

Court-Appointed Attorney Requisition

____ th District Court ____ CC1 ____ CC2 ____ CC3	Cause Number _____ Defendant's Name _____ Offense: _____ Felony: 1 st ____ 2 nd . ____ 3 rd ____ SJ ____ Misdemeanor: A ____ B ____ Appeal ____	
Payment Type:	____MHMAC ____Interim Payment ____Final Payment	
Attorney Name (<i>printed</i>)	Attorney Address (<i>include law firm name</i>)	Telephone
State Bar #		
Initial Interview Certification: (<i>Date and site are required – no telephone conferences</i>) I <u>personally</u> interviewed the Defendant on _____ (<i>date</i>) at: (<i>check one</i>) ____ the McLennan County Courthouse (<i>on the same date as my appointment as counsel</i>) ____ the McLennan County Jail ____ my office ____ by video conference		Initial Interview Fee Claimed \$
Services: I am requesting flat fee ____ (<i>default</i>) or itemized ____ payment for the following service(s):		Flat Fee Claimed <i>Case Disposition</i> \$
____ Case refused _____ <i>Date</i> ____ Competency motion and/or hearing _____ <i>Date</i> ____ Contested pre-trial motions _____ ____ Bond review _____ ____ Plea of guilty or no contest _____ ____ Probation Hearing [MTR/MTA] _____ ____ Case dismissed _____ ____ Other _____ ____ Trial – (<i>list dates</i>) _____ ____ Appeal (<i>must itemize</i>) – (<i>list services/dates</i>) _____		
Itemized Requisitions: Itemized requisitions will not be considered unless the attorney submits both this requisition and a complete, itemized statement of time expended, including total "in court" and "out of court" hours.		Itemized Fee Approved <i>Case Disposition</i> \$
(<i>Enter <u>additions</u> / cases disposed of in this transaction, not including separate counts in one Indictment/Information</i>)		
____ unfiled OR Cause No. _____	Charge: _____	<i>Class</i> <i>Disposition</i>
____ unfiled OR Cause No. _____	Charge: _____	
____ unfiled OR Cause No. _____	Charge: _____	
____ unfiled OR Cause No. _____	Charge: _____	
Attorney Certification: I, the undersigned attorney, certify that I was appointed to the above referenced case, and that the above information is true and correct and in accordance with the laws of the State of Texas. I have provided the McLennan County Auditor with my tax identification information. The compensation and expenses claimed were reasonable and necessary to provide effective assistance of counsel. I have not previously requested payment for an initial interview with this Defendant in any other felony or misdemeanor case.		
Attorney Signature		Date
Signature of Presiding Judge	Date	Total Fees and Expenses Approved: \$
Reason(s) for denial or variation:		