



# Incidental Expenses Provision

## Member's reimbursement

10 APR 2006

### When to use this form

- Use this form to ask us to reimburse you for costs you have incurred on your Parliamentary duties.

### About filling in this form

- For details of costs you can claim for, see *Green Book* section 5.
- If you have any doubt about whether you can claim for a cost, please call 020 7219 1340.

### Your details

Name  
in CAPITAL LETTERS

DAVID WILSHIRE

Constituency

SPELTHORNE

### Claim details

Please ensure

- your claim totals more than £100
- you provide journey details of all taxi journeys
- you attach all receipts or invoices for items of £250 and above
- any claims for petty cash do not exceed £250 per month.

You can only claim for

- costs you have actually paid
- office and surgery accommodation, equipment and supplies, work commissioned, communication and travel.

Period of claim

from 01, 03, 06 to 31, 03, 06

Allowance year

05, 06

	Description of service or goods	Amount
Item 1	Stationery	£ 36 : 12 p
Item 2	Stationery	£ 366 : 65 p
Item 3	Petty Cash	£ 250 : 00 p
Item 4		£ : p
Item 5		£ : p
Item 6		£ : p
Item 7		£ : p
Item 8		£ : p
Item 9		£ : p
Item 10		£ : p

Total

£ 652 : 77 p

**Authorisation and declaration**

[Redacted Signature]

clusively and necessarily

Signature

Date

9/4/06

**Data protection**

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Send your completed form to

Validation Team, Operations Directorate,  
Department of Finance & Administration, House of Commons, London SW1A 0AA

**Office use only**

Validation	Initials	Date
Claims received	<input checked="" type="checkbox"/>	1/1
Signature check	<input checked="" type="checkbox"/>	1/1
Funds check	<input checked="" type="checkbox"/>	1/1
Allowable expenditure	<input checked="" type="checkbox"/>	1/1
Member Res ID & Costc	<input checked="" type="checkbox"/>	1/1
Ext type/Cat 5 & subtotals added to form	<input checked="" type="checkbox"/>	1/1
Receipts/ documentation present	<input checked="" type="checkbox"/>	1/1
<b>Processing</b>		
Input		1/1

**Input subtotals per Cat 5**

[Redacted]	£750.00
[Redacted]	£402.77
[Redacted]	£
[Redacted]	£
[Redacted]	£
[Redacted]	£
[Redacted]	£
[Redacted]	£
[Redacted]	£652.77

**Comments**

[Empty Comments Box]

# Invoice

\*\*\*\*\*  
\* INVOICE NO.  
\*\*\*\*\*

Invoice To

David Wilshire MP

Charge To :

David Wilshire MP



Banner Business Supplies Ltd



Page 1 of 1 Date 02/03/2006

Acc.No. Order Date 28/02/2006

Order

C.A.R.

Delivered To :

David Wilshire MP



Customer Services

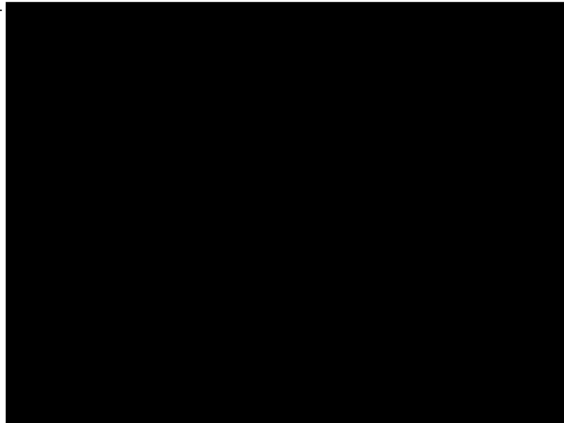
Telephone No  
Fax No



Sales Order No



Line No.	Line Ref.	Product Code	Product Description	Quantity	U.O.M.	Unit Price	Tax Date	Line Total excl VAT	VAT Rate	Line VAT
1		0405622	FELL R-KIVE BASICS STD STORAGE BOX	1	PACK10	11.8900	28/02/06	11.89	17.50	2.00
2		8320014	STORAGE BOX WITH LID 250x390x320mm	1	PACK10	18.8500	28/02/06	18.85	17.50	3.30



### V.A.T. Summary

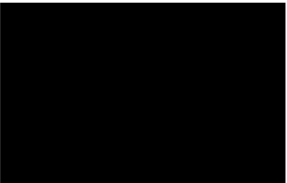
Rate	Taxable Sum	V.A.T. Amount
17.50	30.74	5.38

Sales Order Total (VAT excl)

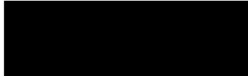
30.74

VAT Registration :

Settlement :  
Discount Terms :



INVOICE GOODS	30.74
INVOICE V.A.T.	5.38
INVOICE TOTAL	36.12



# Invoice

\*\*\*\*\*  
 COPY INVOICE NO. [REDACTED]  
 \*\*\*\*\*



Invoice To :

David Wilshire MP

Charge To :

David Wilshire MP

Banner Business Supplies Ltd



Delivered To

David Wilshire MP

Customer Services

Telephone No : [REDACTED]

Fax No : [REDACTED]

Page 1 of 1 Date 26/01/2006

Acc.N [REDACTED] Order Date 24/01/2006

Order [REDACTED]

C.A.R. [REDACTED]

Sales Order No [REDACTED]

Line No.	Line Ref.	Product Code	Product Description	Quantity	U.O.M.	Unit Price	Tax Date	Line Total excl. VAT	VAT Rate	Line V
1		0985349	SAMSUNG ML-1510/1710/1750 TONER BK	2	EACH	53.2000	25/01/06	106.40	17.50	18.
2		0981004	HP DJET 850C/820CXI CART 51645A BK	2	CRTRDGE	19.2600	25/01/06	38.52	17.50	6.
3		0981672	HP DESKJET 990XCI NO.78 38ml C6578A	2	EACH	31.5200	25/01/06	63.04	17.50	11.
			HP DESKJET 990XCI/990CM/980CXI/970XCI/959C/950C/930C/1220C/OFFICEJET G55/G85/G95/K60/K80 HP PHOTOSMART PRINTER				25/01/06			
4		3320143	BASILDON BOND CD SLEEVE	1	BOX50	4.0500	25/01/06	4.05	17.50	0.
5		0985386	DURABLE CD/DVD ALBUM 40 BLACK	2	EACH	7.2500	25/01/06	14.50	17.50	2.
6		0985324	MINI OPTICAL MOUSE BLACK	1	EACH	11.5900	25/01/06	11.59	17.50	2.
7		8320014	STORAGE BOX WITH LID 250x390x320mm	1	PACK10	18.8500	25/01/06	18.85	17.50	3.
8		9380100	BANNER STORAGE BAG MANILLA	1	PACK50	26.7000	25/01/06	26.70	17.50	4.
9		9383004	BANNER PLAIN MANILLA 5PT A4 COL DIV	3	SET	0.0900	25/01/06	0.27	17.50	0.
10		9383005	BANNER PLN MANILLA 10PT A4 COL DIV	3	SET	0.1600	25/01/06	0.48	17.50	0.
11		9383025	BANNER PLN MANILLA 20PT A4 COL DIV	3	SET	1.4600	25/01/06	4.38	17.50	0.
12		9410401	BANNER A4 MW FLUSH FLDR 105mm CLEAR	1	PACK25	4.3300	25/01/06	4.33	17.50	0.
13		9400401	BANNER A4 PP LEVER ARCH FILE 70 YE	5	EACH	2.6400	25/01/06	13.20	17.50	2.
14		9420077	BANNER FS ECON DOC WALLET 32mm AS	2	BOX50	2.8000	25/01/06	5.60	17.50	0.
15		9290012	BANNER STAPLE EXTRACTOR ASSORTED	1	EACH	0.1300	25/01/06	0.13	17.50	0.

V.A.T. Summary

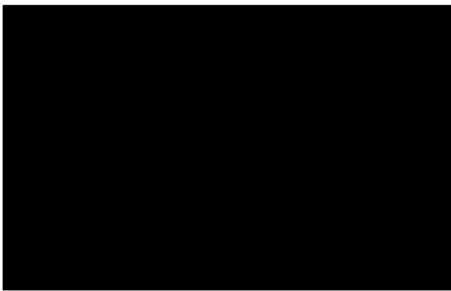
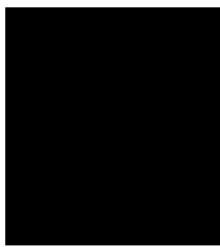
Rate	Taxable Sum	V.A.T. Amount
17.50	312.04	54.61

Sales Order Total (VAT excl)

312.04

INVOICE GOODS	312.04
INVOICE V.A.T.	54.61
<b>INVOICE TOTAL</b>	<b>366.65</b>

Settlement  
 Discount Terms



Financial Processing }

Transaction No.

Registration No.

**C2**

**Validation Claim Summary Sheet**

Please write or print clearly & attach to claim

**Supplier ID**

**Text**

**Invoice No.**

**Account code / Allowance**

**Members cost centre (Cat1)**

**Financial Year/PIRO (Cat2)**

**Expenditure type (Cat5) :**



£.....

£.....

£.....

£.....

£.....

£.....

£.....

£.....

£.....

750-00 .

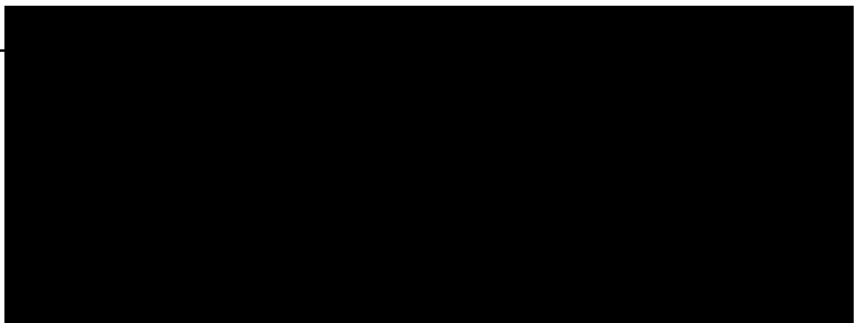
£.....

**Comments:**



*\* Financial Processing purposes only  
Registered by (initials & date)*

*Posted by (initials & date)*





Member's reimbursement form

02 MAR 2006

When to use this form

- Use this form to ask us to reimburse you for costs you have incurred on your Parliamentary duties.

About filling in this form

- For details of costs you can claim for, see *Green Book* section 5.
- If you have any doubt about whether you can claim for a cost, please call 020 7219 1340.

Your details

Name in CAPITAL LETTERS

DAVID WILSHIRE

Constituency

SPELT HORNE

Claim details

Please ensure

- your claim totals more than £100
- you provide journey details of all taxi journeys
- you attach all receipts or invoices for items of £250 and above
- any claims for petty cash do not exceed £250 per month.

You can only claim for

- costs you have actually paid
- office and surgery accommodation, equipment and supplies, work commissioned, communication and travel.

Period of claim

from 01/07/06

to 28/07/06

Allowance year

05/06

	Description of service or goods	Amount
Item 1	Reference Books	£ 64 : 00 p
Item 2	Stationery	£ 158 : 59 p
Item 3	Petty Cash	£ 700 : 00 p
Item 4		£ : p
Item 5		£ : p
Item 6		£ : p
Item 7		£ : p
Item 8		£ : p
Item 9		£ : p
Item 10		£ : p

Total

£422 : 59 p

**Authorisation and declaration**

I claim reimbursement of these costs which I incurred wholly, exclusively and necessarily

Signature

[Redacted Signature]

Date

1/3/06

**Data protection**

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Send your completed form to

Validation Team, Operations Directorate,  
Department of Finance & Administration, House of Commons, London SW1A 0AA

**Office use only**

**Validation**

Initials Date

Claims received	<input checked="" type="checkbox"/>	/	/
Signature check	<input checked="" type="checkbox"/>	/	/
Funds check	<input checked="" type="checkbox"/>	/	/
Allowable expenditure	<input checked="" type="checkbox"/>	/	/
Member Res ID & Costc	<input checked="" type="checkbox"/>	/	/
Ext type/Cat 5 & subtotals added to form	<input checked="" type="checkbox"/>	/	/
Receipts/ documentation present	<input checked="" type="checkbox"/>	/	/

**Input subtotals per Cat 5**

[Redacted]	£ 200.00
[Redacted]	£ 222.59
[Redacted]	£
[Redacted]	£
[Redacted]	£
[Redacted]	£
[Redacted]	£
[Redacted]	£ 222.59

**Comments**

[Empty Comments Box]

**Processing**

Input		/	/
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Incidental Expenses Provision

Member's reimbursement form 13 FEB 2006

C1

Page

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Constituency

SPELTHORNE

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- your claim totals more than £100
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- any claims for petty cash do not exceed £250 per month.

You can only claim for

- costs you have actually paid
- office and surgery accommodation, equipment and supplies, work communication and travel.

Period of claim

from 01 / 01 / 06 to 04 / 02 / 06

Allowance year

05 / 06

	Description of service or goods	Amount
Item 1	Petty Cash	£ 250 : 00 p
Item 2	Banner (Stationery)	£ 158 : 59 p
Item 3	PC World	£ 142 : 98 p
Item 4	PC World (see invoice)	£ 600 : 23 p
Item 5		£ : p
Item 6		£ : p
Item 7		£ : p
Item 8		£ : p
Item 9		£ : p
Item 10		£ : p

Total

£ 1151 : 80 p

**Authorisation and declaration**

I claim reimbursement of those costs which I incurred wholly, exclusively and necessarily

[Redacted Signature]

Signature

Date

11/2/06

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Validation	Initials	Date
Claims received	C	1 1
Signature check	/	1 1
Funds check	/	1 1
Allowable expenditure	/	1 1
Member Res ID & Costs	C	1 1
Ext type/Cat 5 & subtotals added to form	/	1 1
Receipts/ documentation present	/	1 1
<b>Processing</b>		
Input		1 1

**Input subtotals per Cat 5**

£ 250.00
£ 158.54
£
£
£
£ 743.21
£
£
£ 1151.80

**Comments**

[Empty Comments Box]

**Invoice**

Invoice

OUR ORDER NO	ACCOUNT CODE	DATE / TAX PNT.	INVOICE NO.
ORDERED BY <b>David Wilshire</b>	AREA CODE	OUR ORD. NO	TYPE
QUANTITY	DESCRIPTION OF GOODS SOLD	PRICE EACH	GOODS TOTAL

1			424.00	424.00
1		Serial	36.89	36.89
1		Install of 1-2 items into PC/MAC with full config and PDI test	20.00	20.00
1		TARGUS EVO PRO LEATHER CARRY CASE 15.4in	19.99	19.99
		Saturday		9.95

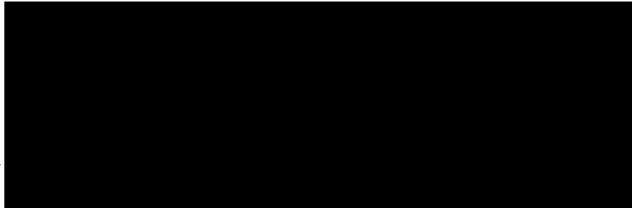
Sub-Total	510.83 GBP
VAT Total	89.40
<b>TOTAL</b>	<b>600.23 GBP</b>

Value	Code	Rate	VAT
510.83	A	17.50	89.40

Financial Processing }

Transaction No.

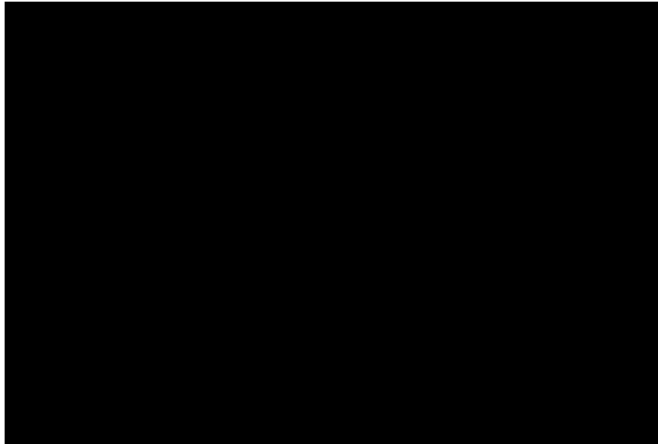
Registration No.



**Validation Claim Summary Sheet**

Please write or print clearly & attach to claim

**C2**



**Supplier ID**

**Text**

**Invoice No.**

**Account code / Allowance**

**Members cost centre (Cat1)**

**Financial Year/PIRO (Cat2)**

**Expenditure type (Cat5) :**



£.....

£.....

£.....

£.....

£.....

£.....

£.....

£.....

£ 1500-00 .

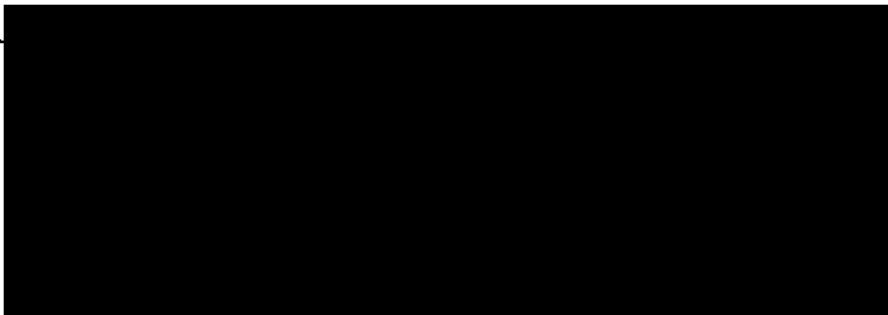
£.....

**TOTAL**

**Comments:**

*\* Financial Processing purposes only  
Registered by (initials & date)*

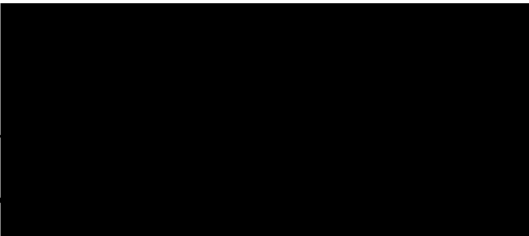
*Posted by (initials & date)*





Financial Processing }

Transaction No.



Registration No.

**Validation Claim Summary Sheet**

Please write or print clearly & attach to claim

**Supplier ID**

**Text**

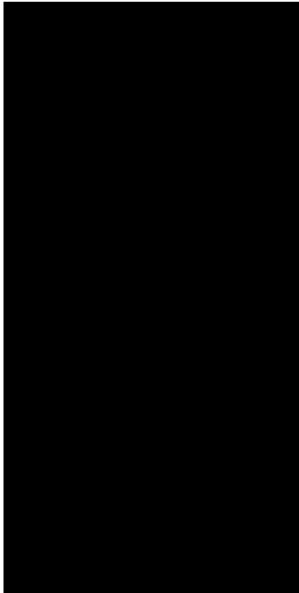
**Invoice No.**

**Account code / Allowance**

**Members cost centre (Cat1)**

**Financial Year/PIRO (Cat2)**

**Expenditure type (Cat5) :**

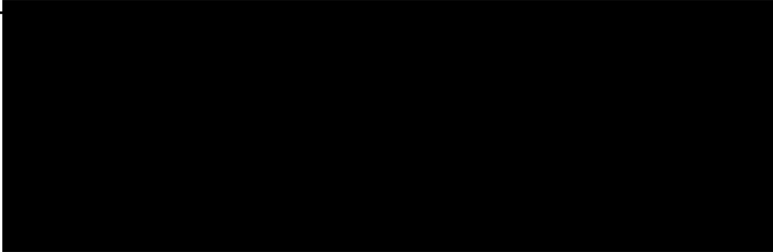


**TOTAL**

**Comments:**

*\* Financial Processing purposes only  
Registered by (initials & date)*

*Posted by (initials & date)*



**C2**

£.....

