

Expert Services Detailed Budget Worksheet for Non-capital Representations with the Potential for Extraordinary Cost

This detailed budget worksheet is for use by counsel in preparing the summary of anticipated expert services for representations that “appear likely to become or have become extraordinary in terms of potential cost” as set forth in subparagraph 2.22B(4) of the Guidelines for the Administration of the Criminal Justice Act and Related Statutes, Volume VII, *Guide to Judiciary Policies and Procedures*. The figure at the end of each section should be transferred to the summary budget worksheet for submission to the court. (In some instances, the court may request the detailed worksheet as well as the summary.) The document automatically totals hours and dollar amounts.

Date: _____

Case Name: _____

Case Number: _____

Expert’s Name: _____

Type of Expert: _____

Hourly Rate: _____

| I. Discovery/Document Review | Hours |
|--|--------------|
| A. Medical/Psychological/Social History Records (_____ pages): | _____ |
| B. Offense Reports (_____ pages): | _____ |
| C. Videotapes: | _____ |
| D. Audiotapes: | _____ |
| E. Other (specify): _____ | _____ |

Subtotal Hours: _____

| II. Meetings with Defendant for Interviews and Testing | Hours |
|---|--------------|
| A. Estimated number of meetings for interviews and testing: _____ | _____ |

B. Estimated hours of consultation (including time spent entering and leaving detention facility, but *excluding* expert travel time): _____

C. Travel time to/from defendant (see IX.A and B below for estimated travel costs)

1. Is client held in a remote facility or on bond out of the district (Y or N)? _____

2. If yes above, what is one-way travel time to defendant? _____

3. Total estimated hours of travel time to defendant (estimated number of trips multiplied by round-trip travel time): _____

Subtotal Hours: _____

III. Meetings with Members of “Defense Team” **Hours**
(i.e., attorneys, investigators, paralegals, and/or other defense experts)

A. Estimated number of meetings : _____

B. Estimated hours for meetings: _____

C. Travel time to/from meetings (see IX.A and B below for estimated travel costs)

1. Is out of district travel required (Y or N)? _____

2. If yes, what is one-way travel time? _____

3. Total estimated hours of travel time (estimated number of trips multiplied by round-trip travel time): _____

Subtotal Hours: _____

IV. Meetings and Interviews with Witnesses **Hours**
(including members of defendant’s family)

A. Estimated number of meetings : _____

B. Estimated hours for meetings: _____

C. Travel time to/from meetings (see IX.A and B below for estimated travel costs)

1. Is out of district travel required (Y or N)? _____

2. Total estimated hours of travel time: _____

Subtotal Hours: _____

V. Examination of Crime Scene(s) And/or Physical Evidence **Hours**
(including physical/scientific testing of evidence)

A. Estimated number of trips: _____

B. Time spent at crime scene and/or with physical evidence: _____

C. Lab time: _____

D. Travel time (see IX.A and B below for estimated travel costs)

1. Is out of district travel required (Y or N)? _____

2. Total estimated hours of travel time: _____

Subtotal Hours: _____

VI. Report Writing **Hours**
(including review of literature)

A. Type of Report: _____

Hours: _____

B. Type of Report: _____

Hours: _____

C. Type of Report: _____

Hours: _____

Subtotal Hours: _____

VII. Hearing and/or Trial Testimony **Hours**

A. Type of Proceeding: _____

1. Exhibit preparation: _____

- 2. Testimony (including cross-examination): _____
- 3. Other in-court time (e.g., observation of testimony, waiting): _____
- 4. Travel time: _____
- B. Type of Proceeding: _____
 - 1. Exhibit preparation: _____
 - 2. Testimony (including cross-examination): _____
 - 3. Other in-court time (e.g., observation of testimony, waiting): _____
 - 4. Travel time: _____
- C. Type of Proceeding: _____
 - 1. Exhibit preparation: _____
 - 2. Testimony (including cross-examination): _____
 - 3. Other in-court time (e.g., observation of testimony, waiting): _____
 - 4. Travel time: _____

Subtotal Hours: _____

VIII. Meetings with Prosecuting Attorneys, Case Agents, and Government Experts **Hours**
(including depositions)

- A. Estimated number of meetings: _____
- B. Estimated hours for meetings: _____
- C. Travel time to/from meetings (see IX.A and B below for estimated travel costs)
 - 1. Is out of district travel required (Y or N)? _____
 - 2. Total estimated hours of travel time: _____

Subtotal Hours: _____

Grand Total Hours:

IX. Travel Costs

Dollars

A. Local Travel

POV mileage rate: _____

1. Trips to meet with defendant

a. Number of trips: _____

b. Miles per round-trip: _____

c. Estimated cost of travel: _____

2. Trips to meet with defense counsel
(note: do not double count meetings that include both defense counsel and defendant)

a. Number of trips: _____

b. Estimated cost of travel: _____

3. Trips to view evidence, to crime scene(s), and to meet with prosecutors and case agents

a. Number of trips: _____

b. Estimated cost of travel: _____

4. Trips to confer with witnesses
(including other experts)

a. Number of trips: _____

b. Estimated cost of travel: _____

5. Trips to court

a. Number of trips: _____

b. Estimated cost of travel: _____

B. Travel Requiring Air/Train Transportation, Rental Vehicle and/or Overnight Stay
(using government travel rates and per diems for purpose of estimate)

1. Meet with defendant

a. Location: _____

- b. Number of trips: _____
- c. Estimated cost of travel: _____
- 2. Trips to meet with defense counsel
(note: do not double count meetings that include both defense counsel and defendant)
 - a. Location: _____
 - b. Number of trips: _____
 - c. Estimated cost of travel: _____
- 3. Trips to view evidence, to crime scene(s), and to meet with prosecutors and case agents
 - a. Location(s): _____
 - b. Number of trips: _____
 - c. Estimated cost of travel: _____
- 4. Trips to meet with lay witnesses
 - a. Name of witness: _____
Location: _____
Number of trips: _____
Estimated cost of travel: _____
 - b. Name of witness: _____
Location: _____
Number of trips: _____
Estimated cost of travel: _____
 - c. Name of witness: _____
Location: _____
Number of trips: _____
Estimated cost of travel: _____
 - d. Name of witness: _____
Location: _____
Number of trips: _____
Estimated cost of travel: _____

e. Name of witness: _____
Location: _____
Number of trips: _____
Estimated cost of travel: _____

f. Name of witness: _____
Location: _____
Number of trips: _____
Estimated cost of travel: _____

5. Trips to confer with other expert witnesses

a. Name and Type of Expert: _____
Location: _____
Number of trips: _____
Estimated cost of travel: _____

b. Name and Type of Expert: _____
Location: _____
Number of trips: _____
Estimated cost of travel: _____

c. Name and Type of Expert: _____
Location: _____
Number of trips: _____
Estimated cost of travel: _____

d. Name and Type of Expert: _____
Location: _____
Number of trips: _____
Estimated cost of travel: _____

e. Name and Type of Expert: _____
Location: _____
Number of trips: _____

Estimated cost of travel: _____

Total Travel Costs:

X. Other Miscellaneous Costs and Expense

Dollars

A. Type: _____

Amount: _____

B. Type: _____

Amount: _____

C. Type: _____

Amount: _____

Total Miscellaneous Costs and Expenses

Approved Case Budget for Expert

Expert Time

Hourly Rate: _____

Hours: _____

Fees Approved (hours multiplied by hourly rate): _____

Travel Costs: _____

Other Miscellaneous Costs and Expenses: _____

Grand Total Budget for Expert: