



Legal Aid

10/23 form 33a

Tax Invoice

Family Legal Aid Fixed Fees

Family Violence (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)
Termination of Instructions				
	Initial instructions not carried through			
Application(s)/Order(s)				
	Application(s)/ Order(s)			
	Undefended second and third Family Violence applications			
	Undefended fourth and subsequent Family Violence applications			
	Defended Protection Order			
	Defended second and third Family Violence applications			
	Formal proof hearing – Preparation			
	Formal proof hearing – Hearing time			
	Instructing agent – Formal proof hearing			
A	Additional factors			
P	If two or more additional factors			
P	Interlocutories			
L	Document preparation where there is no hearing			
I	Pre-Hearing Matters			
C	Pre-hearing matters			
A	Judicial Conference(s) – Preparation			
N	Judicial Conference(s) – Hearing time			
T	Instructing agent – Judicial Conference			
	Additional factors			
Defended Hearing(s)				
	Complying with Judge's directions			
	Defended hearing(s) – Preparation			
	Defended hearing(s) – Hearing time			
	Defended hearing(s) – Instructing agent			
	Additional factors			
Subsequent Direction(s)				
	Application to discharge any existing Protection Order(s) when required to do so in order to progress another proceeding			

Total fixed fees (excl. GST)*	\$
Total fixed fee plus activities (excl. GST)*	\$
Total disbursements (excl. GST)*	\$
Total GST*	\$
Total mileage (no GST)	\$
Total amount (incl. GST)*	\$

*If you are not registered for GST, you will be paid the GST excl. amount. There is no GST on mileage.

Prior-approval disbursements (attach receipts/invoices, where applicable)

Total (excl. GST)

Progress/Result

Please provide an update on the current status of the proceedings.

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

Lead provider

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.

Signature of lead provider

Date

day month year