



DENIED

①

Financial Processing }

Transaction No.

Registration No.



Validation Claim Summary Sheet

Please write or print clearly & attach to claim

C2

Supplier ID

Text (40 characters max)



Invoice date (supplier invoice date)

Invoice No.

Account code / Allowance

Members cost centre (Cat1)

Financial Year/PIRO (Cat2)

Expenditure type (Cat5) :

11/3/05



24=05



TOTAL

£.....
 £ 184.02 ✓
 £.....
 £.....
 £.....
 £.....
 £.....
 £.....
 £.....
 £ 184.02

Comments:

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

Posted by (initials & date)



23.3.5

24 Nov.

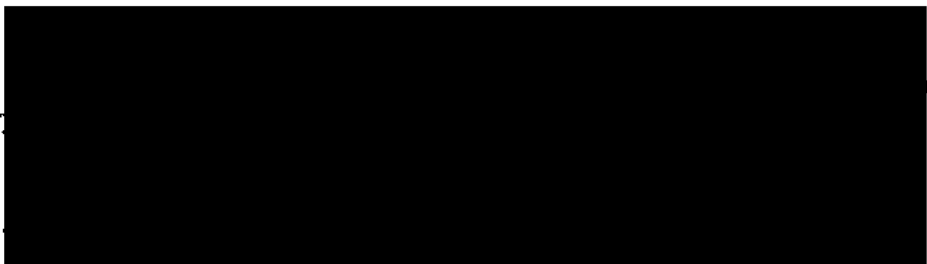
C2. DIRECT PAYMENT

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

Invoice	Supplier's name	Amount £	Transaction code <i>For Fees office use only</i>
1	Banner		
2			
3			
4			
5			
6			
7			
8			
9			
10			
		£ 184.02	

16 MAR 2005

I certify that



occurred on

SIGNED.

..MP

PRINTED NAME..... **CLARE SHORT M.P.**

DATE..... CONSTITUENCY..... *Bham Ladywood*

1³ MAR 2005

Invoice

* INVOICE NO. [REDACTED]

Invoice To :

Clare Short MP
[REDACTED]

Charge To :

Clare Short MP
[REDACTED]



Banner Business Supplies Ltd

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

Page 1 Of 1 Date 11/03/2005

Acc.No. [REDACTED] Order Date 10/03/2005

Order [REDACTED]

C.A.R.

Acc. No. : [REDACTED]

Inv. No. : [REDACTED]

Inv. Date: 11/03/2005

Amt. Due : 184.02

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		0982805	HP LJET 4100 MAX CAP TNR No.61X BK HP LASERJET 4100 MAX CAPACITY No.61X BLACK TONER C8061X	1	CRTRDG	96.1000	10/03/05	96.10	17.50	16.82
2		0984086	HP C5011DE No14 PRINT CARTRIDGE BK*	3	EACH	10.0000	10/03/05	30.00	17.50	5.25
3		0984087	HP C5010DE No14 PRINT CART COLOUR	2	EACH	13.2700	10/03/05	26.54	17.50	4.64
4		9310009	BANNER E/TEAR ADHESIVE TAPE 24x66m	1	ROLL	0.1700	10/03/05	0.17	17.50	0.03
5		9373037	BANNER LIQUID INK PEN 0.3mm BLACK	1	BOX10	3.8000	10/03/05	3.80	17.50	0.67

V.A.T. Summary

Rate	Taxable Sum	V.A.T. Amount
17.50	156.61	27.41

Sales Order Total (VAT excl)

156.61

INVOICE GOODS	156.61
INVOICE V.A.T.	27.41
INVOICE TOTAL	184.02

Please return the slip

from final page
of invoice with
your payment
by

08/04/2005

C2. DIRECT PAYMENT

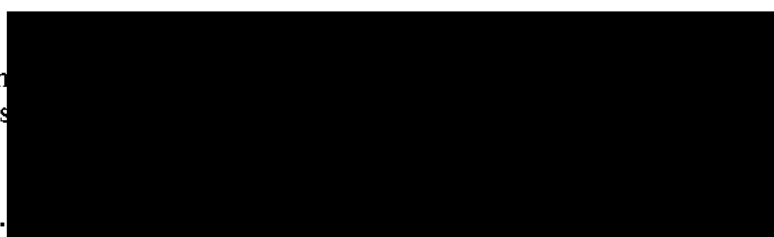
08 MAR 2005

1

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

Invoice	Supplier's name	Amount £	Transaction code <i>For Fees office use only</i>
1	Barnes	232.32	
2			
3			
4			
5			
6			
7			
8			
9			
10			
		£ 232.32	

I certify that the expenses incurred on parliamentary business



SIGNED.....MP

PRINTED NAME CLAYE SHORT

DATE 7/3/05 CONSTITUENCY Bham Ladywood

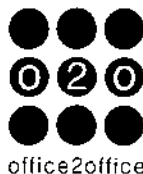
Invoice

 * INVOICE NO. [REDACTED] *

Invoice To :

Clare Short MP

[REDACTED]



PAYMENT SLIP

Please see reverse
 for terms of business
 and how to pay

Acc. No. : [REDACTED]

Inv. No. : [REDACTED]

Inv. Date: 01/03/2005

Amt. Due : 232.32

Page 1 Of 1 Date 01/03/2005
 Acc.No. [REDACTED] Order Date 25/02/2005
 Order [REDACTED]
 C.A.R.

[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
1		5000305	BLACK N RED A4 ELAST PP RULED BOOK	3	EACH	2.6400	25/02/05	7.92	17.50	1.39
2		9420098	BANNER A-Z PORTFOLIO EXPANDING FILE	1	EACH	10.0700	25/02/05	10.07	17.50	1.76
3		9428001	BANNER MULTI PURPOSE EXPANDING FILE	1	FILE	4.5200	25/02/05	4.52	17.50	0.79
4		0400545	SNOPAKE FILECASE A4 31 PART BLACK	1	EACH	16.2800	25/02/05	16.28	17.50	2.85
5		0983328	EPSON STYLUS COLOR 480 IJET CART BK	2	PACK2	19.3200	25/02/05	38.64	17.50	6.76
6		9631018	BANNER STICKY STUFF REMOVER 250ml	2	EACH	4.1100	25/02/05	8.22	17.50	1.44
7		9631015	BANNER PC CLEANING KIT	2	KIT	6.9800	25/02/05	13.96	17.50	2.44
8		0080111	POST-IT Z NOTES 76x76mm YELLOW	2	PACK12	8.1100	25/02/05	16.22	17.50	2.84
9		0061039	AD CLASS 35mm TRANSPARENCY POCKET	2	PACK10	2.6100	25/02/05	5.22	17.50	0.91
10		1010029	XEROX A4 PLAIN COLOUR TRANSP FILM	1	BOX100	23.7800	25/02/05	23.78	17.50	4.16
11		9410401	BANNER A4 MW FLUSH FLDR 105mu CLEAR	1	PACK25	4.1300	25/02/05	4.13	17.50	0.72
12		9410402	BANNER A4 MW FLUSH FLDR 105mu AS	1	PACK25	4.8000	25/02/05	4.80	17.50	0.84
13		9373037	BANNER LIQUID INK PEN 0.3mm BLACK	1	BOX10	3.8000	25/02/05	3.80	17.50	0.67
14		0500504	PENTEL HYBRID GEL GRIP PEN PAST AS	1	WLT6	4.3400	25/02/05	4.34	17.50	0.76
15		0070107	AVERY LSR LABEL 99.1x38.1mm 14/S WH	2	PCK100	17.9100	25/02/05	35.82	17.50	6.27

V.A.T. Summary

Rate	Taxable Sum	V.A.T. Amount
17.50	197.72	34.60

Sales Order Total (VAT excl) 197.72

INVOICE GOODS	197.72
INVOICE V.A.T.	34.60
INVOICE TOTAL	232.32

**Please
 return
 the slip**

from final page
 of invoice with
 your payment
 by

29/03/2005

C.4 DIRECT PAYMENT

For ad-hoc payments of salary and taxable travel expenses to secretaries/research assistants

I hereby authorise the Fees Office to pay the undermentioned person the following sums from my Office Costs Allowance.

Name:

Address:

NI Number:

Bank Name:

Address:

Sort Code:

Account Number:

Account Name:

To avoid delay in payment please provide a breakdown of the payments below

Salary Payments	£
Rail/Air/Taxi travel between home and normal place of work	£ 44.80
Car travel between home and normal place of work	£
Season ticket travel between home and normal place of work	£
Total	<u>£44.80</u>

I certify that
Parliamentary

incurred on

Signed

(MEMBER)

Printed Name

..... CLARE SUBIT
.....

Constituency

..... BIRMINGHAM LAB 2000
.....

Date

..... 14.12.04
.....

