



Legal Aid
Agency

Fixed Fee claim - this form should be completed for all LGFS Fixed Fees

LF1
Fixed Fee

Solicitor's firm _____
DX _____
or
Address _____

Contact telephone number _____

I confirm I have enclosed the following:

Original Representation Order	<input type="checkbox"/>
Transfer Orders (where applicable)	<input type="checkbox"/>
Prior Authority Confirmation	<input type="checkbox"/>
Invoices	<input type="checkbox"/>

Section one - case details

Solicitor's a/c number _____ Crown Court Case Number _____
Name of Crown Court _____ Court code _____
Prosecuting Authority _____
If the case has transferred to a different court -
Name of Crown Court _____ Court code _____
Is this a retrial? Yes No

Defendants details:	
First Name	Date of Birth dd/mm/yyyy / /
Last Name	
Representation Order Dates: original / /	transfer / /
Has there been an order for Judicial Apportionment? Yes <input type="checkbox"/> No <input type="checkbox"/>	MAAT ID number <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> (7 digits, to be found on the Rep Order)
Evidence Provision Fee Claimed £0 <input type="checkbox"/> Lower <input type="checkbox"/> Higher <input type="checkbox"/>	Number of Instructed Advocates provided for in Rep Order 1 <input type="checkbox"/> 2 <input type="checkbox"/>

Defendants details:	
First Name	Date of Birth dd/mm/yyyy / /
Last Name	
Representation Order Dates: original / /	transfer / /
Has there been an order for Judicial Apportionment? Yes <input type="checkbox"/> No <input type="checkbox"/>	MAAT ID number <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> (7 digits, to be found on the Rep Order)
Evidence Provision Fee Claimed £0 <input type="checkbox"/> Lower <input type="checkbox"/> Higher <input type="checkbox"/>	Number of Instructed Advocates provided for in Rep Order 1 <input type="checkbox"/> 2 <input type="checkbox"/>

4 Please continue on a separate sheet if necessary.

Section five - Fixed Fees continued

Hearing subsequent to sentence (for representation orders on or after 3 August 2009 only).

- Please select the relevant option:
- s1c of Crime and Disorder Act 1998 (vary/ discharge an ASBO).
 - s155 Powers of Criminal Courts (Sentencing Act 2000) (alteration of Crown Court sentence).
 - s74 of Serious Organised Crime and Police Act 2005 (assistance by defendant: review of sentence).
- Elected case not proceeded (ENP) - for representation orders dated on or after 3 October 2011 AND the defendant elected Crown Court trial AND the trial OR retrial did not proceed
- Before trial transfer (org) - cracked/ guilty (elected)
- Before trial transfer (new) - cracked/ guilty (elected)
- Up to and including PCMH transfer (org) - cracked/ guilty (elected)
- Up to and including PCMH transfer (new) - cracked/ guilty (elected)

Section six - Solicitor's certification

I certify on behalf of the payee, that the information provided is correct. This work has not been and will not be the subject of any other claim for remuneration from criminal legal aid.

Signed _____
(A Solicitor or a Fellow of the Institute of Legal Executives)

Name _____ Date ____ / ____ / ____

Section seven

CLAIM OUTCOME - TO BE COMPLETED BY LAA STAFF ONLY

Paid in full

Assessed

Rejected

Fixed Fee allowed (inc vat) £ :

Total disbursements allowed (inc vat) £ :

Travel disbursements allowed (inc vat) £ :

Reasons

Caseworker initials Date processed