State of Alabama Unified Judicial System Form FCD-1 Rev. 9/08

REFEREE EXPENSE CLAIM & WORK SHEET (JUVENILE (NOT IV-D) CASES)

	ompensation from the				services rendered as a Referee. Pay Location #:	
Referee's SS#:					, —	
Business Address	s:			Co	unty:	
City Hourly Rate:			State Zip E-mail Address:		Bus. Phone No.	
Date(s) of Service (In & out of court)	No. of Juvenile (Not IV-D) Cases	In-Court Hours	Out-of-Court Hours	Describe In Court and Out-of-Court Time		
Total						
(PLEASE <u>RETAIN</u>	ditional sheet(s) if r ! FOR FUTURE AUD E REFEREE SERVIO	necessary.) DITS EACH DOCKI	ET SHEET AND/	OR ANY	rt + out-of-court hours) OTHER NECESSARY INFORMATION Please do not send this information to	
					ue for the period of nce with applicable legal statutes.	
Signature of Referee				Date		
Signature of Supervising Judge (Continuation Sheet)			Ī	Date		

Date(s) of Service (In & Out of-Court)	No. of <u>Juvenile</u> (Not IV-D Cases	In-Court Hours	Out-of-Court Hours	Describe In Court and Out-of-Court Time
TOTAL				