

STATE OF NORTH CAROLINA

In The General Court of Justice

District Superior Court Division

File No.

97 CrS 39580

Film No.

Guilford County

STATE VERSUS

Defendant

RONNIE LEE KIMBLE

ORDER FOR EXPERT
WITNESS FEE

G.S. 7A-314(d)

From the Petition heard in this matter it appears to the Court that the person named below was compelled to attend Court and testify;

And, that he was duly sworn in and gave testimony of such nature and character as to admit him as an expert witness;

It further appears to the Court that the information provided below concerning this witness and his testimony is true and correct.

It is ORDERED that the amount listed below be allowed this witness, to be paid by the State of North Carolina.

Mail this form to:

Controller
Administrative Office of the Courts
P.O. Box 2448
Raleigh, N.C. 27602

Date

Signature of Judge

7/1/98
Michael D. Ingold

Witness Name	COMPENSATION ALLOWED	
Michael D. Ingold	Hourly Rate	\$ 40.00
Address 015 Straw Hat Road	No. Hours To Be Paid	9
City, State, Zip Greensboro, NC 27410	Amount Earned	\$ 360.00
Social Security No./Federal Id. No. 242-84-0348	Other Compensation (mileage, lodging etc. please itemize below)	\$ 99.80
Field of Expertise/Occupation Private Investigator	Total Compensation	\$ 459.80
XXXXX On behalf of <input type="checkbox"/> Prosecutor <input type="checkbox"/> Defendant <input checked="" type="checkbox"/> Indigent Defendant		
Date Testimony Given		

Itemization of Other Compensation

Item Description and Date	Amount
Motel 6/29/98	\$ 79.20
Food 6/29-30/98	\$ 20.60
	\$

For Use By Controller, Administrative Office of the Courts

DATE			JNL	DEPT/DIV	FUND	CONTROL	AMOUNT	C	R	FRC	OBJECT	RCC	PROGRAM								
MO	DAY	YR	7	8	9	10	11	12	13	16	17	20	21	32	33 - 34	35	38	39	42	43	46
			4	0	2	0	0	0						7500							

Approved by	Date	DIST.	REFERENCE NUMBER	IDENTIFICATION
		47-48	54	59

INGOLD INVESTIGATIVE SERVICES, INC.

4015 STRAW HAT ROAD
 GREENSBORO, NORTH CAROLINA 27410
 PHONE AND FAX: 336-665-6050

SERVICE INVOICE

SERVICE FOR:
 RONNIE KIMBLE - DEFENDANT

DATE: 6/30/98
CASE NAME: R. KIMBLE
SUPERVISED BY: MICHAEL D. INGOLD, SR.

BILLED TO:
 HATFIELD AND HATFIELD, ATTY..
 219 W. WASHINGTON STREET
 GREENSBORO, NORTH CAROLINA 27401

DATE	INVESTIGATIVE DESCRIPTION	TIME	RATE	AMOUNT
6/29/98	TRAVEL TO LYNCHBURG VA TO LOCATE WITNESS MITCH WHIDEN	3 HRS	@\$40/HR	120.00
6/30/98	INTERVIEW WITH DR.. WILMINGTON AND RICK BUCK OF LIBERTY BIBLE INSTITUTE, ATTEMPTING TO LOCATE WITNESS MITCH WHIDEN	6 HRS	@\$40/HR	240.00

1. INVESTIGATIVE TOTAL	360.00
2. MOTEL	\$79.20
3. FOOD	\$20.60
	\$459.80
TOTAL DUE	

MAKE CHECKS PAYABLE TO:

INGOLD INVESTIGATIVE SERVICES, INC.
 4015 STRAW HAT ROAD
 GREENSBORO, NORTH CAROLINA 27410

THANK YOU FOR YOUR BUSINESS!
 PAYMENT DUE UPON RECEIPT OF INVOICE

DATE: Tuesday, June 30, 1998
TIME: 2:08:00 PM
PAGES: 3

FAX TO: JACK HATFIELD
COMPANY: HATFIELD AND HATFIELD
FAX NUMBER: 273-9238

FROM: MIKE OR PAL INGOLD
COMPANY: INGOLD INVESTIGATIVE SERVICES, INC.
VOICE: 665-6050
FAX: 665-6050

NOTE: