Attorney Fee Voucher

1. Juri	sdiction strict County	2. County	3. Cause Number	Offense	4. Proceedings ☐ Trial-Jury ☐ Trial-Court
☐County Court at Law				_	
Court #					Other
5. In the case of:					
State of Texas v					
Felony Misdemeanor Juvenile Appeal Capital Case					
Revocation – Felony Revocation – Misdemeanor No Charges Filed Other					
7. Attorney (Full Name)			9. Attorney Address (Include Law Firm Name if Applicable)		10. Telephone
8. State Bar Number 8a. Tax ID Number					11. Fax
12. Fla	at Fee – Court Appoi	nted Services			12a. Total Flat Fee
					s
13.	In Court Services	l	Hours	Dates	13a. Total In Court
					Compensation.
	Rate per Hour =	Total hours			
					\$
14.	Out of Court Serv	rices	Hours	Dates	14a. Total Out of Court Compensation.
					•
	Rate per Hour =	Total hours			s
15.	Investigator			Amount	15a. Total Investigator
					Expenses \$
16.	Expert Witness			Amount	16a. Total Expert Witness
					Expenses \$
17.	Other Litigation E	xpenses		Amount	17a. Total Other Litigation
					Expenses \$
18. Time Period of service Rendered: From to					
Date Date					
19. AC	iditional 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					