

Warrant 111315

PAYROLL VOUCHER REGISTER

Period
10/24/2015 to 11/6/2015

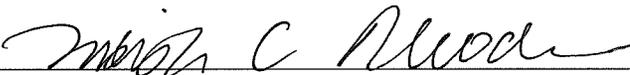
Park Board

Check Date
11/13/2015

We have examined the vouchers listed on the foregoing voucher register, consisting of 11 pages, and except for vouchers not allowed as shown on the register such vouchers are hereby allowed in the total amount of \$41,628.50 . Dated this 17 day of November , 20 15 .

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.

 , Clerk-Treasurer

Signature
November 13 , 20 15 .

Warrant 111315

PAYROLL VOUCHER REGISTER

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10/24/2015 to 11/6/2015

Park Board

Check Date
11/13/2015

Account	Loc # / Emp #	Name	Check #	Pay Type	Units	Tax Fringe	Exp Amount			
20400000 511101 Park-Salaries, Dept Head	5000 / 2583	JANET E FAWLEY	7707	100 SALARIES - DEPARTMENT HEAD		\$0.00	\$2,779.09			
			7707	910 LIFE INSURANCE FRINGE BENEFIT		\$5.95	\$0.00			
			Employee Total						\$5.95	\$2,779.09
			Account Total						\$5.95	\$2,779.09
20400000 511105 Park-Salaries, FT Regular	5000 / 208	PENNIE AINSWORTH	7661	105 SALARIES - FULL TIME		\$0.00	\$2,389.54			
			7661	910 LIFE INSURANCE FRINGE BENEFIT		\$6.09	\$0.00			
			Employee Total						\$6.09	\$2,389.54
			Account Total						\$6.09	\$2,389.54
5000 / 520	MARY C FOLEY	7713	105 SALARIES - FULL TIME		\$0.00	\$1,863.13				
		Employee Total						\$0.00	\$1,863.13	
		Account Total						\$0.00	\$1,863.13	
5000 / 540	THOMAS L JAMES	7758	105 SALARIES - FULL TIME		\$0.00	\$1,681.61				
		Employee Total						\$0.00	\$1,681.61	
		Account Total						\$0.00	\$1,681.61	
5000 / 1086	CHERYL M KOLB	7775	105 SALARIES - FULL TIME		\$0.00	\$1,545.43				
		Employee Total						\$0.00	\$1,545.43	
		Account Total						\$0.00	\$1,545.43	
5000 / 1554	KENNETH W VANDERHOFF	7869	105 SALARIES - FULL TIME		\$0.00	\$1,533.26				
		Employee Total						\$0.00	\$1,533.26	
		Account Total						\$0.00	\$1,533.26	

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20400000 511105 Park-Salaries, FT Regular	5000 / 1595	JOHN W HEITMILLER	7746	105 SALARIES - FULL TIME		\$0.00	\$1,448.70
			Employee Total			\$0.00	\$1,448.70
	5000 / 1630	ROBERT L CHEEVER	7682	105 SALARIES - FULL TIME		\$0.00	\$1,448.70
			Employee Total			\$0.00	\$1,448.70
	5000 / 1958	ROBERT E REIFEL	7824	105 SALARIES - FULL TIME		\$0.00	\$1,419.73
			Employee Total			\$0.00	\$1,419.73
	5000 / 1980	JON M MUNN	7805	105 SALARIES - FULL TIME		\$0.00	\$1,985.63
			Employee Total			\$0.00	\$1,985.63
	5000 / 2375	DANIEL H DUNTEN	7704	105 SALARIES - FULL TIME		\$0.00	\$1,533.26
			Employee Total			\$0.00	\$1,533.26
	5000 / 2392	TAMMY WAGNER	7876	105 SALARIES - FULL TIME		\$0.00	\$1,248.54
			Employee Total			\$0.00	\$1,248.54
	5000 / 2420	JOHN N RAWLES	7820	105 SALARIES - FULL TIME		\$0.00	\$1,448.70
			Employee Total			\$0.00	\$1,448.70
	5000 / 2434	CALEB D PAVEY	7811	105 SALARIES - FULL TIME		\$0.00	\$1,351.86
			Employee Total			\$0.00	\$1,351.86

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Account	Loc # / Emp #	Name	Check #	Pay Type	Units	Tax Fringe	Exp Amount		
20400000 511105 Park-Salaries, FT Regular	5001 / 2001	MARIANNE GAIO	7723	105 SALARIES - FULL TIME		\$0.00	\$720.53		
			Employee Total						\$0.00
			Account Total						\$720.53
20400000 511105 Park-Salaries, FT Regular	5001 / 2497	BESS M WITCOSKY	7885	105 SALARIES - FULL TIME		\$0.00	\$1,611.12		
			Employee Total						\$0.00
			Account Total						\$1,611.12
20400000 511201 Park-Salaries, Part Time Reg	5002 / 2537	SONJA R WOOD	7886	150 SALARIES - REGULAR PART-TIME	60.00	\$0.00	\$673.20		
			7886	550 CITY HOLIDAY DAY OFF PART TIME	4.00	\$0.00	\$44.88		
			Employee Total						\$0.00
Account Total						\$6.09	\$23,229.74		
20400000 511202 Park-Salaries, PT Season/Temp	5002 / 2602	BREANNA L SIPPLE	7845	155 SALARIES - TEMP/SEASONAL PT	7.50	\$0.00	\$67.50		
			Employee Total						\$0.00
			Account Total						\$0.00
20400000 511202 Park-Salaries, PT Season/Temp	5003 / 2227	AMANDA J JEFFRIES	7760	155 SALARIES - TEMP/SEASONAL PT		\$0.00	(\$68.06)		
			Employee Total						\$0.00
			Account Total						\$0.00
20400000 511202 Park-Salaries, PT Season/Temp	5003 / 2585	SARAH E MCKELLIPS	7792	155 SALARIES - TEMP/SEASONAL PT	7.50	\$0.00	\$67.50		
			Employee Total						\$0.00
			Account Total						\$0.00

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Account	Loc # / Emp #	Name	Check #	Pay Type	Units	Tax Fringe	Exp Amount
<hr/>							
20400000 512000 Park-FICA							
			1000	FICA		\$0.00	\$1,562.64
						Total	\$0.00
							\$1,562.64
						Account Total	\$0.00
							\$1,562.64
<hr/>							
20400000 513000 Park-Medicare							
			1100	MEDICARE		\$0.00	\$365.44
						Total	\$0.00
							\$365.44
						Account Total	\$0.00
							\$365.44
<hr/>							
20400000 514000 Park-INPRS-Civilian City							
			7000	INPRS - RETIREMENT		\$0.00	\$2,913.00
						Total	\$0.00
							\$2,913.00
						Account Total	\$0.00
							\$2,913.00
<hr/>							
20400000 516000 Park-Medical Ins-Employee							
			2000	125 MEDICAL EMPLOYEE		\$0.00	\$1,571.03
			2001	125 MEDICAL EMPLOYEE/SPOUSE		\$0.00	\$398.94
			2003	125 MEDICAL EMPLOYEE/FAMILY		\$0.00	\$2,909.60
						Total	\$0.00
							\$4,879.57
						Account Total	\$0.00
							\$4,879.57
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20400000 517000 Park-Dental Ins-Employee							
			2100	125 DENTAL EMPLOYEE ONLY		\$0.00	\$172.30
			2101	125 DENTAL EMPLOYEE/SPOUSE		\$0.00	\$44.00
			2103	125 DENTAL EMPLOYEE/FAMILY		\$0.00	\$177.98

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Account	Loc # / Emp #	Name	Check #	Pay Type	Units	Tax Fringe	Exp Amount		
20405280 511202 Park Rink-Sal PT Seasonal	5003 / 2339	MATTHEW T WRIGHT	7887	155 SALARIES - TEMP/SEASONAL PT	7.00	\$0.00	\$63.00		
			Employee Total						\$0.00
			\$63.00						
			5003 / 2384	DAVID P ROKHINSON	7829	155 SALARIES - TEMP/SEASONAL PT	2.25	\$0.00	\$20.25
					Employee Total				
\$20.25									
5003 / 2387	THOMAS K FISHER	7710			155 SALARIES - TEMP/SEASONAL PT	2.25	\$0.00	\$21.38	
		Employee Total						\$0.00	
		\$21.38							
		5003 / 2511	LEV ZEMLYANOV	7891	155 SALARIES - TEMP/SEASONAL PT	5.75	\$0.00	\$47.44	
				Employee Total					
\$47.44									
Account Total						\$0.00			
\$471.45									
20405280 512000 Park Rink- FICA			1000	FICA		\$0.00	\$29.25		
	Total						\$0.00		
	\$29.25								
Account Total						\$0.00			
\$29.25									
20405280 513000 Park Rink- Medicare			1100	MEDICARE		\$0.00	\$6.83		
	Total						\$0.00		
	\$6.83								
Account Total						\$0.00			
\$6.83									
20405500 511202 Park Fac-Sal PT Seasonal	5003 / 2410	BLAYNE L MCNELLY	7796	155 SALARIES - TEMP/SEASONAL PT	36.00	\$0.00	\$333.00		
			Account Total						\$0.00
\$333.00									

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Account	Loc # / Emp #	Name	Check #	Pay Type	Units	Tax Fringe	Exp Amount	
						Employee Total	\$0.00	\$333.00
20405500 511202 Park Fac-Sal PT Seasonal	5003 / 2632	RYAN C MORRIS						
			7804	155 SALARIES - TEMP/SEASONAL PT	12.00	\$0.00	\$102.00	
						Employee Total	\$0.00	\$102.00
	5003 / 2634	LANCE W VON AH						
			7874	155 SALARIES - TEMP/SEASONAL PT	30.00	\$0.00	\$255.00	
						Employee Total	\$0.00	\$255.00
						Account Total	\$0.00	\$690.00
20405500 512000 Park Fac- FICA				1000 FICA		\$0.00	\$42.78	
						Total	\$0.00	\$42.78
						Account Total	\$0.00	\$42.78
20405500 513000 Park Fac- Medicare				1100 MEDICARE		\$0.00	\$10.01	
						Total	\$0.00	\$10.01
						Account Total	\$0.00	\$10.01
21100000 511105 NRO-Salaries, FT Regular	5001 / 2001	MARIANNE GAIO						
			7723	105 SALARIES - FULL TIME		\$0.00	\$720.52	
						Employee Total	\$0.00	\$720.52
	5001 / 2101	PHILLIP J GUTIERREZ						
			7734	105 SALARIES - FULL TIME		\$0.00	\$1,351.86	
						Employee Total	\$0.00	\$1,351.86
						Account Total	\$0.00	\$2,072.38

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<hr/>							
21100000 518000 NRO-Vision Ins-Employee							
			2201	125 VISION EMPLOYEE/SPOUSE		\$0.00	\$2.64
			2203	125 VISION EMPLOYEE/FAMILY		\$0.00	\$7.92
					Total	\$0.00	\$10.56
					Account Total	\$0.00	\$10.56
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21100000 519200 NRO-Basic Life Ins-EE Only							
			8300	BASIC LIFE		\$0.00	\$4.20
					Total	\$0.00	\$4.20
					Account Total	\$0.00	\$4.20
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21100000 519300 NRO-LTD Ins- EE							
			8400	LONG TERM DISABILITY		\$0.00	\$9.87
					Total	\$0.00	\$9.87
					Account Total	\$0.00	\$9.87
					Grand Total	\$12.04	\$41,628.50

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Park Board

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We have examined the vouchers listed on the foregoing voucher register, consisting of _____ pages, and except for vouchers not allowed as shown on the register such vouchers are hereby allowed in the total amount of \$41,628.50 . Dated this _____ day of _____ , 20____ .

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.

_____, Clerk-Treasurer

Signature

_____, 20 ____ .

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**PAYROLL VOUCHER REGISTER
Summary by Fund**

**Period
10/24/2015 to 11/6/2015**

Park Board

**Check Date
11/13/2015**

Fund	Amount
Parks and Recreation	\$38,401.85
Parks Nonreverting Operating	\$3,226.65
GRAND TOTAL	\$41,628.50