



Auditor
Charles E. Walder
Chief Fiscal Officer

Return Voucher Form

Date: **09/08/2022**

To: Elected Official, Department head, or Accounting Staff of **Juvenile Court**

From: Auditor's Office Fiscal Department

SUBJECT: Batch # 2022-00002524

Stephanie Voss \$135.50

☐ Dept. Head Signature Missing on Cover	☐ Incorrect Vendor Numbers (s)
☐ Incorrect Account Number	☐ Incorrect/No Encumbrance No.
☐ Incorrect Remit Address	☐ Incorrect Voucher Amount
☐ Insufficient Cash Balance Available	☐ Incorrect G/L Date
☐ Batch not Approved in New World	☐ Expense Precede Encumbrance
☐ Insufficient Balance Available on PO	☐ Remit Copy Missing
☐ Missing Original Invoice/Supporting Documents	☐ Due Date Deadline Missed
☐ Missing "OK to Pay" Initials/Signature	☒ Other

Solution: No original signature on the voucher or invoice.

Courthouse Annex, 231 Main Street, Suite 1A, Chardon, OH 44024-1293

Direct Line: (440) 279-1600

FAX: Fiscal Office (440) 279-2184 * Real Estate/ Appraisal (440) 286-4359

Web site: <http://www.auditor.co.geauga.oh.us>

Email: auditor@co.geauga.oh.us

AUDITORS CERTIFICATION OF FUNDS
O.R.C. 5705.41D

Geauga County, Chardon, Ohio January 3, 2022
I HEREBY CERTIFY that the money required to meet the foregoing contract, agreement, or obligation in the sum of
\$4,000.00

has been lawfully approved, authorized or directed for such purpose and is in the Treasury or in the process of collection to the credit of the fund listed next to the item below, free from any previous encumbrances.

CHARLES E. WALDER
GEAUGA COUNTY AUDITOR

by  Deputy Auditor
GEAUGA COUNTY FEDERAL I.D. NO. 34-6001208
SALES AND USED TAX EXEMPTION - POLITICAL SUBDIVISION
STATE OF OHIO

FOR AUDITORS USE ONLY	Date: _____
Then and Now Certificate: _____	
Warrant Received by: _____	
Date: _____	

SHIP TO:

GEAUGA COUNTY
PROBATE / JUVENILE COURT - JUDGE GRENDALL
231 MAIN STREET SUITE 2
CHARDON, OH 44024

WARRANT NO.	VOUCHER DATE	VOUCHER AMOUNT
	9/12/2022	135.50 ✓
P.O. DATE	ADJUSTMENT	ACCOUNT NO.
01/03/2022		
1099 AMT.	dr.	
	cr.	



PURCHASE ORDER NO. 2022-00001228 ✓

GEAUGA CO. BOARD OF COMMISSIONERS:
SESSION
RESOLUTION
JOURNAL
PAGE
BUDGET APPROVAL - ENCUMB _____ VOUCHER _____

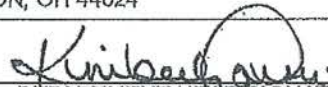
VENDOR I.D. NO. 28451

PURCHASED FROM:

Stephanie Voss

INVOICE TO:

GEAUGA COUNTY
PROBATE / JUVENILE COURT - JUDGE GRENDALL
231 MAIN STREET SUITE 2
CHARDON, OH 44024


DEPARTMENT HEAD SIGNATURE

QUANTITY	UNIT	FUND	DESCRIPTION	UNIT COST	TOTAL COST
1.0000	Each	1001	Travel Expenses, Other - Travel - Other 1001-007-16-902 - Travel 4,000.00 August 2022	4,000.0000	\$4,000.00
TOTAL DUE					\$4,000.00

**Presented by Court as a
courtesy only,
NOT statutorily required**

See State ex rel. Grendell v. Walder,
Slip Opinion No. 2022-Ohio-204

IN THE COURT OF COMMON PLEAS
JUVENILE DIVISION
GEAUGA COUNTY, OHIO

FILED
IN COMMON PLEAS COURT
2022 SEP -7 PM 2:37

PROBATE-JUVENILE
DIVISION
GEAUGA COUNTY, OHIO

IN RE:

