



Administrative Office
of the United States Courts
Department of Technology Services

CJA eVoucher

Attorney User Manual

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Contents

Nota Bene: Edit Before Using!	2
Introduction	3
Panel Management.....	3
Voucher and Authorization Request Submission	3
Browser Compatibility.....	3
Court Appointment.....	3
Accessing the CJA eVoucher Program.....	4
Navigating in the CJA eVoucher Program	6
Customizing the Home Page	7
My Profile.....	8
Changing My Profile User Name and Password.....	9
Attorney Info.....	10
Billing Info	11
Holding Period.....	12
Continuing Legal Education (CLE)	13
Appointments' List	15
View Representation.....	16
Creating the CJA-20 Voucher	17
Entering Services.....	18
Entering Expenses	20
Claim Status	22
Documents	24
Signing and Submitting to Court	25
CJA-20 Quick Review Panel	28
Reports and Case Management.....	29
Defendant Detailed Budget Report	30
Defendant Summary Budget Report.....	31
Creating a CJA-21 Voucher.....	32
Submitting an Authorization Request for Expert Services.....	39
Creating an Authorization for Transcripts (AUTH-24).....	43
Creating a CJA-24 Voucher.....	46
Creating a Travel Voucher.....	51

Nota Bene: Edit Before Using!

We are distributing this manual in Word format to make it easier for you to customize the content to follow your local rules and CJA rules. You may wish to include information about some of the following topics:

- Do you wish to include contact information for CJA administrators to the attorneys, or a website link?
- Are you using the CM/ECF link in eVoucher?
- Are attorneys allowed to edit their own profiles and billing information, or enter holding periods?
- Do attorneys still file any CJA-related documents in CM/ECF?
- What is your policy about interim payments?
- How does your site handle the CJA-24 Auth and the CJA-24 voucher? Are court reporters involved as experts? Does the attorney create the CJA-24?
- Do the panel attorneys use the Continuing Legal Education (CLE) tracking feature in eVoucher?
- Do the attorneys complete the travel authorization provided in eVoucher?
- Do you use the email proposed appointments available in eVoucher? How are attorneys notified of appointments?
- Can you provide more specific information about the kinds of documents you wish the attorney to attach for each document type?

Introduction

The CJA eVoucher system is a web-based solution for submission, monitoring, and management of all Criminal Justice Act (CJA) functions. The eVoucher program allows for:

- Online authorization requests by attorneys for service providers.
- Online voucher completion by the service provider, or by the attorney acting for the service provider.
- Online voucher review and submission by the attorney.
- Online submission to the court.

Unless the court has indicated otherwise, attorneys are generally required to create and submit vouchers for their service providers and associates. The program includes the following modules:

Panel Management

- Allows attorneys to manage their own account information including address, phone, firm associations, and applicable CLE credits
- Allows for submission of holding periods or a specific amount of time taken off for medical leave, vacation, etc.

Voucher and Authorization Request Submission

- Authorization requests by attorneys for expert services
- Requests by attorneys for interim payment
- Supporting document uploads to vouchers or authorization requests
- Reports for attorneys to take an active part in monitoring costs
- Automatic email notification to attorney of approval or rejection of vouchers and authorization requests

Browser Compatibility

- Windows: Chrome 62, Edge 16, Firefox 57, Internet Explorer 10.1 with Compatibility Mode, Internet Explorer 11
- Apple Macintosh: Safari 10.1

Court Appointment

When you make an appointment, the program automatically generates an email message to the appointed attorney. The email confirms the appointment and provides a link to the CJA eVoucher program.

Some courts may send a proposed email to the attorney, awaiting acceptance of a specific case.

Accessing the CJA eVoucher Program

Your court provides information on how to access eVoucher. It is suggested that you bookmark it for easier access. Log on using the user name and password you were provided, and click **Sign in**.

Sign in to CJA eVoucher

Please enter your username and password to continue.

Username

Password

[Forgot your password?](#)

Sign in

You are required to change your password within **30 days** of the first time you log on to eVoucher. Passwords must:

- Be at least eight characters in length.
- Contain one lowercase character.
- Contain one uppercase character.
- Contain one special character.
- Be alphanumeric.
- Not be a password used in the past 365 days.

You are required to change your password every 180 days.

If you forget your user name or password, click the **Forgot your password** link.

Username

Password

[Forgot your password?](#)

Sign in

Enter your user name and email address and click **Recover Logon**. You will receive an email offering help. The link provided in the password reset email is valid for 15 minutes and can only be accessed one time.

Forgot your Login?

Please tell us your username AND email address. We will send you an email to reset your password if there is a match in our records.

Username



Email



[Back to sign in](#)

Recover Logon

Home Page

Your home page provides access to all of your appointments and vouchers. Security prohibits you from viewing information for any other attorney. Likewise, no one else has access to your information.

My Active Documents				
To group by a particular Header, drag the column to this area.			Search:	
Case	Defendant	Type	Status	Date Entered
3:19-MJ-04562-...	Mister Badman (# 4562) Claimed Amount: 0.00	TRAVEL	Voucher Entry Edit	12/11/2019
3:19-MJ-04562-...	Mister Badman (# 4562) Claimed Amount: 0.00	TRAVEL	Voucher Entry Edit	01/28/2020
Page 1 of 3 (30 items)				

Appointments' List	
Appointments	Defendant
Case: 3:19-MJ-04562-JL Defendant #: 4562 Case Title: USA vs Badman Attorney: Atty Longoria	Defendant: Mister Badman Representation Type: DR 1 - Drugs Minus 2 Order Type: Federal Defender Order Date: 06/06/19 Pres. Judge: Judge Longoria Adm./Mag Judge:
Case: 1:19-MJ-96325-JL Defendant #: 9876 Case Title: Voucher vs USA Attorney: Atty Longoria	Defendant: Practice Voucher Representation Type: DRA - Drug Minus 2 Appeal Order Type: Appointing Counsel Order Date: 06/10/19 Pres. Judge: Judge Longoria Adm./Mag Judge:
Page 1 of 1 (10 items)	

My Proposed Assignments	
Appointments	Defendant
All cases have been currently assigned	
No data	

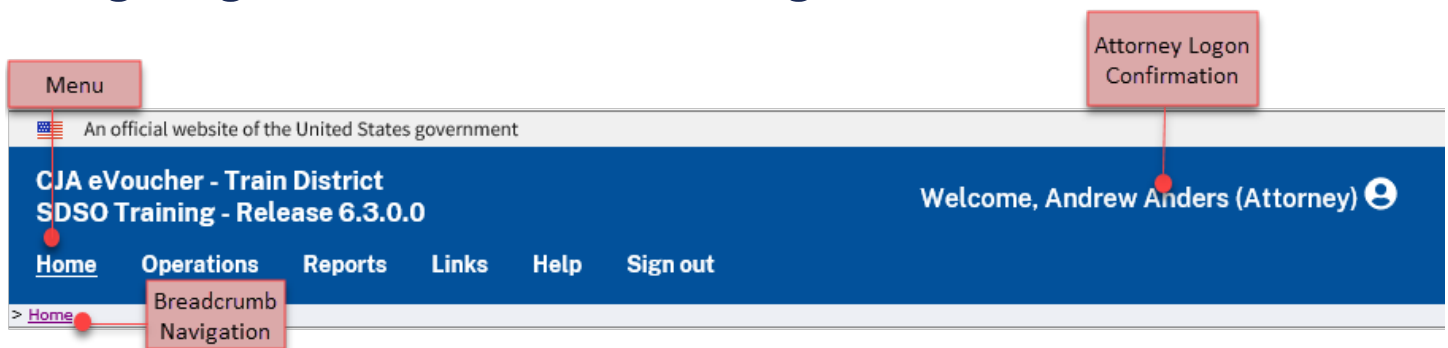
My Submitted Documents				
To group by a particular Header, drag the column to this area.			Search:	
Case	Defendant	Type	Status	Date Entered
1:19-MJ-963... Start: 06/10/2019 End: 07/31/2019	Practice Voucher (# 98... Claimed Amount: 263.38	CJA-21 Longoria Expert Accountant	Submitted to Court 0101.0000389 FINAL PAYMENT	07/24/2019
1:19-MJ-963... Start: 06/10/2019 End: 07/31/2019	Practice Voucher (# 98... Claimed Amount: 600.00	CJA-21 Longoria Expert Accountant	Submitted to Court 0101.0000391 FINAL PAYMENT	07/24/2019
Page 1 of 4 (34 items)				

My Service Provider's Documents				
To group by a particular Header, drag the column to this area.			Search:	
Case	Defendant	Type	Status	Date Entered
3:19-MJ-04... Start: 06/06/2019 End: 06/07/2019	Mister Badman (# 4562) Claimed Amount: 730.35 Approved Amount: 730.35	CJA-21 Misses Expert Computer Forensics Expert	Voucher Closed 0101.0000384 FINAL PAYMENT	06/07/2019
3:19-MJ-04... Start: 06/06/2019 End: 06/07/2019	Mister Badman (# 4562) Claimed Amount: 0.00	CJA-21 Misses Expert Chemist/Toxicologist	Voucher Closed 0101.0000387	07/23/2019
Page 1 of 2 (16 items)				

Closed Documents				
To group by a particular Header, drag the column to this area.			Search:	
Case	Defendant	Type	Status	Date Entered
3:19-MJ-04562... Start: 06/06/2019 End: 06/07/2019	Mister Badman (# 4562) Claimed Amount: 4,234.21 Approved Amount: 4,234.21	CJA-20 Atty Longoria	Voucher Closed 0101.0000378 FINAL PAYMENT	06/07/2019
3:19-MJ-04562... Start: 06/06/2019 End: 06/07/2019	Mister Badman (# 4562) Claimed Amount: 730.35 Approved Amount: 730.35	CJA-21 Misses Expert Computer Forensics Expert	Voucher Closed 0101.0000384 FINAL PAYMENT	06/07/2019
Page 1 of 5 (48 items)				

Folder Name	Contents
My Active Documents	This folder contains documents that you are currently working on or that have been submitted to you by an expert service provider. These documents are waiting for you to take action.
Appointments' List	This is a quick reference to all your appointments.
My Proposed Assignments	Cases appear in this folder if an appointment has been proposed to you and you have not accepted or rejected it.
My Submitted Documents	This folder contains vouchers for yourself, or your service provider, that have been submitted to the court for payment. Documents submitted to the court requesting expert services or interim payments also appear in this folder.
My Service Provider's Documents	This folder contains all the vouchers for your service providers, including: <ul style="list-style-type: none"> • Vouchers in progress by the experts. • Vouchers submitted to the attorney for approval and submission to the court. • Vouchers signed off by the attorney and submitted to the court for payment.
Closed Documents	This folder contains documents that have been paid or approved by the court. Closed documents only display for open cases. Closed documents display until they are archived and/or for 60–90 days after the appointment is terminated. They are still accessible through the Appointment page.



Navigating in the CJA eVoucher Program



Menu Bar Item	Description
Home	Click to access the eVoucher home page.
Operations	Click to search for specific appointments.
Reports	Click to view selected reports you may run on your appointments.
Links	Click to access links to CJA resources such as forms, guides, publications, etc.
Help	Click to access: <ul style="list-style-type: none"> • Another link to your profile. • Contact Us email. • Privacy Notice. • eVoucher help documentation for attorneys and experts.
Sign out	Click to log off of the eVoucher program.


Customizing the Home Page

Customizing your home page allows you to alter the manner in which your information is displayed in the folders.

Expand/Collapse a Folder: Click the plus sign  to expand a folder. Click the minus sign  to collapse a folder.

Resize a Column

Step 1

Along the folder headings (e.g., Case, Description, Type, etc.), move your cursor to the line between the columns until a double arrow  appears.

Step 2

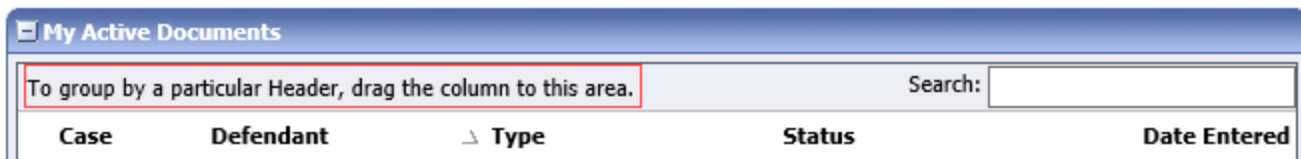
Drag the line in the desired direction to enlarge or reduce the column size.

Note: The folder size does not increase; therefore, some columns may move off the screen.

Group by Column Heading: You can sort all the information within a folder by grouping documents by column header. All folders displaying the group header bar can be sorted in this manner.

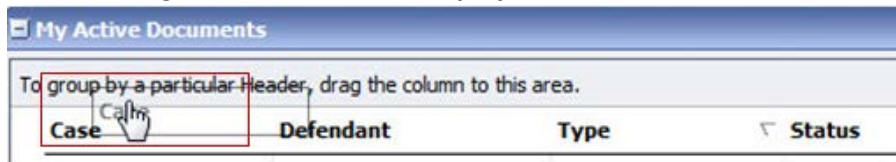
Step 1

Click in the header for the column you wish to group.



Step 2

Click and drag the header to the **Group by** header bar.



Step 3

All the information in that folder is now grouped and sorted by that selection.



My Profile

In the My Profile section, the attorney can:

- Change the password (Login Info section).
- Edit contact information, phone, email, and/or physical address (Attorney Info section).
- Update the Social Security number (SSN) or employee identification number (EIN), and any firm affiliation (Billing Info section). Copies of a W-9 must be provided to the court, and any changes to the SSN after the first logon must be made through the court.
- Add a time period in which the attorney will be out of the office (Holding Period section).
- Document any CLE attendance.

To access the My Profile page, from the menu bar, click **Help** and then click **My Profile**, or click the **My Profile** link to the right of the menu bar.



The My Profile page appears.

Section	Details	Action
Login Info Your Login information	UserName Anders	Edit
Attorney Info Your personal info	Bar Number: Your Name: Andrew Anders Your Contact Info: Phone: 210-833-5623 Fax: deadmail@support.aobc.uscourts.gov deadmail@support.aobc.uscourts.gov deadmail@support.aobc.uscourts.gov Your Address: 110 Main Street San Antonio, TX 78210 US	Edit
Billing Info List all available billing info records	Your default billing info is: Andrew Anders Billing Code: 0101-000001 110 Main Street San Antonio, TX 78210 - US Phone: 210-833-5623 Fax:	Select Add Edit
Holding Period	There is 1 period of time during which case cannot be taken.	View
Continuing Legal Education	No info has been stored. Please click VIEW to type your info.	View

Changing My Profile User Name and Password

Step 1

In the Login Info section, click **Edit** to change your password.

> Help > [My Profile](#) Welcome Andrew Anders (Attorney)

Login Info
Your Login information

UserName **Anders** Edit

Step 2

To change your user name, type the new user name and click the **change** link. The “The Username has been changed” message appears. To reset your password, click the **reset** link.

> Help > [My Profile](#) Welcome Andrew Anders (Attorney)

Login Info
Your Login information

Username Anders change Close

Password **** reset

Step 3

In the **Password** field, enter the new password, and then reenter it in the **Confirm** field. Click **Reset** to save.

> Help > [My Profile](#) Welcome Andrew Anders (Attorney)

Login Info
Your Login information

Username Anders change

Password ***** * Strength: Strong

Confirm ***** *

Reset cancel

Step 4

Click **Close** to exit the Login Info section.

> Help > [My Profile](#) Welcome Andrew Anders (Attorney)

Login Info
Your Login information

Username Anders change Close

Password **** reset

Attorney Info

Step 1

In the Attorney Info section, click **Edit** to access your personal information.

Attorney Info Your personal info	Bar Number: Your Name: Andrew Anders	<div>Edit</div>
	<i>Your Contact Info:</i> Phone: 210-833-5623 Cell Phone: 210-555-1234 Fax: lisa_ornelas@aotx.uscourts.gov deadmail@support.aotx.uscourts.gov deadmail@support.aotx.uscourts.gov	
<i>Your Address:</i> 110 Main Street San Antonio, TX 78210 US		

Step 2

Make any necessary changes, and then click **Save**.

Attorney Info Your personal info SSN Instructions: If you are an appointed panel attorney, you are required to enter your Social Security Number in the SSN field. If you are an associate only, do not enter your Social Security Number in the SSN field. Payee Certification: This message informs you that the Name and TIN entered are collected pursuant to IRS Guidelines that govern what information must be collected by the judiciary for payments made to non-employees and other entities for services provided and for purposes of issuing a Form 1099-MISC. You have provided this information under penalties of perjury and certify that: 1 - The number entered as my SSN or EIN is my correct taxpayer identification number; and 2 - I am a U.S. citizen, U.S. resident alien, or other U.S. person (a partnership, corporation, company, or association created or organized in the U.S. or under the laws in the U. S.).	* Required Fields Bar Number <input type="text"/>		<div>Save</div> <div>cancel</div>
	Tax Identification Number: * (If on Panel) <input type="checkbox"/> Foreign Vendor? SSN: <input type="text"/> Confirm: <input type="text"/> First Name * <input type="text"/> Middle <input type="text"/> Last Name * <input type="text"/> Andrew <input type="text"/> Anders <input type="text"/>		
Main Email * <input type="text"/> lisa_ornelas@aotx.uscourts.gov 2nd Email <input type="text"/> deadmail@support.aotx.uscourts.gov 3rd Email <input type="text"/> deadmail@support.aotx.uscourts.gov		Phone * <input type="text"/> Cell Phone <input type="text"/> Fax <input type="text"/> 210-833-5623 210-555-1234	
Address 1 * <input type="text"/> City * <input type="text"/> 110 Main Street San Antonio Address 2 <input type="text"/> State * (US only) <input type="text"/> Zip * (US only) <input type="text"/> TEXAS 78210 Address 3 <input type="text"/> Country * <input type="text"/> UNITED STATES			

Notes:

- Each attorney (except associates) must enter their SSN into the user profile or they will not be paid.
- The **Country** field is automatically set to **UNITED STATES** unless otherwise indicated.
- If you are a foreign vendor, select the **Foreign Vendor** check box and enter the appropriate information.
- You can list as many as three email addresses. Notifications from eVoucher are sent to all email addresses.

Billing Info

Step 1

In the Billing Info section, click **Add** if no billing information is available. Click **Edit** to change the information already entered.

Billing Info

List all available billing info records

Your default billing info is:

Andrew Anders
 Billing Code: 0101-00002
 110 Main Street
 San Antonio, TX
 78210 - US
 Phone: 210-833-5623
 Fax:

Select

Add

Edit

Step 2

Make any necessary changes and click **Save**. If applicable, add billing information for a firm or an associate by clicking the corresponding radio button.

Billing Info

List all available billing info records

Billing Type:

☐ Self-Employed

☒ Firm

☐ Associate

Tax Identification Number:

EIN/TIN:

Confirm:

☒ Copy Address from Profile

Name:

Phone: Fax:

Address 1:

Address 2:

Address 3:

City: State: Zip Code:

Country:

Save

cancel

Billing Info

List all available billing info records

*** Required Fields**

Billing Type:

☐ Self-Employed
☐ Firm
☒ Associate

Billing Code:

Notes:

- Attorneys with preexisting agreements must enter the firm's EIN and name.
- Associates do not need to enter an SSN. When you click the **Associate** radio button for the billing type, no information is required in the **Billing Code** field. Once you save, the screen displays **Associate- No Billing Info**.
- See the Associates Functionality document to learn more about creating vouchers as an associate.
- Billing information must be entered before any payments can be made.
- The SSN/EIN is used when reporting income to the IRS.
- Select the **Copy Address from Profile** check box if your billing address is the same as your attorney info address.

Holding Period

Holding periods can be used for medical leave, vacation, etc. During this time, attorneys are not given a new assignment.

Step 1

In the Holding Period section, click **View**.

Holding Period

There are 9 periods of time during which cases cannot be taken.

Step 2

Click **Add**.

Holding Period

Search:

Starting	Ending	Notes
No Holding Period		
No data		

Step 3

In the corresponding fields, enter the starting date and ending date, along with any applicable notes. Click **Save**.

The screenshot shows a form titled "Holding Period". On the left is a light blue sidebar. The main area has a header with "Back" and "Save" buttons. Below the header are two date pickers: "Starting Date" (4/27/2020) and "Ending Date" (5/1/2020). Below the dates is a "Notes" text area containing the text "Vacation." The "Save" button, the date pickers, and the notes area are highlighted with red boxes.

Continuing Legal Education (CLE)

Step 1

In the Continuing Legal Education section, click **View** to access the CLE information.

The screenshot shows a section titled "Continuing Legal Education". To the right of the title, it says "No info has been stored. Please click VIEW to type your info." A "View" button is located in the top right corner of the section, highlighted with a red box.

Step 2

To add CLE information, click **Add**.

The screenshot shows the "Continuing Legal Education" section. At the top, there are buttons for "Back", "Edit", "Add", and "Delete". The "Add" button is highlighted with a red box. Below the buttons is a table with columns: "Files", "Credit", "Date", "Hours", and "Subject". A search bar is located to the right of the table. The table is currently empty, and the text "No Continuing Legal Education" and "No data" are visible at the bottom.

Step 3

Click the **Credit** drop-down arrow to select CLE categories. In the corresponding fields, enter the date, the number of hours, and a description. Click **Save**.

The screenshot shows the 'Continuing Legal Education' form. The 'Credit' dropdown is set to 'Sentencing-rel'. The 'Date' field contains '05/01/2014', 'Hours' is '0', and the 'Description' field is empty. The 'Save' button is highlighted with a red box. Below the form, a note states: 'Document After you save the information about this Continuing Education, you will be able to upload related documents.'

Note: After you save information, you can upload related PDF documents.

Step 4

Click **Browse** to upload and attach a PDF document. Then click **Save**.

The screenshot shows the 'Continuing Legal Education' form. The 'Credit' dropdown is set to 'Sentencing-rel', 'Date' is '05/15/2014', 'Hours' is '0', and the 'Description' field is empty. The 'Browse...' button is highlighted with a red box. The 'Save' button is also visible at the top.

The screenshot shows the 'Continuing Legal Education' grid. The grid has columns for Files, Credit, Date, Hours, and Subject. One entry is listed with '0' files, 'Sentencin...' credit, and '04/16/2020' date. The 'Edit' and 'Delete' buttons are highlighted with red boxes. The page number '1' and 'Page 1 of 1 (1 items)' are shown at the bottom.

Files	Credit	Date	Hours	Subject
0	Sentencin...	04/16/2020		

Note: All entries appear in the grid and can be accessed, edited, or deleted either by clicking the entry or clicking the **Edit** or **Delete** buttons.

Appointments' List

On your home page, locate the Appointments column in the Appointments' List section.

Step 1

Click the case number link to open the Appointment Info page.

Appointments	Defendant
Case: 1:14-CR-08805-AA Defendant #: 1 Case Title: USA v. Branson Attorney: Andrew Anders	Defendant: Jebediah Branson Representation Type: Criminal Case Order Type: Appointing Counsel Order Date: 03/03/14 Pres. Judge: Albert Albertson Adm./Mag Judge:

Appointment

In this page you will find a summary about this appointment, including a list of vouchers related to this appointment and links to create new vouchers

[View Representation](#)

Create New Voucher

AUTH [Create](#)
 Authorization for Expert and other Services

AUTH-24 [Create](#)
 Authorization for payment of transcript

BUDGETAUTH [Create](#)
 Authorization for Excess Attorney Fees and/or Expert and other Services on Budgeted Case

CJA-20 [Create](#)
 Appointment of and Authority to Pay Court-Appointed Counsel

CJA-21 [Create](#)
 Authorization and Voucher for Expert and other Services

CJA-24 [Create](#)
 Authorization and Voucher for Payment of Transcript

CJA-26 [Create](#)
 Statement for a Compensation Claim in Excess of the Statutory Case Compensation Maximum: District Court

TRAVEL [Create](#)
 Authorization for payment of Travel

Reports

[Appointment Report](#)

[Defendant Detail Budget Report](#)

[Detail budget info for defendant](#)

[Defendant Summary Budget Report](#)

[Totals only of budget info for defendant](#)

[Attorney Time](#)

[Case Detail Budget Report](#)

Appointment Info

1. CIR. DIST. DIV. CODE 0101	2. PERSON REPRESENTED Jebediah Branson	3. VOUCHER NUMBER
3. MAG. DKT/DEF. NUMBER 1:14-CR-08805-1-AA	4. DIST. DKT/DEF. NUMBER 1:14-CR-08805-1-AA	5. APPEALS DKT/DEF. NUMBER
6. IN CASE MATTER OF (Case Name) USA v. Branson	7. PAYMENT CATEGORY Felony (including pre-trial diversion of alleged felony)	8. TYPE PERSON REPRESENTED Adult Defendant
9. REPRESENTATION TYPE Criminal Case		10. REPRESENTATION TYPE Criminal Case
11. OFFENSE(S) CHARGED 15:1825 F INSPECTION VIOLATION PENALTIES		
12. ATTORNEY'S NAME AND MAILING ADDRESS Andrew Anders 110 Main Street San Antonio TX 78210 Phone: 210-833-5623 Cell phone: 210-555-1234 Email: isa_omelas@aotx.uscourts.gov		13. COURT ORDER <input type="checkbox"/> A Associate <input type="checkbox"/> C Co-Counsel <input type="checkbox"/> D Federal Defender <input type="checkbox"/> F Subs for Federal Defender <input type="checkbox"/> L Learned Counsel <input type="checkbox"/> O Appointing Counsel <input type="checkbox"/> P Subs for Panel Attorney <input type="checkbox"/> R Subs for Retained Attorney <input type="checkbox"/> S Pro Se <input type="checkbox"/> T Retained Attorney <input type="checkbox"/> U Subs for Pro Se <input type="checkbox"/> X Administrative <input type="checkbox"/> Y Standby Counsel Prior Attorney's Name Appointment Date Signature of Presiding Judge or By Order of the Court Albert Albertson Date of Order 3/3/2014 Repayment <input type="checkbox"/> YES <input type="checkbox"/> NO
14. LAW FIRM NAME AND MAILING ADDRESS		

Vouchers on File

To group by a particular Header, drag the column to this area. Search:

Case	Defendant	Type	Status	Date Entered
1:14-CR-08805-AA Start: 09/23/2015 End: 09/23/2015	Jebediah Branson (# 1) Claimed Amount: 6,350.00 Approved Amount: 6,350.00	CJA-20 Andrew Anders	Voucher Closed 0101.00000001	03/17/2016
1:14-CR-08805-AA Start: 04/02/2014 End: 11/16/2017	Jebediah Branson (# 1) Claimed Amount: 1,000.00 Approved Amount: 1,000.00	AUTH Chemist/Toxicologist	Voucher Closed 0101.00000002	11/16/2017
1:14-CR-08805-AA Start: End:	Jebediah Branson (# 1) Claimed Amount: 0.00	AUTH-24	Voucher Entry Edit	04/14/2014
1:14-CR-08805-AA Start: End:	Jebediah Branson (# 1) Claimed Amount: 0.00	CJA-20	Voucher Entry Edit	11/05/2015
1:14-CR-08805-AA Start: End:	Jebediah Branson (# 1) Claimed Amount: 0.00	CJA-20	Voucher Entry Edit	11/05/2015
1:14-CR-08805-AA Start: 01/21/2016 End: 01/21/2016	Jebediah Branson (# 1) Claimed Amount: 0.00	AUTH-24	Voucher Closed 0101.00000082	01/21/2016
1:14-CR-08805-AA Start: End:	Jebediah Branson (# 1) Claimed Amount: 0.00	TRAVEL	Voucher Entry Edit	01/21/2016
1:14-CR-08805-AA Start: End:	Jebediah Branson (# 1) Claimed Amount: 0.00	CJA-20	Voucher Entry Edit	01/21/2016
1:14-CR-08805-AA Start: 03/22/2016 End: 03/22/2016	Jebediah Branson (# 1) Claimed Amount: 802.75	CJA-20 Andrew Anders	Voucher Entry Edit FINAL PAYMENT	03/22/2016
1:14-CR-08805-AA Start: 03/22/2016 End: 03/22/2016	Jebediah Branson (# 1) Claimed Amount: 0.00	AUTH-24	Voucher Closed 0101.0000109	03/22/2016

1 2 3 4 5 > ... Last >

Page 1 of 7 (70 items)

Section Name	Contents
Appointment Info	This section contains all information about the appointment.
Vouchers on File	This section contains all vouchers for the appointment.
View Representation	Click the View Representation link to view the Representation Info page.
Create New Voucher	Click the Create link next to the voucher to create a voucher for the appointment.
Reports	This section contains reports for the appointment.

View Representation

Clicking the **View Representation** link displays the following information:

- Default excess fee limit
- Presiding judge
- Magistrate judge
- Co-counsel
- Previous counsel

Step 1

In the Appointment section, click the **View Representation** link.



The Representation Info page appears.

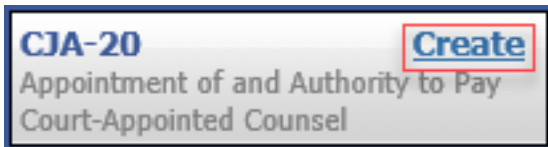
Representation In this page you can view or delete the representation.	Representation Info			
	1. CIR./DIST/DIV.CODE 0101	2. PERSON REPRESENTED Jebediah Branson	VOUCHER NUMBER	
	3. MAG. DKT/DEF.NUMBER	4. DIST. DKT/DEF NUMBER 1:14-CR-08805-1-AA	5. APPEALS. DKT/DEF NUMBER	6. OTHER. DKT/DEF NUMBER
	7. IN CASE/MATTER OF(Case Name) USA v. Branson	8. PAYMENT CATEGORY Felony (including pre-trial diversion of alleged felony)	9. TYPE PERSON REPRESENTED Adult Defendant	10. REPRESENTATION TYPE Criminal Case
Reports Representation Report	11. OFFENSE(S) CHARGED 15:1825 F INSPECTION VIOLATION PENALTIES			
	EXCESS FEE LIMIT \$11,500.00	PRESIDING JUDGE Albert Albertson	MAGISTRATE JUDGE	DESIGNEE 1
				DESIGNEE 2
	App.ID	Attorney	Order Type	Order Email
	4	Andrew Anders	Appointing Counsel	03/03/14 lisa_ornelas@aotx.uscourts.gov

Creating the CJA-20 Voucher

The court creates the appointment. The attorney initiates the CJA-20 voucher.

Note: All voucher types and documents function in primarily the same way.

In the Appointment section, from the CJA-20 voucher template, click the **Create** link.



The voucher opens the Basic Info page, which displays the information in the paper voucher format.

CJA-20 Attorney Enters
Def.: Jebediah Branson
[Link to CM/ECF](#)
Voucher #:
Start Date: 6/11/2014
End Date: 6/11/2014
Services: \$0.00
Expenses: \$0.00
Reports
[Defendant Detail Budget Report](#)
Detail budget info for defendant
[Form CJA20](#)
[Defendant Summary Budget Report](#)
Totals only of budget info for defendant

Basic Info

1. CIR./DIST./DIV.CODE 0101	2. PERSON REPRESENTED Jebediah Branson	VOUCHER NUMBER	
3. MAG. DKT./DEF.NUMBER	4. DIST. DKT./DEF.NUMBER 1:14-CR-08805-1-AA	5. APPEALS. DKT./DEF.NUMBER	6. OTHER. DKT./DEF.NUMBER
7. IN CASE/MATTER OF(Case Name) USA v. Branson	8. PAYMENT CATEGORY Felony (including pre-trial diversion of alleged felony)	9. TYPE PERSON REPRESENTED Adult Defendant	10. REPRESENTATION TYPE Criminal Case
11. OFFENSE(S) CHARGED 15:1825.F INSPECTION VIOLATION PENALTIES			
12. ATTORNEY'S NAME AND MAILING ADDRESS Andrew Anders - Bar Number: 12345 110 Main Street San Antonio TX 78210 Phone: 210-833-5623		13. COURT ORDER <input type="checkbox"/> A Associate <input type="checkbox"/> C Co-Counsel <input type="checkbox"/> F Subs for Federal Defender <input checked="" type="checkbox"/> O Appointing Counsel <input type="checkbox"/> P Subs for Panel Attorney <input type="checkbox"/> R Subs for Retained Attorney <input type="checkbox"/> Y Standby Counsel Prior Attorney's Name Appointment Dates Signature of Presiding Judge or By Order of the Court Albert Albertson Date of Order 3/3/2014 Nunc Pro Tunc Date Repayment <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
14. LAW FIRM NAME AND MAILING ADDRESS			

Payment Info
Preferred Payee: Andrew Anders
Andrew Anders
SSN/EIN: ***-**-6789
123 Legal Blvd. South
AnyTown, DC
12345 - USA
Phone: 888-555-4000
Fax: 888-555-4001

« First < Previous Next > Last » Save Delete Draft Audit Assist

Tab headings appear at the top of the screen.

A progress bar appears at the bottom of the screen.

Notes:

- To avoid data loss, frequently save any entries made to a voucher.
- To delete a voucher, click **Delete Draft** at any time prior to submitting it.
- To check for warnings or errors in the document, click **Audit Assist** at any time.
- To navigate, click the tab headings or the navigation buttons in the progress bar.

Entering Services

Line-item time entries should be entered on the Services page. Both in-court and out-of-court time should be recorded here.

Note: There is **NOT AN AUTOSAVE** function on this program. You must click **Save** periodically to save your work.

Step 1

Click the **Services** tab, or click **Next** on the progress bar.

Basic Info **Services** Expenses Claim Status Documents Confirmation

Services

Date: 4/17/2020 * Description: *
 Units: *
 Rate: *

Add Remove

* Required Fields

To group by a particular Header, drag the column to this area.

Date	Description	Units	Rate	Amt
(Empty)				

< First < Previous **Next >** Last > Save Delete Draft Audit Assist

Step 2

Enter the date of the service. The default date is always the current date. You can either type the date or click the calendar icon and select a date from the pop-up calendar.

Services

Date: 4/17/2020 * Description: Des

Units:
 Rate:

* Required Fields

To group by a part

Date	Desc

April 2020

Su	Mo	Tu	We	Th	Fr	Sa
29	30	31	1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30	1	2
3	4	5	6	7	8	9

Step 3

Click the **Service Type** drop-down arrow and select the service type.

Services

Date: 4/17/2020 *

Service Type: *

Doc.# (ECF):

Hours:

* Required Fields

To group by a particular Header, drag the column to this area.

In Court Services

- a. Arraignment and/or Plea
- b. Bail and Detention Hearing
- c. Motion
- d. Trial
- e. Sentencing Hearings

Note: You can add dates in any order, or sort in chronological order at any time.

Step 4

Enter your hours of service in tenths of an hour, enter a description, and then click **Add**.

Services

Date: 4/17/2020 *

Service Type: a. Arraignment and/or Plea *

Doc.# (ECF): Pages:

Hours: 5.0 * at \$148.00 per hour.

Description: First appearance an arraignment of defendant. *

Add Remove

* Required Fields

Step 5

The entry is added to the voucher, and appears at the bottom of the Service Type column. The Date header sorts by date. Be sure to click **Save**. Click an entry to edit.

Basic Info Services Expenses Claim Status Documents Confirmation

Services

Date: 4/17/2020 *

Service Type: *

Doc.# (ECF): Pages:

Hours: * at \$148.00 per hour.

Add Remove

* Required Fields

To group by a particular Header, drag the column to this area.

Service Type	Date	Description	Hrs	Rate	Amt
a. Arraignment and/or Plea	04/17/2020	First appearance an arraignment of defendant.	5.0	\$148.00	\$740.00

« First < Previous Next > Last » Save Delete Draft Audit Assist

Entering Expenses

Step 1

Click the **Expenses** tab, or click **Next** on the progress bar.

▶ Basic Info ▶ Services ▶ **Expenses** ▶ Claim Status ▶ Documents ▶ Confirmation

Expenses

Date: 4/17/2020 * Description: *

Expense Type: *

Miles: at \$0.535 per mile.

Amount:

Add Remove

*** Required Fields**

To group by a particular Header, drag the column to this area.

Expense Type	Date	Description	Mile	Rate	Amt
(Empty)					

« First < Previous **Next >** Last »

Save Delete Draft Audit Assist

Step 2

Click the **Expense Type** drop-down arrow and select the applicable expense.

Expenses

Date: 4/9/2020 *

Expense Type *

Miles: **Travel Miles**

Amount: **Travel Misc.**

*** Required Fields**

To group by a particular Header, drag the column to this area.

Expense Type	Date	Description	Mile	Rate	Amt
		Fax			
		Long Distance Charges			
		Photocopies			
		Postage			
		Other Expenses			

Step 3

If **Travel Miles** is selected, enter the round-trip mileage, and then click in the **Description** field to enter a description. Click **Add**.

Expenses

Date: 4/17/2020 *
Expense Type: Travel Miles *
Miles: 20 at \$0.535 per mile.
Amount:
Description: Travel to and from court. *
Add Remove

* Required Fields

To group by a particular Header, drag the column to this area.

Expense Type	Date	Description	Mile	Rate	Amt
(Empty)					

« First < Previous Next > Last »
Save
Delete Draft
Audit Assist

The entry is added to the voucher and appears at the bottom of the Expense Type column.

Expenses

Date: 4/17/2020 *
Expense Type: *
Miles: * at \$0.535 per mile.
Amount:
Description: *
Add Remove

* Required Fields

To group by a particular Header, drag the column to this area.


Expense Type	Date	Description	Mile	Rate	Amt
Travel Miles	04/17/2020	Travel to and from court.	20	\$0.535	\$10.70

« First < Previous Next > Last »
Save
Delete Draft
Audit Assist

Step 4

Click in the **Date** column header to sort expenses by date. Click **Save**.

Expenses

Date *  Description *

Expense Type *

Miles * at \$0.535 per mile.

Amount

* Required Fields

To group by a particular Header, drag the column to this area.

Expense Type	Date	Description	Mile	Rate	Amt
Travel Miles	04/17/2020	Travel to and from court.	20	\$0.535	\$10.70
Photocopies	04/17/2020	Copies- 100 pages @ .10 per page.	0	\$0.000	\$10.00

« First < Previous Next > Last »

Notes:

- If you choose photocopies or fax expenses, indicate the number of pages, and the rate charged per page.
- Remember to click **Add** after each entry.
- Click an entry to edit.



Claim Status

Step 1

Click the **Claim Status** tab, or click **Next** on the progress bar.

Basic Info Services Expenses **Claim Status** Documents Confirmation

Claim Status

Start Date *  End Date * 

Payment Claims *

☐ Final Payment

☐ Interim Payment (payment #)

☐ Supplemental Payment

☐ Withholding Return Payment

** Reminder: Please select the appropriate claim status.

1. Have you previously applied to the court for compensation and/or reimbursement for this case? * ☐ Yes ☐ No

If Yes, were you paid? ☐ Yes ☐ No

2. Other than from the Court, have you, or to your knowledge has anyone else, received payment (compensation or anything of value) from any other source in connection with this representation? * ☐ Yes ☐ No

* Required Fields



« First < Previous **Next >** Last »

Step 2

Enter the start date from the services or expenses entries, whichever date is earliest. If necessary, go back to the Expense and Service sections and click the **Date** header to sort by the earliest date of services. Answer all the questions regarding previous payments in this case, and then click **Save**. Click **Audit Assist** at any time to view any errors or warnings regarding your document.

Basic Info | Services | Expenses | **Claim Status** | Documents | Confirmation

Claim Status

Start Date *  End Date * 

Payment Claims *

☐ Final Payment

☐ Interim Payment (payment #)

☐ Supplemental Payment

☐ Withholding Return Payment

**** Reminder: Please select the appropriate claim status.**

1. Have you previously applied to the court for compensation and/or reimbursement for this case? * ☐ Yes ☐ No
If Yes, were you paid? ☐ Yes ☐ No

2. Other than from the Court, have you, or to your knowledge has anyone else, received payment (compensation or anything of value) from any other source in connection with this representation? * ☐ Yes ☐ No

* Required Fields

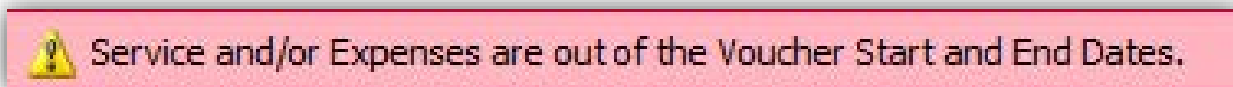
« First < Previous Next > Last » Save Delete Draft **Audit Assist**

Notes:

The Payment Claims section features the following payment claims type radio buttons:

- **Final Payment** to request payment after all services have been completed.
- **Interim Payment** to allow for payment throughout the appointment, but each court's practice may differ. If using this type of payment, indicate the number of interim payments.
- **Supplemental Payment** to request payment due to a missed or forgotten receipt after the final payment has been submitted.
- **Withholding Return Payment** for an attorney to request return payment of withheld funds. The attorney can submit a blank (no services or expenses) CJA-20/30/21/31 at the end of the case.

If you try to submit with errors, you may receive the following pink error message:



The message will be removed when you complete the Claim Status section with correct start and end dates that include all service and expense dates for the voucher.

Documents

Attorneys (as well as courts) can attach documents. Attach any documentation that supports the voucher; e.g., travel or other expense receipts, or orders from the court. All documents must be submitted in PDF format and must be 10 MB or less.

Step 1

Click the **Documents** tab, or click **Next** on the progress bar.

Basic Info Services Expenses Claim Status **Documents** Confirmation

Supporting Documents

File Upload (Only Pdf files of 10MB size or less!)

File Browse...

Description

Upload

Description	Delete	View
Document	Delete	View

« First < Previous **Next >** Last » Save Delete Draft Audit Assist

Step 2

To add an attachment, click **Browse** to locate your file. Add a description of the attachment. Click **Upload**. The attachment and description is added to the voucher and appears at the bottom of the Description column.

Supporting Documents

File Upload (Only Pdf files of 10MB size or less!)

File Browse...

Description

Upload

Description	Delete	View
Document	Delete	View

« First < Previous Next > Last » Save Delete Draft Audit Assist

Signing and Submitting to Court

Step 1

When you have added all voucher entries, you are ready to sign and submit your voucher to the court. Click the **Confirmation** tab, or click **Next** on the progress bar. The Confirmation page appears, reflecting all entries from the previous screens. Verify the information is correct. Scroll to the bottom of the screen.

Basic Info Services Expenses Claim Status Documents **Confirmation**

Confirmation

1. CIR. DIST. DIV. CODE 0101	2. PERSON REPRESENTED Jebediah Branson	VOUCHER NUMBER	
3. MAG. DKT. DEF. NUMBER	4. DIST. DKT. DEF. NUMBER 1:14-CR-08805-1-AA	5. APPEALS. DKT. DEF. NUMBER	6. OTHER. DKT. DEF. NUMBER
7. IN CASE MATTER OF (Case Name) USA v. Branson	8. PAYMENT CATEGORY Felony (including pre-trial diversion of alleged felony)	9. TYPE PERSON REPRESENTED Adult Defendant	10. REPRESENTATION TYPE Criminal Case
11. OFFENSE(S) CHARGED 15:1825 F INSPECTION VIOLATION PENALTIES			
12. ATTORNEY'S NAME AND MAILING ADDRESS Andrew Anders 110 Main Street San Antonio TX 78210 Phone: 210-833-5623 Cell phone: 210-555-1234 Email: lisa_omelas@aotx.uscourts.gov		13. COURT ORDER <input type="checkbox"/> A Associate <input type="checkbox"/> C Co-Counsel <input type="checkbox"/> D Federal Defender <input type="checkbox"/> F Subs for Federal Defender <input type="checkbox"/> L Learned Counsel (Capital Only) <input type="checkbox"/> O Appointing Counsel <input type="checkbox"/> P Subs for Panel Attorney <input type="checkbox"/> R Subs for Retained Attorney <input type="checkbox"/> S Pro Se <input type="checkbox"/> T Retained Attorney <input type="checkbox"/> U Subs for Pro Se <input type="checkbox"/> X Administrative <input type="checkbox"/> Y Standby Counsel	
14. LAW FIRM NAME AND MAILING ADDRESS Andrew Anders TIN: XX-XXXXXXX 110 Main Street San Antonio TX 78210 US Phone: 210-833-5623		Prior Attorney's Name Appointment Date Signature of Presiding Judge or By Order of the Court Albert Albertson Date of Order 3/3/2014 Nunc Pro Tunc Date Repayment <input type="checkbox"/> YES <input type="checkbox"/> NO	
CLAIMS FOR SERVICES AND EXPENSES		FOR COURT USE ONLY	
CATEGORIES	HOURS CLAIMED	TOTAL AMOUNT CLAIMED	ADJUSTED HOURS
15. a. Arraignment and/or Plea	0	\$0.00	
b. Bail and Detention Hearing	0	\$0.00	
c. Motion	0	\$0.00	
d. Trial	0	\$0.00	
e. Sentencing Hearings	0	\$0.00	
f. Revocation Hearings	0	\$0.00	
g. Appeals Court	0	\$0.00	
h. Other	0	\$0.00	
Totals	0	\$0.00	
16. a. Interviews and Conferences	0	\$0.00	
b. Obtaining and Reviewing Records	0	\$0.00	
c. Legal Research and Brief Writing	0	\$0.00	
d. Travel Time	0	\$0.00	
e. Investigative or Other Work	0	\$0.00	
Totals	0	\$0.00	
17. Travel Expenses (lodging, parking, meals, mileage, etc.)		\$0.00	
18. Other Expenses (other than expert, transcripts, etc.)		\$0.00	
GRAND TOTALS (CLAIMED AND ADJUSTED)		\$0.00	
19. CERTIFICATION OF ATTORNEY FOR THE PERIOD OF SERVICE FROM: TO:		20. APPOINTMENT TERMINATION DATE IF OTHER THAN CASE COMPLETION	
21. CLAIM STATUS <input type="checkbox"/> Final Payment <input type="checkbox"/> Interim Payment (P) <input type="checkbox"/> Supplemental Payment <input type="checkbox"/> Withholding Payment (---) (Total ---)		22. CASE DISPOSITION	
Have you previously applied to the court for compensation and/or reimbursement for this case? <input type="checkbox"/> YES <input type="checkbox"/> NO If yes, were you paid? <input type="checkbox"/> YES <input type="checkbox"/> NO Other than from the Court, have you, or to your knowledge has anyone else, received payment (compensation or anything of value) from any other source in connection with this representation? <input type="checkbox"/> YES <input type="checkbox"/> NO If yes, please attach supporting documentation I swear or affirm the truth or correctness of the above statements. Signature of Attorney: Date Signed:			
APPROVED FOR PAYMENT - COURT USE ONLY			
23. IN COURT COMP.	24. OUT OF COURT COMP.	25. TRAVEL EXPENSES	26. OTHER EXPENSES
27. SIGNATURE OF THE PRESIDING JUDGE	28. DATE	29. JUDGE CODE	30. TOTAL AMT. APPR. CERT.
31. IN COURT COMP.	32. OUT OF COURT COMP.	33. TRAVEL EXPENSES	34. OTHER EXPENSES
35. SIGNATURE OF THE CHIEF JUDGE, COURT OF APPEALS (OR DELEGATE) Payment approved in excess of the statutory threshold amount	36. DATE	37. JUDGE CODE	38. TOTAL AMT. CERTIFIED FOR PAYMENT

Attention: The notes you enter will be available to the next approval level.

Public/Attorney Notes

☐ I swear and affirm the truth or correctness of the above statements

Date:



« First < Previous **Next >** Last » Save Delete Draft Audit Assist

Step 2

In the **Public/Attorney Notes** field, you can include any notes to the court. Select the check box to swear and affirm to the accuracy of the authorization, which automatically time stamps it. Click **Submit**.

The screenshot shows a web form for submitting a CJA eVoucher. At the top, a red alert message states: "Attention: The notes you enter will be available to the next approval level." Below this is a text area labeled "Public/Attorney Notes" with the placeholder text "Notes". Underneath the text area is a checkbox labeled "I swear and affirm the truth or correctness of the above statements", which is checked. To the right of the checkbox, the date and time "Date: 6/12/2014 16:32:35" are displayed. A large blue "Submit" button with a green upward arrow icon is positioned to the right of the checkbox. At the bottom of the form, there are navigation buttons: "<< First", "< Previous", "Next >", "Last >>", "Save", and "Delete Draft".

Step 3

A confirmation screen appears, indicating the previous action was successful and the voucher has been submitted for payment. Click the **Home Page** link to return to the home page. Click the **Appointment Page** link if you wish to create an additional document for this appointment.

The screenshot shows a success confirmation screen. At the top, a blue box contains the word "Success" in a red-bordered box. Below this, the text reads: "Your voucher has been submitted for payment. You will receive a notification if we need more details. Please keep the following voucher number for your own records:". The voucher number "0101.0000150" is displayed in a large, bold, black font. At the bottom, under the heading "Back to:", there are two blue hyperlinks: "Home Page" and "Appointment Page", each enclosed in a red-bordered box.

The active voucher is removed from the My Active Documents section, and now appears in the My Submitted Documents section.

My Submitted Documents			
To group by a particular Header, drag the column to this area.		Search: <input type="text"/>	
Case	Defendant	Type	Status
1:14-CR-08805-AA- Start: 06/12/2014 End: 06/12/2014	Jebediah Branson (# 1) Claimed Amount: 89.20	CJA-20 Andrew Anders	Submitted to Court 0101.0000150
1:14-CR-08805-AA- Start: 03/03/2014 End: 06/05/2014	Jebediah Branson (# 1) Claimed Amount: 778.40	CJA-20 Andrew Anders	Submitted to Court 0101.0000001 INTERIM PAYMENT 1
1:14-CR-08805-AA- Start: 04/02/2014 End: 01/01/1900	Jebediah Branson (# 1) Claimed Amount: 1,000.00	ALUTH Chemist, Toxicologist	Submitted to Court 0101.0000002
1		Page 1 of 1 (3 items)	

Note: If a voucher is rejected by the court, it reappears in the My Documents section highlighted in gold. The system generates an email message explaining the corrections that must be made.

My Documents	
To group by a particular Header, drag the column to this area.	
Case	
1:14-CR-08802-AA- Start: 06/19/2014 End: 06/19/2014	

CJA-20 Quick Review Panel

When entering time and expenses in a CJA-20 voucher, the attorney can monitor the voucher totals using the quick review panel on the left side of the screen.

The **Services** and **Expenses** fields tally as entries are entered in the voucher.

CJA-20
Submitted to Court
[Read Only]
Flow: CJA-20 Basic
[Redirect Workflow](#)
Def.: Jebediah Branson

[Link to CM/ECF](#)

Voucher #: 0101.0000150
Start Date: 6/12/2014
End Date: 6/12/2014

Services: \$63.00

Expenses: \$26.20

Expand the item by clicking the drop-down arrow to reveal specifics.

Services: \$63.00

In Court Services

Service	Hours	Amt.
Arraignment and/or Plea	0.5	\$63.00
Bail and Detention Hearing	0	\$0.00
Motion Hearings	0	\$0.00
Trial	0	\$0.00
Sentencing Hearing	0	\$0.00
Revocation Hearings	0	\$0.00
Appeals Court	0	\$0.00
Other	0	\$0.00
Totals	0.5	\$63.00

Out of Court Services

Service	Hours	Amt.
Interviews and Conferences	0	\$0.00
Obtaining and Reviewing Records	0	\$0.00
Legal Research and Brief Writing	0	\$0.00
Travel Time	0	\$0.00
Investigative and Other Work	0	\$0.00
Totals	0.0	\$0.00

Expenses: \$26.20

Travel

Expense Type	Amount
Travel Miles	\$11.20
Travel Misc	\$0.00
Totals	\$11.20

Expenses

Expense Type	Amount
Fax	\$0.00
Long Distance Charges	\$0.00
Photocopies	\$15.00
Postage	\$0.00
Other Expenses	\$0.00
Totals	\$15.00

Reports and Case Management

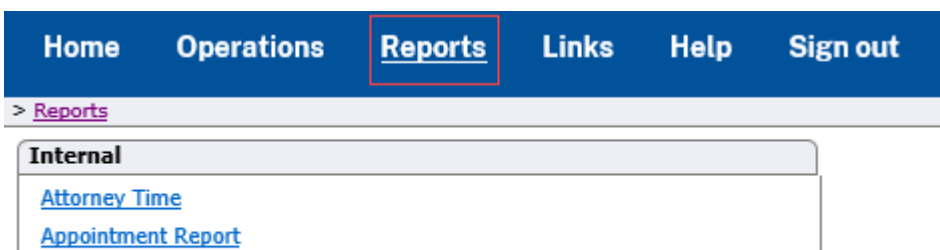
At the start of a case, it may be difficult for counsel or the court to know whether a case has the potential to exceed the statutory maximum allowed for representation.

Therefore, attorneys are encouraged to monitor the status of funds, attorney hours, and expert services by reviewing the reports provided in the CJA eVoucher program. Items to remember:

- Viewable reports appear in the left review panel.
- Each panel, depending on the document you are viewing, can have different reports available.
- Each report can have a short description of the information received when viewing that report.
- The two main reports are the Defendant Detail Budget Report and the Defendant Summary Budget Report.



You can find other accessible reports by clicking **Reports** on the menu bar.



Defendant Detailed Budget Report

The report reflects the total amount authorized for this representation, any excess payment allowed, the vouchers submitted against those authorizations, and the remaining balances.

The report provides the information in two sections: attorney appointment and authorized expert service.

Defendant Detail Budget Report - Attorney 1:14-CR-08805-1-AA

Counsel Budget Defendant: Jebediah Branson														
Type of Representation:		Criminal Case												
Budget Amount Requested:		\$0.00												
Budget Amount Approved:		\$9,900.00												
Time Period For Voucher	Voucher Number	Pending				Approved				Amount Remaining				
		Fees	Expenses		Total	Fees	Expenses		Total	After Approved	After Approved And Pending			
			Travel	Other			Travel	Other						
Attorney: Andrew Anders (Appointing Counsel)		Active												
09/23/2015 to 09/23/2015	0101.0000001	\$0.00	\$0.00	\$0.00	\$0.00	\$6,350.00	\$0.00	\$0.00	\$6,350.00	\$3,550.00	\$3,550.00			
01/01/1901 to 01/01/1901		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$3,550.00	\$3,550.00			
01/01/1901 to 01/01/1901		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$3,550.00	\$3,550.00			
				Total Pending:		\$0.00				Total Approved:		\$6,350.00	\$3,550.00	\$3,550.00

Expert and Other Services Budget - Requiring Authorization Defendant: Jebediah Branson												
Time Period For Voucher	Voucher Number	Pending				Approved				Amount Remaining		
		Fees	Expenses		Total	Fees	Expenses		Total	After Approved	After Approved And Pending	
			Travel	Other			Travel	Other				
Authorization Number: 0101.0000002		Amount Requested: \$1,000.00				Amount Authorized: \$0.00				Attorney: Andrew Anders		
Specialty: Chemist, Toxicologist												

Grand Totals for the Representation Defendant: Jebediah Branson											
NOTE: The Grand Totals Include Counsel CJA20 or CJA30 vouchers as well as vouchers for Expert or Services on CJA21 or CJA31. They represent the total submitted expenditures for this representation. *Does not Include Travel Auth	Pending				Approved				Combined Total		
	Fees	Expenses		Total	Fees	Expenses		Total	Approved and Pending		
		Travel	Other			Travel	Other		Fees	Fees and Expenses	
		\$0.00	\$0.00	\$0.00	\$0.00	\$6,350.00	\$0.00	\$0.00	\$6,350.00	\$6,350.00	\$6,350.00

Defendant Summary Budget Report

The report contains the same information as the Defendant Detailed Budget Report without the individual voucher data.

Defendant Summary Budget Report - Attorney 1:14-CR-08805-1-AA

Counsel Budget Defendant: Jebediah Branson

Type of Representation: Criminal Case

Budget Amount Requested: \$0.00

Budget Amount Approved: \$3,350.00

Time Period For Voucher	Voucher Number	Pending			Approved			Amount Remaining			
		Fees	Expenses		Total	Fees	Expenses		Total	After Approved	After Approved And Pending
			Travel	Other			Travel	Other			
Attorney: Andrew Anders (Appointing Counsel)		Active									
		Total Pending:			\$0.00	Total Approved:			\$6,350.00	\$3,550.00	\$3,550.00

Expert and Other Services Budget - Requiring Authorization Defendant: Jebediah Branson

Time Period For Voucher	Voucher Number	Pending			Approved			Amount Remaining			
		Fees	Expenses		Total	Fees	Expenses		Total	After Approved	After Approved And Pending
			Travel	Other			Travel	Other			
Authorization Number: 0101.0000002 Specialty: Chemist, Toxicologist		Amount Requested: \$1,000.00			Amount Authorized: \$0.00			Attorney: Andrew Anders			

Grand Totals for the Representation Defendant: Jebediah Branson

NOTE: The Grand Totals include Counsel CJA20 or CJA30 vouchers as well as vouchers for Expert or Services on CJA21 or CJA31. They represent the total submitted expenditures for this representation. *Does not include Travel Auth	Pending			Approved			Combined Total	
	Fees	Expenses		Fees	Expenses		Approved and Pending	
		Travel	Other		Travel	Other	Fees	Fees and Expenses
	\$0.00	\$0.00	\$0.00	\$0.00	\$6,350.00	\$0.00	\$6,350.00	\$6,350.00

Creating a CJA-21 Voucher

Note: There is **NOT AN AUTOSAVE** function on this program. You must click **Save** periodically to save your work.

Step 1

On the Appointment page, click **Create** from the CJA-21 voucher template. The voucher opens the Basic Info page.



Step 2

When submitting a CJA-21 voucher, you have two options from which to choose in the Authorization Selection section. If the request does not require advance authorization, click **No Authorization Required**. If you have a previously approved authorization, click **Use Existing Authorization**.

Basic Info

Basic Info

1. CIR./DIST./DIV. CODE 0101	2. PERSON REPRESENTED Jebediah Branson	VOUCHER NUMBER	
3. MAG. DKT/DEF. NUMBER	4. DIST. DKT/DEF. NUMBER 1:14-CR-08805-1-AA	5. APPEALS. DKT/DEF. NUMBER	6. OTHER. DKT/DEF. NUMBER
7. IN CASE/MATTER OF (Case Name) USA v. Branson	8. PAYMENT CATEGORY Felony (including pre-trial diversion of alleged felony)	9. TYPE PERSON REPRESENTED Adult Defendant	10. REPRESENTATION TYPE Criminal Case
11. OFFENSE(S) CHARGED 15:1825.F INSPECTION VIOLATION PENALTIES			
EXCESS FEE LIMIT \$11,500.00	PRESIDING JUDGE Albert Albertson	MAGISTRATE JUDGE	DESIGNEE 1
			DESIGNEE 2

Authorization Selection

You can click the **Use Existing Authorization** button to select from a list of approved authorizations, or click the **No Authorization Required** button if under the statutory limit.

