

DUTY COUNSEL UNIFIED ACCOUNT FORM

HOW TO GUIDE

Section 1 : Basic Information

AREA OFFICE / BUREAU RÉGIONAL:	<input type="text"/>	DATE :	<input type="text"/>
IN ACCOUNT WITH / FACTURÉ PAR:	<input type="text"/>		
ADDRESS / ADRESSE :	<input type="text"/>		
COURT LOCATION / TRIBUNAL :	<input type="text"/>	Court Type / tribunal de type:	<input type="text"/>
JUDGE(S) / JUGE(S) :	<input type="text"/>	HST # / N ^{bre} TVH:	<input type="text"/>

Field Name	Usage
Area Office	Drop down with defined Areas
In Account with	The lawyer / Firm Name
Court Location	Location of the court (city or address)
Judge	Text field to write the judge's name

Field Name	Usage
Date	To enter or pick the submission date from the drop-down calendar.
Address	Lawyer or Law Firm address
Court Type	Drop down with the levels and divisions of court
HST Number	The lawyer or law firm's HST number. Please write "0" if you don't have one to cancel the HST for this invoice.

Section 2 : Service Details

Week Day / Jour	Date (mm/dd/yyyy)	Time / Durée (i.e. 09:00 - 10:30) (ex 9h-10h30)	# Assisted / N ^{bre} de personnes	# of hours / N ^{bre} d'heures
Monday / lundi				
Tuesday / mardi				
Wednesday / mercredi				
Thursday / jeudi				
Friday / vendredi				
# of DC21 Form attached / No de formulaires DC21 joints		Subtotal / total partiel	0	0.00

Field Name	Usage
Date	Date the service was provided
# of Assisted	Number of people assisted during the service time listed
# of DC21 Forms attached	Total number of Duty counsel forms (Form DC21) attached

Field Name	Usage
Time	Start and end time for the service provided
# of hours	Number of total working hours for the day
Sub-total	Automated fields to calculate the total number of persons assisted and total number of service hours

Section 3 : Travel Disbursements Details

Meals are only paid if the lawyer had to travel and other disbursements like parking, hotel and photocopy require prior approval from the NBLASC director.

Disbursements / Débours	* Breakfast / Petit déjeuner	* Lunch / Déjeuner	* Dinner / Dîner	* Parking Inc. HST/TVH inclus	* Hotel / hôtel Inc. HST/TVH inclus	* Photocopy / Photocopie
Quantity / quantité						
Total	\$ 0.00	\$ 0.00	\$ 0.00			\$ 0.00

Field Name	Usage
Breakfast	To enter total number of breakfast meals purchased throughout the week
Lunch	To enter total number of lunch meals purchased throughout the week
Dinner	To enter total number of dinner meals purchased throughout the week
Parking	To enter total number of purchased parking passes through the week
Hotel	To enter total number of nights at a hotel through the week
Photocopy	To enter total number of copies made through the week

Field Name	Usage
Breakfast Total	Auto calculated field for total breakfast amount to be paid by NBLASC as per the Tariff and rates effective on May 1 st , 2024
Lunch Total	Auto calculated field for total lunch amount to be paid by NBLASC as per the Tariff and rates effective May 1 st , 2024
Dinner Total	Auto calculated field for total dinner amount to be paid by NBLASC as per the Tariff and rates effective on May 1 st , 2024
Parking Total	To enter total parking cost as invoiced including tax
Hotel Total	To enter total hotel cost as invoiced including tax
Photocopy Total	Auto calculated field for P/C total cost will be paid by NBLASC.

Section 4 : Invoice Brief data

all w/o HST tous sans TVH	Service hours/ heures de service	Travel / Déplacement	Mileage / kilométrage	Disbursements / Débours	HST / TVH (0.15)	Total / total
Total hours/ N° d'heures	0.00			0	\$ 0.00	Without HST: \$ 0.00
Rate/tarif	\$ 0.00	\$ 42	\$ 0.5043	Vary/varier	0.15	
Total Cost \$/ \$ coût total	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	Total include HST: \$ 0.00


Field Name	Usage
Total Service hours	Auto calculated field for total service hours.
Service hours Total Cost\$ (Exclude Tax)	Auto calculated field for the product of Service number of hours *(service hourly rate defined on NBLASC Rate Policy).
Travel Total Cost\$ (Exclude Tax)	Auto calculated field for the product of total number for travel hours *(travel hourly rate defined on NBLASC Rate Policy).
Mileage Total Cost\$ (Exclude Tax)	Auto calculated field for the product of Mileage total number of kilometers *(mileage rate per kilometer defined on NBLASC Rate Policy)
Disbursements Total Cost\$ (Exclude Tax)	Auto calculated field equaling the total cost of disbursement items in the previous table without tax.
Invoice Total Cost\$ (Exclude HST)	Auto calculated field for the total invoice amount without tax.

Field Name	Usage
Service hours (Rate)	Auto calculated field for service cost per hour, calculated after the "Total # of years at Bar" is entered.
Travel Total hours	To enter total number of travel hours.
Mileage Total number	To enter total mileage travelled in kilometers. <i>[The distance travelled must exceed 16 kilometers one-way.]</i>
Disbursements Total No.	Auto calculated field equaling the total count of disbursement items in the previous table.
HST Total Cost\$	Auto calculated field for the total tax amount for the invoice.
Invoice Total Cost\$ (Include HST)	Auto calculated field for the total invoice amount with tax included.

Section 5 : Lawyer Legal Consent

I hereby certify that the above Legal Aid was rendered by me or by such other named person and that it was necessary and proper. I verify that I have been a member of the bar since _____, a total of years.

Je certifie par la présente que j'ai rendu les services susmentionnés et qu'ils étaient à la fois nécessaires et appropriés. Je confirme que je suis membre du Barreau depuis _____, soit années.



Lawyer Signature / Signature de l'avocat
Date

Field Name	Usage
Date Joined Bar (EN/FR)	To enter the date, you were called to the Bar. The fields in the English and French sections both hold the same value.
Total number of years (EN/FR)	To enter your total number of years as member in the Bar. The fields in the English and French sections both hold the same value.

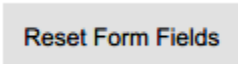
Field Name	Usage
Lawyer Signature	To place lawyer signature on the form. Either a digital signature OR signature stamp.
Date	To enter or pick the signing date from the drop-down calendar.

Section 6 : NBLASC Officers' Section

NBLASC Officer Stamp/ Timbre de l'agent CSAJNB
 (Include Name and date/ or signature with name and date)

Field Name	Usage
NBLASC Officer Stamp	To enter the date which the Intake reviewed the form then sign it including the signee name and date OR to place the approval stamp that includes full name, date, and time.

Section 7 : Form Header and Footer

Field Name
1. Button to reset all form field and clear it to be used for new entries. 
2. Legal statement about the need of obtaining prior NBLASC director's approval of submitting hotel, parking, and photocopy disbursement expenses.
3. Hyperlink to the NBLASC Tariff and Billing Policy on the website.