UNITED STATES DISTRICT COURT DISTRICT OF MASSACHUSETTS

PURCHASE ORDER/REQUEST FOR PAYMENT FOR INTERPRETING SERVICES

					PLEASE PRINT OR TYPE					
V.				CASE NUMBER						
FROM:	Name									
	Address City			State		Zip Code				
	Social Secur	ity Number				Telephone 1	Number			
I hereby certify th to interpret in the		Certified Language	Pro	Prof. Certified Non-Certified and executed a contract with the Court on						
TYPE OF PROCE		Danguage				and executed	a contact with the count			
Loca									Remote	
DATE:		Begin Time: am/ pm				ı/ pm	End Time:		am/ pm	
Distance from	: 4	HALF DAY		<u>FULL 1</u>				AMOUNT		
Distance from residence to location must TRAVEL EXPENSES # OF MILES			—————	@ @	PER M		AMOUNT			
		TOLLS		PARKING	G			AMOUNT		
OTHER EXPENSES:			(Itemize and attach receipts)				AMOUNT			
Courtroom Deput	ty/CJA Attorne	y verification t	hat information is co	rrect and accu	ırate:		(in	tials)		
DOCUMENT TR	ANSLATION:		I	DATE:						
TOTAL # OF WO	ORDS/PAGES		F	VORD		AMOUNT				
OTHER EXPENSES:								AMOUNT		
				TOTAL AMOUNT OF INVOICE						
and that no other f	federal court un	it, Federal Pub		unity Defende	er Organiza	tion, or other attor	neys or entities obtaining		ces Terms and Conditions, rvices under the CJA or the	
Dat	re:					Signature:				
Date	Approved:		Certifyin	Certifying Officer:				Title:		
				0	92000-DXX	KBBCX-D01MAX	LJ/M-2523			
			INTE	RPRETER	RATES: F	Effective Janua	ry 1, 2024			

Federally Certified - Full Day \$566 / Half Day \$320 / Overtime \$80 per hour or part thereof Professionally Qualified - Full Day \$495 / Half Day \$280 / Overtime \$70 per hour or part thereof Language Skilled (Non-Certified) - Full Day \$350 / Half Day \$190 / Overtime \$44 per hour or part thereof