

1. CIR./DIST./ DIV. CODE 2. PERSON REPRESENTED VOUCHER NUMBER
3. MAG. DKT./DEF. NUMBER 4. DIST. DKT./DEF. NUMBER 5. APPEALS DKT./DEF. NUMBER 6. OTHER DKT. NUMBER
7. IN CASE/MATTER OF (Case Name) 8. PAYMENT CATEGORY 9. TYPE PERSON REPRESENTED 10. REPRESENTATION TYPE
11. OFFENSE(S) CHARGED (Cite U.S. Code, Title & Section) If more than one offense, list (up to five) major offenses charged, according to severity of offense.

REQUEST AND AUTHORIZATION FOR EXPERT SERVICES

12. ATTORNEY'S STATEMENT
As the attorney for the person represented, who is named above, I hereby affirm that the services requested are necessary for adequate representation. I hereby request:
ATTORNEY'S NAME (First Name, M.I., Last Name, including any suffix), AND MAILING ADDRESS
Telephone Number:

13. DESCRIPTION OF AND JUSTIFICATION FOR SERVICES (See Instructions)
14. TYPE OF SERVICE PROVIDER (See Instructions)
15. COURT ORDER
Financial eligibility of the person represented having been established to the Court's satisfaction, the authorization requested in Item 12 is hereby granted.

Table with 4 columns: SERVICES AND EXPENSES, AMOUNT CLAIMED, MATH/TECHNICAL ADJUSTED AMOUNT, ADDITIONAL REVIEW. Includes section for GRAND TOTALS (CLAIMED AND ADJUSTED).

17. PAYEE'S NAME AND MAILING ADDRESS
TIN:
Telephone Number:
CLAIMANT'S CERTIFICATION FOR PERIOD OF SERVICE FROM TO
CLAIM STATUS
I hereby certify that the above claim is for services rendered and is correct, and that I have not sought or received payment (compensation or anything of value) from any other source for these services.

18. CERTIFICATION OF ATTORNEY I hereby certify that the services were rendered for this case.
Signature of Attorney
Date

APPROVED FOR PAYMENT - COURT USE ONLY

Table with 4 columns: TOTAL COMPENSATION, TRAVEL EXPENSES, OTHER EXPENSES, TOTAL AMOUNT APPROVED/CERTIFIED

23. Either the total cost (excluding expenses) of all services combined does not exceed \$800, or prior authorization was obtained.
Prior authorization was not obtained, but in the interest of justice the Court finds that timely procurement of these necessary services could not await prior authorization, even though the cost (excluding expenses) exceeds \$800.

Signature of Presiding Judge Date Judge Code

Table with 4 columns: TOTAL COMPENSATION, TRAVEL EXPENSES, OTHER EXPENSES, TOTAL AMOUNT APPROVED

28. PAYMENT APPROVED IN EXCESS OF THE STATUTORY THRESHOLD UNDER 18 U.S.C. § 3006A(e)(3)
Signature of Chief Judge, Court of Appeals (or Delegate) Date Judge Code