

# Tax Invoice

**Legal Services Agency**  
*Pokapū Ratonga Ture*

Invoice date .....  
 Invoice Number .....  
 GST Number .....

## Police Detention Legal Assistance Scheme (PDLA)

To: **Legal Services Agency**

Address: .....  
LSA Office location PO Box or DX

Name of PDLA Lawyer ..... Provider No. ....  
 Legal 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 .....  
 Date of attendance .....  
 Start time of attendance ..... am/pm Finish time of attendance ..... am/pm  
 Duration of attendance ..... Number of half hours thereof .....

**Total claimed for personal attendance** (one attendance per invoice)

All amounts GST inclusive

Day rate ..... @ \$55.00 per half hour OR Night rate ..... @ \$83.00 per half hour \$ .....  
half hours half hours  
 Total Disbursements claimed (carried over from back page) \$ .....  
 Total claimed for Telephone Attendances (carried over from back page) \$ .....  
 Travel - Total kilometres travelled to attend ..... @ 73 cents per kilometer \$ .....  
kms

**Total Fee Claimed on this invoice** ..... → \$ .....  
 (incl GST)

I, ....., PDLA Lawyer, 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.

.....  
PDLA Lawyer's Signature Date

**LSA Office use only**

Comments

Session Number

Decision

A  D  R

Date

Grants Officer's signature

