



Auditor
Charles E. Walder
Chief Fiscal Officer

Return Voucher Form

Date: **11/15/24**

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

From: Auditor's Office Fiscal Department

SUBJECT: Batch # 2024-00002855

Ada Gillespie \$192.96

☐ 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: 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, 2024

I HEREBY CERTIFY that the money required to meet the foregoing contract, agreement, or obligation in the sum of

\$12,000.00

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
	11/18/2024	\$ 192.96 ✓
P.O. DATE	ADJUSTMENT	ACCOUNT NO.
01/03/2024	dr.	
1099 AMT.	cr.	

PURCHASE ORDER NO. 2024-00001395 ✓

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

VENDOR I.D. NO. 48486

PURCHASED FROM:

Ada Gillespie

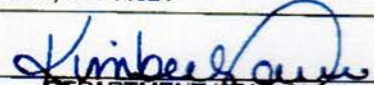
INVOICE TO:

GEAUGA COUNTY

PROBATE / JUVENILE COURT -JUDGE GRENDALL

231 MAIN STREET SUITE 2

CHARDON, OH 44024


DEPARTMENT HEAD'S SIGNATURE

QUANTITY	UNIT	FUND	DESCRIPTION	UNIT COST	TOTAL COST
1.0000	Each	1001	Travel Expenses, Other - Travel 1001-007-02-902 - Travel 12,000.00 October 2024 RECEIVED NOV 13 2024 Gauga County Auditor	12,000.0000	\$12,000.00
TOTAL DUE					\$12,000.00

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
IN COMMON PLEAS COURT
2024 NOV 12 PM 3:33 ✓

PROBATE-JUVENILE
DIVISION
GEAUGA COUNTY, OHIO

IN RE:

JUVENILE COURT
EXPENDITURES
GILLESPIE, ADA

) JUDGE TIMOTHY J. GRENDALL
)
)
) **PROPER ADMINISTRATIVE ORDER**
) **2024-411**

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 GILLESPIE, ADA, for employee mileage reimbursement, 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

ke 11/21/24

P2.

Geauga County

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

Print Form

Reset Form

PRINT EMPLOYEE NAME **Ada Gillespie**

DEPARTMENT **CASA**

DATE	ORIGIN	PURPOSE OF TRAVEL		MILEAGE	MISC. AMOUNT
		DESTINATION			
10-26-24	23PN125 Montville 44064	23PN125 Burton 44021	Arrive at CASA's home (Billing for 19 miles traveled on Saturday outside of daily work commute)	19.00 ✓	
10-26-24	23PN125 Burton 44021	23PN125 Middlefield 44062	Transported CASA to Home Visit	6.00 ✓	
10-26-24	23PN125 Middlefield 44062	23PN125 Burton 44021	Following Home Visit, transported CASA home	6.00 ✓	
10-26-24	23PN125 Burton 44021	23PN125 Montville 44064	After transporting CASA to her home, this writer drove home (Billing for 19 miles traveled on Saturday outside of daily work commute)	19.00 ✓	
10-29-24	470 Center Street Chardon, OH 44024	Courthouse Annex Chardon, OH 44024	Court Hearing, round trip	3.00 ✓	
10-30-24	470 Center Street Chardon, OH 44024	3379 S. Main St. Mineral Ridge, OH 44440	23PG378 Continual Healthcare at The Ridge, round trip	88.00 ✓	
10-30-24	470 Center Street Chardon, OH 44024	Courthouse Annex Chardon, OH 44024	Court Hearing, round trip	3.00 ✓	
10-31-24	470 Center Street Chardon, OH 44024	Courthouse Annex Chardon, OH 44024	Court Hearing, round trip	3.00 ✓	
10-31-24	470 Center Street Chardon, OH 44024	Courthouse Annex Chardon, OH 44024	Court Hearing, round trip	3.00 ✓	
				150.00 ✓	0.00

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.

Total Mileage Amount (A) X .670**

Total Reimbursement (B) + (C)

ORIGINAL RECEIPTS MUST BE ATTACHED

Employee Signature
Date 11-8-24
Department Head Signature
Revised 01/04/2024 RHL

Geauga County

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

Print Form

Reset Form

PRINT EMPLOYEE NAME **Ada Gillespie**

DEPARTMENT **CASA**

DATE	ORIGIN	PURPOSE OF TRAVEL	DESTINATION	MILEAGE	MISC. AMOUNT
10-1-24	470 Center Street Chardon, OH 44024	Courthouse Annex Chardon, OH 44024		3.00 ✓	
		Court Hearing, round trip			
10-4-24	470 Center Street Chardon, OH 44024	Courthouse Annex Chardon, OH 44024		3.00 ✓	
		Court Hearing, round trip			
10-7-24	470 Center Street Chardon, OH 44024	3379 S. Main St. Mineral Ridge, OH 44440		88.00 ✓	
		23PG378 Continual Healthcare at The Ridge, round trip			
10-9-24	470 Center Street Chardon, OH 44024	23PN125 Burton 44021		14.00 ✓	
		Arrived at CASA's home			
10-9-24	23PN125 Burton 44021	23PN125 Middlefield 44062		6.00 ✓	
		Transported CASA to Home Visit			
10-9-24	23PN125 Middlefield 44062	23PN125 Burton 44021		6.00 ✓	
		Following Home Visit, this writer transported CASA home			
10-9-24	23PN125 Burton 44021	23PN125 Montville 44064		9.00 ✓	
		This writer then drove home.			
10-10-24	470 Center Street Chardon, OH 44024	Courthouse Annex Chardon, OH 44024		3.00 ✓	
		Court Hearing, round trip			
10-18-24	470 Center Street Chardon, OH 44024	Courthouse Annex Chardon, OH 44024		3.00 ✓	
		Court Hearing, round trip (1st hearing of the day)			
10-18-24	470 Center Street Chardon, OH 44024	Courthouse Annex Chardon, OH 44024		3.00 ✓	
		Court Hearing, round trip (2nd hearing of the day)			
Total Mileage Amount				138.00 ✓	0.00
Total Reimbursement				(A) X .670**	92.46
Total Reimbursement				(B) + (C)	92.46

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.

ORIGINAL RECEIPTS MUST BE ATTACHED

Employee Signature Ada Gillespie Date 11-8-24

Department Head Signature [Signature]

** IRS 670 rate effective 01/01/2024
Commissioners Approved 01/04/2024

Revised 01/04/2024 RHL

Handwritten: Total 92.46
192.46