SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN FRANCISCO
ORDER FOR PAYMENT OF COMPENSATION IN JUVENILE DEPENDENCY CASE

In Re the Matter of:	**Case No.:**
	ORDER FOR INVESTIGATOR FEES

Pursuant to order(s) of appointment, the investigator named below performed investigation on the day(s) set forth in the attached worksheet. **All order(s) authorizing payment with accompanying declarations by attorney must be submitted to BASF with this bill**. Please provide the following information:

Date of order	Judge	Amount of order	Amount received

The court finds that the investigator did perform work at the direction of attorney _____ and is entitled to compensation as follows:

Total Hours	0.00	
Hourly Rate		**NOTE: Do not enter hourly rate until AFTER all billing entries have been entered.**
Compensation in the sum of	$0.00	
Less 2% Administrative Processing Fee	$0.00	
Necessary expenses due Investigator	$0.00	
TOTAL now payable to Investigator	$0.00	
Previous total billings to the Court for this case		

The Court orders that a warrant be drawn by the Controller upon the Treasurer from the General Fund of the City and County of San Francisco in favor of the following:

Investigator Name: _____ Lic. Number: _____
Address _____
Phone _____ Tax ID: _____

Brief explanation of billing activity (optional):

_____

I have not received payment from any outside source except as follows:

AMOUNT: _____ **RECEIVED FROM:** _____ **PURPOSE:** _____

I declare under penalty of perjury under the laws of the state of California that the foregoing, and the information provided on all attachments, are true and correct. I agree to produce, upon request, records concerning the specific times and total hours billed to the Court for in- and out-of-court services as requested.

_____ _____
Date Signature

SAN FRANCISCO SUPERIOR COURT
INVESTIGATOR FEE WORKSHEET

Each column must be completed for each entry. The explanation column should include the names of persons contacted and/or a brief description of subject matter. All hours should be listed in tenths (.10) or quarters (.25 or .75) of an hour. Attorneys are expected to combine small tasks until, in combination, the tasks reach the nearest tenth.
If reviewing documents, please list number of pages reviewed.

(mm/dd/yy)

DATE	TIME BILLED	EXPLANATION of TASK

Total billed this page: 0.00

SAN FRANCISCO SUPERIOR COURT
INVESTIGATOR FEE WORKSHEET

Each column must be completed for each entry. The explanation column should include the names of persons contacted and/or a brief description of subject matter. All hours should be listed in tenths (.10) or quarters (.25 or .75) of an hour. Attorneys are expected to combine small tasks until, in combination, the tasks reach the nearest tenth.
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DATE	TIME BILLED	EXPLANATION of TASK

Total billed this page: 0.00

SAN FRANCISCO SUPERIOR COURT
INVESTIGATOR EXPENSES WORKSHEET

This form must be filled out and returned ONLY if you are requesting reimbursement for expenses. By returning this form, the investigator certifies that the following monies were expended for necessary costs. Receipts are required for any reimbursable expenses, with the exception of mileage and tolls.

Receipts and a court order with accompanying declaration are required for extraordinary expenses.

ITEM	AMOUNT
	0.00

Additional comments that might assist the court:

_____

_____

_____

_____

_____