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Name of Attorney: Phone: Name of Defendant: County: File Numbers in this case assignment: Severity Level: File No(s): Charge(s): File No(s): Severity Level: Charge(s): File No(s): Charge(s): Severity Level: File No(s): Charge(s): Severity Level: Severity Level: File No(s): Charge(s): File No(s): Charge(s): Severity Level: Offense Date: Date Closed: Assigned Date: ☐ Petition granted, in whole or part Reason closed: ☐ Petition denied ☐ 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: _____ Case Hours: Travel Hours: Comments: