<ul> <li>STATE OF TEXAS vs</li> <li>IN THE MATTER OF vs</li> <li>IN THE BEST INTEREST of</li> </ul>								HCCL #1 HCCL #2	ΓY, TEXAS	
		AI	PPOINTEES	S'S APPLICA	§ ☐ HCCL #2 § OF HUNT COUNTY, TEXAS TION FOR PAYMENT OF FEES AND EXPENSES, hereinafter referred to as "Appointee" and swears and ereferenced matter, to serve in the capacity stated below:, hereinafter c. □ Competency Evaluator					
affi	On this c rms:	lay apj	peared			, herein	nafter	referred to as "Aj	ppointee" and swears and	
1.	I was ap	I was appointed by the Court, in the above referenced matter, to serve in the capacity stated below:								
	a. d.		-	or b.	-				Evaluator	
2.	The date	he date of appointment and dates services were rendered, and the status of case are as follows:								
	a.	Date	of Appointm	ent:						
	b. Dates Services Rendered:					to				
	c.	Statu	is of Case:		Disposed	or [	Ope	en (Request for In	terim Billing)	
3.	3. The fees and expenses for my services as Appointee are:									
	<ul> <li>a. Fee: *Supporting documentation / Invoice is required and must be attached hereto as Exhibit A</li> <li>b. Expenses: *Supporting documentation/ Invoice is required and must be attached hereto as Exhibit B.</li> </ul>								\$	
									\$	

4. Regarding the performance of the services provided and the fees/expenses I have performed all of the services required of me with due diligence. I am familiar with reasonable and customary fees charged by appointees in such matters and based on my experience and training, the compensation and expenses claimed herein were reasonable and necessary to provide effective assistance as appointee indicated above. I therefore request the following fees and expenses for my services. I understand I must attach hereto as "*Exhibit A*" an itemized statement and explanation of all fees incurred relative to my services as Appointee. I further understand if I have any expenses and/or reimbursements, I must attach hereto as "*Exhibit B*" an itemized statement and explanation of all expenses and/or reimbursements incurred relative to my services as Appointee. The Hunt County Auditor has been provided with my current address and TIN or IRS form W-9.

Date

(Print Name)

## **ORDER ON PAYMENT OF FEES AND EXPENSES**

After reviewing the above Application, the Court **APPROVES** the Application and **ORDERS** the Hunt County Auditor to issue payment of the following amounts:

FEE: \$\_\_\_\_\_ EXPENSES: \$\_\_\_\_\_