ED/TN FO (Rev. 02/20		ED/TN VOUCHER FOR ATTENDANCE FEES FOR CONTRACT COURT REPORTER						VOUCHER NO. (Crt Rptr Use)			
CONTRACTOR'S NAME D/B/A (if different from Contractor Name)											
STREET A	DDRESS	CONTRACTOR TAX ID#:									
CITY AND STATE ZIP CODE			ODE	FULL-DAY RATE HALF-			LF-DAY	F-DAY RATE OVE		RTIME RATE	
				Actual	Actual Time of Reporting						
Date	Last name of Presiding Judicial Officer	Case Number	Hearing Type	Morning	Afternoon		Overtime Name of Attending Court Reporter		Claimed Compensation		
						o nom s					
OTHER COMPENSATION (Travel outside contract geographical area):											
TRAVEL - TOTAL MILES: x RATE											
OTHER (Explain):											
TOTAL:											
CONTRACTOR CERTIFICATION I hereby certify that the above is a correct statement of the services performed, of expenses incurred, and of the amount due under the above contract.											
SIGNATURE OF CONTRACTOR (or authorized agent) DATE											
		I hereby c	COURT CERTIF ertify the above as corr	ICATION ect and prop	er for payme	nt.	•				
SIGNATURE OF COURT REPRESENTATIVE							DATI	3			