



Member's reimbursement form

04 MAY 2006

When to use this form

- Use this form to ask us to reimburse you for costs you have incurred on your Parliamentary duties.

About filling in this form

- For details of costs you can claim for, see *Green Book* section 5.
- If you have any doubt about whether you can claim for a cost, please call 020 7219 1340.

Your details

Name in CAPITAL LETTERS

GORDON PRENTICE

Constituency

PENDLE

Office use only

Costs/Cat 2

Claim details

Please ensure

- your claim totals more than £100
- you provide journey details of all taxi journeys
- you attach all receipts or invoices for items of £250 and above
- any claims for petty cash do not exceed £250 per month.

You can only claim for

- costs you have actually paid
- office and surgery accommodation, equipment and supplies, communication and travel.

Period of claim

from 1 103 106

to 31 103 106 ✓

Allowance year

05 106 ✓

	Description of service or goods	Amount
Item 1	Apple laptops computer (receipt attached)	£ 1924: 38 p ✓
Item 2	East hames News Surgery ads	£ <del>198</del> <sup>162</sup> : 28 p
Item 3	BT internet	£ 158: 62 p
Item 4	Azzurri Communication	£ 153: 02 p
Item 5	Surgery advertising Board - annual fee	£ 150: 00 p
Item 6	Banner Supplies	£ 62: 32 p
Item 7		£ : p
Item 8		£ : p
Item 9		£ : p
Item 10		£ : p

Office use only

Allow or Exp/ A/c code Cat 5

Total

£ 2647: 24 p

continued on page 2

£2,610.62

**Authorisation and declaration**

I claim reimbursement of these costs which I incurred wholly, exclusively and necessarily

Signature

[Redacted Signature]

Date

3 May 2006

**Data protection**

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Send your completed form to

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

**Office use only**

Validation	Initials	Date
Claims received	<input checked="" type="checkbox"/>	/ /
Signature check	<input checked="" type="checkbox"/>	/ /
Funds check	<input checked="" type="checkbox"/>	/ /
Allowable expenditure	<input checked="" type="checkbox"/>	/ /
Member Res ID & Costs	<input checked="" type="checkbox"/>	/ /
Ext type/Cat 5 & subtotals added to form	<input checked="" type="checkbox"/>	/ /
Receipts/ documentation present	<input checked="" type="checkbox"/>	/ /
<b>Processing</b>		
Input		/ /

Input subtotals per Cat 5

[Redacted Input Subtotals]

Comments

[Redacted Comments]



Print - Close Window

Date: Wed, 26 Apr 2006 05:31:01 -0700 (PST)

From: [Redacted]

Subject: [Redacted]

To: [Redacted]

INVOICE

Apple Computer International

[Redacted]

Document no:

29.03.2006

Due Date:

SHIP TO: [Redacted]  
Gordon Prentice

Delivery: [Redacted]

SOLD TO: [Redacted]  
Gordon Prentice

[Redacted]

Div. Date:  
28.03.2006

[Redacted]

Terms of Delivery: DDP UK

ORDER DATE	CUSTOMER ORDER No	APPLE ORDER No	PAYMENT TERMS
27.03.2006 Visa/MCard	[Redacted]	[Redacted]	Credit Card

Item Value	Material	Description	Quantity	Price
------------	----------	-------------	----------	-------

0010 1,545.00	[Redacted]	MBPRO 15/256VRAM CTO	1	1,545.00
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Net Price  
1,545.00

With the following configuration:  
 Processor 2.16GHz Intel Core Duo/256MB  
 Memory 2GB 667 DDR2- 2x1GB SO-DIMMs  
 Hard Drive 100GB Serial ATA Drive@7200rpm  
 Optical Drive SuperDrive (DVD±RW/CD-RW)  
 Modem None  
 Apple Software Solutions None  
 Keyboard/Mac OS Language BkLit Keyboard/Mac OS-B  
 Country Kit/AEX Airport Extreme Card&BT-B

0020 92.77	[Redacted]	MICROSOFT OFFICE 2004 ACAD-USA	1	92.77
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Net Price

[Redacted]

92.77

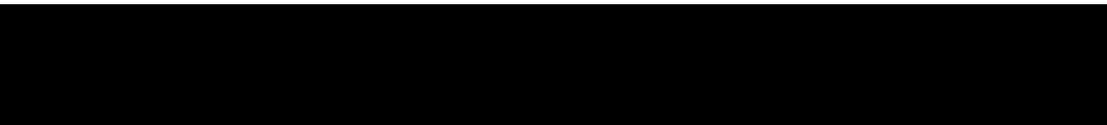
---

Items Total (w/o VAT)  
1,637.77

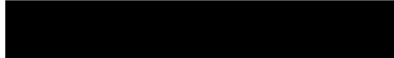
in currency GBP

---

VAT Amount	VAT Rate	VAT Basis
Sales Tax 286.61	17.500 %	1,637.77



Fax  
URL

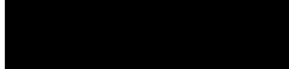


Thank you for shopping at the Apple Store.



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SERIAL NUMBERS





# Member's reimbursement form

07 MAR 2006

C1

**When to use this form**

- Use this form to ask us to reimburse you for costs you have incurred on your Parliamentary duties.

**About filling in this form**

- For details of costs you can claim for, see *Green Book* section 5.
- If you have any doubt about whether you can claim for a cost, please call 020 7219 1340.

## Your details

Name  
in CAPITAL LETTERS

GORDON PRENTICE

Constituency

PENDLE

**Office use only**

Costs/Cat 2

## Claim details

Please ensure

- your claim totals more than £100
- you provide journey details of all taxi journeys
- you attach all receipts or invoices for items of £250 and above
- any claims for petty cash do not exceed £250 per month.

You can only claim for

- costs you have actually paid
- office and surgery accommodation, equipment and supplies, work commissioned, communication and travel.

Period of claim

from 1 / 02 / 06

to 28 / 02 / 06

Allowance year

05 / 06

	Description of service or goods	Amount
Item 1	Azzurri Communication	£ 72 : 26 p
Item 2	East Lancs News Surgery ads	£ 224 : 40 p
Item 3	BT - phones	£ 191 : 09 p
Item 4	Banner Supplies	£ 62 : 32 p
Item 5	Office cleaning	£ 30 : 00 p
Item 6	Office Sundries	£ 245 : 75 p
Item 7		£ : p
Item 8		£ : p
Item 9		£ : p
Item 10		£ : p

**Office use only**

Allow or Exp/  
A/c code Cat 5

Total

£ 825 : 82 p

continued on page 2

Authorisation and declaration

I hereby authorise the use of these funds which I have received wholly, exclusively and necessarily

Signature

[Redacted signature]

MP

Date

6/3/06

Data protection

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Office use only

Validation	Initials	Date
Claims received		/ /
Signature check		/ /
Funds check		/ /
Allowable expenditure		/ /
Member Res ID & Costc		/ /
Ext type/Cat 5 & subtotals added to form		/ /
Receipts/ documentation present		/ /
Processing		
Input		/ /

Input subtotals per Cat 5

£ 517.75
£ 308.07
£
£
£
£
£
£ 825.82

Comments

[Empty comments box]



03 FEB 2006

When to use this form

- Use this form to ask us to reimburse you for costs you have incurred on your Parliamentary duties.

About filling in this form

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- If you have any doubt about whether you can claim for a cost, please call 020 7219 1340.

Your details

Name in CAPITAL LETTERS

GORDON PRENTICE

Constituency

PENDLE

Office use only

Costo/Cat 2

Claim details

Please ensure

- your claim totals more than £100
- you provide journey details of all taxi journeys
- you attach all receipts or invoices for items of £250 and above
- any claims for petty cash do not exceed £250 per month.

You can only claim for

- costs you have actually paid
- office and surgery accommodation, equipment and supplies, work commissioned, communication and travel.

Period of claim

from 1 1 1 2006 to 31 1 1 2006

Allowance year

05106

	Description of service or goods	Amount
Item 1	banquet Supplies	£ 39 : 50 p
Item 2	Easthames News -	£ 192 : 42 p
Item 3	surgery acts Office Sundries	£ 189 : 00 p
Item 4		£ : p
Item 5		£ : p
Item 6		£ : p
Item 7		£ : p
Item 8		£ : p
Item 9		£ : p
Item 10		£ : p

Office use only

Allow or Exp/  
A/c code Cat 5

Total

£ 420 : 92 p

continued on page 2

Authorisation and declaration

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

Signature

[Redacted Signature]

Date

2 / 2 / 2006

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Office use only

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

Input subtotals per Cat 5

£ 192.42
£ 228.50
£
£
£
£
£
£ 420.92

Comments

[Empty Comments Box]





Member's reimbursement form

17 JAN 2006

When to use this form

- Use this form to ask us to reimburse you for costs you have incurred on your Parliamentary duties.

About filling in this form

- For details of costs you can claim for, see *Green Book* section 5.
- If you have any doubt about whether you can claim for a cost, please call 020 7219 1340.

Your details

Name in CAPITAL LETTERS

GORDON PRENTICE

Constituency

PENDLE

Office use only

Costs/Cat 2

Claim details

Please ensure

- your claim totals more than £100
- you provide journey details of all taxi journeys
- you attach all receipts or invoices for items of £250 and above
- any claims for petty cash do not exceed £250 per month.

You can only claim for

- costs you have actually paid
- office and surgery accommodation, equipment and supplies, work commissioned, communication and travel.

Period of claim

from 01/12/05

to 31/12/05

Allowance year

05/06

	Description of service or goods	Amount
Item 1	New mobile phones - purchase	£ 60 : 00 p
Item 2	Evening News Newspapers	£ 192 : 42 p
Item 3	Surgery ads	£ 212 : 53 p
Item 4	BT internet - extension to service	£ 377 : 33 p
Item 5	photocopier lease (Inc Bel. / you have details on file.)	£ 30 : 00 p
Item 6	Office cleaning	£ 233 : 00 p
Item 7	Office sundries	£ : p
Item 8		£ : p
Item 9		£ : p
Item 10		£ : p

Total

£1105:28 p

Office use only

Allow or Exp/ A/c code Cat 5

Authorisation and declaration

I claim reimbursement of these costs which I incurred wholly, exclusively and necessarily

Signature

[Redacted Signature]

Date

16-01-2006

Data protection

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Office use only

Validation	Initials	Date
Claims received	✓	1 1
Signature check	✓	1 1
Funds check	✓	1 1
Allowable expenditure	✓	1 1
Member Res ID & Costc	✓	1 1
Ext type/Cat 5 & subtotals added to form	✓	1 1
Receipts/ documentation present	✓	1 1
Processing Input		1 1

Input subtotals per Cat 5

<del>£222.42</del>	434.95
£233.00	
£877.33	
£60.00	
£	
£	
<del>£212.53</del>	
£	
£1,105.28	

Comments

[Empty Comments Box]



Member's reimbursement form

13 DEC 2005

When to use this form

- Use this form to ask us to reimburse you for costs you have incurred on your Parliamentary duties.

About filling in this form

- For details of costs you can claim for, see *Green Book* section 1.1.
- If you have any doubt about whether you can claim for a cost, please call 020 7219 1340.

Your details

Name in CAPITAL LETTERS

GORDON PRENTICE

Constituency

PENDLE

Office use only

Costs/Cat 2

Claim details

Please ensure

- your claim totals more than £100
- you provide journey details of all taxi journeys
- you attach all receipts or invoices for items of £250 and above
- any claims for petty cash do not exceed £250 per month.

You can only claim for

- costs you have actually paid
- office and surgery accommodation, equipment and supplies, work commissioned, communication and travel.

Period of claim

from 1/11/2005 to 30/11/2005

Allowance year

05/06

	Description of service or goods	Amount
Item 1	East Haver Newsprint Surgery with	£ 223 : 49 p
Item 2	BT phones	£ 195 : 25 p
Item 3	Image Works stations overprinting	£ 230 : 50 p
Item 4	Azzurri Communication	£ 39 : 95 p
Item 5	Banner Supplies	£ 22 : 04 p
Item 6	BT internet	£ 109 : 00 p
Item 7	Office cleaning	£ 30 : 00 p
Item 8	Office sundries	£ 240 : 50 p
Item 9		£ : p
Item 10		£ : p

Office use only

Allow or Exp/  
A/c code Cat 5

Total

£ 1090 : 73 p

continued on page 2

**Authorisation and declaration**

...sively and necessarily

Signature

[Redacted Signature]

Date

12/12/05

**Data protection**

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

Office use only			Input subtotals per Cat 5	
Validation	Initials	Date		
Claims received	/	1 1	[Redacted]	£597.69
Signature check	/	1 1	[Redacted]	£493.04
Funds check	/	1 1	[Redacted]	£
Allowable expenditure	/	1 1	[Redacted]	£
Member Res ID & Costs	/	1 1	[Redacted]	£
Ext type/Cat 5 & subtotals added to form	/	1 1	[Redacted]	£
Receipts/ documentation present	/	1 1	[Redacted]	£1,090.73
Processing input		1 1	Comments	



Incidental Expenses Provision

Member's reimbursement form

VALIDATION

C1

15 OCT 2005  
15 NOV 2005

RECEIVED

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About filling in this form

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Your details

Name in CAPITAL LETTERS

GORDON PRENTICE

Constituency

PENDLE

Office use only

Costs/Cat 2

Claim details

Please ensure

- your claim totals more than £100
- you provide journey details of all taxi journeys
- you attach all receipts or invoices for items of £250 and above
- any claims for petty cash do not exceed £250 per month.

You can only claim for

- costs you have actually paid
- office and surgery accommodation, equipment and supplies, work commissioned, communication and travel.

Period of claim

from 1 1 10 05

to 31 1 10 05

Allowance year

05 1 06

Description of service or goods

Amount

Item 1

BT phones

£ 177 : 50 p

Item 2

East Lancs News-  
paper. surgery aids

£ 162 : 00 p

Item 3

Ipaq handheld PC  
repair

£ 200 : 00 p

Item 4

Banner Supplies

£ 66 : 25 p

Item 5

Azzuri Communications

£ 23 : 30 p

Item 6

Office Cleaning

£ 30 : 00 p

Item 7

Office Sundries

£ 235 : 50 p

Item 8

£ : p

Item 9

£ : p

Item 10

£ : p

Total

£ 894 : 55 p

Office use only

Allow or Exp/  
A/c code Cat 5

**Authorisation and declaration**

I claim reimbursement of these costs which I incurred wholly, exclusively and necessarily

Signature

Date

14-11-05

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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	<input checked="" type="checkbox"/>	<input type="checkbox"/> / <input type="checkbox"/> / <input type="checkbox"/>
Signature check	<input checked="" type="checkbox"/>	<input type="checkbox"/> / <input type="checkbox"/> / <input type="checkbox"/>
Funds check	<input checked="" type="checkbox"/>	<input type="checkbox"/> / <input type="checkbox"/> / <input type="checkbox"/>
Allowable expenditure	<input checked="" type="checkbox"/>	<input type="checkbox"/> / <input type="checkbox"/> / <input type="checkbox"/>
Member Res ID & Costs	<input checked="" type="checkbox"/>	<input type="checkbox"/> / <input type="checkbox"/> / <input type="checkbox"/>
Ext type/Cat 5 & subtotals added to form	<input checked="" type="checkbox"/>	<input type="checkbox"/> / <input type="checkbox"/> / <input type="checkbox"/>
Receipts/ documentation present	<input checked="" type="checkbox"/>	<input type="checkbox"/> / <input type="checkbox"/> / <input type="checkbox"/>
Processing		
Input		<input type="checkbox"/> / <input type="checkbox"/> / <input type="checkbox"/>

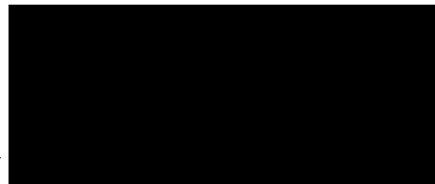
Input subtotals per Cat 5	
<input type="checkbox"/>	£ 392.80 ✓
<input type="checkbox"/>	£ 801.75 ✓
<input type="checkbox"/>	£
<input type="checkbox"/>	£
<input type="checkbox"/>	£
<input type="checkbox"/>	£ 200.00 ✓
<input type="checkbox"/>	£
<input type="checkbox"/>	£
<input type="checkbox"/>	£ 894.55 ✓

Comments

Financial Processing }

Transaction No.



Registration No.

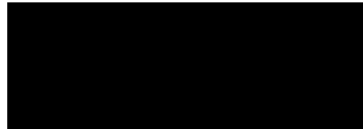


**Validation Claim Summary Sheet**

**C1**

Please write or print clearly & attach to claim

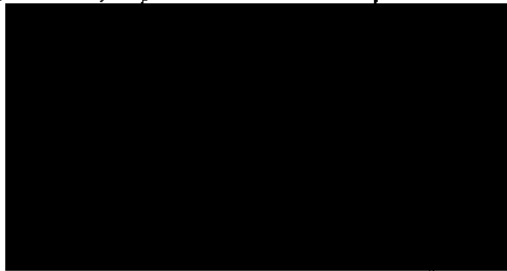
**Member Supplier ID**



**Pay recipient**

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

**Text**



**Invoice No.**

**Account code / Allowance**

**Members cost centre (Cat1)**

**Financial Year/PIRO (Cat2)**

04\_05 / 05\_06

**Expenditure type (Cat5) :**



£ 681.65

£ 42.51

£ 377.33

£ .....

£ .....

£ .....

£ .....

£ .....

£ .....

£ 1,101.49

**TOTAL**

**Comments:**

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

24/10/05

Posted by (initials & date)

25-0C-2005



Member's reimbursement form

12 OCT 2005

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About filling in this form

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- If you have any doubt about whether you can claim for a cost, please call 020 7219 1340.

Your details

Name in CAPITAL LETTERS

GORDON PRENTICE

Constituency

PENDLE

Office use only

Cost/Cat 2

Claim details

Please ensure

- your claim totals more than £100
- you provide journey details of all taxi journeys
- you attach all receipts or invoices for items of £250 and above
- any claims for petty cash do not exceed £250 per month.

You can only claim for

- costs you have actually paid
- office and surgery accommodation, equipment and supplies, work commissioned, communication and travel.

Period of claim

from 1 / 9 / 2005 to 30 / 9 / 2005

Allowance year

05 / 06

Description of service or goods

Amount

Office use only

Allow or Exp/  
A/c code Cat 5

500 = £681.65

Item 1

Information Commission £ 35 : 00 p

Item 2

~~Information Commission~~ £ ~~426~~ : 00 p

Item 3

TV licence - Constituency office £ 126 : 50 p

Item 4

East hames Newspapers £ 162 : 00 p

Item 5

- surgery acts Banner Supplies £ 42 : 51 p

Item 6

BT £ 105 : 00 p

Item 7

Office cleaning £ 30 : 00 p

Item 8

Office sundries £ 223 : 15 p

Item 9

£ : p

Item 10

£ : p

Total

£ 1,101 : 49 p


continued on page 2



**Authorisation and declaration**

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

Signature 

Date  11/10/2005

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

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

Financial Processing }

Transaction No. [REDACTED]

Registration No. [REDACTED]

**Validation Claim Summary Sheet**

**C1**

Please write or print clearly & attach to claim

**Member Supplier ID** [REDACTED]

**Pay recipient**

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

**Text**

JULY 05

**Invoice No.** [REDACTED]

**Account code / Allowance** [REDACTED]

**Members cost centre (Cat1)** [REDACTED]

**Financial Year/PIRO (Cat2)**

04\_05 / 05\_06

**Expenditure type (Cat5) :**

[REDACTED]

£ 649.61

£ .....

