



Auditor
Charles E. Walder
Chief Fiscal Officer

Return Voucher Form

Date: **10/06/22**

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

From: Auditor's Office Fiscal Department

SUBJECT: Batch # 2022-00002778

Beth Williams \$97.82

☐ 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: Missing public purpose for expenditure of public funds. Also, no original signature on the voucher cover 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
	10/10/2022	97.82 ✓
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 _____
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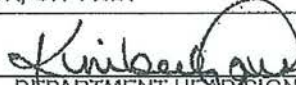
VENDOR I.D. NO. 1529

PURCHASED FROM:

Beth Williams

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 September 2022	4,000.0000	\$4,000.00
TOTAL DUE					\$4,000.00

RECEIVED
OCT 06 2022
Gauga County Auditor

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

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

FILED
IN COMMON PLEAS COURT

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

2022 OCT -5 AM 10:37

PROBATE-JUVENILE
DIVISION
GEAUGA COUNTY, OHIO

IN RE:

JUVENILE COURT
EXPENDITURES
WILLIAMS, BETH

**NOT
FOR
VETTING**

) JUDGE TIMOTHY J. GRENDALL
)
)
) **PROPER ADMINISTRATIVE ORDER**
) **2022-353**

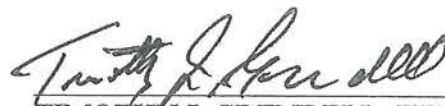
Pursuant to R.C. 2151.10, 2151.40, and 319.16(A)(2), this order hereby directs timely payment by the Geauga County Auditor in the amount of \$97.82 (Ninety Seven Dollars and Eighty Two Cents) from 1001-007-16-902 to WILLIAMS, BETH, at C/O JUVENILE COURT, 231 MAIN STREET, 2ND FLOOR, CHARDON, OH 44024, 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

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

Print Form
Reset Form

PRINT EMPLOYEE NAME Beth Williams DEPARTMENT Juvenile Probation

DATE	PURPOSE OF TRAVEL		MILEAGE	MISC. AMOUNT
	ORIGIN	DESTINATION		
9-1-22	231 Main Street Minus 5 mile normal commute-court duties	Burton, and then home	5.00	
9-2-22	231 Main Street Minus 5 miles normal commute-court duties	Burton, Garden, home	18.90	
9-6-22	Home Minus 5 miles normal commute-court duties	Garden and then Court	7.00	
9-8-22	231 Main Street Court duties; soil test	Burton; garden; court	20.50	12.00
9-12-22	home Minus 5 miles normal commute-court duties	Garden and court	7.00	
9-12-22	231 Main Street Minus 5 miles normal commute-Court duties	garden and home	7.00	
9-14-22	Court Court duties	Garden, Burton and back to court	21.50	
9-16-22	Court Minus 5 miles normal commute-Court duties	Garden, chardon and home	8.60	
9-21-22	Court Court duties	Garden and back	8.60	
9-29-22	231 Main Street training	700 Beta Drive, Mayfield	14.90	
Column Totals			A 119.00	B \$ 12.00

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.

Beth Williams 10/4/22
Employee Signature Date

Kimberly
Department Head Signature

ORIGINAL RECEIPTS MUST BE ATTACHED

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

\$ 74.38
\$ 86.38

Mod = 625
119.00 x .625 = 74.38
74.38 + 12.00 = 86.38

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

Print Form

Reset Form

PRINT EMPLOYEE NAME Beth Williams DEPARTMENT Juvenile Probation

DATE	ORIGIN	PURPOSE OF TRAVEL	DESTINATION	MILEAGE	MISC. AMOUNT
9-30-22	700 Beta Drive	Minus 5 mile normal commute-court duties	Garden and home	21.50	
9-23-22	home	(not scheduled to work today; had a vacation day)	Garden, chardon and home	16.00	
Column Totals				37.50	

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** \$ 23.44
 Total Reimbursement (B) + (C) **\$ 23.44**

ORIGINAL RECEIPTS MUST BE ATTACHED

Beth Williams 10/4/22 Kimberly
 Employee Signature Date Department Head Signature