Guidance on Using the Memorandum of Costs and Disbursements Template

About the memorandum of costs and disbursements

A memorandum of costs and disbursements is used to detail the costs and disbursements you are claiming when applying for a judgment by default.

When claiming costs you can find the time allocations at Schedule 4, and recovery rate at Schedule 5 of the District Court Rules 2014.

Note you cannot claim costs, only disbursements, if you are an officer of a company representing a company or representing yourself (unless you are a solicitor) or are.

How to use the template

All the required fields are set out in the template on the following two pages.

The sections that you have to fill out are marked with red text. The red text explains what you need to put in. These are fillable form fields, so click on the red text and start typing. The red text will be replaced by the content that you type. If you want to leave the field blank, just enter a space.

The blue text is explanatory notes. Delete these notes before printing the form.

Formatting your form

Before printing the form, check the following:

That the pages are numbered. Numbering should at page 1 on the page after the cover page (i.e. the cover page should not be numbered). The template is set up to automatically number the pages in this matter.

You may print the form either single or double-sided. However, if you print double sided you must adjust the margins as follows:

* In the “Margins” section in Word, select “Custom Margins”. In the box that pops up, find the field called “Multiple pages”. Select “Mirror Margins” from the dropdown menu, and click OK.
* The wide margin should now be on the left of every front page, and on the right of every reverse page.

Once you have completed the form, print and sign it.

In the District Court

Choose an item. Registry

No: Enter the CIV number (court reference number)

Under the: Enter the Act under which the proceeding is being brought (for example, “Fair Trading Act 1986”). Delete this line if not applicable.

In the matter of Enter in a few words what the dispute is about. For example, “a breach of contract”.

Between: Plaintiff’s full name, address and occupation.

(plaintiff)

And: Defendant’s full name, address and occupation.

(defendant)

Note: if there are more than two parties involved, list their names, addresses and occupations in the format above.

If there is a counterclaim, repeat the fields above for any counterclaim plaintiffs/defendants.

Memorandum of Costs and Disbursements

Next event date: Next court event date (if known). Delete this line if unknown.

Judicial officer: Judge hearing the next event (if known). Delete this line if unknown.

Fill out the option that applies and delete the other option. **NOTE: enter enough lines above so this section is at the bottom of the cover page.**

For an individual: Filed by Person’s name, the Your role in proceedings, e.g. “plaintiff” in person.

OR; for an organisation: Filed by Person’s name, an authorised officer for the Your organisation’s role in proceedings, e.g. “plaintiff”, Enter the name of the organisation.

**To** the Registrar of the District Court at Court location (e.g. “Manukau”)

1. The plaintiff claims costs of $xx.xx as detailed in the table below:

|  |  |  |  |
| --- | --- | --- | --- |
| Item (as per schedule 4) | Time allocation | Recovery Rate | Cost claimed |
| Enter your item claimed here e.g. Item 1 Preparing notice of claim or statement of claim | Enter your time allocation e.g. 0.75 | Enter your recover rate e.g. $1030 | Enter cost claimed by multiplying the time allocation and the recover rate E.g. $772.5 |
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|  |  |  |  |

Delete the paragraph above if you cannot claim costs because you are representing yourself (unless you are a solicitor) or are an officer of a company representing a company.

1. The plaintiff claims disbursements of $xx.xx as detailed in the table below:

|  |  |
| --- | --- |
| Disbursement | Amount Claimed |
| Enter your disbursement claimed here e.g. Filing a statement of claim | Enter the amount claimed here e.g. $200.00 |
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|  |  |

Date:

Signature: