

County expenses claim form

please o	to executive meetings is redo not enter on this form)		per mile direct f	rom County,	
Appoint	ment:				
Date	Details	Return number of miles	Mileage claim (miles @ 45P) £	Other expenses £	
	TOTAL				
Please	TOTAL	s for expenses and	sign below for n	nileage.	
For payment please send to:		· ·	Wrexham		
	re that I hold a current va insurance.	lid driving licence a	and possess appro	opriate valid	
Signed:		Date:			