

1/06/04 for mileage rates

**UNITED STATES DISTRICT COURT
SOUTHERN DISTRICT OF IOWA**

TO: Appointed Counsel

Attached are the forms to be used in filing your CJA 20. Please follow the instructions in this packet.

IMPORTANT - PLEASE READ RE. THE \$90 RATE:

Even though the rate is the same for both in-court and out-of-court for services after May 1, 2002, it is still important that you record your time properly between the two, as these figures are used for statistical purposes.

PLEASE REMEMBER:

IF YOU ARE OBTAINING THE SERVICES OF AN INVESTIGATOR, INTERPRETER OR OTHER EXPERT - ADVANCE APPROVAL MUST BE OBTAINED IF THOSE SERVICES EXCEED \$300.00.

DEPOSITION EXPENSES ARE PAID BY THE DEPARTMENT OF JUSTICE. YOU NEED TO CHECK WITH THE U. S. ATTORNEY'S OFFICE FOR GUIDANCE PRIOR TO INCURRING THESE EXPENSES

NEW - CASE COMPENSATION MAXIMUMS - see following pages.

<u>NEW MILEAGE RATES - BEGIN Jan. 1, 2004</u>	\$37.5
<u>NEW MILEAGE RATES - BEGIN Jan. 1, 2003</u>	\$.36
<u>MILEAGE RATES - BEGIN Jan. 21, 2002</u>	\$.365
<u>NEW HOURLY RATES - BEGIN May 1, 2002</u>	\$90.00 per hour both In-Court and Out-of-Court

CJA RATES

	<u>In-Court</u>	<u>Out-of-Court</u>
Begin May 1, 2002	\$ 90.00	\$ 90.00
April 1, 2001 - April 30, 2002	75.00	55.00
Jan 1, 2000 - March 31, 2001	70.00	50.00
Jan. 1, 1996 - Dec. 31, 1999	65.00	45.00
Prior to Jan. 1, 1996	60.00	40.00

MILEAGE RATES:

Jan. 1, 2004 -	.375
Jan. 1, 2003 - Dec. 31, 2003	.36
Jan. 21, 2002 - Dec. 31, 2002	.365
Jan. 22, 2001 - Jan. 20, 2002	.345
Jan.14, 2000 - Jan. 21, 2001	.325
Apr. 1, 1999 - Jan.13, 2000	.31

NEW - For All Work COMPLETED after November 13, 2000.

If any representational services were provided on or after November 13, 2000, the new case maximums apply to the entire representation, including services performed before November 13

If all representational services were completed before November 13, 2000, the former case maximums apply.

CASE COMPENSATION MAXIMUMS

Applicability and Exclusions. All compensation limits are for each attorney in each case. The case compensation limits are not applicable in federal capital cases and in death penalty federal habeas corpus proceedings. Case compensation limits apply only to attorney fees. There is no limit on the presiding judicial officer's authority to approve the reimbursement of expenses of counsel, and the chief judge of the circuit has no role in authorizing the payment of such expenses.

Specific Proceedings:

a. **Felonies** (except federal capital prosecutions).

\$5,200 for trial court level.
\$3,700 for appeal.

b. **Misdemeanors** (including petty offenses [class B or C misdemeanors or infractions])

\$1,500 for trial court level.
\$3,700 for appeal.

c. **Habeas Petitions:**

\$5,200 for trial court level.
\$3,700 for appeal.

d. **Pre-trial Diversion.**

\$5,200 if offense alleged by the U.S. Attorney is a felony.
\$1,500 if offense alleged is a misdemeanor.

e. **Other:**

\$1,200 for trial court level.
\$1,200 for appeal.

Includes but is not limited to:

1. Probation Violation
2. Supervised Release Hearing
3. Parole Proceedings under chapter 311 of T. 18, USC.
4. Material Witness in Custody
5. Persons seeking relief under sect. 2241, or 2255 of T. 28, USC.
6. Mental Condition Hearings Pursuant to chapter 313 T. 18, USC
7. Civil or Criminal Contempt (where the person faces loss Of liberty).
8. Witness.
9. International Extradition (under chapter 209 of T. 18, USC).

IN-COURT and OUT-OF-COURT HOURLY WORKSHEETS:

These Worksheets were devised to standardize the itemization and documentation of hourly totals and services performed by Court Appointed Counsel in the defense of a client under the Criminal Justice Act. Each attorney should provide the following on the worksheet.

- 1.) The case number pertaining to the case.
- 2.) For each service rendered provide the following:
 - a. the date the service was performed.
 - b. a brief description of the service performed.
 - c. The time spent performing the service

The time spent performing the service will be reported in tenths, .10, .20, etc. **Do not use .25 or .33, as the computer will round off these figures..** In addition, the time reported will be listed under the appropriate category.

Once all services have been documented, the hours column pertaining to each service category will be totaled. If more than one page is required, a page total should be provided on each page. A grand total of all page totals should be provided on the final page. The grand total hours for each service category will then be transferred to the face of the CJA-20 and listed across from the applicable service, and added to arrive at the total hours. The in-Court and Out-of-Court compensation should be calculated by multiplying the applicable hourly rate by the total hours.

- 3.) Each page should be numbered, i.e., Page 1 of 2, Page 2 of 2, etc.

Once all necessary information has been completed and transferred to the CJA-20, the worksheets should be attached to the CJA-20 voucher.

YOU MAY USE YOUR OWN FORMS IF DESIRED; IT IS NOT NECESSARY TO USE THE ONES IN THIS PACKET.

GENERAL INFORMATION FOR OTHER EXPENSES

General:

Receipts for expenses in excess of \$50.00 must be submitted. The worksheet should include a description of the services - a breakdown of how the hours were spent, and on what dates the services were performed. Travel expenses must be adequately explained - including date, destination and purpose of travel.

Allowable Expenses - Court Appointed Counsel (CJA-20 form)

Out-of-pocket expenses reasonably incurred may be claimed on the CJA-20 voucher, and must be itemized and reasonably documents. Expenses for investigators, interpreters or other services under subsection (e) of the Act shall not be considered out-of-pocket expenses and should not be claimed on the CJA-20 voucher. A CJA-21 should be filed by the investigator, interpreter or other expert.

Out-of-pocket expenses would include:

1. Travel Expenses

Travel by a privately owned automobile should be claimed at the rate prescribed (currently .375 cents per mile) for federal judiciary employees who use a private automobile for conducting official business, plus parking fees, ferry fares, and bridge, road and tunnel tolls. Other means of transportation should be claimed on an actual expense basis.

Counsel's expenses for meals and lodging incurred in the representation of the defendant constitute reimbursable out-of-pocket expenses.

In determining whether actual expenses incurred are 'reasonable', counsel should be guided by the prevailing limitations placed upon travel and subsistence expenses of Federal judiciary employees in accordance with existing government travel regulations. Proof of payment for expenses pertaining in excess of \$50.00 must be attached to the voucher.

OTHER EXPENSE WORKSHEET:

This worksheet was devised to standardize the itemization of other reimbursable expenses incurred by Court Appointed Counsel in defense of a client under the Criminal Justice Act. Each attorney should provide the following on the worksheet:

- 1.) The case number pertaining to the claim.
- 2.) For each item of other Expense incurred, provide the following:
 - a). The date incurred.
 - b). A brief explanation of the expense.
 - c). The amount of expense incurred.

Attach supporting documentation, i.e., receipts, canceled checks and invoices for all expenses in excess of \$50.00. Such expense items as mileage and copying should show the total miles and pages, respectively, multiplied by the applicable rate to arrive at the expense incurred. The expenses incurred should then be listed under the appropriate category, i.e., Mileage, Parking, Copying, Postage, etc.

Once all Other Expenses have been itemized, total each column listing the Total Amount. Transfer and list other expense categories and their applicable totals, to the face of the CJA-20. The Other Expense Worksheet along with any supporting documentation must be attached to the CJA-20.

YOU MAY USE YOUR OWN FORMS IF DESIRED; IT IS NOT NECESSARY TO USE THE ONES IN THIS PACKET.

ALLOWABLE EXPENSES

- a. Subsistence for lodging and meals needs to be supported by receipts. Counsel should be guided by prevailing limitations placed on Federal Judiciary employees.
- b. Mileage for counsel and for investigative and expert witnesses is limited to the rate for Government employees - currently .375 cents per mile. (As of 1/1/04).
- c. Air-fare: Government travel rates at substantial reductions from ordinary commercial rates may be available from common carriers for travel authorized by the Court. To obtain such rates, attorneys must contact the Clerk of Court and obtain prior approval from the presiding Judicial Officer.
- d. Taxi or public transit from office to airport and from airport to courthouse is authorized; receipts should be provided. Car rental is also authorized if receipts are provided.
- e. Photocopies. Counsel should indicate the number of copies made (if made in their office) and the price charged per copy, not to exceed 25 cents per copy; if copies are procured out of the office, a receipt for those copies needs to be attached.
- f. Postage.
- g. Telephone tolls. An itemized listing should be attached indicating the date, number and to whom a long distance call was placed, as well as the cost of each call.
- h. Fax charges that were reasonably incurred.
- i. Any miscellaneous charges (such as photographs) should be documented by receipts.
- j. Research by a law student or clerk may be billed by counsel as an allowable expense.
- k. Computer research is allowed provided the cost does not exceed comparable, reasonable time spent by counsel doing manual research. Charges for computer research must be documented by: (1) a brief statement setting forth the issue or issues that were the subject matter of the research; (2) an estimate of the number of hours of attorney time that would have been required to do the research manually; and (3) a copy of the bill and receipt for the use of the equipment or an explanation of the precise basis of the charge.

NON-REIMBURSABLE ITEMS

- a. General Office Overhead: General office overhead includes general office expenses which would normally be reflected in the fee charged to the client. The statutory fee is intended to include compensation for these general office expenses. Therefore, except in extraordinary circumstances, personnel, rent, telephone service and secretarial expenses associated with CJA representation, whether work is performed by counsel or other personnel, are not reimbursable.
- b. Items and Services of Personal Nature: The cost of items of a personal nature purchased for or on behalf of the person represented, such as purchasing new clothing or having clothing cleaned, getting a haircut, furnishing cigarettes, candy or meals, etc. Also, assisting the defendant in the disposition of his or her personal property, arranging for the placement of minor children, assisting the defendant in executing the conditions of probation, providing legal assistance in matters unrelated to the litigation of the case, although incidental to the defendant's arrest, etc.
- c. Filing Fees: Attorneys should not be required to pay a filing fee in a CJA case inasmuch as such payment and reimbursement thereof is tantamount to the Government billing itself to accomplish a transfer of appropriated funds in the General Fund of the Treasury.
- d. Printing of Briefs: The expense of printing briefs, regardless of the printing method utilized, is not reimbursable; however, the cost of mimeographing, xeroxing, or similar copying service is reimbursable.
- e. Service of Process: Witness fees, travel costs, and expenses for service of subpoenas on fact witnesses, are not payable out of the CJA appropriation but are governed by Rule 17, Fed. R. Crim. P. and 28 U.S.C. sec. 1825.
- f. Depositions: Depositions are covered by the Fed. R. Crim. P. Rule 15. Expenses incurred in the taking of fact witness depositions (notarial fees, interpreters, transcripts, etc.) are paid by the Department of Justice, regardless of which party requested the deposition. **CHECK WITH THE U. S. ATTORNEY'S OFFICE.**
- g. Taxes: Taxes paid on attorney compensation received pursuant to the CJA, whether based on income, sales, or gross receipts, are not reimbursable expenses.

LIST OF PERTINENT CJA FORMS

- CJA-20 Appointment of and Authority to Pay Court
Appointed Counsel
- CJA-21 Authorization and Voucher for Expert or Other
Services
- CJA-22 Statement of Parolee or Mandatory Releasee
Concerning Appointment of Counsel Under the
Criminal Justice Act
- CJA-23 Financial Affidavit
- CJA-24 Authorization and Voucher for Payment of Transcript
- CJA-25 Notice to CJA Panel Attorneys Regarding Availability of
Investigative, Expert, and Other Services (included as
part of this packet.)
- CJA-26 Supplemental Information Statement for a Compensation
Claim in Excess of the Statutory Case Compensation Maximum:
District Court (2 pages)
- CJA-26A Guidance to Attorneys in Drafting the Memorandum Required for A
compensation Claim in Excess of the Case Compensation Maximum:
District Court

M E M O R A N D U M

DATE: _____

TO: CHIEF JUDGE (or delegate)
UNITED STATES COURT OF APPEALS
FOR THE EIGHTH CIRCUIT

FROM: _____

RE: ADVANCE AUTHORIZATION FOR INVESTIGATIVE, EXPERT,
OR OTHER SERVICES

It is requested that advance authorization be granted to obtain services in an amount in excess of the maximum allowed under the provisions of subsection (e) (3) of the Criminal Justice Act, 18 U.S.C. section 3006A, as follows:

Case Name & Designation: _____

Name of Expert or Investigator _____

Address _____

Type of Expert _____

Reasons for Application _____

Estimated Compensation/Fee _____

I certify that the estimated compensation or fee in excess of the maximum set forth in subsection (e) (3) of the Criminal Justice Act appears necessary to provide fair compensation for services of an unusual character or duration and therefore recommend approval of this advance authorization in the amount of \$ _____.

UNITED STATES DISTRICT JUDGE
OR MAGISTRATE

Date _____

Advance authorization is hereby approved in the amount of

\$ _____.

CHIEF JUDGE, UNITED STATES
COURT OF APPEALS (or delegate)

Date _____

1 CIR /DIST / DIV CODE	2 PERSON REPRESENTED	VOUCHER NUMBER	
3 MAG DKT./DEF NUMBER	4 DIST DKT./DEF NUMBER	5 APPEALS DKT./DEF NUMBER	6 OTHER DKT NUMBER
7 IN CASE/MATTER OF (<i>Case Name</i>)	8. PAYMENT CATEGORY <input type="checkbox"/> Felony <input type="checkbox"/> Petty Offense <input type="checkbox"/> Misdemeanor <input type="checkbox"/> Other <input type="checkbox"/> Appeal	9. TYPE PERSON REPRESENTED <input type="checkbox"/> Adult Defendant <input type="checkbox"/> Appellant <input type="checkbox"/> Juvenile Defendant <input type="checkbox"/> Appellee <input type="checkbox"/> Other	10. REPRESENTATION TYPE <i>(See Instructions)</i>
11 OFFENSE(S) CHARGED (Cite U.S. Code, Title & Section) <i>If more than one offense, list (up to five) major offenses charged, according to severity of offense</i>			
12 ATTORNEY'S NAME (<i>First Name, M.I., Last Name, including any suffix</i>), AND MAILING ADDRESS Telephone Number _____		13 COURT ORDER <input type="checkbox"/> O Appointing Counsel <input type="checkbox"/> C Co-Counsel <input type="checkbox"/> F Subs For Federal Defender <input type="checkbox"/> R Subs For Retained Attorney <input type="checkbox"/> P Subs For Panel Attorney <input type="checkbox"/> Y Standby Counsel Prior Attorneys _____ Appointment Dates _____ <input type="checkbox"/> Because the above-named person represented has testified under oath or has otherwise satisfied this Court that he or she (1) is financially unable to employ counsel and (2) does not wish to waive counsel, and because the interests of justice so require, the attorney whose name appears in Item 12 is appointed to represent this person in this case, OR <input type="checkbox"/> Other (<i>See Instructions</i>) _____ Signature of Presiding Judicial Officer or By Order of the Court Date of Order _____ Nunc Pro Tunc Date _____ Repayment or partial repayment ordered from the person represented for this service at time appointment <input type="checkbox"/> YES <input type="checkbox"/> NO	
14. NAME AND MAILING ADDRESS OF LAW FIRM (<i>Only provide per instructions</i>)			

CLAIM FOR SERVICES AND EXPENSES			FOR COURT USE ONLY		
CATEGORIES (<i>Attach itemization of services with dates</i>)	HOURS CLAIMED	TOTAL AMOUNT CLAIMED	MAIH/TECH ADJUSTED HOURS	MAIH/TECH ADJUSTED AMOUNT	ADDITIONAL REVIEW
In	a Arraignment and/or Plea				
	b Bail and Detention Hearings				
	c Motion Hearings				
	d Trial				
	e Sentencing Hearings				
	f Revocation Hearings				
	g Appeals Court				
	h Other (<i>Specify on additional sheets</i>)				
(RATE PER HOUR = \$ _____) TOTALS:					
Out of	a Interviews and Conferences				
	b Obtaining and reviewing records				
	c Legal research and brief writing				
	d Travel time				
	e Investigative and other work (<i>Specify on additional sheets</i>)				
(RATE PER HOUR = \$ _____) TOTALS:					
17 Travel Expenses (<i>lodging, parking, meals, mileage, etc.</i>)					
18 Other Expenses (<i>other than expert, transcripts, etc.</i>)					
GRAND TOTALS (CLAIMED AND ADJUSTED):					

19 CERTIFICATION OF ATTORNEY/PAYEE FOR THE PERIOD OF SERVICE _____ TO: _____	20 APPOINTMENT TERMINATION DATE IF OTHER THAN CASE COMPLETION	21 CASE DISPOSITION
22 CLAIM STATUS <input type="checkbox"/> Final Payment <input type="checkbox"/> Interim Payment Number _____ <input type="checkbox"/> Supplemental Payment		
Have you previously applied to the court for compensation and/or reimbursement for this representation? <input type="checkbox"/> YES <input type="checkbox"/> NO If yes, were you paid? <input type="checkbox"/> YES <input type="checkbox"/> NO Other than from the Court, have you, or to your knowledge has anyone else, received payment (<i>compensation or anything of value</i>) from any other source in connection with this representation? <input type="checkbox"/> YES <input type="checkbox"/> NO If yes, give details on additional sheets I swear or affirm the truth or correctness of the above statements. Signature of Attorney _____ Date _____		

APPROVED FOR PAYMENT — COURT USE ONLY					
23 IN COURT COMP	24 OUT OF COURT COMP	25 TRAVEL EXPENSES	26 OTHER EXPENSES	27 TOTAL AMT APPR /CERT	
28 SIGNATURE OF THE PRESIDING JUDICIAL OFFICER			DATE	28a JUDGE/MAG JUDGE CODE	
29 IN COURT COMP	30 OUT OF COURT COMP.	31 TRAVEL EXPENSES	32 OTHER EXPENSES	33 TOTAL AMT APPROVED	
34 SIGNATURE OF CHIEF JUDGE, COURT OF APPEALS (OR DELEGATE) <i>Payment approved in excess of the statutory threshold amount</i>			DATE	34a JUDGE CODE	

1 CIR /DIST / DIV CODE	2 PERSON REPRESENTED	VOUCHER NUMBER	
3 MAG DKT /DEF NUMBER	4. DIST DKT./DEF. NUMBER	5 APPEALS DKT /DEF NUMBER	6 OTHER DKT NUMBER
7 IN CASE/MATTER OF (Case Name)	8 PAYMENT CATEGORY <input type="checkbox"/> Felony <input type="checkbox"/> Petty Offense <input type="checkbox"/> Misdemeanor <input type="checkbox"/> Other <input type="checkbox"/> Appeal	9 TYPE PERSON REPRESENTED <input type="checkbox"/> Adult Defendant <input type="checkbox"/> Appellant <input type="checkbox"/> Juvenile Defendant <input type="checkbox"/> Appellee <input type="checkbox"/> Other	10 REPRESENTATION TYPE (See Instructions)
11 OFFENSE(S) CHARGED (Cite U.S. Code, Title & Section) <i>If more than one offense, list (up to five) major offenses charged, according to severity of offense</i>			

REQUEST AND AUTHORIZATION FOR EXPERT SERVICES

12 ATTORNEY'S STATEMENT
 As the attorney for the person represented, who is named above, I hereby affirm that the services requested are necessary for adequate representation. I hereby request
 Authorization to obtain the service. Estimated Compensation and Expenses \$ _____ OR
 Approval of services already obtained to be paid for by the United States pursuant to the Criminal Justice Act. (Note: Prior authorization should be obtained for services in excess of \$300, excluding expenses.)

Signature of Attorney _____ Date _____
 Panel Attorney Retained Attorney Pro-Se Legal Organization

ATTORNEY'S NAME (First Name, MI, Last Name, including any suffix), AND MAILING ADDRESS _____
 Telephone Number _____

13 DESCRIPTION OF AND JUSTIFICATION FOR SERVICES (See Instructions)	14 TYPE OF SERVICE PROVIDER
15 COURT ORDER Financial eligibility of the person represented having been established to the Court's satisfaction, the authorization requested in Item 12 is hereby granted. Signature of Presiding Judicial Officer or By Order of the Court _____ Date of Order _____ Nunc Pro Tunc Date _____ Reimbursement or partial reimbursement ordered from the person represented for this service at time of authorization <input type="checkbox"/> YES <input type="checkbox"/> NO	01 <input type="checkbox"/> Investigator 02 <input type="checkbox"/> Interpreter/Translator 03 <input type="checkbox"/> Psychologist 04 <input type="checkbox"/> Psychiatrist 05 <input type="checkbox"/> Polygraph 06 <input type="checkbox"/> Documents Examiner 07 <input type="checkbox"/> Fingerprint Analyst 08 <input type="checkbox"/> Accountant 09 <input type="checkbox"/> CALR (Wetlaw/Lexis, etc.) 10 <input type="checkbox"/> Chemist/Toxicologist 11 <input type="checkbox"/> Ballistics 12 <input type="checkbox"/> Weapons/Trauma/Explosive Expert 13 <input type="checkbox"/> Pathologist/Medical Examiner 14 <input type="checkbox"/> Other Medical 15 <input type="checkbox"/> Voice/Audio Analyst 16 <input type="checkbox"/> Hair/Fiber Expert 17 <input type="checkbox"/> Computer (Hardware/Software/Systems) 18 <input type="checkbox"/> Paralegal Services 19 <input type="checkbox"/> Legal Analyst/Consultant 20 <input type="checkbox"/> Jury Consultant 21 <input type="checkbox"/> Mitigation Specialist 22 <input type="checkbox"/> Duplication Services (See Instructions) 23 <input type="checkbox"/> Other (Specify) _____ 24 <input type="checkbox"/>

CLAIM FOR SERVICES AND EXPENSES		FOR COURT USE ONLY	
16 SERVICES AND EXPENSES (Attach itemization of services with dates)	AMOUNT CLAIMED	MATH/TECHNICAL ADJUSTED AMOUNT	ADDITIONAL REVIEW
a. Compensation			
b. Travel Expenses (lodging, parking, meals, mileage, etc.)			
c. Other Expenses			
GRAND TOTALS (CLAIMED AND ADJUSTED):			

17 PAYEE'S NAME (First Name, MI, Last Name, including any suffix), AND MAILING ADDRESS _____
 TIN _____
 Telephone _____

CLAIMANT'S CERTIFICATION FOR PERIOD OF SERVICE _____ TO _____

CLAIM STATUS Final Payment Interim Payment Number _____ Supplemental Payment

I hereby certify that the above claim is for services rendered and is correct, and that I have not sought or received payment (compensation or anything of value) from any other source for these services.

Signature of _____ Date _____

18 CERTIFICATION OF ATTORNEY: I hereby certify that the services were rendered for this case.

Signature of _____ Date _____

APPROVED FOR PAYMENT — COURT USE ONLY

19 TOTAL COMPENSATION	20 TRAVEL EXPENSES	21 OTHER EXPENSES	22 TOTAL AMOUNT APPROVED/CERTIFIED
23 <input type="checkbox"/> Either the cost (excluding expenses) of these services does not exceed \$300, or prior authorization was obtained. <input type="checkbox"/> Prior authorization was not obtained, but in the interest of justice the Court finds that timely procurement of these necessary services could not await prior authorization, even though the cost (excluding expenses) exceeds \$300.			
Signature of Presiding Judicial Officer		Date	
		Judge/Mag. Judge Code	
24 TOTAL COMPENSATION	25 TRAVEL EXPENSES	26 OTHER EXPENSES	27 TOTAL AMOUNT APPROVED
28 PAYMENT APPROVED IN EXCESS OF THE STATUTORY THRESHOLD UNDER 18 U.S.C. § 3006A(e)(3)			
Signature of Chief Judge, Court of Appeals (or Delegate)		Date	
		Judge Code	

FINANCIAL AFFIDAVIT

IN SUPPORT OF REQUEST FOR ATTORNEY, EXPERT OR OTHER COURT SERVICES WITHOUT PAYMENT OF FEE.

