SPECIAL SERVICES OF MARION COUNTY GOVERNING BOARD MEETING November 5, 2019 REGULAR MEETING RISE LEARNING CENTER ELLIS COMMUNITY ROOM – 2:00 P.M.

This is a meeting of the Governing Board in public for the purpose of conducting the business of Southside Special Services of Marion County (SSSMC) and is not to be considered a public community meeting. There will be time for public participation as indicated on the agenda.

1.0	Opening Items 1.1 Call to Order 1.2 Board Members Dr. Paul Kaiser, President Mr. Patrick Mapes, Vice President Dr. Matt Prusiecki, Secretary	Dr. Paul Kaiser
2.0	Recognitions Linda Dreibelbis	Dr. Scott Carson
3.0	 Consent Agenda 3.1 Minutes of August 16, 2019 Regular Meeting 3.2 Personnel Report New Hires Resignations/Retirements Transfers/Changes FMLA/Leaves Employment Contracts 3.3 Professional Leave Requests 3.4 Claims and Payroll Docket 	Dr. Scott Carson
4.0	Public/Patron Comments - Time limited with sign-up sheet	
5.0	Items Requiring Action 5.1 School Fee Invoice Revision 5.2 Ratification of Teacher Contract	Dr. Scott Carson
6.0	Items For Information/Discussion 6.1 Financial Report 6.2 RLC District Counts	Dr. Scott Carson Andrew Carlton
7.0	Other Business 7.1	Dr. Scott Carson

The Board's meeting site is fully accessible to all persons. Any person requiring further accommodation should contact Teresa Ruark in the SSSMC's administration office at 317-789-1622.

Next Meeting: January 17, 2020 @ 2:30 p.m.



Franklin Township Community School Corporation

MSD of Perry Township

Beech Grove City Schools

MSD of Decatur Township

SOUTHSIDE SPECIAL SERVICES OF MARION COUNTY REGULAR GOVERNING BOARD MEETING November 5, 2019 MINUTES

RISE LEARNING CENTER ELLIS COMMUNITY ROOM

1. OPENING ITEMS

- 1.10 Dr. Kaiser called the meeting to order at 2:32 pm.
- 1.20 Governing Board Members Present:

Dr. Paul Kaiser, President Dana Dehart for Mr. Patrick Mapes, Perry Township Schools Stephanie Hofer, for Dr. Prusiecki, Secretary

Administrators Present: Dr. Scott Carson, Executive Director Mr. Andy Carlton, Treasurer

2. RECOGNITION AND/OR SUCCESSES

Nicole Cahill -Teacher of the Year Tami Coats - Support Staff of the year

3. CONSENT AGENDA

- 3.10 Minutes of the June August 26th 2019 Regular Board Meeting
- 3.20 Personnel Report

New Hires

Resignations/Retirements

Transfers/Changes

FMLA/Leaves

Employment Contracts

- 3.30 Professional Leave Request
- 3.40 Claims and Payroll Docket total

Stephanie Hofer moved to approve all items from 3.1 through 3.4 Dana Dehart seconded the motion

4.	Pι	JBL	_IC/F	P.	TRO	N	COMMENTS
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None

5. ITEMS REQUIRING ACTI	101	T	3	AC	G	N	IR	U	Q	RE	EMS	IT	5.
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- Student Handbook (Page 9) 5.10
- **Bradford Woods** 5.20
- \$7,500 Donation 5.30
- Obsolete Items 5.40

Stephanie Hofer moved to approve all items from 5.10-5.40 Dana Dehart seconded the motion Items 5.10-5.40 Approved 3-0

6. ITEMS FOR INFORMATION/DISCUSSION

- 6.10 Financial Report
- 6.20 RLC District Counts
- 6.30 Change in November meeting date to meet IEERB requirement

7.0 OTHER BUSINESS

None

Adjournment 4 6 1

There being no further business, Dr. Kaiser made a motion to adjourn the meeting. Dana Dehart seconded and the meeting was adjourned at 2:45 p.m.

Next Regular meeting is scheduled for January 17, 2019 @ 2:00 pm signatures below certify approval of or rejection of the Board meeting minutes. The Board's

(AYE)

(NAY)



Perry Township Schools * Beech Grove City Schools * MSD of Decatur Township

BOARD MEETING NOVEMBER 5, 2019 PERSONNEL REPORT FOR AUGUST -OCTOBER 2019

CERTIFIED STAFF

RECOMMENDATION:

Position: Teacher for Behavior Ed Name: Corey Londeree

Program

Salary: \$47,500 (B-8 183 contract days)

Effective: October 15, 2019 Position: Teacher for Life Skills Name: Stephanie Putt

Program Salary: \$43,500 (M-0 183 contract days)

RESIGNATION:

Effective: August 30, 2019 Position: Teacher for Life Skills Name: Sara Bennett

TERMINATION:

Effective: September 13, 2019 Position: Teacher for Behavior Ed Name: Regina Holloman

Program

MEDICAL LEAVE:

Effective: November 21, 2019 Position: Teacher for Life Skills Name: Shawna Basham

Tentative date (6 weeks)

Effective: September 11, 2019

QUALIFIED PERSONNEL OT/PT

RECOMMENDATION:

Effective: August 26, 2019 Position: RLC Occupational Therapist Name: Molly Schumacher

Hourly Rate: \$50.00 (M-0 20 hours per week- 183 work days)

PROFESSIONAL DEVELOPMENT

September 16, 2019 Teach Town Encore Name: Allison Compton September 16, 2019 Teach Town Encore Name: Ashley Dilk August 22, 2019 Autism Leaders Round Table Name: Jordan DeAmicis September 9 10, 2019 **PECS** Name: Jordan DeAmicis September 18 19, 2019 **TEACH Training** Name: Jordan DeAmicis November 4 5, 2019 In Shape Health & PE Conference Name: Todd Krebs October 7, 2019 **MOVE Training** Name: Monica May September 9 10, 2019 **PECS** Name: Ann Anthony Open E Training-Lock Out-Tag Out Name: Jayson Coner October 7, 2019 MOVE Training Name: Molly Schumacher



Perry Township Schools * Beech Grove City Schools * MSD of Decatur Township

BOARD MEETING NOVEMBER 5, 2019 PERSONNEL REPORT FOR AUGUST -OCTOBER 2019

PROFESSIONAL DEVELOPMENT

Name: John Walker Name: John Walker E Training-Lock Out-Tag Out E Training Scissor Lift Safety

Open Open

Name: Cameron Watkins

E Training-Lock Out- Tag Out

Open

SUPPORT STAFF

RECOMMENDATION:

Position: RLC Instructional Assistant Name: Isaiah Doss

Effective: October 28, 2019

Hourly Rate: \$13.50 (6.25 hrs per day 182 work days)

Position: RLC Instructional Assistant Name: Matthew Gibbons

Effective: September 25, 2019

Hourly Rate: \$13.50 (6.25 hrs.per day 182 work days)

Position: RLC Instructional Assistant Name: John May

Effective: August 23, 2019

Hourly Rate: \$14.00 (6.25 hrs. per day 182 work days) (6 years' experience)

Name: Andrea Napier

Position: RLC Office Clerk

Effective: September 30, 2019

Hourly Rate: \$14.00 (7 hours per day 190 work days)

RESIGNATION:

Name: Ryan Walke

Position: RLC Office Clerk Name: April Bryant Position: RLC Instructional Assistant Name: Thelicia Coleman Position: RLC Instructional Assistant Name: Sabrina Herthel Position: RLC Instructional Assistant Name: Dayna Stephens Position: RLC Physical Ed Assistant

Effective: October 4, 2019 Effective: November 1, 2019 Effective: August 6, 2019 Effective: October 4, 2019 Effective: September 20, 2019

TRANSFER IN POSITION: Name: Jayson Coner transfer from 195 days custodian to a 260 days custodian. Retro back to Jayson's

date of hire on August 5, 2019

Pamela Johnson

Human Resources Manager

ALLOWANCE OF CLAIMS

I HEREBY CERTIFY THAT EACH OF THE ABOVE LISTED CLAIMS AND THE INVOICES, OR BILLS ATTACHED THERETO,			
ARE TRUE AND CORRECT AND I HAVE AUDITED SAME IN ACCORDANCE WITH IC 5-11-10-1.6. November 5 , 2019 Payroll Claims for DR. SCOTT CARSON August, September and October 2019 EXECUTIVE DIRECTOR			
WE HAVE EXAMINED THE CLAIMS ON THE FOREGOING REGISTER OF CLAIMS, CONSISTING OF 18 PAGES, AND			
EXCEPT FOR CLAIMS NOT ALLOWED AS SHOWN ON THE REGISTER SUCH CLAIMS ARE HEREBY ALLOWED IN THE			
TOTAL AMOUNT OF \$ 547,59Q.35 DATED THIS 5th DAY OF November , 2019			
APPROVED BY THE STATE BOARD OF ACCOUNTS JULY 2011 FOR: SOUTHSIDE SPECIAL SERVICES OF MARION COUNTY			
Bal Allen			
DR. PAUL KAISER PRESIDENT MA O D A TOPO TOPO TO THE PROPERTY OF THE PROPERTY			A CONTRACTOR
MR. PATRICK MAYES VICE PRESIDENT			
VICE THE STATE OF		189,098	
DR. MANTINEN PROSPECKI		160:428	
an an amany	003		
		547,590	* 35*
MEMBER			0 * *

8/01/19 8:57:14

PAYROLL CLAIM DETAIL LISTING

8:57:14					
CHECK #	CHECK DATE	EMP #		AMOUNT	
24312	8/05/19	755.00	SHANNON M ADKINS	663.54	
24313	8/05/19	76.00	BRIAN LAMONT ANDERSON	853.13	
24313	8/05/19	151.00	ANNE R ANTHONY	1,350.47	
	8/05/19	243.00	KIERSTEN ARMBRUSTER	616.15	
24315	8/05/19	254.00	KACI M ARWOOD	69.00	
24316		200.00	YESENIA AVILA-GENTRY	1,845.37	
24317	8/05/19	136.00	SARA R BENNETT	2,012.04	
24318	8/05/19	569.00	TINA MARIE BESSENBACH	1,518.29	
24319	8/05/19	205.00	CHERARD T BOYD	736.54	
24320	8/05/19	163.00	APRIL L BRYANT	1,256.08	
24321	8/05/19		LAUREN L BURGESS	616.15	
24322	8/05/19	221.00	NICOLE I CAHILL	2,372.37	
24323	8/05/19	154.00	WILLIAM ANDREW CARLTON	2,899.00	
24324	8/05/19	118.00	RACHAL LOUISE CARRASQUILLO	852.68	
24325		10513.00	SCOTT D CARSON	5,295.17	
24326	8/05/19	2658.00	TERISA LYNN COFFIN	729.90	the state of
24327	8/05/19	1364.00		685.15	
24328	8/05/19	241.00	THELICIA M COLEMAN	2,111.37	
24329	8/05/19	7538.00	ALLISON BROOKE COMPTON	150.00	
1396	8/05/19	264.00	AMANDA M CRABB	69.00	
24330	8/05/19	257.00	JONAS S CRAYTON	1,951.79	0.**
24331	8/05/19	4500.00	ASHLEY N DILK	761.18	
24332	8/05/19	2059.00	CHERYL ANN DOTY	3,446.88	
24333	8/05/19	6014.00	LINDA KAY DREIBELBIS	663.54	
24334	8/05/19	95.00	SHANISE L ELKINS	4 5 673 1 1	- 불교학교육 : 조금도 발표 발표(BE) **
24335	8/05/19	561.00	KRISTIAN NICOLE HERTHEL-FRYE	2,986.50	
24336	8/05/19	51.00	PAMELA JOHNSON	1,981.67	
24337	8/05/19	169.01	JOSEPH R KEMP	70.00	
24338	8/05/19	260.00	ANTWAN L KENNEDY	2,932.97	
24339	8/05/19	4304.00	TODD ANTHONY KREBS	687.00	
24340	8/05/19	248.01	JEREMY W LEE	2,665.01	90 • 435 • 16+
24341	8/05/19	6064.00	MONICA KAYE MAY	663.54	69,993-45+
24342	8/05/19	1100.00	CHRISTINE G MUNCIE	1,495.32	002
24343	8/05/19	255.00	LESLIE R NATION	2,659.43	
24344	8/05/19	9321.00	RENEE MICHELLE POSEY	812.14	160 428 61 *
24345	8/05/19	538.00	KRISTIAN E RONEY	75.00	
24346	8/05/19	171.00	HANNAH E ROTHKOPF	1,865.28	
24347	8/05/19	537.00	MADELINE DIANE RUARK	1,480.00	
24348	8/05/19		TERESA SUSAN RUARK	703.83	
24349	8/05/19		NANCY ANN RUST	819.95	
24350	8/05/19		CATHERINE ANN SALYER	695.49	
24351	8/05/19		ROBIN D SETSER	857.22	
24352	8/05/19		DIANA JEAN SETSER KUMAR	150.00	
1397	8/05/19		SAMANTHA K SILVER	3,114.43	
24353	8/05/19	45.00	JENNIFER L SLAUGHTER	627.99	
24354	8/05/19		KORTNEY M SMITH	827.31	
24355	8/05/19		LAURA M SMITH	761.18	
24363			TERRI L SMITH	67.50	
1398		130.00	AMANDA L SPARKS	651.69	
24356			BRITTNEY S TAYLOR	69.00	
24357					
24358			RYAN MATTHEW WALKE	1,140.39	
2.300					

8/01/19 8:57:14 PAYROLL CLAIM DETAIL LISTING

8:31:14					
CHECK #	CHECK DATE	EMP #		AMOUNT	
24359 24360 24361 24362	8/05/19 8/05/19 8/05/19 8/05/19	215.00 7825.00 228.00 544.00	JOHN D WALKER KAREN SUE WALLICK CAMERON M WATKINS DENISE M WHITTEMORE	2,178.16 761.18 1,095.75 6.63	

8/01/19 8:57:14

PAYROLL CLAIM LISTING

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PERIOD ENDING 7/19/19

CHECK DATE 8/05/19

		LEKTOD BUDING 11	13/113				
FEDERAL	OASDI	MEDICARE	STATE	LOCAL	VOL DED	ANNUITIES	
5,752.54	4,179.63	977.52	2,226.82	1,153.66	7,773.40	1,328.33	
RETIREMENT	CORP PAID RETIREMENT						
743.93	1,315.43						

---GROSS BREAKDOWN BY FUND----

FUND

0101 GENERAL	59,670.04
0300 GENERAL	10,207.91
9000 LIFE FRINGE BENEFIT	115.50
TOTAL	69,993.45

8/14/19 1:49:54

PAYROLL CLAIM DETAIL LISTING

1:49:54					11.00
11.1510.				TAILOILA C	
CHECK #	CHECK DATE	EMP #		AMOUNT	
 				663.54	
24364	8/20/19	755.00	SHANNON M ADKINS	75.00	
24365	8/20/19	245.00	KATHERINE L AKERS	839.44	
24366	8/20/19	76.00	BRIAN LAMONT ANDERSON	1,307.29	
24367	8/20/19	151.00	ANNE R ANTHONY	1,544.18	
24368	8/20/19	243.00	KIERSTEN ARMBRUSTER	1,845.42	
24369	8/20/19	200.00	YESENIA AVILA-GENTRY		
24370	8/20/19	78.00	SHAWNA LYNN BASHAM	1,700.00	
24371	8/20/19	136.00	SARA R BENNETT	2,012.08	
24372	8/20/19	569.00	TINA MARIE BESSENBACH	1,518.29	
24373	8/20/19	205.00	CHERARD T BOYD	652.59	
24374	8/20/19	163.00	APRIL L BRYANT	2,056.66	
24375	8/20/19	221.00	LAUREN L BURGESS	612.70	
24376	8/20/19	154.00	NICOLE I CAHILL	2,499.96	
24377	8/20/19	118.00	WILLIAM ANDREW CARLTON	2,899.00	
24378		10513.00	RACHAL LOUISE CARRASQUILLO	770.48	
24379	8/20/19	2658.00	SCOTT D CARSON	5,295.17	
24379	8/20/19	1.00	TAMI LYNN COATS	1,490.66	
24381	8/20/19	1364.00	TERISA LYNN COFFIN	729.90	
24382	8/20/19	241.00	THELICIA M COLEMAN	616.05	
24383	8/20/19	91.00	PATRICIA LOUISE COLLIER	1,003.75	
24383	8/20/19	7538.00	ALLISON BROOKE COMPTON	2,111.42	
24385	8/20/19	1455.00	JAYSON LEE CONER	115.50	
24365 24386	8/20/19	264.00	AMANDA M CRABB	2,023.17	
24300 24387	8/20/19	257.00	JONAS S CRAYTON	948.75	
	8/20/19	553.00	CHAD A DAVIS	1,003.75	
24388	8/20/19	4500.00	ASHLEY N DILK	1,951.83	
24389	8/20/19	2059.00	CHERYL ANN DOTY	761.11	
24390	8/20/19	6014.00	LINDA KAY DREIBELBIS	3,885.33	
24391		95.00	SHANISE L ELKINS	663.58	
24392	8/20/19		SHAUGHN D ELMORE	928,13	
24393	8/20/19		REGINA B HOLLOMAN	2,840.00	
1399	8/20/19		PAMELA JOHNSON	2,986.50	
24394	8/20/19		JOSEPH R KEMP	1,856.59	
24395	8/20/19		ANTWAN L KENNEDY	763.00	
24396	8/20/19		TODD ANTHONY KREBS	2,932.94	
24397	8/20/19		JERENY W LEE	948.75	
24398	8/20/19		MONICA KAYE MAY	3,000.62	
24399	8/20/19		PAULA K MEGL	965.94	
24400	8/20/19			663.58	
24401	8/20/19			1,495.31	
24402	8/20/19			2,659.41	
24403	8/20/19			734.64	
24404	8/20/19			1,155.00	
24405	8/20/19		Drin Dri	1,740.28	
24406	8/20/19			1,645.00	
24407	8/20/19			874.79	
24408			TOTAL TANK OF THE	819,95	
24409			+ 	621.36	
24410			TALLITA TO THE TALL T	848.09	
24411			and the second party of th	1,680.00	
24412			- aramoumud	2,964.36	
24413	8/20/1	9 45.00) JENNIFER L SLAUGHTER	,	

8/14/19 1:49:54

PAYROLL CLAIM DETAIL LISTING

CHECK	# CHECK DATE	EMP #		AMOUNT
2441 2442 2441 2441 2441 2441 2442 2442	5 8/20/19 5 8/20/19 6 8/20/19 7 8/20/19 8 8/20/19 9 8/20/19 20 8/20/19 21 8/20/19 22 8/20/19 23 8/20/19	98.00 227.00 6897.00 246.00 189.00 7453.00 225.00 48.00 215.00 7825.00 228.00 544.00	KORTNEY M SMITH LAURA M SMITH TERRI L SMITH DAYNA STEPHENS BRITTNEY S TAYLOR EUGENE G THOMAS CHELSEA R WAGNER RYAN MATTHEW WALKE JOHN D WALKER KAREN SUE WALLICK CAMERON M WATKINS DENISE M WHITTEMORE	628.11 827.37 761.11 821.10 651.76 1,241.00 948.75 671.70 2,178.16 859.04 1,159.88 966.34

8/14/19 1:49:54

PAYROLL CLAIM LISTING

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PERIOD ENDING 8/05/19

CHECK DATE 8/20/19

FEDERAL	OASDI	MEDICARE	STATE	LOCAL	VOL DED	ANNUITIES	
6,953.71	5,368.07	1,255.47	2,843.88	1,532.78	9,628.33	1,328.33	
RETIREMENT	CORP PAID RETIREMENT						
1,121.46	1,573.28						

---GROSS BREAKDOWN BY FUND----

FUND

0101 GENERAL 80,595.12
0300 GENERAL 9,724.54
9000 LIFE FRINGE BENEFIT 115.50

TOTAL 90,435.16

9/03/19 12:33:47

PAYROLL CLAIM DETAIL LISTING

9/03/19		F 17 7 F			YAGE 1
12:33:47				AMOUNT	
CHECK #	CHECK DATE	EMP #		AMOUNT	
	0/05/10	76 00	BRIAN LAMONT ANDERSON	864.97	
24426	9/05/19		ANNE R ANTHONY	1,301.98	
24427	9/05/19		KIERSTEN ARMBRUSTER	928.13	
24428	9/05/19		KACI M ARWOOD	660.96	
24429	9/05/19		SHAWNA LYNN BASHAM	1,700.00	
24430	9/05/19		PHYMNY PINN DUONUM	2,012.04	
24431	9/05/19		SARA R BENNETT	1,518.29	
24432	9/05/19	4	TINA MARIE BESSENBACH	691.98	
24433	9/05/19	205.00	CHERARD T BOYD	1,208.90	
24434	9/05/19	163.00	APRIL L BRYANT	654.06	
24435	9/05/19	221.00	LAUREN L BURGESS	2,222.37	
24436		154.00	NICOLE I CAHILL	2,899.00	
24437		118.00	WILLIAM ANDREW CARLTON	798.53	
24438		10513.00	RACHAL LOUISE CARRASQUILLO	5,295.17	and the second s
24439		2658.00	SCOTT D CARSON	1,382.06	
2444(1.00	TAMI LYNN COATS	748.85	
2444		1364.00	TERISA LYNN COFFIN	660.96	
2444	-	241.00	THELICIA M COLEMAN		
2444		91.00	PATRICIA LOUISE COLLIER	1,003.75	
2444		7538.00	ALLISON BROOKE COMPTON	2,396.87	
		1455.00	JAYSON LEE CONER	910.00	93,144-06
2444		264.00	AMANDA M CRABB	1,780.00	
2444			JONAS S CRAYTON	948.75	104,919,60
2444			CHAD A DAVIS	1,000.10	0.02
2444			JORDAN R DEAMICIS	1,614.41	198,063-66
140			ASHLEY N DILK	1,951.79	
244			CHERYL ANN DOTY	773.03	
244			LINDA KAY DREIBELBIS	3,446.88	0.4
244			SHANISE L ELKINS	691.98	
244			SHAUGHN D ELMORE	928.13	
244			SABRINA N HERTHEL	948.75	
244			HEATHER M HICKS	170.00	
244			REGINA B HOLLOMAN	2,845.16	
14	01 9/05/1		PAMELA JOHNSON	2,986.50	
244	56 9/05/1		SAMETH ACHASOM	1,856.67	
244	157 9/05/1		JOSEPH R KEMP	948.50	
244	158 9/05/1		ANTWAN L KENNEDY	654.06	
24	159 9/05/1		KELSEY L KNAPP	2,932.97	
24	460 9/05/1		TODD ANTHONY KREBS	955.65	
24	461 9/05/1		JEREMY W LEE	639.84	
24	462 9/05/1		HERSCHEL R LILE	2,665.01	
	463 9/05/3		MONICA KAYE MAY	965.94	
	464 9/05/3		PAULA K MEGL	691.98	
	465 9/05/	19 1100.00	CHRISTINE G MUNCIE	663.98	
	466 9/05/	19 268.00	BLAIR R NATION	1,750.00	
	467 9/05/	19 255.00		170.00	
	468 9/05/		DANIELLE N OLNICK	2,659.43	
	1469 9/05/		RENEE MICHELLE POSEY	730.76	
	1470 9/05/		KRISTIAN E RONEY	1,143.75	
	4470 9/05/ 4471 9/05/		HANNAH E ROTHKOPF		
	4471 3/03/ 4472 9/05/		MADELINE DIANE RUARK	1,715.28	
			MUNITED ASSESSMENT OF THE PARTY	1,832.50	
	4473 9/05/ 4474 9/05/		priom	732.27	

9/03/19 12:33:47

PAYROLL CLAIM DETAIL LISTING

12.33.37				
CHECK #	CHECK DATE	EMP #		AMOUNT
24475 24476 24477 24478 24479 24480 24481 24482 24483 24484 24485 24486 24486 24487 24488 24489 24490 24491 24492	9/05/19 9/05/19 9/05/19 9/05/19 9/05/19 9/05/19 9/05/19 9/05/19 9/05/19 9/05/19 9/05/19 9/05/19 9/05/19 9/05/19	6489.00 208.00 6664.00 256.00 263.00 45.00 98.00 227.00 130.00 246.00 189.00 7453.00 225.00 48.00 215.00 7825.00 228.00 544.00	CATHERINE ANN SALYER ROBIN D SETSER DIANA JEAN SETSER KUMAR BRITTANY L SHADDAY SAMANTHA K SILVER JENNIFER L SLAUGHTER KORTNEY M SMITH LAURA M SMITH AMANDA L SPARKS DAYNA STEPHENS BRITTNEY S TAYLOR EUGENE G THOMAS CHELSEA R WAGNER RYAN MATTHEW WALKE JOHN D WALKER KAREN SUE WALLICK CAMERON M WATKINS DENISE M WHITTEMORE	831.80 636.46 864.97 643.22 1,680.00 2,964.43 639.84 827.31 653.34 945.30 689.61 1,254.69 959.10 703.83 2,178.16 883.12 1,170.00 965.94

9/03/19 12:33:47

PAYROLL CLAIM LISTING

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		PERIOD ENDING	8/20/19	CHECK DATE 9/05/	19		
FEDERAL	OASDI	MEDICARE_	STATE	LOCAL	VOT DED	ANNUITIES	
7,321.56	5,510.28	1,288.72	2,914.49	1,560.96	10,364.02	1,476.33	
RETIREMENT	CORP PAID RETIREMENT						
1,237.56	1,542.96						

---GROSS BREAKDOWN BY FUND----

FUND

0101 GENERAL	82,914.24
0300 GENERAL	10,109.16
9000 LIFE FRINGE BENEFIT	120.66
TOTAL	93,144.06

9/18/19 12:01:12

PAYROLL CLAIM DETAIL LISTING

12:01:12			·		trion
12:01:12					
	OHEON DAME	EMP #		AMOUNT	
 CHECK #	CHECK DATE	EMP #			
			THE TAKE T AMEDO	255.00	
24493	9/20/19	245.00	KATHERINE L AKERS	864.97	
24494	9/20/19	76.00	BRIAN LAMONT ANDERSON	1,307.37	
24495	9/20/19	151.00	ANNE R ANTHONY		
24496	9/20/19	243.00	KIERSTEN ARMBRUSTER	928.13	
	9/20/19	254.00	KACI M ARWOOD	654.06	
24497		78.00	SHAWNA LYNN BASHAM	1,700.00	
24498	9/20/19		SARA R BENNETT	5,494.35	
24499	9/20/19	136.00		1,518.29	
24500	9/20/19	569.00	TINA MARIE BESSENBACH	688.33	
24501	9/20/19	205.00	CHERARD T BOYD	1,208.90	
24502	9/20/19	163,00	APRIL L BRYANT	660.96	
24503	9/20/19	221.00	LAUREN L BURGESS		
24504	9/20/19	154.00	NICOLE I CAHILL	2,222.37	
	9/20/19	118.00	WILLIAM ANDREW CARLTON	2,899.00	
24505		10513.00	RACHAL LOUISE CARRASQUILLO	798.53	
24506	-,		SCOTT D CARSON	5,295.17	
24507	9/20/19	2658.00		1,592.66	
24508	9/20/19	1.00	TAMI LYNN COATS	748.85	
24509	9/20/19	1364.00	TERISA LYNN COFFIN	654.06	
24510	9/20/19	241.00	THELICIA M COLEMAN	1,003.75	
24511	9/20/19	91.00	PATRICIA LOUISE COLLIER		
	9/20/19	7538.00	ALLISON BROOKE COMPTON	2,396.87	
24512		1455.00	JAYSON LEE CONER	910.00	
24513	9/20/19		AMANDA M CRABB	1,780.00	
24514	9/20/19	264.00	JONAS S CRAYTON	948.75	
24515	9/20/19	257.00		1,003.75	
24516	9/20/19	553.00	CHAD A DAVIS	1,614.41	
24517	9/20/19	266.00	JORDAN R DEAMICIS	1,951.79	
24518	9/20/19	4500.00	ASHLEY N DILK	773.03	
24519	9/20/19	2059.00	CHERYL ANN DOTY		
24520	9/20/19	6014.00	LINDA KAY DREIBELBIS	3,446.88	
	9/20/19	566.01	KARLI M DUBOIS	85.00	
24521			SHANISE L ELKINS	691.98	
24522	9/20/19		SHAUGHN D ELMORE	921.38	
24523	9/20/19		SUMORUM D ETHOME	340.00	
1402	9/20/19		MATTHEW A GIBBONS	1,035.00	
24524	9/20/19	251.00	SABRINA N HERTHEL	8,779.83	
24525	9/20/19	267.00	REGINA B HOLLOMAN	2,986.50	
24526	9/20/19		PAMELA JOHNSON		
24527	9/20/19		JOSEPH R KEMP	1,856.67	
	9/20/19		ANTWAN L KENNEDY	959.00	
24528			KELSEY L KNAPP	647.16	
24529	9/20/19		TODD ANTHONY KREBS	2,932.97	
24530	9/20/19			948.75	
24531	9/20/19		JEREMY W LEE	639.84	
24532	9/20/19	3 262.00	HERSCHEL R LILE	2,665.01	
24533	9/20/19	9 6064.00	MONICA KAYE MAY	965.94	
24534	9/20/19		PAULA K MEGL	691.98	
	9/20/1	-			
24535				566.10	
24536				1,750.00	
24537	9/20/1			255.00	
24538			WILLIAM TO DOUBLE	2,659.43	
24539	9/20/1			734.64	
24540		.9 538.00) KRISTIAN E RONEY	1,155.00	
24541) HANNAH E ROTHKOPF	1,715.28	
24542			O MADELINE DIANE RUARK	1,110,20	
2772	, ,,,,,,,,				

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PAYROLL CLAIM DETAIL LISTING

CHECK #	CHECK DATE	EMP #		AMOUNT
24543 24544 24545 24546 24547 24548 24549 24550 24551 24552 24553 24554 24555 24556 24557 24566 2457 24560 24561 24561 24562	9/20/19 9/20/19 9/20/19 9/20/19 9/20/19 9/20/19 9/20/19 9/20/19 9/20/19 9/20/19 9/20/19 9/20/19 9/20/19 9/20/19 9/20/19 9/20/19 9/20/19 9/20/19 9/20/19	6417.00 6409.00 6489.00 269.00 208.00 6664.00 256.00 263.00 45.00 98.00 227.00 130.00 246.00 189.00 7453.00 225.00 48.00 215.00 7825.00 228.00 544.00	TERESA SUSAN RUARK NANCY ANN RUST CATHERINE ANN SALYER MOLLY A SCHUMACKER ROBIN D SETSER DIANA JEAN SETSER KUMAR BRITTANY L SHADDAY SAMANTHA K SILVER JENNIFER L SLAUGHTER KORTNEY M SMITH LAURA M SMITH AMANDA L SPARKS DAYNA STEPHENS BRITTNEY S TAYLOR EUGENE G THOMAS CHELSEA R WAGNER RYAN MATTHEW WALKE JOHN D WALKER KAREN SUE WALLICK CAMERON M WATKINS DENISE M WHITTEMORE	1,802.50 732.27 831.80 1,694.02 636.46 864.97 639.84 1,680.00 2,964.43 639.84 827.31 653.34 948.75 696.89 1,254.69 962.55 700.12 2,178.16 773.03 1,170.00 965.94

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PAYROLL CLAIM LISTING

PR054

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PERIOD ENDING 9/05/19

CHECK DATE 9/20/19

			00, 13	LEKTON PROTIGE 2		
 ANNUITIES	VOL DED	LOCAL	STATE	MEDICARE	OASDI	FEDERAL
1,328.33	9,943.10	1,775.21	3,301.14	1,461.50	6,249.12	9,797.24
					CORP PAID RETIREMENT	RETIREMENT
					1,777.19	1,239.65

---GROSS BREAKDOWN BY FUND----

FUND

0101 GENERAL	93,000.92
0300 GENERAL	10,109.16
5218 PART B (611) FY2018	1,694.02
9000 LIFE FRINGE BENEFIT	115.50
TOTAL	104,919.60

10/02/19

PAYROLL CLAIM DETAIL LISTING

10/02/19		E W 1			PAGE I
1:11:06		mum H		AMOUNT	
CHECK #	CHECK DATE	EMP #			
24564	10/04/19	245.00	KATHERINE L AKERS	425.00	
24565	10/04/19	76.00	BRIAN LAMONT ANDERSON	860.41	
24565 24566	10/04/19	151.00	ANNE R ANTHONY	1,307.37	
	10/04/19	243.00	KIERSTEN ARMBRUSTER	928.13	
24567	10/04/19	254.00	KACI M ARWOOD	654.06	
24568		78.00	SHAWNA LYNN BASHAM	1,700.00	
24569	10/04/19	569.00	TINA MARIE BESSENBACH	1,518.29	
24570	10/04/19	205.00	CHERARD T BOYD	681.03	
24571	10/04/19		APRIL L BRYANT	1,208.90	
24572	10/04/19	163.00	LAUREN L BURGESS	654.06	
24573	10/04/19	221.00	NICOLE I CAHILL	2,222.37	
24574	10/04/19	154.00	WILLIAM ANDREW CARLTON	2,899.00	
24575	10/04/19	118.00	RACHAL LOUISE CARRASQUILLO	798.53	
24576	10/04/19	10513.00		5,295.17	
24577	10/04/19	2658.00	SCOTT D CARSON	1,487.36	
24578	10/04/19	1.00	TAMI LYNN COATS	748.85	
24579	10/04/19	1364.00	TERISA LYNN COFFIN	654.06	
24580	10/04/19	241.00	THELICIA M COLEMAN	1,003.75	96,456.24
24581	10/04/19	91.00	PATRICIA LOUISE COLLIER	2,396.87	
24582	10/04/19	7538.00	ALLISON BROOKE COMPTON	1,310.15	92 • 641 • 84
24583	10/04/19	1455.00	JAYSON LEE CONER	1,780.00	002
24584	10/04/19	264.00	AMANDA M CRABB	948.75	189,098-08
24585	10/04/19	257.00	JONAS S CRAYTON	1,003.75	
24586	10/04/19	553.00	CHAD A DAVIS	1,614.41	
24587	10/04/19	266.00	JORDAN R DEAMICIS	1,951.79	0
24588	10/04/19	4500.00	ASHLEY N DILK	773.03	
24589	10/04/19		CHERYL ANN DOTY	3,446.88	
24590	10/04/19		LINDA KAY DREIBELBIS	688.33	
24591	10/04/19		SHANISE L ELKINS	382.50	
1403	10/04/19		TRISHA ANN ELLIS	302.30 843.75	
24592	10/04/19		SHAUGHN D ELMORE	765.00	
24593	10/04/19		MATTHEW A GIBBONS		
24594	10/04/19		HEATHER M HICKS	85.00	
	10/04/19		PAMELA JOHNSON	2,986.50	
24595	10/04/19		JOSEPH R KEMP	1,856.67	
24596	10/04/15		ANTWAN L KENNEDY	955.50	
24597	10/04/1		KELSEY L KNAPP	643.71	
24598	10/04/1		TODD ANTHONY KREBS	2,932.97	
24599			JEREMY W LEE	955.65	
24600				639.84	
24601			- " 411577577	1,923.12	
24602			17 17	2,665.01	
24603				972.97	
24604			CARMOTE	691.98	
24605				558.85	
2460				1,750.00	
2460			AT 11T OU	340.00	
2460			WHEN THE PARTY	2,659.43	
2460				746.26	
2461			TOOMING TO SEE THE PROPERTY OF	1,151.25	
2461				1,715.28	
2461	2 10/04/ 3 10/04/		arrant DUADU	1,947.50	
2461					

10/02/19 1:11:06

PAYROLL CLAIM DETAIL LISTING

1:11:00				
CHECK #	CHECK DATE	EMP #		AMOUNT
24614 24615 24616 24617 24618 24619 24620 24621 24622 24623 24623 24624 24625 24626 24627 24628 24629 24630 24631 24632 24632	10/04/19 10/04/19 10/04/19 10/04/19 10/04/19 10/04/19 10/04/19 10/04/19 10/04/19 10/04/19 10/04/19 10/04/19 10/04/19 10/04/19 10/04/19 10/04/19 10/04/19 10/04/19	6409.00 6489.00 269.00 208.00 6664.00 256.00 263.00 45.00 98.00 227.00 130.00 246.00 189.00 7453.00 225.00 48.00 215.00 7825.00 228.00	NANCY ANN RUST CATHERINE ANN SALYER MOLLY A SCHUMACKER ROBIN D SETSER DIANA JEAN SETSER KUMAR BRITTANY L SHADDAY SAMANTHA K SILVER JENNIFER L SLAUGHTER KORTNEY M SMITH LAURA M SMITH AMANDA L SPARKS DAYNA STEPHENS BRITTNEY S TAYLOR EUGENE G THOMAS CHELSEA R WAGNER RYAN MATTHEW WALKE JOHN D WALKER KAREN SUE WALLICK CAMERON M WATKINS DENISE M WHITTEMORE	732.27 831.80 3,206.52 636.46 860.41 639.84 1,680.00 2,964.43 639.84 811.81 653.34 948.75 689.61 1,250.13 948.75 2,676.09 2,178.16 846.43 1,166.62 965.94

10/02/19 1:11:06

PAYROLL CLAIM LISTING

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PERIOD ENDING 9/20/19

CHECK DATE 10/04/19

FEDERAL	OASDI	MEDICARE	STATE	LOCAL	AOT DED	ANNUITIES	
7,572.63	5,754.03	1,345.69	3,040.64	1,591.08	9,277.66	1,328.33	
RETIREMENT	CORP PAID RETIREMENT		,				
1,279.02	1,406.66						

---GROSS BREAKDOWN BY FUND----

FUND

0101 GENERAL	82,628.29
0300 GENERAL	10,505.93
5218 PART B (611) FY2018	3,206.52
9000 LIFE FRINGE BENEFIT	115.50
TOTAL	96,456.24

10/10/19 8:22:08

PAYROLL CLAIM DETAIL LISTING

8:22:08					1,000 1
				AMOUNT	
 CHECK #	CHECK DATE	EMP #		THOUSE	
04604	10/10/10	76.00	BRIAN LAMONT ANDERSON	864.97	
24634	10/18/19	151.00	ANNE R ANTHONY	1,307.37	
24635	10/18/19	243.00	KIERSTEN ARMBRUSTER	843.75	
24636	10/18/19 10/18/19	254.00	KACI M ARWOOD	654.06	
24637	10/18/19	78.00	SHAWNA LYNN BASHAM	1,700.00	
24638	10/18/19	569.00	TINA MARIE BESSENBACH	1,518.29	
24639	10/18/19	205.00	CHERARD T BOYD	691.98	
24640	10/18/19	163.00	APRIL L BRYANT	1,099.00	
24641	10/18/19	221.00	LAUREN L BURGESS	654.06	
24642	10/18/19	154.00	NICOLE I CAHILL	2,222.37	
24643	10/18/19	118.00	WILLIAM ANDREW CARLTON	2,899.00	
24644	10/18/19	10513.00	RACHAL LOUISE CARRASQUILLO	782.03	
24645	10/18/19	2658.00	SCOTT D CARSON	5,295.17	
24646	10/18/19	1.00	TAMI LYNN COATS	1,447.88	
24647	10/18/19	1364.00	TERISA LYNN COFFIN	748.85	
24648	10/18/19	241.00	THELICIA M COLEMAN	654.06	
24649	10/18/19	91.00	PATRICIA LOUISE COLLIER	927.10	
24650	10/18/19	7538.00	ALLISON BROOKE COMPTON	2,571.87	
24651 24652	10/18/19	1455.00	JAYSON LEE CONER	1,310.15	
24652 24653	10/18/19	264.00	AMANDA M CRABB	1,780.00	
24653 24654	10/18/19	257.00	JONAS S CRAYTON	862.50	
24655 24655	10/18/19	553.00	CHAD A DAVIS	912.50	
24656 24656	10/18/19	266.00	JORDAN R DEAMICIS	1,789.41	
24657	10/18/19	4500.00	ASHLEY N DILK	1,951.79	
24658	10/18/19	2059.00	CHERYL ANN DOTY	773.03	
24659	10/18/19		LINDA KAY DREIBELBIS	3,446.88	
24660	10/18/19		KARLI M DUBOIS	85.00	
24661	10/18/19		SHANISE L ELKINS	713.88	
24662	10/18/19		TRISHA ANN ELLIS	680.00	
24663	10/18/19		SHAUGHN D ELMORE	506.25	
24664	10/18/19		MATTHEW A GIBBONS	938.25	
24665	10/18/19		HEATHER M HICKS	170.00	
24666	10/18/19		PAMELA JOHNSON	2,986.50	
24667	10/18/19		JOSEPH R KEMP	1,856.67	
24668	10/18/19		ANTWAN L KENNEDY	857.50	
24669	10/18/19		KELSEY L KNAPP	654.06	
24670	10/18/19			2,932.97 862.50	
24671	10/18/19		JEREMY W LEE	639.84	
24672	10/18/1			1,923.12	
24673	10/18/1	9 270.00		823.50	
24674	10/18/1		JOHN C MAY	2,840.01	
24675	10/18/1	9 6064.00	MONICA KAYE MAY	857.05	
24676	10/18/1	9 207.00		691.98	
24677	10/18/1	9 1100.00		649.48	
24678	10/18/1	9 268.00		1,750.00	
24679	10/18/1	9 255.00		1,750.00 85.00	
24680	10/18/1	.9 216.00		2,659.43	
24681	10/18/1	9 9321.00		734.64	
24682	10/18/1			1,038.75	
24683	10/18/1			1,715.28	
24684	10/18/1	19 537.00	O MADELINE DIANE RUARK	1,710.20	

10/10/19 8:22:08

PAYROLL CLAIM DETAIL LISTING

8:22:08				
CUPCV #	CHECK DATE	EMP #		AMOUNT
24685 24686 24687 24688 24689 24690 24691 24692 24693 24694 24695 24696 24697 24698 24699 24700 24701 24702 24703	10/18/19 10/18/19	6417.00 6409.00 6489.00 269.00 208.00 6664.00 256.00 263.00 45.00 98.00 227.00 130.00 246.00 189.00 7453.00 225.00 215.00 7825.00 228.00 544.00	TERESA SUSAN RUARK NANCY ANN RUST CATHERINE ANN SALYER MOLLY A SCHUMACKER ROBIN D SETSER DIANA JEAN SETSER KUMAR BRITTANY L SHADDAY SAMANTHA K SILVER JENNIFER L SLAUGHTER KORTNEY M SMITH LAURA M SMITH AMANDA L SPARKS DAYNA STEPHENS BRITTNEY S TAYLOR EUGENE G THOMAS CHELSEA R WAGNER JOHN D WALKER KAREN SUE WALLICK CAMERON M WATKINS DENISE M WHITTEMORE	1,820.00 732.27 849.36 2,494.02 633.09 864.97 592.59 1,680.00 2,964.43 639.84 827.31 639.84 845.25 685.97 1,140.63 890.10 2,178.16 773.03 1,153.12 878.13

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PAYROLL CLAIM LISTING

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PERIOD ENDING 10/04/19

CHECK DATE 10/18/19

		I Britado Britania	•				
FEDERAL	OASDI	MEDICARE	STATE	LOCAL	VOL DED	ANNUITIES	
7,327.66	5,508.07	1,288.19	2,910.96	1,551.00	9,452.65	1,328.33	
RETIREMENT	CORP PAID RETIREMENT						
1,199.57	1,417.16						

---GROSS BREAKDOWN BY FUND----

FUND

0101 GENERAL	79,889.89
0300 GENERAL	10,492.43
5218 PART B (611) FY2018	2,144.02
9000 LIFE FRINGE BENEFIT	115.50
TOTAL	92,641.84

ALLOWANCE OF VOUCHERS

I HEREBY CERTIFY THAT EACH OF THE ABOVE LISTED VOUCHERS AND THE INVOICES, OR BILLS ATTACHED THERETO,
July 30th, 2019 DR. SCOTT CARSON EXECUTIVE DIRECTOR
WE HAVE EXAMINED THE VOUCHERS LISTED ON THE FOREGOING ACCOUNTS PAYABLE 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 \$ 1/8, 439.38 DATED THIS 30th DAY OF Yally 2019.
APPROVED BY THE STATE BOARD OF ACCOUNTS JULY 2011 FOR: SOUTHSIDE SPECIAL SERVICES OF MARION COUNTY
DR. PAUL KAISER PRESIDENT MR. PATRICK MAPES VICE PRESIDENT DR. MATTHEW PRUSIECKY SECRETARY
MEMBER

FOR THE PERIOD OF 7/16/19 - 7/30/19

	1011 1110 121120		
		VOUCHER	AMOUNT CHECK
DATE VOUCHER	NAME OF CLAIMANT	AMOUNT	ALLOWED NO. MEMORANDUM
FILED NO. FUND	MARIE OF CHAIRMI		
A CONTRACTOR OF THE COMMENT ACCO	TAC PAMPDDDISPS LLC	34.25	34.25 9529 BENEFITS WORKSHOP
8/16/19 9529 9280 FLEXIBLE SPENDING ACCO	FINANCIAL CENTER CREDIT UNION	770.81	770.81 9530 FINANCIAL CENTER HSA
8/16/19 9530 0101 GENERAL 8/16/19 9530 0300 GENERAL	FINANCIAL CENTER CREDIT UNION	249.99	249.99 9530 FINANCIAL CENTER HSA
	VOUCHER TOTAL	1,020.80	1,020.80
9530	ADMINISTRATIVE DATA MGT CORP	50.00	50.00 9531 ADMINISTRATIVE DATE MGT
8/16/19 9531 9283 403B FIRST INVESTORS	VIGO COUNTY CLERK	75.53	75.53 9532 VIGO CNTY GARNISHMENT
8/16/19 9532 9310 GARNISHMENTS	LIFE INSURANCE COMPANY OF	257.48	257.48 9533 CIGNA LTD INSURANCE
8/16/19 9533 0101 GENERAL	LIFE INSURANCE COMPANY OF	33.96	33.96 9533 CIGNA LTD INSURANCE
8/16/19 9533 0300 GENERAL	LIFE INSURANCE COMPANY OF	154.52	154.52 9533 CIGNA INSURANCE COMPANY
8/16/19 9533 9277 STD INSURANCE	VOUCHER TOTAL	445.96	445,96
9533	UNUM LIFE INSURANCE COMPANY	493.20	493.20 9534 UNUM LTC INSURANCE
9533 8/16/19 9534 0101 GENERAL	ONOM PIRE INSOMMOR CONDUM	153.60	153.60 9534 UNUM LTC INSURANCE
8/16/19 9534 0300 GENERAL	UNUM LIFE INSURANCE COMPANY VOUCHER TOTAL	646 80	646.80
9534	ACTOR DIBGRAGE CAPA	2 343 77	2,343.77 81093 JUNE 2019 P-CARD
8/16/19 81093 0101 GENERAL	REGIONS PURCHASE CARD	1 795 65	1,795.65 81093 JUNE 2019 P-CARD
8/16/19 81093 0300 GENERAL	REGIONS PURCHASE CARD	2,343.77 1,795.65 154.89	154.89 81093 JUNE 2019 P-CARD
9534 8/16/19 81093 0101 GENERAL 8/16/19 81093 0300 GENERAL 8/16/19 81093 9801 RLC P-CARD 81093	REGIONS PORCHASE CARD	4,294.31	4.794.31
81093	VOUCHER TOTAL	310.00	310.00 89168 CHILD SUPPORT PAYMENTS
8/16/19 89168 9320 CHILD SUPPORT MARION	C STATE CENTRAL COLLECTIONS UNIT	34,789.40	34 789.40 91101 SUNLIFE LIFE INSURANCE
8/16/19 91101 0101 GENERAL	HOOSIER SCHOOL BENEFIT INUST	4,607.13	4.607.13 91101 SUNLIFE LIFE INSURANCE
8/16/19 89168 9320 CHILD SUPPORT MARION 8/16/19 91101 0101 GENERAL 8/16/19 91101 0300 GENERAL 8/16/19 91101 9271 HH INSURANCE 8/16/19 91101 9272 DENTAL INSURANCE 8/16/19 91101 9273 VISION INSURANCE	HOOSIER SCHOOL BENEFIT IROSI	4,694.07	4,694.07 91101 MONTHLY HH PREMIUMS
8/16/19 91101 9271 HH INSURANCE	HOOSIER SCHOOL BENEFIT TRUST	408.04	408.04 91101 MONTHLY DTL PREMIUM
8/16/19 91101 9272 DENTAL INSURANCE	HOOSIER SCHOOL BENEFIT TRUST	146.68	146.68 91101 MONTHLY VISION PREMIUM
8/16/19 91101 9273 VISION INSURANCE	HOOSIER SCHOOL BENEFIT TRUST	127.90	127.90 91101 HOOSIER SCHOOL VOL LIFE
8/16/19 91101 9276 VOLUNTARY LIFE INSUR		44,773.22	44,773.22
91101	AOOCHER TOLL	2,419.32	2,419.32 92169 JULY 2019 PERF
8/16/19 92169 0101 GENERAL	INPRS	1,258.72	1,258.72 92169 JULY 2019 PERF
8/16/19 92169 0300 GENERAL	INPRS	679.86	679.86 92169 JULY 2019 PERF
8/16/19 92169 9260 PUBLIC EMPLOYEES' RE	TI INPRS	4,357.90	4,357.90
92169	AOOCHER TOTTE		2,793.29 94169 JULY 2019 TRF
8/16/19 94169 0101 GENERAL	INDIANA STATE TEACHER	2,793.29 1,971.62	1,971.62 97195 VALIC 401A
8/16/19 97195 0101 GENERAL	VALIC	449.63	449.63 97195 VALIC 401A
8/16/19 97195 0300 GENERAL	· VALIC		2,048.50 97195 ANNUITIES
8/16/19 97195 9281 403B VALIC	VALIC	2,048.50 4,469.75	4,469.75
97195	VOUCHER TOTAL	4,409.13	4,245.57 98097 STATE&LOCAL WITHHOLDING
8/16/19 98097 9230 STATE TAX	INDIANA DEPARTMENT OF REVENUE	4,245.57	2,210.03 98097 STATE LOCAL WITHHOLDING
8/16/19 98097 9240 COUNTY TAX	INDIANA DEPARTMENT OF REVENUE	2,210.03	6,455.60
98097	VOUCHER TOTAL	6,455.60	4,116.45 99195 07/19/19 TAX PAYMENT
8/16/19 99195 0101 GENERAL	INTERNAL REVENUE SERVICE	4,116.45	764.97 99195 07/19/19 TAX PAYMENT
8/16/19 99195 0300 GENERAL	INTERNAL REVENUE SERVICE	764.97	5,444.37 99195 07/19/19 TAX PAYMENT
8/16/19 99195 9210 FEDERAL TAX	INTERNAL REVENUE SERVICE	5,444.37	4,881.42 99195 07/19/19 TAX PAYMENT
8/16/19 99195 9220 SOCIAL SECURITY	INTERNAL REVENUE SERVICE	4,881.42	15,207.21
99195	VOUCHER TOTAL	15,207.21	13,201,21
,,,,,,	PRE-WRITTEN TOTAL	84,934.62	
		ን ግ1ረ ሰለ	3,716.00 9535 BEHAVIOR SPECIALIST
8/16/19 9535 0101 GENERAL	CHRISTOPHER R AKERS	3,716.00	853.63 9536 7/1/19-7/31/19
8/16/19 9536 0300 GENERAL	AT&T	853.63	963.16 9537 7/1/19-7/31/19
8/16/19 9537 0101 GENERAL	AT&T	963.16	703.10 303: 1/4/40 1/21/21
0/ 10/ 13 300, 4242 5			

FOR THE PERIOD OF 7/16/19 - 7/30/19

DATE VO	OUCHER NO. FUND	1	NAME OF CLAIMANT	VOUCHER AMOUNT	AMOUNT ALLOWED	CHECK NO.	MEMORANDUM
8/16/19 8/16/19 8/16/19 8/16/19 8/16/19 8/16/19 8/16/19 8/16/19 8/16/19 8/16/19 8/16/19	9538 0101 GEN 9539 0300 GEN 9540 0101 GEN 9541 0101 GEN 9542 0300 GEN 9543 0101 GEN 9544 0101 GEN 9546 0300 GEN 9547 0101 GEN 9548 0300 GEN 9549 0101 GEN 9550 0101 GEN	IERAL VERAL VERAL VERAL VERAL NERAL NERAL NERAL NERAL NERAL	ECONOMY PLUS JANITORIAL INDY CURB APPEAL ASPHALT, INC INDIANAPOLIS POWER & LIGHT AE BOYCE COMPANY INC. KOORSEN FIRE & SECURITY OFFICE DEPOT OFFICE FURNITURE MART POWERSCHOOL GROUP, LLC TELECOM, LLC PURE WATER PARTNERS RAY'S TRASH SERVICE, INC. RICOH USA, INC DENISE WHITTEMORE NEW VOUCHERS TOTAL	2,026.94 9,795.00 5,141.26 32.00 358.75 125.06 369.85 6,278.26 2,897.34 139.90 656.49 132.14 18.98 33,504.76	5,141.26 32.00 358.75 125.06 369.85 6,278.26 2.897.34	9539 9540 9541 9542 9543 9545 9546 9547 9548	JANITORIAL SUPPLIES SEAL COAT, RESTRIPE ELECTRIC JUNE 2019 DOCULIVERY FIRE EXTINGUISHER SERVICE SUPPLIES CHAIRS WHITE BOARD ANNUAL RENEWAL SHORETEL WATER SERVICE JULY 2019 ROLL OFF COPIES MILEAGE
			GRAND TOTAL	118,439.38			

RIMD	DESCRIPTION	VOUCHER TOTAL	<u> </u>
9276 9277 9280 9281 9283	VISION INSURANCE VOLUNTARY LIFE INSURANCE STD INSURANCE FLEXIBLE SPENDING ACCOUNTS 403B VALIC 403B FIRST INVESTORS	68,898.89 23,874.86 5,444.37 4,881.42 4,245.57 2,210.03 679.86 4,694.07 408.04 146.68 127.90 154.52 34.25 2,048.50 50.00 75.53	
9283 9310	403B FIRST INVESTORS GARNISHMENTS	75.53	
9281 9283	403B VALIC 403B FIRST INVESTORS	50.00 75.53	
	CHILD SUPPORT MARION COUNTY	310.00 154.89 118,439.38	

ALLOWANCE OF VOUCHERS

I HEREBY CERTIFY THAT EACH OF THE ABOVE LISTED VOUCHERS AND THE INVOICES, OR BILLS ATTACHED THERETO,
ARE TRUE AND CORRECT AND I HAVE AUDITED SAME IN ACCORDANCE WITH IC 5-11-10-1.6. DR. SCOTT CARSON EXECUTIVE DIRECTOR
WE HAVE EXAMINED THE VOUCHERS LISTED ON THE FOREGOING ACCOUNTS PAYABLE 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 \$ 62, 721 .80 DATED THIS 15 TO DAY OF AUGUS 7 2019.
APPROVED BY THE STATE BOARD OF ACCOUNTS JULY 2011 FOR: SOUTHSIDE SPECIAL SERVICES OF MARION COUNTY
DR. PAUL KAISER PRESIDENT MR. PATRICK MAPES VICE BRESIDENT DR. MATTHEW PRUSISCKI SECRETARY
MEMBER

FOR THE PERIOD OF 8/01/19 - 8/15/19

	TON THE TENTOS OF THE	•	
		VOUCHER	AMOUNT CHECK
DATE VOUCHER	NAME OF STATISTICS	AMOUNT	ALLOWED NO. MEMORANDUM
FILED NO. FUND	NAME OF CLAIMANT	11100112	
	TO DUMBER DE LOCALITA	34.25	34.25 9551 BENEFITS WORKSHOP
11/22/19 9551 9280 FLEXIBLE SPENDING ACCO	JAG ENTERPRISES, LLC	50.00	50.00 9552 ADMINISTRATIVE DATE MGT
11/22/19 9552 9283 403B FIRST INVESTORS	ADMINISTRATIVE DATA MGT CORP	75.53	75.53 9553 VIGO CNTY GARNISHMENT
11/22/19 9553 9310 GARNISHMENTS	VIGO COUNTY CLERK		4,435.75 81094 JULY 2019 P-CARD
11/22/19 9552 9283 403B FIRST INVESTORS 11/22/19 9553 9310 GARNISHMENTS 11/22/19 81094 0101 GENERAL 11/22/19 81094 0300 GENERAL 11/22/19 81094 9801 RLC P-CARD 81094 11/22/19 89169 9320 CHILD SUPPORT MARION C	REGIONS PURCHASE CARD	4,435.75	3,655.94 81094 JULY 2019 P-CARD
11/22/19 81094 0300 GENERAL	REGIONS PURCHASE CARD	3,655.94	1,449.44 81094 JULY 2019 P-CARD
11/22/19 81094 9801 RLC P-CARD	REGIONS PURCHASE CARD	1,449.44	
91004	VOUCHER TOTAL	9,541.13	9,541.13 310.00 89169 CHILD SUPPORT PAYMENTS
81094 11/22/19 89169 9320 CHILD SUPPORT MARION C	STATE CENTRAL COLLECTIONS UNIT	310.00	310.00 69109 CHIED SOLLORI THEESE
11/22/19 92170 0101 GENERAL	INPRS	2,654.44	2,654.44 92170 AUGUST 2019 PERF
11/22/19 92170 0101 ODNERAD	INPRS	1,262.86	1,262.86 92170 AUGUST 2019 PERF
11/22/19 92170 0300 GENERAL		743.93	743.93 92170 AUGUST 2019 PERF
11/22/19 92170 9260 PUBLIC EMPLOYEES' RETI	VOUCHER TOTAL	4,661.23	4,661.23
92170	INDIANA STATE TEACHER	2,854.92	2,854.92 94170 AUGUST 2019 TRF
11/22/19 94170 0101 GENERAL	VALIC	1,971.62	1,971.62 97196 VALIC 401A ER-PAID
11/22/19 97196 0101 GENERAL		449.63	449.63 97196 VALIC 401A ER-PAID
11/22/19 97196 0300 GENERAL	VALIC	1,994.33	1,994.33 97196 ANNUITIES
11/22/19 97196 9281 403B VALIC	VALIC VOUCHER TOTAL	4,415.58	4 415.58
97196		4,396.40	4.396.40 99196 08/05/19 TAX PAYMENT
11/22/19 99196 0101 GENERAL	INTERNAL REVENUE SERVICE	760.75	760.75 99196 08/05/19 TAX PAYMENT
11/22/19 99196 0300 GENERAL	INTERNAL REVENUE SERVICE	5,752.54	5.752.54 99196 08/05/19 TAX PAYMENT
11/22/19 99196 9210 FEDERAL TAX	INTERNAL REVENUE SERVICE	5,157.15	5,157.15 99196 08/05/19 TAX PAYMENT
11/22/19 99196 9220 SOCIAL SECURITY	INTERNAL REVENUE SERVICE	16,066.84	16,066.84
99196	VOUCHER TOTAL		10,000.01
33.23	PRE-WRITTEN TOTAL	38,009.48	
		2 020 00	3,870.00 9554 BEHAVIOR SPECIALIST
11/22/19 9554 0101 GENERAL	CHRISTOPHER R AKERS	3,870.00	1,986.13 9555 PHONE SERVICE
11/22/19 9555 0101 GENERAL	AT&T	1,986.13	1,466.56 9556 WCM ESSENTIAL
11/22/19 9556 0300 GENERAL	BLACKBOARD INC	1,466.56	306.54 9557 GAS
11/22/19 9557 0101 GENERAL	CITIZENS ENERGY GROUP-GAS	306.54	*
11/22/19 9558 0101 GENERAL	CITIZENS ENERGY GROUP	886.32	AND ALL ALEA TOP MACHINE PIMP
11/22/19 3000 0101 OPMENT	DUNCAN SUPPLY COMPANY, INC	295.05	295.05 9559 ICE MACHINE PUMP 1,666.18 9560 JANITORIAL SUPPLIES
11/22/19 9559 0300 GENERAL	ECONOMY PLUS JANITORIAL	1,666.18	337.00 9561 MAINTENANCE
11/22/19 9560 0101 GENERAL	ELLIS MECHANICAL, INC	337.00	THE PROPERTY OF THE PROPERTY OF
11/22/19 9561 0300 GENERAL	ASTBURY GABRIEL CORPORATION	112.00	
11/22/19 9562 0300 GENERAL	H7 TECHNOLOGIES	9,150.00	9,150.00 9563 IT SERVICES
11/22/19 9563 0300 GENERAL	AE BOYCE COMPANY INC.	23.00	23.00 9564 DOCULIVERY
11/22/19 9564 0101 GENERAL	PERRY TOWNSHIP SCHOOLS	2,000.00	2,000.00 9565 PERRY POLICE
11/22/19 9565 0101 GENERAL	RAY'S TRASH SERVICE, INC.	325.49	325.49 9566 TRASH SERVICES
11/22/19 9566 0300 GENERAL		514.05	514.05 9567 COPIER LEASE
11/22/19 9567 0300 GENERAL	WELLS FARGO COLLEEN HANNIGAN ZILLICH	1,774.00	1,774.00 9568 SLP SUPERVISION
11/22/19 9568 0101 GENERAL	NEW VOUCHERS TOTAL	24,712.32	
	MPM AONCHURS TOTUD	2.,,42	
	GRAND TOTAL	62,721.80	
	GRAND TOTAL	02, 122,00	

