

HOMER CENTRAL SCHOOL DISTRICT
ACCOUNTS PAYABLE WARRANT REPORT

TRUST & AGENCY

I HEREBY CERTIFY THAT THE ATTACHED CLAIMS TOTALING
\$1,965,912.17

May 31, 2017

YOU ARE HEREBY AUTHORIZED TO PAY THE CLAIMANTS THE
AMOUNT OF EACH CLAIM AND CHARGE EACH TO THE PROPER FUND.

WARRANT:TA #57, #58 PR #23 BD, #59 PR #21, #60, #61 PR# 24 BD, #62 P # 22, #63

DISTRICT TREASURER



INTERNAL CLAIMS AUDITOR





**SUMMARY WARRANT NUMBER 57 - FUND TA - TA #1 - HEALTH & VISION
FOR 05/01/17 - 05/31/17**

CHECK#	VENDOR#	VENDOR NAME/CHECK DESCRIPTION	CHECK DATE	PO#	CHECK AMOUNT
908867	274	CNY COOPERATIVE HEALTH TRUST	05/05/17		136,129.03
908868	5399	LIFETIME BENEFIT SOLUTIONS	05/05/17		267.24
NUMBER OF CHECKS 2			WARRANT TOTAL		136,396.27
			VENDOR PORTION		136,396.27

CERTIFICATION OF WARRANT

To The District Treasurer:

I hereby certify that I have verified the above claims, 2 in number, in the total amount of \$ 136,396.27.
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.

6/6/17 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 \$ 136,396.27.
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.

6.14.17 M. Meswethen Claims Auditor
DATE AUDITOR'S SIGNATURE TITLE

Report Completed 1:34 PM

**SUMMARY WARRANT NUMBER 58 - FUND TA - PR#23BD TA Dist 5/12/17
FOR 05/01/17 - 05/31/17**

CHECK#	VENDOR#	VENDOR NAME/CHECK DESCRIPTION	CHECK DATE	PO#	CHECK AMOUNT
1998	801	KEY BANK/IRS-SOC SEC	05/12/17		4,513.64
1999	802	KEY BANK/FED TAX	05/12/17		2,217.23
2000	1106	NYS CHILD SUPPORT PROCESSING	05/12/17		564.00
2001	1118	NYS INCOME TAX BUREAU	05/12/17		811.19
2002	1209	PAYROLL ACCOUNT	05/12/17		22,727.32
2003	2450	OMNI	05/12/17		106.92
908869	321	CORTLAND COUNTY SHERIFF	05/12/17		67.13
908870	656	HCSSPA BUS DRIVERS	05/12/17		30.99

NUMBER OF CHECKS	8	WARRANT TOTAL	31,038.42
		VENDOR PORTION	31,038.42

CERTIFICATION OF WARRANT

To The District Treasurer:

I hereby certify that I have verified the above claims, 8 in number, in the total amount of \$ 31,038.42.
 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.

6/6/17

DATE

Michelle Beak

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 \$ 31,038.42.
 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.

6.14.17

DATE

M. Mervelther

AUDITOR'S SIGNATURE

Claims Auditor

TITLE

SUMMARY WARRANT NUMBER 59 - FUND TA - PR#21 TA DIST 5-15-2017 FOR 05/01/17 - 05/31/17

CHECK#	VENDOR#	VENDOR NAME/CHECK DESCRIPTION	CHECK DATE	PO#	CHECK AMOUNT
2004	801	KEY BANK/IRS-SOC SEC	05/15/17		112,756.64
2005	802	KEY BANK/FED TAX	05/15/17		87,427.32
2006	1106	NYS CHILD SUPPORT PROCESSING	05/15/17		618.75
2007	1118	NYS INCOME TAX BUREAU	05/15/17		33,229.02
2008	1209	PAYROLL ACCOUNT	05/15/17		504,166.33
2009	2450	OMNI	05/15/17		31,975.08
908871	655	HCS TEACHERS ASSOCIATION	05/15/17		10,084.47
908872	702	HOMER AIDES/ASSISTANTS ASSOC	05/15/17		1,144.54
908873	1145	NYSUT MEMBERS BENEFITS	05/15/17		1,146.27
908874	2838	VOTE-COPE	05/15/17		111.00
NUMBER OF CHECKS 10			WARRANT TOTAL		782,659.42
			VENDOR PORTION		782,659.42

CERTIFICATION OF WARRANT

To The District Treasurer:

I hereby certify that I have verified the above claims, 10 in number, in the total amount of \$ 782,659.42. 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.

6/6/17 DATE Michelle Beale 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 \$ 782,659.42. 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.

6.14.17 DATE M. Meriwether AUDITOR'S SIGNATURE Claims Auditor TITLE

**SUMMARY WARRANT NUMBER 60 - FUND TA - T&A MAY CASH DIS
FOR 05/01/17 - 05/31/17**

CHECK#	VENDOR#	VENDOR NAME/CHECK DESCRIPTION	CHECK DATE	PO#	CHECK AMOUNT
908875	513	FIRST UNUM LIFE INS CO	05/11/17		579.25
2000350	447	LIFETIME BENEFIT SOLUTIONS INC	05/31/17		8,592.07
2000351	447	LIFETIME BENEFIT SOLUTIONS INC	05/31/17		1,130.32
2000352	447	LIFETIME BENEFIT SOLUTIONS INC	05/31/17		1,312.06
2000353	447	LIFETIME BENEFIT SOLUTIONS INC	05/31/17		126.00
2000354	447	LIFETIME BENEFIT SOLUTIONS INC	05/31/17		3,264.76
2000355	1115	NYS EMPLOYEES' RETIREMENT SYS	05/31/17		5,598.25
2000356	447	LIFETIME BENEFIT SOLUTIONS INC	05/31/17		8,583.12
2000357	447	LIFETIME BENEFIT SOLUTIONS INC	05/31/17		716.65
2000358	447	LIFETIME BENEFIT SOLUTIONS INC	05/31/17		760.08
NUMBER OF CHECKS			10	WARRANT TOTAL	30,662.56
				VENDOR PORTION	30,662.56

CERTIFICATION OF WARRANT

To The District Treasurer:

I hereby certify that I have verified the above claims, 10 in number, in the total amount of \$ 30,662.56.
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.

6/6/17
DATE

Michelle Beale
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 \$ 30,662.56.
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.

6-14-17
DATE

M. Mesinger
AUDITOR'S SIGNATURE

Claims Auditor
TITLE

**SUMMARY WARRANT NUMBER 61 - FUND TA - PR#24BD TA Dist 5/26/17
FOR 05/01/17 - 05/31/17**

CHECK#	VENDOR#	VENDOR NAME/CHECK DESCRIPTION	CHECK DATE	PO#	CHECK AMOUNT
2010	801	KEY BANK/IRS-SOC SEC	05/26/17		4,466.16
2011	802	KEY BANK/FED TAX	05/26/17		2,256.66
2012	1106	NYS CHILD SUPPORT PROCESSING	05/26/17		564.00
2013	1118	NYS INCOME TAX BUREAU	05/26/17		815.12
2014	1209	PAYROLL ACCOUNT	05/26/17		22,512.37
2015	2450	OMNI	05/26/17		84.52
908876	321	CORTLAND COUNTY SHERIFF	05/26/17		67.13
NUMBER OF CHECKS			7	WARRANT TOTAL	30,765.96
				VENDOR PORTION	30,765.96

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 \$ 30,765.⁹⁶.
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.

6/6/17 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 \$ 30,765.96.
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.

6.14.17 M. Mesinger Claims Auditor
DATE AUDITOR'S SIGNATURE TITLE

**SUMMARY WARRANT NUMBER 62 - FUND TA - PR#22 TA DIST 5-30-17
FOR 05/01/17 - 05/31/17**

CHECK#	VENDOR#	VENDOR NAME/CHECK DESCRIPTION	CHECK DATE	PO#	CHECK AMOUNT
2016	801	KEY BANK/IRS-SOC SEC	05/30/17		116,060.76
2017	802	KEY BANK/FED TAX	05/30/17		88,188.48
2018	1106	NYS CHILD SUPPORT PROCESSING	05/30/17		618.75
2019	1118	NYS INCOME TAX BUREAU	05/30/17		33,594.29
2020	1209	PAYROLL ACCOUNT	05/30/17		533,506.18
2021	2450	OMNI	05/30/17		32,336.72
908877	655	HCS TEACHERS ASSOCIATION	05/30/17		117.91
908878	702	HOMER AIDES/ASSISTANTS ASSOC	05/30/17		1.50
908879	1940	HOMER EDUCATION FOUNDATION	05/30/17		28.50
908880	898	LOAN UNIT	05/30/17		7,977.00
908881	1145	NYSUT MEMBERS BENEFITS	05/30/17		1,146.27
908882	1668	UNITED WAY FOR CORTLAND COUNTY	05/30/17		238.30
908883	2838	VOTE-COPE	05/30/17		111.00
NUMBER OF CHECKS			13	WARRANT TOTAL	813,925.66
				VENDOR PORTION	813,925.66

CERTIFICATION OF WARRANT

To The District Treasurer:

I hereby certify that I have verified the above claims, 13 in number, in the total amount of \$ 813,925.66.
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.

6/6/17 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 \$ 813,925.66.
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.

6.14.17 M. Meredith Claims Auditor
DATE AUDITOR'S SIGNATURE TITLE

**SUMMARY WARRANT NUMBER 63 - FUND TA - TA #2 HEALTH & VISION
FOR 05/01/17 - 05/31/17**

CHECK#	VENDOR#	VENDOR NAME/CHECK DESCRIPTION	CHECK DATE	PO#	CHECK AMOUNT
908884	274	CNY COOPERATIVE HEALTH TRUST	05/31/17		140,196.64
908885	5399	LIFETIME BENEFIT SOLUTIONS	05/31/17		267.24
NUMBER OF CHECKS 2			WARRANT TOTAL		140,463.88
			VENDOR PORTION		140,463.88

CERTIFICATION OF WARRANT

To The District Treasurer:

I hereby certify that I have verified the above claims, 2 in number, in the total amount of \$ 140,463⁸⁸.
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.

6/6/17 Michelle Reale 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 \$ 140,463.88.
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.

6.14.17 M. Meriwether Claims Auditor
DATE AUDITOR'S SIGNATURE TITLE