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 INV	ESTIGATOR FEES
Pursuant to order(s) of appointment, the investigator nar attached worksheet. Please provide the following inform		ck on the day(s) set forth in the
Date of authorization Number of hours auth.	Hourly rate	Hours previously billed
	\$	
	\$	
The court finds that the investigator did perform work a and is entitled to compensation as follows:	t the direction of attorney	
Total	Hours	
Hour	ly Rate	
Compensation in the	sum of	
Less 2% Administrative Processing	ng Fee	
Necessary expenses		
TOTAL now p	payable	
Previous total billings to the Court for the	is case	
The Court orders that a warrant be drawn by the Control	ller upon the Treasurer fro	om the General Fund of the
City and County of San Francisco in favor of the follow	-	
Name:	E-mail:	
Address		
Phone V	endor ID:	
Brief explanation of billing activity:		
I have not received payment from any outside source ex	cept as follows:	
AMOUNT: \$0.00 RECEIVED FROM: n/a	PURPOSE:	n/a
I declare under penalty of perjury under the laws of the state provided on all attachments, are true and correct. I agree to and total hours billed to the Court for in- and out-of-court se	produce, upon request, reco	oing, and the information
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. Not every task, however small, equals a tenth 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.

DATE	TIME BILLED	PHASE CODE	TASK CODE	EXPLANATION of TASK
		_		
			1	1

SAN FRANCISCO SUPERIOR COURT INVESTIGATOR EXPENSES WORKSHEET

This form must be filled out and returned <u>ONLY</u> 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
TOTAL	
additional comments that may assist the court:	