

STATE OF VERMONT  
Superior Court of Vermont

<input type="checkbox"/>	State v.	Unit	Docket No.
<input type="checkbox"/>	In re	Division	Interim

Having been assigned Counsel for the above-named Defendant Juvenile Mother of Juvenile Father of Juvenile  
(Other-please specify type: \_\_\_\_\_) in a case charging the (crime) (allegation) of:

Felony  Misdemeanor  Juvenile  Other

pursuant to the provisions of 13 V.S.A. Section 5272 and Administrative Order No. 4, revised November 30, 1993, I submit the following itemized account for services and expenses under such assignment. (See instructions)

DATE	HOURS	DESCRIPTION OF SERVICES AND EXPENSES	\$AMOUNT
<i>(Use additional copies of this form if more space is required.)</i>			<b>TOTAL</b>

*Please check here if billing is attached.*

I swear or affirm that I was assigned as counsel for the above-named party and that the foregoing is a true and correct statement of the time actually spent and the money necessarily paid out in the discharge of my duties as Counsel for the said party.

Name of Attorney
Firm
Mailing Address
City, State, Zip Code
Telephone Number

Signature of Counsel	Date
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SS or EIN of Counsel

This assignment was made because:

- 1. of a conflict of interest in State v. \_\_\_\_\_, Docket No. \_\_\_\_\_
- 2. of a conflict of interest in In re: \_\_\_\_\_, Docket No. \_\_\_\_\_

Where the Public Defender represents the (juvenile) (parents).

- 3. Co-counsel or replacement Counsel Assigned – Reason: \_\_\_\_\_

This debenture is approved and allowed against the State of Vermont in the following amount:

\$ \_\_\_\_\_

Assigned Counsel Coordinator	Date
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Approved for payment:

Defender General	Date
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