



**CORRUPTION AND CRIME COMMISSION
OF WESTERN AUSTRALIA**

To: EXECUTIVE DIRECTOR
CORRUPTION AND CRIME COMMISSION
PO Box 7667
PERTH WA 6850

APPLICATION FOR PAYMENT OF WITNESS EXPENSES

NAME: _____

TAX FILE NO: _____

BANK ACCOUNT DETAILS: Name of Account Holder (on bank card) _____

ADDRESS: Account No. _____ BSB _____

Postcode: _____

TELEPHONE: Home: _____ Work: _____ Mobile: _____

DATE/S APPEARED: _____

OCCUPATION: _____

EMPLOYER'S NAME & ABN _____

EMPLOYER'S ADDRESS: _____

Postcode: _____

EMPLOYER'S TELEPHONE: Work: _____ Mobile: _____

EXPENSES INCURRED

ATTENDANCE AT HEARING

Witness attendance fees – Refer to Schedule

Half day _____

Full Day _____

Expert Witness – Refer to Schedule _____

Interpreters Fees- Refer to Schedule _____

EXPENSE INCURRED – (Refer to schedule)

(km travelled both ways)

(e.g – 100km @ 37.5 cents per km = \$37.50)

Fuel _____

(Actual parking expenses paid)

(Receipts etc to be attached)

Parking _____

EXPENSE INCURRED – MEALS

(Refer to schedule)

(Receipts etc to be attached)

Breakfast _____

Lunch _____

Dinner _____

OVERNIGHT ACCOMMODATION

(Refer to schedule)

(Receipts etc to be attached)

WAGES/SALARY LOST, OR

(Refer to schedule)

(Proof from employer to be attached)

INCOME LOST (SELF EMPLOYED)

(Refer to schedule)

(Evidence of income lost – details of calculation and documentary proof to be attached)

TOTAL CLAIMED

\$

SIGNED

DATE:

Schedule

- | | | |
|----|--|------------|
| 1. | Fees for attendance | \$ |
| | For a half-day..... | 10.00 |
| | For a full day..... | 15.00 |
| 2. | Expenses Incurred: | |
| | Fuel Consumption..... | 37.5 cents |
| | per kilometre | |
| | Parking expenses (Receipts required) | |
| 3. | Meals (Receipts required) | |
| | Breakfast..... | 10.00 |
| | Lunch | 10.00 |
| | Dinner | 20.00 |
| 4. | Overnight accommodation (bed only)(Receipts required) | |
| | Maximum per day | reasonable |
| | costs | |
| 5. | Wages/Salary or Income Lost | |
| | Evidence of loss of income by written certification of loss from employer. | |
| | Evidence of loss income incurred by anyone self employed by Statutory Declaration. | |

Attendance fee

- | | | |
|----|-------------------------|------------------|
| 7. | Expert Witness | reasonable costs |
| 8. | Interpreters' fees..... | reasonable costs |