



County Auditor's Form 40-3  
Harris County, Texas (REV. 06/03)

**ATTORNEY FEES EXPENSE CLAIM  
JUVENILE DISTRICT COURTS-COURT APPEARANCE  
UNDER TEXAS FAMILY CODE SECTION 51.101**

**INSTRUCTIONS**

Show only one respondent per claim.  
Before payment can be authorized, each item must be completed legibly in ink.  
For investigations, paid bills must be submitted by the attorney for expenses claimed.  
Forward completed claim to the Presiding Judge for approval.

Court No.	Respondent's Name	Case Number(s)		Charge(s)	
		Number of Court Days/Hours	RATE	TOTAL (presumptive max.)	AMOUNT (Judge Completes)
<b>ATTORNEY FOR THE DAY AT DETENTION HEARINGS</b>			\$300/day	\$300/day	
<b>INDIVIDUAL CASE APPOINTMENT</b>					
<b>NON-TRIAL</b>	First Degree		\$250/day	\$1,250	
	Second Degree		\$200/day	\$1,000	
	Third Degree, SJF		\$150/day	\$750	
	Misdemeanor & VOP		\$125/day	\$625	
	Resets & Detention Hearings		\$75/day		
<b>TRIAL</b>	First Degree		\$500/day		
	Second Degree		\$400/day		
	Third Degree, SJF, MISD		\$300/day		
<b>NON-DEATH CAPITAL</b>	Non-Trial Appearance		\$400/day	\$3,200	
	Trial/Hearing with Testimony		\$800/day		
	Out-of-Court Hours*		\$100/hour	\$5,000	
<b>PRE-TRIAL HEARING w/ TESTIMONY</b>			\$350/day		
<b>NON-CAPITAL APPEALS</b>			\$75/hour	\$2,250	
<b>OUT OF COURT HOURS*</b>	First Degree		\$100/hour	\$2,000	
	Second Degree		\$75/hour	\$750	
	Third Degree, SJF, MISD		\$50/hour	\$500	
<b>INVESTIGATION</b>	<b>Prior written court approval required. Itemized bill required. Expert expenses paid per County policy.</b>			\$750/case	
<b>EXPERT TESTIMONY</b>				\$750/case	
<b>OTHER-Prior Approval of Fee Schedule Committee Required.</b>					
<b>*Must detail on Out-of-Court voucher form.</b>				<b>TOTAL</b>	

List date(s) of all Court Appearances. Attach any Out-of-Court voucher form.

**ORDER DETERMINING RIGHT TO APPOINTMENT OF COUNSEL**

On this date, the Respondent's request for the appointment of counsel was heard in open Court and evidence presented concerning the Respondent's financial resources

**APPOINTMENT WITH REIMBURSEMENT:** The Court finds the Respondent is entitled to the appointment of counsel because

It is in the interest of justice. The Court further finds the Respondent presently has financial resources to pay all or part of the cost of legal services and related expenses.

IT IS ORDERED that Respondent is appointed counsel and shall contribute to the cost of legal services and related expenses as may be ordered by the Court

**INDIGENCY WITHOUT REIMBURSEMENT:** The Court finds the Respondent is entitled to the appointment of counsel because

Respondent is indigent  It is in the interest of justice. The Court further finds the Respondent presently has insufficient financial resources to offset the cost of legal services and related expenses

IT IS ORDERED that Respondent is appointed counsel in this matter

The Court appoints the attorney named below to represent the Respondent until charges are dismissed, the Respondent is found not to have engaged in delinquent conduct or not be a child in need of supervision, appeals are exhausted, or the attorney is relieved of his/her duties by the Court or replaced by other counsel

**PERSONAL INFORMATION**

Social Security Number	Telephone Number ( )	Bar Card Number
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Mailing Address (Number, Street, Suite, City, State, Zip Code)

**CERTIFICATION**

I, \_\_\_\_\_, Attorney at Law, swear or affirm to the Harris County Auditor that he/she may rely upon the information contained above and make payment according to the fee schedule adopted by the Harris County Juvenile Board. I further swear or affirm that I have not received nor will receive any money or anything else of value for representing the accused, except as otherwise disclosed to the Court in writing.

SWORN TO AND SUBSCRIBED BEFORE ME ON THIS THE \_\_\_\_\_ DAY OF \_\_\_\_\_ A.D. 20 \_\_\_\_\_

Approved