



Auditor
Charles E. Walder
Chief Fiscal Officer

Return Voucher Form

Date: **01/16/2025**

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

From: Auditor's Office Fiscal Department

SUBJECT: Batch # 2025-0000139

Mary Ruth Shumway \$228.87

<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

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
	1/22/2025	\$ 228.87 ✓
P.O. DATE	ADJUSTMENT	ACCOUNT NO.
01/03/2024		
1099 AMT.		
	dr.	
	cr.	

PURCHASE ORDER NO. 2024-00001395 ✓

GEAUGA CO. BOARD OF COMMISSIONERS: SESSION _____ RESOLUTION _____ JOURNAL _____ PAGE _____ BUDGET APPROVAL - ENCUMB _____ VOUCHER _____
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VENDOR I.D. NO. 7250

PURCHASED FROM:

Mary Ruth Shumway

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

Kimberly Grendell
DEPARTMENT HEAD 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	12,000.0000	\$12,000.00
December 2024					
RECEIVED					
JAN 15 2025					
Geauga County Auditor					
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

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

Print Form

Reset Form

PRINT EMPLOYEE NAME Shumway ✓ DEPARTMENT CASA

DATE	ORIGIN	PURPOSE OF TRAVEL	DESTINATION	MILEAGE	MISC. AMOUNT
12/2/2024	470 Center St. Bldg 5C Chardon, OH	court roundtrip	231 Main St. Chardon, OH.	3.00 ✓	
12/3/2024	470 Center St. Bldg 5C Chardon, OH	court roundtrip	231 Main St. Chardon, OH.	3.00 ✓	
12/3/2024	470 Center St. Bldg 5C Chardon, OH	roundtrip summit meeting	Geauga JFS	14.60 ✓	
12/4/2024	470 Center St. Bldg 5C Chardon, OH	court roundtrip	231 Main St. Chardon, OH.	3.00 ✓	
12/6/2024	470 Center St. Bldg 5C Chardon, OH	court roundtrip	231 Main St. Chardon, OH.	3.00 ✓	
12/9/2024	470 Center St. Bldg 5C Chardon, OH	court roundtrip	231 Main St. Chardon, OH	3.00 ✓	
12/9/2024	470 Center St. Bldg 5C Chardon, OH	one way visit 14PN371	Windsor, OH	17.00 ✓	
12/9/2024	Windsor OH	one way less home mileage 14PN371	home	11.00 ✓	
12/10/2024	470 Center St. Bldg 5C Chardon, OH	court roundtrip	231 Main St. Chardon, OH	3.00 ✓	
12/11/2024	470 Center St. Bldg 5C Chardon, OH	court roundtrip	231 Main St. Chardon, OH	3.00 ✓	
Column Totals A				63.60	
Total Mileage Amount				(A) X 67.00	42.61
Total Reimbursement				(B) + (C)	42.61

Total \$4228.61

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

Mark Shumway
Employee Signature

Kimberly
Department Head Signature

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

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 Shumway DEPARTMENT CASA

DATE	ORIGIN	PURPOSE OF TRAVEL	DESTINATION	MILEAGE	MISC. AMOUNT
12/12/2024	home	2700 Corporate Exchange Dr. Columbus OH		130.00	
12/13/2024	2700 Corporate Exchange Dr. Columbus OH	Directors MTG (less normal commute)	home	130.00	
12/16/2024	470 Center St. Bldg 5C Chardon, OH	Directors MTG (less normal commute)	231 Main St. Chardon, OH.	3.00	
12/18/2024	470 Center St. Bldg 5C Chardon, OH	court roundtrip	231 Main St. Chardon, OH.	3.00	
12/18/2024	470 Center St. Bldg 5C Chardon, OH	court roundtrip	231 Main St. Chardon, OH.	3.00	
12/18/2024	470 Center St. Bldg 5C Chardon, OH	court roundtrip	231 Main St. Chardon, OH.	3.00	
12/19/2024	470 Center St. Bldg 5C Chardon, OH	court roundtrip	231 Main St. Chardon, OH	3.00	
12/20/2024	470 Center St. Bldg 5C Chardon, OH	court roundtrip	231 Main St. Chardon, OH	3.00	
12/23/2024	470 Center St. Bldg 5C Chardon, OH	court roundtrip	231 Main St. Chardon, OH.	3.00	
Column Totals				A 278.00	
				(A) X 670**	\$ 186.26
				(B) + (C)	\$ 186.26

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.

[Signature]
Employee Signature

Date

ORIGINAL RECEIPTS MUST BE ATTACHED

[Signature]
Department Head Signature

** IRS-670-rate effective 01/01/2024
Commissioners Approved 01/04/2024
Revised 01/04/2024 RHL