

Batch Description: JUNE 2020 GENERAL FUND INVOICES

Processing Month: 06/2020

<b>Vendor ID: AMAZON</b>	<b>AMAZON</b>	<b>PO Number:</b>	<b>Invoice Number: 3929822</b>	<b>Amount:</b>	<b>136.48</b>
Description: THERMOMETERS		Invoice Date: 06/04/2020	Due Date: 06/04/2020	Status: A	1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>
01 2130 610 000	THERMOMETERS		136.48		N

<b>Vendor ID: ANTESPRIN</b>	<b>ANTELOPE SPRINKLER SYSTEMS</b>	<b>PO Number:</b>	<b>Invoice Number: 3556</b>	<b>Amount:</b>	<b>155.00</b>
Description: SPRING START UP		Invoice Date: 06/04/2020	Due Date: 06/04/2020	Status: A	1099 Amount: 155.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>
01 2630 430 000	SPRING START UP		155.00	155.00	N

<b>Vendor ID: BUILWARE</b>	<b>BUILDERS WAREHOUSE</b>	<b>PO Number:</b>	<b>Invoice Number: 1149028</b>	<b>Amount:</b>	<b>36.96</b>
Description: TAPE & GLUE		Invoice Date: 06/04/2020	Due Date: 06/04/2020	Status: A	1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>
01 2610 610 000	TAPE & GLUE		36.96		N

<b>Vendor ID: CLEAACCT</b>	<b>CLEARING ACCOUNT</b>	<b>PO Number:</b>	<b>Invoice Number: MAY2020</b>	<b>Amount:</b>	<b>124.66</b>
Description: POSTAGE,ZOO VIRTUAL TRIP		Invoice Date: 06/04/2020	Due Date: 06/04/2020	Status: A	1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>
01 2520 531 000	BOOKS RET'D		4.66		N
01 3535 610 002	HENRY DOORLY ZOO TRIP		120.00		N

<b>Vendor ID: EAKEOFC</b>	<b>EAKES OFFICE SOLUTIONS</b>	<b>PO Number:</b>	<b>Invoice Number: 208417</b>	<b>Amount:</b>	<b>194.74</b>
Description: COPIES ON BW PRINTER		Invoice Date: 06/04/2020	Due Date: 06/04/2020	Status: A	1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>
01 1100 610 000	COPIES ON BW PRINTER		194.74		N

<b>Vendor ID: EAKEOFC</b>	<b>EAKES OFFICE SOLUTIONS</b>	<b>PO Number:</b>	<b>Invoice Number: 8013792-0</b>	<b>Amount:</b>	<b>22.92</b>
Description: STORAGE BAG FOR WAXING		Invoice Date: 06/04/2020	Due Date: 06/04/2020	Status: A	1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>
01 2610 610 000	STORAGE BAG FOR WAXING		22.92		N

<b>Vendor ID: ESUCC</b>	<b>ESU COORDINATING COUNCIL</b>	<b>PO Number:</b>	<b>Invoice Number: 51601</b>	<b>Amount:</b>	<b>330.00</b>
Description: SWANK MOTION PICTURE LICENSE		Invoice Date: 06/04/2020	Due Date: 06/04/2020	Status: A	1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>
01 1100 642 000	SWANK MOTION PICTURE LICENSE		330.00		N

<b>Vendor ID: HAPPPUBL</b>	<b>HAPP PUBLISHING</b>	<b>PO Number:</b>	<b>Invoice Number: 562</b>	<b>Amount:</b>	<b>81.70</b>
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**Invoice Listing - Detail**  
Unposted

