COUNCILLOR	
REF.NO.	
CAR REG: CC	

## STOCKTON-ON-TEES BOROUGH COUNCIL

Passed for
Payment

Claim for Attendance, Travel and Subsistence Allowances (Please see separate sheet for Carers Allowance)

Date	Place & Time	Destination	Place & Time	Description of Approved Duties	Attendance Allowance Claimed £ p		Allowance		Mode &			er Miles Travelled by own vehicle				Subsistence Ilowance Claimed	
Date	of Departure	Destination	of Return				ass of Travel	ass of Travel Payments		Miles Rate		£ p		£ p			
								L	þ	IVIIICS		L		L			
					-												
					-												
					-												
					-												
SPECI	BAS AL RESPONSIBI	SIC ALLOWANC LITY ALLOWAN		WEEKS AT £			Total Other yments			Tota	l Miles	T	otal				
	& BRANCH OR A BE SENT	ADDRESS TO W	HICH CHEQUE	GROSS ALLOWANCES £ p					Gross Allowa	Subsistend nce	се						
				LESS TAX . NIC .		spect of meals				meals free	oropriate amount claimed in ree of charge						
				OFFICE USE ONLY	£	Р	-		Cubblo			inica					
RECEI	VED from the CC	OUNCIL the sum	of	NET Allowance Claimed				Local (	Governn	nent Act 1	972 and S	ubseque	nt Regula	ations			
			Pounds	Public Travel			IDECLARE					-	Ū				
			Pence	Car Travel Claimedmiles @p			I claim atte	endance	allowan	ce and D	ECLARE 1	that I ha	ve actual	ly and ne	ecessarily		
Signature			Subsistence Allowance Claimed				urred expenditure on travelling and subsistence for the performance of approve a Member of the Council. Except as shown above, I have not made, and will n								not make,		
				TOTAL CLAIMED	y other claim under any enactment for such exp ove nor for any other duty performed within the				uch expens hin the rele	enses in connection with duties indicate elevant period of 24 hours.							
£	:			LESS OTHER DEDUCTIONS				•	•								
Date:				AMOUNT TO BE PAID			Signature Date										

	S	CREDITOR CODE	SCON	SUPPLIERS	INVOIO	CE RE	F:	BATCH POSITION	PRIOR Y (Y)	EAR				
	VAT ANAL	YSIS	NET				CR	VAT	CR				]	
	5. STANDARD 17½%										NOTE:			
	2. EXEM	IPT								ors of more than 2%				
3. OUTSIDE SCOPE											eturned to th rtment	le		
	0. ZERO				_								ļ	
	INVOICE T	OTAL AMOUNT												
CHEQUE N	NO.	VAT CHECK DIGITS				FUF	KI HER M	IARRATIVE						
Urgent pay	ments only	ENTER LAST 2 DIGITS		TRATION										
	OBJ	SUBJ	N	ET AMOUNT		CR	VAT TYP	ANALYSIS COD	DE		DER/LINE No.		S	
	0017	4051					3			SRA				
	0017	4087					3			BASI				
8	0017	4085					3			АТТ /	SUB	S		
7	0014	H004				Х	3			ТАХ				
7	0015	H004				Х	3			ΝΑΤΙ	NEE	S		
8	0017	4086					3			ΝΑΤΙ	NER	S		
7	0016	H004				Х	3			ΝΑΤΙ	NER	S		
7	0018	H004				Х	3			LAB	GF			
8	0017	3011					3			TRAI				
8	0017	3010					3			BUS				
8	0017	3013					5			ΝΕΤΡ	ETR	СL		
8	0017	3013					3			PETR	0 L			
7	0021	H004					3			ΤΙΑ				
7	0022	4080					5			BROA		ND		
4	0067	H004				Х	3			PENS		ΕE	S	
4	0068	H004				Х	3			PENS				
8	0017	1060					3			PENS	ΙΟΝ	ΕR	S	
8	0017	4048					3			TEL				
8	0017	4088					3			CARE	RS			
		-	1				I	1						

DETAILS OF PASSENGERS											
Date	te Meeting Passenger(s)										