## **Attorney Fee Voucher**

1. Jurisdiction  District County		2. County	у 3	. 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 (In Applicable)	10. Telephone	
8. State	. State Bar Number 8a. Tax ID Number					11. Fax
12. Flat Fee – Court Appointed Services				T		12a. Total Flat Fee
						\$
13.	In Court Services			Hours	Dates	13a. Total In Court Compensation.
						Compensation.
	Rate per Hour =	Tota	l hours			
1.4	-			11	D. (	\$
14.	Out of Court Services			Hours	Dates	14a. Total Out of Court Compensation.
	Rate per Hour =	Tota	l hours			\$
15. Investigator					Amount	15a. Total Investigator Expenses
		\$ 1				
16.	Expert Witness				Amount	16a. Total Expert Witness Expenses
17	Other Litigation Expenses Amount					\$ 17- T-4-1 Oth Lidin-di
17.	Other Liugation E	xpenses			Amount	17a. Total Other Litigation Expenses
						\$
18. Time Period of service Rendered: From to						
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.						
Final Payment Partial Payment						
						Date
22. SIGNATURE OF PRESIDING JUDGE:						Amount Approved:
Reason(s) for Denial or Variation						