



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

**Return Voucher Form**

Date: 12/11/25

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

From: Auditor's Office Fiscal Department

**SUBJECT: Batch #2025-00002836**

**Samuel Matthews \$38.99**

|                                                                        |                                                       |
|------------------------------------------------------------------------|-------------------------------------------------------|
| <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. Wrong date on voucher.

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, 2025  
I HEREBY CERTIFY that the money required to meet the foregoing  
contract, agreement, or obligation in the sum of  
\$2,500.00

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 |
|-------------|--------------|----------------|
|             | 12/15/2025   | \$ 38.99       |
| P.O. DATE   | ADJUSTMENT   | ACCOUNT NO.    |
| 01/03/2025  | dr.          |                |
| 1099 AMT.   | cr.          |                |

PURCHASE ORDER NO. 2025-00001135

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

DEPARTMENT HEAD SIGNATURE

| QUANTITY  | UNIT | FUND | DESCRIPTION                                                                                                                                                                | UNIT COST  | TOTAL COST |
|-----------|------|------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|------------|
| 1.0000    | Each | 1001 | Travel Expenses, Other - Travel<br>1001-008-00-902 - Travel 2,500.00<br><br>November 2025 - P<br><br><b>RECEIVED</b><br><b>DEC 11 2025</b><br><b>Geauga County Auditor</b> | 2,500.0000 | \$2,500.00 |
| TOTAL DUE |      |      |                                                                                                                                                                            |            | \$2,500.00 |

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  
PROBATE DIVISION  
GEAUGA COUNTY, OHIO

FILED  
2025 DEC -9 PM 3:29

CLERK  
GEAUGA COUNTY, OHIO

IN RE:

PROBATE COURT  
EXPENDITURES  
MATTHEWS, SAMUEL R

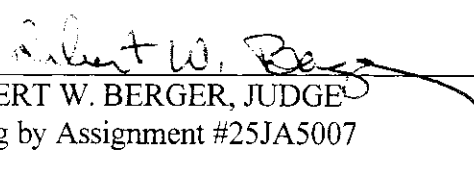
) JUDGE TIMOTHY J. GRENDALL  
)  
)  
) **PROPER ADMINISTRATIVE ORDER**  
) **2025-202**

Pursuant to R.C. 319.16(A)(2), this order hereby directs timely payment by the Geauga County Auditor in the amount of \$38.99 (Thirty Eight Dollars and Ninety Nine 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.

  
ROBERT W. BERGER, JUDGE  
Sitting by Assignment #25JA5007

CC: Fiscal Director

**Geauga County**  
**Mileage/Miscellaneous Reimbursement Voucher**  
**for ALL that follow IRS Standard Mileage - 2025**

Print Form

Reset Form

PRINT EMPLOYEE NAME Samuel Matthews

DEPARTMENT Probate

| DATE            | ORIGIN                                     | DESTINATION                | MILEAGE | MISC. AMOUNT |
|-----------------|--------------------------------------------|----------------------------|---------|--------------|
|                 | PURPOSE OF TRAVEL                          |                            |         |              |
| 11/5/25         | 231 Main St Chardon                        | 13207 Ravenna Rd Chardon   | ✓ 11.60 |              |
|                 | 25PG522, RT ✓                              |                            |         |              |
| 11/5/25         | 231 Main St Chardon                        | Chardon; Novelty           | ✓ 2.70  |              |
|                 | 25PG490 (14.2 - normal commute 11.5 = 2.7) |                            |         |              |
| 11/19/25        | 231 Main St Chardon                        | Mayfield Heights           | ✓ 33.60 |              |
|                 | 25PG518, RT ✓                              |                            |         |              |
| 11/26/25        | 231 Main St Chardon                        | 12340 Bass Lake Rd Chardon | ✓ 7.80  |              |
|                 | 25PG581, RT ✓                              |                            |         |              |
|                 |                                            |                            |         |              |
|                 |                                            |                            |         |              |
|                 |                                            |                            |         |              |
|                 |                                            |                            |         |              |
|                 |                                            |                            |         |              |
|                 |                                            |                            |         |              |
|                 |                                            |                            |         |              |
| Column Totals A |                                            |                            | ✓ 55.70 |              |

TRAVELER'S CERTIFICATE

Column Totals A

**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 .700\*\*

Total Reimbursement (B) + (C)

\$ 38.99 C

**\$ 38.99**

**ORIGINAL RECEIPTS MUST BE ATTACHED**

Samuel Matthews  
Employee Signature

Date

✓ 12-5-25

Department Head Signature

\*\* IRS .700 rate effective 01/01/2025  
Commissioners Approved 01/07/2025

Revised 01/08/2025 RHL