£.....

£.....

£.....

£.....

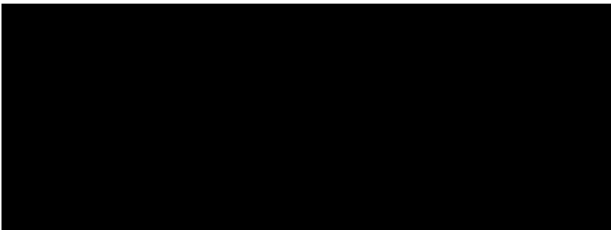
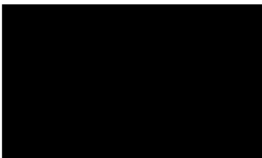
£.....

£.....

£.....

£ 750-00

£.....



Financial Processing }

Transaction No.

Registration No.

**Validation Claim Summary Sheet**

Please write or print clearly & attach to claim

**C2**

**Supplier ID**

**Text**

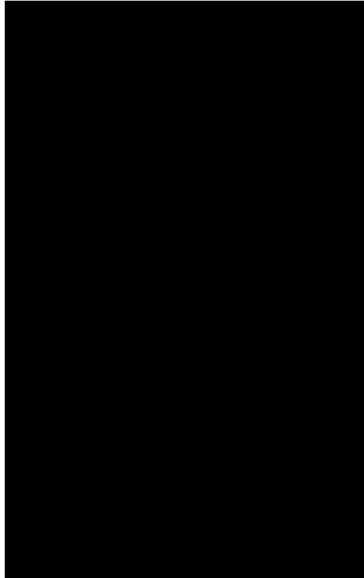
**Invoice No.**

**Account code / Allowance**

**Members cost centre (Cat1)**

**Financial Year/PIRO (Cat2)**

**Expenditure type (Cat5) :**



£.....

£.....

£.....

£.....

£.....

£.....

£.....

£.....

£ 2000.00

£.....

**TOTAL**

**Comments:**

*\* Financial Processing purposes only  
Registered by (initials & date)*

*Posted by (initials & date)*



Financial Processing }

Transaction No.

Registration No.

**C2**

**Validation Claim Summary Sheet**

Please write or print clearly & attach to claim

**Supplier ID**

**Text**

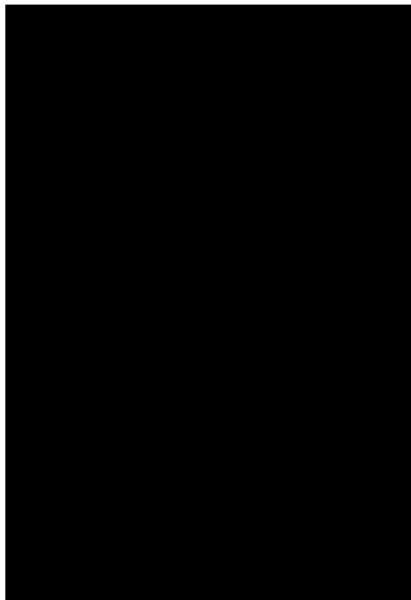
**Invoice No.**

**Account code / Allowance**

**Members cost centre (Cat1)**

**Financial Year/PIRO (Cat2)**

**Expenditure type (Cat5) :**



£.....

£.....

£.....

£.....

£.....

£.....

£.....

£.....

£.....

£.....

£ 2500.00

**TOTAL**

**Comments:**

*\* Financial Processing purposes only  
Registered by (initials & date)*

*Posted by (initials & date)*

