

Alternate Model Monthly Attorney Fees Invoice/Voucher Cover INSTRUCTIONS

1. Name of Attorney – Use first name, middle initial and last name.
2. Firm Name
3. Contract Type – Supply the contract type (example: Criminal Felony/Misdemeanor Contract)
4. Florida Bar Number – Supply bar number of the Court-Appointed Attorney assigned to the case.
5. Invoice Number – Invoice tracking number generated by firm.
6. Tax Identification Number - Supply tax identification number of Attorney or Firm. If you do not have a tax identification number, please enter your social security number. **NOTE:** Payment cannot be processed without this information.
7. County Name – Enter the county of court.
8. Circuit Number – Provide circuit of court.
9. Total Contract Amount - Provide the total amount billed for this invoice.
10. Summary of documentation attached in support of monthly billing – Enter the ending date for the monthly period of services along with the number of the following: Orders of Appointment, Charging Documents, Disposition Documents, and Vouchers requesting Reimbursement of Costs or Expenses.
11. Affidavit Verifying Attorney's Fees, Costs and Other Expenses – Read the verification paragraphs.
12. Court-Appointed Attorney Signature – Sign, in blue ink, on the line provided. **NOTE:** The signature must be original.
13. Date – Include date certifying invoice.
14. Attorney Printed Name - Use first name, middle initial and last name.
15. Bar Number - Provide bar number for Court-Appointed Attorney.
16. Phone Number – Provide phone number where attorney can be reached.

All services are subject to audit and the Justice Administrative Commission reserves the right to offset an over-billing against subsequent payment requests.

IMPORTANT: Original Signatures required, JAC will not accept copies or facsimiles of this form.