

CITY OF ARNOLD PAYROLL WARRANT

PAYROLL PERIOD ENDED: 8/14/15
 PAYCHECKS DATED: 8/19/15

PAYROLL WARRANT NUMBER: 1219
 PAYROLL NUMBER: 2015-17

DETAIL OF GROSS PAYROLL

REGULAR	199,552.91
REGULAR- P.T.	28,305.63
HOLIDAY	-
VACATION	15,319.26
SICK	3,825.77
OVERTIME	4,252.36
OVERTIME - P.T.	-
PERSONAL TIME	363.45
HOLIDAY PAY	-
LONGEVITY	-
COMP TIME	4,566.45
FUNERAL LEAVE	557.68
MILITARY LEAVE	-
ON-CALL	248.48
VEHICLE	200.00
SECONDARY REGULAR-Swim	-
PHONE ALLOWANCE/IPAD	50.00
CLOTHING ALLOWANCE	-
LOCK-IN REC CENTER	-
TOTAL GROSS PAY	<u>257,241.99</u>
PAYROLL SUMMARY	
GROSS PAY	257,241.99
DEDUCTIONS	83,091.62
NET PAY	<u>174,150.37</u>

DETAIL OF DEDUCTIONS WITHHELD

FICA/MEDICARE	18,706.82
FEDERAL	27,425.60
STATE	10,254.00
LOCAL	107.04
POLICE PENSION	8,838.63
GARNISHMENT	1,272.00
VOYA ING	2,904.20
ICMA	261.33
VISION	-
SUPPLEMENTAL LIFE	301.20
SHORT TERM DISABILITY	164.42
FLEX SPENDING	1,985.61
DEPENDENT CARE	76.92
HEALTH INS-EMPLOYEE COST	5,722.47
REC MEMBERSHIP	313.01
AFLAC	557.41
DENTAL	4,200.96
LEISURE PASS	
HEALTH INS-SPOUSE	-
BANKRUPTCY PAY	
GOLF MEMBERSHIP	
IPAD PAY	
DATA PLAN	-
Washington Nat'l	-
TOTAL DEDUCTIONS	<u>83,091.62</u>

I certify the monies referenced by this warrant are due and owing by the City of Arnold.

DATE _____ CITY CLERK _____

The warrant has been approved by the Council of the City of Arnold.

DATE _____ MAYOR _____

I certify that cash is available from the appropriate fund for payment of this warrant.

DATE _____ TREASURER _____

CITY OF ARNOLD PAYROLL 2015-17
DETAIL OF OVERTIME BY DEPARTMENT P/R P/E 8/14/15

<u>DEPARTMENT</u>	<u>TOTAL OVERTIME</u>
IT DEPT	
GEN & ADM	
MAYOR/PARKS	
ADMINISTRATOR	
TOURISM	
FINANCE	
CLERK/COLLECTOR	
PLANNING	
POLICE	3,528.67 OCDETF, Traffic Grant, Manpower Shortage
DISPATCHERS	723.69 scheduled overtime
BUILDING	
PUBLIC WORKS	
FLEET	
STREET	
PARKS	
RECREATION	
HEALTH	
RABIES	
GOLF	
SEWER	
STORMWATER	
PARKS PT EMPLOYEE	
TOTAL	4,252.36