



Arbitration Services – Pay Voucher for Personal Services

		Voucher Number <small>For Use by NMB</small>		
Appropriation: <small>For Use by NMB</small>	Authorization Number: <small>For Use by NMB</small>	Date:		
Name of Payee:		Address to Send Payment:		
I certify: <i>That this bill is correct and just and that payment has not been received.</i>				
Signature		City, State, Zip Code		
For SERVICES RENDERED as a Referee, as follows:				
From <small>(mm/dd/yyyy)</small>	To <small>(mm/dd/yyyy)</small>	Number of Days	Cost per Day	Total Amount Due \$
Remarks:		Accounting Classification <small>For Use by NMB</small>	Differences: <small>For Use by NMB</small>	
			Account verified Correct for: \$	
I CERTIFY that the foregoing account is correct; that it appears from the records of my office that the person named thereon was legally appointed, and has performed the service required by law and the regulations of the National Mediation Board during the period mentioned; that he/she is not being paid for any period of absence in excess of that allowed by law, and is entitled to the amount of pay stated above.		<small>For Use by NMB</small>		
Amount Approved \$ _____ <small>For Use by NMB</small>				

Form Number Changed: This form was previously NMB – 13

Instructions: Do not complete shaded areas, which are for use by NMB only