

**COURT APPOINTED COUNSEL
BILLING FORM**

Date: _____ **CAC#** _____

To : Clerk of Court – Superior Court **Amount:** \$ _____

From : _____

Case # _____ **Law Office/Attorney** **Defendant:** _____

Date of Appointment: _____ **Appointed by:** _____

Case has been disposed as of: _____ **Classification: Check one**
 Misdemeanor Felony/Non-Jury
 Felony/Jury Others

Attached Billing? yes no

**For Tinian/Rota cases, please submit copy of airline tickets/any other out-of-pocket expenses for this trip.
For Saipan, please submit receipt for expenses over \$25.00.**

Submitted by: _____ **Date:** _____

.....
Below for Official Use Only

Reviewed by: _____ **Amount Requested for Payment \$** _____

The requested amount is from adjustments made due to:
 Time spent No Court Order for excess amount No copy of airline tickets/OPE
 Payment Case still pending Others

{ } Approved { } Disapproved

By: _____
Robert C. Naraja, Presiding Judge

**Charged to Acct. #1690-62060
Professional Services**

