

CM

Financial Processing )

Transaction No. [REDACTED]

Registration No. [REDACTED]

**Validation TRAINING CLAIM Summary Sheet**

**DIRECT ON AGRESSO TRAINING**

Please write or print clearly & attach to claim

RES ID (Info Only Payee Name [REDACTED])

Invoice No

Date 14/12/07 ✓ Date Received 17/12/07 ✓

Text [REDACTED]

Account code / Allowance [REDACTED] ✓

Members cost centre (Cat1) [REDACTED] ✓

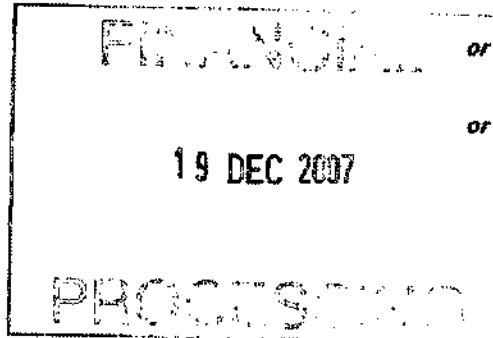
Financial Year/PIRO (Cat2) 06\_07 / 07\_08

Who code? (Cat3)

N/A (FOR MEMBERS)  
NB: Only Enter WHO CODES for Spouse  
Children, Employees

R \_\_\_\_\_

or



or

or

MPSTAFF

MPSPOUSE

Expenditure type (Cat5):

[REDACTED] ✓

£ 147.30 ✓

514\_ \_ \_

£ .....

Total

£ 147.30 ✓

Text  
e.g. [REDACTED]

Journey Processing Tick List:	Please delete where appropriate	Date / Initials
Check valid training course	Standard / <del>ET</del> / unauthorised	[REDACTED]
Check EMPLOYEE/MEMBER	Authorised / unauthorised	[REDACTED]

Comments:

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


Posted by (Initials & date) .....

[REDACTED]


[REDACTED]				
Class	Ticket type	Adult	Child	
STD	SAVER SINGLE	ONE	NIL	SGL
	Start date	Number		
	[REDACTED]	[REDACTED]		
From	Valid until	Price		
[REDACTED]	[REDACTED]	E58.70 X		
To	Route	[REDACTED]		
[REDACTED]	* ANY PERMITTED	[REDACTED]		
[REDACTED]				



Class	Ticket type	Adult	Child
STD	ADVANCE Z SGL A	ONE	MIL SGL
	Start date	Number	
From	*	Valid until	Price
			£82.00 X
To		Route	
		VIRGIN TRNS ONLY	



Class	Ticket type	Start date	Price
STD	PEAK TCD	[REDACTED]	£6.60 X
Status	Valid until	[REDACTED]	[REDACTED]
Between	[REDACTED]	[REDACTED]	[REDACTED]
Route	* & R12 *	ZONES	[REDACTED]
ANY PERMITTED			





Communications Allowance  
Member's reimbursement form

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

About filling in this form  For details of costs you can claim for please refer to booklet on Communications Allowance.  
 If you have any doubt about whether you can claim for a cost, please call 020 7219 1340.

**Your details**

Name in CAPITAL LETTERS

RT. HON. JANE KENNEDY M.P.

Constituency

LIVERPOOL WAINTRREE

Office use only

Costs

M

**Claim details**

You can only claim for  costs you have actually paid.

Please ensure  you attach all receipts or invoices for items of £250 and

Period of claim from 24/03/08 to 24/03/08 Allowance year 07/08

Description of service or goods

Amount

DIGITAL CAMERA

£ 307 : 98 p

£ \_\_\_\_\_ : \_\_\_\_\_ p

£ \_\_\_\_\_ : \_\_\_\_\_ p

£ \_\_\_\_\_ : \_\_\_\_\_ p

£ \_\_\_\_\_ : \_\_\_\_\_ p

£ \_\_\_\_\_ : \_\_\_\_\_ p

£ \_\_\_\_\_ : \_\_\_\_\_ p

Total

£ 307 : 98 p

Office use only

Allow. / Exp. Type (cat5)

**Authorisation and declaration**

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

Signature

MP

Date

24/3/08

**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 HM Revenue & Customs. 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**

Initials / Date

Input subtotals per Cat 5

Validation completed

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£

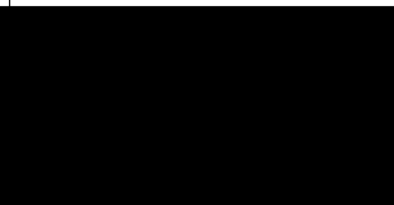
£

**Comments**

Camel Group plc



Store: 1104 SPEKE  
Order No: [REDACTED]  
Trans. No: [REDACTED]  
Date: 24/03/08 15:27  
Colleague: [REDACTED]



SALE

DIGITAL CAMERAS

257184 CANO EDS-3500 1 319.99  
Ex-Display 45.00-

MEMORY CARDS

[REDACTED] 1 32.99

TOTAL £ 307.98  
VAT@17.5%(incl) 45.87

VISA DEBIT 307.98



09/06 08/08



TOTAL PAID £ 307.98

