

DETAIL WARRANT NUMBER 22 - FUND F - F #2 JUNE 2014 FOR 06/01/14 - 06/30/14

CHECK#	VENDOR#	VENDOR NAME ACCOUNT CODE	CHECK DESCRIPTION ACCOUNT DESCRIPTION	CHECK DATE PO#	CHECK AMOUNT	LIQUIDATED
700874	4699	FRANKLIN COVEY CLIENT SALES F 2060.460-40-1440		06/30/14	295.00	
				CHECK TOTAL	295.00	
700875	4694	KIRKWYLAND, JONATHAN F 2060.150-40-1440		06/30/14	100.00	
				CHECK TOTAL	100.00	
700876	2160	LITZENBERGER, PHYLLIS F 2060.400-40-1440		06/30/14	150.00	
				CHECK TOTAL	150.00	
700877	4669	PARMITER, SUZANNE F 2060.150-40-1440		06/30/14	300.00	
				CHECK TOTAL	300.00	
700878	4392	THOMPSON, NANCY F 2060.400-40-1440		06/30/14	75.00	
				CHECK TOTAL	75.00	
700879	4640	W2OPERATOR TRAINING GROUP, LL F 2060.400-40-1440		06/30/14	200.00	200.00
				141164	200.00	200.00
				CHECK TOTAL	200.00	
700880	4720	REGENTS RESEARCH FUND F 2110.400-40-1454		06/30/14	312.00	312.00
				141512	312.00	312.00
				CHECK TOTAL	312.00	

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CHECK#	VENDOR#	VENDOR NAME ACCOUNT CODE	CHECK DESCRIPTION ACCOUNT DESCRIPTION	CHECK DATE PO#	CHECK AMOUNT	LIQUIDATED
NUMBER OF CHECKS					7	
WARRANT TOTAL					1,432.00	512.00
VENDOR PORTION					1,432.00	

CERTIFICATION OF WARRANT

To The District Treasurer:

I hereby certify that I have verified the above claims, 7 in number, in the total amount of \$ 1432.00.

You are hereby authorized and directed to pay to the claimants certified above the amount of each claim allowed and charge each to the proper fund.

7/2/14
DATE

Michelle Reale
SIGNATURE

Treasurer
TITLE

CERTIFICATION OF WARRANT

To The District Treasurer:

I hereby certify that I have audited the above claims in the total amount of \$ 1432.00.

You are hereby authorized and directed to pay to the claimants certified above the amount of each claim allowed and charge each to the proper fund.

8-22-14
DATE

M. Meunier
AUDITOR'S SIGNATURE

Claims Auditor
TITLE

Report Completed 2:13 PM