



First Judicial District of Pennsylvania
Court-Appointed Counsel Payment Voucher/Order

Fees and Procedures Are Applicable Only to Court Appointments
Made On and After November 1, 2023

Family Court- Delinquent, Abuse & Domestic Relations
See Phila. R.J.A. *122, *122-11 and *122-12

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| 1. A. APPOINTMENT ORDER NO. |
| B. DATE OF APPOINTMENT |
| C. HAS THERE BEEN PRIOR CONFLICT COUNSEL <input type="checkbox"/> Yes <input type="checkbox"/> No |

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|---------------------------|--------|------------------|-------------------------|
| 2. ATTORNEY'S LAST NAME) | MIDDLE | ATTORNEY'S FIRST | 3. PA ATTORNEY I.D. NO. |
|---------------------------|--------|------------------|-------------------------|

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| 4. ATTORNEY ADDRESS (Counsel must maintain their principal office in Philadelphia) Philadelphia, PA | EMAIL ADDRESS |
| | TELEPHONE NUMBER |

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|--------------------------|--------|------------------------|-------------------|
| 5. DEFENDANT'S LAST NAME | MIDDLE | DEFENDANT'S FIRST NAME | 6. A. CASE NUMBER |
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| 6. B. CPCMS NUMBER(S) CP-51-JV- - | CP-51-JV- _____ - _____ |
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Payment Voucher must be submitted for processing and approval within 90 days of disposition or, for yearly payments, after the calendar year at issue.

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| 7. A. FEES FOR DELINQUENT/ABUSE COURT-APPOINTED REPRESENTATION | |
| <input type="checkbox"/> Delinquency Felony: \$583.00 <input type="checkbox"/> Delinquency Misdemeanor: \$477.00 <input type="checkbox"/> Rape, IDSI, Juvenile Felony Sex Case*: \$795.00 <i>*Requires 3 CLE @ year and Certification by Family Court</i> <input type="checkbox"/> Consent Decree – at JJSC: \$238.50 <input type="checkbox"/> Delinquent Review – per hearing: \$79.50 Date of Hearing: _____ | <input type="checkbox"/> On-Call Counsel-No Appointment: \$371.00 <input type="checkbox"/> Protection from Abuse – D.R.: \$371.00 <input type="checkbox"/> Private Counsel Retained: \$238.50 <input type="checkbox"/> Fifth Amendment Witness: \$238.50 Name of Witness: _____ <input type="checkbox"/> Bench Warrant: \$238.50 |
| B. DATE OF SERVICE | B. DATE OF SERVICE |

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| 8. A. FEES FOR ON-CALL COUNSEL – DOMESTIC RELATIONS | B. DATE OF SERVICE |
| <input type="checkbox"/> On-Call Counsel – 1501 Arch Street – No Appointment: \$371.00 per Daily List | |

I certify that: I maintain my principal office in Philadelphia County, I maintain professional liability insurance, I have been certified by the Philadelphia Bar Association Screening Committee, and I have undergone Court-Appointed Counsel Fee system training. I understand 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.

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| 9. ATTORNEY SIGNATURE _____ DATE: _____ | ESIGNATURE (AS APPROPRIATE) _____ DATE _____ |
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FOR COURT USE ONLY- JUDICIAL REVIEW AND APPROVAL

ORDER
The City of Philadelphia is ordered to pay the above Court-appointed attorney the sum of \$ _____ found to be reasonable and consistent with Phila. R.J.A. *122-11 and *122-12 for services rendered in connection with the above-referenced case, subject to correction by the Legal Liaison Payment Unit, as noted below:
 Fee adjusted to \$ _____ due to the following ministerial error by counsel:

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| LEGAL LIAISON UNIT - NAME: | DATE: |
|----------------------------|-------|

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| 10. NAME OF PRESIDING JUDGE/JCHO | PRESIDING JUDGE/JCHO'S SIGNATURE | DATE | AJ/SJ SIGNATURE (When Necessary) | DATE |
|----------------------------------|----------------------------------|------|----------------------------------|------|

FOR USE BY THE CITY OF PHILADELPHIA

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| MANAGING DIRECTOR'S OFFICE | DATE | FINANCE DEPARTMENT | DATE | CONTROLLER'S OFFICE | DATE |
|----------------------------|------|--------------------|------|---------------------|------|

