

DETAIL WARRANT NUMBER 14 - FUND H - H #1 JUN 2015 FOR 06/01/15 - 06/30/15

CHECK#	VENDOR#	VENDOR NAME ACCOUNT CODE	CHECK DESCRIPTION ACCOUNT DESCRIPTION	CHECK DATE PO#	CHECK AMOUNT	LIQUIDATED
600361	4859	ATLANTIC TESTING LABORATORIES H 1621.293-10-1401 H 1621.293-30-1401		06/15/15	1,232.44	
					474.08	
				CHECK TOTAL	1,706.52	

NUMBER OF CHECKS	1	WARRANT TOTAL	1,706.52
		VENDOR PORTION	1,706.52

CERTIFICATION OF WARRANT

To The District Treasurer:

I hereby certify that I have verified the above claims, 1 in number, in the total amount of \$ 1,706.52.
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.

6/15/15 Michelle Beale Treasurer
DATE SIGNATURE TITLE

CERTIFICATION OF WARRANT

To The District Treasurer:

I hereby certify that I have audited the above claims in the total amount of \$ 1,706.52.
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.

7.24.15 M. Meriwether Claims Auditor mf
DATE AUDITOR'S SIGNATURE TITLE