

7. Witness fees

a. Non-expert witnesses \$ _____
List: _____

b. Expert witnesses \$ _____
List: _____

8. Interpreter and translator fees \$ _____

9. Total travel \$ _____

(Attach itemized trip information. See form CIV-411.)

10. Long distance telephone charges for teleph \$ _____
participation at court proceedings, depositions,
the meeting of the parties, and witness interviews

11. Computerized legal research \$ _____

12. Copying

a. In-house copies (\$.15 per page) \$ _____
b. Outside copy costs (actual cost) \$ _____
c. Other. Describe: _____

13. Exhibit preparation \$ _____

14. Court-ordered transcripts \$ _____

15. Other costs allowed by statut \$ _____
Describe: _____

TOTAL COSTS \$ _____

Date

Signature

Mailing Address

City State Zip

Daytime Phone

Verification

I state on oath or affirm that I have read this cost bill and its attachments and that all statements and costs contained in these documents are true and correct.

Signature

Subscribed and sworn to or affirmed before me at _____,
Alaska, on _____.
(date)

(SEAL)

Clerk of Court, Notary Public, or other person authorized
to administer oaths.
My commission expires:_____

I certify that on _____
a copy of this cost bill was served
on:

By:_____

CLERK'S RULING ON COST BILL

Costs are hereby taxed in favor of _____
and against _____ in the amounts noted above.

Remarks:_____

Date

Clerk of Court

I certify that on _____
a copy of this ruling was sent
to:

Clerk: _____