

CAUSE NO. _____

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§
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§

IN THE _____ DISTRICT COURT
OF
COMAL COUNTY, TEXAS

MOTION FOR PAYMENT OF ITEMIZED TIME AND SERVICES FOR

COURT APPOINTED ATTORNEY

COURT APPOINTED INTERPRETER

INVESTIGATOR

EXPERT WITNESS

I, _____, do hereby file this affidavit of the itemized time and services performed in the above numbered and entitled cause(s) of action and do solemnly swear or affirm that the below information is true and correct.

I have submitted my Motion to Pay Fees in the above numbered and entitled cause(s) and such request for compensation is reasonable and necessary. The following is a true and accurate itemization of the time and service by date, description of service, and actual time expended in rendering such service: (I have attached _____ additional pages which are incorporated hereinby reference)

<u>DATE OF SERVICE</u>	<u>DESCRIPTION OF SERVICES</u>	<u>TIME RENDERED</u>

TOTAL: _____

I hereby certify that the above information is true and correct.

Executed this the _____ day of _____, 20____.

ATTORNEY AT LAW

CAUSE # _____

§ IN THE _____ DISTRICT COURT

§ OF

§ COMAL COUNTY, TEXAS

(Use initials for minors)

ORDER APPROVING COURT APPOINTED FEES

Attorney Information:

Name: _____ Bar #: _____

Address: _____

Telephone Number: _____ Tax ID#: _____

Case Information:

Position to Which Appointed: _____ Source of Fees: _____

Date Appointed: _____ # of Hours Billed: _____

Billed Expenses: _____

Final Payment or Partial Payment
(Circle one)

Amount of Fees Approved: _____
(Court Use Only)

Be it remembered, that after considering the reasonable and necessary overhead costs, the availability of qualified attorneys willing to accept the stated rate, time and labor reasonably required, the complexity of the case, the experience and ability of counsel, and such other factors as evidenced by the record, file, and docket sheet in this case:

The Court finds that the above Motion to Pay Fees and attached time sheet affidavit is proper and that said above reasonable and necessary services were certified.

It is therefore ORDERED that the said person, named above, be and shall be paid, from the General Fund of Comal County, Texas.

Signed this the _____ day of _____, 20 ____.

JUDGE PRESIDING

Felony Civil Juvenile CPS AG Appeal

Forwarded on _____, 20 ____ by _____