



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

**Return Voucher Form**

Date: 07/23/24

To: Elected Official, Department head, or Accounting Staff of Probate

From: Auditor's Office Fiscal Department

**SUBJECT: Batch # 2024-00001814**

**Samuel Matthews \$9.85**

<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 January 3 2024  
I HEREBY CERTIFY that the money required to meet the foregoing contract, agreement, or obligation in the sum of \$3,000.00

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
	7/22/2024	9.85
P.O. DATE	ADJUSTMENT	ACCOUNT NO.
01/03/2024		
1099 AMT.		

PURCHASE ORDER NO. 2024-00001424

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

VENDOR I.D. NO. 11766

**PURCHASED FROM:**

Samuel Matthews

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

*Kimberly*  
DEPARTMENT HEAD SIGNATURE

QUANTITY	UNIT	FUND	DESCRIPTION	UNIT COST	TOTAL COST
1 0000	Each	1001	Travel Expenses, Other - Travel 1001-008-00-902 - Travel 3,000.00  May 2024	3,000.0000	\$3,000.00
<b>TOTAL DUE</b>					<b>\$3,000.00</b>

**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  
COMMON PLEAS COURT  
2024 JUN 19 11:50  
CLERK OF COURT

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

IN RE:  
  
PROBATE COURT  
EXPENDITURES  
MATTHEWS, SAMUEL R

**NOT  
FOR  
VETTING**

) JUDGE TIMOTHY J. GRENDALL  
)  
)  
) **PROPER ADMINISTRATIVE ORDER**  
) **2024-159**

Pursuant to R.C. 319.16(A)(2), this order hereby directs timely payment by the Geauga County Auditor in the amount of \$9.85 (Nine Dollars and Eighty Five Cents) from 1001-008-00-902 payable to MATTHEWS, SAMUEL R, for employee mileage reimbursement, which the Probate 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 w/ 7/19/2024

CC: Fiscal Director

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

PRINT EMPLOYEE NAME Samuel Matthews DEPARTMENT Probate

DATE	ORIGIN	PURPOSE OF TRAVEL	DESTINATION	MILEAGE	MISC. AMOUNT
5/14/24	231 Main St, Chardon	court duties	11455 E. Washington, Auburn	✓ 14.70	\$9.85
5/14/24	11455 E Washington, Auburn		2299 Cherry Valley Dr SE Newark, Ohio	✓ 146.00	
5/15/24	2299 Cherry Valley Dr SE Newark, OH	travel to training, RT	225 S 6th St Newark, OH	✓ 10.80	
5/16/24	2299 Cherry Valley Dr SE Newark, OH	Travel to training session, return for program lunch	7840 Rocky Ridge NE St. Louisville, OH	✓ 9.70	
5/16/24	2299 Cherry Valley Dr SE Newark, OH	Travel to training session, return for evening	7840 Rockliff Road NE St. Louisville, OH	✓ 9.70	
5/17/24	2299 Cherry Valley Dr SE Newark, OH	(143 - normal commute of 11.5 - 131.5)	Novelty, OH	✓ 131.50	
5/14/24		Dinner during travel			12.88
5/15/24		dinner at training (17.16 * .15 = 2.57 or 19.73)	Amount paid = 17.16 + 3.00 = 20.16)		19.73
5/17/24		meal during travel (9.85 + 3.40 + 1.85 = 15.10 - discount of 7.55 = 7.55 + tax of 0.12 = 7.67 paid)			7.67
<b>TRAVELER'S CERTIFICATE</b>				<b>Column Totals A</b>	<b>B</b>
				✓ 322.40	✓ \$ 40.28
Total Mileage Amount (A) X 670**					\$ 216.01
Total Reimbursement (B) + (C)					<b>\$ 256.29</b>

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**

Employee Signature Samuel Matthews Date 7-11-24

Department Head Signature [Signature] Date 7.11.24

Revised 01/04/2024 RHL  
 Approved 01/04/2024  
 Approved 01/04/2024