## UNITED STATES DISTRICT COURT DISTRICT OF MASSACHUSETTS

## PURCHASE ORDER/REQUEST FOR PAYMENT FOR INTERPRETING SERVICES

									F	PLEASE PRIN	TOR TYPE	
V.				CASE NUMBER						_		
FROM:	Name											
	Address											
	City				State		Zip Code					
	Social Securi	ty Number					Telephone N	Number				
I hereby certify t	that I am	Certified		Prof. Ce	ertified		Non-Certified					
to interpret in the following Language				and executed a c					h the Court o	n		-
TYPE OF PROC	CEEDINGS:											
Des	scription:											
Loc	eation:											_
DATE:			Begin T	ime: _		am/ p	om	E	End Time:		am/ pm	
		HALF DAY			FULL D	OAY			Al	MOUNT		
Distance from	m residence to	location m	nust be mor	e than 30	) miles o	ne way in	order to clair	m any trave	l expenses.			
TRAVEL EXPENSES # OF MILES				@ PER MILE					AMOUNT			
	•	FOLLS PARKING						AMOUNT				
OTHER EXPENSES:			(Item	(Itemize and attach receipts)					AMOUNT			
Courtroom Deputy/CJA Attorney verification that info				ormation is correct and accurate:					(intials)			
DOCUMENT TI	RANSLATION:			DAT	`E:		_					
TOTAL # OF WORDS/PAGES				RATE PER WORD					AN	MOUNT		
OTHER EXPENSES:									AN	MOUNT		
								TOTAL AM	OUNT OF IN	VOICE		
and that no other		t, Federal Pub	lic Defender,	Community	y Defender	r Organizatio	n, or other attorr	neys or entities			ces Terms and Convices under the CJA	
Da	ate:						Signature:					
Date Approved:			Co	Certifying Officer:					Title:			
					09:		BCX-D01MAX		_			_
			IN'	TERPRET	TED DAT	FS: Effectiv	e February	1 2010				

Certified and Professionally Skilled - Full Day \$388 / Half Day \$210 / Overtime \$55 per house or part thereof
Language Skilled (Non-Certified) - Full Day \$187 / Half Day \$103 / Overtime \$32 per hour or part thereof \*\* Mileage .51 Eff. 1/1/2011