Fees Approved County

Month

SEPTEMBER

Year

2018

							If greater than \$1,000					
Name/ Number	Name of Judge/Master/Referee Approving Payment	Case Number	Case Style	State Bar No.	Name of Person Appointed	Position to Which Appointed (select one)	Appointee is (select one)	Date of Approval of Fee	Source of Fee (select one)	Amount Approved		Amount of Billed Expenses
COUNTY	HONORABLE ROSS D. SHARP				NONE							,
							-					
												0

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.

Month

SEPTEMBER

Year

2018

	Name of		1			Position to Which		
Name/Number of Court	Judge/Master/Referee Ordering Appointment	Case Number	Case Style	State Bar No.	Name of Person Appointed	Appointed (select one)	Appointee is (select one)	Date of Appointment
			İ					
COUNTY COURT	JUDGE ROSS D. SHARP							NONE
				1				
							The second of th	
				1 1				
				+				
				i i				
-								
								-
		1		1				
				-			Carried to the second	
	 							
				j				
								NONE
				1		1	Translation (194	NONE

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.