



First Judicial District of Pennsylvania  
 Modified Guaranteed Fee System  
 Municipal Court Attorney Payment Voucher

1. APPOINTMENT LETTER INVOICE NO.
APPOINTMENT DATE ____ - ____ - ____

2. ATTORNEY NAME (Last, First, Middle Initial)	3. ATTORNEY ADDRESS
4. ATTORNEY STATE I.D. NO.	Philadelphia, Pennsylvania 191____ Attorney Telephone Number: (215) _____ <input type="checkbox"/> Check if this is a change of address
5. POLICE PHOTO NO.	6. DOCKET NO.  M.C.
7. DEFENDANT NAME (Last, First, Middle Initial)	<b>Must be submitted for processing and approval within 30 days of disposition/sentencing.</b>
FEE SYSTEM TRAINING COMPLETED (COUNSEL FEE UNIT USE ONLY)  ____ - ____ - ____ (Date)	

8. CASE TYPE, DISPOSITION LEVEL, AND CORRESPONDING PREPARATION FEES (Check box for case type and level of proceedings at completion of counsel's service)

Misdemeanor Trial (\$350 per case)   
  Felony Preliminary Hearing Disposition \$200.00   
  Treatment Court \$350.00  
 Summary Offenses \$150.00   
  Felony Remand \$350.00   
  5th Amendment Witness \$150.00

**9. Other Provisions**

Counsel removed for fault (failure to appear, etc.) will be deemed not to have earned payment.

The undersigned attorney maintains their principal office in Philadelphia County, has been certified by the Bar Association Screening Committee, has completed fee system training, and understands that false statements and/or representations made herein are subject to the penalties of 18 Pa. C.S. Section 4904, relating to unsworn falsification to authorities.

10. ATTORNEY SIGNATURE	11. DISPOSITION DATE  ____ - ____ - ____
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REVIEW/ORDER FOR PAYMENT  <input type="checkbox"/> Judicial Review indicates that Budget & Fiscal Office is to process immediately  <input type="checkbox"/> Budget & Fiscal Office to investigate	JUDGE'S SIGNATURE	DATE
	PRESIDENT JUDGE'S SIGNATURE (When necessary for payment above the standard fee)	DATE

# Instructions for the Completion of the Municipal Court Modified Guaranteed Fee System

## General Notes

- Payment voucher forms are available at:  
Office of Criminal Listings, 206 Criminal Justice Center
- Counsel should initiate completion of the payment voucher upon receipt of the appointment and regularly update the voucher during the course of the representation.
- Please write legibly to speed processing of payment.
- Please be sure to attach all necessary documents.
- Please carefully complete all required sections as indicated. Instructions are detailed below.
- Complete Questions 1 through 11

## Instructions

(Please complete only numbers 1 through 11)

- Line 1: Enter Appointment Letter invoice number and date as they appear on the appointment letter.
- Line 2: Enter attorney's name as it appears on the appointment letter.
- Line 3: Enter attorney's full address as it appears on the appointment letter.
- Line 4: Enter attorney's five-digit identification number.
- Line 5: Enter defendant's six-digit police photo number.
- Line 6: Enter the correct docket number in the following sequence: MC-51-CR-(XXXXXXXX) - Year (XXXX)
- Line 7: Enter defendant's name as it appears on the appointment letter.
- Line 8: Check appropriate box. Accurate completion of this section is important. It will determine the rate at which the fee is paid.
- Line 9: Read carefully.
- Line 10: Sign Payment Voucher. Failure to sign voucher will delay processing of payment.  
Attorney's signature represents the following averments:
- The attorney was appointed by the Court to represent the defendant in this case;
  - The facts set forth in the payment voucher are true and correct to the best of the attorney's knowledge, information and belief;
  - The attorney understands that false statements herein are made subject to the penalties of 18 Pa. C.S. Section 4904, relating to unsworn falsification to authorities;
  - The attorney actively and diligently represented the defendant in this case;
  - The payment voucher submitted is fair and reasonable compensation for services in this case based upon the time and effort expended; and
  - The attorney has not received, nor contracted to receive, directly or indirectly, any compensation for such services from any source other than provided in the Act of Assembly.
- Line 11: Enter the date the representation was concluded.  
The voucher form will then be handed back to the attorney who will take it or mail it with a copy of appointment letter to:

Budget and Fiscal Department  
Counsel Fee Unit  
Room 395 City Hall  
Philadelphia, PA 19107