

HOMER CENTRAL SCHOOL DISTRICT  
ACCOUNTS PAYABLE WARRANT REPORT

**TRUST & AGENCY**

I HEREBY CERTIFY THAT THE ATTACHED CLAIMS TOTALING  
**\$1,680,983.78**

**April 30, 2018**

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

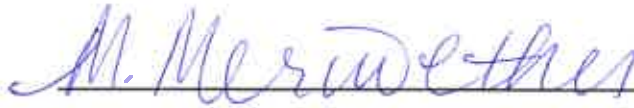
**WARRANT: #56, # 57-PR # 19, # 58-PR # 22 BD, # 59-PR # 20**

DISTRICT TREASURER



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INTERNAL CLAIMS AUDITOR



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**DETAIL WARRANT NUMBER 56 - FUND TA - T&A APRIL CASH DISB FOR 04/01/18 - 04/30/18**

CHECK#	VENDOR#	VENDOR NAME ACCOUNT CODE	CHECK DESCRIPTION ACCOUNT DESCRIPTION	CHECK DATE PO#	CHECK AMOUNT	LIQUIDATED
200451	447	LIFETIME BENEFIT SOLUTIONS IN TA 020.02	DENTAL INSURANCE	04/30/18	754.13	
					CHECK TOTAL	754.13
200452	1115	NYS EMPLOYEES' RETIREMENT SYS TA 018	STATE RETIREMENT	04/30/18	5,132.79	
					CHECK TOTAL	5,132.79
200453	447	LIFETIME BENEFIT SOLUTIONS IN TA 020.04	FLEX PLAN	04/30/18	2,942.58	
					CHECK TOTAL	2,942.58
200454	447	LIFETIME BENEFIT SOLUTIONS IN TA 020.05	FLEX PLAN, FEES	04/30/18	140.60	
					CHECK TOTAL	140.60
200455	447	LIFETIME BENEFIT SOLUTIONS IN TA 020.04	FLEX PLAN	04/30/18	458.44	
					CHECK TOTAL	458.44
200456	447	LIFETIME BENEFIT SOLUTIONS IN TA 020.04	FLEX PLAN	04/30/18	1,989.42	
					CHECK TOTAL	1,989.42
909014	513	FIRST UNUM LIFE INS CO TA 019	DISABILITY INSURANCE	04/10/18	580.00	
					CHECK TOTAL	580.00

DETAIL WARRANT NUMBER 56 - FUND TA - T&A APRIL CASH DISB FOR 04/01/18 - 04/30/18

CHECK#	VENDOR#	VENDOR NAME ACCOUNT CODE	CHECK DESCRIPTION ACCOUNT DESCRIPTION	CHECK DATE PO#	CHECK AMOUNT	LIQUIDATED
<b>NUMBER OF CHECKS</b>				<b>7</b>		
				<b>WARRANT TOTAL</b>	<b>11,997.96</b>	
				<b>VENDOR PORTION</b>	<b>11,997.96</b>	

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 \$ 11,997.96  
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.

5/3/18                      [Signature]                      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 \$ 11,997.96  
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.

5/17/18                      [Signature]                      Claims Auditor  
DATE                                      AUDITOR'S SIGNATURE                                      TITLE

Report Completed 3:06 PM

**DETAIL WARRANT NUMBER 57 - FUND TA - PR#19 TA DIST 4-13-18 FOR 04/01/18 - 04/30/18**

CHECK#	VENDOR#	VENDOR NAME ACCOUNT CODE	CHECK DESCRIPTION ACCOUNT DESCRIPTION	CHECK DATE PO#	CHECK AMOUNT	LIQUIDATED
2251	801	<b>KEY BANK/IRS-SOC SEC</b>		04/13/18		
		TA 026	SOCIAL SECURITY TAX		48,476.09	
		TA 026	SOCIAL SECURITY TAX		48,476.09	
		TA 026	SOCIAL SECURITY TAX		11,338.64	
		TA 026	SOCIAL SECURITY TAX		11,338.64	
				<b>CHECK TOTAL</b>	<b>119,629.46</b>	
2252	802	<b>KEY BANK/FED TAX</b>		04/13/18		
		TA 022	FEDERAL INCOME TAX		75,159.17	
				<b>CHECK TOTAL</b>	<b>75,159.17</b>	
2253	1106	<b>NYS CHILD SUPPORT PROCESSING</b>		04/13/18		
		TA 036	COURT ORDER DEPOSITS		1,043.54	
				<b>CHECK TOTAL</b>	<b>1,043.54</b>	
2254	1118	<b>NYS INCOME TAX BUREAU</b>		04/13/18		
		TA 021	NYS INCOME TAX		34,356.38	
				<b>CHECK TOTAL</b>	<b>34,356.38</b>	
2255	1209	<b>PAYROLL ACCOUNT</b>		04/13/18		
		TA 010	CONSOLIDATED PAYROLL		556,435.01	
				<b>CHECK TOTAL</b>	<b>556,435.01</b>	
2256	2450	<b>OMNI</b>		04/13/18		
		TA 029	EMPLOYEE ANNUITIES		4,082.92	
		TA 029	EMPLOYEE ANNUITIES		1,006.89	
		TA 029	EMPLOYEE ANNUITIES		75.00	
		TA 029	EMPLOYEE ANNUITIES		400.00	
		TA 029	EMPLOYEE ANNUITIES		1,510.00	
		TA 029	EMPLOYEE ANNUITIES		100.00	
		TA 029	EMPLOYEE ANNUITIES		2,910.00	
		TA 029	EMPLOYEE ANNUITIES		16,278.87	
		TA 029	EMPLOYEE ANNUITIES		700.00	
		TA 029	EMPLOYEE ANNUITIES		250.00	
		TA 029	EMPLOYEE ANNUITIES		366.81	
		TA 029	EMPLOYEE ANNUITIES		630.00	
		TA 029	EMPLOYEE ANNUITIES		292.71	
		TA 029	EMPLOYEE ANNUITIES		2,369.36	
				<b>CHECK TOTAL</b>	<b>30,972.56</b>	

## DETAIL WARRANT NUMBER 57 - FUND TA - PR#19 TA DIST 4-13-18 FOR 04/01/18 - 04/30/18

CHECK#	VENDOR#	VENDOR NAME ACCOUNT CODE	CHECK DESCRIPTION ACCOUNT DESCRIPTION	CHECK DATE PO#	CHECK AMOUNT	LIQUIDATED
909015	321	CORTLAND COUNTY SHERIFF TA 036	COURT ORDER DEPOSITS	04/13/18	75.79	
				CHECK TOTAL	75.79	
909016	655	HCS TEACHERS ASSOCIATION TA 024	ASSOC & UNION DUES/TEACHER	04/13/18	10,175.49	
				CHECK TOTAL	10,175.49	
909017	656	HCSSPA BUS DRIVERS TA 024.01	ASSOC & UNION DUES/BUS	04/13/18	610.85	
				CHECK TOTAL	610.85	
909018	702	HOMER AIDES/ASSISTANTS ASSOC TA 024.02	ASSOC & UNION DUES/AIDES	04/13/18	1,095.00	
				CHECK TOTAL	1,095.00	
909019	1145	NYSUT MEMBERS BENEFITS TA 019	DISABILITY INSURANCE	04/13/18	1,169.55	
				CHECK TOTAL	1,169.55	
909020	2838	VOTE-COPE TA 085.02	UNITED WAY/HOMER FOUNDATION	04/13/18	96.00	
				CHECK TOTAL	96.00	

DETAIL WARRANT NUMBER 57 - FUND TA - PR#19 TA DIST 4-13-18 FOR 04/01/18 - 04/30/18

CHECK#	VENDOR#	VENDOR NAME ACCOUNT CODE	CHECK DESCRIPTION ACCOUNT DESCRIPTION	CHECK DATE PO#	CHECK AMOUNT	LIQUIDATED
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NUMBER OF CHECKS 12

WARRANT TOTAL  
VENDOR PORTION

830,818.80  
830,818.80

CERTIFICATION OF WARRANT

To The District Treasurer:

I hereby certify that I have verified the above claims, 12 in number, in the total amount of \$ 830,818.80.

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.

5/3/18

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 \$ 830,818.80.

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.

5.17.18

DATE

[Signature]

AUDITOR'S SIGNATURE

Claims Auditor

TITLE

**DETAIL WARRANT NUMBER 58 - FUND TA - PR#22BD TA Dist 4/27/18 FOR 04/01/18 - 04/30/18**

CHECK#	VENDOR#	VENDOR NAME ACCOUNT CODE	CHECK DESCRIPTION ACCOUNT DESCRIPTION	CHECK DATE PO#	CHECK AMOUNT	LIQUIDATED
2257	801	<b>KEY BANK/IRS-SOC SEC</b> TA 026	SOCIAL SECURITY TAX	04/27/18	1,796.15	
		TA 026	SOCIAL SECURITY TAX		1,796.15	
		TA 026	SOCIAL SECURITY TAX		420.08	
		TA 026	SOCIAL SECURITY TAX		420.08	
			<b>CHECK TOTAL</b>		<b>4,432.46</b>	
2258	802	<b>KEY BANK/FED TAX</b> TA 022	FEDERAL INCOME TAX	04/27/18	1,879.87	
			<b>CHECK TOTAL</b>		<b>1,879.87</b>	
2259	1106	<b>NYS CHILD SUPPORT PROCESSING</b> TA 036	COURT ORDER DEPOSITS	04/27/18	156.00	
			<b>CHECK TOTAL</b>		<b>156.00</b>	
2260	1118	<b>NYS INCOME TAX BUREAU</b> TA 021	NYS INCOME TAX	04/27/18	860.24	
			<b>CHECK TOTAL</b>		<b>860.24</b>	
2261	1209	<b>PAYROLL ACCOUNT</b> TA 010	CONSOLIDATED PAYROLL	04/27/18	22,633.56	
			<b>CHECK TOTAL</b>		<b>22,633.56</b>	
2262	2450	<b>OMNI</b> TA 029	EMPLOYEE ANNUITIES	04/27/18	98.23	
		TA 029	EMPLOYEE ANNUITIES		49.11	
			<b>CHECK TOTAL</b>		<b>147.34</b>	
909021	656	<b>HCSSPA BUS DRIVERS</b> TA 024.01	ASSOC & UNION DUES/BUS	04/27/18	600.36	
			<b>CHECK TOTAL</b>		<b>600.36</b>	



DETAIL WARRANT NUMBER 58 - FUND TA - PR#22BD TA Dist 4/27/18 FOR 04/01/18 - 04/30/18

CHECK#	VENDOR#	VENDOR NAME ACCOUNT CODE	CHECK DESCRIPTION ACCOUNT DESCRIPTION	CHECK DATE PO#	CHECK AMOUNT	LIQUIDATED
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NUMBER OF CHECKS 7

WARRANT TOTAL  
VENDOR PORTION

30,709.83  
30,709.83

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 \$ 30,709.83.  
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.

5/3/18  
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 \$ 30,709.83.  
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.

5.17.18  
DATE

[Signature]  
AUDITOR'S SIGNATURE

Claims Auditor  
TITLE



**DETAIL WARRANT NUMBER 59 - FUND TA - PR#20 TA DIST 4-30-2018 FOR 04/01/18 - 04/30/18**

CHECK#	VENDOR#	VENDOR NAME ACCOUNT CODE	CHECK DESCRIPTION ACCOUNT DESCRIPTION	CHECK DATE PO#	CHECK AMOUNT	LIQUIDATED
2263	801	<b>KEY BANK/IRS-SOC SEC</b>		<b>04/30/18</b>		
		TA 026	SOCIAL SECURITY TAX		46,607.90	
		TA 026	SOCIAL SECURITY TAX		46,607.90	
		TA 026	SOCIAL SECURITY TAX		10,902.10	
		TA 026	SOCIAL SECURITY TAX		10,902.10	
			<b>CHECK TOTAL</b>		<b>115,020.00</b>	
2264	802	<b>KEY BANK/FED TAX</b>		<b>04/30/18</b>		
		TA 022	FEDERAL INCOME TAX		72,424.39	
			<b>CHECK TOTAL</b>		<b>72,424.39</b>	
2265	1106	<b>NYS CHILD SUPPORT PROCESSING</b>		<b>04/30/18</b>		
		TA 036	COURT ORDER DEPOSITS		874.00	
			<b>CHECK TOTAL</b>		<b>874.00</b>	
2266	1118	<b>NYS INCOME TAX BUREAU</b>		<b>04/30/18</b>		
		TA 021	NYS INCOME TAX		33,131.58	
			<b>CHECK TOTAL</b>		<b>33,131.58</b>	
2267	1209	<b>PAYROLL ACCOUNT</b>		<b>04/30/18</b>		
		TA 010	CONSOLIDATED PAYROLL		531,953.83	
			<b>CHECK TOTAL</b>		<b>531,953.83</b>	
2268	2450	<b>OMNI</b>		<b>04/30/18</b>		
		TA 029	EMPLOYEE ANNUITIES		4,082.92	
		TA 029	EMPLOYEE ANNUITIES		1,011.02	
		TA 029	EMPLOYEE ANNUITIES		75.00	
		TA 029	EMPLOYEE ANNUITIES		400.00	
		TA 029	EMPLOYEE ANNUITIES		3,236.13	
		TA 029	EMPLOYEE ANNUITIES		100.00	
		TA 029	EMPLOYEE ANNUITIES		2,910.00	
		TA 029	EMPLOYEE ANNUITIES		16,478.91	
		TA 029	EMPLOYEE ANNUITIES		700.00	
		TA 029	EMPLOYEE ANNUITIES		250.00	
		TA 029	EMPLOYEE ANNUITIES		366.81	
		TA 029	EMPLOYEE ANNUITIES		630.00	
		TA 029	EMPLOYEE ANNUITIES		292.71	
		TA 029	EMPLOYEE ANNUITIES		2,324.38	
			<b>CHECK TOTAL</b>		<b>32,857.88</b>	

## DETAIL WARRANT NUMBER 59 - FUND TA - PR#20 TA DIST 4-30-2018 FOR 04/01/18 - 04/30/18

CHECK#	VENDOR#	VENDOR NAME ACCOUNT CODE	CHECK DESCRIPTION ACCOUNT DESCRIPTION	CHECK DATE PO#	CHECK AMOUNT	LIQUIDATED
909022	321	CORTLAND COUNTY SHERIFF TA 036	COURT ORDER DEPOSITS	04/30/18	75.29	
				CHECK TOTAL	75.29	
909023	655	HCS TEACHERS ASSOCIATION TA 024	ASSOC & UNION DUES/TEACHER	04/30/18	10,175.49	
				CHECK TOTAL	10,175.49	
909024	702	HOMER AIDES/ASSISTANTS ASSOC TA 024.02	ASSOC & UNION DUES/AIDES	04/30/18	1,095.00	
				CHECK TOTAL	1,095.00	
909025	1940	HOMER EDUCATION FOUNDATION TA 085.02	UNITED WAY/HOMER FOUNDATION	04/30/18	28.50	
				CHECK TOTAL	28.50	
909026	898	LOAN UNIT TA 027	TEACHERS RETIREMENT LOANS	04/30/18	8,544.64	
				CHECK TOTAL	8,544.64	
909027	1145	NYSUT MEMBERS BENEFITS TA 019	DISABILITY INSURANCE	04/30/18	1,180.59	
				CHECK TOTAL	1,180.59	
909028	2838	VOTE-COPE TA 085.02	UNITED WAY/HOMER FOUNDATION	04/30/18	96.00	
				CHECK TOTAL	96.00	

DETAIL WARRANT NUMBER 59 - FUND TA - PR#20 TA DIST 4-30-2018 FOR 04/01/18 - 04/30/18

CHECK#	VENDOR#	VENDOR NAME ACCOUNT CODE	CHECK DESCRIPTION ACCOUNT DESCRIPTION	CHECK DATE PO#	CHECK AMOUNT	LIQUIDATED
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NUMBER OF CHECKS 13

WARRANT TOTAL  
VENDOR PORTION

807,457.19  
807,457.19

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 \$ 807,457.19.  
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.

5/13/18  
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 \$ 807,457.19.  
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.

5-17-18  
DATE

[Signature]  
AUDITOR'S SIGNATURE

Claims Auditor  
TITLE