

Allowance Docket
For check dates 01/15/2023 - 01/28/2023
Selected Departments - Sewer
Ordered by Employee Name

Pay Period	Employee Ending Number	Employee Name	Distribution Name	All Paytypes Except Overtime	Overtime Only
02/28/2023	100	Coomer, Donna S.	Clerk-treas Sal	\$3775.25	\$0.00
02/28/2023	100	Coomer, Donna S.	Sewer Sal	\$1413.76	\$0.00
01/31/2023	100	Coomer, Donna S.	Sewer Sal	\$450.00	\$0.00
01/15/2023	898	Crawford, Timothy L.	Sewer Sal	\$1958.65	\$0.00
01/22/2023	898	Crawford, Timothy L.	Sewer Sal	\$1958.65	\$0.00
01/15/2023	897	Eurton, Seth M.	Sewer Sal	\$987.20	\$0.00
01/22/2023	897	Eurton, Seth M.	Sewer Sal	\$1037.20	\$0.00
01/22/2023	897	Eurton, Seth M.	Sewer Sal OT	\$0.00	\$592.16
01/15/2023	328	Gomez, Dorothea	Sanit Salaries	\$434.40	\$0.00
01/15/2023	328	Gomez, Dorothea	Sewer Sal	\$434.40	\$0.00
01/22/2023	328	Gomez, Dorothea	Sanit OT	\$0.00	\$8.15
01/22/2023	328	Gomez, Dorothea	Sanit Salaries	\$434.40	\$0.00
01/22/2023	328	Gomez, Dorothea	Sewer Sal	\$434.40	\$0.00
01/22/2023	328	Gomez, Dorothea	Sewer Sal OT	\$0.00	\$8.15
01/31/2023	886	Grimes, Nathan R.	Sewer Sal	\$450.00	\$0.00
02/28/2023	849	Hodges, Treva E.	Mayor's Salary	\$4189.50	\$0.00
02/28/2023	849	Hodges, Treva E.	Sewer Sal	\$1363.59	\$0.00
01/31/2023	887	Hodskins, James R.	Sewer Sal	\$450.00	\$0.00
01/15/2023	913	Perez, Angelica	Sanit Salaries	\$434.40	\$0.00
01/15/2023	913	Perez, Angelica	Sewer Sal	\$434.40	\$0.00
01/22/2023	913	Perez, Angelica	Sanit Salaries	\$260.64	\$0.00
01/22/2023	913	Perez, Angelica	Sewer Sal	\$260.64	\$0.00
01/15/2023	258	Schrimp, Heather N	Deputy Clerk-treas	\$1061.60	\$0.00
01/22/2023	258	Schrimp, Heather N	Deputy Clerk-treas	\$611.60	\$0.00
01/22/2023	258	Schrimp, Heather N	Sewer Sal	\$450.00	\$0.00
01/15/2023	906	Winslow, Joshua G.	Sewer Sal	\$1037.20	\$0.00
01/15/2023	906	Winslow, Joshua G.	Sewer Sal OT	\$0.00	\$296.08
01/22/2023	906	Winslow, Joshua G.	Sewer Sal	\$987.20	\$0.00
01/22/2023	906	Winslow, Joshua G.	Sewer Sal OT	\$0.00	\$185.05
01/31/2023	850	Works, Jenny L.	Sewer Sal	\$75.00	\$0.00

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Pay Period	Employee Ending Number	Employee Name	Distribution Name	All Paytypes Except Overtime	Overtime Only
Total				\$25384.08	\$1089.59

I hereby certify that each of the above listed vouchers and the invoices or bills attached there to, are true and correct and I have audited same in accordance with IC5-11-10-1-6.

_____ Date

_____ Fiscal Officer

Allowance Of Accounts Payable Vouchers
 City Of Charlestown

We have examined the Accounts Payable Vouchers listed on the foregoing Register of Accounts Payable Vouchers consisting of _____ pages and except for accounts payables not allowed as shown on the Register such accounts payables are hereby allowed in the total amount of \$_____

Dated this _____ day of _____

Signatures of Governing Board