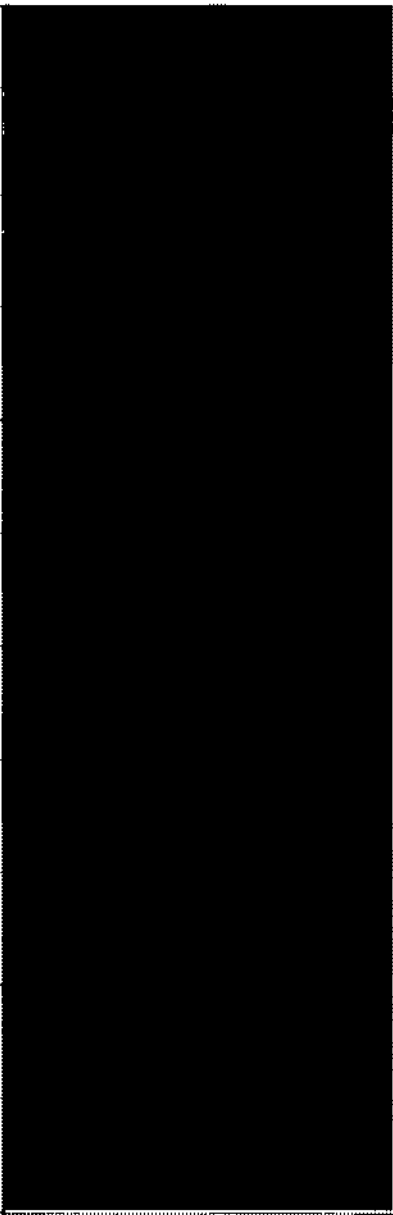


C2. DIRECT PAYMENT

I enclose 1 certified invoices to allow direct payments to be made from my Incidental Expenses Provision

| Invoice | Supplier's name | Amount £ |
|---------|-----------------|-------------|
| 1 | [REDACTED] | 146.88 |
| 2 | | |
| 3 | | |
| 4 | | |
| 5 | | |
| 6 | | |
| 7 | | |
| 8 | | |
| 9 | | |
| 10 | | |
| | | £ 146.88 |



08 JUL 2004

I certify that the expenses shown above have been wholly, exclusively and necessarily incurred in the course of my parliamentary business

SIGNED.....[REDACTED].....MP

PRINTED NAME..... GREGORY CAMPBELL

DATE..... 9/7/04 CONSTITUENCY..... EAST LONDONDERRY

RECEIVED
15 JUN 2004

Invoice

Mr Gregory Campbell

Invoice Number:
Account Number:

Ref:

Your Ref:

Date: 07 June 2004

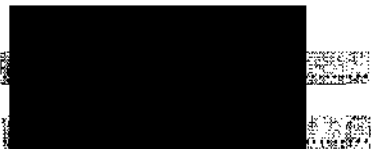
Page: 1 of 1

| Code | Description | Qty. | Price | Value |
|------|---|--------------|--------|----------|
| | Express Plus HoC (Set-up) 17 May 2004 to 17 May 2004 | 1.00 | 125.00 | 125.00 |
| | | Total Net | | 125.00 |
| | | VAT at 17.5% | | 21.88 |
| | | Total | | £ 146.88 |

Financial Processing }

Transaction No.

Registration No.



Validation Claim Summary Sheet

Please write or print clearly & attach to claim

C1

Member Supplier ID



Pay recipient

(NB Financial Processing to check whether a dedicated a/c exists)

Text

04/05

Invoice No.



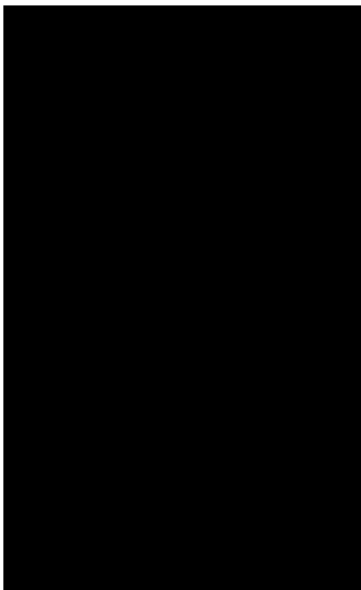
Account code / Allowance

Members cost centre (Cat1)

Financial Year/PIRO (Cat2)

04_05 / 05_06

Expenditure type (Cat5) :



£.....

£.....

£.....

£.....

£.....

£.....

£.....

£.....

£5000.00

£5000.00

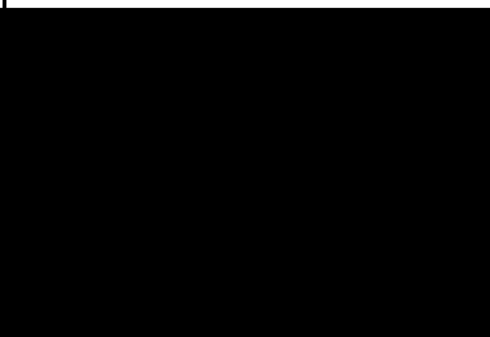
TOTAL

Comments:

* Financial Processing purposes only
Registered by (Initials & date)



Posted by (initials & date)





Member's reimbursement form

05 JUL 2005

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

GREGORY CAMPBELL

Constituency

EAST LONDONERRY

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 APR 04

to 31 MAR 05

Allowance year

1

| | Description of service or goods | Amount |
|---------|---------------------------------|---------------|
| Item 1 | RESEARCH SERVICES | £5,000 : 00 p |
| Item 2 | | £ : p |
| Item 3 | | £ : p |
| Item 4 | | £ : p |
| Item 5 | | £ : p |
| Item 6 | | £ : p |
| Item 7 | | £ : p |
| Item 8 | | £ : p |
| Item 9 | | £ : p |
| Item 10 | | £ : p |

Total

£5,000 : 00 p

Authorisation and declaration

I claim reimbursement of these costs which I incurred wholly, exclusively and necessarily in the performance of my Parliamentary duties.

Signature _____  _____ MP

Date _____ 04 07 05 _____


Data protection

The House of Commons Administration will process the information you provide on this form for the purpose of administering and accounting for the Members' Estimate, making payments and keeping records in accordance with the rules agreed by the House of Commons and the Inland Revenue. The information will also be disclosed to the National Audit Office for audit purposes. The information may also be used within the House of Commons Administration or by its agents for the purpose of business analysis or research. For the purposes of the Freedom of Information Act 2000 the House of Commons Administration is a Public Authority and therefore the information it holds will fall within the scope of that Act.

Under the Data Protection Act 1998, you have the right to see and receive a copy of any personal data that the House of Commons Administration holds about you. If you have questions about the contents of this notice or how your information is handled or about your rights under the Data Protection Act 1998, please call our Data Protection Officer on 020 7219 2032, who acts on behalf of the Data Controller (the Clerk of the House).

Send your completed form to

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

| Office use only | | | Input subtotals per Cat 5 | |
|--|----------|------|--|---|
| Validation | Initials | Date | | £ |
| Claims received | | / / |  | |
| Signature check | | / / | | |
| Funds check | | / / | | |
| Allowable expenditure | | / / | | |
| Member Res ID & Costc | | / / | | |
| Ext type/Cat 5 & subtotals added to form | | / / | | |
| Receipts/ documentation present | | / / | | |
| Processing | | | | |
| Input | | / / | | |
| | | | Comments | |
| | | | | |

To: Gregory Campbell MP

Address:

Date: 31 March 2005

Invoice No.

P. O. No.

Vendor No.

Terms

Payment Due

| Description | Amount |
|---|-----------|
| Research & Secretarial April 2004 - March 2005 | £5,000.00 |

TOTAL £5,000.00




C1. REIMBURSEMENT

I wish to claim reimbursement of the following amounts from my Incidental Expenses Provision for the period 01.10.04 to 31.12.04 as detailed below.

I attach certified receipts/invoices for all equipment & software leased or purchased.

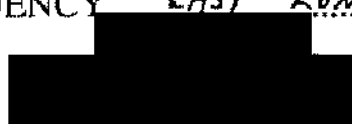
| Item | Description of service / goods | Amount £ |
|------|--------------------------------|-------------|
| 1 | OFFICE COFFEE TABLE | 125-00 |
| 2 | OFFICE TABLE | 110-00 |
| 3 | | |
| 4 | | |
| 5 | | |
| 6 | | |
| 7 | | |
| 8 | | |
| 9 | | |
| 10 | | |
| | | £ 235-00 |

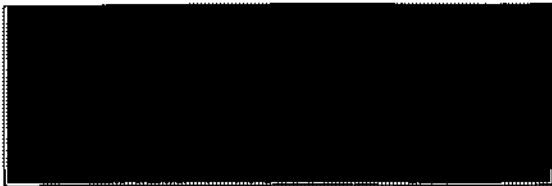
I certify that the expenses shown above have been wholly, exclusively and necessarily incurred on parliamentary business.

SIGNED..........MP

PRINTED NAME.....G. CAMPBELL.....

DATE 03.01.05.....CONSTITUENCY EAST LONDON PERRY.....





C1. REIMBURSEMENT

I wish to claim reimbursement of the following amounts from my Office Costs Allowance for the period to as detailed below.

I attach certified receipts/invoices for all equipment & software leased or purchased.

| Item | Description of service / goods | Amount £ |
|------|--------------------------------|-------------|
| 1 | TAXIS | 43-00 |
| 2 | [REDACTED] | |
| 3 | [REDACTED] | |
| 4 | [REDACTED] | |
| 5 | [REDACTED] | |
| 6 | [REDACTED] | |
| 7 | [REDACTED] | |
| 8 | [REDACTED] | |
| 9 | [REDACTED] | |
| 10 | [REDACTED] | |
| | | £ 43-00 |

I certify that the expenses shown above have been wholly, exclusively and necessarily incurred on parliamentary business.

SIGNED [REDACTED] MP

PRINTED NAME G. CAMPBELL

DATE 06 01 05 CONSTITUENCY EAST LONDON DERRY

Licensed taxi receipt

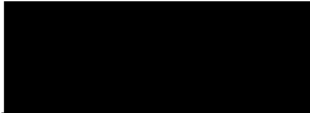


Fare:

L11

Date:

Signature:



ALWAYS USE A LICENSED TAXI

[REDACTED]

| |
|--------------|
| PICK UP FROM |
| |
| TRIP ENDED |
| |

[REDACTED]

[REDACTED]

| CHARGES | AMOUNT |
|---------|--------|
| METER | |
| EXTRAS | |
| | 10.00 |

[REDACTED]

[REDACTED]

[REDACTED]

TAXI RECEIPT

Journey _____ Tel _____

Received £ 12 -

Signed _____ With Thanks

LICENSED TAXI RECEIPT



Price

 \$10.00

Signature

