

**EASTERN DISTRICT OF CALIFORNIA
CAPITAL CASE BUDGET & EXPENSE WORKSHEETS
PHASE I**

To set up a case, please complete the following information:

Case Number: Case Name:

Petitioner:

Lead Attorney

Co-Counsel

Full Name:

Address:

City, State, ZIP:

Phone:

E-mail:

Rate/Hour:

Travel Rate:

Associate 1

Associate 2

Full Name:

Address:

City, State, ZIP:

Phone:

E-mail:

Rate/Hour:

Travel Rate:

**EASTERN DISTRICT OF CALIFORNIA
PHASE I CASE MANAGEMENT AND BUDGET FORM**

(Include Costs Already Authorized and /or Incurred)
(Excludes Travel Time)

Case Number: _____
Case Name: _____
Lead Counsel: _____

Activities	Hours for Lead Counsel		Hours for Co-Counsel		Hours for Associate 1		Hours for Associate 2		Total Cost	
	Proposed	Approved	Proposed	Approved	Proposed	Approved	Proposed	Approved	Proposed	Approved
Attend Case Mgmt. Conference(s)									-	-
Prepare Case Mgmt. & Budget Plan for Phase I (Including CCEF); Prepare CM&BP for Phase II									-	-
Assemble / Review Record									-	-
Assemble Client File / Consult with Prior Counsel									-	-
Correspond/Consult with Client									-	-
Consultations with Investigator(s) and/or Expert(s)									-	-
Consult with Co-Counsel									-	-
Consult with Resource Counsel and Staff									-	-
Legal Research/Prepare Pleading(s) on Preliminary Matters (if any)									-	-
Other (specify in declaration)									-	-
Totals	-	-	-	-	-	-	-	-	-	-

Total miscellaneous non-travel expenses incurred and/or anticipated for this phase (e.g. copying, postage, telephone/fax)

Proposed:

Approved:

EASTERN DISTRICT OF CALIFORNIA
PHASE I CASE MANAGEMENT AND BUDGET FORM--TRAVEL ONLY
(Include Costs Already Authorized and /or Incurred)

Case Number: _____
Case Name: _____
Lead Counsel: _____

Activities	Description and Purpose of Travel	Hours Required for Travel								Travel Expense (Hotel, Airfare, transportation, etc.)		Total Travel Cost	
		Proposed				Approved				Proposed	Approved	Proposed	Approved
		Lead	Co-Coun.	Assoc. 1	Assoc. 2	Lead	Co-Coun.	Assoc. 1	Assoc. 2				
Attend Case Mgmt. Conference(s)												-	-
Prepare Case Mgmt. & Budget Plan for Phase I (Including CCEF); Prepare CM&BP for Phase II												-	-
Assemble / Review Record												-	-
Assemble Client File / Consult with Prior Counsel												-	-
Correspond/Consult with Client												-	-
Consultations with Investigator(s) and/or Expert(s)												-	-
Consult with Co-Counsel												-	-
Consult with Resource Counsel and Staff												-	-
Legal Research/Prepare Pleading(s) on Preliminary Matters (if any)												-	-
Other (specify in declaration)												-	-
Totals		-	-	-	-	-	-	-	-	-	-	-	-

**EASTERN DISTRICT OF CALIFORNIA
EXPERT & INVESTIGATOR REQUEST FORM & BUDGET**

EXPERT TYPE	Name of Expert	NUMBER OF HOURS		HOURLY RATE		ESTIMATED EXPENSES		TOTAL BUDGET	
		Proposed	Approved	Proposed	Approved	Proposed	Approved	Proposed	Approved
TOTALS		-	-			-	-	-	-

1. CIR./DIST./DIV. CODE CAE-	2. PERSON REPRESENTED	VOUCHER NUMBER
3. MAG. DKT./ DEF. NUMBER	3. DIST. DKT./ DEF. NUMBER	3. APPEALS DKT./ DEF. NUMBER
7. IN CASE/MATTER OF (Case Name)		6. OTHER DKT. NUMBER
8. TYPE PERSON REPRESENTED		9. REPRESENTATION TYPE

10. OFFENSE(S) CHARGED (Cite U.S. Code, Title & Section) *If more than one offense, list (up to five) major offenses charged, according to severity of offense.*

11. ATTORNEY'S NAME (First Name, M.I., Last Name, including any suffix), AND MAILING ADDRESS: Name: Bob Bod	12. COURT ORDER:
Address: dfdfd jfkdsjdfk dkfjdkdfj	Prior Attorney s Appointment
Phone: dfjdkdfj	(A) Because the above-named person represented has testified under oath or has otherwise satisfied this Court that he or she (1) is financially unable to employ counsel and (2) does not wish to waive counsel, and because the interests of justice so require, the attorney whose name appears in Item 11, who has been determined to possess the specific qualifications by law, is appointed to represent the person in this case.
E-mail: jkdfkdfj	(b) The attorney named in Item 11 is appointed to serve <input checked="" type="radio"/> Lead Counsel <input type="radio"/> Co-Counsel
	Bob Bod Appointment Name of Co-Counsel or Lead Counsel

13. NAME AND ADDRESS OF LAW FIRM (Only provide per instructions) Name: Bob Bod	(C) If you represented the defendant or petitioner in any prior proceeding related to this matter, attach to your initial claim a listing of those proceedings and describe your role in each (e.g., lead in counsel or co-counsel). <input type="checkbox"/> (D) Due to the expected length of this case, and the anticipated hardship on counsel in undertaking representation full-time, for such a period without compensation, interim payments of compensation and expenses are approved pursuant the attached order.
Address: dfdfd jfkdsjdfk dkfjdkdfj	_____ Signature of presiding Judicial Officer or By Order of the Court
	_____ Date of Order _____ Nunc Pro Tunc Date
	(E) Repayment or partial repayment ordered from the person represented for this service at time of appointment. <input type="radio"/> Yes <input type="radio"/> No

CLAIM FOR SERVICES AND EXPENSES

14. STAGE OF PROCEEDING Select the stage which corresponds to the stage of the proceeding during which the work claimed at Item 15 was performed even if the work is intended to be used in connection with a later stage in the proceeding. SELECT NO MORE THAN ONE STAGE. Submit a separate voucher for each stage of the proceeding.

CAPITAL PROSECUTION: **HABEAS CORPUS:** **OTHER PROCEEDING:**

HOURS AND COMPENSATION CLAIMED			FOR COURT USE ONLY		
15. Categories (Attach itemized time & expense sheets with dates)	HOURS CLAIMED	TOTAL AMOUNT CLAIMED	MATH/TECH ADJUSTED HOURS	MATH/TECH ADJUSTED AMOUNT	ADDITIONAL REVIEW
a. In-Court hearings (Rate per Hour =	-	-	-	IN COURT	IN COURT
b. Interviews and Conferences with Client	-	-	-	TOTAL	TOTAL
c. Witness Interviews	-	-	-	Category a	Category a
d. Consultation with Investigators & Experts	-	-	-	-	-
e. Obtaining & Reviewing the Court Record	-	-	-	-	-
f. Obtaining & Reviewing Documents & Evidence	-	-	-	OUT OF COURT	OUT OF COURT
g. Consulting with Expert Counsel	-	-	-	TOTAL	TOTAL
h. Legal Research & Writing	-	-	-	Categories b-j	Categories b-j
i. Travel (Rate per Hour =	-	-	-	-	-
j. Other (Specify on additional sheets)	-	-	-	-	-
TOTALS: Categories b thru j (Rate/Hour=	-	-	-	-	-

CLAIM FOR TRAVEL AND EXPENSES (Attach Expense Sheet with Dates)

16. Travel Expenses (lodging, parking, meals, mileage, etc.)					
17. Other Expenses (other than expert, transcripts, etc.)					
GRAND TOTALS (CLAIMED AND ADJUSTED):					

18. CERTIFICATION OF ATTORNEY/PAYEE FOR THE PERIOD OF SERVICE From: _____ to: _____	19. APPOINTMENT TERMINATION DATE IF OTHER THAN CASE COMPLETION:	20. CASE DISPOSITION
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21. CLAIM STATUS: Final Payment Interim Payment Number Supplemental Payment

Have you previously applied to the court for compensation and/or reimbursement for this case? Yes No If yes, were you paid? Yes No

Other than from the court, to your knowledge has anyone else, received payment (compensation or anything of value) from any other source in connection with this representation? Yes No If yes, give details on additional sheets.

I swear or affirm the truth or correctness of the above statements.

Signature of Attorney: **/s/ (type name here)** Date

APPROVED FOR PAYMENT--COURT USE ONLY					
22. IN COURT COMP.	23. OUT OF COURT COMP	24. TRAVEL EXPENSES	25. OTHER EXPENSES	26. TOTAL EXPENSES	
27. SIGNATURE OF THE PRESIDING JUDICIAL OFFICER			DATE	27a. JUDGE CODE	

**EASTERN DISTRICT OF CALIFORNIA
PHASE II CASE MANAGEMENT AND BUDGET FORM**

(Include Costs Already Authorized and /or Incurred)
(Excludes Travel Time)

Case Number: _____
Case Name: _____
Lead Counsel: _____

Activities	Hours for Lead Counsel		Hours for Co-Counsel		Hours for Associate 1		Hours for Associate 2		Total Cost	
	Proposed	Approved	Proposed	Approved	Proposed	Approved	Proposed	Approved	Proposed	Approved
Attend Case Management Conference(s)									-	-
Review Record									-	-
Review Case Files and Consult with Prior Counsel									-	-
Correspond/Consult with Client									-	-
Consult with Co-Counsel									-	-
Consult with Resource Counsel and Staff									-	-
Consult with and/or Supervise Experts/Investigators									-	-
Interview Witness(es)									-	-
Prepare Substantive Petition									-	-
Meet and Confer with A.G. Re: Exhaustion (if required)									-	-
Legal Research/Prepare Responsive Pleading re: Exhaustion/Abeyance									-	-
Legal Research/Prepare Responsive Pleading re: Procedural Issues									-	-
Prepare Post Exhaustion Amended Petition									-	-
Prepare Case Management and Budget Plan for Phase III									-	-
Amend/Revise Phase II Budget (if necessary)									-	-
Other Legal Research (specify in dec.)									-	-
Other Activity (specify in declaration)									-	-
Totals	-	-	-	-	-	-	-	-	-	-

Total miscellaneous non-travel expenses incurred and/or anticipated for this phase (e.g. copying, postage, telephone/fax):

Proposed:

Authorized:

**EASTERN DISTRICT OF CALIFORNIA
PHASE III CASE MANAGEMENT AND BUDGET FORM**

(Include Costs Already Authorized and /or Incurred)
(Excludes Travel Time)

Case Number: _____
Case Name: _____
Lead Counsel: _____

Activities	Hours for Lead Counsel		Hours for Co-Counsel		Hours for Associate 1		Hours for Associate 2		Total Cost	
	Proposed	Approved	Proposed	Approved	Proposed	Approved	Proposed	Approved	Proposed	Approved
Meet & Confer with AG									-	-
Attend Case Management Conference(s)									-	-
Correspond/Consult with Client									-	-
Consult with Investigator(s) &/or Expert(s)									-	-
Consult with Co-Counsel									-	-
Consult with Resource Counsel & Staff									-	-
Legal Research/Prepare Merits Brief and Response									-	-
Legal Research/Prepare Motion for Evidentiary Hearing and Response									-	-
Legal Research/Prepare Discovery Motion									-	-
Oral Argument on Motions, if Required									-	-
Prepare for and Conduct Preliminary Discovery (if Granted)									-	-
Prepare Post-Judgment Motions, Including COA									-	-
Prepare Case Mgmt and Budget Plan-Phase IV									-	-
Amend/Revise Phase III Budget (if necessary)									-	-
Other Legal Research (specify in dec.)									-	-
Other Activity (specify in declaration)									-	-
	-	-	-	-	-	-	-	-	-	-

Total miscellaneous non-travel expenses incurred and/or anticipated for this phase (e.g. copying, postage, telephone/fax):

Proposed:

Authorized:

**EASTERN DISTRICT OF CALIFORNIA
PHASE IV CASE MANAGEMENT AND BUDGET FORM**

(Include Costs Already Authorized and /or Incurred)
(Excludes Travel Time)

Case Number: _____
Case Name: _____
Lead Counsel: _____

Activities	Hours for Lead Counsel		Hours for Co-Counsel		Hours for Associate 1		Hours for Associate 2		Total Cost	
	Proposed	Approved	Proposed	Approved	Proposed	Approved	Proposed	Approved	Proposed	Approved
Attend Case Management Conference(s)									-	-
Correspond/Consult with Client									-	-
Consult with Co-Counsel									-	-
Consult with Resource Counsel and Staff									-	-
Legal Research/Prepare Merits Brief and Response									-	-
Legal Research/Prepare Pre-Hearing Pleadings and/or Non-Discovery Motions									-	-
Legal Research/Prepare Discovery Motion(s)									-	-
Prepare for / Conduct Discovery									-	-
Hearing Prep., Including Consultation with Investigators & Experts and Witness Prep.									-	-
Evidentiary Hearing, Including Pre- and Post- Hearing Oral Arguments									-	-
Prepare Post-Hearing Pleadings/Briefs, if any									-	-
Legal Research/Prepare Post Judgment Motions (include Request for COA)									-	-
Amend/Revise Phase IV Budget (if necessary)									-	-
Other Legal Research (specify in dec.)									-	-
Other Activity (specify in declaration)									-	-
	-	-	-	-	-	-	-	-	-	-

Total miscellaneous non-travel expenses incurred and/or anticipated for this phase (e.g. copying, postage, telephone/fax)

Proposed:

Authorized: