



SENATORS AND MEMBERS

CABCHARGE CARD REQUEST

Options for returning your completed form Scan and Email to: forms@ipea.gov.au or Post to: Independent Parliamentary Expenses Authority One Canberra Avenue FORREST ACT 2603	Enquiries: Independent Parliamentary Expenses Authority Email: enquiries@ipea.gov.au Phone: (02) 6215 3000
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SENATOR OR MEMBER	▶ Title	Mr <input type="checkbox"/>	Mrs <input type="checkbox"/>	Ms <input type="checkbox"/>	Miss <input type="checkbox"/>	Other <input type="checkbox"/>	<input type="text"/>
	▶ Full name	<input type="text"/>					
	▶ Postal address	<input type="text"/>					
		Postcode <input type="text"/>					

ACKNOWLEDGEMENT OF GUIDELINES FOR USE OF CABCHARGE	▶ I acknowledge that:
	<input type="checkbox"/> I have read and understood the Guidelines for the Use of Cabcharge Cards (the Guidelines).
	<input type="checkbox"/> I have read and understood the Cabcharge Conditions of Use .
	<input type="checkbox"/> I understand that failing to comply with the Guidelines and/or the Cabcharge Conditions of Use may render me personally liable for any non-compliant fares.
▶ A Cabcharge card will be issued once this completed form has been returned to Independent Parliamentary Expenses Authority.	

SIGNATURE	▶ By signing this form, I acknowledge that:
	<ul style="list-style-type: none">• I understand that knowingly giving false or misleading information is a serious offence under the <i>Criminal Code Act 1995</i>.• I have read and understood the Privacy Collection Notice (see below).
	Signature of Senator or Member <input type="text"/> Date <input type="text"/>