



Direct payment of suppliers

When to use this form

- Use this form to ask us to pay your suppliers for goods and services incurred on your Parliamentary duties.

About filling in this form

- For details of costs you can claim for see Green Book section 5.13.1.
- If you have any doubt about whether you can claim for a cost, please call 020 7219 1340.

Your details

Name in CAPITAL LETTERS

CHRISTOPHER FRASER

Constituency

SOUTH WEST NORFOLK

--	--

Claim details

Please ensure

- your claim totals more than £100 – this will enable us to process your claim more promptly
- any claims for petty cash do not exceed £250 per month
- you attach all supplier invoices.

You must specify

- the Incidental Expenses Provision for costs that include office and surgery accommodation, equipment and supplies, communication and travel.

You can specify

- the Incidental Expenses Provision or the Staffing Allowance for costs that include work commissioned or bought in services.

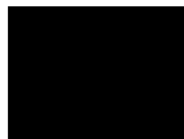
Date of claim

30 14 106

Allowance year

05 06

Incidental Expenses Provision claims



	Suppliers	Amount
Item 1	PARLIAMENTARY RESOURCES UNIT	£ 3,877.50 p
Item 2		£ : p
Item 3		£ : p
Item 4		£ : p
Item 5		£ : p

Total £3,877.50 p

Office use only

Allow or A/c code	Supplier ID	Exp/ Cat 5
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Claim details continued


Staffing Allowance claims

	Suppliers	Amount
Item 6	_____	£ _____ : _____ p
Item 7	_____	£ _____ : _____ p
Item 8	_____	£ _____ : _____ p
Item 9	_____	£ _____ : _____ p
	Total	£ _____ : _____ p

Office use only		
Allow or A/c code	Supplier ID	Exp/Cat 5

Authorisation and declaration

I confirm that the payments requested are in respect of costs incurred wholly, exclusively and necessarily in the performance of my Parliamentary duties.

Signature  MP

Date 30 / 4 / 06

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.

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Send your completed form to

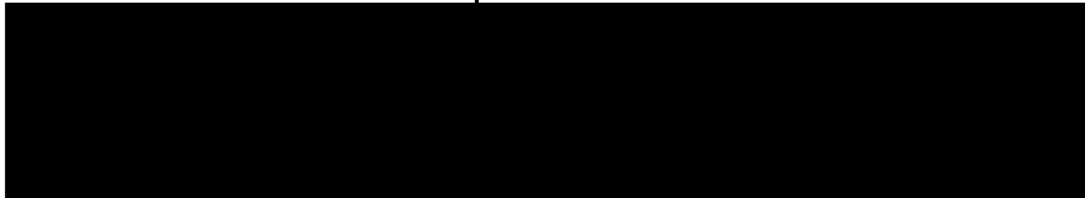
Validation Team, Operations Directorate,
Department of Finance & Administration, House of Commons, London SW1A 0AA

Office use only			
Validation	Initials	Date	
Claims received		/	/
Signature check		/	/
Funds check		/	/
Allowable expenditure		/	/
			
Validation	Initials	Date	
Member ID added to form		/	/
Payment codes added to form		/	/
Receipts/ documentation present		/	/
Processing Input		/	/

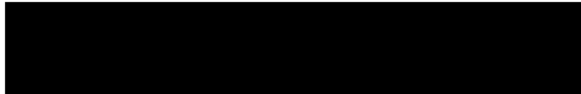
Please use margin for comments



Parliamentary Resources Unit



INVOICE



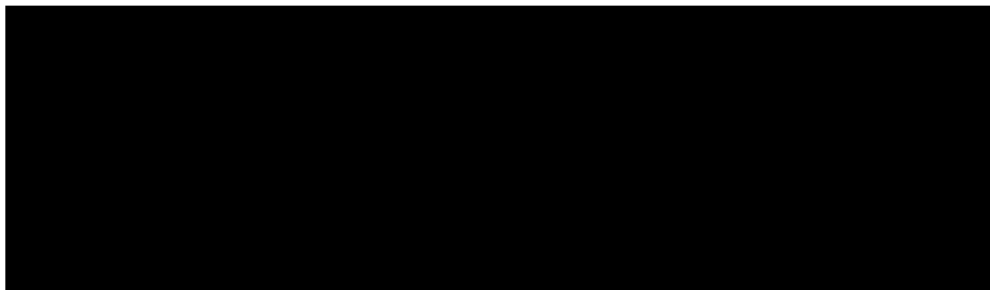
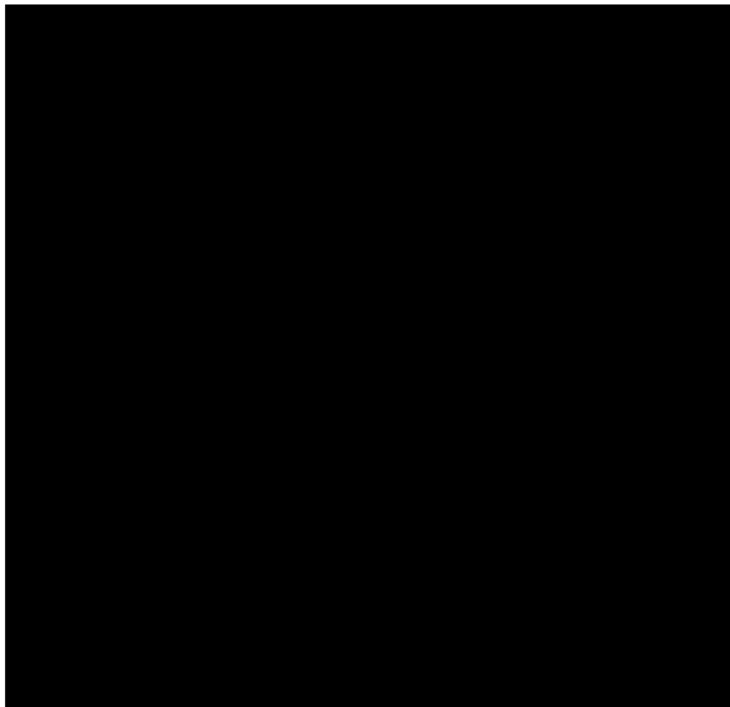
Customer

Christopher Fraser MP
House of Commons

Service

For the provision of research services:

Contract	£3,300
VAT	£577.50
Total	£3,877.50





Direct payment of suppliers

31 MAR 2006

When to use this form

- Use this form to ask us to pay your suppliers for goods and services incurred on your Parliamentary duties.

About filling in this form

- For details of costs you can claim for, see Green Book section 5.13.1.
- If you have any doubt about whether you can claim for a cost, please call 020 7219 1340.

Your details

Name in CAPITAL LETTERS

CHRISTOPHER FRASER

Constituency

SOUTH WEST NORFOLK

Claim details

Please ensure

- your claim totals more than £100 – this will enable us to process your claim more promptly
- any claims for petty cash do not exceed £250 per month
- you attach all supplier invoices.

You must specify

- the Incidental Expenses Provision for costs that include office and surgery accommodation, equipment and supplies, communication and travel.

You can specify

- the Incidental Expenses Provision or the Staffing Allowance for costs that include work commissioned or bought in services.

Date of claim

29 13 106

Allowance year

05 106

Incidental Expenses Provision claims



	Suppliers	Amount
Item 1	LANGFORD PRINTERS	£ 148 : 05 p
Item 2		£ : p
Item 3		£ : p
Item 4		£ : p
Item 5		£ : p

Total £148:05 p

Office use only

Allow or A/c code	Supplier ID	Exp/ Cat 5

Claim details continued

Staffing Allowance claims

	Suppliers	Amount
Item 6	_____	£ _____ : _____ p
Item 7	_____	£ _____ : _____ p
Item 8	_____	£ _____ : _____ p
Item 9	_____	£ _____ : _____ p
Total		£ _____ : _____ p

Office use only		
Allow or A/c code	Supplier ID	Exp/ Cat 5
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Authorisation and declaration

I confirm that the payments requested are in respect of costs incurred wholly, exclusively and necessarily in the performance of my Parliamentary duties.

Signature _____ MP

Date 30 / 03 / 06

Data protection

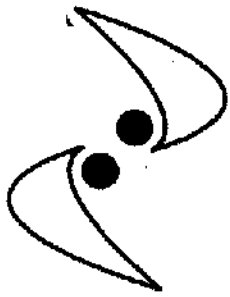
The House of Commons Administration will process the information you provide on this form for the purpose of administering and accounting for the Members' Estimate, making payments and keeping records in accordance with the rules agreed by the House of Commons and the Inland Revenue. The information 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.

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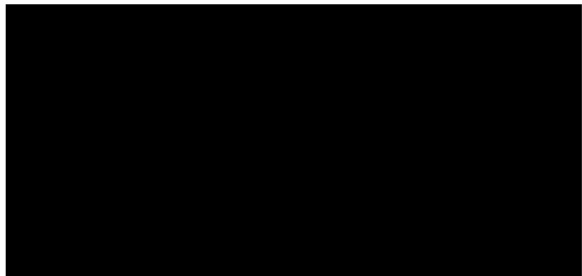
Send your completed form to

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

Office use only			
Validation	Initials	Date	
Claims received	_____	____/____/____	
Signature check	_____	____/____/____	
Funds check	_____	____/____/____	
Allowable expenditure	_____	____/____/____	
			Member ID added to form
			Payment codes added to form
			Receipts/ documentation present
			Processing Input
Please use margin for comments			



LANGFORD PRINTERS



Invoice

Christopher Fraser MP

INVOICE NUMBER

DATE / TAX POINT

ACCOUNT NUMBER

DETAILS	NET PRICE	VAT
5000 x A4 Green House of Commons Letterheads	106.00	18.55
New Plate and Artwork Charge	20.00	3.50

DELIVERY ADDRESS:

TOTAL NET

126.00

TOTAL VAT

22.05

INVOICE TOTAL £

148.05

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)

04_05 / 05_06

Expenditure type (Cat5) :



£.....

£.....

£.....

£.....

£.....

£.....

£.....

£.....

£ 3750.00 /

£.....

TOTAL

Comments:

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

..... S/B

Posted by (initials & date)

.....



Direct payment of suppliers

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Name in CAPITAL LETTERS

CHRISTOPHER FRASER

Constituency

SOUTH WEST NORFOLK

Claim details

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Date of claim

30 / 01 / 06

Allowance year

05 / 06

Incidental Expenses Provision claims

Suppliers	Amount
Item 1 [Redacted] Photographer	£ 66 : 50 p
Item 2	£ : p
Item 3	£ : p
Item 4	£ : p
Item 5	£ : p
Total	£ 66 : 50 p

Office use only

Allow or A/c code	Supplier ID	Exp/ Cat 5
[Redacted]	[Redacted]	[Redacted]
[Redacted]	[Redacted]	[Redacted]
[Redacted]	[Redacted]	[Redacted]
[Redacted]	[Redacted]	[Redacted]

Claim details continued

Staffing Allowance claims

	Suppliers	Amount
Item 6	_____	£ _____ : _____ p
Item 7	_____	£ _____ : _____ p
Item 8	_____	£ _____ : _____ p
Item 9	_____	£ _____ : _____ p
	Total	£ _____ : _____ p

Office use only		
Allow or A/c code	Supplier ID	Exp/ Cat 5

Authorisation and declaration

I confirm that the payments requested are in respect of costs incurred wholly, exclusively and necessarily in the performance of my Parliamentary duties.

Signature _____ MP
 Date 30 10 106

Data protection

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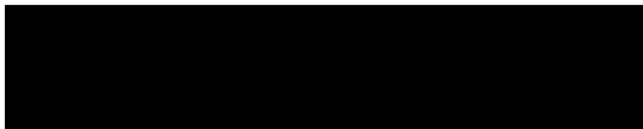
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Validation Team, Operations Directorate,
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Office use only			
Validation	Initials	Date	
Claims received		/ /	
Signature check		/ /	
Funds check		/ /	
Allowable expenditure		/ /	
Validation	Initials	Date	
Member ID added to form		/ /	
Payment codes added to form		/ /	
Receipts/ documentation present		/ /	
Processing Input		/ /	

Please use margin for comments



P H O T O G R A P H E R



Rt Hon Christopher Fraser MP



Date

9th January 2006

Invoice no



To supplying three 16"x 12" prints @ £20 each

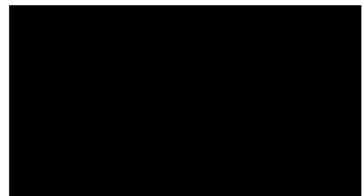
60.00

Royal Mail Special Delivery

6.50

Total

£66.50





Direct payment of suppliers

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Your details

Name in CAPITAL LETTERS

CHRISTOPHER FRASER

Constituency

SW NORFOLK

Claim details

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Date of claim

1 / 1

Allowance year

05 / 06

Incidental Expenses Provision claims

Suppliers

Amount

CBICURE	£ 41 : 20 p
✓	£ 3 : 54 p
9	£ 1 : 15 p
RAPID	£ 656 : 53 p
✓	£ 455 : 90 p

Total

£ 1158 : 62 p

Claim details continued

Staffing Allowance claims			Office use only		
	Suppliers	Amount	Allow or A/c code	Supplier ID	Exp/ Cat 5
Item 6	_____	£ _____ : _____ p	_____	_____	_____
Item 7	_____	£ _____ : _____ p	_____	_____	_____
Item 8	_____	£ _____ : _____ p	_____	_____	_____
Item 9	_____	£ _____ : _____ p	_____	_____	_____
Total		£ _____ : _____ p			

Authorisation and declaration

I confirm that the payments requested are in respect of costs incurred wholly, exclusively and necessarily in the performance of my Parliamentary duties.

