



First Judicial District of Pennsylvania

Court-Appointed Counsel Payment Order/Voucher

Fees and Procedures Are Applicable Only to Court Appointments Made On and After July 1, 2018

Trial Division – Criminal

1. A. APPOINTMENT LETTER INVOICE NO.
B. DATE OF APPOINTMENT

2. ATTORNEY'S LAST NAME	ATTORNEY'S MIDDLE NAME	ATTORNEY'S FIRST NAME	3. PA ATTORNEY I.D. NO.
4. ATTORNEY ADDRESS (Counsel must maintain their principal office in Philadelphia)		EMAIL ADDRESS	
Philadelphia, PA _____		TELEPHONE NUMBER	
5. DEFENDANT'S LAST NAME	MIDDLE INITIAL	DEFENDANT'S FIRST NAME	6. CPCMS NUMBER CP-51-CR- _____ - _____
7. POLICE PHOTO NO.			

Payment Voucher must be submitted for processing and approval within 90 days: of verdict in homicide cases, or disposition or sentencing in others.

8. PREPARATION FEES - PER DIEM FEES – MAXIMUM FEE CASE TYPES

Preparation Fees <input type="checkbox"/> Capital Homicide - Lead Counsel: \$10,000.00 <input type="checkbox"/> Capital Homicide – Penalty Phase Counsel: \$7,500.00 <input type="checkbox"/> Non-Capital Homicide Trial: \$3,500.00 <input type="checkbox"/> Non-Capital Homicide – Second Chair: \$600.00 <input type="checkbox"/> Felony Trial First Degree: \$1,200.00 <input type="checkbox"/> Felony Trial – Other: \$750.00 <input type="checkbox"/> M.C. Appeal to C.P.: \$750.00 No Fee paid if Defendant withdraws Appeal at any time No Fee paid if Commonwealth withdraws appeal prior to trial <input type="checkbox"/> Writ of <i>certiorari</i> to C.P.: \$450.00 <input type="checkbox"/> Plea Accepted-Diversion Felony-Treatment Court: \$750.00 <input type="checkbox"/> Successful Decertification Motion: \$1,200.00 <input type="checkbox"/> Retrial Preparation Fee: \$ _____ <input type="checkbox"/> Mistrial Preparation Fee: \$ _____ <input type="checkbox"/> Early Parole Petition: \$250.00	Preparation Fees – Cont. <input type="checkbox"/> Violation of Probation/Parole (VOP): \$150.00 <input type="checkbox"/> 5 th Amendment Witness: \$150.00 <input type="checkbox"/> Contempt Hearing: \$150.00 <input type="checkbox"/> Status Listing/Hearing: \$100.00 - Date: _____ Per Diem Rate <input type="checkbox"/> Homicide-Capital: \$400 (3 hours or less); \$700 (More than 3 hours) + Mitigation <input type="checkbox"/> Homicide-Non-Capital: \$300 (3 hours or less); \$600 (More than 3 hours) + Mitigation <input type="checkbox"/> Felony Non-Homicide: \$225 (3 hours or less); \$450 (More than 3 hours) <input type="checkbox"/> Misdemeanor Appeal (Per Diem) \$150 (3 Hours or Less); \$300 (More than 3 Hours) NOTE: CONTINUANCES ARE NOT COMPENSABLE Maximum Fee Case Types – Must Attach Chronological List of Services Rendered. <input type="checkbox"/> Felony: Appellate/PCRA: Maximum Fee: \$2,400 °Billable at \$65@hour (in-court and out-of-court) <input type="checkbox"/> Homicide: Appellate/PCRA: Maximum Fee: \$6,000 °Billable at \$85@hour (in-court and out-of-court) Rate: \$ _____ # of Hours: _____ = TOTAL: \$ _____
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A. APPLICABLE PREPARATION FEE: \$	B. APPLICABLE PER DIEM RATE: \$	C. MAXIMUM FEE/ HOURLY TOTAL: \$
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D. PER DIEM CHARGES (LIST THE DATE AND THE APPLICABLE RATE FOR EACH DAY OR TRIAL/HEARING). NOTE: CONTINUANCES ARE NOT COMPENSABLE (Add Additional Pages As Necessary)					
	½ Day	Full Day		½ Day	Full Day
1) Day 1 _____/_____/_____	<input type="checkbox"/>	<input type="checkbox"/>	6) Day 6 _____/_____/_____	<input type="checkbox"/>	<input type="checkbox"/>
2) Day 2 _____/_____/_____	<input type="checkbox"/>	<input type="checkbox"/>	7) Day 7 _____/_____/_____	<input type="checkbox"/>	<input type="checkbox"/>
3) Day 3 _____/_____/_____	<input type="checkbox"/>	<input type="checkbox"/>	8) Day 8 _____/_____/_____	<input type="checkbox"/>	<input type="checkbox"/>
4) Day 4 _____/_____/_____	<input type="checkbox"/>	<input type="checkbox"/>	9) Day 9 _____/_____/_____	<input type="checkbox"/>	<input type="checkbox"/>
5) Day 5 _____/_____/_____	<input type="checkbox"/>	<input type="checkbox"/>	10) Day10 _____/_____/_____	<input type="checkbox"/>	<input type="checkbox"/>
No. of Full Days: _____		Multiplied by <i>Per Diem</i> Rate: \$ _____		= SUB-TOTAL: \$ _____	
No. of Half Days: _____		Multiplied by <i>Per Diem</i> Rate: \$ _____		= SUB-TOTAL: \$ _____	

E. TOTAL AMOUNT REQUESTED:	9. DATE REPRESENTATION ENDED/PAYMENT AUTHORIZED:
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10. ATTORNEY SIGNATURE	DATE
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, I have undergone Court-Appointed Counsel Fee system training, and 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.	

FOR COURT USE ONLY- JUDICIAL REVIEW AND APPROVAL ORDER

The City of Philadelphia is ordered to pay the Court-appointed attorney listed above, consistent with the terms of AGB Order No. 01 of 2017 and AGB Order No. 02 of 2012, the total sum of \$ _____ in connection with the above-referenced case for the services rendered as certified by counsel and as approved by the Court.

11. NAME OF TRIAL JUDGE	TRIAL JUDGE'S SIGNATURE	DATE
SUPERVISING JUDGE OR ADMINISTRATIVE JUDGE'S SIGNATURE (When necessary)	DATE	PRESIDENT JUDGE'S SIGNATURE (When necessary)
		DATE

Instructions for the Completion of Attorney Payment Order/Voucher Trial Division - Criminal

- Line 1: A. Enter the Appointment Letter invoice number & 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 full Philadelphia address as it appears on the appointment letter. AGB Order 02 of 1997 requires the court-appointed attorney maintain a principal office in Philadelphia County in order to qualify to receive court-appointments.
- Line 5: Enter defendant's LAST Name, MIDDLE Name, and FIRST Name as it appears on the appointment letter.
- Line 6: Enter the CPCMS Docket Number in the following sequence:
Common Pleas Trial Division cases CP-51-CR-(XXXXXXXX) -Year (XXXX)
- Line 7: Enter the defendant's six-digit police photo number.
- Line 8: Check as appropriate: Preparation Fee, Status Hearing/Listing Fee, *Per Diem* Fee, and Maximum Fee.
A. Enter the applicable Preparation Fee or Treatment Court Status Listing Fee for the instant case.
B. Enter the applicable *Per Diem* Rate for the instant case.
C. For **Maximum Fee Case Types**: Enter the Requested Amount. The court-appointed attorney **must** attach a Chronological List of Services Rendered to this Voucher. A Fee Petition and Order are no longer necessary.
D. Insert the specific date for each court appearance and check whether you spent a full day or a half-day in court. AGB Order 01 of 2017 defines a full day as more than 3 hours and a half-day as 3 hours or less. Add the number of Full Days and Half Days spent in court, multiply by the applicable *per diem* rate stated in Section 8.B. and Sub-Total the *per diem* charges for Full and Half Days. **Time spent in court asking for a continuance is not compensable.**
E. Enter the total amount requested. For Maximum Fee cases, see subsection C., above.
- Line 9: Enter the date Representation ended or conclusion of stage for which payment is authorized.
- Line 10: Sign the Payment Voucher. Failure to sign the Voucher will delay processing of payment.
- Line 11: Enter the name of the Trial Judge. The blank entry on the Order portion will be entered by the Trial Judge.

Please Note

- 1) AGB Order No. 01 of 2017 requires that all Fee Petitions and Payment Vouchers must be filed within the following periods:
 - a) For yearly payments, no later than ninety (90) days after the calendar year at issue.
 - b) After verdict, plea, or mistrial, no later than ninety (90) days after the disposition.
 - c) After sentencing, no later than ninety (90) days after sentencing, regardless of whether the case is appealed.
 - d) For Appeals and PCRAs, no later than ninety (90) days after resolution of the appeal by the court with which the appeal or PCRA was filed.
- 2) The Payment Vouchers must be completed by the court-appointed attorney and submitted, together with a copy of the Appointment Letter, directly to the appropriate judge for review and approval without first being filed with the Office of Judicial Records or other applicable filing office or officer.
- 3) Upon approval by the appropriate judge, the original Payment Voucher shall be promptly filed of record by the attorney with Criminal Listings, 2nd Floor, Justice Stout Center, or with any other filing office or officer as the Court may direct from time to time. The attorney should keep a copy of the signed Payment Order/Voucher.
- 4) Upon receipt, the applicable filing officer shall time-stamp, docket and scan the Payment Order/Voucher. As provided in Philadelphia Criminal Rule 576 (g), the Payment Order/Voucher shall be served on all parties, including the City of Philadelphia Counsel Fee Unit (CounselFeeUnit@courts.phila.gov). All original hard-copy Fee Petitions and Payment Vouchers will be promptly provided to the City of Philadelphia, Counsel Fee Unit, for processing and retention consistent with Philadelphia Criminal Rule 576 (d).
- 5) Payment status should only be requested from the City of Philadelphia sixty (60) days or more after the Payment Voucher has been received by the City of Philadelphia Counsel Fee Unit. Any payment questions may be directed to:

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

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