

Warrant 091815

PAYROLL VOUCHER REGISTER

Period  
8/29/2015 to 9/11/2015

Park Board

Check Date  
09/18/2015

We have examined the vouchers listed on the foregoing voucher register, consisting of 10 pages, and except for vouchers not allowed as shown on the register such vouchers are hereby allowed in the total amount of \$43,370.74 . Dated this 22 day of September , 2015 .

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Signature of Governing Board

I hereby certify that each of the above listed vouchers and invoices or bills attached thereto, are true and correct and I have audited same in accordance with IC 5-11-10-1.6.

Judith C. Meach , Clerk-Treasurer

Signature

September 18 , 20 15 .

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Account	Loc # / Emp #	Name	Check #	Pay Type	Units	Tax Fringe	Exp Amount			
20400000 511101 Park-Salaries, Dept Head	5000 / 2583	JANET E FAWLEY	6691	100 SALARIES - DEPARTMENT HEAD		\$0.00	\$2,779.09			
			6691	910 LIFE INSURANCE FRINGE BENEFIT		\$5.95	\$0.00			
			<b>Employee Total</b>						<b>\$5.95</b>	<b>\$2,779.09</b>
			<b>Account Total</b>						<b>\$5.95</b>	<b>\$2,779.09</b>
20400000 511105 Park-Salaries, FT Regular	5000 / 208	PENNIE AINSWORTH	6646	105 SALARIES - FULL TIME		\$0.00	\$2,389.54			
			6646	910 LIFE INSURANCE FRINGE BENEFIT		\$6.09	\$0.00			
			<b>Employee Total</b>						<b>\$6.09</b>	<b>\$2,389.54</b>
	5000 / 520	MARY C FOLEY								
			6696	105 SALARIES - FULL TIME		\$0.00	\$1,863.13			
<b>Employee Total</b>						<b>\$0.00</b>	<b>\$1,863.13</b>			
	5000 / 540	THOMAS L JAMES								
			6740	105 SALARIES - FULL TIME		\$0.00	\$1,681.61			
<b>Employee Total</b>						<b>\$0.00</b>	<b>\$1,681.61</b>			
	5000 / 1086	CHERYL M KOLB								
			6756	105 SALARIES - FULL TIME		\$0.00	\$1,545.43			
<b>Employee Total</b>						<b>\$0.00</b>	<b>\$1,545.43</b>			
	5000 / 1487	SUZANNE S MATTERN								
			6770	105 SALARIES - FULL TIME		\$0.00	\$1,591.92			
<b>Employee Total</b>						<b>\$0.00</b>	<b>\$1,591.92</b>			

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20400000 511105 Park-Salaries, FT Regular	5000 / 1554	KENNETH W VANDERHOFF	6849	105 SALARIES - FULL TIME		\$0.00	\$1,533.26
			<b>Employee Total</b>			<b>\$0.00</b>	<b>\$1,533.26</b>
	5000 / 1595	JOHN W HEITMILLER	6728	105 SALARIES - FULL TIME		\$0.00	\$1,448.70
			<b>Employee Total</b>			<b>\$0.00</b>	<b>\$1,448.70</b>
	5000 / 1630	ROBERT L CHEEVER	6668	105 SALARIES - FULL TIME		\$0.00	\$1,448.70
			<b>Employee Total</b>			<b>\$0.00</b>	<b>\$1,448.70</b>
	5000 / 1958	ROBERT E REIFEL	6806	105 SALARIES - FULL TIME		\$0.00	\$1,419.73
			6806	980 PAY DOCK	22.75	\$0.00	(\$403.74)
			<b>Employee Total</b>			<b>\$0.00</b>	<b>\$1,015.99</b>
	5000 / 1980	JON M MUNN	6787	105 SALARIES - FULL TIME		\$0.00	\$1,985.63
			<b>Employee Total</b>			<b>\$0.00</b>	<b>\$1,985.63</b>
	5000 / 2375	DANIEL H DUNTEN	6688	105 SALARIES - FULL TIME		\$0.00	\$1,533.26
			<b>Employee Total</b>			<b>\$0.00</b>	<b>\$1,533.26</b>
	5000 / 2392	TAMMY WAGNER	6856	105 SALARIES - FULL TIME		\$0.00	\$1,248.54
			<b>Employee Total</b>			<b>\$0.00</b>	<b>\$1,248.54</b>

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20400000 511105 Park-Salaries, FT Regular	5000 / 2420	JOHN N RAWLES	6802	105 SALARIES - FULL TIME		\$0.00	\$1,448.70
			<b>Employee Total</b>			<b>\$0.00</b>	<b>\$1,448.70</b>
	5000 / 2434	CALEB D PAVEY	6793	105 SALARIES - FULL TIME		\$0.00	\$1,351.86
			<b>Employee Total</b>			<b>\$0.00</b>	<b>\$1,351.86</b>
	5001 / 2001	MARIANNE GAIO	6706	105 SALARIES - FULL TIME		\$0.00	\$720.53
			<b>Employee Total</b>			<b>\$0.00</b>	<b>\$720.53</b>
	5001 / 2497	BESS M WITCOSKY	6865	105 SALARIES - FULL TIME		\$0.00	\$1,611.12
			<b>Employee Total</b>			<b>\$0.00</b>	<b>\$1,611.12</b>
						<b>Account Total</b>	<b>\$6.09</b>
							<b>\$24,417.92</b>
20400000 511201 Park-Salaries, Part Time Reg	5002 / 2537	SONJA R WOOD	6866	150 SALARIES - REGULAR PART-TIME	39.75	\$0.00	\$446.00
			6866	550 CITY HOLIDAY DAY OFF PART TIME	4.00	\$0.00	\$44.88
						<b>Employee Total</b>	<b>\$0.00</b>
						<b>Account Total</b>	<b>\$0.00</b>
							<b>\$490.88</b>
20400000 511202 Park-Salaries, PT Season/Temp	5002 / 2227	AMANDA J JEFFRIES	6742	155 SALARIES - TEMP/SEASONAL PT	3.25	\$0.00	\$32.50
			<b>Employee Total</b>			<b>\$0.00</b>	<b>\$32.50</b>
	5002 / 2602	BREANNA L SIPPLE	6826	155 SALARIES - TEMP/SEASONAL PT	14.00	\$0.00	\$126.00



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Account	Loc # / Emp #	Name	Check #	Pay Type	Units	Tax Fringe	Exp Amount
<hr/>							
20400000 517000 Park-Dental Ins-Employee			2100	125 DENTAL EMPLOYEE ONLY		\$0.00	\$223.99
			2101	125 DENTAL EMPLOYEE/SPOUSE		\$0.00	\$44.00
			2103	125 DENTAL EMPLOYEE/FAMILY		\$0.00	\$177.98
			8100	DENTAL EMPLOYEE ONLY		\$0.00	\$17.23
					<b>Total</b>		<b>\$0.00</b>
				<b>Account Total</b>		<b>\$0.00</b>	<b>\$463.20</b>
<hr/>							
20400000 518000 Park-Vision Ins-Employee			2200	125 VISION EMPLOYEE ONLY		\$0.00	\$42.51
			2201	125 VISION EMPLOYEE/SPOUSE		\$0.00	\$7.94
			2203	125 VISION EMPLOYEE/FAMILY		\$0.00	\$31.68
			8200	VISION EMPLOYEE ONLY		\$0.00	\$3.27
					<b>Total</b>		<b>\$0.00</b>
				<b>Account Total</b>		<b>\$0.00</b>	<b>\$85.40</b>
<hr/>							
20400000 519200 Park-Basic Life Ins-EE Only			8300	BASIC LIFE		\$0.00	\$65.10
					<b>Total</b>		<b>\$0.00</b>
				<b>Account Total</b>		<b>\$0.00</b>	<b>\$65.10</b>
<hr/>							
20405500 511202 Park Fac-Sal PT Seasonal	5003 / 2410	BLAYNE L MCNELLY					
			6778	155 SALARIES - TEMP/SEASONAL PT	8.50	\$0.00	\$78.63
				<b>Employee Total</b>		<b>\$0.00</b>	<b>\$78.63</b>
<hr/>							
	5003 / 2615	KIRSTIN M SHERRY					
			6821	155 SALARIES - TEMP/SEASONAL PT	46.00	\$0.00	\$391.00

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Account	Loc # / Emp #	Name	Check #	Pay Type	Units	Tax Fringe	Exp Amount	
						<b>Employee Total</b>	<b>\$0.00</b>	<b>\$391.00</b>
20405500 511202 Park Fac-Sal PT Seasonal	5003 / 2632	RYAN C MORRIS						
			6786	155 SALARIES - TEMP/SEASONAL PT	30.25	\$0.00	\$257.13	
						<b>Employee Total</b>	<b>\$0.00</b>	<b>\$257.13</b>
	5003 / 2634	LANCE W VON AH						
			6854	155 SALARIES - TEMP/SEASONAL PT	38.25	\$0.00	\$325.13	
						<b>Employee Total</b>	<b>\$0.00</b>	<b>\$325.13</b>
						<b>Account Total</b>	<b>\$0.00</b>	<b>\$1,051.89</b>
20405500 512000 Park Fac- FICA				1000 FICA		\$0.00	\$65.22	
						<b>Total</b>	<b>\$0.00</b>	<b>\$65.22</b>
						<b>Account Total</b>	<b>\$0.00</b>	<b>\$65.22</b>
20405500 513000 Park Fac- Medicare				1100 MEDICARE		\$0.00	\$15.25	
						<b>Total</b>	<b>\$0.00</b>	<b>\$15.25</b>
						<b>Account Total</b>	<b>\$0.00</b>	<b>\$15.25</b>
21100000 511105 NRO-Salaries, FT Regular	5001 / 2001	MARIANNE GAIO						
			6706	105 SALARIES - FULL TIME		\$0.00	\$720.52	
						<b>Employee Total</b>	<b>\$0.00</b>	<b>\$720.52</b>
	5001 / 2101	PHILLIP J GUTIERREZ						
			6717	105 SALARIES - FULL TIME		\$0.00	\$1,351.86	
						<b>Employee Total</b>	<b>\$0.00</b>	<b>\$1,351.86</b>
						<b>Account Total</b>	<b>\$0.00</b>	<b>\$2,072.38</b>



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21100000 518000 NRO-Vision Ins-Employee			2201	125 VISION EMPLOYEE/SPOUSE		\$0.00	\$2.64
			2203	125 VISION EMPLOYEE/FAMILY		\$0.00	\$7.92
					<b>Total</b>	<b>\$0.00</b>	<b>\$10.56</b>
					<b>Account Total</b>	<b>\$0.00</b>	<b>\$10.56</b>
21100000 519200 NRO-Basic Life Ins-EE Only			8300	BASIC LIFE		\$0.00	\$4.20
					<b>Total</b>	<b>\$0.00</b>	<b>\$4.20</b>
					<b>Account Total</b>	<b>\$0.00</b>	<b>\$4.20</b>
<b>Grand Total</b>						<b>\$12.04</b>	<b>\$43,370.74</b>

City of West Lafayette

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PAYROLL VOUCHER REGISTER  
Summary by Fund

Period  
8/29/2015 to 9/11/2015

Park Board

Check Date  
09/18/2015

Fund	Amount
Parks and Recreation	\$40,153.96
Parks Nonreverting Operating	\$3,216.78
GRAND TOTAL	\$43,370.74