Signature _____ MP

Date _____ / _____ / _____



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

	Initials	Date		Initials	Date
Validation Claims received	_____	____/____/____	Validation Member ID added to form	_____	____/____/____
Signature check	_____	____/____/____	Payment codes added to form	_____	____/____/____
Funds check	_____	____/____/____	Receipts/ documentation present	_____	____/____/____
Allowable expenditure	_____	____/____/____	Processing Input	_____	____/____/____

Please use margin for comments

invoice



[Redacted]

Christopher Fraser

[Redacted]

Invoice Date : 12 December 05
Invoice No : [Redacted]
Account No : [Redacted]
RA Number : [Redacted]

For the rental of the following equipment:-

Small Blackberry SIM Tel.No. [Redacted]

Between 10 Nov 05 @ 12:00
and 10 Dec 05 @ 12:00

QUALITY
20 JAN 2006
ASSURANCE

Equipment still on rent

Description	Quantity	Unit Price £	Amount £
RENTAL	1 month	34.00	34.00
MANAGED SERVICE	1 month	12.00	12.00
CALLS	[Redacted]		35.06
ITEMISED BILLING		0.00	0.00

[Redacted]

Sub-total 81.06

Purchase Order Number [Redacted]

VAT @ 17.50 % 14.19

Payment Due: 26 December 05

Amount Due £ 95.25

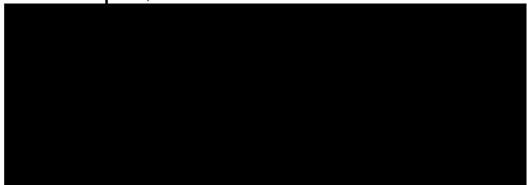
All on-line rates have been reduced...
order on-line at www.cellhire.co.uk
and save!

[Redacted]

statement



Christopher Fraser



Date : 15 December 2005

Account No :

Date	Type	Ref	Debits(£)	Credits(£)	Outstanding(£)
10 Oct 05			55.20		1.15
10 Nov 05			57.59		3.54
12 Dec 05			95.25		41.20

QUALITY
20 JAN 2006
ASSURANCE



CR - credit

Amount Due £ 45.89

28 days & Under	Over 28 days	Over 56 days	Over 84 days
41.20	3.54	1.15	0.00



rapide

Invoice

Page 1



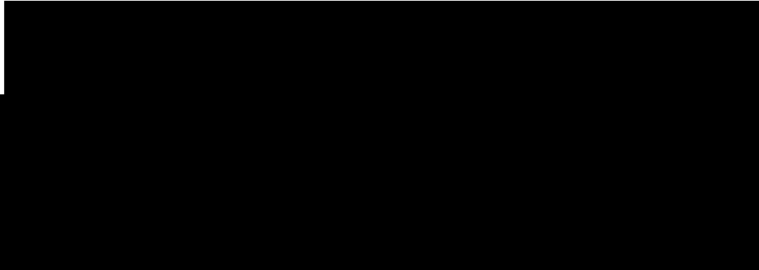
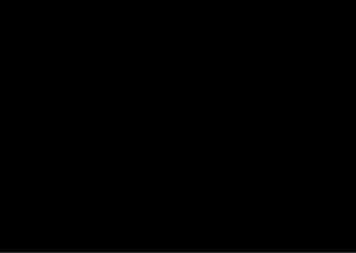
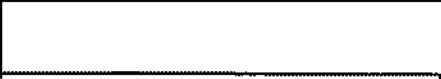

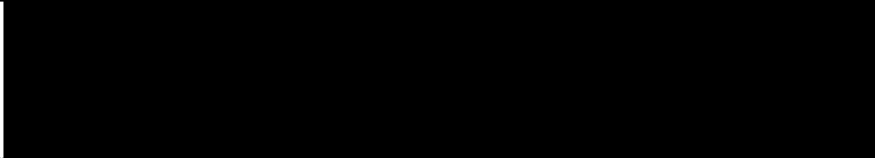
QUALITY
20 JAN 2006
ASSURANCE

INVOICE No.

INVOICE/TAX DATE

ORDER No.

ACCOUNT No.

Quantity	Details	Unit Price	Net Amount	VAT Rate	VAT
1	 20,000 - 99 x 210mm "CALLING CARDS - CHRISTOPHER FRAZER" PRINTED 4 COLS BOTH SIDES, TRIMMED TO SIZE & BOXED	559.00	559.00	17.50	97.83
					
					
					
					
					
					
			Total Net Amount		559.00
			Carriage Net		0.00
			Total Tax Amount		97.83
			Invoice Total		656.83

rapide

Invoice

Page 1

20 JAN 2006

20 JAN 2006

INVOICE No.

INVOICE/TAX DATE

ORDER No.

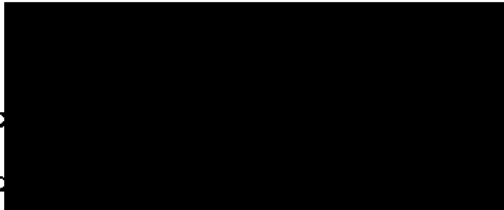
ACCOUNT No.

Quantity	Details	Unit Price	Net Amount	VAT Rate	VAT
1	JOB NO [REDACTED] ORDER REF: [REDACTED] 1,000 - A4 - "CHRISTOPHER FRAZER" POSTERS PRINTED 4 COLS 1 SIDE & TRIMMED TO SIZE	388.00	388.00	17.50	67.90
				Total Net Amount	388.00
				Carriage Net	0.00
				Total Tax Amount	67.90
				Invoice Total	455.90

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)

04_05 / 05_06

Expenditure type (Cat5) :



£.....

£.....

£.....

£.....

£.....

£.....

£.....

£.....

£.....

£.....

27500.00 £2500.00

TOTAL

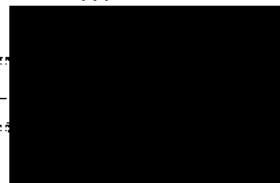
Comments:

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

24 NOV 2005

Posted by (initials & date)

24 NOV 2005





**Incidental Expenses Provision /
Staffing Allowance**

Form B
Page 1 of 2

Periodic payment form

**About filling in
this form**

- * Use this form to request regular payments to a supplier on a monthly, quarterly, bi annual or annual basis from either your Staffing Allowance or Incidental Expenses Provision.
- * 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
Constituency
for DFA use only

Christophe Frensch

Claim details

Notes
You can claim only for

Please ensure
Please attach

Agreement no. or ref.

Amount payable
*Please delete as appropriate**

Payments to commence

Payments to cease

Company name
& remittance address

Bank details
if known

Authorisation and declaration

I confirm that the [redacted] are in respect of work wholly, exclusively and necessarily undertaken for the [redacted] Parliamentary duties.

Signature

Date *18/2/05*

Financial Processing }

Transaction No. [REDACTED]

Registration No. [REDACTED]

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)

~~04_05~~ / 05_06

Expenditure type (Cat5) :

[REDACTED]

[REDACTED]

£.....

£.....

£.....

£.....

£.....

£.....

£.....

£.....

£3671.87

£3671.87

TOTAL

Comments:

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

[REDACTED]

- 3 JUN 2005

Posted by (initials & date)

06 JUN 2005

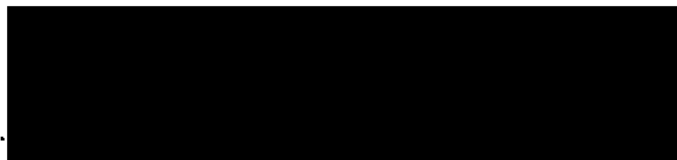
[REDACTED]

C2. DIRECT PAYMENT



Invoice	Supplier's name	Amount £	Transaction code <i>For Fees Office use only</i>
1	Parliamentary Resources Unit Standard Contract 2005/6	3,125	
2	+ VAT	546.87	
3			
4			
5			
6			
7			
8			
9			
10			
	Total	£3,671.87	

I certify that these expenses have been wholly, exclusively and necessarily incurred on parliamentary duties.



SIGNED.....

