AO 4OB
(Rev. 3/2013

# STATEMENT OF EARNINGS OF UNITED STATES COURT REPORTERS

| 1. NAME OF REPORTER * | | | |
|---|---|---|---|
| 2. EMPLOYEE ID * | 3. DISTRICT * | 4. OFFICIAL DUTY STATION | 5. CALENDAR YEAR * |

| | | OFFICIAL TRANSCRIPTS | PRIVATE REPORTING | TOTAL |
|---|---|---|---|---|
| GROSS INCOME | 6. Receipts for transcripts | | | |
| | 7. Attendance fees | | | |
| | 8. Salary, dividends, trust funds, and all other income from private reporting activities | | | |
| | 9. TOTAL GROSS INCOME (Add lines 6 thru 8) | | | |
| EXPENSES | 10. Compensation paid to: a. Substitute reporters due to absence | | | |
| | b. Substitute reporters to assist with daily and hourly transcript. | | | |
| | c. Note readers | | | |
| | d. Transcribers | | | |
| | e. Typists | | | |
| | f. Scopists | | | |
| | g. Other clerical personnel | | | |
| | 11. Employer's contributions (FICA, etc.) | | | |
| | 12. a. Travel incident to private reporting activities | | | |
| | b. Travel by substitute reporters and other personnel | | | |
| | 13. a. Rent for office space (Including utilities) | | | |
| | b. Rent for copy equipment | | | |
| | c. Rent for CAT equipment | | | |
| | d. Other rent (Specify) | | | |
| | 14. Equipment repairs and maintenance | | | |
| | 15. a. Postage expense | | | |
| | b. Telephone expense | | | |
| | c. Other communication expense (Specify) | | | |
| | 16. Supplies and materials | | | |
| | 17. Other expenses (Itemize on next page all other expenses claimed) | | | |
| | 18. Depreciation of equipment (Complete schedule on next page.) | | | |
| | 19. TOTAL EXPENSES (Add lines 10 thru 18) | | | |
| NET INCOME (or loss) | 20. Line 9 minus Line 19 | | | |

| | | |
|---|---|---|
| CERTIFICATION BY COURT REPORTER: By signing this form, I certify under penalty of perjury pursuant to 28 U.S.C. § 1746 that the foregoing is true and correct. | 21. SIGNATURE | 22. DATE |
| REVIEW BY COURT OFFICIAL. Individual reviewing this form should sign in the space provided. | 23. SIGNATURE | 24. DATE |

DATE

17. Itemize all other expenses below.

| TYPE OF EXPENSE | Official Amt. | Private Amt | Total Amount |
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| **Total Expenses:** | | | |

18. Schedule for Depreciation

| DESCRIPTION OF PROPERTY | DATE ACQUIRED | COST OR OTHER BASIS | DEPRECIATION ALLOWED IN PRIOR YEARS | METHOD OF COMPUTING DEPRECIATION | LIFE OR RATE | DEPRECIATION FOR THIS YEAR |
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For Official Use Only

Comments

☐ Reject