



**REMEMBER**

All questions must be completed for your form to be processed.

If there are any questions in this form that are not applicable, please write 'N/A' in the box provided or 'NOT KNOWN' if you do not have the answer.

**KEY TO SYMBOLS**

further information or examples on a specific question are provided



you should sign the form here

**SECTION B****REPORTING STAGE****1 Which reporting stage has been reached**

Please put a cross in the appropriate box. The initial claim should be submitted at the point where stage 1, 2 or 3 has been reached, whichever is the earlier.

- (1) A proof or debate has been allowed.
- (2) In family cases involving a Child Welfare Hearing, six months after the date of grant of civil legal aid.
- (3) 12 months after the date of grant of civil legal aid where neither (1) nor (2) applies.
- (4) Each subsequent 12 months after the initial claim.

**SECTION C****INITIAL CLAIM (FEES ONLY)****1 State your initial claim (fees only)**

For schedule 5 cases please provide a note of the total fees incurred at the reporting stage reached. These will be paid at the rate of 75% of the fees claimed. For schedule 6 cases a note of the date and completed block fee is all that is required. (For example, 1/11/03 – Fee 1(B) 20 units – £380.00). If necessary, use Section E – More Information, providing all details as requested here.

DATE AND FEE DESCRIPTION	UNITS	CLAIM (EXC. VAT)
		£
		£
		£
		£
		£
		TOTAL
		£

Answer continued at Section E, More Information.

**SECTION D****SUBSEQUENT CLAIM (FEES ONLY)**

For guidance, refer to the information provided at section C question 1.

**1 Please provide details of the stage the proceedings have reached.**

For example closed record, proof diet etc.

**2 State your subsequent claim (fees only)**

If necessary, use Section E – More Information, providing all details as requested here.

DATE AND FEE DESCRIPTION	UNITS	CLAIM (EXC. VAT)
		£
		£
		£
		£
		£
		TOTAL
		£

Answer continued at Section E, More Information.



## You should now:

 Send the completed form to the address below. No covering letter is required.

Accounts Registration Section  
Accounts Assessment Department  
Scottish Legal Aid Board

- 44 Drumsheugh Gardens  
Edinburgh EH3 7SW
- DX ED55250 EDINBURGH30
- LP2 EDINBURGH7