

		County Auditor's Form 40-1BV Harris County, TX (REV. 02/01/2023)			
		ATTORNEY FEES EXPENSE CLAIM DISTRICT COURTS-COURT APPEARANCE UNDER ARTICLE 26.05, CODE OF CRIMINAL PROCEDURE AS AMENDED			
Court No.	Defendant Name	Case Number(s) - Charge(s)			
<u>INDIVIDUAL CASE APPOINTMENT</u>		No. of Court Days/Hours	Rate		Amount
NON-TRIAL	First Degree		\$175/hour		
	Second Degree		\$150/hour		
	Third Degree, SJF, MRP/MAJ		\$125/hour		
TRIAL	First Degree		\$175/hour		
	Second Degree		\$150/hour		
	Third Degree, SJF, MRP/MAJ		\$125/hour		
OUT OF COURT HOURS	First Degree		\$175/hour		
	Second Degree		\$150/hour		
	Third Degree, SJF, MRP/MAJ		\$125/hour		
SPECIALTY COURT HOURS			\$125 - \$175/hour		
INVESTIGATION HOURS			\$90/hour		
INVESTIGATION OTHER EXPENSES					
EXPERT					
BILINGUAL SUPPLEMENT			\$50/day		
PRE-TRIAL HEARING WITH TESTIMONY & PSI HEARING			\$125/hour		
OTHER					
TOTAL					
Court Appearance(s) :					
PERSONAL INFORMATION					
Attorney Name		Telephone Number		Bar Card Number	
Mailing Address					
CERTIFICATION					
I swear or affirm that the Harris County Auditor may rely upon the information contained in this ATTORNEY FEES EXPENSE CLAIM to make payment according to the fee schedule adopted by the Board of District Judges Trying Criminal Cases pursuant to Tex. Code Crim. P. art. 26.05. I further swear or affirm that I have not received nor will I receive anything of value for representing the accused, except as otherwise disclosed to the Court in writing.					
<div>Attorney at Law (Signature)</div>					
The above fees, including any fees which exceed the presumptive maximum fees set forth herein were reviewed by this court and determined to be both reasonable and necessary and are hereby approved for payment.					
<div>Approved</div> <div>Judge Presiding</div>					