COURT APPOINTED ATTORNEY PAYMENT VOUCHER COUNTY COURT AT LAW

TO THE COMMISSIONERS COURT					
OF WILLIAMSON COUNTY, TEXAS					
Attorney Name: XX-XXX					
Firm Name: (if different from Attorney Name) Last 4 digits of Federal Identification Last 4 digits of Federal Identification	fication Number				
Address: Or	or				
<u> </u>					
Last 4 digits of Social Security Nu	ımber				
Email: Line Item No. 01-0100-0425-004	1131				
Phone Number: <u>01-0100-0423-004</u>	4134				
Is firm a Corporation? Yes No					
The State of Texas vs.					
Cause No(s).					
Offense	_				
Request for Payment as Court Appointed Counsel					
In the above numbered and entitled cause(s) I, the undersigned attorney, represent to the Court that I appointed by the Court to represent the Defendant in the above-styled and numbered cause and that performed the following work on the case(s):					
FINAL CASE DISPOSITION: No Charges Filed Plea Trial Dismissal Appeal Attorney Withdrew without final disposition	n				
Plea and Sentence (1 defendant with 1 case)	\$400				
**Additional cases on same defendant (plea, 12.45 or dismissal) (per case)	\$100				
Dismissal after court appearances & discovery (1 defendant with 1 case)	\$400				
**Additional cases (per case)	\$100				
Dismissal of unfiled case	\$100				
	\$100 / hr				
· · · · · · · · · · · · · · · · · · ·	\$350 / 1/2 day				
, e	\$100 / hr				
	\$200				
	\$100				
	\$150				
Additional fees from page 2 (itemized statement)					
Total Requested					
I certify the above information is true and accurate Attorney Signature					
ORDER					
Having reviewed the foregoing motion, and considering the facts of this case and the local guidelines	for payment				
of counsel, I find that \$ is proper, and order that payment be made in					
, 20					
Approval Date Presiding Judge					

TO BE COMPLETED ONLY IF REQUESTING ADDITIONAL FEES THAN STANDARD RATE

ATTACH TO PAGE ONE ITEMIZED STATEMENT TO SUPPORT HOURLY RATE (\$100 per hour) FOR CONTESTED MATTERS OR TO DEVIATE FROM STANDARD FEE SCHEDULE

	STANDARD FEE SCHEDULE								
Attorney should include date of service, service performed and amount of time.									
	X		=						
I certify the above information is	true and cori	rect.							

Attorney Signature