PRINTED NAME... CHRISTOPHER FRASER MP

DATE... 18/1/05 CONSTITUENCY... S W NORFOLK



Parliamentary Resources Unit



INVOICE



Customer

Christopher Fraser MP



Service

For the provision of research services:

Contract	£3,125
VAT	£546.87
Total	£3,671.87

Parliamentary Resources Unit
May 2005

Financial Processing }

Transaction No. [REDACTED]

Registration No. [REDACTED]

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) :

[REDACTED]

TOTAL

C2

[REDACTED]

~~04_05~~ / 05_06 [REDACTED]

£

£

£

£ 276.13

£

£

£

£

£

£

Comments:

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

[REDACTED] 22/6/05

Posted by (initials & date)

2-3 JUN 2005 [REDACTED]

Financial Processing }

Transaction No.

Registration No.



Validation Claim Summary Sheet

Please write or print clearly & attach to claim

C2

Supplier ID

Text

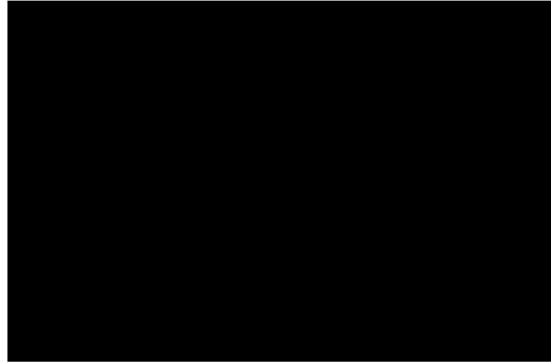
Invoice No.

Account code / Allowance

Members cost centre (Cat1)

Financial Year/PIRO (Cat2)

Expenditure type (Cat5) :



~~05~~ / 05_06 /



£.....
 £ 57.58
 £.....
 £.....
 £.....
 £.....
 £.....
 £.....
 £.....
 £.....

TOTAL

Comments:

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



22.6.05

Posted by (initials & date)

23 JUN 2005





Direct payment of suppliers

15 JUN 2005

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CHRISTOPHER FRASER

Constituency

SOUTH WEST NORFOLK

Claim details

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Date of claim

9 1 06 05

Allowance year

05 06

Incidental Expenses Provision claims

Table with 2 columns: Suppliers, Amount. Rows include LANGFORD PRINTERS (£ 57 : 58 p), CELLHIRE (£ 276 : 13 p), and empty rows for Item 3, 4, and 5.

Total £ 333 : 71 p

Claim details continued

Staffing Allowance claims

	Suppliers	Amount
Item 6	_____	£ _____ : _____ p
Item 7	_____	£ _____ : _____ p
Item 8	_____	£ _____ : _____ p
Item 9	_____	£ _____ : _____ p
	Total	£ _____ : _____ p

Office use only		
Allow or A/c code	Supplier ID	Exp/ Cat 5

Authorisation and declaration

■ I confirm that the payments requested are in respect of costs incurred wholly, exclusively and necessarily in the performance of my Parliamentary duties.

Signature

MP

Date

9 1 6 1 0 5

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.

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Send your completed form to

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

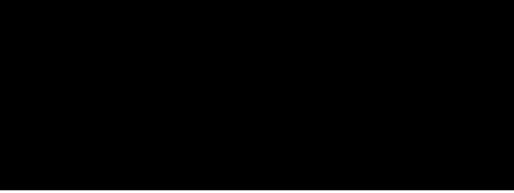
Office use only			
Validation	Initials	Date	
Claims received		/ /	
Signature check		/ /	
Funds check		/ /	
Allowable expenditure		/ /	
Validation	Initials	Date	
Member ID added to form		/ /	
Payment codes added to form		/ /	
Receipts/ documentation present		/ /	
Processing Input		/ /	

Please use margin for comments

invoice



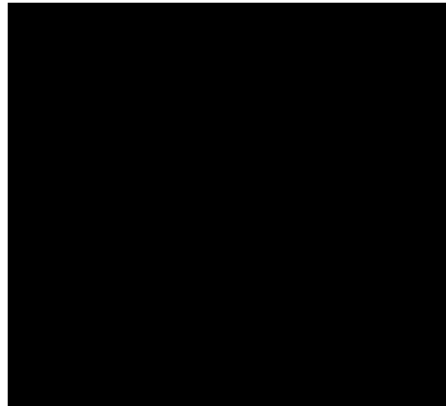
Christopher Fraser



Invoice Date : 13 May 05
Invoice No :
Account No :

For the sale of unit, refers.

Description	Quantity	Unit Price £	Amount £
EQUIPMENT	1	235.00	235.00

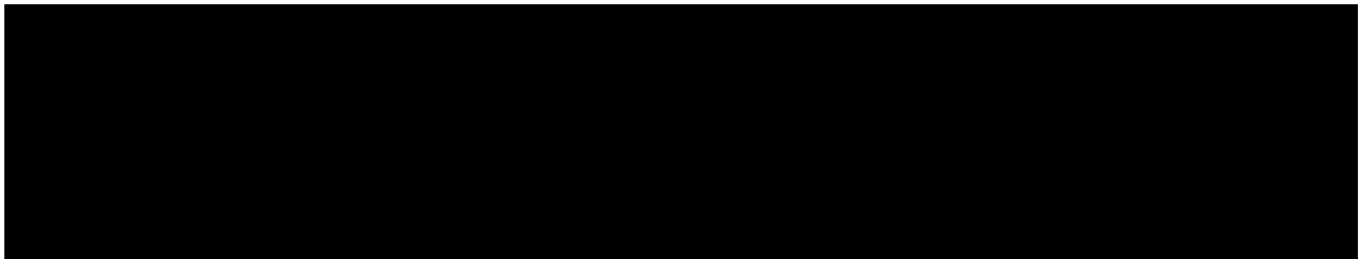


Sub-total 235.00

VAT @ 17.50 % 41.13

Payment Due: 27 May 05

Amount Due £ 276.13



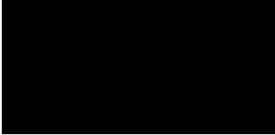


LANGFORD PRINTERS



Invoice

Christopher Fraser MP



INVOICE NUMBER

DATE / TAX POINT

ACCOUNT NUMBER

DETAILS	NET PRICE	VAT
500 x A4 Green House of Commons Letterheads	29.00	5.08
New Plate and Artwork Charge	20.00	3.50

DELIVERY ADDRESS:



TOTAL NET	49.00
TOTAL VAT	8.58
INVOICE TOTAL £	57.58

[REDACTED]
I: Christopher Fraser [REDACTED]

MP [REDACTED]

[REDACTED] For Constituency: Norfolk South West

Cellhire plc [REDACTED]

Require payment to: [REDACTED]

Address: [REDACTED]

£54.05 (including VAT)

The amount of: £ [REDACTED]

Start date: 9 May 2005 [REDACTED]

Until advised [REDACTED]

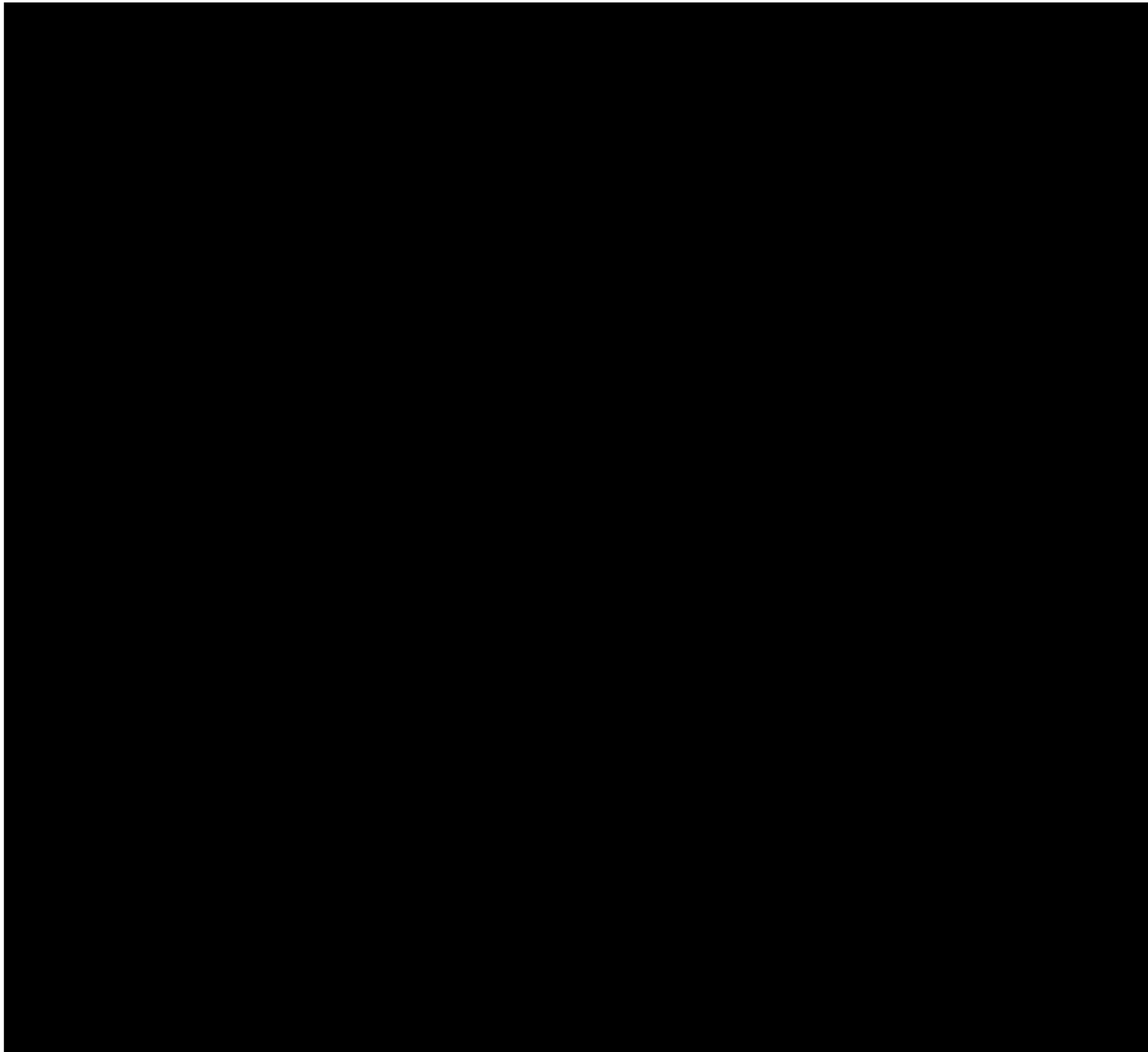
Ceasing: [REDACTED]

Every (please delete)

Month

Quarter

Year [REDACTED]





Member's reimbursement form

02 JUN 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.

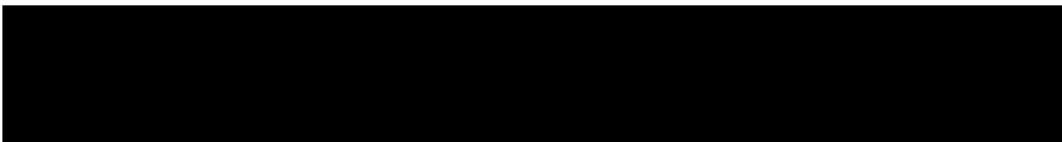
Your details

Name in CAPITAL LETTERS

CHRISTOPHER FRASER

Constituency

SOUTH WEST NORFOLK



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 05/05/06

to 31/03/06

Allowance year

05/06

	Description of service or goods	Amount
Item 1	MOBILE TELEPHONE	£ 1,015 : 80 p
Item 2	80% OF FULL	£ : p
Item 3	YEARS COST	£ : p
Item 4		£ : p
Item 5		£ : p
Item 6		£ : p
Item 7		£ : p
Item 8		£ : p
Item 9		£ : p
Item 10		£ : p

Office use only

Allow or Exp/
A/c code Cat 5



Total

£ 1,015 : 80 p

continued on page 2

Authorisation and declaration

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

Signature

[Redacted Signature]

MP

Date

30th May 2006

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	[initials]	1/1
Signature check	[initials]	1/1
Funds check	[initials]	1/1
Allowable expenditure	[initials]	1/1
Member Res ID & Costc	[initials]	1/1
Ext type/Cat 5 & subtotals added to form	[initials]	1/1
Receipts/ documentation present	[initials]	1/1
Processing		
Input		1/1

Input subtotals per Cat 5

[Redacted]	£1,015.80
[Redacted]	£
[Redacted]	£
[Redacted]	£
[Redacted]	£
[Redacted]	£
[Redacted]	£
[Redacted]	£
[Redacted]	£1,015.80

Comments

[Empty Comments Box]



Direct payment of suppliers

09 NOV 2005

When to use this form

- Use this form to ask us to pay your suppliers for goods and services incurred on your Parliamentary duties.

About filling in this form

- For details of costs you can claim for, see Green Book section 5.13.1.
- If you have any doubt about whether you can claim for a cost, please call 020 7219 1340.

Your details

Name in CAPITAL LETTERS

CHRISTOPHER FRASER

Constituency

SOUTH WEST NORFOLK

Claim details

Please ensure

- your claim totals more than £100 – this will enable us to process your claim more promptly *
- any claims for petty cash do not exceed £250 per month
- you attach all supplier invoices.

You must specify

- the Incidental Expenses Provision for costs that include office and surgery accommodation, equipment and supplies, communication and travel.

You can specify

- the Incidental Expenses Provision or the Staffing Allowance for costs that include work commissioned or bought in services.

Date of claim

31 / 10 / 05

Allowance year

05 / 06

Incidental Expenses Provision claims

Suppliers	Amount
BANNER BUSINESS SUPPLIES	£ 177: 69 p
— " —	£ 479: 40 p
— " —	£ 143: 12 p
PHOTOGRAPHER	£ 145: 00 p
	£ : p

Total £ 945: 21 p

Office use only

Allow or A/c code	Supplier ID	Exp/ Cat 5

Claim details continued


Staffing Allowance claims

	Suppliers	Amount
Item 6	_____	£ _____ : _____ p
Item 7	_____	£ _____ : _____ p
Item 8	_____	£ _____ : _____ p
Item 9	_____	£ _____ : _____ p
	Total	£ _____ : _____ p

Office use only		
Allow or A/c code	Supplier ID	Exp/ Cat 5

Authorisation and declaration

I confirm that the payments requested are in respect of costs incurred wholly, exclusively and necessarily in the performance of my Parliamentary duties.

