CONTRACT SERVICES OVER 30 HOURS
MONTHLY REPORT
JD-JM-132 Rev. 2-2002

STATE OF CONNECTICUT
SUPERIOR COURT
www.jud.state.ct.us

(A copy of a signed "Request for Judicial Approval of Court Fees in Excess" form JD-JM-146 must be submitted with each case before payment will be authorized.)

CASE TYPE
CP *- Child Protective*
DL *- Delinquency*
FN *- Family w/Needs*
YC *-Youth in Crisis*

CODE KEY
C *- Child*
P *- Parent*
O *- Other (specify)*

COURT LOCATION: JUVENILE MATTERS AT	NAME OF ATTORNEY OR FIRM	MONTH AND YEAR

CLIENT NAME	CODE	CHILD'S NAME	CASE TYPE	DOCKET NO.	DAY OF MONTH *(List Each Separately)*	HOURS *(To Nearest 1/10)*	AMOUNT DUE *($40.00 Hour)*
					TOTALS →		