

DETAIL WARRANT NUMBER 5 - FUND F - F #1 OCTOBER 2017 FOR 10/01/17 - 10/31/17

CHECK#	VENDOR#	VENDOR NAME ACCOUNT CODE	CHECK DESCRIPTION ACCOUNT DESCRIPTION	CHECK DATE PO#	CHECK AMOUNT	LIQUIDATED
701057	5687	DISCOUNT MACHINE SERVICE F 2060.400-40-1840	CONTRACT SVCS - TCHR CENTER 17-18	10/06/17	138.40	
<b>CHECK TOTAL</b>					<b>138.40</b>	

NUMBER OF CHECKS 1

WARRANT TOTAL  
VENDOR PORTION

138.40  
138.40

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 \$ 138.40

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.

11/13/17  
DATE

[Signature]  
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 \$ 138.40

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.

11.16.17  
DATE

M. Meriwether  
AUDITOR'S SIGNATURE

Claims Auditor  
TITLE

[Signature]