

1. CIR./DIST./DIV. CODE
FLM

2. PERSON REPRESENTED
Ballut, Ghassan Zayed

3. MAG. DKT./DEF. NUMBER

4. DIST. DKT./DEF. NUMBER
8:03-00077-007

5. APPEALS DKT./DEF. NUMBER

6. OTHER DKT. NUMBER

7. IN CASE/MATTER OF (Case Name)
U.S. v. Ballut

8. PAYMENT CATEGORY
Felony

9. TYPE PERSON REPRESENTED
Adult Defendant

10. REPRESENTATION TYPE (See Instructions)
Criminal Case

VOUCHER NUMBER
ITPA 2003-2130-06

FILED

COURT OF APPEALS
FLORIDA

11. 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.
1) 18 1962-3300.F -- RICO - INTERSTATE COMMERCE

12. ATTORNEY'S NAME (First Name, M.I., Last Name, including any suffix) AND MAILING ADDRESS
Howie, Bruce G.
5720 Central Avenue
St. Petersburg FL 33707

13. COURT ORDER
 O Appointing Counsel
 F Sube For Federal Defender
 F Sube For Panel Attorney
 C Co-Counsel
 R Sube For Retained Attorney
 Y Standby Counsel

Prior Attorney's Name: _____
 Appointment Date: _____

A PAYMENT RECORD

Telephone Number: (727) 344-1111

14. NAME AND MAILING ADDRESS OF LAW FIRM (only provide instructions) or
 Other (See Instructions)
 Piper, Ludin, Howie and Werner
 5720 Central Avenue
 St. Petersburg FL 33707

Signature of Presiding Judicial Officer or By Order of the Court
 Date of Order: 03/10/2003
 Numc Pro Tunc Date: _____

Repayment or partial repayment ordered from the person represented for this service at time of appointment. YES NO

DATE BY
 ENTERED 2-20-04
 VERIFIED 2-20-04

CATEGORIES (Attach itemization of services with dates)	HOURS CLAIMED	TOTAL AMOUNT CLAIMED	MATH/TECH ADJUSTED HOURS	MATH/TECH ADJUSTED AMOUNT	ADDITIONAL REVIEW
15. a. Arraignment and/or Plea	---				
b. Bail and Detention Hearings	---				
c. Motion Hearings	---				
d. Trial	---		0.6 x 2/3		
e. Sentencing Hearings	---		=		
f. Revocation Hearings	---				
g. Appeals Court	---				
h. Other (Specify on additional sheets)	.40				WH
(Rate per hour = \$ 90.00) TOTALS:	.40	36.00	0.3	27.00	9.00
16. a. Interviews and Conferences	4.60				
b. Obtaining and reviewing records	2.7				
c. Legal research and brief writing	0.1		11.3 x 2/3		
d. Travel time	2.40				
e. Investigative and Other work (Specify on additional sheets)	4.5				WH
(Rate per hour = \$ 90.00) TOTALS:	11.30	1,017.00	7.5	675.00	342.00
17. Travel Expenses (lodging, parking, meals, mileage, etc.)		41.27		41.27	
18. Other Expenses (other than expert, transcripts, etc.)		13.65		13.65	
TOTALS CLAIMED OR ADJUSTED:		1,107.92		756.92	

19. CERTIFICATION OF ATTORNEY/PAYEE FOR THE PERIOD OF SERVICE FROM 12/1/03 TO 12/31/03

20. APPOINTMENT TERMINATION DATE IF OTHER THAN CASE COMPLETION

21. CASE DISPOSITION

22. CLAIM STATUS Final Payment Interim Payment Number 06 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, have you, or 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: Bruce G. Howie Date: January 15, 2004

APPROVED FOR PAYMENT - COURT USE ONLY

23. IN COURT COMP. 36.00	24. OUT OF COURT COMP. 1077.00	25. TRAVEL EXPENSES 41.27	26. OTHER EXPENSES 13.65	27. TOTAL AMT. APPR / CERT 1107.92 - 351
28. SIGNATURE OF THE PRESIDING JUDICIAL OFFICER <i>[Signature]</i>			DATE 11 Feb. 04	28a. JUDGE / MAG. JUDGE CODE 3A30
29. IN COURT COMP.	30. OUT OF COURT COMP.	31. TRAVEL EXPENSES	32. OTHER EXPENSES	33. TOTAL AMT. APPROVED 756.92
34. SIGNATURE OF CHIEF JUDGE, COURT OF APPEALS (OR DELEGATE) Payment approved in excess of the statutory threshold amount.			DATE	34a. JUDGE CODE

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