

Members' Allowances Claim

Bolton Council

Name <u>WALTER HALL</u>	Home Address <u>2 SANDOWN RD HARWOOD BOLTON</u>	Pay No. <u>15820</u> <u>AA 9831</u>
Car Make/Model <u>CITROEN PICASSO</u>	Registration <u>[REDACTED]</u>	Exact CC <u>15-87 CC</u> Month <u>MAY 2009</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 <u>[REDACTED]</u> Member	Date <u>14 DEC 09</u>
I certify that I have examined this allowance sheet, the figures recorded are reasonable, and the expense was necessary.	
Authorised <u>[REDACTED]</u> Members' Services	Date <u>30/12/09</u>

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	
5 th MAY 09	MEETING OF COUNCIL (PADERBORN ELVE)	4-45	7-30	6
14 th MAY 09	PLANNING	10AM	5PM	6
18 th MAY 09	BOLTON WISE BOARD MEETING	9AM	12-15	6
19 th MAY 09	ADULT SOC CARE P D G.	9AM	10-45	6
20 th MAY 09	MEETING OF CHAIRS / VICE CHAIRS SCOTINY	4-45	6-30	6
26 th MAY 09	ADULT SCROTINY	12-30	4-30	6
28 th MAY 09	PLANNING	9AM	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
£ p	£ p	£ p
£ p	£ p	£ p
£ p	£ p	£ p
£ 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

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.	1582931
Car Make/Model	FIAT PANDA	Registration	[REDACTED]	Exact CC	15:87 CC
				Month	JULY 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	15 DEC 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	30/12/09

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	Subsistence Allowance	Fares and Other Expenses		Dependent Carers Allowance
		Departure	Return			£	p	
6 JULY 09	SINGLE LOCAL JOINT CONSULTATIVE	10:30am	1pm	6	£	p	£	p
7 th JULY 09	ADULTS P.D.G	1-30	5pm	6	£	p	£	p
8 th JULY 09	MEETING OF COUNCIL	6-30	9-30	6	£	p	£	p
9 JULY 09	PLANNING	9 AM	4:30pm	6	£	p	£	p
17 JULY 09	CHILDRENS SCRUTINY	2-30	4:45	6	£	p	£	p
21 JULY 09	WEST PENINE MOORS MANAGEMENT	9-30am	1-30	7	£	p	£	p
23 JULY 09	PLANNING	9 AM	4-30	6	£	p	£	p
27 JULY 09	FORUM MEMBER MEETING	6pm	7:45	6	£	p	£	p
29 JULY 09	CHILDRENS SCRUTINY	3pm	6:30	6	£	p	£	p
					£	p	£	p
					£	p	£	p
					£	p	£	p
					£	p	£	p

Total Miles	55	Total Amount	£	p	Total Amount	£	p	Total Amount	£	p
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Please only enter the number of miles. Do not calculate an amount for payment.

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

Name WALTER HALL	Home Address 2 SANDOWN RD HARWOOD	Pay No. 15520 AA 0831
Car Make/Model CITROEN PICASSO	Registration [REDACTED]	Exact CC 15 87 CC Month AUG 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 15 DEC 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 30/12/09

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	Subsistence Allowance		Fares and Other Expenses		Dependent Carers Allowance	
		Departure	Return		£	p	£	p	£	p
4 AUG 09	ADULTS SCRUTINY AGENDA	12:30pm	2-30	6	£	p	£	p	£	p
18 AUG 09	ADULTS SCRUTINY	5-30pm	08-15	6	£	p	£	p	£	p
20 AUG 09	PLANNING	12:30pm	5-15	6	£	p	£	p	£	p
26 AUG 09	OLDER PEOPLES PARTNERSHIP	2-30pm	5-30	6	£	p	£	p	£	p
27 AUG 09	CHILDRENS SERVICES	3-30	6-30	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
					£	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
30	£ p	£ p	£ p

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 SANDAWN RD HARWOOD BOLTON	Pay No.	15829 AA 9831
Car Make/Model	CITROEN PICASSO	Registration	[REDACTED]	Exact CC	15 87cc
				Month	OCT 2000

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	16 DEC 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	30/12/09.

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	
6 OCT 09	ADULTS SCRUTINY	5:30	9:15	6
7 OCT 09	ADULTS P.D.C.	9AM	11:30	6
8 OCT 09	CHILDRENS SERVICES	3:30	6:15	6
15 OCT 09	PLANNING	9AM	6pm	6
19 OCT 09	ELECTIVE MEETING.	1:30	3:30	6
21 OCT 09	MEETING OF THE COUNCIL	6:15	9:30	6
29 OCT 09	PLANNING	9AM	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
£	p	£	p	£	p
£	p	£	p	£	p
£	p	£	p	£	p
£	p	£	p	£	p
£	p	£	p	£	p
£	p	£	p	£	p
£	p	£	p	£	p
£	p	£	p	£	p
£	p	£	p	£	p
£	p	£	p	£	p
£	p	£	p	£	p
£	p	£	p	£	p
£	p	£	p	£	p
£	p	£	p	£	p
£	p	£	p	£	p
£	p	£	p	£	p
£	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

Number of Additional Sheets Used

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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.	15820
Car Make/Model	CITROEN PICASSO	Registration	[REDACTED]	Exact CC	15.87 CC
				Month	SEP 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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FOR MEMBERS' SERVICES USE ONLY

Signed	[REDACTED] Member	Date	15 DEC 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	30/12/09.

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	Subsistence Allowance		Fares and Other Expenses		Dependent Carers Allowance	
		Departure	Return		£	p	£	p	£	p
2 ND SEP 09	MEETING OF COUNCIL	6pm	9-30	6	£	p	£	p	£	p
3 RD SEP 09	PLANNING.	9am	4-30	6	£	p	£	p	£	p
9 TH SEP 09	ADULT P.D.G	9am	1145	6	£	p	£	p	£	p
11 SEP 09	ADULTS/HOUSING/BOLTON AT HOME SCINT P.D.G	12 pm	2-30		£	p	£	p	£	p
14 SEP 09	FORUM MEMBER MEETING	5-30	745	6	£	p	£	p	£	p
17 SEP 09	PLANNING	9am	4-30	6	£	p	£	p	£	p
21 SEP 09	EXECUTIVE MEETING	12-30	2-30	6	£	p	£	p	£	p
23 SEP 09	ADULTS AGENDA MEETING	1-30	4-30	6	£	p	£	p	£	p
24 SEP 09	SINGLE STATUS TAST GROUP	9-30	12-30	6	£	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	48	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 WALTER HALL	Home Address 2 SANDOWN RD HARWOOD BOLTON	Pay No. 15829 AA 9831
Car Make/Model CITROEN PICASSO	Registration [REDACTED]	Exact CC 15.87 cc Month NOV. 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 16 DEC 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 30/12/09

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	
4th Nov 09	ADULTS P.I.D.G	9 AM	12-15	6
11 Nov 09	JOINT CONSULTATIVE MEETING	2-30	5 15	6
12 Nov 09	PLANNING.	9 AM	4 30	6
16 Nov 09	CHILDRENS SCRUTINY	5 pm	7-30	6
19 Nov 09	OLDER PEOPLES NETWORK	12 pm	3 pm	6
26 Nov 09	PLANNING.	9.30	7 pm	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
£	p	£	p	£	p
Total Amount		Total Amount		Total Amount	
£	p	£	p	£	p

Total Miles **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 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.	15829 08 9 831
Car Make/Model	CITROEN PICASSO	Registration	[REDACTED]	Exact CC	15.8700
				Month	DEC 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	19 DEC
I certify that I have examined this allowance sheet, the figures recorded are reasonable, and the expense was necessary.				
Authorised	[REDACTED]	Members' Services	Date	30/12/09

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
		Departure	Return	
19 DEC 09	ADULTS SCRUTINY	5pm	8-30	6
8 DEC 09	BOLTON AT HOME BRIEFING	4-30	7-30	6
9 DEC 09	ADULT P D G.	9-AM	11 PM	6
9 DEC 09	MEETING OF THE COUNCIL	6-30	9-30	6
15 DEC 09	OLDER PEOPLE PARTNERSHIP BOARD	8-30	11-30	6
16 DEC 09	PLANNING INFORMAL MEETING	1-30	4-15	6
18 DEC	ADULTS SOC CARE-PUTTING PEOPLE- FIRST AT HOLIDAY INN			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

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

Total Miles	42
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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 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 JAMES LORD Home Address 22, LINFIELD CLOSE FARNWORTH Pay No. 15748
 Car Make/Model FORD MONDEO Registration [REDACTED] Exact CC 1788 Month MARCH/APRIL 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	<u>89</u>
Subsistence NT		For Payroll Use Only	
Expenses NT		Input by	<u>CM</u>
Carer's Allowance		Date	<u>15.4.09</u>

Signed [REDACTED] Member Date 30 -

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
MARCH 3	LIC APPEAL	9.15	11.45	9	£	p	£	p	£	p
3	CAR PARKING P.D.G	1.00	3.15	9	£	p	£	p	£	p
4	FULL COUNCIL MEETING	6.15	10.30	9	£	p	£	p	£	p
9	FARNWORTH AREA FORUM	6.15	8.45	4	£	p	£	p	£	p
10	LIC. COMM MEETING	1.15	4.00	9	£	p	£	p	£	p
11	PRODDER LAKE GOVERNANCE MEET.	5.45	9.30	4	£	p	£	p	£	p
12	EXTERNAL ORGANISATION SCRUTINY	1.15	4.15	9	£	p	£	p	£	p
17	AUDIT COMM MEETING	9.15	11.30	9	£	p	£	p	£	p
18	PRIVATE HIRE CONSULTATIVE	10.15	12.00	9	£	p	£	p	£	p
23	LIC. SUB. COMM.	1.15	3.30	9	£	p	£	p	£	p
30	KEITH JAVIER "TESCO" APPEAL	9.00	11.15	9	£	p	£	p	£	p
					Total Amount		Total Amount		Total Amount	
					£	p	£	p	£	p

Total Miles 89

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

Members' Allowances Claim

Bolton Council

O/F

Name	CLR JAMES LORD	Home Address	22, LINGFIELD CLOSE FARNWORTH BL4 9NZ	Pay No.	15748
Car Make/Model	FORD MONEO	Registration	[REDACTED]	Exact CC	1788
I certify that:-			Month	APRIL/MAY 2009	

- (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	19.6.09
I certify that I have examined this allowance sheet, the figures recorded are reasonable, and the expense was necessary.				
Authorised	[REDACTED]	Members' Services	Date	

FOR MEMBERS' SERVICES USE ONLY			
Subsistence T		Total Miles	118
Subsistence NT		For Payroll Use Only	
Expenses NT		Input by	CM
Carer's Allowance		Date	2.7.09

Date	Reason for Journey (including From and To)	Time of		Miles Claimed
		Departure	Return	
30.3.09	MEETING RE-TESCO PLAN. APPL.	9.00	11.00	9
6.4.09	AREA FORUM MEMBER MEETING	2.30	4.30	9
21.4.09	PLANNING APPL. MEETING (SHIMA LORDES)	11.00	12.30	9
22.4.09	AUDIT COMM. MEETING	10.30	11.45	9
29.4.09	FULL COUNCIL	6.15	10.15	9
5.5.09	KEITH DAVIES TESCO APPLICATION	11.00	12.30	9
7.5.09	LIC SUB. COMMITTEE	9.15	12.15	9
19.5.09	LIC. & ENVIR COMMITTEE	1.15	4.30	9
20.5.09	FULL COUNCIL	6.15	10.00	9
9.6.09	LIC. ENVIR AGENDA MEETING	11.00	12.30	9
9.6.09	AREA FORUM MEMBER MEETING	2.30	4.30	9
16.6.09	LIC ENVIR COMMITTEE	1.15	6.30	9

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
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 118

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

Number of Additional Sheets Used

Members' Allowances Claim

Bolton Council

Name <i>CLLR JAMES LORD</i>	Home Address <i>22, LINGFIELD CLOSE FARNWORTH</i>	Pay No. <i>15748</i>
Car Make/Model	Registration <i>[REDACTED]</i>	Exact CC <i>1788</i>
		Month <i>JUNE/JULY 2009</i>

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

FOR MEMBERS' SERVICES USE ONLY

Signed <i>[REDACTED]</i> Member	Date <i>18.8.09</i>
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I certify that I have examined this allowance sheet, the figures recorded are reasonable, and the expense was necessary.

Authorised <i>[REDACTED]</i> Members' Services	Date <i>19.8.09</i>
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Subsistence T	Total Miles	<i>103.</i>
Subsistence NT	For Payroll Use Only	
Expenses NT	Input by	<i>CM</i>
Carer's Allowance	Date	<i>2.9.09</i>

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
<i>JUNE 23</i>	<i>AUDIT COMMITTEE</i>	<i>9.15</i>	<i>12.00</i>	<i>9</i>	£	p	£	p	£	p
<i>23.6.09</i>	<i>ADULT SCRUTINY COMM</i>	<i>5.15</i>	<i>7.30</i>	<i>9</i>	£	p	£	p	£	p
<i>24.6.09</i>	<i>ENVIRONMENTAL SCRUTINY COMM</i>	<i>5.15</i>	<i>8.00</i>	<i>9</i>	£	p	£	p	£	p
<i>30.6.09</i>	<i>LIC. CHAIR / V-CHAIR MEETING</i>	<i>2.30</i>	<i>6.15</i>	<i>9</i>	£	p	£	p	£	p
<i>6.7.09</i>	<i>AREA FORUM</i>	<i>6.15</i>	<i>8.15</i>	<i>4</i>	£	p	£	p	£	p
<i>8.7.09</i>	<i>FULL COUNCIL</i>	<i>6.15</i>	<i>8.00</i>	<i>9</i>	£	p	£	p	£	p
<i>14.7.09</i>	<i>LIC. ENVIR. COMMITTEE</i>	<i>1.15</i>	<i>5.00</i>	<i>9</i>	£	p	£	p	£	p
<i>16.7.09</i>	<i>EXTERNAL ORGANISATION SCRUTINY</i>	<i>1.15</i>	<i>4.15</i>	<i>9</i>	£	p	£	p	£	p
<i>29.7.09</i>	<i>LIC SUB COMM</i>	<i>9.15</i>	<i>12.15</i>	<i>9</i>	£	p	£	p	£	p
<i>18.8.09</i>	<i>LIC. ENVIR. COMM</i>	<i>12.30</i>	<i>4.40</i>	<i>9</i>	£	p	£	p	£	p
<i>18.8.09</i>	<i>ADULT SCRUTINY</i>	<i>5.45</i>	<i>7.15</i>	<i>9</i>	£	p	£	p	£	p
<i>19.8.09</i>	<i>AUDIT TRAINING</i>	<i>1.30</i>	<i>3.30</i>	<i>9</i>	£	p	£	p	£	p

Total Miles	<i>103.</i>
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Total Amount	Total Amount	Total Amount
£ p	£ p	£ p

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

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

Number of Additional Sheets Used

Members' Allowances Claim

Bolton Council

Name <u>JAMES LORD</u>	Home Address <u>22, WINGFIELD CLOSE, FARNWORTH</u>	Pay No. <u>15748</u>
Car Make/Model <u>FORD MONDEO</u>	Registration <u>[REDACTED]</u>	Exact CC <u>1788</u>
		Month <u>Aug/Sept 2009</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 [REDACTED] Member Date 27.10.09

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

Authorised [REDACTED] Members' Services Date 27.10.09

Subsistence T	Total Miles	<u>93</u>
Subsistence NT	For Payroll Use Only	
Expenses NT	Input by	<u>CM</u>
Carer's Allowance	Date	<u>2.11.09</u>

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
19.8.09	ENVIR REG SCRUTINY COMM.	5.30	9.00	9	£	p	£	p	£	p
2.9.09	FULL COUNCIL	6.15	8.45	9	£	p	£	p	£	p
8.9.09	LIC. COMMITTEE	1.15	4.45	9	£	p	£	p	£	p
10.9.09	FARNWORTH MANAGEMENT BOARD	5.30	8.00	4	£	p	£	p	£	p
29.9.09	PLODDER LANE GOVERNMENT MEETING	3.15	5.00	4	£	p	£	p	£	p
30.9.09	AUDIT COMMITTEE	10.30	12.00	9	£	p	£	p	£	p
6.10.09	LIC. ENVIR COMMITTEE	1.15	4.30	9	£	p	£	p	£	p
6.10.09	AUDIT SCRUTINY COMM.	5.40	8.00	9	£	p	£	p	£	p
7.10.09	ENVIR. SCRUTINY COMM.	5.15	8.00	9	£	p	£	p	£	p
8.10.09	HOUSING & LIC ENV. MEETING	9.30	11.45	9	£	p	£	p	£	p
21.10.09	FULL COUNCIL MEETING	6.15	9.30	9	£	p	£	p	£	p
21.10.09	FARNWORTH BOARD SUB COMM.	4.45	6.15	4	£	p	£	p	£	p

Total Miles 93

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
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 Madeline murray	Home Address 224, Lee Lane, Horwich BL6 7JF	Pay No. 16796-2
Car Make/Model Mercedes A class 150	Registration [REDACTED]	Exact CC 1498
		Month MARCH 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 31-03-09.
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I certify that I have examined this allowance sheet, the figures recorded are reasonable, and the expense was necessary.