£ .....

£ .....

£ .....

£ .....

£ .....

£ .....

£ .....

**TOTAL**

£ 649.61

**Comments:**

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

[REDACTED] 14/09

Posted by (initials & date)

[REDACTED]  
14 SEP 2005



Member's reimbursement form

08 SEP 2005

When to use this form

- Use this form to ask us to reimburse you for costs you have incurred on your Parliamentary duties.

About filling in this form

- For details of costs you can claim for, see *Green Book* section 5.
- If you have any doubt about whether you can claim for a cost, please call 020 7219 1340.

Your details

Name in CAPITAL LETTERS

GORDON PRENTICE

Constituency

PENDLE

Office use only

Costs/Cat 2

Claim details

Please ensure

- your claim totals more than £100
- you provide journey details of all taxi journeys
- you attach all receipts or invoices for items of £250 and above
- any claims for petty cash do not exceed £250 per month.

You can only claim for

- costs you have actually paid
- office and surgery accommodation, equipment and supplies, work commissioned, communication and travel.

Period of claim

from 1107/05 to 31/07/05

Allowance year

05/06

	Description of service or goods	Amount
Item 1	Surgery notice board - repainting sign	£ 150 : 00 p
Item 2	Protect security maintenance contract	£ 52 : 88 p
Item 3	BT internet	£ 105 : 00 p
Item 4	East Lancs newspapers, Surgery ads	£ 162 : 73 p
Item 5	Office cleaning	£ 30 : 00 p
Item 6	Office sundries	£ 149 : 00 p
Item 7		£ : p
Item 8		£ : p
Item 9		£ : p
Item 10		£ : p

Office use only

Allow or Exp/ A/c code Cat 5

Total

£ 649 : 61 p

continued on page 2

**Authorisation and declaration**

Signature

[Redacted Signature]

wholly, exclusively and necessarily

MP

Date

7 / 9 / 05

**Data protection**

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Send your completed form to

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

Office use only		
Validation	Initials	Date
Claims received	<input type="text"/>	<input type="text"/>
Signature check	<input type="text"/>	<input type="text"/>
Funds check	<input type="text"/>	<input type="text"/>
Allowable expenditure	<input type="text"/>	<input type="text"/>
Member Res ID & Costs	<input type="text"/>	<input type="text"/>
Ext type/Cat 5 & subtotals added to form	<input type="text"/>	<input type="text"/>
Receipts/ documentation present	<input type="text"/>	<input type="text"/>
Processing Input	<input type="text"/>	<input type="text"/>

Input subtotals per Cat 5	
£	<input type="text"/>
£	<input type="text"/>
£	<input type="text"/>
£	<input type="text"/>
£	<input type="text"/>
£	<input type="text"/>
£	<input type="text"/>

Comments

Financial Processing }

Transaction No. [REDACTED]

Registration No. [REDACTED]

**Validation Claim Summary Sheet**

**C1**

Please write or print clearly & attach to claim

**Member Supplier ID** [REDACTED]

**Pay recipient**

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

**Text**

AUG 05

**Invoice No.** [REDACTED]

**Account code / Allowance** [REDACTED]

**Members cost centre (Cat1)** [REDACTED]

**Financial Year/PIRO (Cat2)**

~~04\_05~~ / 05\_06

**Expenditure type (Cat5) :**

[REDACTED]

£ 1023 . 96

£ .....

£ .....

£ .....

£ .....

£ .....

£ .....

£ .....

£ .....

£ 1023 . 96

**TOTAL**

**Comments:**

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

[REDACTED]

14/09

Posted by (initials & date)

14 SEP 2005

[REDACTED]



Member's reimbursement form

09 SEP 2005

When to use this form

- Use this form to ask us to reimburse you for costs you have incurred on your Parliamentary duties.

About filling in this form

- For details of costs you can claim for, see *Green Book* section 5.
- If you have any doubt about whether you can claim for a cost, please call 020 7219 1340.

Your details

Name in CAPITAL LETTERS

GORDON PRENTICE

Constituency

PENDLE

Office use only

Costc/Cat 2

Claim details

Please ensure

- your claim totals more than £100
- you provide journey details of all taxi journeys
- you attach all receipts or invoices for items of £250 and above
- any claims for petty cash do not exceed £250 per month.

You can only claim for

- costs you have actually paid
- office and surgery accommodation, equipment and supplies, work commissioned, communication and travel.

Period of claim

from 1108105

to 31108105

Allowance year

05106

	Description of service or goods	Amount
Item 1	BT Phones	£ 199 : 27 p
Item 2	Incase Works stationery over printing	£ 232 : 65 p
Item 3	carb boxes news papers - Surgery	£ 162 : 00 p
Item 4	Azzumi Communications <sup>ads</sup>	£ 43 : 08 p
Item 5	Banner supplies	£ 146 : 96 p
Item 6	Office cleaning	£ 30 : 00 p
Item 7	Office Sundries	£ 210 : 00 p
Item 8		£ : p
Item 9		£ : p
Item 10		£ : p

Office use only

Allow or Exp/  
A/c code Cat 5

Total

£1023:96 p

continued on page 2

**Authorisation and declaration**

I declare that the amount of these costs which is covered wholly, exclusively and necessarily

Signature

[Redacted Signature]

MP

Date

6/9/2005

**Data protection**

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Send your completed form to

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

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

Financial Processing }

Transaction No. [REDACTED] .....

Registration No. [REDACTED] .....

**Validation Claim Summary Sheet**

Please write or print clearly & attach to claim

**C1**

**Member Supplier ID**

**Pay recipient**

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

**Text**

JUNE 05

**Invoice No.**

**Account code / Allowance**

**Members cost centre (Cat1)**

**Financial Year/PIRO (Cat2)**

~~04\_05~~ / 05\_06

**Expenditure type (Cat5) :**



E 478.87

E 180.04

E 422.00

E 469.90

E .....

E .....

E 135.75

E .....

E .....

E 1686.56

**TOTAL**

**Comments:**

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

[REDACTED] 14/07/05 .....

Posted by (initials & date)

[REDACTED] 15/7/05 .....





Member's reimbursement form

06 JUL 2005

When to use this form

- Use this form to ask us to reimburse you for costs you have incurred on your Parliamentary duties.

About filling in this form

- For details of costs you can claim for, see *Green Book* section 5.
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Your details

Name in CAPITAL LETTERS

GORDON PRENTICE

Constituency

PENDLE

Office use only

Claim details

Please ensure

- your claim totals more than £100
- you provide journey details of all taxi journeys
- you attach all receipts or invoices for items of £250 and above
- any claims for petty cash do not exceed £250 per month.

You can only claim for

- costs you have actually paid
- office and surgery accommodation, equipment and supplies, work commissioned, communication and travel.

Period of claim

from 1/06/05

to 30/06/05

Allowance year

05/06

receipts enclosed

	Description of service or goods	Amount
Item 1	Net Nation - Web Site Hosting	£ 135 : 75 p
Item 2	photocopied lease - you bank details	£ 422 : 00 p
Item 3	IPAQ PDA (receipt enclosed)	£ 339 : 95 p
Item 4	Electronic translation - equipment	£ 129 : 95 p
Item 5	Banani Business Supplies	£ 68 : 01 p
Item 6	BT phones	£ 188 : 60 p
Item 7	Azzurri Communication	£ 134 : 77 p
Item 8	East Lancs News - papers - surgery etc	£ 112 : 03 p
Item 9	Office Cleaning	£ 30 : 00 p
Item 10	Office Sundries	£ 125 : 50 p

Total


£1686 : 56 p

Office use only

Allow or Exp/ A/c code Cat 5

**Authorisation and declaration**

I claim reimbursement of these costs which I incurred wholly, exclusively and necessarily

Signature  MP  
Date 5 July 2005

**Data protection**

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

Office use only		Input subtotals per Cat 5	
Validation	Initials Date		
Claims received	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/>	£ <input type="text"/>
Signature check	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/>	£ <input type="text"/>
Funds check	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/>	£ <input type="text"/>
Allowable expenditure	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/>	£ <input type="text"/>
Member Res ID & Costs	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/>	£ <input type="text"/>
Ext type/Cat 5 & subtotals added to form	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/>	£ <input type="text"/>
Receipts/ documentation present	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/>	£ <input type="text"/>
<b>Processing</b>			
Input	<input type="text"/> / <input type="text"/> / <input type="text"/>		
		<b>Comments</b>	
		<input style="width: 100%; height: 100%;" type="text"/>	



# ELECTRONICS

AT KAMLA ELECTRONICS

PSION • CASIO • SHARP • HEWLETT PACKARD • TEXAS  
MICRO PDA • CALCULATORS • POCKET PC • ELECTRONICS



CUSTOMERS NAME: G. PRENTICE

ADDRESS: \_\_\_\_\_

INVOICE



DATE 30/6/5

QTY	MODEL & DESCRIPTION	@	AMOUNT
<u>1</u>			<u>R9 m</u>

**METHOD OF PAYMENT**

CREDIT CARD	CASH	CHEQUE
<u> </u>		

SUB TOTAL

VAT %

TOTAL AMOUNT

R9 m

**CONDITIONS OF SALE**

1. Do not lose this invoice as this is your guarantee. No duplicate invoice will be issued.
2. 12 months parts & labour guarantee.
3. Goods mishandled can not be exchanged or credited.
4. Customers statutory rights are not affected.
5. All goods sold subject to manufacturer's guarantee.
6. LCD Screen are not covered by guarantee.





# ELECTRONICS

AT KAMLA ELECTRONICS

PSION • CASIO • SHARP • HEWLETT PACKARD • TEXAS  
MICRO PDA • CALCULATORS • POCKET PC • ELECTRONICS

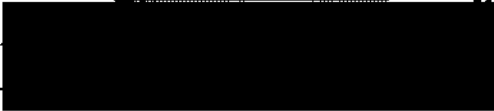


CUSTOMERS NAME: G. PRENTICE.

INVOICE



ADDRESS:



DATE 30/6/15

QTY	MODEL & DESCRIPTION	@	AMOUNT
1	HP 4700		339.95
	TWC 5090 3WR		



### METHOD OF PAYMENT

CREDIT CARD	CASH	CHEQUE

SUB  
TOTAL

VAT %

TOTAL  
AMOUNT

100
339.95

### CONDITIONS OF SALE

1. Do not lose this invoice as this is your guarantee. No duplicate invoice will be issued.
2. 12 months parts & labour guarantee.
3. Goods mishandled can not be exchanged or credited.
4. Customers statutory rights are not affected.
5. All goods sold subject to manufacturer's guarantee.
6. LCD Screen are not covered by guarantee.



Financial Processing }

Transaction No. [REDACTED]

Registration No. [REDACTED]

**Validation Claim Summary Sheet**

Please write or print clearly & attach to claim

**C1**

**Member Supplier ID** [REDACTED]

**Pay recipient**

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

**Text**

MAY '05

**Invoice No.** [REDACTED]

**Account code / Allowance** [REDACTED]

**Members cost centre (Cat1)** [REDACTED]

**Financial Year/PIRO (Cat2)**

~~05\_05~~ / 05\_06

**Expenditure type (Cat5) :**

[REDACTED]

£ 180.00

£ 164.94

£ .....

£ .....

£ .....

£ .....

£ .....

£ .....

£ .....

£ 344.94

**TOTAL**

**Comments:**

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

.....0.9 JUN 2005.....

Posted by (initials & date)

.....

09 JUN 2005



Member's reimbursement form

31 MAY 2005

When to use this form

- Use this form to ask us to reimburse you for costs you have incurred on your Parliamentary duties.

About filling in this form

- For details of costs you can claim for, see *Green Book* section 5.
- If you have any doubt about whether you can claim for a cost, please call 020 7219 1340.

Your details

Name in CAPITAL LETTERS

GORDON PRENTICE

Constituency

PENDLE

Office use only

Cost/Cat 2

Claim details

Please ensure

- your claim totals more than £100
- you provide journey details of all taxi journeys
- you attach all receipts or invoices for items of £250 and above
- any claims for petty cash do not exceed £250 per month.

You can only claim for

- costs you have actually paid
- office and surgery accommodation, equipment and supplies, work commissioned, communication and travel.

Period of claim

from 1 1 5 1 0 5 to 3 1 1 5 1 0 5

Allowance year

0 5 1 0 6

	Description of service or goods	Amount
Item 1	Bayer Business Supplies	£ 54 : 44 p
Item 2	Surgery and vest in court Board - annual cost	£ 150 : 00 p
Item 3	Office cleaning	£ 30 : 00 p
Item 4	Office Sundries	£ 110 : 50 p
Item 5		£ : p
Item 6		£ : p
Item 7		£ : p
Item 8		£ : p
Item 9		£ : p
Item 10		£ : p

Office use only

Allow or Exp/ A/c code Cat 5

Total

£ 344 : 94 p

continued on page 2

**Authorisation and declaration**

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

Signature 

Date 30 May 05

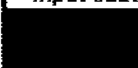
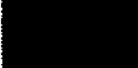
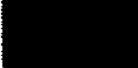
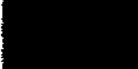
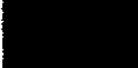
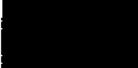
**Data protection**

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

Financial Processing }

Transaction No. [REDACTED] .....

Registration No. [REDACTED] .....

**Validation Claim Summary Sheet**

**C1**

Please write or print clearly & attach to claim

**Member Supplier ID** [REDACTED]

**Pay recipient**

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

**Text**

APRIL '05

**Invoice No.** [REDACTED]

**Account code / Allowance** [REDACTED]

**Members cost centre (Cat1)** [REDACTED]

**Financial Year/PIRO (Cat2)**

~~05\_05~~ 05\_06

**Expenditure type (Cat5) :**

[REDACTED]

£ 310 : 79

£ 149 : 20

£ 422 : 53

£ .....

