

# HILL COUNTY, TEXAS ATTORNEY FEE VOUCHER

<b>1. Jurisdiction</b> <input type="checkbox"/> District <input type="checkbox"/> County  <input type="checkbox"/> County Court at Law	<b>2. County</b>  HILL	<b>3. Cause Number</b> _____ _____ _____	<b>Offense</b> _____ _____ _____	<b>4. Proceedings</b> <input type="checkbox"/> Trial-Jury <input type="checkbox"/> Trial-Court  <input type="checkbox"/> Plea-Open <input type="checkbox"/> Plea-Bargain  <input type="checkbox"/> Other	
<b>5. In the case of:</b> <span style="float: right;">State of Texas v</span>					
<b>6. Case Level</b> <input type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor <input type="checkbox"/> Juvenile <input type="checkbox"/> Appeal <input type="checkbox"/> Capital Case  <input type="checkbox"/> Revocation – Felony <input type="checkbox"/> Revocation – Misdemeanor <input type="checkbox"/> No Charges Filed <input type="checkbox"/> Other _____					
<b>7. Attorney (Full Name)</b>		<b>9. Attorney Address (Include Law Firm Name if Applicable)</b>		<b>10. Telephone</b>	
<b>8. State Bar Number</b>	<b>8a. Tax ID Number</b>			<b>11. Fax</b>	
<b>12. Flat Fee – Court Appointed Services</b>				<b>12a. Total Flat Fee</b> \$	
				\$	
<b>13.</b>	<b>In Court Services</b>		<b>Hours</b>	<b>Dates</b>	<b>13a. Total In Court Compensation.</b>  \$
	<b>**Rate per Date = \$100.00 NON JURY</b>	<b>Total Days</b>			
<b>14.</b>	<b>Out of Court Services</b>		<b>Hours</b>	<b>Dates</b>	<b>14a. Total Out of Court Compensation.</b>  \$
	<b>**Rate per Hour = \$100.00*</b>	<b>Total hours</b>			
<b>15.</b>	<b>Investigator (Pre-encumbrance procedures followed)</b>			<b>Amount</b>	<b>15a. Total Investigator Expenses</b> \$
<b>16.</b>	<b>Expert Witness (Pre-encumbrance procedures followed)</b>			<b>Amount</b>	<b>16a. Total Expert Witness Expenses</b> \$
<b>17.</b>	<b>Other Litigation Expenses (Pre-encumbrance procedures followed)</b>			<b>Amount</b>	<b>17a. Total Other Litigation Expenses</b> \$
<b>18. Time Period of service Rendered: From _____ to _____</b> <div style="text-align: center;">Date Date</div>					
<b>19. Additional Comments</b> * pre-encumbrance procedures followed ** subject to variance per Hill County plan.				<b>20. Total Compensation and Expenses Claimed</b>	
<b>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.</b>  <div style="display: flex; justify-content: space-between;"> <span>_____ Signature</span> <span>_____ Date</span> </div>					
<b>22. SIGNATURE OF PRESIDING JUDGE:</b>				<b>Amount Approved:</b>	
<b>Reason(s) for Denial or Variation</b>					