Thistle [REDACTED]



Accommodation	£32.50
Gratuity	£0.00

TOTAL	£32.50

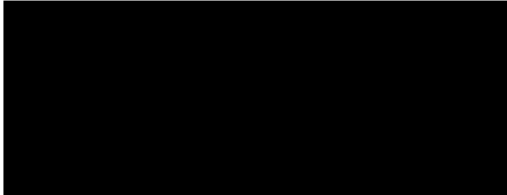




THISTLE HOTEL



GUEST BILL



Room No. :
 Arrival : 03.12.04
 Departure : 04.12.04
 Cashier :
 Page : 1

INVOICE NO. 04.12.04

Date	Description	Debit	Credit
03.12.	Accommodation	32.50	
			32.50
	Balance	£0.00	

VAT Breakdown

Net at 17.5%	£	27.66
Net at 3.5%	£	0.00
Net at 0.0%	£	0.00
Net at. Exempt	£	0.00
Total Amount Net	£	27.66
VAT 17.5%	£	4.84
VAT 3.5%	£	0.00
TOTAL BILL STERLING		32.50
TOTAL BILL EURO		52.91

TAXI RECEIPT

Date

[REDACTED]

Driver No:

From

To

[REDACTED]

Received £

6-30

Signed

[REDACTED]

With Thanks

LICENSED TAXI RECEIPT

Date

Price

6

Signature

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 £	Transaction code <i>For Fees office use only</i>
1	BANNER	15.91	PAID
2			
3	<div style="border: 1px solid black; padding: 5px; width: fit-content; margin: auto;"> <p style="text-align: center;">Received</p> <p style="text-align: center;">16 NOV 2004</p> <p style="text-align: center;">Received at Finance and Administration Department</p> </div>		
4			
5			
6			
7			
8			
9			
10			
		£ 15.91	✓

I certify that the [redacted] was primarily incurred on

SIGNED..... [redacted]MP

PRINTED NAME..... CLARE SHORT.....

DATE..... 17/4/04..... CONSTITUENCY..... Bham Ladywood.....

Statement



Clare Short MP

Customer Account : [REDACTED]
Statement Date : 09/11/2004

Page : 1

Date	Transaction Type	Document	Customer Reference	Status	Transaction Value	Outstanding Value
29/10/2004	INV	[REDACTED]	[REDACTED]	[REDACTED]	15.91	15.91


The items listed are outstanding on your account.
Payment is awaited, also if appropriate your instructions for use of any credit items.
Please ignore items under query or paid within the last 10 days.

Type:	Status:
INV Invoice	P Partly paid
CRN Credit Note	D Invoice under query
CASH Payment	
CADJ Credit Adjustment	
DADJ Debit Adjustment	

Total : 15.91

C2. DIRECT PAYMENT

I enclose¹..... certified invoices to allow direct payments to be made from my
Incidental Expenses Provision

Invoice	Supplier's name	Amount £	<i>Transaction code</i> <i>For Fees office use only</i>
1	Banner	15.91	
2			
3			
4			
5			
6			
7			05 NOV 2004
8			
9			
10			
		£ 15.91	

I certify that the
parliamentary business incurred on

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

PRINTED NAME.....CHARLES HOET.....

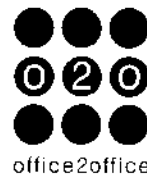
DATE.....4/11/04.....CONSTITUENCY.....Bham Ladywood.....

Invoice

 * INVOICE NO. [REDACTED] *

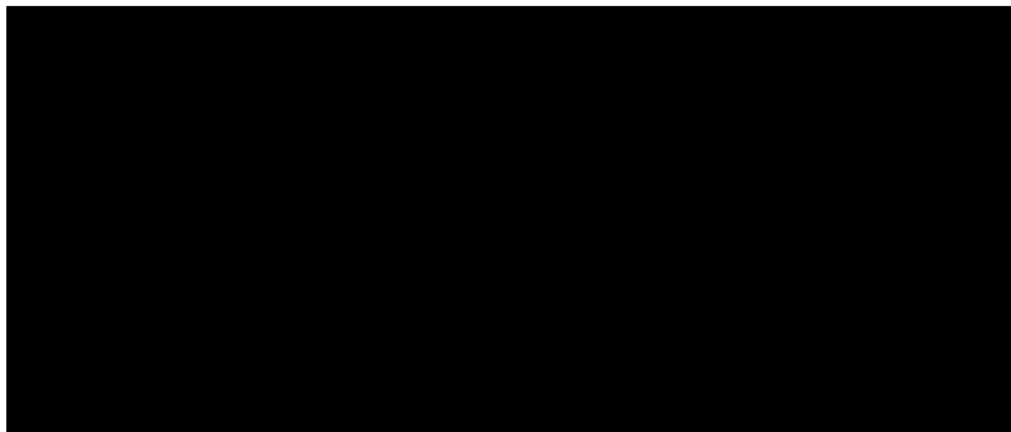
Invoice To :

Claire Short MP



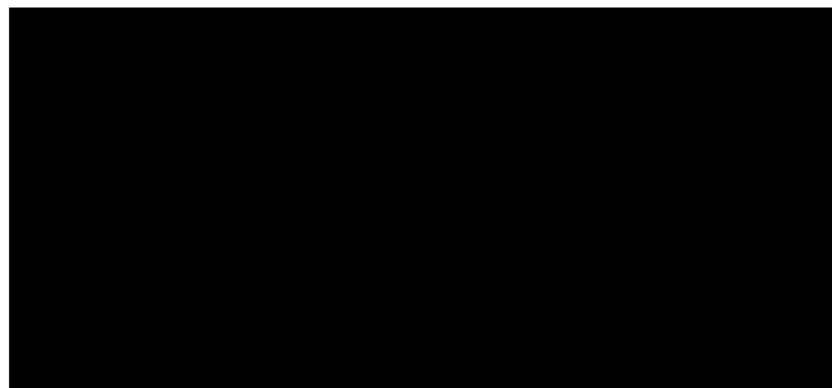
PAYMENT SLIP
 Please see reverse
 for terms of business
 and how to pay

Page 1 of 1 Date 29/10/2004
 Acc.No. [REDACTED] Order Date 28/10/2004
 Order [REDACTED]
 C.A.R. [REDACTED]



Acc. No. : [REDACTED]
 Inv. No. : [REDACTED]
 Inv. Date: 29/10/2004
 Amt. Due : 15.91

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		9095013	BANNER BRILL STICKY NOTES 125x75 AS	1	PACK12	2.4100	28/10/04	2.41	17.50	0.42
2		9090009	BANNER A4 FT/M REFILL PAD 4H 80S	1	PACK5	7.3300	28/10/04	7.33	17.50	1.28
3		9373037	BANNER LIQUID INK PEN 0.3mm BLACK	1	BOX10	3.8000	28/10/04	3.80	17.50	0.67



V.A.T. Summary

Rate	Taxable Sum	V.A.T. Amount
17.50	13.54	2.37

Sales Order Total (VAT excl)

13.54

INVOICE GOODS	13.54
INVOICE V.A.T.	2.37
INVOICE TOTAL	15.91

**Please
 return
 the slip**

from final page
 of invoice with
 your payment
 by

26/11/2004

C2. DIRECT PAYMENT

RECEIVED

I enclose 1 certified invoices to allow direct payment 10 NOV 2004 from my Incidental Expenses Provision

Invoice	Supplier's name	Amount £	<i>Transaction code For Fees office use only</i>
1	HW Fisher	705.00	
2			
3			
4			
5			
6			
7			
8			
9			
10			
		£	

I certify that [redacted] necessarily incurred on parliamentary [redacted]

SIGNED.. [redacted] ..MP

PRINTED NAME..... CLARE SHORT MP

DATE..... 4/11/04..... CONSTITUENCY..... Bham Ladywood



CREATIVITY



ENTHUSIASM



ENERGY



VISION

INVOICE NUMBER



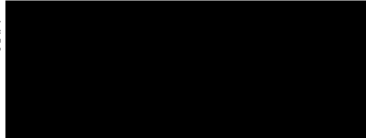
OUR REFERENCE

DATE

29 October 2004

H.W.FISHER & COMPANY
CHARTERED ACCOUNTANTS

Rt Hon Clare Short MP



REQUEST FOR PAYMENT
THIS IS NOT A VAT INVOICE

£

Work carried out in the period to date in respect of our engagement with you to provide ongoing services including:-

Preparation and submission of your Tax Return for the year ended 5 April 2004.

For a fee of

600.00

Plus VAT @ 17.5%



105.00

705.00

WITH COMPLIMENTS

C2. DIRECT PAYMENT

I enclose¹..... certified invoices to allow direct payments to be made from my Incidental Expenses Provision

Invoice	Supplier's name	Amount £	<i>Transaction code For Fees office use only</i>
1	BANNER	20.33	
2			
3			
4			
5			
6			
7			
8			
9			
10			
		£ 20.33	

I certify that the expenses incurred on parliamentary business were incurred on

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

PRINTED NAME..... CLARE SHORT.....

