

Geauga County Auditor

Payroll Dept. - Miscellaneous Employee Pay

Employing Unit: _____

Pay Day: _____

Accounting Acct. No.: _____

Social Security Number: _____ - _____ - _____

Name: _____
last first middle

CASH BENEFIT - Monies added to employee's pay and taxed

HOSP Hospitalization

PERS-R PERS Refund

MBP Miscellaneous

UNI-S Uniform

Amount \$ _____

other-Please call for code

Code

NON-CASH BENEFIT - Value of benefit is taxed

AWD Awards

VEH Vehicle Usage

MIS-T Miscellaneous

CELL Cell Phone Usage

UNI Uniforms

other- please call for code

Amount \$ _____

Code

Authorized By: _____

Date: _____

Title: _____

Comments: _____

Completed form must be received by the Auditor's Office, Payroll Dept., by noon on the FRIDAY prior to payday.