

Warrant 090415

PAYROLL VOUCHER REGISTER

Period
8/15/2015 to 8/28/2015

Park Board

Check Date
09/04/2015

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 \$41,906.29 . Dated this 8 day of September, 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
September 4, 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	6470	100 SALARIES - DEPARTMENT HEAD		\$0.00	\$2,779.09		
			6470	910 LIFE INSURANCE FRINGE BENEFIT		\$5.95	\$0.00		
			6470	920 FRINGE BENEFIT	1.00	\$49.99	\$0.00		
			Employee Total				\$55.94	\$2,779.09	
			Account Total			\$55.94	\$2,779.09		
20400000 511105 Park-Salaries, FT Regular	3000 / 1980	JON M MUNN	6565	910 LIFE INSURANCE FRINGE BENEFIT		\$0.69	\$0.00		
			Employee Total				\$0.69	\$0.00	
			5000 / 208	PENNIE AINSWORTH	6425	105 SALARIES - FULL TIME		\$0.00	\$2,389.54
			6425		910 LIFE INSURANCE FRINGE BENEFIT		\$6.09	\$0.00	
6425	920 FRINGE BENEFIT	1.00	\$49.99		\$0.00				
Employee Total					\$56.08	\$2,389.54			
5000 / 520	MARY C FOLEY	6475	105 SALARIES - FULL TIME		\$0.00	\$1,863.13			
6475		920 FRINGE BENEFIT	1.00	\$49.99	\$0.00				
Employee Total				\$49.99	\$1,863.13				
5000 / 540		THOMAS L JAMES	6519	105 SALARIES - FULL TIME		\$0.00	\$1,681.61		
Employee Total				\$0.00	\$1,681.61				

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20400000 511105 Park-Salaries, FT Regular	5000 / 1086	CHERYL M KOLB	6534	105 SALARIES - FULL TIME		\$0.00	\$1,545.43
			6534	920 FRINGE BENEFIT	1.00	\$49.99	\$0.00
Employee Total						\$49.99	\$1,545.43
5000 / 1487		SUZANNE S MATTERN					
			6547	105 SALARIES - FULL TIME		\$0.00	\$1,591.92
			6547	920 FRINGE BENEFIT	1.00	\$49.99	\$0.00
Employee Total						\$49.99	\$1,591.92
5000 / 1554		KENNETH W VANDERHOFF					
			6626	105 SALARIES - FULL TIME		\$0.00	\$1,533.26
			6626	920 FRINGE BENEFIT	1.00	\$49.99	\$0.00
Employee Total						\$49.99	\$1,533.26
5000 / 1595		JOHN W HEITMILLER					
			6507	105 SALARIES - FULL TIME		\$0.00	\$1,448.70
			6507	920 FRINGE BENEFIT	1.00	\$49.99	\$0.00
Employee Total						\$49.99	\$1,448.70
5000 / 1630		ROBERT L CHEEVER					
			6447	105 SALARIES - FULL TIME		\$0.00	\$1,448.70
Employee Total						\$0.00	\$1,448.70
5000 / 1980		JON M MUNN					
			6565	105 SALARIES - FULL TIME		\$0.00	\$1,985.63
			6565	920 FRINGE BENEFIT	1.00	\$49.99	\$0.00
Employee Total						\$49.99	\$1,985.63
5000 / 2375		DANIEL H DUNTEN					

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Account	Loc # / Emp #	Name	Check #	Pay Type	Units	Tax Fringe	Exp Amount
20400000 511105 Park-Salaries, FT Regular			6467	105 SALARIES - FULL TIME		\$0.00	\$1,533.26
			6467	920 FRINGE BENEFIT	1.00	\$49.99	\$0.00
Employee Total						\$49.99	\$1,533.26
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	5000 / 2392	TAMMY WAGNER					
			6633	105 SALARIES - FULL TIME		\$0.00	\$1,248.54
			6633	920 FRINGE BENEFIT	1.00	\$49.99	\$0.00
Employee Total						\$49.99	\$1,248.54
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	5000 / 2420	JOHN N RAWLES					
			6581	105 SALARIES - FULL TIME		\$0.00	\$1,448.70
			6581	920 FRINGE BENEFIT	1.00	\$49.99	\$0.00
Employee Total						\$49.99	\$1,448.70
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	5000 / 2434	CALEB D PAVEY					
			6572	105 SALARIES - FULL TIME		\$0.00	\$1,351.86
Employee Total						\$0.00	\$1,351.86
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	5001 / 2001	MARIANNE GAIO					
			6485	105 SALARIES - FULL TIME		\$0.00	\$720.53
			6485	920 FRINGE BENEFIT	0.50	\$25.00	\$0.00
Employee Total						\$25.00	\$720.53
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	5001 / 2497	BESS M WITCOSKY					
			6641	105 SALARIES - FULL TIME		\$0.00	\$1,611.12
			6641	920 FRINGE BENEFIT	1.00	\$49.99	\$0.00
Employee Total						\$49.99	\$1,611.12
Account Total						\$581.67	\$23,401.93

