

ATTORNEY'S CERTIFICATION OF CLAIM AND AFFIRMATION

_____ affirms under penalty of perjury as follows: that I am an attorney licensed to practice my profession in the State of New York and the claimant herein; that the items of the foregoing account amounting to \$_____ for legal services and \$_____ for disbursements and supplies, making \$_____ in total, are true and correct to my best knowledge and belief; that the services set forth therein have been provided to my best knowledge and belief, and the charges for disbursements and supplies set forth therein have in fact been paid or incurred; that the last judge or tribunal before whom or which this case has been heard was _____; that, if this voucher is submitted pursuant to Local Law #8, I have served (or caused to be served) a copy of this voucher upon the said judge or tribunal by mail on _____ (date); That I have received not direct or indirect compensation from the above named assigned client, or from anyone on behalf of the above named assigned client, except as may have heretofore been disclosed to the Court in writing or as disclosed herein.

Check if prior partial or interim voucher(s) submitted with respect to this assignment to this Court, and provide following information:

Date of Voucher	Judge and/or Tribunal	Amount Paid

Attorney at Law

Date: _____ (attorney signature)
 _____ (print attorney name)

Approval and Order of Judge or Justice (For Use with 18-B Vouchers Only)

I, _____, a(n) _____ Court Judge/Justice, do hereby approve the foregoing claim of Attorney _____ in the following amounts: \$_____ for legal services \$_____ for disbursements and supplies, making \$_____ in total pursuant to article 18-B of the County Law, and direct and order that the said total amount is approved be forthwith paid to Attorney _____ by the County of Tompkins.

Dated: _____ (judge signature)
 _____ Judge Court Judge/Justice

Reviewed by: _____
 For Assigned Counsel Office

Approval and Direction of Assigned Counsel Office (For Use with Local Law #8 (1994) Vouchers Only)

I Lance Salisbury, the Supervising Attorney of the Tompkins County Assigned Counsel Program, do hereby approve the foregoing claim of Attorney _____ in the following amounts: \$_____ for legal services and \$_____ for disbursements and supplies, making \$_____ in total pursuant to Tompkins County Local Law #8 (1994), after the voucher has first been submitted to the presiding judge. I direct that the said total amount as approved be forthwith paid to Attorney _____ by the County of Tompkins.

Dated: _____
 _____ (signature)
 Lance Salisbury, Supervising Attorney
 Tompkins County Assigned Counsel Program

Please be sure to keep in mind the classification of the original charge when categorizing the disposition of the case, i.e., if referred as a felony and a misdemeanor plea was entered, the entry should be made in the felony column, not the misdemeanor column.

DISPOSITION

Indigent's Name _____

Nature of family court matter _____ Assigned Counsel Case No. _____

Original Charge (Note: If multiple charges, use the most serious)
 _____ Date Assigned _____

Felony Classification _____ Misdemeanor Classification _____

INDICATE DISPOSITION BY CHECKING THE APPROPRIATE CATEGORY IN CRIMINAL CASES

		FELONY		MISDEMEANOR		VIOLATION	
		Plea	Trial	Plea	Trial	Plea	Trial
I.	Trial Level Dispositions						
1.	Convicted as charged	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.	Convicted of felony (less than charged)	<input type="checkbox"/>	<input type="checkbox"/>				
3.	Convicted of misdemeanor (less than charged)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
4.	Convicted of violation (less than charged)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5.	Dismissed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6.	Acquitted		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>
7.	Mistrial		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>
8.	Other dispositions (specify)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

		Plea	Trial	Plea	Trial	Plea	Trial
II.	Appellate Division Dispositions						
1.	Affirmed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.	Reversed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3.	Withdrawn	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.	Other termination (specify)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- III. Defendant not represented after referral or for whom rep. Was discontinued.
- Not indigent Conflict of interest In mental institution
- Retained counsel Absconded Other (Specify) _____
- IV. Family Court Dispositions: (specify)
- _____

Dated: _____

 Assigned Counsel