

BUSINESS EXPENSE VOUCHER

Disciplinary Board of the Supreme Court of Pennsylvania
Rev. 2025.01.01

Name	Board Name for Services Rendered Disciplinary Board of the Supreme Court of PA	
Address	Position Title	
City State Zip	I certify that the statements and expenses claimed are correct, reasonable and were incurred in the performance of Board Duties.	
File No. (if appropriate)	to: _____	
	Signature & Date _____	Supervisor Signature & Date _____

ITINERARY			TRANSPORTATION					LODGING		MEALS			MISC. EXP.		TOTAL
DATE	TIME		List Locations	Pers. Auto Miles	Name of Carrier	Cash You Paid		Name of Hotel	Cash You Paid	Brkfst	Lunch	Dinner	Identify	Cash You Paid	
	LV	RET				Ticket	Local								
TOTALS															

Purpose of travel or related business: 	For Accounting Use Only 	PERSONAL AUTO: _____ miles @ \$ 0.700 TOTAL REIMBURSEMENT
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Receipts shall be attached

ACCOUNTING COPY