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

Subsistence T		Total Miles	156.
Subsistence NT		For Payroll Use Only	
Expenses NT		Input by	CM
Carer's Allowance		Date	15.4.09

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
2 nd 03-09	H/ADULTS CARE P.D.G + BOLMCOB/H. FOLD FEVER			12	£	p	£	p	£	p
4 th	FULL COUNCIL			12	£	p	£	p	£	p
9 th	VALUING PEOPLE + EXEC BRIEF + CHMNS P.D.G			12	£	p	£	p	£	p
10 th	DIRECTOR'S BRIEF			12	£	p	£	p	£	p
11 th	H/FELD - BOLMCOB P.D.G.			12	£	p	£	p	£	p
13 th	URGENT CARE STRAT. P.C.T.			12	£	p	£	p	£	p
16 th	EXEC BRIEFING + SAFEGUARDING BOARD			12	£	p	£	p	£	p
17	DIRECTORS BRIEFING			12	£	p	£	p	£	p
19 th	DISABILITY PARTNERSHIP			12	£	p	£	p	£	p
23 rd	EXEC BRIEF + SCHOOLS CAP. PROJ. P.D.G			12	£	p	£	p	£	p
24 th	DIRECTORS BRIEF + H/ADULTS CARE P.D.G			12	£	p	£	p	£	p
30	EXEC H/ADULTS CARE + EXECUTIVE			12	£	p	£	p	£	p
31	DIRECTORS BRIEF			12	£	p	£	p	£	p

Total Miles

156

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

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

Artd

Name Madeline murray	Home Address 224, Lee Lane, Horwich BL6 7JF	Pay No. 16796-2
Car Make/Model Mercedes A class 150	Registration XXXXXXXXXX	Exact CC 1498
	Month APRIL	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 XXXXXXXXXX Member	Date 31.06.09
I certify that I have examined this allowance sheet, the figures recorded are reasonable, and the expense was necessary.	
Authorised XXXXXXXXXX Members' Services	Date

Subsistence T		Total Miles	288
Subsistence NT		For Payroll Use Only	
Expenses NT		Input by	cm
Carer's Allowance		Date	3-6-09

Date	Reason for Journey (including From and To)	Time of		Miles Claimed	Subsistence			Fares and			Dependent		
		Departure	Return		Allowance			Other Expenses			Carers Allowance		
6 th	JOINT EXEC BRIEF + EXEC BRIEF			12	£	p	£	p	£	p	£	p	
7 th	H+ADULTS/CARE DIRECTORS BRIEF.			12	£	p	£	p	£	p	£	p	
8 th	STRATEGIC ADULT CARE			12	£	p	£	p	£	p	£	p	
14 th	H+A.S/CARE PDG + SCRUTINY			12	£	p	£	p	£	p	£	p	
16 th	PLANNING HIGHWAYS (PEP)			12	£	p	£	p	£	p	£	p	
17 th	SCHOOLS CAP. PROG. P.D.G			12	£	p	£	p	£	p	£	p	
20 th	EXEC BRIEF			12	£	p	£	p	£	p	£	p	
21 st	DIRECTORS BRIEF TOLD/PERSONS INFO TASK GROUP.			12	£	p	£	p	£	p	£	p	
22 nd	BUDGET PDG + TRAINING			12	£	p	£	p	£	p	£	p	
27 th	EXEC BRIEF + EXECUTIVE			12	£	p	£	p	£	p	£	p	
28 th	H+ADULTS/CARE DIRECTORS BRIEF.			12	£	p	£	p	£	p	£	p	
29 th	CAREERS STRAT. LAUNCH + FULL COUNCIL			12	£	p	£	p	£	p	£	p	
				Total Miles	Total Amount			Total Amount			Total Amount		
				144	£	p	£	p	£	p	£	p	

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

£	p	£	p

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. 16796-2
Car Make/Model Mercedes A class 150	Registration [REDACTED]	Exact CC 1498
		Month MAY 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.
- (f) The particulars inserted on this form are correct, and I understand that fraudulent claims may result in disciplinary action.

FOR MEMBERS' SERVICES USE ONLY

Signed [REDACTED] Member Date 31.06.09.

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	
1st	Health + wellbeing			12
5th	HEALTH + ADULT / S/CARE EXECUTIVE			12
6th	ST. LEVER CHLD. CENTRE ADVISORY GROUP			10
8th	URGENT CARE STRATEGIC BOARD			12
11th	EXEC BRIEF + CHLDNS PDG			12
12	DIRECTOR'S BRIEF + M.O.M			12
13	MAYORS INAUGURATION			12
18	EXEC BRIEF + MINISTERIAL VISIT			12
19th	CHLDNS EXEC BRIEF + REMUNERATION PANEL			12
20th	SAFEGUARDING (SERIOUS CASE) BOARD			14
26th	CHLDNS DIRECTOR'S BRIEF			12
28th	PLANNING + HIGHWAYS (DEPUTY)			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
Total Amount	Total Amount	Total Amount

Total Miles
144

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. 16796-2
Car Make/Model Mercedes A class 150	Registration XXXXXXXXXX	Exact CC 1498 Month <u>JUNE</u> 20 <u>09</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	XXXXXXXXXX Member	Date 30-07-09
I certify that I have examined this allowance sheet, the figures recorded are reasonable, and the expense was necessary.		
Authorised	XXXXXXXXXX Members' Services	Date 04.08.09

Subsistence T		Total Miles	126
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	
1 st	EXEC BRIEF, PDG + THE EXECUTIVE			12
8 th	BR BRIEFING + LAUNCH OF 'CHARLIE'			12
10 th	ST. LEGER AREA FORUM			10
11 th	ADOPTION PANEL (ENDEVOUR ASS)			16
15 th	INFORMAL EXEC + INDUCTION			12
17 th	TRAINING (FIRST AID)			12
22 nd	EXEC AWAY DAY			18
23 rd	SITE VISIT (BOBBY HEYWOOD PARK)			10
25 th	INDUCTION (ADOPTION + CHILDREN CENTRES)			12
29 th	EXEC MEMBERS BRIEF + THE EXECUTIVE.			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
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 126

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

month 5 sc.

Members' Allowances Claim

Bolton Council

DUPLICATE

Name Madeline murray	Home Address 224, Lee Lane, Horwich BL6 7JF	Pay No. 16796-2
Car Make/Model Mercedes A class 150	Registration XXXXXXXXXX	Exact CC 1498
		Month JULY 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 XXXXXXXXXX Member	Date 30.07.09.
--	----------------

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

Authorised XXXXXXXXXX Members' Services	Date 04.08.09
---	---------------

Subsistence T	Total Miles	162	
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		£
6 th	EXEC BRIEF + PRO MANAGEMENT (CASTLEHILL)		15	18	£	p	£	p	
8 th	COUNCIL MEETING			12	£	p	£	p	
9 th	SITE VISIT (WALKER AVE) + SAFEGUARDING INDUCTION		14	14	£	p	£	p	
13 th	EXEC BRIEF + DIRECTORS BRIEFING		12	12	£	p	£	p	
16 th	ADOPTION PANEL + ADMISSION TRAINING (ESSA)		14	14	£	p	£	p	
20 th	BRIEFING + CHLDX'S P.D.G		1	12	£	p	£	p	
21 st	INSP. RUDD + ADOPTION PANEL (RE-CONVENED)			18	£	p	£	p	
23 rd	AGM. 4T LAYER MANAGEMENT BOARD			10	£	p	£	p	
27 th	FOSTERING PANEL (ENDEAVOUR + SC)			16	£	p	£	p	
28 th	EXEC MEMBER L.I.A.C. + SAFEGUARDING + P.D.G			12	£	p	£	p	
29 th	CHILDRENS SERVICES & ROUTINE			12	£	p	£	p	
30 th	PRO MANAGEMENT (TERMS OF REF)			12	£	p	£	p	
Total Miles					162	Total Amount		Total Amount	Total Amount
					£	p	£	p	£

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

Total Miles	162	Total Amount	£	p	Total Amount	£	p	Total Amount	£	p
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If you require more lines, please use a Members' Allowances Additional Sheet

Number of Additional Sheets Used 0

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

month 5 sc

Members' Allowances Claim

Bolton Council

Name Madeline murray	Home Address 224, Lee Lane, Horwich BL6 7JF	Pay No. 16796-2
Car Make/Model Mercedes A class 150	Registration [REDACTED]	Exact CC 1498
		Month AUGUST 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 28.09.09
I certify that I have examined this allowance sheet, the figures recorded are reasonable, and the expense was necessary.	
Authorised [REDACTED] Members' Services	Date 7.10.09

Subsistence T		Total Miles	103.
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
6 th	SITE VISIT (CHRIS HOLT) HERONS WAY			13	£	p	£	p	£	p
13 th	ADOPTION PANEL (ENDEVOUR)			14	£	p	£	p	£	p
14 th	SAFEGUARDING LAUNCH			12	£	p	£	p	£	p
17 th	EVEL BRIEF + CHLDNS PDG			12	£	p	£	p	£	p
18 th	M.O.M (BT. LEVER)			12	£	p	£	p	£	p
20 th	COMMISSION ST., CONSULTATION			12	£	p	£	p	£	p
24 th	EVEL BRIEF + FOSTERING PANEL			16	£	p	£	p	£	p
26 th	CHILDREN IN CARE COUNCIL (MA			12	£	p	£	p	£	p
27 th	" " SCRUTINY				£	p	£	p	£	p
					£	p	£	p	£	p
					£	p	£	p	£	p
					£	p	£	p	£	p
					£	p	£	p	£	p

Total Miles	103	Total Amount	£	p	Total Amount	£	p	Total Amount	£	p
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Please only enter the number of miles. Do not calculate an amount for payment.

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

Number of Additional Sheets Used 0

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

PAID

Name Madeline murray	Home Address 224, Lee Lane, Horwich BL6 7JF	Pay No. 16796-2
Car Make/Model Mercedes A class 150	Registration [REDACTED]	Exact CC 1498
		Month SEPTEMBER 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

Signed [REDACTED] Member	Date 28.09.09
I certify that I have examined this allowance sheet, the figures recorded are reasonable, and the expense was necessary.	
Authorised [REDACTED] Members' Services	Date 7.10.09

Subsistence T		Total Miles	209
Subsistence NT		For Payroll Use Only	
Expenses NT		Input by	SM
Carer's Allowance		Date	8.10.09

Date	Reason for Journey (including From and To)	Time of		Miles Claimed
		Departure	Return	
13 th	EXECUTIVE LAC / SAFEGUARDING EXECUTIVES			12
20 th	COUNCIL			12
7 th	EXEC BRIEFING			12
8 th	SITE VISIT + CHILDREN SAFEGUARDING BOARD			16
10 th	ADOPTION PANEL + C.I.C.C.			16
16 th	CHILDREN'S TRUST (CASTLE HILL)			14
21 st	EXECUTIVE + INFORMAL COUNCIL			12
25 th	EXEC / LAC / SAFEGUARDING + EXECUTIVE			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
£	p	£	p	£	p
£	p	£	p	£	p
£	p	£	p	£	p
£	p	£	p	£	p
£	p	£	p	£	p
£	p	£	p	£	p

Total Miles	106	Total Amount	£	p	Total Amount	£	p	Total Amount	£	p
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Please only enter the number of miles. Do not calculate an amount for payment.

Members' Allowances Claim

Bolton Council

Name Madeline murray	Home Address 224, Lee Lane, Horwich BL6 7JF	Pay No. 16796-2
Car Make/Model Mercedes A class 150	Registration [REDACTED]	Exact CC 1498
		Month NOVEMBER 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	300
Subsistence NT		For Payroll Use Only	
Expenses NT			
Carer's Allowance			
		Input by	
		Date	

Signed [REDACTED] Member Date 24.12.09

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

Authorised [REDACTED] Members' Services Date 30/12/09

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
2 nd	Exec brief + Heywood Park Mtg			14	£ p	£ p	£ p
3 rd	Chldns Safeguarding Board + Gr. River Area Forum			24	£ p	£ p	£ p
4 th	Oldams chldns centre			14	£ p	£ p	£ p
9 th	Exec brief + chldns PDG			12	£ p	£ p	£ p
10 th	BS.F. Governors ICT			14	£ p	£ p	£ p
11 th	Armistice day + starting Point			16	£ p	£ p	£ p
12 th	Adoption Panel + 4mg Mums P.R.O.			14	£ p	£ p	£ p
13 th	Last Prop launch Best Practice Rev. guidance			14	£ p	£ p	£ p
16 th	Exec brief + BSF Capital PDG			12	£ p	£ p	£ p
17 th	M.O.M + P.D.P + Safeguarding training			12	£ p	£ p	£ p
18 th	ESSA Training + Heywood Play centre launch			14	£ p	£ p	£ p
19 th	Chldns Trust (amb day T.I.C)			15	£ p	£ p	£ p
				Total Miles	Total Amount	Total Amount	Total Amount
				175	£ 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 Shared Service Centre, 5th Floor, Paderborn House, Bolton BL1 1JW

12.10.2007 Month 10 09

Members' Allowances Claim

ADDIT INTR

Bolton Council

Name Madeline murray	Home Address 224, Lee Lane, Horwich BL6 7JF	Registration [REDACTED]	Exact CC 1498	Pay No. 16796-2
Car Make/Model Mercedes A class 150	Month NOVEMBER 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 [REDACTED]	Date 23.12.09
I certify that I have examined this allowance sheet, the figures recorded are reasonable, and the expense was necessary.		
Authorised [REDACTED]	Members' Services [REDACTED]	Date 30/12/09

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
		Departure	Return	
20th	EXEC member meeting "B"			12
23rd	EXEC. LAC + Safeguarding (budget) + EXECUTIVE			12
25th	INTERVIEWS (CHAIR Safeguarding Board)			12
26th	Childrens Centre visits + Directors brief			12
27th	University awards (Dep for leader)			12
30th	Exec brief + Fostering Panel			16

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

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

Total Miles **76**

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

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

Number of Additional Sheets Used **0**

Members' Allowances Claim

Bolton Council

Name Madeline murray	Home Address 224, Lee Lane, Horwich BL6 7JF	Pay No. 16796-2
Car Make/Model Mercedes A class 150	Registration [REDACTED]	Exact CC 1498
I certify that:-		Month DECEMBER 20 09

- (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 23.12.09
I certify that I have examined this allowance sheet, the figures recorded are reasonable, and the expense was necessary.	
Authorised [REDACTED] Members' Services	Date 30/12/09

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
		Departure	Return	
1 st	childrens centre visits + ESSA Academy			14
2 nd	childrens Trust			12
3 rd	childrens centre visits / staff awards / childrens Scout			14
5 th	Tree Planting Tange childrens centre			13
7 th	EXEC brief / EXECUTIVE / L.AC. Exec / childrens PDG			12
9 th	FULL council			12
10 th	ADOPTION PANEL / STARTING POINT STAFF INTERVIEW			14
14 th	EXEC brief			12
16 th	BSF CAPITAL PRIMARY PDG			12
21 st	EXEC briefing			12
24 th	children in our care council			12

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

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

Total Miles
139

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

Name Councillor Cliff Morris	Home Address 2 Armadale Road, Bolton, BL3 4NE	Pay No. 15519
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	17-20	Total Miles	56
Subsistence NT		For Payroll Use Only	
Expenses NT		Input by	CM
Carer's Allowance		Date	8.6.09

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

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
17-Apr-2009	LGA Group Conference (London)				£	p	£	14.00 p	£	p
24-Apr-2009	AGMA Executive (Oldham Civic Centre)	9:30	13:30	38	£	p	£	p	£	p
8-May-2009	AGMA Executive (Manchester Town Hall)	9:30	12:30		£	p	£	3.20 p	£	p
29-May-2009	AGMA Executive (Leigh Sports Village)	9:30	13:00	18	£	p	£	p	£	p
					£	p	£	p	£	p
					£	p	£	p	£	p
					£	p	£	p	£	p
					£	p	£	p	£	p
					£	p	£	p	£	p
					£	p	£	p	£	p
					£	p	£	p	£	p
					£	p	£	p	£	p
					£	p	£	p	£	p
					£	p	£	p	£	p
				Total Miles	Total Amount		Total Amount		Total Amount	
				56	£	p	£	17.20 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

Set type	Adult	Child	
ANYTIME DAY S	ONE	NIL	SGL
Start Date	Number		
08·MAY·09	79052	002402599N52	
From	Valid until	Price	
BOLTON *	08·MAY·09	£3·20M	
To	Route	Validity	
MANCHESTER CTLZ	ANY PERMITTED	ON DATE SHOWN	



THANK YOU



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 RSE No. 8399
 4 BB 3108 9 67 65 432

Receipt No 523
 Start 17/04/2009 13:04
 End 17/04/2009 13:29
 Miles 3.06
 Fare 14.00
 Extras 0.00
 TOTAL GBP £ 14.00
 GRATUITIES
 THANK YOU