

ALASKA LEGAL SERVICES CORPORATION
Volunteer Attorney Support

CASE STATUS / FINAL DISPOSITION FORM

Attorney's name: _____
Address: _____
Zip: _____ Phone: _____
Email: _____
Date case accepted: _____
Case number: _____

Firm: _____
City: _____ State: _____
Fax: _____
Client's name: _____
Date case closed: _____

CASE STATUS:

Work to date:

Work pending:

Expected date of completion: _____

CASE DISPOSITION: (Upon completion of your case, please be sure to mark appropriate space for services rendered)

_____ Administrative agency decision	_____ Insufficient merit to proceed
_____ Brief service	_____ Negotiated settlement with litigation
_____ Change in client's eligibility status	_____ Negotiated settlement without litigation
_____ Client withdrew or did not return	_____ Other (please specify)
_____ Court decision	_____

SUMMARY OF SERVICES RENDERED:

Donated *pro bono* hours: _____

EXPENSES INCURRED: Any requests must be accompanied by one of the following (please attach to form):

- 1) A signed itemized invoice; or
- 2) Receipts and/or copies of cancelled checks.

Requested expense reimbursement amount \$ _____

Date prepared: _____ By: _____

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