

**PERIODIC REVIEW WORKSHEET -  
FEES CHARGED BY COUNSEL OR GUARDIAN AD LITEM**

JD-FM-232 Rev. 12-21  
C.G.S. § 46b-12; P.A. 21-15

STATE OF CONNECTICUT  
**SUPERIOR COURT**  
www.jud.ct.gov



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REVWORK



Name of case ( <i>Plaintiff v. Defendant</i> )	Docket number
Name of counsel or guardian ad litem	Date of appointment

1. An order was made on (*date*) \_\_\_\_\_ stating fees to be paid to counsel/guardian ad litem are allocated as follows:

- \_\_\_\_\_ % Plaintiff
- \_\_\_\_\_ % Defendant
- \_\_\_\_\_ % Other (*3rd party*)

2. Fees paid to counsel/the guardian ad litem to date:

- \$ \_\_\_\_\_ Plaintiff
- \$ \_\_\_\_\_ Defendant
- \$ \_\_\_\_\_ Other (*3rd party*)

3. Fees owed to counsel/the guardian ad litem to date:

- \$ \_\_\_\_\_ Plaintiff
- \$ \_\_\_\_\_ Defendant
- \$ \_\_\_\_\_ Other (*3rd party*)

4. The most recent bill was sent to the parties on (*date*) \_\_\_\_\_.

5. The parties are billed on a  monthly;  quarterly;  semi-annual;  
 other: \_\_\_\_\_ (*i.e. at court appearances*) basis.

6. Target date for completion (*date*) \_\_\_\_\_.

Signed ( <i>Counsel/Guardian Ad Litem</i> )	Print name	Date
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**ADA NOTICE**

The Judicial Branch of the State of Connecticut complies with the Americans with Disabilities Act (ADA). If you need a reasonable accommodation in accordance with the ADA, contact a court clerk or an ADA contact person listed at [www.jud.ct.gov/ADA](http://www.jud.ct.gov/ADA).