

**State Bar Court  
State Bar of California**

Los Angeles  
 San Francisco

Hearing Department  
 Review Department

In the Matter of \_\_\_\_\_

Case No. \_\_\_\_\_

**PSYCHOLOGIST DECLARATION,  
CLAIM AND ORDER OF  
COMPENSATION AND EXPENSES**

**[CONFIDENTIAL EX PARTE FILING]**

I have been appointed by the court as a psychologist in the above-entitled proceeding. The information below includes all services necessarily performed by me, as well as the necessary expenses that I incurred, in performing the services required by the court's order of appointment. My claim is summarized as follows (as transferred from the attached itemized statement of services):

Date of Appointment: \_\_\_\_\_

Initial examination [not to exceed \$375]: \_\_\_\_\_ hours at \$125 per hour \$ \_\_\_\_\_

Testing by psychologist [not to exceed \$500]: \_\_\_\_\_ hours at \$125 per hour \$ \_\_\_\_\_

Report Work-Up [not to exceed \$875]: \_\_\_\_\_ hours at \$125 per hour \$ \_\_\_\_\_

Testimony: \_\_\_\_\_ hours at \$125 per hour \$ \_\_\_\_\_

**Total Requested for Services:** \$ \_\_\_\_\_

**Amount Requested for Expenses :** \$ \_\_\_\_\_

(Itemize expenses on attached statement and provide receipts)

I declare under penalty of perjury, pursuant to Code of Civil Procedure section 2015.5, that I have not previously claimed nor have I been reimbursed for services(s) as claimed on this Declaration and that the information contained herein and attached is true and correct.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

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FOR COURT USE ONLY

The Court now orders payment as follows:

Amount Authorized: \_\_\_\_\_

\_\_\_\_\_  
Judge's Signature

\_\_\_\_\_  
Date