

DETAIL WARRANT NUMBER 8 - FUND H - H #1 - NOVEMBER 2016 FOR 11/01/16 - 11/30/16

CHECK#	VENDOR#	VENDOR NAME ACCOUNT CODE	CHECK DESCRIPTION ACCOUNT DESCRIPTION	CHECK DATE PO#	CHECK AMOUNT	LIQUIDATED	
600513	4760	CME ASSOCIATES, INC. H 1621.293-30-1401		11/15/16	1,072.50		
CHECK TOTAL					1,072.50		
600514	5302	DAVIS WALLBRIDGE, INC. H 1621.293-30-1401		11/15/16	179,075.00		
CHECK TOTAL					179,075.00		
600515	5226	KI H 1621.200-30-1401 H 1621.200-30-1401 H 1621.200-30-1401		11/15/16			
					161051	486.24	486.24
					161051	18,709.54	18,709.54
					161051	3,537.29	3,537.29
CHECK TOTAL					22,733.07		
600516	5223	MAYLINE COMPANY H 1621.200-30-1401		11/15/16			
					161049	5,272.96	5,272.96
CHECK TOTAL					5,272.96		
600517	5224	QUALITY OFFICE ENVIRONMENTS H 1621.200-30-1401		11/15/16			
					161048	5,971.93	5,971.93
CHECK TOTAL					5,971.93		
600518	5222	WENGER CORPORATION H 1621.200-30-1401		11/15/16			
					161050	26,802.00	26,802.00
CHECK TOTAL					26,802.00		

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CHECK#	VENDOR#	VENDOR NAME ACCOUNT CODE	CHECK DESCRIPTION ACCOUNT DESCRIPTION	CHECK DATE PO#	CHECK AMOUNT	LIQUIDATED
NUMBER OF CHECKS				6		
WARRANT TOTAL					240,927.46	60,779.96
VENDOR PORTION					240,927.46	

CERTIFICATION OF WARRANT

To The District Treasurer:

I hereby certify that I have verified the above claims, 6 in number, in the total amount of \$ 240,927.46.
 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.

12/12/16

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 \$ 240,927.46.
 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.

12.15.16

DATE

M. Meredith

AUDITOR'S SIGNATURE

Claims Auditor

TITLE

Report Completed 3:23 PM