CAUSE NO	
	§ IN THE DISTRICT COURT
	SJUDICIAL DISTRICT
	\$ \$COUNTY, TEXAS

REPORT OF COURT APPOINTEE FEES AND PAYMENT

Name of Person Appointed:		Bar #
Type of Appointmer	nt: 🗆 Attorney Ad Lite:	m 🗆 Mediator
	🗆 Guardian Ad Lite	em 🗆 Other
	□ Amicus Attorney	
Date of Approval of Fee:		
Source of Fees:	□ Plaintiff/Petitioner	□ Registry of Court
	Defendant/Respondent	□ Insurance
	□ County	□ Other
Amount Approved: \$		
<u>If > \$1,000:</u> # of H	ours Billed:	Billed Expenses: \$

This information is provided to the District Clerk to assist with the reporting required by Texas Government Code Chapter 36.

Date:_____

JUDGE PRESIDING