£ .....

£ .....

£ .....

£ .....

£ .....

£ .....

**TOTAL**

**Comments:**

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

09 JUN 2005 [REDACTED]

Posted by (initials & date)

[REDACTED] 09 JUN 2005





Member's reimbursement form

31 MAY 2005

When to use this form

- Use this form to ask us to reimburse you for costs you have incurred on your Parliamentary duties.

About filling in this form

- For details of costs you can claim for, see *Green Book* section 5.
- If you have any doubt about whether you can claim for a cost, please call 020 7219 1340.

Your details

Name in CAPITAL LETTERS

GORDON PRENTICE

Constituency

PENDLE

Office use only

Cost/Cat 2

Claim details

Please ensure

- your claim totals more than £100
- you provide journey details of all taxi journeys
- you attach all receipts or invoices for items of £250 and above
- any claims for petty cash do not exceed £250 per month.

You can only claim for

- costs you have actually paid
- office and surgery accommodation, equipment and supplies, work commissioned, communication and travel.

Period of claim

from 1 104105 to 30 104105

Allowance year

05106

	Description of service or goods	Amount
Item 1	Earl's hours News <sup>surgery ads</sup>	£ 190 : 00 p
Item 2	Photocopied <sup>leaves</sup> Fees <sup>Optical</sup> <sup>has</sup> <sup>details</sup>	£ 422 : 53 p
Item 3	Office cleaning	£ 30 : 00 p
Item 4	BT Phones	£ 90 : 79 p
Item 5	Office Sundries	£ 149 : 20 p
Item 6		£ : p
Item 7		£ : p
Item 8		£ : p
Item 9		£ : p
Item 10		£ : p

Office use only

Allow or Exp/ A/c code Cat 5

Total

£ 882 : 52 p

continued on page 2

**Authorisation and declaration**

I claim reimbursement of these costs which I incurred wholly, exclusively and necessarily

Signature

[Redacted Signature]

Date

30 May 2005

**Data protection**

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

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

Financial Processing }

Transaction No. ....

Registration No. ....

**Validation Claim Summary Sheet**

Please write or print clearly & attach to claim

**C1**

**Member Supplier ID**



**Pay recipient**

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

**Text**

FEB '05

**Invoice No.**



**Account code / Allowance**

**Members cost centre (Cat1)**

**Financial Year/PIRO (Cat2)**

04\_05 / ~~05\_06~~

**Expenditure type (Cat5) :**



SEE APR '05 CLAIM ATTACHED. PROCESSED

£ 310.79

£ 149.20

£ 422.53

£ .....

£ .....

£ .....

£ .....

£ .....

£ .....

£ 882.52

TOTAL

**Comments:**

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

Posted by (initials & date) .....



Incidental Expenses Provision

C1

Member's reimbursement form

1 MAY 2005

When to use this form

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About filling in this form

- For details of costs you can claim for, see *Green Book* section 5.
- If you have any doubt about whether you can claim for a cost, please call 020 7219 1340.

Your details

Name in CAPITAL LETTERS

GORDON PRENTICE

Constituency

PENDLE

Office use only

Costs/Cat 2

Claim details

Please ensure

- your claim totals more than £100
- you provide journey details of all taxi journeys
- you attach all receipts or invoices for items of £250 and above
- any claims for petty cash do not exceed £250 per month.

You can only claim for

- costs you have actually paid
- office and surgery accommodation, equipment and supplies, work commissioned, communication and travel.

Period of claim

from 1 1 02 05 to 28 1 02 05

Allowance year

04 1 05

	Description of service or goods	Amount
Item 1	last times News - surgery ads	£ 190 : 00 p
Item 2	photocopy lease - you have details	£ 422 : 53 p
Item 3	Office cleaning	£ 30 : 00 p
Item 4	BT phones	£ 90 : 79 p
Item 5	Office sundries	£ 149 : 20 p
Item 6		£ : p
Item 7		£ : p
Item 8		£ : p
Item 9		£ : p
Item 10		£ : p

Office use only

Allow or Exp/ A/c code Cat 5

Total

£882 : 52 p

continued on page 2

**Authorisation and declaration**

I claim reimbursement of these costs which I incurred wholly, exclusively and necessarily

Signature

[Redacted Signature]

Date

28 April 2005

**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			Input subtotals per Cat 5	
Validation	Initials	Date		
Claims received	<input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>	[Redacted]	£ <input type="text"/>
Signature check	<input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>		£ <input type="text"/>
Funds check	<input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>		£ <input type="text"/>
Allowable expenditure	<input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>		£ <input type="text"/>
Member Res ID & Costs	<input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>		£ <input type="text"/>
Ext type/Cat 5 & subtotals added to form	<input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>		£ <input type="text"/>
Receipts/ documentation present	<input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>		£ <input type="text"/>
Processing			Comments	
Input	<input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>		