Expert Witness Payment Voucher/Order

	1.(A) INVOICE NO.	FROM LETTER OF APPOINTM	IENT	1. (B) DATE OF APPOINTMENT							
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	ATTORNEYSFIRST	VAME	3. ATTORNEY STATE I.D. NO.								
	EMAIL ADDRESS										
_	TELEPHONE NUMBER										
S FIRST NAME											
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	EMAIL ADDRESS	I			_						
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3 -	- CASE TYPE				_						
- N	Von-Homicide		□ Jı	ıvenile							
PE	RT WITNESS FEI	ĒS			_						
Attached is a copy of the Court Order.											
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	s voucher, and	any receipts.									
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he	r duties satisfacto	rily as requested. I und	erstan	d that false statements							
	DATE:			<u></u>							
8 F	Pa. C.S. Section 490	4, relating to unsworn fa									
	DEFENDANT INFORMATION ATTORNEY'S FIRST NAME BMAIL ADDRESS TELEPHONE NUMBER 6. CPCMS NUMBER OR OTHER DOCKET NUMBER -51 (ITNESS INFORMATION S' FIRST NAME 8. PHILA. BUSINESS LICENSE NUMBER EMAIL ADDRESS TELEPHONE NUMBER CASE TYPE Ton-Homicide D by Judge). Shed is a copy of the Court Order. Lached is a copy of the Court Order. L										
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ie :	services rendere	d in connection with	the al	ove-referenced case,							
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See Phila. R.J.A. *122, *	1.(A) INVOICE NO. FROM LETTER OF APPOINTMENT 1. (B) DATE OF APPOINTMENT								
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	SF	CTION 1 – A	ATTORNEY & F	 DEFENDANT INF	ORMAT	ION			
2. ATTORNEY'S LAST NAME		MIDDLE	THORINE T GE	ATTORNEY'S FIRST		1011	2 ATTOD	NIEV CTATE I	D. NO.
Z. ATTORNEY'S LAST NAME	WIIDDLE		ATTORNET S FIRST NAME			3. ATTORNEY STATE I.D. NO.			
4. ATTORNEY ADDRESS (Counsel must maintain their p	orincipal of	fice in Philadelph	ia)	EMAIL ADDRESS					
	Ph	iladelphia, PA		TELEPHONE NUMBE	R				
5. DEFENDANT LAST NAME	MIDE		DEFENDANT'S FI	RST NAME	6. CPCMS NUMBER OR OTHER DOCKET NUMBER				
						-31			
		SECTION	2 – EXPERT W	/ITNESS INFORM	MATION				
7. EXPERT WITNESS' LAST NAME	MIDI	DLE	EXPERT WITNES	S' FIRST NAME	8. PHIL	A. BUSINESS LICEN	SE NUMBE	iR	
EXPERT WITNESS ADDRESS	1	EMAIL ADDRESS							
				TELEPHONE NUMBE	ĒR				
			SECTION 3 -	<u> </u> - CASE TYPE					
☐ Homicide			□ Adult- N	Ion-Homicide			□ Juv	enile	
		SECT	ION 4 – EXPE	RT WITNESS FE	ES				
☐ Fixed Amount Allowed by the Co ☐ Compensation on an hourly basis Number of Hours:	was ap	Hourly Hourly ervices Ren by the Trial expert Witnes ert Witness p to the penalti	the Court. At Rate: \$ ndered to thi Judge, and the s, that the Experforms his/he es of 18 Pa. C.S	tached is a copy Total Voucher, and Supervising, Ad B, OTHER FEE PETIT Ert Witness is need Total Utility of the company of the	of the l Amou l any re- ministra minist	Court Order. Int Requested: eccipts. ative, or Preside NDING: Yes o provide approvequested. I und	nt Judge s opriate reerstand fication t	as applicat No epresentati that false st to authoritie	on to the tatements ies.
I certify that I have been retained by the abo statements and/or representations made here			_						
11. EXPERT WITNESS SIGNATURE	FOR	COLIDE LISE	ONLY- ILIDIC	DATE:DATE:	D VDDE	POVAL			
	ruk	JOURI USE			D 4771	OVAL			
The City of Philadelphia is ordered to pa consistent with Phila. R.J.A. *122-11 and subject to correction by the QAU or Leg	nd *122	2-12 connect	tion with the	ess the sum of \$_	d in co	fonection with			
QAU / LLU Name:	Da	ite:	-	☐ Fee Adjusted to	\$	due to the	following	ministerial er	ror:
12. NAME OF TRIAL JUDGE		SIGNATURE C	F TRIAL JUDGE	DA	TE	PJ/AJ/SJ SIGNATU	RE (When	Necessary)	DATE
MANACINO DIDECTORIO OFFICE				Y OF PHILADELPH		CONTROLLERIO	FFICE		DATE
MANAGING DIRECTOR'S OFFICE DA	.IE	FINANCE DEP	AKIMENI	DAT	E	CONTROLLER'S O	FFICE		DATE

Instructions for the Completion of Expert Witness Payment Voucher/Order

SECTION 1- ATTORNEY & DEFENDANT INFORMATION

- Line 1: A. Enter the Invoice Number from Letter of Appointment & B. the Date of Appointment as they appear on the appointment letter.
- Line 2: Enter the court-appointed attorney's LAST Name, MIDDLE Name, and FIRST Name as it appears on the appointment letter.
- Line 3: Enter the attorney's PA Attorney ID number.
- Line 4: Enter the attorney's Philadelphia address, which is required by Phila. Crim. R. *122, as it appears on the appointment order. Line 5:
 - Enter the Defendant's LAST Name, MIDDLE Name, and FIRST Name as it appears on the appointment letter.
- Line 6: Enter the CPCMS Docket Number or other appropriate Docket Number.

SECTION 2 – EXPERT WITNESS INFORMATION

Lines 7 - 8: Enter the full name, business address, email address, telephone number, and Business License number of the Expert Witness.

SECTION 3 - CASE TYPE

Select Homicide, Adult Non-Homicide, or Juvenile option depending on the Case type

SECTION 4 - EXPERT WITNESS FEES

- Line 9: Select the applicable Fee Type requested. Attach required documentation to Payment Voucher. If compensation on an hourly basis is requested, the Expert <u>must</u> attach a Chronological List of Services rendered to this Voucher. A Fee Petition and Order are no longer required.
 - (a) Enter the Amount previously paid to the Expert Witness, if any
 - (b) The Expert Witness must check whether other Expert Witness Fee requests are pending for the instant case.
- Line 10: The Court-Appointed attorney must sign and date the Payment Voucher. Failure to sign and date will delay payment.
- Line 11: The Expert Witness must sign and date the Payment Voucher. Failure to sign and date will delay payment.
- Line 12: Enter the name of the Trial Judge. The blank entry on the Order portion will be entered by the Trial Judge. When applicable, the Voucher will be routed to the Administrative Judge or Supervising Judge or their designees.

Please Note

- 1) Phila. R.J.A. *122-11 sets for the Payment Authorization Process court-appointed counsel must follow when seeking payment. Phila. R.J.A. *122-12 sets forth the compensation rates and timing of requests for compensation.
- 2) The Payment Voucher/Order must be completed by court-appointed counsel and submitted, with all required attachments, including the Appointment Letter and Chronological List of Services Rendered (as applicable), directly to the appropriate judge for review and approval without first being filed with the applicable filing office or officer.
- 3) Upon approval by the appropriate judge, the original Payment Voucher/Order shall be promptly filed by the attorney of record as follows below. The attorney should keep a copy of the signed Payment Voucher/Order.
 - a. **Criminal Cases**: by email to <u>CriminalVouchers@courts.phila.gov</u>, or in person or by mail to: The Justice Stout Center for Criminal Justice, Information Counter, 2nd Floor, 1301 Filbert Street, Philadelphia, PA 19107.
 - b. **Family Court Cases**: by email to FC_Vouchers@courts.phila.gov, or in person or by mail to: The Philadelphia Family Court, Legal Liaison Payment Unit, 11th Floor, 1501 Arch Street, Philadelphia, PA 19102
- 4) Upon receipt of the Payment Voucher/Order, court-designated staff shall time-stamp and review the Payment Voucher/Order, as provided in Phila. R.J.A. *122-11 and Phila. R.J.A. *122-12. Payment Vouchers/Orders not correctly or appropriately completed or submitted without required attachments will be rejected by designated court-staff and must be corrected and resubmitted by court-appointed counsel.
- 5) Once court-designated staff has determined the Payment Voucher/Order has been correctly completed, they will submit the Payment Voucher/Order to the City of Philadelphia Managing Director's Office's Counsel Fee Unit ("CFU") for payment. Court-designated staff will notify court-appointed counsel and the Expert Witness when the Payment Voucher/Order has been submitted to the CFU. Court-designated staff will docket the Payment Voucher/Order and include it as a case record consistent with the Unified Judicial System of Pennsylvania Public Access Policy.
- 6) The City of Philadelphia will issue payment to court-appointed conflict counsel within sixty (60) days of the date the Payment Voucher/Order is submitted by the Court to the City of Philadelphia's Managing Director's Office. Consistent with Phila. Code § 17-1702 (1) (b), if payment is delayed, the City of Philadelphia will pay interest on the unpaid amount awarded by the court at the rate of one and one-half percent (1.5%) per month or part of a month until payment is made, unless such delay results from an existing tax lien in accordance with 53 P.S.§§ 16082, 16083.
- Payment status should only be requested from the City of Philadelphia sixty (60) days or more after the Payment Voucher/Order has been sent to the City of Philadelphia Counsel Fee Unit as noted above. Any payment questions may be directed to:

Kelly Press, Counsel Fee Unit Supervisor - Kelly Press@phila.gov or CounselFees@phila.gov City of Philadelphia Managing Director's Office 1401 JFK Blvd. Suite 1340 Philadelphia, PA.19102 215-686-5639

Payment Voucher/Order forms are available on the Court's website at: http://www.courts.phila.gov/forms.