Attorney Fee Voucher

1. Jurisdiction District County		2. County	3.	Cause Number	Offense	4. Proceedings ☐Trial-Jury ☐Trial-Court
Court #		WHARTON				
Court II					-	Other
5. In the case of: State of Texas v						
6. Case Level						
Felony Misdemeanor Juvenile Appeal Capital Case						
Revocation – Felony Revocation – Misdemeanor No Charges Filed Other						
7. Attorney (Full Name)				9. Attorney Address (In Applicable)	10. Telephone	
8. State Bar Number 8a. Tax ID Number						11. Fax
12. Flat Fee – Court Appointed Services						12a. Total Flat Fee
						\$
13.	In Court Services			Hours	Dates	13a. Total In Court Compensation.
	Rate per Hour =	Total hours				\$
14.	Out of Court Serv	ices		Hours	Dates	14a. Total Out of Court
						Compensation.
	Rate per Hour =	Total hours				
1.5		Total House			A	\$
15.	Investigator				Amount	15a. Total Investigator Expenses \$
16.	Expert Witness				Amount	16a. Total Expert Witness Expenses
17.	Other Litigation E	vnancac			Amount	\$ 17a. Total Other Litigation
17.	Other Engation E	Apenses			Amount	Expenses
\$						
18. Time Period of service Rendered: From						
19. Additional Comments						20. Total Compensation and Expenses Claimed
21. 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.						
Final Payment Partial Payment						
Signature						Date
22. SIGNATURE OF PRESIDING JUDGE:						Amount Approved:
Reason(s) for Denial or Variation						