

**NOTE:** Only the interpreter can complete this form. A separate form must be used for each court facility.  
Please print all information clearly.

# Interpreter Invoice

Invoice No. \_\_\_\_\_  
 Invoice Date \_\_\_\_\_  
 (DD/MM/YY)

Name of Interpreter: (surname, first name, initials) \_\_\_\_\_  
 Address: (street & number, city, province & postal code) \_\_\_\_\_  
 Check this box **only** if this is a **new** address.) \_\_\_\_\_

HST Registration No. \_\_\_\_\_

Court Location \_\_\_\_\_  
 Language \_\_\_\_\_

Date of Service (DD/MM/YY)	Case Name / Court File Number	Scheduled Time of Court Commencement	Time of Court Adjournment	DEDUCT Time of Lunch Recess (max. 1 hour)	ADD Additional Authorized Hours	TOTAL IN-COURT HOURS	Court Clerk Initials	TOTAL BILLABLE HOURS	ADD Additional Authorized Expenditures (If any, attach receipts.)	Kilometre Allowance or Transit Fare
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I, \_\_\_\_\_, Prosecutor,  
 also authorize additional expenditures to be paid in the amount of \$ \_\_\_\_\_  
 for (reason) \_\_\_\_\_  
 \_\_\_\_\_ Prosecutor \_\_\_\_\_ Date

Value of <b>TOTAL</b> Billable Hours ▶		} <b>GRAND TOTAL WITH TAXES</b> \$	◀ <b>TOTAL KM</b>
Value of <b>TOTAL</b> KM ▶			◀ Previous Balance
<b>TOTAL</b> Other Expenses (Excluding KM) ▶			◀ <b>TOTAL KM to Date</b>
<b>SUBTOTAL</b> Before Taxes ▶			
HST for <b>Billable Hours</b> ▶			
HST for <b>Expenses</b> ▶			

I certify that I was in attendance in court as described above.  
 \_\_\_\_\_ Signature of Interpreter \_\_\_\_\_ Date

Approved: \_\_\_\_\_ Date: \_\_\_\_\_  
 Supervisor/Authorized Official

Print name & title: