Attorney Fee Voucher

	Jurisdiction 2. County District County			. Cause Number	Offense	4. Proceedings ☐Trial-Jury ☐Trial-Court
□County Court at Law						☐Plea-Open ☐Plea- Bargain
Court #						Other
5. In the case of: State of Texas v						
6. Case Level Felony Misdemeanor Juvenile Appeal Capital Case						
Revocation – Felony Revocation – Misdemeanor No Charges Filed Other						
7. Attorney (Full Name)				9. Attorney Address (Include Law Firm Name if Applicable)		10. Telephone
8. State Bar Number 8a. Tax ID Number						11. Fax
12. Flat Fee – Court Appointed Services						12a. Total Flat Fee
						<u> </u>
13.	In Court Services			Hours	Dates	13a. Total In Court
						Compensation.
	Rate per Hour =	То	otal hours			
						\$
14.	Out of Court Services			Hours	Dates	14a. Total Out of Court Compensation.
	Rate per Hour =	То	otal hours			•
15.	Investigator				Amount	\$ 15a. Total Investigator
13.	Expenses \$					
16.	Expert Witness				Amount	16a. Total Expert Witness
						Expenses \$
17.	Other Litigation E	xpenses			Amount	17a. Total Other Litigation
						Expenses \$
18. Time Period of service Rendered: From						
Date Date						20 T + 1 C + 1
19. Additional Comments						20. Total Compensation and Expenses Claimed
21. 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.						
State of Texas. The compensation and expenses claimed were reasonable and necessary to provide effective assistance of counser.						
Final Payment Partial Payment						
						Date
22. SIGNATURE OF PRESIDING JUDGE:						Amount Approved:
Reason(s) for Denial or Variation						