

GARFIELD HEIGHTS BOARD OF EDUCATION
GARFIELD HEIGHTS, OHIO

RECORD OF PROCEEDINGS
Minutes – Regular Board Meeting
November 20, 2017

The Board of Education of the Garfield Heights City School District met Regular session on Monday, November 20, 2017 at the Garfield Heights Board of Education Offices, 5640 Briarcliff Drive, Garfield Heights, Ohio 44125 at 6:00 p.m. with Mr. Gary Wolske, President of the Board, presiding.

ROLL CALL

Present: Mr. Wolske, Mrs. Kitson, Mr. Juby, Mr. Dobies,
Absent: Mrs. Geraci

Moved by Mr. Juby, seconded by Mr. Dobies to excuse Mrs. Geraci.

Ayes: Juby, Dobies, Kitson, Wolske
Nays: None

RECOMMEND ADOPTION OF AGENDA AS PRESENTED

Moved by Mr. Dobies, seconded by Mr. Juby to adopt the agenda as presented.

Ayes: Dobies, Juby, Kitson, Wolske
Nays: None

MOMENT OF SILENT REFLECTION & PLEDGE OF ALLEGIANCE

READING & APPROVAL OF MINUTES

Moved by Mr. Dobies, seconded by Mr. Juby to approve the following minutes:

Regular Meeting of October 16, 2017

Ayes: Dobies, Juby, Kitson, Wolske
Nays: None

BOARD PRESIDENT'S REPORT

Good evening everyone, welcome to the Middle School. Thank you Mr. Sauer and your staff for hosting tonight's meeting. It's always a pleasure to hold our monthly meeting in one of the school buildings. It gives us a chance to see firsthand some of the wonderful things that our students, your children are accomplishing. Also kudos to Mr. Palmer and his group on the wonderful renovation of the Capadona Room.

COMMITTEE REPORTS:**Cuyahoga Valley Career Center – Christine A. Kitson**

The teaching professions program will now be a 2 year program.
 Next year, there will be a new program for the students - Exercise Physiology.
 A copy of the CVCC Newsflash will be attached to the minutes.

Student Activities - Christine A. Kitson

Fall sports are now complete. The top record was varsity volleyball with 14 wins and 8 losses. Individual fall honors go out to Donald Willis, 1st team all northeast district and district defensive player of the year. Jermaine Camp, 2nd team all northeast district and Marlon Jordan, Tyrese Maddox, and Aaron Watson who earned honorable mention all northeast district. Makayla Warren made 1st team all Greater-Cleveland in girls soccer while Carlie Grabowski, Lexi Cole, and Jade Salters earned honorable mention all Greater-Cleveland. Major recent purchases include: bowling tournament fees, game and practice basketballs for HS and MS, shooting machine replacement parts, new portable scoreboards, basketball and wrestling supplies.

Legislative Liaison – Gary Wolske
City Liaison – Robert A. Dobies Sr.

Mr. Dobies wished everyone a Happy Thanksgiving and to enjoy the time with their families.

I would like to extend an invitation from Mayor Collova for all residents to come to the Annual Tree Lighting Ceremony on Sun November 26th at 5:00 PM at the Civic Center and then to the recreation center from 6-8 pm to skate with Santa. This is a free event for all residents.

Policy Liaison – Christine A. Kitson & Gary Wolske

PRESENTATION

Mr. LeMon Bradford, Learning Center Principal gave an update on the Learning Center and the staff spotlight featuring Mr. Dziak who has been employed with the district for 7 years as an intervention specialist at the Garfield Heights Learning Center. Mr. Dziak has completed course work at Baldwin Wallace in administration passing the state test and is now a licensed administrator hopefully future administrator in this district. I also did a student spotlight to recognized 3 students Samirra Davis for receiving honor roll Marcelous Barker and Najia Henderson for receiving merit roll.

Mr. Bradford then reported out on the enrollment of the Learning Center

16 - 8th grade students
 16 - 9th grade students
 40 - High school students 15 possible graduates
 29 - VLA students 10 possible graduates
 16 - home students 7 possible graduates
 24 - graduates from the class of 2017

Mr. Chris Sauer, Middle School Principal gave an update on the Middle School. The Middle School currently has 786 students, 128 of which are new this school year. Our school improvement goal this year is feedback. Staff and students are exploring how to improve feedback as a part of the learning process. We are promoting a "growth mindset" at the middle school. We are encouraging our students to embrace the learning process, as they should be challenged along the way. We are also embracing Character Education initiatives as well. Students, staff, and parents have had presentations from Sandy Hook Promise, a youth violence prevention program. We recognized our "Straight A All-Stars" from the first grading period. They each received a certificate from the middle school, and all their names were submitted to the Cleveland Cavaliers for a chance to be recognized win prizes from that organization.

RECOGNITIONS/COMMENDATIONS

SUPERINTENDENT'S REPORT

Report was given by Mr. Chris Hanke, Director of Human Resources

Thank you, Mr. President:

Reporting from the administration, a few highlights I would like to share with the Board of Education. First, you may have recently seen the spotlight that was given to our instrument donation initiative. With special thanks to the Neighborhood News for covering a story we recently sent to them, our friends at Channel 19 News picked up on the release, and came out to Maple Leaf Elementary School to run a great story. As the Board knows, the district is asking for unwanted and unused trombones, trumpets, clarinets and saxophones for our fifth-grade students. Generally, formal band classes do not begin until a student is in an older great, so the district views this as an opportunity to get more students in Garfield Heights, at younger ages, more instructional experiences. We thank Channel 19 news for their coverage of this initiative and for their positive reporting. Band teacher Stormi Fletcher and her students that were spotlighted did a terrific job. If you have not seen the story, it is posted on the district website and we plan to email a link to those on our email list in the near future for all to see. Special thanks also goes out to those who have donated instruments to our students. To date, we have received: 3 trombones, 1 saxophone, 1 trumpet and 2 clarinets. These donations are giving Garfield Heights students opportunities. Those interested can take their donations to the Board Office. Thank you to all those involved.

Finally, students from Elmwood Elementary School had the solemn privilege of participating in the Jennings Hall Veterans Day ceremony. Led by advisor Jen Huncharek and with the help of Principal Gwen Abraham, these fifth-grade student leaders had the honor of carrying the flags of the various Armed Services during the ceremony. They also helped to raise the flag. Then, each student read a prepared essay answering the prompt, 'why Veterans are so important.' I am not exaggerating by stating that there was not a dry eye in the room when our students were finished with their essays. The Garfield Heights City Schools is grateful to Jennings for the partnership it has created over the last few years and thanks them for allowing us to engage with our nation's Greatest Generation during such a memorable Veteran's Day ceremony. A video of the students' participation in this ceremony is also posted online.

That concludes my report. Happy Thanksgiving to the Board of Education and everyone in the Garfield Heights City Schools family.

GO BULLDOGS!

REMARKS FROM THE PUBLIC REGARDING AGENDA ITEMS

REPORTS & RECOMMENDATIONS OF THE TREASURER:

Moved by Mr. Juby, seconded by Mrs. Kitson to approve the financials for October 2017, as presented in Exhibit "A".

Ayes: Juby, Kitson, Dobies, Wolske
Nays: None

Moved by Mr. Juby, seconded by Mrs. Kitson to approve the Position Bonds effective January 1, 2018 through December 31, 2020.

Ayes: Juby, Kitson, Dobies, Wolske
Nays: None

Moved by Mr. Juby, seconded by Mrs. Kitson to approve the district's participation in all scheduled property tax advances of all tax revenues collected in the calendar year 2018.

Ayes: Juby, Kitson, Dobies, Wolske
Nays: None

RECOMMENDATIONS OF THE BOARD OF EDUCATION:

RECOMMENDATIONS OF THE SUPERINTENDENT TO THE BOARD:

PERSONNEL:

Moved by Mr. Juby, seconded by Mrs. Kitson to approve the Employee Leaves as presented in Exhibit "B".

Ayes: Juby, Kitson, Dobies, Wolske
Nays: None

Moved by Mr. Juby, seconded by Mrs. Kitson to accept the resignation of Adam Hanus, Bus Driver, effective at the end of the day October 27, 2017.

Ayes: Juby, Kitson, Dobies, Wolske
Nays: None

Moved by Mr. Juby, seconded by Mrs. Kitson to accept the resignation of Lois McNabb, General Cafeteria, effective at the end of the day November 15, 2017.

Ayes: Juby, Kitson, Dobies, Wolske
Nays: None

Moved by Mr. Juby, seconded by Mrs. Kitson to accept the termination of a probationary contract for Donna Brooks, Bus Driver effective at the end of the day November 9, 2017.

Ayes: Juby, Kitson, Dobies, Wolske
Nays: None

Moved by Mr. Juby, seconded by Mrs. Kitson to accept the resignation of Martita Johnson, Building Assistant at Maple Leaf at the end of the day November 10, 2017.

Ayes: Juby, Kitson, Dobies, Wolske
Nays: None

Moved by Mr. Juby, seconded by Mrs. Kitson to approve the administrative salaries for the 2017-18 school year as presented in Exhibit "C"

Ayes: Juby, Kitson, Dobies, Wolske
Nays: None

Moved by Mr. Juby, seconded by Mrs. Kitson to approve the Exempt salaries for the 2017-18 school year as presented in Exhibit "D"

Ayes: Juby, Kitson, Dobies, Wolske
Nays: None

Moved by Mr. Juby, seconded by Mrs. Kitson to approve the Qualified salaries for the 2017-18 school year as presented in Exhibit "E"

Ayes: Juby, Kitson, Dobies, Wolske
Nays: None

Moved by Mr. Juby, seconded by Mrs. Kitson to approve the classified contract(s) for the 2017-2018 school year as follows:

<u>Name</u>	<u>Position</u>	<u>Hours</u>	<u>Step</u>
Samantha Karasek (eff: 10/30/17)	Bus Aide (1E) - Transportation	4	0
Martita Johnson (eff: 11/6/17)	Building Assistant (1B) – ML	3	0
Hildred Stewart (eff: 11/13/17)	Housekeeper (1D) – HS	6	0
Joey Hall	Bus Driver (4E) – Transportation	4	0 (eff: 11/20/17)
Judd Stroud (eff: 11/15/17)	Bus Driver (4E) – Transportation	4	5
Tina Lewis-Thomas (eff: 11/27/17)	Vehicle Driver (3E) – Transportation	4	0
Michelle Hill (eff: 11/28/17)	Bus Aide (1E) – Transportation	4	0

Ayes: Juby, Kitson, Dobies, Wolske
Nays: None

Moved by Mr. Juby, seconded by Mrs. Kitson to approve the following classified transfer/change of assignments for the 2017-2018 school year as follows:

<u>Name</u>	<u>Previous Position</u>	<u>New Position</u>
Brenda Binns (eff: 10/27/17)	Bus Driver (4E)	Associate Secretary (6A) – Trans.
Charmaine Williams (eff: 11/2/17)	Housekeeper(1D)–WF	Bus Aide (1E) – Trans.
Amber Timmons (eff: 12/4/17)	Building Assistant(1B)–Elm	Instructional Assistant (2B) – MS

Ayes: Juby, Kitson, Dobies, Wolske
Nays: None

Moved by Mr. Juby, seconded by Mrs. Kitson to approve the Academic supplemental position(s) for the 2017-2018 school year as follows:

<u>Name</u>	<u>Position</u>
Jennifer Corrado	Dramatics – MS
Stacey Mather	Mentor – EW
Ashlee Ward	Computer Coordinator – HS
Chris Satola	PAC Events Manager - HS

Ayes: Juby, Kitson, Dobies, Wolske
Nays: None

Moved by Mr. Juby, seconded by Mrs. Kitson to approve the following classified substitutes for the 2017-2018 school year:

<u>Name</u>	<u>Position</u>
Hildred Stewart	Bus Driver (4E)

Ayes: Juby, Kitson, Dobies, Wolske
Nays: None

Moved by Mr. Juby, seconded by Mrs. Kitson to approve the Athletic supplemental position(s) for the 2017-2018 school year as follows:

<u>Name</u>	<u>Position</u>
Reginald Lewis	Assistant Boys Basketball Coach - HS
Michael Turovsky	Little Bulldogs Wrestling Coach – District
Kristen Fox	Drill Team – HS
Emily Mayausky	Drill Team – HS
James Hudeck	Head Hockey Coach – HS

Ayes: Juby, Kitson, Dobies, Wolske
Nays: None

Moved by Mr. Juby, seconded by Mrs. Kitson to approve the classified substitute rates as presented in Exhibit "F".

Ayes: Juby, Kitson, Dobies, Wolske
Nays: None

Moved by Mr. Juby, seconded by Mrs. Kitson to approve the certified substitute rates as presented in Exhibit "G".

Ayes: Juby, Kitson, Dobies, Wolske
Nays: None

Moved by Mr. Juby, seconded by Mrs. Kitson to approve the Administrative Benefits Package as presented in Exhibit "H".

Ayes: Juby, Kitson, Dobies, Wolske
Nays: None

Moved by Mr. Juby, seconded by Mrs. Kitson to approve the Administrative Benefits Package as presented in Exhibit "H".

Ayes: Juby, Kitson, Dobies, Wolske
Nays: None

Moved by Mr. Juby, seconded by Mrs. Kitson to approve the Exempt Benefits Package as presented in Exhibit "I".

Ayes: Juby, Kitson, Dobies, Wolske
Nays: None

Moved by Mr. Juby, seconded by Mrs. Kitson to approve the Qualified Benefits Package as presented in Exhibit "J".

Ayes: Juby, Kitson, Dobies, Wolske
Nays: None

Moved by Mr. Juby, seconded by Mrs. Kitson to approve Kathryn Brooks as a home instruction provider for special education for up to 20 hours at \$25.51 per hour.

Ayes: Juby, Kitson, Dobies, Wolske
Nays: None

Moved by Mr. Juby, seconded by Mrs. Kitson to approve hours for the following teachers that participated in the Title I Math Night on November 9, 2017 at William Foster Elementary School at an hourly rate of \$25.51 to be paid from Title I Funds:

Carolyn Angello – 2 hours
 Laura Bartlett – 2 hours
 Lisa Granfors – 2 hours
 Amanda Hirter – 2 hours

Debra Hrin – 2 hours
 Janette Kondash – 2 hours
 Alyssa Reichard – 2 hours
 Heather Maag – 2 hours

Ayes: Juby, Kitson, Dobies, Wolske
 Nays: None

Moved by Mr. Juby, seconded by Mrs. Kitson to approve hours for the following teachers that completed Module 5 of the LETRS program at a rate of \$25.51 per hour, to be paid from the LETRS Grant:

Kate Abbey – 12 hours
 Cynthia Artrip – 12 hours
 Abby Banning – 12 hours
 Candice Booher – 12 hours
 Kelli Buttolph – 12 hours
 Laura DiRienzo – 12 hours
 Julie Frederick – 12 hours
 Amy Halusker – 12 hours
 Maria Kolodziej – 12 hours
 Mary Bailey – 12 hours
 Sarah Myer – 12 hours
 Sherry Pastor – 12 hours
 Constance Watt – 12 hours

Melissa Herman – 12 hours
 Janet Kaliszewski – 12 hours
 April Knight – 12 hours
 Robert Kusnerik – 12 hours
 Leigh Ann Pustai – 12 hours
 Sharon Regan – 12 hours
 Jean Rizi – 10 hours
 Jenice Willis – 12 hours
 Lisa Perko – 12 Hours
 Maryanne Ratka – 12 hours
 Jennifer Molnar – 12 hours
 Cheryl Dettling – 12 hours
 Gina Lewis – 12 hours

Ayes: Juby, Kitson, Dobies, Wolske
 Nays: None

POLICY:

CONTRACTS:

Moved by Mr. Juby, seconded by Mrs. Kitson to approve service agreements between the Garfield Heights City Schools and PSI Associates Inc. for the 2017-2018 school year for Remedial/Title I Teacher Services.

Ayes: Juby, Kitson, Dobies, Wolske
 Nays: None

Moved by Mr. Juby, seconded by Mrs. Kitson to approve the agreement between the Garfield Heights City Schools and the McKeon Education Group, Inc. to provide one non-public Title I instructor for the period October 2017 through May 2018.

Ayes: Juby, Kitson, Dobies, Wolske
 Nays: None

RENTALS & FACILITY USAGES:

MISCELLANEOUS:

Moved by Mrs. Kitson, seconded by Mr. Juby to approve the clarinet donation from Mrs. Wendy Nixdorf valued at \$700.00.

Ayes: Kitson, Juby, Dobies, Wolske
Nays: None

Moved by Mrs. Kitson, seconded by Mr. Juby to approve the clarinet, saxophone & trombone donation from Ms. Pat Kominek valued at \$300.00.

Ayes: Kitson, Juby, Dobies, Wolske
Nays: None

Moved by Mrs. Kitson, seconded by Mr. Juby to approve the trombone donation from Mr. Dan Cooke valued at \$100.00.

Ayes: Kitson, Juby, Dobies, Wolske
Nays: None

Moved by Mrs. Kitson, seconded by Mr. Juby to approve the saxophone donation from Mr. Richard Kraus valued at \$250.00.

Ayes: Kitson, Juby, Dobies, Wolske
Nays: None

REMARKS FROM THE PUBLIC REGARDING MISCELLANEOUS SCHOOL ITEMS**ANNOUNCEMENT OF NEXT BOARD MEETINGS**


**Board of Education Regular Meeting – 6:00 P.M.
December 18, 2017
Board of Education Offices
5640 Briarcliff Dr.
Garfield Heights, Ohio 44125**

Moved by Mr. Juby, seconded by Mrs. Kitson to adjourn at 6:23 p.m.

Ayes: Juby, Kitson, Dobies, Wolske
Nays: None



President



Treasurer

News Flash!

CVCC Board of Education-
Garfield Heights District



November 2, 2017

Halloween Costume Contest

On Friday, October 27, 2017 CVCC's National Technical Honor Society Halloween Costume Contest was in full swing! Morning and afternoon session students as well as staff members participated in the festivities. It cost \$1 to participate or to watch the contest with all proceeds going to benefit Puerto Rico Hurricane Relief Funds. The winners of the contest are...

A.M. Winners:

Most Creative- 1st –Carin Honacki/Culinary Arts (Harley Quinn-Baby Doll) from Brecksville-Broadview Heights, 2nd –Olivia Witt/Media Technology (Poison Ivy) from Brecksville-Broadview Heights, 3rd –Emily Gifford/Hotels & Resorts (Anna from Frozen) from Revere.

Scariest- 1st –Tyler Brashear/Programming & Software Design (Doctor) from Twinsburg, 2nd –Daniel Homik/Transition to Work (Zombie) from North Royalton, 3rd –Cameran Hunt/Transition to Work (Frankenstein) from Garfield Heights.

Best Decade- 1st – Keara Jefferson/Medical Administrative Specialist (90's from Clueless) from Garfield Heights, 2nd – Audrey Katcher/Transition to Work (50's) from Revere, 3rd – Maryam Hargrove/Culinary Arts (90's) from Garfield Heights.

Best Group- Dental Assisting - Toy Story

P.M. Winners:

Most Creative- 1st – Matthew Hunter/Media Technology (Piranha Plant) from Garfield Heights, 2nd – Owen Mueller/Success Academy (Elliott & E.T.) from Revere, 3rd – Joshua Stylinski/Digital Design (Ryuk/Anime) from Garfield Heights.

Scariest- 1st –Aquinas Black/Health Careers 2A (Smiley) from Garfield Heights, 2nd –Cierra Valle/Digital Design (Clown) from Garfield Heights, 3rd – Joe Paskert/Transition to Work (Dracula) from Brecksville-Broadview Heights.

Best Decade- 1st – Michelle Penny/Health Careers 2A (90's) from Twinsburg, 2nd – Jordan Clark-Banks/Digital Design (90's) from Garfield Heights, 3rd – Griffin Starling/Construction Trades (40's Construction) from Independence.

Best Group- Teaching Professions – The Wonderful World of Disney

Staff- 1st – Mr. Josh Hayes (The Joker), 2nd – Mrs. Kristin Brauer (Zelda), 3rd – Mrs. Diane Ellis (T-Rex)



Power Equipment Technology Students to be featured on Channel 19 News

On Wednesday, October 25, 2017 CVCC's Power Equipment Technology students had a great opportunity to go to Cleveland's WOIO Channel 19 News headquarters and spread the word about the wonderful service learning project they are participated in with Wreaths Across America. Juniors Sam Turnea from Garfield Heights, Matt Lawer from Brecksville-Broadview Heights, Marco Olah from Nordonia Hills, along with seniors Jacob Maskovich and Justin Liddy from North Royalton went with Power Equipment Technology instructor Mr. Koenig and Media Specialist Gabrielle Riley to tape the segment and meet news anchor Romona Robinson. The students will be featured on the Romona's Kids segment that will air on Thursday, November 9, 2017 at 6 p.m. and 11 p.m. on WOIO Channel 19. It will also air at 9 p.m. on WUAB Channel 43. The piece also has the opportunity to re-run on the Sunday, November 12, 2017 morning newscast on Channel 19 at 7 a.m. The students prepared all week for this interview to share about the great organization Wreaths Across America and all the work they have done to help honor our fallen veterans. To contribute and sponsor a wreath please go to <https://wreaths.fastport.com/> and enter Group ID: OH0125P or contact Power Equipment instructor Mr. Koenig at gkoenig@cvccworks.edu .



Cosmetology Students Pamper Others as a way to Give Back!

On Thursday, October 19, 2017 CVCC's senior Cosmetology A students along with instructor Tina DeSantis gave complimentary hand and arm massages at the 20th Annual Senior Health and Wellness Day at The City of Brecksville Human Services Center. What a great way to volunteer and help members of the community. The students who volunteered include, Darla Bundus from Cuyahoga Heights, Kaylin Ellis from The University of Akron, Destiny Scales and Joyce Harris Scott from Garfield Heights, Kelsey Wilmot and Alex Hoprich from Independence, Martha Perez and Ingrid Romantic from North Royalton, Elyse Seaver from Revere, Mareena Studinarz from Brecksville-Broadview Heights, and Ricky Suess from Nordonia Hills.



Encouraging Acceptance of Differences at Garfield Heights High School

On Thursday, October 19, 2017 Cuyahoga Valley Career Center Career Specialist Julie Regula had speaker Lisa Bachman speak at the Garfield Heights High School Glass Ceiling Women's Leadership meeting. Lisa's message was incredibly inspiring; her son was born with several health issues that led to him being labeled as "different" and sustain immense bullying. He later was diagnosed with Tourette Syndrome and together with his family began a nonprofit to educate people and encourage acceptance of all differences. Lisa also spoke about her own career path as a working mom and the struggles she has had along the way. This was a great presentation to promote acceptance amongst all, regardless of circumstances.

A Day of Learning at Monroe's Orchard and Farm Market

On Monday, October 16, 2017 Transition to Work students including Johnny Adams Jr., Chyna Funchess, Colin Lesko, and Samuel Wilkinson from Twinsburg, Kaitlin Blamble, Kayla Dietrich, and Joseph Paskert from Brecksville-Broadview Heights, Donshaya Burts, Cameran Hunt, and David Lee, from Garfield Heights, Kyle Collins, Nathan Lalli, and Alexa Reid from Nordonia Hills, Patrick Cook, Daniel Hornik, and Ryan Rybak from North Royalton, Audrey Katcher, and John



Ray from Revere, along with Teaching Professions students, Emily Agnello, Kayla Elavsky, Elana Felber, and Camron Robinson from Twinsburg, Abbey Bugaj, Madeline Fichter, and Makena Wilson from Independence, Serena Demichow, and Kyle Elavsky from North Royalton, Josef Fritzk, Hannah Pilat, and Nathaniel Robuston from Brecksville-Broadview Heights, Alexia Kimbro from Garfield Heights, and Brianna Thornburg from Nordonia Hills enjoyed a day of learning together but with two completely different objectives. For Transition to Work students, the trip to Monroe's Orchard and Farm Market in Hiram taught students about employment skills and responsibilities of employment in the orchard. Teaching Professions students learned the ropes in field trip planning and student supervision as each future teacher was teamed up with a Transition to Work student. The group also made a stop at the Hiram Farm that serves developmentally disabled adults with an emphasis of those on the autism spectrum. Students learned about the mission of the farm and the various jobs that one could hold. Several students showed an interest in working there after graduation, what a wonderful day!

College Night Success!

The 23rd Annual College Night event was on Wednesday, October 4, 2017. 106 colleges participated, providing quality information to students. Approximately 800 students and parents attended college night. The College Night Consortium representatives are from nine area high schools, including Brecksville-Broadview Heights, Cuyahoga Heights, Garfield Heights, Independence, Nordonia Hills, North Royalton, Padua Franciscan, Trinity, Twinsburg, along with Cuyahoga Valley Career Center who all work together to assemble the program.



Upcoming Events

- ◆ Saturday, November 4, 2017 • 9:00 a.m. – 11:00 a.m. • Job Seekers-Resume Makeover Workshop
- ◆ Tuesday, November 7, 2017 – Thursday, December 7, 2017 • 3:30 p.m. – 5:30 p.m. • ACT Test Prep Boot Camp
- ◆ Saturday, November 11, 2017 • 9:00 a.m. – 3:00 p.m. • Christmas Craft Show
- ◆ Tuesday, November 14, 2017 • 1:00 p.m. – 2:00 p.m. • Community Wellness Presentation- "Nutrition for Healthy Eyes"
- ◆ Wednesday, November 15, 2017 • 7:00 p.m. – 8:30 p.m. • College Scholarship Workshop
- ◆ Wednesday, November 22, 2017 – Friday, November 24, 2017 • Thanksgiving Break
- ◆ Thursday, November 23, 2017 • HAPPY THANKSGIVING! •

Exhibit "A"

GARFIELD HEIGHTS CITY SCHOOLS

FINANCIALS

October 2017

RECONCILIATION

October-17

Key Bank (checking)	\$2,157,490.59	
PNC Bank (checking)	163,691.41	
PNC Bank (deposits)	237,291.43	
JPMorgan Chase (payroll)	(25,328.60)	
Investments	7,866,975.09	
Total Bank Depositories	<u><u>\$10,400,119.92</u></u>	
Outstanding Checks	<u><u>(223,176.24)</u></u>	
		Investments
		<u>4,037.12</u> PNC
		6,300,740.21 Star Ohio
		88,050.73 Huntington
		91,001.50 Citizens Bank
		1,383,145.53 RedTree Investment
		<u><u>7,866,975.09</u></u>

Start up Cash-School Store	50.00
Start up Cash-HS Library	50.00
Start up Cash-Athletics	1,050.00

Total Adjustments 1,150.00

Total Bank Balance \$10,178,093.68

Total Fund Balance \$10,178,093.68

Difference -

Treasurer's Signature

Allen D. Sluka

**STATEMENTS OF
REVENUE
EXPENDITURES
FUND BALANCE AND UNENCUMBERED BALANCES
BY FUND**

Date: 11/06/17
 Time: 1:31 pm

GARFIELD HTS. BOARD OF EDUC.
 Fiscal Year Budget
 Revenues & Expenditures
 October 1, 2017 through October 31, 2017

Page: 1
 (FNDREVEX)

GENERAL (001)

	October Activity	Annual Budget	FYTD Activity	Encumbrances	Unencumbered Balance
Fund Balance, Beg. of Period	\$ 2,849,618.49		\$ 850,969.78		
Revenue:					
TAXES	\$ 187,279.44	\$ 15,986,500.00	\$ 7,452,541.45		
TUITION	\$ 743.90	\$ 400,000.00	\$ 298,228.53		
TRANSPORTATION FEES					
EARNINGS ON INVESTMENTS	\$ 8,975.94	\$ 50,000.00	\$ 21,800.05		
FOOD SERVICES					
EXTRA CURRIC (STUDENT) ACTIVIT	\$ 2,890.00	\$ 40,000.00	\$ 15,870.00		
MISC. RECEIPTS - LOCAL SOURCES	\$ 3,060.94	\$ 280,000.00	\$ 34,398.21		
OTHER RECEIPTS - LOCAL SOURCES					
UNRESTRICTED GRANTS-IN-AID					
RESTRICTED GRANTS-IN-AID					
UNRESTRICTED GRANTS-IN-AID	\$ 3,633,114.35	\$ 25,736,300.00	\$ 9,155,121.26		
RESTRICTED GRANTS-IN-AID	\$ 77,152.32	\$ 1,256,000.00	\$ 385,542.64		
RESTRICTED GRANTS-IN-AID					
TRANSFERS-IN					
ADVANCES-IN		\$ 170,312.00	\$ 170,312.00		
REFND OF PRIOR YEAR EXPENDITUR					
Total Revenues:	\$ 3,913,216.89	\$ 43,919,112.00	\$ 17,533,814.14		
Expenditures:					
PERSONNEL:					
SALARIES	\$ 1,870,308.67	\$ 23,593,950.00	\$ 8,147,649.65		\$ 15,446,300.35
FRINGE BENEFITS	\$ 761,174.39	\$ 8,592,610.73	\$ 2,883,455.89	\$ 900.73	\$ 5,708,254.11
TOTAL PERSONNEL:	\$ 2,631,483.06	\$ 32,186,560.73	\$ 11,031,105.54	\$ 900.73	\$ 21,154,554.46
PURCHASED SERVICES	\$ 636,893.00	\$ 9,557,249.72	\$ 2,917,560.88	\$ 1,632,707.01	\$ 5,006,981.83
SUPPLIES AND MATERIALS	\$ 50,327.05	\$ 1,356,353.88	\$ 401,943.22	\$ 199,047.99	\$ 755,362.67
CAPITAL OUTLAY	\$ 3,549.18	\$ 408,083.08	\$ 356,288.17	\$ 32,274.80	\$ 19,520.11
CAPITAL OUTLAY					
MISCELLANEOUS OBJECTS	\$ 152,800.13	\$ 978,070.50	\$ 390,103.15	\$ 7,077.40	\$ 580,889.95
OTHER USES OF FUNDS					
Total Expenditures:	\$ 3,475,052.42	\$ 44,486,317.91	\$ 15,097,000.96	\$ 1,872,007.93	\$ 27,517,309.02
Increase (Decrease) for Period	\$ 438,164.47		\$ 2,436,813.18		
Fund Balance, End of Period	\$ 3,287,782.96		\$ 3,287,782.96		
Current Encumbrances	\$ 1,872,007.93		\$ 1,872,007.93		

Date: 11/06/17
Time: 1:31 pm

GARFIELD HTS. BOARD OF EDUC.
Fiscal Year Budget
Revenues & Expenditures
October 1, 2017 through October 31, 2017

Page: 2
(FNDREVEX)

GENERAL (001)(cont'd)

	October Activity	Annual Budget	FYTD Activity	Encumbrances	Unencumbered Balance
Unencumbered Cash Balance	\$ 1,415,775.03		\$ 1,415,775.03		

Date: 11/06/17
 Time: 1:31 pm

GARFIELD HTS. BOARD OF EDUC.
 Fiscal Year Budget
 Revenues & Expenditures
 October 1, 2017 through October 31, 2017

	October Activity	Annual Budget	FYTD Activity	Encumbrances	Unencumbered Balance
Fund Balance, Beg. of Period	\$ 4,742,872.03		\$ 3,123,573.61		
Revenue:					
TAXES		\$ 3,475,000.00	\$ 1,627,974.99		
OTHER RECEIPTS - LOCAL SOURCES					
UNRESTRICTED GRANTS-IN-AID	\$ 295,375.46	\$ 715,000.00	\$ 295,375.46		
TRANSFERS-IN					
Total Revenues:	\$ 295,375.46	\$ 4,190,000.00	\$ 1,923,350.45		
Expenditures:					
PERSONNEL:					
FRINGE BENEFITS					
TOTAL PERSONNEL:	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
PURCHASED SERVICES					
MISCELLANEOUS OBJECTS		\$ 4,091,869.00	\$ 8,676.57		\$ 4,083,192.43
OTHER USES OF FUNDS					
Total Expenditures:		\$ 4,091,869.00	\$ 8,676.57		\$ 4,083,192.43
Increase (Decrease) for Period	\$ 295,375.46		\$ 1,914,673.88		
Fund Balance, End of Period	\$ 5,038,247.49		\$ 5,038,247.49		
Current Encumbrances	\$ 0.00		\$ 0.00		
Unencumbered Cash Balance	\$ 5,038,247.49		\$ 5,038,247.49		

Date: 11/06/17
 Time: 1:31 pm

GARFIELD HTS. BOARD OF EDUC.
 Fiscal Year Budget
 Revenues & Expenditures
 October 1, 2017 through October 31, 2017

Page: 4
 (FNDREVEX)

PERMANENT IMPROVEMENT (003)

	October Activity	Annual Budget	FYTD Activity	Encumbrances	Unencumbered Balance
Fund Balance, Beg. of Period	\$ 569,399.08		\$ 566,776.61		
Revenue:					
TAXES		\$ 133,500.00	\$ 60,272.47		
MISC. RECEIPTS - LOCAL SOURCES					
OTHER RECEIPTS - LOCAL SOURCES					
UNRESTRICTED GRANTS-IN-AID	\$ 10,591.74	\$ 32,000.00	\$ 10,591.74		
TRANSFERS-IN					
ADVANCES-IN					
Total Revenues:	\$ 10,591.74	\$ 165,500.00	\$ 70,864.21		
Expenditures:					
PURCHASED SERVICES		\$ 238,729.00	\$ 18,750.00	\$ 18,750.00	\$ 201,229.00
CAPITAL OUTLAY		\$ 155,000.00	\$ 38,900.00	\$ 62,958.17	\$ 53,141.83
CAPITAL OUTLAY					
MISCELLANEOUS OBJECTS		\$ 800.00			\$ 800.00
OTHER USES OF FUNDS					
Total Expenditures:		\$ 394,529.00	\$ 57,650.00	\$ 81,708.17	\$ 255,170.83
Increase (Decrease) for Period	\$ 10,591.74		\$ 13,214.21		
Fund Balance, End of Period	\$ 579,990.82		\$ 579,990.82		
Current Encumbrances	\$ 81,708.17		\$ 81,708.17		
Unencumbered Cash Balance	\$ 498,282.65		\$ 498,282.65		

Date: 11/06/17
 Time: 1:31 pm

GARFIELD HTS. BOARD OF EDUC.
 Fiscal Year Budget
 Revenues & Expenditures
 October 1, 2017 through October 31, 2017

Page: 5
 (FNDREVEX)

BUILDING (004)

	October Activity	Annual Budget	FYTD Activity	Encumbrances	Unencumbered Balance
Fund Balance, Beg. of Period	\$ 84,061.85		\$ 79,561.85		
Revenue:					
EARNINGS ON INVESTMENTS					
MISC. RECEIPTS - LOCAL SOURCES	\$ 1,500.00	\$ 18,000.00	\$ 6,000.00		
OTHER RECEIPTS - LOCAL SOURCES					
ADVANCES-IN					
REFND OF PRIOR YEAR EXPENDITUR					
Total Revenues:	\$ 1,500.00	\$ 18,000.00	\$ 6,000.00		
Expenditures:					
PURCHASED SERVICES					
SUPPLIES AND MATERIALS					
CAPITAL OUTLAY		\$ 12,000.00			\$ 12,000.00
OTHER USES OF FUNDS					
Total Expenditures:		\$ 12,000.00			\$ 12,000.00
Increase (Decrease) for Period	\$ 1,500.00		\$ 6,000.00		
Fund Balance, End of Period	\$ 85,561.85		\$ 85,561.85		
Current Encumbrances	\$ 0.00		\$ 0.00		
Unencumbered Cash Balance	\$ 85,561.85		\$ 85,561.85		

Date: 11/06/17
 Time: 1:31 pm

GARFIELD HTS. BOARD OF EDUC.
 Fiscal Year Budget
 Revenues & Expenditures
 October 1, 2017 through October 31, 2017

Page: 6
 (FNDREVEX)

FOOD SERVICE (006)

	October Activity	Annual Budget	FYTD Activity	Encumbrances	Unencumbered Balance
Fund Balance, Beg. of Period	\$ 1,181,158.22		\$ 1,316,082.94		
Revenue:					
EARNINGS ON INVESTMENTS	\$ 1,167.01	\$ 5,000.00	\$ 4,911.38		
FOOD SERVICES	\$ 21,486.61	\$ 243,000.00	\$ 63,277.63		
MISC. RECEIPTS - LOCAL SOURCES		\$ 5,000.00			
RESTRICTED GRANTS-IN-AID					
RESTRICTED GRANTS-IN-AID		\$ 25,000.00			
RESTRICTED GRANTS-IN-AID	\$ 101,755.93	\$ 1,425,000.00	\$ 245,500.49		
TRANSFERS-IN					
ADVANCES-IN					
REFND OF PRIOR YEAR EXPENDITUR					
Total Revenues:	\$ 124,409.55	\$ 1,703,000.00	\$ 313,689.50		
Expenditures:					
PERSONNEL:					
SALARIES	\$ 56,040.70	\$ 650,000.00	\$ 216,392.17		\$ 433,607.83
FRINGE BENEFITS	\$ 12,910.63	\$ 205,080.22	\$ 48,822.09	\$ 80.22	\$ 156,177.91
TOTAL PERSONNEL:	\$ 68,951.33	\$ 855,080.22	\$ 265,214.26	\$ 80.22	\$ 589,785.74
PURCHASED SERVICES	\$ 12,564.10	\$ 34,626.26	\$ 40,913.54	\$ 64,524.94	\$ 70,812.22-
SUPPLIES AND MATERIALS	\$ 73,382.45	\$ 755,431.04	\$ 148,333.68	\$ 300,805.32	\$ 306,292.04
CAPITAL OUTLAY		\$ 119,878.04	\$ 24,641.07		\$ 95,236.97
CAPITAL OUTLAY					
MISCELLANEOUS OBJECTS		\$ 5,000.00			\$ 5,000.00
OTHER USES OF FUNDS					
Total Expenditures:	\$ 154,897.88	\$ 1,770,015.56	\$ 479,102.55	\$ 365,410.48	\$ 925,502.53
Increase (Decrease) for Period	\$ 30,488.33-		\$ 165,413.05-		
Fund Balance, End of Period	\$ 1,150,669.89		\$ 1,150,669.89		
Current Encumbrances	\$ 365,410.48		\$ 365,410.48		
Unencumbered Cash Balance	\$ 785,259.41		\$ 785,259.41		

Date: 11/06/17
 Time: 1:31 pm

GARFIELD HTS. BOARD OF EDUC.
 Fiscal Year Budget
 Revenues & Expenditures
 October 1, 2017 through October 31, 2017

Page: 7
 (FNDREVEX)

	October Activity	Annual Budget	FYTD Activity	Encumbrances	Unencumbered Balance

Fund Balance, Beg. of Period	\$ 13,056.11		\$ 20,401.11		
Revenue:					
EARNINGS ON INVESTMENTS					
EXTRA CURRIC (STUDENT) ACTIVIT					
MISC. RECEIPTS - LOCAL SOURCES	\$ 500.00	\$ 10,000.00	\$ 500.00		
REFND OF PRIOR YEAR EXPENDITUR					

Total Revenues:	\$ 500.00	\$ 10,000.00	\$ 500.00		
Expenditures:					
MISCELLANEOUS OBJECTS		\$ 26,700.00	\$ 7,345.00	\$ 7,450.00	\$ 11,905.00

Total Expenditures:		\$ 26,700.00	\$ 7,345.00	\$ 7,450.00	\$ 11,905.00
Increase (Decrease) for Period	\$ 500.00		\$ 6,845.00-		
Fund Balance, End of Period	\$ 13,556.11		\$ 13,556.11		
	=====				
Current Encumbrances	\$ 7,450.00		\$ 7,450.00		
Unencumbered Cash Balance	\$ 6,106.11		\$ 6,106.11		
	=====				

Date: 11/06/17
 Time: 1:31 pm

GARFIELD HTS. BOARD OF EDUC.
 Fiscal Year Budget
 Revenues & Expenditures
 October 1, 2017 through October 31, 2017

Page: 8
 (FNDREVEX)

	ENDOWMENT (008)			
	October Activity	Annual Budget	FYTD Activity	Unencumbered Balance
Fund Balance, Beg. of Period	\$ 100,088.87		\$ 100,588.87	
Revenue:				
EARNINGS ON INVESTMENTS	\$ 252.78	\$ 500.00	\$ 252.78	
MISC. RECEIPTS - LOCAL SOURCES				
REFND OF PRIOR YEAR EXPENDITUR				
Total Revenues:	\$ 252.78	\$ 500.00	\$ 252.78	
Expenditures:				
MISCELLANEOUS OBJECTS		\$ 1,000.00	\$ 500.00	\$ 500.00
Total Expenditures:		\$ 1,000.00	\$ 500.00	\$ 500.00
Increase (Decrease) for Period	\$ 252.78		\$ 247.22-	
Fund Balance, End of Period	\$ 100,341.65		\$ 100,341.65	
	=====		=====	
Current Encumbrances	\$ 0.00		\$ 0.00	
Unencumbered Cash Balance	\$ 100,341.65		\$ 100,341.65	
	=====		=====	

Date: 11/06/17
 Time: 1:31 pm

GARFIELD HTS. BOARD OF EDUC.
 Fiscal Year Budget
 Revenues & Expenditures
 October 1, 2017 through October 31, 2017

UNIFORM SCHOOL SUPPLIES (009)

	October Activity	Annual Budget	FYTD Activity	Encumbrances	Unencumbered Balance
Fund Balance, Beg. of Period	\$ 12,658.02-		\$ 16.05		
Revenue:					
CLASSROOM MATERIALS AND FEES	\$ 1,560.00	\$ 28,000.00	\$ 3,890.00		
MISC. RECEIPTS - LOCAL SOURCES					
TRANSFERS-IN		\$ 35,100.00			
REFND OF PRIOR YEAR EXPENDITUR					
Total Revenues:	\$ 1,560.00	\$ 63,100.00	\$ 3,890.00		
Expenditures:					
SUPPLIES AND MATERIALS	\$ 20,445.76	\$ 63,113.12	\$ 35,449.83	\$ 23,002.57	\$ 4,660.72
OTHER USES OF FUNDS					
Total Expenditures:	\$ 20,445.76	\$ 63,113.12	\$ 35,449.83	\$ 23,002.57	\$ 4,660.72
Increase (Decrease) for Period	\$ 18,885.76-		\$ 31,559.83-		
Fund Balance, End of Period	\$ 31,543.78-		\$ 31,543.78-		
Current Encumbrances	\$ 23,002.57		\$ 23,002.57		
Unencumbered Cash Balance	\$ 54,546.35-		\$ 54,546.35-		

Date: 11/06/17
 Time: 1:31 pm

GARFIELD HTS. BOARD OF EDUC.
 Fiscal Year Budget
 Revenues & Expenditures
 October 1, 2017 through October 31, 2017

Page: 12
 (FNDREVEX)

ROTARY-INTERNAL SERVICES (014)

	October Activity	Annual Budget	FYTD Activity	Encumbrances	Unencumbered Balance
Fund Balance, Beg. of Period	\$ 65,306.53		\$ 76,553.54		
Revenue:					
TRANSPORTATION FEES	\$ 355.00	\$ 70,000.00	\$ 355.00		
EXTRA CURRIC (STUDENT) ACTIVIT	\$ 339.00	\$ 25,000.00	\$ 663.00		
MISC. RECEIPTS - LOCAL SOURCES	\$ 211.00	\$ 2,000.00	\$ 211.00		
TRANSFERS-IN					
REFND OF PRIOR YEAR EXPENDITUR					
Total Revenues:	\$ 905.00	\$ 97,000.00	\$ 1,229.00		
Expenditures:					
PERSONNEL:					
SALARIES					
FRINGE BENEFITS					
TOTAL PERSONNEL:	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
PURCHASED SERVICES	\$ 1,245.00	\$ 102,287.08	\$ 12,816.01	\$ 2,882.00	\$ 86,589.07
SUPPLIES AND MATERIALS					
CAPITAL OUTLAY					
MISCELLANEOUS OBJECTS		\$ 5,769.60			\$ 5,769.60
OTHER USES OF FUNDS					
Total Expenditures:	\$ 1,245.00	\$ 108,056.68	\$ 12,816.01	\$ 2,882.00	\$ 92,358.67
Increase (Decrease) for Period	\$ 340.00-		\$ 11,587.01-		
Fund Balance, End of Period	\$ 64,966.53		\$ 64,966.53		
Current Encumbrances	\$ 2,882.00		\$ 2,882.00		
Unencumbered Cash Balance	\$ 62,084.53		\$ 62,084.53		

Date: 11/06/17
 Time: 1:31 pm

GARFIELD HTS. BOARD OF EDUC.
 Fiscal Year Budget
 Revenues & Expenditures
 October 1, 2017 through October 31, 2017

Page: 13
 (FNDREVEX)

PUBLIC SCHOOL SUPPORT (018)

	October Activity	Annual Budget	FYTD Activity	Encumbrances	Unencumbered Balance
Fund Balance, Beg. of Period	\$ 5,636.20		\$ 7,915.09		
Revenue:					
EARNINGS ON INVESTMENTS					
FOOD SERVICES					
EXTRA CURRIC (STUDENT) ACTIVIT	\$ 1,907.85	\$ 21,400.00	\$ 2,377.23		
MISC. RECEIPTS - LOCAL SOURCES					
TRANSFERS-IN					
REFND OF PRIOR YEAR EXPENDITUR					
Total Revenues:	\$ 1,907.85	\$ 21,400.00	\$ 2,377.23		
Expenditures:					
PERSONNEL:					
SALARIES					
FRINGE BENEFITS					
TOTAL PERSONNEL:	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
SUPPLIES AND MATERIALS					
CAPITAL OUTLAY					
MISCELLANEOUS OBJECTS	\$ 2,479.40	\$ 19,534.48	\$ 5,227.67	\$ 14,777.36	\$ 470.55-
OTHER USES OF FUNDS					
Total Expenditures:	\$ 2,479.40	\$ 19,534.48	\$ 5,227.67	\$ 14,777.36	\$ 470.55-
Increase (Decrease) for Period	\$ 571.55-		\$ 2,850.44-		
Fund Balance, End of Period	\$ 5,064.65		\$ 5,064.65		
Current Encumbrances	\$ 14,777.36		\$ 14,777.36		
Unencumbered Cash Balance	\$ 9,712.71-		\$ 9,712.71-		

Date: 11/06/17
 Time: 1:31 pm

GARFIELD HTS. BOARD OF EDUC.
 Fiscal Year Budget
 Revenues & Expenditures
 October 1, 2017 through October 31, 2017

Page: 14
 (FNDREVEX)

	October Activity	Annual Budget	FYTD Activity	Encumbrances	Unencumbered Balance

Fund Balance, Beg. of Period	\$ 58,772.84-		\$ 51,400.78		
Revenue:					
MISC. RECEIPTS - LOCAL SOURCES	\$ 19,257.38		\$ 19,257.38		
RESTRICTED GRANTS-IN-AID					
RESTRICTED GRANTS-IN-AID					
TRANSFERS-IN					
ADVANCES-IN					
REFND OF PRIOR YEAR EXPENDITUR					

Total Revenues:	\$ 19,257.38		\$ 19,257.38		
Expenditures:					
PERSONNEL:					
SALARIES	\$ 10,022.70	\$ 45,200.00	\$ 43,541.01		\$ 1,658.99
FRINGE BENEFITS	\$ 2,337.84	\$ 7,113.95	\$ 9,543.15	\$ 13.95	\$ 2,443.15-

TOTAL PERSONNEL:	\$ 12,360.54	\$ 52,313.95	\$ 53,084.16	\$ 13.95	\$ 784.16-
PURCHASED SERVICES	\$ 5,000.00	\$ 21,280.00	\$ 5,250.00	\$ 1,170.00	\$ 14,860.00
SUPPLIES AND MATERIALS		\$ 5,023.71		\$ 78.07	\$ 4,945.64
CAPITAL OUTLAY					
MISCELLANEOUS OBJECTS					
OTHER USES OF FUNDS		\$ 69,200.00	\$ 69,200.00		

Total Expenditures:	\$ 17,360.54	\$ 147,817.66	\$ 127,534.16	\$ 1,262.02	\$ 19,021.48
Increase (Decrease) for Period	\$ 1,896.84		\$ 108,276.78-		
Fund Balance, End of Period	\$ 56,876.00-		\$ 56,876.00-		
	=====				
Current Encumbrances	\$ 1,262.02		\$ 1,262.02		
Unencumbered Cash Balance	\$ 58,138.02-		\$ 58,138.02-		
	=====				

Date: 11/06/17
 Time: 1:31 pm

GARFIELD HTS. BOARD OF EDUC.
 Fiscal Year Budget
 Revenues & Expenditures
 October 1, 2017 through October 31, 2017

Page: 15
 (FNDREVEX)

DISTRICT AGENCY (022)

	October Activity	Annual Budget	FYTD Activity	Encumbrances	Unencumbered Balance
Fund Balance, Beg. of Period	\$ 18,801.98		\$ 18,455.93		
Revenue:					
EXTRA CURRIC (STUDENT) ACTIVIT					
Total Revenues:					
Expenditures:					
PERSONNEL:					
SALARIES					
FRINGE BENEFITS					
TOTAL PERSONNEL:	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
PURCHASED SERVICES			\$ 346.05-		\$ 346.05
MISCELLANEOUS OBJECTS					
Total Expenditures:			\$ 346.05-		\$ 346.05
Increase (Decrease) for Period	\$ 0.00		\$ 346.05		
Fund Balance, End of Period	\$ 18,801.98		\$ 18,801.98		
Current Encumbrances	\$ 0.00		\$ 0.00		
Unencumbered Cash Balance	\$ 18,801.98		\$ 18,801.98		

Date: 11/06/17
 Time: 1:31 pm

GARFIELD HTS. BOARD OF EDUC.
 Fiscal Year Budget
 Revenues & Expenditures
 October 1, 2017 through October 31, 2017

EMPLOYEE BENEFITS SELF INS. (024)

	October Activity	Annual Budget	FYTD Activity	Encumbrances	Unencumbered Balance
Fund Balance, Beg. of Period	\$ 27,689.25		\$ 2.55		
Revenue:					
MISC. RECEIPTS - LOCAL SOURCES		\$ 400,000.00			
ADVANCES-IN					
REFND OF PRIOR YEAR EXPENDITUR					
Total Revenues:	\$ 400,000.00				
Expenditures:					
PERSONNEL:					
SALARIES					
TOTAL PERSONNEL:	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
MISCELLANEOUS OBJECTS	\$ 105,440.38-	\$ 399,056.85	\$ 157,837.08-	\$ 1,012,963.22	\$ 456,069.29-
OTHER USES OF FUNDS			\$ 24,710.00		\$ 24,710.00-
Total Expenditures:	\$ 105,440.38-	\$ 399,056.85	\$ 133,127.08-	\$ 1,012,963.22	\$ 480,779.29-
Increase (Decrease) for Period	\$ 105,440.38		\$ 133,127.08		
Fund Balance, End of Period	\$ 133,129.63		\$ 133,129.63		
Current Encumbrances	\$ 1,012,963.22		\$ 1,012,963.22		
Unencumbered Cash Balance	\$ 879,833.59-		\$ 879,833.59-		

Date: 11/06/17
 Time: 1:31 pm

GARFIELD HTS. BOARD OF EDUC.
 Fiscal Year Budget
 Revenues & Expenditures
 October 1, 2017 through October 31, 2017

Page: 18
 (FNDREVEX)

CLASSROOM FACILITIES MAINT. (034)

	October Activity	Annual Budget	FYTD Activity	Encumbrances	Unencumbered Balance
Fund Balance, Beg. of Period	\$ 673,084.56		\$ 657,875.12		
Revenue:					
TAXES		\$ 190,000.00	\$ 86,329.76		
UNRESTRICTED GRANTS-IN-AID	\$ 15,172.64	\$ 30,000.00	\$ 15,172.64		
RESTRICTED GRANTS-IN-AID		\$ 72,000.00			
TRANSFERS-IN					
Total Revenues:	\$ 15,172.64	\$ 292,000.00	\$ 101,502.40		
Expenditures:					
PURCHASED SERVICES	\$ 4,191.00	\$ 204,736.00	\$ 55,111.32	\$ 80,539.68	\$ 69,085.00
SUPPLIES AND MATERIALS					
CAPITAL OUTLAY		\$ 225,000.00	\$ 20,200.00	\$ 1,600.00	\$ 203,200.00
MISCELLANEOUS OBJECTS		\$ 200.00			\$ 200.00
Total Expenditures:	\$ 4,191.00	\$ 429,936.00	\$ 75,311.32	\$ 82,139.68	\$ 272,485.00
Increase (Decrease) for Period	\$ 10,981.64		\$ 26,191.08		
Fund Balance, End of Period	\$ 684,066.20		\$ 684,066.20		
Current Encumbrances	\$ 82,139.68		\$ 82,139.68		
Unencumbered Cash Balance	\$ 601,926.52		\$ 601,926.52		

Date: 11/06/17
 Time: 1:31 pm

GARFIELD HTS. BOARD OF EDUC.
 Fiscal Year Budget
 Revenues & Expenditures
 October 1, 2017 through October 31, 2017

Page: 19
 (FNDREVEX)

STUDENT MANAGED ACTIVITY (200)

	October Activity	Annual Budget	FYTD Activity	Encumbrances	Unencumbered Balance
Fund Balance, Beg. of Period	\$ 29,352.39		\$ 18,711.89		
Revenue:					
EXTRA CURRIC (STUDENT) ACTIVIT REFND OF PRIOR YEAR EXPENDITUR	\$ 13,763.00	\$ 66,235.00	\$ 26,762.50		
Total Revenues:	\$ 13,763.00	\$ 66,235.00	\$ 26,762.50		
Expenditures:					
PERSONNEL: SALARIES FRINGE BENEFITS					
TOTAL PERSONNEL:	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
MISCELLANEOUS OBJECTS	\$ 5,636.14	\$ 74,719.31	\$ 7,995.14	\$ 11,695.45	\$ 55,028.72
Total Expenditures:	\$ 5,636.14	\$ 74,719.31	\$ 7,995.14	\$ 11,695.45	\$ 55,028.72
Increase (Decrease) for Period	\$ 8,126.86		\$ 18,767.36		
Fund Balance, End of Period	\$ 37,479.25		\$ 37,479.25		
Current Encumbrances	\$ 11,695.45		\$ 11,695.45		
Unencumbered Cash Balance	\$ 25,783.80		\$ 25,783.80		

Date: 11/06/17
 Time: 1:31 pm

GARFIELD HTS. BOARD OF EDUC.
 Fiscal Year Budget
 Revenues & Expenditures
 October 1, 2017 through October 31, 2017

Page: 20
 (FNDREVEX)

DISTRICT MANAGED ACTIVITY (300)

	October Activity	Annual Budget	FYTD Activity	Encumbrances	Unencumbered Balance
Fund Balance, Beg. of Period	\$ 30,292.76-		\$ 23,818.67		
Revenue:					
EXTRA CURRIC (STUDENT) ACTIVIT	\$ 9,882.00	\$ 95,800.00	\$ 22,686.88		
MISC. RECEIPTS - LOCAL SOURCES		\$ 1,500.00			
TRANSFERS-IN					
ADVANCES-IN					
REFND OF PRIOR YEAR EXPENDITUR					
Total Revenues:	\$ 9,882.00	\$ 97,300.00	\$ 22,686.88		
Expenditures:					
PERSONNEL:					
SALARIES	\$ 1,530.00	\$ 15,000.00	\$ 2,995.00		\$ 12,005.00
FRINGE BENEFITS	\$ 392.16	\$ 8,004.25	\$ 669.88	\$ 4.25	\$ 7,330.12
TOTAL PERSONNEL:	\$ 1,922.16	\$ 23,004.25	\$ 3,664.88	\$ 4.25	\$ 19,335.12
PURCHASED SERVICES	\$ 990.00	\$ 76,070.00	\$ 2,725.00	\$ 8,502.84	\$ 64,842.16
SUPPLIES AND MATERIALS	\$ 5,360.90	\$ 124,796.00	\$ 38,805.56	\$ 33,963.04	\$ 52,027.40
CAPITAL OUTLAY		\$ 20,310.00	\$ 20,421.43	\$ 2,310.00	\$ 2,421.43-
OBJECT CODE 0700 INVALID					
MISCELLANEOUS OBJECTS	\$ 8,035.89	\$ 24,050.00	\$ 17,608.39	\$ 8,996.81	\$ 2,555.20-
OTHER USES OF FUNDS					
Total Expenditures:	\$ 16,308.95	\$ 268,230.25	\$ 83,225.26	\$ 53,776.94	\$ 131,228.05
Increase (Decrease) for Period	\$ 6,426.95-		\$ 60,538.38-		
Fund Balance, End of Period	\$ 36,719.71-		\$ 36,719.71-		
Current Encumbrances	\$ 53,776.94		\$ 53,776.94		
Unencumbered Cash Balance	\$ 90,496.65-		\$ 90,496.65-		

Date: 11/06/17
 Time: 1:21 pm

GARFIELD HTS. BOARD OF EDUC.
 Fiscal Year 2017-2018 Budget
 Revenues & Expenditures
 October 1, 2017 through October 31, 2017

Page: 3
 (FNDREVEX)

DMSA-MUSIC EXPRESS-HS (300 910E)

	October Activity	Annual Budget	FYTD Activity	Encumbrances	Unencumbered Balance
Fund Balance, Beg. of Period	\$ 2,452.51-		\$ 8,547.49		
Revenue:					
EXTRA CURRIC (STUDENT) ACTIVIT	\$ 740.00	\$ 35,000.00	\$ 740.00		
MISC. RECEIPTS - LOCAL SOURCES					
REFND OF PRIOR YEAR EXPENDITUR					
Total Revenues:	\$ 740.00	\$ 35,000.00	\$ 740.00		
Expenditures:					
PERSONNEL:					
SALARIES					
FRINGE BENEFITS					
TOTAL PERSONNEL:	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
PURCHASED SERVICES				\$ 3,000.00	\$ 3,000.00-
SUPPLIES AND MATERIALS		\$ 43,000.00	\$ 11,000.00	\$ 11,032.00	\$ 20,968.00
MISCELLANEOUS OBJECTS					
Total Expenditures:		\$ 43,000.00	\$ 11,000.00	\$ 14,032.00	\$ 17,968.00
Increase (Decrease) for Period	\$ 740.00		\$ 10,260.00-		
Fund Balance, End of Period	\$ 1,712.51-		\$ 1,712.51-		
Current Encumbrances	\$ 14,032.00		\$ 14,032.00		
Unencumbered Cash Balance	\$ 15,744.51-		\$ 15,744.51-		

Date: 11/06/17
 Time: 1:21 pm

GARFIELD HTS. BOARD OF EDUC.
 Fiscal Year 2017-2018 Budget
 Revenues & Expenditures
 October 1, 2017 through October 31, 2017

	October Activity	Annual Budget	FYTD Activity	Encumbrances	Unencumbered Balance
DMSA-ATHLETICS (300 926A)					
Fund Balance, Beg. of Period	\$ 42,714.37-		\$ 7.15-		
Revenue:					
EXTRA CURRIC (STUDENT) ACTIVIT	\$ 8,417.00	\$ 38,300.00	\$ 20,418.00		
MISC. RECEIPTS - LOCAL SOURCES					
TRANSFERS-IN					
REFND OF PRIOR YEAR EXPENDITUR					
Total Revenues:	\$ 8,417.00	\$ 38,300.00	\$ 20,418.00		
Expenditures:					
PERSONNEL:					
SALARIES	\$ 1,530.00	\$ 15,000.00	\$ 2,995.00		\$ 12,005.00
FRINGE BENEFITS	\$ 392.16	\$ 8,004.25	\$ 669.88	\$ 4.25	\$ 7,330.12
TOTAL PERSONNEL:	\$ 1,922.16	\$ 23,004.25	\$ 3,664.88	\$ 4.25	\$ 19,335.12
PURCHASED SERVICES	\$ 990.00	\$ 70,070.00	\$ 2,725.00	\$ 2,340.00	\$ 65,005.00
SUPPLIES AND MATERIALS	\$ 4,151.40	\$ 60,546.00	\$ 25,395.47	\$ 7,651.14	\$ 27,499.39
CAPITAL OUTLAY		\$ 20,310.00	\$ 20,421.43	\$ 2,310.00	\$ 2,421.43-
OBJECT CODE 0700 INVALID					
MISCELLANEOUS OBJECTS	\$ 7,490.00	\$ 13,950.00	\$ 17,055.00	\$ 5,065.00	\$ 8,170.00-
OTHER USES OF FUNDS					
Total Expenditures:	\$ 14,553.56	\$ 187,880.25	\$ 69,261.78	\$ 17,370.39	\$ 101,248.08
Increase (Decrease) for Period	\$ 6,136.56-		\$ 48,843.78-		
Fund Balance, End of Period	\$ 48,850.93-		\$ 48,850.93-		
Current Encumbrances	\$ 17,370.39		\$ 17,370.39		
Unencumbered Cash Balance	\$ 66,221.32-		\$ 66,221.32-		

Date: 11/06/17
 Time: 1:31 pm

GARFIELD HTS. BOARD OF EDUC.
 Fiscal Year Budget
 Revenues & Expenditures
 October 1, 2017 through October 31, 2017

Page: 21
 (FNDREVEX)

	October Activity	Annual Budget	FYTD Activity	Encumbrances	Unencumbered Balance

Fund Balance, Beg. of Period	\$ 93,681.89		\$ 20,565.62		
Revenue:					
EARNINGS ON INVESTMENTS	\$ 174.81	\$ 900.00	\$ 682.32		
RESTRICTED GRANTS-IN-AID		\$ 623,123.00	\$ 155,780.63		
ADVANCES-IN					
REFND OF PRIOR YEAR EXPENDITUR					

Total Revenues:	\$ 174.81	\$ 624,023.00	\$ 156,462.95		
Expenditures:					
PERSONNEL:					
SALARIES	\$ 2,067.78	\$ 36,700.00	\$ 7,667.42		\$ 29,032.58
FRINGE BENEFITS	\$ 332.04	\$ 6,702.82	\$ 1,208.09	\$ 2.82	\$ 5,491.91

TOTAL PERSONNEL:	\$ 2,399.82	\$ 43,402.82	\$ 8,875.51	\$ 2.82	\$ 34,524.49
PURCHASED SERVICES	\$ 22,945.00	\$ 361,209.71	\$ 39,028.78	\$ 232,191.89	\$ 89,989.04
SUPPLIES AND MATERIALS	\$ 13,375.44	\$ 535,144.08	\$ 73,987.84	\$ 38,036.36	\$ 423,119.88
CAPITAL OUTLAY					
CAPITAL OUTLAY					
MISCELLANEOUS OBJECTS		\$ 26,000.00			\$ 26,000.00
OTHER USES OF FUNDS					

Total Expenditures:	\$ 38,720.26	\$ 965,756.61	\$ 121,892.13	\$ 270,231.07	\$ 573,633.41
Increase (Decrease) for Period	\$ 38,545.45-		\$ 34,570.82		
Fund Balance, End of Period	\$ 55,136.44		\$ 55,136.44		
	=====				
Current Encumbrances	\$ 270,231.07		\$ 270,231.07		
Unencumbered Cash Balance	\$ 215,094.63-		\$ 215,094.63-		
	=====				

Date: 11/06/17
 Time: 1:31 pm

GARFIELD HTS. BOARD OF EDUC.
 Fiscal Year Budget
 Revenues & Expenditures
 October 1, 2017 through October 31, 2017

Page: 23
 (FNDREVEX)

PUBLIC SCHOOL PRESCHOOL (439)

	October Activity	Annual Budget	FYTD Activity	Encumbrances	Unencumbered Balance
Fund Balance, Beg. of Period	\$ 50,756.67-		\$ 0.55-		
Revenue:					
TUITION					
RESTRICTED GRANTS-IN-AID	\$ 2,942.96		\$ 19,185.16		
TRANSFERS-IN					
ADVANCES-IN					
Total Revenues:	\$ 2,942.96		\$ 19,185.16		
Expenditures:					
PERSONNEL:					
SALARIES		\$ 68,800.00	\$ 20,403.70		\$ 48,396.30
FRINGE BENEFITS	\$ 140.15	\$ 11,206.57	\$ 7,539.77	\$ 6.57	\$ 3,660.23
TOTAL PERSONNEL:	\$ 140.15	\$ 80,006.57	\$ 27,943.47	\$ 6.57	\$ 52,056.53
PURCHASED SERVICES					
SUPPLIES AND MATERIALS					
CAPITAL OUTLAY					
OTHER USES OF FUNDS			\$ 39,195.00		\$ 39,195.00-
Total Expenditures:	\$ 140.15	\$ 80,006.57	\$ 67,138.47	\$ 6.57	\$ 12,861.53
Increase (Decrease) for Period	\$ 2,802.81		\$ 47,953.31-		
Fund Balance, End of Period	\$ 47,953.86-		\$ 47,953.86-		
Current Encumbrances	\$ 6.57		\$ 6.57		
Unencumbered Cash Balance	\$ 47,960.43-		\$ 47,960.43-		

Date: 11/06/17
 Time: 1:31 pm

GARFIELD HTS. BOARD OF EDUC.
 Fiscal Year Budget
 Revenues & Expenditures
 October 1, 2017 through October 31, 2017

Page: 27
 (FNDREVEX)

DATA COMMUNICATION FUND (451)

	October Activity	Annual Budget	FYTD Activity	Encumbrances	Unencumbered Balance
Fund Balance, Beg. of Period	\$ 82.70		\$ 82.70		
Revenue:					
RESTRICTED GRANTS-IN-AID REFND OF PRIOR YEAR EXPENDITUR	\$ 4,500.00		\$ 4,500.00		
Total Revenues:	\$ 4,500.00		\$ 4,500.00		
Expenditures:					
PURCHASED SERVICES					
Total Expenditures:					
Increase (Decrease) for Period	\$ 4,500.00		\$ 4,500.00		
Fund Balance, End of Period	\$ 4,582.70		\$ 4,582.70		
	=====		=====		
Current Encumbrances	\$ 0.00		\$ 0.00		
Unencumbered Cash Balance	\$ 4,582.70		\$ 4,582.70		
	=====		=====		

Date: 11/06/17
 Time: 1:31 pm

GARFIELD HTS. BOARD OF EDUC.
 Fiscal Year Budget
 Revenues & Expenditures
 October 1, 2017 through October 31, 2017

Page: 31
 (FNDREVEX)

VOCATIONAL EDUC. ENHANCEMENTS (461)

	October Activity	Annual Budget	FYTD Activity	Encumbrances	Unencumbered Balance
Fund Balance, Beg. of Period	\$ 3,198.82		\$ 3,198.82		
Revenue:					
RESTRICTED GRANTS-IN-AID					
ADVANCES-IN					
REFND OF PRIOR YEAR EXPENDITUR					
Total Revenues:					
Expenditures:					
PERSONNEL:					
SALARIES					
FRINGE BENEFITS					
TOTAL PERSONNEL:	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
PURCHASED SERVICES					
SUPPLIES AND MATERIALS					
OTHER USES OF FUNDS					
Total Expenditures:					
Increase (Decrease) for Period	\$ 0.00		\$ 0.00		
Fund Balance, End of Period	\$ 3,198.82		\$ 3,198.82		
Current Encumbrances	\$ 0.00		\$ 0.00		
Unencumbered Cash Balance	\$ 3,198.82		\$ 3,198.82		

Date: 11/06/17
 Time: 1:31 pm

GARFIELD HTS. BOARD OF EDUC.
 Fiscal Year Budget
 Revenues & Expenditures
 October 1, 2017 through October 31, 2017

Page: 34
 (FNDREVEX)

MISCELLANEOUS STATE GRANT FUND (499)

	October Activity	Annual Budget	FYTD Activity	Encumbrances	Unencumbered Balance
Fund Balance, Beg. of Period	\$ 3,088.24		\$ 3,088.24		
Revenue:					
RESTRICTED GRANTS-IN-AID					
TRANSFERS-IN					
REFND OF PRIOR YEAR EXPENDITUR					
Total Revenues:					
Expenditures:					
PERSONNEL:					
SALARIES					
FRINGE BENEFITS					
TOTAL PERSONNEL:	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
PURCHASED SERVICES	\$ 6,537.00		\$ 6,537.00	\$ 6,537.00	\$ 13,074.00-
SUPPLIES AND MATERIALS					
CAPITAL OUTLAY					
MISCELLANEOUS OBJECTS					
OTHER USES OF FUNDS					
Total Expenditures:	\$ 6,537.00		\$ 6,537.00	\$ 6,537.00	\$ 13,074.00-
Increase (Decrease) for Period	\$ 6,537.00-		\$ 6,537.00-		
Fund Balance, End of Period	\$ 3,448.76-		\$ 3,448.76-		
Current Encumbrances	\$ 6,537.00		\$ 6,537.00		
Unencumbered Cash Balance	\$ 9,985.76-		\$ 9,985.76-		

Date: 11/06/17
 Time: 1:31 pm

GARFIELD HTS. BOARD OF EDUC.
 Fiscal Year Budget
 Revenues & Expenditures
 October 1, 2017 through October 31, 2017

Page: 37
 (FNDREVEX)

	October Activity	Annual Budget	FYTD Activity	Encumbrances	Unencumbered Balance

Fund Balance, Beg. of Period	\$ 345,760.72-		\$ 199,408.60-		
Revenue:					
RESTRICTED GRANTS-IN-AID			\$ 170,338.14		
ADVANCES-IN					
REFND OF PRIOR YEAR EXPENDITUR					

Total Revenues:			\$ 170,338.14		
Expenditures:					
PERSONNEL:					
SALARIES	\$ 11,660.16	\$ 252,000.00	\$ 47,231.74		\$ 204,768.26
FRINGE BENEFITS	\$ 5,201.02	\$ 49,156.17	\$ 20,337.51	\$ 13.17	\$ 28,805.49
TOTAL PERSONNEL:	\$ 16,861.18	\$ 301,156.17	\$ 67,569.25	\$ 13.17	\$ 233,573.75
PURCHASED SERVICES	\$ 62,605.48	\$ 670,648.76	\$ 324,289.85	\$ 291,586.79	\$ 54,772.12
SUPPLIES AND MATERIALS	\$ 12,126.35	\$ 53,237.93	\$ 16,424.17	\$ 13,327.64	\$ 23,486.12
CAPITAL OUTLAY		\$ 3,700.00			\$ 3,700.00
MISCELLANEOUS OBJECTS					
OTHER USES OF FUNDS					

Total Expenditures:	\$ 91,593.01	\$ 1,028,742.86	\$ 408,283.27	\$ 304,927.60	\$ 315,531.99
Increase (Decrease) for Period	\$ 91,593.01-		\$ 237,945.13-		
Fund Balance, End of Period	\$ 437,353.73-		\$ 437,353.73-		
=====					
Current Encumbrances	\$ 304,927.60		\$ 304,927.60		
Unencumbered Cash Balance	\$ 742,281.33-		\$ 742,281.33-		
=====					

Date: 11/06/17
 Time: 1:31 pm

GARFIELD HTS. BOARD OF EDUC.
 Fiscal Year Budget
 Revenues & Expenditures
 October 1, 2017 through October 31, 2017

Page: 40
 (FNDREVEX)

TITLE I SCHOOL IMPROVEMENT A (536)

	October Activity	Annual Budget	FYTD Activity	Encumbrances	Unencumbered Balance
Fund Balance, Beg. of Period	\$ 10,787.07-		\$ 12.48		
Revenue:					
RESTRICTED GRANTS-IN-AID			\$ 12,381.01		
TRANSFERS-IN					
ADVANCES-IN					
Total Revenues:			\$ 12,381.01		
Expenditures:					
PERSONNEL:					
SALARIES	\$ 688.77		\$ 2,386.89		\$ 2,386.89-
FRINGE BENEFITS	\$ 99.85	\$ 12.70	\$ 389.69	\$ 12.70	\$ 389.69-
TOTAL PERSONNEL:	\$ 788.62	\$ 12.70	\$ 2,776.58	\$ 12.70	\$ 2,776.58-
PURCHASED SERVICES		\$ 12,056.54	\$ 5,927.60	\$ 803.94	\$ 5,325.00
SUPPLIES AND MATERIALS		\$ 1,126.80	\$ 2,065.00		\$ 938.20-
OTHER USES OF FUNDS			\$ 13,200.00		\$ 13,200.00-
Total Expenditures:	\$ 788.62	\$ 13,196.04	\$ 23,969.18	\$ 816.64	\$ 11,589.78-
Increase (Decrease) for Period	\$ 788.62-		\$ 11,588.17-		
Fund Balance, End of Period	\$ 11,575.69-		\$ 11,575.69-		
Current Encumbrances	\$ 816.64		\$ 816.64		
Unencumbered Cash Balance	\$ 12,392.33-		\$ 12,392.33-		

Date: 11/06/17
 Time: 1:31 pm

GARFIELD HTS. BOARD OF EDUC.
 Fiscal Year Budget
 Revenues & Expenditures
 October 1, 2017 through October 31, 2017

Page: 42
 (FNDREVEX)

TITLE I DISADVANTAGED CHILDREN (572)

	October Activity	Annual Budget	FYTD Activity	Encumbrances	Unencumbered Balance
Fund Balance, Beg. of Period	\$ 394,734.07-		\$ 404,219.84-		
Revenue:					
MISC. RECEIPTS - LOCAL SOURCES					
RESTRICTED GRANTS-IN-AID					
RESTRICTED GRANTS-IN-AID	\$ 114,156.77		\$ 386,826.91		
ADVANCES-IN					
REFND OF PRIOR YEAR EXPENDITUR					
Total Revenues:	\$ 114,156.77		\$ 386,826.91		
Expenditures:					
PERSONNEL:					
SALARIES	\$ 64,683.26	\$ 968,677.00	\$ 243,438.51		\$ 725,238.49
FRINGE BENEFITS	\$ 21,588.82	\$ 150,628.12	\$ 82,004.08	\$ 105.12	\$ 68,518.92
TOTAL PERSONNEL:	\$ 86,272.08	\$ 1,119,305.12	\$ 325,442.59	\$ 105.12	\$ 793,757.41
PURCHASED SERVICES	\$ 7,909.93	\$ 245,721.05	\$ 25,581.68	\$ 173,560.53	\$ 46,578.84
SUPPLIES AND MATERIALS	\$ 645.15	\$ 36,214.69	\$ 6,987.26	\$ 1,348.05	\$ 27,879.38
CAPITAL OUTLAY					
MISCELLANEOUS OBJECTS					
OTHER USES OF FUNDS					
Total Expenditures:	\$ 94,827.16	\$ 1,401,240.86	\$ 358,011.53	\$ 175,013.70	\$ 868,215.63
Increase (Decrease) for Period	\$ 19,329.61		\$ 28,815.38		
Fund Balance, End of Period	\$ 375,404.46-		\$ 375,404.46-		
Current Encumbrances	\$ 175,013.70		\$ 175,013.70		
Unencumbered Cash Balance	\$ 550,418.16-		\$ 550,418.16-		

Date: 11/06/17
 Time: 1:31 pm

GARFIELD HTS. BOARD OF EDUC.
 Fiscal Year Budget
 Revenues & Expenditures
 October 1, 2017 through October 31, 2017

Page: 45
 (FNDREVEX)

IDEA PRESCHOOL-HANDICAPPED (587)

	October Activity	Annual Budget	FYTD Activity	Encumbrances	Unencumbered Balance
Fund Balance, Beg. of Period	\$ 13,343.49-		\$ 1.02		
Revenue:					
RESTRICTED GRANTS-IN-AID					
TRANSFERS-IN					
ADVANCES-IN					
Total Revenues:					
Expenditures:					
PERSONNEL:					
SALARIES	\$ 5,885.92	\$ 18,000.00	\$ 16,112.80		\$ 1,887.20
FRINGE BENEFITS	\$ 2,369.16	\$ 4,200.28	\$ 4,054.79	\$.46	\$ 145.03
TOTAL PERSONNEL:	\$ 8,255.08	\$ 22,200.28	\$ 20,167.59	\$ 0.46	\$ 2,032.23
PURCHASED SERVICES		\$ 8,178.00			\$ 8,178.00
SUPPLIES AND MATERIALS			\$ 1,432.00		\$ 1,432.00-
OTHER USES OF FUNDS					
Total Expenditures:	\$ 8,255.08	\$ 30,378.28	\$ 21,599.59	\$.46	\$ 8,778.23
Increase (Decrease) for Period	\$ 8,255.08-		\$ 21,599.59-		
Fund Balance, End of Period	\$ 21,598.57-		\$ 21,598.57-		
Current Encumbrances	\$ 0.46		\$ 0.46		
Unencumbered Cash Balance	\$ 21,599.03-		\$ 21,599.03-		

Date: 11/06/17
 Time: 1:31 pm

GARFIELD HTS. BOARD OF EDUC.
 Fiscal Year Budget
 Revenues & Expenditures
 October 1, 2017 through October 31, 2017

Page: 46
 (FNDREVEX)

IMPROVING TEACHER QUALITY (590)

	October Activity	Annual Budget	FYTD Activity	Encumbrances	Unencumbered Balance
Fund Balance, Beg. of Period	\$ 81,509.37-		\$ 35.30		
Revenue:					
RESTRICTED GRANTS-IN-AID	\$ 24,726.31		\$ 24,726.31		
TRANSFERS-IN					
ADVANCES-IN					
REFND OF PRIOR YEAR EXPENDITUR					
Total Revenues:	\$ 24,726.31		\$ 24,726.31		
Expenditures:					
PERSONNEL:					
SALARIES	\$ 11,310.44	\$ 81,000.00	\$ 55,323.12		\$ 25,676.88
FRINGE BENEFITS	\$ 4,449.43	\$ 25,010.63	\$ 20,381.42	\$ 10.63	\$ 4,618.58
TOTAL PERSONNEL:	\$ 15,759.87	\$ 106,010.63	\$ 75,704.54	\$ 10.63	\$ 30,295.46
PURCHASED SERVICES		\$ 103,138.15	\$ 1,000.00	\$ 9,583.23	\$ 92,554.92
SUPPLIES AND MATERIALS		\$ 5,000.00		\$ 3,000.00	\$ 2,000.00
MISCELLANEOUS OBJECTS					
OTHER USES OF FUNDS			\$ 20,600.00		\$ 20,600.00-
Total Expenditures:	\$ 15,759.87	\$ 214,148.78	\$ 97,304.54	\$ 12,593.86	\$ 104,250.38
Increase (Decrease) for Period	\$ 8,966.44		\$ 72,578.23-		
Fund Balance, End of Period	\$ 72,542.93-		\$ 72,542.93-		
Current Encumbrances	\$ 12,593.86		\$ 12,593.86		
Unencumbered Cash Balance	\$ 85,136.79-		\$ 85,136.79-		

Date: 11/06/17
 Time: 1:31 pm

GARFIELD HTS. BOARD OF EDUC.
 Fiscal Year Budget
 Revenues & Expenditures
 October 1, 2017 through October 31, 2017

Page: 47
 (FNDREVEX)

MISCELLANEOUS FED. GRANT FUND (599)

	October Activity	Annual Budget	FYTD Activity	Encumbrances	Unencumbered Balance
Fund Balance, Beg. of Period	\$ 4,044.18		\$ 4,044.18		
Revenue:					
RESTRICTED GRANTS-IN-AID					
ADVANCES-IN					
REFND OF PRIOR YEAR EXPENDITUR					
Total Revenues:					
Expenditures:					
PERSONNEL:					
SALARIES		\$ 9,360.00			\$ 9,360.00
FRINGE BENEFITS		\$ 1,600.00			\$ 1,600.00
TOTAL PERSONNEL:	\$ 0.00	\$ 10,960.00	\$ 0.00	\$ 0.00	\$ 10,960.00
PURCHASED SERVICES		\$ 20,977.64		\$ 150.00	\$ 20,827.64
SUPPLIES AND MATERIALS					
CAPITAL OUTLAY					
CAPITAL OUTLAY					
MISCELLANEOUS OBJECTS					
OTHER USES OF FUNDS					
Total Expenditures:		\$ 31,937.64		\$ 150.00	\$ 31,787.64
Increase (Decrease) for Period	\$ 0.00		\$ 0.00		
Fund Balance, End of Period	\$ 4,044.18		\$ 4,044.18		
Current Encumbrances	\$ 150.00		\$ 150.00		
Unencumbered Cash Balance	\$ 3,894.18		\$ 3,894.18		

Date: 11/06/17
 Time: 1:31 pm

GARFIELD HTS. BOARD OF EDUC.
 Fiscal Year Budget
 Revenues & Expenditures
 October 1, 2017 through October 31, 2017

Page: 48
 (FNDREVEX)

Aggregate of Funds					
	October Activity	Annual Budget	FYTD Activity	Encumbrances	Unencumbered Balance
Total Fund Balance, Beg. of Period	\$ 9,473,935.60		\$ 6,350,827.12		
Revenue:					
TAXES	\$ 187,279.44	\$ 19,785,000.00	\$ 9,227,118.67		
TUITION	\$ 743.90	\$ 400,000.00	\$ 298,228.53		
TRANSPORTATION FEES	\$ 355.00	\$ 70,000.00	\$ 355.00		
EARNINGS ON INVESTMENTS	\$ 10,570.54	\$ 56,400.00	\$ 27,646.53		
FOOD SERVICES	\$ 21,486.61	\$ 243,000.00	\$ 63,277.63		
EXTRA CURRIC (STUDENT) ACTIVIT	\$ 28,781.85	\$ 248,435.00	\$ 68,359.61		
CLASSROOM MATERIALS AND FEES	\$ 1,560.00	\$ 28,000.00	\$ 3,890.00		
MISC. RECEIPTS - LOCAL SOURCES	\$ 24,529.32	\$ 716,500.00	\$ 60,366.59		
OTHER RECEIPTS - LOCAL SOURCES					
UNRESTRICTED GRANTS-IN-AID					
RESTRICTED GRANTS-IN-AID					
UNRESTRICTED GRANTS-IN-AID	\$ 3,954,254.19	\$ 26,513,300.00	\$ 9,476,261.10		
RESTRICTED GRANTS-IN-AID	\$ 84,595.28	\$ 1,976,123.00	\$ 566,982.52		
REVENUE FOR/ON BEHALF SCL DIST					
RESTRICTED GRANTS-IN-AID	\$ 240,639.01	\$ 1,425,000.00	\$ 839,772.86		
TRANSFERS-IN		\$ 35,100.00			
ADVANCES-IN		\$ 170,312.00	\$ 170,312.00		
REFND OF PRIOR YEAR EXPENDITUR					
Total Revenues:	\$ 4,554,795.14	\$ 51,667,170.00	\$ 20,802,571.04		
Expenditures:					
PERSONNEL:					
SALARIES	\$ 2,034,198.40	\$ 25,738,687.00	\$ 8,805,535.24		\$ 16,933,151.76
FRINGE BENEFITS	\$ 810,995.49	\$ 9,061,326.44	\$ 3,078,406.36	\$ 1,150.62	\$ 5,981,769.46
TOTAL PERSONNEL:	\$ 2,845,193.89	\$ 34,800,013.44	\$ 11,883,941.60	\$ 1,150.62	\$ 22,914,921.22
PURCHASED SERVICES	\$ 762,660.51	\$ 11,656,907.91	\$ 3,456,925.61	\$ 2,523,489.85	\$ 5,676,492.45
SUPPLIES AND MATERIALS	\$ 175,663.10	\$ 2,935,475.25	\$ 723,996.56	\$ 612,643.04	\$ 1,598,835.65
CAPITAL OUTLAY	\$ 3,549.18	\$ 943,971.12	\$ 460,450.67	\$ 99,142.97	\$ 384,377.48
OBJECT CODE 0700 INVALID					
MISCELLANEOUS OBJECTS	\$ 63,511.18	\$ 5,652,769.74	\$ 279,618.84	\$ 1,062,960.24	\$ 4,310,190.66
OTHER USES OF FUNDS		\$ 69,200.00	\$ 170,312.00		\$ 101,112.00-
Total Expenditures:	\$ 3,850,577.86	\$ 56,058,337.46	\$ 16,975,245.28	\$ 4,299,386.72	\$ 34,783,705.46
Increase (Decrease) for Period	\$ 704,217.28		\$ 3,827,325.76		
Total Fund Balance, End of Period	\$ 10,178,152.88		\$ 10,178,152.88		

Date: 11/06/17
Time: 1:31 pm

GARFIELD HTS. BOARD OF EDUC.
Fiscal Year Budget
Revenues & Expenditures
October 1, 2017 through October 31, 2017

Page: 49
(FNDREVEX)

Aggregate of Funds (cont'd)

	October Activity	Annual Budget	FYTD Activity	Encumbrances	Unencumbered Balance
Total Current Encumbrances	\$ 4,299,386.72		\$ 4,299,386.72		
Total Unencumbered Cash Balance	\$ 5,878,766.16		\$ 5,878,766.16		
	=====		=====		

CHECKS PAID FOR MONTH

Date: 11/06/2017
 Time: 1:19 pm

GARFIELD HTS. BOARD OF EDUC.
 SORT BY ISSUE DATE
 CHECK DATES BETWEEN 10/01/2017 AND 10/31/2017
 WARRANT CHECKS

Page: 1
 (CHEKPY)

SEQ	DESCRIPTION	TRAN NUMBER	P.O. NUMBER	IT NO	INVOICE NUMBER	TRAN DATE	ACCOUNT CODE DISTRIBUTION							ITEM	AMOUNT		
							TI	FND	FUNC	OBJ	SCC	SUBJ	OU	IL	JOB		
Check: 104961 Type: W Date: 10/11/17 Vendor: ACCURATE REFRIGERATION								Vendor#: 010109 Stat/Date: RECONCILED:10/16/17 Bank: 1									
								SERVICE CORP.									
0001	open p.o. for refrigerati	0180737	0001	0073010		08/17/17	05	006	3190	423	0000	000000	500	00	000		150.00
0002	open p.o. for refrigerati	0180737	0001	0073365		08/14/17	05	006	3190	423	0000	000000	500	00	000		560.00
0003	open p.o. for refrigerati	0180737	0001	0073716		08/14/17	05	006	3190	423	0000	000000	500	00	000		950.00
0004	open p.o. for refrigerati	0180737	0001	0073740		08/15/17	05	006	3190	423	0000	000000	500	00	000		553.00
															Check total:	\$2,213.00	
Check: 104962 Type: W Date: 10/11/17 Vendor: ACE								Vendor#: 010101 Stat/Date: RECONCILED:10/16/17 Bank:									
0001	Biannual lease agreement	0180711	0001	0138642		09/14/17	05	401	3260	511	9019	000000	410	00	000		4,239.00
															Check total:	\$4,239.00	
Check: 104963 Type: W Date: 10/11/17 Vendor: AMERICAN LEGACY								Vendor#: 830607 Stat/Date: RECONCILED:10/12/17 Bank:									
								PUBLISHING, INC.									
0001	Grade 1 Science Studies	0180611	0001	0215635		09/12/17	05	401	3260	511	9619	000000	412	00	000		382.50
															Check total:	\$382.50	
Check: 104964 Type: W Date: 10/11/17 Vendor: AMY HALUSKER								Vendor#: 832512 Stat/Date: RECONCILED:10/12/17 Bank:									
0001	Reimbursement for	0180636	0001	LETRS-10/5/17		10/10/17	05	516	2213	431	9875	000000	200	00	000		35.42
															Check total:	\$35.42	
Check: 104965 Type: W Date: 10/11/17 Vendor: ARIS COMPANY								Vendor#: 832440 Stat/Date: RECONCILED:10/12/17 Bank:									
0001	Port-a-Potties fall seaso	0180412	0002	0248317		09/10/17	05	300	4530	590	926A	000000	600	00	000		158.00
0002	Port-a-Potties fall seaso	0180412	0001	0248318		09/10/17	05	300	4510	590	926A	000000	600	00	000		372.00
															Check total:	\$530.00	
Check: 104966 Type: W Date: 10/11/17 Vendor: BSN SPORTS INC.								Vendor#: 830708 Stat/Date:							Bank:		
0001	SC/FB polo's	0180679	0001	900252250		08/09/17	05	300	4510	590	926A	000000	600	00	000		1,615.20
															Check total:	\$1,615.20	
Check: 104967 Type: W Date: 10/11/17 Vendor: CANDICE BOOHER								Vendor#: 803362 Stat/Date: RECONCILED:10/12/17 Bank:									
0001	Reimbursement for	0180663	0001	LETRS-10/4/17		10/10/17	05	516	2213	431	9875	000000	200	00	000		35.42
															Check total:	\$35.42	
Check: 104968 Type: W Date: 10/11/17 Vendor: CENGAGE LEARNING								Vendor#: 832591 Stat/Date: RECONCILED:10/12/17 Bank:									
0001	REACH FOR READING 6 - MY	0180629	0001	61837106		09/18/17	05	001	1120	521	9412	000000	500	00	022		4,907.50
															Check total:	\$4,907.50	
Check: 104969 Type: W Date: 10/11/17 Vendor: CENTRAL EXTERMINATING COMPANY								Vendor#: 030240 Stat/Date: RECONCILED:10/13/17 Bank: 1									
0001	Pest control, Bedbugs, et	0180385	0001	0660145		09/11/17	05	001	2720	429	0000	000000	700	00	078		300.00
															Check total:	\$300.00	
Check: 104970 Type: W Date: 10/11/17 Vendor: CENTRAL PURCHASING OFFICE								Vendor#: 030241 Stat/Date: RECONCILED:10/16/17 Bank:									

Date: 11/06/2017
 Time: 1:19 pm

GARFIELD HTS. BOARD OF EDUC.
 SORT BY ISSUE DATE
 CHECK DATES BETWEEN 10/01/2017 AND 10/31/2017
 WARRANT CHECKS

Page: 2
 (CHEKPY)

SEQ	DESCRIPTION	TRAN NUMBER	P.O. NUMBER	IT NO	INVOICE NUMBER	TRAN DATE	TI	FND	FUNC	OBJ	SCC	SUBJ	OU	IL	JOB	ITEM	AMOUNT
DIOCESE OF CLEVELAND																	
0001	Filing Cabinet, per attac		0180566	0001	00172290	09/13/17	05	401	3260	512	9619	000000	412	00	000		258.00
																Check total:	\$258.00
Check: 104971 Type: W Date: 10/11/17 Vendor: COLUMBUS CLAY & CERAMICS CO. Vendor#: 080277 Stat/Date: RECONCILED:10/12/17 Bank:																	
0001	125 CC white moist clay		0180619	0001	0034199	09/13/17	05	401	3260	511	9019	000000	410	00	000		230.00
0002	frieght		0180619	0002	0034199	09/13/17	05	401	3260	511	9019	000000	410	00	000		85.00
																Check total:	\$315.00
Check: 104972 Type: W Date: 10/11/17 Vendor: CONSTANCE WATT Vendor#: 833043 Stat/Date: RECONCILED:10/12/17 Bank:																	
0001	Reimbursement for		0180642	0001	LETRS-10/4/17	10/10/17	05	516	2213	431	9875	000000	200	00	000		35.42
																Check total:	\$35.42
Check: 104973 Type: W Date: 10/11/17 Vendor: CUSTOM STAMP MAKERS INC. Vendor#: 030762 Stat/Date: RECONCILED:10/19/17 Bank:																	
0001	Self-inking, black Ideal		0180588	0001	00035151	09/14/17	05	401	3260	511	9019	000000	410	00	000		18.00
0002	shipping		0180588	0002	00035151	09/14/17	05	401	3260	511	9019	000000	410	00	000		3.87
																Check total:	\$21.87
Check: 104974 Type: W Date: 10/11/17 Vendor: CUYAHOGA HEIGHTS BOARD OF EDUCATION Vendor#: 030808 Stat/Date: RECONCILED:10/17/17 Bank:																	
0001	WR fee/Redskin Invite. 12		0180678	0001	WR-12/9/17	08/23/17	05	300	4510	849	926A	000000	600	00	000		250.00
0002	CC fee/George Gross Invit		0180692	0001	CC-10/3/17	08/29/17	05	300	4510	849	926A	000000	600	00	000		85.00
0003	CC fee/George Gross Invit		0180692	0002	CC-10/3/17	08/29/17	05	300	4530	849	926A	000000	600	00	000		85.00
																Check total:	\$420.00
Check: 104975 Type: W Date: 10/11/17 Vendor: DAMON INDUSTRIES, INC. Vendor#: 040052 Stat/Date: RECONCILED:10/12/17 Bank: 1																	
0001	Misc cleaning supplies		0180253	0001	1056455	09/13/17	05	001	2720	572	0000	000000	702	00	078		17.08
0002	Misc cleaning supplies		0180253	0001	1056562	09/14/17	05	001	2720	572	0000	000000	702	00	078		127.92
																Check total:	\$145.00
Check: 104976 Type: W Date: 10/11/17 Vendor: DEMCO, INC. Vendor#: 040150 Stat/Date: RECONCILED:10/12/17 Bank:																	
0001	Ultra-Aggressive Label		0180630	0001	6210954	09/15/17	05	001	2222	519	9412	000000	100	00	001		58.28
0002	Neutral pH Binding Adhesi		0180630	0002	6210954	09/15/17	05	001	2222	519	9412	000000	100	00	001		7.29
0003	Shipping & Handling		0180630	0003	6210954	09/15/17	05	001	2222	519	9412	000000	100	00	001		8.95
																Check total:	\$74.52
Check: 104977 Type: W Date: 10/11/17 Vendor: DISTILLATA COMPANY Vendor#: 040216 Stat/Date: RECONCILED:10/16/17 Bank:																	
0001	WATER FOR THE LEARNING CE		0180860	0001	AUG 2017	08/11/17	05	001	2421	512	0000	000000	301	00	000		55.80
0002	WATER FOR MS PRINCIPAL OF		0180860	0002	AUG 2017	08/11/17	05	001	2421	512	9412	000000	500	00	005		62.90
0003	WATER FOR CENTRAL OFFICE		0180860	0003	AUG 2017	08/11/17	05	001	2720	452	0000	000000	800	00	007		131.05
0004	WATER FOR TECHNOLOGY JUL		0180860	0004	AUG 2017	08/11/17	05	001	2211	511	0000	000000	815	00	015		15.55
0005	WATER FOR BUS GARAGE JUL-		0180860	0005	AUG 2017	08/11/17	05	001	2840	581	0000	000000	705	00	078		12.60
0006	WATER FOR MAPLE LEAF JUL-		0180860	0006	AUG 2017	08/11/17	05	001	2421	512	0000	000000	200	00	002		29.20
0007	WATER FOR HS PRINCIPAL OF		0180860	0007	AUG 2017	08/11/17	05	001	2421	512	9412	000000	600	00	006		35.20
0008	WATER FOR THE LEARNING CE		0180860	0001	JULY 2017	07/14/17	05	001	2421	512	0000	000000	301	00	000		11.00

GARFIELD HTS. BOARD OF EDUC.
 SORT BY ISSUE DATE
 CHECK DATES BETWEEN 10/01/2017 AND 10/31/2017
 WARRANT CHECKS

SEQ	DESCRIPTION	TRAN NUMBER	P.O. NUMBER	IT NO	INVOICE NUMBER	TRAN DATE	TI	FND	FUNC	OBJ	SCC	SUBJ	OU	IL	JOB	ITEM	AMOUNT
0009	WATER FOR MS PRINCIPAL OF		0180860	0002	JULY 2017	07/14/17	05	001	2421	512	9412	000000	500	00	005		11.00
0010	WATER FOR CENTRAL OFFICE		0180860	0003	JULY 2017	07/14/17	05	001	2720	452	0000	000000	800	00	007		104.75
0011	WATER FOR TECHNOLOGY JUL		0180860	0004	JULY 2017	07/14/17	05	001	2211	511	0000	000000	815	00	015		10.00
0012	WATER FOR BUS GARAGE JUL-		0180860	0005	JULY 2017	07/14/17	05	001	2840	581	0000	000000	705	00	078		217.15
0013	WATER FOR MAPLE LEAF JUL-		0180860	0006	JULY 2017	07/14/17	05	001	2421	512	0000	000000	200	00	002		0.00
0014	WATER FOR HS PRINCIPAL OF		0180860	0007	JULY 2017	07/14/17	05	001	2421	512	9412	000000	600	00	006		13.00
0015	WATER FOR THE LEARNING CE		0180860	0001	SEPT 2017	09/08/17	05	001	2421	512	0000	000000	301	00	000		11.00
0016	WATER FOR MS PRINCIPAL OF		0180860	0002	SEPT 2017	09/08/17	05	001	2421	512	9412	000000	500	00	005		113.20
0017	WATER FOR CENTRAL OFFICE		0180860	0003	SEPT 2017	09/08/17	05	001	2720	452	0000	000000	800	00	007		114.40
0018	WATER FOR TECHNOLOGY JUL		0180860	0004	SEPT 2017	09/08/17	05	001	2211	511	0000	000000	815	00	015		22.55
0019	WATER FOR BUS GARAGE JUL-		0180860	0005	SEPT 2017	09/08/17	05	001	2840	581	0000	000000	705	00	078		28.04
0020	WATER FOR MAPLE LEAF JUL-		0180860	0006	SEPT 2017	09/08/17	05	001	2421	512	0000	000000	200	00	002		11.10
0021	WATER FOR HS PRINCIPAL OF		0180860	0007	SEPT 2017	09/08/17	05	001	2421	512	9412	000000	600	00	006		25.55
Check total:																\$1,035.04	

(Multi-bank check)

Check: 104978 Type: W Date: 10/11/17 Vendor: EDUCATIONAL SERVICE CENTER Vendor#: 050183 Stat/Date: RECONCILED:10/13/17 Bank: 1
 OF CUYAHOGA COUNTY

0001	Open PO for O.O.D. Tuitio		0180217	0001	GFD1885	09/13/17	05	516	1235	479	9018	000000	813	00	013		6,307.00
0002	Open PO for O.O.D. Tuitio		0180217	0001	GFD1886	09/14/17	05	516	1235	479	9018	000000	813	00	013		14,820.00
0003	Personnel Costs for Gifte		0180757	0001	GFD1884	09/15/17	05	499	2231	412	909G	000000	000	00	000		6,537.00
0004	Personnel Costs for Curri		0180757	0002	GFD1884	09/15/17	05	001	2211	415	0000	000000	822	00	022		14,134.94
0005	Personnel Costs for ELL T		0180757	0003	GFD1884	09/15/17	05	001	2150	413	0000	000000	813	00	013		22,846.92
0006	Personnel Costs for ELL T		0180757	0004	GFD1884	09/15/17	05	001	2150	413	0000	000000	813	00	013		22,655.20
0007	Personnel Costs for		0180757	0005	GFD1884	09/15/17	05	001	2140	413	0000	000000	813	00	013		12,056.38
Check total:																\$99,357.44	

(Multi-bank check)

Check: 104979 Type: W Date: 10/11/17 Vendor: FASTSIGNS Vendor#: 060095 Stat/Date: RECONCILED:10/17/17 Bank:
 APEX SIGNS, INC.

0001	Laminated Signs		0180688	0001	2022-8888	08/24/17	05	300	4510	590	926A	000000	600	00	000		190.00
Check total:																\$190.00	

Check: 104980 Type: W Date: 10/11/17 Vendor: GARFIELD ACE HARDWARE Vendor#: 070148 Stat/Date: RECONCILED:10/12/17 Bank: 1
 KM JONES, INC.

0001	7/1/17-12-31-17 Misc. Par		0180100	0001	SEPT 2017	09/13/17	05	001	2840	581	0000	000000	705	00	078		15.92
0002	Misc maintenance products		0180622	0001	SEPT 2017	09/13/17	05	001	2720	572	0000	000000	703	00	078		698.15
Check total:																\$714.07	

Check: 104981 Type: W Date: 10/11/17 Vendor: GRAYBAR ELECTRIC CO.,INC Vendor#: 070449 Stat/Date: RECONCILED:10/16/17 Bank: 1

0001	Lighting: Bulbs, ballasts		0180047	0001	993435371	09/12/17	05	001	2720	572	0000	000000	703	00	078		288.73
0002	Lighting: Bulbs, ballasts		0180047	0001	993435372	09/12/17	05	001	2720	572	0000	000000	703	00	078		295.90
0003	Lighting: Bulbs, ballasts		0180047	0001	993464720	09/13/17	05	001	2720	572	0000	000000	703	00	078		14.98
0004	Lighting: Bulbs, ballasts		0180047	0001	993464721	09/13/17	05	001	2720	572	0000	000000	703	00	078		446.22
Check total:																\$1,045.83	

Check: 104982 Type: W Date: 10/11/17 Vendor: HOUGHTON MIFFLIN Vendor#: 080141 Stat/Date: RECONCILED:10/16/17 Bank:
 HARCOURT PUBLISHING CO.

0001	United States History		0180580	0001	953390099	09/12/17	05	401	3260	511	9619	000000	412	00	000		351.50
Check total:																\$351.50	

Date: 11/06/2017
 Time: 1:19 pm

GARFIELD HTS. BOARD OF EDUC.
 SORT BY ISSUE DATE
 CHECK DATES BETWEEN 10/01/2017 AND 10/31/2017
 WARRANT CHECKS

Page: 4
 (CHEKPY)

SEQ	DESCRIPTION	TRAN NUMBER	P.O. NUMBER	IT NO	INVOICE NUMBER	TRAN DATE	TI	FND	FUNC	OBJ	SCC	SUBJ	OU	IL	JOB	ITEM	AMOUNT
Check: 104983 Type: W Date: 10/11/17 Vendor: HPS - LLC Vendor#: 080126 Stat/Date: RECONCILED:10/16/17 Bank: 1																	
0001	Annual Dues for Cooperati		0180754	0001	LLC13985	09/11/17	05	001	2610	415	0000	000000	832	00	026		3,150.00
Check total: \$3,150.00																	
Check: 104984 Type: W Date: 10/11/17 Vendor: J.W. PEPPER & SON, INC. Vendor#: 100283 Stat/Date: RECONCILED:10/12/17 Bank:																	
0001	Linus & Lucy		0180600	0001	08839763	09/13/17	05	401	3260	511	9019	000000	410	00	000		40.00
0002	shipping		0180600	0002	08839763	09/13/17	05	401	3260	511	9019	000000	410	00	000		8.99
Check total: \$48.99																	
Check: 104985 Type: W Date: 10/11/17 Vendor: KELLY BETLEJEWSKI Vendor#: 830524 Stat/Date: RECONCILED:10/16/17 Bank: 1																	
0001	Flowers for homecoming		0180778	0001	0000015	09/27/17	05	018	4600	890	902G	000000	600	00	000		187.50
0002	Flowers for homecoming		0180778	0001	0000016	09/29/17	05	018	4600	890	902G	000000	600	00	000		220.50
Check total: \$408.00																	
Check: 104986 Type: W Date: 10/11/17 Vendor: MCGRAW-HILL SCHOOL EDUCATION HOLDINGS, LLC Vendor#: 130457 Stat/Date: RECONCILED:10/12/17 Bank:																	
0001	GLENCOE MATH ACCEL., TEAC		0180569	0001	99648413001	09/15/17	05	001	1120	521	9412	000000	500	00	022		41.19
0002	SHIPPING		0180569	0002	99648413001	09/15/17	05	001	1120	521	9412	000000	500	00	022		10.16
0003	SS online subscription, p		0180571	0001	99745950001	09/18/17	05	401	3260	511	9619	000000	412	00	000		88.38
0004	8TH GRADE MATH BOOKS - VO		0180676	0001	97725614001	09/19/17	05	001	1120	521	9412	000000	500	00	022		119.88-
0005	8TH GRADE MATH BOOKS - VO		0180676	0001	99762076001	09/19/17	05	001	1120	521	9412	000000	500	00	022		299.70
0006	SHIPPING		0180676	0002	99762076001	09/19/17	05	001	1120	521	9412	000000	500	00	022		32.27
Check total: \$351.82																	
Check: 104987 Type: W Date: 10/11/17 Vendor: MENTOR MEMORIAL MIDDLE SCHOOL Vendor#: 833093 Stat/Date: RECONCILED:10/19/17 Bank:																	
0001	CC fee/MS @ Mentor/B		0180716	0001	9/21/17-CC	09/10/17	05	300	4510	849	926A	000000	600	00	000		50.00
0002	CC fee/MS @ Mentor/G		0180716	0002	9/21/17-CC	09/10/17	05	300	4530	849	926A	000000	600	00	000		50.00
Check total: \$100.00																	
Check: 104988 Type: W Date: 10/11/17 Vendor: OBDK Vendor#: 832845 Stat/Date: RECONCILED:10/24/17 Bank:																	
0001	Standard Barn Owl Pellets		0180585	0001	0025710	09/11/17	05	001	1110	511	916S	000000	400	00	004		189.05
0002	Shipping		0180585	0002	0025710	09/11/17	05	001	1110	511	916S	000000	400	00	004		14.85
Check total: \$203.90																	
Check: 104989 Type: W Date: 10/11/17 Vendor: PEARSON EDUCATION INC. Vendor#: 160242 Stat/Date: RECONCILED:10/16/17 Bank:																	
0001	Social Studies Workbooks		0180621	0001	4025241399	09/14/17	05	001	1110	511	9412	000000	400	00	004		209.70
0002	Shipping		0180621	0002	4025241399	09/14/17	05	001	1110	511	9412	000000	400	00	004		14.68
Check total: \$224.38																	
Check: 104990 Type: W Date: 10/11/17 Vendor: PISANICK, PARTNERS, INC. Vendor#: 832917 Stat/Date: RECONCILED:10/13/17 Bank: 1																	
0001	Consulting services for f		0180759	0001	0000947	09/12/17	05	006	3190	419	0000	000000	500	00	000		2,390.00
0002	Consulting services for f		0180759	0002	0000947	09/12/17	05	006	3190	419	0000	000000	600	00	000		2,390.00
Check total: \$4,780.00																	

Date: 11/06/2017
 Time: 1:19 pm

GARFIELD HTS. BOARD OF EDUC.
 SORT BY ISSUE DATE
 CHECK DATES BETWEEN 10/01/2017 AND 10/31/2017
 WARRANT CHECKS

Page: 5
 (CHEKPY)

SEQ	DESCRIPTION	TRAN NUMBER	P.O. NUMBER	IT NO	INVOICE NUMBER	TRAN DATE	TI	FND	FUNC	OBJ	SCC	SUBJ	OU	IL	JOB	ITEM	AMOUNT
Check: 104991 Type: W Date: 10/11/17 Vendor: PLUMBMASTER, INC.		Vendor#: 160339 Stat/Date: RECONCILED:10/12/17 Bank: 1															
0001	Plumbing parts		0180350	0001	520-01719459	08/22/17	05	001	2720	572	0000	000000	703	00	078		56.83
0002	Plumbing parts		0180350	0001	520-01720333	09/08/17	05	001	2720	572	0000	000000	703	00	078		143.87
Check total:																\$200.70	
Check: 104992 Type: W Date: 10/11/17 Vendor: PNC		Vendor#: 080454 Stat/Date: RECONCILED:10/12/17 Bank: 1															
0001	Purchases for High School		0180339	0001	SEPT 2017	09/15/17	05	001	1130	511	9412	000000	600	00	006		8.58
0002	Shipping warrantied parts		0180359	0001	SEPT 2017	09/15/17	05	001	2211	429	0000	000000	815	00	015		41.48
0003	Principal Credit Card		0180398	0001	SEPT 2017	09/15/17	05	018	4600	890	922G	000000	200	00	000		81.90
0004	Maintenance items		0180430	0001	SEPT 2017	09/15/17	05	001	2720	572	0000	000000	703	00	078		969.49
0005	2017-2018 Fall and Spring		0180443	0001	SEPT 2017	09/15/17	05	001	2412	432	0000	000000	835	00	023		300.00
0006	2017-2018 Individual Annu		0180443	0002	SEPT 2017	09/15/17	05	001	2412	841	0000	000000	835	00	023		100.00
0007	Items needed for school y		0180522	0001	SEPT 2017	09/15/17	05	001	1110	511	916S	000000	400	00	004		162.61
0008	Virtual Fax lines for		0180545	0001	SEPT 2017	09/15/17	05	001	2211	429	0000	000000	815	00	015		584.99
0009	Maintenance light pole hi		0180604	0001	SEPT 2017	09/15/17	05	001	2720	572	0000	000000	703	00	078		1,765.00
0010	Order from LRP for Title		0180633	0001	SEPT 2017	09/15/17	05	572	1270	511	9018	000000	000	00	000		609.95
0011	Office Supplies for		0180656	0001	SEPT 2017	09/15/17	05	001	2411	512	0000	000000	831	00	024		121.57
0012	Coffee for Leadership Mee		0180670	0001	SEPT 2017	09/15/17	05	001	2411	432	0000	000000	831	00	024		30.00
0013	First Book-Shipping		0180691	0001	SEPT 2017	09/15/17	05	572	1270	511	9018	000000	000	00	000		35.20
0014	COTSCO PURCHASE		0180725	0001	SEPT 2017	09/15/17	05	001	2421	512	9412	000000	500	00	005		17.26
0015	Teresa'a Pizza Order for		0180779	0001	SEPT 2017	09/15/17	05	018	4600	890	912G	000000	100	00	000		20.00
Check total:																\$4,848.03	
(Multi-bank check)																	
Check: 104993 Type: W Date: 10/11/17 Vendor: PREMIER PRINTING & PROMOTIONS		Vendor#: 831968 Stat/Date: RECONCILED:10/12/17 Bank: 1															
0001	office supplue s17-18		0180259	0001	4-164631	07/27/17	05	001	2421	512	0000	000000	600	00	006		2,182.00
0002	office supplue s17-18		0180259	0001	4-164632	07/27/17	05	001	2421	512	0000	000000	600	00	006		1,118.94
0003	office supplue s17-18		0180259	0001	4-164655	08/02/17	05	001	2421	512	0000	000000	600	00	006		2,458.60
Check total:																\$5,759.54	
Check: 104994 Type: W Date: 10/11/17 Vendor: PSI		Vendor#: 160275 Stat/Date: RECONCILED:10/20/17 Bank: 1															
0001	Health Services: Register		0180508	0001	0137575	09/15/17	05	001	2130	413	0000	000000	811	00	011		9,284.22
Check total:																\$9,284.22	
Check: 104995 Type: W Date: 10/11/17 Vendor: REPUBLIC SERVICES OF CLEVELAND		Vendor#: 832829 Stat/Date: RECONCILED:10/12/17 Bank: 1															
BROWNING-FERRIS IND OF OHIO																	
0001	District trash removal 7/		0180242	0001	0224-007354700	09/25/17	05	001	2790	422	0000	000000	700	00	078		2,328.81
Check total:																\$2,328.81	
Check: 104996 Type: W Date: 10/11/17 Vendor: SCHOLASTIC INC.		Vendor#: 190140 Stat/Date: RECONCILED:10/17/17 Bank:															
0001	Storyworks		0180043	0001	M6322524	08/11/17	05	001	1110	511	9412	000000	200	00	002		314.00
0002	shipping		0180043	0002	M6322524	08/11/17	05	001	1110	511	9412	000000	200	00	002		31.40
0003	Super Science		0180501	0001	M6348833	09/19/17	05	001	1110	511	916S	000000	400	00	004		224.70
0004	Shipping		0180501	0002	M6348833	09/19/17	05	001	1110	511	916S	000000	400	00	004		22.47
0005	CHOICES - CLASSROOM MAGAZ		0180575	0001	M6367857	09/15/17	05	001	1120	511	9412	000000	500	00	005		189.80

Date: 11/06/2017
 Time: 1:19 pm

GARFIELD HTS. BOARD OF EDUC.
 SORT BY ISSUE DATE
 CHECK DATES BETWEEN 10/01/2017 AND 10/31/2017
 WARRANT CHECKS

Page: 6
 (CHEKPY)

SEQ	DESCRIPTION	TRAN NUMBER	P.O. NUMBER	IT NO	INVOICE NUMBER	TRAN DATE	TI	FND	FUNC	OBJ	SCC	SUBJ	OU	IL	JOB	ITEM	AMOUNT	
0006	SHIPPING & HANDLING		0180575	0002	M6367857	09/15/17	05	001	1120	511	9412	000000	500	00	005		18.98	
																	Check total:	\$801.35
Check: 104997 Type: W Date: 10/11/17 Vendor: SCHOOL PRIDE, LTD.		Vendor#: 832676 Stat/Date: RECONCILED:10/12/17 Bank:																
0001	FB/Memorial Decals/cliff		0180592	0001	0053083	08/10/17	05	300	4510	590	926A	000000	600	00	000		72.00	
																	Check total:	\$72.00
Check: 104998 Type: W Date: 10/11/17 Vendor: SHARON REGAN		Vendor#: 505290 Stat/Date: RECONCILED:10/12/17 Bank:																
0001	Reimbursement for mileage		0180644	0001	LETRS-9/13/17	10/10/17	05	516	2213	431	9875	000000	200	00	000		158.36	
																	Check total:	\$158.36
Check: 104999 Type: W Date: 10/11/17 Vendor: SIGNS BY TOMORROW		Vendor#: 831957 Stat/Date: RECONCILED:10/23/17 Bank: 1																
0001	Installation of Hall of F		0180615	0001	0007102	08/21/17	05	018	4600	890	902G	000000	600	00	000		560.00	
																	Check total:	\$560.00
Check: 105000 Type: W Date: 10/11/17 Vendor: SOVEREIGN INDUSTRIES INC.		Vendor#: 190284 Stat/Date: RECONCILED:10/16/17 Bank: 1																
0001	Misc. janitorial supplies		0180536	0001	0121098	09/15/17	05	001	2720	572	0000	000000	702	00	078		1,747.80	
																	Check total:	\$1,747.80
Check: 105001 Type: W Date: 10/11/17 Vendor: SPANISH FIRST CLASS, INC.		Vendor#: 832654 Stat/Date: RECONCILED:10/27/17 Bank:																
0001	Full time Spanish Teacher		0180741	0001	2017-2018	08/28/17	05	401	3260	411	9019	000000	410	00	000		22,945.00	
																	Check total:	\$22,945.00
Check: 105002 Type: W Date: 10/11/17 Vendor: STATE ALARM SYSTEMS		Vendor#: 190410 Stat/Date: RECONCILED:10/12/17 Bank: 1																
0001	Security monitoring and		0180546	0001	0430141	08/01/17	05	001	2740	423	0000	000000	700	00	078		89.95	
																	Check total:	\$89.95
Check: 105003 Type: W Date: 10/11/17 Vendor: STEAMLINE CLE		Vendor#: 803529 Stat/Date: RECONCILED:10/16/17 Bank:																
0001	"Born in the Nick of Time		0180387	0001	17-00390	09/13/17	05	401	3260	511	9619	000000	412	00	000		2,018.75	
																	Check total:	\$2,018.75
Check: 105004 Type: W Date: 10/11/17 Vendor: STEVE'S SPORTS, INC		Vendor#: 190000 Stat/Date: RECONCILED:10/12/17 Bank: 1																
0001	embroidery on polos		0180686	0001	0016268	08/17/17	05	300	4510	590	926A	000000	600	00	000		269.50	
0002	Socks		0180695	0001	0016271	08/17/17	05	300	4510	590	926A	000000	600	00	000		181.00	
0003	Girdles/FB		0180698	0001	0016269	08/17/17	05	300	4510	590	926A	000000	600	00	000		270.00	
0004	Bulldog Jackets		0180732	0001	0016468	09/15/17	05	001	2310	446	0000	000000	900	00	007		126.00	
																	Check total:	\$846.50
(Multi-bank check)																		
Check: 105005 Type: W Date: 10/11/17 Vendor: SUNBELT RENTALS, INC.		Vendor#: 831959 Stat/Date: RECONCILED:10/12/17 Bank: 1																
0001	Tool rental		0180770	0001	72299426-0001	09/13/17	05	001	2720	640	0000	000000	700	00	078		753.98	
0002	Tool rental		0180770	0001	72336776-0001	09/15/17	05	001	2720	640	0000	000000	700	00	078		1,537.20	

Date: 11/06/2017
 Time: 1:19 pm

GARFIELD HTS. BOARD OF EDUC.
 SORT BY ISSUE DATE
 CHECK DATES BETWEEN 10/01/2017 AND 10/31/2017
 WARRANT CHECKS

Page: 7
 (CHEKPY)

SEQ	DESCRIPTION	TRAN NUMBER	P.O. NUMBER	IT NO	INVOICE NUMBER	TRAN DATE	TI	FND	FUNC	OBJ	SCC	SUBJ	OU	IL	JOB	ITEM	AMOUNT
Check total:																\$2,291.18	
Check: 105006 Type: W Date: 10/12/17 Vendor: ANDREY NARINSKY																Vendor#: 833100 Stat/Date:	Bank:
0001	fees/fall season/ofc etc/		0180392	0001	A.N-9/25/17	10/11/17	05	300	4510	849	926A	000000	600	00	000		40.00
Check total:																\$40.00	
Check: 105007 Type: W Date: 10/12/17 Vendor: BILL QUIGNEY																Vendor#: 703574 Stat/Date: RECONCILED:10/19/17	Bank:
0001	fees/fall season/ofc etc/		0180392	0001	B.Q-9/29/17	10/11/17	05	300	4510	849	926A	000000	600	00	000		65.00
Check total:																\$65.00	
Check: 105008 Type: W Date: 10/12/17 Vendor: BRENDAN BALASKO																Vendor#: 703442 Stat/Date: RECONCILED:10/16/17	Bank:
0001	fees/fall season/ofc etc/		0180392	0001	B,B-10/2/17	10/11/17	05	300	4510	849	926A	000000	600	00	000		60.00
0002	fees/fall season/ofc etc/		0180392	0002	B.B-10/2/17	10/11/17	05	300	4530	849	926A	000000	600	00	000		40.00
Check total:																\$100.00	
Check: 105009 Type: W Date: 10/12/17 Vendor: BRIAN OWENS																Vendor#: 703136 Stat/Date: RECONCILED:10/23/17	Bank:
0001	fees/fall season/ofc etc/		0180392	0001	B.O-10/5/17	10/11/17	05	300	4510	849	926A	000000	600	00	000		40.00
0002	fees/fall season/ofc etc/		0180392	0003	B.O-9/20/17	10/11/17	05	300	4510	419	926A	000000	500	00	000		35.00
Check total:																\$75.00	
Check: 105010 Type: W Date: 10/12/17 Vendor: CAMILO BLACK																Vendor#: 703209 Stat/Date:	Bank:
0001	fees/fall season/ofc etc/		0180392	0001	C.B-9/21/17	10/11/17	05	300	4510	849	926A	000000	600	00	000		40.00
Check total:																\$40.00	
Check: 105011 Type: W Date: 10/12/17 Vendor: CARLTON DARRELL																Vendor#: 702768 Stat/Date: RECONCILED:10/13/17	Bank:
0001	fees/fall season/ofc etc/		0180392	0001	C.D-9/23/17	10/11/17	05	300	4510	849	926A	000000	600	00	000		40.00
Check total:																\$40.00	
Check: 105012 Type: W Date: 10/12/17 Vendor: DAVID DOSKY																Vendor#: 702737 Stat/Date: RECONCILED:10/13/17	Bank:
0001	fees/fall season/ofc etc/		0180392	0001	D.D-9/29/17	10/11/17	05	300	4510	849	926A	000000	600	00	000		100.00
Check total:																\$100.00	
Check: 105013 Type: W Date: 10/12/17 Vendor: DON DEROIA																Vendor#: 702461 Stat/Date: RECONCILED:10/23/17	Bank:
0001	fees/fall season/ofc etc/		0180392	0001	D.D-9/21/17	10/11/17	05	300	4510	849	926A	000000	600	00	000		40.00
Check total:																\$40.00	
Check: 105014 Type: W Date: 10/12/17 Vendor: EDWARD HILL																Vendor#: 703175 Stat/Date: RECONCILED:10/17/17	Bank:
0001	fees/fall season/ofc etc/		0180392	0001	E.H-10/5/17	10/11/17	05	300	4510	849	926A	000000	600	00	000		40.00
Check total:																\$40.00	
Check: 105015 Type: W Date: 10/12/17 Vendor: ERNIE JOHNSON																Vendor#: 700371 Stat/Date: RECONCILED:10/13/17	Bank:

Date: 11/06/2017
 Time: 1:19 pm

GARFIELD HTS. BOARD OF EDUC.
 SORT BY ISSUE DATE
 CHECK DATES BETWEEN 10/01/2017 AND 10/31/2017
 WARRANT CHECKS

Page: 8
 (CHEKPY)

SEQ	DESCRIPTION	TRAN NUMBER	P.O. NUMBER	IT NO	INVOICE NUMBER	TRAN DATE	TI	FND	FUNC	OBJ	SCC	SUBJ	OU	IL	JOB	ITEM	AMOUNT	
0001	fees/fall season/ofc etc/		0180392	0001	E.J-10/5/17	10/11/17	05	300	4510	849	926A	000000	600	00	000		40.00	
																	Check total:	\$40.00
Check: 105016 Type: W Date: 10/12/17 Vendor: GASTON E. CORSI Vendor#: 700310 Stat/Date: RECONCILED:10/13/17 Bank:																		
0001	fees/fall season/ofc etc/		0180392	0002	G.C-9/23/17	10/11/17	05	300	4530	849	926A	000000	600	00	000		100.00	
																	Check total:	\$100.00
Check: 105017 Type: W Date: 10/12/17 Vendor: GEORGE HOLOVACH Vendor#: 700429 Stat/Date: RECONCILED:10/13/17 Bank:																		
0001	fees/fall season/ofc etc/		0180392	0001	G.H-AUG/SEP	10/11/17	05	300	4510	849	926A	000000	600	00	000		250.00	
																	Check total:	\$250.00
Check: 105018 Type: W Date: 10/12/17 Vendor: GEORGE J. BALASKO Vendor#: 702351 Stat/Date: RECONCILED:10/16/17 Bank:																		
0001	fees/fall season/ofc etc/		0180392	0001	G,B-10/2/17	10/11/17	05	300	4510	849	926A	000000	600	00	000		40.00	
0002	fees/fall season/ofc etc/		0180392	0002	G.B-10/2/17	10/11/17	05	300	4530	849	926A	000000	600	00	000		60.00	
																	Check total:	\$100.00
Check: 105019 Type: W Date: 10/12/17 Vendor: JAMES L. SEAWRIGHT Vendor#: 700477 Stat/Date: RECONCILED:10/17/17 Bank: C/O GARFIELD HTS. POLICE DEPT.																		
0001	fees/fall season/ofc etc/		0180392	0001	J.S-9/29/17	10/11/17	05	300	4510	849	926A	000000	600	00	000		120.00	
																	Check total:	\$120.00
Check: 105020 Type: W Date: 10/12/17 Vendor: JASON YURGEL Vendor#: 702956 Stat/Date: RECONCILED:10/18/17 Bank:																		
0001	fees/fall season/ofc etc/		0180392	0001	J.Y-10/5/17	10/11/17	05	300	4510	849	926A	000000	600	00	000		40.00	
0002	fees/fall season/ofc etc/		0180392	0001	J.Y-9/29/17	10/11/17	05	300	4510	849	926A	000000	600	00	000		65.00	
																	Check total:	\$105.00
Check: 105021 Type: W Date: 10/12/17 Vendor: JIM OSER Vendor#: 702492 Stat/Date: RECONCILED:10/30/17 Bank:																		
0001	fees/fall season/ofc etc/		0180392	0001	J.O-9/23/17	10/11/17	05	300	4510	849	926A	000000	600	00	000		40.00	
																	Check total:	\$40.00
Check: 105022 Type: W Date: 10/12/17 Vendor: JOHN GOJEVIC Vendor#: 702543 Stat/Date: RECONCILED:10/16/17 Bank:																		
0001	fees/fall season/ofc etc/		0180392	0001	J.G-9/29/17	10/11/17	05	300	4510	849	926A	000000	600	00	000		65.00	
																	Check total:	\$65.00
Check: 105023 Type: W Date: 10/12/17 Vendor: JOHN J. MARKS Vendor#: 700891 Stat/Date: RECONCILED:10/16/17 Bank:																		
0001	fees/fall season/ofc etc/		0180392	0001	J.M-10/5/17	10/11/17	05	300	4510	849	926A	000000	600	00	000		120.00	
0002	fees/fall season/ofc etc/		0180392	0001	J.M-9/29/17	10/11/17	05	300	4510	849	926A	000000	600	00	000		120.00	
																	Check total:	\$240.00
Check: 105024 Type: W Date: 10/12/17 Vendor: JOSEPH BURKE Vendor#: 703168 Stat/Date: RECONCILED:10/16/17 Bank:																		
0001	fees/fall season/ofc etc/		0180392	0001	J.B-9/21/17	10/11/17	05	300	4510	849	926A	000000	600	00	000		40.00	
																	Check total:	\$40.00

Date: 11/06/2017
 Time: 1:19 pm

GARFIELD HTS. BOARD OF EDUC.
 SORT BY ISSUE DATE
 CHECK DATES BETWEEN 10/01/2017 AND 10/31/2017
 WARRANT CHECKS

Page: 9
 (CHEKPY)

SEQ	DESCRIPTION	TRAN NUMBER	P.O. NUMBER	IT NO	INVOICE NUMBER	TRAN DATE	TI	FND	FUNC	OBJ	SCC	SUBJ	OU	IL	JOB	ITEM	AMOUNT	
Check: 105025 Type: W Date: 10/12/17 Vendor: KEN MAXWELL Vendor#: 702367 Stat/Date: RECONCILED:10/17/17 Bank:																		
0001	fees/fall season/ofc etc/		0180392	0003	K.M-9/27/17	10/11/17	05	300	4510	419	926A	000000	500	00	000		52.50	
																	Check total:	\$52.50
Check: 105026 Type: W Date: 10/12/17 Vendor: KIRK STOCKER Vendor#: 702655 Stat/Date: Bank:																		
0001	fees/fall season/ofc etc/		0180392	0001	K.S-9/21/17	10/11/17	05	300	4510	849	926A	000000	600	00	000		40.00	
																	Check total:	\$40.00
Check: 105027 Type: W Date: 10/12/17 Vendor: LAMAR OSBORNE Vendor#: 703196 Stat/Date: Bank:																		
0001	fees/fall season/ofc etc/		0180392	0003	L.O-9/20/17	10/11/17	05	300	4510	419	926A	000000	500	00	000		35.00	
0002	fees/fall season/ofc etc/		0180392	0003	L.O-9/27/17	10/11/17	05	300	4510	419	926A	000000	500	00	000		52.50	
																	Check total:	\$87.50
Check: 105028 Type: W Date: 10/12/17 Vendor: LEO CIFELLI Vendor#: 700579 Stat/Date: Bank:																		
0001	fees/fall season/ofc etc/		0180392	0002	L.C-9/23/17	10/11/17	05	300	4530	849	926A	000000	600	00	000		105.00	
																	Check total:	\$105.00
Check: 105029 Type: W Date: 10/12/17 Vendor: MARLO SAMS Vendor#: 703189 Stat/Date: RECONCILED:10/16/17 Bank:																		
0001	fees/fall season/ofc etc/		0180392	0001	M.S-9/29/17	10/11/17	05	300	4510	849	926A	000000	600	00	000		65.00	
																	Check total:	\$65.00
Check: 105030 Type: W Date: 10/12/17 Vendor: MELVIN PARKER Vendor#: 702703 Stat/Date: Bank:																		
0001	fees/fall season/ofc etc/		0180392	0003	M.P-9/20/17	10/11/17	05	300	4510	419	926A	000000	500	00	000		35.00	
																	Check total:	\$35.00
Check: 105031 Type: W Date: 10/12/17 Vendor: PAUL A. SADOSKY Vendor#: 700756 Stat/Date: RECONCILED:10/13/17 Bank:																		
0001	fees/fall season/ofc etc/		0180392	0001	P.S-9/27/17	10/11/17	05	300	4510	849	926A	000000	600	00	000		80.00	
																	Check total:	\$80.00
Check: 105032 Type: W Date: 10/12/17 Vendor: PAUL MEHOZONEK Vendor#: 702821 Stat/Date: Bank:																		
0001	fees/fall season/ofc etc/		0180392	0001	P.M-9/23/17	10/11/17	05	300	4510	849	926A	000000	600	00	000		40.00	
																	Check total:	\$40.00
Check: 105033 Type: W Date: 10/12/17 Vendor: RAE GRANT Vendor#: 702819 Stat/Date: RECONCILED:10/20/17 Bank:																		
0001	fees/fall season/ofc etc/		0180392	0001	R.G-9/25/17	10/11/17	05	300	4510	849	926A	000000	600	00	000		40.00	
																	Check total:	\$40.00
Check: 105034 Type: W Date: 10/12/17 Vendor: RANDY GREEN Vendor#: 702954 Stat/Date: RECONCILED:10/19/17 Bank:																		
0001	fees/fall season/ofc etc/		0180392	0001	R.G-9/21/17	10/11/17	05	300	4510	849	926A	000000	600	00	000		40.00	
																	Check total:	\$40.00

Date: 11/06/2017
Time: 1:19 pm

GARFIELD HTS. BOARD OF EDUC.
SORT BY ISSUE DATE
CHECK DATES BETWEEN 10/01/2017 AND 10/31/2017
WARRANT CHECKS

Page: 10
(CHEKPY)

SEQ	DESCRIPTION	TRAN NUMBER	P.O. NUMBER	IT NO	INVOICE NUMBER	TRAN DATE	TI	FND	FUNC	OBJ	SCC	SUBJ	OU	IL	JOB	ITEM	AMOUNT	
Check: 105035 Type: W Date: 10/12/17 Vendor: ROB LATSCH Vendor#: 703138 Stat/Date: RECONCILED:10/18/17 Bank:																		
0001	fees/fall season/ofc etc/		0180392	0001	R.L-9/21/17	10/11/17	05	300	4510	849	926A	000000	600	00	000		60.00	
																	Check total:	\$60.00
Check: 105036 Type: W Date: 10/12/17 Vendor: ROBERT HIMMELEN Vendor#: 703570 Stat/Date: RECONCILED:10/19/17 Bank:																		
0001	fees/fall season/ofc etc/		0180392	0002	R.H-9/25/17	10/11/17	05	300	4530	849	926A	000000	600	00	000		35.00	
																	Check total:	\$35.00
Check: 105037 Type: W Date: 10/12/17 Vendor: ROBERT JARZEMBAK Vendor#: 702657 Stat/Date: RECONCILED:10/13/17 Bank:																		
0001	fees/fall season/ofc etc/		0180392	0003	R.J-10/4/17	10/11/17	05	300	4510	419	926A	000000	500	00	000		120.00	
0002	fees/fall season/ofc etc/		0180392	0003	R.J-9/20/17	10/11/17	05	300	4510	419	926A	000000	500	00	000		120.00	
0003	fees/fall season/ofc etc/		0180392	0001	R.J-9/25/17	10/11/17	05	300	4510	849	926A	000000	600	00	000		120.00	
																	Check total:	\$360.00
Check: 105038 Type: W Date: 10/12/17 Vendor: RONALD ROSE Vendor#: 700836 Stat/Date: RECONCILED:10/20/17 Bank:																		
0001	fees/fall season/ofc etc/		0180392	0001	R.R-9/21/17	10/11/17	05	300	4510	849	926A	000000	600	00	000		40.00	
																	Check total:	\$40.00
Check: 105039 Type: W Date: 10/12/17 Vendor: RONALD SOMMERS Vendor#: 702360 Stat/Date: RECONCILED:10/16/17 Bank:																		
0001	fees/fall season/ofc etc/		0180392	0002	R.S-10/3/17	10/11/17	05	300	4530	849	926A	000000	600	00	000		60.00	
																	Check total:	\$60.00
Check: 105040 Type: W Date: 10/12/17 Vendor: STEVE BUSH Vendor#: 702379 Stat/Date: RECONCILED:10/18/17 Bank:																		
0001	fees/fall season/ofc etc/		0180392	0001	S.B-9/23/17	10/11/17	05	300	4510	849	926A	000000	600	00	000		100.00	
																	Check total:	\$100.00
Check: 105041 Type: W Date: 10/12/17 Vendor: TAJ MARTIN Vendor#: 703126 Stat/Date: RECONCILED:10/13/17 Bank:																		
0001	fees/fall season/ofc etc/		0180392	0001	T.M-9/29/17	10/11/17	05	300	4510	849	926A	000000	600	00	000		120.00	
																	Check total:	\$120.00
Check: 105042 Type: W Date: 10/12/17 Vendor: TAMBA NLANDU Vendor#: 703242 Stat/Date: VOID: 10/12/17 Bank:																		
0001	fees/fall season/ofc etc/		0180392	0001	T.N-9/23/17	10/11/17	05	300	4510	849	926A	000000	600	00	000		80.00	
																	Check total:	\$80.00
Check: 105043 Type: W Date: 10/12/17 Vendor: THOMAS J. MURPHY Vendor#: 700984 Stat/Date: RECONCILED:10/18/17 Bank: C/O GARFIELD HTS. POLICE DEPT.																		
0001	fees/fall season/ofc etc/		0180392	0001	T.M-9/21/17	10/11/17	05	300	4510	849	926A	000000	600	00	000		120.00	
																	Check total:	\$120.00
Check: 105044 Type: W Date: 10/12/17 Vendor: THOMAS MARTING Vendor#: 703571 Stat/Date: VOID: 10/12/17 Bank:																		
0001	fees/fall season/ofc etc/		0180392	0001	T.M-9/23/17	10/11/17	05	300	4510	849	926A	000000	600	00	000		100.00	

Date: 11/06/2017
 Time: 1:19 pm

GARFIELD HTS. BOARD OF EDUC.
 SORT BY ISSUE DATE
 CHECK DATES BETWEEN 10/01/2017 AND 10/31/2017
 WARRANT CHECKS

Page: 11
 (CHEKPY)

SEQ	DESCRIPTION	TRAN NUMBER	P.O. NUMBER	IT NO	INVOICE NUMBER	TRAN DATE	TI	FND	FUNC	OBJ	SCC	SUBJ	OU	IL	JOB	ITEM	AMOUNT
Check total:																\$100.00	
Check: 105045 Type: W Date: 10/12/17 Vendor: TOM COONEY																Vendor#: 703573 Stat/Date: RECONCILED:10/23/17 Bank:	
0001	fees/fall season/ofc etc/		0180392	0001	T.C-9/29/17	10/11/17	05	300	4510	849	926A	000000	600	00	000		65.00
Check total:																\$65.00	
Check: 105046 Type: W Date: 10/12/17 Vendor: TROY BRYANT																Vendor#: 703572 Stat/Date: RECONCILED:10/18/17 Bank:	
0001	fees/fall season/ofc etc/		0180392	0001	T.B-9/23/17	10/11/17	05	300	4510	849	926A	000000	600	00	000		40.00
Check total:																\$40.00	
Check: 105047 Type: W Date: 10/12/17 Vendor: TAMBA NLANDU																Vendor#: 703242 Stat/Date: RECONCILED:10/19/17 Bank:	
0001	fees/fall season/ofc etc/		0180392	0001	T,N-9/23/17	10/12/17	05	300	4510	849	926A	000000	600	00	000		40.00
0002	fees/fall season/ofc etc/		0180392	0002	T,N-9/23/17	10/12/17	05	300	4530	849	926A	000000	600	00	000		60.00
Check total:																\$100.00	
Check: 105048 Type: W Date: 10/12/17 Vendor: THOMAS MARTING																Vendor#: 703571 Stat/Date: RECONCILED:10/26/17 Bank:	
0001	fees/fall season/ofc etc/		0180392	0001	T,M-9/23/17	10/12/17	05	300	4510	849	926A	000000	600	00	000		40.00
0002	fees/fall season/ofc etc/		0180392	0002	T,M-9/23/17	10/12/17	05	300	4530	849	926A	000000	600	00	000		40.00
Check total:																\$80.00	
Check: 105049 Type: W Date: 10/12/17 Vendor: OHIO SCHOOLS COUNCIL-LIFE																Vendor#: 150183 Stat/Date: RECONCILED:10/13/17 Bank: 1	
0001	Life Insurance Premiums		0180247	0001	OCT 2017	10/01/17	05	024	2510	856	9242	000000	000	00	000		2,051.03
Check total:																\$2,051.03	
Check: 105050 Type: W Date: 10/12/17 Vendor: SUBURBAN HEALTH CONSORTIUM HUNTINGTON BANK																Vendor#: 180322 Stat/Date: RECONCILED:10/13/17 Bank: 1	
0001	Health Insurance Premiums		0180063	0001	OCT 2017	10/01/17	05	024	2510	856	9241	000000	000	00	000		421,765.10
Check total:																\$421,765.10	
Check: 105051 Type: W Date: 10/13/17 Vendor: ALAN GRIEGER																Vendor#: 700005 Stat/Date: Bank:	
0001	fees/fall season/ofc etc/		0180392	0002	A.G-9/30/17	10/13/17	05	300	4530	849	926A	000000	600	00	000		90.00
Check total:																\$90.00	
Check: 105052 Type: W Date: 10/13/17 Vendor: ALAN ST. JOHN																Vendor#: 702454 Stat/Date: Bank:	
0001	fees/fall season/ofc etc/		0180392	0002	A.S-9/30/17	10/13/17	05	300	4530	849	926A	000000	600	00	000		90.00
Check total:																\$90.00	
Check: 105053 Type: W Date: 10/13/17 Vendor: BART GENSBURG																Vendor#: 702228 Stat/Date: RECONCILED:10/19/17 Bank:	
0001	fees/fall season/ofc etc/		0180392	0002	B.G-9/30/17	10/13/17	05	300	4530	849	926A	000000	600	00	000		90.00
Check total:																\$90.00	
Check: 105054 Type: W Date: 10/13/17 Vendor: BRUCE ENTE																Vendor#: 703134 Stat/Date: RECONCILED:10/20/17 Bank:	

Date: 11/06/2017
 Time: 1:19 pm

GARFIELD HTS. BOARD OF EDUC.
 SORT BY ISSUE DATE
 CHECK DATES BETWEEN 10/01/2017 AND 10/31/2017
 WARRANT CHECKS

Page: 12
 (CHEKPY)

SEQ	DESCRIPTION	TRAN NUMBER	P.O. NUMBER	IT NO	INVOICE NUMBER	TRAN DATE	TI	FND	FUNC	OBJ	SCC	DISTRIBUTION SUBJ	OU	IL	JOB	ITEM	AMOUNT	
0001	fees/fall season/ofc etc/		0180392	0003	B.E-10/9/17	10/13/17	05	300	4510	419	926A	000000	500	00	000		40.00	
																	Check total:	\$40.00
Check: 105055 Type: W Date: 10/13/17 Vendor: CHRISTOPHER HOWARD Vendor#: 703559 Stat/Date: RECONCILED:10/17/17 Bank:																		
0001	fees/fall season/ofc etc/		0180392	0001	C.H-9/15/17	10/13/17	05	300	4510	849	926A	000000	600	00	000		65.00	
																	Check total:	\$65.00
Check: 105056 Type: W Date: 10/13/17 Vendor: CHRISTOPHER RITONDARO Vendor#: 703218 Stat/Date: RECONCILED:10/24/17 Bank:																		
0001	fees/fall season/ofc etc/		0180392	0002	C.R-9/30/17	10/13/17	05	300	4530	849	926A	000000	600	00	000		120.00	
																	Check total:	\$120.00
Check: 105057 Type: W Date: 10/13/17 Vendor: DAVID GROPPI Vendor#: 702277 Stat/Date: RECONCILED:10/16/17 Bank:																		
0001	fees/fall season/ofc etc/		0180392	0002	D.G-9/30/17	10/13/17	05	300	4530	849	926A	000000	600	00	000		90.00	
																	Check total:	\$90.00
Check: 105058 Type: W Date: 10/13/17 Vendor: EDWARD J. JARUS, JR. Vendor#: 700907 Stat/Date: Bank:																		
0001	fees/fall season/ofc etc/		0180392	0003	E.J-10/10/17	10/13/17	05	300	4510	419	926A	000000	500	00	000		80.00	
																	Check total:	\$80.00
Check: 105059 Type: W Date: 10/13/17 Vendor: JAMIE OTTER Vendor#: 703558 Stat/Date: RECONCILED:10/16/17 Bank:																		
0001	fees/fall season/ofc etc/		0180392	0001	J.O-10/2/17	10/13/17	05	300	4510	849	926A	000000	600	00	000		40.00	
0002	fees/fall season/ofc etc/		0180392	0002	J.O-10/2/17	10/13/17	05	300	4530	849	926A	000000	600	00	000		40.00	
0003	fees/fall season/ofc etc/		0180392	0002	J.O-9/19/17	10/13/17	05	300	4530	849	926A	000000	600	00	000		40.00	
																	Check total:	\$120.00
Check: 105060 Type: W Date: 10/13/17 Vendor: JOELLEN ROMANO Vendor#: 702958 Stat/Date: RECONCILED:10/16/17 Bank:																		
0001	fees/fall season/ofc etc/		0180392	0001	J.R-FALL	10/13/17	05	300	4510	849	926A	000000	600	00	000		260.00	
0002	fees/fall season/ofc etc/		0180392	0002	J.R-FALL	10/13/17	05	300	4530	849	926A	000000	600	00	000		260.00	
																	Check total:	\$520.00
Check: 105061 Type: W Date: 10/13/17 Vendor: LEO CIFELLI Vendor#: 700579 Stat/Date: Bank:																		
0001	fees/fall season/ofc etc/		0180392	0002	L.C-9/30/17	10/13/17	05	300	4530	849	926A	000000	600	00	000		90.00	
																	Check total:	\$90.00
Check: 105062 Type: W Date: 10/13/17 Vendor: ROBERT LATCH Vendor#: 701541 Stat/Date: RECONCILED:10/19/17 Bank:																		
0001	fees/fall season/ofc etc/		0180392	0001	R.L-10/7/17	10/13/17	05	300	4510	849	926A	000000	600	00	000		40.00	
																	Check total:	\$40.00
Check: 105063 Type: W Date: 10/13/17 Vendor: TERRENCE WILLIAMS Vendor#: 703560 Stat/Date: RECONCILED:10/16/17 Bank:																		
0001	fees/fall season/ofc etc/		0180392	0001	T.W-9/15/17	10/13/17	05	300	4510	849	926A	000000	600	00	000		65.00	
																	Check total:	\$65.00

Date: 11/06/2017
 Time: 1:19 pm

GARFIELD HTS. BOARD OF EDUC.
 SORT BY ISSUE DATE
 CHECK DATES BETWEEN 10/01/2017 AND 10/31/2017
 WARRANT CHECKS

Page: 13
 (CHEKPY)

SEQ	DESCRIPTION	TRAN NUMBER	P.O. NUMBER	IT NO	INVOICE NUMBER	TRAN DATE	TI	FND	FUNC	OBJ	SCC	DISTRIBUTION SUBJ	OU	IL	JOB	ITEM	AMOUNT
Check: 105064 Type: W Date: 10/13/17 Vendor: THOMAS COWLEY Vendor#: 701073 Stat/Date: RECONCILED:10/16/17 Bank:																	
0001	fees/fall season/ofc etc/		0180392	0002	T.C-9/30/17	10/13/17	05	300	4530	849	926A	000000	600	00	000		90.00
Check total: \$90.00																	
Check: 105065 Type: W Date: 10/13/17 Vendor: THOMAS LATSCH Vendor#: 703132 Stat/Date: Bank:																	
0001	fees/fall season/ofc etc/		0180392	0001	T.L-10/7/17	10/13/17	05	300	4510	849	926A	000000	600	00	000		40.00
Check total: \$40.00																	
Check: 105066 Type: W Date: 10/13/17 Vendor: ZENEI ALUSHI Vendor#: 702663 Stat/Date: RECONCILED:10/20/17 Bank:																	
0001	fees/fall season/ofc etc/		0180392	0001	Z.A-10/7/17	10/13/17	05	300	4510	849	926A	000000	600	00	000		60.00
Check total: \$60.00																	
Check: 105067 Type: W Date: 10/13/17 Vendor: BECKI GISSER Vendor#: 703241 Stat/Date: Bank:																	
0001	MS Girls Team/ ofc, sec.,		0180595	0001	B.G-10/3/17	10/13/17	05	300	4530	419	926A	000000	500	00	000		40.00
Check total: \$40.00																	
Check: 105068 Type: W Date: 10/13/17 Vendor: BOB BRADACH Vendor#: 703556 Stat/Date: RECONCILED:10/19/17 Bank:																	
0001	MS Girls Team/ ofc, sec.,		0180595	0001	B,B-10/2/17	10/13/17	05	300	4530	419	926A	000000	500	00	000		50.00
Check total: \$50.00																	
Check: 105069 Type: W Date: 10/13/17 Vendor: DARRELL HASKINS Vendor#: 702660 Stat/Date: RECONCILED:10/17/17 Bank:																	
0001	MS Girls Team/ ofc, sec.,		0180595	0001	D.H-10/3/17	10/13/17	05	300	4530	419	926A	000000	500	00	000		50.00
Check total: \$50.00																	
Check: 105070 Type: W Date: 10/13/17 Vendor: JEREMY POLLOCK Vendor#: 703166 Stat/Date: RECONCILED:10/24/17 Bank:																	
0001	MS Girls Team/ ofc, sec.,		0180595	0001	J.P-9/19/17	10/13/17	05	300	4530	419	926A	000000	500	00	000		40.00
Check total: \$40.00																	
Check: 105071 Type: W Date: 10/13/17 Vendor: TRYRENO SOWELL Vendor#: 703259 Stat/Date: RECONCILED:10/17/17 Bank:																	
0001	MS Girls Team/ ofc, sec.,		0180595	0001	T.S-10/5/17	10/13/17	05	300	4530	419	926A	000000	500	00	000		40.00
Check total: \$40.00																	
Check: 022461 Type: W Date: 10/16/17 Vendor: BRADLEY WILSON Vendor#: 830697 Stat/Date: RECONCILED:10/17/17 Bank: 1																	
0001	Spousal Reimbursement		0180199	0001	WILSON0717	10/16/17	05	024	2510	856	9241	000000	000	00	000		96.00
0002	Spousal Reimbursement		0180199	0001	WILSON0817	10/16/17	05	024	2510	856	9241	000000	000	00	000		96.00
0003	Spousal Reimbursement		0180199	0001	WILSON0917	10/16/17	05	024	2510	856	9241	000000	000	00	000		96.00
Check total: \$288.00																	
Check: 022462 Type: W Date: 10/16/17 Vendor: CHERYL CARANO Vendor#: 030272 Stat/Date: RECONCILED:10/17/17 Bank: 1																	
0001	Spousal Reimbursement		0180199	0001	CARANO0517	10/16/17	05	024	2510	856	9241	000000	000	00	000		125.00

Date: 11/06/2017
 Time: 1:19 pm

GARFIELD HTS. BOARD OF EDUC.
 SORT BY ISSUE DATE
 CHECK DATES BETWEEN 10/01/2017 AND 10/31/2017
 WARRANT CHECKS

Page: 14
 (CHEKPY)

SEQ	DESCRIPTION	TRAN NUMBER	P.O. NUMBER	IT NO	INVOICE NUMBER	TRAN DATE	TI	FND	FUNC	OBJ	SCC	ACCOUNT CODE DISTRIBUTION SUBJ OU IL JOB			ITEM	AMOUNT	
0002	Spousal Reimbursement		0180199	0001	CARANO0617	10/16/17	05	024	2510	856	9241	000000	000	00	000		125.00
0003	Spousal Reimbursement		0180199	0001	CARANO0717	10/16/17	05	024	2510	856	9241	000000	000	00	000		125.00
0004	Spousal Reimbursement		0180199	0001	CARANO0817	10/16/17	05	024	2510	856	9241	000000	000	00	000		125.00
0005	Spousal Reimbursement		0180199	0001	CARANO0917	10/16/17	05	024	2510	856	9241	000000	000	00	000		125.00
0006	Spousal Reimbursement		0180199	0001	CARANO1017	10/16/17	05	024	2510	856	9241	000000	000	00	000		125.00
Check total:																\$750.00	
Check: 022463 Type: W Date: 10/16/17 Vendor: CHRISTY WALCOFF																Vendor#: 030292 Stat/Date: RECONCILED:10/17/17 Bank: 1	
0001	Spousal Reimbursement		0180199	0001	WALCOFF0930	10/16/17	05	024	2510	856	9241	000000	000	00	000		62.50
Check total:																\$62.50	
Check: 022464 Type: W Date: 10/16/17 Vendor: DONALD MEDER																Vendor#: 832527 Stat/Date: RECONCILED:10/17/17 Bank: 1	
0001	Spousal Reimbursement		0180199	0001	MEDER0917	10/16/17	05	024	2510	856	9241	000000	000	00	000		109.84
Check total:																\$109.84	
Check: 022465 Type: W Date: 10/16/17 Vendor: HEATHER MAAG																Vendor#: 832072 Stat/Date: RECONCILED:10/17/17 Bank: 1	
0001	Spousal Reimbursement		0180199	0001	MAAG0811	10/16/17	05	024	2510	856	9241	000000	000	00	000		12.00
0002	Spousal Reimbursement		0180199	0001	MAAG2017	10/16/17	05	024	2510	856	9241	000000	000	00	000		395.98
0003	Spousal Reimbursement		0180199	0001	maag0717	10/16/17	05	024	2510	856	9241	000000	000	00	000		24.00
Check total:																\$431.98	
Check: 022466 Type: W Date: 10/16/17 Vendor: KARYN MAZZOLINI																Vendor#: 832674 Stat/Date: RECONCILED:10/17/17 Bank: 1	
0001	Spousal Reimbursement		0180199	0001	MAZZO0929	10/16/17	05	024	2510	856	9241	000000	000	00	000		57.82
Check total:																\$57.82	
Check: 022467 Type: W Date: 10/16/17 Vendor: KELLI BUTTOLPH																Vendor#: 110220 Stat/Date: RECONCILED:10/17/17 Bank: 1	
0001	Spousal Reimbursement		0180199	0001	BUTTOL1012	10/16/17	05	024	2510	856	9241	000000	000	00	000		62.50
Check total:																\$62.50	
Check: 022468 Type: W Date: 10/16/17 Vendor: KYLE KOVACH																Vendor#: 702687 Stat/Date: RECONCILED:10/17/17 Bank: 1	
0001	Spousal Reimbursement		0180199	0001	KOVACH1017	10/16/17	05	024	2510	856	9241	000000	000	00	000		89.34
Check total:																\$89.34	
Check: 022469 Type: W Date: 10/16/17 Vendor: MARCIA UNGER																Vendor#: 006280 Stat/Date: RECONCILED:10/17/17 Bank: 1	
0001	Spousal Reimbursement		0180199	0001	UNGER1017	10/16/17	05	024	2510	856	9241	000000	000	00	000		125.00
Check total:																\$125.00	
Check: 022470 Type: W Date: 10/16/17 Vendor: MARY ANN MARSHALL																Vendor#: 130204 Stat/Date: RECONCILED:10/17/17 Bank: 1	
0001	Spousal Reimbursement		0180199	0001	MARSHALL0917	10/16/17	05	024	2510	856	9241	000000	000	00	000		125.00
Check total:																\$125.00	
Check: 022471 Type: W Date: 10/16/17 Vendor: MATTHEW REVILOCK																Vendor#: 700798 Stat/Date: RECONCILED:10/17/17 Bank: 1	

Date: 11/06/2017
 Time: 1:19 pm

GARFIELD HTS. BOARD OF EDUC.
 SORT BY ISSUE DATE
 CHECK DATES BETWEEN 10/01/2017 AND 10/31/2017
 WARRANT CHECKS

Page: 15
 (CHEKPY)

SEQ	DESCRIPTION	TRAN NUMBER	P.O. NUMBER	IT NO	INVOICE NUMBER	TRAN DATE	TI	FND	FUNC	OBJ	SCC	SUBJ	OU	IL	JOB	ITEM	AMOUNT	
0001	Spousal Reimbursement		0180199	0001	REVILOCK0825	10/16/17	05	024	2510	856	9241	000000	000	00	000		41.00	
0002	Spousal Reimbursement		0180199	0001	REVILOCK0917	10/16/17	05	024	2510	856	9241	000000	000	00	000		82.00	
																	Check total:	\$123.00
Check: 105073 Type: W Date: 10/17/17 Vendor: OHIO BUREAU OF WORKERS' COMPENSATION Vendor#: 020441 Stat/Date: RECONCILED:10/24/17 Bank:																		
0001	BWC Premiums for the poli		0180218	0001	1002106378	09/29/17	05	024	2510	856	9243	000000	000	00	000		14,674.22	
																	Check total:	\$14,674.22
Check: 105074 Type: W Date: 10/17/17 Vendor: OHIO DEPARTMENT OF JOB AND FAMILY SERVICES Vendor#: 150120 Stat/Date: RECONCILED:10/24/17 Bank: 1																		
0001	UNEMPLOYMENT JULY 2017 -		0180697	0001	09/22/2017	10/09/17	05	001	1270	281	0000	000000	000	00	000		1,440.00	
0002	UNEMPLOYMENT JULY 2017 -		0180697	0002	09/22/2017	10/09/17	05	001	1270	281	0000	000000	000	00	000		1,329.00	
0003	UNEMPLOYMENT JULY 2017 -		0180697	0003	09/22/2017	10/09/17	05	001	2720	282	0000	000000	000	00	000		310.64	
0004	UNEMPLOYMENT JULY 2017 -		0180697	0004	09/22/2017	10/09/17	05	001	1270	281	0000	000000	000	00	000		962.96	
																	Check total:	\$4,042.60
Check: 105075 Type: W Date: 10/19/17 Vendor: ABA OUTREACH SERVICES Vendor#: 832909 Stat/Date: RECONCILED:10/26/17 Bank:																		
0001	Open P.O. 2017-18 behavio		0180229	0001	0002522	10/09/17	05	516	2213	412	9018	000000	000	00	022		14,237.50	
																	Check total:	\$14,237.50
Check: 105076 Type: W Date: 10/19/17 Vendor: APPLE INC. Vendor#: 010451 Stat/Date: RECONCILED:10/20/17 Bank: 1																		
0001	Apple Thunderbolt Cable (0180355	0001	4452678792	08/25/17	05	001	2211	640	0000	000000	815	00	015		1,160.00	
																	Check total:	\$1,160.00
Check: 105077 Type: W Date: 10/19/17 Vendor: BEYOND WORDS MUSIC & DANCE CENTER FOR AUTISM, LLC Vendor#: 833080 Stat/Date: RECONCILED:10/23/17 Bank:																		
0001	Open PO for Autism class		0180421	0001	0004998	10/01/17	05	516	1231	511	9018	000000	813	00	013		575.00	
																	Check total:	\$575.00
Check: 105078 Type: W Date: 10/19/17 Vendor: CLEVELAND CLINIC FOUNDATION Vendor#: 030383 Stat/Date: RECONCILED:10/25/17 Bank: 1																		
0001	Athletic Trainer Fee-2017		0180848	0001	0026500	09/20/17	05	001	4510	849	0000	000000	000	00	045		5,500.00	
0002	Athletic Trainer Fee 2017		0180848	0002	0026500	09/20/17	05	001	4530	849	0000	000000	000	00	045		5,500.00	
																	Check total:	\$11,000.00
Check: 105079 Type: W Date: 10/19/17 Vendor: D & W DIESEL INC. Vendor#: 803443 Stat/Date: RECONCILED:10/25/17 Bank: 1																		
0001	Bus Maint. and Repairs		0180836	0001	Q47203	09/26/17	05	001	2840	581	0000	000000	705	00	078		2,572.40	
																	Check total:	\$2,572.40
Check: 105080 Type: W Date: 10/19/17 Vendor: DAMON INDUSTRIES, INC. Vendor#: 040052 Stat/Date: RECONCILED:10/20/17 Bank: 1																		
0001	Misc cleaning supplies		0180253	0001	1056939	09/20/17	05	001	2720	572	0000	000000	702	00	078		190.60	
																	Check total:	\$190.60
Check: 105081 Type: W Date: 10/19/17 Vendor: DATA RECOGNITION CORP. Vendor#: 030747 Stat/Date: RECONCILED:10/20/17 Bank:																		
0001	Gifted test books grade 2		0180557	0001	0102698	09/19/17	05	516	1231	511	9018	000000	813	00	013		2,902.91	

Date: 11/06/2017
 Time: 1:19 pm

GARFIELD HTS. BOARD OF EDUC.
 SORT BY ISSUE DATE
 CHECK DATES BETWEEN 10/01/2017 AND 10/31/2017
 WARRANT CHECKS

Page: 16
 (CHEKPY)

SEQ	DESCRIPTION	TRAN NUMBER	P.O. NUMBER	IT NO	INVOICE NUMBER	TRAN DATE	TI	FND	FUNC	OBJ	SCC	SUBJ	OU	IL	JOB	ITEM	AMOUNT		
0002	Gifted test books grade 2		0180557	0001	0102699	09/19/17	05	516	1231	511	9018	000000	813	00	013		3,299.17		
0003	Gifted test books grade 2		0180557	0001	0102700	09/19/17	05	516	1231	511	9018	000000	813	00	013		3,349.54		
																	Check total:	\$9,551.62	
Check: 105082 Type: W Date: 10/19/17 Vendor: DISCOUNT SCHOOL SUPPLY																		Vendor#: 831507 Stat/Date:	Bank:
0001	Hook and Loop Circles		0180028	0001	P35884080101	07/18/17	05	001	1110	511	9412	000000	400	00	004		167.94		
0002	Red Baseline Newsprint 50		0180028	0002	P35884080101	07/18/17	05	001	1110	511	9412	000000	400	00	004		21.56		
																		Check total:	\$189.50
Check: 105083 Type: W Date: 10/19/17 Vendor: EDUCATION ALTERNATIVES																		Vendor#: 050166 Stat/Date: RECONCILED:10/23/17	Bank:
0001	Open PO for O.O.D. Tuitio		0180217	0001	2017100300018	10/03/17	05	516	1235	479	9018	000000	813	00	013		4,800.00		
																		Check total:	\$4,800.00
Check: 105084 Type: W Date: 10/19/17 Vendor: FISHER & PHILLIPS, LLP																		Vendor#: 832880 Stat/Date: RECONCILED:10/24/17	Bank: 1
0001	Fees for Legal Services f		0180489	0001	1118355	10/10/17	05	001	2490	418	0000	000000	831	00	024		18,033.50		
																		Check total:	\$18,033.50
Check: 105085 Type: W Date: 10/19/17 Vendor: GALLOPADE INTERNATIONAL																		Vendor#: 070104 Stat/Date: RECONCILED:10/24/17	Bank:
0001	Ohio 4th grade student		0180005	0001	0170379	07/14/17	05	001	1110	511	9412	000000	100	00	001		1,799.00		
0002	Ohio 5th grade student		0180005	0002	0170379	07/14/17	05	001	1110	511	9412	000000	100	00	001		1,799.00		
0003	Shipping and Handling		0180005	0003	0170379	07/14/17	05	001	1110	511	9412	000000	100	00	001		719.60		
0004	5th grade S.S.Regions & P		0180060	0001	0170378	07/14/17	05	001	1110	511	9412	000000	400	00	004		2,158.80		
0005	4th grade SS Ohio in the		0180060	0002	0170378	07/14/17	05	001	1110	511	9412	000000	400	00	004		2,158.80		
0006	Shipping		0180060	0003	0170378	07/14/17	05	001	1110	511	9412	000000	400	00	004		259.06		
																		Check total:	\$8,894.26
Check: 105086 Type: W Date: 10/19/17 Vendor: GCA																		Vendor#: 803406 Stat/Date: RECONCILED:10/26/17	Bank: 1
0001	Assigning fee foe HS & MS		0180840	0001	AUG-OCT 2017	09/27/17	05	001	4510	849	0000	000000	000	00	045		90.00		
0002	Assigning fees for HS & M		0180840	0002	AUG-OCT 2017	09/27/17	05	001	4530	849	0000	000000	000	00	045		90.00		
																		Check total:	\$180.00
Check: 105087 Type: W Date: 10/19/17 Vendor: GINA LEWIS																		Vendor#: 070460 Stat/Date: RECONCILED:10/20/17	Bank:
0001	Reimbursement for		0180862	0001	LETRS-10/5/17	10/18/17	05	516	2213	431	9875	000000	200	00	000		35.42		
																		Check total:	\$35.42
Check: 105088 Type: W Date: 10/19/17 Vendor: GRAYBAR ELECTRIC CO.,INC																		Vendor#: 070449 Stat/Date: RECONCILED:10/23/17	Bank: 1
0001	Lighting: Bulbs, ballasts		0180047	0001	604635865	10/11/17	05	001	2720	572	0000	000000	703	00	078		446.22-		
0002	Lighting: Bulbs, ballasts		0180047	0001	9300068700	09/20/17	05	001	2720	572	0000	000000	703	00	078		68.43		
0003	Lighting: Bulbs, ballasts		0180047	0001	9300072101	09/20/17	05	001	2720	572	0000	000000	703	00	078		155.75		
0004	Lighting: Bulbs, ballasts		0180047	0001	9300146965	09/25/17	05	001	2720	572	0000	000000	703	00	078		500.10		
																		Check total:	\$278.06
Check: 105089 Type: W Date: 10/19/17 Vendor: GREATER CLEVELAND CONFERENCE C/O KEN ROCKHOLD																		Vendor#: 832879 Stat/Date: RECONCILED:10/23/17	Bank: 1

Date: 11/06/2017
 Time: 1:19 pm

GARFIELD HTS. BOARD OF EDUC.
 SORT BY ISSUE DATE
 CHECK DATES BETWEEN 10/01/2017 AND 10/31/2017
 WARRANT CHECKS

Page: 17
 (CHEKPY)

SEQ	DESCRIPTION	TRAN NUMBER	P.O. NUMBER	IT NO	INVOICE NUMBER	TRAN DATE	TI	FND	FUNC	OBJ	SCC	SUBJ	OU	IL	JOB	ITEM	AMOUNT	
0001	Greater Cleveland		0180842	0001	2017-2018	10/06/17	05	001	4510	849	0000	000000	000	00	045		892.50	
0002	Greater Cleveland		0180842	0002	2017-2018	10/06/17	05	001	4530	849	0000	000000	000	00	045		892.50	
																	Check total:	\$1,785.00
Check: 105090 Type: W Date: 10/19/17 Vendor: HEPNER AIR FILTER SERVICE, INC Vendor#: 080226 Stat/Date: RECONCILED:10/25/17 Bank: 1																		
0001	Air filters, all building		0180349	0001	00461584	10/05/17	05	001	2720	572	0000	000000	703	00	078		552.95	
																	Check total:	\$552.95
Check: 105091 Type: W Date: 10/19/17 Vendor: INTERSTATE TOWING & TRANSPORT SPECIALIST INC. Vendor#: 831698 Stat/Date: RECONCILED:10/23/17 Bank: 1																		
0001	Use of Towing Service for		0180841	0001	0184210	08/15/17	05	001	2840	423	0000	000000	705	00	078		225.00	
																	Check total:	\$225.00
Check: 105092 Type: W Date: 10/19/17 Vendor: JAKPRINTS, INC. Vendor#: 833082 Stat/Date: RECONCILED:10/24/17 Bank:																		
0001	T-shirts for zones		0180517	0001	0783861	09/19/17	05	018	4600	890	922G	000000	200	00	000		332.60	
0002	Zone Shirts		0180539	0001	0783861	09/19/17	05	018	4600	890	942G	000000	400	00	000		21.06	
0003	Zones T'shirt order for		0180625	0001	0783861	09/19/17	05	018	4600	890	912G	000000	100	00	000		243.24	
0004	Elementary Zones shirts		0180660	0001	0783861	09/19/17	05	516	1231	511	9018	000000	813	00	013		617.95	
																	Check total:	\$1,214.85
(Multi-bank check)																		
Check: 105093 Type: W Date: 10/19/17 Vendor: JEFFERSON COUNTY ESC ATTN: VIRTUAL LEARNING ACADEMY Vendor#: 830776 Stat/Date: RECONCILED:10/23/17 Bank: 1																		
0001	VLA Fees - 10 licenses ad		0180826	0001	0003949	10/02/17	05	001	1990	410	0000	000000	822	00	022		1,850.00	
																	Check total:	\$1,850.00
Check: 105094 Type: W Date: 10/19/17 Vendor: JENICE WILLIS Vendor#: 803360 Stat/Date: RECONCILED:10/20/17 Bank:																		
0001	Reimbursement for		0180657	0001	LETRS-10/6/17	09/13/17	05	516	2213	431	9875	000000	200	00	000		35.42	
																	Check total:	\$35.42
Check: 105095 Type: W Date: 10/19/17 Vendor: KARNIS SAFE & LOCK, INC. Vendor#: 110145 Stat/Date: RECONCILED:10/20/17 Bank: 1																		
0001	Lock repair on doors &		0180332	0001	0120966	09/22/17	05	001	2720	423	0000	000000	709	00	078		144.94	
																	Check total:	\$144.94
Check: 105096 Type: W Date: 10/19/17 Vendor: KELLY BETLEJEWSKI Vendor#: 830524 Stat/Date: RECONCILED:10/30/17 Bank:																		
0001	Senior night flowers/SC a		0180858	0001	0000056	10/02/17	05	300	4510	590	926A	000000	600	00	000		15.00	
0002	Senior night flowers/SC a		0180858	0002	0000056	10/02/17	05	300	4530	590	926A	000000	600	00	000		15.00	
																	Check total:	\$30.00
Check: 105097 Type: W Date: 10/19/17 Vendor: KIDSLINK NEUROBEHAVIORAL CENTER, INC. Vendor#: 832820 Stat/Date: RECONCILED:10/20/17 Bank:																		
0001	Open PO for O.O.D. Tuitio		0180217	0001	0002629	10/04/17	05	516	1235	479	9018	000000	813	00	013		6,125.00	
0002	Open PO for O.O.D. Tuitio		0180217	0001	0002630	10/04/17	05	516	1235	479	9018	000000	813	00	013		6,125.00	
																	Check total:	\$12,250.00
Check: 105098 Type: W Date: 10/19/17 Vendor: LAURA DIRIENZO Vendor#: 803387 Stat/Date: RECONCILED:10/20/17 Bank:																		

Date: 11/06/2017
 Time: 1:19 pm

GARFIELD HTS. BOARD OF EDUC.
 SORT BY ISSUE DATE
 CHECK DATES BETWEEN 10/01/2017 AND 10/31/2017
 WARRANT CHECKS

Page: 18
 (CHEKPY)

SEQ	DESCRIPTION	TRAN NUMBER	P.O. NUMBER	IT NO	INVOICE NUMBER	TRAN DATE	TI	FND	FUNC	OBJ	SCC	SUBJ	OU	IL	JOB	ITEM	AMOUNT	
0001	Reimbursement for		0180863	0001	LETRS-10/5/17	10/05/17	05	516	2213	431	9875	000000	200	00	000		35.42	
																	Check total:	\$35.42
Check: 105099 Type: W Date: 10/19/17 Vendor: M & M CERTIFIED WELDING Vendor#: 130068 Stat/Date: RECONCILED:10/20/17 Bank: 1																		
0001	General Vehicle Service/M		0180810	0001	0080679	09/13/17	05	001	2840	581	0000	000000	705	00	078		625.00	
																	Check total:	\$625.00
Check: 105100 Type: W Date: 10/19/17 Vendor: OTTO'S SCOREBOARD REPAIR Vendor#: 150289 Stat/Date: RECONCILED:10/23/17 Bank:																		
0001	Repairs on FB scoreboard		0180855	0001	0002629	09/29/17	05	034	2720	423	0000	000000	600	00	000		1,196.00	
																	Check total:	\$1,196.00
Check: 105101 Type: W Date: 10/19/17 Vendor: PALADIN PROTECTIVE SYSTEMS, IN Vendor#: 831586 Stat/Date: RECONCILED:10/20/17 Bank: 1																		
0001	open po to repair microph		0180366	0001	0080755	09/20/17	05	001	2211	429	0000	000000	815	00	015		140.00	
																	Check total:	\$140.00
Check: 105102 Type: W Date: 10/19/17 Vendor: PRAXAIR DISTRIBUTION, INC Vendor#: 230200 Stat/Date: RECONCILED:10/24/17 Bank: 1																		
0001	Misc. Gases, Oxygen,		0180827	0001	79038113	09/22/17	05	001	2840	581	0000	000000	705	00	078		86.80	
0002	Misc. Gases, Oxygen,		0180827	0001	79038121	09/23/17	05	001	2840	581	0000	000000	705	00	078		93.10	
																	Check total:	\$179.90
Check: 105103 Type: W Date: 10/19/17 Vendor: PREMIER PRINTING & PROMOTIONS Vendor#: 831968 Stat/Date: RECONCILED:10/20/17 Bank: 1																		
0001	CopperTop Batteries AAA (0180583	0001	4-164977	09/19/17	05	001	1110	511	9412	000000	200	00	002		39.99	
0002	Duracell Rechargeable		0180583	0002	4-164977	09/19/17	05	001	1110	511	9412	000000	200	00	002		28.58	
0003	HOD-380 Large Print Month		0180593	0001	4-164978	09/19/17	05	001	2211	512	0000	000000	822	00	022		19.99	
0004	AVE-11902 Insertable Big		0180593	0002	4-164978	09/19/17	05	001	2211	512	0000	000000	822	00	022		8.38	
0005	AVE-11900 Insertable Big		0180593	0003	4-164978	09/19/17	05	001	2211	512	0000	000000	822	00	022		7.47	
0006	CRD-60118 One Step Printa		0180593	0004	4-164978	09/19/17	05	001	2211	512	0000	000000	822	00	022		38.95	
																	Check total:	\$143.36
(Multi-bank check)																		
Check: 105104 Type: W Date: 10/19/17 Vendor: PSI Vendor#: 160275 Stat/Date: RECONCILED:10/25/17 Bank:																		
0001	Title I Tutoring Services		0180793	0001	0137575	09/15/17	05	572	3260	411	9018	000000	000	00	000		1,848.00	
																	Check total:	\$1,848.00
Check: 105105 Type: W Date: 10/19/17 Vendor: QWESTCOM GRAPHICS, INC. Vendor#: 831164 Stat/Date: RECONCILED:10/25/17 Bank: 1																		
0001	Production of District's		0180200	0001	0026086	09/21/17	05	001	2610	461	0000	000000	832	00	026		2,179.90	
																	Check total:	\$2,179.90
Check: 105106 Type: W Date: 10/19/17 Vendor: RANDOLPH CONTINENZA Vendor#: 831720 Stat/Date: RECONCILED:10/20/17 Bank:																		
0001	Reimbursement for		0180788	0001	LETRS-10/4/17	10/18/17	05	516	2213	431	9875	000000	200	00	000		35.42	
																	Check total:	\$35.42

Date: 11/06/2017
 Time: 1:19 pm

GARFIELD HTS. BOARD OF EDUC.
 SORT BY ISSUE DATE
 CHECK DATES BETWEEN 10/01/2017 AND 10/31/2017
 WARRANT CHECKS

Page: 19
 (CHEKPY)

SEQ	DESCRIPTION	TRAN NUMBER	P.O. NUMBER	IT NO	INVOICE NUMBER	TRAN DATE	TI	FND	FUNC	OBJ	SCC	SUBJ	OU	IL	JOB	ITEM	AMOUNT
Check: 105107 Type: W Date: 10/19/17 Vendor: RIDDELL/ALL AMERICAN Vendor#: 180305 Stat/Date: RECONCILED:10/25/17 Bank:																	
0001	Chin Straps/acces. kit		0180403	0001	60334836	08/24/17	05	300	4510	590	926A	000000	600	00	000		468.20
																	Check total: \$468.20
Check: 105108 Type: W Date: 10/19/17 Vendor: ROYALTON MUSIC CENTER, INC. Vendor#: 831636 Stat/Date: RECONCILED:10/24/17 Bank: 1																	
0001	Repair on an instrument		0180852	0001	1275688	09/14/17	05	018	4600	890	942G	000000	400	00	000		40.00
																	Check total: \$40.00
Check: 105109 Type: W Date: 10/19/17 Vendor: SHERWIN WILLIAMS CO., THE Vendor#: 190232 Stat/Date: RECONCILED:10/23/17 Bank: 1																	
0001	Paint and supplies		0180061	0001	0327-7	09/07/17	05	001	2720	572	0000	000000	703	00	078		10.68
0002	Paint and supplies		0180061	0001	0575-1	09/12/17	05	001	2720	572	0000	000000	703	00	078		41.48
0003	Paint and supplies		0180061	0001	0910-0	09/19/17	05	001	2720	572	0000	000000	703	00	078		42.80
0004	Paint and supplies		0180061	0001	1309-4	09/28/17	05	001	2720	572	0000	000000	703	00	078		32.91
																	Check total: \$44.91
Check: 105110 Type: W Date: 10/19/17 Vendor: STEVE'S SPORTS, INC Vendor#: 190000 Stat/Date: RECONCILED:10/20/17 Bank:																	
0001	SC Jersey's/white and nav		0180834	0001	0016506	10/02/17	05	300	4510	590	926A	000000	600	00	000		120.00
0002	Polo/MS CC		0180835	0001	0016544	10/02/17	05	300	4510	590	926A	000000	600	00	000		28.00
0003	64 Shirts		0180838	0001	0016467	09/15/17	05	300	4510	590	926A	000000	600	00	000		320.00
																	Check total: \$468.00
Check: 105111 Type: W Date: 10/19/17 Vendor: VALERIE KING Vendor#: 803413 Stat/Date: RECONCILED:10/26/17 Bank:																	
0001	Reimbursement for		0180684	0001	LETRS-10/6/17	10/18/17	05	516	2213	431	9875	000000	200	00	000		35.42
																	Check total: \$35.42
Check: 105112 Type: W Date: 10/19/17 Vendor: VEC, INC Vendor#: 832015 Stat/Date: RECONCILED:10/24/17 Bank:																	
0001	Audio Enhancement?Kit-310		0180368	0001	9975104938	09/20/17	05	010	5600	419	0001	000000	100	00	000		860.00
0002	Audio Enhancement?Kit-310		0180368	0002	9975104938	09/20/17	05	010	5600	419	0001	000000	200	00	000		860.00
0003	Shipping		0180368	0003	9975104938	09/20/17	05	010	5600	419	0001	000000	100	00	000		30.00
0004	Shipping		0180368	0004	9975104938	09/20/17	05	010	5600	419	0001	000000	200	00	000		30.00
																	Check total: \$1,780.00
Check: 105113 Type: W Date: 10/19/17 Vendor: WHOLESALE COMPUTERS & Vendor#: 832865 Stat/Date: RECONCILED:10/23/17 Bank:																	
0001	Lenovo Thinkcentre M900		0180564	0001	0005466	09/13/17	05	401	3260	511	9019	000000	410	00	000		695.00
0002	shipping		0180564	0002	0005466	09/13/17	05	401	3260	511	9019	000000	410	00	000		35.00
																	Check total: \$730.00
Check: 105114 Type: W Date: 10/19/17 Vendor: WILLIAM H. SADLIER, INC. Vendor#: 080195 Stat/Date: RECONCILED:10/24/17 Bank:																	
0001	Vocabulary Test Booklets,		0180708	0001	0000621762	09/22/17	05	401	3260	511	9619	000000	412	00	000		634.36
																	Check total: \$634.36
Check: 105115 Type: W Date: 10/19/17 Vendor: WINSUPPLY CLEVELAND Vendor#: 120090 Stat/Date: RECONCILED:10/23/17 Bank: 1																	

Date: 11/06/2017
 Time: 1:19 pm

GARFIELD HTS. BOARD OF EDUC.
 SORT BY ISSUE DATE
 CHECK DATES BETWEEN 10/01/2017 AND 10/31/2017
 WARRANT CHECKS

Page: 20
 (CHEKPY)

SEQ	DESCRIPTION	TRAN NUMBER	P.O. NUMBER	IT NO	INVOICE NUMBER	TRAN DATE	TI	FND	FUNC	OBJ	SCC	SUBJ	OU	IL	JOB	ITEM	AMOUNT	
0001	Hot water tank - Wm Foste		0180731	0001	0337236	09/19/17	05	001	2740	573	0000	000000	700	00	078		4,969.72	
																	Check total:	\$4,969.72
	Check: 105116 Type: W Date: 10/19/17 Vendor: DR. GORDON DUPREE																	Vendor#: 832198 Stat/Date: RECONCILED:10/20/17 Bank: 1
0001	Reimbursement for use of		0180069	0001	SEPT 2017	10/19/17	05	001	2690	441	0000	000000	000	00	007		50.00	
																	Check total:	\$50.00
	Check: 105117 Type: W Date: 10/19/17 Vendor: JAMES KOSUDA																	Vendor#: 100330 Stat/Date: RECONCILED:10/20/17 Bank: 1
0001	Reimbursement for use of		0180071	0001	OCT 2017	10/19/17	05	001	2690	441	0000	000000	000	00	007		50.00	
																	Check total:	\$50.00
	Check: 105118 Type: W Date: 10/19/17 Vendor: JODY SAXTON																	Vendor#: 100311 Stat/Date: RECONCILED:10/20/17 Bank: 1
0001	Reimbursement for use of		0170127	0001	FEB-JUN2017	10/19/17	05	001	2690	441	0000	000000	000	00	007		250.00	
																	Check total:	\$250.00
	Check: 105119 Type: W Date: 10/19/17 Vendor: KARYN MAZZOLINI																	Vendor#: 832674 Stat/Date: RECONCILED:10/20/17 Bank: 1
0001	reinbursement for tuition		0180799	0001	SUMMER17	09/27/17	05	001	1190	411	0000	000000	000	00	007		1,700.61	
																	Check total:	\$1,700.61
	Check: 105120 Type: W Date: 10/19/17 Vendor: LESLIE ROTATORI-TRANTER																	Vendor#: 832851 Stat/Date: RECONCILED:10/20/17 Bank: 1
0001	Reimbursement for use of		0180051	0001	OCT 2017	10/19/17	05	001	2690	441	0000	000000	000	00	007		50.00	
																	Check total:	\$50.00
	Check: 105121 Type: W Date: 10/19/17 Vendor: MARY ANN MARSHALL																	Vendor#: 130204 Stat/Date: RECONCILED:10/20/17 Bank: 1
0001	Reimbursement for use of		0180736	0001	SEPT 2017	10/19/17	05	001	2690	441	0000	000000	000	00	007		25.00	
																	Check total:	\$25.00
	Check: 105122 Type: W Date: 10/19/17 Vendor: MICHAEL FREILINO																	Vendor#: 832852 Stat/Date: RECONCILED:10/20/17 Bank: 1
0001	Reimbursement for use of		0180039	0001	JUL-SEPT2017	10/19/17	05	001	2690	441	0000	000000	000	00	007		150.00	
																	Check total:	\$150.00
	Check: 105123 Type: W Date: 10/19/17 Vendor: ROBERT C. IVORY																	Vendor#: 832624 Stat/Date: RECONCILED:10/20/17 Bank:
0001	Consultant service and		0180890	0001	0000149	09/29/17	05	019	2219	419	914A	000000	000	00	000		5,000.00	
																	Check total:	\$5,000.00
	Check: 105124 Type: W Date: 10/19/17 Vendor: SHARI BAILEY																	Vendor#: 190233 Stat/Date: RECONCILED:10/20/17 Bank: 1
0001	Reimbursent for use of		0170069	0001	MAY/JUN 2017	10/19/17	05	001	2690	441	0000	000000	000	00	007		100.00	
0002	Reimbursent for use of		0180807	0001	JULY 2017	10/19/17	05	001	2690	441	0000	000000	000	00	007		50.00	
																	Check total:	\$150.00
	Check: 105125 Type: W Date: 10/20/17 Vendor: RED ROOF INN																	Vendor#: 180202 Stat/Date: RECONCILED:10/24/17 Bank:

Date: 11/06/2017
 Time: 1:19 pm

GARFIELD HTS. BOARD OF EDUC.
 SORT BY ISSUE DATE
 CHECK DATES BETWEEN 10/01/2017 AND 10/31/2017
 WARRANT CHECKS

Page: 21
 (CHEKPY)

SEQ	DESCRIPTION	TRAN NUMBER	P.O. NUMBER	IT NO	INVOICE NUMBER	TRAN DATE	TI	FND	FUNC	OBJ	SCC	SUBJ	OU	IL	JOB	ITEM	AMOUNT
0001	Lodging for J.		0180641	0001	10/23-25/17	10/12/17	05	572	2213	432	9018	000000	000	00	000		398.93
0002	Parking - \$10/day		0180641	0002	10/23-25/17	10/12/17	05	572	2213	432	9018	000000	000	00	000		30.00
Check total:																	\$428.93
Check: 022472 Type: W Date: 10/23/17 Vendor: BRAD LAMBERT						Vendor#: 831231 Stat/Date: RECONCILED:10/24/17 Bank: 1											
0001	Spousal Reimbursement		0180905	0001	LAMBERT0817	10/23/17	05	024	2510	856	9241	000000	000	00	000		114.60
Check total:																	\$114.60
Check: 022473 Type: W Date: 10/23/17 Vendor: CANDICE LANSE						Vendor#: 832700 Stat/Date: RECONCILED:10/24/17 Bank: 1											
0001	Spousal Reimbursement		0180905	0001	LANSE0317	10/23/17	05	024	2510	856	9241	000000	000	00	000		104.30
0002	Spousal Reimbursement		0180905	0001	LANSE0417	10/23/17	05	024	2510	856	9241	000000	000	00	000		83.44
0003	Spousal Reimbursement		0180905	0001	LANSE0517	10/23/17	05	024	2510	856	9241	000000	000	00	000		104.30
0004	Spousal Reimbursement		0180905	0001	LANSE0717	10/23/17	05	024	2510	856	9241	000000	000	00	000		83.44
0005	Spousal Reimbursement		0180905	0001	LANSE0817	10/23/17	05	024	2510	856	9241	000000	000	00	000		104.30
Check total:																	\$479.78
Check: 022474 Type: W Date: 10/23/17 Vendor: CHERYL DETTLING						Vendor#: 832358 Stat/Date: RECONCILED:10/24/17 Bank: 1											
0001	Spousal Reimbursement		0180905	0001	DETTLING0818	10/23/17	05	024	2510	856	9241	000000	000	00	000		55.00
0002	Spousal Reimbursement		0180905	0001	DETTLING0917	10/23/17	05	024	2510	856	9241	000000	000	00	000		125.00
0003	Spousal Reimbursement		0180905	0001	DETTLING1017	10/23/17	05	024	2510	856	9241	000000	000	00	000		55.00
Check total:																	\$235.00
Check: 022475 Type: W Date: 10/23/17 Vendor: JILL FRIMEL						Vendor#: 100308 Stat/Date: RECONCILED:10/24/17 Bank: 1											
0001	Spousal Reimbursement		0180905	0001	FRIMEL0519	10/23/17	05	024	2510	856	9241	000000	000	00	000		48.10
0002	Spousal Reimbursement		0180905	0001	FRIMEL0617	10/23/17	05	024	2510	856	9241	000000	000	00	000		125.00
0003	Spousal Reimbursement		0180905	0001	FRIMEL0717	10/23/17	05	024	2510	856	9241	000000	000	00	000		96.20
0004	Spousal Reimbursement		0180905	0001	FRIMEL0817	10/23/17	05	024	2510	856	9241	000000	000	00	000		96.20
0005	Spousal Reimbursement		0180905	0001	FRIMEL0917	10/23/17	05	024	2510	856	9241	000000	000	00	000		96.20
0006	Spousal Reimbursement		0180905	0001	FRIMEL1017	10/23/17	05	024	2510	856	9241	000000	000	00	000		96.20
Check total:																	\$557.90
Check: 022476 Type: W Date: 10/23/17 Vendor: JOWELL GRAY						Vendor#: 832286 Stat/Date: RECONCILED:10/24/17 Bank: 1											
0001	Spousal Reimbursement		0180905	0001	GRAY1117	10/23/17	05	024	2510	856	9241	000000	000	00	000		125.00
Check total:																	\$125.00
Check: 022477 Type: W Date: 10/23/17 Vendor: KARYN MAZZOLINI						Vendor#: 832674 Stat/Date: RECONCILED:10/24/17 Bank: 1											
0001	Spousal Reimbursement		0180905	0001	MAZZO1013	10/23/17	05	024	2510	856	9241	000000	000	00	000		57.82
Check total:																	\$57.82
Check: 022478 Type: W Date: 10/23/17 Vendor: KELLI BUTTOLPH						Vendor#: 110220 Stat/Date: RECONCILED:10/24/17 Bank: 1											
0001	Spousal Reimbursement		0180905	0001	BUTTOL1026	10/23/17	05	024	2510	856	9241	000000	000	00	000		62.50
Check total:																	\$62.50

Date: 11/06/2017
 Time: 1:19 pm

GARFIELD HTS. BOARD OF EDUC.
 SORT BY ISSUE DATE
 CHECK DATES BETWEEN 10/01/2017 AND 10/31/2017
 WARRANT CHECKS

Page: 22
 (CHEKPY)

SEQ	DESCRIPTION	TRAN NUMBER	P.O. NUMBER	IT NO	INVOICE NUMBER	TRAN DATE	TI	FND	FUNC	OBJ	SCC	SUBJ	OU	IL	JOB	ITEM	AMOUNT
Check: 022479 Type: W Date: 10/23/17 Vendor: LAUREN DIFRANCO Vendor#: 832278 Stat/Date: RECONCILED:10/24/17 Bank: 1																	
0001	Spousal Reimbursement		0180905	0001	DIFRANCO0929	10/23/17	05	024	2510	856	9241	000000	000	00	000		38.86
0002	Spousal Reimbursement		0180905	0001	DIFRANCO1013	10/23/17	05	024	2510	856	9241	000000	000	00	000		38.86
Check total: \$77.72																	
Check: 022480 Type: W Date: 10/23/17 Vendor: LISA MULLINS Vendor#: 832331 Stat/Date: RECONCILED:10/24/17 Bank: 1																	
0001	Spousal Reimbursement		0180905	0001	MULLINS1017	10/23/17	05	024	2510	856	9241	000000	000	00	000		125.00
Check total: \$125.00																	
Check: 022481 Type: W Date: 10/23/17 Vendor: MARYANN RYAN Vendor#: 832316 Stat/Date: RECONCILED:10/24/17 Bank: 1																	
0001	Spousal Reimbursement		0180905	0001	RYAN0917	10/23/17	05	024	2510	856	9241	000000	000	00	000		125.00
0002	Spousal Reimbursement		0180905	0001	RYAN1017	10/23/17	05	024	2510	856	9241	000000	000	00	000		125.00
Check total: \$250.00																	
Check: 022482 Type: W Date: 10/23/17 Vendor: VICTORIA TOMASHESKI Vendor#: 220130 Stat/Date: RECONCILED:10/24/17 Bank: 1																	
0001	Spousal Reimbursement		0180905	0001	TOMASHESKI1017	10/23/17	05	024	2510	856	9241	000000	000	00	000		125.00
Check total: \$125.00																	
Check: 022483 Type: W Date: 10/23/17 Vendor: CANDICE LANSE Vendor#: 832700 Stat/Date: RECONCILED:10/24/17 Bank: 1																	
0001	Spousal Reimbursement		0180905	0001	LANSE0617	10/23/17	05	024	2510	856	9241	000000	000	00	000		104.30
Check total: \$104.30																	
Check: 105126 Type: W Date: 10/24/17 Vendor: ACCURATE REFRIGERATION SERVICE CORP. Vendor#: 010109 Stat/Date: RECONCILED:10/30/17 Bank: 1																	
0001	open p.o. for refrigerati		0180864	0001	0073753	08/21/17	05	006	3190	423	0000	000000	500	00	000		310.50
Check total: \$310.50																	
Check: 105127 Type: W Date: 10/24/17 Vendor: ANDERSON'S Vendor#: 010452 Stat/Date: RECONCILED:10/25/17 Bank: 1																	
0001	Homecoming Court 17-18		0180613	0001	7200694	09/11/17	05	018	4600	890	902G	000000	600	00	000		191.84
Check total: \$191.84																	
Check: 105128 Type: W Date: 10/24/17 Vendor: ASSOCIATION FOR MIDDLE LEVEL EDUCATION Vendor#: 832182 Stat/Date: RECONCILED:10/27/17 Bank: 1																	
0001	MEMBERSHIP DUES		0180553	0001	INV-173814-P2N0	09/28/17	05	001	2421	840	0000	000000	500	00	005		49.99
Check total: \$49.99																	
Check: 105129 Type: W Date: 10/24/17 Vendor: BARNES & NOBLE, INC. Vendor#: 018874 Stat/Date: Bank:																	
0001	320 ACT Math Problems arr		0180163	0001	3522903	08/24/17	05	001	1130	511	9412	000000	600	00	006		3,598.50
Check total: \$3,598.50																	
Check: 105130 Type: W Date: 10/24/17 Vendor: DAVE'S SUPERMARKETS INC. Vendor#: 831593 Stat/Date: RECONCILED:10/27/17 Bank: 1																	
0001	Groceries for food tech f		0180499	0001	7039771	10/10/17	05	009	2620	551	9625	000000	600	00	000		80.84

Date: 11/06/2017
 Time: 1:19 pm

GARFIELD HTS. BOARD OF EDUC.
 SORT BY ISSUE DATE
 CHECK DATES BETWEEN 10/01/2017 AND 10/31/2017
 WARRANT CHECKS

Page: 23
 (CHEKPY)

SEQ	DESCRIPTION	TRAN NUMBER	P.O. NUMBER	IT NO	INVOICE NUMBER	TRAN DATE	TI	FND	FUNC	OBJ	SCC	SUBJ	OU	IL	JOB	ITEM	AMOUNT	
0002	Groceries for food tech f		0180499	0001	7039772	10/10/17	05	009	2620	551	9625	000000	600	00	000		45.84	
0003	Groceries for food tech f		0180499	0001	7039773	09/27/17	05	009	2620	551	9625	000000	600	00	000		149.70	
0004	Groceries for food tech f		0180499	0001	7039814	09/21/17	05	009	2620	551	9625	000000	600	00	000		135.76	
0005	Groceries for food tech f		0180499	0001	7039816	09/12/17	05	009	2620	551	9625	000000	600	00	000		66.32	
0006	Groceries for food tech f		0180499	0001	7039817	09/05/17	05	009	2620	551	9625	000000	600	00	000		115.73	
0007	Groceries for food tech f		0180499	0001	7039818	08/30/17	05	009	2620	551	9625	000000	600	00	000		117.22	
0008	Groceries for food tech f		0180499	0001	7047472	08/31/17	05	009	2620	551	9625	000000	600	00	000		39.73	
																	Check total:	\$751.14
Check: 105131 Type: W Date: 10/24/17 Vendor: EBSCO INDUSTRIES, INC. Vendor#: 050140 Stat/Date: RECONCILED:10/25/17 Bank:																		
0001	Subscription Renewal 2017		0180169	0001	1548954	09/01/17	05	001	2222	540	9412	000000	600	00	006		696.52	
																	Check total:	\$696.52
Check: 105132 Type: W Date: 10/24/17 Vendor: ENNIS BRITTON, LPA Vendor#: 833102 Stat/Date: RECONCILED:10/26/17 Bank:																		
0001	Special Ed Seminar Brooke		0180885	0001	10/20/17	10/20/17	05	516	2213	432	9018	000000	000	00	022		190.00	
																	Check total:	\$190.00
Check: 105133 Type: W Date: 10/24/17 Vendor: FLINN SCIENTIFIC, INC. Vendor#: 060181 Stat/Date: RECONCILED:10/27/17 Bank: 1																		
0001	Order for science dept pe		0180166	0001	2109884	07/20/17	05	009	2620	551	9650	000000	600	00	000		1,999.76	
0002	Order for science dept pe		0180166	0001	2113401	07/28/17	05	009	2620	551	9650	000000	600	00	000		1,548.15	
0003	Anatomy supplies 2017-+20		0180582	0001	2134260	09/12/17	05	009	2620	551	9650	000000	600	00	000		985.88	
0004	Anatomy supplies 2017-+20		0180582	0001	2135975	09/14/17	05	009	2620	551	9650	000000	600	00	000		132.90	
																	Check total:	\$4,666.69
Check: 105134 Type: W Date: 10/24/17 Vendor: FOLLETT SCHOOL SOLUTIONS, INC. Vendor#: 832550 Stat/Date: RECONCILED:10/26/17 Bank: 1																		
0001	Spanish Workbook order #		0180374	0001	2135502A	08/14/17	05	009	2620	552	9605	000000	600	00	000		14.49	
0002	Spanish Workbook order #		0180374	0001	2135502B	08/14/17	05	009	2620	552	9605	000000	600	00	000		614.70	
0003	Spanish Workbook order #		0180374	0001	2135502D	08/18/17	05	009	2620	552	9605	000000	600	00	000		57.96	
0004	Spanish Workbook order #		0180374	0001	2135502F	08/28/17	05	009	2620	552	9605	000000	600	00	000		320.25	
0005	Spanish Workbook order #		0180374	0001	2135502G	08/22/17	05	009	2620	552	9605	000000	600	00	000		72.45	
																	Check total:	\$1,079.85
Check: 105135 Type: W Date: 10/24/17 Vendor: HOME DEPOT CREDIT SERVICES Vendor#: 080287 Stat/Date: Bank: 1																		
																		DEPT. 32-2501720761
0001	Blanket purchase order fo		0180448	0001	3403920	09/07/17	05	009	2620	551	9650	000000	600	00	000		605.28	
																	Check total:	\$605.28
Check: 105136 Type: W Date: 10/24/17 Vendor: HOUGHTON MIFFLIN HARCOURT PUBLISHING CO. Vendor#: 080141 Stat/Date: RECONCILED:10/26/17 Bank: 1																		
0001	read 180 item# VLX531832		0180429	0001	710069986	08/19/17	05	009	2620	552	9605	000000	600	00	000		827.37	
																	Check total:	\$827.37
Check: 105137 Type: W Date: 10/24/17 Vendor: J.W. PEPPER & SON, INC. Vendor#: 100283 Stat/Date: RECONCILED:10/25/17 Bank:																		
0001	Open purchase order for m		0180136	0001	08835128	08/23/17	05	300	4130	849	912B	000000	600	00	000		250.92	
0002	Open purchase order for m		0180136	0001	08839199	09/12/17	05	300	4130	849	912B	000000	600	00	000		64.99	
0003	Open purchase order for m		0180136	0001	08839732	09/13/17	05	300	4130	849	912B	000000	600	00	000		149.98	

Date: 11/06/2017
 Time: 1:19 pm

GARFIELD HTS. BOARD OF EDUC.
 SORT BY ISSUE DATE
 CHECK DATES BETWEEN 10/01/2017 AND 10/31/2017
 WARRANT CHECKS

Page: 24
 (CHEKPY)

SEQ	DESCRIPTION	TRAN NUMBER	P.O. NUMBER	IT NO	INVOICE NUMBER	TRAN DATE	TI	FND	FUNC	OBJ	SCC	SUBJ	OU	IL	JOB	ITEM	AMOUNT	
0004	Open purchase order for m	0180136	0001	08840444	09/13/17	05	300	4130	849	912B	000000	600	00	000			35.00	
0005	Open purchase order for m	0180136	0001	08841178	09/20/17	05	300	4130	849	912B	000000	600	00	000			45.00	
0006	We Honor You - Director's	0180735	0001	08842692	09/26/17	05	401	3260	511	9619	000000	412	00	000			49.99	
0007	Children Sing, Children P	0180735	0003	08842692	09/26/17	05	401	3260	511	9619	000000	412	00	000			19.95	
0008	About 80 years of Jazz -	0180735	0004	08842692	09/26/17	05	401	3260	511	9619	000000	412	00	000			29.95	
0009	Shipping/Handling	0180735	0005	08842692	09/26/17	05	401	3260	511	9619	000000	412	00	000			14.99	
																	Check total:	\$660.77
																		(Multi-bank check)
Check: 105138 Type: W Date: 10/24/17 Vendor: JARRETT PUBLISHING CO.																		Vendor#: 100153 Stat/Date: RECONCILED:10/25/17 Bank: 1
0001	Mastering Ohio's American	0180138	0001	03-54148	08/11/17	05	009	2620	552	9605	000000	600	00	000			4,144.00	
0002	Mastering Ohio's American	0180138	0002	03-54148	08/11/17	05	009	2620	552	9605	000000	600	00	000			3,885.00	
0003	Shipping	0180138	0003	03-54148	08/11/17	05	009	2620	552	9605	000000	600	00	000			401.45	
																	Check total:	\$8,430.45
Check: 105139 Type: W Date: 10/24/17 Vendor: JOSHEN PAPER & PACKAGING																		Vendor#: 100209 Stat/Date: RECONCILED:10/26/17 Bank:
0001	foil Hot DOg Bag item # 1	0180334	0001	4068022	09/14/17	05	001	1130	511	9412	000000	600	00	006			53.22	
																	Check total:	\$53.22
Check: 105140 Type: W Date: 10/24/17 Vendor: K12 SCHOOL CONSULTANTS, LLC																		Vendor#: 832024 Stat/Date: RECONCILED:10/25/17 Bank: 1
0001	Open P.O. for Residence	0180423	0001	0004073	08/02/17	05	001	2174	419	0000	000000	811	00	011			378.00	
0002	Open P.O. for Residence	0180423	0001	0004089	08/14/17	05	001	2174	419	0000	000000	811	00	011			3,068.00	
0003	Open P.O. for Residence	0180423	0001	0004109	09/01/17	05	001	2174	419	0000	000000	811	00	011			377.00	
0004	Open P.O. for Residence	0180423	0001	0004123	09/19/17	05	001	2174	419	0000	000000	811	00	011			1,100.00	
0005	Open P.O. for Residence	0180423	0001	0004126	09/21/17	05	001	2174	419	0000	000000	811	00	011			25.00	
0006	Open P.O. for Residence	0180423	0001	0004140	10/03/17	05	001	2174	419	0000	000000	811	00	011			417.00	
																	Check total:	\$5,365.00
Check: 105141 Type: W Date: 10/24/17 Vendor: KELLY BETLEJEWSKI																		Vendor#: 830524 Stat/Date: RECONCILED:10/30/17 Bank:
0001	VB Senior night flowers	0180870	0001	0000058	10/12/17	05	300	4530	590	926A	000000	600	00	000			12.50	
																	Check total:	\$12.50
Check: 105142 Type: W Date: 10/24/17 Vendor: KIMBLE RECYCLING & DISPOSAL, INC.																		Vendor#: 832489 Stat/Date: RECONCILED:10/25/17 Bank: 1
0001	District recycling 7/17 -	0180254	0001	0006113424	10/01/17	05	001	2790	572	0000	000000	700	00	078			158.15	
																	Check total:	\$158.15
Check: 105143 Type: W Date: 10/24/17 Vendor: LORAIN COUNTY BOARD OF EDUC. DBA ESC OF LORAIN COUNTY																		Vendor#: 050191 Stat/Date: RECONCILED:10/25/17 Bank: 1
0001	Reg-Jen Corrado-Strategie	0180603	0001	CURR5696	09/29/17	05	001	2213	411	0000	000000	822	00	022			185.00	
																	Check total:	\$185.00
Check: 105144 Type: W Date: 10/24/17 Vendor: MALLEY'S CHOCOLATES																		Vendor#: 130143 Stat/Date: RECONCILED:10/30/17 Bank:
0001	2018 fundraiser	0180147	0001	0001500108	08/24/17	05	200	4670	890	918S	000000	600	00	000			5,400.00	
																	Check total:	\$5,400.00

Date: 11/06/2017
Time: 1:19 pm

GARFIELD HTS. BOARD OF EDUC.
SORT BY ISSUE DATE
CHECK DATES BETWEEN 10/01/2017 AND 10/31/2017
WARRANT CHECKS

Page: 25
(CHEKPY)

SEQ	DESCRIPTION	TRAN NUMBER	P.O. NUMBER	IT NO	INVOICE NUMBER	TRAN DATE	TI	FND	FUNC	OBJ	SCC	SUBJ	OU	IL	JOB	ITEM	AMOUNT
Check: 105145 Type: W Date: 10/24/17 Vendor: NASCO Vendor#: 140110 Stat/Date: RECONCILED:10/27/17 Bank: 1																	
0001	Triman Safe Drawing Compa		0180153	0001	0623222	09/19/17	05	001	1130	511	9412	000000	600	00	006		55.50
0002	Order for Art Supplies16-		0180479	0001	0593491	08/30/17	05	009	2620	551	9601	000000	600	00	000		866.65
0003	shipping		0180479	0002	0593491	08/30/17	05	009	2620	551	9601	000000	600	00	000		28.60
																Check total:	\$950.75
(Multi-bank check)																	
Check: 105146 Type: W Date: 10/24/17 Vendor: NORTH COAST THERAPY ASSOCIATES, LLC Vendor#: 080346 Stat/Date: RECONCILED:10/27/17 Bank: 1																	
0001	Physical Therapy Open PO		0180294	0001	0000089	09/30/17	05	001	2181	413	0000	000000	813	00	013		4,923.75
																Check total:	\$4,923.75
Check: 105147 Type: W Date: 10/24/17 Vendor: NOVAK'S FLOWER SHOPPE Vendor#: 831711 Stat/Date: RECONCILED:10/26/17 Bank: 1																	
0001	Sympathy arrangement for		0180745	0001	213327/1	09/24/17	05	001	2310	439	0000	000000	900	00	007		61.94
																Check total:	\$61.94
Check: 105148 Type: W Date: 10/24/17 Vendor: ORIENTAL TRADING CO., INC. Vendor#: 150296 Stat/Date: RECONCILED:10/27/17 Bank: 1																	
0001	supplies to homecoming da		0180680	0001	685527183-01	09/18/17	05	200	4141	891	905H	000000	600	00	000		98.97
0002	supplies to homecoming da		0180680	0001	685527183-03	09/18/17	05	200	4141	891	905H	000000	600	00	000		45.26
0003	supplies to homecoming da		0180769	0001	685527183-02	09/15/17	05	200	4141	891	905H	000000	600	00	000		10.18
0004	supplies to homecoming da		0180769	0001	685707063-01	09/27/17	05	200	4141	891	905H	000000	600	00	000		81.73
																Check total:	\$236.14
Check: 105149 Type: W Date: 10/24/17 Vendor: PRESTWICK HOUSE, INC. Vendor#: 830790 Stat/Date: RECONCILED:10/31/17 Bank: 1																	
0001	cunningham order for book		0180465	0001	0332483	08/24/17	05	009	2620	552	9605	000000	600	00	000		1,099.33
																Check total:	\$1,099.33
Check: 105150 Type: W Date: 10/24/17 Vendor: PSI Vendor#: 160275 Stat/Date: RECONCILED:10/27/17 Bank:																	
0001	Title I Tutoring Services		0180793	0001	0137575.	09/15/17	05	572	3260	411	9018	000000	000	00	000		308.00
																Check total:	\$308.00
Check: 105151 Type: W Date: 10/24/17 Vendor: RE-ED ACCESS, LLC Vendor#: 832850 Stat/Date: RECONCILED:10/25/17 Bank:																	
0001	Open PO for O.O.D. Tuitio		0180217	0001	0002815	09/29/17	05	516	1235	479	9018	000000	813	00	013		9,453.00
																Check total:	\$9,453.00
Check: 105152 Type: W Date: 10/24/17 Vendor: SCOTT MINGUS Vendor#: 831017 Stat/Date: RECONCILED:10/27/17 Bank: 1																	
0001	Tube lite tubing for Scie		0180596	0001	S.C-9/17/17	09/17/17	05	009	2620	551	9650	000000	600	00	000		135.80
																Check total:	\$135.80
Check: 105153 Type: W Date: 10/24/17 Vendor: SQUIRRELS LLC Vendor#: 803446 Stat/Date: RECONCILED:10/25/17 Bank: 1																	
0001	Reflector 2 Mixed		0180602	0001	SD-000779	09/08/17	05	001	2211	516	0000	000000	815	00	015		720.00
																Check total:	\$720.00

Date: 11/06/2017
 Time: 1:19 pm

GARFIELD HTS. BOARD OF EDUC.
 SORT BY ISSUE DATE
 CHECK DATES BETWEEN 10/01/2017 AND 10/31/2017
 WARRANT CHECKS

Page: 26
 (CHEKPY)

SEQ	DESCRIPTION	TRAN NUMBER	P.O. NUMBER	IT NO	INVOICE NUMBER	TRAN DATE	TI	FND	FUNC	OBJ	SCC	SUBJ	OU	IL	JOB	ITEM	AMOUNT	
Check: 105154 Type: W Date: 10/24/17 Vendor: TEACHERS'S DISCOVERY Vendor#: 200189 Stat/Date: RECONCILED:10/25/17 Bank: 1																		
0001	online access to books fo		0180494	0001	0111518	08/25/17	05	009	2620	552	9605	000000	600	00	000		200.00	
																	Check total:	\$200.00
Check: 105155 Type: W Date: 10/24/17 Vendor: THERAPY SHOPPE INC. Vendor#: 200304 Stat/Date: RECONCILED:10/25/17 Bank:																		
0001	Occupational Therapist su		0180828	0001	0314493	10/10/17	05	516	1231	511	9018	000000	813	00	013		234.21	
																	Check total:	\$234.21
Check: 105156 Type: W Date: 10/24/17 Vendor: TREASURER STATE OF OHIO Vendor#: 020437 Stat/Date: RECONCILED:10/31/17 Bank: 1																		
0001	Open PO for Background Ch		0180197	0001	0114156-IN	10/02/17	05	001	2290	419	0000	000000	835	00	023		622.00	
																	Check total:	\$622.00
Check: 105157 Type: W Date: 10/24/17 Vendor: TREASURER, STATE OF OHIO Vendor#: 150128 Stat/Date: Bank: 1																		
0001	Elevator and Boiler		0180282	0001	EL4522492	10/02/17	05	001	2720	841	0000	000000	700	00	078		247.25	
																	Check total:	\$247.25
Check: 105158 Type: W Date: 10/24/17 Vendor: VINCENT LIGHTING SYSTEMS Vendor#: 831308 Stat/Date: RECONCILED:10/31/17 Bank: 1																		
0001	light replacement for CPA		0180594	0001	0225037-IN	09/28/17	05	001	2740	423	0000	000000	600	00	006		64.88	
																	Check total:	\$64.88
Check: 105159 Type: W Date: 10/24/17 Vendor: W.B. MASON CO., INC. Vendor#: 831162 Stat/Date: RECONCILED:10/27/17 Bank:																		
0001	supplies		0180504	0001	I47150863	08/25/17	05	001	1130	511	9412	000000	600	00	006		124.66	
0002	supplies		0180713	0001	I47852248	09/18/17	05	001	1130	511	9412	000000	600	00	006		596.31	
0003	supplies		0180713	0001	I47932752	09/20/17	05	001	1130	511	9412	000000	600	00	006		179.99	
																	Check total:	\$900.96
Check: 105160 Type: W Date: 10/25/17 Vendor: ASSETGENIE, INC. Vendor#: 832728 Stat/Date: RECONCILED:10/30/17 Bank: 1																		
0001	Open PO for Chromebook an		0180123	0001	1217793	09/26/17	05	001	2211	429	0000	000000	815	00	015		550.00	
																	Check total:	\$550.00
Check: 105161 Type: W Date: 10/25/17 Vendor: AT&T Vendor#: 150101 Stat/Date: Bank: 1																		
0001	Telephone service for the		0180244	0001	216332074009	09/22/17	05	001	2910	441	0000	000000	000	00	007		99.52	
0002	Telephone service for the		0180244	0001	216475810110	10/10/17	05	001	2910	441	0000	000000	000	00	007		3,266.64	
0003	Telephone service for the		0180244	0001	216662287309	09/19/17	05	001	2910	441	0000	000000	000	00	007		118.53	
0004	Telephone service for the		0180244	0001	216662586609	09/19/17	05	001	2910	441	0000	000000	000	00	007		44.12	
0005	Telephone service for the		0180244	0001	216883110409	09/28/17	05	001	2910	441	0000	000000	000	00	007		43.95	
0006	Telephone service for the		0180244	0001	216R93187809	09/25/17	05	001	2910	441	0000	000000	000	00	007		957.08	
																	Check total:	\$4,529.84
Check: 105162 Type: W Date: 10/25/17 Vendor: BREAKOUT, INC. Vendor#: 833089 Stat/Date: RECONCILED:10/30/17 Bank:																		
0001	Breakout EDU Kits, per		0180570	0001	0009574	09/27/17	05	401	3260	511	9619	000000	412	00	000		500.00	

Date: 11/06/2017
 Time: 1:19 pm

GARFIELD HTS. BOARD OF EDUC.
 SORT BY ISSUE DATE
 CHECK DATES BETWEEN 10/01/2017 AND 10/31/2017
 WARRANT CHECKS

Page: 27
 (CHEKPY)

SEQ	DESCRIPTION	TRAN NUMBER	P.O. NUMBER	IT NO	INVOICE NUMBER	TRAN DATE	TI	FND	FUNC	OBJ	SCC	SUBJ	OU	IL	JOB	ITEM	AMOUNT
Check total:																\$500.00	
Check: 105163 Type: W Date: 10/25/17 Vendor: BREWER-GARRETT																Vendor#: 832931 Stat/Date: RECONCILED:10/26/17 Bank: 1	
0001	HVAC service contract Jul		0180179	0001	000711449	09/25/17	05	001	2720	429	0000	000000	700	00	078		4,393.83
Check total:																\$4,393.83	
Check: 105164 Type: W Date: 10/25/17 Vendor: CAMBIUM LEARNING INC. VOYAGER SOPRIS LEARNING																Vendor#: 832425 Stat/Date: RECONCILED:10/30/17 Bank:	
0001	182326 Supercharged Reade		0180758	0001	1860510	09/29/17	05	516	1270	516	9875	000000	200	00	000		225.95
0002	Shipping/handling (10%)		0180758	0002	1860510	09/29/17	05	516	1270	516	9875	000000	200	00	000		22.60
Check total:																\$248.55	
Check: 105165 Type: W Date: 10/25/17 Vendor: CDW GOVERNMENT, INC.																Vendor#: 020237 Stat/Date: RECONCILED:10/26/17 Bank:	
0001	AVerVision F17-8M-documen		0180638	0001	KGP1004	09/22/17	05	401	3260	511	9019	000000	410	00	000		335.00
Check total:																\$335.00	
Check: 105166 Type: W Date: 10/25/17 Vendor: CENTRAL EXTERMINATING COMPANY																Vendor#: 030240 Stat/Date: RECONCILED:10/30/17 Bank: 1	
0001	Pest control, Bedbugs, et		0180385	0001	0658267	09/30/17	05	001	2720	429	0000	000000	700	00	078		247.45
0002	Pest control, Bedbugs, et		0180385	0001	0660707	09/26/17	05	001	2720	429	0000	000000	700	00	078		600.00
Check total:																\$847.45	
Check: 105167 Type: W Date: 10/25/17 Vendor: CENTRAL PURCHASING OFFICE DIOCESE OF CLEVELAND																Vendor#: 030241 Stat/Date: RECONCILED:10/31/17 Bank:	
0001	Copy Paper		0180590	0001	00172951	09/26/17	05	401	3260	512	9619	000000	412	00	000		69.98
Check total:																\$69.98	
Check: 105168 Type: W Date: 10/25/17 Vendor: CENTURYLINK BUSINESS SERVICES																Vendor#: 832109 Stat/Date: Bank: 1	
0001	Monthly charges for long		0180271	0001	1420181951	09/15/17	05	001	2910	441	0000	000000	000	00	007		94.14
Check total:																\$94.14	
Check: 105169 Type: W Date: 10/25/17 Vendor: CHRISTOPHER SAUER																Vendor#: 831303 Stat/Date: RECONCILED:10/26/17 Bank: 1	
0001	Reimbursement for use of		0180598	0001	SEPT 2017	10/24/17	05	001	2690	441	0000	000000	000	00	007		50.00
Check total:																\$50.00	
Check: 105170 Type: W Date: 10/25/17 Vendor: COMDOC LEASING																Vendor#: 030548 Stat/Date: RECONCILED:10/31/17 Bank: 1	
0001	District Wide Copier Leas		0180277	0001	30918846	10/07/17	05	001	2690	426	0000	000000	832	00	026		7,364.36
Check total:																\$7,364.36	
Check: 105171 Type: W Date: 10/25/17 Vendor: COMDOC, INC.																Vendor#: 030546 Stat/Date: RECONCILED:10/30/17 Bank: 1	
0001	Printer Lease for 2016-20		0180108	0001	IN2181987	09/25/17	05	001	2211	429	0000	000000	815	00	015		646.85
Check total:																\$646.85	
Check: 105172 Type: W Date: 10/25/17 Vendor: DAMON INDUSTRIES, INC.																Vendor#: 040052 Stat/Date: RECONCILED:10/26/17 Bank: 1	

Date: 11/06/2017
 Time: 1:19 pm

GARFIELD HTS. BOARD OF EDUC.
 SORT BY ISSUE DATE
 CHECK DATES BETWEEN 10/01/2017 AND 10/31/2017
 WARRANT CHECKS

Page: 28
 (CHEKPY)

SEQ	DESCRIPTION	TRAN NUMBER	P.O. NUMBER	IT NO	INVOICE NUMBER	TRAN DATE	TI	FND	FUNC	OBJ	SCC	SUBJ	OU	IL	JOB	ITEM	AMOUNT	
0001	Misc cleaning supplies		0180253	0001	1057361	09/27/17	05	001	2720	572	0000	000000	702	00	078		156.17	
0002	Misc cleaning supplies		0180253	0001	1057509	09/28/17	05	001	2720	572	0000	000000	702	00	078		58.73	
																	Check total:	\$214.90
Check: 105173 Type: W Date: 10/25/17 Vendor: DAVID PALMER																	Vendor#:	832254 Stat/Date: RECONCILED:10/26/17 Bank: 1
0001	Reimbursement for use of		0180058	0001	SEPT 2017	10/24/17	05	001	2690	441	0000	000000	000	00	007		50.00	
																	Check total:	\$50.00
Check: 105174 Type: W Date: 10/25/17 Vendor: ELECTRICAL APPLIANCE REPAIR SERVICE, INC.																	Vendor#:	050300 Stat/Date: RECONCILED:10/31/17 Bank: 1
0001	open p.o. for electrical		0180861	0001	8117204	09/22/17	05	006	3190	423	0000	000000	500	00	000		83.00	
																	Check total:	\$83.00
Check: 105175 Type: W Date: 10/25/17 Vendor: FISHER AUTO PART INC																	Vendor#:	803379 Stat/Date: RECONCILED:10/30/17 Bank: 1
0001	7/1/17-12/31/17 Misc. Veh		0180101	0001	554-033561	09/26/17	05	001	2840	581	0000	000000	705	00	078		114.36	
0002	Misc Maint items - belts,		0180766	0001	554-033293	09/22/17	05	001	2750	581	0000	000000	700	00	078		106.88	
0003	Misc Maint items - belts,		0180766	0001	554-033779	09/28/17	05	001	2750	581	0000	000000	700	00	078		7.51	
																	Check total:	\$228.75
Check: 105176 Type: W Date: 10/25/17 Vendor: GEAUGA COUNTY EDUCATIONAL SERVICE CENTER																	Vendor#:	832283 Stat/Date: RECONCILED:10/31/17 Bank: 1
0001	Blanket PO Student Tuitio		0180223	0001	0009712	09/22/17	05	001	1990	474	0000	000000	813	00	013		5,075.00	
																	Check total:	\$5,075.00
Check: 105177 Type: W Date: 10/25/17 Vendor: GRAINGER																	Vendor#:	070438 Stat/Date: RECONCILED:10/31/17 Bank: 1
0001	Misc building supplies		0180273	0001	9564837426	09/25/17	05	001	2720	572	0000	000000	703	00	078		13.74	
0002	Misc building supplies		0180273	0001	9566088614	09/26/17	05	001	2720	572	0000	000000	703	00	078		41.22	
0003	Misc building supplies		0180273	0001	9567915047	09/27/17	05	001	2720	572	0000	000000	703	00	078		202.86	
0004	Misc building supplies		0180273	0001	9571715185	10/02/17	05	001	2720	572	0000	000000	703	00	078		32.40	
0005	Misc building supplies		0180273	0001	9574280526	10/04/17	05	001	2720	572	0000	000000	703	00	078		56.28	
0006	Misc building supplies		0180273	0001	9578019763	10/09/17	05	001	2720	572	0000	000000	703	00	078		205.56	
																	Check total:	\$552.06
Check: 105178 Type: W Date: 10/25/17 Vendor: GUYETTE FARMS GUYETTE, LARRY M.																	Vendor#:	832864 Stat/Date: Bank: 1
0001	See attachment Items need		0180899	0001	0935919	10/16/17	05	018	4600	890	942G	000000	400	00	000		262.50	
																	Check total:	\$262.50
Check: 105179 Type: W Date: 10/25/17 Vendor: INTERIOR SUPPLY																	Vendor#:	832843 Stat/Date: RECONCILED:10/26/17 Bank: 1
0001	ceiling tiles, drywall,		0180302	0001	CL00542642-001	09/25/17	05	001	2720	572	0000	000000	703	00	078		180.76	
																	Check total:	\$180.76
Check: 105180 Type: W Date: 10/25/17 Vendor: IRON MOUNTAIN																	Vendor#:	090223 Stat/Date: RECONCILED:10/26/17 Bank: 1
0001	Shredding Services for FY		0180715	0001	PGD5320	09/30/17	05	001	2610	415	0000	000000	832	00	026		400.38	
																	Check total:	\$400.38

Date: 11/06/2017
 Time: 1:19 pm

GARFIELD HTS. BOARD OF EDUC.
 SORT BY ISSUE DATE
 CHECK DATES BETWEEN 10/01/2017 AND 10/31/2017
 WARRANT CHECKS

Page: 29
 (CHEKPY)

SEQ	DESCRIPTION	TRAN NUMBER	P.O. NUMBER	IT NO	INVOICE NUMBER	TRAN DATE	TI	FND	FUNC	OBJ	SCC	SUBJ	OU	IL	JOB	ITEM	AMOUNT
Check: 105181 Type: W Date: 10/25/17 Vendor: JACCO		Vendor#: 100506 Stat/Date: RECONCILED:10/26/17 Bank: 1															
0001	HVAC parts - Aaon equipme		0180645	0001	0002619	09/30/17	05	001	2720	429	0000	000000	700	00	078		411.25
Check total: \$411.25																	
Check: 105182 Type: W Date: 10/25/17 Vendor: JAMES G. ZUPKA, C.P.A., INC.		Vendor#: 832237 Stat/Date: RECONCILED:10/26/17 Bank: 1															
0001	Invoice for Professional		0180909	0001	CONTRACT1	09/28/17	05	001	2490	418	0000	000000	831	00	024		3,799.00
Check total: \$3,799.00																	
Check: 105183 Type: W Date: 10/25/17 Vendor: JODY SAXTON		Vendor#: 100311 Stat/Date: RECONCILED:10/26/17 Bank: 1															
0001	Reimbursement for use of		0180906	0001	JUL-SEPT2017	10/24/17	05	001	2690	441	0000	000000	000	00	007		150.00
Check total: \$150.00																	
Check: 105184 Type: W Date: 10/25/17 Vendor: KELLY BETLEJEWSKI		Vendor#: 830524 Stat/Date: RECONCILED:10/30/17 Bank:															
0001	FB/GO Senior night flower		0180872	0001	0000059	10/20/17	05	300	4510	590	926A	000000	600	00	000		22.50
0002	CH/Senior Night flowers/g		0180872	0002	0000059	10/20/17	05	300	4530	590	926A	000000	600	00	000		22.50
Check total: \$45.00																	
Check: 105185 Type: W Date: 10/25/17 Vendor: LAKESHORE LEARNING MATERIALS		Vendor#: 120127 Stat/Date: RECONCILED:10/30/17 Bank:															
0001	Mod & Play Colored Sand -		0180747	0001	2534280917	09/28/17	05	401	3260	512	9619	000000	412	00	000		24.99
0002	Shipping		0180747	0002	2534280917	09/28/17	05	401	3260	512	9619	000000	412	00	000		5.00
Check total: \$29.99																	
Check: 105186 Type: W Date: 10/25/17 Vendor: LEIGH ANN PUSTAI		Vendor#: 120391 Stat/Date: RECONCILED:10/26/17 Bank:															
0001	Reimbursement for		0180661	0001	LETRS-10/5/17	10/24/17	05	516	2213	431	9875	000000	200	00	000		35.42
Check total: \$35.42																	
Check: 105187 Type: W Date: 10/25/17 Vendor: LIGHTSPEED TECHNOLOGIES, INC.		Vendor#: 120099 Stat/Date: RECONCILED:10/26/17 Bank: 1															
0001	REDMike cradle charger		0180760	0001	0108213	09/28/17	05	001	2211	640	0000	000000	815	00	015		98.00
Check total: \$98.00																	
Check: 105188 Type: W Date: 10/25/17 Vendor: MCGRAW-HILL SCHOOL EDUCATION HOLDINGS, LLC		Vendor#: 130457 Stat/Date: RECONCILED:10/26/17 Bank:															
0001	6TH GRADE MATH TEXTBOOKS		0180733	0001	99944104001	09/28/17	05	001	1120	521	9412	000000	500	00	022		79.92
0002	SHIPPING		0180733	0002	99944104001	09/28/17	05	001	1120	521	9412	000000	500	00	022		14.95
Check total: \$94.87																	
Check: 105189 Type: W Date: 10/25/17 Vendor: MELISSA HERMAN		Vendor#: 803361 Stat/Date: RECONCILED:10/27/17 Bank:															
0001	Reimbursement for		0180821	0001	LETRS-10/6/17	10/24/17	05	516	2213	431	9875	000000	200	00	000		35.42
Check total: \$35.42																	
Check: 105190 Type: W Date: 10/25/17 Vendor: OHIO SCHOOL BOARDS ASSOCIATION		Vendor#: 150180 Stat/Date: Bank: 1															

Date: 11/06/2017
 Time: 1:19 pm

GARFIELD HTS. BOARD OF EDUC.
 SORT BY ISSUE DATE
 CHECK DATES BETWEEN 10/01/2017 AND 10/31/2017
 WARRANT CHECKS

Page: 30
 (CHEKPY)

SEQ	DESCRIPTION	TRAN NUMBER	P.O. NUMBER	IT NO	INVOICE NUMBER	TRAN DATE	TI	FND	FUNC	OBJ	SCC	SUBJ	OU	IL	JOB	ITEM	AMOUNT
0001	Registration for Capital		0180336	0001	17-CC51560-ANN	09/21/17	05	001	2310	418	0000	000000	900	00	007		925.00
0002	Registration for Capital		0180336	0002	17-CC51560-ANN	09/21/17	05	001	2411	432	0000	000000	831	00	024		462.50
0003	Registration for Capital		0180336	0003	17-CC51560-ANN	09/21/17	05	001	2500	432	0000	000000	852	00	025		462.50
Check total:																	\$1,850.00
Check: 105191 Type: W Date: 10/25/17 Vendor: PISANICK, PARTNERS, INC. Vendor#: 832917 Stat/Date: RECONCILED:10/30/17 Bank: 1																	
0001	Consulting services for f		0180759	0001	0000952	10/01/17	05	006	3190	419	0000	000000	500	00	000		2,390.00
0002	Consulting services for f		0180759	0002	0000952	10/01/17	05	006	3190	419	0000	000000	600	00	000		2,390.00
Check total:																	\$4,780.00
Check: 105192 Type: W Date: 10/25/17 Vendor: PREMIER PRINTING & PROMOTIONS Vendor#: 831968 Stat/Date: RECONCILED:10/26/17 Bank:																	
0001	DISCIPLINE REFERRAL NOTIC		0180634	0001	4-165027	10/27/17	05	001	2421	512	9412	000000	500	00	005		184.00
0002	SHIPPPING		0180634	0002	4-165027	10/27/17	05	001	2421	512	9412	000000	500	00	005		15.42
0003	Rechargeable Batteries AA		0180717	0001	4-165002	09/25/17	05	001	1110	511	9412	000000	400	00	004		85.74
0004	AA Batteries		0180717	0002	4-165002	09/25/17	05	001	1110	511	9412	000000	400	00	004		65.98
Check total:																	\$351.14
Check: 105193 Type: W Date: 10/25/17 Vendor: SCHOOL HEALTH CORPORATION Vendor#: 190142 Stat/Date: RECONCILED:10/31/17 Bank: 1																	
0001	See attached order		0180720	0001	3347399-00	09/26/17	05	001	2130	514	0000	000000	811	00	011		678.95
Check total:																	\$678.95
Check: 105194 Type: W Date: 10/25/17 Vendor: SCHOOL OUTFITTERS Vendor#: 190561 Stat/Date: RECONCILED:10/26/17 Bank:																	
0001	Preschool Headphone with		0180755	0001	INV12384783	09/26/17	05	001	1110	511	9412	000000	100	00	001		246.00
0002	Shipping and Handling		0180755	0002	INV12384783	09/26/17	05	001	1110	511	9412	000000	100	00	001		28.43
Check total:																	\$274.43
Check: 105195 Type: W Date: 10/25/17 Vendor: STEVE'S SPORTS, INC Vendor#: 190000 Stat/Date: RECONCILED:10/26/17 Bank:																	
0001	dance flag jacket order		0180431	0001	0016169	08/01/17	05	300	4130	519	952D	000000	600	00	000		769.00
Check total:																	\$769.00
Check: 105196 Type: W Date: 10/25/17 Vendor: TERRANCE OLSZEWSKI Vendor#: 200129 Stat/Date: RECONCILED:10/26/17 Bank: 1 C/O GARFIELD HTS.																	
0001	Reimbursement for Hats		0180874	0001	T.O/REIM	10/24/17	05	001	2310	446	0000	000000	900	00	007		80.00
Check total:																	\$80.00
Check: 105197 Type: W Date: 10/25/17 Vendor: THREE-Z INC. Vendor#: 200167 Stat/Date: Bank: 1 THREE Z TRUCKING & SUPPLY CO.																	
0001	Misc. Mulch, Topsoil, Gar		0180278	0001	0189615-IN	10/02/17	05	001	2730	571	0000	000000	700	00	078		120.00
Check total:																	\$120.00
Check: 105198 Type: W Date: 10/25/17 Vendor: W.B. MASON CO., INC. Vendor#: 831162 Stat/Date: RECONCILED:10/31/17 Bank:																	
0001	PAR1782470 Parker pen ref		0180727	0001	I48094410	09/25/17	05	001	2211	512	0000	000000	822	00	022		14.97
0002	PIL32211 Pilot Easy Touch		0180727	0002	I48094410	09/25/17	05	001	2211	512	0000	000000	822	00	022		7.64
0003	SAN82001 - Dry Erase Mark		0180753	0001	I48234799	09/28/17	05	516	1270	516	9875	000000	200	00	000		352.32
Check total:																	\$374.93

Date: 11/06/2017
 Time: 1:19 pm

GARFIELD HTS. BOARD OF EDUC.
 SORT BY ISSUE DATE
 CHECK DATES BETWEEN 10/01/2017 AND 10/31/2017
 WARRANT CHECKS

Page: 31
 (CHEKPY)

SEQ	DESCRIPTION	TRAN NUMBER	P.O. NUMBER	IT NO	INVOICE NUMBER	TRAN DATE	TI	FND	FUNC	OBJ	SCC	DISTRIBUTION SUBJ	OU	IL	JOB	ITEM	AMOUNT	
(Multi-bank check)																		
Check: 105199 Type: W Date: 10/26/17 Vendor: ALAN ST. JOHN												Vendor#:	702454	Stat/Date:	Bank:			
0001	fees/fall season/ofc etc/	0180392	0002	A.S-	10/12/17	10/25/17	05	300	4530	849	926A	000000	600	00	000		85.00	
																	Check total:	\$85.00
Check: 105200 Type: W Date: 10/26/17 Vendor: BRIAN OWENS												Vendor#:	703136	Stat/Date:	Bank:			
0001	fees/fall season/ofc etc/	0180392	0001	B.O-	10/21/17	10/25/17	05	300	4510	849	926A	000000	600	00	000		40.00	
																	Check total:	\$40.00
Check: 105201 Type: W Date: 10/26/17 Vendor: CARLOS CRESPO												Vendor#:	030398	Stat/Date:	RECONCILED:10/30/17	Bank:		
0001	fees/fall season/ofc etc/	0180392	0001	J.S-	10/20/17	10/25/17	05	300	4510	849	926A	000000	600	00	000		120.00	
																	Check total:	\$120.00
Check: 105202 Type: W Date: 10/26/17 Vendor: DALE GOLAK												Vendor#:	700175	Stat/Date:	RECONCILED:10/30/17	Bank:		
0001	fees/fall season/ofc etc/	0180392	0001	D.G-	10/21/17	10/25/17	05	300	4510	849	926A	000000	600	00	000		40.00	
																	Check total:	\$40.00
Check: 105203 Type: W Date: 10/26/17 Vendor: DAVID DOSKY												Vendor#:	702737	Stat/Date:	RECONCILED:10/30/17	Bank:		
0001	fees/fall season/ofc etc/	0180392	0003	D.D-	9/28/17	10/25/17	05	300	4510	419	926A	000000	500	00	000		80.00	
																	Check total:	\$80.00
Check: 105204 Type: W Date: 10/26/17 Vendor: DONZELL ANDREW												Vendor#:	702809	Stat/Date:	Bank:			
0001	fees/fall season/ofc etc/	0180392	0001	D.A-	10/12/17	10/25/17	05	300	4510	849	926A	000000	600	00	000		40.00	
																	Check total:	\$40.00
Check: 105205 Type: W Date: 10/26/17 Vendor: JAMES L. SEAWRIGHT												Vendor#:	700477	Stat/Date:	RECONCILED:10/31/17	Bank:		
C/O GARFIELD HTS. POLICE DEPT.																		
0001	fees/fall season/ofc etc/	0180392	0002	J.S-	10/12/17	10/25/17	05	300	4530	849	926A	000000	600	00	000		120.00	
0002	fees/fall season/ofc etc/	0180392	0001	J.S-	10/16/17	10/25/17	05	300	4510	849	926A	000000	600	00	000		120.00	
0003	fees/fall season/ofc etc/	0180392	0001	JS-	10/20/17	10/26/17	05	300	4510	849	926A	000000	600	00	000		120.00	
																	Check total:	\$360.00
Check: 105206 Type: W Date: 10/26/17 Vendor: JAMES LUCCHESI												Vendor#:	702455	Stat/Date:	Bank:			
0001	fees/fall season/ofc etc/	0180392	0002	J.L-	10/12/17	10/25/17	05	300	4530	849	926A	000000	600	00	000		85.00	
																	Check total:	\$85.00
Check: 105207 Type: W Date: 10/26/17 Vendor: JASON SCHNEIDER												Vendor#:	703140	Stat/Date:	RECONCILED:10/30/17	Bank:		
0001	fees/fall season/ofc etc/	0180392	0001	J,S-	10/20/17	10/25/17	05	300	4510	849	926A	000000	600	00	000		65.00	
																	Check total:	\$65.00
Check: 105208 Type: W Date: 10/26/17 Vendor: JOHN J. MARKS												Vendor#:	700891	Stat/Date:	RECONCILED:10/30/17	Bank:		

Date: 11/06/2017
 Time: 1:19 pm

GARFIELD HTS. BOARD OF EDUC.
 SORT BY ISSUE DATE
 CHECK DATES BETWEEN 10/01/2017 AND 10/31/2017
 WARRANT CHECKS

Page: 32
 (CHEKPY)

SEQ	DESCRIPTION	TRAN NUMBER	P.O. NUMBER	IT NO	INVOICE NUMBER	TRAN DATE	TI	FND	FUNC	OBJ	SCC	SUBJ	OU	IL	JOB	ITEM	AMOUNT
0001	fees/fall season/ofc etc/		0180392	0001	J.M-10/12/17	10/25/17	05	300	4510	849	926A	000000	600	00	000		120.00
0002	fees/fall season/ofc etc/		0180392	0002	J.M-10/21/17	10/25/17	05	300	4530	849	926A	000000	600	00	000		120.00
0003	fees/fall season/ofc etc/		0180392	0003	J.M-9/28/17	10/25/17	05	300	4510	419	926A	000000	500	00	000		120.00
Check total:																	\$360.00
Check: 105209 Type: W Date: 10/26/17 Vendor: JOSEPH BURKE						Vendor#: 703168 Stat/Date: RECONCILED:10/30/17 Bank:											
0001	fees/fall season/ofc etc/		0180392	0001	J.B-10/21/17	10/25/17	05	300	4510	849	926A	000000	600	00	000		40.00
Check total:																	\$40.00
Check: 105210 Type: W Date: 10/26/17 Vendor: KEVIN CAWNEEN						Vendor#: 703135 Stat/Date: Bank:											
0001	fees/fall season/ofc etc/		0180392	0002	K.C-10/10/17	10/25/17	05	300	4530	849	926A	000000	600	00	000		50.00
Check total:																	\$50.00
Check: 105211 Type: W Date: 10/26/17 Vendor: KEVIN CLANCY						Vendor#: 700628 Stat/Date: Bank:											
0001	fees/fall season/ofc etc/		0180392	0001	K.C-10/16/17	10/25/17	05	300	4510	849	926A	000000	600	00	000		40.00
Check total:																	\$40.00
Check: 105212 Type: W Date: 10/26/17 Vendor: LARRY FRY						Vendor#: 702656 Stat/Date: Bank:											
0001	fees/fall season/ofc etc/		0180392	0002	L.F-10/10/17	10/25/17	05	300	4530	849	926A	000000	600	00	000		85.00
Check total:																	\$85.00
Check: 105213 Type: W Date: 10/26/17 Vendor: LEONARD SIGAC						Vendor#: 703554 Stat/Date: Bank:											
0001	fees/fall season/ofc etc/		0180392	0001	L.S-9/25/17	10/25/17	05	300	4510	849	926A	000000	600	00	000		60.00
Check total:																	\$60.00
Check: 105214 Type: W Date: 10/26/17 Vendor: MARTIN NALEPA						Vendor#: 703564 Stat/Date: Bank:											
0001	fees/fall season/ofc etc/		0180392	0002	M.N-10/12/17	10/25/17	05	300	4530	849	926A	000000	600	00	000		50.00
Check total:																	\$50.00
Check: 105215 Type: W Date: 10/26/17 Vendor: MATTWE KERSTEN						Vendor#: 703552 Stat/Date: Bank:											
0001	fees/fall season/ofc etc/		0180392	0001	M.K-10/20/17	10/25/17	05	300	4510	849	926A	000000	600	00	000		65.00
Check total:																	\$65.00
Check: 105216 Type: W Date: 10/26/17 Vendor: MELVIN PARKER						Vendor#: 702703 Stat/Date: Bank:											
0001	fees/fall season/ofc etc/		0180392	0001	M.P-10/12/17	10/25/17	05	300	4510	849	926A	000000	600	00	000		40.00
Check total:																	\$40.00
Check: 105217 Type: W Date: 10/26/17 Vendor: MICHAEL FONTONE						Vendor#: 703550 Stat/Date: Bank:											
0001	fees/fall season/ofc etc/		0180392	0001	M.F-10/21/17	10/25/17	05	300	4510	849	926A	000000	600	00	000		40.00
Check total:																	\$40.00
Check: 105218 Type: W Date: 10/26/17 Vendor: MICHAEL GALLAGHER						Vendor#: 702206 Stat/Date: RECONCILED:10/31/17 Bank:											

Date: 11/06/2017
 Time: 1:19 pm

GARFIELD HTS. BOARD OF EDUC.
 SORT BY ISSUE DATE
 CHECK DATES BETWEEN 10/01/2017 AND 10/31/2017
 WARRANT CHECKS

Page: 33
 (CHEKPY)

SEQ	DESCRIPTION	TRAN NUMBER	P.O. NUMBER	IT NO	INVOICE NUMBER	TRAN DATE	TI	FND	FUNC	OBJ	SCC	SUBJ	OU	IL	JOB	ITEM	AMOUNT	
0001	fees/fall season/ofc etc/		0180392	0002	M.G-10/10/17	10/25/17	05	300	4530	849	926A	000000	600	00	000		50.00	
0002	fees/fall season/ofc etc/		0180392	0002	M.G-10/12/17	10/25/17	05	300	4530	849	926A	000000	600	00	000		50.00	
																	Check total:	\$100.00
Check: 105219 Type: W Date: 10/26/17 Vendor: MIKE PHILLIPS Vendor#: 703553 Stat/Date: Bank:																		
0001	fees/fall season/ofc etc/		0180392	0001	M.P-10/20/17	10/25/17	05	300	4510	849	926A	000000	600	00	000		65.00	
																	Check total:	\$65.00
Check: 105220 Type: W Date: 10/26/17 Vendor: NICK AVRAMAUT Vendor#: 702727 Stat/Date: Bank:																		
0001	fees/fall season/ofc etc/		0180392	0001	N.A-10/16/17	10/25/17	05	300	4510	849	926A	000000	600	00	000		40.00	
																	Check total:	\$40.00
Check: 105221 Type: W Date: 10/26/17 Vendor: PAUL A. SADOSKY Vendor#: 700756 Stat/Date: RECONCILED:10/27/17 Bank:																		
0001	fees/fall season/ofc etc/		0180392	0002	P.S-10/10/17	10/25/17	05	300	4530	849	926A	000000	600	00	000		80.00	
0002	fees/fall season/ofc etc/		0180392	0001	P.S-10/20/17	10/25/17	05	300	4510	849	926A	000000	600	00	000		100.00	
																	Check total:	\$180.00
Check: 105222 Type: W Date: 10/26/17 Vendor: RAE GRANT Vendor#: 702819 Stat/Date: Bank:																		
0001	fees/fall season/ofc etc/		0180392	0001	R.G-9/25/17-2	10/25/17	05	300	4510	849	926A	000000	600	00	000		20.00	
																	Check total:	\$20.00
Check: 105223 Type: W Date: 10/26/17 Vendor: ROBERT HIMMELEN Vendor#: 703570 Stat/Date: RECONCILED:10/30/17 Bank:																		
0001	fees/fall season/ofc etc/		0180392	0002	R.H-10/10/17	10/25/17	05	300	4530	849	926A	000000	600	00	000		85.00	
																	Check total:	\$85.00
Check: 105224 Type: W Date: 10/26/17 Vendor: RONALD FULLER Vendor#: 703144 Stat/Date: Bank:																		
0001	fees/fall season/ofc etc/		0180392	0001	R.F-10/20/17	10/25/17	05	300	4510	849	926A	000000	600	00	000		65.00	
																	Check total:	\$65.00
Check: 105225 Type: W Date: 10/26/17 Vendor: RUSSELL RODIC Vendor#: 702938 Stat/Date: RECONCILED:10/30/17 Bank:																		
0001	fees/fall season/ofc etc/		0180392	0001	R.R-10/12/17	10/25/17	05	300	4510	849	926A	000000	600	00	000		40.00	
																	Check total:	\$40.00
Check: 105226 Type: W Date: 10/26/17 Vendor: SONNY MARSH Vendor#: 703191 Stat/Date: Bank:																		
0001	fees/fall season/ofc etc/		0180392	0001	S.M-10/12/17	10/25/17	05	300	4510	849	926A	000000	600	00	000		40.00	
																	Check total:	\$40.00
Check: 105227 Type: W Date: 10/26/17 Vendor: STEVEN HAYHURST Vendor#: 703551 Stat/Date: RECONCILED:10/30/17 Bank:																		
0001	fees/fall season/ofc etc/		0180392	0001	S.H-10/20/17	10/25/17	05	300	4510	849	926A	000000	600	00	000		65.00	
																	Check total:	\$65.00

Date: 11/06/2017
 Time: 1:19 pm

GARFIELD HTS. BOARD OF EDUC.
 SORT BY ISSUE DATE
 CHECK DATES BETWEEN 10/01/2017 AND 10/31/2017
 WARRANT CHECKS

Page: 34
 (CHEKPY)

SEQ	DESCRIPTION	TRAN NUMBER	P.O. NUMBER	IT NO	INVOICE NUMBER	TRAN DATE	TI	FND	FUNC	OBJ	SCC	SUBJ	OU	IL	JOB	ITEM	AMOUNT	
Check: 105228 Type: W Date: 10/26/17 Vendor: TIMOTHY BAUN Vendor#: 702505 Stat/Date: Bank:																		
0001	fees/fall season/ofc etc/		0180392	0001	T.B-10/20/17	10/25/17	05	300	4510	849	926A	000000	600	00	000		120.00	
																	Check total:	\$120.00
Check: 105229 Type: W Date: 10/26/17 Vendor: TIMOTHY DONOVAN Vendor#: 700024 Stat/Date: Bank:																		
0001	fees/fall season/ofc etc/		0180392	0001	T.D-10/16/17	10/25/17	05	300	4510	849	926A	000000	600	00	000		40.00	
																	Check total:	\$40.00
Check: 105230 Type: W Date: 10/26/17 Vendor: TIMOTHY SNIDER Vendor#: 702463 Stat/Date: Bank:																		
0001	fees/fall season/ofc etc/		0180392	0001	T.S-10/16/17	10/25/17	05	300	4510	849	926A	000000	600	00	000		40.00	
																	Check total:	\$40.00
Check: 105233 Type: W Date: 10/27/17 Vendor: CINTAS CORPORATION Vendor#: 832680 Stat/Date: Bank: 1																		
0001	linen service for High		0180521	0001	012-07618-09	09/05/17	05	006	3190	429	0000	000000	600	00	000		198.80	
0002	linen service for Middle		0180521	0002	012-07618-09	09/05/17	05	006	3190	429	0000	000000	500	00	000		198.80	
																	Check total:	\$397.60
Check: 105234 Type: W Date: 10/27/17 Vendor: CITY OF CLEVELAND Vendor#: 040220 Stat/Date: Bank: 1																		
0001	Water Usage for Elmwood S		0180239	0001	OCT 2017.	10/04/17	05	001	2720	452	0000	000000	100	00	007		347.31	
0002	Water Usage for Maple Lea		0180239	0002	OCT 2017.	10/04/17	05	001	2720	452	0000	000000	200	00	007		383.54	
0003	Water Usage for William F		0180239	0003	OCT 2017.	10/04/17	05	001	2720	452	0000	000000	400	00	007		530.67	
0004	Water Usage for Middle Sc		0180239	0004	OCT 2017.	10/04/17	05	001	2720	452	0000	000000	500	00	007		1,093.18	
0005	Water Usage for High Scho		0180239	0005	OCT 2017.	10/04/17	05	001	2720	452	0000	000000	600	00	007		3,673.18	
0006	Water Usage for Bus Garag		0180239	0006	OCT 2017.	10/04/17	05	001	2720	452	0000	000000	700	00	007		1,406.91	
0007	Water Usage for Administr		0180239	0007	OCT 2017.	10/04/17	05	001	2720	452	0000	000000	800	00	007		50.01	
0008	Water Usage for Garfield		0180239	0008	OCT 2017.	10/04/17	05	001	2720	452	0000	000000	706	00	007		17.80	
																	Check total:	\$7,502.60
Check: 105235 Type: W Date: 10/27/17 Vendor: CLEVELAND COCA-COLA Vendor#: 030384 Stat/Date: Bank: 1																		
0001	Beverage purchase for HS		0180515	0001	10300802-09	09/05/17	05	006	3120	560	0000	000000	600	00	000		2,044.00	
																	Check total:	\$2,044.00
Check: 105236 Type: W Date: 10/27/17 Vendor: DAIRYMENS/ Vendor#: 040073 Stat/Date: Bank: 1																		
0001	milk/juice for		0180520	0001	1704227	09/09/17	05	006	3120	560	0000	000000	500	00	000		680.65	
0002	milk/juice for		0180520	0001	1713703	09/16/17	05	006	3120	560	0000	000000	500	00	000		1,188.55	
0003	milk/juice for		0180520	0001	1723074	09/23/17	05	006	3120	560	0000	000000	500	00	000		1,086.75	
0004	milk/juice for		0180520	0001	1732752	09/30/17	05	006	3120	560	0000	000000	500	00	000		629.50	
0005	Milk for HS ELM WF Aug-De		0180526	0001	1704227	09/09/17	05	006	3120	560	0000	000000	600	00	000		1,037.90	
0006	Milk for HS ELM WF Aug-De		0180526	0001	1713703	09/16/17	05	006	3120	560	0000	000000	600	00	000		1,512.50	
0007	Milk for HS ELM WF Aug-De		0180526	0001	1723074	09/23/17	05	006	3120	560	0000	000000	600	00	000		1,646.80	
0008	Milk for HS ELM WF Aug-De		0180526	0001	1732752	09/30/17	05	006	3120	560	0000	000000	600	00	000		1,203.51	
																	Check total:	\$8,986.16

Date: 11/06/2017
 Time: 1:19 pm

GARFIELD HTS. BOARD OF EDUC.
 SORT BY ISSUE DATE
 CHECK DATES BETWEEN 10/01/2017 AND 10/31/2017
 WARRANT CHECKS

Page: 35
 (CHEKPY)

SEQ	DESCRIPTION	TRAN NUMBER	P.O. NUMBER	IT NO	INVOICE NUMBER	TRAN DATE	TI	FND	FUNC	OBJ	SCC	SUBJ	OU	IL	JOB	ITEM	AMOUNT
Check: 105237 Type: W Date: 10/27/17 Vendor: DOMINION ENERGY Vendor#: 050110 Stat/Date: Bank: 1																	
0001	Natural Gas Service - Elm	0180234	0001	OCT	2017	10/03/17	05	001	2720	453	0000	000000	100	00	007		42.22
0002	Natural Gas Service - Map	0180234	0002	OCT	2017	10/03/17	05	001	2720	453	0000	000000	200	00	007		52.29
0003	Natural Gas Service - Wil	0180234	0003	OCT	2017	10/03/17	05	001	2720	453	0000	000000	400	00	007		88.66
0004	Natural Gas Service - Mid	0180234	0004	OCT	2017	10/03/17	05	001	2720	453	0000	000000	500	00	007		110.71
0005	Natural Gas Service - Hig	0180234	0005	OCT	2017	10/03/17	05	001	2720	453	0000	000000	600	00	007		47.19
0006	Natural Gas Service - Bus	0180234	0006	OCT	2017	10/03/17	05	001	2720	453	0000	000000	700	00	007		32.88
0007	Natural Gas Service - 970	0180234	0007	OCT	2017	10/03/17	05	001	2720	453	0000	000000	706	00	007		31.52
0008	Natural Gas Service -	0180234	0008	OCT	2017	10/03/17	05	001	2720	453	0000	000000	800	00	007		46.53
Check total:																	
\$452.00																	
Check: 105238 Type: W Date: 10/27/17 Vendor: GORDON FOOD SERVICE Vendor#: 070448 Stat/Date: Bank: 1																	
ATTN: CREDIT DEPARTMENT																	
0001	Food purchase for HS ELM	0180524	0001	509090025-07		09/07/17	05	006	3120	560	0000	000000	600	00	000		33,481.68
0002	food for Middle/MapleLeaf	0180525	0001	509090017-09		09/05/17	05	006	3120	560	0000	000000	500	00	000		25,303.27
Check total:																	
\$58,784.95																	
Check: 105239 Type: W Date: 10/27/17 Vendor: JOSHEN PAPER & PACKAGING Vendor#: 100209 Stat/Date: Bank: 1																	
0001	Paper Product for HS ELM	0180513	0001	4062654		09/07/17	05	006	3120	560	0000	000000	600	00	000		704.54
0002	Paper Product for HS ELM	0180513	0001	4065285		09/11/17	05	006	3120	560	0000	000000	600	00	000		441.68
0003	Paper Product for HS ELM	0180513	0001	4069754		09/18/17	05	006	3120	560	0000	000000	600	00	000		683.97
0004	Paper Product for HS ELM	0180513	0001	4076078		09/26/17	05	006	3120	560	0000	000000	600	00	000		978.54
Check total:																	
\$2,808.73																	
Check: 105240 Type: W Date: 10/27/17 Vendor: N E O R S D Vendor#: 140295 Stat/Date: Bank: 1																	
0001	Elmwood Sewage Fees	0180256	0001	OCT	2017	10/11/17	05	001	2720	452	0000	000000	100	00	007		446.45
0002	Maple Leaf Sewage Fees	0180256	0002	OCT	2017	10/11/17	05	001	2720	452	0000	000000	200	00	007		555.97
0003	William Foster Sewage Fee	0180256	0003	OCT	2017	10/11/17	05	001	2720	452	0000	000000	400	00	007		771.74
0004	Middle School Sewage Fees	0180256	0004	OCT	2017	10/11/17	05	001	2720	452	0000	000000	500	00	007		1,783.31
0005	High School Sewage Fees	0180256	0005	OCT	2017	10/11/17	05	001	2720	452	0000	000000	600	00	007		5,763.36
0006	Bus Garage Sewage Fees	0180256	0006	OCT	2017	10/11/17	05	001	2720	452	0000	000000	700	00	007		2,253.96
0007	Administrate Building Sew	0180256	0007	OCT	2017	10/11/17	05	001	2720	452	0000	000000	800	00	007		141.10
0008	Garfield Blvd. Building S	0180256	0008	OCT	2017	10/11/17	05	001	2720	452	0000	000000	706	00	007		65.40
Check total:																	
\$11,781.29																	
Check: 105241 Type: W Date: 10/27/17 Vendor: NICKLES BAKERY Vendor#: 140329 Stat/Date: Bank: 1																	
0001	bread,rolls, buns for	0180518	0001	01-0273961-09		09/05/17	05	006	3120	560	0000	000000	500	00	000		334.22
0002	Bread order for HS ELM WF	0180523	0001	01-0135491-09		09/05/17	05	006	3120	560	0000	000000	600	00	000		187.44
0003	Bread order for HS ELM WF	0180523	0001	01-0135517-09		09/05/17	05	006	3120	560	0000	000000	600	00	000		236.95
Check total:																	
\$758.61																	
Check: 105242 Type: W Date: 10/27/17 Vendor: THE ILLUMINATING COMPANY Vendor#: 090140 Stat/Date: Bank: 1																	
0001	Electric Service - Elmwoo	0180249	0001	90006166099		10/02/17	05	001	2720	451	0000	000000	100	00	007		5,299.78
0002	Electric Service - Maple	0180249	0002	90006166099		10/02/17	05	001	2720	451	0000	000000	200	00	007		7,936.86
0003	Electric Service - Willia	0180249	0003	90006166099		10/02/17	05	001	2720	451	0000	000000	400	00	007		9,617.83

Date: 11/06/2017
 Time: 1:19 pm

GARFIELD HTS. BOARD OF EDUC.
 SORT BY ISSUE DATE
 CHECK DATES BETWEEN 10/01/2017 AND 10/31/2017
 WARRANT CHECKS

Page: 36
 (CHEKPY)

SEQ	DESCRIPTION	TRAN NUMBER	P.O. NUMBER	IT NO	INVOICE NUMBER	TRAN DATE	TI	FND	FUNC	OBJ	SCC	SUBJ	OU	IL	JOB	ITEM	AMOUNT
0004	Electric Service - Middle		0180249	0004	90006166099	10/02/17	05	001	2720	451	0000	000000	500	00	007		8,182.51
0005	Electric Service - High S		0180249	0005	90006166099	10/02/17	05	001	2720	451	0000	000000	600	00	007		57,163.48
0006	Electric Service - Elmwoo		0180249	0001	90006185111	10/13/17	05	001	2720	451	0000	000000	100	00	007		124.81
0007	Electric Service - Maple		0180249	0002	90006185111	10/13/17	05	001	2720	451	0000	000000	200	00	007		85.92
0008	Electric Service - Willia		0180249	0003	90006185111	10/13/17	05	001	2720	451	0000	000000	400	00	007		78.11
0009	Electric Service - Middle		0180249	0004	90006185111	10/13/17	05	001	2720	451	0000	000000	500	00	007		443.65
0010	Electric Service - High S		0180249	0005	90006185111	10/13/17	05	001	2720	451	0000	000000	600	00	007		404.84
0011	Electric Service - HS Sta		0180249	0009	90006185111	10/13/17	05	001	2720	451	0000	000000	915	00	007		1,130.26
0012	Electric Service - High S		0180249	0005	OCT 2017	10/20/17	05	001	2720	451	0000	000000	600	00	007		60.54
0013	Electric Service - Bus Ga		0180249	0006	OCT 2017	10/20/17	05	001	2720	451	0000	000000	700	00	007		202.35
0014	Electric Service - Garfie		0180249	0007	OCT 2017	10/20/17	05	001	2720	451	0000	000000	706	00	007		413.58
0015	Electric Service -		0180249	0008	OCT 2017	10/20/17	05	001	2720	451	0000	000000	800	00	007		1,089.35
0016	Electric Service MS Stadi		0180249	0010	OCT 2017	10/20/17	05	001	2720	451	0000	000000	918	00	007		60.54
Check total:																\$92,294.41	
Check: 022484 Type: W Date: 10/30/17 Vendor: BRITTANY COSTELLO Vendor#: 833052 Stat/Date: RECONCILED:10/31/17 Bank: 1																	
0001	Spousal Reimbursement		0180905	0001	COSTELLO1015	10/30/17	05	024	2510	856	9241	000000	000	00	000		62.50
Check total:																\$62.50	
Check: 022485 Type: W Date: 10/30/17 Vendor: BRYAN PETSCHKE Vendor#: 832447 Stat/Date: RECONCILED:10/31/17 Bank: 1																	
0001	Spousal Reimbursement		0180905	0001	PETSCHKE1017	10/30/17	05	024	2510	856	9241	000000	000	00	000		89.08
Check total:																\$89.08	
Check: 022486 Type: W Date: 10/30/17 Vendor: CHRISTY WALCOFF Vendor#: 030292 Stat/Date: RECONCILED:10/31/17 Bank: 1																	
0001	Spousal Reimbursement		0180905	0001	WALCOFF1015	10/30/17	05	024	2510	856	9241	000000	000	00	000		62.50
Check total:																\$62.50	
Check: 022487 Type: W Date: 10/30/17 Vendor: DARRELL COPELAND Vendor#: 833066 Stat/Date: RECONCILED:10/31/17 Bank: 1																	
0001	Spousal Reimbursement		0180905	0001	COPELAND0917	10/30/17	05	024	2510	856	9241	000000	000	00	000		125.00
0002	Spousal Reimbursement		0180905	0001	COPELAND1017	10/30/17	05	024	2510	856	9241	000000	000	00	000		125.00
Check total:																\$250.00	
Check: 022488 Type: W Date: 10/30/17 Vendor: JOSH BOURDREZ Vendor#: 830735 Stat/Date: Bank: 1																	
0001	Spousal Reimbursement		0180905	0001	BOURD1017	10/30/17	05	024	2510	856	9241	000000	000	00	000		80.00
Check total:																\$80.00	
Check: 022489 Type: W Date: 10/30/17 Vendor: KATIE SKOCDOPOLE Vendor#: 832866 Stat/Date: RECONCILED:10/31/17 Bank: 1																	
0001	Spousal Reimbursement		0180905	0001	SKOCD1017	10/30/17	05	024	2510	856	9241	000000	000	00	000		80.99
Check total:																\$80.99	
Check: 022490 Type: W Date: 10/30/17 Vendor: KEN CARDAMAN Vendor#: 110121 Stat/Date: RECONCILED:10/31/17 Bank: 1																	
0001	Spousal Reimbursement		0180905	0001	CARDAM1017	10/30/17	05	024	2510	856	9241	000000	000	00	000		93.14
Check total:																\$93.14	

Date: 11/06/2017
 Time: 1:19 pm

GARFIELD HTS. BOARD OF EDUC.
 SORT BY ISSUE DATE
 CHECK DATES BETWEEN 10/01/2017 AND 10/31/2017
 WARRANT CHECKS

Page: 37
 (CHEKPY)

SEQ	DESCRIPTION	TRAN NUMBER	P.O. NUMBER	IT NO	INVOICE NUMBER	TRAN DATE	TI	FND	FUNC	OBJ	SCC	SUBJ	OU	IL	JOB	ITEM	AMOUNT
Check: 022491 Type: W Date: 10/30/17 Vendor: LEAH KEEFE		Vendor#: 833067 Stat/Date: RECONCILED:10/31/17 Bank: 1															
0001	Spousal Reimbursement		0180905	0001	KEEFE0917	10/30/17	05	024	2510	856	9241	000000	000	00	000		90.00
0002	Spousal Reimbursement		0180905	0001	KEEFE1017	10/30/17	05	024	2510	856	9241	000000	000	00	000		90.00
Check total: \$180.00																	
Check: 022492 Type: W Date: 10/30/17 Vendor: MATTHEW MIHALYOV		Vendor#: 130081 Stat/Date: RECONCILED:10/31/17 Bank: 1															
0001	Spousal Reimbursement		0180905	0001	MIHALYOV1027	10/30/17	05	024	2510	856	9241	000000	000	00	000		62.50
Check total: \$62.50																	
Check: 022493 Type: W Date: 10/30/17 Vendor: ROSE ARPELLI		Vendor#: 832454 Stat/Date: RECONCILED:10/31/17 Bank: 1															
0001	Spousal Reimbursement		0180905	0001	ARPELLI0917	10/30/17	05	024	2510	856	9241	000000	000	00	000		12.36
0002	Spousal Reimbursement		0180905	0001	ARPELLI1017	10/30/17	05	024	2510	856	9241	000000	000	00	000		12.36
Check total: \$24.72																	
Check: 022494 Type: W Date: 10/30/17 Vendor: TIM SOBOCINSKI		Vendor#: 830861 Stat/Date: RECONCILED:10/31/17 Bank: 1															
0001	Spousal Reimbursement		0180905	0001	SOBO0917	10/30/17	05	024	2510	856	9241	000000	000	00	000		125.00
0002	Spousal Reimbursement		0180905	0001	SOBO1017	10/30/17	05	024	2510	856	9241	000000	000	00	000		125.00
Check total: \$250.00																	
Check: 022495 Type: W Date: 10/30/17 Vendor: ZIEL, MARLENE		Vendor#: 832540 Stat/Date: Bank: 1															
0001	Spousal Reimbursement		0180905	0001	ZIEL05171017	10/30/17	05	024	2510	856	9241	000000	000	00	000		666.00
Check total: \$666.00																	
Check: 105243 Type: W Date: 10/30/17 Vendor: DIVERSITY INITIATIVES, INC.		Vendor#: 832472 Stat/Date: RECONCILED:10/31/17 Bank:															
0001	Open P.O. for staff diver		0180935	0001	2017-018A	10/25/17	05	572	2213	412	9018	000000	000	00	000		5,325.00
Check total: \$5,325.00																	
Check: 105244 Type: W Date: 10/30/17 Vendor: OHIO SCHOOLS COUNCIL-GAS		Vendor#: 150173 Stat/Date: RECONCILED:10/31/17 Bank: 1															
0001	Level Billing Gas Program		0180308	0001	GAS0717-44040	10/09/17	05	001	2720	453	0000	000000	100	00	007		1,150.57
0002	Level Billing Gas Program		0180308	0002	GAS0717-44040	10/09/17	05	001	2720	453	0000	000000	200	00	007		1,643.68
0003	Level Billing Gas Program		0180308	0003	GAS0717-44040	10/09/17	05	001	2720	453	0000	000000	400	00	007		1,643.68
0004	Level Billing Gas Program		0180308	0004	GAS0717-44040	10/09/17	05	001	2720	453	0000	000000	500	00	007		2,958.61
0005	Level Billing Gas Program		0180308	0005	GAS0717-44040	10/09/17	05	001	2720	453	0000	000000	600	00	007		821.78
Check total: \$8,218.32																	
Check: 105245 Type: W Date: 10/31/17 Vendor: ADELMO'S ELECTRIC SEWER CLEANING, INC.		Vendor#: 832443 Stat/Date: Bank:															
0001	Repair storm sewer at Hig		0180372	0001	17-8020	08/29/17	05	034	2720	423	0000	000000	600	00	000		2,995.00
Check total: \$2,995.00																	
Check: 105246 Type: W Date: 10/31/17 Vendor: AMERICAN LEGACY PUBLISHING, INC.		Vendor#: 830607 Stat/Date: Bank:															
0001	Ohio Community Studies We		0180781	0001	0218516	10/02/17	05	401	3260	511	9619	000000	412	00	000		367.20

SCHEDULE OF INVESTMENTS

Schedule of Investments
October 2017

<u>FINANCIAL INSTITUTION</u>	<u>INVESTMENT TYPE</u>	<u>COST</u>	<u>MARKET VALUE</u>	<u>YIELD RATE</u>	<u>MATURITY DATE</u>
Citizens Bank	Public Super NOW	\$ 8,967.04	\$ 8,967.04	0.00	N/A
Citizens Bank	Municipal Money Market	\$ 82,034.46	\$ 82,034.46	0.00	N/A
Huntington	Money Mkt Sweep	\$ 88,050.73	\$ 88,050.73	0.00	N/A
PNC Bank	Business Perf Money Market	\$ 4,037.12	\$ 4,037.12	0.15	N/A
Red Tree Investment	Money Mkt Fund	\$ 9,113.28	\$ 9,113.28	0.00	N/A
Red Tree Investment	Agency Note	\$ 69,930.00	\$ 69,869.24	1.02	30-Apr-18
Red Tree Investment	Agency Note	\$ 90,000.00	\$ 89,711.28	1.00	27-Jul-18
Red Tree Investment	Agency Note	\$ 90,000.00	\$ 89,573.58	1.30	24-May-19
Red Tree Investment	Agency Note	\$ 94,672.25	\$ 93,821.43	1.00	19-Jul-19
Red Tree Investment	Agency Note	\$ 90,000.00	\$ 88,855.83	1.42	27-Jul-20
Red Tree Investment	Agency Note	\$ 100,000.00	\$ 97,578.10	1.50	28-Aug-20
Red Tree Investment	Certificate of Deposit	\$ 135,000.00	\$ 135,069.52	1.56	22-Oct-18
Red Tree Investment	Certificate of Deposit	\$ 99,700.00	\$ 100,863.90	2.07	13-Oct-20
Red Tree Investment	Certificate of Deposit	\$ 109,890.00	\$ 110,444.95	2.27	28-Oct-17
Red Tree Investment	Certificate of Deposit	\$ 75,000.00	\$ 73,864.50	1.76	17-Jun-21
Red Tree Investment	Commercial Paper	\$ 172,952.50	\$ 173,143.25	1.24	16-May-18
Red Tree Investment	Commercial Paper	\$ 246,887.50	\$ 246,947.50	1.58	22-Jun-18
Red Tree Investment	Accrued Interest	\$ -	\$ 248.23		
STAROhio	State Pool	\$ 6,300,740.21	\$ 6,300,740.21	1.02	N/A

Total Investment Amount

\$ 7,866,975.09	\$ 7,862,934.15
------------------------	------------------------

	<u>Cost</u>	<u>Market Value</u>	<u>Percentage of</u>
	<u>Totals by Type</u>	<u>Totals by Type</u>	<u>Portfolio</u>
Money Mkt/NOW/Checking	\$ 188,165.51	\$ 188,165.51	2.39%
Certificate of Deposits	419,590.00	420,242.87	5.33%
Agency Notes*	534,602.25	529,409.46	6.80%
Business Perf Money Market	4,037.12	4,037.12	0.05%
Commercial Paper	419,840.00	420,090.75	5.34%
Accrued Interest	-	248.23	
State Pool	6,300,740.21	6,300,740.21	80.09%
	\$ 7,866,975.09	\$ 7,862,934.15	100.00%

1. Agency Notes consist of Federal Home Loan Bank and Mtg Assoc.
2. Certificates of Deposit include Firstbank of Puerto Rico, PR, Comenity Capital Bank, UT, American Express Centurion Bank, Capital One Nation Assoc.
4. Toyota Motor Credit

SM2

DATE: 11/06/2017
 TIME: 13:35:00

FORM SM-2
 OHIO DEPARTMENT OF EDUCATION - OFFICE OF SCHOOL MANAGEMENT ASSISTANCE
 ANNUAL SPENDING PLAN (CURRENT OPERATION - GENERAL FUND ONLY - O.R.C. 5705.391)

PAGE: 1

SCHOOL DISTRICT: GARFIELD HTS. BOARD OF EDUC. IRN # 044040 COUNTY: CUYAHOGA FISCAL YEAR: 2018 MONTH: 10
 OCTOBER 2017

	MONTHLY ESTIMATE	MONTHLY ACTUAL	MONTHLY DIFFERENCE	FISCAL YTD ESTIMATE	FISCAL YTD ACTUAL	FISCAL YTD DIFFERENCE
REVENUES						
01.010 General Property (Real Estate)	0	0	0	6,879,800	6,879,764	36-
01.020 Tangible Personal Property Tax	0	0	0	385,500	385,498	2-
01.030 Income Tax	0	0	0	0	0	0
01.035 Unrestricted Grants-in-Aid	1,805,000	2,291,273	486,273	7,325,900	7,813,280	487,380
01.040 Restricted Grants-in-Aid	114,000	77,152	36,848-	422,191	385,542	36,649-
01.045 Restricted Grants-in-Aid - SFSF	0	0	0	0	0	0
01.050 Property Tax Allocation	1,341,841	1,341,841	0	1,341,841	1,341,841	0
01.060 All Other Operating Revenue	250,000	202,950	47,050-	604,580	557,576	47,004-
01.070 Total Revenue	3,510,841	3,913,216	402,375	16,959,812	17,363,501	403,689
OTHER FINANCING SOURCES						
02.010 Proceeds from Sale of Notes	0	0	0	0	0	0
02.020 State Emergency Loans & Advancements (Approved)	0	0	0	0	0	0
02.040 Operating Transfers-In	0	0	0	0	0	0
02.050 Advances-In	0	0	0	170,312	170,312	0
02.060 All Other Financing Sources	0	0	0	0	0	0
02.070 Total Other Financing Sources	0	0	0	170,312	170,312	0
02.080 Total Revenues and Other Financing Sources	3,510,841	3,913,216	402,375	17,130,124	17,533,813	403,689
EXPENDITURES						
03.010 Personal Services	1,870,000	1,870,309	309	8,147,350	8,147,650	300
03.020 Employees' Retirement/Insurance Benefits	761,000	761,174	174	2,883,310	2,883,456	146
03.030 Purchased Services	750,000	636,893	113,107-	3,030,461	2,917,561	112,900-
03.040 Supplies and Materials	50,000	50,327	327	401,930	401,943	13
03.050 Capital Outlay	0	3,549	3,549	168,490	356,288	187,798
03.060 Intergovernmental	0	0	0	0	0	0
04.010 Debt Service: All Principal (Historical)	0	0	0	0	0	0
04.020 Debt Service: Principal - Notes	0	0	0	0	0	0
04.030 Debt Service: Principal - State Loans	0	0	0	0	0	0
04.040 Debt Service: Principal - State Advancements	0	0	0	0	0	0
04.050 Debt Service: Principal - HB 264 Loans	0	0	0	0	0	0
04.055 Debt Service: Principal - Other	133,514	133,514	0	133,514	133,514	0
04.060 Debt Service: Interest and Fiscal Charges	0	0	0	0	0	0
04.300 Other Objects	20,000	19,287	713-	256,980	256,591	389-
04.500 Total Expenditures	3,584,514	3,475,053	109,461-	15,022,035	15,097,003	74,968
OTHER FINANCING USES						
05.010 Operating Transfers - Out	0	0	0	0	0	0
05.020 Advances - Out	0	0	0	0	0	0
05.030 All Other Financing Uses	0	0	0	0	0	0
05.040 Total Other Financing Uses	0	0	0	0	0	0
05.050 Total Expenditure and Other Financing Uses	3,584,514	3,475,053	109,461-	15,022,035	15,097,003	74,968
06.010 Excess Rev & Oth Financing Sources over(under) Exp &	73,673-	438,163	511,836	2,108,089	2,436,810	328,721
07.010 Beginning Cash Balance	3,032,732	2,849,617	183,115-	850,970	850,970	0
07.020 Ending Cash Balance	2,959,059	3,287,780	328,721	2,959,059	3,287,780	328,721
08.010 Outstanding Encumbrances	0	1,871,813	1,871,813	0	1,871,813	1,871,813

TRANSFERS AND ADVANCES

Employee Leaves

<i>Last</i>	<i>First</i>	<i>Bldg</i>	<i>Type</i>	<i>Date Out</i>	<i>Date Back</i>	<i>Notes</i>
Angello	Carolyn	WF	Medical LOA	12/09/17	12/08/18	Intermittent Medical LOA (FMLA)
Bolton	Renaë	CO	Unpaid LOA	11/17/17	11/20/17	Unpaid LOA
Breen	Catherine	HS	Paid Admin. LOA	10/25/17	11/01/17	Paid Administrative LOA
Dunbrook	Carla	EW	Medical LOA	10/21/17	TBD	Medical LOA (FMLA)
Halusker	Amy	ML	Maternity LOA	05/13/18	05/25/18	Maternity LOA (FMLA)
Henderson	Vonda	ML	Unpaid LOA	10/19/17	10/30/17	Unpaid LOA
Kazik	David	ML	Medical LOA	10/16/17	11/27/17	Medical LOA
Knight	April	ML	Medical LOA	11/14/16	11/24/17	Medical LOA before Maternity LOA begins
Kovach	Kyle	HS	Medical LOA	10/10/17	10/09/18	Intermittent Medical LOA for Family Member (FMLA)
Marshall	Mary Ann	WF	Medical LOA	11/20/17	02/12/18	Intermittent Medical LOA for Family Member (FMLA)
Sobocinski	Timothy	CO	Paternity LOA	11/01/17	11/17/17	Paternity LOA (FMLA)
Studnicka	Darlene	EW	Medical LOA	10/06/17	11/06/17	Medical LOA
Walcoff	Christy	HS	Medical LOA	12/08/17	12/22/17	Medical LOA (FMLA)

Administrators' Contracts FY 18

Administrator Board Exhibit					
Last Name	First Name	Position	Contract	Expires	FY 18 Salary
Abraham	Gwen	Principal - EW	3	2020	\$ 89,812.68
Bailey	Shari	Director of Technology	3	2019	\$ 106,819.15
Bradford	LeMon	Principal - LC	3	2019	\$ 79,474.53
Continenza	Randy	Director C & I	1	2018	\$ 52,217.92
Dupree	Gordon	Director Pupil Services	1	2018	\$ 90,585.83
Fording	Michael	Assistant Principal - HS	3	2020	\$ 79,077.79
Freilino	Mike	Assistant Principal - MS	3	2018	\$ 68,623.75
Hager	Tammy	Principal - HS	3	2020	\$ 114,450.89
Hanke	Christopher	Director-- HR	3	2018	\$ 108,837.40
Harris	Mary	Assistant Principal -- Elm.	3	2018	\$ 68,623.75
Kosta	Elisabetta	Assistant Principal - WF	3	2019	\$ 81,415.03
Morris	Brynn	Assistant Principal - HS	3	2019	\$ 82,000.00
Patton	Sean	Principal	3	2019	\$ 93,823.96
Pillets	Brooke	Director of S.E.	3	2019	\$ 100,472.32
Reisland	Lee Ann	Curriculum Coordinator	3	2019	\$ 94,325.63
Rutkowski	Meghan	Special Education Coordinator	3	2018	\$ 79,427.25
Sauer	Christopher	Assistant Principal - MS	3	2020	\$ 84,050.00
Townsend	John	Assistant Principal - HS	3	2018	\$ 73,902.50
Tranter	Leslie	Assistant Principal - MS	3	2018	\$ 82,999.38

Exempt Salaries-- Exhibit				
<i>Last Name</i>	<i>First Name</i>	<i>Title</i>	<i>FY 18 Step</i>	<i>FY 18 Salary</i>
Armelli	Rosemary	Administrative Assistant -- central office	13	\$52,109
Baranowski	Carol	Administrative Assistant -- central office	20	\$64,049
Bolton	Jerelene	Secretary--central office	2	\$14,613
Golenski	Kathleen	Administrative Assistant -- central office	26	\$69,988
Hanus	Kathleen	Supervisor of Fiscal Operations/Payroll	22	\$84,759
Hegedus	Betty	Registrar	21	\$68,187
Johnson	Jontae'	EMIS Supervisor	4	\$39,724
Khol	Laurie	Secretary-- central office	28	\$62,829
Kosuda	James	Network Manager	24	\$75,942
Lanza	Sherry	EMIS Assistant	6	\$39,313
Miller	Lisa	Administrative Assistant to Superintendent	22	\$71,583
Murillo-Espinoza	Maria	Fiscal Office Assistant	2	\$34,075
Palmer	David	Supervisor -- Maintenance	20	\$67,474
Schieferstein	Debbie	Administrative Assistant -- central office	21	\$65,971
Stary	Teresa	Secretary-- central office	5	\$38,101

Qualified Staff -- Salary Exhibit				
<i>Last Name</i>	<i>First Name</i>	<i>Title</i>	<i>FY 18 Step</i>	<i>FY 18 Salary</i>
Dillon	Douglas	GHCS Officer	8	\$45,200
Graham	Romie	Linkage Coordinator	4	\$46,599
Huncharek	Jennifer	Social Worker	19	\$52,457
Johnson	William	Youth Development Specialist	7	\$37,494
Johnson	Demetrius	Intervention Manager	6	\$36,698
Lewis	Reginald	Intervention Manager	2	\$32,721
Mather	Chris	RESA Coordinator	3	\$14,898
Meder	Donald	Intervention Manager	8	\$39,148
Owens-Hodge	Toya	Social Worker	14	\$61,254
Ruggiero	Michael	Alternative Program Manager	15	\$64,567
Schillero	David	Intervention Manager	2	\$32,721
Thomas	Ashley	Intervention Manager	1	\$31,926
Wessel	Henry	Intervention Manager	3	\$34,312
Williams	Doretta	Intervention Manager	11	\$41,921
Wilson	Robert	Intervention Manager	4	\$35,108
Wilson	Gina	Intervention Manager	4	\$35,108

Proposed Classified Sub Rate Schedule (hourly)		
<i>Classification</i>	<i>Sub Rate</i>	<i>Differential</i>
Office Secretary	\$10	\$1.50
1B Building Assistant	\$8.30	\$0.15
2B Instructional Assistant	\$10	\$1
3B Special Ed Attendant	\$12	\$2
General Cafeteria	\$10.00	\$1.85
Housekeeping	\$9	Same
Vehicle Driver	\$12	\$2
Bus Drivers	\$15	\$3
Maintenance/ Custodian	\$12	Same
Assistant Custodian	\$10	Same

Certified Sub Rate Proposal	
<i>Amount of Days worked</i>	<i>Rate</i>
Days 1-10	\$95
Days 11-30	\$100
Days 31-60	\$110
Day 61 +	B+0, Benefits

Certified Sub Rate Proposal	
<i>Amount of Days worked</i>	<i>Rate</i>
Days 1-10	\$95
Days 11-30	\$100
Days 31-60	\$110
Day 61 +	B+0, Benefits

Administrative Benefits Package Effective December 1, 2017

This benefit summary reflects all modifications to Administrative employee benefits effective December 1, 2017 for all administrative personnel.

Benefit Schedule:

<u>Longevity Increment:</u>	Begins on completion of 10 – 14 years	\$ 800.00
	Begins on completion of 15 – 19 years	\$1,000.00
	Begins on completion of 20 – 24 years	\$1,200.00
	Begins on completion of 25 or More Years	\$1,500.00

Doctorate Stipend: \$1,500.00

Reimbursement - College Credit:

Educational or leadership courses approved by the Superintendent and completed by the administrator with a college transcript, will be eligible for up to \$200.00 reimbursement per course completed, with a maximum of five courses per school year.

Health Insurance:

Eligibility: All employees who are scheduled to regularly work more than thirty (30) hours per week shall be eligible for Board paid health insurance.

The Board shall contract for and provide health insurance which includes major medical, prescription drug, dental, and vision, family or single, as appropriate, for eligible Exempt employees. The Board will offer the following plans and all eligible employees will pay the following monthly contributions:

MMOH SuperMed Garfield Plan

Current benefits as of 12/1/17 – Per schedule attached.

The monthly contribution shall equal 10% of the cost of the Board's premium and shall be payroll deducted equally over 26 pays.

MMOH SuperMed IDEAL Plan

Current benefits as of 12/1/17 – Per schedule attached.

The monthly contribution shall equal 10% of the cost of the Board's premium and shall be payroll deducted equally over 26 pays.

MMOH Minimum Value Plan

Current benefits as of 12/1/17 – Per schedule attached.

The monthly contribution shall equal 0% of the cost of the Board's premium.

Non-Participation

Incentive:

Those eligible employees who elect not to participate in the District's health insurance program shall be eligible for a lump sum payment of \$2,000 if eligible for the family plan and \$900 if eligible for single coverage. In the event a husband and wife are both employed by the Board and one elects family health care coverage:

- A. The other spouse shall not be entitled to this lump sum payment.
- B. The other spouse shall not be entitled to elect single or family health care coverage unless family coverage is required for one of the other spouse's dependent or any other demonstrated reason mutually agreed upon by the Board and Union.

Spousal Insurance:

If an employee's spouse is eligible to participate, as a current employee or retiree in group health insurance and/or prescription drug insurance, sponsored by his/her employer or any public retirement plan, the spouse must enroll in such employer (or public retirement plan) sponsored group insurance coverage(s) OR in lieu of the employer (or public retirement plan) sponsored group insurance coverage(s) may secure his/her own health insurance policy.

This requirement does not apply to any spouse who is also employed by the Garfield Heights City Schools. This requirement also does not apply to any spouse who works less than thirty (30) hours per week AND is required to pay more than fifty percent (50%) of the single premium to participate in his/her employer's group health insurance coverage and/or prescription drug insurance coverage. This requirement also does not apply to any spouse who is a retiree under a public retirement plan and enrolled in Medicare coverage.

This requirement also does not apply to any spouse if a Health Savings Account (“HSA”) is the only option that spouse has for health insurance.

Upon the spouse’s enrollment in such employer (or public retirement plan) sponsored group insurance coverage, that coverage will become the primary payor of benefits and the coverage sponsored by the Board of Education will become the secondary payor of benefits. If an employee’s spouse enrolls in his/her employer’s health insurance, the employee shall not be required to enroll in single coverage offered by the Board of Education, provided the employee is eligible for family coverage.

Any spouse who fails to enroll in any group insurance coverage sponsored by his/her employer or any public retirement plan, as required, shall be ineligible for benefits under such group insurance coverage sponsored by the Board of Education.

Every employee whose spouse participate in the Board of Education’s group health insurance coverage and/ or prescription drug insurance coverage shall complete and submit to the Board of Education, upon request, a written certification verifying whether his/her spouse is eligible to participate in group health insurance coverage and/or prescription drug insurance coverage sponsored by the spouse’s employer or any public retirement plan. If any employee fails to complete and submit the certification form by the required date, such employee’s spouse will be removed immediately from all health and prescription drug insurance coverages sponsored by the Board of Education. Additional documentation may be required.

If an employee submits false information or fails to timely advise the Board of Education of his/her spouse’s eligibility for employer (or public retirement plan) sponsored group health insurance and/or prescription drug insurance, and such false information or such failure by the employee results in the Board of Education Plan providing benefits to which the employee’s spouse is not entitled, the employee will be personally liable to the Board of Education Plan for the reimbursement of benefits and expenses, including attorney’s fees and costs, incurred by the Board of Education plan.

Any amount to be reimbursed may be deducted from the benefits to which the employee would otherwise be entitled. In addition, your spouse will be removed immediately from all health and prescription drug insurance coverages sponsored by the Board of Education. Any employee submitting false information will be subject to disciplinary action, up to and including termination.

For employee spouses who are enrolled in their employer's insurance plan or in lieu of enrolling in their employer's insurance plan secured his/her own individual health insurance policy, the Board agrees to reimburse the employees up to One Hundred Twenty-Five Dollars (\$125.00) per month of actual documented premium costs paid by the employee's spouse to his/her employer for single and prescription drug medical coverage. Such reimbursement shall be tax-free. Requests for reimbursement with attached documentation demonstrated that such premium contributions were made shall be submitted to the Treasurer's office in a timely manner.

Group Life Insurance:

A term life policy in the amount per individual employee contract.

Sick Leave:

Sick leave may be accumulated at the rate of fifteen (15) days per year to a maximum of 260 days.

Personal Leave:

A maximum of three (3) days of personal leave, with pay, every school year (non-cumulative). The personal leave is only applicable to emergency personal reasons and said days shall not be deducted from sick leave. Any unused personal days as of June 30th will be rolled into sick leave.

Severance Pay:

To be eligible for severance pay, the administrator must have at least five (5) years' service with the Garfield Heights City Schools. Severance pay is granted only to those administrators who reach retirement age while actively employed by the Board, and have been granted retirement by the State Teachers Retirement System.

Employee will be paid for one-half (1/2) of their sick leave balance at the time of retirement up to a maximum of one hundred fifty-four (154) days at the per diem rate at the time of retirement.

Half payment will be made in one lump sum within 60 days after proof of retirement, and half deferred severance pay to July 1st after the calendar year in which he/she retires. For those who retire with 25 days or less severance, the option of receiving severance in one lump sum will be available.

Retired rehired employees do not qualify for severance.

Holidays:

Labor Day, Thanksgiving Day, Day after Thanksgiving, Workday before Christmas, Christmas Day, New Year's Day, Martin Luther King Day, President's Day, Good Friday, Memorial Day and Independence Day (July 4th). Holidays are only applicable to those administrators who have a 260-day contract.

Attendance Incentive:

Any full-time administrator who has used no personal leave or sick leave or leave without pay during a quarter shall receive a merit incentive for attendance of \$100 for that quarter.

Garfield Heights Health Benefit Plan Medical Mutual

Garfield Heights Health Benefit Plan Medical Mutual		
	SuperMed Garfield Plan	
Benefits	Network	Non-Network Facility Charges
Preventative Services		
Routine EKG, Chest X-ray, Complete Blood Count, Comprehensive Metabolic Panel, Urinalysis (Age 9 and over, one each per benefit period)	100%	70% after deductible
Routine Prostate Specific Antigen (PSA)	100%	70% after deductible
Routine Colonoscopy/Sigmoidoscopy (Age 50 and over)	100%	70% after deductible
Outpatient Services		
Surgical Services		
Diagnostic Services	90% after deductible	70% after deductible
Physical Therapy & Occupational Therapy - Facility and Professional	90% after deductible	70% after deductible (20 visits per benefit period combined with Chiropractic Therapy. Additional visits subject to medical review.)
Chiropractic Therapy - Professional Only	90% after deductible	70% after deductible (20 visits per benefit period combined with Chiropractic Therapy. Additional visits subject to medical review.)
Speech Therapy - Facility and Professional	90% after deductible	70% after deductible (20 visits per benefit period)
Cardiac Rehabilitation	90% after deductible	70% after deductible
Emergency use of an Emergency Room ⁴	\$100 copay, then 90%	\$100 copay, then 70%
Non-Emergency use of an Emergency Room ⁵	\$100 copay, then 90%	\$100 copay, then 70%
Inpatient Facility		
Semi-Private Room and Board	90% after deductible	70% after deductible
Maternity	90% after deductible	70% after deductible
Skilled Nursing Facility	90% after deductible	70% after deductible (120 days per benefit period)

Garfield Heights Health Benefit Plan Medical Mutual

Garfield Heights Health Benefit Plan Medical Mutual		
	SuperMed Garfield Plan	
Benefits	Network	Non-Network Facility Charges
Additional Services		
Allergy Testing and Treatments	\$20	70% after deductible
Ambulance	90% after deductible	70% after deductible
Durable Medical Equipment	90% after deductible	70% after deductible
Additional Services - cont'd.		
Eduation and Training	90% after deductible	70% after deductible
Home Healthcare	90% after deductible	70% after deductible
Hospice	90% after deductible	70% after deductible
Organ Transplants	90% after deductible	70% after deductible
Private Duty Nursing	90% after deductible	70% after deductible
Mental Health and Substance Abuse - Federal		
Inpatient Mental Health and Substance Abuse Services	Benefits paid are based on corresponding medical benefits	
Outpatient Mental Health and Substance Abuse Services		
Prescription Drug		
Retail Program with Oral Contraceptive Coverage	SuperMedScript ^{6,7} Retail Program - 30 Day Supply - for the intitial filling and up to two refills of a prescription drug \$10 Generic / \$20 Formulary Brand / \$40 Non Formulary Brand SuperMedScript ^{6,7} Retail Program - 30 Day Supply - after the third retail fill of a prescription drug \$20 Generic / \$40 Formulary Brand / \$80 Non Formulary Brand	
Mail Order Program with Oral Contraceptive Coverage - 90 Day Supply	SuperMed Script ^{6,7} Home Delivery Program \$25 Generic / \$50 Formulary Brand / \$100 Non Formulary Brand	

Garfield Heights Health Benefit Plan Medical Mutual		
	SuperMed Garfield Plan	
Benefits	Network	Non-Network Facility Charges
Prescription Drug Step Therapy	Yes	

Deductible expenses incurred for services by a non-authorized provider will also apply to the authorized deductible out-of-pocket limits. Deductible expenses incurred for services by an authorized provider will only apply to the authorized deductible out-of-pocket limits.

Benefits will be determined based on Medical Mutual's medical and administrative policies and procedures.

This document is only a partial listing of benefits. This is not a contract of insurance. No person other than an officer of Medical Mutual may agree, orally or in writing, to change the benefits listed here. The contract or certificate will contain the complete listing of covered services.

In certain instances, Medical Mutual's payment may not equal the percentage listed above. However, the covered person's coinsurance will always be based on the lesser of the provider's billed charges or Medical Mutual's negotiated rate with the provider.

¹Maximum family deductible. Member deductible is the same as single deductible.

²The office visit copay applies to the cost of the office visit only.

³Preventive services include evidence-based services that have a rating of "A" or "B" in the United States Preventive Services Task Force, routine immunizations and other screenings, as provided for in the Patient

⁴Copay waived if admitted. The copay applies to room charges only. All other covered charges are not subject to deductible.

⁵Copay waived if admitted. The copay applies to room charges only. All other covered charges are subject to deductible and coinsurance.

⁶SuperMed Script contains the following:

-Generic Incentive: If the physician requests a brand-name drug and a generic equivalent exists, the member pays the generic copayment PLUS the difference between the cost of the generic drug and the brand-

-Home Delivery Incentive: When a member chooses to fill a prescription a fourth time at a retail pharmacy within 180 days, the member will pay twice the normal retail copayment.

⁷Coverage includes Preventive Medications, in accordance with Federal Law. Rx Selections and Coverage Management.

Garfield Heights Health Benefit Plan

SuperMed Ideal Plan		
Benefits	Network	Non-Network Facility Charges
Benefit Period	January 1 st through December 31 st	
Dependent Age Limit	26; Removal upon End of Month	
Working Spouse Language	Applies to Medical & Prescription Drug	
3 Month Deductible Carryover	Does Apply	
Pre-Existing Condition Waiting Period (does not apply to members under the age of	Does Not Apply	
Blood Pint Deductible	0 pints	
Lifetime Maximum	Unlimited	
Benefit Period Deductible - Single / Family ¹	\$250 / \$500	\$500 / \$1,000
Coinsurance	90%	70%
Coinsurance Out-of-Pocket Maximum (Excluding Deductible) - Single / Family	\$1,250 / \$2,500	\$2,500 / \$5,000
Maximum Out-of-Pocket Including Deductible Single / Family	\$1,500 / \$3,000	\$3,000 / \$6,000
Physician/Office Services		
Office Visit (Illness/Injury) ²	\$20 copay, then 100%	70% after deductible
Specialist Office Visit ²	\$20 copay, then 100%	70% after deductible
Urgent Care Office Visit ²	\$20 copay, then 100%	70% after deductible
All Immunizations	90% after deductible	70% after deductible
Preventative Services		
Preventive Services, in accordance with state and federal law ³	100%	70% after deductible
Routine Physical Exam (Age 21 and older; one exam per benefit period) ²	100%	70% after deductible
Well Child Care Services (Birth to age 21) ²	100%	70% after deductible (Including Exam, Routine Vision and Routine Hearing Exams and Well Child Care Immunizations)
Well Child Care Laboratory Tests (Birth to age 21)	100%	70% after deductible
Routine Mammogram (One per benefit	100%	70% after deductible
Routine Pap Test (One per benefit period)	100%	70% after deductible

Garfield Heights Health Benefit Plan		
	SuperMed Ideal Plan	
Benefits	Network	Non-Network Facility Charges
Preventative Services		
Routine EKG, Chest X-ray, Complete Blood Count, Comprehensive Metabolic Panel, Urinalysis (Age 9 and over, one each per benefit period)	100%	70% after deductible
Routine Prostate Specific Antigen (PSA)	100%	70% after deductible
Routine Colonoscopy/Sigmoidoscopy (Age 50 and over)	100%	70% after deductible
Outpatient Services		
Surgical Services	90% after deductible	70% after deductible
Diagnostic Services	90% after deductible	70% after deductible
Physical Therapy & Occupational Therapy - Facility and Professional	90% after deductible	70% after deductible
	(Combined 40 visits per benefit period)	
Chiropractic Therapy - Professional Only	90% after deductible	70% after deductible
	(12 visits per benefit period)	
Speech Therapy - Facility and Professional	90% after deductible	70% after deductible
	(20 visits per benefit period)	
Cardiac Rehabilitation	90% after deductible	70% after deductible
Emergency use of an Emergency Room ⁴	\$50 copay, then 90%	\$50 copay, then 70%
Non-Emergency use of an Emergency Room ⁵	\$100 copay, then 90%	\$100 copay, then 70%
Inpatient Facility		
Semi-Private Room and Board	90% after deductible	70% after deductible
Maternity	90% after deductible	70% after deductible
Skilled Nursing Facility	90% after deductible	70% after deductible
	120 days per benefit period)	
Additional Services		
Allergy Testing and Treatments	\$20 copay, then 100%	70% after deductible
Ambulance	90% after deductible	70% after deductible
Durable Medical Equipment	90% after deductible	70% after deductible

Garfield Heights Health Benefit Plan		
	SuperMed Ideal Plan	
Benefits	Network	Non-Network Facility Charges
Additional Services - cont'd.		
Education and Training	90% after deductible	70% after deductible
Home Healthcare	90% after deductible	70% after deductible (120 visits per benefit period)
Hospice	90% after deductible	70% after deductible
Organ Transplants	90% after deductible	70% after deductible
Private Duty Nursing	90% after deductible	70% after deductible
Mental Health and Substance Abuse -		
Inpatient Mental Health and Substance Abuse Services	Benefits paid are based on corresponding medical benefits	
Outpatient Mental Health and Substance Abuse Services		
Prescription Drug		
Retail Program with Oral Contraceptive Coverage	^{6.7} Retail Program - 30 Day Supply - for the initial filling and up to two refills of a prescription drug \$10 Generic / \$20 Formulary Brand / \$40 Non Formulary Brand ^{6.7} Retail Program - 30 Day Supply - after the third retail fill of a prescription drug \$20 Generic / \$40 Formulary Brand / \$80 Non Formulary Brand	
Mail Order Program with Oral Contraceptive Coverage - 90 Day Supply	^{6.7} Home Delivery Program; \$25 Generic / \$50 Formulary Brand / \$100 Non Formulary Brand	

Deductible expenses incurred for services by a non-authorized provider will also apply to the authorized deductible out-of-pocket limits. Deductible expenses incurred for services by an authorized provider will only apply to the authorized deductible out-of-pocket limits.
 Benefits will be determined based on Medical Mutual's medical and administrative policies and procedures.

Garfield Heights Health Benefit Plan		
	SuperMed Ideal Plan	
Benefits	Network	Non-Network Facility Charges

This document is only a partial listing of benefits. This is not a contract of insurance. The contract or certificate will contain the complete listing of covered services.

In certain instances, Medical Mutual's payment may not equal the percentage listed above. However, the covered person's coinsurance will always be based on the lesser of the provider's billed charges or Medical Mutual's negotiated rate with the provider.

¹Maximum family deductible. Member deductible is the same as single deductible.

²The office visit copay applies to the cost of the office visit only.

³Preventive services include evidence-based services that have a rating of "A" or "B" in the United States Preventive Services Task Force, routine immunizations and other screenings, as provided

⁴Copay waived if admitted. The copay applies to room charges only. All other covered charges are not subject to deductible.

⁴Copay waived if admitted. The copay applies to room charges only. All other covered charges are subject to deductible and coinsurance.

⁶ Contains the following:

-Generic Incentive: If the physician requests a brand-name drug and a generic equivalent exists, the member pays the generic copayment PLUS the difference between the cost of the

-Home Delivery Incentive: When a member chooses to fill a prescription a fourth time at a retail pharmacy within 180 days, the member will pay twice the normal retail copayment.

⁷Coverage includes Preventive Medications, in accordance with Federal Law. Rx Selections and Coverage Management.

Garfield Heights Health Benefit Plan

Minimum Value Plan		
Benefits	Network	Non-Network Facility Charges
Benefit Period	January 1 st through December 31 st	
Dependent Age Limit	26; Removal upon End of Month	
Working Spouse Language	Applies to Medical & Prescription Drug	
3 Month Deductible Carryover	Does Apply	
Pre-Existing Condition Waiting Period (does not apply to members under the age of	Does Not Apply	
Blood Pint Deductible	2 pints	
Lifetime Maximum	Unlimited	
Benefit Period Deductible - Single / Family ¹	\$6,350 / \$12,700	\$12,700 / \$25,400
Coinsurance	100%	70%
Coinsurance Out-of-Pocket Maximum (Excluding Deductible) - Single / Family	\$0	\$1,000 / \$2,000
Maximum Out-of-Pocket Including Deductible Single / Family	\$6,350 / \$12,700	\$13,700 / \$27,400
Physician/Office Services		
Office Visit (Illness/Injury) ²	100% after deductible	70% after deductible
Specialist Office Visit ²	100% after deductible	70% after deductible
Urgent Care Office Visit ²	100% after deductible	70% after deductible
All Immunizations	100%	70% after deductible
Preventative Services		
Preventive Services, in accordance with state and federal law ³	100%	70% after deductible
Routine Physical Exam (Age 21 and older; one exam per benefit period) ²	100%	70% after deductible
Well Child Care Services (Birth to age 21) ²	100%	70% after deductible (Including Exam, Routine Vision and Routine Hearing Exams and Well Child Care Immunizations)
Well Child Care Laboratory Tests (Birth to age 21)	100%	70% after deductible
Routine Mammogram (One per benefit	100%	70% after deductible
Routine Pap Test (One per benefit period)	100%	70% after deductible

Garfield Heights Health Benefit Plan		
	Minimum Value Plan	
Benefits	Network	Non-Network Facility Charges
Preventative Services		
Routine EKG, Chest X-ray, Complete Blood Count, Comprehensive Metabolic Panel, Urinalysis (Age 9 and over, one each per benefit period)	100%	70% after deductible
Routine Prostate Specific Antigen (PSA)	100%	70% after deductible
Routine Colonoscopy/Sigmoidoscopy (Age 50 and over)	100%	70% after deductible
Outpatient Services		
Surgical Services	100% after deductible	70% after deductible
Diagnostic Services	100% after deductible	70% after deductible
Physical Therapy & Occupational Therapy - Facility and Professional	100% after deductible	70% after deductible (10 visits per benefit period, then medical review)
Chiropractic Therapy - Professional Only	100% after deductible	70% after deductible (10 visits per benefit period, then medical review)
Speech Therapy - Facility and Professional	100% after deductible	70% after deductible (10 visits per benefit period, then medical review)
Cardiac Rehabilitation	100% after deductible	70% after deductible
Emergency use of an Emergency Room ⁴	100% after deductible	100% after deductible
Non-Emergency use of an Emergency Room ⁵	100% after deductible	70% after deductible
Inpatient Facility		
Semi-Private Room and Board	100% after deductible	70% after deductible
Maternity	100% after deductible	70% after deductible
Skilled Nursing Facility	100% after deductible	70% after deductible
Additional Services		
Allergy Testing and Treatments	100% after deductible	70% after deductible
Ambulance	100% after deductible	70% after deductible
Durable Medical Equipment	100% after deductible	70% after deductible

Garfield Heights Health Benefit Plan		
	Minimum Value Plan	
Benefits	Network	Non-Network Facility Charges
Additional Services - cont'd.		
Eduation and Training	100% after deductible	70% after deductible
Home Healthcare	100% after deductible	70% after deductible
Hospice	100% after deductible	70% after deductible
Organ Transplants	100% after deductible	70% after deductible
Private Duty Nursing	100% after deductible	70% after deductible
Mental Health and Substance Abuse -		
Inpatient Mental Health and Substance Abuse Services	Benefits paid are based on corresponding medical benefits	
Outpatient Mental Health and Substance Abuse Services		
Prescription Drug		
Retail Program with Oral Contraceptive Coverage	^{6,7} Retail Program - 30 Day Supply - for the intitial filling and up to three refills of a prescription drug; \$20 Generic / \$45 Formulary Brand / \$75 Non Formulary Brand ^{6,7} Retail Program - 30 Day Supply - after the third retail fill of a prescription drug; \$40 Generic / \$90 Formulary Brand / \$150 Non Formulary Brand	
Mail Order Program with Oral Contraceptive Coverage - 90 Day Supply	^{6,7} Home Delivery Program; \$40 Generic / \$90 Formulary Brand / \$150 Non Formulary Brand	

Deductible expenses incurred for services by a non-authorized provider will also apply to the authorized deductible out-of-pocket limits. Deductible expenses incurred for services by an authorized provider will only apply to the authorized deductible out-of-pocket limits. Benefits will be determined based on Medical Mutual's medical and administrative policies and procedures.

Garfield Heights Health Benefit Plan		
	Minimum Value Plan	
Benefits	Network	Non-Network Facility Charges

This document is only a partial listing of benefits. This is not a contract of insurance. The contract or certificate will contain the complete listing of covered services.

In certain instances, Medical Mutual's payment may not equal the percentage listed above. However, the covered person's coinsurance will always be based on the lesser of the provider's billed charges or Medical Mutual's negotiated rate with the provider.

¹Maximum family deductible. Member deductible is the same as single deductible.

²The office visit copay applies to the cost of the office visit only.

³Preventive services include evidence-based services that have a rating of "A" or "B" in the United States Preventive Services Task Force, routine immunizations and other screenings, as provided

⁴Copay waived if admitted. The copay applies to room charges only. All other covered charges are not subject to deductible.

⁵Copay waived if admitted. The copay applies to room charges only. All other covered charges are subject to deductible and coinsurance.

⁶ Contains the following:

-Generic Incentive: If the physician requests a brand-name drug and a generic equivalent exists, the member pays the generic copayment PLUS the difference between the cost of the

-Home Delivery Incentive: When a member chooses to fill a prescription a fourth time at a retail pharmacy within 180 days, the member will pay twice the normal retail copayment.

⁷Coverage includes Preventive Medications, in accordance with Federal Law. Rx Selections and Coverage Management.

Exempt Benefits Package Effective December 1, 2017

This benefit summary reflects all modifications to Exempt employee benefits effective December 1, 2017 for all exempt personnel.

<u>Longevity Increment:</u>	Begins on Completion of 10 – 14 years	\$ 730
	Begins on Completion of 15 – 19 years	\$ 850
	Begins on Completion of 20 – 24 years	\$1,090
	Begins on Completion of 25 or More Years	\$1,450

Health Insurance: Eligibility: All employees who are scheduled to regularly work more than thirty (30) hours per week shall be eligible for Board paid health insurance.

The Board shall contract for and provide health insurance which includes major medical, prescription drug, dental, and vision, family or single, as appropriate, for eligible Exempt employees. The Board will offer the following plans and all eligible employees will pay the following monthly contributions:

MMOH SuperMed Garfield Plan

Current benefits as of 12/1/17 – Per schedule attached.

The monthly contribution shall equal 10% of the cost of the Board's premium and shall be payroll deducted equally over 26 pays.

MMOH SuperMed IDEAL Plan

Current benefits as of 12/1/17 – Per schedule attached.

The monthly contribution shall equal 10% of the cost of the Board's premium and shall be payroll deducted equally over 26 pays.

MMOH Minimum Value Plan

Current benefits as of 12/1/17 – Per schedule attached.

The monthly contribution shall equal 0% of the cost of the Board's premium.

**Non-Participation
Incentive:**

Those eligible employees who elect not to participate in the District's health insurance program shall be eligible for a lump sum payment of \$2,000 if eligible for the family plan and \$900 if eligible for single coverage. In the event a husband and wife are both employed by the Board and one elects family health care coverage:

- A. The other spouse shall not be entitled to this lump sum payment.
- B. The other spouse shall not be entitled to elect single or family health care coverage unless family coverage is required for one of the other spouse's dependent or any other demonstrated reason mutually agreed upon by the Board and Union.

Spousal Insurance:

If an employee's spouse is eligible to participate, as a current employee or retiree in group health insurance and/or prescription drug insurance, sponsored by his/her employer or any public retirement plan, the spouse must enroll in such employer (or public retirement plan) sponsored group insurance coverage(s) OR in lieu of the employer (or public retirement plan) sponsored group insurance coverage(s) may secure his/her own health insurance policy.

This requirement does not apply to any spouse who is also employed by the Garfield Heights City Schools. This requirement also does not apply to any spouse who works less than thirty (30) hours per week AND is required to pay more than fifty percent (50%) of the single premium to participate in his/her employer's group health insurance coverage and/or prescription drug insurance coverage. This requirement also does not apply to any spouse who is a retiree under a public retirement plan and enrolled in Medicare coverage. This requirement also does not apply to any spouse if a Health Savings Account ("HSA") is the only option that spouse has for health insurance.

Upon the spouse's enrollment in such employer (or public retirement plan) sponsored group insurance coverage, that coverage will become the primary payor of benefits and the coverage sponsored by the Board of Education will become the secondary payor of benefits. If an employee's spouse enrolls in his/her employer's health insurance, the employee shall not be required to enroll in single coverage offered by the Board of Education, provided the employee is eligible for family coverage.

Any spouse who fails to enroll in any group insurance coverage sponsored by his/her employer or any public retirement plan, as required, shall be ineligible for benefits under such group insurance coverage sponsored by the Board of Education.

Every employee whose spouse participate in the Board of Education's group health insurance coverage and/ or prescription drug insurance coverage shall complete and submit to the Board of Education, upon request, a written certification verifying whether his/her spouse is eligible to participate in group health insurance coverage and/or prescription drug insurance coverage sponsored by the spouse's employer or any public retirement plan. If any employee fails to complete and submit the certification form by the required date, such employee's spouse will be removed immediately from all health and prescription drug insurance coverages sponsored by the Board of Education. Additional documentation may be required.

If an employee submits false information or fails to timely advise the Board of Education of his/her spouse's eligibility for employer (or public retirement plan) sponsored group health insurance and/or prescription drug insurance, and such false information or such failure by the employee results in the Board of Education Plan providing benefits to which the employee's spouse is not entitled, the employee will be personally liable to the Board of Education Plan for the reimbursement of benefits and expenses, including attorney's fees and costs, incurred by the Board of Education plan. Any amount to be reimbursed may be deducted from the benefits to which the employee would otherwise be entitled. In addition, your spouse will be removed immediately from all health and prescription drug insurance coverages sponsored by the Board of Education. Any employee submitting false information will be subject to disciplinary action, up to and including termination.

For employee spouses who are enrolled in their employer's insurance plan or in lieu of enrolling in their employer's insurance plan secured his/her own individual health insurance policy, the Board agrees to reimburse the employees up to One Hundred Twenty-Five Dollars (\$125.00) per month of actual documented premium costs paid by the employee's spouse to his/her employer for single and prescription drug medical coverage. Such reimbursement shall be tax-free.

Requests for reimbursement with attached documentation demonstrated that such premium contributions were made shall be submitted to the Treasurer's office in a timely manner.

Group Life Insurance:

A term life policy in the amount of \$50,000.00.

Sick Leave:

Sick leave may be accumulated at the rate of fifteen (15) days per year to a maximum of 260 days.

Personal Leave:

A maximum of three (3) days of personal leave, with pay, every school year (non-cumulative). The personal leave is only applicable to emergency personal reasons and said days shall not be deducted from sick leave. Any unused personal days as of June 30th will be rolled into sick leave.

Severance Pay:

To be eligible for severance pay, an employee must have at least five (5) years' service with the Garfield Heights City Schools and has been granted retirement according to SERS requirements, or have at least twenty (20) years of service in Garfield Heights Schools.

Half payment will be made in one lump sum within (60) days after proof of retirement, and half deferred severance pay to July 1st after the calendar year in which he/she retires. For those who retire with 25 days or less severance, the option of receiving severance in on lump sum will be available.

Severance pay shall be based on the employee's daily rate; including all supplemental contracts and allowance in effect at the time of leaving.

Employees will be paid severance based upon one-half (1/2) of their unused sick leave at the time of retirement/resignation, and meets the requirements up to a maximum of one hundred fifty-four (154) days.

Employees payment for sick leave on this basis shall be considered to eliminate all sick leave credit accrued but unused by the employee at the time payment is made.

In the case of death of an employee, any earned by unused regular pay, compensatory time, vacation time, and severance pay shall be paid to his/her spouse, if no spouse exists, to his/her estate.

Holidays:

Labor Day, Thanksgiving Day, Day after Thanksgiving, Workday before Christmas, Christmas Day, New Year's Day, Martin Luther King Day, President's Day, Good Friday, Memorial Day and Independence Day (July 4th)

Attendance Incentive:

Any full-time Exempt Employee who has used no personal leave, sick leave or leave without pay during a quarter shall receive a merit incentive for attendance of \$100 for that quarter.

Garfield Heights Health Benefit Plan Medical Mutual		
	SuperMed Garfield Plan	
Benefits	Network	Non-Network Facility Charges
Preventative Services		
Routine EKG, Chest X-ray, Complete Blood Count, Comprehensive Metabolic Panel, Urinalysis (Age 9 and over, one each per benefit period)	100%	70% after deductible
Routine Prostate Specific Antigen (PSA)	100%	70% after deductible
Routine Colonoscopy/Sigmoidoscopy (Age 50 and over)	100%	70% after deductible
Outpatient Services		
Surgical Services	90% after deductible	70% after deductible
Diagnostic Services	90% after deductible	70% after deductible
Physical Therapy & Occupational Therapy - Facility and Professional	90% after deductible	70% after deductible (20 visits per benefit period combined with Chiropractic Therapy. Additional visits subject to medical review.)
Chiropractic Therapy - Professional Only	90% after deductible	70% after deductible (20 visits per benefit period combined with Chiropractic Therapy. Additional visits subject to medical review.)
Speech Therapy - Facility and Professional	90% after deductible	70% after deductible (20 visits per benefit period)
Cardiac Rehabilitation	90% after deductible	70% after deductible
Emergency use of an Emergency Room ⁴	\$100 copay, then 90%	\$100 copay, then 70%
Non-Emergency use of an Emergency Room ⁵	\$100 copay, then 90%	\$100 copay, then 70%
Inpatient Facility		
Semi-Private Room and Board	90% after deductible	70% after deductible
Maternity	90% after deductible	70% after deductible
Skilled Nursing Facility	90% after deductible	70% after deductible (120 days per benefit period)

Garfield Heights Health Benefit Plan Medical Mutual		
	SuperMed Garfield Plan	
Benefits	Network	Non-Network Facility Charges
Additional Services		
Allergy Testing and Treatments	\$20	70% after deductible
Ambulance	90% after deductible	70% after deductible
Durable Medical Equipment	90% after deductible	70% after deductible
Additional Services - cont'd.		
Education and Training	90% after deductible	70% after deductible
Home Healthcare	90% after deductible	70% after deductible
Hospice	90% after deductible	70% after deductible
Organ Transplants	90% after deductible	70% after deductible
Private Duty Nursing	90% after deductible	70% after deductible
Mental Health and Substance Abuse - Federal		
Inpatient Mental Health and Substance Abuse Services	Benefits paid are based on corresponding medical benefits	
Outpatient Mental Health and Substance Abuse Services		
Prescription Drug		
Retail Program with Oral Contraceptive Coverage	SuperMedScript ^{6,7} Retail Program - 30 Day Supply - for the initial filling and up to two refills of a prescription drug \$10 Generic / \$20 Formulary Brand / \$40 Non Formulary Brand SuperMedScript ^{6,7} Retail Program - 30 Day Supply - after the third retail fill of a prescription drug \$20 Generic / \$40 Formulary Brand / \$80 Non Formulary Brand	
Mail Order Program with Oral Contraceptive Coverage - 90 Day Supply	SuperMed Script ^{6,7} Home Delivery Program \$25 Generic / \$50 Formulary Brand / \$100 Non Formulary Brand	

Garfield Heights Health Benefit Plan Medical Mutual		
	SuperMed Garfield Plan	
Benefits	Network	Non-Network Facility Charges
Prescription Drug Step Therapy	Yes	

Deductible expenses incurred for services by a non-authorized provider will also apply to the authorized deductible out-of-pocket limits. Deductible expenses incurred for services by an authorized provider will only apply to the authorized deductible out-of-pocket limits.

Benefits will be determined based on Medical Mutual's medical and administrative policies and procedures.

This document is only a partial listing of benefits. This is not a contract of insurance. No person other than an officer of Medical Mutual may agree, orally or in writing, to change the benefits listed here. The contract or certificate will contain the complete listing of covered services.

In certain instances, Medical Mutual's payment may not equal the percentage listed above. However, the covered person's coinsurance will always be based on the lesser of the provider's billed charges or Medical Mutual's negotiated rate with the provider.

¹Maximum family deductible. Member deductible is the same as single deductible.

²The office visit copay applies to the cost of the office visit only.

³Preventive services include evidence-based services that have a rating of "A" or "B" in the United States Preventive Services Task Force, routine immunizations and other screenings, as provided for in the Patient

⁴Copay waived if admitted. The copay applies to room charges only. All other covered charges are not subject to deductible.

⁵Copay waived if admitted. The copay applies to room charges only. All other covered charges are subject to deductible and coinsurance.

⁶SuperMed Script contains the following:

-Generic Incentive: If the physician requests a brand-name drug and a generic equivalent exists, the member pays the generic copayment PLUS the difference between the cost of the generic drug and the brand-

-Home Delivery Incentive: When a member chooses to fill a prescription a fourth time at a retail pharmacy within 180 days, the member will pay twice the normal retail copayment.

⁷Coverage includes Preventive Medications, in accordance with Federal Law. Rx Selections and Coverage Management.

Garfield Heights Health Benefit Plan		
	SuperMed Ideal Plan	
Benefits	Network	Non-Network Facility Charges
Benefit Period	January 1 st through December 31 st	
Dependent Age Limit	26; Removal upon End of Month	
Working Spouse Language	Applies to Medical & Prescription Drug	
3 Month Deductible Carryover	Does Apply	
Pre-Existing Condition Waiting Period (does not apply to members under the age of	Does Not Apply	
Blood Pint Deductible	0 pints	
Lifetime Maximum	Unlimited	
Benefit Period Deductible - Single / Family ¹	\$250 / \$500	\$500 / \$1,000
Coinsurance	90%	70%
Coinsurance Out-of-Pocket Maximum (Excluding Deductible) - Single / Family	\$1,250 / \$2,500	\$2,500 / \$5,000
Maximum Out-of-Pocket Including Deductible Single / Family	\$1,500 / \$3,000	\$3,000 / \$6,000
Physician/Office Services		
Office Visit (Illness/Injury) ²	\$20 copay, then 100%	70% after deductible
Specialist Office Visit ²	\$20 copay, then 100%	70% after deductible
Urgent Care Office Visit ²	\$20 copay, then 100%	70% after deductible
All Immunizations	90% after deductible	70% after deductible
Preventative Services		
Preventive Services, in accordance with state and federal law ³	100%	70% after deductible
Routine Physical Exam (Age 21 and older; one exam per benefit period) ²	100%	70% after deductible
Well Child Care Services (Birth to age 21) ²	100%	70% after deductible (Including Exam, Routine Vision and Routine Hearing Exams and Well Child Care Immunizations)
Well Child Care Laboratory Tests (Birth to age 21)	100%	70% after deductible
Routine Mammogram (One per benefit	100%	70% after deductible
Routine Pap Test (One per benefit period)	100%	70% after deductible

Garfield Heights Health Benefit Plan		
	SuperMed Ideal Plan	
Benefits	Network	Non-Network Facility Charges
Preventative Services		
Routine EKG, Chest X-ray, Complete Blood Count, Comprehensive Metabolic Panel, Urinalysis (Age 9 and over, one each per benefit period)	100%	70% after deductible
Routine Prostate Specific Antigen (PSA)	100%	70% after deductible
Routine Colonoscopy/Sigmoidoscopy (Age 50 and over)	100%	70% after deductible
Outpatient Services		
Surgical Services	90% after deductible	70% after deductible
Diagnostic Services	90% after deductible	70% after deductible
Physical Therapy & Occupational Therapy - Facility and Professional	90% after deductible	70% after deductible
	(Combined 40 visits per benefit period)	
Chiropractic Therapy - Professional Only	90% after deductible	70% after deductible
	(12 visits per benefit period)	
Speech Therapy - Facility and Professional	90% after deductible	70% after deductible
	(20 visits per benefit period)	
Cardiac Rehabilitation	90% after deductible	70% after deductible
Emergency use of an Emergency Room ⁴	\$50 copay, then 90%	\$50 copay, then 70%
Non-Emergency use of an Emergency Room ⁵	\$100 copay, then 90%	\$100 copay, then 70%
Inpatient Facility		
Semi-Private Room and Board	90% after deductible	70% after deductible
Maternity	90% after deductible	70% after deductible
Skilled Nursing Facility	90% after deductible	70% after deductible
	120 days per benefit period)	
Additional Services		
Allergy Testing and Treatments	\$20 copay, then 100%	70% after deductible
Ambulance	90% after deductible	70% after deductible
Durable Medical Equipment	90% after deductible	70% after deductible

Garfield Heights Health Benefit Plan		
	SuperMed Ideal Plan	
Benefits	Network	Non-Network Facility Charges
Additional Services - cont'd.		
Eduation and Training	90% after deductible	70% after deductible
Home Healthcare	90% after deductible	70% after deductible (120 visits per benefit period)
Hospice	90% after deductible	70% after deductible
Organ Transplants	90% after deductible	70% after deductible
Private Duty Nursing	90% after deductible	70% after deductible
Mental Health and Substance Abuse -		
Inpatient Mental Health and Substance Abuse Services	Benefits paid are based on corresponding medical benefits	
Outpatient Mental Health and Substance Abuse Services		
Prescription Drug		
Retail Program with Oral Contraceptive Coverage	^{6.7} Retail Program - 30 Day Supply - for the initial filling and up to two refills of a prescription drug \$10 Generic / \$20 Formulary Brand / \$40 Non Formulary Brand ^{6.7} Retail Program - 30 Day Supply - after the third retail fill of a prescription drug \$20 Generic / \$40 Formulary Brand / \$80 Non Formulary Brand	
Mail Order Program with Oral Contraceptive Coverage - 90 Day Supply	^{6.7} Home Delivery Program; \$25 Generic / \$50 Formulary Brand / \$100 Non Formulary Brand	

Deductible expenses incurred for services by a non-authorized provider will also apply to the authorized deductible out-of-pocket limits. Deductible expenses incurred for services by an authorized provider will only apply to the authorized deductible out-of-pocket limits. Benefits will be determined based on Medical Mutual's medical and administrative policies and procedures.

Garfield Heights Health Benefit Plan		
	SuperMed Ideal Plan	
Benefits	Network	Non-Network Facility Charges

This document is only a partial listing of benefits. This is not a contract of insurance. The contract or certificate will contain the complete listing of covered services.

In certain instances, Medical Mutual's payment may not equal the percentage listed above. However, the covered person's coinsurance will always be based on the lesser of the provider's billed charges or Medical Mutual's negotiated rate with the provider.

¹Maximum family deductible. Member deductible is the same as single deductible.

²The office visit copay applies to the cost of the office visit only.

³Preventive services include evidence-based services that have a rating of "A" or "B" in the United States Preventive Services Task Force, routine immunizations and other screenings, as provided

⁴Copay waived if admitted. The copay applies to room charges only. All other covered charges are not subject to deductible.

⁵Copay waived if admitted. The copay applies to room charges only. All other covered charges are subject to deductible and coinsurance.

⁶ Contains the following:

-Generic Incentive: If the physician requests a brand-name drug and a generic equivalent exists, the member pays the generic copayment PLUS the difference between the cost of the

-Home Delivery Incentive: When a member chooses to fill a prescription a fourth time at a retail pharmacy within 180 days, the member will pay twice the normal retail copayment.

⁷Coverage includes Preventive Medications, in accordance with Federal Law. Rx Selections and Coverage Management.

Garfield Heights Health Benefit Plan

Minimum Value Plan		
Benefits	Network	Non-Network Facility Charges
Benefit Period	January 1 st through December 31 st	
Dependent Age Limit	26; Removal upon End of Month	
Working Spouse Language	Applies to Medical & Prescription Drug	
3 Month Deductible Carryover	Does Apply	
Pre-Existing Condition Waiting Period (does not apply to members under the age of	Does Not Apply	
Blood Pint Deductible	2 pints	
Lifetime Maximum	Unlimited	
Benefit Period Deductible - Single / Family ¹	\$6,350 / \$12,700	\$12,700 / \$25,400
Coinsurance	100%	70%
Coinsurance Out-of-Pocket Maximum (Excluding Deductible) - Single / Family	\$0	\$1,000 / \$2,000
Maximum Out-of-Pocket Including Deductible Single / Family	\$6,350 / \$12,700	\$13,700 / \$27,400
Physician/Office Services		
Office Visit (Illness/Injury) ²	100% after deductible	70% after deductible
Specialist Office Visit ²	100% after deductible	70% after deductible
Urgent Care Office Visit ²	100% after deductible	70% after deductible
All Immunizations	100%	70% after deductible
Preventative Services		
Preventive Services, in accordance with state and federal law ³	100%	70% after deductible
Routine Physical Exam (Age 21 and older; one exam per benefit period) ²	100%	70% after deductible
Well Child Care Services (Birth to age 21) ²	100%	70% after deductible
	(Including Exam, Routine Vision and Routine Hearing Exams and Well Child Care Immunizations)	
Well Child Care Laboratory Tests (Birth to age 21)	100%	70% after deductible
Routine Mammogram (One per benefit	100%	70% after deductible
Routine Pap Test (One per benefit period)	100%	70% after deductible

Garfield Heights Health Benefit Plan		
	Minimum Value Plan	
Benefits	Network	Non-Network Facility Charges
Preventative Services		
Routine EKG, Chest X-ray, Complete Blood Count, Comprehensive Metabolic Panel, Urinalysis (Age 9 and over, one each per benefit period)	100%	70% after deductible
Routine Prostate Specific Antigen (PSA)	100%	70% after deductible
Routine Colonoscopy/Sigmoidoscopy (Age 50 and over)	100%	70% after deductible
Outpatient Services		
Surgical Services	100% after deductible	70% after deductible
Diagnostic Services	100% after deductible	70% after deductible
Physical Therapy & Occupational Therapy - Facility and Professional	100% after deductible	70% after deductible
	(10 visits per benefit period, then medical review)	
Chiropractic Therapy - Professional Only	100% after deductible	70% after deductible
	(10 visits per benefit period, then medical review)	
Speech Therapy - Facility and Professional	100% after deductible	70% after deductible
	(10 visits per benefit period, then medical review)	
Cardiac Rehabilitation	100% after deductible	70% after deductible
Emergency use of an Emergency Room ⁴	100% after deductible	100% after deductible
Non-Emergency use of an Emergency Room ⁵	100% after deductible	70% after deductible
Inpatient Facility		
Semi-Private Room and Board	100% after deductible	70% after deductible
Maternity	100% after deductible	70% after deductible
Skilled Nursing Facility	100% after deductible	70% after deductible
Additional Services		
Allergy Testing and Treatments	100% after deductible	70% after deductible
Ambulance	100% after deductible	70% after deductible
Durable Medical Equipment	100% after deductible	70% after deductible

Garfield Heights Health Benefit Plan		
	Minimum Value Plan	
Benefits	Network	Non-Network Facility Charges
Additional Services - cont'd.		
Eduation and Training	100% after deductible	70% after deductible
Home Healthcare	100% after deductible	70% after deductible
Hospice	100% after deductible	70% after deductible
Organ Transplants	100% after deductible	70% after deductible
Private Duty Nursing	100% after deductible	70% after deductible
Mental Health and Substance Abuse -		
Inpatient Mental Health and Substance Abuse Services	Benefits paid are based on corresponding medical benefits	
Outpatient Mental Health and Substance Abuse Services		
Prescription Drug		
Retail Program with Oral Contraceptive Coverage	^{6.7} Retail Program - 30 Day Supply - for the initial filling and up to three refills of a prescription drug; \$20 Generic / \$45 Formulary Brand / \$75 Non Formulary Brand ^{6.7} Retail Program - 30 Day Supply - after the third retail fill of a prescription drug; \$40 Generic / \$90 Formulary Brand / \$150 Non Formulary Brand	
Mail Order Program with Oral Contraceptive Coverage - 90 Day Supply	^{6.7} Home Delivery Program; \$40 Generic / \$90 Formulary Brand / \$150 Non Formulary Brand	

Deductible expenses incurred for services by a non-authorized provider will also apply to the authorized deductible out-of-pocket limits. Deductible expenses incurred for services by an authorized provider will only apply to the authorized deductible out-of-pocket limits. Benefits will be determined based on Medical Mutual's medical and administrative policies and procedures.

Garfield Heights Health Benefit Plan		
	Minimum Value Plan	
Benefits	Network	Non-Network Facility Charges

This document is only a partial listing of benefits. This is not a contract of insurance. The contract or certificate will contain the complete listing of covered services.

In certain instances, Medical Mutual's payment may not equal the percentage listed above. However, the covered person's coinsurance will always be based on the lesser of the provider's billed charges or Medical Mutual's negotiated rate with the provider.

¹Maximum family deductible. Member deductible is the same as single deductible.

²The office visit copay applies to the cost of the office visit only.

³Preventive services include evidence-based services that have a rating of "A" or "B" in the United States Preventive Services Task Force, routine immunizations and other screenings, as provided

⁴Copay waived if admitted. The copay applies to room charges only. All other covered charges are not subject to deductible.

⁵Copay waived if admitted. The copay applies to room charges only. All other covered charges are subject to deductible and coinsurance.

⁶ Contains the following:

-Generic Incentive: If the physician requests a brand-name drug and a generic equivalent exists, the member pays the generic copayment PLUS the difference between the cost of the

-Home Delivery Incentive: When a member chooses to fill a prescription a fourth time at a retail pharmacy within 180 days, the member will pay twice the normal retail copayment.

⁷Coverage includes Preventive Medications, in accordance with Federal Law. Rx Selections and Coverage Management.

Qualified Benefits Package Effective December 1, 2017

This benefit summary reflects all modifications to Qualified employee benefits effective December 1, 2017 for all qualified personnel.

<u>Longevity Increment:</u>	Begins on Completion of 10 – 14 years	\$ 730
	Begins on Completion of 15 – 19 years	\$ 850
	Begins on Completion of 20 – 24 years	\$1,090
	Begins on Completion of 25 or More Years	\$1,450

Health Insurance: Eligibility: All employees who are scheduled to regularly work more than thirty (30) hours per week shall be eligible for Board paid health insurance.

The Board shall contract for and provide health insurance which includes major medical, prescription drug, dental, and vision, family or single, as appropriate, for eligible Exempt employees. The Board will offer the following plans and all eligible employees will pay the following monthly contributions:

MMOH SuperMed Garfield Plan

Current benefits as of 12/1/17 – Per schedule attached.

The monthly contribution shall equal 10% of the cost of the Board's premium and shall be payroll deducted equally over 26 pays.

MMOH SuperMed IDEAL Plan

Current benefits as of 12/1/17 – Per schedule attached.

The monthly contribution shall equal 10% of the cost of the Board's premium and shall be payroll deducted equally over 26 pays.

MMOH Minimum Value Plan

Current benefits as of 12/1/17 – Per schedule attached.

The monthly contribution shall equal 0% of the cost of the Board's premium.

**Non-Participation
Incentive:**

Those eligible employees who elect not to participate in the District's health insurance program shall be eligible for a lump sum payment of \$2,000 if eligible for the family plan and \$900 if eligible for single coverage. In the event a husband and wife are both employed by the Board and one elects family health care coverage:

- A. The other spouse shall not be entitled to this lump sum payment.
- B. The other spouse shall not be entitled to elect single or family health care coverage unless family coverage is required for one of the other spouse's dependent or any other demonstrated reason mutually agreed upon by the Board and Union.

Spousal Insurance:

If an employee's spouse is eligible to participate, as a current employee or retiree in group health insurance and/or prescription drug insurance, sponsored by his/her employer or any public retirement plan, the spouse must enroll in such employer (or public retirement plan) sponsored group insurance coverage(s) OR in lieu of the employer (or public retirement plan) sponsored group insurance coverage(s) may secure his/her own health insurance policy.

This requirement does not apply to any spouse who is also employed by the Garfield Heights City Schools. This requirement also does not apply to any spouse who works less than thirty (30) hours per week AND is required to pay more than fifty percent (50%) of the single premium to participate in his/her employer's group health insurance coverage and/or prescription drug insurance coverage. This requirement also does not apply to any spouse who is a retiree under a public retirement plan and enrolled in Medicare coverage. This requirement also does not apply to any spouse if a Health Savings Account ("HSA") is the only option that spouse has for health insurance.

Upon the spouse's enrollment in such employer (or public retirement plan) sponsored group insurance coverage, that coverage will become the primary payor of benefits and the coverage sponsored by the Board of Education will become the secondary payor of benefits. If an employee's spouse enrolls in his/her employer's health insurance, the employee shall not be required to enroll in single coverage offered by the Board of Education, provided the employee is eligible for family coverage.

Any spouse who fails to enroll in any group insurance coverage sponsored by his/her employer or any public retirement plan, as required, shall be ineligible for benefits under such group insurance coverage sponsored by the Board of Education.

Every employee whose spouse participate in the Board of Education's group health insurance coverage and/ or prescription drug insurance coverage shall complete and submit to the Board of Education, upon request, a written certification verifying whether his/her spouse is eligible to participate in group health insurance coverage and/or prescription drug insurance coverage sponsored by the spouse's employer or any public retirement plan. If any employee fails to complete and submit the certification form by the required date, such employee's spouse will be removed immediately from all health and prescription drug insurance coverages sponsored by the Board of Education. Additional documentation may be required.

If an employee submits false information or fails to timely advise the Board of Education of his/her spouse's eligibility for employer (or public retirement plan) sponsored group health insurance and/or prescription drug insurance, and such false information or such failure by the employee results in the Board of Education Plan providing benefits to which the employee's spouse is not entitled, the employee will be personally liable to the Board of Education Plan for the reimbursement of benefits and expenses, including attorney's fees and costs, incurred by the Board of Education plan. Any amount to be reimbursed may be deducted from the benefits to which the employee would otherwise be entitled. In addition, your spouse will be removed immediately from all health and prescription drug insurance coverages sponsored by the Board of Education. Any employee submitting false information will be subject to disciplinary action, up to and including termination.

For employee spouses who are enrolled in their employer's insurance plan or in lieu of enrolling in their employer's insurance plan secured his/her own individual health insurance policy, the Board agrees to reimburse the employees up to One Hundred Twenty-Five Dollars (\$125.00) per month of actual documented premium costs paid by the employee's spouse to his/her employer for single and prescription drug medical coverage. Such reimbursement shall be tax-free.

Requests for reimbursement with attached documentation demonstrated that such premium contributions were made shall be submitted to the Treasurer's office in a timely manner.

Group Life Insurance:

A term life policy in the amount of \$50,000.00.

Sick Leave:

Sick leave may be accumulated at the rate of fifteen (15) days per year to a maximum of 260 days.

Personal Leave:

A maximum of three (3) days of personal leave, with pay, every school year (non-cumulative). The personal leave is only applicable to emergency personal reasons and said days shall not be deducted from sick leave. Any unused personal days as of June 30th will be rolled into sick leave.

Severance Pay:

To be eligible for severance pay, an employee must have at least five (5) years' service with the Garfield Heights City Schools and has been granted retirement according to SERS/STRS requirements, or have at least twenty (20) years of service in Garfield Heights Schools.

Half payment will be made in one lump sum within (60) days after proof of retirement, and half deferred severance pay to July 1st after the calendar year in which he/she retires. For those who retire with 25 days or less severance, the option of receiving severance in on lump sum will be available.

Severance pay shall be based on the employee's daily rate; including all supplemental contracts and allowance in effect at the time of leaving.

Employees will be paid severance based upon one-half (1/2) of their unused sick leave at the time of retirement/resignation, and meets the requirements up to a maximum of one hundred fifty-four (154) days.

Employees payment for sick leave on this basis shall be considered to eliminate all sick leave credit accrued but unused by the employee at the time payment is made.

In the case of death of an employee, any earned by unused regular pay, compensatory time, vacation time, and severance pay shall be paid to his/her spouse, if no spouse exists, to his/her estate.

Attendance Incentive:

Any full-time qualified employee who has used no personal leave or sick leave or leave without pay during a quarter shall receive a merit incentive for attendance of \$100 for that quarter.

Garfield Heights Health Benefit Plan Medical Mutual		
	SuperMed Garfield Plan	
Benefits	Network	Non-Network Facility Charges
Preventative Services		
Routine EKG, Chest X-ray, Complete Blood Count, Comprehensive Metabolic Panel, Urinalysis (Age 9 and over, one each per benefit period)	100%	70% after deductible
Routine Prostate Specific Antigen (PSA)	100%	70% after deductible
Routine Colonoscopy/Sigmoidoscopy (Age 50 and over)	100%	70% after deductible
Outpatient Services		
Surgical Services	90% after deductible	70% after deductible
Diagnostic Services	90% after deductible	70% after deductible
Physical Therapy & Occupational Therapy - Facility and Professional	90% after deductible	70% after deductible (20 visits per benefit period combined with Chiropractic Therapy. Additional visits subject to medical review.)
Chiropractic Therapy - Professional Only	90% after deductible	70% after deductible (20 visits per benefit period combined with Chiropractic Therapy. Additional visits subject to medical review.)
Speech Therapy - Facility and Professional	90% after deductible	70% after deductible (20 visits per benefit period)
Cardiac Rehabilitation	90% after deductible	70% after deductible
Emergency use of an Emergency Room ⁴	\$100 copay, then 90%	\$100 copay, then 70%
Non-Emergency use of an Emergency Room ⁵	\$100 copay, then 90%	\$100 copay, then 70%
Inpatient Facility		
Semi-Private Room and Board	90% after deductible	70% after deductible
Maternity	90% after deductible	70% after deductible
Skilled Nursing Facility	90% after deductible	70% after deductible (120 days per benefit period)

Garfield Heights Health Benefit Plan Medical Mutual		
	SuperMed Garfield Plan	
Benefits	Network	Non-Network Facility Charges
Additional Services		
Allergy Testing and Treatments	\$20	70% after deductible
Ambulance	90% after deductible	70% after deductible
Durable Medical Equipment	90% after deductible	70% after deductible
Additional Services - cont'd.		
Eduation and Training	90% after deductible	70% after deductible
Home Healthcare	90% after deductible	70% after deductible
Hospice	90% after deductible	70% after deductible
Organ Transplants	90% after deductible	70% after deductible
Private Duty Nursing	90% after deductible	70% after deductible
Mental Health and Substance Abuse - Federal		
Inpatient Mental Health and Substance Abuse Services	Benefits paid are based on corresponding medical benefits	
Outpatient Mental Health and Substance Abuse Services		
Prescription Drug		
Retail Program with Oral Contraceptive Coverage	SuperMedScript ^{6,7} Retail Program - 30 Day Supply - for the intitial filling and up to two refills of a prescription drug \$10 Generic / \$20 Formulary Brand / \$40 Non Formulary Brand SuperMedScript ^{6,7} Retail Program - 30 Day Supply - after the third retail fill of a prescription drug \$20 Generic / \$40 Formulary Brand / \$80 Non Formulary Brand	
Mail Order Program with Oral Contraceptive Coverage - 90 Day Supply	SuperMed Script ^{6,7} Home Delivery Program \$25 Generic / \$50 Formulary Brand / \$100 Non Formulary Brand	

Garfield Heights Health Benefit Plan Medical Mutual

Garfield Heights Health Benefit Plan Medical Mutual		
	SuperMed Garfield Plan	
Benefits	Network	Non-Network Facility Charges
Prescription Drug Step Therapy	Yes	

Deductible expenses incurred for services by a non-authorized provider will also apply to the authorized deductible out-of-pocket limits. Deductible expenses incurred for services by an authorized provider will only apply to the authorized deductible out-of-pocket limits.

Benefits will be determined based on Medical Mutual's medical and administrative policies and procedures.

This document is only a partial listing of benefits. This is not a contract of insurance. No person other than an officer of Medical Mutual may agree, orally or in writing, to change the benefits listed here. The contract or certificate will contain the complete listing of covered services.

In certain instances, Medical Mutual's payment may not equal the percentage listed above. However, the covered person's coinsurance will always be based on the lesser of the provider's billed charges or Medical Mutual's negotiated rate with the provider.

¹Maximum family deductible. Member deductible is the same as single deductible.

²The office visit copay applies to the cost of the office visit only.

³Preventive services include evidence-based services that have a rating of "A" or "B" in the United States Preventive Services Task Force, routine immunizations and other screenings, as provided for in the Patient

⁴Copay waived if admitted. The copay applies to room charges only. All other covered charges are not subject to deductible.

⁵Copay waived if admitted. The copay applies to room charges only. All other covered charges are subject to deductible and coinsurance.

⁶SuperMed Script contains the following:

-Generic Incentive: If the physician requests a brand-name drug and a generic equivalent exists, the member pays the generic copayment PLUS the difference between the cost of the generic drug and the brand-

-Home Delivery Incentive: When a member chooses to fill a prescription a fourth time at a retail pharmacy within 180 days, the member will pay twice the normal retail copayment.

⁷Coverage includes Preventive Medications, in accordance with Federal Law. Rx Selections and Coverage Management.

Garfield Heights Health Benefit Plan		
	SuperMed Ideal Plan	
Benefits	Network	Non-Network Facility Charges
Benefit Period	January 1 st through December 31 st	
Dependent Age Limit	26; Removal upon End of Month	
Working Spouse Language	Applies to Medical & Prescription Drug	
3 Month Deductible Carryover	Does Apply	
Pre-Existing Condition Waiting Period (does not apply to members under the age of	Does Not Apply	
Blood Pint Deductible	0 pints	
Lifetime Maximum	Unlimited	
Benefit Period Deductible - Single / Family ¹	\$250 / \$500	\$500 / \$1,000
Coinsurance	90%	70%
Coinsurance Out-of-Pocket Maximum (Excluding Deductible) - Single / Family	\$1,250 / \$2,500	\$2,500 / \$5,000
Maximum Out-of-Pocket Including Deductible Single / Family	\$1,500 / \$3,000	\$3,000 / \$6,000
Physician/Office Services		
Office Visit (Illness/Injury) ²	\$20 copay, then 100%	70% after deductible
Specialist Office Visit ²	\$20 copay, then 100%	70% after deductible
Urgent Care Office Visit ²	\$20 copay, then 100%	70% after deductible
All Immunizations	90% after deductible	70% after deductible
Preventative Services		
Preventive Services, in accordance with state and federal law ³	100%	70% after deductible
Routine Physical Exam (Age 21 and older; one exam per benefit period) ²	100%	70% after deductible
Well Child Care Services (Birth to age 21) ²	100%	70% after deductible (Including Exam, Routine Vision and Routine Hearing Exams and Well Child Care Immunizations)
Well Child Care Laboratory Tests (Birth to age 21)	100%	70% after deductible
Routine Mammogram (One per benefit	100%	70% after deductible
Routine Pap Test (One per benefit period)	100%	70% after deductible

Garfield Heights Health Benefit Plan		
	SuperMed Ideal Plan	
Benefits	Network	Non-Network Facility Charges
Preventative Services		
Routine EKG, Chest X-ray, Complete Blood Count, Comprehensive Metabolic Panel, Urinalysis (Age 9 and over, one each per benefit period)	100%	70% after deductible
Routine Prostate Specific Antigen (PSA)	100%	70% after deductible
Routine Colonoscopy/Sigmoidoscopy (Age 50 and over)	100%	70% after deductible
Outpatient Services		
Surgical Services	90% after deductible	70% after deductible
Diagnostic Services	90% after deductible	70% after deductible
Physical Therapy & Occupational Therapy - Facility and Professional	90% after deductible	70% after deductible
	(Combined 40 visits per benefit period)	
Chiropractic Therapy - Professional Only	90% after deductible	70% after deductible
	(12 visits per benefit period)	
Speech Therapy - Facility and Professional	90% after deductible	70% after deductible
	(20 visits per benefit period)	
Cardiac Rehabilitation	90% after deductible	70% after deductible
Emergency use of an Emergency Room ⁴	\$50 copay, then 90%	\$50 copay, then 70%
Non-Emergency use of an Emergency Room ⁵	\$100 copay, then 90%	\$100 copay, then 70%
Inpatient Facility		
Semi-Private Room and Board	90% after deductible	70% after deductible
Maternity	90% after deductible	70% after deductible
Skilled Nursing Facility	90% after deductible	70% after deductible
	120 days per benefit period)	
Additional Services		
Allergy Testing and Treatments	\$20 copay, then 100%	70% after deductible
Ambulance	90% after deductible	70% after deductible
Durable Medical Equipment	90% after deductible	70% after deductible

Garfield Heights Health Benefit Plan		
	SuperMed Ideal Plan	
Benefits	Network	Non-Network Facility Charges
Additional Services - cont'd.		
Eduation and Training	90% after deductible	70% after deductible
Home Healthcare	90% after deductible	70% after deductible (120 visits per benefit period)
Hospice	90% after deductible	70% after deductible
Organ Transplants	90% after deductible	70% after deductible
Private Duty Nursing	90% after deductible	70% after deductible
Mental Health and Substance Abuse -		
Inpatient Mental Health and Substance Abuse Services	Benefits paid are based on corresponding medical benefits	
Outpatient Mental Health and Substance Abuse Services		
Prescription Drug		
Retail Program with Oral Contraceptive Coverage	^{6,7} Retail Program - 30 Day Supply - for the intitial filling and up to two refills of a prescription drug \$10 Generic / \$20 Formulary Brand / \$40 Non Formulary Brand ^{6,7} Retail Program - 30 Day Supply - after the third retail fill of a prescription drug \$20 Generic / \$40 Formulary Brand / \$80 Non Formulary Brand	
Mail Order Program with Oral Contraceptive Coverage - 90 Day Supply	^{6,7} Home Delivery Program; \$25 Generic / \$50 Formulary Brand / \$100 Non Formulary Brand	

Deductible expenses incurred for services by a non-authorized provider will also apply to the authorized deductible out-of-pocket limits. Deductible expenses incurred for services by an authorized provider will only apply to the authorized deductible out-of-pocket limits. Benefits will be determined based on Medical Mutual's medical and administrative policies and procedures.

Garfield Heights Health Benefit Plan		
	SuperMed Ideal Plan	
Benefits	Network	Non-Network Facility Charges

This document is only a partial listing of benefits. This is not a contract of insurance. The contract or certificate will contain the complete listing of covered services.

In certain instances, Medical Mutual's payment may not equal the percentage listed above. However, the covered person's coinsurance will always be based on the lesser of the provider's billed charges or Medical Mutual's negotiated rate with the provider.

¹Maximum family deductible. Member deductible is the same as single deductible.

²The office visit copay applies to the cost of the office visit only.

³Preventive services include evidence-based services that have a rating of "A" or "B" in the United States Preventive Services Task Force, routine immunizations and other screenings, as provided

⁴Copay waived if admitted. The copay applies to room charges only. All other covered charges are not subject to deductible.

⁵Copay waived if admitted. The copay applies to room charges only. All other covered charges are subject to deductible and coinsurance.

⁶ Contains the following:

-Generic Incentive: If the physician requests a brand-name drug and a generic equivalent exists, the member pays the generic copayment PLUS the difference between the cost of the

-Home Delivery Incentive: When a member chooses to fill a prescription a fourth time at a retail pharmacy within 180 days, the member will pay twice the normal retail copayment.

⁷Coverage includes Preventive Medications, in accordance with Federal Law. Rx Selections and Coverage Management.

Garfield Heights Health Benefit Plan		
	Minimum Value Plan	
Benefits	Network	Non-Network Facility Charges
Benefit Period	January 1 st through December 31 st	
Dependent Age Limit	26; Removal upon End of Month	
Working Spouse Language	Applies to Medical & Prescription Drug	
3 Month Deductible Carryover	Does Apply	
Pre-Existing Condition Waiting Period (does not apply to members under the age of	Does Not Apply	
Blood Pint Deductible	2 pints	
Lifetime Maximum	Unlimited	
Benefit Period Deductible - Single / Family ¹	\$6,350 / \$12,700	\$12,700 / \$25,400
Coinsurance	100%	70%
Coinsurance Out-of-Pocket Maximum (Excluding Deductible) - Single / Family	\$0	\$1,000 / \$2,000
Maximum Out-of-Pocket Including Deductible Single / Family	\$6,350 / \$12,700	\$13,700 / \$27,400
Physician/Office Services		
Office Visit (Illness/Injury) ²	100% after deductible	70% after deductible
Specialist Office Visit ²	100% after deductible	70% after deductible
Urgent Care Office Visit ²	100% after deductible	70% after deductible
All Immunizations	100%	70% after deductible
Preventative Services		
Preventive Services, in accordance with state and federal law ³	100%	70% after deductible
Routine Physical Exam (Age 21 and older; one exam per benefit period) ²	100%	70% after deductible
Well Child Care Services (Birth to age 21) ²	100%	70% after deductible (Including Exam, Routine Vision and Routine Hearing Exams and Well Child Care Immunizations)
Well Child Care Laboratory Tests (Birth to age 21)	100%	70% after deductible
Routine Mammogram (One per benefit	100%	70% after deductible
Routine Pap Test (One per benefit period)	100%	70% after deductible

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	Minimum Value Plan	
Benefits	Network	Non-Network Facility Charges
Preventative Services		
Routine EKG, Chest X-ray, Complete Blood Count, Comprehensive Metabolic Panel, Urinalysis (Age 9 and over, one each per benefit period)	100%	70% after deductible
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Routine Colonoscopy/Sigmoidoscopy (Age 50 and over)	100%	70% after deductible
Outpatient Services		
Surgical Services	100% after deductible	70% after deductible
Diagnostic Services	100% after deductible	70% after deductible
Physical Therapy & Occupational Therapy - Facility and Professional	100% after deductible (10 visits per benefit period, then medical review)	70% after deductible
Chiropractic Therapy - Professional Only	100% after deductible (10 visits per benefit period, then medical review)	70% after deductible
Speech Therapy - Facility and Professional	100% after deductible (10 visits per benefit period, then medical review)	70% after deductible
Cardiac Rehabilitation	100% after deductible	70% after deductible
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Additional Services		
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Garfield Heights Health Benefit Plan		
	Minimum Value Plan	
Benefits	Network	Non-Network Facility Charges
Additional Services - cont'd.		
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Home Healthcare	100% after deductible	70% after deductible
Hospice	100% after deductible	70% after deductible
Organ Transplants	100% after deductible	70% after deductible
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Inpatient Mental Health and Substance Abuse Services	Benefits paid are based on corresponding medical benefits	
Outpatient Mental Health and Substance Abuse Services		
Prescription Drug		
Retail Program with Oral Contraceptive Coverage	^{6,7} Retail Program - 30 Day Supply - for the intitial filling and up to three refills of a prescription drug; \$20 Generic / \$45 Formulary Brand / \$75 Non Formulary Brand ^{6,7} Retail Program - 30 Day Supply - after the third retail fill of a prescription drug; \$40 Generic / \$90 Formulary Brand / \$150 Non Formulary Brand	
Mail Order Program with Oral Contraceptive Coverage - 90 Day Supply	^{6,7} Home Delivery Program; \$40 Generic / \$90 Formulary Brand / \$150 Non Formulary Brand	

Deductible expenses incurred for services by a non-authorized provider will also apply to the authorized deductible out-of-pocket limits. Deductible expenses incurred for services by an authorized provider will only apply to the authorized deductible out-of-pocket limits. Benefits will be determined based on Medical Mutual's medical and administrative policies and procedures.

Garfield Heights Health Benefit Plan		
	Minimum Value Plan	
Benefits	Network	Non-Network Facility Charges

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