

Creating a Travel AUTH in eVoucher

In the District of Arizona, attorneys are required to obtain advance authorization for any overnight or out of district travel. This also applies to service providers utilized by CJA attorneys.

Attorney should prepare in advance of submitting a Travel AUTH request by obtaining estimates for the travel expenses that may be incurred. Counsel may need to contact National Travel for an estimate for air travel (1-800-445-0668). To determine the maximum allowable per diem rate for the location of travel, counsel should review the GSA travel website <https://www.gsa.gov/travel/plan-book/per-diem-rates> to determine maximum allowable rates for hotel and meal expenses. CJA provides for reimbursement of expenses actually incurred for travel. Therefore, traveler will be required to submit detailed copies of all travel receipts detailing expenses for hotels, meals, fees, etc.

Step 1

Click the hyperlink for the correct case to access the Appointment Info page.

The image shows two screenshots from a web application. The top screenshot, titled 'My Active Documents', displays a table with columns: Case, Defendant, Type, Status, and Date Entered. It lists two entries for 'Sample Defendant' with claimed amounts of 8,437.78 and 2,317.29. The bottom screenshot, titled 'Appointments' List', shows a list of appointments with details for each, including case numbers, defendant names, and attorney information. A red arrow points to the case link 'Case: 2:20-CR-00001-SJ' in the second row of the appointments list.

Case	Defendant	Type	Status	Date Entered
2:19-CR-01200-SJ Start: End:	Sample Defendant (# 1) Claimed Amount: 8,437.78	CJA-20 Sample Attorney	Voucher Entry Edit	08/22/2019
3:19-CR-08000-SJ Start: End:	Sample Defendant (# 2) Claimed Amount: 2,317.29	CJA-20 Sample Attorney	Voucher Entry Edit	08/22/2019

Appointments	Defendant
Case: 3:19-CR-08000-SJ Defendant #: 2 Case Title: USA v. Defendant et al Attorney: Sample Attorney	Defendant: Sample Defendant Representation Type: Criminal Case Order Type: Subs for Panel Attorney Order Date: 08/07/19 Pres. Judge: Sample Judge Adm./Mag Judge:
Case: 2:20-CR-00001-SJ Defendant #: 1 Case Title: USA v. Sample Defendant1 Attorney: Sample Attorney	Defendant: Sample Defendant1 Representation Type: Criminal Case Order Type: Appointing Counsel Order Date: 01/02/20 Pres. Judge: Sample Judge Adm./Mag Judge:
Case: 2:19-CR-01200-SJ Defendant #: 1 Case Title: USA v. Sample Defendant Attorney: Sample Attorney	Defendant: Sample Defendant Representation Type: Criminal Case Order Type: Appointing Counsel Order Date: 02/01/19 Pres. Judge: Sample Judge Adm./Mag Judge:

Step 2

On the Appointment Info page, in the Create New Voucher section, click the **Create** hyperlink next to **TRAVEL** authorization.

Appointment
In this page you will find a summary about this appointment, including a list of vouchers related to this appointment and links to create new vouchers

[View Representation](#)

Create New Voucher

AUTH [Create](#)
Authorization for Expert and other Services

AUTH-24 [Create](#)
Authorization for payment of transcript

BUDGETAUTH [Create](#)
Authorization for Excess Attorney Fees and/or Expert and other Services on Budgeted Case

CJA-20 [Create](#)
Appointment of and Authority to Pay Court-Appointed Counsel

CJA-21 [Create](#)
Authorization and Voucher for Expert and other Services

CJA-26 [Create](#)
Statement for a Compensation Claim in Excess of the Statutory Case Compensation Maximum: District Court

TRAVEL [Create](#)
Authorization for payment of Travel

Reports

[Defendant Detail Budget Report - Attorney](#)
Detailed budget info for defendant

Appointment Info

1. CIR./DIST./DIV. CODE 0970	2. PERSON REPRESENTED Sample Defendant 1	VOUCHER NUMBER	
3. MAG. DKT./DEF. NUMBER	4. DIST. DKT./DEF. NUMBER 2:20-CR-00001-1-SJ	5. APPEALS. DKT./DEF. NUMBER	6. OTHER. DKT./DEF. NUMBER
7. IN CASE/MATTER OF(Case Name) USA v. Sample Defendant1	8. PAYMENT CATEGORY Felony (including pre-trial diversion of alleged felony)	9. TYPE PERSON REPRESENTED Adult Defendant	10. REPRESENTATION TYPE Criminal Case
11. OFFENSE(S) CHARGED 10:2408.M DEFENSE CONTRACT RELATED FELONIES, CONTRACTORS			
12. ATTORNEY'S NAME AND MAILING ADDRESS Sample Attorney - Bar Number: 00001 1 Street Name Phoenix AZ 85003 Phone: 111-222-3333 Cell phone: 111-555-1212		13. COURT ORDER <input type="checkbox"/> A Associate <input type="checkbox"/> C Co-Counsel <input type="checkbox"/> D Federal Defender <input type="checkbox"/> F Subs for Federal Defender <input type="checkbox"/> L Learned Counsel <input checked="" type="checkbox"/> O Appointing Counsel (Capital Only) <input type="checkbox"/> P Subs for Panel Attorney <input type="checkbox"/> R Subs for Retained Attorney <input type="checkbox"/> S Pro Se <input type="checkbox"/> T Retained Attorney <input type="checkbox"/> U Subs for Pro Se <input type="checkbox"/> X Administrative <input type="checkbox"/> Y Standby Counsel Prior Attorney's Name Appointment Dates Signature of Presiding Judge or By Order of the Court Sample Judge Date of Order: 1/2/2020 Nunc Pro Tunc Date Repayment <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
14. LAW FIRM NAME AND MAILING ADDRESS			

