BOARD OF COMMISSIONERS ON GRIEVANCES AND DISCIPLINE
OF THE SUPREME COURT OF OHIO

CERTIFICATION OF EXPENSES FOR REIMBURSEMENT
TO A CERTIFIED GRIEVANCE COMMITTEE UNDER GOV. BAR R. V, SEC. 3(D)(2)(b)

CERTIFIED GRIEVANCE COMMITTEE: _____

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 for the year _____.

1. PERSONNEL COSTS $_____
   DO NOT INCLUDE 2011 QUARTERLY PERSONNEL COSTS FOR WHICH REIMBURSEMENT HAS BEEN RECEIVED. This includes costs of your committee's bar counsel who is retained pursuant to written agreement or employed by your committee.

2. POSTAL AND DELIVERY CHARGES $_____

3. LONG DISTANCE TELEPHONE CHARGES $_____

4. LOCAL TELEPHONE CHARGES $_____

5. DEDICATED TELEPHONE LINES $_____

6. SUBSCRIPTIONS, LAW BOOKS, AND OTHER LEGAL RESEARCH SERVICES & MATERIALS $_____

7. ORGANIZATIONAL DUES AND EDUCATIONAL EXPENSES $_____

8. COST OF DEFENDING GRIEVANCE AND DISCIPLINARY-RELATED LAWSUITS AND PORTION OF PROFESSIONAL LIABILITY INSURANCE DIRECTLY ATTRIBUTABLE TO GRIEVANCE FUNCTION $_____

9. OVERHEAD EXPENSES ($30,000.00 LIMITATION PER YEAR) $_____

TOTAL REIMBURSEMENT SOUGHT: $_____

_____
Signature

_____
Name and Title (Please Print or Type)

_____
Date Phone Number

1. PERSONNEL COSTS **(for work dedicated to grievance and discipline matters):**
LIST ONLY PERSONNEL COSTS NOT PREVIOUSLY SUBMITTED DURING 2011.

EMPLOYEE: _____
Name

_____
Position/Duties

A. Annualized salary for expense year (attach W-2): $_____
(include payroll taxes, retirement plans, and other fringe benefits; please list separately)

B. Percentage of work dedicated to grievance and discipline matters during expense year: _____%

C. Expense for this employee (A. x B.): $_____

EMPLOYEE: _____
Name:

_____
Position/Duties

A. Annualized salary for expense year (attach W-2): $_____
(include payroll taxes, retirement plans, and other fringe benefits; please list separately)

B. Percentage of work dedicated to grievance and discipline matters during expense year: _____%

C. Expense for this employee (a. x b.): $_____

EMPLOYEE: _____
Name:

_____
Position/Duties

A. Annualized salary for expense year (attach W-2): $_____
(include payroll taxes, retirement plans, and other fringe benefits; please list separately)

B. Percentage of work dedicated to grievance and discipline matters during expense year: _____%

C. Expense for this employee (a. x b.): $_____

TOTAL PERSONNEL COSTS: $_____

2. POSTAL AND DELIVERY CHARGES

REGULAR POSTAL CHARGES FOR ETHICS-RELATED FUNCTIONS
(attach documentation as to how determined): $_____

OTHER DELIVERY CHARGES FOR ETHICS-RELATED FUNCTIONS
(attach documentation): $_____

TOTAL POSTAL AND DELIVERY CHARGES: $_____

3. LONG DISTANCE TELEPHONE CHARGES

LONG DISTANCE TELEPHONE CHARGES FOR ETHICS-RELATED FUNCTIONS, INCLUDING FAX CHARGES (attach documentation as to how determined):
$_____

4. LOCAL TELEPHONE CHARGES

LOCAL TELEPHONE CHARGES AND OTHER APPROPRIATE CHARGES (including but not limited to per call charges)
(attach documentation as to how determined): $_____

5. DEDICATED TELEPHONE LINES

COST OF TELEPHONE LINES DEDICATED TO ETHICS-RELATED FUNCTIONS (attach explanation as to how cost derived and showing how lines are advertised to public for that function, together with the telephone number(s): $_____

6. SUBSCRIPTIONS, LAW BOOKS AND OTHER LEGAL RESEARCH SERVICES AND MATERIALS **(attach copies of invoices):**

SUBSCRIPTIONS TO PROFESSIONAL JOURNALS, LAW BOOKS AND LEGAL RESEARCH SERVICES AND MATERIALS RELATED TO ETHICS (regardless of medium):
Do **not** include the costs of computerized legal research on disciplinary cases.

	Publication/Service/Material	Use	Cost
A.	_____	_____	_____
B.	_____	_____	_____
C.	_____	_____	_____
D.	_____	_____	_____

TOTAL SUBSCIPTIONS, ETC. $_____

7. ORGANIZATIONAL DUES AND EDUCATIONAL EXPENSES

(attach copies of invoices)

A. ORGANIZATIONAL DUES RELATING TO ETHICS:

Organization	Dues
1.. _____	$_____
2. _____	$_____
3. _____	$_____
4. _____	$_____
5. _____	$_____
TOTAL ORGANIZATIONAL DUES:	$_____

B. EDUCATIONAL EXPENSES RELATING TO PROFESSIONAL RESPONSIBILITY ENFORCEMENT AND INCLUDING TRAVEL, PURCHASED EDUCATIONAL MATERIALS, AND TRAINING FOR GRIEVANCE COMMITTEE MEMBERS OR EMPLOYEES. (attach copies of invoices, program agendas, or other materials that indicate the nature of the activity)

Function/Activity/Item	Member or Employee's Name and Position/Title	Cost
1. _____	_____	$_____
2. _____	_____	$_____
3. _____	_____	$_____
4. _____	_____	$_____
5. _____	_____	$_____

TOTAL EDUCATIONAL EXPENSES $_____

TOTAL ORGANIZATIONAL DUES AND EDUCATIONAL EXPENSES $_____

8. COST OF DEFENDING ETHICS-RELATED LAWSUITS

Cost of defending ethics-related lawsuits not covered by insurance, and excluding any award to an adverse party of damages, attorney fees, or costs. **PORTION OF PROFESSIONAL LIABILITY INSURANCE DIRECTLY ATTRIBUTABLE TO GRIEVANCE OPERATION. Do not submit any costs not incurred during 2011.** (attach copy of complaint, judgment entry, invoices, and other documentation necessary to substantiate the expense.) Please state if you have insurance coverage for this type of litigation and if so, the name of the insurance carrier and the dollar amount of the deductible.

Insurance Carrier_____

$_____ Amount of Deductible_____

9. OVERHEAD EXPENSES

(Include only the percentage of costs attributable to ethics and discipline matters.) (Itemize and attach copies of invoices or explanation as to how costs are derived, as applicable.)

	Ethics/Discipline Cost
A. Rent	$_____
1. Total rent paid by bar association $_____	
2. Percentage of space dedicated to grievance _____% and discipline matters	
3. Rent expense: (1. x 2.) $_____	
B. Insurance (including contents, valuable papers, data processing equipment, commercial general liability, commercial umbrella, etc. DO NOT INCLUDE PORTION OF PROFESSIONAL LIABILITY HERE-SEE #8 ABOVE	$_____
C. Supplies and Equipment	$_____
D. Accounting Costs	$_____
E. Occupancy (other occupancy costs, if any)	$_____
F. Utilities	$_____
G. Office Expenses	$_____
H. Repair & Maintenance	$_____
I. Other Overhead Expenses (specify)	$_____
TOTAL OVERHEAD EXPENSES:	$_____

_____ % of total costs attributable to disciplinary-related activities

AFFIDAVIT

STATE OF OHIO :
: *SS*
COUNTY OF _____:

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 were incurred in the ordinary and usual business of the certified grievance committee of this bar association in the year 2011.

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 professional responsibility enforcement activities.

4. **I have attached to this affidavit a statement setting forth the quarters and amount of personnel costs per quarter that have been previously reimbursed for the first, second or third quarters of 2011.**

_____
Signature

_____
Name (please print or type)

Sworn to and subscribed before me this _____ day of _____, 2012.

_____
Notary Public

Print Form