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CLAIM : ACCOUNTING

[redacted] ~ May, 2016 ~ Region 1 ~ Conflict

Attorney Name

General

Attorney *	[redacted]	Month of Service *	May
Region *	Region 1	Conflict Type *	Conflict
Voucher Id	--	Claim Amount	$7,820.00
Last Day to Submit	7/15/2016		

Accounting

Fiscal Year	2016	Fund Code	01100
Account	62109A	Open Item Key	--
Payment Form	M	Subclass	669G1
Invoice Id	[redacted]0516KR01	Organization	40100
Advice	--		

Exceeds Billing Standard

Case	Case Id (Case)	Court Number...	Case Type (Case)	Atty Hrs	Travel Hrs	Total Hrs	Remaining Hours...	Billing Standard...	Amount
[redacted] TK-15-1396 ~ Driving a...	15-25160	TK-15-1396	CR - Lower Cou...	26.00	3.00	29.00	-16.00	10.00	$1,798.00
[redacted] ~ tk-1234 ~ Youths in need of c...	15-8029	tk-1234	TK - Lower Cour...	76.00	1.00	77.00	-66.00	15.00	$4,774.00

Client name

Hours

Case	Case Id (Case)	Court Number...	Case Type	Atty Hrs	Travel Hrs	Total Hrs	Remaining Ho...	Billing Standar...	Amount
[redacted] ~ TK-15-1396 ~ Driving a...	15-25160	TK-15-1396	CR - Lower Cou...	26.00	3.00	29.00	-16.00	10.00	$1,798.00
[redacted] ~ DN-15-35 ~ Youths in need of...	15-15004	DN-15-35	DN - Abuse and...	4.00		4.00	71.00	75.00	$248.00
[redacted] ~ tk-1234 ~ Youths in need of c...	15-8029	tk-1234	TK - Lower Cour...	76.00	1.00	77.00	-66.00	15.00	$4,774.00

Client name