Description: MAY MINUTES & SPED MTG		Invoice Date: 06/04/2020	Due Date: 06/04/2020	Status: A	1099 Amount: 0.00	
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:		
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
01 2310 540 000	MAY MINUTES & SPED MTG		81.70		N	
<b>Vendor ID: MIDAMER</b>	<b>MID-AMERICAN RESEARCH CHEMICAL</b>	<b>PO Number:</b>	<b>Invoice Number: 0698450-IN</b>	<b>Amount:</b>	<b>3,726.70</b>	
Description: GYM FINISHINGS & SANDSCREEN		Invoice Date: 06/04/2020	Due Date: 06/04/2020	Status: A	1099 Amount: 0.00	
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:		
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
01 2610 610 000	GYM FINISHINGS & SANDSCREEN		3,726.70		N	
<b>Vendor ID: NASB</b>	<b>NASB</b>	<b>PO Number:</b>	<b>Invoice Number: 45799</b>	<b>Amount:</b>	<b>1,500.00</b>	
Description: BOARD DEVL- STRAT. PLAN PARTIAL BILL		Invoice Date: 06/04/2020	Due Date: 06/04/2020	Status: A	1099 Amount: 0.00	
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:		
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
01 2310 340 000	BOARD DEVL- STRAT. PLAN PARTIAL BILL		1,500.00		N	
<b>Vendor ID: NEBRCOUN</b>	<b>NEBRASKA COUNCIL OF SCHOOL ADMINISTRATORS</b>	<b>PO Number:</b>	<b>Invoice Number: 63519</b>	<b>Amount:</b>	<b>75.00</b>	
Description: NASBO VIRTUAL CONV.		Invoice Date: 06/04/2020	Due Date: 06/04/2020	Status: A	1099 Amount: 0.00	
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:		
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
01 2510 810 000	NASBO VIRTUAL CONV.		75.00		N	
<b>Vendor ID: ONTOCOL</b>	<b>ONTOCOLLEGE</b>	<b>PO Number:</b>	<b>Invoice Number: 4186</b>	<b>Amount:</b>	<b>1,600.00</b>	
Description: TEST PREPS		Invoice Date: 06/04/2020	Due Date: 06/04/2020	Status: A	1099 Amount: 0.00	
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:		
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
01 2120 610 001	TEST PREPS		1,600.00		N	
<b>Vendor ID: PLEASLIVES</b>	<b>PLEASANTON LIVESTOCK SERVICE</b>	<b>PO Number:</b>	<b>Invoice Number: 1818</b>	<b>Amount:</b>	<b>140.00</b>	
Description: SOFTNER SALT		Invoice Date: 06/04/2020	Due Date: 06/04/2020	Status: A	1099 Amount: 0.00	
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:		
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
01 2610 610 000	SOFTNER SALT		140.00		N	
<b>Vendor ID: POSTMASTER</b>	<b>POSTMASTER</b>	<b>PO Number:</b>	<b>Invoice Number: PO BOX RENT 2021</b>	<b>Amount:</b>	<b>208.00</b>	
Description: PO BOX RENT		Invoice Date: 06/04/2020	Due Date: 06/04/2020	Status: A	1099 Amount: 0.00	
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:		
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
01 2520 531 000	PO BOX RENT		208.00		N	
<b>Vendor ID: SCHOOLOG</b>	<b>SCHOODOLOGY</b>	<b>PO Number:</b>	<b>Invoice Number: 23191</b>	<b>Amount:</b>	<b>2,647.10</b>	
Description: SUBSCRIPTION 7-1-20=6-31-21		Invoice Date: 06/04/2020	Due Date: 06/04/2020	Status: A	1099 Amount: 0.00	
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:		

**Invoice Listing - Detail**  
Unposted

<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
01 1100 610 001	SUBSCRIPTION 7-1-20=6-31-21		2,647.10		N	
<b>Vendor ID: TEACHINGST      TEACHING STRATEGIES</b>		<b>PO Number:</b>	<b>Invoice Number: Q-80087</b>		<b>Amount: 274.85</b>	
Description: GOLD RENEWAL		Invoice Date: 06/04/2020	Due Date: 06/04/2020	Status: A	1099 Amount: 0.00	
Sequence: 1      Check Type:		Checking Account ID:	Check Number:	Check Date:		
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
01 1190 610 002	GOLD RENEWAL		274.85		N	
<b>Vendor ID: WEISFLOO      WEISSERT HARDWOOD FLORING</b>		<b>PO Number:</b>	<b>Invoice Number: 192</b>		<b>Amount: 242.60</b>	
Description: REPAIRED BOARDS IN GYM FLOOR BY N DOOR		Invoice Date: 06/04/2020	Due Date: 06/04/2020	Status: A	1099 Amount: 0.00	
Sequence: 1      Check Type:		Checking Account ID:	Check Number:	Check Date:		
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
01 2610 430 000	REPAIRED BOARDS IN GYM FLOOR BY N DOOR		242.60		N	
			Batch 1099 Total:	155.00	Batch Total:	11,496.71
Batch Description: MONTHLY INVOICES		Processing Month: 06/2020				
<b>Vendor ID: AXIS      AXIS</b>		<b>PO Number:</b>	<b>Invoice Number: 4657</b>		<b>Amount: 58.60</b>	
Description: Monthly Debit card fee		Invoice Date: 06/04/2020	Due Date: 06/04/2020	Status: A	1099 Amount: 0.00	
Sequence: 1      Check Type:		Checking Account ID:	Check Number:	Check Date:		
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
01 2510 810 000	ADMIN OFFICE DUES/FEES		58.60	0.00	N	
<b>Vendor ID: BLACHILL      BLACK HILLS ENERGY</b>		<b>PO Number:</b>	<b>Invoice Number: MONTHLY</b>		<b>Amount: 954.55</b>	
Description: NAT. GAS		Invoice Date: 06/07/2020	Due Date: 06/15/2020	Status: A	1099 Amount: 0.00	
Sequence: 1      Check Type:		Checking Account ID:	Check Number:	Check Date:		
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
01 2610 621 000	NAT. GAS		954.55	0.00	N	
<b>Vendor ID: DASCENT      DAS STATE ACCOUNTING-CENTRAL FINANCE</b>		<b>PO Number:</b>	<b>Invoice Number: Monthly</b>		<b>Amount: 0.00</b>	
Description: NETWORK PARTICIPATION FEE		Invoice Date: 06/25/2020	Due Date: 06/25/2020	Status: A	1099 Amount: 0.00	
Sequence: 1      Check Type:		Checking Account ID:	Check Number:	Check Date:		
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
01 2580 382 000	NETWORK PARTICIPATION FEE		0.00	0.00	N	
<b>Vendor ID: DAUELMINI      DAUEL MINI-STORAGE</b>		<b>PO Number:</b>	<b>Invoice Number: Monthly</b>		<b>Amount: 38.00</b>	
Description: STORAGE		Invoice Date: 06/21/2020	Due Date: 06/21/2020	Status: A	1099 Amount: 0.00	
Sequence: 1      Check Type:		Checking Account ID:	Check Number:	Check Date:		
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
01 2610 733 000	STORAGE		38.00	0.00	N	
<b>Vendor ID: DCPD      DCPD</b>		<b>PO Number:</b>	<b>Invoice Number: MONTHLY</b>		<b>Amount: 2,874.74</b>	
Description: ELECTRICITY		Invoice Date: 06/21/2020	Due Date: 06/21/2020	Status: A	1099 Amount: 0.00	

**Invoice Listing - Detail**  
Unposted

Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:		
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
01 2610 622 000	ELECTRICITY		2,754.72	0.00	N	
01 2610 622 000	ballfield		38.78	0.00	N	
01 2610 622 000	concessions		34.71	0.00	N	
01 2610 622 000	park lot		46.53	0.00	N	

**Vendor ID: ESU10**      **ESU 10**      **PO Number:**      **Invoice Number: apr2020**      **Amount: 14,246.23**

Description: NOV. SERVICES		Invoice Date: 06/06/2020	Due Date: 06/06/2020	Status: A	1099 Amount: 0.00	
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:		
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
01 2213 330 000	TEACHER TRAININGS		0.00	0.00	N	
01 1200 591 001	VOC EVALS		229.65	0.00	N	
01 3535 610 000	ANNUAL FEE		0.00	0.00	N	
01 2230 591 000	ANNUAL DL SUPPORT FEE		0.00	0.00	N	
01 2151 591 001	DEAF ED SA SEC		147.98	0.00	N	
01 2151 591 002	DEAF ED SA ELEM		147.98	0.00	N	
01 2171 591 001	PT SA SEC		47.02	0.00	N	
01 2171 591 002	PT SA ELEM		47.02	0.00	N	
01 2172 591 002	PT 3-5		188.08	0.00	N	
01 2173 591 002	PT 0-2		188.08	0.00	N	
01 1200 591 001	SPED SUPER SEC		558.90	0.00	N	
01 1200 591 002	SPED SUPER ELEM		558.90	0.00	N	
01 1291 591 002	SPED 3-5		122.46	0.00	N	
01 1292 591 002	SPED B-2		122.46	0.00	N	
01 2161 591 001	OT SA SEC		544.33	0.00	N	
01 2161 591 002	OT SA ELEM		544.33	0.00	N	
01 2162 591 002	OT 3-5		136.08	0.00	N	
01 2163 591 002	OT B-2		136.08	0.00	N	
01 2151 591 001	SPEECH SA SEC		3,286.45	0.00	N	
01 2151 591 002	SPEECH SA ELEM		3,510.53	0.00	N	
01 2152 591 002	SPEECH 3-5		597.54	0.00	N	
01 2153 591 002	SPEECH 0-2		74.69	0.00	N	
01 2181 591 001	VISION SA SEC		77.27	0.00	N	
01 2181 591 002	VISION SA ELEM		77.27	0.00	N	
01 2141 591 001	PSYCH SA SEC		1,119.56	0.00	N	
01 2141 591 002	PSYCH SA ELEM		1,119.56	0.00	N	
01 2142 591 002	PSYCH 3-5		279.89	0.00	N	
01 2143 591 002	PSYCH 0-2		279.89	0.00	N	
01 2151 591 001	AUDIO SA SEC		8.30	0.00	N	
01 2151 591 002	AUDIO SA ELEM		8.30	0.00	N	
01 2152 591 002	AUDIO 3-5		33.19	0.00	N	
01 2153 591 002	AUDIO B-2		33.19	0.00	N	

01 2230 432 000	Computer repair	21.25	0.00 N
01 2190 610 001	quiz bowl meals	0.00	0.00 N

<b>Vendor ID: FRONTIER</b>	<b>FRONTIER</b>	<b>PO Number:</b>	<b>Invoice Number: MONTHLY</b>	<b>Amount: 276.74</b>
Description: TELEPHONE		Invoice Date: 06/21/2020	Due Date: 06/21/2020	Status: A 1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u> 1099 <u>Detail Amount</u>	<u>Asset/Asset Tag</u>
01 2580 382 000	PHONE		276.74	0.00 N

<b>Vendor ID: HOMELEAS</b>	<b>HOMETOWN LEASING</b>	<b>PO Number:</b>	<b>Invoice Number: MONTHLY</b>	<b>Amount: 519.97</b>
Description: COPIER LEASE		Invoice Date: 06/21/2020	Due Date: 06/21/2020	Status: A 1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u> 1099 <u>Detail Amount</u>	<u>Asset/Asset Tag</u>
01 2530 443 000	LEASE		519.97	0.00 N

<b>Vendor ID: HUNTCLEA</b>	<b>HUNTER CLEANING SERVICE, INC</b>	<b>PO Number:</b>	<b>Invoice Number: MONTHLY</b>	<b>Amount: 7,600.00</b>
Description: CLEANING SERVICE		Invoice Date: 06/21/2020	Due Date: 06/21/2020	Status: A 1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u> 1099 <u>Detail Amount</u>	<u>Asset/Asset Tag</u>
01 2610 420 000	CLEANING		7,600.00	0.00 N

<b>Vendor ID: PLUNKETT</b>	<b>PLUNKETT'S</b>	<b>PO Number:</b>	<b>Invoice Number: 6665933</b>	<b>Amount: 60.00</b>
Description: MONTHLY PEST SERVICE		Invoice Date: 06/05/2020	Due Date: 06/05/2020	Status: A 1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u> 1099 <u>Detail Amount</u>	<u>Asset/Asset Tag</u>
01 2610 431 000	MONTHLY PEST SERVICE		60.00	0.00 N

<b>Vendor ID: RAVESANI</b>	<b>RAVENNA SANITATION</b>	<b>PO Number:</b>	<b>Invoice Number: MONTHLY</b>	<b>Amount: 213.50</b>
Description: GARBAGE		Invoice Date: 06/21/2020	Due Date: 06/21/2020	Status: A 1099 Amount: 213.50
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u> 1099 <u>Detail Amount</u>	<u>Asset/Asset Tag</u>
01 2610 410 000	GARBAGE		213.50	213.50 N

<b>Vendor ID: TMS</b>	<b>TIME MANAGEMENT SYSTEMS</b>	<b>PO Number:</b>	<b>Invoice Number: 237527</b>	<b>Amount: 62.70</b>
Description: MONTHLY CONTRACT FOR TIME MGT		Invoice Date: 06/10/2020	Due Date: 06/10/2020	Status: A 1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u> 1099 <u>Detail Amount</u>	<u>Asset/Asset Tag</u>
01 2510 643 000	MONTHLY FEE		62.70	0.00 N

<b>Vendor ID: VILLAPLEAS</b>	<b>VILLAGE OF PLEASANTON</b>	<b>PO Number:</b>	<b>Invoice Number: MONTHLY</b>	<b>Amount: 477.00</b>
Description: WATER		Invoice Date: 06/21/2020	Due Date: 06/21/2020	Status: A 1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u> 1099 <u>Detail Amount</u>	<u>Asset/Asset Tag</u>
01 2610 410 000	WATER school		477.00	0.00 N

**Invoice Listing - Detail**  
Unposted

**Vendor ID: WEBELAWN WEBER LAWN SERVICE, INC**

**PO Number:** **Invoice Number: 6390** **Amount: 951.86**

Description: Aprill mow and treatments

Invoice Date: 06/04/2020 Due Date: 06/04/2020 Status: A 1099 Amount: 0.00

Sequence: 1 Check Type: Checking Account ID:

Check Number: Check Date:

Chart of Account Number Detail Description

Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag In Full

01 2630 420 000 Aprill mow and treatments

951.86 0.00 N

Batch 1099 Total: 213.50 Batch Total: 28,333.89

Report 1099 Total: 368.50 Report Total: 39,830.60