**SAMPLE INDIVIDUAL CASE INDIGENT DEFENSE INVOICE**

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| **Case Assignment Information** | | | |
| **District Ct Case #** |  | **Case Type (mark highest charge type with an X)** | | |
| **Circuit Ct Case #** |  |  | Life Offense |
| **Client Name** |  |  | High Severity Felony (M2, A, B, C, D) |
| **Court Number** |  |  | Low Severity Felony (E, F, G, H) |
| **Date Assigned** |  |  | Misdemeanor |
| **Was client in custody?** | [Y/N] |  |  |
| **Date of 1st Interview** |  |  |  |
| **Do you anticipate this being your final invoice on the case?** | [Y/N] |  |  |

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| **Date** | **Itemized Time** | **Hours** | **Rate** | **Billed** |
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|  |  | **TOTAL** | |  |

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| **Date** | **Allowable Expenses (travel, mileage, exhibits, discovery, etc)** | **Billed** |
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|  |  |  |
|  | **TOTAL** |

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| **INVOICE TOTAL** |  |

I declare that I have examined this invoice and accompanying documents, and to the best of my knowledge and belief, they are true, correct, and accurately list all services provided during the course of this billing period. Declaration of preparer (other than assigned attorney) is based on all information of which preparer has any knowledge.

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| Attorney Name and P# |  | Signature | Date |

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| Review Date | Initials | Fund Code | Amount Paid |

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| Administrator Signature |