

## CJA FORM 20 PAYMENT RECOMMENDATION SHEET -- DISTRICT COURT

To: \_\_\_\_\_

From: \_\_\_\_\_

Date: \_\_\_\_\_

Case Name: \_\_\_\_\_

Docket #: \_\_\_\_\_ Voucher #: \_\_\_\_\_

Co-defendants with court-appointed counsel: \_\_\_ Yes \_\_\_ No.

If yes, number \_\_\_\_.

Applicable case compensation maximum: \_\_\_\$9,700 \_\_\_\$2,800 \_\_\_\$2,100

Recommend certification for payment in excess of the case compensation  
maximum: \_\_\_ Yes \_\_\_ No

Recommend approval: \_\_\_ As requested \_\_\_ As modified (see chart)

Use the cursor to move between boxes.	AMOUNT CLAIMED		RECOMMENDATION	
	Hours	\$ Amount	Hours	\$ Amount
In-Court Compensation (Rate per hour = \$				
Arrest and/or plea				
Bail and Detention Hearings				
Motions Hearings				
Trial				
Sentence Hearings				
Revocation Hearings				
Other				
<b>Total (Item 17A of the CJA 20)</b>				
Out-of-Court Compensation (Rate per hour = \$ )				
Interviews and conferences				
Obtaining and reviewing records				
Legal research and brief writing				
Travel time				
Investigative and other work				
<b>Total (Item 18A of the CJA 20)</b>				
<b>Total Travel Expenses</b> (Item 19A of the CJA 20)	\$		\$	
<b>Total Other Expenses</b> (Item 19B of the CJA 20)	\$		\$	
<b>Grand Total</b> (Item 20 of the CJA 20)	\$		\$	

CJA 28 (04/12)

REMARKS: