CITY OF GOSNELLS

## COUNCILLOR TRAVEL CLAIM DECLARATION

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|---|---|---|---|---|---|
| **Councillor Name:** | CR PETER ABETZ | **Vehicle Rego No:** | 1HVZ-394 | **Engine Size:** | 2.5L |
| **Month of Claim:** | September-2023 | **Vehicle Make/Model:** | Subaru Forester | | |

| Date | From | To | Details of Meeting / Function | Invitation Attached | KMs Travelled | KMs Claimed |
|---|---|---|---|---|---|---|
| 12/09/2023 | Home | Civic Centre | OCM | DoE | 18 | 18 |
| 26/9/2023 | Home | Civic Centre | OCM | DoE | 18 | 18 |
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**I certify that the information provided in this form is an accurate account of travel I have undertaken in accordance with Council Policy 5.4.23, such travel being relevant to fulfilling my role in the office of Councillor / Mayor.** *[circle whichever is applicable]*
**I understand that a fraudulent claim is a matter reportable under the *Corruption, Crime and Misconduct Act 2003*.**

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|---|---|
| **TOTAL KILOMETRES CLAIMED:** | **36** |
| **DATE:** | **5/10/2023** |

***OFFICE USE ONLY:***

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|---|---|---|---|---|---|
| **Total KMs Approved:** | **36kms @ 67.72c/km = $24.38** | | **Authorised By:** **Director Business Services** | **SIGNED COUNCILLOR:** | **Rec'd by email 5/10/2023** |
| **Account No.** | **JL 85-94001-3751-000** | **Position Title:** | | | |

*Please complete additional forms if required.*