



Dane County Department of Human Services

JOE PARISI
DANE COUNTY EXECUTIVE

MEMO

TO: Personnel & Finance Committee

FROM: Tony Ricker – Senior Social Worker, Neighborhood Intervention Program

DATE: 6/11/2021

RE: Requesting Exception to Chapter 20 – Employee Expenses Claimed Outside of 60 Day Window

The purpose of this memo is to request an exception to Chapter 20 for employee expenses claimed outside of the 60 day window.

I am requesting payment for an additional mileage form submitted but not processed, On 6/10/21 I noticed that I had only received a partial payment in my bank account for the March 2021 mileage report.

On 4/16/2021 I submitted 2 mileage request forms titled March 21_1 and March 21_2 to Supervisor Heather Crowley, who was covering for my supervisor Sarah Thomas at that time. The two request where approved by Heather Crowley and submitted for review on 4/16/21. These two forms each said page one on the top which appears to have resulted in only one of them being reviewed and submitted for payment.

Due to the deposit in my bank account being past the 60 day window I was unaware that both forms had not been reviewed and submitted for payment resulting in this request for an Exception.. I was paid for the attached request of \$83.44, miles driven for work between 3/19/2021 and 3/3102021. I was not paid for the attached request of \$118.16, miles driven for work between 3/3/2021 and 3/18/2021

Attachments

1. Employee mileage forms

Dane County Mileage Reimbursement Form

Effective January 1, 2021

Use this form to report usual and ordinary work-related mileage only. Report conference-related mileage with other conference-related expenses on County form #014-106-5.

Employee Name: Tony Ricker
Street Address, Apt No.: 425 Landover dr
City, State & Zip Code: Oreogn WI 53575
Claim for the Month of: March
Account Name/Number: CYF Account = 50000 22646

Vendor #: _____ (Accounting Dept Use Only)
Do you work under a telecommuting agreement? Yes
Provide your normal, County office location below (not your home address).
 NIP _____
County Office Location Other County Office Location (required only when selecting Other)

Employee's Certification: I certify that this claim is just, correct and true, and that no part of it has been paid; that the expenses were actually and necessarily incurred in the performance of my duties and paid for by me; that no part of the travel herein charged for has been had upon a free pass or free transportation of any nature whatever, and that the mileage by personal automobile of which compensation is claimed was actually traveled in the service of Dane County.

Supervisor's Certification: I certify that this claim has been examined and that the items shown therein are actual and necessary expenses incurred by the claimant in the performance of official duties. The account is approved for payment.

Employee's Signature:
Ricker, Anthony Digitally signed by Ricker, Anthony
 Date: 2021.04.16 11:47:45 -05'00'

Supervisor's Signature:
[Click When Ready to Sign](#)

Date	Origin of Trip	Destination of Trip	Purpose of Trip	Miles Traveled	Mileage Rate Per Mile	Total	
3/3/2021	425 landover dr Oregon	234 wildcat way verona round trip	school visit	24	0.56	13.44	
3/4/2021	425 Landover dr Oregon	2506 Jenewien dr Fitchburg	home visit	11	0.56	6.16	
	2506 Jenewien	756 N Thompson	home visit	13	0.56	7.28	
	756 N Thompson	425 landover Oregon	office	4	0.56	2.24	
3/5/2021	425 landover dr	917 Dane St madison Round trip	home visit	12	0.56	6.72	
3/11/2021	425 Landover dr	ccb	court	4	0.56	2.24	
	ccb	5915 Milwaukee st	home visit	6	0.56	3.36	
	5915 Milwaukee st	425 Landover	office	5	0.56	2.80	
3/12/2021	425 landover oregon	917 dane st madison round trip	home visit	24	0.56	13.44	
3/15/2021	425 Landover dr Oregon	5600 Pheasant In Middleton round trip	home visit	22	0.56	12.32	
3/16/2021	425 Landover dr	2506 jenewien dr round trip	home visit	22	0.56	12.32	
	425 Landover dr	5600 Pheasant In Middleton round trip	home visit	22	0.56	12.32	
3/17/2021	425 Landover dr	5600 Pheasant In Middleton round trip	home visit	22	0.56	12.32	
3/18/2021	425 Landover dr	2100 Bristol st Middleton round trip	school visit	20	0.56	11.20	
				Page 1 Total Miles	211	Page 1 Total \$	118.16
				Grand Total Miles	211	Grand Total \$	118.16