Vouchers on File

To group by a particular Header, drag the column to this area. Search:

Case	Defendant	Type	Status	Date Entered
No rows have been recorded on the database				
No data				

Step 3

The document will open on the **Basic Info** tab, click the **Authorization Request** tab.

TRAVEL
Attorney Enters

Def.: Sample Defendant1

[Link to CM/ECF](#)

Voucher #:
Request Date:
Decision Date:

Amount Claimed: \$0.00

Tasks

[Link To Appointment](#)
[Link To Representation](#)

[Basic Info](#) |
 [Authorization Request](#) |
 [Documents](#) |
 [Confirmation](#)

Basic Info

1. CIR./DIST./DIV. CODE 0970	2. PERSON REPRESENTED Sample Defendant1	VOUCHER NUMBER	
3. MAG. DKT./DEF. NUMBER	4. DIST. DKT./DEF. NUMBER 2:20-CR-00001-1-SJ	5. APPEALS. DKT./DEF. NUMBER	6. OTHER. DKT./DEF. NUMBER
7. IN CASE/MATTER OF(Case Name) USA v. Sample Defendant1	8. PAYMENT CATEGORY Felony (including pre-trial diversion of alleged felony)	9. TYPE PERSON REPRESENTED Adult Defendant	10. REPRESENTATION TYPE Criminal Case
11. OFFENSE(S) CHARGED 10:2408.M DEFENSE CONTRACT RELATED FELONIES, CONTRACTORS			
12. ATTORNEY'S NAME AND MAILING ADDRESS Sample Attorney - Bar Number: 00001 1 Street Name Phoenix AZ 85003 Phone: 111-222-3333 Cell phone: 111-555-1212		13. COURT ORDER <input type="checkbox"/> A Associate <input type="checkbox"/> C Co-Counsel <input type="checkbox"/> D Federal Defender <input type="checkbox"/> F Subs for Federal Defender <input type="checkbox"/> L Learned Counsel <input checked="" type="checkbox"/> O Appointing Counsel (Capital Only) <input type="checkbox"/> P Subs for Panel Attorney <input type="checkbox"/> R Subs for Retained Attorney <input type="checkbox"/> S Pro Se <input type="checkbox"/> T Retained Attorney <input type="checkbox"/> U Subs for Pro Se <input type="checkbox"/> X Administrative <input type="checkbox"/> Y Standby Counsel Prior Attorney's Name Appointment Dates Signature of Presiding Judge or By Order of the Court Sample Judge Date of Order: 1/2/2020 Nunc Pro Tunc Date Repayment <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
14. LAW FIRM NAME AND MAILING ADDRESS			

Travel Agency to be Used: National Travel Service (NTS)

National Travel Service (NTS)
707 Virginia Street East
Suite 100
Charleston, WV 25301
Phone: (800) 445-0668
Fax:
Email:

Step 4

On the **Authorization Request** tab, complete the following fields:

- Name and Title of Person Traveling
- Address of Person Traveling
- Travel From Location
- Travel to Location
- Estimated Dates of Travel
- Estimated Costs (Airline Tickets, Ground Transport, Subsistence (hotels & meals) and Other (if any))
- Purpose and Justification

Basic Info | **Authorization Request** | Documents | Confirmation

Request For Travel*

* Required Fields

Name and Title of Person Traveling:

Address of Person Traveling:

Travel From Location:

Travel To Location:

Estimated Dates of Travel:

Travel Requested: *	Estimated Cost:	Instructions for requesting amounts for the travel items: Complete the estimated dollar amount for each applicable line. The "Total Estimated Cost" field is automatically calculated based on the estimated amounts entered in the Travel line items. Complete information for one traveler per form.
Airline Tickets via CJA Government Travel Agency:	<input type="text"/>	
Ground Transportation:	<input type="text"/>	
Subsistence (Hotels & meals):	<input type="text"/>	
Other: <input type="text"/>	<input type="text"/>	

Total Estimated Cost:

Total Authorized: *

Purpose and Justification:

Court Notes:

Add Remove

* All travel and expenses must be in compliance with government travel regulations. Actual cost of hotel and meals up to the established per diem rate. Expenses for travel for one day or last day is up to the M&IE rate.

Step 5

Upon completion of each traveler's information, click **Add**. You can request travel for multiple people in one request. Note that each request appears in the grid below.

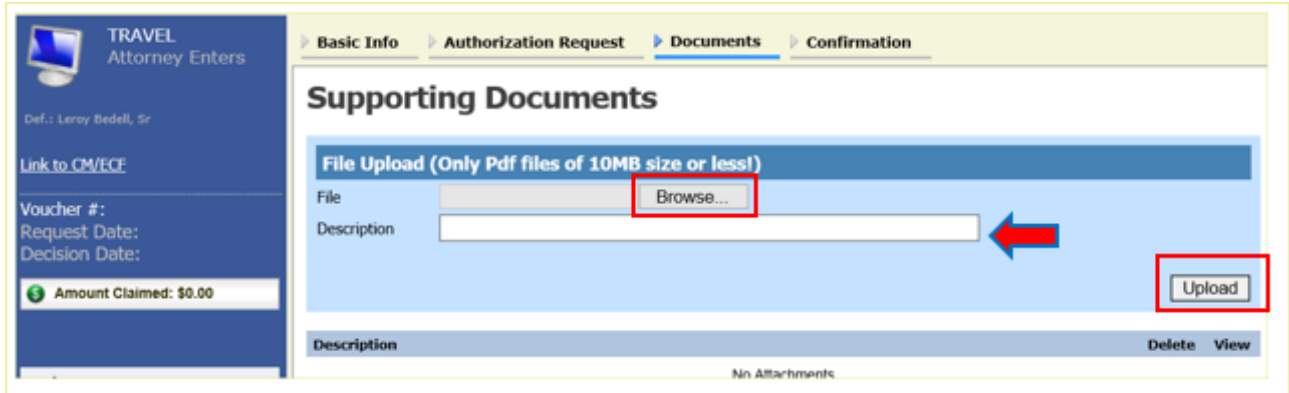
* All travel and expenses must be in compliance with government travel regulations. Actual cost of hotel and meals up to the established per diem rate. Expenses for travel for one day or last day is up to the M&IE rate.

To group by a particular Header, drag the column to this area.

Traveler	Travel From	Travel To	Travel Dates	Purpose and Justification	Estimated	Authorized	Court Notes
Ingrid Investigator	Phoenix, AZ	Orlando, FL	10/15/19-10/18/19	Locate and interview witnesses	1220.00		

Step 6

If you have any supporting documents to add, click **Documents** tab, and upload supporting documents. Note: Each document must be in PDF format and 10 MB or less in size.



Step 7

On the Confirmation tab, ensure that all travel requested in this document is properly reflected on the page. If needed, you can add any public/attorney notes. If the document is accurate, check the box affirming the accuracy of the information provided, then click **Submit**.

REQUESTS FOR TRAVEL							
Traveler	Travel From	Travel To	Travel Dates	Purpose and Justification	Estimated	Authorized	Court Notes
Molly Mitigation	Phoenix, AZ	Washington D.C.	11/1/19-11/4/19	Mitigation Interviews	\$1,400.00		
Ingrid Investigator	Phoenix, AZ	Orlando, FL	10/15/19-10/18/19	Locate and interview witnesses	\$1,220.00		
TOTALS:					\$2,620.00		

I SWEAR OR AFFIRM THE TRUTH OR CORRECTNESS OF THE ABOVE STATEMENTS.

Signature of Attorney		Date Signed:	
Signature of Presiding Judge	Date Signed	Judge Code	Approved Amount
Signature of Chief Judge, Court of Appeals (or Delegate)	Date Signed	Judge Code	Approved Amount

Public/Attorney Notes

Attention: The notes you enter will be available to the next approval level.

I swear and affirm the truth or correctness of the above statements

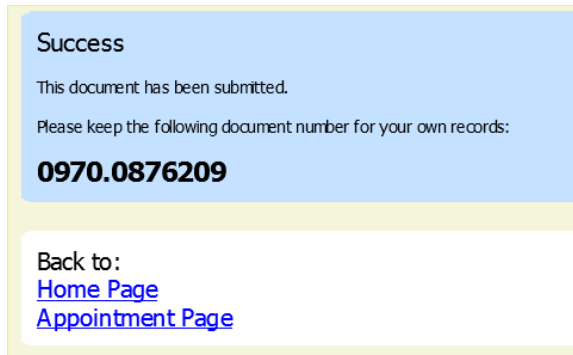
Date: _____

Submit

<< First < Previous Next > Last >> Save Delete Draft Audit Assist

**Step
8**

A confirmation screen appears, indicating the previous action was successful and the TRAVEL authorization has been submitted to the court. Click the **Home Page** hyperlink to return to the home page, or click the **Appointment Page** hyperlink to create an additional document for this appointment. The TRAVEL Authorization now appears in the **My Submitted Documents** section of your home page.



Success

This document has been submitted.

Please keep the following document number for your own records:

0970.0876209

Back to:
[Home Page](#)
[Appointment Page](#)

**Step
9**

You will automatically receive an email if/when the TRAVEL authorization has been approved.

For any questions related to the TRAVEL authorization document or travel in general, please contact the CJA department at 602-322-7150.