



SESSIONS WITH A COMMISSIONER – PARTICIPANT EXPENSES CLAIM FORM

This form must be completed by people who wish to claim for payment of expenses associated with their attendance at a session with a Commissioner.

Details of what a participant may claim is set out in the *Sessions with a Commissioner – Participant Expenses Policy* available on the Commission's website.

PARTICIPANT DETAILS

Name:

Postal address:

Phone number:

Email address:

DETAILS OF SESSION WITH A COMMISSIONER

Date of session:

Location of session:

TYPE OF CLAIM

- Travel expenses.
- Meal allowance.
- Accommodation allowance and incidental expenses.
- Compensation for loss of income.
- Legal costs.

CLAIM DETAILS

Travel expenses

Departure location 1:

Destination 1:

Departure location 2:

Destination 2:



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Mileage (use of personal car):

Kilometres travelled: _____

Mileage cost (75.66 cents per km): \$ _____

Public transport: \$ _____

Taxi: \$ _____

Commercial passenger vehicle: \$ _____

Hire car: \$ _____

Other: \$ _____

Copies of all GST receipts attached: Yes No

Total claim for travel allowance: \$ _____

Meal allowance (part-day travel)

Departure location: _____

Destination: _____

Time of departure: _____ am/pm

Time of return: _____ am/pm

Travelled over 60km to attend a session: Yes No

Meal/s:

Breakfast (\$13.55) Dinner (\$25.95)

Total claim for part-day meal allowance: \$ _____

Accommodation and meal allowance (overnight travel)

Departure location: _____

Destination: _____

Time of departure: _____ am/pm

Time of return: _____ am/pm

Date/s of overnight accommodation: _____

Location and type of accommodation: _____

Prior written approval obtained from the Commission to arrange own accommodation: Yes No

Copy of receipt from commercial accommodation attached: Yes No

Total claim for accommodation allowance
(\$147 per night in Tasmania): \$ _____



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Incidental expenses of \$20.40 per night claimed (no receipt required): Yes No

Total claim for incidental expenses: \$ _____

Meal/s:

- Breakfast (\$28.70) Lunch (\$32.30) Dinner (\$55.05)
 Breakfast (\$28.70) Lunch (\$32.30) Dinner (\$55.05)

Total claim for overnight meal allowance: \$ _____

Compensation for loss of income

Number of hours, or parts of hours, of actual loss incurred: _____

Rate of payment claimed (to a maximum of \$38.02 per hour): _____ per hour

Evidence to support claim attached: Yes No

Reasons to support claim for compensation:

Total claim for compensation: \$ _____

Legal costs

Lawyer's name/firm: _____

Copy of invoice detailing legal costs attached: Yes No

Reasons to support claim for legal costs associated with attendance at a session:



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Participants should send the completed claim form together with all relevant receipts and supporting evidence to the Commission:

- By email to: contact@commissionofinquiry.tas.gov.au, or
- By post to:
The Commission of Inquiry
GPO Box 229
Hobart TAS 7001

FOR OFFICE USE ONLY

Approved by the Commission: Yes No

If not approved, reasons why:

Participant advised of outcome of their claim: Yes No

Dated: