

Commonwealth of Kentucky  
Court of Justice [www.kycourts.gov](http://www.kycourts.gov)



**Voucher for Services as Kentucky  
Supreme Court Special Justice  
(Non Retired Judge or Justice)**

**Remit To:**

Supreme Court of Kentucky  
669 Chamberlin Ave Suite D103  
Frankfort, Kentucky 40601

Special Justice Printed Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone No.: \_\_\_\_\_

Social Security No.: \_\_\_\_\_

Email Address: \_\_\_\_\_

Retired Justice or Judge: \_\_\_\_\_ Yes (If so, complete form SJ-20) \_\_\_\_\_ No

Pursuant to **KRS 21A.120** reimbursement is requested as follows:

1. Total **Compensation** claimed:

Daily compensation rate of \$ \_\_\_\_\_ x number of days served \_\_\_\_\_ =

\$ \_\_\_\_\_

List dates of service: \_\_\_\_\_

\*Compensation is authorized only in instances in which an individual is appointed by the Governor. Compensation is computed pursuant to KRS 21A.120. The salary for each day the justice serves shall be 1/250 of the annual salary of a Justice of the Supreme Court, except that a retired justice or judge appointed pursuant to this section shall be compensated as provided by KRS 21A.110 and not under this section.

2. Total **Personal Expenses** claimed:

(Includes meals, travel, lodging, etc.)

Attach AOC-T Travel Voucher form and personal receipts.

\$ \_\_\_\_\_

3. **Grand Total Claimed:**

\$ \_\_\_\_\_

\_\_\_\_\_  
Date

\_\_\_\_\_  
Special Justice Signature

**APPROVED FOR PAYMENT**

\_\_\_\_\_  
DATE

\_\_\_\_\_  
CHIEF JUSTICE/CLERK

Case Number: \_\_\_\_\_

Case Name: \_\_\_\_\_

**Note:** Compensation and personal expenses will be payable through the AOC Accounting Division. There will be no tax or FICA withholding. If compensation for the calendar year meets or exceeds the IRS 1099 minimum reportable wages, the special justice/judge will receive a 1099 IRS form. The special justice/judge is responsible for updating or submitting a form W-9 request for taxpayer identification number and certification.