****Indiana Supreme Court  
 Office of Judicial Administration

Indiana Office of Court Services

**2023 Court Reform Grant**

**CASH REQUEST FORM/CLAIM VOUCHER**

This form must be emailed to [supct.payables@courts.in.gov](mailto:supct.payables@courts.in.gov) to be processed.Submission of the form through any other means will result in the form being returned with a request for it to be submitted by email to [supct.payables@courts.in.gov](mailto:supct.payables@courts.in.gov). *Do not use the word “invoice” in the subject line of your email; it will be rejected by the system automatically.* Once submitted properly, you will receive a reply email indicating the supreme court email inbox has received your submission. If you do not receive the reply email, your submission has not been completed properly and will not be considered submitted pursuant to your grant agreement.

1. Grantee Name:       Date:

Address:

1. Grant Number:
2. Date of Award:
3. Award Period:

|  |  |
| --- | --- |
| Grant Award Amount: |  |
| Funds Received to Date Under Grant: |  |
| **Amount of this Claim:** |  |
| Net Grant Balance Available after this Disbursement: | $0.00 |

***Certification of Fiscal Officer*:**

I certify that the information above is correct and that: 1) all disbursements were or are to be made in accordance with grant conditions, and 2) the requested cash is required to meet immediate cash needs.

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Type or print name and title Signature

**Supporting documentation must be attached to receive payment**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**IOCS use only**

This request is approved for $\_\_\_\_\_\_\_\_\_\_\_ PO#: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Receipt # \_\_\_\_\_\_\_\_\_\_\_\_

Received by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date received: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_