

**NOTICE OF COMPLETION FORM**

Thank you for participating the United States District Court of Nevada's Pilot Pro Bono Program. In order to help the Court assess the Pilot Pro Bono Program, please complete the following form.

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Case No.: \_\_\_\_\_  
Client's Name: \_\_\_\_\_  
Attorney's Name: \_\_\_\_\_ Bar No: \_\_\_\_\_  
Employer/Firm Name: \_\_\_\_\_

I was appointed for \_\_\_ all purposes/ \_\_\_ the limited purpose of \_\_\_\_\_.

Hours spent in fulfilling the purpose of the appointment: \_\_\_\_\_.

Costs and expenses incurred during the course of my appointment: \_\_\_\_\_.

Please describe in as much detail as possible the outcome of the case for which you were appointed (i.e. negotiated settlement, court decision, judgment, etc.):

Did you obtain any funds from the Court to offset either pretrial or trial related expenses? If so, how much?

Did you or your client obtain any monetary proceeds as a result of your representation? If so, do those proceeds exceed the amount of any funds received from the Court for pretrial or trial related expenses?

Do you plan on seeking a cost award or an award of attorney fees against an opposing party for services rendered in this action?

Do you plan to take on additional pro bono representation under the Court's Pro Bono Program? If not, please describe the reason/s why.

Please describe in detail any aspect of the Pro Bono Program that you think can be improved and how you believe it can be improved?

\_\_\_\_\_  
Attorney Signature  
[Printed Name]  
[Contact Information]  
Date: