



# ATTORNEY FEES EXPENSE CLAIM FORM (CRIMINAL CASES ONLY)



PURSUANT TO ARTICLE 26.05 CODE OF CRIMINAL PROCEDURE AS AMENDED

SECTION A CASE INFORMATION				FEE SCHEDULE			
DEFENDANT NAME (SHOW ONLY ONE DEFENDANT PER CLAIM)				DESCRIPTION	IN COURT	OUT OF COURT	AMOUNT
Jesus Enrique Lucio Soto <i>WLC10</i>				NON-TRIAL FEES			\$0.00
PID	435757	APPOINTMENT DATE	12/4/2014	TRIAL FEES	\$500.00	\$0.00	\$500.00
DEGREE	MA	DISPOSITION DATE	2/18/2015	OTHER LEGAL SERVICE AMOUNT		\$0.00	\$0.00
<input type="checkbox"/> CASE IS ON-GOING <input type="checkbox"/> APPEAL <input type="checkbox"/> DEATH PENALTY CASE		DEATH PENALTY RATE		<input type="checkbox"/> INVESTIGATOR <input type="checkbox"/> EXPERT <input type="checkbox"/> OTHER:			
				<small>(REIMBURSEMENTS FOR OTHER LEGAL SERVICES REQUIRE SUPPORTING DOCUMENTATION)</small>			
				FEE SET BY COURT	\$ <del>200.00</del>	TOTAL	\$500.00
COURT NUMBER		COUNTY COURT 1		JUSTIFICATION FOR ADJUSTMENT PURSUANT TO ARTICLE 26.05(4)(C):			
CASE NUMBER		CR-14-9656-A		<input checked="" type="checkbox"/> COMPLEXITY OF THE CASE AND/OR COUNSEL'S EXPERIENCE <input type="checkbox"/> OTHER:			

SECTION B (MISDEMEANOR CASES ONLY) SERVICES PROVIDED BY ATTORNEY			
DATE	TYPE OF WORK	SERVICES PROVIDED	AMOUNT
	INITIAL JAIL VISIT	<input type="checkbox"/>	\$0.00
	WRIT SECURING BOND REDUCTION	<input type="checkbox"/>	\$0.00
	SECURE JAIL RELEASE	<input type="checkbox"/>	\$0.00
2/18/2015	PLEA / DISMISSAL	<input type="checkbox"/>	\$0.00
	MOTION TO REVOKE / MOTION TO ADJUDICATE	<input type="checkbox"/>	\$0.00
	SUPPRESSION	<input type="checkbox"/>	\$0.00
	PRETRIAL DIVERSION / ALTERNATIVE DISPUTE RESOLUTION (ADR)	<input type="checkbox"/>	\$0.00
	OTHER MISDEMEANOR CASE Case # _____	<input type="checkbox"/>	\$0.00
	OTHER MISDEMEANOR CASE Case # _____	<input type="checkbox"/>	\$0.00
	OTHER MISDEMEANOR CASE Case # _____	<input type="checkbox"/>	\$0.00
	OTHER MISDEMEANOR CASE Case # _____	<input type="checkbox"/>	\$0.00
<b>TOTAL</b>			<b>\$0.00</b>

SECTION C LIST RELATED CASE NO S	SECTION D FELONY CASES / MISDEMEANOR TRIAL WORK			
	DATE	TYPE OF WORK	IN COURT HOURS	OUT OF COURT HOURS
RECEIVED BY COUNTY AUDITOR 2015 SEP 9 PM 4 29	12/4/2014	Appointment date - Arraignment	1	
	12/4/2014	Prepare and file pretrial motions		
	12/15/2015	Court Appearance - pre-trial & trial on the merrits	2	
	12/15/2014	Prepare and file jury trial motions		
	1/5/2015	Court Appearance - Preferential T/M	2	
	2/18/2015	Obtain copy of dismissal; mail to client		
	<b>TOTAL HOURS</b>			<b>5</b>

SECTION E ATTORNEY INFORMATION		
VENDOR NUMBER	TELEPHONE NUMBER	BAR CARD NUMBER
270768	(956) 316-3700	24027169
MAILING ADDRESS		
215 W. Stubbs Street, Edinburg, Texas 78539		

SECTION F CERTIFICATION	
I, <u>Robert Fernandez</u> COURT AND TO THE COUNTY AUDITOR THAT 1) THE INFORMATION CONTAINED ABOVE IS TRUE AND CORRECT, 2) PAYMENT WOULD NOT BE CONTRARY TO THE FEE SCHEDULE ADOPTED BY A MAJORITY OF THE JUDGES PURSUANT TO ARTICLE 26.05 CODE OF CRIMINAL PROCEDURE, 3) I HAVE NOT RECEIVED NOR WILL RECEIVE ANY MONEY OR ANYTHING ELSE OF VALUE FOR REPRESENTING THE ACCUSED, 4) I HAVE NOT SUBMITTED DUPLICATE TIME CHARGES FOR THE SAME HOURS CHARGED IN ANY OTHER CASE, AND 5) I HAVE HANDLED THE MAJORITY OF THE WORK IN THE ABOVE NOTED CASE(S).	ATTORNEY AT LAW, SWEAR OR AFFIRM TO THE _____ ATTORNEY AT LAW (SIGNATURE)
APPROVED: _____ PRESIDING JUDGE (SIGNATURE)	THE _____ DAY OF <u>September</u> 20 <u>15</u>
REVIEWED BY INDIGENT DEFENSE OFFICE	

# ATTORNEY FEES EXPENSE CLAIM FORM (CRIMINAL CASES ONLY)

PURSUANT TO ARTICLE 26.05 CODE OF CRIMINAL PROCEDURE AS AMENDED



SECTION A CASE INFORMATION				FEE SCHEDULE			
DEFENDANT NAME (SHOW ONLY ONE DEFENDANT PER CLAIM) Joel Ernesto Gonzalez Elizondo				DESCRIPTION NON TRIAL FEES	IN COURT	OUT OF COURT	AMOUNT \$300.00
PID 1291570	APPOINTMENT DATE 4/16/2015	DEGREE MA	DISPOSITION DATE 4/16/2015	TRIAL FEES	\$0.00	\$0.00	\$0.00
<input type="checkbox"/> CASE IS ON-GOING <input type="checkbox"/> APPEAL <input type="checkbox"/> DEATH PENALTY CASE				OTHER LEGAL SERVICE AMOUNT    \$0.00    \$0.00			
COURT NUMBER    COUNTY COURT 1				FEES SET BY COURT \$ <u>300.00</u> TOTAL    \$300.00			
CASE NUMBER    CR-15-03404-A				JUSTIFICATION FOR ADJUSTMENT PURSUANT TO ARTICLE 26.05(4)(C): <input checked="" type="checkbox"/> COMPLEXITY OF THE CASE AND/OR COUNSEL'S EXPERIENCE <input type="checkbox"/> OTHER			

SECTION B (MISDEMEANOR CASES ONLY) SERVICES PROVIDED BY ATTORNEY			
DATE	TYPE OF WORK	SERVICES PROVIDED	AMOUNT
	INITIAL JAIL VISIT	<input type="checkbox"/>	\$0.00
	WRIT SECURING BOND REDUCTION	<input type="checkbox"/>	\$0.00
	SECURE JAIL RELEASE	<input type="checkbox"/>	\$0.00
4/16/2015	PLEA / DISMISSAL	<input checked="" type="checkbox"/>	\$300.00
	MOTION TO REVOKE / MOTION TO ADJUDICATE	<input type="checkbox"/>	\$0.00
	SUPPRESSION	<input type="checkbox"/>	\$0.00
	PRETRIAL DIVERSION / ALTERNATIVE DISPUTE RESOLUTION (ADR)	<input type="checkbox"/>	\$0.00
	OTHER MISDEMEANOR CASE    Case # _____	<input type="checkbox"/>	\$0.00
	OTHER MISDEMEANOR CASE    Case # _____	<input type="checkbox"/>	\$0.00
	OTHER MISDEMEANOR CASE    Case # _____	<input type="checkbox"/>	\$0.00
	OTHER MISDEMEANOR CASE    Case # _____	<input type="checkbox"/>	\$0.00
<b>TOTAL</b>			<b>\$300.00</b>

SECTION C LIST RELATED CASE NO,S	SECTION D FELONY CASES / MISDEMEANOR TRIAL WORK			
	DATE	TYPE OF WORK	IN COURT HOURS	OUT OF COURT HOURS
<b>TOTAL HOURS</b>			<b>0</b>	<b>0</b>

SECTION E ATTORNEY INFORMATION		
VENDOR NUMBER 270768	TELEPHONE NUMBER (956) 316-3700	BAR CARD NUMBER 24027169
MAILING ADDRESS		
215 W. Stubbs Street, Edinburg, Texas 78539		

SECTION F CERTIFICATION	
I, <u>Robert Fernandez</u> ATTORNEY AT LAW, SWEAR OR AFFIRM TO THE COURT AND TO THE COUNTY AUDITOR THAT 1) THE INFORMATION CONTAINED ABOVE IS TRUE AND CORRECT; 2) PAYMENT WOULD NOT BE CONTRARY TO THE FEE SCHEDULE ADOPTED BY A MAJORITY OF THE JUDGES PURSUANT TO ARTICLE 26.05 CODE OF CRIMINAL PROCEDURE; 3) I HAVE NOT RECEIVED NOR WILL RECEIVE ANY MONEY OR ANYTHING ELSE OF VALUE FOR REPRESENTING THE ACCUSED; 4) I HAVE NOT SUBMITTED DUPLICATE TIME CHARGES FOR THE SAME HOURS CHARGED IN ANY OTHER CASE; AND 5) I HAVE HANDLED THE MAJORITY OF THE WORK IN THE ABOVE NOTED CASE(S)	
APPROVED: <u>[Signature]</u> PRESIDING JUDGE (SIGNATURE)	THE <u>15th</u> DAY OF <u>August</u> , 20 <u>15</u> ATTORNEY AT LAW (SIGNATURE)
REVIEWED BY INDIGENT DEFENSE OFFICE	



# ATTORNEY FEES EXPENSE CLAIM FORM (CRIMINAL CASES ONLY)

PURSUANT TO ARTICLE 26.05 CODE OF CRIMINAL PROCEDURE AS AMENDED



SECTION A CASE INFORMATION				FEE SCHEDULE			
DEFENDANT NAME (SHOW ONLY ONE DEFENDANT PER CLAIM)				DESCRIPTION OF FEES			
Fernando Cabrera				IN COURT		OUT OF COURT	
PID	1410572	APPOINTMENT DATE	4/16/2015	NON-TRIAL FEES			\$300.00
DEGREE	MA	DISPOSITION DATE	4/16/2015	TRIAL FEES	\$0.00	\$0.00	\$0.00
<input type="checkbox"/> CASE IS ON-GOING <input type="checkbox"/> APPEAL <input type="checkbox"/> DEATH PENALTY CASE				OTHER LEGAL SERVICE AMOUNT			
<input type="checkbox"/> DEATH PENALTY RATE				INVESTIGATOR		EXPERT	
				OTHER			
				<small>(REIMBURSEMENTS FOR OTHER LEGAL SERVICES REQUIRE SUPPORTING DOCUMENTATION)</small>			
COURT NUMBER				FEES SET BY COURT		TOTAL	
COUNTY COURT 1				\$ 300.00		\$300.00	
CASE NUMBER				JUSTIFICATION FOR ADJUSTMENT PURSUANT TO ARTICLE 26.05(4)(C):			
CR-15-0575 A				<input checked="" type="checkbox"/> COMPLEXITY OF THE CASE AND/OR COUNSEL'S EXPERIENCE <input type="checkbox"/> OTHER			

