Victoria Legal Aid
Lawyers And Legal Services

VICTORIA LEGAL AID
IN-HOUSE PRACTITIONER

Equal Opportunity (Table W)
CLAIM FOR LUMP SUM FEE

Effective 1 October 2011

1. SOLICITOR'S NAME AND ADDRESS:	ASSISTED PERSON'S FAMILY NAME:
	VLA FILE NUMBER:

2. NATURE OF FEE		**FEE CLAIMED**
Conciliation at Equal Opportunity Commission	Lump Sum $915	$
VCAT up to and including mediation (Preparation)	Lump Sum $653	$
VCAT appearance at mediation	Lump Sum $698	$
VCAT Preparation for Final Hearing	Lump Sum $653	$
VCAT Appearance at Final Hearing	$1240 per day	$
	TOTAL PROFESSIONAL FEES CLAIMED	$

3. COUNSEL'S FEES

Date of Service	**Details**	**Private Counsel**	**Inhouse Counsel**
		$	**$**
		$	**$**
		$	**$**
		$	**$**
		INHOUSE COUNSEL FEES PAID	**$**

4. SOLICITOR'S CERTIFICATE

All information contained within this claim is true and proper attention was given to this case. I acknowledge that under section 44(1) of the Legal Aid Act the provision of a false statement renders me liable to the penalties therein contained.

SIGNATURE: _____ DATE: ___/___/201