* as defined by ordinance

Dane County Mileage Reimbursement Form

Effective January 1, 2021

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Date	Origin of Trip	Destination of Trip	Purpose of Trip	Miles Traveled	Mileage Rate Per Mile	Total
Page 4 Total Miles				0	Page 4 Total \$	0.00

* as defined by ordinance

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Effective January 1, 2021

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Street Address, Apt No.: 425 Landover dr
City, State & Zip Code: Oregon WI 53575
Claim for the Month of: March
Account Name/Number: CYF Account = 50000 22646

Vendor #: _____ (Accounting Dept Use Only)
Do you work under a telecommuting agreement? Yes
Provide your normal, County office location below (not your home address).
 NIP _____
County Office Location Other County Office Location (required only when selecting Other)

Employee's Certification: I certify that this claim is just, correct and true, and that no part of it has been paid; that the expenses were actually and necessarily incurred in the performance of my duties and paid for by me; that no part of the travel herein charged for has been had upon a free pass or free transportation of any nature whatever, and that the mileage by personal automobile of which compensation is claimed was actually traveled in the service of Dane County.

Supervisor's Certification: I certify that this claim has been examined and that the items shown therein are actual and necessary expenses incurred by the claimant in the performance of official duties. The account is approved for payment.

Employee's Signature:
Ricker, Anthony Digitally signed by Ricker, Anthony
 Date: 2021.04.16 11:42:03 -05'00'

Supervisor's Signature:
[Click When Ready to Sign](#)

Date	Origin of Trip	Destination of Trip	Purpose of Trip	Miles Traveled	Mileage Rate Per Mile	Total	
3/19/2021	425 Landover dr Oregon	ccb round trip	court	8	0.56	4.48	
3/22/2021	425 Landover dr Oreogon	2306 whitlock Madison round trip	home visit	26	0.56	14.56	
	425 landover dr	ccb round trip	court	8	0.56	4.48	
3/23/2021	425 Landover Oregon	421 Sherman Ave madison round trip	home visit	1	0.56	0.56	
3/24/2021	425 landover dr	4986 Hwy M Oregon round trip	site visit	3	0.56	1.68	
3/25/2021	425 Landover dr	6211 Hammersly madison	home visit	11	0.56	6.16	
	6211 Hammersly	ccb	court	8	0.56	4.48	
	ccb	425 landover dr	office	4	0.56	2.24	
	425 Landover dr	6211 hammersly	home visit	11	0.56	6.16	
	6211 Hammesly	739 N thompson Madison	home visit	15	0.56	8.40	
	739 N Thompson	6814 Putnam Madison	home visit	16	0.56	8.96	
	6814 Putnam	425 Landover dr	office	12	0.56	6.72	
3/26/2021	425 Landover dr	119 Kennedy Hieghts Round trip	home visit	6	0.56	3.36	
3/30/2021	425 Landover dr	5801 Gemini dr round trip	home visit	12	0.56	6.72	
3/31/2021	425 landover dr	ccb round trip	court	8	0.56	4.48	
				Page 1 Total Miles	149	Page 1 Total \$	83.44
				Grand Total Miles	149	Grand Total \$	83.44

* as defined by ordinance

Dane County Mileage Reimbursement Form

Effective January 1, 2021

Use this form to report usual and ordinary work-related mileage only. Report conference-related mileage with other conference-related expenses on County form #014-106-5.

Date	Origin of Trip	Destination of Trip	Purpose of Trip	Miles Traveled	Mileage Rate Per Mile	Total
Page 4 Total Miles				0	Page 4 Total \$	0.00

* as defined by ordinance