## CS-225 Daily Interpreter Invoice Instructions (rev. 07/2018)

**Top Section**: Information about the interpreter who provided services:

- Invoice Number: Enter an invoice number, if applicable. This is an optional field for interpreter's use.
- <u>Service Date:</u> Enter the date(s) interpreting services were provided.
- County: Enter the county where interpreting services were provided.
- <u>City Traveling From</u>: Enter the departure city for validating travel time and/or mileage claimed.
- WI Interpreter ID#: Enter interpreter identification number assigned by the Wisconsin Director of State Courts Interpreter Program.
- Interpreter Name: Enter interpreter's name who provided the service.
- <u>WI State Certification:</u> Enter the level of qualification or credential with allowable options being Certified, Provisional, Provisional-B, Authorized, or Uncertified. This field appears as a drop-down menu if completing the form electronically.
- Language: Enter the language in which the interpreter provided services.
- Agency Name: Enter agency name, if applicable.
- Mailing Address: Enter the mailing address for invoice payment to individual or agency, if applicable.
- SSN/Tax ID Number: Enter individual's SSN or agency's tax ID number, if applicable.

## **Middle Section**: Daily time record of interpreter services provided:

- <u>Branch</u>: Enter the circuit court branch where interpreting services were provided. If services were provided out-of-court, enter the location (e.g. clerk's counter, mediation)
- Judge/Commissioner: Enter the name of the Judge or Court Commissioner. If no Judge or Court Commissioner was assigned to the case yet, leave blank.
- Case Number: Enter a case number. If service was provided for intake, write "intake" or if no case number, leave blank
- <u>LEP Individual</u>: Enter the first and last name of the LEP person for whom the interpreter provided services.
- <u>Start Time</u>: Enter the time interpreter was scheduled to begin a specific assignment or the actual start time interpreter services are provided, whichever is earlier. Use the format "10:00 am" or "10 am" if completing the form electronically.
- Stop Time: Enter the time interpreter completed the specific assignment. Use the format "10:00 am" or "10 am" if completing the form electronically.
- <u>Minutes</u>: Enter the Stop Time minus Start Time converted to minutes rounded to the nearest quarter hour. (e.g. if the Start Time is 10 a.m. and the Stop Time is 11:15 a.m., 75 is entered as Minutes.) This field calculates automatically if completing the form electronically.
- <u>Court Approval</u>: Enter the court official's initials or signature to indicate approval that interpreter services were provided. This approval could be a judge, court commissioner, clerk, or other staff authorized to sign for the Court.

## **Bottom Section**: Billing information to request payment from the county:

[A] Interpreting Time (Minutes): Enter the sum of all minutes logged by the interpreter for the day. This cell calculates automatically if completing the form electronically.

- Rate/Hour: Enter the hourly rate charged for interpreting services
- <u>Charges for Interpreting Time</u>: Enter the total daily charges for interpreting time. This cell calculates automatically if completing the form electronically. If completing by hand, divide the total minutes by 60 and multiply by the hourly rate to calculate total charges for interpreting services.
- [B] Travel Time Charged (Hours): Enter the daily travel time billed in hours rounded to the nearest quarter hour (e.g. 1 hour and 45 minutes is entered as 1.75)
- Rate/Hour: Enter the hourly rate charged for travel time
- <u>Charges for Travel Time</u>: Enter the total daily charges for travel time. This cell calculates automatically if completing the form electronically. If completing by hand, multiply the number of travel hours by hourly rate for travel to calculate total charges for travel time.
- [C] Mileage: Enter the round-trip miles traveled to and from work for the court for the day. Total mileage charges are calculated automatically at \$.51 per mile if completing the form electronically. If completing by hand, multiply the total number of miles by 0.51.
- [D] Other Charges (Explain in Notes): Enter total additional charges for the day that are not recorded in [A], [B], or [C]. Provide more details in the Notes section.
- [E] Total: Enter the total amount billed to the county for the services provided for the day. This cell calculates automatically if completing the form electronically. If completing by hand, add the cells in column [4]

<u>Interpreter Signature:</u> Signature of interpreter certifying that the billing submitted is a true and correct accounting of the services provided to the county's Clerk of Circuit Courts. Electronic signature is acceptable at the clerk's discretion.

Date: Enter the appropriate date.

County Signature and Date of Approval: Signature and date approving the invoice for payment or any other county needs. This is an optional field for county's use.

**NOTE**: Interpreters may interpret for multiple cases in various locations within the county on the same day. Interpreters must submit a completed form CS-225 to the county Clerk of Circuit Courts for payment. Only one day should be recorded on each form CS-225 and one case per line. More forms can be used per day as needed.