DATE..... 21/10/04..... CONSTITUENCY..... Bham Ladywood.....

Invoice

 * INVOICE NO
 * *****

Invoice To :

Claire Short MP



PAYMENT SLIP

Please see reverse
 for terms of business
 and how to pay

Page 1 Of 1 Date 19/10/2004
 Acc.No. Order Date 15/10/2004
 Order
 C.A.R.

Acc. No. :
 Inv. No. :
 Inv. Date: 19/10/2004
 Amt. Due : 20.33

21 OCT 2004

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		0630900	PILOT G TEC ULTRAFINE PEN 0.2mm BK	1	BOX12	13.8400	15/10/04	13.84	17.50	2.42
2		0500379	STAEDTLER 334-9 TRIPLUS FINELINR BK	1	BOX10	3.4600	15/10/04	3.46	17.50	0.61

V.A.T. Summary

Rate	Taxable Sum	V.A.T. Amount
17.50	17.30	3.03

Sales Order Total (VAT excl)

17.30

INVOICE GOODS	17.30
INVOICE V.A.T.	3.03
INVOICE TOTAL	20.33

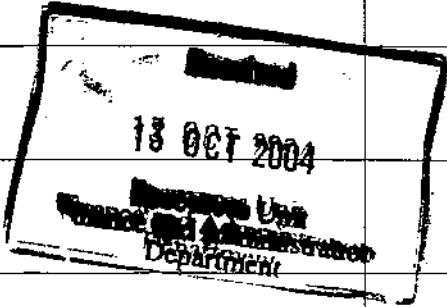
Please
 return
 the slip

from final page
 of invoice with
 your payment
 by

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 £	<i>Transaction code For Fees office use only</i>
1	Banner	£ 241.77	
2			
3			
4			
5			
6			
7			
8			
9			
10			
		£ 241.77	



I certify that the [redacted] were primarily incurred on parliamentary business

SIGNED..... [redacted]MP

PRINTED NAME CLARE SHORI

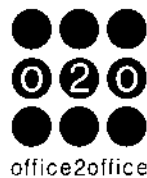
DATE 12/10/04 CONSTITUENCY Bham Ladywood

Invoice

 * INVOICE NO
 * *****

Invoice To :

Claire Short MP



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

Page 1 Of 1 Date 06/10/2004

Acc.No. Order Date 01/10/2004

Order

C.A.R.

Acc. No. :

Inv. No. :

Inv. Date: 06/10/2004

Amt. Due : 241.77

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		HC19-116GA	PAPER - A4 GREEN CREST WITH ADDRESS	6	BOX250	8.7000	02/10/04	52.20	17.50	9.14
2		HC23-149WS	ENV DL WIN 1ST CLASS PEEL AND SEAL	6	BOX250	9.8800	02/10/04	59.28	17.50	10.37
3		0982804	HP LJET 4100 TONER CART NO.61A BK HP LASERJET 4100 NO.61A BLACK TONER CARTRIDGE C8061A	1	CRTRDJ	94.2800	02/10/04 02/10/04	94.28	17.50	16.50



11 OCT 2004

V.A.T. Summary

Rate	Taxable Sum	V.A.T. Amount
17.50	205.76	36.01

Sales Order Total (VAT excl) 205.76

INVOICE GOODS	205.76
INVOICE V.A.T.	36.01
INVOICE TOTAL	241.77

**Please
 return
 the slip**

from final page
 of invoice with
 your payment
 by

C2. DIRECT PAYMENT

RECEIVED

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

23 SEP 2004

Invoice	Supplier's name	Amount £	DEA <i>Transaction code</i> <i>For Fees office use only</i>
1	Banner	132.87	
2			
3			
4			
5			
6			
7			
8			
9			
10			
		£ 132.87	

I certify that the incurred on
parliamentary bu

SIGNED.....MP

PRINTED NAME..... CLARE STORT

DATE..... 22/9/04 CONSTITUENCY..... Bham Ladywood

Invoice

* INVOICE NO. [REDACTED]

Invoice To :

Claire Short MP
[REDACTED]



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

Page 1 of 1 Date 15/09/2004

Acc.No. [REDACTED] Order Date 14/09/2004

Order

C.A.R.



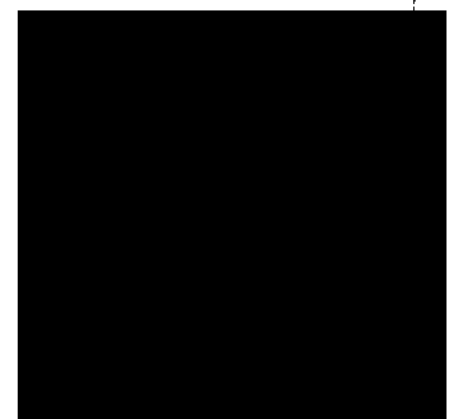
Acc. No. : [REDACTED]

Inv. No. : [REDACTED]

Inv. Date: 15/09/2004

Amt. Due : 132.87

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		0984086	HP C5011DE No14 PRINT CARTRIDGE BK	6	EACH	10.0000	14/09/04	60.00	17.50	10.50
2		0984087	HP C5010DE No14 PRINT CART COLOUR	4	EACH	13.2700	14/09/04	53.08	17.50	9.29



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	113.08	19.79

Sales Order Total (VAT excl)

113.08

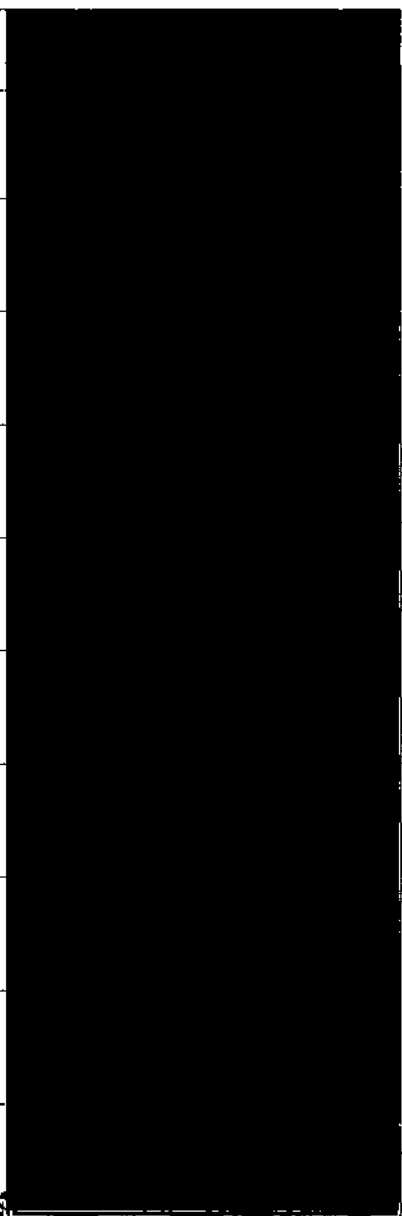
INVOICE GOODS	113.08
INVOICE V.A.T.	19.79
INVOICE TOTAL	132.87

C2. DIRECT PAYMENT

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

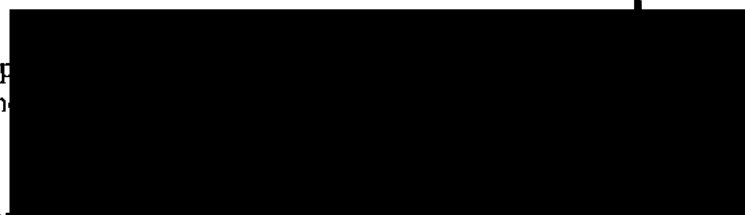
Invoice	Supplier's name	Amount £
1	Banner	6.50
2		
3		
4		
5		
6		
7		
8		
9		
10		

£ 6.50



Received
 20 SEP 2004
 Resources Unit
 Administration

I certify that the expenses were necessarily incurred on parliamentary business



SIGNED.....MP

PRINTED NAME..... CLARE SHORT

DATE..... 16/9/04..... CONSTITUENCY..... Blenheim

Invoice

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

Claire Short MP

[REDACTED]



[REDACTED]

[REDACTED]

Page 1 Of 1 Date 14/09/2004
 Acc.No [REDACTED] Order Date 10/09/2004
 Order [REDACTED]
 C.A.R. [REDACTED]

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

Acc. No. : [REDACTED]
 Inv. No. : [REDACTED]
 Inv. Date: 14/09/2004
 Amt. Due : 6.50

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		9000023	BANNER ENV 110x220 PLN 80g S/S WH	1	BX1000	5.5300	11/09/04	5.53	17.50	0.97

[REDACTED]

V.A.T. Summary

Rate	Taxable Sum	V.A.T. Amount
17.50	5.53	0.97

Sales Order Total (VAT excl) 5.53

INVOICE GOODS	5.53
INVOICE V.A.T.	0.97
INVOICE TOTAL	6.50

[REDACTED]

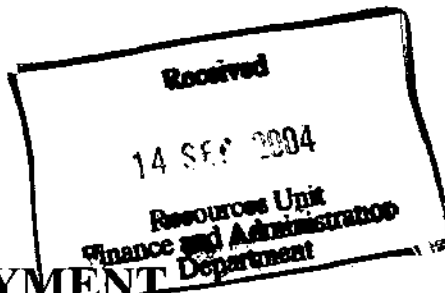
**Please
 return
 the slip**

from final page
 of invoice with
 your payment
 by



12/10/2004

[REDACTED]



C.4 DIRECT PAYMENT

For ad-hoc payments of salary and certain expenses to Members' employees and volunteers

I hereby authorise the Fees Office to pay the undermentioned person the following sums from my Staffing Allowance.

Name: [Redacted]

Address: [Redacted]

Only complete these details if this is the first time of payment or if your details have changed.

NI Number: Date of Birth: -

Bank Name:

Address:

Sort Code: Account Number:

Account Name:

To avoid delay in payment please provide a breakdown of the payments below

Salary Payments	£	[Redacted]
Rail/Air/Taxi travel between home and normal place of work	£	[Redacted]
Car travel between home and normal place of work	£	[Redacted]
Season ticket travel between home and normal place of work	£	[Redacted]
Non repayable season tickets	£	[Redacted]
Child Care Costs	£	[Redacted]
Private Healthcare	£	[Redacted]
Meals & Subsistence	£	50
Total		<u>50</u>

I certify that the [Redacted] Parliamentary duties.

Signed (Member [Redacted] Date 10/9/04

Printed Name CLARE SHORT

Constituency Birmingham Ladywood

Data Protection notice. We are required to keep this information under the rules governing payments made to Members of Parliament and their staff. This information will only be seen by staff who process salaries and claims or staff from the National Audit Office. Personal information will only be kept as long as it is accurate. If you have any concerns about the handling of such information, please contact this Departments Data Protection Officer on 020 7219 5973, who acts on behalf of the Data Controller, the Clerk of the House.

03 SEP 2004

C.4 DIRECT PAYMENT

For ad-hoc payments of salary and certain expenses to Members' employees and volunteers

I hereby authorise the Fees Office to pay the undermentioned person the following sums from my Staffing Allowance.

Name: [Redacted]

Address:

Only complete these details if this is the first time of payment or if your details have changed.

NI Number:

Date of Birth: -

Bank Name: ... [Redacted]

Address:

Sort Code:

... Account Number:

Account Name: . [Redacted]

To avoid delay in payment please provide a breakdown of the payments below

Salary Payments	£	[Redacted]
Rail/Air/Taxi travel between home and normal place of work	£	[Redacted]
Car travel between home and normal place of work	£	[Redacted]
Season ticket travel between home and normal place of work	£	[Redacted]
Non repayable season tickets	£	[Redacted]
Child Care Costs	£	[Redacted]
Private Healthcare	£	[Redacted]
Meals & Subsistence	£ 130	[Redacted]

Total [Redacted]

I certify that the [Redacted] [Redacted] nentary duties.

Signed (Member [Redacted] Date 2/9/04

Printed Name CLARE SHORT

Constituency Birmingham, Ladywood

Data Protection notice. We are required to keep this information under the rules governing payments made to Members of Parliament and their staff. This information will only be seen by staff who process salaries and claims or staff from the National Audit Office. Personal information will only be kept as long as it is accurate. If you have any concerns about the handling of such information, please contact this Departments Data Protection Officer on 020 7219 5973, who acts on behalf of the Data Controller, the Clerk of the House.

[Redacted]

More connections.
More possibilities.

Your account and bill number

CLARE SHORT MP

Date

27 July 2004

If you have a query
please see reverse for
our contact details.

Together Option 1

Bill for

Total now due

£ 34.87

*Please make sure we receive the total now due by
7 August 2006*

We've cut the price of BT Together Option 1

Good news! From 1 July 2004, we
reduced the monthly fee for
BT Together Option 1 to just £11.50.
And you can now make UK calls
for just 5.5p for up to an hour per call
at evenings and weekends.
Exclusions apply.
See terms & conditions in BT Update

Get your next bill online

Free online billing gives you:

- 24/7 access to your account
- free online directory enquiries
- cost of calls since last bill

Sign up for your online bill at
www.bt.com/btonline/billing

0115000

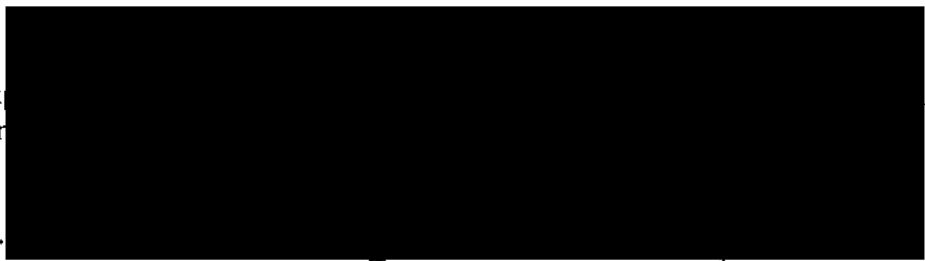
C2. DIRECT PAYMENT

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

Invoice	Supplier's name	Amount £	<i>Transaction code For Fees office use only</i>
1	BANNER	70.09	
2			
3			
4			
5			
6			
7			
8			
9			
10			
		£ 70.09	

I certify that the expenditure is for the purposes of my parliamentary business

on



SIGNED.....

PRINTED NAME CLARE SHORT

DATE 9/8/04 CONSTITUENCY Bham Ladywood

Invoice

 * INVOICE NO [REDACTED]

Invoice To :

Claire Short MP
 [REDACTED]



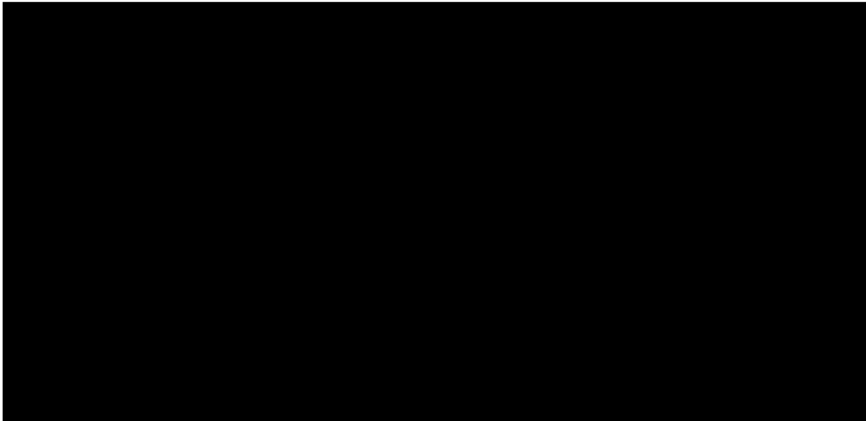
PAYMENT SLIP
 Please see reverse
 for terms of business
 and how to pay

Page 1 Of 1 Date 05/08/2004
 Acc.No [REDACTED] Order Date 04/08/2004
 Order [REDACTED]
 C.A.R.



Acc. No. : [REDACTED]
 Inv. No. : [REDACTED]
 Inv. Date: 05/08/2004
 Amt. Due : 70.09

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		0984086	HP C5011DE No14 PRINT CARTRIDGE BK	4	EACH	10.0000	04/08/04	40.00	17.50	7.00
2		0500350	PILOT G1 METALLIC INK R/BALL PEN AS	2	WLLT5	3.2100	04/08/04	6.42	17.50	1.12
3		0570208	RAPESCO SPINNA FUL' STRIP STAPLER	1	EACH	7.5300	04/08/04	7.53	17.50	1.32
4		BETSLIPS	HOC BETSLIPS SCRIBBLING PAD	2	PK500	2.8500	04/08/04	5.70	17.50	1.00



V.A.T. Summary

Rate	Taxable Sum	V.A.T. Amount
17.50	59.65	10.44

Sales Order Total (VAT excl)

59.65

INVOICE GOODS	59.65
INVOICE V.A.T.	10.44
INVOICE TOTAL	70.09

**Please
 return
 the slip**

from final page
 of invoice with
 your payment
 by

02/09/2004

C.4 DIRECT PAYMENT

DFA

For ad-hoc payments of salary and certain expenses to Members' employees and volunteers

I hereby authorise the Fees Office to pay the undermentioned person the following sum from my Staffing Allowance.

Name: [Redacted]

Address: [Redacted]

Only complete these details if this is the first time of payment or if your details have changed.

NI Number: Date of Birth: -

Bank Name:

Address:

Sort Code: Account Number:

Account Name:

Stamp: Sent to DFA [Redacted] CS AUG 2004

To avoid delay in payment please provide a breakdown of the payments below

Salary Payments	£	(111)
Rail/Air/Taxi travel between home and normal place of work	£	(273/4/5)
Car travel between home and normal place of work	£	(272)
Season ticket travel between home and normal place of work	£	(260)
Non repayable season tickets	£	(260)
Child Care Costs	£	(140)
Private Healthcare	£	(560)
Meals & Subsistence [Redacted]	£ 210	(255)

Total [Redacted]

I certify that these expenses are for the purpose of my parliamentary duties.

Signed (Member).. [Redacted]

Date 4/8/04

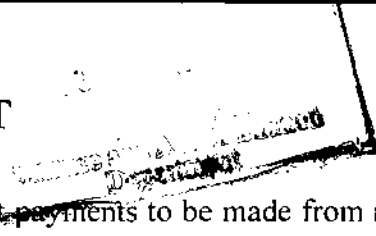
Printed Name CLARE SHORT MP

Constituency Bham Ladywood

Data Protection notice. We are required to keep this information under the rules governing payments made to Members of Parliament and their staff. This information will only be seen by staff who process salaries and claims or staff from the National Audit Office. Personal information will only be kept as long as it is accurate. If you have any concerns about the handling of such information, please contact this Departments Data Protection Officer on 020 7219 5973, who acts on behalf of the Data Controller, the Clerk of the House.

[Redacted]

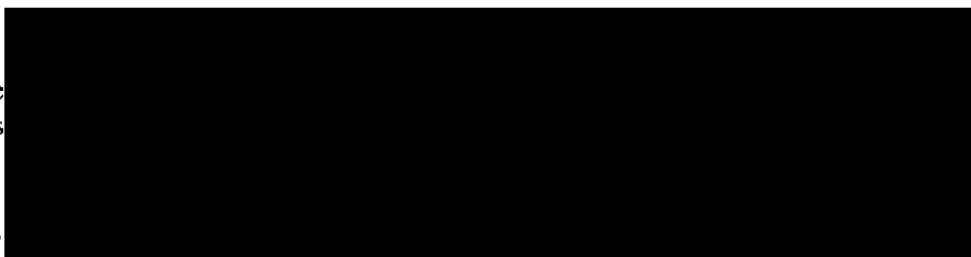
C2. DIRECT PAYMENT



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

Invoice	Supplier's name	Amount £	<i>Transaction code For Fees office use only</i>
1	DEMON	210	
2			
3			
4			
5			
6			
7			
8			
9			
10			
		£ 210	

I certify that the e
parliamentary bus



SIGNED.....

PRINTED NAME..... CLARE SHORI

DATE..... 17/6 CONSTITUENCY..... Bham Ladywood

Statement

Ms Clare Short

Date: 14th June 2004

Page: 1 of 1

Invoice date	Invoice number	Debit	Credit	Balance
20th November		210.00		210.00
				Balance £
				210.00

IMPORTANT NOTICE

All services purchased from Demon Internet are due for payment in advance. Please make cheques payable to Demon Internet quoting this invoice number on the reverse of the cheque. Any queries relating to this invoice must be notified to us within 14 days of receipt.

If you wish to terminate your agreement, please allow at least 30 days before the date you wish the service to end. This applies only where there are no other existing service conditions. Termination notice must be in writing.

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 £	<i>Transaction code For Fees office use only</i>
1	COMPUTACENTER	419.53	
2			
3			
4			
5			
6			
7			
8			
9			
10			
		£419.53	

I certify that the [redacted] incurred on [redacted] parliamentary business

SIGNED..... [redacted]MP

PRINTED NAME..... CLARE SHORT MP

DATE..... 1/7/04 CONSTITUENCY..... Bham Ladywood

Computacenter

Clare Short MP

IN THE EVENT OF ANY QUERY PLEASE CONTACT:-
TEL:-
FAX:-

PROD CODE	DESCRIPTION	QTY	PRICE	DISCOUNT	VALUE
	HP OfficeJet7130 PhotoQ All in One	1	280.04	.00	280.04
	Serial Number Asset Number			Maintenance label no.	
	Cable USB-USB Serial A-B 2M	1	2.00	.00	2.00
Services	House os Commons asseting	1			5.00
Services	OVERNIGHT	1			.00
Services	Maintenance Labelling Required	1			.00
Services	Customer Engineering Required	1			70.00

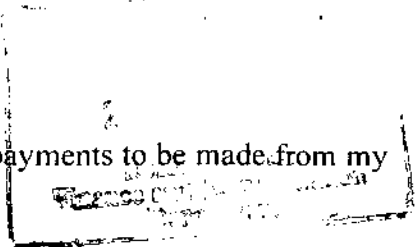
NET GOODS 357.04

TOTAL VAT 17.50% 62.49

TOTAL PAYABLE GBP 419.53

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 £	<i>Transaction code For Fees office use only</i>
1	Banner	25.74	
2			
3			
4			
5			
6			
7			
8			
9			
10			
		£ 25.74	

I certify that the above expenses were incurred on
 parliame

SIGNE MP

PRINTED NAME..... C. W. P. O'NEILL

DATE..... 28/6/04 CONSTITUENCY..... Bham Ladywood

Invoice

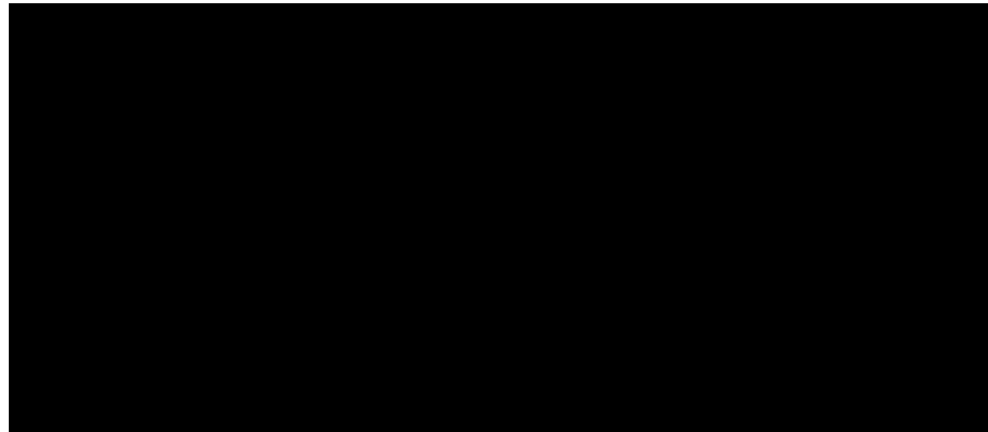
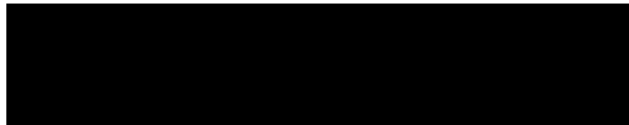
 * INVOICE NO. [REDACTED]

Invoice To :

Claire Short MP



office2office

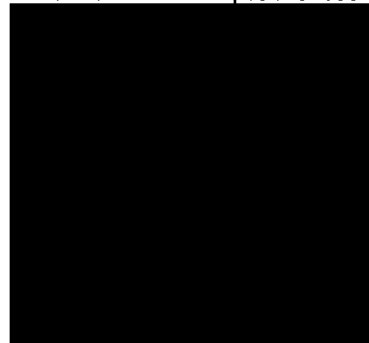


Page 1 Of 1 Date 23/06/2004
 Acc.No. [REDACTED] Order Date 22/06/2004
 Order [REDACTED]
 C.A.R.

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

Acc. No. : [REDACTED]
 Inv. No. : [REDACTED]
 Inv. Date: 23/06/2004
 Amt. Due : 25.74

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		0984086	HP C5011DE No14 PRINT CARTRIDGE BK	2	EACH	10.0000	22/06/04	20.00	17.50	3.50
2		0470006	SUPACLIP 40 SEE THROUGH DISP+CLIPS	1	PACK	1.9100	22/06/04	1.91	17.50	0.33



V.A.T. Summary

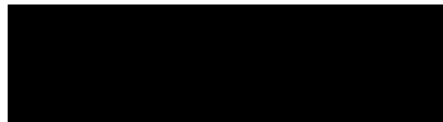
Rate	Taxable Sum	V.A.T. Amount
17.50	21.91	3.83

Sales Order Total (VAT excl)

21.91	INVOICE GOODS	21.91
3.83	INVOICE V.A.T.	3.83
25.74	INVOICE TOTAL	25.74

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

21/07/2004



C.4 DIRECT PAYMENT

For ad-hoc payments of salary and certain expenses to Members' employees and volunteers

I hereby authorise the Fees Office to pay the undermentioned person the following sums from my Staffing Allowance.

Name: [Redacted]
Address: [Redacted]

Only complete these details if this is the first time of payment or if your details have changed.

NI Number: Date of Birth: -

Bank Name:

Address:

Sort Code: Account Number:

Account Name:

To avoid delay in payment please provide a breakdown of the payments below

Salary Payments	£
Rail/Air/Taxi travel between home and normal place of work	£
Car travel between home and normal place of work	£ 4.00
Season ticket travel between home and normal place of work	£
Non repayable season tickets	£
Child Care Costs	£
Private Healthcare	£
Meals & Subsistence	£ 59.95
[Redacted]	48.34
Total	£ 63.95

I certify that these are my only staff and any other staff are performing menial or menial duties.

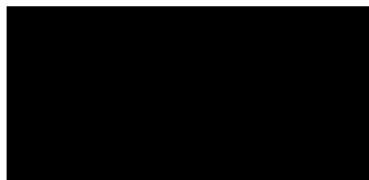
Signed (Member)

Date 16/06/04

Printed Name CLARE STORT

Constituency BIRMINGHAM LADYWOOD

Data Protection notice. We are required to keep this information under the rules governing payments made to Members of Parliament and their staff. This information will only be seen by staff who process salaries and claims or staff from the National Audit Office. Personal information will only be kept as long as it is accurate. If you have any concerns about the handling of such information, please contact this Departments Data Protection Officer on 020 7219 5973, who acts on behalf of the Data Controller, the Clerk of the House.





Description	Cost/Year	Qty/Years
Net		
[Redacted] : Registration	8.99	2
17.98		
[Redacted] : Registration	2.59	2
5.18		
[Redacted] Registration	8.99	2
17.98		
<hr/>		
Net Total		
41.14		
VAT Total		
7.20		
<hr/>		
Total		
48.34		



C2. DIRECT PAYMENT

RECEIVED

I enclose 2 certified invoices to allow direct payment from my Incidental Expenses Provision

16 JUN 2004

DEA

Invoice	Supplier's name	Amount £	Transaction code <i>For Fees office use only</i>
1	Banner	27.34	
2	- u -	27.34	
3			
4			
5			
6			
7			
8			
9			
10			
		£54.68	

I certify that the expenses incurred on parliamentary business

SIGNED.....MP

PRINTED NAME..... CLARE SHORT

DATE..... 15/6/04..... CONSTITUENCY..... Birmingham Ladywood

Invoice

* INVOICE NO. [REDACTED]

Invoice To :

Claire Short MP
[REDACTED]



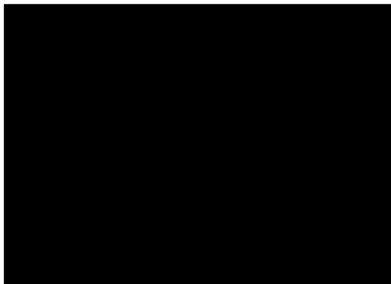
PAYMENT SLIP

Please see reverse
for terms of business
and how to pay

Page 1 of 1 Date 11/06/2004
Acc.No. [REDACTED] Order Date 10/06/2004
Order [REDACTED]
C.A.R.

Acc. No. : [REDACTED]
Inv. No. : [REDACTED]
Inv. Date: 11/06/2004
Amt. Due : 27.34

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		0984086	HP C5011DE No14 PRINT CARTRIDGE BK	1	EACH	10.0000	10/06/04	10.00	17.50	1.75
2		0984087	HP C5010DE No14 PRINT CART COLOUR	1	EACH	13.2700	10/06/04	13.27	17.50	2.32



V.A.T. Summary

Rate	Taxable Sum	V.A.T. Amount
17.50	23.27	4.07

Sales Order Total (VAT excl) 23.27

INVOICE GOODS	23.27
INVOICE V.A.T.	4.07
INVOICE TOTAL	27.34

Please return the slip

from final page
of invoice with
your payment
by

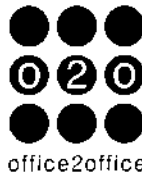
09/07/2004

Invoice

* INVOICE NO. [REDACTED]

Invoice To :

Claire Short MP
[REDACTED]



Page 1 of 1 Date 11/06/2004
Acc.No. [REDACTED] Order Date 10/06/2004
Order [REDACTED]
C.A.R.

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

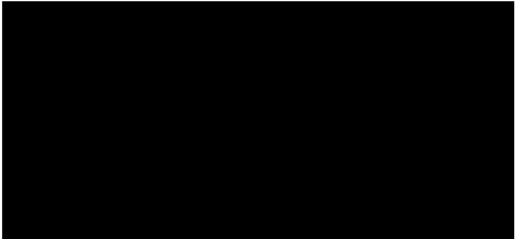
Acc. No. : [REDACTED]

Inv. No. : [REDACTED]

Inv. Date: 11/06/2004

Amt. Due : 27.34

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		0984086	HP C5011DE No14 PRINT CARTRIDGE BK	1	EACH	10.0000	10/06/04	10.00	17.50	1.75
2		0984087	HP C5010DE No14 PRINT CART COLOUR	1	EACH	13.2700	10/06/04	13.27	17.50	2.32



V.A.T. Summary

Rate	Taxable Sum	V.A.T. Amount
17.50	23.27	4.07

Sales Order Total (VAT excl)

23.27

INVOICE GOODS	23.27
INVOICE V.A.T.	4.07
INVOICE TOTAL	27.34

**Please
return
the slip**

from final page
of invoice with
your payment
by

09/07/2004

C2. DIRECT PAYMENT

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

Invoice	Supplier's name	Amount £	Transaction code <i>For Fees office use only</i>
1	BANNER	46.44	
2			
3			
4			
5			
6			
7			DEA
8			RECEIVED
9			
10			
		£ 46.44	

I certify that the
parliamentary bu

.....ed on

SIGNED.....

IP

PRINTED NAME.....

CLARE SHORT

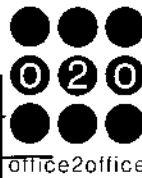
DATE.....

9/6/04

CONSTITUENCY.....

Bham Ladywood

- 2 JUN 2004



Invoice

* INVOICE NO. [REDACTED]

Invoice To :

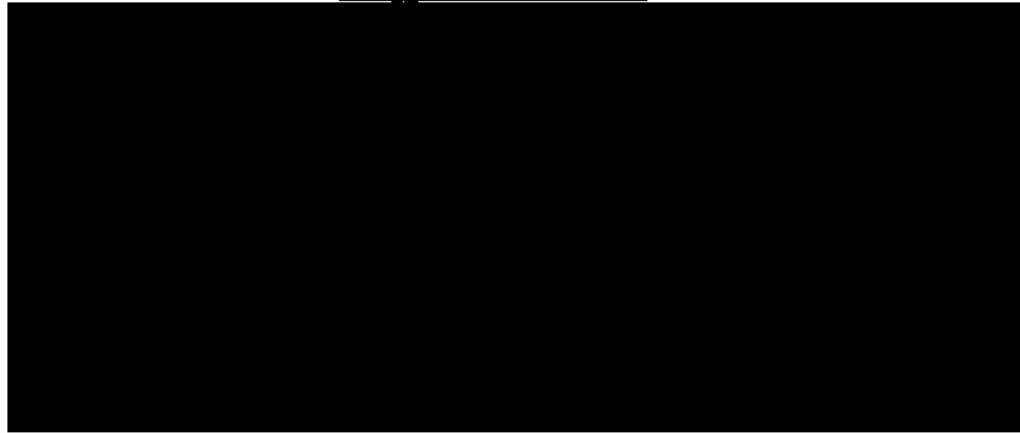
Claire Short MP
[REDACTED]

Page 1 of 1 Date 28/05/2004

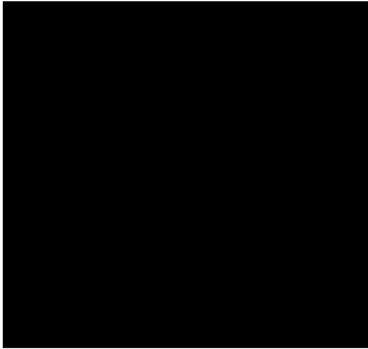
Acc.No. [REDACTED] Order Date 27/05/2004

Order [REDACTED]

C.A.R.



