## Committee for Public Counsel Services Children and Family Law Division

75 Federal Street, 6th Floor, Boston, MA 02110 (617) 482-6212

## REQUEST FOR PAYMENT FOR NO-CASE CRA DUTY DAY

Name:		
Phone:	Email:	
Date of Assignment:	Court:	
Normal are a Changer and Automobile and		
	t case assignment:	
Please note your start time and fi	nish time:	
I hereby request payment at the rassignments as certified below.	ate of \$65 per hour for my presence in co	urt and availability for
hours stated above for a duty-day	rjury that I was present in the above-lister assignment and that despite my presence d on no cases, I have not received and I vecourt on that day.	e on that day, I received no
I further swear that no case assign	nments were available to me at the court of	on the date listed above.
ū	nments were available to me at the court of Attorney's Signature	
I further swear that no case assign  Date of Request:  Date Received:		
Date of Request:	Attorney's Signatur  For Internal Use Only	re:
Date of Request:  Date Received:	Attorney's Signatur  For Internal Use Only	DENIED

UPDATED 8/2022