Office Schedule No: ☐☐/☐☐☐☐☐☐/☐☐ **FamH- Consolidated Matter Report Form** **Month ____/ 20____** **Sheet____of ____**

Case Reference Number	Case Start Date	Case ID	UFN	Client Forename	Client Surname	Client Date of Birth	UCN	Gender	Ethnicity	Disability	Client Postcode	Case Concluded Date	Matter Type 1

Matter Type 2	Case Stage	Advice Time	Travel Time	Waiting Time	Net Profit Costs excl VAT	Net Disb excl VAT	Net Cost of Counsel excl VAT	Disbursements VAT amount	VAT Indicator	London Rate	Travel and Waiting Costs	Value of costs / Damages recovered	Local Authority Number	Client Type	Stage Reached	Outcome for Client
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From 1st October 2007 all submissions should be made electronically. For more information go to:
http://www.legalservices.gov.uk/civil/ebusiness/features.asp