SECTION B (MISDEMEANOR CASES ONLY) SERVICES PROVIDED BY ATTORNEY				
DATE	TYPE OF WORK	SERVICES PROVIDED	AMOUNT	
	INITIAL JAIL VISIT	<input type="checkbox"/>	\$0.00	
	WRIT SECURING BOND REDUCTION	<input type="checkbox"/>	\$0.00	
	SECURE JAIL RELEASE	<input type="checkbox"/>	\$0.00	
4/16/2015	PLEA / DISMISSAL	<input checked="" type="checkbox"/>	\$300.00	
	MOTION TO REVOKE / MOTION TO ADJUDICATE	<input type="checkbox"/>	\$0.00	
	SUPPRESSION	<input type="checkbox"/>	\$0.00	
	PRETRIAL DIVERSION / ALTERNATIVE DISPUTE RESOLUTION (ADR)	<input type="checkbox"/>	\$0.00	
	OTHER MISDEMEANOR CASE	Case # _____	<input type="checkbox"/>	\$0.00
	OTHER MISDEMEANOR CASE	Case # _____	<input type="checkbox"/>	\$0.00
	OTHER MISDEMEANOR CASE	Case # _____	<input type="checkbox"/>	\$0.00
	OTHER MISDEMEANOR CASE	Case # _____	<input type="checkbox"/>	\$0.00
			<b>TOTAL</b>	<b>\$300.00</b>

SECTION C LIST RELATED CASE NO.S	SECTION D FELONY CASES / MISDEMEANOR TRIAL WORK			
	DATE	TYPE OF WORK	IN COURT HOURS	OUT OF COURT HOURS
	TOTAL HOURS		0	0

SECTION E ATTORNEY INFORMATION		
VENDOR NUMBER	TELEPHONE NUMBER	BAR CARD NUMBER
270768	(956) 316-3700	24027169
MAILING ADDRESS		
215 W. Stubbs Street, Edinburg, Texas 78539		

SECTION F CERTIFICATION	
I, <u>Robert Fernandez</u> ATTORNEY AT LAW, SWEAR OR AFFIRM TO THE COURT AND TO THE COUNTY AUDITOR THAT 1) THE INFORMATION CONTAINED ABOVE IS TRUE AND CORRECT, 2) PAYMENT WOULD NOT BE CONTRARY TO THE FEE SCHEDULE ADOPTED BY A MAJORITY OF THE JUDGES PURSUANT TO ARTICLE 26.05 CODE OF CRIMINAL PROCEDURE; 3) I HAVE NOT RECEIVED NOR WILL RECEIVE ANY MONEY OR ANYTHING ELSE OF VALUE FOR REPRESENTING THE ACCUSED, 4) I HAVE NOT SUBMITTED DUPLICATE TIME CHARGES FOR THE SAME HOURS CHARGED IN ANY OTHER CASE, AND 5) I HAVE HANDLED THE MAJORITY OF THE WORK IN THE ABOVE NOTED CASE(S).	
APPROVED: <u>[Signature]</u> PRESIDING JUDGE (SIGNATURE)	THE <u>14th</u> DAY OF <u>August</u> , 20 <u>15</u> ATTORNEY AT LAW (SIGNATURE)
REVIEWED BY INDIGENT DEFENSE OFFICE	

# ATTORNEY FEES EXPENSE CLAIM FORM (CRIMINAL CASES ONLY)

PURSUANT TO ARTICLE 26.05 CODE OF CRIMINAL PROCEDURE AS AMENDED



SECTION A CASE INFORMATION				FEE SCHEDULE		
DEFENDANT NAME (SHOW ONLY ONE DEFENDANT PER CLAIM) Joel Ernesto Gonzalez Elizondo				COUNTY: <u>Hidalgo</u> BY: <u>PH 3</u>		
PID	1291570	APPOINTMENT DATE	4/16/2015	DESCRIPTION	IN COURT	OUT OF COURT
DEGREE	MB	DISPOSITION DATE	4/16/2015	NON TRIAL FEES		
<input type="checkbox"/> CASE IS ON-GOING <input type="checkbox"/> APPEAL <input type="checkbox"/> DEATH PENALTY CASE <input type="checkbox"/> DEATH PENALTY CASE				TRIAL FEES	\$9.00	\$0.00
				OTHER LEGAL SERVICE AMOUNT		\$0.00
				<input type="checkbox"/> INVESTIGATOR <input type="checkbox"/> EXPERT <input type="checkbox"/> OTHER: (REIMBURSEMENTS FOR OTHER LEGAL SERVICES REQUIRE SUPPORTING DOCUMENTATION)		\$0.00
COURT NUMBER: COUNTY COURT 1				FEES SET BY COURT	\$ <u>300.00</u>	TOTAL: \$300.00
CASE NUMBER: CR-15-03402-A				JUSTIFICATION FOR ADJUSTMENT PURSUANT TO ARTICLE 26.05(4)(C):		
				<input checked="" type="checkbox"/> COMPLEXITY OF THE CASE AND/OR COUNSEL'S EXPERIENCE		<input type="checkbox"/> OTHER:

SECTION B (MISDEMEANOR CASES ONLY) SERVICES PROVIDED BY ATTORNEY				
DATE	TYPE OF WORK	SERVICES PROVIDED	AMOUNT	
	INITIAL JAIL VISIT	<input type="checkbox"/>	\$0.00	
	WRIT SECURING BOND REDUCTION	<input type="checkbox"/>	\$0.00	
	SECURE JAIL RELEASE	<input type="checkbox"/>	\$0.00	
4/16/2015	PLEA / DISMISSAL	<input checked="" type="checkbox"/>	\$300.00	
	MOTION TO REVOKE / MOTION TO ADJUDICATE	<input type="checkbox"/>	\$0.00	
	SUPPRESSION	<input type="checkbox"/>	\$0.00	
	PRETRIAL DIVERSION / ALTERNATIVE DISPUTE RESOLUTION (ADR)	<input type="checkbox"/>	\$0.00	
	OTHER MISDEMEANOR CASE Case # _____	<input type="checkbox"/>	\$0.00	
	OTHER MISDEMEANOR CASE Case # _____	<input type="checkbox"/>	\$0.00	
	OTHER MISDEMEANOR CASE Case # _____	<input type="checkbox"/>	\$0.00	
	OTHER MISDEMEANOR CASE Case # _____	<input type="checkbox"/>	\$0.00	
TOTAL			\$300.00	

SECTION C LIST RELATED CASE NO.S	SECTION D FELONY CASES / MISDEMEANOR TRIAL WORK			
	DATE	TYPE OF WORK	IN COURT HOURS	OUT OF COURT HOURS
TOTAL HOURS			0	0

SECTION E ATTORNEY INFORMATION		
VENDOR NUMBER	TELEPHONE NUMBER	BAR CARD NUMBER
270768	(956) 316-3700	24027169
MAILING ADDRESS		
215 W. Stubbs Street, Edinburg, Texas 78539		

SECTION F CERTIFICATION	
I, <u>Robert Fernandez</u> COURT AND TO THE COUNTY AUDITOR THAT 1) THE INFORMATION CONTAINED ABOVE IS TRUE AND CORRECT, 2) PAYMENT WOULD NOT BE CONTRARY TO THE FEE SCHEDULE ADOPTED BY A MAJORITY OF THE JUDGES PURSUANT TO ARTICLE 26.05 CODE OF CRIMINAL PROCEDURE. 3) I HAVE NOT RECEIVED NOR WILL RECEIVE ANY MONEY OR ANYTHING ELSE OF VALUE FOR REPRESENTING THE ACCUSED; 4) I HAVE NOT SUBMITTED DUPLICATE TIME CHARGES FOR THE SAME HOURS CHARGED IN ANY OTHER CASE; AND 5) I HAVE HANDLED THE MAJORITY OF THE WORK IN THE ABOVE NOTED CASE(S)	ATTORNEY AT LAW, SWEAR OR AFFIRM TO THE
APPROVED: PRESIDING JUDGE (SIGNATURE)	THE <u>14th</u> DAY OF <u>August</u> , 2015 ATTORNEY AT LAW (SIGNATURE)
REVIEWED BY INDIGENT DEFENSE OFFICE	

# ATTORNEY FEES EXPENSE CLAIM FORM (CRIMINAL CASES ONLY)

PURSUANT TO ARTICLE 26.05 CODE OF CRIMINAL PROCEDURE AS AMENDED



SECTION A CASE INFORMATION				FEE SCHEDULE			
DEFENDANT NAME (SHOW ONLY ONE DEFENDANT PER CLAIM) Joel Ernesto Gonzalez Elizondo				DESCRIPTION NON-TRIAL FEES	IN COURT	OUT OF COURT	AMOUNT \$300.00
PID 1291570	APPOINTMENT DATE 4/16/2015	DEGREE MB	DISPOSITION DATE 4/16/2015	TRIAL FEES	\$0.00	\$0.00	\$0.00
<input type="checkbox"/> CASE IS ON-GOING <input type="checkbox"/> APPEAL <input type="checkbox"/> DEATH PENALTY CASE				OTHER LEGAL SERVICE AMOUNT    \$0.00    \$0.00			
COURT NUMBER: COUNTY COURT 1 CASE NUMBER: CR-15-03403-A				FEES SET BY COURT \$ <u>300.00</u> TOTAL \$300.00			
DEATH PENALTY RATE: _____				JUSTIFICATION FOR ADJUSTMENT PURSUANT TO ARTICLE 26.05(4)(C): <input type="checkbox"/> COMPLEXITY OF THE CASE AND/OR COUNSEL'S EXPERIENCE <input type="checkbox"/> OTHER			

SECTION B (MISDEMEANOR CASES ONLY) SERVICES PROVIDED BY ATTORNEY			
DATE	TYPE OF WORK	SERVICES PROVIDED	AMOUNT
	INITIAL JAIL VISIT	<input type="checkbox"/>	\$0.00
	WRIT SECURING BOND REDUCTION	<input type="checkbox"/>	\$0.00
	SECURE JAIL RELEASE	<input type="checkbox"/>	\$0.00
4/16/2015	PLEA / DISMISSAL	<input checked="" type="checkbox"/>	\$300.00
	MOTION TO REVOKE / MOTION TO ADJUDICATE	<input type="checkbox"/>	\$0.00
	SUPPRESSION	<input type="checkbox"/>	\$0.00
	PRETRIAL DIVERSION / ALTERNATIVE DISPUTE RESOLUTION (ADR)	<input type="checkbox"/>	\$0.00
	OTHER MISDEMEANOR CASE Case # _____	<input type="checkbox"/>	\$0.00
	OTHER MISDEMEANOR CASE Case # _____	<input type="checkbox"/>	\$0.00
	OTHER MISDEMEANOR CASE Case # _____	<input type="checkbox"/>	\$0.00
	OTHER MISDEMEANOR CASE Case # _____	<input type="checkbox"/>	\$0.00
<b>TOTAL</b>			<b>\$300.00</b>

SECTION C LIST RELATED CASE NO.S	SECTION D FELONY CASES / MISDEMEANOR TRIAL WORK			
	DATE	TYPE OF WORK	IN COURT HOURS	OUT OF COURT HOURS
<b>TOTAL HOURS</b>			<b>0</b>	<b>0</b>

SECTION E ATTORNEY INFORMATION		
VENDOR NUMBER 270768	TELEPHONE NUMBER (956) 316-3700	BAR CARD NUMBER 24027169
MAILING ADDRESS 215 W. Stubbs Street, Edinburg, Texas 78539		

SECTION F CERTIFICATION	
I, <u>Robert Fernandez</u> ATTORNEY AT LAW, SWEAR OR AFFIRM TO THE COURT AND TO THE COUNTY AUDITOR THAT 1) THE INFORMATION CONTAINED ABOVE IS TRUE AND CORRECT; 2) PAYMENT WOULD NOT BE CONTRARY TO THE FEE SCHEDULE ADOPTED BY A MAJORITY OF THE JUDGES PURSUANT TO ARTICLE 26.05 CODE OF CRIMINAL PROCEDURE; 3) I HAVE NOT RECEIVED NOR WILL RECEIVE ANY MONEY OR ANYTHING ELSE OF VALUE FOR REPRESENTING THE ACCUSED; 4) I HAVE NOT SUBMITTED DUPLICATE TIME CHARGES FOR THE SAME HOURS CHARGED IN ANY OTHER CASE; AND 5) I HAVE HANDLED THE MAJORITY OF THE WORK IN THE ABOVE NOTED CASE(S).	
APPROVED: PRESIDING JUDGE (SIGNATURE)	THE <u>14</u> DAY OF <u>August</u> 20 <u>15</u> ATTORNEY AT LAW (SIGNATURE)
REVIEWED BY INDIGENT DEFENSE OFFICE	

# ATTORNEY FEES EXPENSE CLAIM FORM (CRIMINAL CASES ONLY)

PURSUANT TO ARTICLE 26.05 CODE OF CRIMINAL PROCEDURE AS AMENDED

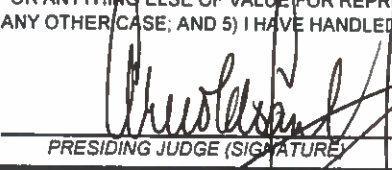


SECTION A CASE INFORMATION				FEE SCHEDULE			
DEFENDANT NAME (SHOW ONLY ONE DEFENDANT PER CLAIM)				DESCRIPTION	IN COURT	OUT OF COURT	AMOUNT
Marco Antonio Castillo Fernandez				NON-TRIAL FEES			\$300.00
PID	369548	APPOINTMENT DATE	1/13/2015	TRIAL FEES	\$0.00	\$0.00	\$0.00
DEGREE	MB	DISPOSITION DATE	1/13/2015	OTHER LEGAL SERVICE AMOUNT		\$0.00	\$0.00
<input type="checkbox"/> CASE IS ON-GOING	<input type="checkbox"/> APPEAL	<input type="checkbox"/> DEATH PENALTY CASE	<input type="checkbox"/> DEATH PENALTY RATE	<input type="checkbox"/> INVESTIGATOR <input type="checkbox"/> EXPERT <input type="checkbox"/> OTHER <small>(REIMBURSEMENTS FOR OTHER LEGAL SERVICES REQUIRE SUPPORTING DOCUMENTATION)</small>			
COURT NUMBER: COUNTY COURT 5				FEES SET BY COURT \$		TOTAL	\$300.00
CASE NUMBER: CR-15-00308-E				JUSTIFICATION FOR ADJUSTMENT PURSUANT TO ARTICLE 26.05(4)(C):			
				<input type="checkbox"/> COMPLEXITY OF THE CASE AND/OR COUNSEL'S EXPERIENCE <input type="checkbox"/> OTHER			

SECTION B (MISDEMEANOR CASES ONLY) SERVICES PROVIDED BY ATTORNEY			
DATE	TYPE OF WORK	SERVICES PROVIDED	AMOUNT
	INITIAL JAIL VISIT	<input type="checkbox"/>	\$0.00
	WRIT SECURING BOND REDUCTION	<input type="checkbox"/>	\$0.00
	SECURE JAIL RELEASE	<input type="checkbox"/>	\$0.00
1/13/2015	PLEA / DISMISSAL	<input checked="" type="checkbox"/>	\$300.00
	MOTION TO REVOKE / MOTION TO ADJUDICATE	<input type="checkbox"/>	\$0.00
	SUPPRESSION	<input type="checkbox"/>	\$0.00
	PRETRIAL DIVERSION / ALTERNATIVE DISPUTE RESOLUTION (ADR)	<input type="checkbox"/>	\$0.00
	OTHER MISDEMEANOR CASE Case # _____	<input type="checkbox"/>	\$0.00
	OTHER MISDEMEANOR CASE Case # _____	<input type="checkbox"/>	\$0.00
	OTHER MISDEMEANOR CASE Case # _____	<input type="checkbox"/>	\$0.00
	OTHER MISDEMEANOR CASE Case # _____	<input type="checkbox"/>	\$0.00
		<b>TOTAL</b>	<b>\$300.00</b>

SECTION C LIST RELATED CASE NO.S	SECTION D FELONY CASES / MISDEMEANOR TRIAL WORK			
	DATE	TYPE OF WORK	IN COURT HOURS	OUT OF COURT HOURS
	<b>TOTAL HOURS</b>		<b>0</b>	<b>0</b>

SECTION E ATTORNEY INFORMATION		
VENDOR NUMBER	TELEPHONE NUMBER	BAR CARD NUMBER
270768	(956) 316-3700	24027169
MAILING ADDRESS		
215 W. Stubbs Street, Edinburg, Texas 78539		

SECTION F CERTIFICATION	
I, <u>Robert Fernandez</u> ATTORNEY AT LAW, SWEAR OR AFFIRM TO THE COURT AND TO THE COUNTY AUDITOR THAT 1) THE INFORMATION CONTAINED ABOVE IS TRUE AND CORRECT; 2) PAYMENT WOULD NOT BE CONTRARY TO THE FEE SCHEDULE ADOPTED BY A MAJORITY OF THE JUDGES PURSUANT TO ARTICLE 26.05 CODE OF CRIMINAL PROCEDURE; 3) I HAVE NOT RECEIVED NOR WILL RECEIVE ANY MONEY OR ANYTHING ELSE OF VALUE FOR REPRESENTING THE ACCUSED; 4) I HAVE NOT SUBMITTED DUPLICATE TIME CHARGES FOR THE SAME HOURS CHARGED IN ANY OTHER CASE; AND 5) I HAVE HANDLED THE MAJORITY OF THE WORK IN THE ABOVE NOTED CASE(S).	
APPROVED:  <small>PRESIDING JUDGE (SIGNATURE)</small>	THE <u>31</u> DAY OF <u>Aug</u> , 2015 <small>ATTORNEY AT LAW (SIGNATURE)</small>
REVIEWED BY INDIGENT DEFENSE OFFICE	

# ATTORNEY FEES EXPENSE CLAIM FORM (CRIMINAL CASES ONLY)

PURSUANT TO ARTICLE 26.05 CODE OF CRIMINAL PROCEDURE AS AMENDED



SECTION A CASE INFORMATION				FEE SCHEDULE			
DEFENDANT NAME (SHOW ONLY ONE DEFENDANT PER CLAIM)				DESCRIPTION	IN COURT	OUT OF COURT	AMOUNT
Aurelio Lopez Zarate				NON-TRIAL FEES			\$300.00
PID	1324262	APPOINTMENT DATE	10/10/2014	TRIAL FEES	\$0.00	\$0.00	\$0.00
DEGREE	MA	DISPOSITION DATE	10/22/2014	OTHER LEGAL SERVICE AMOUNT		\$0.00	\$0.00
<input type="checkbox"/> CASE IS ON-GOING	<input type="checkbox"/> APPEAL	<input type="checkbox"/> DEATH PENALTY CASE	<input type="checkbox"/> DEATH PENALTY RATE	<input type="checkbox"/> INVESTIGATOR	<input type="checkbox"/> EXPERT	<input type="checkbox"/> OTHER:	
				<small>(REIMBURSEMENTS FOR OTHER LEGAL SERVICES REQUIRE SUPPORTING DOCUMENTATION)</small>			
				FEES SET BY COURT \$		TOTAL	\$300.00
COURT NUMBER	COUNTY COURT 5			JUSTIFICATION FOR ADJUSTMENT PURSUANT TO ARTICLE 26.05(4)(C):			
CASE NUMBER	CR-14-10339-E			<input type="checkbox"/> COMPLEXITY OF THE CASE AND/OR COUNSEL'S EXPERIENCE <input type="checkbox"/> OTHER:			

SECTION B (MISDEMEANOR CASES ONLY) SERVICES PROVIDED BY ATTORNEY			
DATE	TYPE OF WORK	SERVICES PROVIDED	AMOUNT
	INITIAL JAIL VISIT	<input type="checkbox"/>	\$0.00
	WRIT SECURING BOND REDUCTION	<input type="checkbox"/>	\$0.00
	SECURE JAIL RELEASE	<input type="checkbox"/>	\$0.00
10/22/2014	PLEA / DISMISSAL	<input checked="" type="checkbox"/>	\$300.00
	MOTION TO REVOKE / MOTION TO ADJUDICATE	<input type="checkbox"/>	\$0.00
	SUPPRESSION	<input type="checkbox"/>	\$0.00
	PRETRIAL DIVERSION / ALTERNATIVE DISPUTE RESOLUTION (ADR)	<input type="checkbox"/>	\$0.00
	OTHER MISDEMEANOR CASE Case # _____	<input type="checkbox"/>	\$0.00
	OTHER MISDEMEANOR CASE Case # _____	<input type="checkbox"/>	\$0.00
	OTHER MISDEMEANOR CASE Case # _____	<input type="checkbox"/>	\$0.00
	OTHER MISDEMEANOR CASE Case # _____	<input type="checkbox"/>	\$0.00
		<b>TOTAL</b>	<b>\$300.00</b>

SECTION C LIST RELATED CASE NO.S	SECTION D FELONY CASES / MISDEMEANOR TRIAL WORK			
	DATE	TYPE OF WORK	IN COURT HOURS	OUT OF COURT HOURS
	<b>TOTAL HOURS</b>		<b>0</b>	<b>0</b>

SECTION E ATTORNEY INFORMATION		
VENDOR NUMBER	TELEPHONE NUMBER	BAR CARD NUMBER
270768	(956) 316-3700	24027169
MAILING ADDRESS		
215 W. Stubbs Street, Edinburg, Texas 78539		

SECTION F CERTIFICATION	
I, <u>Robert Fernandez</u> ATTORNEY AT LAW, SWEAR OR AFFIRM TO THE COURT AND TO THE COUNTY AUDITOR THAT 1) THE INFORMATION CONTAINED ABOVE IS TRUE AND CORRECT; 2) PAYMENT WOULD NOT BE CONTRARY TO THE FEE SCHEDULE ADOPTED BY A MAJORITY OF THE JUDGES PURSUANT TO ARTICLE 26.05 CODE OF CRIMINAL PROCEDURE; 3) I HAVE NOT RECEIVED NOR WILL RECEIVE ANY MONEY OR ANYTHING ELSE OF VALUE FOR REPRESENTING THE ACCUSED; 4) I HAVE NOT SUBMITTED DUPLICATE TIME CHARGES FOR THE SAME HOURS CHARGED IN ANY OTHER CASE; AND 5) I HAVE HANDLED THE MAJORITY OF THE WORK IN THE ABOVE NOTED CASE(S).	
APPROVED: <u>[Signature]</u> PRESIDING JUDGE (SIGNATURE)	_____ ATTORNEY AT LAW (SIGNATURE) THE <u>31</u> DAY OF <u>AUG</u> , 2015
REVIEWED BY INDIGENT DEFENSE OFFICE	

# ATTORNEY FEES EXPENSE CLAIM FORM (CRIMINAL CASES ONLY)

PURSUANT TO ARTICLE 26.05 CODE OF CRIMINAL PROCEDURE AS AMENDED



SECTION A CASE INFORMATION				FEE SCHEDULE			
DEFENDANT NAME (SHOW ONLY ONE DEFENDANT PER CLAIM)				DESCRIPTION	IN COURT	OUT OF COURT	AMOUNT
Jessica Berenice Soto Gonzalez				NON-TRIAL FEES			\$300.00
PID	1262254	APPOINTMENT DATE	10/22/2014	TRIAL FEES	\$0.00	\$0.00	\$0.00
DEGREE	MB	DISPOSITION DATE	10/22/2014	OTHER LEGAL SERVICE AMOUNT		\$0.00	\$0.00
<input type="checkbox"/> CASE IS ON-GOING	<input type="checkbox"/> APPEAL	<input type="checkbox"/> DEATH PENALTY CASE	<input type="checkbox"/> DEATH PENALTY RATE	<input type="checkbox"/> INVESTIGATOR	<input type="checkbox"/> EXPERT	<input type="checkbox"/> OTHER	(REIMBURSEMENTS FOR OTHER LEGAL SERVICES REQUIRE SUPPORTING DOCUMENTATION)
COURT NUMBER COUNTY COURT 5				FEES SET BY COURT \$	TOTAL		\$300.00
CASE NUMBER CR-14-8704-E				JUSTIFICATION FOR ADJUSTMENT PURSUANT TO ARTICLE 26.05(4)(C):			
				<input type="checkbox"/> COMPLEXITY OF THE CASE AND/OR COUNSEL'S EXPERIENCE	<input type="checkbox"/> OTHER		

