

Financial Processing }

Transaction No. [REDACTED]

Registration No. [REDACTED]

Validation Claim Summary Sheet

ACA

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 [REDACTED] FEB/MAR 05

Invoice No. [REDACTED]

Account code / Allowance [REDACTED]

Members cost centre (Cat1) [REDACTED]

Financial Year/PIRO (Cat2) [REDACTED]

04_05 / 05_06

Expenditure type (Cat5) : [REDACTED]

** Financial Processing purposes only*

Registered by (initials & date) [REDACTED] 16 Nov

Posted by (initials & date) [REDACTED] 19.4.5



Member's claim form

Members' Allowances

About filling in this form

- For details of costs you can claim for, see *Green Book* section 3.
- If you have any doubt about whether you can claim for a cost, please call 020 7219 1592.

Your details

Name
in CAPITAL LETTERS

KIM HOWELLS

Constituency

PONTYPRIDD

Claim details

Notes

You can only claim for

Please list

Please attach

- costs you have actually paid
- additional expenses wholly, exclusively and necessarily incurred to enable you to stay overnight away from your only or main home for the purpose of performing your Parliamentary duties.
- all items costing £250 or more and include receipts – except for food, for which receipts are not required.
- receipts or invoices for any hotel cost even if it is less than £250.

Period of claim

from 1 / 2 / 05

to 31 / 3 / 05

Total cost of hotel stays
attach all receipts

£ : p

Mortgage payments
(interest only) or rent

£ 644 : 20 p

Food

£ 700 : p

Utilities

£ 302 : p

Council Tax/Rates

£ 377 : 42 p

Telephone and
telecommunications

£ : p

Cleaning

£ 160 : p

Service/maintenance

£ : p

Repairs/insurance/
security

£ : p

Other

£ : p

▶ please specify

Other

£ : p

▶ please specify

Other

£ : p

▶ please specify

Total

£2183 : 62 p

Details of second home *if applicable*

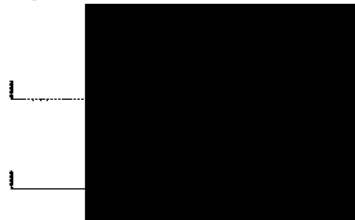
Address of second home
for Additional Costs Allowance



Declaration

I confirm that I incurred these costs wholly, exclusively and necessarily to enable me to stay overnight away from my only or main home for the purpose of performing my duties as a Member of Parliament.

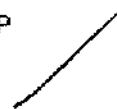
Signature



MP

Date

3. 4. 05



Data protection

The rules governing payments made from the Additional Costs Allowance say we must keep the information we ask for on this form.

The information you give will be seen by:

- staff who are responsible for processing Members' Additional Costs Allowance claims and travel claims
- National Audit Office staff.

We will normally keep the information you give for three years following the year in which you incurred the expense.

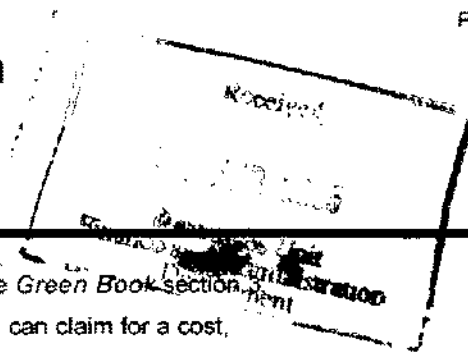
If you have any concerns about how your information is handled, please call our Data Protection Officer on 020 7219 3659, who acts on behalf of the Data Controller, Clerk of the House.

Send your completed form to

Members' Allowances Section, Operations Directorate,
Department of Finance & Administration, 3rd Floor, 7 Millbank, LONDON SW1 0AA



Member's claim form



Members' Allowances

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- For details of costs you can claim for, see *Green Book* section 11.
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Your details

Name
in CAPITAL LETTERS

KIM HOWELLS

Constituency

PONTYPRIDD

Claim details

Notes

You can only claim for

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- receipts or invoices for any hotel cost even if it is less than £250.

Please list

Please attach

Period of claim

from 1 1 2 1 04 to 31 1 1 05 X ✓

Total cost of hotel stays
attach all receipts

£ : p

Mortgage payments
(interest only) or rent

£ 644 : 20 p ✓

Food

£ 700 : p ✓

Utilities

£ 302 : p

Council Tax/Rates

£ 377 : 42 p ✓

Telephone and
telecommunications

£ : p

Cleaning

£ 160 : p

Service/maintenance

£ : p

Repairs/insurance/
security

£ : p

Other

£ : p

▶ please specify

Other

£ : p

▶ please specify

Other

£ : p

▶ please specify

Total

£ 2183 : 62 p

Details of second home *if applicable*

Address of
second home
for Additional
Costs Allowance

[Redacted]

[Redacted]

Declaration

I confirm that I incurred these costs wholly, exclusively and necessarily to enable me to stay overnight away from my only or main home for the purpose of performing my duties as a Member of Parliament.

Signature

[Redacted Signature]

MP

Date

31.1.05

Data protection

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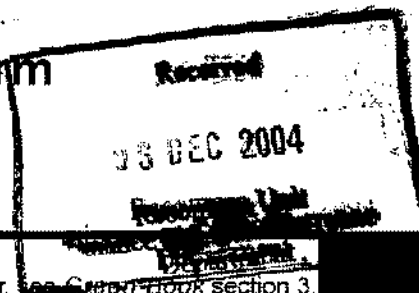
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Additional

Member's claim form



Members' Allowances

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- For details of costs you can claim for, see Green Book section 3.
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Your details

Name in CAPITAL LETTERS

KIM HOWELLS

Constituency

PONTYPRIDD

Claim details

Notes

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- receipts or invoices for any hotel cost even if it is less than £250.

Please list

Please attach

Period of claim

from 1 1 10 104

to 30 1 11 104

Total cost of hotel stays
attach all receipts

£ _____ : _____ p

Mortgage payments
(interest only) or rent

£ 644 : 20 p

Food

£ 700 : _____ p

Utilities

£ 302 : _____ p

Council Tax/Rates

£ 377 : 42 p

Telephone and telecommunications

£ _____ : _____ p

Cleaning

£ 160 : _____ p

Service/maintenance

£ _____ : _____ p

Repairs/insurance/
security

£ _____ : _____ p

Other

£ _____ : _____ p

▶ please specify _____

Other

£ _____ : _____ p

▶ please specify _____

Other

£ _____ : _____ p

▶ please specify _____

Total

£2183 : 62 p

Details of second home *if applicable*

Address of
second home
for Additional
Costs Allowance

Declaration

I confirm that I incurred these costs wholly, exclusively and necessarily to enable me to stay overnight away from my only or main home for the purpose of performing my duties as a Member of Parliament.

Signature

MP

Date

3. 12. 04

Data protection

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CAPITAL CABS LTD

From

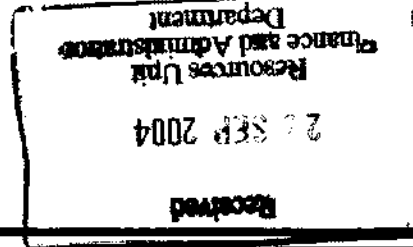
To

Date 25-11-2004 Fare £ 30

Signature



Member's claim form



Members' Allowances

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Your details

Name in CAPITAL LETTERS

KIM HOWELLS

Constituency

PONTYPRIDD

Claim details

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Period of claim

from 1 1 8 1 04 to 30 1 9 1 04

Total cost of hotel stays attach all receipts

£ : p

Mortgage payments (interest only) or rent

£ 644 : 20 p

Food

£ 700 : p

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Council Tax/Rates

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Cleaning

£ 160 : p

Service/maintenance

£ : p

Repairs/insurance/security

£ : p

Other

£ : p

▶ please specify

Other

£ : p

▶ please specify

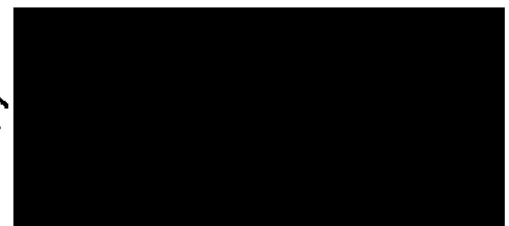
Other

£ : p

▶ please specify

Total

£2183 : 62 p



Details of second home *if applicable*

Address of
second home
for Additional
Costs Allowance

Declaration

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Signature

MP

Date

27. 9. 04

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Member's claim form

MEMBERS' ALLOWANCES
PARLIAMANTARY PAID OFFICERS
RECEIVED
02 AUG 2004

Members' Allowances

About filling in
this form

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Your details

Name
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Constituency

PONTYPRIDD

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Please list

Please attach

Period of claim

from 1 1 6 1 0 4 to 3 1 1 7 1 0 4

Total cost of hotel stays
attach all receipts

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Utilities

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Cleaning

£ 160 : p

Service/maintenance

£ : p

Repairs/insurance/
security

£ : p

Other

£ : p

▶ please specify _____

Other

£ : p

▶ please specify _____

Other

£ : p

▶ please specify _____

Total

£ 2183 : 62 p

Details of second home *if applicable*

Address of
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for Additional
Costs Allowance

Declaration

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Signature

MP

Date

31. 7. 04

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Member's claim form

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Please attach

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from 1 1 04 104 to 31 1 05 1 04 ✓

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Food

£ 700 : ✓ p

Utilities

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Other

£ : p

▶ please specify _____

Other

£ : p

▶ please specify _____

Other

£ : p

▶ please specify _____

Total

£2183 : 62 p

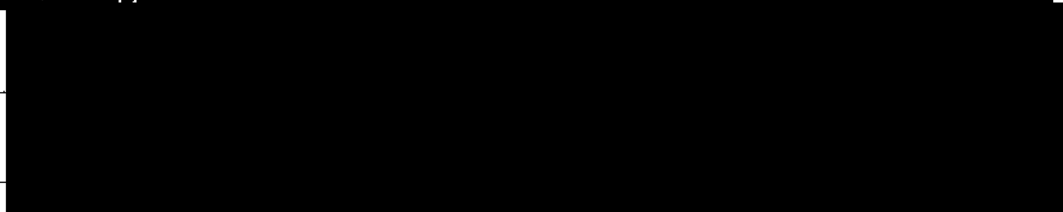
DEA

10 JAN 2004

RECEIVED

Details of second home *if applicable*

Address of
second home
for Additional
Costs Allowance



Declaration

I confirm that I incurred these costs wholly, exclusively and necessarily to enable me to stay overnight away from my only or main home for the purpose of performing my duties as a Member of Parliament.

Signature

 MP

Date

13. 6. 04

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