



**UNITED STATES DISTRICT COURT
DISTRICT OF SOUTH CAROLINA
DIVISION**

Revision date: April 1, 2009

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| <p align="center">Interpreter Information</p> <p>Interpreter Name: Address: SS or Tax ID #: Language Interpreted: Phone #:</p> | <p align="center">Case Information</p> <p align="center">USA vs.</p> <p align="center"><u>Defendant's Last Name</u> <u>Case Number</u></p> |
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Interpreter Only

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|--|---|------------------|
| INTERPRETATION FEE | Certified or Professionally Qualified: full day \$384 half day \$208, overtime \$54 per hour or part thereof | |
| | Language Skilled: full day \$185, half day \$102, overtime \$32 per hour or part thereof | |
| TRAVEL INFORMATION | Departure time from residence: | |
| | Arrival time at court destination: | |
| | Departure time from court location: | |
| | Arrival time at residence at the end of travel: | |
| MILEAGE If traveled more than 30 miles one way from residence to courthouse | Number of miles round-trip: | |
| PARKING | | |
| SUBSISTENCE | Attachments must include an itemized list of all expenses. The only receipts required are from a hotel or any expense over \$25.00. All receipts must be original receipts. | |
| | TOTAL: | |
| Interpreter's Signature: | | Date of Service: |

Deputy Clerk Only

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|---|-------------------------------------|
| Judge: _____ | Courtroom Deputy's Signature: _____ |
| Date of Service: | |
| Event Type: <input type="checkbox"/> Jury Trial | # of Days: _____ |
| <input type="checkbox"/> Bench Trial | # of Days: _____ |
| <input type="checkbox"/> Other event | |
| | # of Interpreters used: _____ |
| | # of Interpreters used: _____ |

Procurement Only

| | |
|---|-------------|
| Reviewed for Payment | |
| _____ - 092000 - DXXBBCX - D04SCX_____ - 2523 | |
| AMOUNT \$ _____ | Date: _____ |
| PR #: _____ | P2 #: _____ |
| Signature: _____ | |