

CJA Voucher Interpreter Attachment

Name: _____

Language/Rate: _____

Date(s) of Service: _____

TIME

Duration of Meeting: Start Time _____ End Time _____ (excluding any breaks)
= _____ hour(s)/tenths of hours

Travel Time: Departure Time _____ from Location _____
Arrival Time _____ at Location _____
= _____ hour(s)/tenths of hours

Departure Time _____ from Location _____
Arrival Time _____ at Location _____
= _____ hour(s)/tenths of hours

Travel Time prorated for services provided to another client? Yes/No

If Yes, name client(s): _____

A. TOTAL TIME = _____ hour(s)/tenths of hours

EXPENSES

Total Number of Miles _____ @ _____ cent per mile = \$ _____

**Parking: \$ _____

**Metro: \$ _____

Mileage prorated for services provided to another client? Yes/No

If Yes, name client(s): _____

B. TOTAL TRAVEL EXPENSES = \$ _____

**Other Expense(s):description: _____ \$ _____

C. TOTAL OTHER EXPENSES = \$ _____

GRAND TOTAL OF TIME AND EXPENSES = \$ _____

**Required receipt(s) attached here: