NO. 2011-04713)

IN RE:

IN THE DISTRICT COURT OF

HARRIS COUNTY, TEXAS

CHILD(REN)	-				TH DISTRI	CT COURT
		ORDER	}	-		
The Court, hav	ing appointed _	Gaun 1	ollan.			
mp# 11~~1 > 0 > 0		. nerein	after refer	red to as t	he "Appoint	ee," as the
attorney/guardian ad	litem to represe	ent the interest	s of	101em		in the
above referenced caus	se of action, fir	nds that at this	time the pa	rents of the	child are	indigent and
that following fee to	be paid to the A	appointee is in a	ccordance wi	th Section 1	07.015 (c),	Texas Family
Code.						
It is therefore	Ordered that the	ne General Fund o	of Harris Co	unty shall p	ay Appointee	as follows:
In Court Appearance	Number of Days in Court	Dates in Court	Fixed Rate	Minimum	Maximum	Amount
Non-trial				\$75	\$150	
Trial				\$100	\$300	
For trial of 5 days or more			Up to \$2,500			
Out of Court Time and Expenses must have prior court approval and be documented.]	Dates of out of court work	Number of Hours/10 Hours Maximum	Hourly Rate	Minimum	Maximum	Amount
Out of Court Hours	10/1/13	5.0	\$30 to \$50		\$500	7,0
Expert Testimony				\$200	\$800	
Investigation					\$600	
Appeals - Fixed F	Rate of \$500-\$2	,500				Amount
Total			•			Total 2)
PERSONAL INFORMATION						
Name: Guy Yound						
Social Security 1	Number (Telephone Numb	er 7 (7)	1225B	ar Number	9550
or Tax ID Number	7770	()V #c	7 0 1	1 7	T. 77	3MC
Mailing Address 221 North 120 With 12 / 1016						
F. Garas	SILAND	atterney at 1	w swear or	affirm to	the Court t	hat I have
not received now will I receive any other money or anything else of value in the case except for payment ordered by the Court according to the fee schedule adopted by the Board of Judges pursuant to Article 26.05, Code of Criminal Procedure, effective September 1, 1987, and						
amended March	1991.			mot		
				Attorney		
Signed th	is	day of	1			, 20
		Tue	Muldige President	ding		
3 3						
LEGAL DEPT. APPRO	OVAL DATE:	_	APPROVED CLERICAL	ACCURACY:		
ACCOUNT NO: 1000	1-100-26-6223	-	PROCESS I	APPROVAL:		

T.D.F.P.S. - For use in CPS cases wherein both parents are found to be indigent.

County Auditor's Forth 40-21 Harrie County, Texas (12/08)	(OUT OF COURT HOU	RSLOG	- FAMILY DISTRICT	COURTS
Court Number		Case Number Party o	r Child's Na	TAIVILT DISTRICT	COURTS
313		2011 24713		-	
DATE	TIME		ACTIVITY		AMOUNT APPROVED BY COURT
10/1/13	5,5	Trave to 6	5nh 0	to you visit	
		thouse to be to draft report	time of	hohota	
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~		TOTAL HOURS SUBMITTED	<i>©0</i>	TOTAL AMOUNT APPROVED	
Approved				Mil	
		Judge, Pre	siding	- Gan Ag	ney Name (print (sgible)

- 50 th

		No. 2013-0	44847		SOAL	F-
					72-1	` <i>1</i>
IN RE:				IN TH	E DISTRIC	T COURT OF
				HARRI	S COUNTY,	TEXAS
CHILD(REN)				314	_TH DISTR	ICT COURT
ORDER						
The Court, having appointed Day Spring						
TB# 240049	_ ~	, herein		rred to as	the "Appoint	ee," as the
attorney/guardian ad	d litem to repres	ent the interest	of 177	EN + Un	IK MATK	in the
above referenced cau	se of action, fi	nds that at this	time the pa	arents of th	e child are	indigent and
that following fee to	be paid to the 1	Appointee is in a	ccordance w	ith Section :	107.015 (c),	Texas Family
	e Ordered that th	ne General Fund o	of Harris Co	unty chall r	av Annointee	a follows
		T	T	T SHAIL F	T T	as follows:
In Court Appearance	Number of Days in Court	Dates in Court	Fixed Rate	Minimum	Maximum	Amount
Non-trial	(1)	10-1-13		\$75	\$150	12.55
Trial				\$100	\$300	
For trial of 5 days or more			Up to \$2,500			
Out of Court Time and Expenses [Expenses must have prior court approval and be documented.]	Dates of out of court work	Number of Hours/10 Hours Maximum	Hourly Rate	Minimum	Maximum	Amount
Out of Court Hours			\$30 to \$50		\$500	
Expert Testimony				\$200	\$800	
Investigation					\$600	
Appeals - Fixed R	ate of \$500.\$2	500				
Appears - Fract N	ace of \$500-\$2,					Amount
Total						Total
		PERSONAL INFO	RMATION			
Name: DAJ SPJUT						
Social Security Number of FILE Telephone Number Bar Number 24004933						
Mailing Address 405 MAIN ST 670 HOUSEN X 77002 CERTIFICATION						
[Da 1 S	PIJ	EERTIFICA:	TION OF	2661	he Count th	
not received nor w for payment ordered pursuant to Articiamended March 1, 1	le 26.05, Code	ccoraind to the	ocedure, ef	e adopted b	v the Board	of Judges II
				Ategyney		
Signed this	5	day of		GK	lipe '	20
		Judg	e Presid	ing	-	

T.D.F.P.S. - For use in CPS cases wherein both parents are found to be indigent. AUDITOR

APPROVED BY:
CLERICAL ACCURACY:
PROCESS DATE:
PAYMENT APPROVAL:

LEGAL DEPT. APPROVAL DATE:
VENDOR NO:
AMOUNT:
ACCOUNT NO: 1000-100-26-6223

				vo	OUCHER # X-2	X 2884
		No. 2013	002(10))		
				*		1 PM
IN RE:				IN TH	E DISTRIC	T COURT O
				HARRI	S COUNTY,	TEXAS
CHILD(REN) (- "			313	_TH DISTR	RICT COUR
		ORDE	R O			
The Court, has	ving appointed _	Ganz		AND		·
attorney/guardian ad		, herein	nafter refer	red to as	the "Appoin	tee," as th
above referenced cau						
that following fee to						-
Code.	, se para to the .	ppointee is in t	accordance w	ren section	107.013 (0),	Texas randi
	e Ordered that th	ne General Fund	of Harris Co	ounty shall p	pay Appointe	e as follows
In Court Appearance	Number of Days in Court	Dates in Court	Fixed Rate	Minimum	Maximum	Amount
Non-trial				\$75	\$150	
Trial				\$100	\$300	
For trial of 5 days or more			Up to \$2,500			
Out of Court Time and Expenses [Expenses must have prior court approval and be documented.]	Dates of out of court work	Number of Hours/10 Hours Maximum	Hourly Rate	Minimum	Maximum	Amount
Out of Court Hours	10/1/13	5.0	\$30 to \$50		\$500	2,2
Expert Testimony				\$200	\$800	
Investigation					\$600	
Appeals - Fixed R	ate of \$500-\$2	500				Amount
Total						Total 210
	Ω	PERSONAL INF	ORMATION			1
Name: Oau	J 104	ANP				
Social Security Number W Celephone Number 7/62/6335 Bar Number 595855						
Mailing Address 2211 North #920 HTX 77398						
		CERTIFICA	TION			
I, attorney at law, swear or affirm to the Court that I have not received nor will I receive any other money or anything else of value in the case except for payment ordered by the Court according to the fee substitute of the fee substitute o						

for payment ordered by the Court according to the fee schedule adopted by the Board of Judges pursuant to Article 26.05, Code of Criminal Procedure, effective September 1, 1987, and amended March 1, 1991.

Signed this _ day of _, 20__

Judge Presiding

LEGAL DEPT. APPROVAL DATE: VENDOR NO: AMOUNT: ACCOUNT NO: 1000-100-26-6223	APPROVED BY: CLERICAL ACCURACY: PROCESS DATE: PAYMENT APPROVAL:

T.D.F.P.S. - For use in CPS cases wherein both parents are found to be indigent.

	y Auditors Office	
FROM: 3B Distr	rict Court y, Texas	
STYLE	CAUSE NO	2013 00240)
DATES OF ACTIVITY	TYPE OF ACTIVITY	NUMBER HOURS
10/11/13	Through to to	5,0
	and were	
	Visit + drofpt	
	Peparo	
TOTAL OUT OF COURT	HOURS	5,0
Attorney Course	UAND Signature: MMW)
Tax ID#	Date signed: 10/211	3

		14		0	06	-1 -
County Agaitor's Form Harris County, Texas (R	M0-2 (EV 05/72)	- / () ,				1
ATTORNEY FEES EXPENSE CLAIM DISTRICT COURTS-COURT APPEARANCE Tex. FAM. Code §§ 107.015 & 157.164 INSTRUCTIONS Payment will not be authorized until each item is completed legibly and in ink. Follow the instructions below and forward the completed claim to the presiding judge for approval.						
Court No.	Party or Child's Name	,		Case Numb		·
Individu	JAL CASE APPOINTMENT	Court Date(s)	No. of Court	Minimum	Maximum	Amount
_	Non-Trial (per day) ☐ AJOC ☐ ancillary hearing			\$125.00	\$225.00	
CONTEMPT	Trial (per day) Contested on the merits			\$300.00	\$500.00	
	Out of Court (per hour) (see attached form)			\$75.00	\$150.00	
TDFPS	Non-Trial (per day) emergency full adversarial permanency status placement review entry (upon appearance)	10/2/13		\$125.00	\$225.00	137.50
	Trial (per day) Contested on the merrits			\$300.00	\$500.00	
	Out of Court (per hour) (see attached form)	10/1/13	2.3	\$75.00	\$100.00	375.00
APPEALS				*******	\$3,000.00	
TRIALS MO	ORE THAN 5 DAYS			******	\$2,500.00	
TOTAL (1) 50						
ALL VOUC	CHERS MUST BE SUBMITTED FO WHICH THE COURT TIME	R COURT APPROV S OR OUT OF COU	AL IMMEDIAT	ELY FOLLO	WING THE HI	EARING FOR
Social Security Number (last 4 digits) XXX-XX Mailing Address: (Number, Street, Suite, City, State, Zip Code) 2211 Nonfaktag 20, Hastw 77 in the control of the control						
		CERTIFICAT	ION			20/3
I, Attorney at Law, certify under penalty of perjury that the Harris County Auditor may rely upon the information contained above to make payment according to the fee schedule adopted by the Board of District Judges Trying Family Cases pursuant to Section(s) 107.015 and/or 157.164 of the Texas Family Code. I further certify that I have not received, not will receive, any other money or anything else of value in this case except for payment ordered by the court for representing the child, indigent party or respondent served by publication.						
Date Submitte	ed for Payment 10 2	<u>-, 20]3</u> .		1	Attorney at	Law (Signature)
APPROVED FO OCT 21	2012	Court		2	President	Edda
Presiding Judge AUDITOR						

10: Harris Coun	ty Auditors Office	
FROM: 35 Distribution Distribut	rict Court ty, Texas	
STYLE	CAUSE I	NO: 22004482
DATES OF ACTIVITY	TYPE OF ACTIVITY	NUMBER HOURS
b/1/13	True to & south	5,0
	home Visibilates Report with photo-	
,	Republity photos	
Manual Manual Control (1995) at 1 and 1995 at		<u>C</u>
TOTAL OUT OF COURT	HOURS	3.0
Attorney: Gan Pol	Signature MW	
Tax ID PA (Ce	Date signed: 19/2/Y	3

VOUCHER # X-2 X 288482

MARBAF

IN RE:

CHILD(REN)

No.2012-0(7(3)

IN THE DISTRICT COURT OF

HARRIS COUNTY, TEXAS

TH DISTRICT COURT

, ,					_TH DISTE	RICT COURT
		ORDI	CR .			
	ving appointed	Cours 1	OL CANL) .		
TB# 1651580	2	, herei	nafter refe	fred to as	the "Appoin	' tee," as the
attorney/guardian a	d litem to repres	sent the interes	its of _U	1,13	ene npporn	
above referenced cau	use of action, fi	nds that at thi	s time the p	arents of th	ne child are	in the
that following fee to	o be paid to the	Appointee is in	accordance w	ith Section	107.015 (c).	Texas Family
Code.					(4),	reman ruminy
It is therefor	e Ordered that th	he General Fund	of Harris Co	ounty shall p	pay Appointed	as follows:
In Court Appearance	Number of Days in Court	Dates in Court	Fixed Rate	Minimum	Maximum	Amount
Non-trial				\$75	\$150	
Trial	l	10/2/13		\$100	\$300	30
For trial of 5 days or more			Up to \$2,500			
Out of Court Time and Expenses [Expenses must have prior court approval and be documented.]	Dates of out of court work	Number of Hours/10 Hours Maximum	Hourly Rate	Minimum	Maximum	Amount
Out of Court Hours	9/23/13 7	7.0	\$30 to \$50		\$500	3 50
Expert Testimony				\$200	\$800	
Investigation					\$600	
Appeals - Fixed R	ate of \$500-\$2,	500				Amount
Total						でtgh
$-\epsilon$	0	PERSONAL INFO	RMATION			
Name: Cour	Lorma			,		
Social Security No or Tax ID Number	Interes	elephone Numbe	到16216	335 Ba	r Number 6	1580
Mailing Address 2	21 NoRFS	K-#920	Houst,	vtx 7	7098	
CERTIFICATION						
not received nor wi for payment ordered pursuant to Articl	by the Court ac e 26.05, Code	attorney at law y other money o ccording to the of Criminal Pr	r anything	else of valu	me in the ca	se except
Attorney						
Signed this	3		Presidi	Del	, · · · · · · · · · · · · · · · · · · ·	20
LEGAL DEPT. APPROVA	AL DATE:		APPROVED BY	Y:		
AMOUNT:	.00-26-6223		PROCESS DAY	re:		

T.D.F.P.S. - For use in CPS cases wherein both parents are found to be indigent.

TO:	Harris County Auditors Office	
FROM:	District Court Harris County, Texas	
STYLE		cause No.2012 06763)

DATES OF ACTIVITY	TYPE OF ACTIVITY	NUMBER HOURS
9 23/13	Trivel tot	5,0
·	Condid have visit	
	didt reput wiphotss.	
1-1113	he me free, SURD	2,0
	pregaration for trial.	
TOTAL OUT OF COURT	HOURS	7.0

Attorney: Saw	BLUNP
Tax ID# ON F	le

Signature: WWW Date signed: 102 B

County Auditor's Form Harris County, Texas (REV. 05/12)				ICTIONS	
	ATTORNEY FEES EXPENSE CLA TRICT COURTS-COURT APPEA TEX. FAM. CODE §§ 107.015 & 157.16		instructions bel-	ow and forward	ompleted legibly and the completed claim	
Court No. ろっち	Party or Child's Name	/	١	Case Number		
Individu	UAL CASE APPOINTMENT	Court Date(s)	No. of Court days / hours	Minimum	Maximum	Amount
	Non-Trial (per day) ☐ AJOC ☐ ancillary hearing			\$125.00	\$225.00	
CONTEMPT	Trial (per day) Contested on the merits			\$300.00	\$500.00	
	Out of Court (per hour) (see attached form)			\$75.00	\$150.00	
TDFPS	Non-Trial (per day)	10/3/13	١	\$125.00	\$225.00	\$225.00
	Trial (per day) Contested on the merrits			\$300.00	\$500.00	
	Out of Court (per hour) (see attached form)	10/1/12	3.0	\$75.00	\$100.00	\$300.00
APPEALS				*******	\$3,000.00	
TRIALS M	IORE THAN 5 DAYS			********	\$2,500.00	
					TOTAL	\$525.00
<u>ALL</u> VOL	UCHERS MUST BE SUBMITTED FO WHICH THE COURT TIME					EARING FOR
		PERSONAL INF				
Social Securit XXX-X		ephone Number	-6335	Bar Card Nu	28 9/	
	ess: (Number, Street, Suite, City, State LZII NOKT XK		1 4	7098	-000	Market and the second s
CERTIFICATION						
I, County Auditor may rely upon the information contained above to make payment according to the fee schedule adopted by the Board of District Judges Trying Family Cases pursuant to Section(s) 107.015 and/or 157.164 of the Texas Family Code. I further certify that I have not received, not will receive, any other money or anything else of value in this case except for payment ordered by the court for representing the child, indigent party or respondent served by publication.						
Date Submitted for Payment 19/3, 20/3. Attorney at Law (Signature)						
APPROVED /	FOR PAYMENT: 308	_Court	4	m 8	Presidin	g Judge
		∆ I I∩	ITOR	and the second s		

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र हुन	6	7	203547	AMOUNT
	DATE	TIME	ACTIVITY	APPROVED BY COURT
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	·		out of sout Milian Contractions	
		<u> </u>	With Asat Cody Atty	
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			TOTAL HOURS SUBMITTED 3.0 TOTAL AMOUNT APPROVE	\$300 00
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	Approved		hand handre MW	

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	, N	10.2013041	· 150		11/167-	30
TN DE.	•			IN THE	DISTRICT	COURT OF
IN RE:					COUNTY,	
	•			313		
CHILD(REN)				</td <td>TH DISTR</td> <td>ICT COURT</td>	TH DISTR	ICT COURT
	,	ORDER	V	j	9-1	
(a < a < a < a < a < a < a < a < a < a <	ving appointed _	Jam	12(AV		he "Appoint	ee " as the
attorney/guardian ad			, .		ne Appoint	in the
above referenced caus	se of action, fin	ds that at this	time the pa			
that following fee to	be paid to the A	ppointee is in a	ccordance wi	th Section 1	07.015 (c),	Texas Family
Code.		a 1 Pound o	f Vormin Co	mer chall n	av Annointee	as follows:
It is therefore	ordered that th	e General Fund C	I Hallis Co.	T	T	T
In Court Appearance	Number of Days in Court	Dates in Court	Fixed Rate	Minimum	Maximum	Amount
Non-trial		12/3/17		\$75	\$150	125
Trial				\$100	\$300	
For trial of 5 days or more			Up to \$2,500			
Out of Court Time and Expenses [Expenses must have prior court approval and be documented.]	Dates of out of court work	Number of Hours/10 Hours Maximum	Hourly Rate	Minimum	Maximum	Amount
Out of Court Hours	9/3/13 }	7,3	\$30 to \$50		\$500	350
Expert Testimony	1311113			\$200	\$800	
Investigation					\$600	<u> </u>
Appeals - Fixed F	Rate of \$500-\$2	,500				Amount
						T
Total						Total 475
PERSONAL INFORMATION						
Name: bay DUANI						
Social Security Number (Telephone Number 7 67 6335 Bar Number 58 00						
Mailing Address 211 NOKE JK #970 HovstavTX77098						
CERTIFICATION						
not received for will I receive any other money or anything else of value in the case except for payment ordered by the Court according to the fee schedule adopted by the Board of Judges pursuant to Article 26.05, Code of Criminal Procedure, effective September 1, 1987, and amended March 1991.						
				Attorney	(stern	
Signed thi	is	day of	10/3	3/13'		, 20

Judge Presiding LEGAL DEPT. APPROVAL DATE:
VENDOR NO:
AMOUNT:
ACCOUNT NO: 1000-100-26-6223 APPROVED BY:
CLERICAL ACCURACY:
PROCESS DATE:
PAYMENT APPROVAL:

T.D.F.P.S. - For use in CPS cases wherein both parents are found to be indigent. AUDITOR

1		
TO:	Harris County Auditors Office	
FROM:	313 District Court Harris County, Texas	
STYLE .	· · · · · · · · · · · · · · · · · · ·	cause no: 2013 74633 J

DATES OF ACTIVITY	TYPE OF ACTIVITY	NUMBER HOURS
9/30/13	Remark File digto	7,0
	ansver bout of it.	
. 10/1/13	TRINE to + South	5,3
	Use his theft report	
The state of the s		
TOTAL OUT OF COURT	HOURS	7.0

Attorney Caux Pollad	Signature
α	Date signed 10/3/13

No. 2 3 2 3 3 7

IN RE:

IN THE DISTRICT COURT OF HARRIS COUNTY, TEXAS

3 3 th district court

CHILD (REN)

above referenced cause of action, finds that at this time the parents of the child are indigent and that following fee to be paid to the Appointee is in accordance with Section 107.015 (c), Texas Family

hat following fee to be paid to the Appointee is in accordance with section 1977013 (67) long the paid to the Appointee is in accordance with section 1977013 (67) long the paid to the Appointee is in accordance with section 1977013 (67) long the paid to the Appointee is in accordance with section 1977013 (67) long the paid to the Appointee is in accordance with section 1977013 (67) long the paid to the Appointee is in accordance with section 1977013 (67) long the paid to the Appointee is in accordance with section 1977013 (67) long the paid to the Appointee is in accordance with section 1977013 (67) long the paid to the Appointee is in accordance with section 1977013 (67) long the paid to the Appointee is in accordance with section 1977013 (67) long the paid to the Appointee is in accordance with section 1977013 (67) long the paid to the Appointee is in accordance with section 1977013 (67) long the paid to the Appointee is in accordance with section 1977013 (67) long the paid to the Appointee is in accordance with section 1977013 (67) long the paid to the Appointee is in accordance with section 1977013 (67) long the paid to the Appointee is in accordance with section 1977013 (67) long the paid to the Appointee is in accordance with section 1977013 (67) long the paid to the Appointee is in accordance with section 1977013 (67) long the paid to the Appointee is in accordance with section 1977013 (67) long the paid to the Appointee is in accordance with section 1977013 (67) long the paid to the Appointee is in accordance with section 1977013 (67) long the paid to the Appointee is in accordance with section 1977013 (67) long the paid to the Appointee is in accordance with section 1977013 (67) long the paid to the Appointee is in accordance with section 1977013 (67) long the paid to the Appointee is in accordance with section 1977013 (67) long the paid to the Appointee is in accordance with section 1977013 (67) long the paid to the Appointee is in accordance with section 1977013 (67) long the paid to the Appointee is						
In Court Appearance	Number of Days in Court	Dates in Court	Fixed Rate	Minimum	Maximum	Amount
Non-trial				\$75	\$150	
Trial		19/9/3		\$100	\$300	300
For trial of 5 days or more			Up to \$2,500			
Out of Court Time and Expenses [Expenses must have prior court approval and be documented.]	Dates of out of court work	Number of Hours/10 Hours Maximum	Hourly Rate	Minimum	Maximum	Amount
Out of Court Hours	1011 13	⊋,5	\$30 to \$50		\$500	12,
Expert Testimony				\$200	\$800	
Investigation					\$600	
Appeals - Fixed Rate of \$500-\$2,500 Amount						
Total V2,						
PERSONAL INFORMATION						
Name: Jam Fol War						
Social Security Number N (Desephone Number 7/11-1358 ar Number (5980)						
Mailing Address 221 Nort 1/K#920 Houston + 77098						
CERTIFICATION						
, attorney at law, swear or affirm to the Court that I have not received nor will I receive any other money or anything else of value in the case except for payment ordered by the Court according to the fee schedule adopted by the Board of Judges of the court according to the fee schedule adopted by the Board of Judges of the court according to the fee schedule adopted by the Board of Judges of the court according to the fee schedule adopted by the Board of Judges of the court according to the fee schedule adopted by the Board of Judges of the court according to the fee schedule adopted by the Board of Judges of the court that I have not received nor will I receive any other money or anything else of value in the case except for payment ordered by the Court according to the fee schedule adopted by the Board of Judges of value in the case except for payment ordered by the Court according to the fee schedule adopted by the Board of Judges of value in the case except for payment ordered by the Court according to the fee schedule adopted by the Board of Judges of value in the case except for payment ordered by the Court according to the fee schedule adopted by the Board of Judges of value in the case except for payment ordered by the Court according to the fee schedule adopted by the Board of Judges of the fee schedule adopted by the Board of Judges of the fee schedule adopted by the Board of Judges of the fee schedule adopted by the Board of Judges of the fee schedule adopted by the Board of Judges of the fee schedule adopted by the Board of Judges of the fee schedule adopted by the Board of Judges of the fee schedule adopted by the Board of the fee schedule adopted by the Board of Judges of the fee schedule adopted by the Board of						

not received nor will I receive any other money or anything else of value in the case except for payment ordered by the Court according to the fee schedule adopted by the Board of Judges pursuant to Article 26.05, Code of Criminal Procedure, effective September 1, 1987, and amended March 1, 1991.		\sim	CERTIFICATION	
	for payment to	nor will I represent the property of the Article 26.0	eceive any other money or anything else of value in the concerning to the fee schedule adopted by the Boar	d of Judges

Signed this	 day of	Slesse	 20
	Judg	ge Presiding	

LEGAL DEPT. APPROVAL DATE:	APPROVED BY: CLERICAL ACCURACY: PROCESS DATE:
ACCOUNT NO: 1000-100-26-6223	PAYMENT APPROVAL:

T.D.F.P.S. - For use in CPS cases wherein both parents are found to be indigent. AUDITOR

TO:	Harris County	Auditors Office
FROM:	313 Distri	ct Court v, Texas
STYLE		•
DATES OF	ACTIVITY	TYPE OF ACTIVIT

DATES OF ACTIVITY	TYPE OF ACTIVITY	NUMBER HOURS
lohlis	reparation	3.5
	reparation.	
	•	
TOTAL OUT OF COURT	HOURS	2.5

2					50/	P.Z
DIS	REV. 05/12) ATTORNEY FEES EXPENSE CL. TRICT COURTS-COURT APPEA TEX. FAM. CODE §§ 107.015 & 157.10	RANCE	Payment will not be in ink. Follow the to the presiding judges	e authorized un	low and forward	completed legibly and the completed claim
246	Party or, Child's Name ,		`	Case Number(s). 225 -54248		
Individu	JAL CASE APPOINTMENT	Court Date(s)	No. of Court days / hours	Minimum	Maximum	Amount
	Non-Trial (per day) ☐ AJOC ☐ ancillary hearing	FI	LED	\$125.00	\$225.00	
CONTEMPT	Trial (per day) Contested on the merits	Dis	1 4 2013	\$300.00	\$500.00	
	Out of Court (per hour) (see attached form)	Time:	1 2013	\$75.00	\$150.00	
TDFPS	Non-Trial (per day) □ emergency □ full adversarial permanency □ status □ placement review □ entry (upon appearance)	11/14/13	Empury	\$125.00	\$225.00	225
	Contested on the merrits Out of Court (per hour)			\$300.00	\$500.00	
	(see attached form)	12/1/2	2.5	\$75.00	\$100.00	250
APPEALS				*******	\$3,000.00	
TRIALS MO	ORE THAN 5 DAYS			*******	\$2,500.00	
ALL VOUC	CHERS MUST BE SUBMITTED FOI WHICH THE COURT TIMES	OK OUT OF COU	KT HOURS ARE	ELY FOLLOW E BEING REQ	TOTAL VING THE HE	475 CARING FOR
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157.164 of the anything else party or response Submitte APPROVED, FO	y Auditor may rely upon the inpted by the Board of District to e Texas Family Code. I further of value in this case except for ondent served by publication. Bed for Payment 11 4	niormation conta Judges Trying Fa certify that I have	at Law, certiained above to	o make payi oursuant to S	enalty of perment accord Section(s) 14 ceive, any of senting the co	07.015 and/or

SWL		Case Num 2005-64	(62)
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		TOTAL HOURS SUBMITTED 2-5 TOTAL AMOUNT APPROVED	255
Approved	\times	My My	<u> </u>
The Same		Judge, Presiding Attern	toy at Lew (Signature)