IN THE CASE OF _____ IN UNITED STATES MAGISTRATE DISTRICT APPEALS COURT of OTHER PANEL (Specify below)

_____ VS _____

FOR _____
AT _____

LOCATION NUMBER

PERSON REPRESENTED (Show your full name)



- 1 Defendant—Adult
- 2 Defendant - Juvenile
- 3 Appellant
- 4 Probation Violator
- 5 Parole Violator
- 6 Habeas Petitioner
- 7 2255 Petitioner
- 8 Material Witness
- 9 Other

DOCKET NUMBERS

Magistrate

District Court

Court of Appeals

CHARGE/OFFENSE (describe if applicable & check box ->) Felony Misdemeanor

ANSWERS TO QUESTIONS REGARDING ABILITY TO PAY

ASSETS	EMPLOYMENT	Are you now employed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Am Self-Employed Name and address of employer: _____ IF YES, how much do you earn per month? \$ _____ IF NO, give month and year of last employment How much did you earn per month? \$ _____ If married is your Spouse employed? <input type="checkbox"/> Yes <input type="checkbox"/> No IF YES, how much does your Spouse earn per month? \$ _____ If a minor under age 21, what is your Parents or Guardian's approximate monthly income? \$ _____
	OTHER INCOME	Have you received within the past 12 months any income from a business, profession or other form of self-employment, or in the form the form of rent payments, interest, dividends, retirement or annuity payments, or other sources? <input type="checkbox"/> Yes <input type="checkbox"/> No RECEIVED SOURCES IF YES, GIVE THE AMOUNT RECEIVED & IDENTIFY THE SOURCES \$ _____
	CASH	Have you any cash on hand or money in savings or checking accounts? <input type="checkbox"/> Yes <input type="checkbox"/> No IF YES, state total amount \$ _____
	PROPERTY	Do you own any real estate, stocks, bonds, notes, automobiles, or other valuable property (excluding ordinary household furnishings and clothing)? <input type="checkbox"/> Yes <input type="checkbox"/> No IF YES, GIVE THE VALUE AND \$ DESCRIBE IT

OBLIGATIONS & DEBTS	DEPENDENTS	MARITAL STATUS ____ SINGLE ____ MARRIED ____ WIDOWED ____ SEPARATED OR DIVORCED	Total No of Dependents _____	List persons you actually support and your relationship to them _____ _____ _____
	DEBTS & MONTHLY BILLS (LIST ALL CREDITORS INCLUDING BANKS LOAN COMPANIES CHARGE ACCOUNTS ETC)	APARTMENT OR HOME	Creditors	Total Debt Monthly Paymt
				\$ _____ \$ _____ \$ _____ \$ _____ \$ _____ \$ _____ \$ _____ \$ _____

I certify under penalty of perjury that the foregoing is true and correct. Executed on (date) _____

SIGNATURE OF DEFENDANT (OR PERSON REPRESENTED)

**NOTICE TO CJA PANEL ATTORNEYS REGARDING AVAILABILITY OF
INVESTIGATIVE, EXPERT AND OTHER SERVICES**

All attorneys appointed to provide representation under the Criminal Justice Act, 18 U.S.C. § 3006A, may request, under subsection (e) of the Act, authorization to obtain investigative, expert and other services necessary for adequate representation, to be paid from funds appropriated for the administration of the Act.

In addition to investigators, psychiatrists, psychologists and reporters, services other than counsel may include, but are not necessarily limited, to interpreters, neurologists, and laboratory experts in the areas of ballistics, fingerprinting, handwriting, etc.

Requests for authority to obtain "subsection (e)" services should be made to the presiding judge or magistrate judge (see cautionary note below). In order to prevent the possibility that an open hearing concerning a request for subsection (e) services will cause a defendant to reveal his or her defense, these requests should be made by *ex parte* application. Guidelines promulgated by the United States Judicial Conference, *Guidelines for the Administration of the Criminal Justice Act*, Volume VII, *Guide to Judiciary Policies and Procedures (CJA Guidelines)*, provide that the applications shall be heard *in camera* and not be revealed without the consent of the defendant. The *Guidelines* further state that such applications shall be placed under seal until the final disposition of the case in the trial court, subject to final order of the court.

