

1 CIR./DIST./DIV CODE  
FLM

2 PERSON REPRESENTED  
Ballut, Ghassan Zayed

VOUCHER NUMBER  
T.PA.2103-286-09

3. MAG. DKT./DEF. NUMBER

4. DIST. DKT./DEF. NUMBER  
8:03-000077-007

5. APPEALS DKT./DEF. NUMBER

6. OTHER DKT. NUMBER

7. IN CASE/MATTER OF (Case Name)  
USA v Al-Arian, et al

8. PAYMENT CATEGORY  
Felony

9. TYPE PERSON REPRESENTED  
Adult Defendant

10. REPRESENTATION TYPE  
(See Instructions)  
Criminal Case

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

REQUEST AND AUTHORIZATION FOR EXPERT SERVICES

12. ATTORNEY'S STATEMENT

As the attorney for the person represented who is named above, I hereby affirm that the services requested are necessary for adequate representation. I hereby request:

- Authorization to obtain the service. Estimated Compensation: \$ \_\_\_\_\_ OR
- Approval of services already obtained to be paid for by the United States from the Defender Services Appropriation. (Note: Prior authorization should be obtained for services in excess of \$300)

Signature of Attorney: *Bruce R. Howe* **Bruce Howe** 3/31/2004  
Date

Panel Attorney  Retained Atty  Pro-Se  Legal Organization

Attorney's name (First name, Middle initial, Last name, including "Jr.") and mailing address:  
5700 Central Avenue  
St. Petersburg, Florida 33707

Telephone Number: 727-344-1111

13. DESCRIPTION OF AND JUSTIFICATION FOR SERVICES (See instructions)

Paralegal services

14. TYPE OF SERVICE PROVIDER

- 01  Investigator
  - 02  Interpreter/Translator
  - 03  Psychologist
  - 04  Psychiatrist
  - 05  Polygraph Examiner
  - 06  Documents Examiner
  - 07  Fingerprint Analyst
  - 08  Accountant
  - 09  CALR (Westlaw/ Lexis, etc)
  - 10  Chemist/Toxicologist
  - 11  Ballistics Expert
  - 13  Weapons/Firearms/Explosive Expert
  - 14  Pathologist/Medical Examiner
  - 15  Other Medical Expert
  - 16  Voice/Audio Analyst
  - 17  Hair/Fiber Expert
  - 18  Computer (Hardware/Software/Systems)
  - 19  Paralegal Services
  - 20  Legal Analyst/Consultant
  - 21  Jury Consultant
  - 22  Witness Specialist
  - 23  Subpoena Service (Public Records)
  - 24  Other (specify)
- DATE: 4-7-4 BY: *JK*  
DATE: 4-15-4 BY: *JK*  
DATE: 4-15-4 BY: *JK*

15. Court Order

Financial eligibility of the person represented having been established to the court's satisfaction, the authorization requested in Item 12 is hereby granted

by order (#207) by *JSM jo*  
Signature of Presiding Judicial Officer or By Order of the Court  
7-2-3

Date of Order: \_\_\_\_\_ Nunc Pro Tunc Date: \_\_\_\_\_  
Repayment or partial repayment ordered from the person represented for this service at time of authorization:  
 YES  NO

CLAIM FOR SERVICES AND EXPENSES

FOR COURT USE ONLY

16. SERVICES AND EXPENSES (Attach itemization of services and expenses with dates)	AMOUNT CLAIMED	MATH/TECHNICAL ADJUSTED AMOUNT	33. ADDITIONAL REVIEW
a Compensation 49.8 / 60.30 @ 25	1507.50	1245.00 (x43) =	830.00
b Travel Expenses (lodging, parking, meals, mileage, etc)	9.62	9.62	9.62
c Other Expenses	9.62	9.62	9.62
<b>GRAND TOTALS (CLAIMED AND ADJUSTED)</b>	<b>1517.12</b>	<b>1254.62</b>	<b>839.62</b>

17. PAYEE'S NAME (First Name, MI, Last Name, including any suffix) and MAILING ADDRESS

Brooke V. ENington  
1743 Audrey Dr.  
Clearwater, FL 33759

TIN: on file  
Telephone Number: 727-723-1749

CLAIMANT'S CERTIFICATION FOR PERIOD OF SERVICE FROM 3/1/04 TO 3/31/04  
CLAIM STATUS:  Final  Interim Payment Number \_\_\_\_\_  
I hereby certify that the above claim for services rendered is correct, and that I have not sought or received payment (compensation or anything of value) from any other source for these services

Signature of Claimant/Payee: *[Signature]* Date: 3/31/04

18. CERTIFICATION OF ATTORNEY: I hereby certify that the services were rendered for this case

Signature of Attorney: *Bruce R. Howe* Date: 3/31/04

APPROVED FOR PAYMENT - COURT USE ONLY

19. TOTAL COMPENSATION	20. TRAVEL EXPENSES	21. OTHER EXPENSES	22. TOT. AMT APPROVED/CERTIFIED
1245.00	(-415 w/4)	9.62	839.62

23.  Either the cost (excluding expenses) of these services does not exceed \$300, or prior authorization was obtained  
 Prior authorization was not obtained, but in the interest of justice the court finds that timely procurement of these necessary services could not await prior authorization, even though the cost (excluding expenses) exceeds \$300

Signature of Presiding Judicial Officer: *[Signature]* Date: 12 April 04  
Judge/Mag Judge Code: 3A30

24. TOTAL COMPENSATION	25. TRAVEL EXPENSES	26. OTHER EXPENSES	27. TOTAL AMOUNT APPROVED
1245.00	(-415 w/4)	9.62	839.62

28. PAYMENT APPROVED IN EXCESS OF THE STATUTORY THRESHOLD UNDER 18 U.S.C. 3006A(e)(3)

Signature of Chief Judge, Court of Appeals (or Delegate)

Date

Judge Code

FILE COPY

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FILED  
 2004 APR 19 PM 3:4  
 CLERK U.S. DISTRICT COURT  
 TAMPA, FLORIDA