SECTION B (MISDEMEANOR CASES ONLY) SERVICES PROVIDED BY ATTORNEY			
DATE	TYPE OF WORK	SERVICES PROVIDED	AMOUNT
	INITIAL JAIL VISIT	<input type="checkbox"/>	\$0.00
	WRIT SECURING BOND REDUCTION	<input type="checkbox"/>	\$0.00
	SECURE JAIL RELEASE	<input type="checkbox"/>	\$0.00
10/22/2014	PLEA / DISMISSAL	<input checked="" type="checkbox"/>	\$300.00
	MOTION TO REVOKE / MOTION TO ADJUDICATE	<input type="checkbox"/>	\$0.00
	SUPPRESSION	<input type="checkbox"/>	\$0.00
	PRETRIAL DIVERSION / ALTERNATIVE DISPUTE RESOLUTION (ADR)	<input type="checkbox"/>	\$0.00
	OTHER MISDEMEANOR CASE Case # _____	<input type="checkbox"/>	\$0.00
	OTHER MISDEMEANOR CASE Case # _____	<input type="checkbox"/>	\$0.00
	OTHER MISDEMEANOR CASE Case # _____	<input type="checkbox"/>	\$0.00
	OTHER MISDEMEANOR CASE Case # _____	<input type="checkbox"/>	\$0.00
		<b>TOTAL</b>	<b>\$300.00</b>

SECTION C LIST RELATED CASE NO.S	SECTION D FELONY CASES / MISDEMEANOR TRIAL WORK			
	DATE	TYPE OF WORK	IN COURT HOURS	OUT OF COURT HOURS
	<b>TOTAL HOURS</b>		<b>0</b>	<b>0</b>

SECTION E ATTORNEY INFORMATION		
VENDOR NUMBER	TELEPHONE NUMBER	BAR CARD NUMBER
270768	(956) 316-3700	24027169
MAILING ADDRESS		
215 W. Stubbs Street, Edinburg, Texas 78539		

SECTION F CERTIFICATION	
I, Robert Fernandez	
ATTORNEY AT LAW, SWEAR OR AFFIRM TO THE COURT AND TO THE COUNTY AUDITOR THAT 1) THE INFORMATION CONTAINED ABOVE IS TRUE AND CORRECT, 2) PAYMENT WOULD NOT BE CONTRARY TO THE FEE SCHEDULE ADOPTED BY A MAJORITY OF THE JUDGES PURSUANT TO ARTICLE 26.05 CODE OF CRIMINAL PROCEDURE; 3) I HAVE NOT RECEIVED NOR WILL RECEIVE ANY MONEY OR ANYTHING ELSE OF VALUE FOR REPRESENTING THE ACCUSED, 4) I HAVE NOT SUBMITTED DUPLICATE TIME CHARGES FOR THE SAME HOURS CHARGED IN ANY OTHER CASE, AND 5) I HAVE HANDLED THE MAJORITY OF THE WORK IN THE ABOVE NOTED CASE(S)	
APPROVED:	ATTORNEY AT LAW (SIGNATURE)
PRESIDING JUDGE (SIGNATURE)	THE <u>31</u> DAY OF <u>Aug</u> , 2015
REVIEWED BY INDIGENT DEFENSE OFFICE	

# ATTORNEY FEES EXPENSE CLAIM FORM (CRIMINAL CASES ONLY)

PURSUANT TO ARTICLE 26.05 CODE OF CRIMINAL PROCEDURE AS AMENDED



SECTION A CASE INFORMATION				FEE SCHEDULE			
DEFENDANT NAME (SHOW ONLY ONE DEFENDANT PER CLAIM)				DESCRIPTION	IN COURT	OUT OF COURT	AMOUNT
Juan Cervantes Cortez				NON-TRIAL FEES			\$300.00
PID	1078277	APPOINTMENT DATE	7/15/2014	TRIAL FEES	\$0.00	\$0.00	\$0.00
DEGREE	MB	DISPOSITION DATE	11/6/2014	OTHER LEGAL SERVICE AMOUNT		\$0.00	\$0.00
<input type="checkbox"/> CASE IS ON-GOING <input type="checkbox"/> APPEAL <input type="checkbox"/> DEATH PENALTY CASE			DEATH PENALTY RATE	<input type="checkbox"/> INVESTIGATOR <input type="checkbox"/> EXPERT <input type="checkbox"/> OTHER:			
				<small>(REIMBURSEMENTS FOR OTHER LEGAL SERVICES REQUIRE SUPPORTING DOCUMENTATION)</small>			
COURT NUMBER				FEE SET BY COURT \$		TOTAL	\$300.00
COUNTY COURT 6				JUSTIFICATION FOR ADJUSTMENT PURSUANT TO ARTICLE 26.05(4)(C):			
CASE NUMBER				<input type="checkbox"/> COMPLEXITY OF THE CASE AND/OR COUNSEL'S EXPERIENCE <input type="checkbox"/> OTHER:			
CR-14-5046-F							

SECTION B (MISDEMEANOR CASES ONLY) SERVICES PROVIDED BY ATTORNEY			
DATE	TYPE OF WORK	SERVICES PROVIDED	AMOUNT
	INITIAL JAIL VISIT	<input type="checkbox"/>	\$0.00
	WRIT SECURING BOND REDUCTION	<input type="checkbox"/>	\$0.00
	SECURE JAIL RELEASE	<input type="checkbox"/>	\$0.00
11/6/2014	PLEA / DISMISSAL	<input checked="" type="checkbox"/>	\$300.00
	MOTION TO REVOKE / MOTION TO ADJUDICATE	<input type="checkbox"/>	\$0.00
	SUPPRESSION	<input type="checkbox"/>	\$0.00
	PRETRIAL DIVERSION / ALTERNATIVE DISPUTE RESOLUTION (ADR)	<input type="checkbox"/>	\$0.00
	OTHER MISDEMEANOR CASE	Case # _____ <input type="checkbox"/>	\$0.00
	OTHER MISDEMEANOR CASE	Case # _____ <input type="checkbox"/>	\$0.00
	OTHER MISDEMEANOR CASE	Case # _____ <input type="checkbox"/>	\$0.00
	OTHER MISDEMEANOR CASE	Case # _____ <input type="checkbox"/>	\$0.00
		<b>TOTAL</b>	<b>\$300.00</b>

SECTION C LIST RELATED CASE NO.S	SECTION D FELONY CASES / MISDEMEANOR TRIAL WORK			
	DATE	TYPE OF WORK	IN COURT HOURS	OUT OF COURT HOURS
TOTAL HOURS			0	0

SECTION E ATTORNEY INFORMATION		
VENDOR NUMBER	TELEPHONE NUMBER	BAR CARD NUMBER
270768	(956) 316-3700	24027169
MAILING ADDRESS		
215 W. Stubbs Street, Edinburg, Texas 78539		

SECTION F CERTIFICATION	
I, <u>Robert Fernandez</u> COURT AND TO THE COUNTY AUDITOR THAT 1) THE INFORMATION CONTAINED ABOVE IS TRUE AND CORRECT; 2) PAYMENT WOULD NOT BE CONTRARY TO THE FEE SCHEDULE ADOPTED BY A MAJORITY OF THE JUDGES PURSUANT TO ARTICLE 26.05 CODE OF CRIMINAL PROCEDURE; 3) I HAVE NOT RECEIVED NOR WILL RECEIVE ANY MONEY OR ANYTHING ELSE OF VALUE FOR REPRESENTING THE ACCUSED; 4) I HAVE NOT SUBMITTED DUPLICATE TIME CHARGES FOR THE SAME HOURS CHARGED IN ANY OTHER CASE; AND 5) I HAVE HANDLED THE MAJORITY OF THE WORK IN THE ABOVE NOTED CASE(S)	ATTORNEY AT LAW, SWEAR OR AFFIRM TO THE <u>Robert Fernandez</u> ATTORNEY AT LAW (SIGNATURE)
APPROVED: <u>[Signature]</u> PRESIDING JUDGE (SIGNATURE)	THE <u>25</u> DAY OF <u>Aug</u> , 2015

REVIEWED BY INDIGENT DEFENSE OFFICE

# ATTORNEY FEES EXPENSE CLAIM FORM (CRIMINAL CASES ONLY)

PURSUANT TO ARTICLE 26.05 CODE OF CRIMINAL PROCEDURE AS AMENDED



SECTION A CASE INFORMATION				FEE SCHEDULE			
DEFENDANT NAME (SHOW ONLY ONE DEFENDANT PER CLAIM)				DESCRIPTION	IN COURT	OUT OF COURT	AMOUNT
Hector Ruben Espinoza, Jr.				NON-TRIAL FEES			\$300.00
PID	1418700	APPOINTMENT DATE	4/30/2015	TRIAL FEES	\$0.00	\$0.00	\$0.00
DEGREE	MB	DISPOSITION DATE	5/4/2015	OTHER LEGAL SERVICE AMOUNT		\$0.00	\$0.00
<input type="checkbox"/> CASE IS ON-GOING	<input type="checkbox"/> APPEAL	<input type="checkbox"/> DEATH PENALTY CASE	<input type="checkbox"/> DEATH PENALTY RATE	<input type="checkbox"/> INVESTIGATOR	<input type="checkbox"/> EXPERT	<input type="checkbox"/> OTHER:	
				(REIMBURSEMENTS FOR OTHER LEGAL SERVICES REQUIRE SUPPORTING DOCUMENTATION)			
COURT NUMBER COUNTY COURT 7				FEES SET BY COURT	\$300.00	TOTAL	\$300.00
CASE NUMBER CR-14-12018-G				JUSTIFICATION FOR ADJUSTMENT PURSUANT TO ARTICLE 26.05(4)(C):			
				<input checked="" type="checkbox"/> COMPLEXITY OF THE CASE AND/OR COUNSEL'S EXPERIENCE <input type="checkbox"/> OTHER:			

SECTION B (MISDEMEANOR CASES ONLY) SERVICES PROVIDED BY ATTORNEY			
DATE	TYPE OF WORK	SERVICES PROVIDED	AMOUNT
	INITIAL JAIL VISIT	<input type="checkbox"/>	\$0.00
	WRIT SECURING BOND REDUCTION	<input type="checkbox"/>	\$0.00
	SECURE JAIL RELEASE	<input type="checkbox"/>	\$0.00
5/4/2015	PLEA / DISMISSAL	<input checked="" type="checkbox"/>	\$300.00
	MOTION TO REVOKE / MOTION TO ADJUDICATE	<input type="checkbox"/>	\$0.00
	SUPPRESSION	<input type="checkbox"/>	\$0.00
	PRETRIAL DIVERSION / ALTERNATIVE DISPUTE RESOLUTION (ADR)	<input type="checkbox"/>	\$0.00
	OTHER MISDEMEANOR CASE Case # _____	<input type="checkbox"/>	\$0.00
	OTHER MISDEMEANOR CASE Case # _____	<input type="checkbox"/>	\$0.00
	OTHER MISDEMEANOR CASE Case # _____	<input type="checkbox"/>	\$0.00
	OTHER MISDEMEANOR CASE Case # _____	<input type="checkbox"/>	\$0.00
<b>TOTAL</b>			<b>\$300.00</b>

SECTION C LIST RELATED CASE NO.S	SECTION D FELONY CASES / MISDEMEANOR TRIAL WORK			
	DATE	TYPE OF WORK	IN COURT HOURS	OUT OF COURT HOURS
	<b>TOTAL HOURS</b>		<b>0</b>	<b>0</b>

SECTION E ATTORNEY INFORMATION		
VENDOR NUMBER	TELEPHONE NUMBER	BAR CARD NUMBER
270768	(956) 316-3700	24027169
MAILING ADDRESS		
215 W. Stubbs Street, Edinburg, Texas 78539		

SECTION F CERTIFICATION	
I, <u>Robert Fernandez</u> ATTORNEY AT LAW, SWEAR OR AFFIRM TO THE COURT AND TO THE COUNTY AUDITOR THAT 1) THE INFORMATION CONTAINED ABOVE IS TRUE AND CORRECT; 2) PAYMENT WOULD NOT BE CONTRARY TO THE FEE SCHEDULE ADOPTED BY A MAJORITY OF THE JUDGES PURSUANT TO ARTICLE 26.05 CODE OF CRIMINAL PROCEDURE; 3) I HAVE NOT RECEIVED NOR WILL RECEIVE ANY MONEY OR ANYTHING ELSE OF VALUE FOR REPRESENTING THE ACCUSED; 4) I HAVE NOT SUBMITTED DUPLICATE TIME CHARGES FOR THE SAME HOURS CHARGED IN ANY OTHER CASE; AND 5) I HAVE HANDLED THE MAJORITY OF THE WORK IN THE ABOVE NOTED CASE(S)	
APPROVED: PRESIDENT JUDGE (SIGNATURE)	THE <u>21</u> DAY OF <u>Aug.</u> 2015 ATTORNEY AT LAW (SIGNATURE)
REVIEWED BY INDIGENT DEFENSE OFFICE	



# ATTORNEY FEES EXPENSE CLAIM FORM (CRIMINAL CASES ONLY)

PURSUANT TO ARTICLE 26.05 CODE OF CRIMINAL PROCEDURE AS AMENDED



SECTION A CASE INFORMATION				FEE SCHEDULE			
DEFENDANT NAME (SHOW ONLY ONE DEFENDANT PER CLAIM)				DESCRIPTION	IN COURT	OUT OF COURT	AMOUNT
Gabriel Anthony Suarez				NON-TRIAL FEES			\$350.00
PID	1434946	APPOINTMENT DATE	7/16/2014	TRIAL FEES	\$0.00	\$0.00	\$0.00
DEGREE	MB	DISPOSITION DATE	11/17/2014	OTHER LEGAL SERVICE AMOUNT		\$0.00	\$0.00
<input type="checkbox"/> CASE IS ON-GOING	<input type="checkbox"/> APPEAL	<input type="checkbox"/> DEATH PENALTY CASE	<input type="checkbox"/> DEATH PENALTY RATE	<input type="checkbox"/> INVESTIGATOR <input type="checkbox"/> EXPERT <input type="checkbox"/> OTHER: <small>(REIMBURSEMENTS FOR OTHER LEGAL SERVICES REQUIRE SUPPORTING DOCUMENTATION)</small>			
COURT NUMBER		COUNTY COURT 7		FEES SET BY COURT	\$500.00	TOTAL	\$350.00
CASE NUMBER		CR-14-8864-G		JUSTIFICATION FOR ADJUSTMENT PURSUANT TO ARTICLE 26.05(4)(C):			
				<input checked="" type="checkbox"/> COMPLEXITY OF THE CASE AND/OR COUNSEL'S EXPERIENCE <input type="checkbox"/> OTHER:			

SECTION B (MISDEMEANOR CASES ONLY) SERVICES PROVIDED BY ATTORNEY			
DATE	TYPE OF WORK	SERVICES PROVIDED	AMOUNT
	INITIAL JAIL VISIT	<input type="checkbox"/>	\$0.00
	WRIT SECURING BOND REDUCTION	<input type="checkbox"/>	\$0.00
	SECURE JAIL RELEASE	<input type="checkbox"/>	\$0.00
11/17/2014	PLEA / DISMISSAL	<input checked="" type="checkbox"/>	\$300.00
	MOTION TO REVOKE / MOTION TO ADJUDICATE	<input type="checkbox"/>	\$0.00
	SUPPRESSION	<input type="checkbox"/>	\$0.00
	PRETRIAL DIVERSION / ALTERNATIVE DISPUTE RESOLUTION (ADR)	<input type="checkbox"/>	\$0.00
	OTHER MISDEMEANOR CASE	Case # <u>CR-14-8865-G</u>	<input checked="" type="checkbox"/> \$50.00
	OTHER MISDEMEANOR CASE	Case # _____	<input type="checkbox"/> \$0.00
	OTHER MISDEMEANOR CASE	Case # _____	<input type="checkbox"/> \$0.00
	OTHER MISDEMEANOR CASE	Case # _____	<input type="checkbox"/> \$0.00
		<b>TOTAL</b>	<b>\$350.00</b>

SECTION C LIST RELATED CASE NO.S	SECTION D FELONY CASES / MISDEMEANOR TRIAL WORK			
	DATE	TYPE OF WORK	IN COURT HOURS	OUT OF COURT HOURS
	<b>TOTAL HOURS</b>		<b>0</b>	<b>0</b>

SECTION E ATTORNEY INFORMATION		
VENDOR NUMBER	TELEPHONE NUMBER	BAR CARD NUMBER
270768	(956) 316-3700	24027169
MAILING ADDRESS		
215 W. Stubbs Street, Edinburg, Texas 78539		

SECTION F CERTIFICATION	
I, <u>Robert Fernandez</u> ATTORNEY AT LAW, SWEAR OR AFFIRM TO THE COURT AND TO THE COUNTY AUDITOR THAT 1) THE INFORMATION CONTAINED ABOVE IS TRUE AND CORRECT; 2) PAYMENT WOULD NOT BE CONTRARY TO THE FEE SCHEDULE ADOPTED BY A MAJORITY OF THE JUDGES PURSUANT TO ARTICLE 26.05 CODE OF CRIMINAL PROCEDURE; 3) I HAVE NOT RECEIVED NOR WILL RECEIVE ANY MONEY OR ANYTHING ELSE OF VALUE FOR REPRESENTING THE ACCUSED; 4) I HAVE NOT SUBMITTED DUPLICATE TIME CHARGES FOR THE SAME HOURS CHARGED IN ANY OTHER CASE; AND 5) I HAVE HANDLED THE MAJORITY OF THE WORK IN THE ABOVE NOTED CASE(S).	
APPROVED: <u></u> <small>PRESIDING JUDGE (SIGNATURE)</small>	THE <u>21</u> DAY OF <u>Aug.</u> 2015 <small>ATTORNEY AT LAW (SIGNATURE)</small>

REVIEWED BY INDIGENT DEFENSE OFFICE



# ATTORNEY FEES EXPENSE CLAIM FORM (CRIMINAL CASES ONLY)

PURSUANT TO ARTICLE 26.05 CODE OF CRIMINAL PROCEDURE AS AMENDED



SECTION A CASE INFORMATION				FEE SCHEDULE			
DEFENDANT NAME (SHOW ONLY ONE DEFENDANT PER CLAIM)				DESCRIPTION	IN COURT	OUT OF COURT	AMOUNT
Ruben Contreras				NON-TRIAL FEES			\$300.00
PID	1289649	APPOINTMENT DATE	12/11/2014	TRIAL FEES	\$0.00	\$0.00	\$0.00
DEGREE	MB	DISPOSITION DATE	2/5/2015	OTHER LEGAL SERVICE AMOUNT		\$0.00	\$0.00
<input type="checkbox"/> CASE IS ON-GOING	<input type="checkbox"/> APPEAL	<input type="checkbox"/> DEATH PENALTY CASE	<input type="checkbox"/> DEATH PENALTY RATE	<input type="checkbox"/> INVESTIGATOR	<input type="checkbox"/> EXPERT	<input type="checkbox"/> OTHER:	
				<small>(REIMBURSEMENTS FOR OTHER LEGAL SERVICES REQUIRE SUPPORTING DOCUMENTATION)</small>			
COURT NUMBER COUNTY COURT 7				FEES SET BY COURT	\$ 300.	TOTAL	\$300.00
CASE NUMBER CR-14-10755-G				JUSTIFICATION FOR ADJUSTMENT PURSUANT TO ARTICLE 26.05(4)(C):			
				<input checked="" type="checkbox"/> COMPLEXITY OF THE CASE AND/OR COUNSEL'S EXPERIENCE <input type="checkbox"/> OTHER			

SECTION B (MISDEMEANOR CASES ONLY) SERVICES PROVIDED BY ATTORNEY				
DATE	TYPE OF WORK	SERVICES PROVIDED	AMOUNT	
	INITIAL JAIL VISIT	<input type="checkbox"/>	\$0.00	
	WRIT SECURING BOND REDUCTION	<input type="checkbox"/>	\$0.00	
	SECURE JAIL RELEASE	<input type="checkbox"/>	\$0.00	
2/5/2015	PLEA / DISMISSAL	<input checked="" type="checkbox"/>	\$300.00	
	MOTION TO REVOKE / MOTION TO ADJUDICATE	<input type="checkbox"/>	\$0.00	
	SUPPRESSION	<input type="checkbox"/>	\$0.00	
	PRETRIAL DIVERSION / ALTERNATIVE DISPUTE RESOLUTION (ADR)	<input type="checkbox"/>	\$0.00	
	OTHER MISDEMEANOR CASE Case # _____	<input type="checkbox"/>	\$0.00	
	OTHER MISDEMEANOR CASE Case # _____	<input type="checkbox"/>	\$0.00	
	OTHER MISDEMEANOR CASE Case # _____	<input type="checkbox"/>	\$0.00	
	OTHER MISDEMEANOR CASE Case # _____	<input type="checkbox"/>	\$0.00	
<b>TOTAL</b>			<b>\$300.00</b>	

SECTION C LIST RELATED CASE NO.S	SECTION D FELONY CASES / MISDEMEANOR TRIAL WORK			
	DATE	TYPE OF WORK	IN COURT HOURS	OUT OF COURT HOURS
<b>TOTAL HOURS</b>			<b>0</b>	<b>0</b>

SECTION E ATTORNEY INFORMATION		
VENDOR NUMBER	TELEPHONE NUMBER	BAR CARD NUMBER
270768	(956) 316-3700	24027169
MAILING ADDRESS		
215 W. Stubbs Street, Edinburg, Texas 78539		

SECTION F CERTIFICATION	
I, Robert Fernandez, ATTORNEY AT LAW, SWEAR OR AFFIRM TO THE COURT AND TO THE COUNTY AUDITOR THAT 1) THE INFORMATION CONTAINED ABOVE IS TRUE AND CORRECT; 2) PAYMENT WOULD NOT BE CONTRARY TO THE FEE SCHEDULE ADOPTED BY A MAJORITY OF THE JUDGES PURSUANT TO ARTICLE 26.05 CODE OF CRIMINAL PROCEDURE; 3) I HAVE NOT RECEIVED NOR WILL RECEIVE ANY MONEY OR ANYTHING ELSE OF VALUE FOR REPRESENTING THE ACCUSED; 4) I HAVE NOT SUBMITTED DUPLICATE TIME CHARGES FOR THE SAME HOURS CHARGED IN ANY OTHER CASE; AND 5) I HAVE HANDLED THE MAJORITY OF THE WORK IN THE ABOVE NOTED CASE(S).	
APPROVED: <u>Robert Fernandez</u> PRESIDING JUDGE (SIGNATURE)	THE <u>21</u> DAY OF <u>Aug.</u> 20 <u>15</u> ATTORNEY AT LAW (SIGNATURE)

# ATTORNEY FEES EXPENSE CLAIM FORM (CRIMINAL CASES ONLY)

PURSUANT TO ARTICLE 26.05 CODE OF CRIMINAL PROCEDURE AS AMENDED



SECTION A CASE INFORMATION				FEE SCHEDULE			
DEFENDANT NAME (SHOW ONLY ONE DEFENDANT PER CLAIM)				DESCRIPTION	IN COURT	OUT OF COURT	AMOUNT
John Michael Lopez				NON-TRIAL FEES			\$300.00
PID	1416711	APPOINTMENT DATE	2/11/2015	TRIAL FEES	\$0.00	\$0.00	\$0.00
DEGREE	MB	DISPOSITION DATE	4/2/2015	OTHER LEGAL SERVICE AMOUNT		\$0.00	\$0.00
<input type="checkbox"/> CASE IS ON-GOING	<input type="checkbox"/> APPEAL	<input type="checkbox"/> DEATH PENALTY CASE	<input type="checkbox"/> DEATH PENALTY RATE	<input type="checkbox"/> INVESTIGATOR	<input type="checkbox"/> EXPERT	<input checked="" type="checkbox"/> OTHER	
<small>(REIMBURSEMENTS FOR OTHER LEGAL SERVICES REQUIRE SUPPORTING DOCUMENTATION)</small>							
COURT NUMBER				FEE SET BY COURT \$ <u>300.00</u>		TOTAL	\$300.00
COUNTY COURT 7				JUSTIFICATION FOR ADJUSTMENT PURSUANT TO ARTICLE 26.05(4)(C):			
CASE NUMBER				<input checked="" type="checkbox"/> COMPLEXITY OF THE CASE AND/OR COUNSEL'S EXPERIENCE			
CR-15-02366-G				<input type="checkbox"/> OTHER			

SECTION B (MISDEMEANOR CASES ONLY) SERVICES PROVIDED BY ATTORNEY			
DATE	TYPE OF WORK	SERVICES PROVIDED	AMOUNT
	INITIAL JAIL VISIT	<input type="checkbox"/>	\$0.00
	WRIT SECURING BOND REDUCTION	<input type="checkbox"/>	\$0.00
	SECURE JAIL RELEASE	<input type="checkbox"/>	\$0.00
4/2/205	PLEA / DISMISSAL	<input checked="" type="checkbox"/>	\$300.00
	MOTION TO REVOKE / MOTION TO ADJUDICATE	<input type="checkbox"/>	\$0.00
	SUPPRESSION	<input type="checkbox"/>	\$0.00
	PRETRIAL DIVERSION / ALTERNATIVE DISPUTE RESOLUTION (ADR)	<input type="checkbox"/>	\$0.00
	OTHER MISDEMEANOR CASE Case # _____	<input type="checkbox"/>	\$0.00
	OTHER MISDEMEANOR CASE Case # _____	<input type="checkbox"/>	\$0.00
	OTHER MISDEMEANOR CASE Case # _____	<input type="checkbox"/>	\$0.00
	OTHER MISDEMEANOR CASE Case # _____	<input type="checkbox"/>	\$0.00
		<b>TOTAL</b>	<b>\$300.00</b>

SECTION C LIST RELATED CASE NO.S	SECTION D FELONY CASES / MISDEMEANOR TRIAL WORK			
	DATE	TYPE OF WORK	IN COURT HOURS	OUT OF COURT HOURS
TOTAL HOURS			0	0

SECTION E ATTORNEY INFORMATION		
VENDOR NUMBER	TELEPHONE NUMBER	BAR CARD NUMBER
270768	(956) 316-3700	24027169
MAILING ADDRESS		
215 W. Stubbs Street, Edinburg, Texas 78539		

SECTION F CERTIFICATION	
I, <u>Robert Fernandez</u> ATTORNEY AT LAW, SWEAR OR AFFIRM TO THE COURT AND TO THE COUNTY AUDITOR THAT 1) THE INFORMATION CONTAINED ABOVE IS TRUE AND CORRECT; 2) PAYMENT WOULD NOT BE CONTRARY TO THE FEE SCHEDULE ADOPTED BY A MAJORITY OF THE JUDGES PURSUANT TO ARTICLE 26.05 CODE OF CRIMINAL PROCEDURE; 3) I HAVE NOT RECEIVED NOR WILL RECEIVE ANY MONEY OR ANYTHING ELSE OF VALUE FOR REPRESENTING THE ACCUSED; 4) I HAVE NOT SUBMITTED DUPLICATE TIME CHARGES FOR THE SAME HOURS CHARGED IN ANY OTHER CASE; AND 5) I HAVE HANDLED THE MAJORITY OF THE WORK IN THE ABOVE NOTED CASE(S)	
APPROVED: <u><i>Robert Fernandez</i></u> <small>PRESIDING JUDGE (SIGNATURE)</small>	_____ <small>ATTORNEY AT LAW (SIGNATURE)</small> THE <u>21</u> DAY OF <u>Aug.</u> 20 <u>15</u>

REVIEWED BY INDIGENT DEFENSE OFFICE

# ATTORNEY FEES EXPENSE CLAIM FORM (CRIMINAL CASES ONLY)

PURSUANT TO ARTICLE 26.05 CODE OF CRIMINAL PROCEDURE AS AMENDED



SECTION A CASE INFORMATION				FEE SCHEDULE			
DEFENDANT NAME (SHOW ONLY ONE DEFENDANT PER CLAIM)				DESCRIPTION	IN COURT	OUT OF COURT	AMOUNT
Fernando Reyna Gonzalez				NON-TRIAL FEES			\$300.00
PID	136059	APPOINTMENT DATE	5/5/2015	TRIAL FEES	\$0.00	\$0.00	\$0.00
DEGREE	MB	DISPOSITION DATE	5/7/2015	OTHER LEGAL SERVICE AMOUNT		\$0.00	\$0.00
<input type="checkbox"/> CASE IS ON-GOING	<input type="checkbox"/> APPEAL	<input type="checkbox"/> DEATH PENALTY CASE	<input type="checkbox"/> DEATH PENALTY RATE	<input type="checkbox"/> INVESTIGATOR <input type="checkbox"/> EXPERT <input checked="" type="checkbox"/> OTHER: <small>(REIMBURSEMENTS FOR OTHER LEGAL SERVICES REQUIRE SUPPORTING DOCUMENTATION)</small>			
COURT NUMBER: COUNTY COURT 7				FEES SET BY COURT	\$ 300.	TOTAL	\$300.00
CASE NUMBER: CR-11-13150-G				JUSTIFICATION FOR ADJUSTMENT PURSUANT TO ARTICLE 26.05(4)(C):			
				<input checked="" type="checkbox"/> COMPLEXITY OF THE CASE AND/OR COUNSEL'S EXPERIENCE <input type="checkbox"/> OTHER			

SECTION B (MISDEMEANOR CASES ONLY) SERVICES PROVIDED BY ATTORNEY			
DATE	TYPE OF WORK	SERVICES PROVIDED	AMOUNT
	INITIAL JAIL VISIT	<input type="checkbox"/>	\$0.00
	WRIT SECURING BOND REDUCTION	<input type="checkbox"/>	\$0.00
	SECURE JAIL RELEASE	<input type="checkbox"/>	\$0.00
	PLEA / DISMISSAL	<input type="checkbox"/>	\$0.00
5/7/2015	MOTION TO REVOKE / MOTION TO ADJUDICATE	<input checked="" type="checkbox"/>	\$300.00
	SUPPRESSION	<input type="checkbox"/>	\$0.00
	PRETRIAL DIVERSION / ALTERNATIVE DISPUTE RESOLUTION (ADR)	<input type="checkbox"/>	\$0.00
	OTHER MISDEMEANOR CASE Case # _____	<input type="checkbox"/>	\$0.00
	OTHER MISDEMEANOR CASE Case # _____	<input type="checkbox"/>	\$0.00
	OTHER MISDEMEANOR CASE Case # _____	<input type="checkbox"/>	\$0.00
	OTHER MISDEMEANOR CASE Case # _____	<input type="checkbox"/>	\$0.00
		<b>TOTAL</b>	<b>\$300.00</b>

SECTION C LIST RELATED CASE NO.S	SECTION D FELONY CASES / MISDEMEANOR TRIAL WORK			
	DATE	TYPE OF WORK	IN COURT HOURS	OUT OF COURT HOURS
	<b>TOTAL HOURS</b>		<b>0</b>	<b>0</b>

SECTION E ATTORNEY INFORMATION		
VENDOR NUMBER	TELEPHONE NUMBER	BAR CARD NUMBER
270768	(956) 316-3700	24027169
MAILING ADDRESS		
215 W. Stubbs Street, Edinburg, Texas 78539		

SECTION F CERTIFICATION	
I, Robert Fernandez COURT AND TO THE COUNTY AUDITOR THAT 1) THE INFORMATION CONTAINED ABOVE IS TRUE AND CORRECT; 2) PAYMENT WOULD NOT BE CONTRARY TO THE FEE SCHEDULE ADOPTED BY A MAJORITY OF THE JUDGES PURSUANT TO ARTICLE 26.05 CODE OF CRIMINAL PROCEDURE; 3) I HAVE NOT RECEIVED NOR WILL RECEIVE ANY MONEY OR ANYTHING ELSE OF VALUE FOR REPRESENTING THE ACCUSED; 4) I HAVE NOT SUBMITTED DUPLICATE TIME CHARGES FOR THE SAME HOURS CHARGED IN ANY OTHER CASE; AND 5) I HAVE HANDLED THE MAJORITY OF THE WORK IN THE ABOVE NOTED CASE(S).	ATTORNEY AT LAW, SWEAR OR AFFIRM TO THE ATTORNEY AT LAW (SIGNATURE)
APPROVED:	THE <u>21</u> DAY OF <u>Aug.</u> 2015
PRESIDING JUDGE SIGNATURE	



# ATTORNEY FEES EXPENSE CLAIM FORM (CRIMINAL CASES ONLY)



PURSUANT TO ARTICLE 26.05 CODE OF CRIMINAL PROCEDURE AS AMENDED

SECTION A CASE INFORMATION				FEE SCHEDULE			
DEFENDANT NAME (SHOW ONLY ONE DEFENDANT PER CLAIM)				DESCRIPTION	IN COURT	OUT OF COURT	AMOUNT
Jose Angel Valdez Moreno				NON-TRIAL FEES			\$300.00
PID	1046838	APPOINTMENT DATE	5/26/2015	TRIAL FEES	\$0.00	\$0.00	\$0.00
DEGREE	MB	DISPOSITION DATE	5/26/2015	OTHER LEGAL SERVICE AMOUNT		\$0.00	\$0.00
<input type="checkbox"/> CASE IS ON-GOING	<input type="checkbox"/> APPEAL	<input type="checkbox"/> DEATH PENALTY CASE	<input type="checkbox"/> DEATH PENALTY RATE	<input type="checkbox"/> INVESTIGATOR <input type="checkbox"/> EXPERT <input type="checkbox"/> OTHER <small>(REIMBURSEMENTS FOR OTHER LEGAL SERVICES REQUIRE SUPPORTING DOCUMENTATION)</small>			
COURT NUMBER		COUNTY COURT 7		FEES SET BY COURT	\$ 300.	TOTAL	\$300.00
CASE NUMBER		CR-15-04916-G		JUSTIFICATION FOR ADJUSTMENT PURSUANT TO ARTICLE 26.05(4)(C):			
				<input checked="" type="checkbox"/> COMPLEXITY OF THE CASE AND/OR COUNSEL'S EXPERIENCE <input type="checkbox"/> OTHER			

SECTION B (MISDEMEANOR CASES ONLY) SERVICES PROVIDED BY ATTORNEY			
DATE	TYPE OF WORK	SERVICES PROVIDED	AMOUNT
	INITIAL JAIL VISIT	<input type="checkbox"/>	\$0.00
	WRIT SECURING BOND REDUCTION	<input type="checkbox"/>	\$0.00
	SECURE JAIL RELEASE	<input type="checkbox"/>	\$0.00
5/26/2015	PLEA / DISMISSAL	<input checked="" type="checkbox"/>	\$300.00
	MOTION TO REVOKE / MOTION TO ADJUDICATE	<input type="checkbox"/>	\$0.00
	SUPPRESSION	<input type="checkbox"/>	\$0.00
	PRETRIAL DIVERSION / ALTERNATIVE DISPUTE RESOLUTION (ADR)	<input type="checkbox"/>	\$0.00
	OTHER MISDEMEANOR CASE	Case # _____ <input type="checkbox"/>	\$0.00
	OTHER MISDEMEANOR CASE	Case # _____ <input type="checkbox"/>	\$0.00
	OTHER MISDEMEANOR CASE	Case # _____ <input type="checkbox"/>	\$0.00
	OTHER MISDEMEANOR CASE	Case # _____ <input type="checkbox"/>	\$0.00
		<b>TOTAL</b>	<b>\$300.00</b>

SECTION C LIST RELATED CASE NO.S	SECTION D FELONY CASES / MISDEMEANOR TRIAL WORK			
	DATE	TYPE OF WORK	IN COURT HOURS	OUT OF COURT HOURS
TOTAL HOURS			0	0

SECTION E ATTORNEY INFORMATION		
VENDOR NUMBER	TELEPHONE NUMBER	BAR CARD NUMBER
270768	(956) 316-3700	24027169
MAILING ADDRESS		
215 W. Stubbs Street, Edinburg, Texas 78539		

SECTION F CERTIFICATION	
I, <u>Robert Fernandez</u> ATTORNEY AT LAW, SWEAR OR AFFIRM TO THE COURT AND TO THE COUNTY AUDITOR THAT 1) THE INFORMATION CONTAINED ABOVE IS TRUE AND CORRECT, 2) PAYMENT WOULD NOT BE CONTRARY TO THE FEE SCHEDULE ADOPTED BY A MAJORITY OF THE JUDGES PURSUANT TO ARTICLE 26.05 CODE OF CRIMINAL PROCEDURE, 3) I HAVE NOT RECEIVED NOR WILL RECEIVE ANY MONEY OR ANYTHING ELSE OF VALUE FOR REPRESENTING THE ACCUSED, 4) I HAVE NOT SUBMITTED DUPLICATE TIME CHARGES FOR THE SAME HOURS CHARGED IN ANY OTHER CASE, AND 5) I HAVE HANDLED THE MAJORITY OF THE WORK IN THE ABOVE NOTED CASE(S).	
APPROVED: <u></u> PRESIDING JUDGE (SIGNATURE)	_____ ATTORNEY AT LAW (SIGNATURE) THE <u>21</u> DAY OF <u>Aug.</u> 2015
REVIEWED BY INDIGENT DEFENSE OFFICE	

# ATTORNEY FEES EXPENSE CLAIM FORM (CRIMINAL CASES ONLY)

PURSUANT TO ARTICLE 26.05 CODE OF CRIMINAL PROCEDURE AS AMENDED



SECTION A CASE INFORMATION				FEE SCHEDULE			
DEFENDANT NAME (SHOW ONLY ONE DEFENDANT PER CLAIM)				DESCRIPTION	IN COURT	OUT OF COURT	AMOUNT
Janie Zamora Gonzalez				NON-TRIAL FEES			\$300.00
PID	1440618	APPOINTMENT DATE	10/21/2014	TRIAL FEES	\$0.00	\$0.00	\$0.00
DEGREE	MB	DISPOSITION DATE	10/22/2014	OTHER LEGAL SERVICE AMOUNT		\$0.00	\$0.00
<input type="checkbox"/> CASE IS ON-GOING	<input type="checkbox"/> APPEAL	<input type="checkbox"/> DEATH PENALTY CASE	<input type="checkbox"/> DEATH PENALTY RATE	<input type="checkbox"/> INVESTIGATOR <input type="checkbox"/> EXPERT <input type="checkbox"/> OTHER: <small>(REIMBURSEMENTS FOR OTHER LEGAL SERVICES REQUIRE SUPPORTING DOCUMENTATION)</small>			
COURT NUMBER		COUNTY COURT 8		FEES SET BY COURT	\$ 300.00	TOTAL	\$300.00
CASE NUMBER		CR-14-10397-H		JUSTIFICATION FOR ADJUSTMENT PURSUANT TO ARTICLE 26.05(4)(C):			
				<input checked="" type="checkbox"/> COMPLEXITY OF THE CASE AND/OR COUNSEL'S EXPERIENCE <input type="checkbox"/> OTHER			

SECTION B (MISDEMEANOR CASES ONLY) SERVICES PROVIDED BY ATTORNEY			
DATE	TYPE OF WORK	SERVICES PROVIDED	AMOUNT
	INITIAL JAIL VISIT	<input type="checkbox"/>	\$0.00
	WRIT SECURING BOND REDUCTION	<input type="checkbox"/>	\$0.00
	SECURE JAIL RELEASE	<input type="checkbox"/>	\$0.00
10/22/2014	PLEA / DISMISSAL	<input checked="" type="checkbox"/>	\$300.00
	MOTION TO REVOKE / MOTION TO ADJUDICATE	<input type="checkbox"/>	\$0.00
	SUPPRESSION	<input type="checkbox"/>	\$0.00
	PRETRIAL DIVERSION / ALTERNATIVE DISPUTE RESOLUTION (ADR)	<input type="checkbox"/>	\$0.00
	OTHER MISDEMEANOR CASE	Case # _____ <input type="checkbox"/>	\$0.00
	OTHER MISDEMEANOR CASE	Case # _____ <input type="checkbox"/>	\$0.00
	OTHER MISDEMEANOR CASE	Case # _____ <input type="checkbox"/>	\$0.00
	OTHER MISDEMEANOR CASE	Case # _____ <input type="checkbox"/>	\$0.00
		<b>TOTAL</b>	<b>\$300.00</b>

SECTION C LIST RELATED CASE NO.S	SECTION D FELONY CASES / MISDEMEANOR TRIAL WORK			
	DATE	TYPE OF WORK	IN COURT HOURS	OUT OF COURT HOURS
	<b>TOTAL HOURS</b>		<b>0</b>	<b>0</b>

SECTION E ATTORNEY INFORMATION		
VENDOR NUMBER	TELEPHONE NUMBER	BAR CARD NUMBER
270768	(956) 316-3700	24027169
MAILING ADDRESS		
215 W. Stubbs Street, Edinburg, Texas 78539		

SECTION F CERTIFICATION	
I, Robert Fernandez COURT AND TO THE COUNTY AUDITOR THAT 1) THE INFORMATION CONTAINED ABOVE IS TRUE AND CORRECT, 2) PAYMENT WOULD NOT BE CONTRARY TO THE FEE SCHEDULE ADOPTED BY A MAJORITY OF THE JUDGES PURSUANT TO ARTICLE 26.05 CODE OF CRIMINAL PROCEDURE, 3) I HAVE NOT RECEIVED NOR WILL RECEIVE ANY MONEY OR ANYTHING ELSE OF VALUE FOR REPRESENTING THE ACCUSED, 4) I HAVE NOT SUBMITTED DUPLICATE TIME CHARGES FOR THE SAME HOURS CHARGED IN ANY OTHER CASE, AND 5) I HAVE HANDLED THE MAJORITY OF THE WORK IN THE ABOVE NOTED CASE(S)	ATTORNEY AT LAW, SWEAR OR AFFIRM TO THE ATTORNEY AT LAW (SIGNATURE)
APPROVED:	THE <u>31</u> DAY OF <u>Aug</u> , 2015
PRESIDING JUDGE (SIGNATURE)	

# ATTORNEY FEES EXPENSE CLAIM FORM (CRIMINAL CASES ONLY)

PURSUANT TO ARTICLE 26.05 CODE OF CRIMINAL PROCEDURE AS AMENDED



SECTION A CASE INFORMATION				FEE SCHEDULE			
DEFENDANT NAME (SHOW ONLY ONE DEFENDANT PER CLAIM) Maximiliano Calderon Pena				DESCRIPTION	IN COURT	OUT OF COURT	AMOUNT
PID	177294	APPOINTMENT DATE	12/10/2014	NON-TRIAL FEES			\$0.00
DEGREE	FS	DISPOSITION DATE	4/2/2015	TRIAL FEES	\$325.00	\$175.00	\$500.00
<input type="checkbox"/> CASE IS ON-GOING <input type="checkbox"/> APPEAL <input type="checkbox"/> DEATH PENALTY CASE <input type="checkbox"/> DEATH PENALTY RATE				OTHER LEGAL SERVICE AMOUNT		\$0.00	\$0.00
<input type="checkbox"/> INVESTIGATOR <input type="checkbox"/> EXPERT <input type="checkbox"/> OTHER:				<small>(REIMBURSEMENTS FOR OTHER LEGAL SERVICES REQUIRE SUPPORTING DOCUMENTATION)</small>			
COURT NUMBER: 92ND DISTRICT COURT				FEES SET BY COURT \$	TOTAL		\$500.00
CASE NUMBER: CR-0773-15-A				JUSTIFICATION FOR ADJUSTMENT PURSUANT TO ARTICLE 26.05(4)(C):			
				<input type="checkbox"/> COMPLEXITY OF THE CASE AND/OR COUNSEL'S EXPERIENCE <input type="checkbox"/> OTHER:			

SECTION B (MISDEMEANOR CASES ONLY) SERVICES PROVIDED BY ATTORNEY				
DATE	TYPE OF WORK	SERVICES PROVIDED	AMOUNT	
	INITIAL JAIL VISIT	<input type="checkbox"/>	\$0.00	
	WRIT SECURING BOND REDUCTION	<input type="checkbox"/>	\$0.00	
	SECURE JAIL RELEASE	<input type="checkbox"/>	\$0.00	
	PLEA / DISMISSAL	<input type="checkbox"/>	\$0.00	
	MOTION TO REVOKE / MOTION TO ADJUDICATE	<input type="checkbox"/>	\$0.00	
	SUPPRESSION	<input type="checkbox"/>	\$0.00	
	PRETRIAL DIVERSION / ALTERNATIVE DISPUTE RESOLUTION (ADR)	<input type="checkbox"/>	\$0.00	
	OTHER MISDEMEANOR CASE Case # _____	<input type="checkbox"/>	\$0.00	
	OTHER MISDEMEANOR CASE Case # _____	<input type="checkbox"/>	\$0.00	
	OTHER MISDEMEANOR CASE Case # _____	<input type="checkbox"/>	\$0.00	
	OTHER MISDEMEANOR CASE Case # _____	<input type="checkbox"/>	\$0.00	
<b>TOTAL</b>			<b>\$0.00</b>	

SECTION C LIST RELATED CASE NO.S	SECTION D FELONY CASES / MISDEMEANOR TRIAL WORK			
	DATE	TYPE OF WORK	IN COURT HOURS	OUT OF COURT HOURS
	12/11/2014	Appointed date; open file		0.5
	3/2/2015	Prepare and file pretrial motions		1
	3/3/2015	Court appearance - arraignment	1	
	3/19/2015	Court appearance - pretrial and trial on the merits	1	
	4/1/2015	Conference with prosecutor regarding case		1
	4/2/2015	Court appearance - pretrial hearing; case closed as per plea bargain	1.25	
<b>TOTAL HOURS</b>			<b>3.25</b>	<b>2.5</b>

SECTION E ATTORNEY INFORMATION		
VENDOR NUMBER 270768	TELEPHONE NUMBER (956) 316-3700	BAR CARD NUMBER 24027169
MAILING ADDRESS		
215 W. Stubbs Street, Edinburg, Texas 78539		

SECTION F CERTIFICATION	
I, <u>Robert Fernandez</u> COURT AND TO THE COUNTY AUDITOR THAT 1) THE INFORMATION CONTAINED ABOVE IS TRUE AND CORRECT; 2) PAYMENT WOULD NOT BE CONTRARY TO THE FEE SCHEDULE ADOPTED BY A MAJORITY OF THE JUDGES PURSUANT TO ARTICLE 26.05 CODE OF CRIMINAL PROCEDURE; 3) I HAVE NOT RECEIVED NOR WILL RECEIVE ANY MONEY OR ANYTHING ELSE OF VALUE FOR REPRESENTING THE ACCUSED; 4) I HAVE NOT SUBMITTED DUPLICATE TIME CHARGES FOR THE SAME HOURS CHARGED IN ANY OTHER CASE; AND 5) I HAVE HANDLED THE MAJORITY OF THE WORK IN THE ABOVE NOTED CASE(S).	ATTORNEY AT LAW, SWEAR OR AFFIRM TO THE _____ ATTORNEY AT LAW (SIGNATURE)
APPROVED: _____ PRESIDING JUDGE (SIGNATURE)	THE <u>31<sup>st</sup></u> DAY OF <u>August</u> , 20 <u>15</u>
REVIEWED BY INDIGENT DEFENSE OFFICE	

# ATTORNEY FEES EXPENSE CLAIM FORM (CRIMINAL CASES ONLY)

PURSUANT TO ARTICLE 26.05 CODE OF CRIMINAL PROCEDURE AS AMENDED



SECTION A CASE INFORMATION				FEE SCHEDULE			
DEFENDANT NAME (SHOW ONLY ONE DEFENDANT PER CLAIM)				DESCRIPTION	IN COURT	OUT OF COURT	AMOUNT
Manuel Reyes Montez, Jr.				NON-TRIAL FEES			\$0.00
PID	399313	APPOINTMENT DATE	5/8/2015	TRIAL FEES	\$400.00	\$0.00	\$400.00
DEGREE	F2	DISPOSITION DATE	5/11/2015	OTHER LEGAL SERVICE AMOUNT		\$0.00	\$0.00
<input type="checkbox"/> CASE IS ON-GOING	<input type="checkbox"/> APPEAL	<input type="checkbox"/> DEATH PENALTY CASE	<input type="checkbox"/> DEATH PENALTY RATE	<input type="checkbox"/> INVESTIGATOR	<input type="checkbox"/> EXPERT	<input checked="" type="checkbox"/> OTHER:	(REIMBURSEMENTS FOR OTHER LEGAL SERVICES REQUIRE SUPPORTING DOCUMENTATION)
				FEES SET BY COURT \$		TOTAL	\$400.00
COURT NUMBER	332ND DISTRICT COURT			JUSTIFICATION FOR ADJUSTMENT PURSUANT TO ARTICLE 26.05(4)(C):			
CASE NUMBER	CR-4876-10-F			<input type="checkbox"/> COMPLEXITY OF THE CASE AND/OR COUNSEL'S EXPERIENCE <input type="checkbox"/> OTHER			

SECTION B (MISDEMEANOR CASES ONLY) SERVICES PROVIDED BY ATTORNEY			
DATE	TYPE OF WORK	SERVICES PROVIDED	AMOUNT
	INITIAL JAIL VISIT	<input type="checkbox"/>	\$0.00
	WRIT SECURING BOND REDUCTION	<input type="checkbox"/>	\$0.00
	SECURE JAIL RELEASE	<input type="checkbox"/>	\$0.00
	PLEA / DISMISSAL	<input type="checkbox"/>	\$0.00
	MOTION TO REVOKE / MOTION TO ADJUDICATE	<input type="checkbox"/>	\$0.00
	SUPPRESSION	<input type="checkbox"/>	\$0.00
	PRETRIAL DIVERSION / ALTERNATIVE DISPUTE RESOLUTION (ADR)	<input type="checkbox"/>	\$0.00
	OTHER MISDEMEANOR CASE Case # _____	<input type="checkbox"/>	\$0.00
	OTHER MISDEMEANOR CASE Case # _____	<input type="checkbox"/>	\$0.00
	OTHER MISDEMEANOR CASE Case # _____	<input type="checkbox"/>	\$0.00
	OTHER MISDEMEANOR CASE Case # _____	<input type="checkbox"/>	\$0.00
		<b>TOTAL</b>	<b>\$0.00</b>

SECTION C LIST RELATED CASE NO.S	SECTION D FELONY CASES / MISDEMEANOR TRIAL WORK			
	DATE	TYPE OF WORK	IN COURT HOURS	OUT OF COURT HOURS
RECEIVED BY COUNTY AUDITOR  2015 AUG 28	5/8/2015	Appointment date; open file		
	5/11/2015	Prepare and file motion to adjudicate guilt		
	5/11/2015	Talk to client prior to hearing about case		
	5/11/2015	Conference with prosecutor to discuss case		
	5/11/2015	Court appearance- jail case, closed case	4	
	<b>TOTAL HOURS</b>			<b>4</b>

SECTION E ATTORNEY INFORMATION		
VENDOR NUMBER	TELEPHONE NUMBER	BAR CARD NUMBER
270768	(956) 316-3700	24027169
MAILING ADDRESS		
215 W. Stubbs Street, Edinburg, Texas 78539		

SECTION F CERTIFICATION	
<p>I, Robert Fernandez, ATTORNEY AT LAW, SWEAR OR AFFIRM TO THE COURT AND TO THE COUNTY AUDITOR THAT 1) THE INFORMATION CONTAINED ABOVE IS TRUE AND CORRECT; 2) PAYMENT WOULD NOT BE CONTRARY TO THE FEE SCHEDULE ADOPTED BY A MAJORITY OF THE JUDGES PURSUANT TO ARTICLE 26.05 CODE OF CRIMINAL PROCEDURE; 3) I HAVE NOT RECEIVED NOR WILL RECEIVE ANY MONEY OR ANYTHING ELSE OF VALUE FOR REPRESENTING THE ACCUSED; 4) I HAVE NOT SUBMITTED DUPLICATE TIME CHARGES FOR THE SAME HOURS CHARGED IN ANY OTHER CASE; AND 5) I HAVE HANDLED THE MAJORITY OF THE WORK IN THE ABOVE NOTED CASE(S).</p>	
APPROVED: _____ PRESIDING JUDGE (SIGNATURE)	_____ ATTORNEY AT LAW (SIGNATURE)
THE <u>26th</u> DAY OF <u>August</u> , 20 <u>15</u>	
REVIEWED BY INDIGENT DEFENSE OFFICE	



# ATTORNEY FEES EXPENSE CLAIM FORM (CRIMINAL CASES ONLY)

PURSUANT TO ARTICLE 26.05 CODE OF CRIMINAL PROCEDURE AS AMENDED



SECTION A CASE INFORMATION				FEE SCHEDULE			
DEFENDANT NAME (SHOW ONLY ONE DEFENDANT PER CLAIM)				DESCRIPTION	IN COURT	OUT OF COURT	AMOUNT
Adan Garcia Acevedo, Jr.				NON-TRIAL FEES			\$0.00
PID	1150396	APPOINTMENT DATE	1/12/2015	TRIAL FEES	\$400.00	\$0.00	\$400.00
DEGREE	FS	DISPOSITION DATE	2/6/2015	OTHER LEGAL SERVICE AMOUNT		\$0.00	\$0.00
<input type="checkbox"/> CASE IS ON-GOING	<input type="checkbox"/> APPEAL	<input type="checkbox"/> DEATH PENALTY CASE	<input type="checkbox"/> DEATH PENALTY RATE	<input type="checkbox"/> INVESTIGATOR <input type="checkbox"/> EXPERT <input type="checkbox"/> OTHER <small>(REIMBURSEMENTS FOR OTHER LEGAL SERVICES REQUIRE SUPPORTING DOCUMENTATION)</small>			
COURT NUMBER 332ND DISTRICT COURT				FEES SET BY COURT \$		TOTAL	\$400.00
CASE NUMBER CR-0432-15-F				JUSTIFICATION FOR ADJUSTMENT PURSUANT TO ARTICLE 26.05(4)(C):			
				<input type="checkbox"/> COMPLEXITY OF THE CASE AND/OR COUNSEL'S EXPERIENCE <input type="checkbox"/> OTHER			

SECTION B (MISDEMEANOR CASES ONLY) SERVICES PROVIDED BY ATTORNEY			
DATE	TYPE OF WORK	SERVICES PROVIDED	AMOUNT
	INITIAL JAIL VISIT	<input type="checkbox"/>	\$0.00
	WRIT SECURING BOND REDUCTION	<input type="checkbox"/>	\$0.00
	SECURE JAIL RELEASE	<input type="checkbox"/>	\$0.00
	PLEA / DISMISSAL	<input type="checkbox"/>	\$0.00
	MOTION TO REVOKE / MOTION TO ADJUDICATE	<input type="checkbox"/>	\$0.00
	SUPPRESSION	<input type="checkbox"/>	\$0.00
	PRETRIAL DIVERSION / ALTERNATIVE DISPUTE RESOLUTION (ADR)	<input type="checkbox"/>	\$0.00
	OTHER MISDEMEANOR CASE Case # _____	<input type="checkbox"/>	\$0.00
	OTHER MISDEMEANOR CASE Case # _____	<input type="checkbox"/>	\$0.00
	OTHER MISDEMEANOR CASE Case # _____	<input type="checkbox"/>	\$0.00
	OTHER MISDEMEANOR CASE Case # _____	<input type="checkbox"/>	\$0.00
		<b>TOTAL</b>	<b>\$0.00</b>

SECTION C LIST RELATED CASE NO S	SECTION D FELONY CASES / MISDEMEANOR TRIAL WORK			
	DATE	TYPE OF WORK	IN COURT HOURS	OUT OF COURT HOURS
	1/12/2015	Appointed date; open file		
	2/5/2015	Conference with prosecutor to review file and plea bargain		
	2/6/2015	Prepare and filed pretrial motions		
	2/6/2015	Talk to client about case prior hearing		
	2/6/2015	Court appearance - Jail Case; Case closed	4	
			<b>TOTAL HOURS</b>	<b>4</b>
				<b>0</b>

SECTION E ATTORNEY INFORMATION		
VENDOR NUMBER	TELEPHONE NUMBER	BAR CARD NUMBER
270768	(956) 316-3700	24027169
MAILING ADDRESS		
215 W. Stubbs Street, Edinburg, Texas 78539		

SECTION F CERTIFICATION	
I, Robert Fernandez	ATTORNEY AT LAW, SWEAR OR AFFIRM TO THE COURT AND TO THE COUNTY AUDITOR THAT 1) THE INFORMATION CONTAINED ABOVE IS TRUE AND CORRECT, 2) PAYMENT WOULD NOT BE CONTRARY TO THE FEE SCHEDULE ADOPTED BY A MAJORITY OF THE JUDGES PURSUANT TO ARTICLE 26.05 CODE OF CRIMINAL PROCEDURE, 3) I HAVE NOT RECEIVED NOR WILL RECEIVE ANY MONEY OR ANYTHING ELSE OF VALUE FOR REPRESENTING THE ACCUSED, 4) I HAVE NOT SUBMITTED DUPLICATE TIME CHARGES FOR THE SAME HOURS CHARGED IN ANY OTHER CASE, AND 5) I HAVE HANDLED THE MAJORITY OF THE WORK IN THE ABOVE NOTED CASE(S).
APPROVED: <small>PRESIDING JUDGE (SIGNATURE)</small>	 <small>ATTORNEY AT LAW (SIGNATURE)</small>
	THE <u>31</u> DAY OF <u>AUG</u> , 20 <u>15</u>

