

Juvenile Court-Appointed Attorney Requisition

<p style="text-align: center; font-weight: bold;">474th District Court- Juvenile</p> <p>Under Texas Family Code Section 51.101 & Art. 26.05 CCP</p>	Cause Number _____ Respondent's Name _____ Offense: _____ Felony: 1 st ___ 2 nd ___ 3 rd ___ SJ ___ Misdemeanor A ___ B ___ Appeal ___															
Attorney Name <i>(printed)</i> _____ State Bar# _____	Attorney Address <i>(include law firm name)</i> _____ Telephone _____															
Initial Interview Certification: <i>(The date and the site of the initial interview are required)</i> I <u>personally</u> interviewed the Respondent on _____ <i>(date)</i> at: <i>(check one)</i> ___ the Bill Logue Juvenile Justice Center <i>(on the same date as my appointment)</i> ___ the McLennan Co. Juvenile Detention Center ___ 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): <div style="display: flex; justify-content: space-between;"> <i>date</i> <i>date</i> </div> ___ Case refused/dismitted/SCD/SCP/DPP _____ ___ Determinate Sentence/Certification _____ ___ SCD/SCP/DPP/DPD _____ ___ Detention Hearing _____ ___ Stipulated Adjudication/Disposition _____ ___ Ad Litem for Detention Hearing _____ ___ Trial - <i>(list dates)</i> _____ ___ Appeal <i>(must itemize)</i> - <i>(list services/dates)</i> _____																
Flat Fee Claimed Case Disposition \$ _____																
Itemized Requisitions: Itemized requisitions will not be considered unless the attorney submits both this requisition and a complete, itemized statement of time expended to the appropriate Judge, in person.																
Itemized Fee Approved Case Disposition \$ _____																
<p><i>(Enter additional cases disposed of in this transaction, not including separate counts in one Indictment / Information)</i></p> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 60%;"></th> <th style="width: 15%; text-align: center;">Class</th> <th style="width: 25%; text-align: center;">Disposition</th> </tr> </thead> <tbody> <tr> <td>Cause No. _____ Charge: _____</td> <td style="text-align: center;">--</td> <td>_____</td> </tr> <tr> <td>Cause No. _____ Charge: _____</td> <td style="text-align: center;">--</td> <td>_____</td> </tr> <tr> <td>Cause No. _____ Charge: _____</td> <td style="text-align: center;">--</td> <td>_____</td> </tr> <tr> <td>Cause No. _____ Charge: _____</td> <td style="text-align: center;">--</td> <td>_____</td> </tr> </tbody> </table>			Class	Disposition	Cause No. _____ Charge: _____	--	_____	Cause No. _____ Charge: _____	--	_____	Cause No. _____ Charge: _____	--	_____	Cause No. _____ Charge: _____	--	_____
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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. 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.																
Signature _____	Date Submitted by Attorney _____															
Signature Of Presiding Judge _____	Date _____															
Total Fees and Expenses Approved: \$ _____																
Reason(s) for denial or variation:																