------------|--------------|
| Total Amount | Total Amount | Total Amount |
| £ p          | £ p          | £ p          |

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

166

Number of Additional Sheets Used 1

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

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

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