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		0984087	HP C5010DE No14 PRINT CART COLOUR	2	EACH	19.7600	27/05/04	39.52	17.50	6.92



V.A.T. Summary

Rate	Taxable Sum	V.A.T. Amount
17.50	39.52	6.92

Sales Order Total (VAT excl)

39.52

INVOICE GOODS	39.52
INVOICE V.A.T.	6.92
INVOICE TOTAL	46.44

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

Acc. No. : [REDACTED]

Inv. No. : [REDACTED]

Inv. Date: 28/05/2004

Amt. Due : 46.44

**Please
return
the slip**

from final page
of invoice with
your payment
by

25/06/2004

C2. DIRECT PAYMENT

I enclose 2 certified invoices to allow direct payments to be made from my Incidental Expenses Provision

Invoice	Supplier's name	Amount £	Transaction code <i>For Fees office use only</i>
1	BANNER	59.15	
2		1.99	
3			
4			
5			
6			
7			
8			
9			
10			
		£61.14	

01 JUN 2004

I certify that [REDACTED] parliamentary

expenses necessarily incurred on

SIGNED.. [REDACTED]

.....MP

PRINTED NAME..... CLARKE SHORT

DATE..... 27/5/04..... CONSTITUENCY..... Bham dalywood

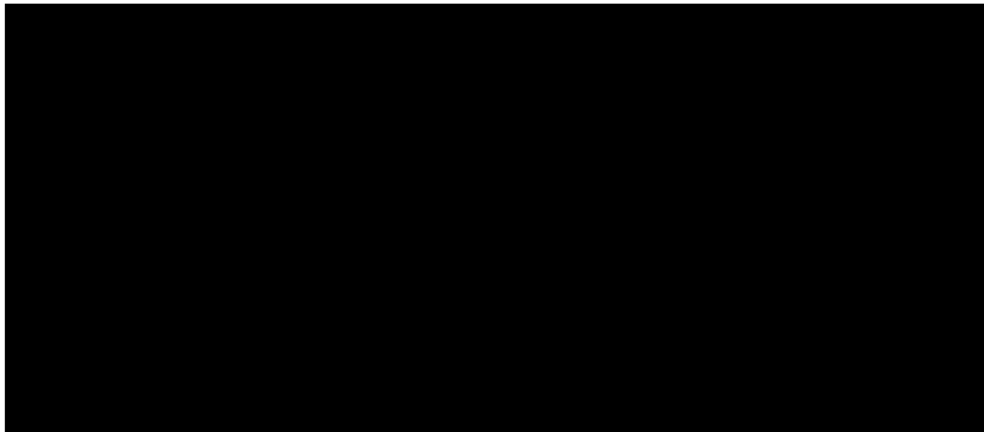
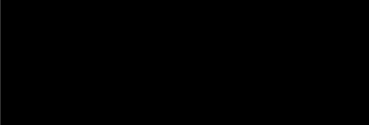
Invoice



 * INVOICE NO. [REDACTED]

Invoice To :

Claire Short MP



Page 1 Of 1 Date 20/05/2004
 Acc.No. [REDACTED] Order Date 19/05/2004
 Order [REDACTED]
 C.A.R.

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

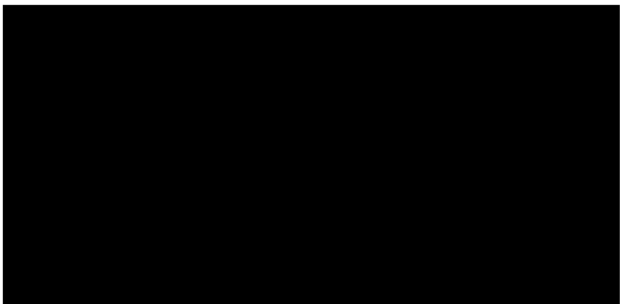
Acc. No. : [REDACTED]

Inv. No. : [REDACTED]

Inv. Date: 20/05/2004

Amt. Due : 59.15

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		0470006	SUPACLIP 40 SEE THROUGH DISP+CLIPS	1	PACK	1.9100	19/05/04	1.91	17.50	0.33
2		0500350	PILOT G1 METALLIC INK R/BALL PEN AS	1	WLLT5	3.2100	19/05/04	3.21	17.50	0.56
3		0984086	HP C5011DE No14 PRINT CARTRIDGE BK	2	EACH	19.7600	19/05/04	39.52	17.50	6.92
4		BETSLIPS	HOC BETSLIPS SCRIBBLING PAD	2	PK500	2.8500	19/05/04	5.70	17.50	1.00



V.A.T. Summary

Rate	Taxable Sum	V.A.T. Amount
17.50	50.34	8.81

Sales Order Total (VAT excl)

50.34

INVOICE GOODS	50.34
INVOICE V.A.T.	8.81
INVOICE TOTAL	59.15

**Please
 return
 the slip**

from final page
 of invoice with
 your payment
 by

17/06/2004

7 MAY 2004

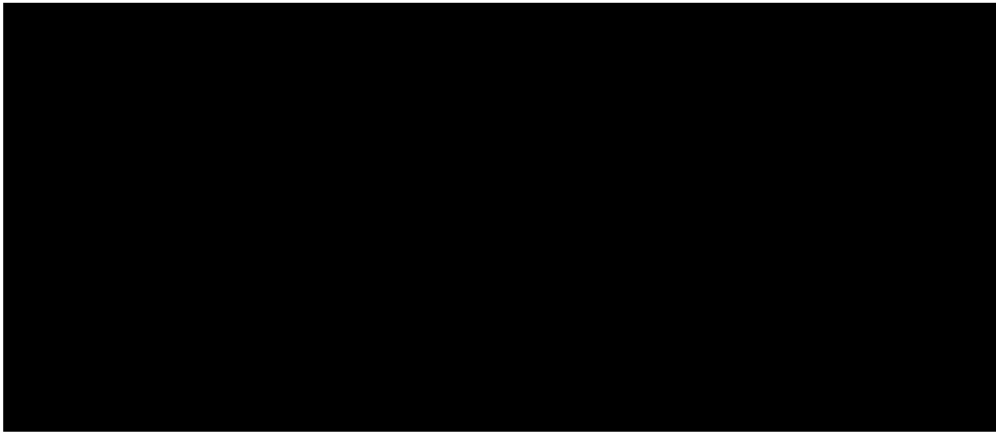


Invoice

* INVOICE NO. [REDACTED]

Invoice To :

Claire Short MP
[REDACTED]



Page 1 of 1 Date 25/05/2004
Acc.No [REDACTED] Order Date 24/05/2004
Order [REDACTED]
C.A.R.

PAYMENT SLIP

Please see reverse
for terms of business
and how to pay

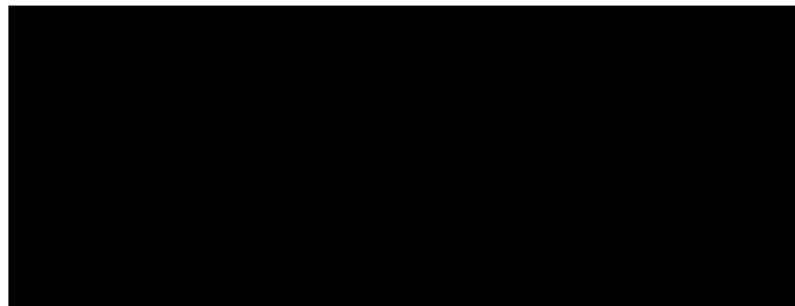
Acc. No. : [REDACTED]

Inv. No. : [REDACTED]

Inv. Date: 25/05/2004

Amt. Due : 1.99

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		9100001	BANNER 125x200mm DUPLICATE BOOK	1	BOOK	1.6900	24/05/04	1.69	17.50	0.30



V.A.T. Summary

Rate	Taxable Sum	V.A.T. Amount
17.50	1.69	0.30

Sales Order Total (VAT excl)

1.69

INVOICE GOODS	1.69
INVOICE V.A.T.	0.30
INVOICE TOTAL	1.99

Please return the slip

from final page
of invoice with
your payment
by

22/06/2004

C.4 DIRECT PAYMENT

For ad-hoc payments of salary and certain expenses to Members' employees and volunteers

I hereby authorise the Fees Office to pay the undermentioned person the following sums from my Staffing Allowance.

Name: [Redacted]

Address:

Only complete these details if this is the first time of payment or if your details have changed.

NI Number: Date of Birth: -

Bank Name:

Address:

Sort Code: Account Number:

Account Name:

To avoid delay in payment please provide a breakdown of the payments below

Salary Payments	[Redacted]	£	[Redacted]
Rail/Air/Taxi travel between home and normal place of work		£	
Car travel between home and normal place of work		£	
Season ticket travel between home and normal place of work		£	
Non repayable seas	[Redacted]	£	
Child Care Costs	[Redacted]	£	
Private Healthcare	[Redacted]	£	
Meals & Subsistence	[Redacted]	£	260

Total [Redacted]

I certify that these expenses are for Parliamentary duties.

Signed (Member) .. [Redacted] Date 4/5/04

Printed Name CLARE SHOON MP

Constituency Birmingham Ladywood

Data Protection notice. We are required to keep this information under the rules governing payments made to Members of Parliament and their staff. This information will only be seen by staff who process salaries and claims or staff from the National Audit Office. Personal information will only be kept as long as it is accurate. If you have any concerns about the handling of such information, please contact this Departments Data Protection Officer on 020 7219 5973, who acts on behalf of the Data Controller, the Clerk of the House.

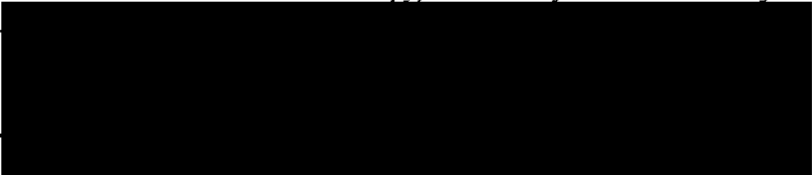


C2. DIRECT PAYMENT

I enclose 2 certified invoices to allow direct payments to be made from my Incidental Expenses Provision

Invoice	Supplier's name	Amount £	<i>Transaction code For Fees office use only</i>
1	Banner	95.96	X2
2			
3			
4			
5			
6			
7			
8			
9			
10			
		£ 95.96	

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

SIGNED..... MP

PRINTED NAME..... CLAYTON STROUD.....

DATE 4/5/04..... CONSTITUENCY Bham Ladywood

13 APR 2004



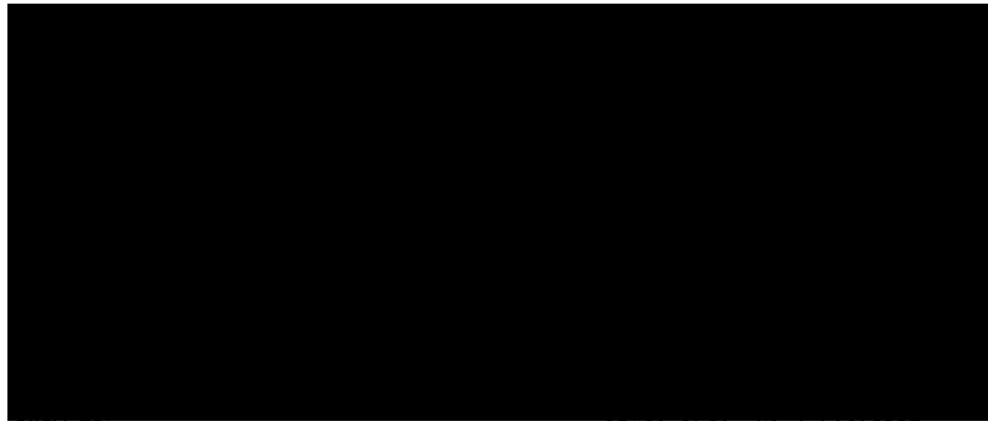
Invoice

* INVOICE NO. [REDACTED]

Invoice To :

Claire Short MP
[REDACTED]

Page 1 Of 1 Date 04/04/2004
Acc.No. [REDACTED] Order Date 31/03/2004
Order [REDACTED]
C.A.R.



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

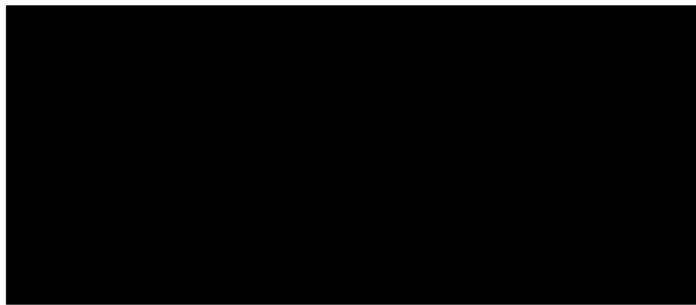
Acc. No. : [REDACTED]

Inv. No. : [REDACTED]

Inv. Date: 04/04/2004

Amt. Due : 78.29

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		5000301	BLACK N RED A4 RULED&PERF WIRE BOOK	2	EACH	4.3200	31/03/04	8.64	17.50	1.51
2		0500350	PILOT G1 METALLIC INK R/BALL PEN AS	2	WLLT5	3.2100	31/03/04	6.42	17.50	1.12
3		0480045	PAPERMATE NON STOP PENCIL HB 0.7mm	2	BOX12	2.6100	31/03/04	5.22	17.50	0.91
4		0390021	STAEDTLER RASOPLAST ERASER	3	ERASER	0.1800	31/03/04	0.54	17.50	0.09
5		0630176	STAEDTLER TEXTSURFER HIGHLIGHTER AS	1	WLT4	2.4700	31/03/04	2.47	17.50	0.43
6		0470005	SUPACLIP 40 REFILL CLIPS S/STEEL	2	PACK50	1.4500	31/03/04	2.90	17.50	0.51
7		0570222	RAPESCO PUFFA HALF STRIP STAPLER CH	1	STPLR	4.6100	31/03/04	4.61	17.50	0.81
8		0982806	HP LASERJET 1200/1220 TNR NO.15A BK HP LASERJET 1200/1220 NO.15A BLACK TONER C7115A	1	CRTRDG	35.8400	31/03/04	35.84	17.50	6.27



V.A.T. Summary

Rate	Taxable Sum	V.A.T. Amount
17.50	66.64	11.65

Sales Order Total (VAT excl)

66.64

INVOICE GOODS
INVOICE V.A.T.
INVOICE TOTAL

66.64
11.65
78.29

**Please
return
the slip**

from final page
of invoice with
your payment
by

02/05/2004

Invoice

13 APR 2004

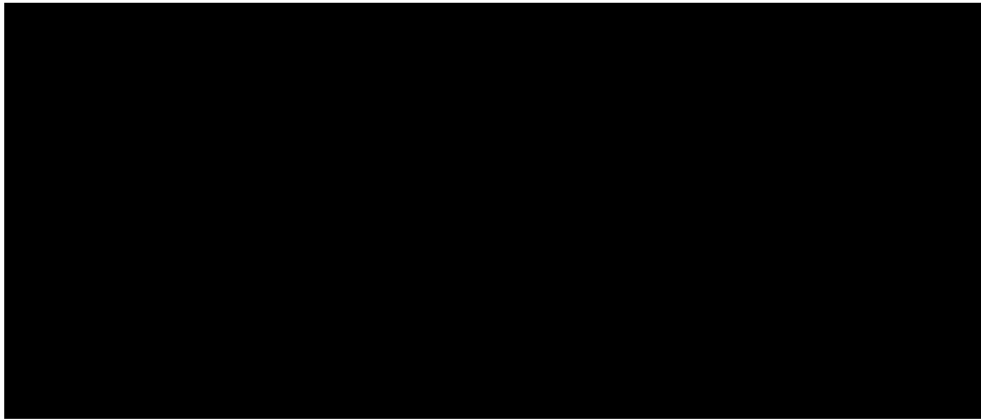


* INVOICE NO. [REDACTED]

Invoice To :

Claire Short MP
[REDACTED]

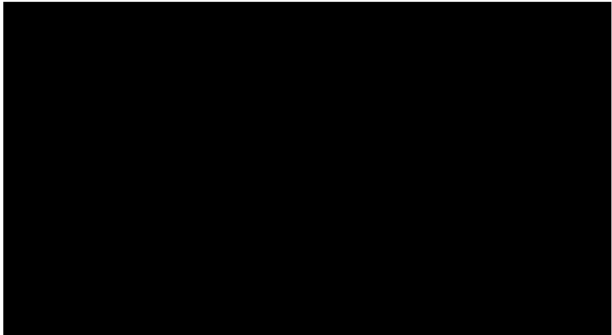
Page 1 Of 1 Date 04/04/2004
Acc.No. [REDACTED] Order Date 31/03/2004
Order [REDACTED]
C.A.R.



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

Acc. No. : [REDACTED]
Inv. No. : [REDACTED]
Inv. Date: 04/04/2004
Amt. Due : 17.67

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		9371003	BANNER CORRECTION PEN 7ml	1	EACH	1.1000	31/03/04	1.10	17.50	0.19
2		0080194	POST-IT INDEX FLAG DISP 12x44mm AS	1	EACH	2.1300	31/03/04	2.13	17.50	0.37
3		0080111	POST-IT Z NOTES 76x76mm YELLOW	1	PACK12	7.7000	31/03/04	7.70	17.50	1.35
4		0080514	POST-IT NEON NOTES 76x76mm PINK	1	PACK6	4.1100	31/03/04	4.11	17.50	0.72



V.A.T. Summary

Rate	Taxable Sum	V.A.T. Amount
17.50	15.04	2.63

Sales Order Total (VAT excl) 15.04

INVOICE GOODS	15.04
INVOICE V.A.T.	2.63
INVOICE TOTAL	17.67

**Please
return
the slip**

from final page
of invoice with
your payment
by

02/05/2004