

# Fees State of the transmitted for the management of the proper and 15 to 4 to 15 to

#### Fees Continued...

#### IC 26-1-9.1-525 UCC Fees

- ➤Initial Filing = \$12
- ➤ Request for Information = \$5
- **≻Other than Initial Filing = \$12** 
  - **Regardless of number of pages**
- ➤ No charge if Electronic



**Indiana State Board of Accounts** 

#### Fees continued...

#### Where can I find the fees schedule?

https://www.in.gov/sboa/files/2017\_R ecorder%27s\_Fees\_NEW.pdf



# **Claims**

			ALLOWED.	SUM OF \$	
	\$		=		
ON ACCOUNT OF APPROPRIATION FOR				Board of County Commissione	
COST D	ISTRIBUTION LEDGER C	CLASSIFICATION			
IF CLAIM Acct. No.	PAID MOTOR VEHICLE Account Title	Amount	-		
+			-		

rhom, rates	per day, number of hou	zed must show: kind of service, where performed, dars, rate per hour, number of units, price per unit, etc.	tes service rendered, by	
	Payee			
		· distinct Citati No.		
Invoice	Invoice			
Date	Number	Description (or note attached invoice(s) or bill(s))	Amount	
-				
-				
			Total	
emized there	on for which charge is	ed invoice(s), or bill(s), is (are) true and correct and made were ordered and received except	that the materials or services	
		Signature		SOARD OF
I hereby	certify that the attached	d invoice(s), or bill(s), is (are) true and correct and I hav	Title re audited same in accordance	SAME AND
	0-2.			* * W *

**Indiana State Board of Accounts** 

## **Claims**

Continued...

**➤**Where do you get County Form 17 (claim form)?

The County Auditor acquires the form from the local print vendor.



# Claims Continued...

- **➤What is the Auditor looking for when auditing the claim?** 
  - 1. Claim must be itemized and supported
  - 2. Prices charged are in accordance with contracts awarded, where applicable
  - 3. Quantity and unit price added to agree to total on invoice
  - 4. Claim must be approved by officer receiving the goods or services
  - 5. Sufficient funds and appropriations are available
  - 6. Claim has not been previously paid



**Indiana State Board of Accounts** 

## Claims Continued...

- >Additional Information needed:
  - **■Fund Number**
  - Account Number
  - Any applicable determination made



# Claims Continued...

# \*Just a reminder that timeliness in very important when submitting claims





**Indiana State Board of Accounts** 

#### **Resources**

Lori Rogers
Director of Audit Services

Ricci Hofherr Director of Audit Services

Counties@sboa.in.gov (317)232-2512







