

## FORM 3A: Declaration of Prior Payments

In this Form there are questions about prior payments you have received in relation to the abuse. Before you make a start you may want to think about who could give you some support if you would like it.

### What will be shared?

#### Information Pathways may share in the Step 3: Resolution process

Your answers in Form 3A will be shared with the participating church authority (or authorities) they are relevant to. The relevant church authority may be a diocese or other entity associated with a church organisation or body (e.g. church, school or agency).

This exchange of information is necessary to evaluate your application for monetary compensation.

### Declaration of Prior Payments

The next questions are about prior payment(s) you may have received in relation to the abuse. These payments may be taken into account in the Step 3: Resolutions process.

#### What prior payments do I need to include?

Please tell us about payments that have been made to recognise the harm done, such as Melbourne Response, Towards Healing, Victims of Crime or any payments made in resolution of a civil claim.

It is important for Pathways to know if part of any prior payment was made for legal costs or other expenses (for example, medical, psychological and counselling or other treatment).

If you have settlement, legal, or other documents that show the prior payment amount and when it was paid to you, please attach these.

1. Do you have any current or previous legal representation, and if so, do you consent to Pathways contacting them?

Yes Details: \_\_\_\_\_

No

2. Have you received any payments in relation to the abuse?

Yes Please attach any documents you may have

No I have not had a prior payment for this abuse (go to **Declaration**, page 5)

Unsure

If unsure please indicate why:


### Details of Prior Payments

3. Was the payment made through a victims of crime scheme?

- Yes
- No
- Unsure

If yes, please write the name of the scheme

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Write the amount paid

\$ 

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Date of payment (DD/MM/YYYY)

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Please write other details for this payment

*For example if the payment included legal costs or other expenses*


4. Was the payment made through Melbourne Response or Towards Healing?

- Melbourne Response
- Towards Healing
- Neither

Unsure

If yes, write the amount(s) paid

\$  \$

Date of payment (DD/MM/YYYY)

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Date of payment (DD/MM/YYYY)

|  |

Please write other details for this payment

*For example if the payment(s) included legal costs or other expenses or the details of any top up payment*


5. Was the payment made to resolve a civil claim?

Yes

No

Unsure

If yes, write the amount paid

\$

Date of payment (DD/MM/YYYY)

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Please write other details for this payment

*For example who the payment was made by and if the payment included legal costs or other expenses*


6. Was the payment awarded by a court?

- Yes
- No
- Unsure

If yes, write the amount paid

\$ 

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Date of payment (DD/MM/YYYY)

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Please write other details for this payment  
*For example who the payment was made by and if the payment included legal costs or other expenses*


7. Have you received any other payment in relation to the abuse?

- Yes
- No
- Unsure

If yes, write the amount paid

\$ 

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Date of payment (DD/MM/YYYY)

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Please write other details for this payment  
*For example what the payment was made for, who the payment was made by and if the payment included legal costs or other expenses*


## Declaration

By signing this form you declare that the information you have provided is complete and correct and that you have read and understood 'What Will be Shared' on page 1.  
The form must be signed and dated by you.

Your signature

Date signed (DD/MM/YYYY)

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## Attachments

Please list any documents which you have attached to this form here:
