

## Court-Appointed Attorney Requisition (Felony)

___ 19 <sup>TH</sup> ___ 54 <sup>TH</sup>  ___ 74 <sup>TH</sup>	Cause Number _____ Defendant's Name _____ Offense: _____ Felony: 1 <sup>st</sup> ___ 2 <sup>nd</sup> ___ 3 <sup>rd</sup> ___ SJ ___ Appeal _____.																							
Attorney Name <i>(printed)</i>	Attorney Address <i>(include law firm name)</i>		Telephone																					
State Bar #																								
<b>Initial Interview Certification:</b> <i>(Date and site are required – no telephone conferences)</i> I <u>personally</u> interviewed the Defendant on _____ <i>(date)</i> at:  (check one)    ___ the McLennan County Courthouse <i>(on the same date as my appointment as counsel)</i> ___ the McLennan County Jail    ___ my office    ___ by video conference			Initial Interview Fee Claimed  \$																					
<b>Services:</b> I am requesting <b>flat fee</b> ___ <i>(default)</i> or <b>itemized</b> ___ payment for the following service(s):  <table style="width: 100%; border: none;"> <tr> <td style="width: 30%; text-align: center;">_____ <i>date</i></td> <td style="width: 30%; text-align: center;">_____ <i>date</i></td> <td style="width: 40%;"></td> </tr> <tr> <td>___ Case refused _____</td> <td>___ Competency motion and/or hearing _____</td> <td></td> </tr> <tr> <td>___ Contested pre-trial motions _____</td> <td>___ Bond review _____</td> <td></td> </tr> <tr> <td>___ Plea of guilty or no contest _____</td> <td>___ Probation Hearing [MTR/MTA] _____</td> <td></td> </tr> <tr> <td>___ Case dismissed _____</td> <td></td> <td></td> </tr> <tr> <td>___ Trial – <i>(list dates)</i> _____</td> <td></td> <td></td> </tr> <tr> <td>___ Appeal <i>(must itemize) – (list services/dates)</i> _____</td> <td></td> <td></td> </tr> </table>			_____ <i>date</i>	_____ <i>date</i>		___ Case refused _____	___ Competency motion and/or hearing _____		___ Contested pre-trial motions _____	___ Bond review _____		___ Plea of guilty or no contest _____	___ Probation Hearing [MTR/MTA] _____		___ Case dismissed _____			___ Trial – <i>(list dates)</i> _____			___ Appeal <i>(must itemize) – (list services/dates)</i> _____			Flat Fee Claimed <i>Case Disposition</i>  \$
_____ <i>date</i>	_____ <i>date</i>																							
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___ Contested pre-trial motions _____	___ Bond review _____																							
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___ Case dismissed _____																								
___ Trial – <i>(list dates)</i> _____																								
___ Appeal <i>(must itemize) – (list services/dates)</i> _____																								
<b>Itemized Requisitions:</b>  Itemized requisitions will not be considered unless the attorney submits both this requisition and a complete, itemized statement of time expended, including <b>total</b> "in court" and "out of court" hours.			Itemized Fee Approved <i>Case Disposition</i>  \$																					
<i>(Enter additional cases disposed of in this transaction, not including separate counts in one Indictment/Information)</i>																								
	<i>Class</i>	<i>Disposition</i>																						
___ unfiled <b>OR</b> Cause No. _____ Charge: _____																								
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___ unfiled <b>OR</b> Cause No. _____ Charge: _____																								
<b>Attorney Certification:</b> I, the undersigned attorney, certify that the above information is true and correct and in accordance with the laws of the State of Texas. I have provided the McLennan County Auditor with my tax identification information. The compensation and expenses claimed were reasonable and necessary to provide effective assistance of counsel. I have not previously requested payment for an initial interview with this Defendant in any other felony or misdemeanor case.																								
_____ Signature	_____ Date Submitted by Attorney																							
<b>Signature Of Presiding Judge</b>	<b>Date</b>	<b>Total Fees and Expenses Approved:</b>  \$																						
Reason(s) for denial or variation:																								
<b>CERTIFICATION OF CLERK OF COURT:</b> I certify that in connection with the above causes or matters, the Defendant qualifies under Art. 26.04, CCrP, for the benefits of a court appointed attorney.																								
_____, Clerk of Court																								