ATTACHMENT B: EXPENSES PAID

(If the defendant in this matter is represented by an attorney, this form must be reviewed and signed by the attorney of record. Signature of the attorney of record does not obligate the Court and/or County to pay all of the requested fees.)

		te the Court and/or County to pay all of the requested fees	5.)
CASE TITL			
CASE NUN			
	(Attach original receipts pursuant to FCSC General Claim Processing Practice		
DATE	EXPENSES	AMOUNT	
TOTAL			
I am the attorney of record in this matter. I have reviewed this form and represent that the amount is reasonable considering the nature and complexity of this case.			
1003011001	s sensitioning the nations and complexity of the	1110 00001	
Signature Date Print Name			