

**UNITED STATES DISTRICT COURT**  
**Northern District of California**  
**Criminal Justice Act Unit**

For services provided during  
calendar year **2026**

**SERVICE PROVIDER'S CERTIFICATION OF SERVICE**

**CASE INFORMATION**

Case Number: \_\_\_\_\_

Defendant: \_\_\_\_\_

**SERVICE PROVIDER INFORMATION**

Interpreter Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Attorney Name: \_\_\_\_\_

**VOUCHER SERVICE PERIOD**

Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_

**SERVICES & EXPENSES**

**Compensation** \_\_\_\_\_

Miles Driven \_\_\_\_\_

Mileage Rate \_\_\_\_\_

**Total Mileage\*\*** \_\_\_\_\_

Travel Expenses\* \_\_\_\_\_

Other Expenses \_\_\_\_\_

**Total Expenses** \_\_\_\_\_

**Total Compensation & Expenses** \_\_\_\_\_

**INITIAL EACH OF THE TWO STATEMENTS BELOW:**

\_\_\_\_\_ I hereby certify that the above claim is for services rendered and is true and correct.

\_\_\_\_\_ I have not received payment (compensation or anything of value) from any other source for these services.

\_\_\_\_\_  
Signature (wet or electronic)

\_\_\_\_\_  
Date

\* "Travel Expenses" include lodging, parking, tolls, etc.

\*\* This form cannot be processed without a signature. Signature may be wet or electronic.