

\_\_\_\_\_ County

In The General Court Of Justice  
District Court Division

**IN THE MATTER OF**

Name Of Juvenile

**ORDER FOR EXPERT WITNESS FEE  
IN JUVENILE CASES AT THE TRIAL LEVEL**

G.S. 7A-300, -314, -343; 8C-702

The Court finds that:

The person named below was compelled to attend court and testify as an expert, or provided necessary expert services pursuant to a prior court order, and the person named below was duly sworn and gave testimony of such nature and character as to qualify as an expert witness, or provided services that were necessary expenses of trial; and

Therefore, it is ORDERED that the amount listed as Total Compensation And Reimbursables To Be Paid be allowed this expert, to be paid from Judicial Branch funds by the North Carolina Administrative Office of the Courts. It is further ORDERED that all reasonable and necessary expenses already incurred, in accordance with G.S. 7A-343(9f), by the North Carolina Administrative Office of the Courts associated with this witness' appearance be paid from the Judicial Branch funds by the North Carolina Administrative Office of the Courts.

**NOTE:** Please complete form AOC-J-485 before completing this form and submit both forms to the judge. Use this form only if you are an expert appearing on behalf of the State or GAL.

Name Of Expert

**Application For Expert Witness Fee In Juvenile Cases At The Trial Level (AOC-J-485) must be attached.**

**COMPENSATION CALCULATION**

1. Time In Court (as shown on AOC-J-485)	1.
2. Time Out Of Court (as shown on AOC-J-485)	2.
3. Time Traveled _____ + Time In Court Waiting _____ = _____ (TOTAL) (divide Total by 2) (as shown on AOC-J-485)	3.
<b>4. TOTAL HOURS</b> (add blocks 1, 2, and 3)	4.
5. Hourly rate (Use Expert Hourly Compensation Calculator on Side Two)	5. \$
<b>6. TOTAL COMPENSATION</b> (multiply blocks 4 and 5)	6. \$
Reimbursable Expenses	
Mileage _____ (as shown on AOC-J-485) Multiply by NCAOC Mileage Rate	\$
"Other" Total (as shown on AOC-J-485)	\$
<b>7. TOTAL REIMBURSABLE EXPENSES</b> (add all reimbursables)	7. \$

**NOTE:** Reimbursement of expenses is calculated based on North Carolina law and the NCAOC Expert Witness Compensation and Reimbursement Rates.

**TOTAL COMPENSATION AND REIMBURSABLES TO BE PAID** (add blocks 6 and 7) \$

**SIGNATURE OF JUDGE**

Date	Name Of Presiding Judge (type or print)	Signature Of Presiding Judge
------	---	------------------------------

**EXPERT HOURLY COMPENSATION CALCULATOR  
(based on Expert's Application on AOC-J-485)**

Maximum Expert Base Rate (see Maximum Expert Compensation Rate below)

\$

Experience Enhancements (add to hourly base compensation, if applicable)

For expert with more than 10 years of experience in the field in which he/she is providing services, add \$10 per hour.

For expert with more than 20 years of experience in the field in which he/she is providing services, add \$20 per hour.

\$

**Total Hourly Rate** (this amount is to be used in compensation calculation)

\$

**NOTE:** An exception to maximum rates may be requested when necessary and appropriate. To request an exception, please submit form AOC-A-243. If an exception has been previously approved, please attach a copy to this order.

**MAXIMUM EXPERT COMPENSATION RATE**

High School or Equivalent	\$30.00
Associate's Degree	\$50.00
Linguist	\$60.00
Bachelor's Degree	\$70.00
Master's Degree	\$85.00
Crime Scene and Related Expert	\$100.00
CPA/Financial	\$100.00
Pharmacy/Pharm.D.	\$125.00
IT Expert	\$150.00
Ph.D./Psy.D.	\$200.00
Medical Doctor	\$250.00
MD with Special Degree	\$300.00

Mail this form with attached AOC-J-485 to:

Financial Services Division - Accounts Payable  
North Carolina Administrative Office of the Courts  
PO Box 2448  
Raleigh, NC 27602