



Legal Aid

07/19 form 42

Tax Invoice

Civil Legal Aid Fixed Fees

Victims' Orders against Violent Offenders (Applicant & Respondent)

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

To: **Legal Aid,** _____
 _____ DX Box Number _____ City _____
 Customer _____
 Lead provider _____ Provider number _____
 Law firm _____ Firm number _____

Details of claim

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

Interim invoice Final invoice

Please record the number of fixed fees for repeatable fee activities, activities based on anticipated hearing time, and hearing time activities.		Number of fixed fees	Fixed fee (excl. GST)	Total fixed fees (excl. GST)
A P P L I C A N T	Termination of Instructions			
	Initial instructions not carried through			
	Application(s)/Order(s) – WITHOUT NOTICE			
	Application(s) for Temporary Non-Contact Order(s)			
	Additional applications for temporary orders against offender's associates			
	Undefended Temporary Non-Contact Order(s) becomes Final Non-Contact Order(s) by operation of law			
	Application(s)/Order(s) – ON NOTICE			
	Application(s) for Final Non-Contact Order(s)			
	Additional final non-contact orders against offender's associates			
	Application(s)/Order(s) – ALL			
	Cost Application – when applicant applies for costs or defends an application for costs			
	Disclosure of offender's address			
	Non-Contact Order(s) to be defended			
	Extending the period within which Temporary Non-Contact Order(s) apply			
	Application(s)/Order(s) – ALL			
	Formal Proof Hearing(s) – Preparation			
	Formal Proof Hearing(s) – Hearing time			
	Instructing agent			
	Additional factors – Application(s)/Non-Contact Order(s)			
	If two or more additional factors – Application(s)/Non-Contact Orders			
Pre-Hearing Matters				
Callover(s) – Preparation				
Callover(s) – Hearing time				
Instructing agent				
Additional factors				

Total fixed fees (excl. GST)*	\$
Total fixed fee plus activities (excl. GST)*	\$
Total disbursements (excl. GST)*	\$
User charge deduction (excl. GST)*	\$
Total GST*	\$
Total amount (incl. GST)*	\$

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

Please record the number of fixed fees for repeatable fee activities, activities based on anticipated hearing time, and hearing time activities.		Number of fixed fees	Fixed fee (excl. GST)	Total fixed fees (excl. GST)
A P P L I	Defended Hearing(s)			
	Complying with Judge's directions			
	Preparation per anticipated hour of hearing time			
	Hearing time			
	Instructing agent			
C A N T	Subsequent Direction(s)			
	Subsequent Application(s) that Final Non-Contact Order(s) apply against other persons			
	Variation or extension of a Temporary or Final Non-Contact Order(s)			
	Discharge of Non-Contact Order(s) (on application or by operation of law)			
	Additional factors			

R E S P O N D E N T	Termination of Instructions			
	Initial instructions not carried through			
	Application(s)/Order(s)			
	Application(s)/Order(s)			
	Additional factors			
	If two or more additional factors			
	Attending a respondent in custody			
	Pre-Hearing Matters			
	Callover(s) – Preparation			
	Callover(s) – Hearing Time			
	Instructing agent			
	Additional factors			
	Defended Hearing(s)			
	Complying with Judge's directions			
	Preparation			
Hearing time				
Costs Application – when respondent applies for costs or defends an application for costs				
Instructing agent				
Additional factors				
Subsequent Direction(s)				
Variation of a Temporary or Final Non-Contact Order(s)				
Notification of discharge of Non-Contact Order(s)				
Additional factors				

ALL Pre-Proceedings Settlements			
Negotiation of Settlement ¹			

¹ This fee can only be claimed where the matter is resolved at this stage and cannot be claimed in conjunction with any other activity.

Fixed Fee Plus Activities ²	Provider name or number	Lead Provider		Listed Provider B			
		Level of experience		Level of experience			
		Provider rate (excl. GST)	Hours	Total fees	Hours	Total fees	
		\$					

² Activities where prior approval has been sought and granted.

Disbursements (attach receipts/invoices, where applicable)	Units	Total (excl. GST)
Birth certificate		
Court-directed bundles – in-house		
Court-directed bundles – third party		
Court filing fee		
Deed of Assignment		
Document process server		
Expert consultancy service		
Interpreter		
Library		
Non-lawyer (Applicants and fixed fee plus require prior approval)		
Office disbursement		
Psychiatric/psychologist reports (pre-approved for Applicant if judge requested)		
Report – Medical (pre-approved if judge requested)		
Restorative justice report (pre-approved for Applicant if judge requested)		
Translator		
Travel – Personal car – necessary – @ \$ per km (as per policy)		
Travel – Plane, train, bus, taxi and parking – necessary		
Travel – Rental car – necessary		
Travel – Time – necessary		
Travel Time – Listed Provider B		
Prior-approval disbursements (attach receipts/invoices, where applicable)		

User charge	<p>Please complete if this case is subject to a user charge and the user charge amount has not been deducted on this file.</p> <p>The total approved payment may be reduced by the user charge amount where the total approved is more than the user charge.</p> <p>Total amount less the user charge deduction (incl. GST)* \$ <input style="width: 100px;" type="text"/></p>
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Progress/Result	<p>Please provide an update on the current status of the proceedings.</p> <div style="border: 1px solid black; height: 200px; width: 100%;"></div>
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continue on a separate sheet if necessary ...

Proceeds of Proceedings	Please provide details of any proceeds of proceedings, including costs.					
	Costs	Cash	Assets	Other	Amount/Values	Details/Description
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$ <input style="width: 100px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$ <input style="width: 100px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>

I confirm that:

- If claiming hearing time, I have records of all hearing time covered by this claim.
- This claim is based on the tasks undertaken for the relevant activity/activities and disbursements actually and reasonably incurred.
- 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 acknowledge that:

- If this case is subject to a user charge, the total approved payment may be reduced by the amount of the user charge where the total approved is more than the user charge.

Signature of lead provider

Date

day month year