## United States Trustee Program Limited English Proficiency (LEP) Interpreter Usage Report

Trustee Name:				_	pter:	$7 \bigsqcup 11 \bigsqcup 12 \bigsqcup 13$	(Check One)
<b>Meeting Location:</b>				_	Cha		
Please	e complete the	following information ea	ch time an inter	preter is utilized at a sec	ti <b>Daß</b> meeting on th	e date noted above.	
Debtor's Name	Case #	Counsel's Name (or indicate if Pro Se)	Language Requested	Interpreter's Name*	Interpreter's ID # (or In-person Contact Information)	Call Length (hh:mm)	Complaint Code
* Interpreter n	nust provide, at	a minimum, his/her first i	пате.				
Complaint Codes:	ms. prorume, en	er menenen in					
-	terpreter who s	peaks the debtor's languag	ge.				
		ect to an available interpro					
■ 3: Dissatisfied with							
■ <b>4:</b> Other ( <i>Explain</i> )							_