

## Jackson County Attorney Fee Voucher

<p><b>1. JACKSON COUNTY</b></p> <p><input type="checkbox"/> County</p> <p><input type="checkbox"/> 24th Judicial District Court</p> <p><input type="checkbox"/> 135th Judicial District Court</p> <p><input type="checkbox"/> 267th Judicial District Court</p> <hr/> <p><b>3a. Flat Fee - Appointed Services:</b></p> <p><input type="checkbox"/> No Charges filed----- \$ 60.00</p> <p><input type="checkbox"/> Felony -----\$ 300.00</p> <p><input type="checkbox"/> Felony (Adj/Rev)-----\$ 240.00</p> <p><input type="checkbox"/> Misdemeanor/Adj/Rev---\$ 200.00</p> <p><input type="checkbox"/> Juvenile----- \$ 200.00</p> <p><input type="checkbox"/> Multiple case ----- \$ 60.00</p> <p><input type="checkbox"/> Felony Appeal -----\$ 1,250.00</p> <p><input type="checkbox"/> Misdemeanor Appeal ----\$ 750.00</p> <p><input type="checkbox"/> Juvenile Appeal -----\$ 750.00</p>	<p><b>2. Style:</b></p> <p>Cause No. _____</p> <p><input type="checkbox"/> Criminal</p> <p>_____</p> <p><input type="checkbox"/> Juvenile: In the Matter of</p> <p>_____</p> <p><input type="checkbox"/> Civil <span style="margin-left: 200px;"><input type="checkbox"/> CPS:</span></p> <p>In the Interest of _____</p> <hr/> <p><b>3b. Hourly fee (complete if not claiming flat fee – Detail service, time spent &amp; dates on separate paper)</b></p> <p>Total Hours In Court: _____</p> <p>Total Hours Out of Court: _____</p> <p>TOTAL HOURS: _____</p>	<p><b>Jackson County Account #</b></p> <p><input type="checkbox"/> CPS: 10-436-4530</p> <p>_____</p> <p><input type="checkbox"/> County: 10-436-4532</p> <p><input type="checkbox"/> Juvenile: 10-436-4531</p> <p>_____</p> <p><input type="checkbox"/> 24th: 10-436-4533</p> <p>_____</p> <p><input type="checkbox"/> 135th: 10-436-4534</p> <p>_____</p> <p><input type="checkbox"/> 267th: 10-436-4535</p> <hr/> <p><b>COURT-APPROVED FEES &amp; EXPENSES (Court computes):</b></p> <p>Court-Approved Fee: \$ _____</p>																								
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 5%;"><b>4.</b></td> <td style="width: 45%;"><b>Investigation Expenses (attach supporting documentation)</b></td> <td style="width: 15%; text-align: center;">Amount Claimed</td> <td style="width: 35%;"></td> </tr> <tr> <td></td> <td></td> <td style="text-align: center;">\$</td> <td>10-436-4536 10-436-4537/10-436-4538/10-436-4539 <b>Approved Investigation Expenses: \$</b></td> </tr> <tr> <td><b>5.</b></td> <td><b>Expert Witness Expenses (attach supporting documentation)</b></td> <td style="text-align: center;">Amount Claimed</td> <td></td> </tr> <tr> <td></td> <td></td> <td style="text-align: center;">\$</td> <td>10-436-4536 10-436-4537/10-436-4538/10-436-4539 <b>Approved Expert Witness: \$</b></td> </tr> <tr> <td><b>6.</b></td> <td><b>Other Litigation Expenses (detail)</b></td> <td style="text-align: center;">Amount Claimed</td> <td></td> </tr> <tr> <td></td> <td></td> <td style="text-align: center;">\$</td> <td>10-436-4536 10-436-4537/10-436-4538/10-436-4539 <b>Other Approved Expenses: \$</b></td> </tr> </table>		<b>4.</b>	<b>Investigation Expenses (attach supporting documentation)</b>	Amount Claimed				\$	10-436-4536 10-436-4537/10-436-4538/10-436-4539 <b>Approved Investigation Expenses: \$</b>	<b>5.</b>	<b>Expert Witness Expenses (attach supporting documentation)</b>	Amount Claimed				\$	10-436-4536 10-436-4537/10-436-4538/10-436-4539 <b>Approved Expert Witness: \$</b>	<b>6.</b>	<b>Other Litigation Expenses (detail)</b>	Amount Claimed				\$	10-436-4536 10-436-4537/10-436-4538/10-436-4539 <b>Other Approved Expenses: \$</b>	<p><input type="checkbox"/> Final Payment <input type="checkbox"/> Partial Payment</p> <p style="font-size: small;">Attorney Certification – I, the undersigned attorney, certify that the above information is true and correct and in accordance with the laws of the State of Texas. The compensation and expenses claimed were reasonable and necessary to provide effective assistance of counsel. The county auditor has been provided my current address &amp; TIN on IRS form W-9.</p> <p>Signature _____ Date _____</p> <p>Print Name: _____ State Bar # _____</p>
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<p>Reason for denial or variation, if any:</p> <p>_____</p>		<p style="text-align: center;">JUDGE PRESIDING</p> <p>_____</p>																								