

07/16 form **26 Tax Invoice**

Criminal Legal Aid Fixed Fees Schedules H & I

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 la	w firm _				
Provider number		Firm n	umber _				
Court type	Court of Appeal Supreme Court	Court lo	cation _				
Details of cla	nim						
Date activity/fixed fee com	pleted	Final in	nvoice	Interi	m invoice		
Date of final disposition (if	final invoice)	_					
Court of Appeal (Schedule	e H) – Base Fees						edules H & I (excl. GST)
Preparation of issues (by	trial counsel)						\$270
Preparation of issues (by new counsel)							\$660
Appeal against interlocutory decision							\$1400
Appeal against sentence	,					HF	\$1000
Appeal against conviction							\$1700
Appeal against conviction and sentence							\$2400
Supreme Court (Schedule							,
	n (by trial or prior appeal counsel)						\$860
Preparation of application (by new counsel)							\$1400
Preparation of response (by trial or prior appeal counsel)							\$860
Preparation of response	(by new counsel)						\$1400
Preparation for substant	ive appeal hearing					(Use	Invoice Form 4)
Hearing Time		No. half hours* Rate (excl.			GST)		
Court of Appeal (Schedule H)			HT	WT	\$76 per half		Total fee
Appeal hearing					\$76		
Supreme Court (Schedule	1)						
Leave to appeal				\$76			
Response to leave to appeal					\$76		
Appeal hearing					\$76		
*Hearing time (HT) and wa	iting time (WT) to be recorded separately in I	half hour blocks					
				Total fixed	l fees (excl. G	ST)* !	\$
Total hearing time (excl. G.							\$
Total disbursements (excl. G						· -	\$
Total G						. –	\$
*If you are not registered for GST, you will be paid the GST excl. amount Total amount (incl. G				H	\$		

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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 (@ specified rate per km) 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 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 aided person named above. If claiming hearing time I have records of all hearing time covered by this claim. Signature of lead provider

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