Name of MP: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please provide a brief description of the reason for the application:

**Details of Application**

Scheme budget affected (if applicable): ­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (e.g. Office/Staffing)

Relevant financial year: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please list each cost/expense for which you are requesting contingency funding.

Total amount requested from the contingency fund: £\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If your application is for an uplift to a budget, please include the following information:

1. Your current spend against the relevant budget: £\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Your anticipated spend for the remainder of the financial year: £­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please outline the circumstances that led to the cost(s)/expense(s) and comment on how these circumstances are exceptional. Please use additional sheets as necessary.

Please comment on whether you could reasonably have been expected to take any action to avoid the circumstances which gave rise to the cost(s)/expense(s).

Please list the measures taken to remain within budget (eg negotiations with service providers or cuts in spending elsewhere in the budget).

Please comment on the impact a refusal of this application would have on the performance of your parliamentary functions.

**Evidence in support of the Application**

Use the space below to provide the evidence to support your application. The checklist gives the required evidence (please note that your application may be returned if the required evidence is not attached) but you should also attach any further evidence that you consider supports your application. Please use additional sheets as necessary.

Required evidence checklist: Enclosed?

1. For all budget uplift requests, copy of your budget/forecast for the relevant financial year. Yes No N/A
2. For all rental-related uplifts (including accommodation and office rent), evidence of how your rent compares to the market in your area. Yes No N/A
3. For all uplifts due to a one-off exceptional cost, a copy of relevant supporting evidence (e.g. a bill, invoice or quote). Yes No N/A
4. For all staffing budget uplifts, a list of your current staff members and their salaries (if requesting staff pay rises, please refer to our guidance about this). Yes No N/A

**Signature of MP (required):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date (required):\_\_\_\_\_\_\_\_\_**

**Name of person who completed form (if not the MP):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Please sign, date, scan and email your **completed** application to [contingencypayments@](mailto:contingencypayments@parliamentarystandards.org.uk)theipsa.org.uk or send it to IPSA, 2nd Floor, 85 Strand, London, WC2R 0DW. Please note your application may be returned if it does not include all the required information. You may not receive a response within five working days, while we consider your request.

You should refer to the contingency funding criteria under Chapter 10 of the Scheme. In line with the fundamental principles of the Scheme, MPs should be held, and regard themselves, as personally responsible for any application for contingency funding.

Please note that in line with our Publication Scheme, we publish that an MP has applied for contingency funding, how much was applied for, and whether or not it was it was successful.

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