

DETAIL WARRANT NUMBER 14 - FUND H - H #1 JANUARY 2017 FOR 01/01/17 - 01/31/17

CHECK#	VENDOR#	VENDOR NAME ACCOUNT CODE	CHECK DESCRIPTION ACCOUNT DESCRIPTION	CHECK DATE PO#	CHECK AMOUNT	LIQUIDATED
600531	4959	A-VERDI, LLC		01/05/17		
		H 1621.293-30-1401		160781	258.00	258.00
		H 1621.293-30-1401		160781	258.00	72.00
		H 1621.293-30-1401			129.00	
		H 1621.293-30-1401			258.00	
CHECK TOTAL					903.00	
600532	4704	BILLITIER ELECTRIC, INC		01/05/17		
		H 1621.296-30-1401			68,875.00	
CHECK TOTAL					68,875.00	
600533	4760	CME ASSOCIATES, INC.		01/05/17		
		H 1621.299-30-0701			3,183.17	
CHECK TOTAL					3,183.17	
600534	5302	DAVIS WALLBRIDGE, INC.		01/05/17		
		H 1621.293-30-1401			22,877.90	
CHECK TOTAL					22,877.90	
600535	5356	GENESEE ENVIRONMENTAL, LLC		01/05/17		
		H 1621.299-30-0701			4,185.00	
CHECK TOTAL					4,185.00	
600536	5368	LECHASE CONSTRUCTION SVC, LLC		01/05/17		
		H 1621.293-30-1401			22,471.42	
		H 1621.293-30-1401			22,471.42	
CHECK TOTAL					44,942.84	
600537	5324	SENSORY TECHNOLOGIES, LLC		01/05/17		
		H 2110.200-40-1401			218,081.37	
CHECK TOTAL					218,081.37	
600538	5053	SIRACUSA MECHANICAL INC.		01/05/17		
		H 1621.295-30-1401			54,369.45	
		H 1621.294-30-1401			58,717.50	
CHECK TOTAL					113,086.95	
600539	1540	STREETER ASSOCIATES INC		01/05/17		
		H 1621.293-30-1401			790,739.15	
CHECK TOTAL					790,739.15	

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CHECK#	VENDOR#	VENDOR NAME ACCOUNT CODE	CHECK DESCRIPTION ACCOUNT DESCRIPTION	CHECK DATE PO#	CHECK AMOUNT	LIQUIDATED
NUMBER OF CHECKS				9		
				WARRANT TOTAL	1,266,874.38	330.00
				VENDOR PORTION	1,266,874.38	

CERTIFICATION OF WARRANT

To The District Treasurer:

I hereby certify that I have verified the above claims, 9 in number, in the total amount of \$ 1,266,874.38.
 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.

2/9/17 Michael 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 \$ 1,266,874.38.
 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.

2-16-17 M. Mentwiler Claims Auditor
 DATE AUDITOR'S SIGNATURE TITLE

Report Completed 11:22 AM