

**New York Supreme Court Appellate Division Fourth Judicial Department**

**FINAL VOUCHER FOR ASSIGNED APPELLATE COUNSEL**

Title of Appeal \_\_\_\_\_

Appellate Division Docket # \_\_\_\_\_ Assigned Counsel Program File #, if any \_\_\_\_\_

Date of Assignment \_\_\_\_\_ Number of pages of Appellate Record \_\_\_\_\_

Date briefs and record filed \_\_\_\_\_ **(Attach a copy of the brief[s] you filed)** Date

scheduling order received \_\_\_\_\_ **(Attach a copy of the order)**

**Attach your own letterhead with statement of services and disbursements, itemized by date, type of services or disbursements, and amount of time expended (in tenths of hour).**

Total hours spent on appeal to date: \_\_\_\_\_ Hours allocated as follows:

Review record: \_\_\_\_\_ Communication with client: \_\_\_\_\_ Legal research: \_\_\_\_\_

Prepare brief: \_\_\_\_\_ Communication with court: \_\_\_\_\_ Oral argument/motions: \_\_\_\_\_

Other work (specify nature): \_\_\_\_\_ CPL 440: \_\_\_\_\_

Fee requested \$ \_\_\_\_\_ Disbursements \$ \_\_\_\_\_ Total Fee and Disbursements \$ \_\_\_\_\_

**ATTORNEY'S CERTIFICATION OF CLAIM**

\_\_\_\_\_, certifies, under penalty of perjury, that I represented

the above named \_\_\_\_\_ pursuant to County Law §722; that I am the claimant herein; that the above amount and any attached schedules are just, true, and correct; that no part thereof has been paid except as stated therein; and that the balance therein stated is actually due and owing and no reimbursement or compensation has been applied for or received in the same case from any source.

DATED: \_\_\_\_\_

Assigned Counsel

**ADMINISTRATIVE APPROVAL OF VOUCHER**

Recommendation: \_\_\_\_\_

DATED: \_\_\_\_\_ Assigned Counsel Administrator

**JUDICIAL APPROVAL OF FEES AND DISBURSEMENTS**

The within voucher has been approved by the Appellate Division, Fourth Department, in the amount of \$ \_\_\_\_\_ for services and \$ \_\_\_\_\_ for disbursements, totaling \$ \_\_\_\_\_

DATED: \_\_\_\_\_

Please note that for services rendered prior to 4/1/23 will be paid at a rate of \$75.00/per hour and are limited to a maximum of \$4,400, absent a showing of extraordinary circumstances. For services rendered after 4/1/23, appeals will be paid at a rate of \$158.00 per hour and compensation will be limited for any appeal to \$10,000, absent a showing of extraordinary circumstances.