**PARLIAMENTARIAN'S TRAVEL DECLARATION**

- Use this form to claim travelling allowance
- This form must be lodged within 60 days of travel
- Please ensure all relevant fields are completed
- Privacy statement – see over

**Last name** Bishop

**First name** Julie

**Home base / principal place of residence** S47F

---

**TRAVEL DETAILS**

- Clearly identify each 'leg' of travel including those where TA is not being claimed
- Non-consecutive nights must be identified by a separate line for each night/group of nights

<table>
<thead>
<tr>
<th>TRAVEL DATE</th>
<th>TRAVEL FROM</th>
<th>TRAVEL TO</th>
<th>SPECIFIC LOCATION STAYED</th>
<th>TYPE OF ACCOM.</th>
<th>TRAVELLING ALLOWANCE STARTING DATE</th>
<th>NO. OF CONSECUTIVE NIGHTS</th>
<th>T.A. CLAUSE (PREVIOUS)</th>
<th>NAME OF MEETING/COMMITTEE AND/OR REASON FOR CLAIM</th>
<th>ACCOM. RECEIPT</th>
<th>SPOUSE NIGHTS (NOT WEPID)</th>
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</thead>
<tbody>
<tr>
<td>7/1/2016</td>
<td>Perth</td>
<td>Sydney</td>
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<td>City</td>
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<td>3.8b</td>
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<td></td>
<td></td>
</tr>
</tbody>
</table>

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- I declare that this travel was undertaken in my capacity as an elected representative and I acknowledge that a financial loading will be applied if subsequent adjustment to this travel claim is required.
- I declare that the information I have given is true and accurate. I certify that I have fulfilled all the requirements of the particular Remuneration Tribunal Determination clauses I have identified on this form.
- I understand that knowingly giving false or misleading information is a serious offence under the Criminal Code Act 1995.

**Signature**: Julie Bishop

**Date**: 15/1/16
PARLIAMENTARIAN'S TRAVEL DECLARATION

- Use this form to claim travelling allowance
- This form must be lodged within 60 days of travel
- Privacy statement – see over

Last name: Bishop
First name: Julie
Home base / principal place of residence: $47F

TRAVEL DETAILS

- Clearly identify each 'leg' of travel including those where TA is not being claimed
- Non-consecutive nights must be identified by a separate line for each night/group of nights

<table>
<thead>
<tr>
<th>TRAVEL DATE</th>
<th>TRAVEL FROM</th>
<th>TRAVEL TO</th>
<th>SPECIFIC LOCATION STAYED</th>
<th>TYPE OF ACCOM</th>
<th>TRAVELLING ALLOWANCE STARTING DATE</th>
<th>NO. OF CONSECUTIVE NIGHTS</th>
<th>TA CLAUSE (YES/NO)</th>
<th>NAME OF MEETING/COMMITTEE AND/OR REASON FOR CLAIM</th>
<th>MINISTER/OFFICE HOLDER ONLY</th>
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<tbody>
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</tr>
<tr>
<td>11/2/16</td>
<td>Canberra</td>
<td>Sydney</td>
<td>City</td>
<td>C</td>
<td>11/2/16</td>
<td>1</td>
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</tbody>
</table>

I declare that this travel was undertaken in my capacity as an elected representative and I acknowledge that a financial loading will be applied if subsequent adjustment to this travel claim is required.

I declare that the information I have given is true and accurate. I certify that I have fulfilled all the requirements of the particular Remuneration Tribunal Determination clauses I have identified on this form.

I understand that knowingly giving false or misleading information is a serious offence under the Criminal Code Act 1995.

Signature: Bishop
Date: 13/2/16
### PARLIAMENTARIAN'S TRAVEL DECLARATION

- Use this form to claim travelling allowance
- This form must be lodged within 60 days of travel
- Please ensure all relevant fields are completed
- Privacy statement – see over

<table>
<thead>
<tr>
<th>Last name</th>
<th>Bishop</th>
</tr>
</thead>
<tbody>
<tr>
<td>First name</td>
<td>Julie</td>
</tr>
</tbody>
</table>

**Home base / principal place of residence:** [Redacted]

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**Travel Details**

<table>
<thead>
<tr>
<th>TRAVEL DATE</th>
<th>TRAVEL FROM</th>
<th>TRAVEL TO</th>
<th>SPECIFIC LOCATION STAYED</th>
<th>TYPE OF ACCOM</th>
<th>TRAVELLING ALLOWANCE STARTING DATE</th>
<th>NO. OF CONSECUTIVE NIGHTS</th>
<th>TA CLAUSE (SEE OVDR)</th>
<th>NAME OF MEETING/ COMMITTEE AND/OR REASON FOR CLAIM</th>
<th>SPONSORSHIP (NOT WHIPS)</th>
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<td></td>
</tr>
<tr>
<td>3/3/16</td>
<td>Canberra</td>
<td>Sydney</td>
<td>City</td>
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</table>

**Options for returning your completed form**

- Scan and Email to: parlfs@finance.gov.au
- Fax to: (02) 6267 3253
- or Post to: Ministerial and Parliamentary Services
  - Department of Finance
  - John Gorton Building
  - King Edward Terrace
  - PARRES ACT 2600

**Enquiries:**

- Entitlement Management Branch
- Email: emb@finance.gov.au
- Phone: (02) 6215 3542

---

- I declare that this travel was undertaken in my capacity as an elected representative and I acknowledge that a financial loading will be applied if subsequent adjustment to this travel claim is required.
- I declare that the information I have given is true and accurate. I certify that I have fulfilled all the requirements of the particular Remuneration Tribunal Determination clauses I have identified on this form.
- I understand that knowingly giving false or misleading information is a serious offence under the Criminal Code Act 1995.

**Signature:** [Redacted]

**Date:** 5/3/16
**Parliamentarian’s Travel Declaration**

- Use this form to claim travelling allowance
- This form must be lodged within 60 days of travel
- Please ensure all relevant fields are completed
- Privacy statement – see over

**Last name**  Bishop  
**First name**  Julie  
**Home base / principal place of residence**  547 F

---

**Travel Details**

- Clearly identify each ‘leg’ of travel including those where TA is not being claimed
- Non-consecutive nights must be identified by a separate line for each night/group of nights

| Travel Date | Travel From | Travel To | Specific Location Stayed (e.g. Suburb/Town) | Type of Accommodation | Travelling Allowance Starting Date | No. of Consecutive Nights | T.A. Clause (see over) | Name of Meeting/Committee and/or Reason for Claim | Spouse Nights (not Whip)
|-------------|-------------|-----------|---------------------------------------------|-----------------------|-----------------------------------|--------------------------|------------------------|-----------------------------------------------|----------------------
| 9/3/16      | Adelaide    | Sydney    | City                                        | C                     | 9/3/16                            | 1                        | 3-8b                   |                                               |                      
| 12/3/16     | Perth       | Sydney    | City                                        | C                     | 12/3/16                           | 1                        | 3-8b                   |                                               |                      
| 17/3/16     | Canberra    | Sydney    | City                                        | C                     | 17/3/16                           | 3                        | 3-8b                   |                                               |                      

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- I declare that this travel was undertaken in my capacity as an elected representative and I acknowledge that a financial loading will be applied if subsequent adjustment to this travel claim is required.
- I declare that the information I have given is true and accurate. I certify that I have fulfilled all the requirements of the particular Remuneration Tribunal Determination clauses I have identified on this form.
- I understand that knowingly giving false or misleading information is a serious offence under the Criminal Code Act 1995.

**Signature**  Bishop  
**Date**  29/3/16
PARLIAMENTARIAN'S TRAVEL DECLARATION

- Use this form to claim travelling allowance
- This form must be lodged within 60 days of travel
- Please ensure all relevant fields are completed
- Privacy statement – see over

Last name: BISHOP
First name: JULIE
Home base / principal place of residence: S477

<table>
<thead>
<tr>
<th>TRAVEL DATE</th>
<th>TRAVEL FROM</th>
<th>TRAVEL TO</th>
<th>SPECIFIC LOCATION</th>
<th>ACCOMMODATION TYPE</th>
<th>TRAVELLING ALLOWANCE</th>
<th>NO. OF CONSECUTIVE NIGHTS</th>
<th>T.A. CLAUSE (SEE OVER)</th>
<th>NAME OF MEETING/COMMITTEE</th>
<th>ANSWER REASON FOR CLAIM</th>
<th>SPOUSE NIGHTS (INCL WHIP)</th>
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<td>Sydney</td>
<td>City</td>
<td>C</td>
<td>16/4/16</td>
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<td>38b</td>
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</tr>
<tr>
<td>21/4/16</td>
<td>Canberra</td>
<td>Sydney</td>
<td>City</td>
<td>C</td>
<td>21/4/16</td>
<td>1</td>
<td>38b</td>
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<td></td>
<td></td>
</tr>
</tbody>
</table>

I declare that this travel was undertaken in my capacity as an elected representative and I acknowledge that a financial loading will be applied if subsequent adjustment to this travel claim is required.
I declare that the information I have given is true and accurate. I certify that I have fulfilled all the requirements of the particular Remuneration Tribunal Determination clauses I have identified on this form.
I understand that knowingly giving false or misleading information is a serious offence under the Criminal Code Act 1995.

Signature: JULIE BISHOP
Date: 23/4/16
# Parliamentarian's Travel Declaration

- Use this form to claim travelling allowance
- This form must be lodged within 60 days of travel
- Please ensure all relevant fields are completed
- Privacy statement – see over

<table>
<thead>
<tr>
<th>Last name</th>
<th>Julie</th>
</tr>
</thead>
<tbody>
<tr>
<td>First name</td>
<td>Bischoff</td>
</tr>
<tr>
<td>Home base / principal place of residence</td>
<td>S47F</td>
</tr>
</tbody>
</table>

## Travel Details

- Clearly identify each 'leg' of travel including those where TA is not being claimed
- Non-consecutive nights must be identified by a separate line for each night/group of nights

<table>
<thead>
<tr>
<th>Travel Date</th>
<th>From</th>
<th>To</th>
<th>Specific Location</th>
<th>Accommodation Types</th>
<th>Type of Accom</th>
<th>Travelling Allowance Starting Date</th>
<th>No of Consecutive Nights</th>
<th>TA Clause Code Over</th>
<th>Name of Meeting/Committee and/or Reason for Claim</th>
<th>Spoke Single/Not Whips</th>
</tr>
</thead>
</table>
| 5/5/16      | Canberra | Sydney | CBD             | COMMERCIAL          | C             | 5/5/16                            | 1                       | 3.3b              |                                               |                         | $22
| 11/5/16     | Adelaide | Sydney | CBD             | COMMERCIAL          | C             | 11/5/16                           | 2                       | 3.3b              |                                               |                         | $22

- I declare that this travel was undertaken in my capacity as an elected representative and I acknowledge that a financial loading will be applied if subsequent adjustment to this travel claim is required.
- I declare that the information I have given is true and accurate. I certify that I have fulfilled all the requirements of the particular Remuneration Tribunal Determination clauses I have identified on this form.
- I understand that knowingly giving false or misleading information is a serious offence under the Criminal Code Act 1995.

Signature: [Signature]

Date: 15/5/16

Options for returning your completed form:
- Scan and Email: parl@finance.gov.au
- Fax to: (02) 6267 3253
- Post to: Ministerial and Parliamentary Services, Department of Finance, John Gorton Building, King Edward Terrace, PARKES ACT 2600

Enquiries:
- Entitlements Management Branch
- Email: emb@finance.gov.au
- Phone: (02) 6215 3542
**PARLIAMENTARIAN'S TRAVEL DECLARATION**

- Use this form to claim travelling allowance
- This form must be lodged within 60 days of travel
- Please ensure all relevant fields are completed
- Privacy statement – see over

