



**Auditor**  
**Charles E. Walder**  
*Chief Fiscal Officer*

**Return Voucher Form**

Date: 07/12/24

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

From: Auditor's Office Fiscal Department

**SUBJECT: Batch # 2024-00001733**

**Geauga Credit Union \$774.00**

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

Solution: 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](mailto:auditor@co.geauga.oh.us)

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

Geauga County, Chardon, Ohio April 30, 2024  
I HEREBY CERTIFY that the money required to meet the foregoing contract, agreement, or obligation in the sum of \$1,549.00 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 GREDELL  
231 MAIN STREET SUITE 2  
CHARDON, OH 44024

WARRANT NO.	VOUCHER DATE	VOUCHER AMOUNT
	7/15/2024	\$ 774.00 ✓
P.O. DATE	ADJUSTMENT	ACCOUNT NO.
04/30/2024		
1099 AMT.	dr	
	cr	

PURCHASE ORDER NO. 2024-00002680 ✓

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

VENDOR I.D. NO. 1704

PURCHASED FROM:

Geauga Credit Union

**INVOICE TO:**  
GEAUGA COUNTY  
PROBATE / JUVENILE COURT -JUDGE GREDELL  
231 MAIN STREET SUITE 2  
CHARDON, OH 44024

*[Signature]*  
DEPARTMENT HEAD SIGNATURE

QUANTITY	UNIT	FUND	DESCRIPTION	UNIT COST	TOTAL COST
1.0000	Each	1001	TRAVEL - 2024 Juvenile Clerks Conference 1001-007-02-902 - Travel 1,549.00	1.549 0000	\$1,549.00
			✓ Hotel		
TOTAL DUE					\$1,549.00

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  
JUL 12 4 08:03  
CLERK OF COURT

IN RE:

JUVENILE COURT  
EXPENDITURES  
GEAUGA CREDIT UNION

**NOT  
FOR  
VETTING**

) JUDGE TIMOTHY J. GRENDALL  
)  
)  
) **PROPER ADMINISTRATIVE ORDER**  
) **2024-238**

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 \$774.00 (Seven Hundred Seventy Four Dollars and No Cents) from 1001-007-02-902 payable to GEAUGA CREDIT UNION, for 2024 Juvenile Clerks Conference travel expenses, which the Juvenile Court has determined to be an expenditure for a proper public purpose. **Kindly provide this Court with the original check which it will mail to the vendor.**

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".

IT IS SO ORDERED.

  
TIMOTHY J. GRENDALL, JUDGE

CC: Fiscal Director

# Travel Expense Request

Auditor's Number:

2024-2680

Date: 4/30/2024

Department: Juvenile

Convention, Meeting, Etc.: 2024 Juvenile Clerks Conference

Location: Westerville, OH Reason: conference

Dates of Travel: June 12-14, 2024 Dates of Event: June 13-14, 2024

Employees Attending: Mady Breedlove, Dena LaPlante, Caren Ellinger (List Names)

Account: 1001-007-02-902 Travel

Estimated Expenses:	
Hotel	\$774.00 ✓
Food	\$275.00 ✓
Mileage	\$400.00 ✓
Registration	\$0.00
Other	\$100.00 ✓
<b>Total</b>	<b>\$1,549.00</b> ✓

Dept Head Approval: I affirm that this expense request is being submitted within the limits and provisions of the County Travel Policy.

[Signature]  
Department Head Signature

4/29/2024  
Date

AUDITOR'S CERTIFICATE OF FUNDS (ORC 5705.41D)  
I hereby certify that the money required to meet the foregoing contract, agreement or obligation, in the sum of \$ 1549.00 has been lawfully appropriated, authorized or directed for such purpose and is in the process of collection to the credit of the 1001-007-02-902 fund, free from any previous encumbrances.

By: [Signature]  
Deputy Auditor

The Geauga County Board of Commissioners authorized the estimated expense for the above request in action by motion in their session on 4/30/2024 2A-067, Journal No. 96.

Original: Above Department  
Copy: Auditor  
Copy: Commissioner

[Signature]  
Clerk, Geauga Co. Bd. of Commissioners

Actual Expenses:	
Hotel	\$ 744.00
Food	
Mileage	
Registration	
Other	
<b>Total</b>	<b>\$ 744.00</b>

Original receipts must be attached to this statement. Any extraordinary expense must be explained on this form.

I hereby certify the actual expenses to be correct:

Signature: [Signature]  
Title: Office Manager  
Approved by: [Signature]

Partial Payment   
Final Payment

Account Number: #### #### #### 0162  
Closing Date: 06/17/24  
Credit Limit: \$6,000.00 Available Credit: \$2,241.00



Account Inquiries



Customer Service:  
(800) 322-8472

To Report a Card Lost or Stolen:  
(727) 570-4881 LOCAL  
(866) 604-0381 TOLL-FREE



Please Direct Written Inquiries to:  
CUSTOMER SERVICE  
PO BOX 30495  
TAMPA, FL 33630



To view or pay your account on-line:  
www.eZCardInfo.com

Account Summary

Previous Balance	\$	2,499.10
Purchases	+	1,259.00
Cash	+	0.00
Balance Transfer	-	0.00
Credits	-	0.00
Payments	-	0.00
Insurance	+	0.00
Other Debits	+	0.00
Finance Charges	+	0.00
<b>NEW BALANCE</b>	<b>\$</b>	<b>3,758.10</b>

Payment Information



Total Minimum Payment Due **\$188.00**  
Payment Due Date **07/12/2024**

Minimum Payment	\$	113.00
Past Due Amount	\$	75.00
Over Limit / Fees	\$	0.00

Mail Payments to: GEAUGA CU - VISA PO BOX 4521 CAROL STREAM IL 60197-4521

Important News

- MANAGE YOUR CARD ACCOUNT ONLINE. IT'S FREE! IT'S EASY!  
SIMPLY GO TO WWW.EZCARDINFO.COM AND ENROLL IN OUR ONLINE SERVICE. YOU CAN REVIEW ACCOUNT INFORMATION, TRACK SPENDING, SET ALERT NOTIFICATIONS, DOWNLOAD FILES, AND MUCH MORE. MANAGING YOUR ACCOUNT IS FAST, SECURE, AND EASY WITH EZCARDINFO. ENROLL TODAY!

Account Activity Since Your Last Statement

Trans Date	Post Date	MCC Code	Reference Number	Description	Amount
06/04	06/05	3503	24943004156036006614729	SHERATON HOTELS/CUYAHOGA CUYAHOGA FALL OH	\$ 485.00
06/14	06/16	3665	24431064167036004254783	HAMPTON INN & SUITES COLUMBUS OH	258.00
06/14	06/16	3665	24431064167036004254809	HAMPTON INN & SUITES COLUMBUS OH	258.00
06/14	06/16	3665	24431064167036004254791	HAMPTON INN & SUITES COLUMBUS OH	258.00

cap jobs  
new clerks  
cost

PLEASE DETACH COUPON AND RETURN PAYMENT USING THE ENCLOSED ENVELOPE - ALLOW 5 DAYS FOR MAIL DELIVERY

GEAUGA CU  
PO BOX 839  
BURTON OH 44021 - 0839



Account Number  
#### #### #### 0162

Check box to indicate name/address change on back of this coupon

<b>Closing Date</b>	<b>New Balance</b>	<b>Total Minimum Payment Due</b>	<b>Payment Due Date</b>
06/17/24	\$3,758.10	\$188.00	07/12/2024

AMOUNT OF PAYMENT ENCLOSED

\$

GEAUGA PROBATE JUVE COURT  
231 MAIN ST.  
2ND FLOOR  
CHARDON OH 44024



MAKE CHECK PAYABLE TO:



GEAUGA CU - VISA  
PO BOX 4521  
CAROL STREAM IL 60197 - 4521



HAMPTON INN SUITES POLARIS  
 8411 PULSAR PLACE  
 COLUMBUS, OH 43240  
 United States of America  
 TELEPHONE 614-885-8400 • FAX 614-885-8410  
 Reservations  
 www.hilton.com or 1 800 HILTONS

BREEDLOVE, MADY  
  
 231 MAIN ST  
 2ND FLOOR  
 CHARDON OH 44024  
 UNITED STATES OF AMERICA

Room No: 606/SXQL ✓  
 Arrival Date: 6/12/2024 8:33:00 PM  
 Departure Date: 6/14/2024 10:08:00 AM  
 Adult/Child: 2/0  
 Cashier ID: SGONZALEZ  
 Room Rate: 129.00  
 AL:  
 HH #  
 VAT #  
 Folio No/Che 425480 A

Confirmation Number: 85010485

HAMPTON INN SUITES POLARIS 6/14/2024 10:07:00 AM

DATE	REF NO	DESCRIPTION	CHARGES
6/13/2024	1279210	GUEST ROOM EXEMPT	\$129.00
6/13/2024	1279323	GUEST ROOM EXEMPT	\$129.00
6/14/2024	1279445	VS *0162	(\$258.00)
**BALANCE**			\$0.00

EXPENSE REPORT SUMMARY

	6/12/2024	STAY TOTAL
ROOM AND TAX	\$258.00	\$258.00
DAILY TOTAL	\$258.00	\$258.00

CREDIT CARD DETAIL

APPR CODE	006337	MERCHANT ID	23885460006
CARD NUMBER	VS *0162	EXP DATE	05/27
TRANSACTION ID	1279445	TRANS TYPE	Sale



HAMPTON INN SUITES POLARIS  
 8411 PULSAR PLACE  
 COLUMBUS, OH 43240  
 United States of America  
 TELEPHONE 614-885-8400 • FAX 614-885-8410  
 Reservations  
 www.hilton.com or 1 800 HILTONS

BREEDLOVE, MADY  
  
 231 MAIN ST  
 2ND FLOOR  
 CHARDON OH 44024  
 UNITED STATES OF AMERICA

Room No: 311/SXQL ✓  
 Arrival Date: 6/12/2024 9:23:00 PM  
 Departure Date: 6/14/2024 10:12:00 AM  
 Adult/Child: 1/0  
 Cashier ID: SGONZALEZ  
 Room Rate: 129.00  
 AL:  
 HH #  
 VAT #  
 Folio No/Che 425478 A

Confirmation Number: 85010485

HAMPTON INN SUITES POLARIS 6/14/2024 10:11:00 AM

DATE	REF NO	DESCRIPTION	CHARGES
6/14/2024	1279475	GUEST ROOM EXEMPT	\$129.00
6/14/2024	1279476	GUEST ROOM EXEMPT	\$129.00
6/14/2024	1279477	VS *0162	(\$258.00)
**BALANCE**			\$0.00

EXPENSE REPORT SUMMARY

	6/12/2024	STAY TOTAL
ROOM AND TAX	\$258.00	\$258.00
DAILY TOTAL	\$258.00	\$258.00

CREDIT CARD DETAIL

APPR CODE	007436	MERCHANT ID	23885460006
CARD NUMBER	VS *0162	EXP DATE	05/27
TRANSACTION ID	1279477	TRANS TYPE	Sale



HAMPTON INN SUITES POLARIS  
 8411 PULSAR PLACE  
 COLUMBUS, OH 43240  
 United States of America  
 TELEPHONE 614-885-8400 • FAX 614-885-8410  
 Reservations  
 www.hilton.com or 1 800 HILTONS

BREEDLOVE, MADY  
  
 231 MAIN ST  
 2ND FLOOR  
 CHARDON OH 44024  
 UNITED STATES OF AMERICA

Room No: 209/SXQL  
 Arrival Date: 6/12/2024 9:24:00 PM  
 Departure Date: 6/14/2024 10:10:00 AM  
 Adult/Child: 2/0  
 Cashier ID: SGONZALEZ  
 Room Rate: 129.00  
 AL:  
 HH # 1965525924 GOLD  
 VAT #  
 Folio No/Che 425479 A

Confirmation Number: 85010485

HAMPTON INN SUITES POLARIS 6/14/2024 10:10:00 AM

DATE	REF NO	DESCRIPTION	CHARGES
6/14/2024	1279472	GUEST ROOM EXEMPT	\$129.00
6/14/2024	1279473	GUEST ROOM EXEMPT	\$129.00
6/14/2024	1279474	VS *0162	(\$258.00)
**BALANCE**			\$0.00

EXPENSE REPORT SUMMARY

	6/12/2024	STAY TOTAL
ROOM AND TAX	\$258.00	\$258.00
DAILY TOTAL	\$258.00	\$258.00

CREDIT CARD DETAIL

APPR CODE	006107	MERCHANT ID	23885460006
CARD NUMBER	VS *0162	EXP DATE	05/27
TRANSACTION ID	1279474	TRANS TYPE	Sale