## QUICK CHECKLIST FOR REIMBURSEMENT OF ORDINARY/OFFICIAL WITNESS

An Attorney or Witness should gather the following information and documentation before beginning a billing packet. JAC will only make direct payment to a witness when the amount sought is at least \$50. For matters involving ordinary or official witness fees of less than \$50, payment will be through reimbursement to the attorney only.

The foll	owing information is required:
	Attorney's name and bar ID;
	Witness Name;
	Payee Social Security Number; OR if Official Witness (law enforcement), a number will be provided when billing
	is received by JAC;
	Case number;
	County and Circuit;
	Defendant name;
	Witness Address (N/A if law enforcement);
	Number of days travelled (in county only);
	Date travelled;
	Start location and end location;
	Invoice Number (For attorney reimbursement only);
	Total amount billed;
	Witness Signature and Attorney Signature (if the defendant is Pro Se, then the signature of Defendant or
	Standby Counsel).
Require	ed Documents (*in PDF or Tiff format for attorneys submitting the billing packet via MyJAC):
	JAC Invoice - Certification and Request for Payment of Ordinary and Official Witnesses (attorneys create this
	form online via MyJAC). Witnesses may access the form at:
_	https://www.justiceadmin.org/court_app_counsel/Forms/ordinarywitness.pdf.
	If billing \$0.445 rate for mileage,* a Department of Financial Services Travel Voucher is required with 2
_	signatures (Ordinary Witness, as traveler, and Attorney, as the supervisor).
	FDOT City to City Mileage map.** Applies only to witnesses billing mileage in criminal cases who reside out-of-
_	county and more than 50 miles from the courthouse or other location.
	If billing \$0.06 rate for mileage,* a Department of Financial Services travel form is not required.
_	MapQuest/Google maps showing mileage still required.**
	Proof of payment (a copy of cancelled check is required only for attorneys seeking reimbursement - front and
	back).

<u>For Attorney Reimbursement:</u> Attorneys create and submit the JAC Billing packet via their MyJAC account. <u>For Witness Reimbursement:</u> The JAC Billing Packet must be certified by the attorney and mailed to JAC: Justice Administrative Commission, 227 N. Bronough Street, Suite 2100 Tallahassee, FL 32301-1380.

## **BILLING QUESTIONS?**

Please email any questions to onlinesupportteam@justiceadmin.org.

<sup>\*</sup>Mileage must be rounded down.

<sup>\*\*</sup>Law enforcement are not required to disclose home address (home address may be redacted), but must still provide a map with mileage.