



I wish to claim reimbursement of the following amounts in respect of additional costs which I have necessarily incurred for overnight stays away from my main home (as notified to the Fees Office) on Parliamentary duties during the period from 1/1/04 to 31/3/04 made up as follows:-



**Hotel Accommodation**

**Residential Accommodation**

- (i) Rent/Rates
- (ii) Heat and Light
- (iii) Telephone
- (iv) Cleaning
- (v) Repairs and Maintenance
- (vi) Other (please specify)



**Food**

**Other Expenses (please specify)**

INTEREST ON LOAN  
FOR LONDON PROPERTY

5,236

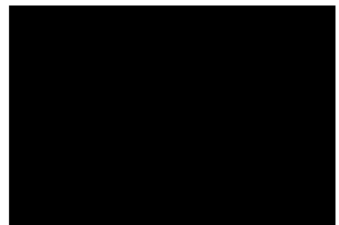
non empty

Total £ 5,236.

Signed  M.P.

Print Name... SHAWN WOODWARD M.P.

Date 1/4/04 Constituency ST. HELENS SOUTH





# Notification of Member's home addresses

for travel entitlements and Additional Costs Allowance

Use this form to tell us

- the address of your main home
- the address of your second home, if you intend to claim Additional Costs Allowance for it.

### Your details

Name

SHAUN WOODWARD MP

Constituency

ST HELEN'S SOUTH

### Address details

Address  
main

Address  
second  
for Additional  
Costs Allowance (if claimed)

### Declaration

- I confirm that my address details I have given above are correct.
- I understand that I must tell the Members' Allowances Section about any changes to the above arrangements.
- I understand that I must tell the Members' Allowances Section in advance about any substantive change to the financial arrangements for these homes, such as changes to the value of mortgages and bank loans.

If you intend to claim Additional Costs Allowance for a second home

- I confirm that I have read the rules on Additional Costs Allowance as set out in the Members' Allowances Handbook and that I intend to claim Additional Costs Allowance for the second home I have given above.

Signature

MP

Date

### Data protection

The rules governing payments made from the Additional Costs Allowance say we must keep the information we ask for on this form.

The information you give will be seen by:

- staff who are responsible for processing Members' Additional Costs Allowance claims and travel claims
- National Audit Office staff.

We will keep the information you give for the length of the parliament.

If you have any concerns about how your information is handled, please call our Data Protection Officer on 020 7219 3656, who acts on behalf of the Data Controller, Clerk of the House.

Send your completed form to

Members' Allowances Section, Operations Directorate,  
Department of Finance & Administration, 3rd Floor, 7 Millbank, LONDON SW1 0AA

Financial Processing }

Transaction No. ....

Registration No. ....



**Validation Claim Summary Sheet**

Please write or print clearly & attach to claim

**ACA**

**Member Supplier ID**



**Pay recipient**

(NB Financial Processing to check whether a dedicated a

**Text**

6/4/04 - 31/12/04  
(i.e. period of claim)

**Invoice No.**



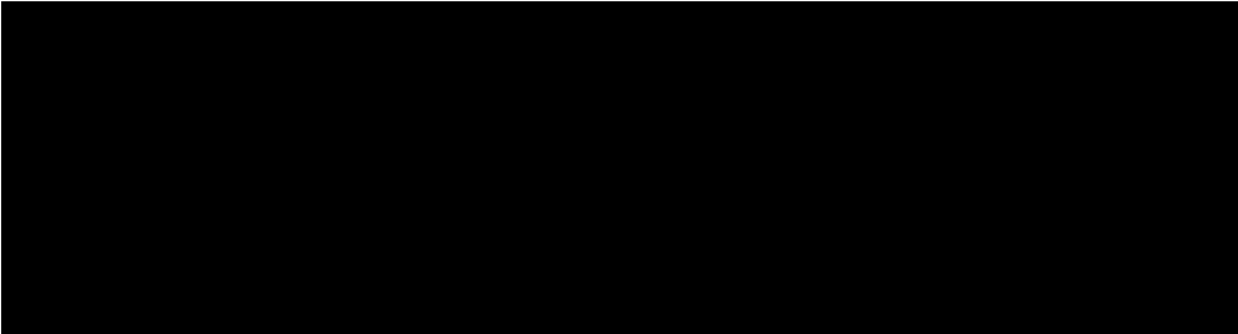
**Account code / Allowance**

**Members cost centre (Cat1)**

**Financial Year/PIRO (Cat2)**

04\_05 / 05\_06

**Expenditure type (Cat5) :**



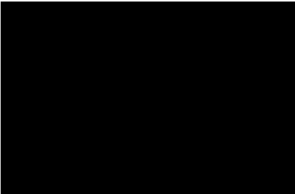
*\* Financial Processing purposes only*

Registered by (initials & date)

..... 6/4

Posted by (initials & date)

..... 8.6.05





# Member's claim form

## Members' Allowances

About filling in this form

- For details of costs you can claim for, see *Green Book* section 3.
- If you have any doubt about whether you can claim for a cost, please call 020 7219 1592.

### Your details

Name  
in CAPITAL LETTERS

SHAUN WOODWARD MP

Constituency

ST HELENS SOUTH

### Claim details

#### Notes

You can only claim for

- costs you have actually paid
- additional expenses wholly, exclusively and necessarily incurred to enable you to stay overnight away from your only or main home for the purpose of performing your Parliamentary duties.

Please list

- all items costing £250 or more and include receipts – except for food, for which receipts are not required.

Please attach

- receipts or invoices for any hotel cost even if it is less than £250.

Period of claim

from 06 1 04 104 to 31 12 104 X 9

Total cost of hotel stays  
attach all receipts

£ : p

Mortgage payments  
(interest only) ~~or rent~~

£ 15,676 : 50 p

Food

£ : p

Utilities

£ : p

Council Tax/Rates

£ : p

Telephone and  
telecommunications

£ : p

Cleaning

£ : p

Service/maintenance

£ : p

Repairs/insurance/  
security

£ : p

Other

£ : p

▶ please specify \_\_\_\_\_

Other

£ : p

▶ please specify \_\_\_\_\_

Other

£ : p

▶ please specify \_\_\_\_\_

Total

£ 15,676 : 50 p

**Details of second home** *if applicable*

Address of  
second home  
for Additional  
Costs Allowance

**Declaration**

I confirm that I incurred these costs wholly, exclusively and necessarily to enable me to stay overnight away from my only or main home for the purpose of performing

Signature

MP

Date

23 March 2005**Data protection**

The rules governing payments made from the Additional Costs Allowance say we must keep the information we ask for on this form.

The information you give will be seen by:

- staff who are responsible for processing Members' Additional Costs Allowance claims and travel claims
- National Audit Office staff.

We will normally keep the information you give for three years following the year in which you incurred the expense.

If you have any concerns about how your information is handled, please call our Data Protection Officer on 020 7219 3659, who acts on behalf of the Data Controller, Clerk of the House.

Send your completed  
form to

Members' Allowances Section, Operations Directorate,  
Department of Finance & Administration, 3rd Floor, 7 Millbank, LONDON SW1 0AA

[Redacted]

[Redacted]

11 January 2005

Your Ref: [Redacted]

Dear [Redacted]

**Re: Shaun Woodward MP**

I write with reference to your letter dated 30 November 2004. Please accept my apologies for the delay in writing.

In response, I confirm Mr Woodward's full address is as follows:

[Redacted]

In relation to the Loan account, which is in the names of Shaun Anthony Woodward and [Redacted], I confirm the following amounts of debit interest have been applied, for the period 1 March to 30 September 2004:

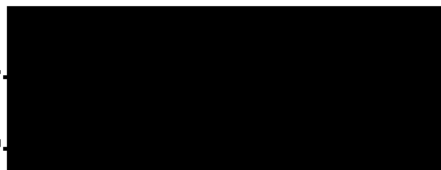
<i>Date Interest Calculated To</i>	<i>Date Passed</i>	<i>Amount (£)</i>
4 March 2004	19 March 2004	92,732.74
3 June 2004	18 June 2004	101,198.63
2 September 2004	17 September 2004	113,373.29
	<b>Total</b>	<b>307,304.66</b>

[Redacted]

Financial Processing }

Transaction No.

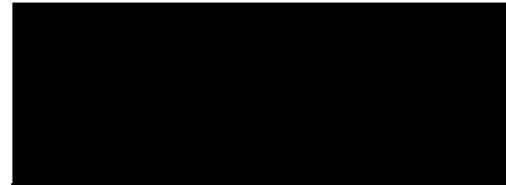
Registration No.



**Validation Claim Summary Sheet**

**ACA**

Please write or print clearly & attach to claim



**Member Supplier ID**

**Pay recipient**

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

**Text** 1st Jan 05 - 31 MAR 05

(i.e. period of claim)

**Invoice No.**



**Account code / Allowance**

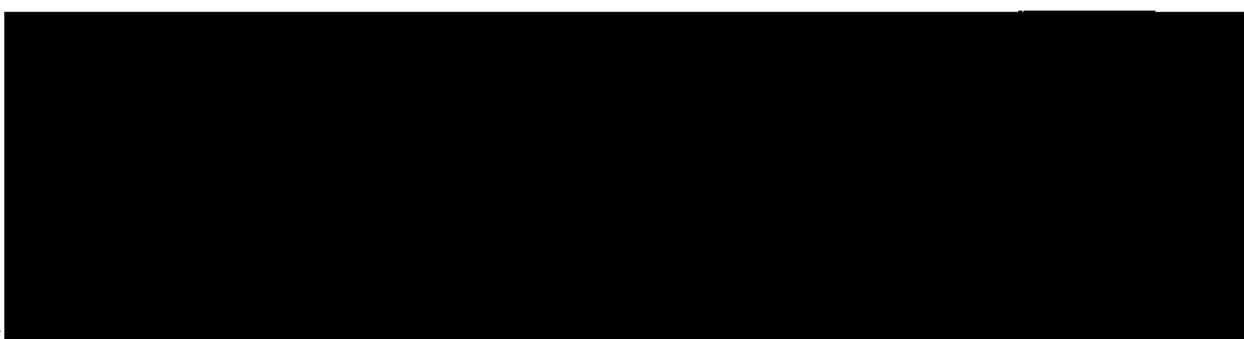
6/4

**Members cost centre (Cat1)**

**Financial Year/PIRO (Cat2)**


04\_05 / 05\_06

**Expenditure type (Cat5) :**



\* Financial Processing purposes only

Registered by (initials & date)

 22/1

Posted by (initials & date)

25/4/5 



# Member's claim form

04/05

## Members' Allowances

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### Your details

Name  
in CAPITAL LETTERS

SHAUN WOODWARD MP

Constituency

ST HELENS SOUTH

### Claim details

#### Notes

You can only claim for

- costs you have actually paid
- additional expenses wholly, exclusively and necessarily incurred to enable you to stay overnight away from your only or main home for the purpose of performing your Parliamentary duties.

Please list

- all items costing £250 or more and include receipts – except for food, for which receipts are not required.

Please attach

- receipts or invoices for any hotel cost even if it is less than £250.

Period of claim

from 01/01/05 to 31/03/05

Total cost of hotel stays  
attach all receipts

£ : p

Mortgage payments  
(interest only) or rent

£ 5225 : 50 p ✓

Food

£ : p

Utilities

£ : p

Council Tax/Rates

£ : p

Telephone and telecommunications

£ : p

Cleaning

£ : p

Service/maintenance

£ : p

Repairs/insurance/  
security

£ : p

Other

£ : p

▶ please specify \_\_\_\_\_

Other

£ : p

▶ please specify \_\_\_\_\_

Other

£ : p

▶ please specify \_\_\_\_\_

Total

£ 5225 : 50 p

**Details of second home** *if applicable*

Address of  
second home  
for Additional  
Costs Allowance

**Declaration**

I confirm that I incurred these costs wholly, exclusively and necessarily to enable me to stay overnight away from my only or main home for the purpose of performing

Signature



MP

Date

8/4/05

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