

## Child Protective Services - Appointed Counsel Request for Compensation

1. Judicial District Court		2. Cause Number		3. Case Style (use initials for minors)	
4. Case ID:		Temporary Managing Conservatorship Permanent Managing Conservatorship		Court Ordered Services (motion to participate in services) Appeal	
5. Attorney for:					
Child(ren) Number of children represented: _____		Custodial Parent (at time of filing) Non-custodial Parent (at time of filing) Alleged Father		Unlocated Parent (identity known, location unknown) Unknown Parent (identity unknown) Mediator	
6. Attorney Name (Full Name)		7. Telephone Number	8. Email Address		9. State Bar Number
10. Attorney Address (with Firm Name if any)			11. Make payment to:  Attorney      Firm		12. Tax ID or Vendor ID
13. Time Period of Services Rendered ( <i>Attach detailed, itemized invoice</i> )			From Date:		To Date:
14. Attorney Hourly Fee for Legal Work		hours		\$	
15. Attorney Hourly Fee for Travel Time		hours		\$	
16. Paralegal Hourly Fee for Legal Work		hours		\$	
17. Investigation / Expert / Social Worker / Other Litigation Expenses <i>Attach receipt or invoice and provide explanation here:</i>				\$	
18. <input type="checkbox"/> Final Payment Application <input type="checkbox"/> Partial Payment Application			19. Total Amount Requested		\$
20. Time Attorney Spent Meeting with Client (MANDATORY) _____ hours					
21. Additional Comments					
<b>Attorney Certification - I swear under penalty of perjury that this information is true and correct and in accordance with the laws of the State of Texas. The compensation and expenses claimed were reasonable and necessary to provide effective assistance of counsel.</b>					
22. Attorney Signature ( <b>REQUIRED FORMAT: /s/ First Name Last Name</b> )			23. Date Signed by Attorney		
<b>Fields below this line are to be completed only by the Presiding Judge of the case</b>					
24. Reason(s) for Denial or Adjustment:			25. Judicially Approved Amount: \$		
			26. SIGNATURE OF PRESIDING JUDGE:		