

# CLAIMS ORDINANCE NO. 2020-09

## 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:

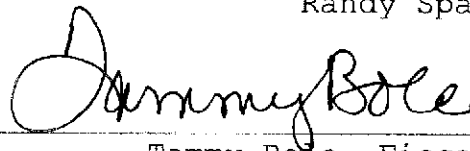
**SECTION 1:** That the attached described claims totaling \$2,954.27 be allowed and paid from the respective funds as identified below:

| 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

PAYROLL EXPENSE POSTING JOURNAL

DATE: 04/16/20 PAGE: 1 COMPUTER DATE: 4/16/2020 7:10:26 PM

| TRANS        | VENDOR # | VENDOR NAME     | CHECK #   | DATE     | CHECK AMT | INV NUMBER | PO NUMBER | PO CHG AMT | NEW PO AMT |
|--------------|----------|-----------------|-----------|----------|-----------|------------|-----------|------------|------------|
| ExpAdd       | 16003    | PAYROLL         | 031920PR  | 03/19/20 | 853.83    |            |           |            |            |
| A013B0211000 |          | Wages           |           |          | 59.15     |            |           |            |            |
| B016C0211000 |          | Wages           |           |          | 232.29    |            |           |            |            |
| E015I0211000 |          | Wages           |           |          | 232.12    |            |           |            |            |
| E025E0211000 |          | Wages           |           |          | 231.96    |            |           |            |            |
| A013B0212000 |          | Medicare        |           |          | .86       |            |           |            |            |
| B016C0212000 |          | Medicare        |           |          | 3.37      |            |           |            |            |
| E015I0212000 |          | Medicare        |           |          | 3.37      |            |           |            |            |
| E025E0212000 |          | Medicare        |           |          | 3.36      |            |           |            |            |
| A013B0212000 |          | Social Security |           |          | 3.67      |            |           |            |            |
| B016C0212000 |          | Social Security |           |          | 3.67      |            |           |            |            |
| E015I0212000 |          | Social Security |           |          | 3.66      |            |           |            |            |
| E025E0212000 |          | Social Security |           |          | 3.65      |            |           |            |            |
| B016C0212000 |          | OPERS           |           |          | 24.24     |            |           |            |            |
| E015I0212000 |          | OPERS           |           |          | 24.24     |            |           |            |            |
| E025E0212000 |          | OPERS           |           |          | 24.22     |            |           |            |            |
| ExpAdd       | 16003    | PAYROLL         | 031920PR2 | 03/19/20 | 2100.44   |            |           |            |            |
| A017A0211000 |          | Wages           |           |          | 650.00    |            |           |            |            |
| A017D0211000 |          | Wages           |           |          | 600.00    |            |           |            |            |
| B016C0211000 |          | Wages           |           |          | 206.77    |            |           |            |            |
| E015I0211000 |          | Wages           |           |          | 206.62    |            |           |            |            |
| E025E0211000 |          | Wages           |           |          | 206.62    |            |           |            |            |
| A017A0212000 |          | Medicare        |           |          | 9.43      |            |           |            |            |
| A017D0212000 |          | Medicare        |           |          | 8.70      |            |           |            |            |
| B016C0212000 |          | Medicare        |           |          | 3.00      |            |           |            |            |
| E015I0212000 |          | Medicare        |           |          | 3.00      |            |           |            |            |
| E025E0212000 |          | Medicare        |           |          | 2.99      |            |           |            |            |
| A017A0212000 |          | Social Security |           |          | 40.30     |            |           |            |            |
| A017D0212000 |          | Social Security |           |          | 6.20      |            |           |            |            |
| A017D0212000 |          | OPERS           |           |          | 70.00     |            |           |            |            |
| B016C0212000 |          | OPERS           |           |          | 28.95     |            |           |            |            |
| E015I0212000 |          | OPERS           |           |          | 28.93     |            |           |            |            |
| E025E0212000 |          | OPERS           |           |          | 28.93     |            |           |            |            |
| GRAND TOTAL  |          |                 |           |          | 2954.27   |            |           |            |            |

|        |               |         |          |          |          |         |            |
|--------|---------------|---------|----------|----------|----------|---------|------------|
| ID #   | Employee Name | Vac Bal | Sick Bal | Comp Bal | Personal | Check # | Check Date |
| 010110 | SPADE, GAIL   | 0       | 0        | 0        | 0        | 12034   | 03/20/20   |

| Wage Type  | Hours | Rate  | Amount | YTD     | Deduct Type           | Amount | YTD    |
|------------|-------|-------|--------|---------|-----------------------|--------|--------|
| 1 - Hourly | 3.38  | 17.50 | 59.15  | 3629.28 | SOCSEC                | 14.65  | 225.02 |
| 1 - Hourly | 3.38  | 17.50 | 59.15  |         | MEDICARE              | 3.43   | 52.64  |
| 1 - Hourly | 3.37  | 17.50 | 58.98  |         | HILLSDALE LSD SCHOOLS | 2.95   | 45.37  |
| 1 - Hourly | 3.37  | 17.50 | 58.98  |         | OHIO INCOME TAX       | 1.51   | 55.05  |
|            |       |       |        |         | FEDERAL INCOME TAX    | 9.03   | 295.37 |

|             |       |           |        |         |         |        |
|-------------|-------|-----------|--------|---------|---------|--------|
| Total Hours | 13.50 | Gross Pay | 236.26 | 3629.28 | Net Pay | 204.69 |
|-------------|-------|-----------|--------|---------|---------|--------|

12034

Two Hundred Four Dollars and Sixty-Nine Cents

03/20/20

\$ 204.69\*\*

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        | 12034   | 03/20/20   |

| Wage Type  | Hours | Rate  | Amount | YTD     | Deduct Type           | Amount | YTD    |
|------------|-------|-------|--------|---------|-----------------------|--------|--------|
| 1 - Hourly | 3.38  | 17.50 | 59.15  | 3629.28 | SOCSEC                | 14.65  | 225.02 |
| 1 - Hourly | 3.38  | 17.50 | 59.15  |         | MEDICARE              | 3.43   | 52.64  |
| 1 - Hourly | 3.37  | 17.50 | 58.98  |         | HILLSDALE LSD SCHOOLS | 2.95   | 45.37  |
| 1 - Hourly | 3.37  | 17.50 | 58.98  |         | OHIO INCOME TAX       | 1.51   | 55.05  |
|            |       |       |        |         | FEDERAL INCOME TAX    | 9.03   | 295.37 |

|             |       |           |        |         |         |        |
|-------------|-------|-----------|--------|---------|---------|--------|
| Total Hours | 13.50 | Gross Pay | 236.26 | 3629.28 | Net Pay | 204.69 |
|-------------|-------|-----------|--------|---------|---------|--------|

## Village of Jeromesville EMPLOYEE TIME SHEET

Name GAIL Pay Period 3/11-3/14  
 Pay Date 3/20

TASK COMPLETED

| Date  | Time In | Lunch   | Time Out | TASK COMPLETED               |
|-------|---------|---------|----------|------------------------------|
| 3/7   | 6:30    | 2hr     | 8:30     | Wax Yobota                   |
| 3/14  | 6:30    | 5hr     | 11:30    | Till pet table pick up table |
| 3/15  | 6:30    | 6 1/2hr | 1:00     | Till pet tables              |
|       |         |         |          |                              |
|       |         |         |          |                              |
|       |         |         |          |                              |
|       |         |         |          |                              |
|       |         |         |          |                              |
|       |         |         |          |                              |
|       |         |         |          |                              |
|       |         |         |          |                              |
|       |         |         |          |                              |
|       |         |         |          |                              |
|       |         |         |          |                              |
| Total |         |         |          | 13   5                       |

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

- |     |                   |                             |
|-----|-------------------|-----------------------------|
| PER | PERSONAL DAYS     | $13.5 \times 17.5 = 236.25$ |
| HOL | FLOATING HOLIDAYS | $236.25 \div 4 = 59.07$     |
| VAC | REGULAR VACATION  | $13.5 \div 4 = 3.38$        |
| BER | BEREAVMENT        |                             |
| UNP | UNPAID            |                             |

EE Signature *[Handwritten Signature]*  
 Approval \_\_\_\_\_

|        |                  |         |          |          |          |         |            |
|--------|------------------|---------|----------|----------|----------|---------|------------|
| ID #   | Employee Name    | Vac Bal | Sick Bal | Comp Bal | Personal | Check # | Check Date |
| 020181 | RAYBURN, CAITLIN | 0       | 0        | 0        | 0        | 12035   | 03/20/20   |

| Wage Type  | Hours | Rate  | Amount | YTD     | Deduct Type           | Amount | YTD    |
|------------|-------|-------|--------|---------|-----------------------|--------|--------|
| 1 - Hourly | 11.17 | 15.50 | 173.14 | 6585.21 | OPERS                 | 51.93  | 658.54 |
| 1 - Hourly | 11.17 | 15.50 | 173.14 |         | MEDICARE              | 7.53   | 95.48  |
| 1 - Hourly | 11.16 | 15.50 | 172.98 |         | HILLSDALE LSD SCHOOLS | 6.49   | 82.32  |
|            |       |       |        |         | JEROMESVILLE          | .00    | .00    |
|            |       |       |        |         | OHIO INCOME TAX       | 6.00   | 139.61 |
|            |       |       |        |         | FEDERAL INCOME TAX    | 37.33  | 640.34 |

|             |       |           |        |         |         |        |
|-------------|-------|-----------|--------|---------|---------|--------|
| Total Hours | 33.50 | Gross Pay | 519.26 | 6585.21 | Net Pay | 409.98 |
|-------------|-------|-----------|--------|---------|---------|--------|

12035

Four Hundred Nine Dollars and Ninety-Eight Cents

03/20/20 \$ 409.98\*\*

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        | 12035   | 03/20/20   |

| Wage Type  | Hours | Rate  | Amount | YTD     | Deduct Type           | Amount | YTD    |
|------------|-------|-------|--------|---------|-----------------------|--------|--------|
| 1 - Hourly | 11.17 | 15.50 | 173.14 | 6585.21 | OPERS                 | 51.93  | 658.54 |
| 1 - Hourly | 11.17 | 15.50 | 173.14 |         | MEDICARE              | 7.53   | 95.48  |
| 1 - Hourly | 11.16 | 15.50 | 172.98 |         | HILLSDALE LSD SCHOOLS | 6.49   | 82.32  |
|            |       |       |        |         | JEROMESVILLE          | .00    | .00    |
|            |       |       |        |         | OHIO INCOME TAX       | 6.00   | 139.61 |
|            |       |       |        |         | FEDERAL INCOME TAX    | 37.33  | 640.34 |

|             |       |           |        |         |         |        |
|-------------|-------|-----------|--------|---------|---------|--------|
| Total Hours | 33.50 | Gross Pay | 519.26 | 6585.21 | Net Pay | 409.98 |
|-------------|-------|-----------|--------|---------|---------|--------|

## Village of Jeromesville EMPLOYEE TIME SHEET

Name Caitlin Pay Period 3/1 - 3/7  
 Pay Date 3/20

TASK COMPLETED

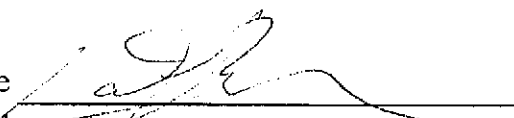
| Date | Time In | Lunch | Time Out | TASK COMPLETED                             |     |
|------|---------|-------|----------|--|-----|
| 3/1  | 3p      |       | 3:30p    | Water Testing                              | 1/2 |
| 3/2  | 8a      |       | 2p       | Water Meter Notices                        | 6   |
| 3/3  | 7:30a   |       | 3p       | Water Meters Conversion / Billing          | 7.5 |
| 3/3  | 5p      |       | 6p       | Repainting Roads / Curbs                   | 1   |
| 3/4  | 7:30a   |       | 2p       | Billing / Fixing Accounts / Meter Installs | 6.5 |
| 3/4  | 6p      |       | 7:30p    | Water Billing Problem + Solution           | 1.5 |
| 3/5  | 8a      |       | 3p       | Water Billing / Fixing / send Bills out    | 7   |
| 3/6  | 12p     |       | 2p       | Water Billing / Providing Positive Emails  | 3   |
| 3/7  | 5:00p   |       | 5:30p    | Water Testing                              | 1/2 |
|      |         |       |          |  |     |
|      |         |       |          |  |     |
|      |         |       |          |  |     |
|      |         |       |          |  |     |
|      |         |       |          |  |     |
|      |         |       |          |  |     |
|      |         |       |          |  |     |
|      |         |       |          |  |     |

