

# Attorney Fee Voucher

Nueces County Court At Law

Court # \_\_\_\_\_

Instructions:

Page 1 of 2

Please complete one fee voucher form for each case. If the defendant has multiple cases, staple all fee voucher forms together and submit to the county court at law judges.

Case No : \_\_\_\_\_

PLEA

BENCH TRIAL

JURY TRIAL

Offense:

In the case of : **State of Texas vs** \_\_\_\_\_

## Part I

### Flat Fees

Withdrew/Substitution	\$100	<input type="checkbox"/>	
MTR	\$250	<input type="checkbox"/>	Magistrate Court Plea \$150 <input type="checkbox"/>
Dismissal	\$200	<input type="checkbox"/>	Magistrate Court MTR \$100 <input type="checkbox"/>
Plea	\$300	<input type="checkbox"/>	
Bench Trial	\$600	<input type="checkbox"/>	APPEAL Itemize <input type="checkbox"/>
Jury Trial	\$800	<input type="checkbox"/>	

## Part II

I am requesting attorneys fees in lieu of **flat fee for exceptional circumstances:** YES / NO  
Attached is supporting documentation for such request.

**In Court** Hours \_\_\_\_\_ X **\$60** = \_\_\_\_\_

**Out of Court** Hours \_\_\_\_\_ X **\$40** = \_\_\_\_\_

**Reimbursable expense (from page 2)** Total \$ \_\_\_\_\_

### ATTORNEY IDENTIFICATION INFORMATION

Attorney Name or Firm:

State Bar Number:

E-Mail Address:

Telephone Number: ( ) \_\_\_\_\_

Mailing Address (Number, Street, Suite, City, State, Zip Code):

Fax Number: ( ) \_\_\_\_\_

Vendor No. :

County Auditor Use:

Dept - Key Code:

Secondary Reference:

### 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. I further swear or affirm that I have not received nor will receive anything else of value for representing the accused, except as otherwise disclosed to the court in writing.

Time Period of Services Rendered: From \_\_\_\_\_ to \_\_\_\_\_

(Circle one)

Signature and Date \_\_\_\_\_

Have previous vouchers been submitted for this case? YES or NO

Is this voucher for:  Final payment or  Partial payment?

### ORDER

SIGNATURE OF TRIAL JUDGE:

\$ \_\_\_\_\_

Date:

Total amount for all cases listed.

Recorded by: Anne Lorentzen, District Clerk by Deputy District Clerk (Signature)

Reason(s) for Denial or Variation

Excessive Hourly Request based on prior court experience.

Multiple Cases\overlapping work

Insufficient Documentation

Other

