NDCLCI 2517 West Main St PO Box 149 Valley City, ND 58072 Phone: (701)845-8632 Fax: (701)845-8633

Name of Attorney:	Phone:	
Name of Represented Party:		
County:		
Title of Case:		
Type of Case:		
File No:	Allegation:	
File No:	Allegation:	
File No:	Allegation:	
Assigned Date:	Date Closed:	
Reason closed:		
	☐ Withdrawal of attorney/ethical conflict: case assigned to:	
	☐ Withdrawal of attorney/failure of client to maintain contact	
	☐ Withdrawal of attorney/client's actions	
☐ Withdrawal of attorney/other:		
☐ Other:		
☐ Entry of appealal		
, 11		
Con House		
Case Hours: Travel Hours:		
Traver Hours:		
Comments:		