EUND	DESCRIPTION	VOUCHER TOTAL	
101 300 9210 9220 9260 9280 9281 9283 9310 9320	SOCIAL SECURITY PUBLIC EMPLOYEES' RETIREMENT FLEXIBLE SPENDING ACCOUNTS 403B VALIC 403B FIRST INVESTORS GARNISHMENTS CHILD SUPPORT MARION COUNTY	28,825.30 18,329.33 5,752.54 5,157.15 743.93 34.25 1,994.33 50.00 75.53 310.00 1,449.44 62,721.80	

ALLOWANCE OF VOUCHERS

I HEREBY CERTIFY THAT EACH OF THE ABOVE LISTED VOUCHERS AND THE INVOICES, OR BILLS ATTACHED THERETO,

ARE TRUE AND CORRECT AND I HAVE AUDITED SAME IN ACCORDANCE WITH IC 5-11-10-1.6.	
August 30th, 2019 DR. SCOTT CARSON EXECUTIVE DIRECTOR	
WE HAVE EXAMINED THE VOUCHERS LISTED ON THE FOREGOING ACCOUNTS PAYABLE VOUCHER REGISTER, CONSISTING OF	Ö.
PAGES, AND EXCEPT FOR VOUCHERS NOT ALLOWED AS SHOWN ON THE REGISTER SUCH VOUCHERS ARE HEREBY ALLOWE	D
IN THE TOTAL AMOUNT OF \$ 118, 865.35 DATED THIS 30th DAY OF August 2019.	
APPROVED BY THE STATE BOARD OF ACCOUNTS JULY 2011 FOR: SOUTHSIDE SPECIAL SERVICES OF MARION COUNTY	
DR. PAUL KAISER PRESIDENT MR. PATRICK MAYES VICE PRESIDENT DR. MATTHEW PROSESKI SECRETARY MEMBER	

FOR THE PERIOD OF 8/16/19 - 8/30/19

			TOW THE TEMES				
D3.00 (10	arann.			VOUCHER	AMOUNT C	HECK	
DATE VO	NO. FUND		NAME OF CLAIMANT	AMOUNT	ALLOWED	NO.	MEMORANDUM
FILED	NO. LOND					05.60	PENEDERA MODICION
11/22/19	9569 9280	FLEXIBLE SPENDING ACCO	JAG ENTERPRISES, LLC	34.25	34.25	9569	BENEFITS WORKSHOP
11/22/19	9570 9283	403B FIRST INVESTORS	ADMINISTRATIVE DATA MGT CORP	50.00	50.00	9570	ADMINISTRATIVE DATE MGT
		GARNISHMENTS	VIGO COUNTY CLERK	75.53		9571	VIGO CNTY GARNISHMENT
	9572 0101	GENERAL	LIFE INSURANCE COMPANY OF	250.56			CIGNA LTD INSURANCE CIGNA LTD INSURANCE
	9572 0300	GENERAL	LIFE INSURANCE COMPANY OF	33.95	33.95		CIGNA INSURANCE COMPANY
11/22/19	9572 9277	STD INSURANCE	LIFE INSURANCE COMPANY OF	154.52	154.52	9512	CIGNA INSURANCE CONTANT
11/22/13	9572		VOUCHER TOTAL	439.03	439.03	05.73	UNUM LTC INSURANCE
11/22/19			UNUM LIFE INSURANCE COMPANY	493.20		9013	UNUM LTC INSURANCE
	9573 0300		UNUM LIFE INSURANCE COMPANY	153.60	153.60	9010	ONOM TIC INDOMINOR
	9573		VOUCHER TOTAL	646.80	646.80	00170	CHILD SUPPORT PAYMENTS
11/22/19	89170 9320	CHILD SUPPORT MARION C	STATE CENTRAL COLLECTIONS UNIT	364.17	71.400	03110 01103	VSP VISION INSURANCE
11/22/19	91102 0101	GENERAL	HOOSIER SCHOOL BENEFIT IKOSI	32,448.97	JZ,440.31	01102	VSP VISION INSURANCE
/ /		CONTRAT	HOOSIER SCHOOL BENEFIT TRUST	4,607.13	4,007.13	01102	MONTHLY HH PREMIUMS
11/00/10	01100 0071	UU TMCHDAMCE	HOOSIER SCHOOL BENEFIT TRUST	4,295.79	224 67	01102	MONTHLY DTL PREMIUM
11/22/19	91102 9272	P DENTAL INSURANCE	HOOZIEK 2CHOOF BEMELLI IVOSI	334.67	100 06	01102	MONTHLY VISION PREMIUM
- 11 <i>1991</i> 10	U1 1317 42 1	CALSTON INSURANCE	HOODIBK DCHOOD BBKELL 2110-	122.06	122.00	01102	2 HOOSIER SCHOOL VOL LIFE
11/22/19	91102 9270	5 VOLUNTARY LIFE INSURAN	HOOSIER SCHOOL BENEFIT TRUST	127.90	41,936.52	J1102	, HOODIBH CONVOL 100 ===
	91102		VOUCHER TOTAL	41,936.52	41,930.32	9217	1 AUGUST 2019 PERF
11/22/19	92171 0103	1 GENERAL	INPRS	4,043.86	1 282 97	9217	AUGUST 2019 PERF
11/22/19	92171 030) GENERAL	INPRS	1,282.97 1,121.46	1 121 46	9217	1 AUGUST 2019 PERF
11/22/19	92171 926	O PUBLIC EMPLOYEES' RETI	INPRS	6,448.29	6,448.29	2021	
	92171		AOOCHER TOTAT	3,417.89	3,417.89	9417	1 AUGUST 2019 TRF
11/22/19	94171 010	1 GENERAL	INDIANA STATE TEACHER	2,419.62	2,419.62	9719	7 VALIC 401A ER-PAID
11/22/19	97197 010	1 GENERAL	VALIC	449.63	449.63	9719	7 VALIC 401A ER-PAID
11/22/19	97197 030	O GENERAL	VALIC	1,994.33	1.994.33	9719	7 ANNUITIES
11/22/19	97197 928	1 403B VALIC	VALIC VOUCHER TOTAL	4,863.58	4.863.58		
	97197		INDIANA DEPARTMENT OF REVENUE	5,070.70	5,070,70	9809	8 STATE&LOCAL WITHHOLDING
11/22/19	98098 923	O STATE TAX	INDIANA DEPARTMENT OF REVENUE	2,686.44	2,686.44	9809	8 STATE&LOCAL WITHHOLDING
11/22/19		O COUNTY TAX	VOUCHER TOTAL	7,757.14	7.757.14		
	98098	a armina a i	INTERNAL REVENUE SERVICE	5,915.67	5,915.67	9919	07 08/20/19 TAX PAYMENT
11/22/19	99197 010	01 GENERAL	INTERNAL REVENUE SERVICE	707.87	707.87	9919	97 08/20/19 TAX PAYMENT
11/22/19	99197 030	O GENERAL MAY	INTERNAL REVENUE SERVICE	6,953.71	6,953.71	9919	97 08/20/19 TAX PAYMENT
11/22/19	99197 921	O FEDERAL TAX	INTERNAL REVENUE SERVICE	6,623.54	6,623.54	9919	97 08/20/19 TAX PAYMENT
11/22/19		20 SOCIAL SECURITY	VOUCHER TOTAL	20,200.79	20,200.79	}	
	99197		PRE-WRITTEN TOTAL	86,233.99			
			the market of the	·			
11/00/11) AE7/ A2	ባህ ፍልክሴውያ፤	ADTEC ADMINISTRATIVE &	510.00	510.0		74 ERATE PHASE 3 FY2018
11/22/19	9 9014 00 0 0575 01	00 GENERAL	CHRISTOPHER R AKERS	3,757.50	3,757.5		75 BEHAVIOR SPECIALIST
11/22/13	9 9373 VI 0 0676 N1	01 GENERAL 01 GENERAL	ASSURED PARTNERS NL, LLC	11,851.50	11,851.5		76 SOUTSPE-01
11/22/11	0 0E77 03	00 GENERAL	AT&T	851.20	851.2		77 JULY 1 - JULY 31 2019
11/22/11	0579 N1	01 GENERAL	CHURCH, CHURCH, HITTLE & ANTRIM	1,573.00	1,573.0		78 LEGAL FEES
11/22/1	0 0570 NI	00 GENERAL	DUNCAN SUPPLY COMPANY, INC	596.12	596.1		79 AIR FILTERS
11/22/1 11/22/1	a asan ni	01 GENERAL	ECONOMY PLUS JANITORIAL	934.83	934.8		80 JANITORIAL SUPPLIES
11/22/1	Q Q581 N3	00 GENERAL	ASTBURY GABRIEL CORPORATION	112.00	112.0		81 POOL WATER SAMPLES 82 SOUND BOOTH ANNUAL
11/22/1	g Q582 N3	00 GENERAL	E3 DIAGNOSTICS	637.95	637.9		883 BOILER INSPECTION
11/22/1	9 9583 03	000 GENERAL	DEPT OF HOMELAND SECURITY	25.00	25.0	IU 90	MOTIOGICAL VORTOR
711 771 T	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						

FOR THE PERIOD OF 8/16/19 - 8/30/19

DATE V	OUCHER NO. FUND		NAME OF CLAIMANT	VOUCHER AMOUNT	AMOUNT ALLOWED		MEMORANDUM
11/22/19 11/22/19 11/22/19 11/22/19 11/22/19 11/22/19 11/22/19 11/22/19 11/22/19	9584 0300 9585 0101 9586 0101 9587 0101 9588 0101 9589 0300 9590 0101 9591 0101 9592 0101	GENERAL GENERAL GENERAL GENERAL GENERAL GENERAL GENERAL GENERAL	KOORSEN FIRE & SECURITY LIBERTY MUTUAL INSURANCE MOVE INTERNATIONAL MSD DECATUR TOWNSHIP PURE WATER PARTNERS ROGERS & CO OF INDIANA, INC TEACHTOWN A DIV JIGSAW LEARN DENISE WHITTEMORE INDIANA DEPARTMENT OF NEW VOUCHERS TOTAL	372.93 4,048.67 750.00 949.52 139.90 425.90 4,230.00 18.92 846.42 32,631.36	372.93 4,048.67 750.00 949.52 139.90 425.90 4,230.00 18.92 846.42	9585 9586 9587 9588 9589 9590 9591	ALARM MAINT 9371964-0000 ANNUAL SITE FEE TRANSPORTATION WATER POOL SUPPLIES SOUTHIN46227 MILEAGE UNEMPLOYMENT
			GRAND TOTAL	118,865.35			

FUND	DESCRIPTION	VOUCHER TOTAL	
101 300 9210 9220 9230 9240 9260	PUBLIC EMPLOYEES' RETIREMENT	78,090.03 10,766.25 6,953.71 6,623.54 5,070.70 2,686.44 1,121.46	
	PUBLIC EMPLOYEES' RETIREMENT HH INSURANCE DENTAL INSURANCE VISION INSURANCE VOLUNTARY LIFE INSURANCE STD INSURANCE FLEXIBLE SPENDING ACCOUNTS 403B VALIC 403B FIRST INVESTORS GARNISHMENTS	1,121.46 4,295.79 334.67 122.06 127.90 154.52 34.25 1,994.33 50.00 75.53 364.17	
9320	CHILD SUPPORT MARION COUNTY GRAND TOTAL	118,865.35	

ALLOWANCE OF VOUCHERS

I HEREBY CERTIFY THAT EACH OF THE ABOVE LISTED VOUCHERS AND THE INVOICES, OR BILLS ATTACHED THERETO,

ARE TRUE AND CORRECT AND I HAVE AUDITED SAME IN ACCORDANCE WITH IC 5-11-10-1.6.
September 13, 2019 DR. SCOTT CARSON EXECUTIVE DIRECTOR
WE HAVE EXAMINED THE VOUCHERS LISTED ON THE FOREGOING ACCOUNTS PAYABLE 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 \$ 68,454 .28 DATED THIS 13th DAY OF September 2019.
APPROVED BY THE STATE BOARD OF ACCOUNTS JULY 2011 FOR: SOUTHSIDE SPECIAL SERVICES OF MARION COUNTY
DR. PAUL KAISER RRESIDENT MR. PATRICK MAPES VICE PRESIDENT DR. MATTHEW PRUSICINI SECRETARY
MEMBER

FOR THE PERIOD OF 8/31/19 - 9/13/19

		MONGHED	AMOUNT CHECK
DATE VOUCHER		VOUCHER	
FILED NO. FUND	NAME OF CLAIMANT	AMOUNT	ALLOWED NO. MEMORANDUM
			AL DA ACAA MILDAGO
11/15/19 9593 0101 GENERAL	DENISE WHITTEMORE	44.74	44.74 9593 MILEAGE
11/15/19 9594 9280 FLEXIBLE SPENDING ACCO		34.25	34.25 9594 BENEFITS WORKSHOP
11/15/19 9595 0101 GENERAL	FINANCIAL CENTER CREDIT UNION	895.82	895.82 9595 FINANCIAL CENTER HSA
11/13/19 9393 0101 GENERAL	FINANCIAL CENTER CREDIT UNION	166.66	166.66 9595 FINANCIAL CENTER HSA
11/10/19 9090 0000 0110	VOUCHER TOTAL	1,062.48	1,062.48
9595		50.00	50.00 9596 ADMINISTRATIVE DATE MGT
11/15/19 9596 9283 403B FIRST INVESTORS	WALLEST OUT OF THE WALL OF THE	75.53	75.53 9597 VIGO CNTY GARNISHMENT
11/15/19 9597 9310 GARNISHMENTS	VIGO COUNTY CLERK	364.17	364.17 89171 CHILD SUPPORT PAYMENTS
11/15/19 89171 9320 CHILD SUPPORT MARION C	STATE CENTRAL COLLECTIONS UNIT	4,387.08	4,387.08 92172 SEPTEMBER 2019 PERF
11/15/19 92172 0101 GENERAL	INPRS	1 222 10	1,373.10 92172 SEPTEMBER 2019 PERF
11/15/19 92172 0300 GENERAL	INPRS	1,373.10	1,237.56 92172 SEPTEMBER 2019 PERF
11/15/19 92172 9260 PUBLIC EMPLOYEES' RETI	INPRS	1,237.56	
00170	VOUCRER TOTAL	6,997.74	6,997.74
92172 11/15/19 94172 0101 GENERAL	INDIANA STATE TEACHER	3,206.16	3,206.16 94172 SEPTEMBER 2019 TRF
11/15/19 97198 0101 GENERAL	VALIC	2,336.65	2,336.65 97198 VALIC 401A ER-PAID
11/15/19 97198 0300 GENERAL	VALIC	449.63	449.63 97198 VALIC 401A ER-PAID
11/15/19 97198 9281 403B VALIC	VALIC	2,272.95	2,272.95 97198 ANNUITIES
97198 97196 9201 403D VALIE	VOUCHER TOTAL	5,059.23	5,059.23
	INTERNAL REVENUE SERVICE	6,062.00	6,062.00 99198 09/05/19 TAX PAYMENT
11/15/19 99198 0101 GENERAL	INTERNAL REVENUE SERVICE	727 00	737 NO 99198 N9/N5/19 TAX PAYMENT
11/15/19 99198 0300 GENERAL	INTERNAL REVENUE SERVICE	7.321.56	7,321.56 99198 09/05/19 TAX PAYMENT
11/15/19 99198 9210 FEDERAL TAX		6,799.00	6,799.00 99198 09/05/19 TAX PAYMENT
11/15/19 99198 9220 SOCIAL SECURITY	INTERNAL REVENUE SERVICE	20,919.56	20,919.56
99198	VOUCHER TOTAL	37,813.86	20/313100
	PRE-WRITTEN TOTAL	31,013.00	
		3,375.00	3,375.00 9598 BEHAVIOR SPECIALTIST
11/15/19 9598 0101 GENERAL	CHRISTOPHER R AKERS		107.88 9599 PHONE
11/15/19 9599 0101 GENERAL	AT&T	107.88	
11/15/19 9600 0101 GENERAL	CITIZENS ENERGY GROUP-GAS	463.35	
11/15/19 9601 0101 GENERAL	CITIZENS ENERGY GROUP	998.08	
11/15/19 9602 0300 GENERAL	DUNCAN SUPPLY COMPANY, INC	180.60	
11/15/19 9603 0101 GENERAL	ECONOMY PLUS JANITORIAL	708.18	708.18 9603 JANITORIAL SUPPLIES
11/15/19 9604 0300 GENERAL	ASTBURY GABRIEL CORPORATION	112.00	112.00 9604 POOL WATER SAMPLES
11/15/19 9605 0300 GENERAL	H7 TECHNOLOGIES	9,150.00	9,150.00 9605 IT SUPPORT
11/15/19 9606 0101 GENERAL	INDIANAPOLIS POWER & LIGHT	6,204.18	6,204.18 9606 ELECTRIC
11/15/19 9607 0101 GENERAL	AE BOYCE COMPANY INC.	42.27	42.27 9607 RECEIPTS
11/15/19 900/ 0101 GENERAL	PROPERTY MASTERS	2,137.50	2,137.50 9608 STUMP REMOVAL
11/15/19 9608 0300 GENERAL	RAY'S TRASH SERVICE, INC.	325.49	325.49 9609 TRASH SERVICE
11/15/19 9609 0300 GENERAL	RICOH USA, INC	736.82	736.82 9610 COPIES
11/15/19 9610 0101 GENERAL	WELLS FARGO	514.05	514.05 9611 LEASE
11/15/19 9611 0300 GENERAL		371.57	371.57 9612 SHRED
11/15/19 9612 0300 GENERAL	SHRED-IT USA	31.00	31.00 9613 NO PARKING SIGNS
11/15/19 9613 0300 GENERAL	SKY HIGH SIGN SERVICE	1,797.00	1,797,00 9614 ENCORE
11/15/19 9614 0101 GENERAL	TEACHTOWN A DIV JIGSAW LEARN	590.45	590.45 9615 UNEMPLOYMENT
11/15/19 9615 0101 GENERAL	INDIANA DEPARTMENT OF		2,795.00 9616 SLP SUPERVISOR
11/15/19 9616 0101 GENERAL	COLLEEN HANNIGAN ZILLICH	2,795.00	2/199100 9010 0011 0011111111111111111111
	NEW VOUCHERS TOTAL	30,640.42	
	ODAND MAMAT	CO ALA DO	
•	GRAND TOTAL	68,454.28	

FUND	DESCRIPTION	VOUCHER TOTAL	
101 300 9210 9220 9260 9280 9281 9283	GENERAL GENERAL FEDERAL TAX SOCIAL SECURITY PUBLIC EMPLOYEES' RETIREMENT FLEXIBLE SPENDING ACCOUNTS 403B VALIC	34,750.66 15,548.60 7,321.56 6,799.00 1,237.56 34.25 2,272.95 50.00	
9310	GARNISHMENTS	75.53	
9320	CHILD SUPPORT MARION COUNTY GRAND TOTAL	364.17 68,454.28	

ALLOWANCE OF VOUCHERS

I HEREBY CERTIFY THAT EACH OF THE ABOVE LISTED VOUCHERS AND THE INVOICES, OR BILLS ATTACHED THERETO,
ARE TRUE AND CORRECT AND I HAVE AUDITED SAME IN ACCORDANCE WITH IC 5-11-10-1.6.
Leptember 30 th, 2019 DR. SCOTT CARSON EXECUTIVE DIRECTOR
WE HAVE EXAMINED THE VOUCHERS LISTED ON THE FOREGOING ACCOUNTS PAYABLE 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 \$ 133,630.51 DATED THIS 30 th DAY OF September 2019.
APPROVED BY THE STATE BOARD OF ACCOUNTS JULY 2011 FOR: SOUTHSIDE SPECIAL SERVICES OF MARION COUNTY
DR. PAUL KAISER RRESIDENT MR. PATRICK MAPES VICE PRESIDENT DR. MATTHEN DRUSIECKI SECRETARY
MEMBER

·9/30/19 12:44:54

SOUTHSIDE SPECIAL SERVICES OF MARION COUNTY

FOR THE PERIOD OF 9/16/19 - 9/30/19

		FOR THE LEWION OF 3/ 10/ 13	37 0 07 = -	
			VOUCHER	AMOUNT CHECK
DATE VO	DUCHER	27 7 7 1 7 1 7 1 7 1 7 1 7 1 7 1 7 1 7 1	AMOUNT	ALLOWED NO. MEMORANDUM
FILED	NO. FUND	NAME OF CLAIMANT	APIOONI	TIDDONDO III VIII
			24.25	34.25 9617 BENEFITS WORKSHOP
11/15/19	9617 9280 FLEXIBLE SPENDING ACCO	JAG ENTERPRISES, LLC FINANCIAL CENTER CREDIT UNION	010 40	812.49 9618 FINANCIAL CENTER HSA
11/15/19	9618 0101 GENERAL 9618 0300 GENERAL	FINANCIAL CENTER CREDIT UNION	812.49	249.99 9618 FINANCIAL CENTER HSA
11/15/19	9618 0300 GENERAL	LINANCIAD CENIEW CVEDII ONION		
	0.010	WWW.III TO TO TO TO	1,062.48	1,062.48 50.00 9619 ADMINISTRATIVE DATE MGT
11/15/10	0610 0203 AOSB FIRST INVESTORS	ADMINISTRATIVE DATA MGT CORP	50.00	50.00 9619 ADMINISTRATIVE DATE MGT
11/13/13	9620 9310 GARNISHMENTS			75.53 9620 VIGO CNTY GARNISHMENT
11/13/19		ττος τησιολήςς Κυμυμής ()Ε	229.26	229.26 9621 CIGNA LTD ER-PAID
11/15/19	9621 0101 GENERAL	LIFE INSURANCE COMPANY OF	30.96	30.96 9621 CIGNA LTD ER-PAID
11/15/19	9621 0300 GENERAL	LIFE INSURANCE COMPANY OF LIFE INSURANCE COMPANY OF	51.00	51.00 9621 CIGNA INSURANCE COMPANY
11/15/19	9621 9274 LTD INSURANCE	LIFE INSURANCE COMPANY OF VOUCHER TOTAL	197.72	197.72 9621 CIGNA INSURANCE COMPANY
11/15/19	9621 9277 STD INSURANCE	UNICUPP TOTAL.	508.94	508.94
	9621 9622 0101 GENERAL	UNOM LIFE INSURANCE COMPANY	420.40	420.40 9622 UNUM LTC ER-PAID
11/15/19	9622 0101 GENERAL	UNUM LIFE INSURANCE COMPANY		150.60 9622 UNUM LTC ER-PAID
11/15/19	9622 0300 GENERAL 9622 9275 LTC INSURANCE		15.00	15.00 9622 UNUM LTC ER-PAID
11/15/19	9622 9275 LTC INSURANCE	UNUM LIFE INSURANCE COMPANY	586.00	586.00
11, 10, 10	9622	VOUCHER TOTAL		1,465.36 81095 AUGUST 2019 P-CARD
11/15/19	81095 0101 GENERAL	REGIONS PURCHASE CARD	1,465.36	994.95 81095 AUGUST 2019 P-CARD
11/15/10	21095 0300 GENERAL	REGIONS PURCHASE CARD	994.95	6,438.66 81095 AUGUST 2019 P-CARD
11/15/10	9622 81095 0101 GENERAL 81095 0300 GENERAL 81095 9801 RLC P-CARD	REGIONS PURCHASE CARD	6,438.66	
			8,898.97	8,898.97
44 /4 5 /4 0	MOTOR PROGRAM TO CHEE AND AND TON	C STATE CENTRAL COLLECTIONS UNIT	364.17	364.17 89172 CHILD SUPPORT PAYMENTS
11/15/19	83117 320 CUIDO POLLOKI MIKTON	HOOSTER SCHOOL BENEFIT TRUST	39,408.30	39,408.30 91103 VSP VISION ER-PAID
11/15/19	91103 UIUI GENERAL	HOOSTER SCHOOL BENEFIT TRUST	4,600.13	4,600.13 91103 VSP VISION ER-PAID
11/15/19	99172 9320 CHILD SUPPORT MARCON 91103 0101 GENERAL 91103 0300 GENERAL 91103 9000 LIFE FRINGE BENEFIT 91103 9271 HH INSURANCE 91103 9272 DENTAL INSURANCE 91103 9273 VISION INSURANCE	HOOSTER SCHOOL BENEFIT TRUST	54.00	54.00 91103 HOOSIER SCHOOL VOL LIFE
11/15/19	9 91103 9000 LIFE FRINGE BENEFIT	HOOSTER SCHOOL BENEFIT TRUST	6,670.09	6,670.09 91103 MONTHLY HH PREMIUMS
11/15/19	9 91103 9271 HH INSURANCE	HOOSIER COHOOL DEMERIT TROOP	400.48	400.48 91103 MONTHLY DTL PREMIUM
11/15/19	9 91103 9272 DENTAL INSURANCE	HOOSIER SCHOOL DEMENTA ADIICA	188.62	188.62 91103 MONTHLY VISION PREMIUM
11/15/19	9 91103 9273 VISION INSURANCE	HOOSIEK SCHOOL DENEELE WELICH	181.40	181.40 91103 HOOSIER SCHOOL VOL LIFE
11/15/19	9 91103 9275 VISION INSURANCE 9 91103 9276 VOLUNTARY LIFE INSURA	M HOOGIDK Boncom Danie	51,503.02	51,503,02
	91103	AOOCHEM TOTTE	4,394.87	4.394.87 92173 SEPTEMBER 2019 PERF
11/15/1	9 92173 0101 GENERAL	INPRS	1,373.10	1,373.10 92173 SEPTEMBER 2019 PERF
11/15/1	9 92173 0300 GENERAL	INPRS	1,313.10	1,239.65 92173 SEPTEMBER 2019 PERF
11/15/1	9 92173 9260 PUBLIC EMPLOYEES' RE	TI INPRS	1,239.65	7,007.62
11/10/1	92173	AOOCHUR TOTTE	7,007.62	3,680.34 94173 SEPTEMBER 2019 TRF
11/15/1	9 94173 0101 GENERAL	INDIANA STATE TEACHER	3,680.34	2,336.65 97199 VALIC 401A ER-PAID
11/13/1	9 97199 0101 GENERAL	VALIC	2,336.65	449.63 97199 VALIC 401A ER-PAID
11/13/1	o ogioo ogoo cemedal	VALIC	449.63	449,63 97199 VALIC 4016 EN 11110
11/15/1	9 97199 0300 GENERAL	VALIC	2,080.95	2,080.95 97199 ANNUITIES
11/15/1	9 97199 9281 403B VALIC	VOUCHER TOTAL	4,867.23	4,867.23
4 4 -	97199	INDIANA DEPARTMENT OF REVENUE	6,215.63	6,215.63 98099 STATE LOCAL WITHHOLDING
11/15/1	19 98099 9230 STATE TAX	INDIANA DEPARTMENT OF REVENUE	3,336.17	3,336.17 98099 STATE&LOCAL WITHHOLDING
11/15/1	19 98099 9240 COUNTY TAX	VOUCHER TOTAL	9,551.80	9,551.80
	98099	INTERNAL REVENUE SERVICE	6,843.74	6.843.74 99199 09/20/19 TAX PAYMENT
11/15/3	19 99199 0101 GENERAL	INTERNAL REVENUE SERVICE	737.29	737 29 99199 09/20/19 TAX PAYMENT
11/15/	19 99199 0300 GENERAL		129.59	129.59 99199 09/20/19 TAX PAYMENT
11/15/	19 99199 5218 PART B (611) FYZULB	INTERNAL REVENUE SERVICE	9,797.24	9.797.24 99199 09/20/19 TAX PAYMENT
11/15/	19 99199 9210 FEDERAL TAX	IMLEKNYD KEARMOR DRIVATOR	7,710.62	7,710.62 99199 09/20/19 TAX PAYMENT
11/15/	19 99199 9220 SOCIAL SECURITY	INTERNAL REVENUE SERVICE	25,218.48	25,218.48
,,	99199	VOUCHER TOTAL	113,408.83	20,200.00
		PRE-WRITTEN TOTAL	110,400.00	

9/30	/19
12:44	:54

AFTER CHECKS ACCOUNTS PAYABLE VOUCHER

PAGE 2 BDA40/ACARLTON

SOUTHSIDE SPECIAL SERVICES OF MARION COUNTY

FOR THE PERIOD OF 9/16/19 - 9/30/19

DATE VOUCHER FILED NO. FUND	NAME OF CLAIMANT	VOUCHER AMOUNT	AMOUNT (ALLOWED	CHECK NO. MEMORANDUM
11/15/19 9623 0101 GENERAL 11/15/19 9624 0101 GENERAL 11/15/19 9625 0300 GENERAL 11/15/19 9626 0101 GENERAL 11/15/19 9627 0300 GENERAL 11/15/19 9628 0300 GENERAL 11/15/19 9629 0300 GENERAL 11/15/19 9630 0101 GENERAL	CHRISTOPHER R AKERS ASSURED PARTNERS NL, LLC AT&T ECONOMY PLUS JANITORIAL ELLIS MECHANICAL, INC ASTBURY GABRIEL CORPORATION FRONTLINE TECHNOLOGIES GROUP AE BOYCE COMPANY INC. NEW VOUCHERS TOTAL	3,217.50 11,851.50 851.20 283.97 1,833.01 56.00 2,100.00 28.50 20,221.68	3,217.50 11,851.50 851.20 283.97 1,833.01 56.00 2,100.00 28.50	9625 AUGUST 2019 9626 JANITORIAL SUPPLIES 9627 ICE MACHINE
	GRAND TOTAL	133,630:51		

FUND	DESCRIPTION	VOUCHER TOTAL	
10115			
101	GENERAL	74,972.88	
300	GENERAL	13,426.86	
	PART B (611) FY2018	129.59	
	LIFE FRINGE BENEFIT	54.00	
9210	FEDERAL TAX	9,797.24	
	SOCIAL SECURITY	7,710.62	
9230	STATE TAX	6,215.63	
9240		3,336.17	
9260	The second secon	1,239.65	
9271		6,670.09	
9272		400.48	
	VISION INSURANCE	188.62	
	LTD INSURANCE	51.00	
	LTC INSURANCE	15.00	
	VOLUNTARY LIFE INSURANCE	181.40	
9277		197.72	
	FLEXIBLE SPENDING ACCOUNTS	34.25	
9281		2,080.95	
9283		50.00	
9310		75.53	
	CHILD SUPPORT MARION COUNTY	364.17	
9801		6,438.66	
2001	GRAND TOTAL	133,630.51	

ALLOWANCE OF VOUCHERS

I HEREBY CERTIFY THAT EACH OF THE ABOVE LISTED VOUCHERS AND THE INVOICES, OR BILLS ATTACHED THERETO,

October 15th, 2019 DR. SCOTT CARSON EXECUTIVE DIRECTOR
WE HAVE EXAMINED THE VOUCHERS LISTED ON THE FOREGOING ACCOUNTS PAYABLE 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 \$ 66, 13 2 .05 DATED THIS 15 th DAY OF October 2019.
APPROVED BY THE STATE BOARD OF ACCOUNTS JULY 2011 FOR: SOUTHSIDE SPECIAL SERVICES OF MARION COUNTY
DR. PAUL KAISER PRESIDENT MR. PATRICK MAPES VICE PRESIDENT DR. MATTHEW PRUSIECKI SECRETARY MEMBER

FOR THE PERIOD OF 10/01/19 - 10/15/19

	101/11/2 12/12/1		
waveten		VOUCHER	AMOUNT CHECK
DATE VOUCHER	NAME OF CLAIMANT	AMOUNT	ALLOWED NO. MEMORANDUM
FILED NO. FUND	MARIE OF CENTRAMI	111001.1	
AND THE AND THE ADDITION AGO	TAC ENMEDDETCEC IIC	34.25	34.25 9631 BENEFITS WORKSHOP
11/15/19 9631 9280 FLEXIBLE SPENDING ACCO 11/15/19 9632 0101 GENERAL	ONIO ENIOTAL CONTROL CORDITA INION	812 49	812.49 9632 FINANCIAL CENTER HSA
11/15/19 9632 0101 GENERAL	FINANCIAL CENTER CREDIT UNION	249.99	249.99 9632 FINANCIAL CENTER HSA
11/15/19 9632 0300 GENERAL 9632	FINANCIAL CENTER CREDIT UNION	1,062.48	1,062.48
9632	VOUCHER TOTAL	רא אא	EA AA GESS PADROTERS FINANCIAL SRVS
11/15/19 9633 9283 403B FIRST INVESTORS	FORESTERS FINANCIAL SERVICES	50.00	75.53 9634 VIGO CNTY GARNISHMENT
11/15/19 9634 9310 GARNISHMENTS	VIGO COUNTY CLERK	13.33	364.17 89173 CHILD SUPPORT PAYMENTS
11/15/19 89173 9320 CHILD SUPPORT MARION C	STATE CENTRAL COLLECTIONS UNIT	364.17	304.17 031/3 CHILD SOLLOW ENGINEERS
11/15/10 02174 0101 CENERAL	INPRS	4,497.49	75.53 9634 VIGO CNTY GARNISHMENT 364.17 89173 CHILD SUPPORT PAYMENTS 4,497.49 92174 OCTOBER 2019 PERF 1,417.53 92174 OCTOBER 2019 PERF 1,279.02 92174 OCTOBER 2019 PERF 7,194.04
11/15/19 92174 0300 GENERAL	INPRS	1,417.53	1,417.55 92174 OCTODER 2019 FERE
11/15/19 92174 9260 PUBLIC EMPLOYEES' RETI	INPRS	1,279.02	1,279.02 92174 OCTOBER 2019 PERF
02174	VOUCHER TOTAL	7,194.04	7,194.04
11/15/10 04174 0101 CENEDAL	INDIANA STATE TEACHER	3,113.40	3,113.40 94174 OCTOBER 2019 TRF
11/13/13 341/4 UIUI GENEENAD	VALTC	2,177.61	2,177.61 97200 VALIC 401A ER-PAID
92174 11/15/19 94174 0101 GENERAL 11/15/19 97200 0101 GENERAL 11/15/19 97200 0300 GENERAL 11/15/19 97200 9281 403B VALIC 97200	WALTC	449.63	449.63 97200 VALIC 401A ER-PAID
11/15/19 9/200 0300 GENERAL	WALTO	2,080,95	2,080.95 97200 ANNUITIES
11/15/19 9/200 9281 403B VALIC	VOUCHER TOTAL	4,708.19	4,708.19
97200	TAMBOARI BEVENUE CEDVICE	6.086.78	6.086.78 99200 10/04/19 TAX PAYMENT
11/15/19 99200 0101 GENERAL	IMIEKWAD KEARUAR SEKATOR	767.65	767.65 99200 10/04/19 TAX PAYMENT
11/15/19 99200 0300 GENERAL	INTERNAL PRIERRE CEDATOR	4,497.49 1,417.53 1,279.02 7,194.04 3,113.40 2,177.61 449.63 2,080.95 4,708.19 6,086.78 767.65 245.29	245,29 99200 10/04/19 TAX PAYMENT
11/15/19 99200 5218 PART B (611) FY2018	INTERNAL REVENUE SERVICE	7 572 63	7.572.63 99200 10/04/19 TAX PAYMENT
11/15/19 99200 9210 FEDERAL TAX	INTERNAL REVENUE SERVICE	7 000 79	7 099 72 99200 10/04/19 TAX PAYMENT
11/15/19 99200 9220 SOCIAL SECURITY	INTERNAL REVENUE SERVICE	1,055.14	21 772 07
97200 11/15/19 99200 0101 GENERAL 11/15/19 99200 0300 GENERAL 11/15/19 99200 5218 PART B (611) FY2018 11/15/19 99200 9210 FEDERAL TAX 11/15/19 99200 9220 SOCIAL SECURITY 99200	VOUCHER TOTAL	ZI, 11Z.UI	21,112.01
	PRE-WRITTEN TOTAL	38,374.13	
		200.00	300.00 9639 SLP MENTOR
11/15/19 9639 0101 GENERAL	STEPHANIE BOREM	300.00	530.37 9640 GAS
11/15/19 9640 0101 GENERAL	CITIZENS ENERGY GROUP-GAS	530.37	850.49 9641 WATER
11/15/19 9641 0101 GENERAL	STEPHANIE BOREM CITIZENS ENERGY GROUP-GAS CITIZENS ENERGY GROUP	850.49	2,195.11 9642 JANITORIAL SUPPLIES
11/15/19 9642 0101 GENERAL	CITIZENS ENERGY GROUP ECONOMY PLUS JANITORIAL	2,195.11	2,195.11 9642 JAMITOKIAN SOTTHIBS 112.00 9643 POOL TESTING
11/15/19 9643 0300 GENERAL	ASTBURY GABRIEL CORPORATION	112.00	IIZ.UU 9043 PUUD IBSIING
11/15/19 9644 0300 GENERAL	H7 TECHNOLOGIES	9,150.00	9,150.00 9644 IT SUPPORT
11/15/19 9645 0101 GENERAL	INDIANAPOLIS POWER & LIGHT	5,493.00	5,493.00 9645 ELECTRIC
11/15/19 9646 0300 GENERAL	ECONOMY PLUS JANITORIAL ASTBURY GABRIEL CORPORATION H7 TECHNOLOGIES INDIANAPOLIS POWER & LIGHT KOORSEN FIRE & SECURITY OFFICE DEPOT	480.00	480.00 9646 ANNUAL BILLING
11/15/19 9647 0101 GENERAL	OFFICE DEPOT	- 47.89	47.89 9647 SUPPLIES
11/13/19 304/ OTOL GEMEDAL	POWERSCHOOL GROUP, LLC	1,092.73	1,002,10 0010 0100000
11/15/19 9648 0101 GENERAL	PURE WATER PARTNERS	139.90	139.90 9649 WATER
11/15/19 9649 0101 GENERAL	RAY'S TRASH SERVICE, INC.	325.49	325.49 9650 TRASH
11/15/19 9650 0300 GENERAL	RICOH USA, INC	756.32	756.32 9651 COPIES
11/15/19 9651 0101 GENERAL	WELLS FARGO	82.00	82.00 9652 CARTRIDGES
11/15/19 9652 0101 GENERAL	WELLS FARGO	514.05	514.05 9652 LEASE
11/15/19 9652 0300 GENERAL	VOUCHER TOTAL	596.05	596.05
9652		4.60	4.60 9653 DIVIDERS
11/15/19 9653 0101 GENERAL	SCHOOL SPECIALTY, INC	4,171.88	4,171.88 9654 ENCORE
11/15/19 9654 0101 GENERAL	TEACHTOWN A DIV JIGSAW LEARN	37.09	37.09 9655 MILEAGE
11/15/19 9655 0101 GENERAL	DENISE WHITTEMORE	1,475.00	1,475.00 9656 SLP SUPERVISOR
11/15/19 9656 0101 GENERAL	COLLEEN HANNIGAN ZILLICH	27,757.92	27 210400 - 2777 - 21
	NEW VOUCHERS TOTAL	21,131.32	
	CDAND MOMAT	66,132.05	
	GRAND TOTAL	00,132,03	

FUND	DESCRIPTION	VOUCHER TOTAL	
101 300	GENERAL GENERAL PART B (611) FY2018 FEDERAL TAX SOCIAL SECURITY PUBLIC EMPLOYEES' RETIREMENT FLEXIBLE SPENDING ACCOUNTS 403B VALIC 403B FIRST INVESTORS GARNISHMENTS CHILD SUPPORT MARION COUNTY	33,864.15 13,466.34 245.29 7,572.63 7,099.72 1,279.02 34.25 2,080.95 50.00 75.53 364.17 66,132.05	
	GRAND TOTAL	00/ 100100	

ALLOWANCE OF VOUCHERS

I HEREBY CERTIFY THAT EACH OF THE ABOVE LISTED VOUCHERS AND THE INVOICES, OR BILLS ATTACHED THERETO,

ARE TRUE AND CORRECT AND I HAVE AUDITED SAME IN ACCORDANCE WITH IC 5-11-10-1.6. OCTOBER 3/5/, 2019 DR. SCOTT CARSON EXECUTIVE DIRECTOR
WE HAVE EXAMINED THE VOUCHERS LISTED ON THE FOREGOING ACCOUNTS PAYABLE 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 \$ 114, 667.93 DATED THIS 31 ST DAY OF CCTOBER 2019.
APPROVED BY THE STATE BOARD OF ACCOUNTS JULY 2011 FOR: SOUTHSIDE SPECIAL SERVICES OF MARION COUNTY
DR. PAUL KAISER PRESIDENT MR. PATRICK MADES VICE PRESIDENT DR. MATTHEW DRUSIECKI SECRETARY
MEMBER

FOR THE PERIOD OF 10/15/19 - 10/31/19

DATE V	AUGUPD			VOUCHER	AMOUNT		
			NAME OF CLAIMANT	THUOMA	ALLOWED	NO.	MEMORANDUM
FILED	NO. FUND		MAIN OF ODISTRIKA				
11/05/10	0.000 0000	FLEXIBLE SPENDING ACCO	JAC ENTERPRISES. LLC	34.25	34.25		BENEFITS WORKSHOP
			FINANCIAL CENTER CREDIT UNION	833.32	833.32	9636	FINANCIAL CENTER HSA
	9636 0101	ODIVERSE	FINANCIAL CENTER CREDIT UNION	249.99	249.99	9636	FINANCIAL CENTER HSA
11/05/19	9636 0300	GENERAL	VOUCHER TOTAL	1,083.31	1,083.31		
	9636	AAAD DIDAW INUDAWADO	FORESTERS FINANCIAL SERVICES	50.00	50,00	9637	FORESTERS FINANCIAL SRVS
11/05/19	9637 9283	403B FIRST INVESTORS	VIGO COUNTY CLERK	75.53	75.53		VIGO CNTY GARNISHMENT
11/05/19	9638 9310	Of It ((I O III I I I I I I	LIFE INSURANCE COMPANY OF	260.34	260.34		CIGNA LTD INSURANCE
11/05/19	9657 0101	02:12:4	LIFE INSURANCE COMPANY OF	33.96	33.96	9657	CIGNA LTD INSURANCE
11/05/19	9657 0300		LIFE INSURANCE COMPANY OF	164.04	164.04	9657	CIGNA INSURANCE COMPANY
11/05/19		STD INSURANCE	VOUCHER TOTAL	458.34	458.34		
	9657			432.40	432.40	9658	UNUM LTC INSURANCE
	9658 0101		UNUM LIFE INSURANCE COMPANY	153.60	153.60	9658	UNUM LTC INSURANCE
11/05/19	9658 0300	GENERAL	UNUM LIFE INSURANCE COMPANY	586.00	586.00	,,,,,	-
	9658		VOUCHER TOTAL	1,535.29	1 535 29	81096	SEPT 2019 P-CARD
	81096 0101		REGIONS PURCHASE CARD	1,258.42	1 258 42	81096	SEPT 2019 P-CARD
11/05/19	81096 0300	Q.M.1.0	REGIONS PURCHASE CARD	1,680.05	1 680 05	81096	SEPT 2019 P-CARD
11/05/19	81096 9801	RLC P-CARD	REGIONS PURCHASE CARD		4,473.76		, ober zour r
	81096		VOUCHER TOTAL	4,473.76 364.17	36/ 17	89174	CHILD SUPPORT PAYMENTS
11/05/19	89174 9320	CHILD SUPPORT MARION C	STATE CENTRAL COLLECTIONS UNIT		30 202 33	91104	VSP VISION INSURANCE
11/05/19	91104 0101	GENERAL	HOOSTER SCHOOF BENEFIT IKO21	33,292.33	1 607 13	9110	VSP VISION INSURANCE
11/05/19	91104 0300) GENERAL	HOOSIER SCHOOL BENEFIT TRUST	4,607.13 1.00	1 00	9110	SUNLIFE LIFE INSURANCE
11/05/19	91104 9270	LIFE INSURANCE	HOOSIER SCHOOL BENEFIT TRUST		5 130 09	0110	4 MONTHLY HH PREMIUMS
11/05/19	91104 927	HH INSURANCE	HOOSIER SCHOOL BENEFIT TRUST	5,130.08	250.00	0110	4 MONTHLY DTL PREMIUM
11/05/19	91104 927	2 DENTAL INSURANCE	HOOSIER SCHOOL BENEFIT TRUST	350.14	140 70	1 0110	4 MONTHLY VISION PREMIUM
11/05/10	01104 927	R VISTON INSURANCE	HOOSTER SCHOOP BEMELLE IVOST	142.70	192.70	0110	4 HOOSIER SCHOOL VOL LIFE
11/05/19	91104 927	6 VOLUNTARY LIFE INSURAN	HOOSIER SCHOOL BENEFIT TRUST	138.40	43,661.78		4 HOOTHK BOHOOD 10D 250-
	91104		VOUCHER TOTAL	43,661.78	43,001.70) 2 0217	5 OCTOBER 2019 PERF
11/05/19	92175 010	1 GENERAL	INPRS	4,202.23	1 /1/2 02 . 2) 2411 0217	5 OCTOBER 2019 PERF
11/05/19	92175 030	O GENERAL	INPRS	1,416.01	1,410.V.	1 0017 1 0017	5 OCTOBER 2019 PERF
11/05/19	92175 926	O PUBLIC EMPLOYEES' RET	I INPRS	1,199.57			3 OCTOBER 2019 LERG
,,	92175		VOUCHER TOTAL	6,817.81	6,817.83	L ጎ በለ17	5 OCTOBER 2019 TRF
11/05/19	94175 010	1 GENERAL	INDIANA STATE TEACHER	3,554.80	3,334.0	J 791 <i>i</i> 1 0720	1 VALIC 401A ER-PAID
11/05/19	97201 010	1 GENERAL	VALIC	2,177.61	2,111.0	1 3120 2 0720	11 VALIC 401A ER-PAID
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12,00,	97201		VOUCHER TOTAL	4,708.19	4,708.1	ኃ ለ ለበ10	O STATE&LOCAL WITHHOLDING
11/05/19		O STATE TAX	INDIANA DEPARTMENT OF REVENUE	5,951.60	5,951.0	0 0010	OO STATE&LOCAL WITHHOLDING
11/05/19	9 98100 924	O COUNTY TAX	INDIANA DEPARTMENT OF REVENUE	3,142.08			10 PINIDATOCHU MILIMODOTHO
#1,00,1.	98100		VOUCHER TOTAL	9,093.68	9,093.6	ዕ ጎ ለሰባ፣	1 10/10/10 MAV DAVMENT
11/05/19	9 99201 010	1 GENERAL	INTERNAL REVENUE SERVICE	5,865.63	5,865.6	3 9921	01 10/18/19 TAX PAYMENT
11/05/1	9 99201 030	O GENERAL	INTERNAL REVENUE SERVICE	766.62	166.6	2 9920	01 10/18/19 TAX PAYMENT
11/05/1	9 99201 52	8 PART B (611) FY2018	INTERNAL REVENUE SERVICE	164.01	164.0	11 992	01 10/18/19 TAX PAYMENT
11/05/1	9 99201 92	O FEDERAL TAX	INTERNAL REVENUE SERVICE	7,327.66	7,321.6	0 992	01 10/18/19 TAX PAYMENT
11/05/1	9 99201 92	20 SOCIAL SECURITY	INTERNAL REVENUE SERVICE	6,796.26			01 10/18/19 TAX PAYMENT
TILOULT	99201		VOUCHER TOTAL	20,920.18	20,920.1	.წ	
	7 J C V J		PRE-WRITTEN TOTAL	95,881.80			
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11/05/1	9 9659 01	01 GENERAL	CHRISTOPHER R AKERS	4,320.00	4,320.	JU 96	59 BEHAVIOR SPECIALIST
TT/ 00/ T	.V روپر ر		•				

FOR THE PERIOD OF 10/15/19 - 10/31/19

DATE V FILED	OUCHER NO. FUND	NAME OF CLAIMANT	VOUCHER AMOUNT	AMOUNT ALLOWED		MEMORANDUM
11/05/19 11/05/19 11/05/19 11/05/19 11/05/19 11/05/19 11/05/19 11/05/19 11/05/19 11/05/19 11/05/19	9660 0300 GENERAL 9661 0101 GENERAL 9662 0101 GENERAL 9663 0300 GENERAL 9664 0101 GENERAL 9665 0300 GENERAL 9666 0101 GENERAL 9667 0300 GENERAL 9668 0101 GENERAL 9669 0101 GENERAL 9670 0300 GENERAL	AT&T AT&T BUCKEYE INTERNATIONAL, INC CAHILL'S LAWN & LANDSCAPE, INC ECONOMY PLUS JANITORIAL ASTBURY GABRIEL CORPORATION INDIANAPOLIS POWER & LIGHT K&M FENCE AE BOYCE COMPANY INC. NCS PEARSON INC PRO SERIES EQUIPMENT	851.20 1,072.34 649.45 263.88 108.00 168.00 4,405.06 583.00	851.20 1,072.34 649.45 263.88 108.00 168.00 4,405.06 583.00 484.50 3,813.60 1,626.99	9660 9661 9662 9663 9664 9665 9666 9667 9668 9670	MEMORANDUM INTERNET PHONE SERVICE JANITORIAL SUPPLIES CARE PROGRAM STEP 4 JANITORIAL SUPPLIES POOL TESTING ELECTRIC GATE DOCULIVERY GRAD POINT LIFT REPAIR WATER
11/05/19	9671 0101 GENERAL 9672 0300 GENERAL 9673 0101 GENERAL	PURE WATER PARTNERS ROGERS & CO OF INDIANA, INC AMANDA SPARKS NEW VOUCHERS TOTAL GRAND TOTAL	291.16 9.05 18,786.13	291.16	9672	POOL SUPPLIES MILEAGE

FUND	DESCRIPTION	VOUCHER TOTAL	
101	GENERAL	67,155.85	
300	GENERAL	12,719.59	
5218	PART B (611) FY2018	164.01	
9210	FEDERAL TAX	7,327.66	
9220	SOCIAL SECURITY	6,796.26	
9230	STATE TAX	5,951.60	
9240	COUNTY TAX	3,142.08	
9260	PUBLIC EMPLOYEES' RETIREMENT	1,199.57	
9270	LIFE INSURANCE	1.00	
9271	HR INSURANCE	5,130.08	
9272	DENTAL INSURANCE	350.14	
9273	VISION INSURANCE	142.70	
9276	VOLUNTARY LIFE INSURANCE	138.40	
9277	STD INSURANCE	164.04	
9280	FLEXIBLE SPENDING ACCOUNTS	34.25	
9281	403B VALIC	2,080.95	
9283	403B FIRST INVESTORS	50.00	
9310	GARNISHMENTS	75.53	
9320	CHILD SUPPORT MARION COUNTY	364.17	
9801	RLC P-CARD	1,680.05	
	GRAND TOTAL	114,667.93	

Invoice

5391 Shelby Street

Indianapolis, IN 46227

Phone: 317-789-1622 Fax: 317-780-4268 Date:

To:

For:

Parent/Guardian of

2019/2020 School Fees

Behavior Education Elementary

Consumable Classroom Materials – student incentives	\$75.00
Technology Fee – Programs & digital curriculum used in classroom or computer labs	\$25.00
TOTAL DUE	\$100.00
TOTAL DOL	

All payments are due by **August 31, 2019.** Please contact Teresa Ruark, RLC Treasurer, at 789-1622 to set up a payment plan if necessary.

Invoice

5391	Shelby	Street

Indianapolis, IN 46227

Phone: 317-789-1622 Fax: 317-780-4268 Date:

To:

For:

Parent/Guardian of

2019/2020 School Fees

Behavior Education Middle/High School

Rate

Consumable Classroom Materials – student incentives	\$20.00
	\$130.00
Technology Fee – Programs & digital curriculum used in classroom or computer labs	\$150.00
TOTAL	\$150.00

All payments were due by **August 31, 2019.** Please contact Teresa Ruark, RLC Treasurer, at 789-1622 to set up a payment plan if necessary.

Invoice

5391 Shelby Street

Indianapolis, IN 46227

Phone: 317-789-1622 Fax: 317-780-4268 Date: September 26, 2019

To:

For:

Parent/Guardian of

2019/2020 School Fees

Lifeskills – Career & Community

Classroom Materials – student incentives	\$100.00
Technology Fee – Programs & curriculum used in classroom or computer labs	\$50.00
TOTA	L \$150.00

All payments were due by August 31, 2019. Please contact Teresa Ruark, RLC Treasurer, at 789-1622 to set up a payment plan if necessary.

Invoice

5391 Shelby Street

Indianapolis, IN 46227

Phone: 317-789-1622 Fax: 317-780-4268

For:

To:

Parent/Guardian of

2019/2020 School Fees

Date: September 26, 2019

Lifeskills - Elementary and Middle School

Classroom Materials – consumable supplies, curriculum materials	\$50.00
Technology Fee – Programs & curriculum used in classroom or computer labs	\$100.00
TOTAL	\$150.00

All payments were due by August 31, 2019, unless payments have been arranged. Please contact Teresa Ruark, RLC Treasurer, at 789-1622 to set up a payment plan if necessary.

Invoice

5391 Shelby Street

Indianapolis, IN 46227

Phone: 317-789-1622 Fax: 317-780-4268 Date:

To:

For:

Parent/Guardian of

2019/2020 School Fees

MOVE Classrooms

Rate

Classroom Materials – consumable supplies, curriculum materials		\$120.00
Technology Fee – programs & curriculum used in classroom		\$30.00
	TOTAL DUE	\$150.00

All payments were due August 31, 2019 unless a payment plan was set up. Please contact Teresa Ruark, RLC Treasurer, at 789-1622 to set up a payment plan if necessary.

Agreement

between

The Governing Board

of the

Southside Special Services

of

Marion County

and

The Southside Special Services

Education Association

July 1, 2019-June 30, 2020

PREAMBLE

This agreement is made and entered into this 5th day of November 2019 by and between the Governing Board of the Southside Special Services of Marion County ("SSSMC" or "Board") and the Southside Special Services Education Association (SSSEA).

ARTICLE I RECOGNITION

SSSMC recognizes the rights guaranteed to certificated employees by law and hereby recognizes the SSSEA as the exclusive representative of all certificated employees as defined under Ind. Code § 20-29-2-4 under a valid Regular or Temporary Teacher's Contract ("certificated employees") with SSSMC, but excluding all Central Office Administrators.

ARTICLE II <u>ABSENCE AND LEAVE POLICY</u>

Section 1 - Leave Days Granted Annually

- A. Each certificated employee shall be granted fifteen (15) paid leave days per year. Any new hire shall use one (1) of his/her paid leave days for the purpose of becoming a member of the Catastrophic Illness and Injury Leave Bank as set forth in Article II, Section 3.
- B. No more than 3 consecutive paid leave days are permitted without providing medical documentation.
- C. A certificated employee may not use paid leave days for the purpose of extending the break or for personal convenience, immediately before or after an extended school break, i.e. Fall, Winter, Spring, or Summer; unless authorized by the Executive Director.
- D. Any unused paid leave days shall be rolled over into the certificated employee's accumulated paid leave days at the end of each school year. Additional paid leave days will be granted at the discretion of the Board or as required by state law.
- E. A certificated employee who is pregnant may use any available paid leave days for any medically-related absences during pregnancy.

- F. A certificated employee who accepts less than a full-time position and a new hire that is less than a full-time certificated employee will receive pro-rata paid leave days.
- A certificated employee may use, from his/her available accumulated paid leave days, a maximum of ten (10) days per year as family illness days. All requests for such leave must be in writing and the certificated employee must specify his/her relationship to the family member for whom the family illness day is being requested and given to their supervisor. Family members for whom these days may be taken include any individual living within the household of the certificated employee. Also included are certificated employee's spouse/domestic partner; child; father; mother; daughter-in-law; son-in-law; father-in-law; mother-inlaw; brother sister; brother-in-law (certificated employee's spouse's sibling or certificated employee's sibling's spouse); sister-in-law (certificated employee's spouse's sibling or certificated employee's sibling's spouse); grandparent; and grandchild, living within or outside the household of the certificated employee. Such leave will be granted without loss of compensation. Certificated employee may, if needed, make a request to the Executive Director of SSSMC for additional family illness leave days, which shall, if granted, also be deducted from the certificated employee's available accumulated paid leave days.

