

**Pro Se  
In-State Court Reporter Attendance  
Invoice/Voucher Cover**

Name of Court Reporter 1 Invoice Number 5  
 Firm Name 2 Case Number 6  
 Tax ID Number 3 Case Caption 7  
 Individual Ordering Transcripts 4 County & Circuit 8  
 Judge Name 9

**Total Invoice Amount \$** 10

**11** **Order Information:**

Transcript       Expedited      Reason expedited:  
 CNA (Certification of Non-Attendance):      Number  X      Rate  = \$   
 (1 CNA per Witness)

**12** **Deposition Information:**

Per Diem Rate:	<input type="checkbox"/> Half Day	<input type="checkbox"/> Full Day	Service Date
Hourly Rate:	Start Time	End Time	Rate <input type="text"/>
Number of Witnesses Deposed	<input type="text"/>	Name of Witness(s)	Rate <input type="text"/>

**13** **Court Reporter Certification**

I certify that I was authorized to attend the deposition; that the amounts reflected on the invoice are true and accurate charges; and that the work in connection herewith was actually performed.

14 Court Reporter Signature (Blue Ink)      15 Date  
16 Court Reporter Printed Name  
17 Phone Number

**18** **Attendance Certification**

I hereby certify that the services provided by the above named court reporting firm were necessary and useful in the representation of the above named defendant who is indigent for costs. I further certify that the reported time, rate, and names of witnesses are true and accurate.

19 Signature of Pro Se Individual      20 Date  
21 Pro Se Individual Printed Name  
22 Address  
23 Phone Number

JAC Date Stamp

**IMPORTANT:** Original Signatures required, JAC will not accept copies or facsimiles of this form.  
 Attendance at court hearings are paid by Court Administration.  
**NOTE:** JAC will pay for original and up to 1 copy for all transcripts except appeal transcripts, where original and up to 2 copies are allowed unless restricted by Indigent Services Committee in the circuit in which you were appointed.

1. Name of Court Reporter – Use first name, middle initial and last name.
2. Firm Name
3. Tax Identification Number - Supply Tax ID Number of Court Reporter or Firm. If you do not have a Tax Identification Number, please enter your social security number. **NOTE:** Payment cannot be processed without this information.
4. Individual Ordering Transcript(s) – Use first name, middle initial and last name.
5. Invoice Number - Invoice tracking number generated by reporting firm.
6. Case Number - Provide court issued case number for which the transcription was ordered. If a deposition is utilized in multiple cases for the same defendant, enter the lowest of the case numbers.
7. Case Caption – Give style of the case, i.e., “State of Florida vs. John Brown” or “In the Interest of J.B.” in Dependency cases using only the first and last initials.
8. County & Circuit – Provide both the county and circuit of court.
9. Judge Name – Provide the name of the Judge presiding over the case.
10. Total Invoice Amount - Provide the total amount billed for this invoice.
11. Transcript Information – Check the appropriate box(s). If expedited, state reason for expedition. If a Certification of Non-Attendance is produced, enter the number of certifications (number of people), the rate per certification, and the total CNA amount. No more than 1 CNA can be ordered per witness.
12. Deposition Information – Enter the date of the service along with the start and end times. Provide the rate, number of witnesses deposed, and the name of each.
13. Court Reporter Certification Paragraphs – Signing this document affirms understanding of and agreement to this statement.
14. Court Reporter Signature – Sign, in blue ink, on the line provided. **NOTE:** The signature must be original and must be signed by the individual who took the transcription.
15. Date – Include date certifying invoice.
16. Court Reporter Printed Name - Use first name, middle initial and last name.
17. Phone Number – Provide phone number where court reporter can be reached.
18. Attendance Certification Paragraph – Signing this document affirms understanding of and agreement to this.
19. Signature – Person present at deposition, Pro Se Individual, should sign, in blue ink, on the line provided.
20. Date – Include date certifying invoice.
21. Printed Name – Use Pro Se Individual’s first name, middle initial and last name.
22. Address
23. Phone Number

All services are subject to audit and the Justice Administrative Commission reserves the right to offset an over-billing against subsequent requests.