## **District Court Appointments Approved**

Month October

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							-	
							12.05.157	
							4	

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.

## **District Court Fees Approved**

Month	October

Year

2024

											if great	than \$1,000
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	No. Hours	Amount of Billed Expenses
NONE												
											-	
						-						
											-	
							3000					

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