

**BOARD OF PROFESSIONAL CONDUCT
OF THE SUPREME COURT OF OHIO**

CERTIFICATION OF PERSONNEL EXPENSES FOR REIMBURSEMENT
TO A CERTIFIED GRIEVANCE COMMITTEE UNDER GOV. BAR R. V, SECTION 7

CERTIFIED GRIEVANCE COMMITTEE: _____

**REIMBURSEMENT FOR PERSONNEL COSTS
1ST QUARTER (January 1, 2016 through March 31, 2016)
DUE BY MAY 1, 2016**

The undersigned Bar Association official hereby certifies that the expenses summarized below and documented in the supporting attachments were incurred by the Association in the performance of obligations under Gov. Bar R. V during January, February, and March 2016.

1. PERSONNEL COSTS (for work dedicated to grievance and discipline matters only):

EMPLOYEE: _____
Name

Position/Duties

- A. Salary documentation for quarter: _____ \$
(include payroll taxes, retirement plans, and other fringe benefits; please list separately)
- B. Percentage of work dedicated to grievance and discipline matters during quarter: _____ %
- C. Expense for this employee (A. x B.): _____ \$

EMPLOYEE: _____
Name

Position/Duties

- A. Salary documentation for quarter: _____ \$
(include payroll taxes, retirement plans, and other fringe benefits; please list separately)
- B. Percentage of work dedicated to grievance and discipline matters during quarter: _____ %
- C. Expense for this employee (A. x B.): _____ \$

EMPLOYEE: _____
Name

Position/Duties

- A. Salary documentation for quarter: _____ \$
(include payroll taxes, retirement plans, and other
fringe benefits; please list separately)
- B. Percentage of work dedicated to grievance and discipline
matters during quarter: _____ %
- C. Expense for this employee (A. x B.): _____ \$

EMPLOYEE: _____
Name

Position/Duties

- A. Salary documentation for quarter: _____ \$
(include payroll taxes, retirement plans, and other
fringe benefits; please list separately)
- B. Percentage of work dedicated to grievance and discipline
matters during quarter: _____ %
- C. Expense for this employee (A. x B.): _____ \$

TOTAL PERSONNEL COSTS: _____ \$

Respectfully submitted,

Signature

Name (Please Print or Type)

Title (President, Chair of Grievance Committee, Bar Officer)

Date Phone Number

Email address

STATE OF OHIO)
) ss:
COUNTY OF _____)

AFFIDAVIT

I, _____, the _____ of the
(name) (title)
_____ Bar Association, being duly cautioned and sworn,
(city or county)

hereby state the following:

1. The expenses for which reimbursement is sought are personnel expenses of the certified grievance committee of this bar association in the 1st Quarter of 2016.
2. These submitted expenses have not been nor will they be reimbursed from any other source. The submitted expenses have not been previously reimbursed by the Board.
3. I have personal knowledge of the personnel costs that were specifically dedicated to grievance and discipline matters and of other ethics-related expenses.

Signature

Name (please print or type)

Sworn to and subscribed before me this _____ day of _____, 2016.

Notary Public

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OF THE SUPREME COURT OF OHIO**

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TO A CERTIFIED GRIEVANCE COMMITTEE UNDER GOV. BAR R. V, SECTION 7

CERTIFIED GRIEVANCE COMMITTEE: _____

**REIMBURSEMENT FOR PERSONNEL COSTS
2ND QUARTER (April 1, 2016 through June 30, 2016)
DUE BY AUGUST 1, 2016**

The undersigned Bar Association official hereby certifies that the expenses summarized below and documented in the supporting attachments were incurred by the Association in the performance of obligations under Gov. Bar R. V during April, May, and June 2016.

1. PERSONNEL COSTS (for work dedicated to grievance and discipline matters):

EMPLOYEE: _____
Name

Position/Duties

- A. Salary documentation for quarter: _____ \$
(include payroll taxes, retirement plans, and other
fringe benefits; please list separately)
- B. Percentage of work dedicated to grievance and discipline
matters during quarter: _____ %
- C. Expense for this employee (A. x B.): _____ \$

EMPLOYEE: _____
Name

Position/Duties

- A. Salary documentation for quarter: _____ \$
(include payroll taxes, retirement plans, and other
fringe benefits; please list separately)
- B. Percentage of work dedicated to grievance and discipline
matters during quarter: _____ %
- C. Expense for this employee (A. x B.): _____ \$

EMPLOYEE: _____
Name

Position/Duties

- A. Salary documentation for quarter: _____ \$
(include payroll taxes, retirement plans, and other fringe benefits; please list separately)
- B. Percentage of work dedicated to grievance and discipline matters during quarter: _____ %
- C. Expense for this employee (A. x B.): _____ \$

EMPLOYEE: _____
Name

Position/Duties

- A. Salary documentation for quarter: _____ \$
(include payroll taxes, retirement plans, and other fringe benefits; please list separately)
- B. Percentage of work dedicated to grievance and discipline matters during quarter: _____ %
- C. Expense for this employee (A. x B.): _____ \$

TOTAL PERSONNEL COSTS: _____ \$

Respectfully submitted,

Signature

Name (Please Print or Type)

Title (President, Chair of Grievance Committee, Bar Officer or Official)

Date Phone Number

Email address

STATE OF OHIO)
) ss:
COUNTY OF _____)

AFFIDAVIT

I, _____, the _____ of the
(name) (title)
_____ Bar Association, being duly cautioned and sworn,
(city or county)

hereby state the following:

1. The expenses for which reimbursement is sought are personnel expenses of the certified grievance committee of this bar association in the 2nd Quarter of 2016.
2. These submitted expenses have not been nor will they be reimbursed from any other source. The submitted expenses have not been previously reimbursed by the Board.
3. I have personal knowledge of the personnel costs that were specifically dedicated to grievance and discipline matters and of other ethics-related expenses.

Signature

Name (please print or type)

Sworn to and subscribed before me this _____ day of _____, 2016.

Notary Public

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CERTIFIED GRIEVANCE COMMITTEE: _____

**REIMBURSEMENT FOR PERSONNEL COSTS
3RD QUARTER (July 1, 2016 through September 30, 2016)
DUE BY NOVEMBER 1, 2016**

The undersigned Bar Association official hereby certifies that the expenses summarized below and documented in the supporting attachments were incurred by the Association in the performance of obligations under Gov. Bar R. V during July, August, and September 2016.

1. PERSONNEL COSTS (for work dedicated to grievance and discipline matters):

EMPLOYEE: _____
Name

Position/Duties

- A. Salary documentation for quarter: _____ \$
(include payroll taxes, retirement plans, and other
fringe benefits; please list separately)
- B. Percentage of work dedicated to grievance and discipline
matters during quarter: _____ %
- C. Expense for this employee (A. x B.): _____ \$

EMPLOYEE: _____
Name

Position/Duties

- A. Salary documentation for quarter: _____ \$
(include payroll taxes, retirement plans, and other
fringe benefits; please list separately)
- B. Percentage of work dedicated to grievance and discipline
matters during quarter: _____ %
- C. Expense for this employee (A. x B.): _____ \$

EMPLOYEE: _____
Name

Position/Duties

- A. Salary documentation for quarter: _____ \$
(include payroll taxes, retirement plans, and other fringe benefits; please list separately)
- B. Percentage of work dedicated to grievance and discipline matters during quarter: _____ %
- C. Expense for this employee (A. x B.): _____ \$

EMPLOYEE: _____
Name

Position/Duties

- A. Salary documentation for quarter: _____ \$
(include payroll taxes, retirement plans, and other fringe benefits; please list separately)
- B. Percentage of work dedicated to grievance and discipline matters during quarter: _____ %
- C. Expense for this employee (A. x B.): _____ \$

TOTAL PERSONNEL COSTS: _____ \$

Respectfully submitted,

Signature

Name (Please Print or Type)

Title (President, Chair of Grievance Committee, Bar Officer or Official)

Date Phone Number

Email address

STATE OF OHIO)
) ss:
COUNTY OF _____)

AFFIDAVIT

I, _____, the _____ of the
(name) (title)
_____ Bar Association, being duly cautioned and sworn,
(city or county)

hereby state the following:

1. The expenses for which reimbursement is sought are personnel expenses of the certified grievance committee of this bar association in the 3rd Quarter of 2016.
2. These submitted expenses have not been nor will they be reimbursed from any other source. The submitted expenses have not been previously reimbursed by the Board.
3. I have personal knowledge of the personnel costs that were specifically dedicated to grievance and discipline matters and of other ethics-related expenses.

Signature

Name (please print or type)

Sworn to and subscribed before me this _____ day of _____, 2016.

Notary Public