

1. Personal Details

Travel — Statutory Declaration

Please complete the details and the declaration below and return it to Veterans' Affairs.

This form is a statutory declaration. It is an offence to give any altered, false, incomplete or misleading information or to make a false statement or declaration. Any person that does so could face prosecution.

This declaration needs to be authorised by one of the following:

- A Justice of the Peace or a notary public
- A person enrolled as a barrister and solicitor of the High Court
- A registered legal executive (fellow of the NZILE)
- A registrar or deputy registrar of the High Court, a district court, the Court of Appeal or the Supreme Court
- A member of parliament or other government officer authorised to take statutory declarations

If you have any questions please contact Veterans' Affairs on 0800 483 8372 (toll-free) or from overseas on +64 4 495 2070.

I,				(your full name)
of				(your full home address)
				(your occupation)
Do soler	nnly and since	rely declare that	I undertook the following	journeys:
	Departure date	Return Date	Travel from	Travel to
Journey 1	/ /	1 1		
Journey 2	/ /	1 1		
Journey 3	/ /	1 1		
Journey 4	/ /	1 1		
Journey 5	1 1	1 1		
Journey 6	1 1	1 1		
Journey 7	/ /	1 1		
Journey 8	/ /	1 1		
Journey 9	1 1	1 1		
Journey 10	1 1	1 1		
I did not	travel for any re		olicable box) with paid or unpaid employn wys by any other means.	nent or self-employment.
I did not	travel with anoth	ner veteran who ha	as claimed for any of the ab	oove journeys.

This form may be completed instead of providing receipts for the first \$200 (approximately 740kms) worth of travel. You may claim up to a maximum of \$200 this way every year. Each new year commences on the anniversary of the introduction of the Veterans' Independence Programme (7 December 2015).

Once you've exceeded \$200 in a given year and if you wish to claim further travel payments, you must provide receipts and complete the Travel Concession Payment form.

2. Declaration

I make this solemn declaration conscientiously believing the same to be true and by virtue of the Oaths and Declarations Act 1957.

I accept that if I make a false declaration I may be committing an offence in terms of section 111 of the Crimes Act 1961, and if convicted of this offence I may be liable for imprisonment for up to three years.

Signature:				(your signature)
Date:	1	1	(day/month/year)	

3. Witness details

Declared	at:			(location document was signed)
Before me) :			(full name of witness)
Signature	:			(witness signature)
Date:	1	1	(day/month/year)	
Any identify a statutory of			contact details of Justice of th	e Peace, solicitor, or other person authorised to take

The information collected on this form will only be used to fulfil the requirements of the Veterans' Support Act 2014. In the collection, use and storage of information, Veterans' Affairs will at all times comply with the obligations of the Privacy Act 1993 and the Health Information Privacy Code.

Please send your declaration to:

Veterans' Affairs PO Box 5146 WELLINGTON 6140