



08/17 form **27**
Tax Invoice
Criminal Legal Aid
Fixed Fees
Schedule J

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

To: **Legal Aid**, _____

DX Box Number _____ City _____

Name of aided person _____

Name of lead provider _____ Name of law firm _____

Provider number _____ Firm number _____

Court High Court Court of Appeal Parole Board Court location _____

Details of claim

Date activity/fixed fee completed _____ Final invoice Interim invoice

Date of final disposition (if final invoice) _____

Base Fees	Interim Fee (excl. GST)	Completion Fee (excl. GST)	Full Fee (excl. GST)
Postponement order	<input type="checkbox"/> 270.00	<input type="checkbox"/> 180.00	<input type="checkbox"/> 450.00
Recall	<input type="checkbox"/> 270.00	<input type="checkbox"/> 180.00	<input type="checkbox"/> 450.00
Non-release orders	<input type="checkbox"/> 360.00	<input type="checkbox"/> 240.00	<input type="checkbox"/> 600.00
Extended supervision orders	<input type="checkbox"/> 520.00	<input type="checkbox"/> 340.00	<input type="checkbox"/> 860.00
Other parole matters			<input type="checkbox"/> 372.00
Parole appeal – Grounds of appeal (Interim Grants only)			<input type="checkbox"/> 372.00
Parole appeal to Court of Appeal			(Use Invoice Form 4)
Parole appeal to the Supreme Court			(Use Invoice Form 4)

Additional Fees

Termination of assignment fee (Postponement order)	<input type="checkbox"/>	270.00
Termination of assignment fee (Recall)	<input type="checkbox"/>	270.00
Termination of assignment fee (Non-release orders)	<input type="checkbox"/>	360.00
Termination of assignment fee (Extended supervision orders)	<input type="checkbox"/>	520.00

Hearing Time	No. half hours*		Rate (excl. GST) \$59 per half hour	Total fee
	HT	WT		
Parole hearing				
Parole appeal hearing				

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

Total fixed fees (excl. GST)*	\$
Total hearing time (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

Disbursements (specify using GST excl. amount and attach invoice/receipts)

Interpreters preparation		
Interpreters in court not judge directed		
Library		
Other LINZ fees		
Printing of Court of Appeal casebooks		
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		
Witness		
Witnesses and expert witnesses – allowances		

Prior-approval disbursements (specify using GST excl. amount and attach invoice/receipts, where applicable)

Witnesses and expert witnesses – travel		

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.
- AND I have prior approval to claim a termination of assignment fee.
- OR I am seeking approval to claim a termination of assignment fee in conjunction with this invoice.

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 aided person 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