

**FELONY TRIAL PANEL**  
**Coversheet for Attorney Billing** Interim  Final

Case Number: \_\_\_\_\_ Judge: \_\_\_\_\_

Defendant: \_\_\_\_\_ Date of Appointment: \_\_\_\_\_

Spanish Speaker  In Custody  Out of Custody

**DID CHARGES ORIGINATE WHILE IN CUSTODY OF DOC?** Yes  No

Number of Co-Defendants: \_\_\_\_\_ Previous Attorney (if Applicable): \_\_\_\_\_

Attorney: \_\_\_\_\_ PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

Email: \_\_\_\_\_ **Interim Bill # (i.e.1,2,3):** \_\_\_\_\_ **Amount Paid to Date:** \$ \_\_\_\_\_

Provide brief factual synopsis of your case:

Felony Class & Charge Description: \_\_\_\_\_

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Have you requested a Settlement Conference? \_\_\_\_\_ Present Case Status: \_\_\_\_\_

**DISPOSITION BY:** Trial (# of days \_\_\_)  COP  Dismissed: With Prejudice  Without Prejudice

**(Re: COP – if not original offer, how does final plea differ from original? Use additional sheet if necessary)**

**FINAL DISPOSITION (and date):** \_\_\_\_\_

**FEES:** (for cases appointed after Oct. 1, 2013)

Trial rep \$90/hr. (attach affidavit of all hrs)

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

Other rep: (specify) \_\_\_\_\_

\_\_\_\_\_ Hours @ \$70/hr \$ \_\_\_\_\_

Probation Revocation (Per Admin Order No. 2008-18)

IA on Petition \$50

Non-evidentiary violation hearing \$100

Disposition hearing \$125

(Attach affidavit of all hrs)

**Total Fees:** \$ \_\_\_\_\_

**EXPENSES** (Attach Documentation & Approval)

Travel \$ \_\_\_\_\_

Photocopies (\$.10/pg) \$ \_\_\_\_\_

Telephone \$ \_\_\_\_\_

**Other (specify)**  
\_\_\_\_\_ \$ \_\_\_\_\_

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

**Total Expenses:** \$ \_\_\_\_\_

**TOTAL FEES & EXPENSES:** \$ \_\_\_\_\_

If withdrawing, provide name of new attorney:

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

**(\*Include copy of previously submitted detailed billing for OCAC's reference)**

The statements in the above schedule are true. No compensation for the services described has been received. An accurate itemization of the time and expenses is attached.

\_\_\_\_\_  
Attorney Signature

\_\_\_\_\_  
Date

*For OCAC use only (revised 07/14/2014)*

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

Math Checked  Bill is within Guidelines  Approval and/or  Receipts are attached