

1. CIR./DIST./DIV. CODE FLM	2. PERSON REPRESENTED Ballut, Ghassan Zayed	VOUCHER NUMBER TPA 2003-213-10	
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) U.S. v. Ballut	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

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 Subs For Federal Defender
 P Subs For Panel Attorney
 C Co-Counsel
 R Subs For Retained Attorney
 Y Standby Counsel

CJA PAYMENT RECORD

DATE BY
 Telephone Number: (727) 344-1111
 14. NAME AND MAILING ADDRESS OF LAWYER (only provide partial address)
 Piper, Ludin, Howie and Werner
 5720 Central Avenue
 St. Petersburg FL 33707
 VERIFIED 6-18-4

Prior Attorney's Name: _____
 Appointment Date: _____
 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 require, the attorney whose name appears in Item 12 is appointed to represent this person in this case.
 Other (See Instructions)
 Signature of Presiding Judicial Officer or By Order of the Court
 Date of Order: 03/10/2003
 Name Pro Tunc Date: _____
 Reimbursement or partial reimbursement ordered from the person represented for this service at time of appointment. YES NO

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	---				
e. Sentencing Hearings	---				
f. Revocation Hearings	---				
g. Appeals Court	---				
h. Other (Specify on additional sheets)	---				
(Rate per hour = \$ 90.00) TOTALS:	0.00	0.00			
16. a. Interviews and Conferences	4.5				
b. Obtaining and reviewing records	0.9				
c. Legal research and brief writing	4.3				
d. Travel time	---				
e. Investigative and Other work (Specify on additional sheets)	1.3				
(Rate per hour = \$ 90.00) TOTALS:	11.00	990.00	7.4	666.00	324.00
17. Travel Expenses (lodging, parking, meals, mileage, etc.)		---			
18. Other Expenses (other than expert, transcripts, etc.)		224.32		224.32	
		1,214.32		890.32	

19. CERTIFICATION OF ATTORNEY/PAYEE FOR THE PERIOD OF SERVICE FROM 4/1/04 TO 4/30/04
 20. APPOINTMENT TERMINATION DATE IF OTHER THAN CASE COMPLETION
 21. CASE DISPOSITION

22. CLAIM STATUS Final Payment Interim Payment Number 10 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: May 10, 2004

23. IN COURT COMP.	24. OUT OF COURT COMP. 990.00	25. TRAVEL EXPENSES (-324.00)	26. OTHER EXPENSES 224.32	27. TOTAL AMT. APPR / CERT 890.32
28. SIGNATURE OF THE PRESIDING JUDICIAL OFFICER <i>Jim J. M...</i>	DATE 10 June 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
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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