

SUPERIOR COURT OF CALIFORNIA, COUNTY OF AMADOR

500 ARGONAUT LANE, JACKSON, CA 95642

Name, Address and Telephone No. of Attorney	<i>CLERK'S USE ONLY</i>
	Case No.
Case Title:	Invoice Date:

COURT APPOINTED ATTORNEY CLAIM FORM AND ORDER/REIMBURSEMENT ORDER

CLAIM AND REQUEST FOR APPROVAL OF:

- | | | |
|--|----------------------------------|--------------------------------|
| <input type="checkbox"/> ATTORNEY FEES | <input type="checkbox"/> INTERIM | <input type="checkbox"/> FINAL |
| ATTORNEY'S EXTRAORDINARY FEES | REIMBURSEMENT TO AMADOR COUNTY | |

To the Judge of the Superior Court:

On _____ I was appointed to represent: _____ pursuant to the provisions of:

<input type="checkbox"/> Civil Contempt	<input type="checkbox"/> Probate Code	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Family Code 3150	<input type="checkbox"/> W&I Code 317 (Juvenile Dependency)	_____
<input type="checkbox"/> Penal Code _____	<input type="checkbox"/> W&I Code 634 (Juvenile Wardship)	_____

Billing Period: _____ through _____ **TOTAL CLAIM \$** _____

I declare under penalty of perjury that the itemized statement and claim for services attached hereto are correct and accurately reflects the time spend by me in this action.

Date: _____ Signature: _____

ORDER

This claim for approval of attorney fees may be used by the Court to make a determination of the amount for which a Defendant is responsible for reimbursing the County for provision of legal services pursuant to Court appointed counsel.

The Court having read and reviewed the claim submitted herein orders the following:

Defendant does not does have the ability to pay at this time. Other _____
 Amount Approved \$ _____ Partial Amount Granted \$ _____

Date: _____

Judge of the Superior Court

The Order Sealing the Request for Approval of Fees was made by the Court on: _____. As part of that Order, the invoice and the associated itemized billing are sealed. In order for the invoices to be paid, they must be sent to County officials. The court is hereby authorized to submit approved claim forms, without any itemized statements attached, to the County for payment. The Court sends the claim forms to GSA who in turn sends the forms to the auditor for payment. These County entities are hereby ordered to shred or maintain the claim forms confidentially and not release said claim forms to any other entity, unless authorized to do so by further order of this Court. The itemized statements are to be retained by the Court under seal. The Court's fiscal department may maintain the documents in a locked file cabinet, in a separate file folder indicating they are "sealed." The fiscal department shall not release the records or provide access to anyone, other than as provided by in this order, unless otherwise authorized by further Court Order.

