97th District Court Attorney Fee Voucher Jurisdiction County Cause No. Offense 97th District Court □ Archer □ Clay □ Montague In the case of STATE OF TEXAS vs. Case Level: [ ] Adult [ Degree of Primary Case: Flat Fee – Court Appointed Services Check Disposition TOTAL FLAT FEE Flat Fee Amount Claimed Dismissal \$225 Plea \$525 Revocation/Adjudication (uncontested) \$450 Revocation/Adjudication (contested) \$500 Trial \$150 X # days in court Habeas Corpus or Bond Motions \$100 Fixed Rate -- (Court Appointed Services (In Lieu of Flat Fee for Exceptional Circumstances & described in attached documentation to support such request.) [\_] YES [\_] NO Check Degree of Felony **Hourly Rate** TOTAL HOURLY RATE Amount Claimed 1St and 2nd Degree Felony \$125 All other Felonies \$115 TOTAL OTHER DEFENSE All other Defense Expenses: (defense investigator, lab fees, medical exams, defense Amount interpreter services, transcript services, payment to defense witnesses, and travel expenses.) **EXPENSES** Claimed ATTORNEY IDENTIFICATION INFORMATION **Attorney Name** State Bar Number Mailing Address (Number, Street, Suite, City, State, Zip Code): Telephone Number: E-Mail Address: **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. I further swear or affirm that I have not received nor will receive any money or anything also or value for representing the accused, except as otherwise disclosed to the Court in writing

| money of anything else of value for representing the accused, except as otherwise disclosed to the court in wi         | 0                                    |
|--|--------------------------------------|
| Time Period Of Services Rendered: From to  |                                      |
| Have previous vouchers been submitted for this case? $\ \square$ Yes $\ \square$ No                                    |                                      |
| Is this voucher for Final Payment?   Yes  No   |                                      |
|  | Signature and Date                   |
| ORDER  |                                      |
| All itemized statements are subject to review and fees may be adjusted by the Court bas on the Complexity of the case. |                                      |
| Amount approved: \$  |                                      |
| Presiding Judge Date   | _                                    |
| Reason for Denial or Variance:   |                                      |
|  | Recorded by District Clerk File Mark |