

JUDICIARY OF GUAM
REQUEST FOR PAYMENT FOR INDIGENT DEFENSE SERVICES
All Information Must Be Typed

Attorney ID Number: _____ **Attorney Name:** _____
Court:: _____ SUPREME _____ SUPERIOR **Appointing Judge:** _____
Case Number(s): _____ **Appointment Date:** _____
Client Name: _____ **Disposition Judge:** _____

Payment To Be Made To Me **Payment To Be Made To My Firm**
Social Security Number: _____ Tax Payer ID Number: _____
Address: _____ Name/Address: _____
_____ Telephone No.: _____
_____ Telephone No.: _____

CHECK TYPE OF REPRESENTATION:

- Supreme Court of Guam Appeal (\$90 per hour up to \$2,500)
- Felony (\$90 per hour up to \$7,500)
- Misdemeanor (\$90 per hour up to \$2,500)
- Juvenile - JD/JP (\$90 per hour up to \$2,500)
- Guardian Ad Litem (\$90 per hour up to \$2,500)
- Other - CV, DM, SP (\$90 per hour up to \$2,500)

HOURS MUST BE ROUNDED TO NEAREST 1/10. TIME OVER ONE HOUR MUST BE SPECIFIED (E.G. 9:15 - 10:30 A.M.). A SUMMARY OF IN AND OUT OF COURT TIME MUST BE PROVIDED. IN COURT MUST INCLUDE TYPE OF HEARING (E.G. TRIAL). ATTACH ADDITIONAL FORM IF NECESSARY. ORIGINAL MUST BE ACCOMPANIED WITH FOUR (4) COPIES.

COMPENSATION FOR TIME EXCEEDING THE ABOVE THRESHOLDS MUST BE APPROVED BY THE ADMINISTRATOR OF THE COURTS WITH THE CONCURRENCE OF THE JUSTICE OR JUDGE PRESIDING OVER THE CASE.

A. TIME SPENT IN COURT (SUMMARY MUST BE ATTACHED)
Dates from _____ to _____ x \$90.00 PER HOUR **Subtotal** \$ _____

B. TIME SPENT IN PREPARATION (SUMMARY MUST BE ATTACHED)
Dates from _____ to _____ X 90.00 PER HOUR **Subtotal** \$ _____

C. EXPENSES (SUMMARY MUST BE ATTACHED)
Dates from _____ to _____ **Subtotal** \$ _____

D. Less Compensation Received or Claimed Earlier Under Separate Voucher(s): \$ _____

\$ _____

CERTIFICATION: I Certify That I Have Provided The Services
And Incurred The Costs Described And That
I have Not, Nor Will I, Accept Any Other
Payment For These Services Or Expenses

Signature of Payee

BILLINGS MUST BE SUBMITTED ON A MONTHLY BASIS PROVIDED IT EXCEEDS \$250, UNLESS THE MATTER IS AT ITS DISPOSITION STAGE

FOR COURT USE

Verified By: _____ Date: _____
Approved By: _____ Date: _____
Funds Certified By: _____ Date: _____