<table>
<thead>
<tr>
<th>Last name</th>
<th>Bishop</th>
</tr>
</thead>
<tbody>
<tr>
<td>First name</td>
<td>Julie</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>TRAVEL DETAILS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clearly identify each 'leg' of travel including those where TA is not being claimed</td>
</tr>
<tr>
<td>Non-consecutive nights must be identified by a separate line for each night/group of nights</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>TRAVEL DATE</th>
<th>TRAVEL FROM</th>
<th>TRAVEL TO</th>
<th>SPECIFIC LOCATION STAYED</th>
<th>TYPE OF ACCOM.</th>
<th>TRAVELLING ALLOWANCE STARTING DATE</th>
<th>NO OF CONSECUTIVE NIGHTS</th>
<th>TA CLAUSE (SEE OVER)</th>
<th>NAME OF MEETING/COMMITTEE AND/OR REASON FOR CLAIM</th>
<th>SPONSOR NIGHTS (NOT WRITTEN)</th>
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<tbody>
<tr>
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<td></td>
<td></td>
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<tr>
<td>26/5/16</td>
<td>Newcastle</td>
<td>Sydney</td>
<td></td>
<td></td>
<td>C 26/5/16</td>
<td>2 3.8b</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>29/5/16</td>
<td>Melbourne</td>
<td>Canberra</td>
<td></td>
<td></td>
<td>C 29/5/16</td>
<td>1 3.8b</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>31/5/16</td>
<td>Canberra</td>
<td>Sydney</td>
<td></td>
<td></td>
<td>C 31/5/16</td>
<td>2 3.8b</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>1/6/16</td>
<td>Melbourne</td>
<td>Sydney</td>
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<td></td>
<td>C 1/6/16</td>
<td>2 3.8b</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

- I declare that this travel was undertaken in my capacity as an elected representative and I acknowledge that a financial loading will be applied if subsequent adjustment to this travel claim is required.
- I declare that the information I have given is true and accurate. I certify that I have fulfilled all the requirements of the particular Remuneration Tribunal Determination clauses I have identified on this form.
- I understand that knowingly giving false or misleading information is a serious offence under the Criminal Code Act 1995.

Signature: [signature]
Date: 4/6/16
PARLIAMENTARIAN'S TRAVEL DECLARATION

- Use this form to claim travelling allowance
- This form must be lodged within 60 days of travel
- Please ensure all relevant fields are completed
- Privacy statement – see back

Last name: Bishop
First name: Julie
Home base/principal place of residence: Sydney

TRAVEL DETAILS

- Clearly identify each "leg" of travel including those where TA is not being claimed
- Non-consecutive nights must be identified by a separate line for each night/group of nights

<table>
<thead>
<tr>
<th>TRAVEL DATE</th>
<th>TRAVEL FROM</th>
<th>TRAVEL TO</th>
<th>SPECIFIC LOCATION STAYED (E.G. SUBURBAN)</th>
<th>TYPE OF ACCOMMODATION</th>
<th>TRAVELLING ALLOWANCE PAYING DATE</th>
<th>NO. OF CONSECUTIVE NIGHTS</th>
<th>LA CLAUSE (SEE OVER)</th>
<th>NAME OF MEETING COMMITTEE (MINOR REASON FOR CLAIM)</th>
<th>SPONSOR TAX NUMBER (NOT WHITPP)</th>
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<tbody>
<tr>
<td>4/6/16</td>
<td>Perth</td>
<td>Sydney</td>
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<td>3.88b</td>
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</tr>
</tbody>
</table>

I declare that this travel was undertaken in my capacity as an elected representative and I acknowledge that a financial loading will be applied if subsequent adjustment to this travel claim is required.

I declare that the information I have given is true and accurate. I certify that I have fulfilled all the requirements of the particular Remuneration Tribunal Determination clauses I have identified on this form.

I understand that knowingly giving false or misleading information is a serious offence under the Criminal Code Act 1995.

Signature: Julie Bishop
Date: 15/6/16

Options for returning your completed form
Scan and Email to: parlbs@finance.gov.au
Fax to: 02 6267 3253
or Post to: Ministerial and Parliamentary Services
Department of Finance
John Gorton Building
King Edward Terrace
PARKES ACT 2600

Enquiries: Entitlements Management Branch
Email: emb@finance.gov.au
Phone: (02) 6215 3542
**PARLIAMENTARIAN'S TRAVEL DECLARATION**

- Use this form to claim travelling allowance
- This form must be lodged within 60 days of travel
- Please ensure all relevant fields are completed
- Privacy statement – see over

Last name: Bishop
First name: Julie
Home base / principal place of residence: 547F

**TRAVEL DETAILS**
- Clearly identify each ‘leg’ of travel including those where TA is not being claimed
- Non-consecutive nights must be identified by a separate line for each night/group of nights

<table>
<thead>
<tr>
<th>TRAVEL DATE</th>
<th>TRAVEL FROM</th>
<th>TRAVEL TO</th>
<th>SPECIFIC LOCATION</th>
<th>TYPE OF ACCOM.</th>
<th>TRAVELLING ALLOWANCE STARTING DATE</th>
<th>NO. OF CONSECUTIVE NIGHTS</th>
<th>TA CLAUSE (USE OVER)</th>
<th>NAME OF MEETING/COMMITTEE AND/OR REASON FOR CLAIM</th>
<th>SPONSOR'S SIGNATURE</th>
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<tbody>
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<tr>
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</tbody>
</table>

- I declare that this travel was undertaken in my capacity as an elected representative and I acknowledge that a financial loading will be applied if subsequent adjustment to this travel claim is required.
- I declare that the information I have given is true and accurate. I certify that I have fulfilled all the requirements of the particular Remuneration Tribunal Determination clauses I have identified on this form.
- I understand that knowingly giving false or misleading information is a serious offence under the Criminal Code Act 1990.

Signature: Julie Bishop
Date: 15/7/16
 PARLIAMENTARIAN'S TRAVEL DECLARATION

- Use this form to claim travelling allowance
- This form must be lodged within 60 days of travel
- Please ensure all relevant fields are completed
- Privacy statement – see over

<table>
<thead>
<tr>
<th>Last name</th>
<th>BISHOP</th>
</tr>
</thead>
<tbody>
<tr>
<td>First name</td>
<td>JULIE</td>
</tr>
<tr>
<td>Home base / principal place of residence</td>
<td>547F</td>
</tr>
</tbody>
</table>

### TRAVEL DETAILS
- Clearly identify each 'leg' of travel including those where TA is not being claimed
- Non-consecutive nights must be identified by a separate line for each night/group of nights

<table>
<thead>
<tr>
<th>TRAVEL DATE</th>
<th>TRAVEL FROM</th>
<th>TRAVEL TO</th>
<th>SPECIFIC LOCATION</th>
<th>TYPE OF ACCOM</th>
<th>TEAELVING ALLOWANCE STARTING DATE</th>
<th>NO OF CONSECUTIVE NIGHTS</th>
<th>TA CLAUSE (SEE OWN)</th>
<th>NAME OF MEETING / COMMITTEE AND/OR REASON FOR CLAIM</th>
<th>SPOUSE / NIGHTS (NOT WHIPS)</th>
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</tbody>
</table>

### TRAVELLING ALLOWANCE

- Options for returning your completed form
  - Scan and Email to: parlta@finance.gov.au
  - Fax to: (02) 6267 3253
  - or Post to: Ministerial and Parliamentary Services
    Department of Finance
    John Gorton Building
    King Edward Terrace
    PARXS ACT 2600

- Enquiries: Entitlement Management Branch
  - Email: ems@finance.gov.au
  - Phone: (02) 6215 3542

---

- I declare that this travel was undertaken in my capacity as an elected representative and I acknowledge that a financial loading will be applied if subsequent adjustment to this travel claim is required.
- I declare that the information I have given is true and accurate. I certify that I have fulfilled all the requirements of the particular Remuneration Tribunal Determination clauses I have identified on this form.
- I understand that knowingly giving false or misleading information is a serious offence under the Criminal Code ACT 1910.
PARLIAMENTARIAN'S TRAVEL DECLARATION

- Use this form to claim travelling allowance
- This form must be lodged within 60 days of travel
- Please ensure all relevant fields are completed
- Privacy statement – see over

Last name: BISHOP  
First name: JULIE  
Home base/principal place of residence: S47/F

TRAVEL DETAILS

- Clearly identify each 'leg' of travel including those where TA is not being claimed
- Non-consecutive nights must be identified by a separate line for each night/group of nights

<table>
<thead>
<tr>
<th>TRAVEL DATE</th>
<th>TRAVEL FROM</th>
<th>TRAVEL TO</th>
<th>SPECIFIC LOCATION</th>
<th>ACcommodation Types</th>
<th>Travelling Allowance Type</th>
<th>No. Of Consecutive Nights</th>
<th>LA Clause</th>
<th>NAME OF MEETING/COMMITTEE AND/OREA REASON FOR CLAIM</th>
</tr>
</thead>
<tbody>
<tr>
<td>28/7/16</td>
<td>Overseas</td>
<td>Sydney</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>28/7/16</td>
<td>Sydney</td>
<td>Canberra</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1/8/16</td>
<td>Perth</td>
<td>Sydney</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3/8/16</td>
<td>Canberra</td>
<td>Sydney</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

- I declare that this travel was undertaken in my capacity as an elected representative and I acknowledge that a financial loading will be applied if subsequent adjustment to this travel claim is required.
- I declare that the information I have given is true and accurate. I certify that I have fulfilled all the requirements of the particular Remuneration Tribunal Determination clauses I have identified on this form.
- I understand that knowingly giving false or misleading information is a serious offence under the Criminal Code Act 1991.

Signature: [Signature]  
Date: 4/8/16
**PARLIAMENTARIAN’S TRAVEL DECLARATION**

- Use this form to claim travelling allowance
- This form must be lodged within 60 days of travel
- Please ensure all relevant fields are completed
- Privacy statement – see over

**Last name**  
Bishop

**First name**  
Julie

**Home base / principal place of residence**  
547F

---

**TRAVEL DETAILS:**

- Clearly identify each ‘leg’ of travel including those where TA is not being claimed
- Non-consecutive nights must be identified by a separate line for each
  night/group of nights

---

**TRAVELLING ALLOWANCE:**

<table>
<thead>
<tr>
<th>TRAVEL DATE</th>
<th>TRAVEL FROM</th>
<th>TRAVEL TO</th>
<th>SPECIFIC LOCATION STATED IE SUBURB/TOWN</th>
<th>TYPE OF ACCOM</th>
<th>TRAVELLING ALLOWANCE STARTING DATE</th>
<th>NO. OF CONSECUTIVE NIGHTS</th>
<th>T.A. CLAUSE (SEE OVER)</th>
<th>NAME OF MEETING/COMMITTEE AND/OR REASON FOR CLAIM</th>
<th>ACCOM. RECEIPT</th>
<th>SPOUSE (NOT WILL)</th>
</tr>
</thead>
<tbody>
<tr>
<td>7/8/16</td>
<td>Canberra</td>
<td>Sydney</td>
<td>CBD</td>
<td>C</td>
<td>17/8/16</td>
<td>2</td>
<td>3-8b</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

---

- I declare that this travel was undertaken in my capacity as an elected representative and I acknowledge that a financial
  loading will be applied if subsequent adjustment to this travel claim is required.
- I declare that the information I have given is true and accurate. I certify that I have fulfilled all the requirements of the
  particular Remuneration Tribunal Determination classes I have identified on this form.
- I understand that knowingly giving false or misleading information is a serious offence under the Criminal Code Act 1995.

Signature: 

Date: 14/8/16
## PARLIAMENTARIAN'S TRAVEL DECLARATION

- Use this form to claim travelling allowance
- This form must be lodged within 60 days of travel
- Please ensure all relevant fields are completed
- Privacy statement – see over

### Travel Details

- Clearly identify each 'leg' of travel including those where TA is not being claimed
- Non-consecutive nights must be identified by a separate line for each night/group of nights

<table>
<thead>
<tr>
<th>Travel Date</th>
<th>Travel From</th>
<th>Travel To</th>
<th>Specific Location</th>
<th>Type of Accom.</th>
<th>Travelling Allowance Starting Date</th>
<th>No. of Consecutive Nights</th>
<th>T.A. Clause (See Over)</th>
<th>Name of Meeting/Committee and/or Reason for Claim</th>
<th>Accom. Receipt</th>
<th>Spouse Nights (Not Whips)</th>
</tr>
</thead>
<tbody>
<tr>
<td>23/8/16</td>
<td>Canberra</td>
<td>Sydney</td>
<td>CBD</td>
<td>C</td>
<td>23/8/16</td>
<td>1</td>
<td>3</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Travelling Allowance

- DOCUMENTARY EVIDENCE OF COMMERCIAL STAY
- ATTACHED
- AVAILABLE ON REQUEST
- NOT REQUIRED
- COMMERCIAL
- NON-COMMERCIAL
- NOT REQUIRED
- NR

- I declare that this travel was undertaken in my capacity as an elected representative and I acknowledge that a financial loading will be applied if subsequent adjustment to this travel claim is required.
- I declare that the information I have given is true and accurate. I certify that I have fulfilled all the requirements of the particular Remuneration Tribunal Determination clauses I have identified on this form.
- I understand that knowingly giving false or misleading information is a serious offence under the Criminal Code Act 1995.

**Signature:** [Signature]

**Date:** 23/7/16
**PARLIAMENTARIAN'S TRAVEL DECLARATION**

- Use this form to claim travelling allowance
- This form must be lodged within 60 days of travel
- Please ensure all relevant fields are completed
- Privacy statement – see over

**Last name**  
Bishop

**First name**  
Julie

**TRAVEL DETAILS**

- Clearly identify each 'leg' of travel including those where TA is not being claimed
- Non-consecutive nights must be identified by a separate line for each night/group of nights

<table>
<thead>
<tr>
<th>TRAVEL DATE</th>
<th>TRAVEL FROM</th>
<th>TRAVEL TO</th>
<th>SPECIFIC LOCATION STAYED</th>
<th>TYPE OF ACCOM.</th>
<th>TRAVELLING ALLOWANCE STARTING DATE</th>
<th>NO. OF CONSECUTIVE NIGHTS</th>
<th>T.A. CLAUSE (OR OVER)</th>
</tr>
</thead>
<tbody>
<tr>
<td>13/10/16</td>
<td>Canberra</td>
<td>Sydney</td>
<td></td>
<td>C</td>
<td>13/10/16</td>
<td>1</td>
<td>38b</td>
</tr>
</tbody>
</table>

**ACCOMMODATION TYPES:**

- **COMMERCIAL**
- **NON-COMMERCIAL**
- **NOT REQUIRED (CANBERRA)**

**TRAVELLING ALLOWANCE**

- **DOCUMENTARY EVIDENCE OF COMMERCIAL STAY**
  - **ATTACHED**
  - **AVAILABLE ON REQUEST**
- **NOT REQUIRED (CANBERRA)**

**MINISTER/ OFFICE HOLDER ONLY**

- **NAME OF MEETING/COMMITTEE AND/OR HIRED POST CLAIM**
- **ACCOM. RECEIPT**
- **SPOUSE/ NIGHTS (NOT WHIPS)**

---

I declare that this travel was undertaken in my capacity as an elected representative and I acknowledge that a financial loading will be applied if subsequent adjustment to this travel claim is required.

I declare that the information I have given is true and accurate. I certify that I have fulfilled all the requirements of the particular Remuneration Tribunal Determination clauses I have identified on this form.

I understand that knowingly giving false or misleading information is a serious offence under the Criminal Code Act 1995.

**Signature**  
Bishop

**Date**  
15/10/16
**PARLIAMENTARIAN'S TRAVEL DECLARATION**

- Use this form to claim travelling allowance
- This form must be lodged within 60 days of travel
- Please ensure all relevant fields are completed
- Privacy statement – see over

<table>
<thead>
<tr>
<th>Last name</th>
<th>Bishop</th>
</tr>
</thead>
<tbody>
<tr>
<td>First name</td>
<td>Julie</td>
</tr>
</tbody>
</table>

### TRAVEL DETAILS

- Clearly identify each 'leg' of travel including those where TA is not being claimed.
- Non-consecutive nights must be identified by a separate line for each night/group of nights.

<table>
<thead>
<tr>
<th>TRAVEL DATE</th>
<th>TRAVEL FROM</th>
<th>TRAVEL TO</th>
<th>SPECIFIC LOCATION STAYED</th>
<th>TYPE OF ACCOM.</th>
<th>TRAVELLING ALLOWANCE STARTING DATE</th>
<th>NO. OF CONSECUTIVE NIGHTS</th>
<th>T.A. CLAUSE (RATES CHARGED)</th>
<th>NAME OF MEETING/COMMITTEE AND/OR REASON FOR CLAIM</th>
<th>ACCOM. RECEIPT</th>
<th>SPOUSE NIGHTS (NOT WHIPS)</th>
</tr>
</thead>
<tbody>
<tr>
<td>25/9/16</td>
<td>Overseas</td>
<td>Sydney</td>
<td>SuburbanTown</td>
<td>CBD</td>
<td>C 25/9/16</td>
<td>2</td>
<td>38.6</td>
<td></td>
<td></td>
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</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>$22</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

- I declare that this travel was undertaken in my capacity as an elected representative and I acknowledge that a financial loading will be applied if subsequent adjustment to this travel claim is required.

- I declare that the information I have given is true and accurate. I certify that I have fulfilled all the requirements of the particular Remuneration Tribunal Determination clauses I have identified on this form.

- I understand that knowingly giving false or misleading information is a serious offence under the Criminal Code Act 1995.

**Signature**: [Signature]

**Date**: 11/10/16
PARLIAMENTARIAN’S TRAVEL DECLARATION

- Use this form to claim travelling allowance
- This form must be lodged within 60 days of travel
- Please ensure all relevant fields are completed
- Privacy statement – see over

Last name: Bishop
First name: Julie
Home base / principal place of residence: S47F

TRAVEL DETAILS
- Clearly identify each ‘leg’ of travel including those where TA is not being claimed
- Non-consecutive nights must be identified by a separate line for each night/group of nights

TRAVEL DATE | TRAVEL FROM | TRAVEL TO | SPECIFIC LOCATION STAYED | TYPE OF ACCOM. | TRAVELLING ALLOWANCE STARTING DATE | NO OF CONSECUTIVE NIGHTS | T.A. CLAUSE OSG (WEB) | NAME OF MEETING/COMMITTEE AND/OR REASON FOR CLAIM | ACCOM. RECEIPT | SPOUSE NIGHTS (NOT WHIPS)
---|---|---|---|---|---|---|---|---|---|---
26/10/16 | Canberra | Sydney | CBD | C | 26/10/16 | 1 | 380 | | |
322
2/11/16 | Melbourne | Canberra |
2/11/16 | Canberra | Sydney | CBD | C | 2/11/16 | 1 | 380 | |

- I declare that this travel was undertaken in my capacity as an elected representative and I acknowledge that a financial loading will be applied if subsequent adjournment to this travel claim is required.
- I declare that the information I have given is true and accurate. I certify that I have fulfilled all the requirements of the particular Remuneration Tribunal Determination clauses I have identified on this form.
- I understand that knowingly giving false or misleading information is a serious offence under the Criminal Code Act 1995.

Signature: Julie Bishop
Date: 11/11/16