Signature  MP

Date 31 10 05

Data protection

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Department of Finance & Administration, House of Commons, London SW1A 0AA

Office use only			
Validation	Initials	Date	
Claims received		/ /	Validation
Signature check		/ /	Member ID added to form
Funds check		/ /	Payment codes added to form
Allowable expenditure		/ /	Receipts/ documentation present
			Processing Input

Please use margin for comments

Invoice

INVOICE NO. [REDACTED]

Invoice To : Christopher Fraser MP

Charge To : Christopher Fraser MP



Banner Business Supplies Ltd

PAYMENT SLIP
Please see reverse for terms of business and how to pay

[REDACTED]

Delivered To : Christopher Fraser MP

Page 1 Of 2 Date 19/07/2005
Acc.No. [REDACTED] Order Date 13/07/2005
Order [REDACTED]
C.A.R. [REDACTED]

Sales Order No : [REDACTED]

Acc. No. : [REDACTED]
Inv. No. : [REDACTED]
Inv. Date: 19/07/2005
Amt. Due : 177.69

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		9260001	BANNER ROUND CHISEL HIGHLIGHTER YE	1	BOX10	4.5800	13/07/05	4.58	17.50	0.80
2		9260003	BANNER ROUND CHISEL HIGHLIGHTER PK	1	BOX10	4.5800	13/07/05	4.58	17.50	0.80
3		0631430	LIMOCOLOR PERMANENT CHISEL TIP AS	1	WLT4	2.9600	13/07/05	2.96	17.50	0.52
4		9290005	BANNER ABS FULL STRIP STAPLER BLACK	1	STAPLR	0.8900	13/07/05	0.89	17.50	0.16
5		9290009	RAFESCO 24/6 STAPLES	4	EX1000	0.4500	13/07/05	1.80	17.50	0.32
6		9290012	BANNER STAPLE EXTRACTOR ASSORTED	1	EACH	0.1300	13/07/05	0.13	17.50	0.02
7		9374000	BANNER P/HANDLE S/STEEL SCISSOR 152	2	PAIR	0.2700	13/07/05	0.54	17.50	0.09
8		9373036	LETTER OPENER 230mm	1	EACH	1.6500	13/07/05	1.65	17.50	0.29
9		0980944	HP DESKJET 1200C NO.40 CARTRIDGE BK	2	CRTRG	25.3600	13/07/05	50.72	17.50	8.88
10		9280010	BANNER SMALL PLAIN PAPERCLIP	1	EX1000	0.4300	13/07/05	0.43	17.50	0.08
11		9280012	BANNER LARGE LIPPED PAPERCLIP	1	EX1000	1.1700	13/07/05	1.17	17.50	0.20
12		0430011	PARKER QUINK INK 2oz BLUE	2	BOTTLE	2.8500	13/07/05	5.70	17.50	1.00
13		9250025	BANNER AUTOMATIC PENCIL 0.7mm HB	2	BOX10	2.0300	13/07/05	4.06	17.50	0.71
14		0530002	HELIX STEEL RULE 300mm	1	EACH	1.8700	13/07/05	1.87	17.50	0.33
15		9300003	BANNER CLEAR PLASTIC RULER 300mm	1	EACH	0.2600	13/07/05	0.26	17.50	0.05
16		9285004	BANNER FOLDBACK CLIP 51mm	3	BOX10	2.7400	13/07/05	8.22	17.50	1.44
17		9285004	BANNER FOLDBACK CLIP 51mm	1	BOX10	2.7400	13/07/05	2.74	17.50	0.48
18		0410080	PRITT STANDARD 10g STICK ADHESIVE	2	STICK	0.5800	13/07/05	1.16	17.50	0.20
19		9090025	BANNER CUBE 75x75mm YELLOW	2	EACH	0.7500	13/07/05	1.50	17.50	0.26
20		0080090	POST-IT NOTES 38x51mm YELLOW	1	PACK12	3.3200	13/07/05	3.32	17.50	0.58
21		0080092	POST-IT NOTES 76x127mm YELLOW	1	PACK12	9.2200	13/07/05	9.22	17.50	1.61
22		9240001	BANNER MEDIUM BALLPOINT PEN BLACK	1	BOX50	3.9900	13/07/05	3.99	17.50	0.70
23		9240028	BANNER RUBBER GRIP GEL INK PEN BLUE	1	BOX10	1.5100	13/07/05	1.51	17.50	0.26
24		9381004	BANNER FS COLOURED SUSP FILE AS	1	BOX25	13.6900	13/07/05	13.69	17.50	2.40
25		9380002	BANNER CARD INDEX BOX 127x76mm RED	1	EACH	1.9000	13/07/05	1.90	17.50	0.33

V.A.T. Summary

Sales Order Total (VAT excl)

Rate Taxable Sum V.A.T. Amount

VAT Registration [REDACTED]
Settlement [REDACTED]
Discount Terms [REDACTED]

INVOICE GOODS
INVOICE V.A.T.
INVOICE TOTAL

Please return the slip
from final page of invoice with your payment by

16/08/2005

* Invoice *

INVOICE NO. [REDACTED]



office2office

Invoice To :

Christopher Fraser MP
South West Norfolk

Charge To :

Christopher Fraser MP
South West Norfolk

Banner Business Supplies Ltd

[REDACTED]

Delivered To :

Christopher Fraser MP

Page 2 Of 2 Date 19/07/2005

Acc.No. [REDACTED] Order Date 13/07/2005

Order [REDACTED]

C.A.R.

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 VAT
27		9380013	BANNER A-Z GUIDE CARD 76x127mm BUFF	1	SET	0.8400	13/07/05	0.84	17.50	0.15
28		0570200	REXEL ODYSSEY HEAVY DUTY STAPLER SI	1	EACH	15.5100	18/07/05	15.51	17.50	2.71
29		0230402	RAPESCO BRIGHT TRANS WALLET FS+ AS	2	PACKS	2.0300	13/07/05	4.06	17.50	0.71
30		9385001	BANNER FS RIGID BOX FILE CLOUD	2	EACH	1.1100	13/07/05	2.22	17.50	0.39

[REDACTED]

PAYMENT SLIP

Please see reverse for terms of business and how to pay

Acc. No. : [REDACTED]

Inv. No. : [REDACTED]

Inv. Date: 19/07/2005

Am. Due : 177.69

Please return the slip

from final page of invoice with your payment by

V.A.T. Summary

Rate	Taxable Sum	V.A.T. Amount
17.50	151.22	26.47

Sales Order Total (VAT excl) 151.22

VAT Registration : [REDACTED]
Settlement : [REDACTED]
Discount Terms : [REDACTED]

INVOICE GOODS	151.22
INVOICE V.A.T.	26.47
INVOICE TOTAL	177.69

* Invoice

* INVOICE NO. [REDACTED]
 * *****
 Invoice To :



