

CLAIMS ORDINANCE NO. 2020-07

AN ORDINANCE TO PAY CERTAIN CLAIMS HEREIN MENTIONED FOR THE PERIOD AS SET FORTH ON THE ATTACHED PAYMENT REGISTER

Be it ordained by the Council of the Village of Jeromesville, State of Ohio, as follows:

SECTION 1: That the attached described claims totaling \$2,617.00 be allowed and paid from the respective funds as identified below:

FUND	FUND NAME
A1	General Fund
B1	Street Construction, Maintenance & Repair Fund
B2	State Highway Fund
B5	Storm Sewer
E1	Water Fund
E2	Sewer Fund

The Fiscal Officer is hereby authorized and directed to draw warrants on the Village Treasury for the amounts as designated on the attached register, as governed by the laws as set forth in the Ohio Revised Code and the Codified Ordinances of the Village of Jeromesville.

SECTION 2: This Claims Ordinance shall take effect and be in force from and after its passage.

Randy Spade, Mayor



Tammy Bole, Fiscal Officer

EXPENSE LINE AMOUNT BATCH# 539

A013B0211000	227.50	Wages	2/15/2020	02/21/20
B016C0211000	700.25	Wages	2/15/2020	02/21/20
E015T0211000	700.25	Wages	2/15/2020	02/21/20
E025E0211000	700.25	Wages	2/15/2020	02/21/20

TOTAL WAGES 2328.25

A013B0212000	3.30	Medicare	2/15/2020	02/21/20
B016C0212000	10.15	Medicare	2/15/2020	02/21/20
E015T0212000	10.15	Medicare	2/15/2020	02/21/20
E025E0212000	10.16	Medicare	2/15/2020	02/21/20

TOTAL EMPLOYER MEDICARE SHARE 33.76

A013B0212000	14.11	Social Sec	2/15/2020	02/21/20
B016C0212000	14.11	Social Sec	2/15/2020	02/21/20
E015T0212000	14.11	Social Sec	2/15/2020	02/21/20
E025E0212000	14.09	Social Sec	2/15/2020	02/21/20

TOTAL EMPLOYER SOC SEC SHARE 56.42

B016C0212000	66.19	OPERS	2/15/2020	02/21/20
E015T0212000	66.19	OPERS	2/15/2020	02/21/20
E025E0212000	66.19	OPERS	2/15/2020	02/21/20

TOTAL EMPLOYER OPERS SHARE 198.57

TOTAL EMPLOYER POLICE SHARE

TOTAL EMPLOYER FIRE SHARE

TOTAL WAGES AND EMPLOYER MATCH 2617.00

ID #	Employee Name	Vac Bal	Sick Bal	Comp Bal	Personal	Check #	Check Date
010110	SPADE, GAIL	0	0	0	0	12002	02/21/20

Wage Type	Hours	Rate	Amount	YTD	Deduct Type	Amount	YTD
1 - Hourly	13	17.50	227.50	2736.76	SOCSEC	56.42	169.68
1 - Hourly	13	17.50	227.50		MEDICARE	13.20	39.69
1 - Hourly	13	17.50	227.50		HILLSDALE LSD SCHOOLS	11.38	34.22
1 - Hourly	13	17.50	227.50		OHIO INCOME TAX	16.94	44.17
					FEDERAL INCOME TAX	84.22	232.57

Total Hours	52.00	Gross Pay	910.00	2736.76	Net Pay	727.84
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12002

Seven Hundred Twenty-Seven Dollars and Eighty-Four Cents

02/21/20

\$ 727.84**

010110
 GAIL SPADE
 21 GLENN STREET
 JEROMESVILLE OH 44840

ID #	Employee Name	Vac Bal	Sick Bal	Comp Bal	Personal	Check #	Check Date
010110	SPADE, GAIL	0	0	0	0	12002	02/21/20

Wage Type	Hours	Rate	Amount	YTD	Deduct Type	Amount	YTD
1 - Hourly	13	17.50	227.50	2736.76	SOCSEC	56.42	169.68
1 - Hourly	13	17.50	227.50		MEDICARE	13.20	39.69
1 - Hourly	13	17.50	227.50		HILLSDALE LSD SCHOOLS	11.38	34.22
1 - Hourly	13	17.50	227.50		OHIO INCOME TAX	16.94	44.17
					FEDERAL INCOME TAX	84.22	232.57

Total Hours	52.00	Gross Pay	910.00	2736.76	Net Pay	727.84
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ID #	Employee Name	Vac Bal	Sick Bal	Comp Bal	Personal	Check #	Check Date
020181	RAYBURN, CAITLIN	0	0	0	0	12003	02/21/20

Wage Type	Hours	Rate	Amount	YTD	Deduct Type	Amount	YTD
1 - Hourly	30.5	15.50	472.75	4895.69	OPERS	141.83	489.58
1 - Hourly	30.5	15.50	472.75		MEDICARE	20.56	70.98
1 - Hourly	30.5	15.50	472.75		HILLSDALE LSD SCHOOLS	17.73	61.20
					JEROMESVILLE	.00	.00
					OHIO INCOME TAX	33.33	108.27
					FEDERAL INCOME TAX	145.21	487.56

Total Hours	91.50	Gross Pay	1418.25	4895.69	Net Pay	1059.59
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12003

One Thousand Fifty-Nine Dollars and Fifty-Nine Cents

02/21/20

\$ 1059.59**

020181
 CAITLIN RAYBURN
 58 S HIGH STREET
 JEROMESVILLE OH 44840

ID #	Employee Name	Vac Bal	Sick Bal	Comp Bal	Personal	Check #	Check Date
020181	RAYBURN, CAITLIN	0	0	0	0	12003	02/21/20

Wage Type	Hours	Rate	Amount	YTD	Deduct Type	Amount	YTD
1 - Hourly	30.5	15.50	472.75	4895.69	OPERS	141.83	489.58
1 - Hourly	30.5	15.50	472.75		MEDICARE	20.56	70.98
1 - Hourly	30.5	15.50	472.75		HILLSDALE LSD SCHOOLS	17.73	61.20
					JEROMESVILLE	.00	.00
					OHIO INCOME TAX	33.33	108.27
					FEDERAL INCOME TAX	145.21	487.56

Total Hours	91.50	Gross Pay	1418.25	4895.69	Net Pay	1059.59
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Village of Jeromesville EMPLOYEE TIME SHEET


Name Caithin Pay Period 2/2 - 2/8
 Pay Date 2/21

TASK COMPLETED

Date	Time In	Lunch	Time Out	TASK COMPLETED	
2/2	1p		1:30p	Water Testing	1/2
2/3	8a		3p	Prep for Commission Meeting	7
2/4	8a		3p	Prep for Meeting / Staples	7
2/4	5p		7p	Meeting	2
2/5	8a		3p	Commission Report	7
2/6	8a		4p	Commission Report / Blueprints / Water Bills	8
2/6	5p		7p	GASL Issues / Billing	2
2/7	8a	1hr	3p	Blue prints / D. xca	7
2/8	6a		6:30a	Alarm at Water Plant	1/2
2/8	6:30p		7p	Water Testing	1/2
Total					41.5

PLEASE USE THE FOLLOWING ABSENTEE CODES TO WRITE IN "TIME IN " SPACE ABOVE WHEN ABSENT FROM WORK

- PER PERSONAL DAYS
- HOL FLOATING HOLIDAYS
- VAC REGULAR VACATION
- BER BEREAVMENT
- UNP UNPAID

EE Signature 
 Approval _____