JUVENILE COURT
EXPENDITURES
VOSS, STEPHANIE

NOT
FOR
VETTING

) JUDGE TIMOTHY J. GRENDALL
)
)
) PROPER ADMINISTRATIVE ORDER
) 2022-325

Pursuant to R.C. 2151.10, 2151.40, and 319.16(A)(2), this order hereby directs timely payment by the Geauga County Auditor in the amount of \$135.50 (One Hundred Thirty Five Dollars and Fifty Cents) from 1001-007-16-902 to VOSS, STEPHANIE, at C/O JUVENILE COURT, 231 MAIN STREET, 2ND FLOOR, CHARDON, OH 44024, for employee mileage reimbursement, which the Juvenile Court has determined to be an expenditure for a proper public purpose.

Pursuant to R.C. 319.16(D), "if the auditor questions the validity of [this] expenditure... the auditor shall notify the court that presented the documents, shall issue the warrant under protest, and shall notify the auditor of state of the protest."

As an elected official and member of the judicial branch of county government, the Judge of the Geauga County Probate/Juvenile Court is authorized to fix the amount due to court vendors who perform services for the court. Therefore, pursuant to R.C. 307.55(A), this payment is to be processed "Live".

Kindly provide this Court with the original check which it will mail to the vendor.

IT IS SO ORDERED.


TIMOTHY J. GRENDALL, JUDGE

CC: Fiscal Director

Reset Form

Juvenile Probation

Column Totals	A	B
Total Mileage Amount	(A) X .625**	\$ 34.31
Total Reimbursement	(B) + (C)	\$ 34.31

I certify that the statements made hereon are true, that the mileage was actually driven on County Business, and that the expenses incurred were in accordance with state and county regulations. I also certify that I have liability insurance as required in ORC 4509.51.

ORIGINAL RECEIPTS MUST BE ATTACHED

Beth Williams 9-2

Employee Signature

Department Head Signature

Date _____

Revised 07/01/2022 RHL

Geauga County

Mileage/Miscellaneous Reimbursement Voucher for ALL that follow IRS Standard Mileage

Print Form

Reset Form

PRINT EMPLOYEE NAME Stephanie Voss DEPARTMENT Juvenile Probation

DATE	ORIGIN	PURPOSE OF TRAVEL	DESTINATION	MILEAGE	MISC. AMOUNT
8/2/2022	231 main st chardon	home appt to home minus home commute (17.2)	21jd38 willoughby/south russell	3.00	
8/4/2022	231 main st chardon	office to burton home appt to chardon group home appt to office	22jd48 burton/22ju82 chardon/office-chardon	21.00	
8/9/2022	231 main st chardon	home appt and return	21jd177 newbury/office-chardon	24.20	
8/9/2022	231 main st chardon	home appts to home minus home commute (17.2)	19jd53 windsor/21jd107 madison/south russell	46.10	
8/10/2022	231 main st chardon	home appts and return	22ju82 and 22jd89 chardon/office-chardon	11.80	
8/16/2022	231 main st chardon	home appt and return to office	22jd41 chardon/office	2.20	
8/17/2022	231 main st chardon	work appt to home minus home commute (17.2)	21jd177 newbury/south russell	1.30	
8/18/2022	231 main st chardon	home appt to home minus home commute (17.2)	22jd89 bainbridge/south russell	14.90	
8/19/2022	231 main st chardon	home appt to home minus home commute (17.2)	22jd48 burton/south russell	7.30	
8/22/2022	231 main st chardon	home appt to home minus home commute (17.2)	19jd53 windsor/south russell	30.10	
Column Totals				161.90	

TRAVELER'S CERTIFICATE

I certify that the statements made hereon are true, that the mileage was actually driven on County Business, and that the expenses incurred were in accordance with state and county regulations. I also certify that I have liability insurance as required in ORC 4509.51.

Total Mileage Amount (A) X .625**
Total Reimbursement (B) + (C)

\$ 101.19
\$ 101.19

ORIGINAL RECEIPTS MUST BE ATTACHED

[Signature]

9/1/2022 *[Signature]*

Employee Signature

Date

Department Head Signature

** IRS .625 rate effective 07/01/2022

Revised 07/01/2022 RHL

4135.3