

UNITED STATES COURT OF APPEALS FOR THE SECOND CIRCUIT

CJA EVOUCHER USER AGREEMENT FORM

I, \_\_\_\_\_ agree when filing an eVoucher in the CJA eVoucher system I  
Expert's Name

will abide by the rules and procedures promulgated for that purpose.

I acknowledge my responsibility to provide the Clerk of Court with accurate contact information and will notify the Clerk expeditiously of changes in that information.

I understand that the combination of my CJA eVoucher username and password will serve as my signature for the documents and forms I submit to the eVoucher system. I accept responsibility for securing my CJA eVoucher password against unauthorized use. If I suspect that my password has been improperly used or otherwise compromised I will immediately notify the Clerk of the suspected misuse or other problem.

\_\_\_\_\_  
Expert's Signature

\_\_\_\_\_  
Expert's Address

\_\_\_\_\_  
Date

Please return this form to [richard\\_alcantara@ca2.uscourts.gov](mailto:richard_alcantara@ca2.uscourts.gov).