



Member's reimbursement form

When to use this form

Use this form on your Parli...

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

RT HON JOHN PRESCOTT MP

Constituency

KINGSTON UPON HULL EAST

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 OCT 2005 to MAR 2006

Allowance year

05 / 06

Table with 3 columns: Item number, Description of service or goods, and Amount. Item 1: PLEASE REFER TO ATTACHED NOTE, £3,000:00 p.

26 MAY 2006

Total

£3,000:00 p

continued on page 2

Authorisation and declaration

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

Signature *

[Redacted Signature]

MP

Date

06 APRIL 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

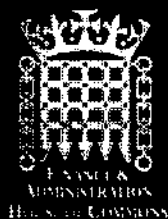
Validation	Initials	Date
Claims received		/ /
Signature check		/ /
Funds check		/ /
Allowable expenditure		/ /
Member Res ID & Costc		/ /
Ext type/Cat 5 & subtotals added to form		/ /
Receipts/ documentation present		/ /
Processing		
Input		/ /

Input subtotals per Cat 5

[Redacted]	£ 3,000
[Redacted]	£
[Redacted]	£
[Redacted]	£
[Redacted]	£
[Redacted]	£
[Redacted]	£
[Redacted]	£
[Redacted]	£ 3,000

Comments

[Empty Comments Box]



Member's reimbursement form

When to use this form

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

About filling in this form

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

Your details

Name in CAPITAL LETTERS

RT HON JOHN PRESCOTT MP

Constituency

KINGSTON UPON HULL EAST

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.



23/5/06

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

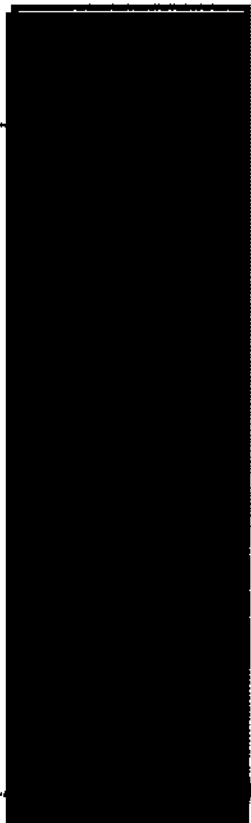
from 01 / 04 / 05

to 31 / 03 / 06

Allowance year

05 / 06

	Description of service or goods	Amount
Item 1	LAPTOP COMPUTER	£ 656 : 49 p
Item 2	WITH PRINTER +	£ : p
Item 3	INSURANCE	£ : p
Item 4		£ : p
Item 5		£ : p
Item 6		£ : p
Item 7		£ : p
Item 8		£ : p
Item 9		£ : p
Item 10		£ : p



Total

£ 656 : 49 p

continued on page 2

26 MAY 2005

Authorisation and declaration

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

Signature

[Redacted Signature]

MP

Date

06 APRIL 2006

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

Office use only

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

Input subtotals per Cat 5

£
£
£
£
£
£656.49 ✓
£
£
£656.49 ✓

Comments

[Empty Comments Box]



SALES RECEIPT

Trans [REDACTED]

Comet Store: [REDACTED]

Manager : [REDACTED]
Salesperson: [REDACTED]

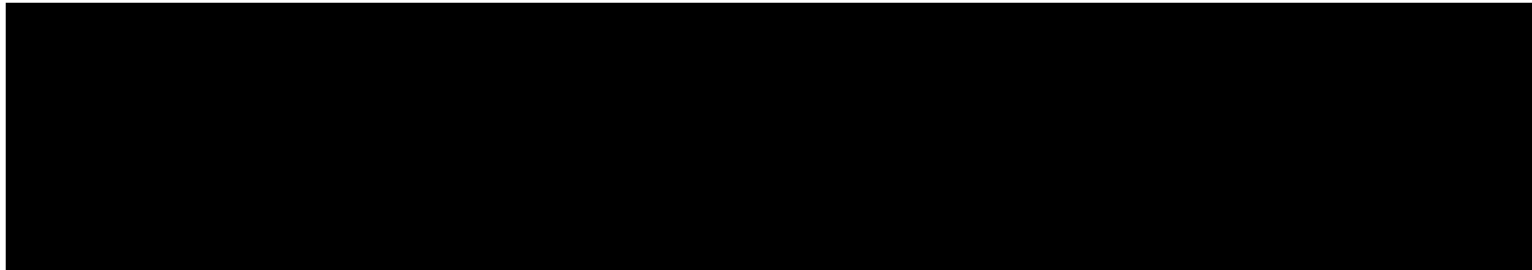


Customer Address :
MR J PRESCOTT



ITEM DETAILS	QTY	VALUE	PAYMENT DETAILS	VALUE
SALE			VISA DEBIT	656.49
C46 ESSENTIALS PACKAGE			[REDACTED]	
283 745537 PROL PL-USB001-0	1	8.99		
11 PACKAGES		1.92-		
286 B68327 EPSD T036140	1	12.49		
11 PACKAGES		1.00-		
286 B68343 EPSD T037040	1	16.99		
11 PACKAGES		1.00-		
582 196045 EPSD STYLUS C46	1	39.99		
11 PACKAGES		15.00-		
576 287016 ACER TM241JLH	1	399.00		
284 B93623 XERD A4 PAPER X5	1	2.97		
281 207080 HANA 26916 BAG	1	34.99		
27379 LAP <C449.99	1	159.99		
for 287016 J1009087 24/12/05				

Continued on page: 2





SALES RECEIPT

Trans [REDACTED]

[REDACTED]

Comet Store: [REDACTED]

[REDACTED]

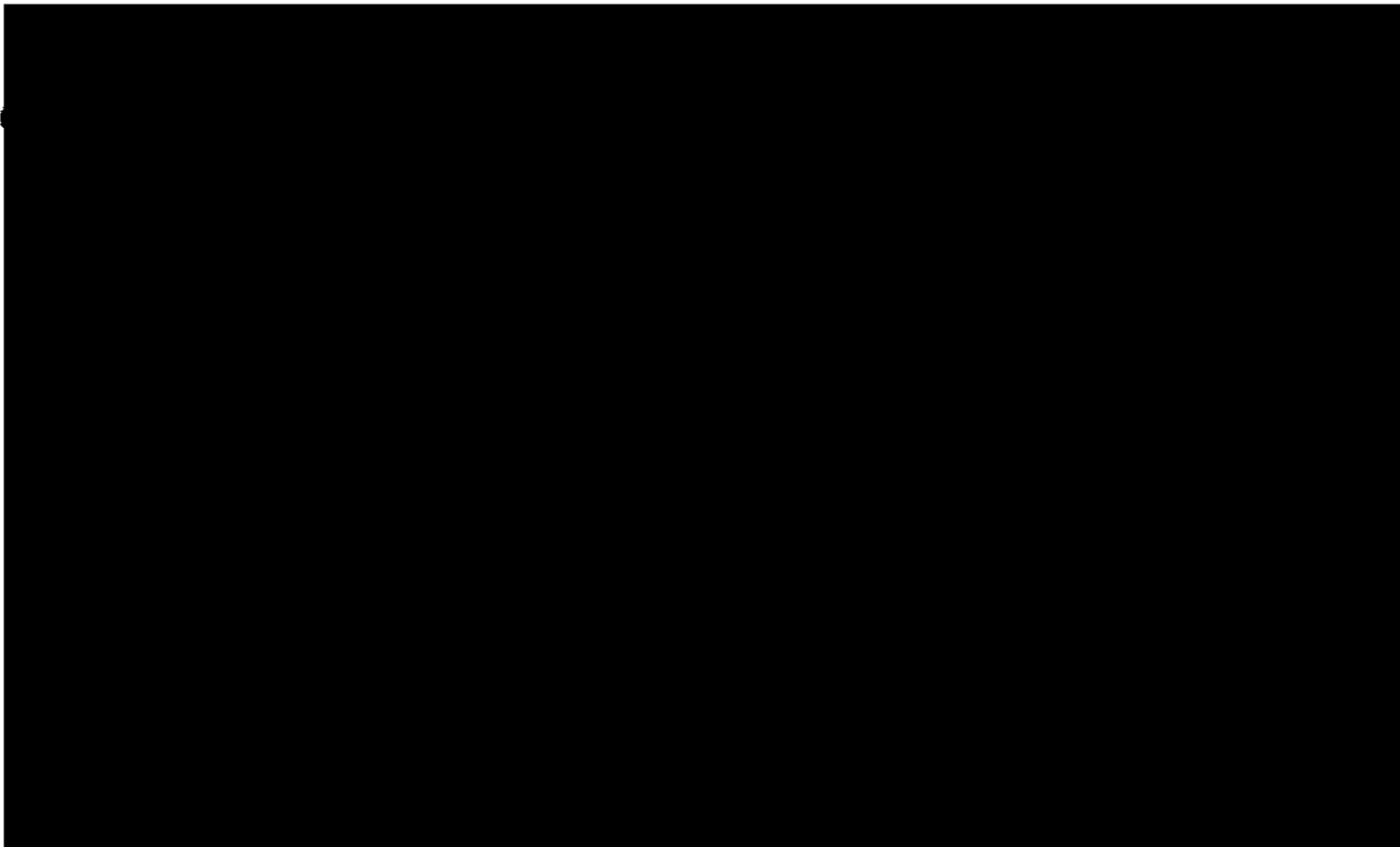
Manager : [REDACTED]
Salesperson: [REDACTED]

Customer Address :
MR J PRESCOTT
[REDACTED]

ITEM DETAILS	QTY	VALUE	PAYMENT DETAILS	VALUE
-----	---	----	-----	----

Continued from page: 1

Total	-----	£656.49	Total Paid	-----	£656.49
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EXTENDED WARRANTY QUOTATION PURCHASE AGREEMENT

Store: [REDACTED]
Salesperson: [REDACTED]
Purchase Date: 24/12/05



Customer Address:
MR. J. PRESCOTT



Product: 00287016 ACER TM2413LH

Warranties purchased for the above product:

00027379 LAP <C449.99 1+2

159.99



Customer Signature

Date: 24/12/05

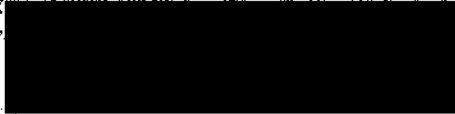
TOTAL PRODUCT COVER

This is an important document; please keep it in a safe place

POLICY DETAILS

Name and address

MR J PRESCOTT



Certificate No



Date of issue:

24/12/2005

Purchase date:

24/12/2005

Insurance start:

24/12/2005

Insurance expiry:

23/12/2008

Policy number

Appliance Code & description

Make/Model

Appliance purchase price



00287016
ENTRY LEVEL LAPTOP

ACER TM2413LM

399.00



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
Constituency

RT HON JOHN PRESCOTT
KINGSTON UPON HULL EAST



Claim details

Please ensure
You **must** specify
You can specify

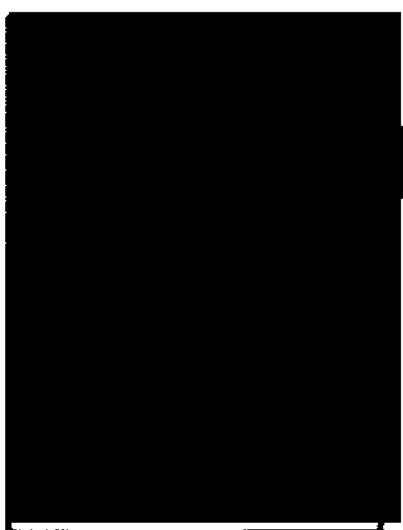
- your claim totals more than £100 – this will enable us to process your claim more promptly
- any claims for petty cash do not exceed £250 per month
- you attach all supplier invoices.
- the Incidental Expenses Provision for costs that include office and surgery accommodation, equipment and supplies, communication and travel.
- the Incidental Expenses Provision or the Staffing Allowance for costs that include work commissioned or bought in services.

