STATE O	F NOF	RTH CAROLI	INA In The Genera	I Court Of Justice	File No.				
		Cou		Court Division	Additional File No.(s)				
Check Here If This Fee Application Covers Multiple Convictions									
Name And Address C	Of Indigent, J	uvenile, Or Dependent Ac	dult	NON-CAPITAL CRIMINAL OR NON-CRIMINAL APPEALS FEE APPLICATION ORDER FOR PAYMENT JUDGMENT AGAINST INDIGENT OR PARENT/GUARDIAN					
				G.S. Ch. 7A, Art. 36; G.S. 122C-268(d), -286(d)					
Indigent Person's Full Social Security No Only Complete If Judgment For Fees Has Been Entered (required by G.S. 7A-455(d))									
Responsible Person's	Full Social	Security No <b>Only Com</b> p	plete If Judgment For Fees I	Has Been Entered (required	l by G.S. 7A-455(d))				
	-		Has No Social S	ecurity No. Un	nable to obtain Social Security No. despite reasonable efforts				
fees has been ente expressly required	ered under I by law and	G.S. 7Å-450.1 - 450.3 d therefore exempt froi	3 or 7A-455 (or certify that	the SSN cànnot be obtai ments in G.S. 132-1.10(d	rty against whom a judgment for attorney's or GAL's ined with reasonable efforts). These SSNs are ). When filing electronically, select the "Public Not				
NOTE: DO NOT use this form for capital cases or for non-capital criminal or non-criminal cases at the trial level.  INSTRUCTIONS: Applicant completes and signs Section I, and mails to: Office of Indigent Defense Services, 123 W. Main St., Suite 400, Durham, NC 27701. If this is an application for interim payment, the IDS Office will complete Section II and forward a copy of this form to the IDS Financial Services Office for payment. If this is an application for final payment, the IDS Office will complete Sections II and III, and forward the original form to the trial judge, and copies of the form to the defendant or respondent and the IDS Financial Services Office for payment. The trial judge then completes Sections IV and V. The Clerk dockets the judgment.									
			I. APPL	ICATION					
I, the undersigned assigned counsel public defender appellate defender IDS contract counsel, make application for payment and reimbursement of necessary expenses incurred, or for determination of value of services rendered for the indigent. I certify that this information is correct to the best of my knowledge.  NATURE OF MOST SERIOUS CONVICTION OR PROCEEDING THAT WAS APPEALED: (check all that apply)									
NATORE OF MICE				•	1				
Criminal Trial; or Guilty Plea Felony (most serious conviction): Class: Name Of Offense:			Juvenile  Delinquency  Class Of Offense:  Abuse/Neglect/Dependency (Parent or Custodian)		Special Proceedings  Incompetency Involuntary Commitment Other				
Misdemeanor (most serious conviction):  Name Of Offense:			☐ Termination Of Parental Rights  (Parent or Custodian) ☐ A/N/D or TPR  (Guardian Ad Litem for Parent or Custodian)		Court  Court of Appeals Supreme Court				
	Beginning Date <u>This</u> Fee Request		Ending Date <u>This</u> Fee Request		Prior Total Fees And Expenses Allowed				
COMPLETE FOR THIS FEE:	This Fee Application Is:		Check here to indicate you have attached detailed time sheets. See Sec. 10.1 of S.L. 2020-83. (Time must be reported in decimals, not minutes.)		\$   Total Time Claimed <u>This</u> Fee				
	Travel \$		Copying \$	Other \$	Total Expenses				
COMPLETE IF THIS IS A	Name Of Presiding Judge At The Trial Level  Date Of Last Appellate Ruling								
FINAL FEE:	Result On Appeal No Error/Affirmed Reversed And Remanded			viction Vacated New Trial Appeal Withdrawn v Sentencing Hearing Other:					
Payee. If payment North Carolina Sub	is to be ma estitute W-9	nde to applicant's firm, I Form on file with IDS	, give firm name as Payee.	Per United States tax la 2448, Raleigh, NC 27602	made to individual applicant, write "same" under w and State policy, the Payee must have a State of 2. See www.osc.nc.gov/state-north-carolina-sub-w-9. ckup withholding tax.				
Name Of Applicant			Applicant Bar No.	Address					
Payee (see Note)			'	1					
Telephone No.		Email Address		Date	Signature Of Applicant				



II. AWARD OF PAYMENT OR DETERMINATION OF VALUE OF SERVICES										
The IDS Director FINDS that the "Total Amount" stated on Line 3 below be:										
(Assigned Counsel/GAL) paid by the State of North Carolina to the payee named above.										
(Public Defender/Appellate Defender/IDS Contractor) fixed as the value of legal services and other expenses of representation rendered by the applicant named above. 1. Fees Allowed/Value Of Services Rendered \$										
The standard of the stand			ar.	\$						
3. TOTAL AMOUNT		THE IDS DIFECTO	Л	\$						
Date	IDS Director			Signature Of IDS Director						
	*** 01114 05	Mary S. P		DV//OF FFEO AND EVENING	) = 0					
III. SUM OF ATTORNEY AND SUPPORT SERVICE FEES AND EXPENSES										
NOTE: The Office of Indigent Defense Services completes this section.										
A. Attorney Fees And Necessary Expenses:										
SUBTOTAL A (sum of all attorney fees and expenses paid to this attorney, on this and all prior applications)										
B. Support Services	-									
SUBTOTAL B (su	m of all amounts incl	ırred througho	ut the appeal)		\$					
GRAND TOTAL A + B (attorney fees and expenses, plus support services)										
			IDINGS OF FACT AN		, , ,					
After written notice to	the indigent name				named below, and					
After written notice to the indigent named on the reverse or service of a summons on the responsible person named below, and opportunity to be heard, the Court finds that the indigent, juvenile, or dependent adult named on the reverse has previously been										
	•	,		er, remains dependent on and d	. ,					
				and other necessary expenses						
• •	•		•	s of which the money value is th						
	nent against indigent, ult, check Option "B" (		_	enter judgment against parent, guar	dian, or trustee or juvenile or					
· ·			unt greater than the Total ar	mount in Section III above.						
				n entered adjudicating the juver	ile to be abused neglected					
				rights of one or both of the juve						
respondent has	s been held in crim	inal contemp	t, or that a judgment of c	onviction has been entered aga	inst the indigent, and all					
				manded. If the juvenile has bee						
				Court further finds that the respo						
pay the fees and expenses set out on the reverse and should therefore be held responsible for reimbursing the State for the same. Based on all of the above findings, it is ORDERED that the State of North Carolina recover from the indigent the amount stated										
	-		om the date the judgmer		angoni ino amouni olalou					
B. (Order For Paym	ent Bv Responsible	Person and Ju	dament) The Court further	finds that an order has been e	ntered adjudicating the					
				ered against the dependent adu						
				Court further finds that the respo						
				d is financially able to pay the fe						
				ne State for the same. Based on mount stated in Section III abov						
Clerk of Superior Court. If that amount is not paid in full at the time of disposition of the appeal, the State of North Carolina shall recover from the responsible person the amount stated in Section III above, together with interest at the legal rate from the date the										
judgment is do	cketed until paid.									
Name And Address Of Responsible Person										
V. SIGNATURE OF JUDGE										
The foregoing AWAF	RD OF PAYMENT ( tered and filed this	OR DETERN day in the of	IINATION OF VALUE OF fice of the Clerk of Supe	F SERVICES, as made by the Drior Court. The FINDINGS and .	irector of Indigent Defense					
shall be entered and	filed this day in the	office of the	Clerk of Superior Court.	The Judgment shall become ef	fective as provided by law.					
Date	Name Of Judge (typ	e or print)		Signature Of Judge						
		VI.	DOCKETING - CSC I	JSE ONLY						
NOTE: Docket any judgments immediately on the date on which the defendant's conviction becomes final, unless the defendant is ordered as a										
condition of supervised or unsupervised probation to pay the State for the costs of his/her representation. If the defendant is so ordered, docket any judgments immediately on the date the defendant's probation is revoked or terminated by the Court, or when the term of probation expires, whichever occurs first; then docket the amounts owed.										
Date Wnichever occ	Time	ure amounts 0	Judgment Abstract No.		Amount Docketed					
		AM PM			\$					