Total 33.5

*Still getting over a cold this week!*

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

- |     |                   |                             |
|-----|-------------------|-----------------------------|
| PER | PERSONAL DAYS     |                             |
| HOL | FLOATING HOLIDAYS | $33.5 \times 15.5 = 519.25$ |
| VAC | REGULAR VACATION  | $519.25 \div 3 = 173.09$    |
| BER | BEREAVMENT        | $33.5 \div 3 = 11.17$       |
| UNP | UNPAID            |                             |

EE Signature   
 Approval \_\_\_\_\_

|        |               |         |          |          |          |         |            |
|--------|---------------|---------|----------|----------|----------|---------|------------|
| ID #   | Employee Name | Vac Bal | Sick Bal | Comp Bal | Personal | Check # | Check Date |
| 020124 | SPADE, RANDY  | 0       | 0        | 0        | 0        | 12038   | 03/20/20   |

| Wage Type  | Hours | Rate   | Amount | YTD  | Deduct Type           | Amount | YTD    |
|------------|-------|--------|--------|------|-----------------------|--------|--------|
| 2 - Salary | 0     | 650.00 | 650.00 | 1950 | SOCSEC                | 40.30  | 120.90 |
|            |       |        |        |      | MEDICARE              | 9.43   | 28.29  |
|            |       |        |        |      | HILLSDALE LSD SCHOOLS | 7.45   | 22.35  |
|            |       |        |        |      | OHIO INCOME TAX       | 4.17   | 12.51  |
|            |       |        |        |      | FEDERAL INCOME TAX    | .00    | .00    |

|             |     |           |        |      |         |        |
|-------------|-----|-----------|--------|------|---------|--------|
| Total Hours | .00 | Gross Pay | 650.00 | 1950 | Net Pay | 588.65 |
|-------------|-----|-----------|--------|------|---------|--------|

12038

Five Hundred Eighty-Eight Dollars and Sixty-Five Cents

03/20/20

\$ 588.65\*\*

020124  
 RANDY SPADE  
 25 E SOUTH ST  
 JEROMESVILLE OH 44840

|        |               |         |          |          |          |         |            |
|--------|---------------|---------|----------|----------|----------|---------|------------|
| ID #   | Employee Name | Vac Bal | Sick Bal | Comp Bal | Personal | Check # | Check Date |
| 020124 | SPADE, RANDY  | 0       | 0        | 0        | 0        | 12038   | 03/20/20   |

| Wage Type  | Hours | Rate   | Amount | YTD  | Deduct Type           | Amount | YTD    |
|------------|-------|--------|--------|------|-----------------------|--------|--------|
| 2 - Salary | 0     | 650.00 | 650.00 | 1950 | SOCSEC                | 40.30  | 120.90 |
|            |       |        |        |      | MEDICARE              | 9.43   | 28.29  |
|            |       |        |        |      | HILLSDALE LSD SCHOOLS | 7.45   | 22.35  |
|            |       |        |        |      | OHIO INCOME TAX       | 4.17   | 12.51  |
|            |       |        |        |      | FEDERAL INCOME TAX    | .00    | .00    |

|             |     |           |        |      |         |        |
|-------------|-----|-----------|--------|------|---------|--------|
| Total Hours | .00 | Gross Pay | 650.00 | 1950 | Net Pay | 588.65 |
|-------------|-----|-----------|--------|------|---------|--------|

|        |               |         |          |          |          |         |            |
|--------|---------------|---------|----------|----------|----------|---------|------------|
| ID #   | Employee Name | Vac Bal | Sick Bal | Comp Bal | Personal | Check # | Check Date |
| 020179 | BOLE, TAMMY   | 0       | 0        | 0        | 0        | 12039   | 03/20/20   |

| Wage Type  | Hours | Rate   | Amount | YTD  | Deduct Type           | Amount | YTD    |
|------------|-------|--------|--------|------|-----------------------|--------|--------|
| 1 - Hourly | 1     | 500.00 | 500.00 | 1600 | OPERS                 | 50.00  | 160.00 |
|            |       |        |        |      | MEDICARE              | 7.25   | 23.20  |
|            |       |        |        |      | HILLSDALE LSD SCHOOLS | 6.25   | 20.00  |
|            |       |        |        |      | OHIO INCOME TAX       | 3.14   | 10.49  |
|            |       |        |        |      | FEDERAL INCOME TAX    | 18.30  | 64.90  |

|             |      |           |        |      |         |        |
|-------------|------|-----------|--------|------|---------|--------|
| Total Hours | 1.00 | Gross Pay | 500.00 | 1600 | Net Pay | 415.06 |
|-------------|------|-----------|--------|------|---------|--------|

12039

Four Hundred Fifteen Dollars and Six Cents

03/20/20                      \$ 415.06\*\*

020179  
TAMMY BOLE  
PO BOX 194  
JEROMESVILLE OH 44840

|        |               |         |          |          |          |         |            |
|--------|---------------|---------|----------|----------|----------|---------|------------|
| ID #   | Employee Name | Vac Bal | Sick Bal | Comp Bal | Personal | Check # | Check Date |
| 020179 | BOLE, TAMMY   | 0       | 0        | 0        | 0        | 12039   | 03/20/20   |

| Wage Type  | Hours | Rate   | Amount | YTD  | Deduct Type           | Amount | YTD    |
|------------|-------|--------|--------|------|-----------------------|--------|--------|
| 1 - Hourly | 1     | 500.00 | 500.00 | 1600 | OPERS                 | 50.00  | 160.00 |
|            |       |        |        |      | MEDICARE              | 7.25   | 23.20  |
|            |       |        |        |      | HILLSDALE LSD SCHOOLS | 6.25   | 20.00  |
|            |       |        |        |      | OHIO INCOME TAX       | 3.14   | 10.49  |
|            |       |        |        |      | FEDERAL INCOME TAX    | 18.30  | 64.90  |

|             |      |           |        |      |         |        |
|-------------|------|-----------|--------|------|---------|--------|
| Total Hours | 1.00 | Gross Pay | 500.00 | 1600 | Net Pay | 415.06 |
|-------------|------|-----------|--------|------|---------|--------|



|        |                   |         |          |          |          |         |            |
|--------|-------------------|---------|----------|----------|----------|---------|------------|
| ID #   | Employee Name     | Vac Bal | Sick Bal | Comp Bal | Personal | Check # | Check Date |
| 020180 | REYNOLDS, KRYSTAL | 0       | 0        | 0        | 0        | 12040   | 03/20/20   |

| Wage Type  | Hours | Rate   | Amount | YTD | Deduct Type           | Amount | YTD   |
|------------|-------|--------|--------|-----|-----------------------|--------|-------|
| 1 - Hourly | 1     | 100.00 | 100.00 | 300 | SOCSEC                | 6.20   | 18.60 |
|            |       |        |        |     | MEDICARE              | 1.45   | 4.35  |
|            |       |        |        |     | HILLSDALE LSD SCHOOLS | 1.25   | 3.75  |
|            |       |        |        |     | OHIO INCOME TAX       | .54    | 1.62  |
|            |       |        |        |     | FEDERAL INCOME TAX    | .00    | .00   |

|             |      |           |        |     |         |       |
|-------------|------|-----------|--------|-----|---------|-------|
| Total Hours | 1.00 | Gross Pay | 100.00 | 300 | Net Pay | 90.56 |
|-------------|------|-----------|--------|-----|---------|-------|

12040

Ninety Dollars and Fifty-Six Cents

03/20/20

\$ 90.56\*\*

020180  
 KRYSTAL REYNOLDS  
 38 HIGHLAND AVENUE  
 JEROMESVILLE OH 44840

|        |                   |         |          |          |          |         |            |
|--------|-------------------|---------|----------|----------|----------|---------|------------|
| ID #   | Employee Name     | Vac Bal | Sick Bal | Comp Bal | Personal | Check # | Check Date |
| 020180 | REYNOLDS, KRYSTAL | 0       | 0        | 0        | 0        | 12040   | 03/20/20   |

| Wage Type  | Hours | Rate   | Amount | YTD | Deduct Type           | Amount | YTD   |
|------------|-------|--------|--------|-----|-----------------------|--------|-------|
| 1 - Hourly | 1     | 100.00 | 100.00 | 300 | SOCSEC                | 6.20   | 18.60 |
|            |       |        |        |     | MEDICARE              | 1.45   | 4.35  |
|            |       |        |        |     | HILLSDALE LSD SCHOOLS | 1.25   | 3.75  |
|            |       |        |        |     | OHIO INCOME TAX       | .54    | 1.62  |
|            |       |        |        |     | FEDERAL INCOME TAX    | .00    | .00   |

|             |      |           |        |     |         |       |
|-------------|------|-----------|--------|-----|---------|-------|
| Total Hours | 1.00 | Gross Pay | 100.00 | 300 | Net Pay | 90.56 |
|-------------|------|-----------|--------|-----|---------|-------|

|        |                  |         |          |          |          |         |            |
|--------|------------------|---------|----------|----------|----------|---------|------------|
| ID #   | Employee Name    | Vac Bal | Sick Bal | Comp Bal | Personal | Check # | Check Date |
| 020181 | RAYBURN, CAITLIN | 0       | 0        | 0        | 0        | 12041   | 03/20/20   |

| Wage Type  | Hours | Rate  | Amount | YTD     | Deduct Type           | Amount | YTD    |
|------------|-------|-------|--------|---------|-----------------------|--------|--------|
| 1 - Hourly | 13.34 | 15.50 | 206.77 | 7205.22 | OPERS                 | 62.00  | 720.54 |
| 1 - Hourly | 13.33 | 15.50 | 206.62 |         | MEDICARE              | 8.99   | 104.47 |
| 1 - Hourly | 13.33 | 15.50 | 206.62 |         | HILLSDALE LSD SCHOOLS | 7.75   | 90.07  |
|            |       |       |        |         | JEROMESVILLE          | .00    | .00    |
|            |       |       |        |         | OHIO INCOME TAX       | 8.39   | 148.00 |
|            |       |       |        |         | FEDERAL INCOME TAX    | 49.42  | 689.76 |

|             |       |           |        |         |         |        |
|-------------|-------|-----------|--------|---------|---------|--------|
| Total Hours | 40.00 | Gross Pay | 620.01 | 7205.22 | Net Pay | 483.46 |
|-------------|-------|-----------|--------|---------|---------|--------|

12041

Four Hundred Eighty-Three Dollars and Forty-Six Cents

03/20/20 \$ 483.46\*\*

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        | 12041   | 03/20/20   |

| Wage Type  | Hours | Rate  | Amount | YTD     | Deduct Type           | Amount | YTD    |
|------------|-------|-------|--------|---------|-----------------------|--------|--------|
| 1 - Hourly | 13.34 | 15.50 | 206.77 | 7205.22 | OPERS                 | 62.00  | 720.54 |
| 1 - Hourly | 13.33 | 15.50 | 206.62 |         | MEDICARE              | 8.99   | 104.47 |
| 1 - Hourly | 13.33 | 15.50 | 206.62 |         | HILLSDALE LSD SCHOOLS | 7.75   | 90.07  |
|            |       |       |        |         | JEROMESVILLE          | .00    | .00    |
|            |       |       |        |         | OHIO INCOME TAX       | 8.39   | 148.00 |
|            |       |       |        |         | FEDERAL INCOME TAX    | 49.42  | 689.76 |

|             |       |           |        |         |         |        |
|-------------|-------|-----------|--------|---------|---------|--------|
| Total Hours | 40.00 | Gross Pay | 620.01 | 7205.22 | Net Pay | 483.46 |
|-------------|-------|-----------|--------|---------|---------|--------|

# Village of Jeromesville EMPLOYEE TIME SHEET

Name Caitlin Pay Period 3/8 - 3/14  
 Pay Date 3/20

## TASK COMPLETED

| Date | Time In | Lunch | Time Out | TASK COMPLETED                                    |
|------|---------|-------|----------|---|
| 3/8  | 1p      |       | 1:30p    | Water Testing                                     |
| 3/9  | 7a      |       | 3p       | Water Deposits / Contact repairing computer       |
| 3/10 | 8a      |       | 4p       | Water Billing / fix accounts                      |
| 3/11 | 8a      |       | 4p       | Water Billing / Meter Addition                    |
| 3/12 | 8a      |       | 4p       | Water Billing / Valve + Meter Location / Addition |
| 3/13 | 8a      |       | 3p       | Conversion starting w/ waterworks                 |
| 3/14 | 1:30p   |       | 2p       | Water Testing                                     |
|      |         |       |          |   |
|      |         |       |          |   |
|      |         |       |          |   |
|      |         |       |          |   |
|      |         |       |          |   |
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|      |         |       |          |   |
|      |         |       |          |   |

1/2  
8  
8  
8  
8  
7  
1/2

Total 40

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 \_\_\_\_\_