

Name:  
Tel. No.  
Email:

# WGNS WORK RECORD

Please send this to Sue Spencer  
at the end of each month by email  
or a paper copy delivered to 26  
Hall Close

<u>Date</u>	<u>Client's Name and Address</u>	<u>Work Carried Out (If transport outside the village fill in the next four columns)</u>	<u>Destination if outside the village</u>	<u>Standard fee received</u>	<u>Subsidized fee received 50%</u>	<u>Amount to be reclaimed from WGNS 50%</u>

**Informal arrangements:**

If you have given assistance on an informal basis but do not wish to identify the recipient(s) please indicate here

No of occasions

No of recipients