

**ALASKA COURT SYTEM
JUROR COUNSELING BILLING FORM**

Juror Information

Juror Who Received Counseling (juror number, **not** juror name): _____

Jury Panel: _____

Jury Served On: Trial Jury. Trial Case Number: _____

Grand Jury. Grand Jury Hearing Date: _____

Grand Jury Location: _____

Name of Judge: _____

Counselor Information

Print or Type Counselor's Name

Tax I.D. Number

Address

Phone Number

City State ZIP

Billing Information

Type of Session: Group Individual Number of Sessions _____

Dates of Counseling Sessions: _____

Hourly Rate _____ x Total Hours _____ = _____
Total Amount Billed

Date

Counselor's Signature

Court Use Only

Recommend Approval _____
Judge's Signature Date

Approved by _____
Administrative Officer's Signature Date

For Acct. Purposes: Object Code: 3063 Activity Code: JURC