



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

**Return Voucher Form**

Date: 10/11/2024

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

From: Auditor's Office Fiscal Department

**SUBJECT: Batch # 2024-00002532**

**Abbey King \$175.54**

|                                                                        |                                                       |
|------------------------------------------------------------------------|-------------------------------------------------------|
| <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 checked="" 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 September 3, 2024  
I HEREBY CERTIFY that the money required to meet the foregoing  
contract, agreement, or obligation in the sum of  
\$12,320.00

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 |
|-------------|--------------|----------------|
|             | 10/14/2024   | \$ 175.54 ✓    |
| P.O. DATE   | ADJUSTMENT   | ACCOUNT NO.    |
| 09/03/2024  | dr.          |                |
| 1099 AMT.   | cr.          |                |

PURCHASE ORDER NO. 2024-00003463 ✓

GEAUGA CO. BOARD OF COMMISSIONERS:

SESSION \_\_\_\_\_

RESOLUTION \_\_\_\_\_

JOURNAL \_\_\_\_\_

PAGE \_\_\_\_\_

BUDGET APPROVAL - ENCUMB \_\_\_\_\_ VOUCHER \_\_\_\_\_

VENDOR I.D. NO.

1901

PURCHASED FROM:

Abbey King

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 | 2051 | TRAVEL - 2024 Ohio CASA Conference<br>2051-007-00-902 - Travel 12,320.00<br><br>Miles | 12,320.0000 | \$12,320.00 |
| TOTAL DUE |      |      |                                                                                       |             | \$12,320.00 |

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 OCT -8 PM 1:41 ✓  
PROBATE-JUVENILE  
DIVISION  
GEAUGA COUNTY, OHIO  
IN RE:

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

JUVENILE COURT  
EXPENDITURES  
KING, ABBEY

) JUDGE TIMOTHY J. GRENDALL  
)  
)  
) PROPER ADMINISTRATIVE ORDER  
) 2024-354

Pursuant to R.C. 5705.42, 2303.201(E)(1), 2151.10, 2151.40, and 319.16(A)(2), this order hereby directs timely payment by the Geauga County Auditor in the amount of \$175.54 (One Hundred Seventy Five Dollars and Fifty Four Cents) from 2051-007-00-902 payable to KING, ABBEY, for 2024 Ohio CASA 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

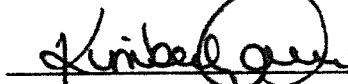
# Travel Expense Request

Auditor's Number:

2024-3463Date: 9/3/2024Department: JuvenileConvention, Meeting, Etc.: 2024 Ohio CASA ConferenceLocation: Columbus, OH Reason: conferenceDates of Travel: September 25-27, 2024 Dates of Event: September 25-27, 2024Employees Attending: Mary Ruth Shumway, Bonnie Glavic, Susan Ebersbacher, (List Names)Account: 2051-007-00-902**Estimated Expenses:**

|              |             |   |
|--------------|-------------|---|
| Hotel        | \$5,550.00  | ✓ |
| Food         | \$320.00    | ✓ |
| Mileage      | \$1,900.00  | ✓ |
| Registration | \$4,050.00  | ✓ |
| Other        | \$500.00    | ✓ |
| Total        | \$12,320.00 | ✓ |

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

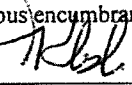


Department Head Signature

8/27/2024

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 \$ 12,320.00 has been lawfully appropriated, authorized or directed for such purpose and is in the process of collection to the credit of the 2051-007-00-902 fund, free from any previous encumbrances.

By: 

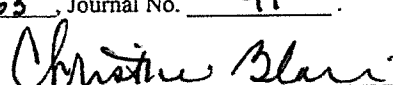
Deputy Auditor

The Geauga County Board of Commissioners authorized the estimated expense for the above request in action by motion in their session on 9/10/2024 24-163, Journal No. 97.

Original: Above Department

Copy: Auditor

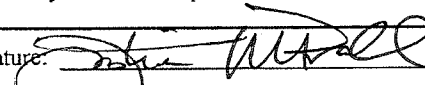
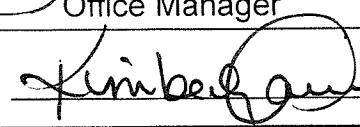
Copy: Commissioner

  
Clerk, Geauga Co. Bd. of Commissioners**Actual Expenses:**

|              |           |                |                           |
|--------------|-----------|----------------|---------------------------|
| Hotel        | _____     | Departure Date | _____                     |
| Food         | _____     | _____          | _____                     |
| Mileage      | \$ 175.54 | ✓              | Departure Time<br>am / pm |
| Registration | _____     | Return Date    | _____                     |
| Other        | _____     | _____          | _____                     |
| Total        | \$ 175.54 | Return Time    | _____                     |
|              |           | 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: Office ManagerApproved by: 

Partial Payment



Final Payment



Revised 08/20/08

Original and 2 copies required

Print Form  
Reset Form

Juvenile Court

|  |                      |  |
|--|----------------------|--|
|  | \$ 343.71            |  |
|  | <del>\$ 343.71</del> |  |

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 Reimbursement

5757

Revised 01/04/2024 RHL

1901

$$\begin{array}{r} 262 \\ \times 67 \\ \hline \end{array}$$