<u>Section 2 - Sick Leave Transfer from Other School Corporations:</u>

Certificated employees who have accumulated sick leave in another Indiana school corporation and who are transferring into the SSSMC for the first time can request to transfer all of that accumulated sick leave to SSSMC.

Section 3 –Paid Leave Reinstatement:

A certificated employee who has previously been employed with the SSSMC and is rehired shall have paid leave previously accumulated in the SSSMC fully reinstated, on his/her first day of service.

Section 4. Catastrophic Illness and Injury Leave Bank

A. Membership

A Catastrophic Illness and Injury Leave Bank will be established by the SSSEA for all eligible certificated employees who voluntarily contribute one (1) paid leave day to the bank.

B. Guidelines

- 1. The voluntary Catastrophic Illness and Injury Leave Bank (Bank) permits a certificated employee who has donated one paid leave day to the bank (Member) who is absent from assigned duties due to catastrophic personal illness, unforeseen surgery or debilitating injury and who has utilized all paid leave, and all other paid leave benefits of whatever nature, to petition for leave days from the Bank under the following conditions: A Member must make his/her contribution of a paid leave day within the later of first thirty (30) days of the school year, the first thirty (30) days of employment, or within the first thirty (30) days following the ratification of this Agreement.
- 2. It is the intent of the Bank to build a reserve of leave days equal to 3 times the number of members in the Bank. This reserve will be built over a minimum time of 3 years. After this time, should the Bank determine that sufficient days exist no annual contributions will be solicited from current Bank members.
- 3. If the reserve of days becomes depleted in the course of a school year, additional contributions may be requested from all Members.
- 4. If a Member fails to make an additional contribution when requested, his/her membership shall end, his/her contribution will be forfeited, and access to the Bank shall be terminated.
- 5. If the Member is currently accessing the Bank at the time an additional contribution is requested, he/she shall contribute an additional day at the beginning of the next school year. This contribution shall be made even if the Member determines that they no longer wish to participate in the Bank and shall be in addition to any other voluntary contribution.
- 6. Any certificated employee who is granted days from the Bank shall repay those days at a rate of two (2) days per year until all Bank days are repaid. If the Member was using days from the Bank at the time an additional contribution was requested, that day shall also be contributed. These repayment days shall be automatically deducted at the time any leave days are credited to the Member by SSSMC. Should a Member sever employment and not have fully repaid Bank days, the Member shall forfeit any paid leave days necessary to repay the Bank.
- 7. The SSSEA shall maintain appropriate records of all Bank contributions, requests, determinations and appropriate dates.
- 8. Contributions to the Bank, use of days by a Member and all other relevant information shall be communicated to the Director of the SSSMC or

- his/her designee in a timely manner. A copy of all Bank records shall be provided to the Director of the SSSMC.
- 9. Only those certificated employees who voluntarily contribute to the Bank may request and receive benefits.
- 10. Unused days in the Bank will be carried forward into the next school year.
- 11. Bank days may be accessed and allocated only after the Member's own paid leaves days are exhausted.
- 12. Benefits from the Bank can only be used for the certificated employee's personal catastrophic illness, unforeseen surgery or debilitating injury which is anticipated to extend beyond five (5) work days. After an absence of five (5) or more consecutive, uncompensated work days for the same catastrophic illness, unforeseen surgery or injury, the Member may apply to receive a maximum of thirty (30) days from the Bank.
- 13. Where appropriate, FMLA leave will be charged concurrently with use of Bank days.
- 14. Bank days shall only be used for the absence of the Member and shall accumulate only for the overall Bank and not as part of an individual member's leave allotment.
- 15. Members may access the Bank only one time during any one school year. Once a Member becomes eligible for benefits under the long-term disability (LTD) plan, all Bank benefits and use of awarded Bank days end.
- C. Catastrophic Illness and Injury Bank Committee
 - 1. The Catastrophic Illness and Injury Bank shall be administered by a Committee consisting of the President of the SSSEA or his/her designee, and two Members of the Bank elected by fellow Members.
 - 2. The member requesting days from the Bank shall make the request in writing to the President of the SSSEA. An application for Bank days must be received by the President of the SSSEA ten (10) days prior to the anticipated use of the Bank for any prearranged absence and no more than ten (10) days after the use of the leave days if not prearranged. In the event the Member is incapacitated, the application for Bank days may be submitted by the certificated employee's designated representative.

- 3. All requests to the Bank must be accompanied by a physician's signed statement confirming the catastrophic illness, unforeseen surgery, or injury, dates of service, and anticipated return to work date.
- 4. The Committee shall make a determination within five (5) school days of a properly submitted request. The Committee shall notify the Member in writing at the earliest possible time following a determination. Benefits will be paid only if the Committee decides in its discretion the applicant is entitled to them.
- 5. The Committee shall maintain the right to modify or change a determination in the event additional information becomes known or available.
- 6. No more than thirty (30) Bank days will be granted in response to one application.
- 7. The Committee may consider requests for single or partial days for scheduled ongoing medical treatment related to a catastrophic illness, unforeseen surgery, or injury. Additional medical documents including the reasons necessitating the scheduling of such treatment during the work day will be required.

D. Appeals Committee

- All decisions of the Committee may be appealed to the Appeals
 Committee which shall consist of the Committee and two additional
 Members of the Bank one of whom shall be appointed by the President of
 the SSSEA and one of who shall be appointed by the Executive Director of
 SSSMC.
- 2. The decision of the appeals committee shall be conclusive and final. All certificated employees and Members specifically acknowledge the finality of the Appeals Committee's decision for all purposes including, without limitation, that it shall not be grieved under this Negotiated Agreement.

E. Members Agreement and Indemnifications

 In consideration of the benefits of participating in the Bank, each applicant for membership in the Bank and for leave days from the Bank shall, as a condition of such application, agree in writing substantially as follows:

"I specifically acknowledge and agree that the granting of leave days from the Catastrophic Leave and Illness Bank shall be at the sole discretion of the Bank Committee or, in the event of an appeal, the Appeals Committee, and that all decisions of the Catastrophic Leave and Illness committee or the Appeals Committee will be final and binding. I further agree to abide by such decisions and to indemnify and hold harmless the SSSEA, SSSMC, the Catastrophic Illness and Injury Bank, the Appeals Committee, and all of their representatives and agents for any loss, costs, expenses, and/or damages they may sustain as a result of any claim or legal proceedings I may bring against any of them with respect to a decision made by any of them concerning the application."

- 2. When a Member donates paid leave days to the Bank, he/she agrees to the published rules for administration of the Bank and agrees to abide by the published rules.
- 3. The SSSEA agrees to indemnify and hold harmless SSSMC for any and all claims, losses, costs, expenses, damages, or legal proceedings brought as a result of administration of the Bank.

<u>Section 5</u> - <u>Bereavement Leave</u>:

Bereavement leave will be granted without loss of compensation and will not be charged against the certificated employee's paid leave days. Bereavement leave days do not accumulate from year to year.

Bereavement leave shall be granted for death in the certificated employee's immediate family beginning on the day of death and for a period not to exceed five (5) work days taken within 30 days of the date of death. Immediate family in this section is interpreted to mean the certificated employee's spouse/domestic partner, child, grandchild, parent, grandparent, sibling, father-in-law, mother-in-law, son-in-law, daughter-in-law, brother-in-law, sister-in-law, step-parent, step-child and a relative or legal dependent living with the certificated employee. Bereavement leave for the death of a relative by marriage beyond those listed above, including the certificated employee's children's grandparents, shall be granted not to exceed two (2) days. Bereavement leave for death of an aunt, uncle, niece, nephew, or cousin related either within the family or by marriage shall be granted one (1) day.

Section 6—Personal Injury While Employed

In the event a certificated employee is required to be absent due to an injury sustained as a result of an assault and/or battery in the course of employment, which is determined to be compensable under Indiana workers' compensation laws, while a certificated employee is properly discharging his/her duties, the certificated employee shall receive the difference between his/her daily amount (certificated employee's daily rate) paid through workers' compensation and the certificated employee's daily rate for a period up to one hundred eighty-three (183)* contract days of absence. The absence caused by an assault and/or battery, for a period up to one hundred eighty-three (183)* school days described above, shall not be charged

against the certificated employee's paid leave. The Board may require an independent medical or psychological examination at the Board's expense if there is a question as to the condition of the certificated employee at any time. A certificated employee must comply with Indiana's workers' compensation reporting provisions in order to receive the benefits enumerated under workers' compensation.

*The number shall be adjusted accordingly with any change in the length of the school year for any certificated employee.

Section 7 Maternity and Adoption Leave and Benefit:

Maternity/adoption leave and maternity/adoption benefits will be defined as follows:

- A. Maternity/adoption leave utilizes the certificated employee's available paid leave days. A separate maternity/adoption benefit does not utilize the certificated employee's paid leave days.
- B. Maternity/adoption leave commences the day following the birth or placement of the certificated employee's child and continues for six (6) weeks. During this 6-week period, the certificated employee may use up to thirty (30) available paid leave days and/or utilize the 10-day paid maternity/adoption leave benefit described in paragraph C below. Any changes to the commencement date must be approved by the Executive Director of SSSMC upon submitting a formal written request.
- C. The maternity/adoption benefit consists of ten (10) consecutive paid days, which shall not be charged against a certificated employee's available paid leave. This benefit must be used by the certificated employee during the 6-week period described in paragraph B above.
- D. If the certificated employee is medically disabled, as verified by a physician's statement, and exhausts the leave and benefit outlined in this Section, the certificated employee may use more of her available paid leave days to cover the time period of the disability.
- E. Uncompensated maternity leave may continue for up to one (1) year following the birth of the certificated employee's child. The certificated employee granted such a leave shall have the right to apply to maintain, at her sole expense (paying the full premium), existing insurance in which she was enrolled at the time of the request. * A certificated employee on uncompensated leave is required to return within one (1) year following the birth of the child.

F. The certificated employee granted such a leave will be returned to the same assignment or one which is comparable and equal in benefits as determined by the administration.

*If a certificated employee applies and qualifies for FMLA leave, the SSSMC will maintain its premium contribution to insurance plans during the 12 week FMLA period.

Section 8—Paternity Leave:

Paternity leave and paternity benefits will be defined as follows:

- A. Upon the birth of a child, the father who is a certificated employee shall be granted ten (10) consecutive paid days of paternity leave. These days will not be charged against the certificated employee's available paid leave and shall commence on the day following the birth of the certificated employee's child.
- B. It is understood that in the event of a birth over the summer break, the granting of ten (10) paternity leave days will not be made available unless the number of allowable paternity leave days overlaps with the beginning of the next school year.
- C. Uncompensated paternity leave may continue for up to one (1) year following the birth of the certificated employee's child. The certificated employee granted such a leave shall have the right to apply to maintain, at his sole expense (paying the full premium), existing insurance in which he was enrolled at the time of the request. * A certificated employee on uncompensated leave is required to return within one (1) year following the birth of the child.
- D. The certificated employee granted such a leave will be returned to the same assignment or one which is comparable and equal in benefits as determined by the administration.

Section 9 - Paid Attendance in Conferences of Local, State, and National **Organizations**

A. The Board encourages certificated employees to participate actively in local, state, and national organizations by providing arrangements for a certificated employee to attend the meetings of such professional organizations if the certificated employee has membership in the organization which sponsors the meeting. It will be the final prerogative of the Executive Director of SSSMC or his/her designee to determine who will be eligible to attend and/or be reimbursed for state and national meetings.

B. Requests for permission to attend professional meetings must be made on the SSSMC Professional Development Request Form.

ARTICLE III

PROFESSIONAL GRIEVANCE PROCEDURE

Article III GRIEVANCE PROCEDURE

Section 1 - Purpose:

- A. The purpose of this grievance procedure is to secure equitable solutions at the lowest possible administrative level or at the earliest possible stage of a violation or claimed misapplication of a specific Article, Section, or Appendix of this Agreement. Both parties agree that personal information revealed through these procedures shall be kept confidential at each level of the procedure.
- B. Nothing contained herein shall be construed as limiting the right of any certificated employee having a grievance to discuss the problem with the Principal or any appropriate member of the administrative team without recourse to the formal grievance procedure.

Section 2 - Definitions:

- A. A "grievance" is a claim submitted by an aggrieved certificated employee or the Association, reporting an alleged violation or claimed misinterpretation of a specific Article, Section, or Appendix of this Agreement.
- B. The "Grievance Report" form, used in the formal grievance procedures can be found in Appendix of this Agreement.
- C. A "grievant" shall be defined as a certificated employee or the Association making a claim by filing a grievance.
- D. A "day" when used in this Article shall mean a certificated employee's working day as that term is defined in the school calendar. During the summer recess, the term "day" shall mean weekday (Monday through Friday) except legal holidays. The number of days indicated at each level shall be considered as maximum, and every effort shall be made to expedite the process.

<u>Section 3 - Time Provisions Relating to the Grievance Procedure:</u>

- A. A grievance arising prior to the effective date of this Agreement or after the termination date of this Agreement shall not be processed.
- B. If a grievance is filed so that sufficient time cannot be provided for all steps of the procedure before the last day of the school term before this Agreement is ended, the grievance shall be resolved under the terms of this Agreement and this Article and not under any succeeding Agreement.
- C. A grievance must be processed within the time limits set forth in the grievance procedures unless the time limits are extended by written agreement signed by authorized representatives of both parties.
- D. If there is a failure at any step to communicate the decision on a grievance within the specified time limit, the grievant shall then have the right to appeal to the next step of the procedure.

<u>Section 4 - General Provisions Relating to the Grievance Procedure:</u>

- A. No reprisal of any kind shall be taken by or against any participant by reason of participation in the grievance procedure.
- B. All documents, communications, and records dealing with the processing of a grievance shall be filed separately from the personnel file of the grievant.
- C. A grievant, at his/her request, may be accompanied by a representative of the Association at all steps in the grievance procedure.
- D. A grievant may present a grievance through the Association; the Association, as exclusive representative, may have a representative present at all steps in the formal grievance procedure.
- E. No grievant, witness, or representative of the grievant who is employed by the corporation shall incur loss of salary as a direct result of participation in the grievance procedure.
- F. All formal grievances and the decisions shall be in writing.
- G. All written grievances and appeals of grievances must be signed by the grievant.
- H. All decisions rendered must be signed by the administrator making the decision.

I. The formal grievance procedures shall be used only one (1) time for each grievance. Once a decision has been rendered, the grievant, if dissatisfied, may not engage the procedures a second time.

Section 5 - Grievance Procedure:

A. Informal Grievance Procedure

- 1. An individual certificated employee may present his/her grievance to the employer and have the grievance adjusted without the intervention of the Association or its representatives as long as the adjustment is not inconsistent with the terms of this Agreement.
- 2. Before submitting a written grievance, the grievant shall attempt to resolve the grievance informally by contacting the Principal or his/her designee within twenty (20) working days of the time that the grievant knew, or reasonably should have known, of the grievance. The grievant and the person so contacted shall discuss the alleged grievance at a mutually acceptable time and place.
- 3. Within ten (10) working days after the oral presentation of the grievance, the person so contacted shall orally answer the grievant.

B. Formal Grievance Procedure - Step One

- 1. If resolution is not achieved through discussion with the Principal or his/her designee, a formal written grievance may be presented. The Grievance Report, must be received by the Principal within ten (10) working days following the act or oral response cited in Article VII, Section 7, Subsection A, Item 3 of this Agreement.
 - a. The Grievance Report Form shall name the grievant(s) involved, shall state the specific facts giving rise to the grievance, shall identify by appropriate reference all provisions of the Agreement alleged to be violated, and shall indicate the specific relief requested.
 - If the Grievance Report Form is not filed with the Principal within ten (10) working days following the oral response, the grievance shall be deemed resolved.
 - 2. Within ten (10) working days of the receipt of the written grievance, the Principal may meet with the grievant (and a representative if requested by the grievant to be present) to resolve the grievance. The Principal shall give his/her answer in writing within ten (10) working days following such meeting with the grievant; otherwise, the written answer shall be

presented ten (10) working days after receipt of the written grievance in the event no meeting was held.

C. Formal Grievance Procedure - Step Two

1. If the grievance is not resolved in Step One, the grievant may, within ten (10) working days of receipt of the Principal's written answer in Step One, appeal to the Executive Director by filing the grievance and the Principal's answer along with any written response by the grievant with the Executive Director or his/her designee.

If the written grievance is not filed with the Executive Director or his/her designee within ten (10) working days following the Principal's response in Step One, the grievance shall be deemed waived and shall not thereafter be processed.

2. Within ten (10) working days of receipt of the written grievance, the Executive Director or his/her designee shall meet with the grievant (and a representative if requested by the grievant to be present) to resolve the grievance. The Executive Director or his/her designee shall give his/her answer in writing to the grievant within ten (10) working days of such meeting; otherwise, the written answer shall be presented ten (10) working days after receipt of the written grievance in the event no meeting was held.

D. Formal Grievance Procedure - Step Three

1. If the decision received in Step Two is not acceptable to the grievant, the grievant shall submit, within ten (10) working days after receipt of the written decision from Step Two, a letter requesting a review by the Governing Board. A letter to the Governing Board requesting review shall include a copy of the grievance and a written explanation, specifically stating the grievant's position and reasons for the grievance, and the Executive Director's answer from Step Two.

Upon receipt of the above-mentioned materials, the Governing Board may request additional written materials from the grievant or Executive Director and shall schedule a conference with the grievant. This conference may be waived by the grievant when filing for review.

2. Within thirty (30) days after receipt of grievance, the Governing Board shall issue a written decision.

ARTICLE IV

SALARY, DEFERRED COMPENSATION, AND INSURANCE BENEFITS

Section 1 - Salary

- A. The Salary Range for SSSMC certificated employee is \$42,000-\$80,225 not including TRF contributions and prior to any increases negotiated under this agreement.
- B. New Hire Salary: The salary for newly hired certificated employees with no previous teaching experience will be \$43,000 and other newly hired certificated employee salaries will be based on the hire-in schedule below. For purposes of this provision, education will include all of the certifications listed in section D. of this Article. Beginning with 2018-2019 hires, certificated employees who are hired as part of a "transition to teaching program" will qualify for a placement on the new hire placement chart commensurate with similarly credentialed SSSMC certificated employees when they complete a license necessary to maintain the position for which they were employed.

Basic Salary for New Teachers Hired for the 2019-2020 School Year/Hire in Salary Schedule 2019-2020

	Bachelor's		::::Master!s
0	\$43,000.00	. 0	\$44,000.00
1	\$43,350.00	1	\$44,790.00
2	\$43,950.00	2	\$45,340.00
3	\$44,700.00	3	\$46,140.00
4	\$45,350.00	4	\$47,000.00
5	\$46,050.00	5	\$47,990.00
6	\$46,750.00	6	\$48,890.00
7	\$47,300.00	7	\$50,183.00
8	\$48,151.00	8	\$51,883.00
9	\$49,557.00	9	\$53,583.00
10	\$50,462.00	10	\$55,283.00
11	\$51,687.00	11	\$56,983.00
12	\$53,092.00	12	\$58,683.20
_ 	\$54,146.00	13	\$59,906.80
14	\$55,200.00	14	\$61,130.40
15	\$56,254.00	15	\$62,354.00
16+	\$57,308.00	16+	\$63,577.00

C. Eligibility for Salary Increase:

- 1. Newly hired certificated employees whose salary is below the minimum of \$43,000 will have their salary adjusted to meet the minimum, but newly hired certificated employees will not otherwise be eligible for any salary increase their first year of SSSMC employment. In addition, certificated employees who have an emergency permit and no other teaching license will not be eligible for an increase unless and until obtainment of a teaching license.
- Certificated employees who did not receive an evaluation for a particular school year due to an extended leave remain eligible for a salary increase the following year if the teacher's prior year evaluation was effective or highly effective.

- No certificated employee rated needs improvement or ineffective will receive any salary adjustment. The amount that would otherwise have been allocated for the salary increase of certificated employees rated ineffective or improvement necessary shall be re-allocated equally as a one-time stipend all certificated employees rated effective and highly effective.
- D. Factors for and Amount of Base Salary Increase
 - 1. Academic Needs of Students: The academic needs factor is a teacher retention catch-up and is defined as the importance of retaining effective and highly effective teachers in the highly specialized fields occupied by SSSMC certificated employees with one or more years' experience making less than a new teacher with comparable education and experience. Returning teachers to SSSMC in the first 16 years of employment who earned an effective or highly effective evaluation rating will move to the salary amount on the Hire In Schedule that reflects the teacher's current years of experience. These adjustments will be made before the application of the other base salary increase factors.
 - Evaluation- earning of an effective or highly effective evaluation will account for 50% of the total available base increase amount (2.6675%, or half of the 5.335% available) following the application of the Academic Needs factor.
 - 3. A Year of Experience as defined by the Indiana Teachers' Retirement Fund/INPRS will account for 50% of the total available base increase amount (2.6675%, or half of the 5.335% available) following the application of the Academic Needs factor.
 - E. Up to 2% of the total additional per diem amounts generated from student attendance from non-member school districts will be equally distributed among all certificated employees who are continuously employed from October 21, 2019 until May 22, 2020, but this stipend will not exceed \$600 per eligible teacher.
 - F. Regularly scheduled certificated employee contract pay will be distributed in 24 installments through direct deposit, except that, starting with the 2019-2020 school year, all newly-hired certificated employees will receive 25 pays for their first contract.
 - G. Certificated employees who have submitted their retirement and who have maintained a paid leave day balance will receive \$85 per day at a

maximum payout of 50 days bonus in their last pay check prior to retirement.

H. Extra Duty Stipends will be provided to the following positions, indexed to the starting base pay salary:

ECA	<u> Index</u>
Behavior Education Department Chair	0.082
Department Chair	0.07
Department Chair	0.07
Assistant Department Chair	0.047
	0.047
Athletic Director	0.03
Track Coach	0.03
Basketball Coach	0.03
Spirit/Social Coach	0.24
Community Coordinator	0.2
<u>Webmaster</u>	<u> </u>

Section 2 - Ancillary Duty Pay

A. Certificated employees who provide afterschool, ESY, or other instruction beyond the regular work day/regular teaching duties or who participate in professional development beyond the regular work day shall be compensated at a rate of \$25/hour.

B. Certificated employees who provide training or leadership duties beyond their normal roles as teachers or department chairs may earn ancillary duty pay of \$350 for each full day equivalent of such duty. Examples of duties could include training and follow-up on school-wide data collections systems, planning, promoting, and hosting professional development or in-services open to staff from other agencies, etc. These projects must be approved in advance by the Executive Director.

Section 3 - Extended Contract Days

Payment for extended contract days will be made at the certificated employee's daily rate.

Section 4 - Deferred Compensation Plans

The term "deferred compensation plans" refers to a 401(a) plan, 403(b) plan, 457 plan, and post-retirement health reimbursement arrangement ("HRA") as allowed by the Internal Revenue Service and sponsored and administered by SSSMC.

- A. The certificated employee will be fully vested upon completion of ten (10) years of employment with SSSMC and shall have access to the benefits of each plan in which the certificated employee participated upon reaching the age of fifty-five (55) years and retirement.
- B. Board contributions to the 401(a) and HRA for each certificated employee for 2019 2020 shall be as follows:

	Certificated employees in	
401a	Sick Day Leave Buy Out	.066 X Base
1020	Certificated employees	
	after Sick Day Leave Buy	!
	Out	.056 X Base
	Certificated employees	
	after Sick Day Leave Buy	
ирл	Out	.01 X Base
пка		

C. No certificated employee shall have contribution levels decreased or benefits lost as a result of the omission from this Agreement of the deferred compensation plan language from the MSD Perry Township 2010-2012 collective bargaining agreement. Should the parties determine that a certificated employee's benefits have been adversely affected, the MSD Perry Township 2010-2012 collective bargaining agreement deferred compensation plan language will be used to assure that the calculation of benefits is corrected.

Section 5 - General Insurance Provisions

All certificated employees who are teaching at least 30 hours per week under a valid Regular or Temporary Certificated employee's Contract are entitled to the insurance premium contribution(s) outlined in Article IV of this Agreement. The contributions will be immediately discontinued when a certificated employee dies or is terminated from employment for any reason. Early retirees are entitled to continue to participate as provided in this Agreement and plan documents.

A. Insurance Termination

Where an eligible certificated employee works through the end of a school year before separating from employment, insurance coverage can remain in effect until the September 30th following the separation from employment if the certificated employee applies and pays premium timely. If a certificated

employee leaves employment during the school year, coverage will terminate the last day of the calendar month in which the covered certificated employee separates from employment, whether the separation is voluntary, involuntary, or the result of the death of the certificated employee.

B. Health Coverage for Retirees

Retired certificated employees not yet eligible for Medicare as of the date of retirement and their dependents are eligible to continue health coverage following the date of retirement if both of the following conditions are met:

- 1. The Retiree is a participant in the health plan as of the date of the retirement
- 2. The employee is eligible to retire under Indiana's PRF or TRF.

Coverage for a retired certificated employee and eligible dependents will terminate upon the first instance of any of the following conditions:

- 1. The date the certificated employee becomes eligible for Medicare.
- 2. The date on which a required contribution is not made.
- 3. The date on which SSSMC no longer offers a plan.
- 4. The date coverage would otherwise cease under the termination provisions of the plan.
- 5. The date termination is requested by the certificated employee.
- 6. The death of the retired certificated employee.

C. Insurance Coverage Effective Date

Coverage for eligible new certificated employees shall be effective on the first day of the month following 30 days of employment as long as the application form and premium is received within the first 30 days of employment.

- D. During a period of approved, uncompensated leave and when allowed under the insurance contract, eligible certificated employees may apply to continue insurance coverage under the group insurance plans for up to 12 weeks.
- E. Spousal carve-out, dependent coverage, and open enrollment provisions will be in accordance with the health plan document.
- F. A certificated employee may only change plans in accordance with the health plan document.
- G. Group Insurance Premium Contributions

Following the options as outlined below, the Board will pay yearly premiums for group health insurance, dental insurance, long-term disability insurance, and term life insurance for eligible certificated employees. This insurance will consist of the coverages and rates offered by the Hoosier School Benefit Trust (HSBT). The insurance will be offered in accordance with the guidelines established by the plan documents. Certificated employees who accept less than a full-time position (working less than 30 hours per week) and new hires who are less than full-time certificated employees (working less than 30 hours per week) will receive a pro-rata premium contribution.

- 1. A certificated employee may choose employee, family, employee-spouse, or employee-child(ren) coverage under any of the health plan options.
- 2. The Board will pay the following premium amounts for each health plan option:

PPO 2	Family Spouse Child Single	18,222 15,497 14,680 7,391
PPO 3	Family Spouse Child Single	15,563 13,223 12,503 6,335
HSA Plan 4	Family Spouse Child Single	15,023 12,791 12,071 6,107
HSA Plan 5	Family Spouse Child Single	12,371 10,535 9,947 5,027

SSSMC will make Health Savings Account contributions on behalf of eligible certificated employees up to the amount of \$1500 for single coverage and up to \$2000 for all other coverage types for those certificated employees who participate in Plans 4 or 5.

^{*}Certificated employees may make voluntary contributions to their HSA accounts in accordance with IRS regulations. A certificated employee is responsible for communicating with Human Resources if, for IRS compliance or

other reasonable purposes, the certificated employee requires the contribution be lower than the full amounts listed in this paragraph.

The Board will pay the following premium amounts for either the 3. Core or the Enhanced dental plan options:

Family	1,075
Spouse	780
Child	661
Single	395

- 4. The Board will pay 100% minus \$1 in premiums for employee-only vision coverage. Eligible dependents can apply to be added at the certificated employee's premium expense.
- 5. The Board will pay 100% minus \$1 for the group term life insurance.
- 6. The Board will pay 100% minus \$1 for the long-term disability insurance.
- 7. The Board will pay 100% minus \$1 for long-term care insurance for employees hired before July 1, 2019. The school district will pay the premium amount for each individual teacher plan that was in place on June 1, 2019. The Board will pay for the first premium increase occurring after June 1, 2019, and any additional premium increase will be paid by the teacher. The teacher may continue coverage into retirement at his/her own expense at the then current vendor rate through the employer.

Section 6 - ISTRF Contribution

The Board shall contribute 3% of the certificated employee's gross wages to the Indiana State Certificated employees' Retirement Fund (TRF).

<u>Section 7 - Generation I and II Flexible Benefit Program Plans:</u>

The Generation I and II Flexible Benefit Program Plans are intended to qualify and offer benefits as "cafeteria plans" within the meaning of Section 125 of the Internal Revenue Code and any other applicable provision of law.

Section 8 - Employee Tax-Sheltered Contributions:

The Board will offer certificated employees an opportunity to make voluntary payroll deductions for the 403(b) and 457 plans. Those certificated employees who wish to participate in such a program must enroll with one of the vendors/service providers approved by the Board and the Association.

Section 9 - Mileage

Certificated employees will be reimbursed at the IRS' mileage reimbursement rate.

ARTICLE V

RETIREMENT, SEVERANCE, AND DEATH BENEFITS

Section 1 - General Retirement Guidelines:

- A. Retirement may begin either at the beginning of a school year or at the beginning of the second semester. The Board may waive this stipulation. In the year of retirement, the certificated employee must be at least fifty-five (55) years of age before the beginning of the next school year. A certificated employee who desires to retire at the end of the first semester must be at least fifty-five (55) years of age before the date of the beginning of the second semester.
- B. In the case of disability retirement approved by the TRF, the Board may waive the age fifty-five (55) requirement as outlined in Article IX, Section 1, Subsection B.
- C. A certificated employee applying for retirement must submit to Human Resources his/her letter of retirement by April 1 of the year of retirement. The Board may waive this stipulation for reasons of unforeseen health conditions or other emergencies.

Section 2 - Retirement and Severance Benefits:

- A. Employees eligible and electing to retire will have their severance benefits deposited into a 401(a) plan, the service provider/record keeper for which will be mutually selected by the Board and the Association.
- B. Board contributions to the 401(a) and HRA for each employee for 2019-2020shall be as follows:

401a	Certificated employees in Sick Leave Day Buy Out	.066 X Base
1014	Certificated employees	
	after Sick Leave Day Buy	
	Out	.05 <u>6 X Base</u>
	Certificated employees	
	after Sick Leave Day Buy	
HRA	Out	.01 X Base
THAT		

C. No certificated employee shall have contribution levels decreased or benefits lost as a result of the omission from this Agreement of the deferred compensation plan language from the MSD Perry Township 2010-2012 collective bargaining agreement. Should the parties determine that a certificated employee's benefits have been adversely affected; the MSD Perry Township 2010-2012 collective bargaining agreement deferred compensation plan language will be used to assure that the benefit calculation is corrected.

Section 3 - Health Reimbursement Arrangement (HRA)

- A. Any changes to the HRA administrator will be determined by mutual agreement between the Board and the Association. Any changes to any plan documents will also be determined by mutual agreement.
- B. Board contributions to the HRA for each eligible certificated employee for 2019-2020 shall be 1% of each certificated employee's base salary.

C. HRA Vesting and Access:

- 1. The certificated employee will be fully vested upon completion of ten (10) years of employment with SSSMC and shall have the ability to apply for the benefits of the plan upon reaching the age of fifty-five (55) years and retirement.
- 2. Eligible retirees can request reimbursement for qualified medical expenses incurred following retirement. In accordance with the Internal Revenue Code and any other applicable regulations, the retired certificated employee may be reimbursed from the HRA funds for health insurance premiums, amounts not covered under another health plan, and/or any other qualified medical expense allowed under the current plan document and IRS guidance.
- 3. The retired certificated employee may be reimbursed from his/her HRA funds to purchase health *insurance through SSSMC's plan provider(s)* at the then current group health plan rate(s), provided the retired certificated employee pays one hundred percent (100%) of the premium for each health plan chosen.

ARTICLE VI

TERM OF AGREEMENT

THIS AGREEMENT shall be effective as of July 1, 2019, and shall continue in full force and effect until June 30, 2020.

THIS AGREEMENT is made and entered into at Indianapolis, Indiana, on this 5^{th} of November 2019 by and between the Governing Board of the SSSMC, party of the first part, heretofore referred to as the "Board" and the SSSEA, party of the second part, heretofore referred to as the "Association."

THIS AGREEMENT is so attested to by the parties whose signatures appear below:

SSSMC By: Dand Allen	SSSEA By: MAY
President By:	President/
By: Chair of Negotiating Team	By: MMC Chair of Negotiating Team

<u>APPENDIX A</u> <u>GRIEVANCE</u> <u>REPORT</u>

STEP NUMBER: *
Name of Grievant:
Assignment:
Date Filed:

A. Report the date the grievance occurred:
B. Identify the Article and Section of the Agreement alleged violated:
C. State the facts substantiating the grievance:
D. Describe the relief requested:
Date: Grievant's Signature: *******************************
E. Disposition of grievance:
Date: Principal's Signature: Executive Director's (or designee's) Signature: *******************************
F. Response of grievant with regard to disposition of grievance (E):
Date: Grievant's Signature:
* A completed copy of this Grievance Report Form (GRF) must be attached to to GRF

for each sequential step of the formal grievance procedure

APPENDIX B CATASTROPHIC ILLNESS AND INJURY FORMS

JOINING/CONTINUING THE CATASTROPIC ILLNESS AND INJURY LEAVE BANK ("Leave Bank")

A Catastrophic Illness and Injury Leave Bank has been established by the Southside Special Services Education Association per the Agreement with the Governing Board of the Southside Special Services of Marion County, for all eligible employees of the bargaining unit who voluntarily contribute one (1) paid leave day to the bank. Certificated employee (member) must make his/her contribution within the first thirty (30) days of their employment or within the first thirty (30) days following the ratification of this Agreement.

Name:	
Employee No:	
Work Location:	
Please check one:	
☐ I wish to participate/continue participating in the Leave Bank by donating one (1) paid leave day during the School Year	
☐ I do not wish to participate in the Leave Bank.	
SIGNATURE:	
DATE:	

Southside Special Services Education Association CATASTROPHIC ILLNESS AND INJURY LEAVE BANK REQUEST FORM

LAST	FIRST	MIDDLE	
ADDRESS	CITY/STATE	ZIP	<u>.</u>
		MOME BHOME	
SCHOOL /DEPARTMI	ENT	SCHOOL PHONE	
REQUEST			
DATE ACCUMULATE	D LEAVE EXPIRED		
		Y MAXIMUM)	
ATTENDING PHYSIC	·		
PHYSICIAN'S STATE	MENT ATTACHED: YES	NO E	
COMMENTS —			
COMMENTS —			<u></u>
COMMENTS —			
COMMENTS ————————————————————————————————————		DATE	
		DATE	
SIGNATURE	D BY SSSEA COMMITTEE)	DATE	
SIGNATURE APPROVAL (TO BE COMPLETE		DATE NUMBER OF DAYS APPROVED	
SIGNATURE APPROVAL (TO BE COMPLETE REQUEST APPROVE	ED: YES NO	NUMBER OF DAYS APPROVED	
SIGNATURE APPROVAL (TO BE COMPLETE	ED: YES NO		
SIGNATURE APPROVAL (TO BE COMPLETE REQUEST APPROVE EFFECTIVE DATE:	ED: YES NO	NUMBER OF DAYS APPROVED	
SIGNATURE APPROVAL (TO BE COMPLETE REQUEST APPROVE EFFECTIVE DATE:	ED: YES NO FROM	NUMBER OF DAYS APPROVED	

Southside Special Services Education Association LEAVE BANK PHYSICIAN'S STATEMENT

TO BE COMPLETED BY PATIENT

	I ACE	FIRST	MIDDLE
	LAST	LIVII	MIDDE
DDRESS _	STREET	CITY/STAT	F
IP	STREET	CITISTAT	L .
		ν.	
MPLOYEE	NO	номе рном	IE
hvsician to	o release any inform o the Trustees of the	NFORMATION: I hereby author ation required in the course of a e Leave Bank.	ize the undersigned my examination or
IGNATURE			DATE
O BE COM	PLETED BY PHYSICI	<u>AN</u>	
3rief descrip	otion of illness (Laym	an's language please)	
f still disabl	ed, date patient shou	ld return to work	
Patient was	under my care and u	nable to work from:	to:
Physician's l	Name (Print)	Office P	hone No
Address			
		CITY/STATE	ZIP
STR	REET		

PLEASE RETURN TO PATIENT FOR SUBMISSION WITH PAID LEAVE REQUEST FORM

FINANCIAL STATEMENT FOR September 2019

Monthly Expenditures by Classification	<u>1</u>			
WIOTHIN EXPERIENCE.	M-T-D	Y-T - D		
Payroll	283,879.39	724,380.90		
Sertoma Gift	-	-		
EE Wellness	-	-		
Non Payroll Instructional	12,289.63	44,329.78		
Operations	26,659.26	76,685.32		
Technology	12,615.25	78,090.78		
Admin & Business	777.82	4,007.14		
Pro Development	390.00	390.00		
Due Process/FAPE	-	-		
Other Expenditures	44.74	340.04		
Clearing Accounts	63,492.36	148,741.30		
Total	400,148.45	1,076,965.26		
1000	•			
A ALL Barrague Cources	M-T-D	Y-T-D		
Monthly Revenue Sources BGCS	25,542.00	25,542.00		
MSDDT	15,867.00	75,658.50		
PTS	75,215.50	332,845.50		
Outside Districts	7,990.00	35,720.00		
Other Revenue	-,,===	12,211.83		
Donations				
	63,492.36	148,741.30		
Clearing Accounts Total	188,106.86	630,719.13		
Total	100,200.00			
	Beginning			Ending Cash
	Month Cash			Balance
Coch Palances	Balance	Revenue	Expenditures	\$1,619,998.98
Cash Balances Education Fund	\$1,849,062.29	\$58,399.00	\$287,462.31	(\$104,766.82)
Operations Fund	(\$121,788.54)	\$66,215.50	\$49,193.78	\$8,706.19
HVAC/ROOF REPAIR	\$8,706.19	\$0.00	\$0.00	(\$87,954.24)
5216 Part B 611	(\$87,954.24)	\$0.00	\$0.00	(\$2.00)
5944 Technical Assistance	(\$2.00)	\$0.00	\$0.00	\$915.29
Sertoma Gift	\$915.29	\$0.00	\$0.00	\$334.15
Employee Wellness	\$334.15	\$0.00	\$0.00	\$334.15
Clearing Accounts	\$1,701.25	\$63,492.36	\$63,492.36	
Total	\$1,650,974.39	\$188,106.86	\$400,148.45	\$1,438,932.80

RISE Learning Center



October 31, 2019

	Lifeskills	MOVE	BEP
	Lifeskins	2	10
BEECH GROVE	3		0
DECATUR	4		0.
PERRY	16	6	26
	3		4
Other districts	2		48
TOTAL	25	8	40

K-8 grades

Lifeskills	MOVE	BEP
2	2	2
2		6 ,
1	6	6
14	0	1
1	1	<u> </u>
18	9	15
	Lifeskills 2 1 14 1 18	2 2 1 1 14 6 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1

High School

Total students - 123