

ASSIGNED COUNSEL HANDBOOK



TIOGA COUNTY, NEW YORK

INTRODUCTION AND MISSION

The Tioga County Assigned Counsel Program in Tioga County, NY is a county sponsored agency. The mission of the Assigned Counsel Program (ACP) is to ensure the provision of professional, skilled, ethical and client-centered legal representation to indigent clients in County Court, Family Court and the local municipal courts in Tioga County as covered under the provisions of County Law Section 722.

The ACP receives grant funding from New York State Indigent Legal Services (ILS) for criminal court matters through the statewide *Hurrell-Harring* settlement funds.

Criminal Defense ACP panel attorneys are strongly encouraged to engage the services of non-attorney support professionals, such as investigators, experts, mitigation specialists, interpreters, transcriptionists and others, whenever needed to provide full and adequate criminal representation of a client. Prior to *Hurrell-Harring* implementation, ACP attorneys were required to obtain pre-approval from the judge for all non-attorney professional supports. With funding under the ILS Quality Improvement and Caseload contracts, attorneys can now directly apply for and obtain approval from the ACP administrator to retain these services, provided there is sufficient grant funding available in a given grant cycle.

The ACP provides a Resource Center for ACP panel attorneys located in the Court Annex Building on Court Street across from the main Courthouse in Owego, NY. The space is utilized by assigned counsel to meet with clients and to work between court assigned appearances. The Resource Center provides a Westlaw portal to be used only by ACP panel attorneys for assigned case research.

ACP protocols for ACP panel eligibility, all support services, use of the Resource Center and vouchering for payment of legal services are fully set forth in this handbook for further reference.

CRITERIA FOR PANEL MEMBERSHIP

Attorneys wishing to be considered for the Tioga County ACP panel must be admitted and licensed with the NYS Bar and in good standing with the NYS Office of Professional Standards. The county court judge approves all requests for panel attorneys to be added to the Tioga County assigned counsel list. Attorneys must submit the request in writing to the court and submit a brief resume outlining court experience and availability to accept assignments on short notice at times. The county and family court judges and justices of the local municipal courts make all assignments under the Assigned Counsel Program.

PANEL ATTORNEY CASE ASSIGNMENTS

Upon approval by the county court to be added to the ACP assigned counsel list under the 18-b program, please notify the Assigned Counsel Office and indicate what cases you are willing to accept (i.e. both family and criminal court cases; just criminal court cases; just family court cases; appeals only). It would also be helpful if you note that you are particularly specialized in certain types of cases (i.e. felony level, abuse, neglect, custody matters). Also indicate your availability to be considered as second chair for criminal felony level trials and mentors for assigned attorneys with fewer years of litigation experience. The Assigned Counsel Office provides updated assigned counsel lists to the courts as needed and includes the information you provide.

NON-ATTORNEY PROFESSIONAL SERVICES AND ATTORNEY SUPPORT

Currently the NYS ILS Office has provided Tioga County ACP with grant funding to provide panel attorneys with assistance in **criminal cases only** under the class action settlement provisions known as the *Hurrell – Haring* Settlement. The support services are limited to a first come first serve basis due to funding availability. At this time, the Assigned Counsel Office can offer assistance to ACP panel criminal attorneys to include expert witnesses, investigators, mitigation specialists, interpreters, counseling evaluators (not on-going treatment providers). These professional services do NOT require prior court approval but does require the panel attorney to contact the Assigned Counsel Office to make sure there is sufficient funding to cover all or part of the professional service being requested and to fill out a request for services form. Once the panel attorney is able to give the ACP Office an estimate of cost for the professional service and it is determined there is funding to cover the service, the panel attorney need only submit an invoice from the professional service provider to the ACP Office for payment directly to the provider. Again, no court approval is necessary to affect the service; thus, making the service more readily available to the indigent client.

ATTORNEY SUPPORT

CONSULTATION – New York State Office of Indigent Legal Services offers case consultation services for panel attorneys. To obtain consultation assistance, the intake form for SASC consultation:

<https://nysils.questionpro.com/a/TakeSurvey?tt=QaQQCBMLG80EChrPeIW9eQ%3D%3D>

CLE/TRAININGS – Funds are available to pay panel attorneys to attend CLE's and training on criminal justice issues in New York State. The covered costs are for attending programs. Accommodations and meals are not included.

MENTORING – Funds are available for more experienced attorneys to mentor the less experienced, junior panel attorneys on difficult felony level cases. A list of Mentoring Attorneys is maintained by the ACP Office and staff will assign the mentor accordingly.

SECOND CHAIR PROGRAM – Funds are available to compensate more experienced panel attorneys who second chair other panel attorneys on felony criminal cases that are going to trial. It also covers funds to compensate junior attorneys who second chair cases with more experienced attorneys. A list of Second Chair Attorneys is maintained by the Assigned Counsel Office and staff will assign the second chair attorney accordingly.

[Application for Expert Services](#)

[Application for Interpreter Services](#)

[Application for Investigative Services](#)

[Application for Transcript Services](#)

[Request for Mentor](#)

[Request for Second Chair](#)

[Request for CLE Registration Reimbursement](#)

ASSIGNED COUNSEL RESOURCE CENTER

The Resource Center for ACP panel attorneys is in the basement level of the Court Annex Building on Court Street across from the main Courthouse in Owego, NY. Entry is through the Court Annex doors and all individuals are required to pass through the security check.

Hours: 8:30A-4:30P. There will be no access to the Resource Center before or after these hours. Attorneys must plan their meeting times with clients accordingly and plan to finish meetings at 4:15P.

No clients will be allowed to access the Resource Center until accompanied by their assigned attorney. Please arrive on time for client appointments.

Restrooms are available on the main floor of the annex.

There is a carry in/carry out policy for all trash. Please ensure no food items are left in any area of the center, and no food or drink is allowed on or around the research station. Please do not allow clients to bring in food or drinks.

The Westlaw research portal is for use by the assigned counsel panel members only for assigned case research. There will be access to all NYS consolidated laws and regulations on the portal. An alert will be displayed on the screen if your search goes beyond the subscription. If an attorney goes outside of the allowed subscription, the charge for that research time will be deducted from the attorney's voucher.

COMPENSATION AND BILLING

Preparation of Vouchers

Filing of E-vouchers for compensation is **required**. To receive compensation for legal services to a client, a panel attorney must have access to the Internet and an e-mail address. To obtain access to the e-voucher system known as **Intellinx** you must register online. Upon request to this office, you will be provided a user name and password from the ACP Office staff by emailing yuricekj@tiogacountyny.gov; or carriggs@tiogacountyny.gov or calling (607) 687-8271. For more explicit instructions on how to use the e-voucher system please refer to the tutorial on the online e-voucher site once you access it. The ACP staff will also be available to offer assistance if necessary. Please contact us via e-mail and please note the staff is only part-time. We strive to be as responsive as possible.

The Assigned Counsel compensation rate is \$158.00/hour for:

Felonies

Misdemeanors

Appeals (felonies, misdemeanors, violations)

Family Court representation

For reporting purposes for criminal cases in the e-voucher system, the case should be noted as a felony if that was originally charged in the lower court. If the case is later resolved as a misdemeanor, the case must still be reported as a felony because it opened as a felony.

(This clarifying information is from the NYS ILS Office under “Reporting Counts of Criminal Cases”).

There is not a different rate for in/out- of- court time.

In-Court Time

In-Court time is defined as:

*Time spent in the courtroom or before a Judge

*Attorney conferences or pre-trial conferences, whether scheduled with the Judge or with the Judge’s court attorney.

*Time spent waiting for a case to be called **beginning at the court scheduled time**. Waiting **before** the court scheduled time is **NOT** court time.

Out –of-Court Time

Out –of- Court time is billed for legal drafting and research, client contact, (i.e.in office, phone, text, before court, jail), investigation, court preparation, etc. Please follow the activity codes in the E-voucher system and keep the descriptive account of your work short and succinct. Try not to include any names. Keep identities generic (such as court personnel, attorneys/ parties to case, DA, ADA, DSS attorney, AFC, court attorney, judge). Please note that you cannot bill for clerical or paralegal time; work must be done by the panel attorney. **NOTE:** County Law Section 722-b defines OUT-OF-COURT as “time *reasonably* spent out-of-court”.

Time cannot be billed for preparing e-vouchers.

Disbursements

Disbursements incurred by the panel attorney that will be reimbursed include:

*Transcripts-Panel attorneys can be reimbursed upon receipt of an invoice from the court reporter or transcription service with the name of the case included.

*Mileage-Panel attorneys can be reimbursed if the attorney travels more than 3 miles from their office to the court. Mileage is charged at the Tioga County Legislative rates that are set annually. A memo will be sent to panel attorneys every year advising of the new mileage reimbursement rate. It will also be posted on the Assigned Counsel Program website. Please bill travel time and mileage as separate entries on the e-voucher system.

*Postage

*Photocopies at .15 per copy.

Tolls, parking fees (up to \$5.00 without receipts)

Statutory Limits

The statutory cap for all vouchers at the rate of 158.00/hr. is \$10,000.00.

Where the fees for a case exceed the above statutory limit, the panel attorney must submit an affidavit to the judge justifying the higher amount. The ACP Intellinx e-voucher system provides a link to attach the affidavit and will not allow the voucher to be submitted if an over cap affidavit is required. The judge will review the affidavit at the time of voucher submission and has the discretion to approve or disapprove the higher amount requested.

Once an e-voucher is submitted by the panel attorney through the e-voucher system, the ACP Office staff will review the e-voucher and either return to the panel attorney for changes or corrections or send it to the court. The court has final approval of all vouchers submitted for payment.

IMPORTANT-The assigned counsel staff can ask for clarification on e-vouchers and request changes. However, the county/family court judge and local municipal court justice gives FINAL approval to all e-vouchers and has the discretion to question entries, approve or disapprove entries or change, send back or deny e-vouchers.

When to Submit E-vouchers- PLEASE TAKE NOTE

ANNUAL BILLING REQUIRED-To comply with Tioga County's annual budgeting guidelines, an e-voucher for services to a client in a case, including all proceedings pending as to the client, **MUST** be submitted every 12 months from the date of the first assignment and every 12 months thereafter through the final disposition of the case. Attorneys should diary the files for billing 12 months from the date of assignment and submit an interim voucher if the case has not been finalized within the 12-month period. Interim vouchers should be submitted every 12 months thereafter or until the case reaches disposition. Counsel Office and courts may exercise its right to deny an e-voucher submitted outside this timeframe. Any late voucher can be denied, in full.

Any e-voucher can be submitted within the one-year timeframe if the case has reached disposition. Such submission is encouraged to avoid a backlog of voucher submissions at the end of the 12-month timeframe.

It is acknowledged that Appellate Division orders for payment of legal service and expenses on appeals are issued only once, following the decision. Appellate Division orders for payment of service must be submitted no later than 12 months from the date of the decision. The ACP Office will honor an interim order for payment on an appeal that has been pre-approved by the Appellate Division.

In addition to the enforcement of the above 12-month rule, the ACP Office will neither accept for payment nor pay any e-voucher if it is submitted three years or more after the last valid date of service on the e-voucher, barring extenuating circumstances.

IMMIGRATION SERVICES/RESOURCES

The Intellinx e-voucher system has specific questions related to a respondent/defendant's citizenship and immigration status. The questions include:

Did you or any member of the defense team ascertain the client's immigration status?

Is the client U.S. born?

Did you consult with an attorney experienced in immigration and criminal law?

Did you advise the client about any related immigration consequences?

Additional services can be provided to assigned counsel attorneys through:

Regional Immigration Assistance Center

109 S. Warren St., Suite 220

Syracuse, NY 13202

sames@ocbaacp.org

315-356-5794

The Director of the organization is Attorney Sharon L. Ames.

The ILS Resource Assistance Center link is

<https://nysils.questionpro.com/a/TakeSurvey?tt=QaQQCBMLG80EChrPeIW9eQ%3D%3D>

The contact person is:

Julia Shaw

Special Assistant for Mitigation, [Statewide Appellate Support Center](#)

New York State Office of Indigent Legal Services

80 S Swan St, 30th Floor, Albany, NY 12210 | www.ils.ny.gov

(518) 866-1559 julia.shaw@ils.ny.gov

NEW VENDOR REQUEST FORM

W-9 FORMS ARE NOT REQUIRED FOR THE FOLLOWING ENTITIES:

- ▶ ALL GOVERNMENTAL ENTITIES (LOCAL, COUNTY, STATE, & FEDERAL)
- ▶ SCHOOL DISTRICTS
- ▶ RESTAURANTS/FAST FOOD CHAINS/GROCERY STORES (PRODUCT PURCHASES ONLY)
- ▶ GAS/CONVENIENCE STORES (PRODUCT PURCHASES ONLY)

Department Requesting Vendor #: _____

Vendor Name: _____

Vendor Number: _____

☐ Purchase Order Vendor

☐ Purchasing Card Vendor

Check Payable to: _____

Please Check One:

☐ Mileage

☐ Contracting (please specify)

REQUIRED:

Hire/Service Start Date (per contract)

MM/DD/YR

☐ Professional Services

(DO NOT INCLUDE MEDICAL
i.e., Dr.'s, therapists, aides)

☐ Medical Services

☐ Public Works Services

☐ Rent

☐ Supplies

☐ Medical Supplies

☐ Maintenance

☐ Other (Explain fully) _____

USE ONLY FOR ESTABLISHED VENDOR CHANGES:

Vendor Number: _____

New Vendor Name: _____

☐ New W-9 is **REQUIRED**

New Vendor Address: _____

☐ Vendor relocated to new physical address

☐ Vendor did not relocate, but requests
payments be sent to an alternate address.

SUBMIT

Please email this form with the vendor's W-9 form to the Legislative Office:

eiklora@tiogacountyny.gov or haskellc@tiogacountyny.gov

Department is responsible for requesting and receiving the W-9 from the vendor.

The W-9 form must be submitted along with this form to the Legislative Office in order for a vendor number to be issued.

Print or type.
See Specific Instructions on page 3.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.	
2 Business name/disregarded entity name, if different from above	
3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes. <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ► _____ <small>Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.</small> <input type="checkbox"/> Other (see instructions) ► _____	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____ <small>(Applies to accounts maintained outside the U.S.)</small>
5 Address (number, street, and apt. or suite no.) See instructions.	Requester's name and address (optional)
6 City, state, and ZIP code	
7 List account number(s) here (optional)	

Part I Taxpayer Identification Number (TIN)
 Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number								
				-				
Or								
Employer identification number								
				-				

Part II Certification
 Under penalties of perjury, I certify that:
 1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
 2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
 3. I am a U.S. citizen or other U.S. person (defined below); and
 4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here Signature of U.S. person ► _____	Date ► _____
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General Instructions
 Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

Purpose of Form
 An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.
 • Form 1099-INT (interest earned or paid)

• Form 1099-DIV (dividends, including those from stocks or mutual funds)
 • Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
 • Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
 • Form 1099-S (proceeds from real estate transactions)
 • Form 1099-K (merchant card and third party network transactions)
 • Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
 • Form 1099-C (canceled debt)
 • Form 1099-A (acquisition or abandonment of secured property)
 Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What Is backup withholding, later.

TIOGA COUNTY ASSIGNED COUNSEL PROGRAM

IRENE C. GRAVEN, Assigned Counsel Administrator



APPLICATION FOR EXPERT SERVICES

Client Information

Client Name: _____
Case Type Family/Criminal _____
Felony/Misdemeanor _____

Information

1. I was assigned as counsel for the above-named Defendant/Respondent on the ____ day of _____, 20__.
2. I hereby request permission to incur the following Expert services which are necessary to render a proper defense for said Defendant/Respondent:

Name of Provider: _____
Address of Provider: _____
Nature of Services Requested: _____
Amount Requested: _____

3. The following extraordinary circumstances exist, which require compensation in excess of \$1,000:

4. Is this a Supplemental request? Yes ____ No ____

(Office use only)	_____
Date of Approval: _____	(Print Name)
____ Request	_____
Amount Approved \$ _____	(Signature)

Assigned Counsel Rules limit payment for Expert Services authorized after January 1, 2023 to a maximum of \$750 per hour and .67 per mile.

TIOGA COUNTY ASSIGNED COUNSEL PROGRAM

IRENE C. GRAVEN, Assigned Counsel Administrator



APPLICATION FOR INTERPRETER SERVICES

Client Information

Client Name: _____

Case Type Family/Criminal _____

Felony/Misdemeanor _____

Information

1. I was assigned as counsel for the above-named Defendant/Respondent on the ____ day of _____, 20__.
2. I hereby request permission to incur the following interpretation services which are necessary to render a proper defense for said Defendant/Respondent:

Name of Provider: _____

Address of Provider: _____

Nature of Services Requested: _____

Amount Requested: _____

3. The following extraordinary circumstances exist, which require compensation in excess of \$1,000:

4. Is this a Supplemental request? Yes ___ No ___

(Office use only)	_____
Date of Approval: _____	(Print Name)
_____ Request	_____
Amount Approved \$ _____	(Signature)

TIOGA COUNTY ASSIGNED COUNSEL PROGRAM

IRENE C. GRAVEN, Assigned Counsel Administrator



APPLICATION FOR INVESTIGATIVE SERVICES

Client Information

Client Name: _____

Case Type Family/Criminal: _____

Charges: _____

Information

1. I was assigned as counsel for the above-named Defendant/Respondent on the ____ day of _____, 20__.
2. I hereby request permission to incur the following Investigative services which are necessary to render a proper defense for said Defendant/Respondent:

Name of Investigator: _____

Address of Investigator: _____

Amount Requested: _____

Qualifications: _____

Please send as Attachments:

Proof of Licensing/Proof of Bonding/Professional Liability Insurance

3. The following extraordinary circumstances exist, which require compensation in excess of \$1,000:
- _____
- _____
- _____

4. Is this a Supplemental request? Yes ___ No ___

(Office use only)	_____
Date of Approval: _____	(Print Name)
____ Request	_____
Amount Approved \$ _____	(Signature)

TIOGA COUNTY ASSIGNED COUNSEL PROGRAM

IRENE C. GRAVEN, Assigned Counsel Administrator



APPLICATION FOR TRANSCRIPT SERVICES

Client Information

Client Name: _____
Case Type Family/Criminal _____
Felony/Misdemeanor _____

Information

1. I was assigned as counsel for the above-named Defendant/Respondent on the ____ day of _____, 20__.
2. I hereby request permission to incur the following Transcript services which are necessary to render a proper defense for said Defendant/Respondent:

Name of Transcriptionist: _____
Address of Transcriptionist: _____
Number of Pages Requested: _____
Cost per page: _____

3. The following extraordinary circumstances exist, which require compensation in excess of \$1,000:

4. Is this a Supplemental request? Yes ____ No ____

(Print Name)

(Signature)

TIOGA COUNTY ASSIGNED COUNSEL PROGRAM

IRENE C. GRAVEN, Assigned Counsel Administrator



Request for Mentor

Attorney Information

Attorney Name: _____ Date: _____

Case Information

Client Name: _____

Date of Assignment: _____

Charges: _____

Mentor

Level of Experience of Mentor Needed:

Are you inexperienced and need a more experienced attorney to guide you through the case?

Yes _____ No _____

Are you experienced and need a more experienced Attorney to advance your defense skills?

Yes _____ No _____

Further explanation if needed:

TIOGA COUNTY ASSIGNED COUNSEL PROGRAM

IRENE C. GRAVEN, Assigned Counsel Administrator



Request for Second Chair

Attorney Information (First Chair)

Attorney Name: _____ Date: _____

Case Information

Client Name: _____

Date of Assignment: _____

Charges: _____

Second Chair

Level of Experience of Second Chair Needed:

Are you inexperienced and need a more experienced attorney to guide you through the trial?

Yes _____ No _____

Are you experienced and willing to take a less experienced attorney that is trying to advance defense skills?

Yes _____ No _____

Are you experienced and need a second chair at your level?

Yes _____ No _____

Further explanation if needed:

(Office use only) Date of Approval: _____ ____ Request Amount Approved \$ _____	_____ (Print Name)
	_____ (Signature)

Assigned Counsel Rules limit payment for Second Chair services authorized after April 1, 2023 to the Statutory Cap of \$10,000 per case. If case exceeds statutory cap, an extraordinary circumstance affidavit is required. Mileage rate is .67 per mile.

TIOGA COUNTY ASSIGNED COUNSEL PROGRAM
IRENE C. GRAVEN, Assigned Counsel Administrator



APPLICATION FOR CLE REGISTRATION EXPENSE

Information

1. I was placed on the assigned counsel panel on _____.
2. I hereby request permission to be reimbursed for registration costs incurred for the following CLE:

Name of CLE Provider: _____

Address of CLE Training: _____

Date of CLE: _____

Amount of Registration: _____

(Office use only)

Date of Approval: _____

_____Request

Amount Approved \$ _____

(Print Name)

(Signature)