

Date: \_\_\_\_\_

Invoice No.: \_\_\_\_\_

# REQUEST FOR ATTORNEY FEES

Attorney: \_\_\_\_\_

Client Name: \_\_\_\_\_

Address: \_\_\_\_\_

(If juvenile, use first initial and last name)

\_\_\_\_\_

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

Phone No.: \_\_\_\_\_

LegalServer Case: \_\_\_\_\_

E-mail: \_\_\_\_\_

Court: \_\_\_\_\_

Funding Source: State (Prison)      State (Habeas)      \_\_\_\_\_ County      \_\_\_\_\_ Muni

## ATTORNEY FEES REQUESTED:

Attorney Time: \_\_\_\_\_ Hours @ \$ \_\_\_\_\_ rate per hour = \_\_\_\_\_

Travel Time: \_\_\_\_\_ hrs. @ \$ \_\_\_\_\_/hr. = \_\_\_\_\_

Mileage: \_\_\_\_\_ Miles @ \$ \_\_\_\_\_ (GSA Rate) = \_\_\_\_\_

Other attorney related case expenses (per diem, hotel, postage, etc.)

\_\_\_\_\_

\_\_\_\_\_

Total Request: \$ \_\_\_\_\_

CASE STATUS: As of today, this case is:

Currently Active/Interim billing. Invoice Period: From \_\_\_\_\_ to \_\_\_\_\_

**-OR-**

This is the final bill and (*select one*):      the case is closed on LegalServer,      the disposition sheet is attached, or      other: \_\_\_\_\_.

**\*\*\* Supporting Documentation must be included or time must be in LegalServer in order for this request to be processed. \*\*\***

I hereby certify that the above and foregoing claim is just and reasonable. That the work performed was necessary in the defense of my client, and that said claim is now due, owing, and unpaid. That if this is not my initial billing in this matter, I have previously billed \$ \_\_\_\_\_ in fees in the representation of this matter.

\_\_\_\_\_

Claimant

## APPROVAL

To be completed by DIDS

DIDS has reviewed this request and has:      approved a total amount of \$ \_\_\_\_\_; OR

not approved this request: \_\_\_\_\_.

Reviewed by \_\_\_\_\_ Date \_\_\_\_\_

LS     LOG