# Fees Approved

**Month** December **Year** 2016

Appellate, Justice and Municipal Courts

| | | | | | | | | | If greater than $1,000 | |
|---|---|---|---|---|---|---|---|---|---|---|
| **Name of Judge/Master/Referee Approving Payment** | **Case Number** | **Case Style** | **State Bar No.** | **Name of Person Appointed** | **Position to Which Appointed (select one)** | **Date of Approval of Fee** | **Source of Fee (select one)** | **Amount Approved** | **No. Hours Billed** | **Amount of Billed Expenses** |
| Judge Don Coffey JP 3-2 | | | | 0 | | | | 0 | 0 | 0 |
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**This form is for tracking purposes only and will not be accepted as a monthly report. The information must be entered into the reporting database.**