



Legal Aid

07/19 form 25b
Tax Invoice
Criminal Legal Aid
Fixed Fees
Schedule G

Legal aid file no.
Invoice date
Invoice number
GST number
Lead provider's ref.
Charges/CRNs

To: Legal Aid,
Customer
Lead provider
Provider number
Court type
DX Box Number
City
Law firm
Firm number
Court location

Details of claim

Fixed Fee: Date fixed fee(s) completed
Fixed Fee Plus: Covers period from to

Interim invoice
Final invoice

Table with columns: Interim fee (excl. GST), Completion fee (excl. GST), Full fee (excl. GST). Rows include Pre-proceedings, Grounds of appeal, Termination of assignment.

Table with columns: Interim fee (excl. GST), Completion fee (excl. GST), Full fee (excl. GST). Rows include Preparation of appeals, Appeal against sentence, Appeal against conviction, Appeal against conviction and sentence, Application for admitting fresh evidence.

Leave to appeal to Court of Appeal
Leave to appeal to Court of Appeal - preparation

Table with columns: No. of half hours* (HT, WT), Schedule A-C (\$48 per half hour), Schedule D (\$59 per half hour), Schedule E (\$67 per half hour), Schedule F (\$76 per half hour), Total fee. Rows include Hearing Time, Pre-hearing conference(s), Appeal hearing, Leave to appeal to Court of Appeal.

*Hearing time (HT) and waiting time (WT) to be recorded separately in half hour blocks.

Waiting time for an activity exceeded one hour? No

Yes -> Reasons:

Summary table with rows: Total fixed fees (excl. GST)*, Total hearing time (excl. GST)*, Total fixed fee plus activities (excl. GST)*, Total disbursements (excl. GST)*, Total GST*, Total amount (incl. GST)*.

*If you are not registered for GST, you will be paid the GST excl. amount

Fixed Fees Plus Activities¹

PAL for the case 1 2 3 4

	Lead Provider		Listed Provider B	
Provider name or number	_____		_____	
Level of experience	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3		<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> SUP	
Provider rate (excl. GST)	\$ _____		\$ _____	
	Hours	Total fees	Hours	Total fees

¹Activities where prior approval has been sought and granted.

Disbursements (attach receipts/invoices, where applicable)	Units	Total (excl. GST)
Interpreters preparation		
Interpreters in court not judge directed		
Library		
Other LINZ fees		
Printing of disclosure		
Report – Medical		
Report – Restorative justice		
Translators		
Travel – Personal car – necessary – @ \$ _____ per km (as per policy)		
Travel – Plane, train, bus, taxi and parking – necessary		
Travel – Rental car – necessary		
Travel – Time – necessary		
Prior-approval disbursements (attach receipts/invoices, where applicable)		

Interim fee

If you are claiming an interim fee, please explain the work undertaken to substantially progress the case.

Lead provider

Please tick as appropriate:

- I am making a claim on a grant that has been reassigned to me.
- I am making a claim on a grant that has been reassigned to another provider.

I confirm that:

- No other payment, remuneration or benefit has been or will be received in respect of this work (unless authorised by Legal Aid).
- Any non-lawyer or supervised provider performed his or her work under my supervision and I am responsible for it.
- I have advised Legal Aid of all charges I am aware of against the customer named above.
- If claiming hearing time, I have records of all hearing time covered by this claim.

Signature of lead provider

Date

day month year