

**MISDEMEANOR CONTRACT**

**Attorney Payment Request**

Case Number: \_\_\_\_\_

Judge: \_\_\_\_\_

Defendant/Client: \_\_\_\_\_

Date of Appointment: \_\_\_\_\_

Previous Attorney (if Applicable): \_\_\_\_\_

**NON-ENGLISH SPEAKING**  Yes (\$70/hr)  No (\$60/hr)

Attorney: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Provide brief factual synopsis of your case:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Charges** (List most serious charge): \_\_\_\_\_

Disposition: \_\_\_\_\_ Date: \_\_\_\_\_

**FLAT FEES**

APPEAL \$500

BENCH TRIAL \$500

JURY TRIAL \$750

NON-TRIAL DISPOSITION \$350

PROBATION REVOCATION, In custody client \$250

PROBATION REVOCATION, Out of custody client \$200

**HOURLY WITH CAP**

DISMISSAL OF CHARGES \_\_\_\_\_ hours @\$60/70 = \$\_\_\_\_\_ (2hr cap)

POST-CONVICTION RELIEF \_\_\_\_\_ hours @\$60/70= \$\_\_\_\_\_ (2hr cap)\*

\*Requires OCAC Approval

WARRANT ISSUED FOR CLIENT \_\_\_\_\_ hours @\$60/70 = \$\_\_\_\_\_ (2hr cap)

**EXTRAORDINARY CIRCUMSTANCES**

\_\_\_\_\_ hours @ \$60/\$70 per hour = \$\_\_\_\_\_ Attach OCAC Approval

**MISCELLANEOUS ASSIGNMENTS**

\*Including Withdrawals

\_\_\_\_\_ hours @ \$60/\$70 per hour = \$\_\_\_\_\_ (2 Hour Cap)

**EXPENSES**

\_\_\_\_\_ \$

\_\_\_\_\_ \$

**TOTAL FEES & EXPENSES \$ \_\_\_\_\_**

*The statements in the above schedule are true. All work has been performed by attorney unless otherwise indicated. No compensation for the services described has been received. An accurate itemization of the time and expenses is attached.*

\_\_\_\_\_  
Attorney signature

\_\_\_\_\_  
Date

*For OCAC use only (Revised 05/08/17)*

Approved: \_\_\_\_\_ Date: \_\_\_\_\_