

**INTERPRETER'S REPORT OF SERVICES AND CLAIM FOR COMPENSATION AND EXPENSES**

TO: Clerk of Court for the Western District of Washington at Seattle/Tacoma.

PAYEE'S NAME: \_\_\_\_\_

PAYEE'S RESIDENCE \_\_\_\_\_

TAX ID NUMBER: \_\_\_\_\_

I request payment be made for interpreter services performed before:

\_\_\_\_\_  
(Name and Title of Presiding Judicial Officer)

In the case of:  
USA vs \_\_\_\_\_

\_\_\_\_\_  
(Magistrate/Criminal Case Number)

**TYPE OF SERVICE PERFORMED:**

- Initial appearance       Preliminary hearing       Arraignment       Trial       Sentencing
- Detention hearing       Plea       Motion hearing       Pretrial service officer interview
- Probation officer interview       Other \_\_\_\_\_

Date(s) service performed \_\_\_\_\_

Time(s) service performed \_\_\_\_\_ to \_\_\_\_\_  
EXPENSES (check one):  1/2 day service (4 hours or less)     full day service (4 hours or more)    TOTALS

Service Fees (itemize dates) \_\_\_\_\_ \$ \_\_\_\_\_

Mileage: Miles \_\_\_\_\_ @ \$.565/mile= \_\_\_\_\_ \$ \_\_\_\_\_  
Mileage allowed for round-trips from residence to courthouse. (Mileage rate as of 01/1/13)

Parking: Not To Exceed \$18.00 for Seattle and \$10.00 for Tacoma. \$ \_\_\_\_\_

Total Amount Claimed for Payment: \$ \_\_\_\_\_

Language interpreted: \_\_\_\_\_

Interpreter is:  Federally certified     Professionally Qualified     Language-Skilled  
Interpretation type:  Simultaneous     Consecutive     Summary     Written translation

CERTIFICATION: I certify under penalty of perjury that the foregoing is true and correct. I hereby certify that I rendered the services described herein, that said services were rendered in accordance with the Contract Court Interpreter Services Terms and Conditions, and that no other federal court unit, Probation, Pretrial Services, Federal Public Defender, Community Defender Organization, or other attorneys or entities obtaining interpreting services under the CJA or the Defender Services appropriation has been or will be billed for the same period of service, cancellation or travel expenses.

\_\_\_\_\_  
(Signature of Interpreter)      \_\_\_\_\_ (Date)  
\*\*\*\*\*

VERIFICATION: I verify that the above interpretation services were performed.

\_\_\_\_\_  
(Signature of Deputy Clerk, Pretrial Services Officer, Probation Officer)      \_\_\_\_\_ (Date)

**IN ORDER TO ENSURE PROMPT PAYMENT, ALL VOUCHERS SHOULD BE SUBMITTED NO LATER THAN ONE WEEK AFTER SERVICE IS PERFORMED. (See reverse side for instruction.)**

## INSTRUCTIONS

This voucher was created for usage in the United States District Court, Western District of Washington only. It replaces the AO 322 form (Interpreter's Report Of Services And Claim For Compensation And Expenses). It is to be used only if interpreter services were requested by the Clerk's Office, Pretrial Services, or Probation. All other interpreter services will be paid by the party that ordered the service. Any voucher submitted for payment for non-certified Spanish interpretation services must be accompanied by an affidavit stating that federally certified Spanish interpreters were unavailable for service.

Use this form to claim compensation and expenses and to report services rendered by an interpreter (other than CJA interpreters). The Court Interpreters Act, Public Law 95-539, enacted October 28, 1978, provides for the more effective use of interpreters in courts of the United States. The Act requires the Director of the Administrative Office of the United States Courts to report annually to the Congress with respect to requests for, and the use and effectiveness of, interpreters. This form is designed to support payments made to the interpreters and help collect data for the report to Congress.

### GENERAL

This form will be executed by the interpreter with the assistance of the clerk of court's office to support requests for payment to the interpreter. There is a general authorization to pay interpreters appointed by the court for interpreting judicial proceedings based on the Court Interpreters Act.

### PRESIDING JUDICIAL OFFICER

Indicate the name and title of the presiding judicial officer in whose court the interpreter services were provided, as well as the case name and number.

### PAYEE INFORMATION

Provide the complete name and address of the payee submitting the claim. (If the payee is not the interpreter, the interpreter's name and relationship to the payee should be provided parenthetically following the payee's address.) A taxpayer identifying number must be supplied UNLESS payment will be made to a corporation. The laws of the United States require the interpreter to furnish his/her taxpayer identifying number to the Director of the Administrative Office. I.R.C. §6109, 26 C.F.R. §301.6109-1© (1978). If the interpreter's taxpayer identifying number is a social security number, the following notice is given to the interpreter:

#### **NOTICE CONCERNING TAXPAYER IDENTIFYING NUMBER**

*You hereby are notified, pursuant to the Privacy Act of 1974, Public Law No. 93-579, §7(b), 88 Stat. 1896, 1909, that disclosure of your social security number is mandatory. The authority for the solicitation of your number is I.R.C. §§6041, 6109; and 26 C.F.R. §301.6109-1 (1978). The Director of the Administrative Office of the United States Courts will use your social security number to make information returns to the Secretary of the Treasury.*

### CERTIFICATION

The interpreter, under penalty of perjury, will date and sign the form as indicated.

### VERIFICATION OF SERVICE

The ordering party (i.e., Clerk's Office, Pretrial Service, Probation) shall sign and verify that services were performed. The payee must obtain this verification before the voucher can be submitted for payment.