

Appendix 67

Administrative Form 1.06—Certification of Interpreter

ADMINISTRATIVE OFFICE OF THE COURTS
 CERTIFICATION OF INTERPRETER
 (INVOICE)
 (Please print or type information)

Date Interpreter Appeared: _____

PAYEE: _____
 Last Name, First, Middle, Generation (must be separated by commas)

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

CASE NUMBER(S): _____

COUNTY	COURT TYPE			FOR WHAT ACTION/OFFENSE WAS THE INTERPRETER USED (e.g., DIV. DIVORCE, CHILD SUPPORT, BATTERY, ASSAULT, LANDLORD/TENANT, ETC.)?	WHAT STAGE IN THE LEGAL PROCESS WAS THE INTERPRETER USED (e.g., ARRAIGNMENT, TRIAL, LOCK UP, INTERVIEW, MOTION/HEARING, DEPOSITION, SENTENCING)?	CERTIFIED		TYPE OF INTERPRETER		DIALECT SPOKEN
	MAG	METRO	DIS# (1-12)			YES	NO	SPOKEN	HEARING IMPAIRED	

HOW MANY PERSONS DID THE INTERPRETER TRANSLATE FOR?	WHAT WAS THE MODE OF TRANSLATION BY THE INTERPRETER: (1) SIGHT TRANSLATION; (2) SIMULTANEOUS INTERPRETATION; (3) CONSECUTIVE INTERPRETATION; OR (4) SIMULTANEOUS CROSS-EXAMINATION (Attached are the definitions of the different modes of translation.)?	TOTAL HOURS INTERPRETED:	TOTAL HOURS TRAVELED:

Administrative Form 1.06

Administrative Form 1.06--Certification of Interpreter continued.

1. I certify that I was an interpreter for the court in _____ (town), New Mexico on the date and for the case(s) listed on the reverse side of this form.
2. OUT OF TOWN PER DIEM: \$ _____ (Use current DFA per diem schedule to calculate.)
3. MILES TRAVELED: _____ x .25 A MILE = _____ (Please use current DFA mileage rate.)
4. Odometer reading if out-of-town mileage exceeds map mileage. ODOMETER BEGINNING _____ ODOMETER ENDING _____ TOTAL MILEAGE _____
5. I further certify that the information contained in this statement, including attachments, is true and correct.

Date _____

Interpreter's Signature _____

AMOUNT DUE

MILEAGE (\$ _____)

PER DIEM (\$ _____)

TRAVEL TIME (\$ _____)

INTERPRETER COST (\$ _____)

SPECIFY LANGUAGE: _____

INTERPRETER PAID ACCORDING TO (CIRCLE ONE):

- HOURLY RATE
- GUARANTEE

SIGN LANGUAGE (\$ _____) (Attach Copy of RID or QA Certificate)

PARKING (\$ _____)

GROSS RECEIPTS TAX (\$ _____)

SOCIAL SECURITY NO. _____

NM TAX NO. _____ (Required if interpreter is to receive gross receipts tax.)

CONTRACT NO. _____

TOTAL AMOUNT DUE (\$ _____)

I certify that the person named above attended court as an interpreter in the designated case(s). I have examined this claim and find it to be true, to the best of my knowledge.

Judge's or Designee's Signature

Revised 5/11/99