

WEST OXFORDSHIRE DISTRICT COUNCIL

**Leafield Parish Council**

**PRECEPT 2026/27**

The amount required to be raised by way of Council Tax to meet the expenditure of this Town/Parish during the year 2026/27 will be:-

(Please note your total precept amount must be rounded up to the nearest £1)

1	Town/Parish general expense (Budget)	£ 72,351
2	Town/Parish council election expenses	NA
3	Town/Parish precept for tax setting purpose (line 3 = line 1 + line 2)	£ 72,351
4	Proposed precept 2026/27 (from line 3)	£ 72,351
5	Tax base for 2025/26	393.19
6	Band D Tax - Please divide line 4 by line 5 (line 6 = line 4 / line 5)	£ 184.01
7	Previous Year Band D Tax	£186.77
8	Tax rise (line 6 – line 7) / line 7 x 100	-1.48

The second home premium included in the taxbase figure in box 5 above is	9.89
--	------

Anne Ogilvie  
 ----- DATE 14/01/26 -----

CLERK/CHAIRMAN

(FOR THE ATTENTION OF PAUL LELLIOTT – ACCOUNTANCY)

**PLEASE RETURN BY FRIDAY 9th JANUARY 2026**  
**THIS FORM MUST BE RETURNED EVEN FOR A NIL PRECEPT**  
**SEE COVERING LETTER FOR HOW TO RETURN**

**Leafield Parish Council**

The Council's preferred method of payment is by direct BACS payment into your bank account. Please confirm the bank, branch, sort code and account number of your account and where you would like the remittance details sent.

**Account Number:**

6	1	0	0	5	3	4	5
---	---	---	---	---	---	---	---

**Bank Name:**

Co-operative Bank
-------------------

**Sort Code:**

0	8	—	9	0	—	3	8
---	---	---	---	---	---	---	---

**Branch:**

Swindon
---------

Remittance to:

Mrs Anne Ogilvie
clerk@leafieldparishcouncil.org
6 Manor Court, Chadlington, Oxon OX7 3LW

**PLEASE RETURN BY FRIDAY 9th JANUARY 2026**

([paul.elliott@westoxon.gov.uk](mailto:paul.elliott@westoxon.gov.uk))

**THIS FORM MUST BE RETURNED EVEN FOR A NIL PRECEPT  
SEE COVERING LETTER FOR HOW TO RETURN**