

<u>NOTE TO SUBSTITUTE COURT REPORTER</u> All untranscribed notes and/or tapes used to take the record must remain in the courthouse where the action took place. The notes should be left in the office of the official court reporter, or with the judge's secretary for safekeeping until the official court reporter returns to work. The official court reporter will log and store these notes in the same storage area at the courthouse where their own notes are stored. The retention of these items is mandatory. [It is the responsibility of the official court reporter to make sure all substitute court reporter notes and/or tapes are retained at the courthouse.] If you previously reported proceedings in circuit court and you did not leave your notes, please return your notes to the courthouse as soon as possible. If you have questions concerning this procedure, contact the Office of the Clerk at 304-558-2601.	THIS INVOICE DOES NOT GO THROUGH THE CIRCUIT CLERK Substitute court reporter MUST obtain the circuit judge's signature. For payment, forward INVOICE to: accounting@courtsww.gov IMPORTANT: Please send a completed W-9 form with your invoice, if you are a new court reporter, if your name has changed since you last worked for us, or if your address has changed since you last worked for us. The State Auditor will not process an invoice if the name or address on the invoice does not match the W-9 on file with the State. Court Reporter/Payee: _____ Address: _____ Vendor I.D.: _____ Invoice No.: _____
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**** Note: Motel/Hotel**—If you traveled more than 50 miles from home, the Court will reimburse you for single-occupancy. Ask for government rate, if available. **We cannot reimburse without motel/hotel receipt.** Meals are reimbursable at \$30.00 per day **WITH OVERNIGHT STAY ONLY.** Meal receipt not required. The Court does not pay for meals with same-day return. **Receipts must be attached for Motel/Hotel stay.**

Counties Worked	Date Worked_1	Hours	Hours x \$30.00	Miles	Parking	Tolls	Hotel	Meals
Mileage Breakdown is Required for Mileage Reimbursement. Insert town/city where your trip began, town/city where you worked, and number of miles traveled between towns. If you traveled to a second county on the same date, insert town/city where your 2nd trip began, town/city where you worked, number of miles traveled, etc.					Traveled From: _____	To: _____	Miles: _____	
					Traveled From: _____	To: _____	Miles: _____	
					Traveled From: _____	To: _____	Miles: _____	

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	Traveled From: _____ To: _____ Miles: _____

Counties Worked	Date Worked_#	Hours	Hours X \$30.00	Miles	Parking	Tolls	Hotel	Meals
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					Traveled From: _____	To: _____	Miles: _____	
					Traveled From: _____	To: _____	Miles: _____	

Counties Worked	Date Worked_3	Hours	Hours x \$30.00	Miles	Parking	Tolls	Hotel	Meals
Mileage Breakdown is Required for Mileage Reimbursement. Insert town/city where your trip began, town/city where you worked, and number of miles traveled between towns. If you traveled to a second county on the same date, insert town/city where your 2nd trip began, town/city where you worked, number of miles traveled, etc.								
Traveled From: _____					To: _____		Miles: _____	
Traveled From: _____					To: _____		Miles: _____	
Traveled From: _____					To: _____		Miles: _____	

\$ _____
Invoice Total