

UNCLASSIFIED



**FEDERAL BUREAU OF INVESTIGATION**  
**Import Form**

**Form Type:** FD-794 - Payment Authorization Form

**Date:** 10/25/2021

**Title:** (U) Reimbursement of expenses incurred for trial

**Approved By:** SSA [REDACTED]  
A/ [REDACTED]  
[REDACTED]

**Drafted By:** [REDACTED]

**Case ID #:** 50D-NY-3027571 (U) EPSTEIN, JEFFREY; CHILD SEX  
TRAFFICKING

**Synopsis:** (U) To request the reimbursement of trial witness related expenses incurred on 6/23/2021

**Enclosure(s):** Enclosed are the following items:

1. (U) Receipt
2. (U) 794

◆◆

UNCLASSIFIED