

STATE OF TEXAS

Cause # _____

IN THE TOM GREEN

VS

___ COUNTY COURT
___ COUNTY COURT AT LAW
___ COUNTY COURT AT LAW II

REQUEST FOR ATTORNEY FEES

Section I: (Complete Section I only if requesting a flat fee):

Service Provided	Date Service Provided	Service Provided	Date Service Provided
Conferring with Client, including advising client about documents for a plea.		Appearances in Court for Pretrials (as shown on docket)	
Conferring with County Attorney or witnesses, or reviewing Evidence		Appearances in Court when oral, sworn testimony was elicited	
Appearances in Trial, including for plea.		Other Services Provided	

Section II: (Complete Section II only if requesting a fee based on an hourly rate):

Attached is documentation showing the specific work performed in this case. (If completing Section II, the attorney must attach a statement of services showing the time spent, in 6 minute increments (1/10th of an hour), for each service and the rate charged for such time. Include only time spent (1) in Court on behalf of the Defendant, (2) for reasonable and necessary work out of court. Give details of the services performed and attach any supporting documentation for trial and any post-trial proceedings in the trial court (including filing and presenting a Motion for New Trial).

ATTORNEY CERTIFICATION

I certify that I completed the work described above or on the attached documents. Based upon the SCHEDULE OF FEES adopted by the Court and the time and labor required, the complexity of the case and my experience and abilities, I request (check one or the other box but not both):

FIXED FEES(Complete Section I) in the amount of \$ _____
or

HOURLY RATES (Complete Section II) in the amount of \$ _____.

Date Signed: _____	_____ (Attorney's Signature) Printed Name: _____
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ORDER

- The above request for fees is approved and that amount shall be paid from the General Fund of this County and shall be included as Costs of Court.
- The above fee request is denied for the following reasons, but the above attorney shall be paid \$ _____ from the General Fund of this County and such amount shall be included as Costs of Court.

_____	_____
DATE SIGNED	JUDGE PRESIDING

Case #: _____

State v. _____

Time Sheet for Services Rendered

Date Service Rendered	Description of Services	Time Spent	Hourly Rate Claimed	Amount Claimed for this Service

Total Fee Claimed: \$ _____