Date of claim
Allowance year

06 / 04 / 06
05 / 06 ✓ ✓

Incidental Expenses Provision claims

	Suppliers	Amount
Item 1	EIS PUBLICATIONS	£ 775 : 50 p
Item 2		£ : p
Item 3		£ : p
Item 4		£ : p
Item 5		£ : p



£ 775 : 50 p

Claim details continued

Staffing Allowance claims

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

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

Authorisation and declaration

 Signature

posts incurred wholly,
 parliamentary duties.

Date

06 / 04 / 06

Data protection

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Send your completed form to

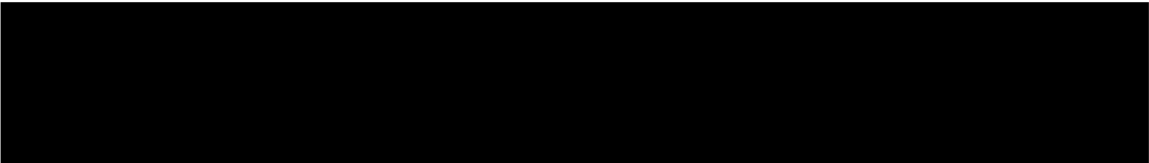
Validation Team, Operations Directorate,
 Department of Finance & Administration, House of Commons, London SW1A 0AA

Office use only			
Validation	Initials	Date	
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


Date 23.03.2006


To the editing, new design layout, proofing, scanning, pre-press and forwarding to printer of PARLIAMENTARY NEWSLETTER @ £75.00 per page layout and £25.00 per page proofing. £5.00 per photo scanning and separation. Sub total = £460.00
New design concept fee = £200.00


New sub total £660.00
Plus VAT@ 17.5% = £115.50
TOTAL = £775.50

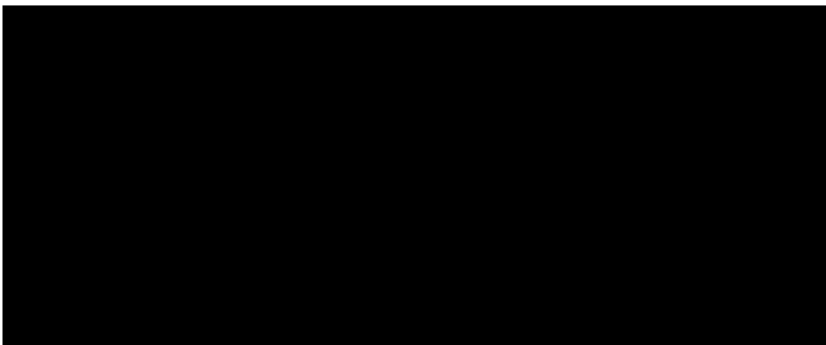
If paying by cheque, please make payable to: EIS PUBLICATIONS Ltd.

If by BACS or electronic transfer; account details are as follows:






 23/05/06





 24 MAY 2006



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.
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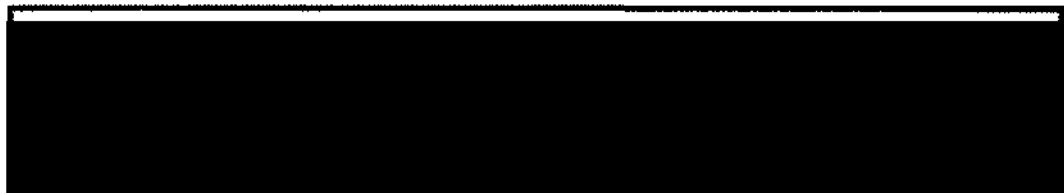
Your details

Name in CAPITAL LETTERS

RT HON JOHN PRESCOTT

Constituency

KINGSTON UPON HULL EAST



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

06 / 04 / 06

Allowance year

05 / 06

Incidental Expenses Provision claims

	Suppliers	Amount
Item 1	BROWN DISTRIBUTION	£ 800 : 00 p
Item 2		£ : p
Item 3		£ : p
Item 4		£ : p
Item 5		£ : p

Total £ 800 : 00 p

Claim details continued

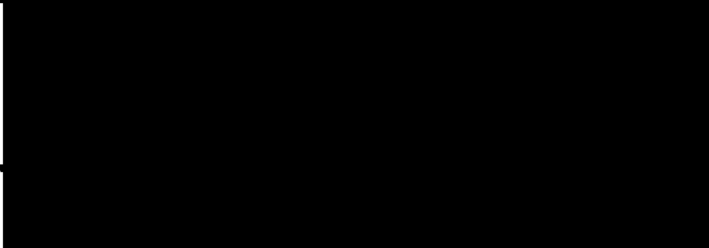
Staffing Allowance claims

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

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

Authorisation and declaration

Signature



Date

08 / 04 / 06

costs incurred wholly, parliamentary duties.