CAUTIONARY NOTE

There are, however, limitations that apply to the obtaining of these services. **PRIOR AUTHORIZATION SHOULD BE SECURED** from the presiding judicial officer for all subsection (e) services where the cost (exclusive of reimbursement for expenses) will exceed \$300. In addition to prior authorization, once the services have been provided, the claims for compensation must be approved by the presiding judicial officer. Failure to obtain prior authorization will result in the disallowance of any amount claimed for compensation in excess of \$300, unless the presiding judicial officer, in the interest of justice, finds that timely procurement of necessary services could not await prior authorization. Except in death penalty proceedings, claims for compensation in excess of \$1,000 (excluding reimbursement for expenses) may be paid only if the presiding judicial officer certifies that payment in excess of the amount is necessary to provide fair compensation for services of an unusual character or duration, and the amount of the excess payment is approved by the chief judge of the circuit (or the active circuit judge to whom the chief judge has delegated excess compensation approval authority). Payment for subsection (e) services should be claimed directly by the service provider on the CJA Form 21, "Authorization and Voucher for Expert and Other Services," or, in death penalty proceedings, on the CJA Form 31, "Death Penalty Proceedings: *Ex Parte* Request for Authorization and Voucher for Expert and Other Services."

Counsel should review both the Criminal Justice Act and the *CJA Guidelines*. A copy of the *CJA Guidelines* is located in the office of the Clerk of Court.

SUPPLEMENTAL INFORMATION STATEMENT FOR A COMPENSATION CLAIM IN EXCESS OF THE STATUTORY CASE COMPENSATION MAXIMUM DISTRICT COURT

THIS FORM PROVIDES INFORMATION TO SUPPORT COUNSEL'S CLAIM THAT THE REPRESENTATION GIVEN WAS IN AN EXTENDED OR COMPLEX CASE, AND THAT THE EXCESS PAYMENT IS NECESSARY TO PROVIDE FAIR COMPENSATION. PARAGRAPH 2.22 B(3) OF THE GUIDELINES FOR THE ADMINISTRATION OF THE CRIMINAL JUSTICE ACT, VOLUME VII, GUIDE TO JUDICIARY POLICIES AND PROCEDURES, DEFINES THE TERMS "EXTENDED" AND "COMPLEX," AND SUGGESTS CRITERIA FOR DETERMINING "FAIR COMPENSATION." THIS FORM SERVES AS COUNSEL'S MEMORANDUM REQUIRED BY PARAGRAPH 2.22 C(2) OF THOSE GUIDELINES, AND DOES NOT REPLACE ANY OTHER DOCUMENTATION REQUIRED TO SUPPORT THE PAYMENT REQUEST. IF EXTRA SPACE IS NEEDED, ATTACH ADDITIONAL SHEETS OF PAPER.

ATTORNEY NAME: _____

CASE NAME: _____

DOCKET NUMBER _____

DEFENDANT NUMBER: _____

VOUCHER NUMBER _____

1 PERIOD OF APPOINTMENT (DATES): _____ TO _____

TOTAL NUMBER OF IN-COURT HOURS _____ SPECIFYING PRETRIAL HEARINGS _____ TRIAL _____
 SENTENCING HEARINGS _____ ALL OTHER IN-COURT _____
 TOTAL NUMBER OF OUT-OF-COURT HOURS _____

2 OFFENSES CHARGED: _____

NUMBER OF COUNTS CHARGED: _____ NUMBER OF CO-DEFENDANTS _____

OTHER PENDING CASES (DOCKET NUMBERS) OF DEFENDANT DURING REPRESENTATION: _____

IF APPLICABLE, SENTENCING GUIDELINE RANGE FOUND BY THE COURT FOR SENTENCING _____

WAS A MANDATORY MINIMUM FOUND OR AT ISSUE AT SENTENCING? YES _____ NO _____

3 DESCRIBE DISCOVERY MATERIALS (NATURE AND VOLUME) AND/OR DISCOVERY PRACTICES WHICH ARE A NOTEWORTHY FACTOR IN THE NUMBER OF HOURS CLAIMED

4 LIST AND DESCRIBE MOTIONS, LEGAL MEMORANDA, JURY INSTRUCTIONS, AND SENTENCING DOCUMENTS, OR LEGAL RESEARCH NOT RESULTING IN SUCH, WHICH ARE A NOTEWORTHY FACTOR IN THE NUMBER OF HOURS CLAIMED AND WHICH WERE DRAFTED ORIGINALLY FOR THIS CASE (DO NOT INCLUDE STANDARDIZED MOTIONS, ETC., UNLESS CONTENT WAS MODIFIED SIGNIFICANTLY)

5 SUMMARIZE INVESTIGATION AND CASE PREPARATION (E.G., NUMBER AND ACCESSIBILITY OF WITNESSES INTERVIEWED, RECORD COLLECTION, DOCUMENT ORGANIZATION) WHICH ARE A NOTEWORTHY FACTOR IN THE NUMBER OF HOURS CLAIMED:

6 EXPLAIN, IF NOTEWORTHY, IMPACT ON THE NUMBER OF HOURS CLAIMED OF INVESTIGATIVE, EXPERT, OR OTHER SERVICES USED (CJA 21 VOUCHER).

7 CHECK WHETHER ANY OF THE FOLLOWING CLIENT CONSIDERATIONS ARE A NOTEWORTHY FACTOR IN THE NUMBER OF HOURS CLAIMED AND EXPLAIN EACH: COMMUNICATION WITH CLIENT/FAMILY _____ LANGUAGE DIFFERENCE _____ ACCESSIBILITY OF CLIENT _____ OTHER _____

8 EXPLAIN ANY EXPENSE (ITEM 19 OF THE CJA 20 VOUCHER) GREATER THAN \$500

9 EXPLAIN ANY OTHER NOTEWORTHY CIRCUMSTANCES REGARDING THE CASE AND THE REPRESENTATION PROVIDED TO SUPPORT THIS COMPENSATION REQUEST:

INCLUDE, IF APPLICABLE: (A) NEGOTIATIONS WITH U.S. ATTORNEY'S OFFICE OR LAW ENFORCEMENT AGENCY; (B) COMPLEXITY OR NOVELTY OF LEGAL ISSUES AND FACTUAL COMPLEXITY; (C) RESPONSIBILITIES INVOLVED MEASURED BY THE MAGNITUDE AND IMPORTANCE OF THE CASE; (D) MANNER IN WHICH DUTIES WERE PERFORMED AND KNOWLEDGE, SKILL, EFFICIENCY, PROFESSIONALISM, AND JUDGMENT REQUIRED OF AND USED BY COUNSEL; (E) NATURE OF COUNSEL'S PRACTICE AND HARDSHIP OR INJURY RESULTING FROM THE REPRESENTATION, AND (F) ANY EXTRAORDINARY PRESSURE OF TIME OR OTHER FACTORS UNDER WHICH SERVICES WERE RENDERED.

SIGNATURE OF APPOINTED ATTORNEY.

DATE:

GUIDANCE TO ATTORNEYS IN DRAFTING THE MEMORANDUM REQUIRED FOR A COMPENSATION CLAIM IN EXCESS OF THE CASE COMPENSATION MAXIMUM: DISTRICT COURT

Paragraph 2.22 C(2) of the *Guidelines for the Administration of the Criminal Justice Act (CJA Guidelines)*, Volume VII, *Guide to Judiciary Policies and Procedures*, provides:

In any case in which the total compensation claimed is in excess of the statutory case compensation maximum, counsel shall submit with the voucher a detailed memorandum supporting and justifying counsel's claim that the representation given was in an extended or complex case, and that the excess payment is necessary to provide fair compensation.

Paragraph 2.22 B(3) of the *CJA Guidelines* states that a case is complex if the "legal or factual issues . . . are unusual, thus requiring the expenditure of more time, skill and effort by the lawyer than would normally be required in an average case," and that a case is extended if "more time is reasonably required for total processing than the average case". Paragraph 2.22 B(3) lists the following criteria as useful in determining fair compensation in extended or complex cases: responsibilities involved measured by the magnitude and importance of the case; manner in which duties were performed; knowledge, skill, efficiency, professionalism, and judgment required of and used by counsel; nature of counsel's practice and injury thereto; any extraordinary pressure of time or other factors under which services were rendered; and any other circumstances relevant and material to a determination of a fair and reasonable fee.

To assist counsel in writing a "detailed memorandum supporting and justifying counsel's claim that the representation given was in an extended or complex case, and that the excess payment is necessary to provide fair compensation," the following topics are provided for counsel's consideration. Some of these issues may not apply to a particular case or may not be noteworthy for this memorandum. Counsel, of course, may address topics other than those listed below.

Length of appointment to case; total number of in-court hours, specifying pre-trial hearings, trial, sentencing hearings, and other; and total number of out-of-court hours.

Offenses charged; number of counts charged; and other pending cases of defendant during the representation.

Number of co-defendants.

The sentencing guideline range found by the court and whether a mandatory minimum was found or at issue at sentencing.

Discovery materials (nature and volume) and/or discovery practices.

Motions, legal memoranda, jury instructions, and sentencing documents, or legal research not resulting in such, which were drafted originally for this case (do not include standardized motions, etc., unless content was modified significantly).

Investigation and case preparation (e.g., number and accessibility of witnesses interviewed, record collection, document organization).

Use of investigative, expert, or other services (CJA 21 voucher).

The following client considerations: communication with client/family, language difference, accessibility of client, other.

Any expense (see Item 19 of the CJA 20 voucher) greater than \$500.

Any other noteworthy circumstances regarding the case and the representation provided to support this compensation request. Include, if applicable: negotiations with the U.S. Attorney's office or law enforcement agency; complexity or novelty of legal issues and factual complexity; responsibilities involved measured by the magnitude and importance of the case; manner in which duties were performed and knowledge, skill, efficiency, professionalism, and judgment required of and used by counsel; nature of counsel's practice and hardship or injury resulting from the representation; any extraordinary pressure of time or other factors under which services were rendered.