

Pro Se

Lead Investigator Certification of Services (Including Services Provided by Class CC Investigator and/or Mitigation Specialist) Invoice/Voucher Cover

Investigative Firm Name _____
Lead Investigator _____
Vendor Tax ID Number _____
Agency License # _____

Invoice Number _____
Case Number _____
Case Caption _____
County & Circuit _____
Judge Name _____

Order Attached

Total Invoice Amount \$ _____

INVOICE INFORMATION:

Units of Service Billed 1:
A. Per hour rate for investigators with Class C License (Lead investigator)2
B. Per hour rate for investigators with Class CC License (60% of ISC rate for Investigator with a Class C License)
Subpoena Service Information3:
Other Costs4

Lead Investigator Certification

I certify that the investigator(s) who performed services were licensed at the time of service and were authorized to perform all services applicable to this invoice; that the amounts reflected on the invoice are true and accurate charges; and that the work in connection herewith was actually performed.

I certify that the costs and services reflected on this invoice were satisfactorily performed, were necessary for the above referenced case, the amount due is accurate, transactions were in accordance with the Florida statutes and all applicable laws and rules of the State of Florida, and that payment is appropriate.

Lead Investigator Signature (Blue Ink) _____ Date _____

Pro Se Signature (Blue Ink) _____ Date _____

Lead Investigator License Number _____

Pro Se Printed Name _____

Lead Investigator Printed Name _____

Address _____

Phone Number _____

Phone Number _____

JAC Date Stamp