

Fees Approved

Appellate, Justice and Municipal Cou

Month _____ October

Year 2016

Justice of the Peace, Pct. 3-2

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	If greater than \$1,000	
									No. Hours Billed	Amount of Billed Expenses
JUDGE DON COFFEY										

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.