IN THE SUPREME COURT OF VICTORIA AT MELBOURNE COSTS COURT

No.

BETWEEN

-and-

Applicant

Respondent

RECEIPT FOR PAYMENT OF COURT FEES

Date of Document: Filed on behalf of: Prepared by: Solicitors Code: DX: Telephone: Ref: Email:

Payment of the prescribed fee for (please tick the relevant box) -

Chambers assessment (one day)

□ Mediation (one day)

Taxation (one day)

Signed:

Dated: