AO 336 (OR Rev. 7/	(10)		UCHER FOR ATTE R CONTRACT COU			VOUCHER NO.			
DISTRICT OREGON					(Check One):	CONTRACT NO.			
					☐ District Court ☐ Bankruptcy Court				
CONTRAC	TOR'S NAME			CONTRA	ACTOR TAXPAY	YER ID NUMBER	ATTENDING R	EPORTER	
STREET ADDRESS					FULL-DAY RATE HALF-DAY		ATE OVERTIME RATE		
CITY AND STATE ZIP CODE					JUDGE/COURT DESIGNEE (Optional)				
				Signature	;		Date		
Date 1	Last Name of	Case Name 3	Case Number	Actual Time of Reporting		orting	Attending Rptrs		
	Presiding Judicial Officer 2			Morning Session 5	Afternoon Session 6	Overtime Session 7	(Several Court Reporters Used) 8	Claimed Compensation 9	
	MPENSATION (Trav L—TOTAL MILES _	vel outside contract go x RATE	eographical						
2. TOLLS									
3. OTHER	(Explain)								
							TOTAL		
	I	hereby certify that th	CONTRACTO e above is a correct state and of the amount of	ement of the se	ervices performed	, of expenses incurr	red,		
SIGNATUR	E OF CONTRACTO	R (or authorized agen	t)			DAT	Е		
		I h	COURT (ereby certify the above	CERTIFICAT as correct and		nt.			
SIGNATURE OF COURT REPRESENTATIVE DATE									
BFY FUND BUDGET ORG.					T ORG.	BOC	CHECK NUMBER		
PAID BY/D	O.O./DATE OF PAYM	ENT							