Banner Business Supplies Ltd

Christopher Fraser MP
 South West Norfolk

Charge To :
 Christopher Fraser MP
 South West Norfolk

PAYMENT SLIP
 Please see reverse
 for terms of business
 and how to pay



Delivered To :
 Christopher Fraser MP

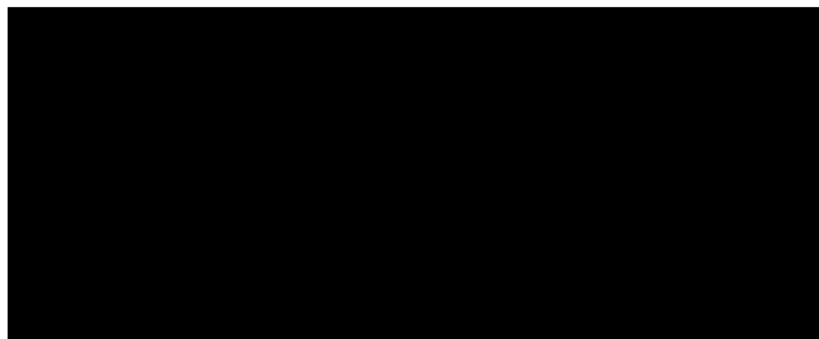
Page 1 OF 1 Date 13/09/2005
 Acc.No. [REDACTED] Order Date 31/08/2005
 Order [REDACTED]
 C.A.R. [REDACTED]



Sales Order No : [REDACTED]

Acc. No. : [REDACTED]
 Inv. No. : [REDACTED]
 Inv. Date: 13/09/2005
 Amt. Due : 479.40

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		BS2EC	BISLEY 2 DRW FILING CABINET C.CRM	2	EACH	111.0000	09/09/05	222.00	17.50	38.85
2		SKMBFCBRU	SONIX MEDIUM BACK CHAIR RUBY	2	EACH	77.0000	07/09/05	154.00	17.50	26.95
3		SXAAB	SONIX ADJUSTABLE ARMS	1	PAIR	32.0000	07/09/05	32.00	17.50	5.60
			SONIX ADJUSTABLE ARMS SXAAB				07/09/05			



V.A.T. Summary			Sales Order Total (VAT excl)		408.00	
Rate	Taxable Sum	V.A.T. Amount			INVOICE GOODS	408.00
17.50	408.00	71.40	VAT Registration	[REDACTED]	INVOICE V.A.T.	71.40
			Settlement	[REDACTED]	INVOICE TOTAL	479.40
			Discount Terms	[REDACTED]		

**Please
 return
 the slip**
 from final page
 of Invoice with
 your payment
 by

11/10/2005

Invoice



INVOICE NO. [REDACTED]

Invoice To :
Christopher Fraser MP
South West Norfolk

Charge To :
Christopher Fraser MP
South West Norfolk

Banner Business Supplies Ltd



Delivered To :
Christopher Fraser MP
South West Norfolk

Page 1 Of 1 Date 16/10/2005
Acc. No. [REDACTED] 13/09/2005
Order [REDACTED]
C.A.R. [REDACTED]



Sales Order No [REDACTED]

PAYMENT SLIP
Please see reverse
for terms of business
and how to pay

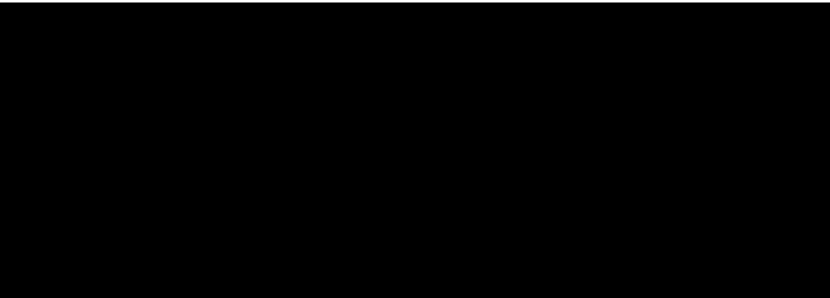
Acc. No. : [REDACTED]

Inv. No. : [REDACTED]

Inv. Date: 16/10/2005

Amt. Due : 143.12

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		PRMISCELLANEOUS	SPECIAL BUSINESS CARD OVERPRINTED WITH CHRISTOPHER FRAZER MP DETAILS PRINTED IN GREEN 5 X BX100 ARTWORK SUPPLIED	5	EACH	24.3600	11/10/05	121.80	17.50	21.32



V.A.T. Summary		
Rate	Taxable Sum	V.A.T. Amount
17.50	121.80	21.32

Sales Order Total (VAT excl.)

121.80

VAT Registration [REDACTED]

Settlement Discount Terms [REDACTED]

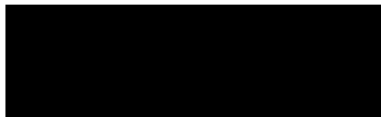
INVOICE GOODS	121.80
INVOICE V.A.T.	21.32
INVOICE TOTAL	143.12

Please return the slip

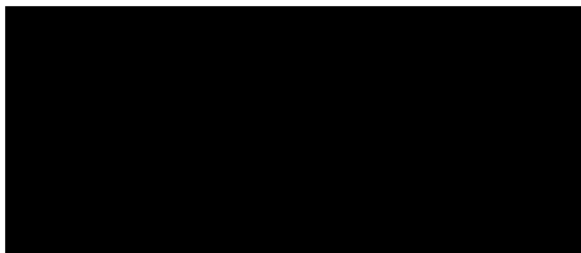
from final page of invoice with your payment by

13/11/2005





P H O T O G R A P H E R

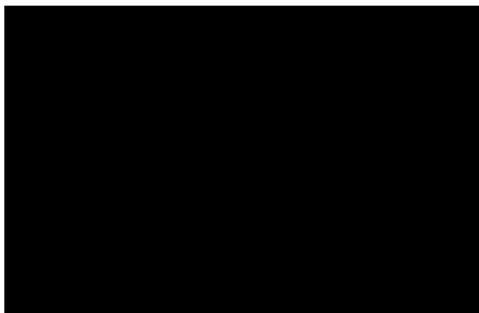


Date 23rd September 2005



To Supplying :

Four 20"x 24" Colour Prints of Mr Christopher Fraser @ £35 each	140.00
Special Delivery Postage and Packing	<u>5.00</u>
Total	<u>£145.00</u>





Member's reimbursement form

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

CHRISTOPHER FRASER

Constituency

SOUTH WEST NORFOLK



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 1 / 12 / 05

to 31 / 12 / 05

Allowance year

05 / 06

	Description of service or goods	Amount
Item 1	<u>LASER PRINTER CARTRIDGES</u>	<u>£ 52 : 88 p</u>
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

£ 52 : 88 p

continued on page 2

Authorisation and declaration

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

Signature

[Redacted Signature]

MP

Date

11/1/06

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	Input subtotals per Cat 5
Claims received		/ /	£ [Redacted]
Signature check		/ /	£ 52.88
Funds check		/ /	£ [Redacted]
Allowable expenditure		/ /	£ [Redacted]
Member Res ID & Costc		/ /	£ [Redacted]
Ext type/Cat 5 & subtotals added to form		/ /	£ [Redacted]
Receipts/ documentation present			pts [Redacted]
Processing			
Input			



Invoice

No Payment Necessary

Invoice To:

Fraser, Christopher

Deliver To:

Fraser, Christopher

Item No.	Description	Quantity	Unit Price	Net
593-10082	1600n 5K Toner Cartridge (Kit)-Dell 1600N Black Toner Cartridge 5,000-Page Capacity (Approximate, at 5% coverage) - Kit	1	45.00	45.00
800-10709	Info - Postal Consumables Delivery-Info - Laser Standard Consumables Delivery	1	0.00	0.00

VAT Summary

VAT Rate	GBP	GBP
%	Total Net £	VAT £
17.5	45.00	7.88

	GBP
Subtotal	45.00
Freight	0.00
VAT £	7.88
Total	52.88



Member's reimbursement form

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

CHRISTOPHER FRASER

Constituency

SOUTH WEST NORFOLK

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 1 1 01 1 06

to 31 1 01 1 06

Allowance year

05 1 06

Description of service or goods

Amount

Item 1

Stationery +

£ : p

Item 2

Office supplies

£ 72 : 25 p

Item 3

[Redacted]

£ : p

Item 4

[Redacted]

£ : p

Item 5

[Redacted]

£ : p

Item 6

[Redacted]

£ : p

Item 7

[Redacted]

£ : p

Item 8

[Redacted]

£ : p

Item 9

[Redacted]

£ : p

Item 10

[Redacted]

£ : p

Total


£ 72 : 25 p

Office use only

Allow or Exp/
A/c code Cat 5

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 6/2/06

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	<input checked="" type="checkbox"/>	<input type="text" value="1"/> <input type="text" value="1"/>	<input type="text" value="£"/>	<input type="text" value=""/>
Signature check	<input checked="" type="checkbox"/>	<input type="text" value="1"/> <input type="text" value="1"/>	<input type="text" value="£72-25"/>	<input type="text" value=""/>
Funds check	<input checked="" type="checkbox"/>	<input type="text" value="1"/> <input type="text" value="1"/>	<input type="text" value="£"/>	<input type="text" value=""/>
Allowable expenditure	<input checked="" type="checkbox"/>	<input type="text" value="1"/> <input type="text" value="1"/>	<input type="text" value="£"/>	<input type="text" value=""/>
Member Res ID & Costc	<input checked="" type="checkbox"/>	<input type="text" value="1"/> <input type="text" value="1"/>	<input type="text" value="£"/>	<input type="text" value=""/>
Ext type/Cat 5 & subtotals added to form	<input checked="" type="checkbox"/>	<input type="text" value="1"/> <input type="text" value="1"/>	<input type="text" value="£72-25"/>	<input type="text" value=""/>
Receipts/ documentation present	<input checked="" type="checkbox"/>	<input type="text" value="1"/> <input type="text" value="1"/>	Comments <div style="border: 1px solid black; height: 100px;"></div>	
Processing Input	<input type="checkbox"/>	<input type="text" value="1"/> <input type="text" value="1"/>		

Financial Processing }

Transaction No.

Registration No.

Validation Claim Summary Sheet

Please write or print clearly & attach to claim

Supplier ID

Text

Invoice No.

INVOICE DATE

Account code / Allowance

Members cost centre (Cat1)

Financial Year/PIRO (Cat2)

Expenditure type (Cat5) :



TOTAL

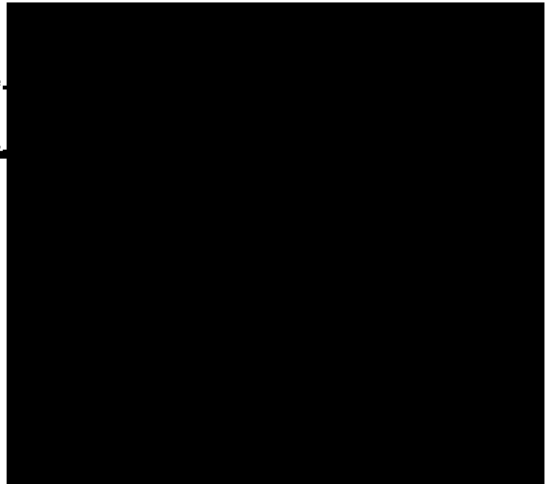
Comments:

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

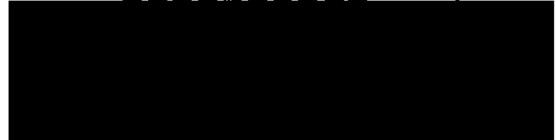
Posted by (initials & date)

..... 27 JUL 2005

.....

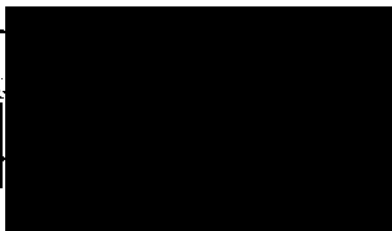


07.07.05



04~~05~~ / 05_06

£.....
£ 254.98
£.....
£.....
£.....
£.....
£.....
£.....
£.....
£ 254.98





Direct payment of suppliers

When to use this form

- Use this form to ask us to pay your suppliers for goods and services incurred on your Parliamentary duties.

About filling in this form

- For details of costs you can claim for, see *Green Book* section 5.13.1.
- If you have any doubt about whether you can claim for a cost, please call 020 7219 1340.

Your details

Name in CAPITAL LETTERS

CHRISTOPHER FRASSE

Constituency

SOUTH LAKES NORFOLK

Claim details

Please ensure

- your claim totals more than £100 – this will enable us to process your claim more promptly
- any claims for petty cash do not exceed £250 per month
- you attach all supplier invoices.

You must specify

- the Incidental Expenses Provision for costs that include office and surgery accommodation, equipment and supplies, communication and travel.

You can specify

- the Incidental Expenses Provision or the Staffing Allowance for costs that include work commissioned or bought in services.

Date of claim

7 17 05

Allowance year

05 1 06

Incidental Expenses Provision claims

	Suppliers	Amount
Item 1	LANGFORD PENSILES	£ 254 : 98 p
Item 2		£ : p
Item 3		£ : p
Item 4		£ : p
Item 5		£ : p
Total		£ : p

Claim details continued

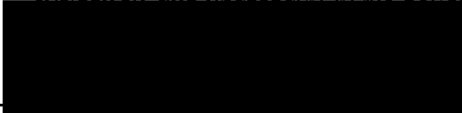
Staffing Allowance claims

	Suppliers	Amount
Item 6	_____	£ : p
Item 7	_____	£ : p
Item 8	_____	£ : p
Item 9	_____	£ : p
	Total	£ : p

Office use only		
Allow or A/c code	Supplier ID	Exp/ Cat 5

Authorisation and declaration

I confirm that the payments requested are in respect of costs incurred wholly, exclusively and necessarily in the performance of my Parliamentary duties.

Signature  MP

Date _____ / _____ / _____

Data protection

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Send your completed form to

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Office use only			
Validation	Initials	Date	
Claims received		/ /	
Signature check		/ /	
Funds check		/ /	
Allowable expenditure		/ /	
Validation	Initials	Date	
Member ID added to form		/ /	
Payment codes added to form		/ /	
Receipts/ documentation present		/ /	
Processing Input		/ /	

Please use margin for comments

LANGFORD PRINTERS

Invoice

Christopher Fraser MP

INVOICE NUMBER

DATE / TAX POINT

07/07/2005

ACCOUNT NUMBER

DETAILS

NET PRICE

VAT

2500 x A4 Green House of Commons Letterheads

70.00

12.25

1250 x A5 Green House of Commons Letterheads

45.00

7.88

1000 x A6 Green House of Commons Comp Slips

42.00

7.35

3 x New Plate and Artwork Charge

60.00

10.50

DELIVERY ADDRESS:

TOTAL NET

217.00

TOTAL VAT

37.98

INVOICE TOTAL £

254.98