No Authorization Required

If your voucher compensation is under the statutory limit and does not require prior authorization.

Use Existing Authorization

Select this option to display and select from a list of approved authorizations for this appointment.

[<< First](#)
[< Previous](#)
[Next >](#)
[Last >>](#)
[Delete Draft](#)
[Audit Assist](#)

Step 3

If you click **Use Existing Authorization**, a list of associated authorizations appears. Click the desired authorization, which turns blue when clicked. *You cannot continue until it is highlighted.*

Please Select the Associated Authorization	
ID Number: 4 Order Date: 03/04/2014 Authorized Amount: \$1,000.00 Grand Total Amount: \$1,500.00	Service Type: Chemist/Toxicologist Estimated Amount: \$1,000.00 Notes: Abraham Astley
ID Number: 186 Order Date: 02/01/2017 Authorized Amount: \$100.00 Grand Total Amount: \$100.00	Service Type: Interpreter/Translator Estimated Amount: \$5,000,000.00 Notes:

Step 4

The service type automatically populates based on the authorization selected. If no authorization is being used, click the **Service Type** drop-down arrow and select the service type. In the **Description** field, enter a description of the service to be provided.

New Voucher Information	
Service Type	Chemist/Toxicologist *
Description	Toxicology report.

Step 5

From the **Expert** drop-down list, select the expert. If the service providers or experts have rights to enter their own expenses, the Voucher Assignment radio buttons become available, and you can choose if you or the expert will enter the service fees on the voucher. Once you have made your selection, click **Create Voucher**.

Service Provider	
You can search one of the service providers already in the system OR you can enter the required information for another provider	
Expert	Astley, Rick
Expert Info Details	Rick Astley 110 Main Street San Antonio TX 78210 US Phone: 210-555-3434
Voucher Assignment * <input checked="" type="radio"/> Attorney <input type="radio"/> Expert <i>This indicates who will be responsible for filling the voucher claim part</i>	
<input type="button" value="Create Voucher"/>	

Notes:

- Only experts registered with the service type selected appear in the drop-down list. To submit a person for approval, steps on how to add an expert are outlined in the next section.
- All information must be entered to advance to the next screen.
- If the expert selected is authorized to use eVoucher, you are done at this point and can click **Home** or **Sign out**.
- If the expert selected is not authorized to use eVoucher, the attorney must file the voucher on behalf of the expert. The voucher appears in the My Active Documents section as submitted to the attorney. They must perform the second level approval/submission by clicking the voucher, navigating to the Confirmation page, and approving the voucher, which then moves to the My Submitted Documents section.

Step 6

If the expert is not currently in the eVoucher system, you must fill in their information. In the Voucher Assignment section, the **Attorney** radio button is automatically selected. Fill in all required information for the person you wish to submit for approval.

Service Type Interpreter/Translator *

Description

Service Provider
You can search one of the service providers already in the system
OR you can enter the required information for another provider

Expert

First Name **Middle Name** **Last Name ***

Email *

Phone * **Fax**

Address 1 * **City ***

Address 2 **State (U.S. Only*)** **Zip ***

Address 3 **Country ***

Voucher Assignment * ☒ Attorney ☐ Expert
This indicates who will be responsible for filling the voucher claim part

Create Voucher

Step 7

If the service providers or experts have rights to enter their own expenses, the Voucher Assignment radio buttons become active. Click the appropriate radio button to indicate whether you or the expert will enter the service fees on the voucher.

New Voucher Information

Service Type Interpreter/Translator *

Description

Service Provider
You can search one of the service providers already in the system
OR you can enter the required information for another provider

Expert Campos, Charlene

Expert Info
Details

Charlene Campos
110 Main Street
San Antonio TX 78210 US
Phone: 210-477-2344

Voucher Assignment * ☐ Attorney ☒ Expert
This indicates who will be responsible for filling the voucher claim part

Create Voucher

Step 8

Once you have made your selection, click **Create Voucher**.

110 Main Street
San Antonio TX 78210 US
Phone: 210-477-2344

Voucher Assignment * ☐ Attorney ☒ Expert
This indicates who will be responsible for filling the voucher claim part

Create Voucher

Notes:

- The expert goes through an approval process. Once approved, an email is sent to the attorney.
- You can select the expert from the **Expert** drop-down list and their information automatically populates.
- If the attorney submitted the voucher for the expert, they must approve the voucher twice; once while sending it for the expert and a second time after it appears in the My Active Documents section.

Step 9

Click the **Services** tab or click **Next** on the progress bar. In the corresponding fields, enter the date, units, rate, and description. Click **Add**. The item appears at the bottom of the Services section. Click **Save**.

Basic Info **Services** Expenses Claim Status Documents Confirmation

Services

Date: 04/17/2020 * Units: * Rate: * Description: *

Add Remove

* Required Fields

To group by a particular Header, drag the column to this area.

Date	Description	Units	Rate	Amt
(Empty)				

« First < Previous Next > Last » Save Delete Draft Audit Assist

Step 10

Click the **Expenses** tab or click **Next** on the progress bar. In the corresponding fields, enter the date, expense type, description, and miles. Click **Add**. The item appears in the Expense Type column. Click **Save**.

Basic Info Services **Expenses** Claim Status Documents Confirmation

Expenses

Date: 4/17/2020 * Expense Type: * Miles: at \$0.535 per mile. Amount: * Description: *

Add Remove

* Required Fields

To group by a particular Header, drag the column to this area.

Expense Type	Date	Description	Mile	Rate	Amt
(Empty)					

« First < Previous **Next >** Last » Save Delete Draft Audit Assist

Step 11

Click the **Claim Status** tab, or click **Next** on the progress bar. Enter the start and end dates, making sure to select the earliest date of services and expenses as the start date. In the Payment Claims section, click the appropriate radio button, and then click **Save**.

Notes:

- Final payment is requested after all services have been completed.
- Interim payment allows for payment in segments, but each court's practice may differ. If using this type of payment, indicate the number of this request payment.
- After the final payment number has been submitted, supplemental pay may be requested due to a missed or forgotten receipt.
- At the end of the case, to request return payment of withheld funds, click the **Withholding Return Payment** radio button on a blank CJA-21.

Step 12

Click the **Documents** tab or click **Next** on the progress bar. To add an attachment, click **Browse** to locate your file, and then add a description of the attachment. Click **Upload**. The attachment and description is added to the voucher and appears in the Description column. Click **Save**.

Notes: All documents must be submitted in PDF format and must be 10 MB or less.

Step 13

Click the **Confirmation** tab, or click **Next** on the progress bar. In the **Public/Attorney Notes** field, you can include any notes to the court. Select the check box to swear and affirm to the accuracy of the authorization, which automatically time stamps it. Click **Submit**.

Basic Info Services Expenses Claim Status Documents **Confirmation**

Confirmation

1. CIR. DIST. DIV. CODE 0101	2. PERSON REPRESENTED Deborah Branson	VOUCHER NUMBER	
3. MAG. DKT/DEF NUMBER	4. DIST. DKT/DEF NUMBER 1:14-CR-08505-1-AA	5. APPEALS DKT/DEF NUMBER	6. OTHER DKT/DEF NUMBER
7. IN CASE/MATTER OF (Case Name) USA v. Branson	8. PAYMENT CATEGORY Felony (including pre-trial diversion of alleged felony)	9. TYPE PERSON REPRESENTED Adult Defendant	10. REPRESENTATION TYPE Criminal Case

11. OFFENSE(S) CHARGED
15:1825 F INSPECTION VIOLATION PENALTIES

12. ATTORNEY'S STATEMENT
As the Attorney for the person represented above, I hereby affirm that the services requested are necessary for adequate representation. I hereby request:
☐ Authorization to obtain the service. Estimated compensation: \$1000.00
☐ Approval of services already obtained to be paid for by the United States from the Defender Services Appropriation.

Signature of Attorney
 Andrew Anders
 110 Main Street
 San Antonio TX 78210
 Phone: 210-833-5623
 Cell phone: 210-555-1234
 Email: hua_cornelias@actx.uscourts.gov

13. DESCRIPTION AND JUSTIFICATION FOR SERVICES (See instructions)	14. TYPE OF SERVICE PROVIDER <input type="checkbox"/> 01 Investigator <input type="checkbox"/> 15 Other Medical <input type="checkbox"/> 02 Interpreter/Translator <input type="checkbox"/> 16 Voice/Audio Analyst <input type="checkbox"/> 03 Psychologist <input type="checkbox"/> 17 Hair/Fiber Expert <input type="checkbox"/> 04 Psychiatrist <input type="checkbox"/> 18 Computer (Hardware/Software/Systems) <input type="checkbox"/> 05 Polygraph <input type="checkbox"/> 19 Paralegal Services <input type="checkbox"/> 06 Document Examiner <input type="checkbox"/> 20 Legal Analyst/Consultant <input type="checkbox"/> 07 Fingerprint Analyst <input type="checkbox"/> 21 Jury Consultant <input type="checkbox"/> 08 Accountant <input type="checkbox"/> 22 Mitigation Specialist <input type="checkbox"/> 09 CALR (Welder/Lathi, etc.) <input type="checkbox"/> 23 Duplication Services <input type="checkbox"/> 10 Chemist/Toxicologist <input type="checkbox"/> 24 Other (Specify) <input type="checkbox"/> 11 Ballistics <input type="checkbox"/> 25 Litigation Support Services <input type="checkbox"/> 12 Weapons/Firearm/Explosive Expert <input type="checkbox"/> 26 Computer Forensics Expert <input type="checkbox"/> 14 Pathologist/Medical Examiner
---	--

15. COURT ORDER
 Financial eligibility of the person represented having been established by the court's satisfaction, the authorization requested in item 12 is hereby granted.
 Signature of Presiding Judge or By Order of the Court
 Albert Albertson
 Date of Order: 03/04/2014
 Date: _____
 Payment: ☐ YES ☐ NO

NOTES
 Abraham Astley

CLAIMS FOR SERVICES AND EXPENSES		FOR COURT USE ONLY	
16. SERVICES AND EXPENSES	AMOUNT CLAIMED	ADJUSTED AMOUNT	REVIEW
A. Compensation	\$0.00	\$0.00	
B. Travel Expenses (lodging, parking, meals, mileage, etc.)	\$0.00	\$0.00	
C. Other Expenses	\$0.00	\$0.00	
GRAND TOTALS (CLAIMED AND ADJUSTED)	\$0.00	0.0	

17. PAYEE'S NAME
 Abraham Astley TIN: XX-XXXXXXX
 110 Main Street
 San Antonio TX 78210 US
 Phone: 210-555-3434
☐ Final Payment
☐ Interim Payment (P)
☐ Supplemental Payment
☐ Withholding Payment (---) (Total ---)

CLAIMANT'S CERTIFICATION FOR PERIOD OF SERVICE: FROM 04/20/2020 TO 04/20/2020
 I hereby certify that the above claims 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: _____

18. CERTIFICATION OF ATTORNEY I hereby certify that the services were rendered for this case.
 Signature of Attorney: _____
 Date Signed: _____

APPROVED FOR PAYMENT - COURT USE ONLY			
19. TOTAL COMP.	20. TRAVEL EXPENSES	21. OTHER EXPENSES	22. TOTAL AMT. APPR. CERT.

23. ☐ Either the cost (excluding expenses) of these services does not exceed the statutory maximum, or prior authorization was obtained.
☐ Prior authorization was not obtained, but in the interest of justice the Court finds that timely procurement of these necessary services could not await prior authorization, even though the cost (excluding expenses) exceeds the statutory maximum.

Signature of Presiding Judge _____ Date _____ Judge Code _____

24. TOTAL COMP.	25. TRAVEL EXPENSES	26. OTHER EXPENSES	27. TOTAL AMOUNT
-----------------	---------------------	--------------------	------------------


28. PAYMENT APPROVED IN EXCESS OF THE STATUTORY THRESHOLD

Signature of Chief Judge, Court of Appeals (or Delegate) _____ Date _____ Judge Code _____ Total Amt. Certified For Payment _____

Attention: The notes you enter will be available to the next approval level.

Public/Attorney Notes

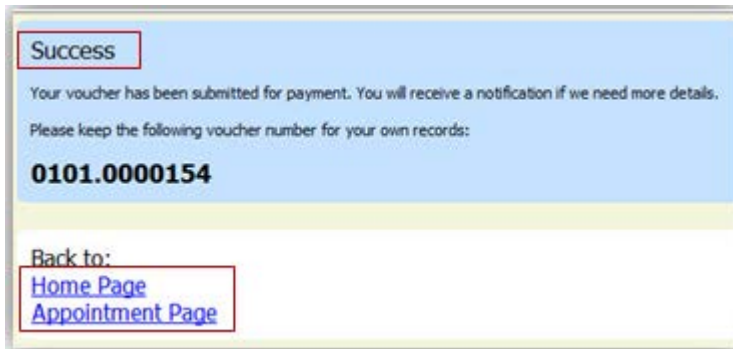
☒ I swear and affirm the truth or correctness of the above statements
 Date: 4/20/2020 21:27:33



« First < Previous **Next >** Last » Save Delete Draft Audit Assist

Step 14

A confirmation screen appears, indicating the previous action was successful and the voucher has been submitted. Click the **Home Page** link to return to the home page. Click the **Appointment Page** link if you wish to create an additional document for this appointment.



Submitting an Authorization Request for Expert Services

Note: There is **NOT AN AUTOSAVE** function on this program. You must click **Save** periodically to save your work.

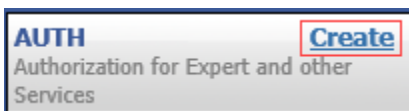
Step 1

In the Appointments' List section, open the appointment record.

Appointments' List	
Appointments	Defendant
Case: 1:14-CR-08805-AA Defendant #: 1 Case Title: USA v. Branson Attorney: Andrew Anders	Defendant: Jebediah Branson Representation Type: Criminal Case Order Type: Appointing Counsel Order Date: 03/03/14 Pres. Judge: Albert Albertson Adm./Mag Judge:

Step 2

On the Appointment page, in the Create New Voucher section, click the **Create** link next to AUTH.



Step 3

Click **Create New Authorization**.

Authorization Type Selection

You can click the **Create New Authorization** button to create a new authorization request, or click the **Request Additional Funds** button to select from a list of approved authorizations that you would like to request additional funds for.

Create New Authorization

Use this button to create a new authorization.

Request Additional Funds

Use this button to select an approved authorization that you would like to request additional funds for.

Step 4

The Basic Info page appears. Complete the information in the Master Authorization Information section at the bottom of the screen. This includes the following:

- **Estimated Amount** field
- **Basis of Estimate** field
- **Service Type** drop-down list
- **Requested Provider** field

Click **Save**.

Basic Info Documents Confirmation

Basic Info

1. CIR. DIST. DIV. CODE 0101	2. PERSON REPRESENTED Jedediah Branson	VOUCHER NUMBER	
3. MAG. DKT DEF NUMBER	4. DIST. DKT DEF NUMBER 1:14-CR-08805-1-AA	5. APPEALS DKT DEF NUMBER	6. OTHER DKT DEF NUMBER
7. IN CASE/MATTER OF (Case Name) USA v. Branson	8. PAYMENT CATEGORY Felony (including pre-trial diversion of alleged felony)	9. TYPE PERSON REPRESENTED Adult Defendant	10. REPRESENTATION TYPE Criminal Case
11. OFFENSE(S) CHARGED 15.1825 F INSPECTION VIOLATION PENALTIES			
12. ATTORNEY'S NAME AND MAILING ADDRESS Andrew Anders 110 Main Street San Antonio TX 78210 Phone: 210-833-5623 Cell phone: 210-555-1234 Email: andreas@aox.uscourts.gov		13. COURT ORDER <input type="checkbox"/> A Associate <input type="checkbox"/> C Co-Counsel <input type="checkbox"/> D Federal Defender <input type="checkbox"/> F Subs for Federal Defender <input type="checkbox"/> L Learned Counsel <input type="checkbox"/> O Appointing Counsel <input type="checkbox"/> P Subs for Panel Attorney <input type="checkbox"/> R Subs for Retained Attorney <input type="checkbox"/> S Pro Se <input type="checkbox"/> T Retained Attorney <input type="checkbox"/> U Subs for Pro Se <input type="checkbox"/> X Administrative <input type="checkbox"/> Y Standby Counsel Prior Attorney's Name Appointment Date Signature of Presiding Judge or By Order of the Court Albert Albertson Date of Order 3/3/2014 Repayment <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
14. LAW FIRM NAME AND MAILING ADDRESS		Nunc Pro Tunc Date	

Master Authorization Information

Order Date	
Nunc Pro Tunc Date	
Repayment	<input type="checkbox"/>
Estimated Amount	\$ 8000.00
Authorized Amount	\$
Basis of Estimate	100 hours at \$80/hour
Description	
Service Type	Investigator
Requested Provider	John Doe

« First < Previous Next > Last » Save Delete Draft

Step 5

Click the **Documents** tab or click **Next** on the progress bar. To add an attachment, click **Browse** to locate your file, and then add a description of the attachment. Click **Upload**. The attachment and description is added to the voucher and appears at the bottom of the Description column.

Basic Info

Documents

Confirmation

Supporting Documents

File Upload (Only Pdf files of 10MB size or less!)

File

C:\Users\JaimeLongoria\ Browse...

Description

Document

Upload

Description	Delete	View
Document	Delete	View

« First

< Previous

Next >

Last »

Save

Delete Draft

Audit Assist

Note: All documents must be submitted in PDF format and must be 10 MB or less.

Step 6

Click the **Confirmation** tab or click **Next** on the progress bar. In the **Public/Attorney Notes** field, you can include any notes to the court. Select the check box to swear and affirm to the accuracy of the authorization, which automatically time stamps it. Click **Submit**.

Basic Info Documents **Confirmation**

Confirmation

1. CIR. DIST. DIV. CODE 0101	2. PERSON REPRESENTED Jebediah Branson	VOUCHER NUMBER	
3. MAG. DKT/DEF. NUMBER	4. DIST. DKT/DEF. NUMBER 1:14-cr-00005-1-AA	5. APPEALS DKT/DEF. NUMBER	6. OTHER DKT/DEF. NUMBER
7. IN CASE MATTER OF (Case Name) USA v. Branson	8. PAYMENT CATEGORY Felony (including pre-trial diversion of alleged felony)	9. TYPE PERSON REPRESENTED Adult Defendant	10. REPRESENTATION TYPE Criminal Case

11. OFFENSE(S) CHARGED
15-1825.F INSPECTION VIOLATION PENALTIES

12. ATTORNEY'S STATEMENT
As the attorney for the person represented above, I hereby affirm that the services requested are necessary for adequate representation. I hereby request:
☐ Authorization to obtain the service. Estimated compensation: \$
☐ Approval of services already obtained to be paid for by the United States from the Defender Services Appropriation.

Signature of Attorney:
Andrew Anders
110 Main Street
San Antonio TX 78210
Phone: 210-833-5623
Cell phone: 210-555-1234
Email: jia_omelas@aotx.uscourts.gov

13. DESCRIPTION AND JUSTIFICATION FOR SERVICE (See instructions)

14. TYPE OF SERVICE PROVIDER

<input type="checkbox"/> 01 Investigator	<input type="checkbox"/> 16 Other Medical
<input type="checkbox"/> 02 Interpreter/Translator	<input type="checkbox"/> 16 Voice/Audio Analyst
<input type="checkbox"/> 03 Psychologist	<input type="checkbox"/> 17 Hair/Fiber Expert
<input type="checkbox"/> 04 Psychiatrist	<input type="checkbox"/> 18 Computer (Hardware/Software/Systems)
<input type="checkbox"/> 05 Polygraph	<input type="checkbox"/> 19 Paralegal Services
<input type="checkbox"/> 06 Document Examiner	<input type="checkbox"/> 20 Legal Analyst/Consultant
<input type="checkbox"/> 07 Fingerprint Analyst	<input type="checkbox"/> 21 Jury Consultant
<input type="checkbox"/> 08 Accountant	<input type="checkbox"/> 22 Mitigation Specialist
<input type="checkbox"/> 09 CALR (Witness/Law, etc.)	<input type="checkbox"/> 23 Duplication Services
<input type="checkbox"/> 10 Chemist/Toxicologist	<input type="checkbox"/> 24 Other (Specify)
<input type="checkbox"/> 11 Ballistics	<input type="checkbox"/> 25 Litigation Support Services
<input type="checkbox"/> 12 Weapons/Firearms/Explosive Expert	<input type="checkbox"/> 26 Computer Forensics Expert
<input type="checkbox"/> 14 Pathologist/Medical Examiner	

15. COURT ORDER
Financial eligibility of the person represented having been established by the court's satisfaction, the authorization requested in item 12 is hereby granted.
Signature of Presiding Judge or By Order of the Court
Albert J. Bertson
Date of Order: _____ Nunc Pro Tunc Date: _____
Repayment ☐ YES ☒ NO

NOTES

Signature of Presiding Judge	Date Signed	Judge Code	Approved Amount	Total Approved Amount
Signature of Chief Judge, Court of Appeals (or Delegate)	Date Signed	Judge Code	Approved Amount	

Attention: The notes you enter will be available to the next approval level.

Public/Attorney Notes

☐ I swear and affirm the truth or correctness of the above statements
Date: _____

Submit

« First < Previous **Next >** Last » **Save** Delete Draft Audit Assist

Step 7

A confirmation screen appears, indicating the previous action was successful and the authorization request has been submitted. Click the **Home Page** link to return to the home page. Click the **Appointment Page** link if you wish to create an additional document for this appointment.

Success

Your voucher has been submitted for payment. You will receive a notification if we need more details.

Please keep the following voucher number for your own records:

0101.0000152

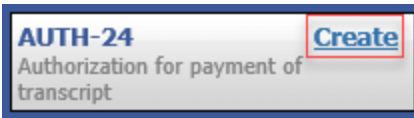
Back to:
[Home Page](#)
[Appointment Page](#)

Creating an Authorization for Transcripts (AUTH-24)

Note: There is **NOT AN AUTOSAVE** function on this program. You must click **Save** periodically to save your work.

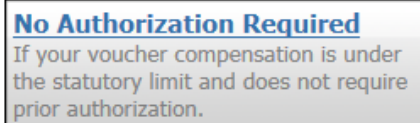
Step 1

On the Appointment page, in the Create New Voucher section, click the **Create** link next to AUTH-24.



Step 2

The authorization opens to the Basic Info page. Click the **No Authorization Required** link.



Step 3

On the Basic Info page, enter the details for the required transcript. Click **Save**.

Basic Info | Documents | Confirmation

Basic Info

1. CIR. DIST. DIV. CODE 0101	2. PERSON REPRESENTED Isabeliah Branson	VOUCHER NUMBER	
3. MAG. DKT/DEF NUMBER	4. DIST. DKT/DEF NUMBER 1:14-CR-08805-1-AA	5. APPEALS DKT/DEF NUMBER	6. OTHER DKT/DEF NUMBER
7. IN CASE/MATTER OF (Case Name) USA v. Branson	8. PAYMENT CATEGORY Felony (including pre-trial diversion or alleged felony)	9. TYPE PERSON REPRESENTED Adult Defendant	10. REPRESENTATION TYPE Criminal Case
11. OFFENSE(S) CHARGED 15:1825.F INSPECTION VIOLATION PENALTIES			
12. ATTORNEY'S NAME AND MAILING ADDRESS Andrew Anders 110 Main Street San Antonio TX 78210 Phone: 210-833-5623 Cell phone: 210-555-1234 Email: lisa_cornelas@aotx.uscourts.gov		13. COURT ORDER <input type="checkbox"/> A Associate <input type="checkbox"/> C Co-Counsel <input type="checkbox"/> D Federal Defender <input type="checkbox"/> F Subs for Federal Defender <input type="checkbox"/> L Learned Counsel <input type="checkbox"/> O Appointing Counsel <input type="checkbox"/> P Subs for Panel Attorney <input type="checkbox"/> R Subs for Retained Attorney <input type="checkbox"/> S Pro Se <input type="checkbox"/> T Retained Attorney <input type="checkbox"/> U Subs for Pro Se <input type="checkbox"/> X Administrative <input type="checkbox"/> V Standby Counsel Prior Attorney's Name Appointment Dates Signature of Presiding Judge or By Order of the Court Albert Alboertson Date of Order 5/3/2014 Nunc Pro Tunc Date Repayment <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
14. LAW FIRM NAME AND MAILING ADDRESS			

Proceeding Transcript To Be Used

Proceeding To Be Transcribed

Apportioned Cost (%)

Apportioned Case and Defendant

Special Transcript Handling

Transcripts

☐ Prosecution Opening Statement
☐ Defense Opening Statement

☐ Prosecution Argument
☐ Defense Argument

☐ Prosecution Rebuttal
☐ Jury Instructions

☐ Prosecution Voir Dire
☐ Defense Voir Dire

« First < Previous Next > Last » Save Delete Draft Audit Assist

Step 4

Click the **Documents** tab or click **Next** on the progress bar. To add an attachment, click **Browse** to locate your file, and then add a description of the attachment. Click **Upload**. The attachment and description are added to the voucher and appear in the Description column. Click **Save**.

Basic Info **Documents** Confirmation

Supporting Documents

File Upload (Only Pdf files of 10MB size or less!)

File

Description

Description	Delete	View
Proposed Order.pdf	Delete	View

« First < Previous **Next >** Last »

Note: All documents must be submitted in PDF format and must be 10 MB or less.

Step 5

Click the **Confirmation** tab or click **Next** on the progress bar. In the **Public/Attorney Notes** field, you can include any notes to the court. Select the check box to swear and affirm to the accuracy of the authorization, which automatically time stamps it. Click **Submit**.

Basic Info Documents **Confirmation**


Confirmation

1. CR. DIST. DIV. CODE 0101	2. PERSON REPRESENTED Jebediah Branson	VOUCHER NUMBER	
3. MAG. DKT. DEF. NUMBER	4. DIST. DKT. DEF. NUMBER 1:14-CR-08805-1-AA	5. APPEALS DKT. DEF. NUMBER	6. OTHER DKT. DEF. NUMBER
7. IN CASE MATTER OF (Case Name) USA v. Branson	8. PAYMENT CATEGORY Felony (including pre-trial diversion of alleged felony)	9. TYPE PERSON REPRESENTED Adult Defendant	10. REPRESENTATION TYPE Criminal Case
11. OFFENSE(S) CHARGED 15.1825 F INSPECTION VIOLATION PENAL TIES			
12. REQUEST AND AUTHORIZATION FOR TRANSCRIPT			
13. PROCEEDING IN WHICH TRANSCRIPT IS TO BE USED			
14. SPECIAL AUTHORIZATIONS			
A. Apportioned Cost % of transcript with		JUDGE'S INITIALS	
B. <input type="checkbox"/> 14-Day <input type="checkbox"/> Expedited <input type="checkbox"/> 3-Day <input type="checkbox"/> Daily <input type="checkbox"/> Hourly <input type="checkbox"/> Realtime Unedited			
C. <input type="checkbox"/> Prosecution Opening Statement <input type="checkbox"/> Prosecution Argument <input type="checkbox"/> Prosecution Rebuttal <input type="checkbox"/> Defense Opening Statement <input type="checkbox"/> Defense Argument <input type="checkbox"/> Voir Dire <input type="checkbox"/> 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 managed 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.		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 Judge or By Order of the Court Date of Order Nunc Pro Tunc Date	
Signature of Attorney Andrew Anders Printed Name Telephone Number: 210-833-5623			

Attention: The notes you enter will be available to the next approval level.

Public/Attorney Notes

☒ I swear and affirm the truth or correctness of the above statements
Date: 4/20/2020 21:49:45



First Previous **Next** Last Save Delete Draft Audit Assist

Step 6

A confirmation screen appears, indicating that the previous action was successful, and the authorization request has been submitted. Click the **Home Page** link to return to the home page. Click the **Appointment Page** link if you wish to create an additional document for this appointment.

Success

This document has been submitted.

Please keep the following document number for your own records:

0101.0000626

Back to:

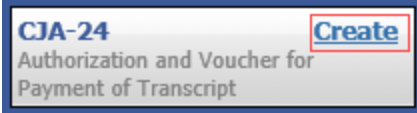
[Home Page](#)
[Appointment Page](#)

Creating a CJA-24 Voucher

Note: There is **NOT AN AUTOSAVE** function on this program. You must click **Save** periodically to save your work.

Step 1

On the Appointment page, in the Create New Voucher section, click the **Create** link next to CJA-24.



Step 2

The Basic Info page appears.

If your court does not require an AUTH-24, click the **No Existing Authorization in eVoucher** link. It is similar to creating a CJA-21, as outlined in the CJA-21 section. If your court does require an AUTH-24, click the **Use Existing Authorization in eVoucher** link.

Basic Info

Basic Info

1. CIR. DIST. DIV. CODE 0101	2. PERSON REPRESENTED Jebediah Branson	VOUCHER NUMBER	
3. MAG. DKT/DEF. NUMBER	4. DIST. DKT/DEF. NUMBER 1:14-CR-08805-1-AA	5. APPEALS. DKT/DEF. NUMBER	6. OTHER DKT/DEF. NUMBER
7. IN CASE/MATTER OF (Case Name) USA v. Branson	8. PAYMENT CATEGORY Felony (including pre-trial diversion of alleged felony)	9. TYPE PERSON REPRESENTED Adult Defendant	10. REPRESENTATION TYPE Criminal Case
11. OFFENSE(S) CHARGED 15.1825 F. INSPECTION VIOLATION PENALTIES			
EXCESS FEE LIMIT \$11,500.00	PRESIDING JUDGE Albert Albertson	MAGISTRATE JUDGE	DESIGNEE 1
			DESIGNEE 2

Authorization Selection

You can click the **Use Existing Authorization in eVoucher** button to select from a list of approved authorizations, or click the **No Existing Authorization in eVoucher** button.

[Use Existing Authorization in eVoucher](#)
 You may click here to select from a list of approved authorizations.

[No Existing Authorization in eVoucher](#)
 If you do not have an existing authorization in eVoucher, you may proceed by clicking here.

« First < Previous Next > Last »

Delete Draft

Audit Assist

Step 3

Click the applicable AUTH-24, which highlights it in blue. *You cannot continue until it is highlighted.*

Authorization Selection

You can click the **Use Existing Authorization in eVoucher** button to select from a list of approved authorizations, or click the **No Existing Authorization in eVoucher** button.

Use Existing Authorization in eVoucher	Please Select the Associated Authorization
<p>Use Existing Authorization in eVoucher You may click here to select from a list of approved authorizations.</p> <p>No Existing Authorization in eVoucher If you do not have an existing authorization in eVoucher, you may proceed by clicking here.</p>	<p>ID Number: 89 Order Date: 01/21/2016 Service Type: Court Reporter / Transcript Special Handling: 0 Proceeding Transcribed: Transcription</p> <p> <input type="checkbox"/> Prosecution Opening <input type="checkbox"/> Prosecution Argument <input type="checkbox"/> Prosecution Rebuttal <input type="checkbox"/> Defense Opening Statement <input type="checkbox"/> Defense Argument <input type="checkbox"/> Jury Instructions <input type="checkbox"/> Voir Dire </p> <p>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.</p> <hr/> <p>ID Number: 116 Order Date: 03/22/2016 Service Type: Court Reporter / Transcript Special Handling: 0 Proceeding Transcribed: Arraignment</p> <p> <input type="checkbox"/> Prosecution Opening <input type="checkbox"/> Prosecution Argument <input type="checkbox"/> Prosecution Rebuttal <input type="checkbox"/> Defense Opening Statement <input type="checkbox"/> Defense Argument <input type="checkbox"/> Jury Instructions <input type="checkbox"/> Voir Dire </p> <p>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.</p>

Step 4

Click the **Expert** drop-down arrow and select the transcriptionist. In the Voucher Assignment section, click the appropriate radio button indicating whether the attorney or the transcriptionist will be entering information. Click **Create Voucher**.

New Voucher Information

Description

Court Reporter/Transcriber Status
☒ Official ☐ Contract ☐ Transcriber ☐ Other

Service Provider
 You can search one of the service providers already in the system
 OR you can enter the required information for another provider

Expert Expert, LeVar

Expert Info
 Details
 LeVar Expert
 AO-CMSO
 Washington DC 20544 US
 Phone: 202-502-2965

Voucher Assignment * ☒ Attorney ☐ Expert
This indicates who will be responsible for filling the voucher claim part

Create Voucher

Notes:

- To enter a new transcriptionist into the system, select the expert from the **Expert** drop-down list, and enter details in the Expert Info section.
- Selecting a transcriptionist already in the system automatically populates that expert's information.
- Select whether the attorney or the court reporter will be filling out the voucher claim portion.

- If the attorney clicks the **Expert** radio button, the expert fills out the required expense information and submits the form. The attorney then approves and submits to the court.

Step 5

Click the **Services** tab or click **Next** on the progress bar. Complete the **Date**, **Service Type**, **No. of Pages**, **Rate Per Page**, and **Description** fields, then click **Add**. The items appears in the Service Type column. Click **Save**.

Basic Info **Services** Expenses Documents Confirmation

Services

Date: 4/20/2020 Description:

Service Type:

Include Page Numbers:

No. of Pages: Rate Per Page:

Less Amount Apportioned:

Less Amount Adjusted:

Add **Delete Item**

* Required Fields

To group by a particular Header, drag the column to this area.

Service Type	Date	Description	Incl. Page Numbers	No. Pages	Rate	Apportioned	Discount	Total
Original	04/20/2020	Transcription.		15	10.00			150.00

Page 1 of 1 (1 items)

« First < Previous **Next >** Last » **Save** Delete Draft Audit Assist

Step 6

Click the **Expenses** tab or click **Next** on the progress bar. Complete the **Date**, **Expense Type**, and **Description** fields, and then click **Add**. The item appears in the Expense Type column. Click **Save**.

Basic Info Services **Expenses** Documents Confirmation

Expenses

Date: 4/20/2020 Description:

Expense Type:

Miles: at \$0.535 per mile.

Amount:

Add **Remove**

* Required Fields

To group by a particular Header, drag the column to this area.

Expense Type	Date	Description	Mile	Rate	Amt
Travel Miles	04/20/2...	Travel to court.	20	0.535	10.7

Page 1 of 1 (1 items)

« First < Previous **Next >** Last » **Save** Delete Draft Audit Assist

Step 7

Click the **Documents** tab or click **Next** on the progress bar. Click **Browse** to locate your file, and then add a description of the attachment. Click **Upload**. The attachment and description are added to the voucher and appear in the Description column.

Basic Info

Services

Expenses

Documents

Confirmation

Supporting Documents

File Upload (Only Pdf files of 10MB size or less!)

File

C:\Users\JaimeLongoria\I Browse...

Description

Document

Upload

Description

Document

Delete

View

Document

Delete

View

First

Previous

Next

Last

Save

Delete Draft

Audit Assist


Note: All documents must be submitted in PDF format and must be 10 MB or less.

Step 8

Click the **Confirmation** tab or click **Next** on the progress bar. In the **Public/Attorney Notes** field, you can include any notes to the court. Select the check box to swear and affirm to the accuracy of the authorization, which automatically time stamps it. Click **Submit**.

Basic Info Services Expenses Documents **Confirmation**

Confirmation

1. CIR./DIST./DIV. CODE 0101	2. PERSON REPRESENTED Jebediah Branson	VOUCHER NUMBER	
3. MAG. DKT/DEF. NUMBER	4. DIST. DKT/DEF. NUMBER 1:14-CR-08805-1-AA	5. APPEALS. DKT/DEF. NUMBER	6. OTHER. DKT/DEF. NUMBER
7. IN CASE/MATTER OF (Case Name) USA v. Branson	8. PAYMENT CATEGORY Felony (including pre-trial diversion of alleged felony)	9. TYPE PERSON REPRESENTED Adult Defendant	10. REPRESENTATION TYPE Criminal Case
11. OFFENSE(S) CHARGED 15:1825 F INSPECTION VIOLATION PENALTIES			
REQUEST AND AUTHORIZATION FOR TRANSCRIPT			
12. PROCEEDING IN WHICH TRANSCRIPT IS TO BE USED Transcript			
13. PROCEEDING TO BE TRANSCRIBED (Describe specifically). NOTE: The trial transcripts are not to include prosecution opening Transcription			
14. SPECIAL AUTHORIZATIONS		JUDGE'S INITIALS	
A. Apportioned Cost % of transcript with			
B. <input type="checkbox"/> 14-Day <input type="checkbox"/> Expedited <input type="checkbox"/> 3-Day <input type="checkbox"/> Daily <input type="checkbox"/> Hourly <input type="checkbox"/> Realtime Unedited			
C. <input type="checkbox"/> Prosecution Opening Statement <input type="checkbox"/> Prosecution Argument <input type="checkbox"/> Prosecution Rebuttal <input type="checkbox"/> Defense Opening Statement <input type="checkbox"/> Defense Argument <input type="checkbox"/> Voir Dire <input type="checkbox"/> 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 managed 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. Andrew Anders /S/ 1/21/2016 14:48:16 Signature of Attorney Date Andrew Anders Printed Name Telephone Number: 210-833-5623		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. Albert Albertson Signature of Presiding Judge or By Order of the Court 01/21/2016 Date of Order Nunc Pro Tunc Date	
CLAIMS FOR SERVICES			
17. COURT REPORTER/TRANSCRIBER STATUS <input checked="" type="checkbox"/> Official <input type="checkbox"/> Contract <input type="checkbox"/> Transcriber <input type="checkbox"/> Other		18. PAYEE'S NAME AND ADDRESS LeVar Expert, Inc. AO-CMSO Washington DC 20544 US Phone: 202-502-2965	
19. SOCIAL SECURITY NUMBER OR EMPLOYER ID NUMBER OF PAYEE TIN: XX-XXXXXXX			
20. TRANSCRIPT	INCLUDE PAGE NUMBERS	NO. OF PAGES	RATE PER PAGE
Original	see detail	0	see detail
Copy	see detail	0	see detail
Expenses (if any)			
SUB-TOTAL		LESS AMOUNT APPORTIONED	
\$0.00		see detail	
TOTAL		\$0.00	
TOTAL AMOUNT CLAIMED: \$0.00			
21. CLAIMANT 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 Judge or Clerk of Court Date Approved Amount			
Attention: The notes you enter will be available to the next approval level.			
Public/Attorney Notes			
<input checked="" type="checkbox"/> I swear and affirm the truth or correctness of the above statements Date: 4/20/2020 22:12:0			
			

« First < Previous **Next >** Last » Save Delete Draft Audit Assist

Step 9

A confirmation screen appears, indicating the previous action was successful, and the voucher has been submitted. Click the **Home Page** link to return to the home page. Click the **Appointment Page** link if you wish to create an additional document for this appointment.

Success

Your voucher has been submitted for payment. You will receive a notification if we need more details.

Please keep the following voucher number for your own records:

0101.0000165

Back to:

[Home Page](#)

[Appointment Page](#)

Creating a Travel Voucher

Note: There is **NOT AN AUTOSAVE** function on this program. You must click **Save** periodically to save your work.

Step 1

On the Appointment page, in the Create New Voucher section, click the **Create** link next to TRAVEL.

TRAVEL

Authorization for payment of Travel

Create

Step 2

The Basic Info page appears. The Travel Agency to be Used section automatically populates.

Basic Info | Authorization Request | Documents | Confirmation

Basic Info

1. CJC DISTRICT CODE 0101	2. PERSON REPRESENTED Febediah Brannon	VOUCHER NUMBER	
3. MAG. DISTRICT NUMBER 14-CP-08905-1-AA	4. DIST. DISTRICT NUMBER 14-CP-08905-1-AA	5. APPEALS DISTRICT NUMBER	6. OTHER DISTRICT NUMBER
7. IN CASE MATTER OF (Case Name) USA v. Brannon	8. PAYMENT CATEGORY Felony (including pre-trial diversion of alleged felony)	9. TYPE PERSON REPRESENTED Adult Defendant	10. REPRESENTATION TYPE Criminal Case
11. OFFENSE(S) CHARGED 15-1834 F INSPECTION VIOLATION PENALTIES			
12. ATTORNEY'S NAME AND MAILING ADDRESS Andrew Anders 110 Main Street San Antonio TX 78210 Phone: 210-833-5673 Cell phone: 210-555-1234 Email: andrew.anders@usda.uscourts.gov		13. COURT ORDER <input type="checkbox"/> A Associate <input type="checkbox"/> C Co Counsel <input type="checkbox"/> D Federal Defender <input type="checkbox"/> F Subs for Federal Defender <input type="checkbox"/> I Licensed Counsel (Capital Only) <input type="checkbox"/> O Appointing Counsel <input type="checkbox"/> P Subs for Panel Attorney <input type="checkbox"/> R Subs for Retained Attorney <input type="checkbox"/> S Pro Se <input type="checkbox"/> T Retained Attorney <input type="checkbox"/> U Subs for Pro Se <input type="checkbox"/> X Administrative <input type="checkbox"/> Y Standby Counsel	
14. LAW FIRM NAME AND MAILING ADDRESS		Prior Attorney's Name Appointment Date Signature of Presiding Judge or by Order of the Court Court Jurisdiction Date of Order: 5/3/2014 Next Pre Trial Date Reprint: <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
Travel Agency to be Used: National Travel Service (NTS) National Travel Service (NTS) 707 Virginia Street East Suite 100 Charleston, WV 25301 Phone: (800) 445-0668 Fax: Email:			

<< First | < Previous | Next > | Last >> | Save | Delete Draft | Audit Assist

Step 3

Click the **Authorization Request** tab or click **Next** on the progress bar. Complete all required fields marked with red asterisks, and then click **Add**. The information appears in the table at the bottom of the screen. Click **Save**.

Basic Info | **Authorization Request** | Documents | Confirmation

Request For Travel*

* Required Fields

Name and Title of Person Traveling: Andrew Anders *

Address of Person Traveling: 123 Way
San Antonio, TX 78229 *

Travel From Location: San Antonio, TX *

Travel To Location: Los Angeles, CA *

Estimated Dates of Travel: 5/25-5/28 *

Travel Requested: *

	Estimated Cost:	Instructions for requesting amounts for the travel items:
Airline Tickets via CJA Government Travel Agency:	300.00	Complete the estimated dollar amount for each applicable line. The "Total Estimated Cost" field is automatically calculated based on the estimated amounts entered in the Travel line items. Complete information for one traveler per form.
Ground Transportation:	20.00	
Subsistence (Hotels & meals):	100.00	
Other:		
Total Estimated Cost:	420.00	
Total Authorized:		

Purpose and Justification: Travel to talk to witness. *

Court Notes:

Add Remove

* All travel and expenses must be in compliance with government travel regulations. Actual cost of hotel and meals up to the established per diem rate. Expenses for travel for one day or last day is up to the MSJE rate.

Traveler	Travel From	Travel To	Travel Dates	Purpose and Justification	Estimated	Authorized	Court Notes
Andrew Anders	San Antonio, TX	Los Angeles, CA	5/25-5/28	Travel to talk to witness.	420.00		

1 Page 1 of 1 (1 items)

<< First < Previous **Next** > Last >> Save Delete Draft Audit Assist

Step 4

Click the **Documents** tab or click **Next** on the progress bar. Click **Browse** to locate your file, and then add a description of the attachment. Click **Upload**. The attachment and description are added to the voucher and appear in the Description column.

Basic Info | Authorization Request | **Documents** | Confirmation

Supporting Documents

File Upload (Only Pdf files of 10MB size or less!)

File C:\Users\JaimeLongoria\ Browse...

Description Travel Receipts

Upload

Description	Delete	View
Travel Receipts	Delete	View

<< First < Previous **Next** > Last >> Save Delete Draft Audit Assist

Note: All documents must be submitted in PDF format and must be 10 MB or less.

Step 5

Click the **Confirmation** tab or click **Next** on the progress bar. In the **Public/Attorney Notes** field, you can include any notes to the court. Select the check box to swear and affirm to the accuracy of the authorization, which automatically time stamps it. Click **Submit**.

Basic Info Services Expenses Documents **Confirmation**

Confirmation

1. CIR. DIST. DIV. CODE 0101	2. PERSON REPRESENTED Jebediah Branson	VOUCHER NUMBER	
3. MAG. DKT/DEF NUMBER	4. DIST. DKT/DEF NUMBER 1:14-CR-08805-1-AA	5. APPEALS DKT/DEF NUMBER	6. OTHER DKT/DEF NUMBER
7. IN CASE/MATTER OF (Case Name) USA v. Branson	8. PAYMENT CATEGORY Felony (including pre-trial diversion of alleged felony)	9. TYPE PERSON REPRESENTED Adult Defendant	10. REPRESENTATION TYPE Criminal Case
11. OFFENSE(S) CHARGED 15:1825.F INSPECTION VIOLATION PENALTIES			
REQUEST AND AUTHORIZATION FOR TRANSCRIPT			
12. PROCEEDING IN WHICH TRANSCRIPT IS TO BE USED Transcript			
13. PROCEEDING TO BE TRANSCRIBED (Describe specifically). NOTE: The trial transcripts are not to include prosecution opening transcription			
14. SPECIAL AUTHORIZATIONS		JUDGE'S INITIALS	
A. Apportioned Cost % of transcript with			
B. <input type="checkbox"/> 14-Day <input type="checkbox"/> Expedited <input type="checkbox"/> 3-Day <input type="checkbox"/> Daily <input type="checkbox"/> Hourly <input type="checkbox"/> Realtime Unedited			
C. <input type="checkbox"/> Prosecution Opening Statement <input type="checkbox"/> Prosecution Argument <input type="checkbox"/> Prosecution Rebuttal <input type="checkbox"/> Defense Opening Statement <input type="checkbox"/> Defense Argument <input type="checkbox"/> Voir Dire <input type="checkbox"/> 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 managed 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. Andrew Anders /S/ 1/21/2016 14:48:16 Signature of Attorney Date Andrew Anders Printed Name Telephone Number: 210-833-5623		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. Albert Albertson Signature of Presiding Judge or By Order of the Court 01/21/2016 Date of Order Nunc Pro Tunc Date	
CLAIMS FOR SERVICES			
17. COURT REPORTER/TRANSCRIBER STATUS <input checked="" type="checkbox"/> Official <input type="checkbox"/> Contract <input type="checkbox"/> Transcriber <input type="checkbox"/> Other		18. PAYEE'S NAME AND ADDRESS LeVar Expert, Inc. AO-CMSO Washington DC 20544 US Phone: 202-502-2965	
19. SOCIAL SECURITY NUMBER OR EMPLOYER ID NUMBER OF PAYEE TIN: XX-XXXXXXX			
20. TRANSCRIPT	INCLUDE PAGE NUMBERS	NO. OF PAGES	RATE PER PAGE
Original	see detail	0	see detail
Copy	see detail	0	see detail
Expenses (Items)			
SUB-TOTAL		LESS AMOUNT APPORTIONED	TOTAL
\$0.00		\$0.00	\$0.00
TOTAL AMOUNT CLAIMED:		\$0.00	
21. CLAIMANT 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 Judge or Clerk of Court Date Approved Amount			

Attention: The notes you enter will be available to the next approval level.

Public/Attorney
Notes

☒ I swear and affirm the truth or correctness of the above statements

Date: 4/20/2020 22:12:0



« First < Previous **Next >** Last » Save Delete Draft Audit Assist

Step 6

A confirmation screen appears, indicating the previous action was successful and the voucher has been submitted. Click the **Home Page** link to return to the home page. Click the **Appointment Page** link if you wish to create an additional document for this appointment.

Success

Your voucher has been submitted for payment. You will receive a notification if we need more details.

Please keep the following voucher number for your own records:

0101.0000162

Back to:

[Home Page](#)

[Appointment Page](#)

Creating a CJA-26 Voucher

This is a request and justification for expenses outside the statutory limits.

Note: There is **NOT AN AUTOSAVE** function on this program. You must click **Save** periodically to save your work.

Step 1

On the Appointment page, in the Create New Voucher section, click the **Create** link next to CJA-26.

CJA-26

Statement for a Compensation Claim
in Excess of the Statutory Case

Compensation Maximum: District
Court

Create

Step 2

The Basic Info page appears. Enter the details for information required. Click **Save**.

Basic Info Justification Documents Confirmation

Basic Info

1. CJA DISTRICT CODE 0101	1. PERSON REPRESENTED Isabelah Branson	VOUCHER NUMBER	
2. MAG. DISTRICT NUMBER	3. DIST. DISTRICT NUMBER 114-CP-08905-1-AA	4. APPEALS DISTRICT NUMBER	5. OTHER DISTRICT NUMBER
6. IN CASE MATTER OF (Case Name) USA v. Branson	7. PAYMENT CATEGORY Felony (including pre-trial diversion of alleged felony)	8. TYPE PERSON REPRESENTED Adult Defendant	9. REPRESENTATION TYPE Criminal Case
10. OFFENSE(S) CHARGED 11-1823 F INSPECTION VIOLATION PENALTIES			
11. ATTORNEY'S NAME AND MAILING ADDRESS Andrews, Anders 110 Main Street San Antonio TX 78210 Phone: 210-823-5623 Cell phone: 210-555-1234 Email: luu_angelas@texascourts.gov		12. COURT ORDER <input type="checkbox"/> A Associate <input type="checkbox"/> C Co-Counsel <input type="checkbox"/> D Federal Defender <input type="checkbox"/> F Sols for Federal Defender <input type="checkbox"/> L Learned Counsel (Capital Only) <input type="checkbox"/> O Appointing Counsel <input type="checkbox"/> P Sols for Panel Attorney <input type="checkbox"/> R Sols for Retained Attorney <input type="checkbox"/> S Pro Se <input type="checkbox"/> T Retained Attorney <input type="checkbox"/> U Sols for Pro Se <input type="checkbox"/> X Administrative <input type="checkbox"/> V Standby Counsel Prior Attorney's Name Appointment Date Signature of Presiding Judge or By Order of the Court Albert Alvarado Date of Order 11/9/2014 Repayment <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
14. LAW FIRM NAME AND MAILING ADDRESS		15. PREVIOUS YEAR'S DATA Amount Requested <input type="text"/> * Amount Approved <input type="text"/> Pre Trial Hours <input type="text"/> Trial Hours <input type="text"/> Sentencing Hours <input type="text"/> Other In-Court Hours <input type="text"/> Out-Of-Court Hours <input type="text"/> Number of Counts <input type="text"/> Number of Co-Defendants <input type="text"/> Other Pending Cases <input type="text"/> Sentencing Guideline Range <input type="text"/> Mandatory Minimum Found <input type="checkbox"/>	

« First < Previous Next > Last » **Save** Delete Draft Audit Assist

Step 3

Click the **Justification** tab or click **Next** on the progress bar. On the Justification page, enter information in the text fields, and then click **Save**.

Basic Info **Justification** Documents Confirmation

Justification

3. Describe discovery materials (nature and volume) and/or discovery practices which are a noteworthy factor in the number of hours claimed.

4. List and describe motions, legal memoranda, jury instructions, and sentencing documents, or legal research not resulting in such, which are a noteworthy factor in the number of hours claimed and which were drafted originally for this case (do not include standardized motions, etc., unless content was modified significantly).

5. Summarize investigation and case preparation (e.g., number and accessibility of witnesses interviewed, record collection, document organization) which are a noteworthy factor in the number of hours claimed.

6. Explain, if noteworthy, impact on the number of hours claimed of investigative, expert, or other services used (CJA 21 voucher)

7. Describe whether any of the following client considerations are a noteworthy factor in the number of hours claimed and explain each: communication with client/family, language difference, accessibility of client, or other

8. Explain any expense (items 17 and 18 of the CJA 20 voucher) greater than \$500

9. Explain any other noteworthy circumstances regarding the case and the representation provided to support this compensation request. Include, if applicable: (a) negotiations with U.S. attorney's office or law enforcement agency; (b) complexity or novelty of legal issues and factual complexity; (c) responsibilities involved measured by the magnitude and importance of the case; (d) manner in which duties were performed and knowledge, skill efficiency, professionalism, and judgment required of and used by counsel; (e) nature of counsel's practice and hardship or injury resulting from the representation; and (f) any extraordinary pressure of time or other factors under which services were rendered.

« First < Previous **Next >** Last » Save Delete Draft Audit Assist

Step 4

Click the **Documents** tab or click **Next** on the progress bar. Click **Browse** to locate your file, and then add a description of the attachment. Click **Upload**. The attachment and description are added to the voucher and appear in the Description column.

Basic Info

Justification

Documents

Confirmation

Supporting Documents

File Upload (Only Pdf files of 10MB size or less!)

File

C:\Users\JaimeLongoria\Browse...

Description

Document

Upload

Description	Delete	View
Document	Delete	View

First

Previous

Next

Last

Save

Delete Draft

Audit Assist

Note: All documents must be submitted in PDF format and must be 10 MB or less.

Step 5

Click the **Confirmation** tab or click **Next** on the progress bar. In the **Public/Attorney Notes** field, you can include any notes to the court. Select the check box to swear and affirm to the accuracy of the authorization, which automatically time stamps it. Click **Submit**.

Basic Info Justification Documents **Confirmation**

Confirmation

SUPPLEMENTAL INFORMATION STATEMENT FOR A COMPENSATION CLAIM IN EXCESS OF THE STATUTORY CASE COMPENSATION MAXIMUM: DISTRICT COURT

THIS FORM PROVIDES INFORMATION TO SUPPORT COUNSEL'S CLAIM THAT THE REPRESENTATION GIVEN WAS IN AN EXTENDED OR COMPLEX CASE, AND THAT THE EXCESS PAYMENT IS NECESSARY TO PROVIDE FAIR COMPENSATION. PARAGRAPH 2.22 B(3) OF THE *GUIDELINES FOR THE ADMINISTRATION OF THE CRIMINAL JUSTICE ACT*, VOLUME VII, *GUIDE TO JUDICIARY POLICIES AND PROCEDURES*, DEFINES THE TERMS "EXTENDED" AND "COMPLEX," AND SUGGESTS CRITERIA FOR DETERMINING "FAIR COMPENSATION." THIS FORM SERVES AS COUNSEL'S MEMORANDUM REQUIRED BY PARAGRAPH 2.22 C (2) OF THOSE *GUIDELINES*, AND DOES NOT REPLACE ANY OTHER DOCUMENTATION REQUIRED TO SUPPORT THE PAYMENT REQUEST. IF EXTRA SPACE IS NEEDED, ATTACH ADDITIONAL SHEETS OF PAPER.

ATTORNEY NAME: Andrew Anders

CASE NAME: USA v. Branson

DOCKET NUMBER: 1:14-CR-08805-AA DEFENDANT NUMBER: 1 VOUCHER NUMBER:

1 PERIOD OF APPOINTMENT (DATES): 3/3/2014

TOTAL NUMBER OF IN-COURT HOURS: 0
PRETRIAL HEARINGS: 0 TRIAL: 0 SENTENCING HEARINGS: 0 ALL OTHER IN-COURT: 0
TOTAL NUMBER OF OUT-OF-COURT HOURS: 0

2 OFFENSES CHARGED: 15:1825 F INSPECTION VIOLATION PENALTIES

NUMBER OF COUNTS CHARGED: 0 NUMBER OF CO-DEFENDANTS: 0
OTHER PENDING CASES (DOCKET NUMBERS) OF DEFENDANT DURING REPRESENTATION:
IF APPLICABLE, SENTENCING GUIDELINE RANGE FOUND BY THE COURT FOR SENTENCING:
WAS A MANDATORY MINIMUM FOUND OR AT ISSUE AT SENTENCING? ☐ YES ☒ NO

3 DESCRIBE DISCOVERY MATERIALS (NATURE AND VOLUME) AND/OR DISCOVERY PRACTICES WHICH ARE A NOTEWORTHY FACTOR IN THE NUMBER OF HOURS CLAIMED:

4 LIST AND DESCRIBE MOTIONS, LEGAL MEMORANDA, JURY INSTRUCTIONS, AND SENTENCING DOCUMENTS, OR LEGAL RESEARCH NOT RESULTING IN SUCH, WHICH ARE A NOTEWORTHY FACTOR IN THE NUMBER OF HOURS CLAIMED AND WHICH WERE DRAFTED ORIGINALLY FOR THIS CASE (DO NOT INCLUDE STANDARDIZED MOTIONS, ETC., UNLESS CONTENT WAS MODIFIED SIGNIFICANTLY):

5 SUMMARIZE INVESTIGATION AND CASE PREPARATION (E.G., NUMBER AND ACCESSIBILITY OF WITNESSES INTERVIEWED, RECORD COLLECTION, DOCUMENT ORGANIZATION) WHICH ARE A NOTEWORTHY FACTOR IN THE NUMBER OF HOURS CLAIMED:

6 EXPLAIN, IF NOTEWORTHY, IMPACT ON THE NUMBER OF HOURS CLAIMED OF INVESTIGATIVE, EXPERT, OR OTHER SERVICES USED (CJA 21 VOUCHER):

7 CHECK WHETHER ANY OF THE FOLLOWING CLIENT CONSIDERATIONS ARE A NOTEWORTHY FACTOR IN THE NUMBER OF HOURS CLAIMED AND EXPLAIN EACH: COMMUNICATION WITH CLIENT/FAMILY, LANGUAGE DIFFERENCE, ACCESSIBILITY OF CLIENT, OTHER:

8 EXPLAIN ANY EXPENSE (ITEMS 17 AND 18 OF THE CJA 20 VOUCHER) GREATER THAN \$500:

9 EXPLAIN ANY OTHER NOTEWORTHY CIRCUMSTANCES REGARDING THE CASE AND THE REPRESENTATION PROVIDED TO SUPPORT THIS COMPENSATION REQUEST:

INCLUDE, IF APPLICABLE: (A) NEGOTIATIONS WITH U.S. ATTORNEY'S OFFICE OR LAW ENFORCEMENT AGENCY; (B) COMPLEXITY OR NOVELTY OF LEGAL ISSUES AND FACTUAL COMPLEXITY; (C) RESPONSIBILITIES INVOLVED MEASURED BY THE MAGNITUDE AND IMPORTANCE OF THE CASE; (D) MANNER IN WHICH DUTIES WERE PERFORMED AND KNOWLEDGE, SKILL EFFICIENCY, PROFESSIONALISM, AND JUDGMENT REQUIRED OF AND USED BY COUNSEL; (E) NATURE OF COUNSEL'S PRACTICE AND HARDSHIP OR INJURY RESULTING FROM THE REPRESENTATION; AND (F) ANY EXTRAORDINARY PRESSURE OF TIME OR OTHER FACTORS UNDER WHICH SERVICES WERE RENDERED.


Signature of Attorney Andrew Anders	Date Signed	Requested Amount
Signature of Presiding Judge	Date Signed	Judge Code Approved Amount
Signature of Chief Judge, Court of Appeals (or Delegate)	Date Signed	Judge Code Approved Amount

Public/Attorney Notes

Attention: The notes you enter will be available to the next approval level.

☒ I swear and affirm the truth or correctness of the above statements

Date: 4/20/2020 22:27:34



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Step 5

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