



**UNITED STATES DISTRICT COURT**  
**CENTRAL DISTRICT OF CALIFORNIA**  
**U.S. COURTHOUSE**  
**312 NORTH SPRING STREET**  
**LOS ANGELES, CALIFORNIA 90012-4797**  
**TEL: 213-894-8520**  
**FAX: 213-894-8522**

**LAWYER REPRESENTATIVE REQUEST  
AND AUTHORITY TO  
INCUR TRAVEL EXPENSES**

**Lawyer Representative:** (Include address, phone and fax numbers)

**Conference To Attend:** (Include dates, City and State)

**Eligibility for Reimbursement:**

(Provide an explanation why without reimbursement of travel expenses, attendance at the above conference is not possible. If applicable include a letter from your employer stating that reimbursement for the conference will not be made.)<sup>1</sup>

**Total Anticipated Expenses:**

(Include estimated costs of transportation, lodging, conference registration, meals, etc.)<sup>2</sup>

\_\_\_\_\_  
Signature of Lawyer Representative

\_\_\_\_\_  
Date

**Good cause having been found, authorization is granted to incur travel expenses.  
Reimbursement for registration, conference events, lodging and meals is limited to actual  
and reasonable expenses and must be supported by receipts or copies thereof.**

APPROVED:

\_\_\_\_\_  
CJA Supervising Attorney

\_\_\_\_\_  
Date

<sup>1</sup>If extra space is needed, attach additional sheets of paper.

<sup>2</sup>If extra space is needed, attach additional sheets of paper.



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**LAWYER REPRESENTATIVE REQUEST**  
**FOR REIMBURSEMENT OF**  
**TRAVEL EXPENSES**

**Name of Lawyer Representative:**

(Include address, phone and fax numbers and social security or tax identification number)

**Total Requested for Reimbursement:**

(Set forth the nature and amount of each expenditure supported by actual receipts or copies thereof. Include the signed Request and Authority to Incur Travel Expenses)<sup>1</sup>

\_\_\_\_\_  
Signature of Lawyer Representative

\_\_\_\_\_  
Date

**APPROVED FOR PAYMENT** with funds from the California Central District's Attorney Admissions Fund as provided for in the United States District Court Central District of California Policy for Reimbursement of Travel Expenses Incurred by Lawyer Representatives From Government Agencies, Non-Profit Organizations, Small Firms and Solo Practices.

Amount Approved: \$ \_\_\_\_\_

\_\_\_\_\_  
CJA Supervising Attorney

\_\_\_\_\_  
Date

<sup>1</sup>If extra space is needed, attach additional sheets of paper.