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	_____	____/____/____	
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

BROWNS
Distribution
Leaflet Distributors

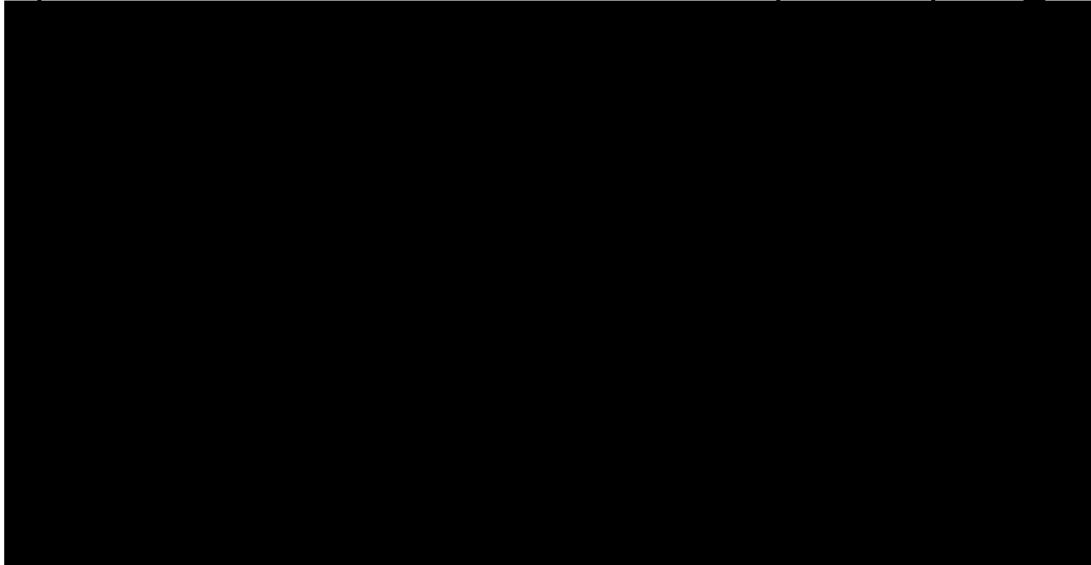


THE Rt Hon
JOHN PRECOTT M.P.

Invoice No. [REDACTED]

Date 04 - APRIL - 06

Details	£	p
40,000 NEWSLETTERS @ £20.00 PER 1000		



[REDACTED]	Invoice Total	£800	00
------------	---------------	------	----

Sales Invoice

Date: 7.11.05 Invoice No:

From: LETTONAUX DISTRIBUTION

To: Mr. Hon. John Prescott M.P.

V.A.T. Regd No: Order No:

Qty	Description	Amount exclusive of V.A.T. £/€*	V.A.T. Net £/€*
120,000	CONCRETE DISTRIBUTION		
	AROUND DRIVE, SOUTHWEST		
	WALL, HOLDINGS AND		
	MATERIAL WARRS AT	400.00	
	120 001 000		

Sub total exc. V.A.T. £/€*

V.A.T. £/€*

Total Due £/€* 400.00



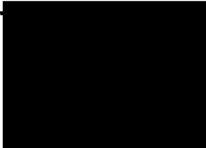
Direct payment of suppliers

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

RT HON JOHN PRESCOTT

Constituency

KINGSTON UPON HULL EAST



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

10 / 11 / 05

Allowance year

05 / 06

Incidental Expenses Provision claims

	Suppliers	Amount
Item 1	LETTERS or DISTRIBUTION	£ 400 : 00 p
Item 2		£ : p
Item 3		£ : p
Item 4		£ : p
Item 5		£ : p

Total £400 : 00 p

Claim details continued

Staffing Allowance claims

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

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

Authorisation and declaration

I am responsible for the payment of costs incurred wholly or in part in respect of my Parliamentary duties.

Signature _____ MP

Date 10 / 11 / 05

Data protection

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

Please use margin for comments



Direct payment of suppliers

VALIDATION RECEIVED - 7 NOV 2005

When to use this form

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

About filling in this form

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Your details

Name in CAPITAL LETTERS

RT HON JOHN PRESCOTT

Constituency

KINGSTON UPON HULL EAST

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Please ensure

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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

03 / 11 / 05

Allowance year

05 / 06

Incidental Expenses Provision claims

Table with 2 columns: Suppliers, Amount. Row 1: EIS PUBLICATIONS, £836:60 p. Total: £836:60 p.

Claim details continued

Staffing Allowance claims

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

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

Authorisation and declaration

I declare that the above information is correct and true, and that it has occurred wholly, or in part, in the course of my official duties.

Signature

Date 03 / 11 / 05

Data protection

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

Please use margin for comments

INVOICE


Date 05.10.2005


To the editing, design layout, proofing, scanning and forwarding to printer of
PARLIAMENTARY NEWSLETTER @ £75.00 per page design layout and £23.00 per
page proofing. £5.00 per page scanning = £412.00

To the editing, design layout, scanning of PARLIAMENTARY NEWSLETTER
(UNPUBLISHED) £300.00.

Sub Total = £712.00

VAT @ 17.5% = £124.60

Total due = £836.60



16 NOV 2005 



Direct payment of suppliers

VALIDATION
- 7 NOV 2005
RECEIVED
Page 1 of 2

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

Your details

Name
in CAPITAL LETTERS
Constituency

RT HON JOHN PRESCOTT
KINGSTON UPON HULL EAST

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 03 / 11 / 05
Allowance year 05 / 06

Incidental Expenses Provision claims

Suppliers	Amount
Item 1 <u>BROWNS DISTRIBUTION</u>	£ 400 : 00 p
Item 2 _____	£ _____ : _____ p
Item 3 _____	£ _____ : _____ p
Item 4 _____	£ _____ : _____ p
Item 5 _____	£ _____ : _____ p
Total	£ 400 : 00 p

Claim details continued

Staffing Allowance claims

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

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

Authorisation and declaration

I confirm that the payments requested are in respect of costs incurred wholly, or partly, in the performance of my parliamentary duties.

Signature

Date

03 / 11 / 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	_____	____/____/____	
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

BROWNS
Distribution
Leaflet Distributors

John Prescott's
OFFICE

Invoice No. [REDACTED]

Date 30-10-05

Details	£	p
<p>20,000 NEWSLETTERS @ £20.00 Per 1000</p> <p>[REDACTED] 16 NOV 2005</p> <p>[REDACTED]</p> <p>[REDACTED]</p>		
Invoice Total	£ 400	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
Constituency

RT Hon JOHN PRESCOTT

KINGSTON UPON HULL EAST



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

03 / 11 / 05

Allowance year

05 / 06

Incidental Expenses Provision claims

	Suppliers	Amount
Item 1	Oriel Printing Co	£2,270: 00 p
Item 2		£ : p
Item 3		£ : p
Item 4		£ : p
Item 5		£ : p

Total £2,270: 00 p

15 NOV 2005

14 NOV 2005

Claim details continued

Staffing Allowance claims

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

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

Authorisation and declaration

I confirm that the payments requested are in respect of costs incurred wholly or partly in connection with my Parliamentary duties.

Signature

_____ MP

Date

3 Nov / 2005

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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



For JOHN PRESCOTTS OFFICE



Invoice No.
Estimate No.
Job No.
Job Ref.
Your Ref.



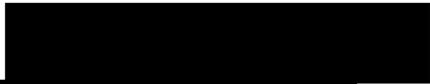
Attn:



Date

27/10/2005

INVOICE



Job Title 40,000 - NEWSLETTERS 2005 John Prescott

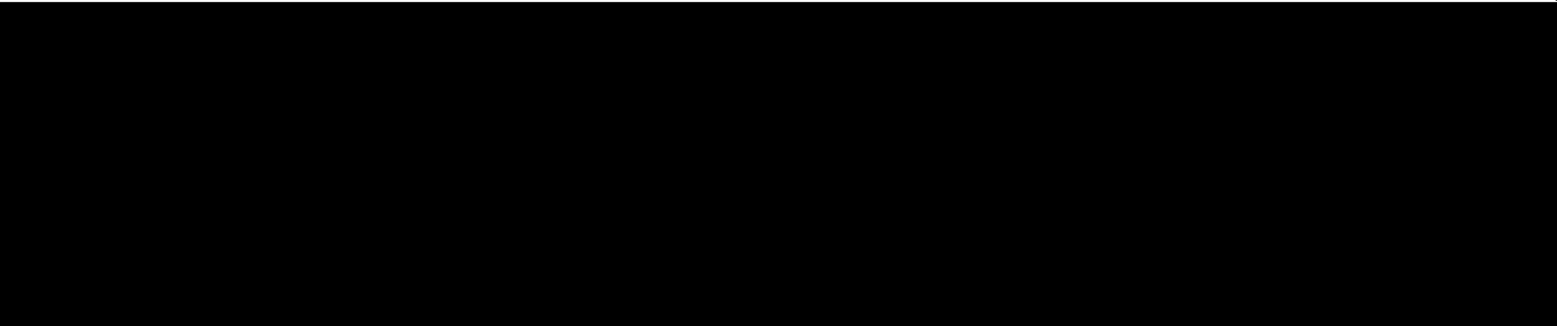
Size A3 folded to A5

Material 130gsm Gloss Artpaper

Description Printed in full colour process both sides, folded once to A4 4 page and then to A5.
Artwork supplied by [REDACTED] (EIS Publications Ltd), Oriol to prepare proof for approval and plates.
Banded in 100's.
20,000 to be collected by Letterbox Distribution
20,000 to be collected by Brown's Distribution
Job ready 5 working days from final approval. If this is not acceptable, please ring to discuss.



Total ex. VAT	2270.00
VAT @ 0.00	0.00
Total incl. VAT	2270.00



Financial Processing }

Transaction No.

Registration No.



Validation Claim Summary Sheet

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

APRIL - SEPT

Invoice No.

Account code / Allowance

Members cost centre (Cat1)

Financial Year/PIRO (Cat2)

~~04_05~~ / 05_06

Expenditure type (Cat5) :



£ 3000.00

£

£

£

£

£

£

£

£

£ 3000.00

TOTAL

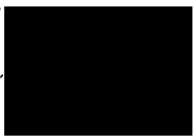
Comments:

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

DG 07 10 2005

Posted by (initials & date)

07 OCT 2005





21st September 2005

C1 Reimbursement 2005/06

After various calculations, which include standing orders and cheque payments, my office costs continue to run on average to £500.00 per month to include the following:

Printing €
Stationery
Insurance
Staff Mobile Costs
Office Machinery Consumables
Postage
Newspapers
Periodicals
Other miscellaneous items

500

I therefore attach a C1 reimbursement claim form for £3,000 for the months of April, May, June, July, August and September.



Member's reimbursement form

When to use this form

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

About filling in this form

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

Your details

Name
in CAPITAL LETTERS

RT HON JOHN PRESCOTT MP

Constituency

HULL EAST

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 APR / 2005 /

to SEPT / 2005 /

Allowance year

1

	Description of service or goods	Amount
Item 1	PLEASE REFER	£ : p
Item 2	TO ATTACHED	£ : p
Item 3	NOTE	£ : p
Item 4		£ : p
Item 5		£ : p
Item 6		£ : p
Item 7		£ : p
Item 8		£ : p
Item 9		£ : p
Item 10		£ : p

Total

£ 3,000 : 00 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

21 SEPTEMBER 2005

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Signature check	<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"/>
Allowable expenditure	<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"/>
Ext type/Cat 5 & subtotals added to form	<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"/>
Processing		
Input	<input type="text"/>	<input type="text"/> / <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"/>
£ <input type="text"/>

Comments

[Large empty box for comments]