

**STATE OF NORTH CAROLINA**

In The General Court of Justice

District  Superior Court Division

Guilford County

File No.

97 CrS 39580

Film No.

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

Witness Name		COMPENSATION ALLOWED	
Michael D. Ingold		Hourly Rate	\$ 40.00
4015 Straw Hat Road		No. Hours To Be Paid	7.5
City, State, Zip Greensboro, NC 27410		Amount Earned	\$ 300.00
Social Security No./Federal Id. No. 242-84-0348 56-1983243		Other Compensation (mileage, lodging etc. please itemize below)	\$ -
Field of Expertise/Occupation Private Investigator		Total Compensation	\$ 300.00
Assigned on behalf of <input type="checkbox"/> Prosecutor <input type="checkbox"/> Defendant <input checked="" type="checkbox"/> Indigent Defendant			
Date Testimony Given			

Itemization of Other Compensation		Amount
Item Description and Date		
		\$
		\$
		\$

**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
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47-48	54 59	62 69
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**INGOLD INVESTIGATIVE SERVICES, INC.**

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

**SERVICE INVOICE**

**SERVICE FOR:**  
 ROBERT MCCLELLAN  
 121 S. ELM STREET  
 GREENSBORO, NORTH CAROLINA 27401

**DATE** 3/09/98  
**CASE #**  
**CASE NAME** KIMBLE  
**SUPERVISED BY** MICHAEL D. INGOLD, SR.

**BILL TO:**  
 JACK HATFIELD, ATTORNEY AT LAW  
 219 W. WASHINGTON STREET  
 GREENSBORO, NORTH CAROLINA 27401

DATE	INVESTIGATIVE DESCRIPTION	TIME	RATE	AMOUNT
11/05/97	TRIP TO SANDHILLS YOUTH CENTER WITH ROBERT MCCLELLAN	5 HOURS	@\$40/HR	\$200.00
1/14/98	MEETING WITH HOMER YOUNG, TED KIMBLE'S PRIVATE INVESTIGATOR	2.5 HOURS	@\$40/HR	\$100.00
<b>1. TOTAL INVESTIGATIVE AMOUNT</b>				<b>\$300.00</b>

DATE	EXPENSES	AMOUNT
<b>2. TOTAL EXPENSES</b>		

**COMMENTS**

	1	\$300.00
	2	
		\$300.00
		<b>TOTAL DUE</b>

**MAKE CHECKS PAYABLE TO:**  
 INGOLD INVESTIGATIVE SERVICES, INC.  
 4015 STRAW HAT ROAD  
 GREENSBORO, NORTH CAROLINA  
 27410

PAYMENT DUE UPON RECEIPT OF INVOICE