

COURT-APPOINTED ATTORNEY FEE WAIVER

Attorney name: _____

Bar ID: _____

Firm name: _____

Address: _____

Case No. _____

Circuit/County: _____

Case Style: _____

Name(s) of Other Court-Appointed Counsel:

I, the undersigned attorney, certify that I was appointed to represent the client in the above styled case after July 1, 2007, for only a portion of the case. As a consequence I recognize that I may be entitled to a portion of the flat fee as set forth in Section 27.5304, Florida Statutes (2007).

Acknowledging that I may be entitled to a portion of the attorney's fees in this case, I nonetheless hereby freely and knowingly waive my right to bill or receive compensation in this case.

Attorney Signature

Bar ID

Date