CJA 24 AUTHORIZATION AND VOUCHER FOR PAYMENT OF TRANSCRIPT (5-99)

1. CIR./DIST./ DIV. CODE	2. PERSON REPRESENTED		VOUCHER NUMBER
3. MAG. DKT./DEF. NUMBER	4. DIST. DKT./DEF. NUMBER	5. APPEALS DKT./DEF. NUMBER	6. OTHER DKT. NUMBER
7. IN CASE/MATTER OF *(Case Name)*	8. PAYMENT CATEGORY ☐ Felony ☐ Petty Offense ☐ Misdemeanor ☐ Other ☐ Appeal _____	9. TYPE PERSON REPRESENTED ☐ Adult Defendant ☐ Appellant ☐ Juvenile Defendant ☐ Appellee ☐ Other: _____	10. REPRESENTATION TYPE *(See Instructions)*

11. OFFENSE(S) CHARGED (Cite U.S. Code, Title & Section) *If more than one offense, list (up to five) major offenses charged, according to severity of offense.*

REQUEST AND AUTHORIZATION FOR TRANSCRIPT

12. PROCEEDING IN WHICH TRANSCRIPT IS TO BE USED *(Describe briefly)*

13. PROCEEDING TO BE TRANSCRIBED *(Describe specifically). NOTE: The trial transcripts are not to include prosecution opening statement, defense opening statement, prosecution argument, defense argument, prosecution rebuttal, voir dire or jury instructions, unless specifically authorized by the Court (see Item 14).*

14. SPECIAL AUTHORIZATIONS	JUDGE'S INITIALS
A. Apportioned Cost_____% of transcript with *(Give case name and defendant)*	
B. ☐ Expedited ☐ Daily ☐ Hourly Transcript ☐ Realtime Unedited Transcript	
C. ☐ Prosecution Opening Statement ☐ Prosecution Argument ☐ Prosecution Rebuttal ☐ Defense Opening Statement ☐ Defense Argument ☐ Voir Dire ☐ Jury Instructions	
D. In this multi-defendant case, commercial duplication of transcripts will impede the delivery of accelerated transcript services to persons proceeding under the Criminal Justice Act.	

15. ATTORNEY'S STATEMENT

As the attorney for the person represented who is named above, I hereby affirm that the transcript requested is necessary for adequate representation. I, therefore, request authorization to obtain the transcript services at the expense of the United States pursuant to the Criminal Justice Act.

Signature of Attorney _____ Date _____

Printed Name _____

Telephone Number: _____

☐ Panel Attorney ☐ Retained Attorney ☐ Pro-Se ☐ Legal Organization

16. COURT ORDER

Financial eligibility of the person represented having been established to the Court's satisfaction, the authorization requested in Item 15 is hereby granted.

Signature of Presiding Judicial Officer or By Order of the Court _____

Date of Order _____ Nunc Pro Tunc Date _____

CLAIM FOR SERVICES

17. COURT REPORTER/TRANSCRIBER STATUS

☐ Official ☐ Contract ☐ Transcriber ☐ Other

18. PAYEE'S NAME *(First Name, M.I., Last Name, including any suffix)*, AND MAILING ADDRESS

Telephone Number: _____

19. SOCIAL SECURITY NUMBER OR EMPLOYER ID NUMBER OF PAYEE

20. TRANSCRIPT	INCLUDE PAGE NUMBERS	NO. OF PAGES	RATE PER PAGE	SUB-TOTAL	LESS AMOUNT APPORTIONED	TOTAL
Original						
Copy						
Expenses *(Itemize)*						
					TOTAL AMOUNT CLAIMED :	

21. CLAIMAINT'S CERTIFICATION OF SERVICE PROVIDED

I hereby certify that the above claim is for services rendered and is correct, and that I have not sought or received payment *(compensation or anything of value)* from any other source for these services.

Signature of Claimant/Payee _____ Date _____

ATTORNEY CERTIFICATION

22. CERTIFICATION OF ATTORNEY OR CLERK I hereby certify that the services were rendered and that the transcript was received.

Signature of Attorney or Clerk _____ Date _____

APPROVED FOR PAYMENT – COURT USE ONLY

23. APPROVED FOR PAYMENT

Signature of Judicial Officer or Clerk of Court _____ Date _____

24. AMOUNT APPROVED

INSTRUCTIONS
AUTHORIZATION AND VOUCHER FOR PAYMENT OF TRANSCRIPT
CJA FORM 24

Read these instructions carefully before completing the form. Accuracy and thoroughness will aid in prompt payment of the claim. If possible, use a typewriter to complete the form; otherwise, write legibly with a ballpoint pen (preferably black or dark blue ink). If the form is system generated, Items 1 through 11 will be preprinted on the form. If additional space is needed to complete an item, attach a continuation sheet to the form.

Item 1. **CIR./DIST./DIV. CODE**: This six-character court location code is the circuit, district and divisional office codes of the court where authorization is given to procure the transcript.

Item 2. **PERSON REPRESENTED**: Give the full name of the person whom representation is being provided (i.e., the person whom transcript services are requested). Only one name should be entered in Item 2 "Person Represented."

Items 3-6: **DOCKET NUMBERS**: Provide the case file number or the miscellaneous number of the case for which representation is provided. Enter the number using the last two digits of the calendar year (YY), the sequential number assigned by the court (NNNNN), and the defendant number (DDD) if applicable. Thus, the docket number format is YY-NNNNN-DDD. Complete a separate voucher for each transcript requested. Prorate the total transcript cost among the cases when costs are shared or apportioned. Cross reference all related claims for which costs are prorated or apportioned.

Item 7: **IN CASE/MATTER OF (CASE NAME):** In criminal cases, enter *U.S. vs Defendant's Name*. If it is a multiple defendant case, give the case cite as provided on the information or indictment (e.g., *U.S. vs. Lead Defendant's Name, et al.)* If the person represented is not a defendant (e.g. material witness), enter the first named defendant in the court's recording of the case. If this is a civil case (e.g., habeas corpus), enter the *Name of the Petitioner vs. the Name of the Respondent* and include the respondent's title. If other than a criminal or civil case (i.e., miscellaneous matters), enter *"In the Matter of"* followed by *the Name of the Person Represented.*

Item 8. **PAYMENT CATEGORY:** Check the appropriate box that defines the statutory threshold for this representation type. If "Other" payment category is checked, specify the category within the scope of the Criminal Justice Act (CJA). See paragraph 2.22 B(2), of the *Guidelines for the Administration of the CJA and Related Statutes* (*CJA Guidelines*), Volume VII, *Guide to Judiciary Policies and Procedures.*

Item 9. **TYPE PERSON REPRESENTED:** Check the box that categorizes the legal status of the person represented.

Item 10. **REPRESENTATION TYPE:** From the list below, select the code that describes the type of representation:

CC A defendant charged in a criminal case with an offense(s) that is a felony, misdemeanor, or petty offense under the U.S. Code, or an assimilated crime under a state code.

NT A new trial either directed from the court of appeals on remand or as a result of a mistrial

MA Motion attacking a sentence (28 U.S.C. § 2255)

MC Motion to correct or reduce sentence (Fed. R. Crim. P. 35)

HC Habeas Corpus, non-capital (28 U.S.C. § 2254)

BP Bail Presentment

WI Material Witness

WW Witnesses (Grand Jury, a Court, the Congress, a Federal Agency, etc.)

PR Probation Revocation

PA Parole Revocation

SR Supervised Release Hearing

EW Extraordinary Writs (Prohibition, Mandamus)

CH Mental Competency Hearings (see Chapter 313 of Title 18 U.S. Code)

PT Pretrial Diversion

EX Extradition Cases (Foreign)

Other (e.g., line ups, consultations, prisoner transfer, etc.)

Item 11. **OFFENSE(S) CHARGED:** Cite the U.S. Code, title and section, of the offense or offenses for which the person represented is charged. If a death penalty case, cite the charge for which the death penalty is being sought. If a civil matter, such as a capital habeas representation or motion attacking sentence, cite 28 U.S.C. § 2254 or 28 U.S.C.§ 2255, respectively.

Item 12. **PROCEEDINGS IN WHICH TRANSCRIPT IS TO BE USED:** Describe briefly the nature of the proceeding or other purpose for which the transcript is required (e.g., motion hearing, trial preparation, trial, appeal).

Item 13. **PROCEEDINGS TO BE TRANSCRIBED:** Describe specifically the type of proceedings to be transcribed (e.g., preliminary hearing, arraignment, plea, sentencing, trial, motions, parole or probation proceedings, state court proceedings, deposition). For restrictions on trial transcripts, see Item 14.

Item 14. **SPECIAL AUTHORIZATIONS (services other than ordinary transcript):** The following services are permitted only if the judicial officer gives special authorization (initialed by the judicial officer where required on the form):

A. ***Apportionment of Transcript Cost.*** The Judicial Conference has stated that the total cost of accelerated transcript services should not be routinely apportioned among parties.

B. ***Types of Transcripts***:

note: All but ordinary transcript services, to be delivered within 30 days after receipt of an order, require special prior judicial authorization.

(1)**Expedited** -- to be delivered within 7 calendar days after receipt of an order.

(2) **Daily** -- to be delivered following adjournment and prior to the normal opening hour of the court on the following morning, whether or not it is an

actual court day.

(3) **Hourly** -- ordered under unusual circumstances to be delivered within 2 hours.

(4) **Realtime Unedited Transcript** -- to be delivered electronically during the proceedings or immediately following adjournment.

C. ***Trial Transcripts*** -- In the absence of special prior authorization, trial transcripts shall exclude the prosecution opening statement, the defense opening statement, the prosecution argument, the defense argument, the prosecution rebuttal, the voir dire and jury instructions.

D. ***Multi-defendant Cases*** -- According to Judicial Conference policy, no more than one transcript should be purchased from the court reporter on behalf of CJA defendants in multi-defendant cases. Arrangements should be made for duplication of enough transcript copies, at commercially competitive rates, for each CJA defendant for whom a transcript has been approved. The cost will be paid from CJA funds. This policy does not preclude the court reporter from providing copies at the commercially competitive rate. In addition, the court may grant an exception to this policy based upon a finding that application of the policy will unreasonably impede the delivery of accelerated transcripts to persons proceeding under the CJA. See paragraph 3.12C of the *CJA Guidelines.*

Item 15. **ATTORNEY'S STATEMENT:** The court-appointed counsel or the person proceeding *pro se* under the CJA must sign and date the affirmation statement, and print or type the signatory's name. Check the appropriate box to designate your status as a CJA panel attorney, a retained attorney whose client is unable to afford the cost of the transcript service, a person who qualifies for representation under the CJA but who has chosen to proceed *pro se*, or an attorney from a legal organization (bar association, legal aid agency, or community defender organization not receiving a periodic sustaining grant under the CJA).

Item 16. **COURT ORDER:** This order must be signed and dated by the presiding judicial officer, indicating eligibility under the CJA. An additional court order is not necessary to authorize procurement and payment for this service.

Item 17: **COURT REPORTER/TRANSCRIBER STATUS:** Check the appropriate box that indicates the reporter's status. Generally, this information will be provided by the court, the reporter, or the clerk.

Item 18: **PAYEE'S NAME, MAILING ADDRESS AND TELEPHONE NUMBER:** Print or type the full name and mailing address of the payee. Provide the payee's telephone number, including the area code.

Item 19: **SOCIAL SECURITY NUMBER OR EMPLOYER ID NUMBER OF PAYEE:** Provide your Social Security Number (SSN) or your Employer Identification Number (EIN) that you use to report earnings to the Internal Revenue Service (IRS).

Item 20. **TRANSCRIPT COSTS:** Cost per page for transcripts prepared by official court reporters, contract court reporters, and transcribers of taped proceedings may not exceed the rates in effect at the time the authorization. Generally, persons proceeding under the CJA may receive only the original or a copy of the transcript. Two lines for transcript costs have been provided on the form to reflect that the page rate will vary depending upon whether the party received the original or a copy, and that certain portions may be provided at a higher rate for accelerated service. (If more lines are needed to reflect these factors, attach an additional sheet and record the information in the same format as on the form.) A page of transcript shall consist of 25 lines

typed on 8 -1/2 x 11 inch paper, prepared for binding on the left side, with 1-3/4 inch margin on the left side and a 3/8 inch margin on the right side. Typing shall be 10 letters per inch. Provide the page numbers for each segment of the transcript.

Note: Claim reimbursement for only the following expenses: (1) Travel and subsistence of assistants who aid in preparation of daily or hourly transcript, if authorized in advance by the presiding judicial officer; and (2) Extraordinary delivery costs, such as courier services or express mail (regular postage is not reimbursable). Specify and attach receipts or other supporting documentation for expenses.

Item 21. **CLAIMANT'S CERTIFICATION:** Generally, the person providing the transcript services will sign this certification. However, if the transcript has been paid for, the attorney can request reimbursement for the cost on this form by signing the claimant's certification. In that event, the attorney also must be listed as the payee in Item 18, and the information required in Items 18 and 19 (SSN, payee's mailing address and telephone number) should relate to the attorney. If the 1099 should be sent to the attorney's Law Firm, indicate the TIN of the Law Firm or corporation and the Law Firm or corporate name in Item 19.

Items 22. **CERTIFICATION OF ATTORNEY OR CLERK.** The attorney's signature in Item 22 verifies that the transcript was received. Clerks of court may verify receipt on behalf of persons proceeding *pro se*, and on behalf of all CJA parties in districts if the practice is authorized by local rule of the court.

Item 23. **APPROVED FOR PAYMENT:** After reviewing for reasonableness and compliance with the *CJA Guidelines*, the presiding judicial officer must sign and date the voucher .

Item 24. **AMOUNT APPROVED.** The amount approved for payment.