

**COURT APPOINTED ATTORNEY PAYMENT VOUCHER
COUNTY COURT AT LAW**

TO THE COMMISSIONERS COURT
OF WILLIAMSON COUNTY, TEXAS

Attorney Name:

Firm Name:

(if different from Attorney Name)

Address:

XX-XXX

Last 4 digits of Federal Identification Number
or

XXX-XX-

Last 4 digits of Social Security Number

Email:

Line Item No. 01-0100-0425-004134

Phone Number:

Is firm a Corporation? Yes No

The State of Texas vs.

Cause No(s).

Offense

Request for Payment as Court Appointed Counsel

In the above numbered and entitled cause(s) I, the undersigned attorney, represent to the Court that I was appointed by the Court to represent the Defendant in the above-styled and numbered cause and that I have performed the following work on the case(s):

FINAL CASE DISPOSITION:	No Charges Filed	Plea	Trial	Dismissal
	Appeal	Attorney Withdrew	without final disposition	

_____	Plea and Sentence (1 defendant with 1 case)	\$300
_____	**Additional cases on same defendant (plea, 12.45 or dismissal) (per case)	\$50
_____	Dismissal after court appearances & discovery (1 defendant with 1 case)	\$300
_____	**Additional cases (per case)	\$50
_____	Dismissal without court appearances	\$75
_____	Trial preparation / extraordinary work	\$75 / hr
_____	Court Trial or Jury Trial (per ½ day)	\$300
_____	Appeals (\$2500 max)	\$75 / hr
_____	MHMR / Extraditions defendant / Sign language (Additional)	\$100
_____	Additional fees from page 2 (itemized statement)	

TOTAL REQUESTED

I certify the above information is true and accurate.

Attorney Signature

ORDER

Having reviewed the foregoing motion, and considering the facts of this case and the local guidelines for payment of counsel, I find that \$ _____ is proper, and order that payment be made in that amount.

_____, 20_____
Approval Date

Presiding Judge

TO BE COMPLETED ONLY IF REQUESTING ADDITIONAL FEES
THAN STANDARD RATE

ATTACH TO PAGE ONE
ITEMIZED STATEMENT TO SUPPORT HOURLY RATE (\$75 per hour)
FOR CONTESTED MATTERS OR TO DEVIATE FROM
STANDARD FEE SCHEDULE

Attorney should include date of service, service performed and amount of time.

TOTAL TIME: X / hr =

I certify the above information is true and correct.

Attorney Signature