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 PARALEGAL FEES	

Pursuant to order(s) of appointment, the Paralegal named below performed work on the day(s) set forth in the attached worksheet. Please provide the following information:

Date of authorization	Number of hours auth.	Hourly rate	Hours previously billed
		\$	
		\$	

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

Total Hours	
Hourly Rate	
Compensation in the sum of	
Less 2% Administrative Processing Fee	
Necessary expenses	
TOTAL now payable	
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:

Name:	E-mail:
Address	
Phone	Vendor ID:

Brief explanation of billing activity:

I have not received pay	yment from any outside	source exce	pt as follows:
AMOUNT: \$0.00	RECEIVED FROM:	n/a	PURPOSE: <u>n/a</u>
· ·			California that the foregoing, and the information

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 PARALEGAL 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

SAN FRANCISCO SUPERIOR COURT PARALEGAL 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 Paralegal 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: