

Defendant Name, Address & Inmate #

 First Last

**OAKLAND COUNTY CIRCUIT COURT
 REQUEST AND ORDER FOR PAYMENT
 OF COURT APPOINTED COUNSEL
 (PROSECUTOR APPEAL)
 Please print or type.**

Prosecutor Order # _____
 Court of Appeals # _____
 Circuit Court # _____
 Circuit Judge _____

Attorney Name _____ Phone # _____ Bar # P _____
 Address _____ Vendor ID # _____
 _____ Appointment Date _____

Charge(s) _____

The above named attorney was appointed to represent the defendant. A complete and accurate record of services rendered appears on the time sheet below.

DO NOT ALTER TIME SHEET.

- Michigan Court of Appeals Michigan Supreme Court Conviction From a Plea Conviction from a Trial

DATE	ACTION	HOURS	DATE	ACTION	HOURS
_____	Preparation of Brief	_____	_____	_____	_____
_____	Number of Pages of Trial Transcript	_____	_____	_____	_____
_____	Written Motions	_____	_____	_____	_____
_____	Oral Argument	_____	_____	_____	_____
_____	Prison Visit – Region _____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
					TOTAL HOURS _____

For Business Office Extraordinary Fee Use Only

REGULAR FEE \$ _____

EXTRAORDINARY \$ _____

I have not received compensation from any source for handling this case. I have no expectation of receiving, nor will I accept any other compensation.

 Attorney Signature

Transcript Sent to Defendant: Yes No

APPEAL

ORDER

IT IS ORDERED: The above named attorney was appointed to represent this defendant in the above captioned case. (S)he has rendered this service, filed a payment voucher, and shall be paid less any applicable Federal or State Court-ordered and/or statutory lien, levy or garnishment _____ dollars from the County Treasury.

Please return to: BUSINESS OFFICE
 OAKLAND COUNTY CIRCUIT COURT
 1200 N. TELEGRAPH ROAD, DEPT 404
 PONTIAC, MI 48341-0404

Questions? Call (248) 452-2078
 Fax (248) 975-9877

 Circuit Judge