

# Tax Invoice

## Civil Legal Aid

Legal aid file No.

Invoice date

Invoice number

GST number

Lead provider's ref.

Use this form to claim for any civil matter other than Family and Waitangi proceedings.

To: **Legal Aid,**  DX Box number  City

Name of aided person

Name of lead provider

Name of law firm

**Details of claim**

Forum category  1  2  3  4

Type of proceedings this invoice covers:

Covers period from:  to:   Final invoice  Interim invoice

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

Step	Date	Activities	Hours	Total fee	Hours	Total fee
				\$		\$
				\$		\$
				\$		\$
				\$		\$
				\$		\$
				\$		\$

**Other (specify)**

<input type="text"/>	\$	<input type="text"/>	\$
<input type="text"/>	\$	<input type="text"/>	\$
<b>Total fees (excl. GST)</b>			<b>\$</b>

**Claim by type of proceeding (excl. GST)**  
(If this claim relates to multiple proceedings you must state the portion of the claim that relates to each)

<input type="text"/>	\$
<input type="text"/>	\$
<input type="text"/>	\$

**Disbursements (specify)**

<input type="text"/>	\$	
<input type="text"/>	\$	
<input type="text"/>	\$	
<b>Total disbursements (excl. GST)*</b>		<b>\$</b>
<b>*Total GST</b>		<b>\$</b>
<b>Total amount (incl. GST)*</b>		<b>\$</b>

\*If you are not registered for GST, you will be paid the GST exclusive amount

**LA office use only**

Approve  Defer  Further information  Refuse

Name

Signature  Date

day month year

Comments

