Fees Approved - Criminal	Month	<u>MARCH</u>	Year	<u> 2025</u>
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								If greater than \$1,000				
Name/ Number of Court	Name of Judge/Master/Referee Approving Payment	Case Number	Case Style	State Bar No.	Name of Person Appointed	Position to Which Appointed (select one)	Appointee is (select one)	Date of Approval of Fee	Source of Fee (select one)	Amount Approved	Billed	Amount of Billed
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