

04/18 form **13**

Tax Invoice

Invoice date	
nvoice number	
GST number	

Police Detention Legal Assistance Scheme (PDLA)

То:	Legal Aid,						
	PO Box/DX City						
Name of PDLA lawyer	Provider number						
Name of law firm							
Postal address _							
Personal attendance	If claiming for telephone attendance and visit, enter details on back						
Police Station (or other location attended)							
Name of assisted person							
Type of offence eg assault, EBA							
Was this case? Tick if applicable	Own client Youth case						
Date of attendance							
Start time of attendance	Finish time of attendance						
Duration of attendance							
Details of claim							
Personal attendance	Day rate @ \$53 per half hour (excl. GST) Night rate @ \$75	9.50 per half hour (excl. GST)					
i ersonal attendance	half hours half hours	7.30 per han hour (exci. GGT)					
	Total claimed for personal attendance (one attendance per invoice)						
Telephone attendances	Total claimed (excl. GST carried over from back page)						
Disbursements	Total claimed (excl. GST carried over from back page)						
Travel – Personal car – Required	Total kilometres travelled to attend @ \$ per km (as per policy)						
	kms						
	Total GST	·					
*If you are not registered for GST, you will be p	aid the GST excl. amount (incl. GST)	*					
PDLA lawyer	I certify that:						
	The work to which this invoice relates has been performed by me.						
	Legal advice or legal assistance, or both, has been provided on the days and times						
	recorded on this invoice.						
	All or any multiple attendances claimed for the same person were justified by the						
	circumstances (details over). • All or any disbursements claimed on this invoice are correct.						
	- 741 of any dissursements duffied on this invoice are correct.						
	Date						
		day month year					

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Telephone attendance									
	•	Police Station or other location where detained	Type of offence eg assault, EBA,		Time of telephone attendance	Approximate	Was this call? Tick if applicable Own Youth		
Full name of pers	son attended	person was assisted	manslaughter	Date	detail am or pm	duration	client case		
1.									
2.									
3.									
4.									
5.									
6.									
7.									
8.									
9.									
10.									
Total claimed for telephone attendance @ \$75 per call (excl. GST)* \$									
Disbursements	- Interpreter, telephone cl	narges							
Specify:									
Total claimed for disbursements (excl. GST)* \$									
					Total claimed for dissurse	ments (exem es	., 4		
Full details - If claiming for travel outside the local area, OR for multiple attendances on the same person									
Other Comments									
Other Comments	1								