

# County Court Appointments Approved

Month

June

Year

2024

| Name/Number of Court | Name of Judge/Master/Referee Ordering Appointment | Case Number | Case Style | State Bar No. | Name of Person Appointed | Position to Which Appointed (select one) | Appointee is (select one) | Date of Appointment |
|----------------------|---|-------------|------------|---------------|--------------------------|--|---------------------------|---------------------|
| 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.

# County Court Fees Approved

Month

June

Year

2024

| Name/ Number of Court | 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 | If greater than \$1,000 |                           |
|-----------------------|--|-------------|------------|---------------|--------------------------|--|---------------------------|-------------------------|----------------------------|-----------------|-------------------------|---------------------------|
|                       |  |             |            |               |                          |  |                           |                         |                            |                 | No. Hours Billed        | Amount of Billed Expenses |
| 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.