

## **Witness Expenses Application form**

accommodation,

other)

Claims for the reimbursement of travel costs should be supported by receipts, unless these are not available (please indicate if this is the case).

If you are returning your form via email, please scan or photograph the receipts and attach them to your claim submission email. Please forward the completed form to hearingsandwitnesses@covid19inquiry.scot.

If you have any queries regarding the nature of your expenses, please contact the Witness Support Team at <a href="mailto:hearingsandwitnesses@covid19inquiry.scot">hearingsandwitnesses@covid19inquiry.scot</a>.

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Your contact details					
		Phone	Emai		Letter
Preferred Contact Method					
Full Name					
Address					
Email address					
Telephone Number					
'					
Bank Details					
Bank/Building Society	Name				
Account Name					
Account Number					
Sort Code					
Expenses Claim					
Dates covered in claim	1				
Date of attendance at l	hearing				
Expense Details					
Expense Type (travel,	Date of	Description	Tot	al Amount	Receipt
	Spand		[ ]		Attached?

TOTAL		

Financial information for Loss of Time Claims You only need to complete this section if you are claiming expenses for loss of time.				
	Employed	Self-Employed	Unemployed/ Retired	
Employment status				
If you are employed, will you be paid for the time absent from work? (if no, please provide evidence, for example a letter from your employer)  Please also provide details of the calculation of the amount				
you are claiming (e.g. number of hours and the amount of hourly pay or salary. You should provide evidence of the amount of your hourly pay, the number of hours of work you are missing etc and attach it to this application)				
If you are self-employed, please provide evidence of your daily rate of income by attaching it to this application and set out the calculation of the amount you are claiming here:				

Declaration	
	information I have given in this claim form (and any other ide with it) is true and correct to the best of my belief and
Signature	
Date	