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Account	Loc # / Emp #	Name	Check #	Pay Type	Units	Tax Fringe	Exp Amount			
20400000 511201 Park-Salaries, Part Time Reg	5002 / 2537	SONJA R WOOD	6642	150 SALARIES - REGULAR PART-TIME	40.50	\$0.00	\$454.41			
			6642	920 FRINGE BENEFIT	1.00	\$49.99	\$0.00			
			Employee Total						\$49.99	\$454.41
			Account Total						\$49.99	\$454.41
20400000 511202 Park-Salaries, PT Season/Temp	5003 / 2585	SARAH E MCKELLIPS	6552	155 SALARIES - TEMP/SEASONAL PT	5.00	\$0.00	\$45.00			
			Employee Total						\$0.00	\$45.00
			Account Total						\$0.00	\$45.00
20400000 512000 Park-FICA	5003 / 2602	BREANNA L SIPPLE	6603	155 SALARIES - TEMP/SEASONAL PT	24.50	\$0.00	\$220.50			
			Employee Total						\$0.00	\$220.50
			Account Total						\$0.00	\$265.50
			1000	FICA				\$0.00	\$1,607.75	
Total						\$0.00	\$1,607.75			
Account Total						\$0.00	\$1,607.75			
20400000 513000 Park-Medicare			1100	MEDICARE		\$0.00	\$376.01			
			Total						\$0.00	\$376.01
			Account Total						\$0.00	\$376.01
20400000 514000 Park-INPRS-Civilian City			7000	INPRS - RETIREMENT		\$0.00	\$2,932.29			
			Total						\$0.00	\$2,932.29
			Account Total						\$0.00	\$2,932.29

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Account	Loc # / Emp #	Name	Check #	Pay Type	Units	Tax Fringe	Exp Amount
<hr/>							
20400000 516000 Park-Medical Ins-Employee							
			2000	125 MEDICAL EMPLOYEE		\$0.00	\$1,361.56
			2001	125 MEDICAL EMPLOYEE/SPOUSE		\$0.00	\$398.94
			2003	125 MEDICAL EMPLOYEE/FAMILY		\$0.00	\$2,909.80
						Total	\$0.00
							\$4,670.30
						Account Total	\$0.00
							\$4,670.30
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20400000 517000 Park-Dental Ins-Employee							
			2100	125 DENTAL EMPLOYEE ONLY		\$0.00	\$155.07
			2101	125 DENTAL EMPLOYEE/SPOUSE		\$0.00	\$44.00
			2103	125 DENTAL EMPLOYEE/FAMILY		\$0.00	\$178.00
			8100	DENTAL EMPLOYEE ONLY		\$0.00	\$17.23
						Total	\$0.00
							\$394.30
						Account Total	\$0.00
							\$394.30
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20400000 518000 Park-Vision Ins-Employee							
			2200	125 VISION EMPLOYEE ONLY		\$0.00	\$29.43
			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
						Total	\$0.00
							\$72.32
						Account Total	\$0.00
							\$72.32
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20400000 519200 Park-Basic Life Ins-EE Only							
			8300	BASIC LIFE		\$0.00	\$53.90

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Account	Loc # / Emp #	Name	Check #	Pay Type	Units	Tax Fringe	Exp Amount
<hr/>							
20405500 513000 Park Fac-Medicare				1100	MEDICARE		\$20.76
						\$0.00	\$20.76
					Total	\$0.00	\$20.76
					Account Total	\$0.00	\$20.76
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21100000 511105 NRO-Salaries, FT Regular	5001 / 2001	MARIANNE GAIO					
			6485	105	SALARIES - FULL TIME		\$720.52
			6485	920	FRINGE BENEFIT	0.50	\$0.00
					Employee Total	\$24.99	\$720.52
	5001 / 2101	PHILLIP J GUTIERREZ					
			6496	105	SALARIES - FULL TIME		\$1,351.86
			6496	920	FRINGE BENEFIT	1.00	\$0.00
					Employee Total	\$49.99	\$1,351.86
					Account Total	\$74.98	\$2,072.38
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21100000 512000 NRO-FICA				1000	FICA		\$127.58
						\$0.00	\$127.58
					Total	\$0.00	\$127.58
					Account Total	\$0.00	\$127.58
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21100000 513000 NRO-Medicare				1100	MEDICARE		\$29.83
						\$0.00	\$29.83
					Total	\$0.00	\$29.83
					Account Total	\$0.00	\$29.83
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21100000 514000 NRO-INPRS-Civilian City				7000	INPRS - RETIREMENT		\$232.11

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Account	Loc # / Emp #	Name	Check #	Pay Type	Units	Tax Fringe	Exp Amount
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	\$762.58	\$41,906.29

City of West Lafayette

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PAYROLL VOUCHER REGISTER
Summary by Fund

Period
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Fund	Amount
Parks and Recreation	\$39,348.78
Parks Nonreverting Operating	\$3,307.36
GRAND TOTAL	\$42,656.14