

## Hays County Court at Law Attorney Fee Voucher

1. Jurisdiction County Court at Law	2. County	3. Cause Number	Offense	4. Proceedings <input type="checkbox"/> Trial-Jury <input type="checkbox"/> Trial-Court <input type="checkbox"/> Plea-Open <input type="checkbox"/> Plea- Bargain <input type="checkbox"/> Other _____
5. In the case of: <p style="text-align: center;">State of Texas v</p>				
6. Case Level <input type="checkbox"/> Misdemeanor <input type="checkbox"/> Juvenile <input type="checkbox"/> Appeal <input type="checkbox"/> Revocation – Misdemeanor <input type="checkbox"/> No Charges Filed <input type="checkbox"/> Other				
7. Attorney (Full Name)		9. Attorney Address (Include Law Firm Name if Applicable)		10. Telephone
8. State Bar Number	8a. Tax ID Number			11. Fax
12.	Date	Court Services <small>(Attorney may attach itemized court services. If so, please note "See Attached" below.)</small>	Hours	
	Rate per Hour = \$100.00 before 03/24/2023 \$200.00 on 3/24/2023 or Flat Rate \$500 / \$200 each additional case		<input type="checkbox"/> Total Hours = OR <input type="checkbox"/> FLAT RATE OF \$500 / \$200 each additional case (If flat rate chosen, please still itemize work done in the above section)	
14. Time Period of service Rendered: From _____ to _____ <p style="text-align: center;">Date Date</p>				
15. Additional Comments  <small>(If voucher total over \$1000.00 for a plea, plea of true or dismissal, please note date of approval and the Judge approving here):</small>				16. Total Compensation and Expenses Claimed
17. 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.				
<input type="checkbox"/> Final Payment <input type="checkbox"/> Partial Payment _____ <p style="text-align: center;">Signature Date</p>				
18. SIGNATURE OF PRESIDING JUDGE:				Amount Approved: