## North Ayrshire Council

## Claim for reimbursement of mileage and other expenses - Elected Member

MEMBER'S NAME: Clir Anthea Dickson



| (Forms should be submitted on a 4 weekly basis) |                            |                                |                                                   |                                                 | ·                        |                              |                         |                 |                       |                    |                                  |                                  |                                              | North Ayrshire Council Controlle Sont Sont Street |                             |  |
|-------------------------------------------------|----------------------------|--------------------------------|---------------------------------------------------|-------------------------------------------------|--------------------------|------------------------------|-------------------------|-----------------|-----------------------|--------------------|----------------------------------|----------------------------------|----------------------------------------------|---------------------------------------------------|-----------------------------|--|
| Col A                                           | Col B                      | Col C                          | Col D                                             | Col E                                           | Col F                    | Col G                        | Col H                   | Coll            | ColJ                  | Col K              | Col L                            | Col M                            | Col N                                        | Col O                                             | Col P                       |  |
| Jou<br>Date<br>(Note 1)                         | Time of Departure (Note 2) | Time of<br>Arrival<br>(Note 2) | Detailed Description of Approved Duty<br>(Note 3) | Expense Items or Details of Journey<br>(Note 4) | Car Mileage<br>Travelled | Car Mileage<br>Claimed (EVN) | Non Reimbursed<br>Miles | Boat<br>Mileage | Motorcycle<br>Mileage | Bicycle<br>Mileage | Passenger<br>Mileage<br>(Note 5) | Meals<br>(Note 6)<br>£<br>(4044) | Accommodation<br>£<br>(Note 6)<br>4045/4023) | Other<br>Travel<br>(Note 7)<br>£<br>(4038)        | Other<br>Expense<br>(Note 8 |  |
| 11/10/2018                                      |                            |                                | IJB                                               | Home - CH - Home                                | 24                       | 24                           | 0                       |                 |                       |                    |                                  |                                  |                                              |                                                   |                             |  |
| 12/10/2018                                      |                            |                                | CAG Pre-Meeting with Care Insp                    | Home - CH - Home                                | 24                       | 24                           | 0                       |                 |                       |                    |                                  |                                  |                                              |                                                   |                             |  |
| 24/10/2018                                      |                            |                                | Chair Resilience screening at Break the Silence   | Home - Kimamock - Home                          | 30                       | 30                           | 0                       |                 |                       |                    |                                  |                                  |                                              |                                                   |                             |  |
| 25/10/2018                                      |                            |                                | Carers Advisory Group                             | Home - CH - Home                                | 24                       | 24                           | 0                       |                 |                       |                    |                                  |                                  |                                              |                                                   |                             |  |
| 26/10./18                                       |                            |                                | Meeting with SB                                   | Home - CH - Home                                | 24                       | 24                           | 0                       |                 |                       |                    |                                  |                                  |                                              |                                                   |                             |  |
| 27/10/2018                                      |                            |                                | Who Cares? Scotland Gobal Conference              | Home - Greenwood - Home                         | 26                       | 26                           | 0                       |                 |                       |                    |                                  |                                  |                                              |                                                   |                             |  |
| 01/11/2018                                      |                            |                                | Spiers Trust meeting                              | Home - CH - Home                                | 24                       | 24                           | 0                       |                 |                       |                    |                                  |                                  |                                              |                                                   |                             |  |
| 01/10/2018                                      |                            |                                | NAA                                               | Home - Saltcoats Town Hall - Home               | 20                       | 20                           | 0                       |                 |                       |                    |                                  |                                  |                                              |                                                   |                             |  |
| 06/11/2018                                      |                            |                                | Woodland View Public Patient Reference Group      | Home - Woodland View - Home                     | 22                       | 22                           | 0                       |                 |                       |                    |                                  |                                  |                                              |                                                   |                             |  |
|                                                 |                            |                                |                                                   |                                                 |                          |                              | 0                       |                 |                       |                    |                                  |                                  |                                              |                                                   |                             |  |
|                                                 |                            |                                |                                                   |                                                 |                          |                              | 0                       |                 |                       |                    |                                  |                                  |                                              |                                                   |                             |  |
|                                                 |                            |                                |                                                   |                                                 | ļ                        |                              | 0                       |                 |                       |                    |                                  |                                  |                                              |                                                   |                             |  |
|                                                 |                            |                                |                                                   |                                                 | -                        |                              | 0                       |                 |                       |                    |                                  |                                  |                                              |                                                   |                             |  |
|                                                 |                            |                                |                                                   |                                                 | -                        |                              | 0                       |                 |                       |                    |                                  |                                  |                                              |                                                   | ļ                           |  |
|                                                 |                            |                                |                                                   |                                                 |                          |                              | 0                       |                 |                       |                    |                                  |                                  |                                              |                                                   |                             |  |
|                                                 |                            |                                |                                                   |                                                 |                          |                              | 0                       |                 |                       |                    |                                  |                                  |                                              |                                                   | -                           |  |
|                                                 |                            |                                |                                                   |                                                 | <u> </u>                 |                              | 0                       | 1               |                       |                    |                                  |                                  |                                              |                                                   | 1                           |  |
|                                                 |                            |                                |                                                   |                                                 |                          |                              | 0                       |                 |                       |                    |                                  |                                  |                                              |                                                   |                             |  |
|                                                 |                            |                                |                                                   |                                                 | ļ                        |                              | 0                       |                 |                       |                    |                                  |                                  |                                              |                                                   |                             |  |
|                                                 |                            |                                |                                                   |                                                 |                          |                              | . 0                     |                 |                       |                    | ļ                                |                                  |                                              |                                                   | -                           |  |
|                                                 |                            |                                |                                                   |                                                 | - <del> </del>           |                              | 0                       |                 |                       |                    |                                  |                                  |                                              |                                                   | <del></del>                 |  |
|                                                 |                            |                                |                                                   |                                                 | -                        |                              | 0                       |                 |                       |                    |                                  |                                  |                                              |                                                   | <del> </del>                |  |
|                                                 |                            |                                |                                                   |                                                 | -                        |                              | 0                       | ļ               |                       |                    |                                  | ļ                                |                                              |                                                   | ļ                           |  |
|                                                 |                            |                                |                                                   |                                                 |                          |                              | 0                       | ļ               |                       |                    | ,                                |                                  |                                              |                                                   | <b></b>                     |  |
|                                                 | ,                          |                                |                                                   |                                                 |                          |                              | 0                       | <u> </u>        |                       |                    |                                  |                                  |                                              |                                                   | -                           |  |
|                                                 |                            |                                |                                                   |                                                 |                          |                              | 0                       |                 |                       |                    |                                  |                                  |                                              |                                                   |                             |  |
|                                                 |                            |                                |                                                   |                                                 | -                        |                              | 0                       | ļ               |                       |                    |                                  |                                  |                                              |                                                   | <del> </del>                |  |
|                                                 |                            |                                |                                                   |                                                 | -                        |                              | 0                       |                 |                       |                    |                                  |                                  |                                              |                                                   | -                           |  |
|                                                 |                            |                                |                                                   |                                                 | -                        |                              | 0                       | -               |                       | -                  |                                  |                                  |                                              |                                                   | -                           |  |
|                                                 |                            |                                |                                                   | 1                                               | <b>-</b>                 |                              | 0                       | <b> </b>        |                       |                    | <b> </b>                         |                                  |                                              |                                                   | <b></b>                     |  |
|                                                 |                            |                                |                                                   |                                                 | -                        |                              | 0                       | <del> </del>    | ļ                     |                    |                                  |                                  |                                              | -                                                 | +                           |  |
|                                                 |                            |                                |                                                   |                                                 | <del> </del>             |                              | 0                       |                 |                       | ļ                  |                                  |                                  |                                              | -                                                 | +                           |  |
|                                                 | 100                        |                                |                                                   | Sub Tota                                        | 1 040                    | 218                          | 0                       |                 |                       |                    |                                  |                                  |                                              |                                                   | +                           |  |
|                                                 |                            |                                |                                                   | Rate                                            |                          | £0.450                       |                         | £2.000          | £0.240                | £0.200             | £0.050                           |                                  |                                              |                                                   |                             |  |
|                                                 |                            |                                |                                                   | Cash Value of Mileage Clain                     |                          | £98.10                       |                         |                 | 1                     |                    |                                  |                                  | 244 1941 1949                                |                                                   |                             |  |