



# Instructions for the Completion of the Family Court Delinquent and Abuse Trial Counsel Modified Guaranteed Fee System Payment Voucher

## General Notes

- Payment voucher forms are available at: Legal Liaison Payments Unit, Room 360, 1801 Vine Street (Juvenile)  
Room 242, 34 South 11th Street (Protection from Abuse)
- Please write legibly to speed processing of payment.
- Please carefully complete all required sections as indicated, including 1(A). Instructions are detailed below.

## Instructions

- Line 1:** Enter attorney's name *Last Name* \_\_\_\_\_ *First Name* \_\_\_\_\_
- Line 1(A):** Enter appointment letter invoice number and appointment date as they appear on the appointment letter.
- Line 2:** Enter attorney's full Philadelphia address and telephone number.
- Line 3:** Enter attorney's five-digit identification number.
- Line 4:** Enter defendant's name *Last Name* \_\_\_\_\_ *First Name* \_\_\_\_\_
- Line 5:** Enter the correct petition numbers in the following sequence:  
Juvenile cases      ####-YYMM  
Abuse cases        YYMM-####
- Line 6:** Check appropriate box.
- Line 7:** Check appropriate box.
- Lines 8:** Read Carefully.
- Line 9:** Enter Date of Disposition
- Line 10:** Sign Payment Voucher. Failure to sign voucher will delay processing of payment.  
Attorney's signature represents the following averments:
- The attorney was appointed by the Court to represent the defendant in this case;
  - The facts set forth in the payment voucher are true and correct to the best of the attorney's knowledge, information and belief;
  - The attorney understands that false statements herein are made subject to the penalties of 18 Pa. C.S. Section 4904, relating to unsworn falsification to authorities;
  - The attorney actively and diligently represented the defendant in this case;
  - The payment voucher submitted is fair and reasonable compensation for services in this case based upon the time and effort expended; and
  - The attorney has not received, nor contracted to receive, directly or indirectly, any compensation for such services from any source other than provided in the Act of Assembly.

### Submission:

Following judicial signature, forms should be forwarded with a copy of appointment letter to:

#### Juvenile Cases:

Legal Liaison Payments Unit, Room 360, 1801 Vine Street

#### Protection from Abuse Cases:

Rtqewtgo gpvF gr ctvo gpv, Counsel Fee Unit, Room 206 Criminal Justice Center, Philadelphia, PA 19107