

<b>Finance and Administration</b>		<b>Reason for Amendment:</b>	ED Davey MP
Prepared by: <i>(print and sign)</i>		Correct allocation of expenditure from STAF 07/08 to TSA 07/08 re ERNICs	
Authorised by: <i>(print and sign)</i>			
Date:	11/09/2007		

Transfer Description	Account Code								Debit £	Credit £
		Cost Centre	Cat 2	Cat 3	Cat 4	Cat 5	Cat 6	Cat 7		
										£ 21.42
										£ 21.42
										£ 115.50
										£ 21.42
										£ 74.88
								£ 6.44		
										£ 14.49
										£ 94.33
										£ 780.00
										£ 357.02

<b>Total</b>	<b>1,143.46</b>	<b>1,143.46</b>
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All backing documentation must be attached to this form and filed in the Correction Journal file.

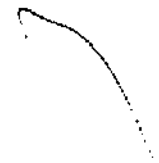
Transaction Reference: .....

Date received: .....

Input by: *(Signature)* .....

Date Input onto Computer: .....

Checked by: *(Signature)* .....



Edward Davey MP

Invoice No  
Date

30<sup>th</sup> March 2008

## INVOICE

Contribution towards POLD services received  
Period: 1<sup>st</sup> April 2007 – 31<sup>st</sup> March 2008

Please note that whilst POLD is organised by the parliamentary party, it is regarded as a third party supplier by the House of Commons and therefore claims should be made on Form C2.

	Total £
Part A [details below]	3,125
Part B [details below]	500
<b>Total Amount Due</b>	<b>3,625</b>

### Contribution towards POLD services received

#### PART A

Services payable from IEP or Staffing Allowance

#### SERVICE

Parliamentary Information & Communications Service [PICS]  
Parliamentary briefings (bills & debates)  
Standard letters and advice

1,283

Best Practice Team  
Parliamentary & legal compliance, recruitment & employment advice, staff training

680

Message Distribution Service [MDS]  
Faging & texting of divisions & advice

220

Parliamentary Research Unit  
Legislative advice & support

942

#### PART B

Services payable from IEP only

#### SERVICE

Best Practice Team projects  
Parliamentary staff training conference, parliamentary office reviews, best practice manual CD/handbook, best practice manual (recruitment & retention), tips newsletter to MPs/staff

500

**TOTAL**  
3,625



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

EDWARD DAVEY

Constituency

KINGSTON AND SURBITON

Office use only

Costo/Cat 2

Supp/Res ID

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

6/8/07

Allowance year

07/08

Incidental Expenses Provision claims

Table with 2 columns: Suppliers, Amount. Rows include ARTECH (£66.26 p), KLDPCL (£1805.00 p), KLDPCL (£1805.00 p), KLDPCL (£1805.00 p).

Office use only

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

Table with 3 columns for tracking codes.

Total £5481.26 p

5645.24

Claim details continued

**Staffing Allowance claims**

	Suppliers	Amount
Item 6	_____	£ _____ : _____ p
Item 7	_____	£ _____ : _____ p
Item 8	_____	£ _____ : _____ p
Item 9	_____	£ _____ : _____ p
<b>Total</b>		<b>£ _____ : _____ p</b>

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, or in part, in the performance of my Parliamentary duties.

Signature

\_\_\_\_\_

MP

Date

06 / 08 / 2007

**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			
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		/   /	
<b>Processing</b>			
Input		/   /	

Please use margin for comments

# ARTECH (INTERNATIONAL) LTD



VAT Registration no:

Edward Davey MP

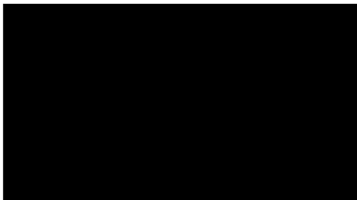


8  
9



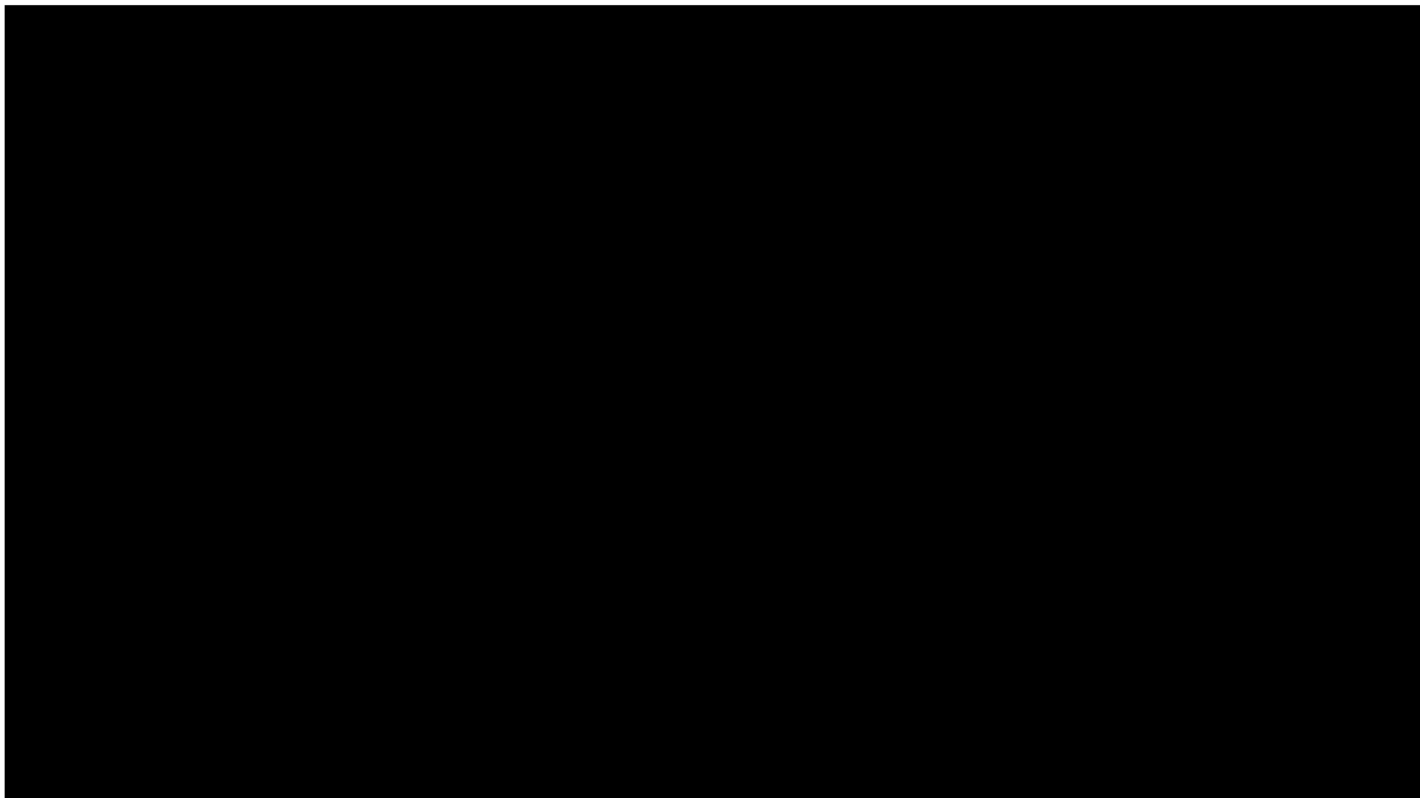
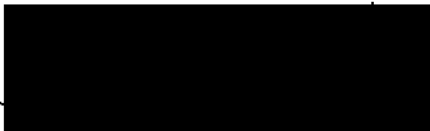
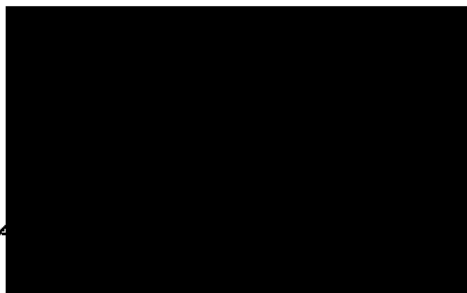
Invoice for printing charges in respect of:

Authorisation to Act Forms	2.29
Advice session forms Jan 07	26.46
Copy of Tesco's letter Feb 07	52.44
Tesco's Letter Feb 07	49.04
Letterhead	18.16
Speech Extract	3.91
Surgery Flyers	11.68
Letter to c/tax	66.26



£230.24

TOTAL ~~£66.26~~



Kingston Liberal Democrat  
Property Company Ltd

Invoice to:  
Edward Davey MP

Tax date: 01/04/2007  
Invoice no: [REDACTED]

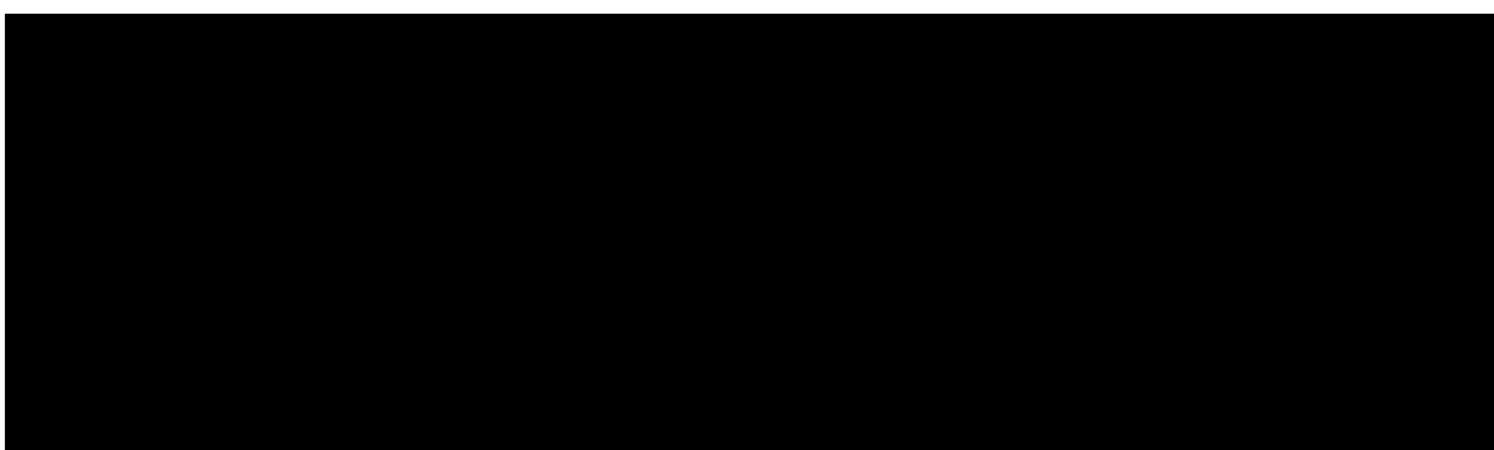
Service charge for [REDACTED]  
Annual charge £7220  
Quarter 1<sup>st</sup> April – 30<sup>th</sup> June

[REDACTED]  
£1805.00

No VAT

[REDACTED]  
**TOTAL**

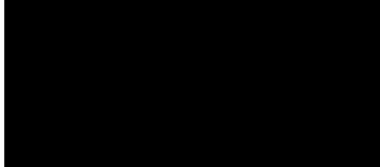
£1805.00



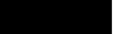
# Kingston Liberal Democrat Property Company Ltd




Invoice to:  
Edward Davey MP



Tax date: 01/04/2007

Invoice no: 

Service charge for   
Annual charge £7220  
Quarter 1<sup>st</sup> July – 30<sup>th</sup> September

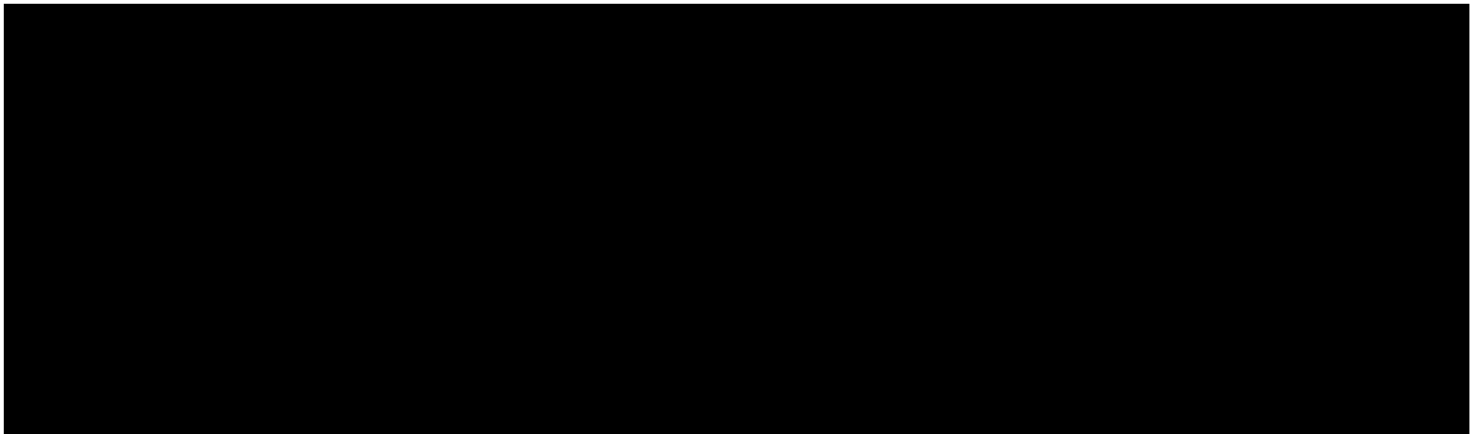
£1805.00

No VAT



**TOTAL**

**£1805.00**



# Kingston Liberal Democrat Property Company Ltd



Invoice to:  
Edward Davey MP

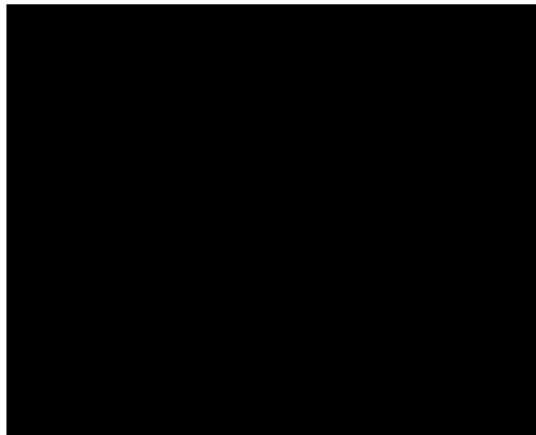


Tax date: 01/04/2007  
Invoice no

Service charge for   
Annual charge £7220  
Quarter 1<sup>st</sup> October - 31<sup>st</sup> December

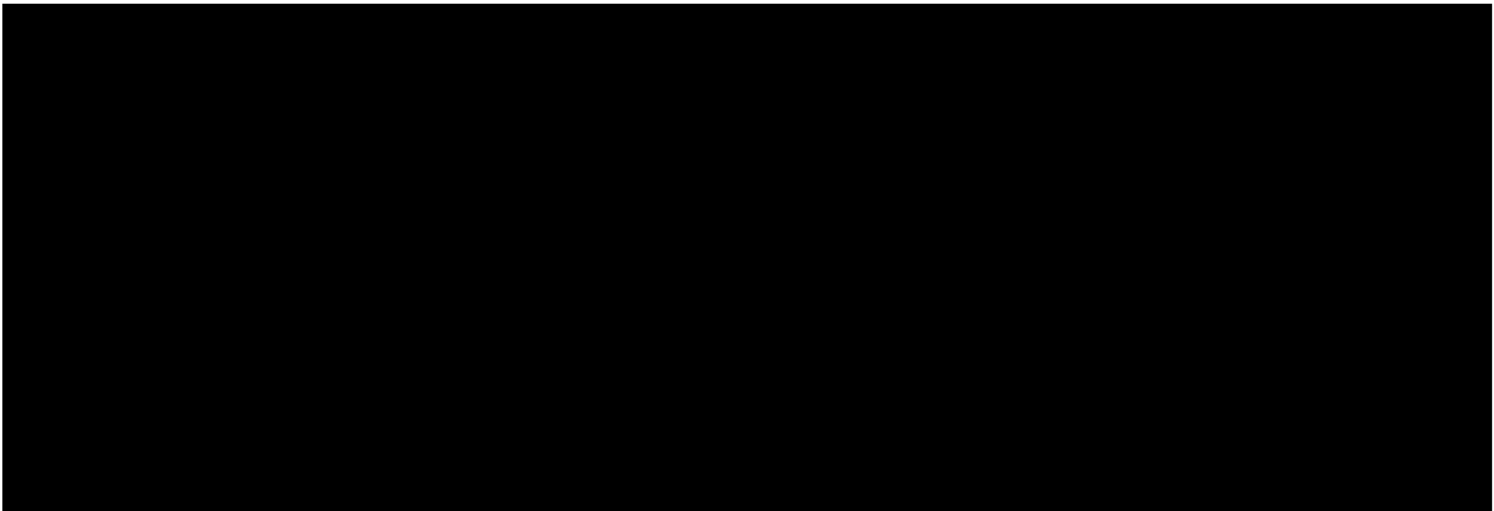
£1805.00

No VAT



AL

£1805.00







# 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

EDWARD DAVEY

Constituency

KINGSTON & SURBITON

Office use only

Costs

Supp/Res ID

## 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 / 3 / 08

Allowance year

07 / 08

### Incidental Expenses Provision claims

Office use only

Suppliers

Amount

Allow or A/c code

Supplier ID

Exp/ Cat 5

KLDP

£ 1805: 00 p

Item 1

£ : p

Item 3

£ : p

Item 4

£ : p

Item 5

£ : p

Total

£ 1805: 00 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			
<b>Total</b>		£ : 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

25 / 5 / 08

**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.

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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		Validation	Initials	Date
Claims received			/ /	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



Tax Date	Invoice No.
01/01/2008	

Invoice To
Edward Davey MP



P.O. Number	Terms	Project
	Due on receipt	

Qty	Description	Price	VAT %	Amount	
0.25	Service charge  Jan - 31 Mar 2008	7,220.00		1,805.00	
VAT%	VAT AMOUNT	VAT%	VAT AMOUNT	SUBTOTAL	£1,805.00
				VAT TOTAL	£0.00
				<b>Total</b>	<b>£1,805.00</b>





Incidental Expenses Provision/Staffing Allowance

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

EDWARD DAVEY MP

Constituency

KINGSTON & SURBITON

Office use only

Costs

Supp/Res ID

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 / 3 / 08

Allowance year

07 / 08

Incidental Expenses Provision claims

Office use only

Table with 3 columns: Suppliers, Amount, Office use only (Allow or A/c code, Supplier ID, Exp/Cat 5). Row 1: Item 1, ONS LTD, £ 251 : 86 p.

Total £ 251 : 86 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	_____	_____	_____
<b>Total</b>		<b>£ _____ : _____ p</b>			

**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

19 / 5 / 08

**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	Validation	Initials	Date
Claims received	_____	____/____/____	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*



ONS Ltd



Office of Edward Davey MP

14 March 2008

Qty	Description	Price	Total
	Computer Consultancy Services		214.35
	Subtotal		£214.35
	Add VAT @ 17.5%		37.51
	<b>TOTAL</b>		<b>£251.86</b>

Financial Processing }

Transaction No.

Registration No.



**Validation Claim Summary Sheet**

Please write or print clearly & attach to claim

**C3**

**Supplier ID**

or

or



**New Supplier**

**Volunteer Yes/No**  
Please check / attend relation

**Text**

23/05/08

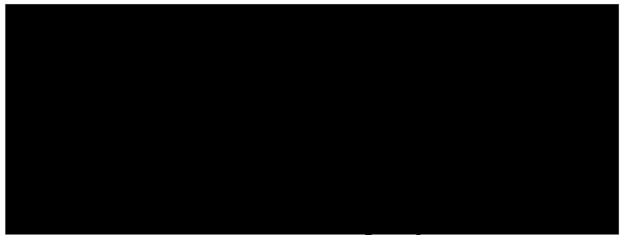
**Invoice No.**

**Account code / Allowance**

**Members cost centre (Cat1)**

**Financial Year/PIRO (Cat2)**

**Expenditure type (Cat5) :**



07\_08 / 08\_09



E.....

E.....

E.....

E 14.00 ~~10.00~~  
~~E 7.00 10.00 7.00~~

E.....

E.....

~~E 1.00~~

E 16.00

E 18.00

**Co**



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

Posted by (initials & date)





# Authority for the payment of one-off salary and/or expenses to staff

**When to use this form**

- Use this form to request a one-off payment of salary to a temporary or casual employee.
- Use this form to reimburse out-of-pocket expenses to an employee or a volunteer.

**About filling in this form**

- Please note that payments can be made through the payroll only if we hold a valid National Insurance number for the employee.
- If you have any questions about this form, please call 020 7219 1340.

## Your details

Name  
in CAPITAL LETTERS

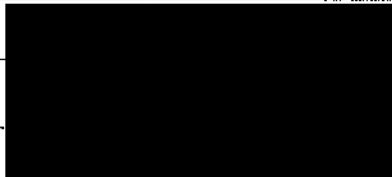
EDWARD DAVEY

Constituency

KINGSTON & SURBITON

## Details of staff member

First name



EDWARD

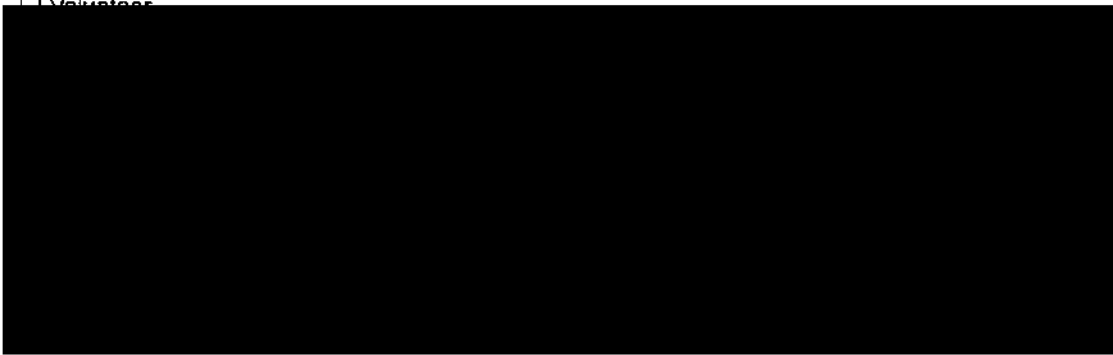
Surname  
in CAPITAL LETTERS

Employee status

- Permanent employee
- Temporary or casual employee
- Volunteer

Date of birth

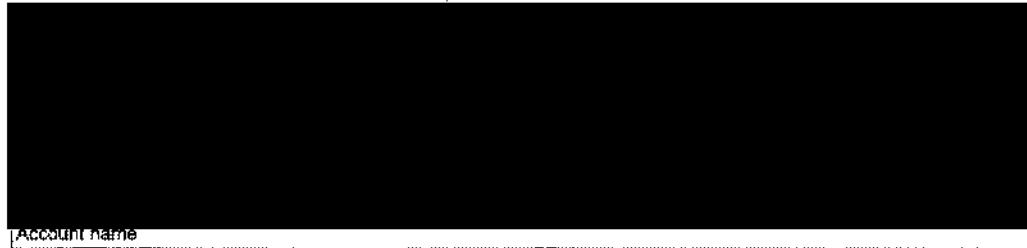
National Insurance number



## Payment details

Payslip address

Bank details



Account name



**Claim details**

- Please claim actual amounts incurred, not round sums
- Please attach receipts or invoices

	Amount
One-off salary	£ : p
Season ticket loan	£ : p
Travel - home to work	£ : p
Rail travel	£ 14 : 00 p
Car travel	£ : p
Air travel	£ : p
Taxi	£ : p
Meals and subsistence	£ 4 : 00 p
Healthcare	£ : p
Childcare	£ : p
Home as office/telephone	£ : p
Office requisites	£ : p
<b>Total</b>	<b>£ 18 : 00 p</b>

**Authorisation and declaration**

I confirm that payments listed above were wholly, exclusively and necessarily incurred by me in the course of performing my Parliamentary duties.

Signature \_\_\_\_\_ MP

Date 23/5/08

**Data protection**

On behalf of the Data Controller, the employing Member of Parliament, the House of Commons Administration will process the information you provide on this form for the purpose of staff administration, administering and accounting for the Members' Estimate, making payments and keeping records in accordance with the rules agreed by the employing member, the House of Commons and the Inland Revenue. The information may also be disclosed to the National Audit Office for audit purposes.

The information will be processed in accordance with the provisions of the Data Protection Act 1998. 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, including the right to see and receive a copy of any personal data that the House of Commons Administration holds about you on behalf of your employer, please contact your employer.

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			/ /
<i>Please use margin for comments</i>			
	Validation	Initials	Date
Member ID added to form			/ /
Payment codes added to form			/ /
Receipts/documentation present			/ /
Processing Input			/ /



**PARKING SERVICES**

Display ticket inside front windscreen.  
It is illegal to transfer this ticket to  
other Pay & Display users.


EXPIRY TIME

DATE



039 £4.00

Class	Ticket type	Start date	Price
STD	OFF-PEAK TCD	[REDACTED]	E7.00X
	Valid until	[REDACTED]	
Route	ANY PERMITTED		



Financial Processing }

Transaction No. [redacted]

Registration No. [redacted]

**Validation Claim Summary Sheet**

Please write or print clearly & attach to claim

**C3**

**Supplier ID**

or

8

or

**New Supplier**

**Volunteer Yes/No**

**Please check / amend relation**

**Text**

16-4-08.

**Invoice No.**

**Account code / Allowance**

**Members cost centre (Cat1)**

**Financial Year/PIRO (Cat2)**

**07\_08**

**Expenditure type (Cat5) :**



----	£ 114.79
----	£ .....
----	£ .....
----	£ .....
----	£ .....
----	£ .....
----	£ .....
----	£ .....
----	£ .....
----	£ .....
----	£ .....
----	£ 114.79

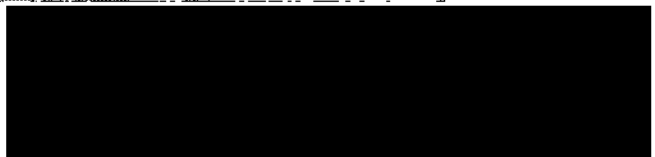
**Comments:**

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

[redacted signature line]

**Posted by (initials & date)**

[redacted signature line]



2/5/08



# Authority for the payment of one-off salary and/or to staff



**When to use  
this form**

- Use this form to request a one-off payment of salary to a temporary or casual employee.
- Use this form to reimburse out-of-pocket expenses to an employee or a volunteer.

**About filling in  
this form**

- Please note that payments can be made through the payroll only if we hold a valid National Insurance number for the employee.
- If you have any questions about this form, please call 020 7219 1340.

## Your details

Name  
in CAPITAL LETTERS

EDWARD DAVEY

Constituency

KINGSTON AND SURBITON

## Details of staff member

First name



Surname  
in CAPITAL LETTERS

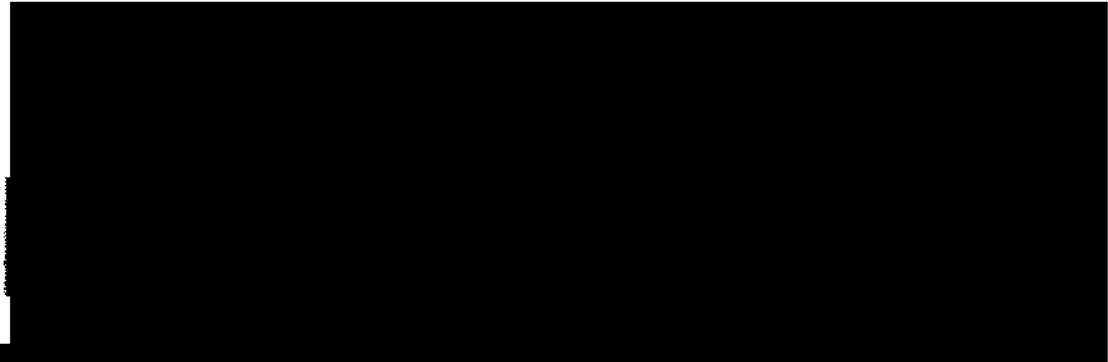
D

Employee status

- Permanent employee
- Temporary or casual employee
- Volunteer

Date of birth

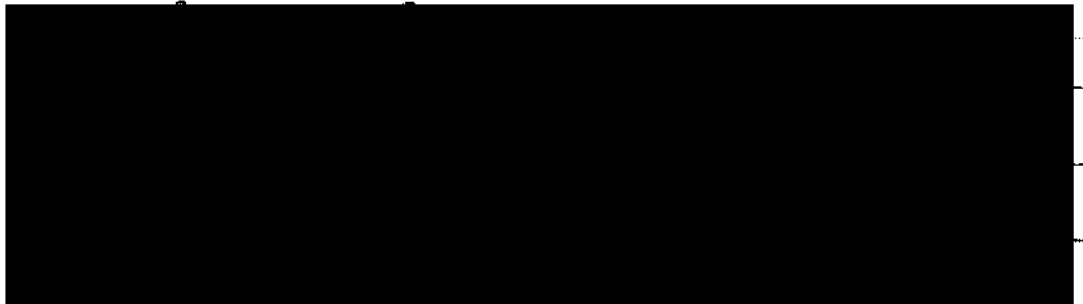
National Insurance  
number



## Payment details

Payslip address

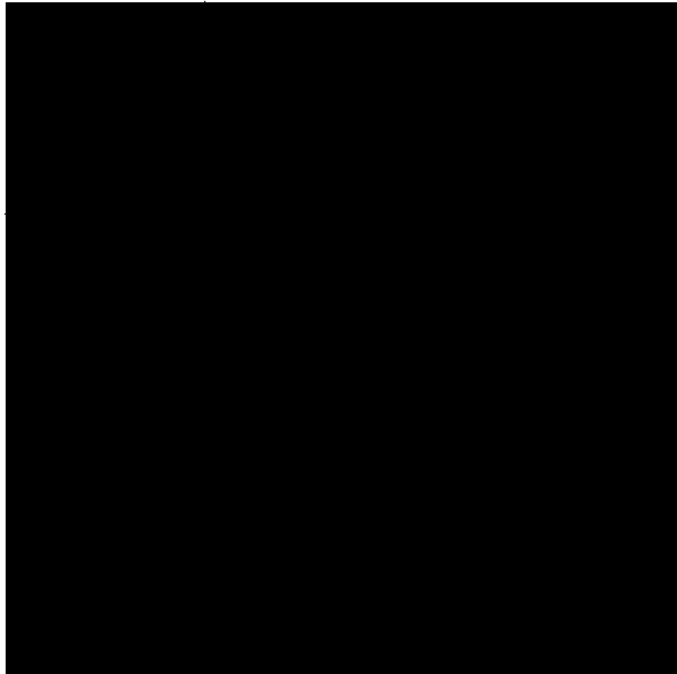
Bank details



**Claim details**

- Please claim actual amounts incurred, not round sums
- Please attach receipts or invoices

	Amount		
One-off salary	£	:	p
Season ticket loan	£	:	p
Travel – home to work	£	:	p
Rail travel	£	:	p
Car travel	£	:	p
Air travel	£	:	p
Taxi	£	:	p
Meals and subsistence	£	:	p
Healthcare	£	:	p
Childcare	£	:	p
Home as office/telephone	£	:	p
Office requisites	£	114 :	79 p
<b>Total</b>	<b>£</b>	<b>114 :</b>	<b>79 p</b>



**Authorisation and declaration**

I confirm that payments listed above were wholly, exclusively and necessarily incurred by me in the course of my Parliamentary duties.

Signature \_\_\_\_\_ MP

Date 16/04/08

**Data protection**

On behalf of the Data Controller, the employing Member of Parliament, the House of Commons Administration will process the information you provide on this form for the purpose of staff administration, administering and accounting for the Members' Estimate, making payments and keeping records in accordance with the rules agreed by the employing member, the House of Commons and the Inland Revenue. The information may also be disclosed to the National Audit Office for audit purposes.

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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			/ /
<i>Please use margin for comments</i>			
	Validation	Initials	Date
Member ID added to form			/ /
Payment codes added to form			/ /
Receipts/ documentation present			/ /
Processing Input			/ /



Dell Corporation Ltd

# Invoice

No Payment Required

Invoice to:

Deliver To:

**Edward Davey MP**

Edward Davey MP

Invoice No	Customer No	Dell Order No	Page 1 of 1
------------	-------------	---------------	-------------

Your Ref/PO No.  
 Despatch Note No.  
 Despatch Date  
 Payment Terms  
 Invoice Date  
 Internet Receipt No:

14/03/2008

Booking Reference:  
 Account Manager  
 Account Manager Tel  
 Account Manager Fax  
 Account Manager Email

Item No.	Description	Quantity	Unit Price	Net	VAT
583-10107	Dell - 5100cn - Transfer Roller	1	22.00	22.00	S
600-10709	Info - Laser Standard Consumables Delivery	1	0.00	0.00	S

### VAT Summary

VAT Type	VAT Rate %	GBP Total Net £	GBP VAT £
S	17.5	22.00	3.85

Subtotal	GBP 22.00
Freight	0.00
VAT £	3.85
<b>Total</b>	<b>25.85</b>

Tag Nos.



LYRECO UK LIMITED



**LIBERAL DEMOCRATS**

DELIVERY ADDRESS

[Redacted]

Tel: [Redacted] Fax: [Redacted]

CUST. N° [Redacted] VAT [Redacted]

**INVOICE N°** [Redacted] PAGE 1

TAX POINT DATE 29/02/2008 PAYMENT TERMS 31/03/2008

INVOICE ADDRESS

[Redacted]

CUSTOMER REFERENCE

[Redacted]

Product Code	Quantity Delivered	Product Description	Unit gross price Excl. VAT	Unit net price Excl. VAT	Total net price Excl. VAT	VAT Code
[Redacted]		[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]
	2	IMPEGA 1/JET COMPAT 645A BLK	[Redacted]	[Redacted]	[Redacted]	[Redacted]
	2	IMPEGA 1/JET COMPAT 657BA 3COL	[Redacted]	[Redacted]	[Redacted]	[Redacted]
	1	BROTHER PC-75 THERMAL TRANSFER RIBBON	[Redacted]	[Redacted]	[Redacted]	[Redacted]
[Redacted]						

Total Excl. VAT 75.69  
 \*\* Total VAT 13.25

Amount Due Inc. VAT GBP 88.94







# Authority for the payment of one-off salary and/or expenses to staff

**When to use this form**

- Use this form to request a one-off payment of salary to a temporary or casual employee.
- Use this form to reimburse out-of-pocket expenses to an employee or a volunteer.

**About filling in this form**

- Please note that payments can be made through the payroll only if we hold a valid National Insurance number for the employee.
- If you have any questions about this form, please call 020 7219 1340.

## Your details

Name  
in CAPITAL LETTERS

EDWARD DAVEY

Constituency

KINGSTON AND SURBITON

## Details of staff member

First name

Surname  
in CAPITAL LETTERS

Employee status

Date of birth

National Insurance  
number

## Payment details

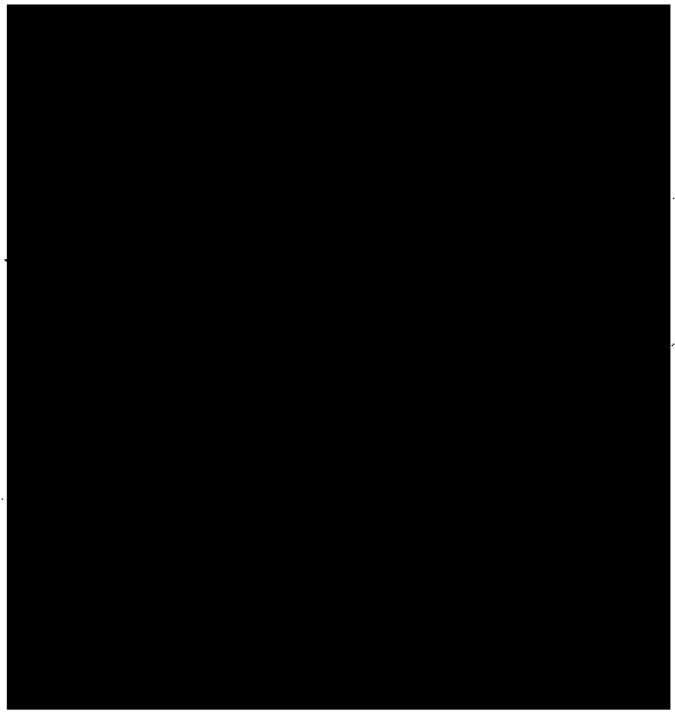
Payslip address

Bank details

**Claim details**

- Please claim actual amounts incurred, not round sums
- Please attach receipts or invoices

	Amount
One-off salary	£ : p
Season ticket loan	£ : p
Travel – home to work	£ : p
Rail travel	£ : p
Car travel	£ : p
Air travel	£ : p
Taxi	£ : p
Meals and subsistence	£ : p
Healthcare	£ : p
Childcare	£ : p
Home as office/telephone	£ : p
Office requisites	£ 36 : 43 p
<b>Total</b>	<b>£ 36 : 43 p</b>



**Authorisation and declaration**

I confirm that payments listed above were wholly, exclusively and necessarily incurred by my staff in connection with my Parliamentary duties.

Signature

\_\_\_\_\_



MP

Date

16-4-08

**Data protection**

On behalf of the Data Controller, the employing Member of Parliament, the House of Commons Administration will process the information you provide on this form for the purpose of staff administration, administering and accounting for the Members' Estimate, making payments and keeping records in accordance with the rules agreed by the employing member, the House of Commons and the Inland Revenue. The information may also be disclosed to the National Audit Office for audit purposes.

The information will be processed in accordance with the provisions of the Data Protection Act 1998. 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, including the right to see and receive a copy of any personal data that the House of Commons Administration holds about you on behalf of your employer, please contact your employer.

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			/ /
<i>Please use margin for comments</i>			
	Validation	Initials	Date
Member ID added to form			/ /
Payment codes added to form			/ /
Receipts/documentation present			/ /
Processing input			/ /



Dell Products

# Invoice

No Payment Required

Invoice to:

Deliver To:

**Kunzmann, Peter**

**Kunzmann, Peter**

<b>Invoice No:</b>	<b>Customer No:</b>	<b>Dell Order No:</b>	<b>Page 1 of 1</b>
--------------------	---------------------	-----------------------	--------------------

MyFinancials PIN  
 Despatch Note No.  
 Despatch Date  
 Payment Terms  
 Invoice Date  
 Internet Receipt No:

03/01/2008

Booking Reference:  
 Account Manager  
 Account Manager Tel  
 Account Manager Fax  
 Account Manager Email

Quantity	Unit Price	Net
1	23.00	23.00
1	0.00	0.00

### VAT Summary

VAT Type	VAT Rate %	GBP Total Net £	GBP VAT £
S	17.5	31.00	5.43

	GBP
Subtotal	23.00
Freight	8.00
VAT £	5.43
Total	36.43

Tag Nos.

From: Dell In [redacted]

To: [redacted]

Date: Thursday, 3 January, 2008 10:52:23 AM

Subject: Dell Order Acknowledgement - Internet Receipt Number: [redacted]

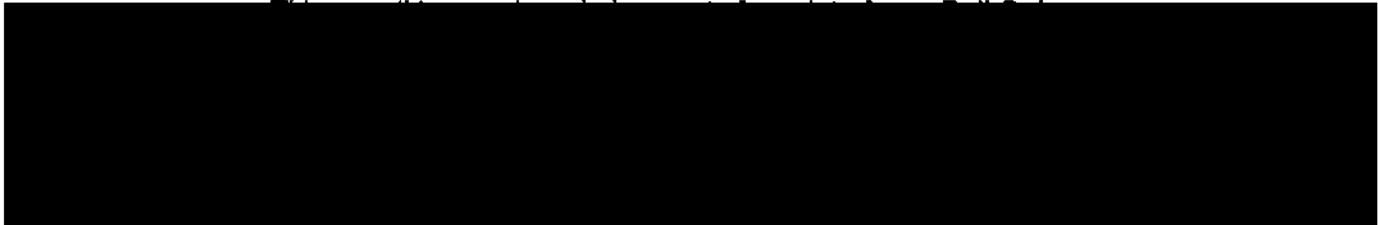
Shop at Dell United Kingdom Home & Home Office

[My Order Status](#)

[FAQ's](#)

[Dell Support](#)

[Main](#)



**Order Information**

Internet Receipt Number: [redacted]

Order Date: 3 January 2008

**Payment Information**

Contact: [redacted]

Phone Number: [redacted]

Address: [redacted]

Payment Method: [redacted]

Your order will be released into production as soon as your Bank has cleared your payment.

Total Price: £ 36.43

**Delivery Information**

Contact: [redacted]

Phone Number: [redacted]

Address: [redacted]

Please check your e-mail regularly for up to date information about your order. For security reasons, we cannot change your delivery address.

**Order Details**



**Product**

**Unit Price**

**Quantity**

**Price**

**Dell - 5100cn - Black - Standard Capacity  
Toner**

**£ 23.00**

**1**

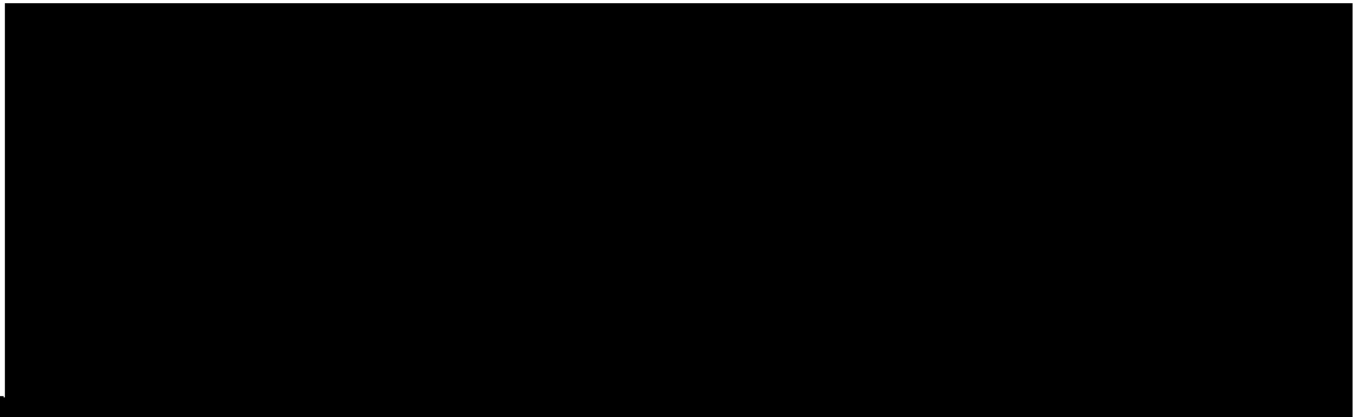
**£ 23.00**

**Price: £ 23.00**

**Delivery Charge: £ 8.00**

**VAT: £ 5.43**

**Total Price: £ 36.43**





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

EDWARD DAVEY MP

Constituency

KINGSTON & SURBITON

Office use only

Costs

Supp/Res ID

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

28 / 03 / 08

Allowance year

07 / 08

Incidental Expenses Provision claims

Office use only

Suppliers

Amount

Allow or A/c code

Supplier ID

Exp/ Cat 5

Item 1

BANNER BUSINESS SUPPLIES LTD

£ 217 : 74 p

Item 2

£ : p

Item 3

£ : p

Item 4

£ : p

Item 5

£ : p

Total

£ 217 : 74 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		
<b>Total</b>			
		£ : 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

[Redacted Signature]

MP

Date

16 / 4 / 08

**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**

Validation	Initials	Date	Validation	Initials	Date
Claims received		/ /	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

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



Banner Business Supplies Ltd

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

Edward Davey MP

Charge To :

Edward Davey MP

Acc. No. : [REDACTED]

Inv. No. : [REDACTED]

Page 1 Of 1 Date 20/03/2008  
 Acc.No. [REDACTED] Order Date 12/03/2008  
 Order [REDACTED]  
 C.A.R. [REDACTED]

Delivered To :

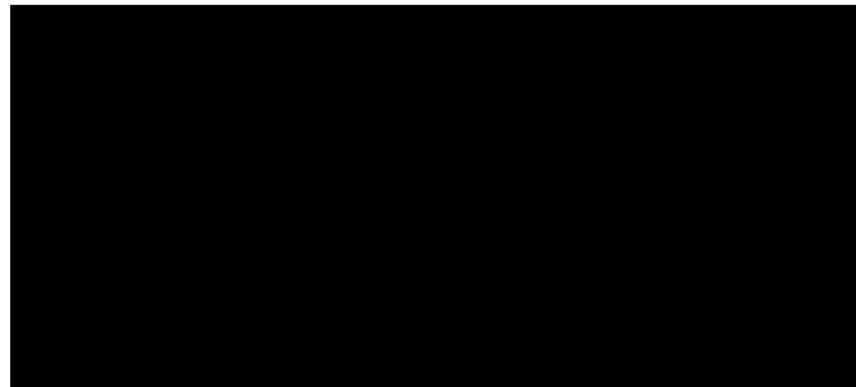
Edward Davey MP

Inv. Date: 20/03/2008

Amt. Due : 217.74

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
1		0987378	TONER DELL 1815DN HIGH CAPACITY 5K BLACK REF: 593-10153	3	EACH	61.7700	19/03/08 19/03/08 19/03/08	185.31	17.5	32.43



**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	185.31	32.43

Sales Order Total (VAT excl) 185.31

VAT Registration [REDACTED]

INVOICE GOODS 185.31  
 INVOICE V.A.T. 32.43  
 INVOICE TOTAL 217.74

185.31  
 32.43

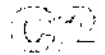
217.74

Settlement : None  
 Discount Terms : [REDACTED]

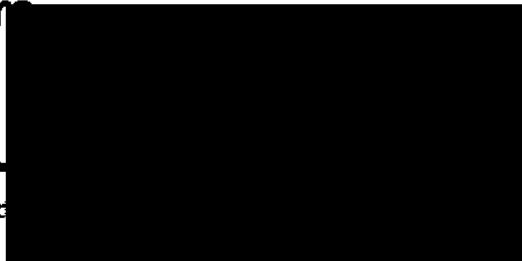
17/04/2008



Incidental Expenses Provision/Staffing Allowance



Direct payment of supplier



When to use this form

- Use this form to ask us to pay your suppliers for goods 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

EDWARD DAVEY

Constituency

KINGSTON AND SURBITON

Office use only

Costs

Supp/Res ID



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

28 / 03 / 08

Allowance year

07 / 08

Incidental Expenses Provision claims

Office use only



Table with columns: Suppliers, Amount, Allow or A/c code, Supplier ID, Exp/Cat 5. Row 1: BANNER BUSINESS SUPPLIES LTD, £ 145 : 16 p.

Total

£ 145 : 16 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	_____	_____	_____
		<b>Total</b> £ _____ : _____ p			

**Authorisation and declaration**

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

Signature

\_\_\_\_\_ MP

Date

16 / 04 / 08

**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	Validation	Initials	Date
Claims received	_____	____/____/____	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

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

Edward Davey MP

[REDACTED]

Page 1 Of 1 Date 11/12/2007  
 Acc. No. [REDACTED] Order Date 03/12/2007  
 Order [REDACTED]  
 C.A.R. [REDACTED]

Charge To :

Edward Davey MP

[REDACTED]

Delivered To :

Edward Davey MP

[REDACTED]



Banner Business Supplies Ltd

[REDACTED]

Sales Order No [REDACTED]

Line No.	Line Ref.	Product Code	Product Description	Quantity	U.O.M.	Unit Price	Tax Date	Line Total (excl VAT)	VAT Rate	Line VAT
1		0985715	TONER CARTRIDGE DELL 1600N 5K REF: 593-10082	2	EACH	61.7700	10/12/07 10/12/07	123.54	17.5	21.62

[REDACTED]

Sales Order Total (VAT excl) 123.54

V.A.T. Summary

Rate	Taxable Sum	V.A.T. Amount
17.50	123.54	21.62

VAT Registration : [REDACTED]

Settlement : None  
 Discount Terms :

EEE Producer Registration No: [REDACTED]

INVOICE GOODS 123.54  
 INVOICE V.A.T. 21.62  
 INVOICE TOTAL 145.16

123.54  
 21.62  
 145.16

## PAYMENT SLIP

Please see reverse for terms of business and how to pay

Acc. No. [REDACTED]

Inv. No. [REDACTED]

Inv. Date: 11/12/2007

Amt. Due : 145.16

[REDACTED]

**Please return the slip**

from final page of invoice with your payment by

08/01/2008



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

EDWARD DAVEY

Constituency

KINGSTON & SURBITON

Office use only

Cost/Cat 2

Supp/Res ID

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

You can specify

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

Date of claim

14/11/07

Allowance year

07/08

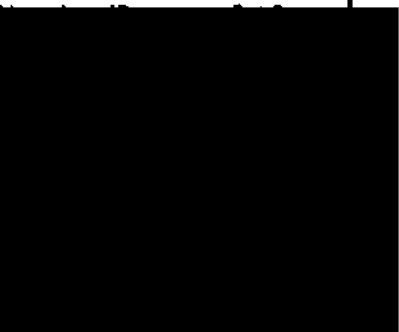
Incidental Expenses Provision claims

Suppliers	Amount
LYRECO	£ 105:74 p
BANNER	£ 16:29 p
BANNER	£ 1:68 p
VIKING	£ 40:81 p
	£ : p

Total £ 164:52 p

Office use only

Allow or Supplier Exp/



Empty table for office use only

Claim details continued

**Staffing Allowance claims**

	Suppliers	Amount
Item 6	_____	£ _____ : _____ p
Item 7	_____	£ _____ : _____ p
Item 8	_____	£ _____ : _____ p
Item 9	_____	£ _____ : _____ p
	<b>Total</b>	£ _____ : _____ 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,   
 \_\_\_\_\_ of my Parliamentary duties.

Signature

\_\_\_\_\_ MP

Date

14/11/07

**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

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

only

Initials Date

_____	/ /
-------	-----

_____	/ /
-------	-----

_____	/ /
-------	-----

Signature

_____	/ /
-------	-----

Validation

Member ID added to form

Initials Date

_____	/ /
-------	-----

Payment codes added to form

_____	/ /
-------	-----

Receipts/ documentation present

_____	/ /
-------	-----

Processing

Input

_____	/ /
-------	-----

Please use margin for comments



LYRECO UK LIMITED

[Redacted]

LIBERAL DEMOCRATS

DELIVERY ADDRESS

[Redacted]

[Redacted]

CUST. N° [Redacted] VAT [Redacted]

INVOICE N° [Redacted] PAGE 1

TAX POINT DATE 31/10/2007 PAYMENT TERMS 30/11/2007

LIBERAL DEMOCRATS

INVOICE ADDRESS

[Redacted]

CUSTOMER REFERENCE

[Redacted]

Product Code	Quantity Delivered	Product Description	Unit gross price Excl. VAT	Unit net price Excl. VAT	Total net price Excl. VAT	VAT Code
--------------	--------------------	---------------------	----------------------------	--------------------------	---------------------------	----------

[Redacted]

3318997	1	IMPEGA Q5942X TONER F/LJ4250/4350 BLK Exceptional discount		89.99	89.99	1
---------	---	---	--	-------	-------	---

[Redacted]

Total Excl. VAT 89.99  
Total VAT 15.75

Amount Due Inc. VAT GBP 105.74

# Invoice

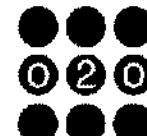
\*\*\*\*\*  
 \* INVOICE NO. [REDACTED] \*  
 \* \*\*\*\*\* \*

Invoice To :

Edward Davey MP

Charge To :

Edward Davey MP



office2office

Banner Business Supplies Ltd

## PAYMENT SLIP

Please see reverse  
 for terms of business  
 and how to pay

Acc. No. : [REDACTED]

Inv. No. : [REDACTED]

Inv. Date: 04/10/2007

Amt. Due : 16.29

Page 1 Of 1 Date 04/10/2007

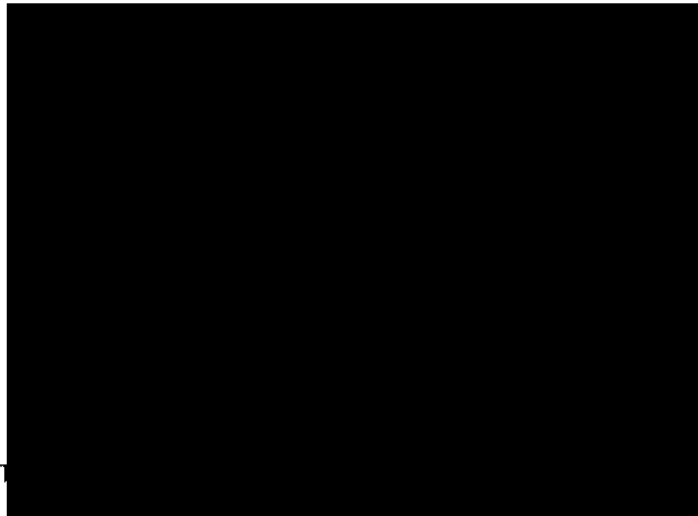
Acc.N [REDACTED] Order Date 02/10/2007

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
1		9670053	BANNER MP LABEL 63.5x38.1mm 21/S WH	6	BOX100	2.3100	03/10/07	13.86	17.5	2.43



**Please  
 return  
 the slip**

from final page  
 of invoice with  
 your payment  
 by

01/11/2007

V.A.T. [REDACTED] Total (VAT excl) 13.86

Rate Taxable Sum [REDACTED] Amounts  
 17.50 13.86 2.43

VAT Registration : [REDACTED]

Settlement : None  
 Discount Terms :

EEE Producer Registration No [REDACTED]

INVOICE GOODS 13.86  
 INVOICE V.A.T. 2.43  
 INVOICE TOTAL 16.29



# Invoice

\*\*\*\*\*  
 \* INVOICE NO. \*  
 \* \*\*\*\*\* \*  
 \* Invoice To: \*

Edward Davey MP

Page 1 of 1 Date 27/09/2007  
 Acc. Order Date 25/09/2007  
 Order  
 C.A.R.



Banner Business Supplies Ltd

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

Acc. No. :  
 Inv. No. :  
 Inv. Date: 27/09/2007  
 Amt. Due : 1.68

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		0985186	PDA STYLUS PEN	1	PACK3	1.4300	26/09/07	1.43	17.5	0.25

V.A.T. Summary

Rate	Taxable Sum	V.A.T. Amount
17.50	1.43	0.25

Sales Order Total (VAT excl) 1.43

Settlement : None  
 Discount Terms :

EEE Producer Registration No

INVOICE GOODS 1.43  
 INVOICE V.A.T. 0.25  
 INVOICE TOTAL 1.68

**Please  
 return  
 the slip**

from final page  
 of invoice with  
 your payment  
 by

25/10/2007

ACCOUNT No.	DATE	INVOICE No.	YOUR REFERENCE	DATE ENTERED	DESPATCHED
[REDACTED]	6/11/07	[REDACTED]	[REDACTED]	6/11/07	0/00/00

**TERMS**

Kingston Liberal Democrats

Kingston Liberal Democrats

All goods remain property of Viking Direct until invoice is settled in full

DESCRIPTION	CATALOGUE NUMBER	QTY DESPATCHED	VAT %	LIST PRICE	YOUR COST	NETT COST
-------------	------------------	-------------------	-------	------------	-----------	-----------

[REDACTED]						
------------	--	--	--	--	--	--

**AMOUNT DUE**

40.81



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

EDWARD DAVEY

Constituency

KINGSTON & SURBITON

Office use only

Costc/Cat 2

Supp/Res ID

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

25 / 6 / 07

Allowance year

07 / 08

Incidental Expenses Provision claims

Suppliers

Amount



Item 1

EARS £ 120 : 00 p  
Carework Manager

Item 2

£ : p

Item 3

£ : p

Item 4

£ : p

Item 5

£ : p

Total

£ 120 : 00 p

Office use only

Allow or Supplier Exp/


Claim details continued

**Staffing Allowance claims**

	Suppliers	Amount
Item 6	_____	£ : p
Item 7	_____	£ : p
Item 8	_____	£ : p
Item 9	_____	£ : p
	<b>Total</b>	£ : 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 25, 6, 07

**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

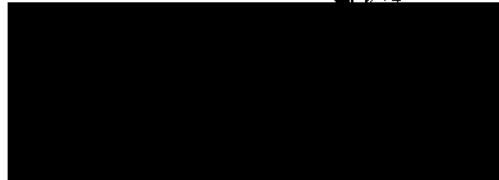
Office use only			
Validation	Initials	Date	
Claims received		/   /	
Signature check		/   /	
Funds check		/   /	
Allowable expenditure		/   /	
Validation	Initials	Date	
Member ID added to form		/   /	
Payment codes added to form		/   /	
Receipts/ documentation present		/   /	
Processing Input		/   /	

Please use margin for comments

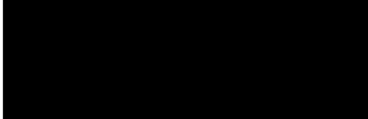


# Invoice

EARS



Office Of Edward Davey M.P.



Date: 7 June 2007

Invoice No:



*If you have any queries with this order form  
please phone on 020 8407 0155*

**For Casework Manager – MP version**



		Price
<b>Casework Network Maintenance for period 1 July 2007 - 30 June 2008</b>		<b>£120.00</b>
	<b>Total Inc. VAT</b>	<b>£120.00</b>

