

<p style="text-align: center;"><b>Investigator Fee Voucher</b></p> <p>Nueces County District Courts  Court Number: _____</p>	<p><b>Instructions:</b> Please complete one fee voucher form for each case. If the defendant has multiple cases, staple all fee voucher forms together and submit to the State District Judge.</p>
--	--

<p>In the case of: State of Texas vs.  _____</p>	<p>Cause Number: _____</p>
--	----------------------------

**Offense:**

**I am requesting investigation fees as authorized by the Nueces County Court Plan approved by the Nueces County Board of Judges in the amount of \$50. 00 per hour. Documentation for pre-approved investigative expenses must be attached to support such request. Otherwise, only pre-approved expenses will be paid.**

Number of hours \_\_\_\_\_ x \$50.00 = \_\_\_\_\_

Reimbursable expenses (with prior approval – attach receipts) Itemized: \_\_\_\_\_

Total: \_\_\_\_\_

(Documentation justifying such request is attached.) (Attach a copy of the Order authorizing your services.)

**Vendor Identification Information**

Vendor Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ FAX: \_\_\_\_\_

Email: \_\_\_\_\_ Vendor Number: \_\_\_\_\_

County Auditor Use:

Department Key Code: \_\_\_\_\_ Secondary Reference: \_\_\_\_\_

I, THE UNDERSIGNED, certify that the above information is true and correct and in accordance with the laws of the State of Texas, and that the expenses claimed were reasonable and necessary to provide effective assistance of counsel. I further swear or affirm that I have not received nor will receive any money or anything else of value for providing the aforementioned services.

Time period of service rendered: From \_\_\_\_\_ to \_\_\_\_\_

\_\_\_\_\_  
Signature and date

Have previous vouchers been submitted for this case? \_\_\_\_\_ Yes \_\_\_\_\_ No

Is this voucher for final or partial payment? \_\_\_\_\_ Yes \_\_\_\_\_ No

**Order**

Signature of Trial Judge: \_\_\_\_\_ Date: \_\_\_\_\_

Reason for Denial or Variance: \_\_\_\_\_ Amount Approved: \_\_\_\_\_

<p>Approved by Council of Judges 8.21.19</p>	<p>Recorded by Anne Lorentzen, District Clerk, By Deputy Clerk (Signature)</p>
--	--