

DISTRICT COURT: _____

CAUSE NUMBER(S) / LIST ALL: _____ DEFENDANT: _____

ATTORNEY'S FEE / EXPENSE CLAIM AND CERTIFICATION - FAIR DEFENSE ACT

FEE SCHEDULE ADOPTED UNDER ARTICLES 26 05 38 30 38 31 C C P AS AMENDED (REVISED 12-19-02)

INSTRUCTIONS:

1. Itemize time spent in Court and note if time was spent for Docket Call
2. Allocate time separately (if multiple indigent clients) for all fees claimed.
3. Bill time in .25 hour (fifteen minute) increments and carefully calculate totals
4. Itemize (legibly) all time expended, whether in or out of Court.
5. ALWAYS note on this form whether or not the defendant has been ordered to repay attorney's fees, or place "\$ 0" in the blank provided below.

* * *

THE COURT MAY APPROVE ADDITIONAL EXPENDITURES UPON GOOD CAUSE SHOWN AND RESERVES THE DISCRETION TO DEViate UPWARD OR DOWNWARD IN AWARding AN ATTORNEY FEE (WHETHER BY THE HOUR OR BY THE TOTAL AWARded FEE,) DEPENDING ON THE TIME AND LABOR REQUIRED THE COMPLEXITY OF THE CASE AND THE EXPERIENCE AND ABILITY OF THE APPOINTED COUNSEL.

FEE SCHEDULE:

- | | |
|--|--------------------|
| 1. FELONY CASE-DISPOSITION | \$ 100 - 200/ Hour |
| 2. MAXIMUM FOR OUT-OF-COURT TIME | \$ 1500 |
| 3. FELONY APPEAL | \$ 100 - 150/ Hour |
| 4. CAPITAL MURDER (DEATH PENALTY) | |
| a. FIRST CHAIR | \$ 35,000 |
| b. SECOND CHAIR | \$ 15,000 |
| 5. EACH DOCKET CALL (W/O DISPOSITION) | \$ 50 |
| 6. TRANSLATOR/INTERPRETER - NOT TO EXCEED HOURLY RATE FOR APPOINTED COUNSEL IN FELONY CASE | * |
| 7. EXPERT AND/OR INVESTIGATIVE FEES SHALL BE PAID PURSUANT TO ART. 26.052(f)(g)(h) | * |

ATTORNEY INFORMATION

NAME - PRINT OR TYPE		
MAILING ADDRESS		
BAR CARD NUMBER	AMOUNT DEFENDANT ORDERED TO REPAY ? \$	
ATTORNEY CONTACTS WITH DEFENDANT IF:	IN PERSON ?	BY TELEPHONE ?

APPOINTED COUNSEL HOURLY WORKSHEET

DATE	DOCKET CALL? (✓)	BRIEF DESCRIPTION OF WORK PERFORMED FOR THIS DEFENDANT ON ALL CASES APPOINTED (OR ATTACH A FULLY ITEMIZED STATEMENT OF WORK PERFORMED SUBJECT TO THE PENALTY PROVISIONS HEREIN)	HOURS (BY 25)
TOTAL - THIS PAGE ONLY			
GRAND TOTAL - THIS PAGE AND ALL SUBSEQUENT PAGES (IF ANY)			

CERTIFICATION BY ATTORNEY

On the date submitted, the undersigned Attorney at Law, under penalty of perjury states, to wit: that the attorney has competently represented the named defendant and has fully performed the services claimed above, and on all attached Subsequent Hourly Worksheets and/or itemized billing statements which are all incorporated herein by reference, that the attorney has not received and will not receive any money or valuable thing for representing said defendant, unless such payment is disclosed in writing to the Judge before whom this application is pending and that no other request for payment for the described services rendered has been paid

DATE SUBMITTED: _____

ATTORNEY AT LAW
ORDER

The Court finds that the total sum of \$ _____ is a reasonable and necessary attorney's fee and ORDERS it paid. OR

The Court REJECTS said claim for the following reason(s): _____

Entered this the _____ day of _____, 20____ JUDGE PRESIDING