Fees Approved

Month February **Year** 2020

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
County Clerk, County Court at Law												