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Split invoicing form

PLEASE COMPLETE ALL RELEVANT SECTIONS OF THE FOLLOWING FORM IN **BLOCK CAPITALS**

As the lead solicitor for this instruction, you agree that the costs will be your sole responsibility, unless you have obtained signatures from the split parties for their agreement to pay their part of the split invoice. Please note if the split party is a member of the public, payment in advance is required.

1) Lead Solicitor name	Contact Tel No.
Solicitor's practice name	
Solicitor address	
Email address	_____
Name of Party represented	
Solicitor Reference No.	Share to be invoiced (eg. ½, ¼, etc)
Signature	Position in the firm
2) Solicitor name	Contact Tel No.
Solicitor's practice name	
Solicitor address	
Email address	_____
Name of Party represented	
Solicitor Reference No.	Share to be invoiced (eg. ½, ¼, etc)
Signature	Position in the firm
3) Solicitor name	Contact Tel No.
Solicitor's practice name	
Solicitor address	
Email address	_____
Name of Party represented	
Solicitor Reference No.	Share to be invoiced (eg. ½, ¼, etc)
Signature	Position in the firm
4) Solicitor name	Contact Tel No.
Solicitor's practice name	
Solicitor address	
Email address	_____
Name of Party represented	
Solicitor Reference No.	Share to be invoiced (eg. ½, ¼, etc)
Signature	Position in the firm