



Auditor
Charles E. Walder
Chief Fiscal Officer

Return Voucher Form

Date: 07/23/24

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

From: Auditor's Office Fiscal Department

SUBJECT: Batch # 2024-000001815

Caren Ellinger \$192.96

<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

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 GRENDALL
231 MAIN STREET SUITE 2
CHARDON, OH 44024

WARRANT NO.	VOUCHER DATE	VOUCHER AMOUNT
	7/22/2024	\$ 192.96 ✓
P.O. DATE	ADJUSTMENT	ACCOUNT NO.
04/30/2024		
1099 AMT.		

PURCHASE ORDER NO. 2024-00002680 ✓

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

VENDOR I.D. NO. 15214

PURCHASED FROM:

Caren Ellinger

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

Kristina...
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 Miles	1,549.0000	\$1,549.00
TOTAL DUE					\$1,549.00

RECEIVED
JUL 19 2024
Geauga 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
JUL 19 2024
10:51

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

IN RE: **NOT FOR VETTING**) JUDGE TIMOTHY J. GRENDALL
)
)
JUVENILE COURT)
EXPENDITURES) **PROPER ADMINISTRATIVE ORDER**
CAREN ELLINGER) **2024-255**

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 \$192.96 (One Hundred Ninety Two Dollars and Ninety Six Cents) from 1001-007-02-902 payable to CAREN ELLINGER, for 2024 Juvenile Clerk 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 7/19/2024

CC: Fiscal Director

Travel Expense Request

Auditor's Number:

2024-2680Date: 4/30/2024Department: JuvenileConvention, Meeting, Etc.: 2024 Juvenile Clerks ConferenceLocation: Westerville, OH Reason: conferenceDates 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	✓
Total	\$1,549.00	✓

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

Department Head Signature

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:

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

Clerk, Geauga Co. Bd. of Commissioners

Actual Expenses:

Hotel	_____	Departure Date	_____
Food	_____	Departure Time	_____
Mileage	\$ 192.96 ✓	am / pm	_____
Registration	_____	Return Date	_____
Other	_____ ✓	Return Time	_____
Total	\$ 192.96	am / pm	_____

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: _____

Title: _____

Approved by: _____

Partial Payment Final Payment

Revised 08/20/08

Original and 2 copies required

