

Batch Description: MONTHLY INVOICES

Processing Month: 11/2019

<b>Vendor ID: AXIS</b>	<b>AXIS</b>	<b>PO Number:</b>	<b>Invoice Number: 4226</b>	<b>Amount:</b>	<b>58.60</b>
Description: Monthly Debit card fee		Invoice Date: 11/04/2019	Due Date: 11/04/2019	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 2510 810 000	ADMIN OFFICE DUES/FEES		58.60	0.00	N

<b>Vendor ID: BLACHILL</b>	<b>BLACK HILLS ENERGY</b>	<b>PO Number:</b>	<b>Invoice Number: MONTHLY</b>	<b>Amount:</b>	<b>1,014.52</b>
Description: NAT. GAS		Invoice Date: 11/07/2019	Due Date: 11/15/2019	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 621 000	NAT. GAS		1,014.52	0.00	N

<b>Vendor ID: DASCENT</b>	<b>DAS STATE ACCOUNTING-CENTRAL FINANCE</b>	<b>PO Number:</b>	<b>Invoice Number: Monthly09 &amp; 10</b>	<b>Amount:</b>	<b>458.64</b>
Description: NETWORK PARTICIPATION FEE		Invoice Date: 10/25/2019	Due Date: 10/25/2019	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 2580 382 000	NETWORK PARTICIPATION FEE		458.64	0.00	N

<b>Vendor ID: DAUELMINI</b>	<b>DAUEL MINI-STORAGE</b>	<b>PO Number:</b>	<b>Invoice Number: Monthly</b>	<b>Amount:</b>	<b>38.00</b>
Description: STORAGE		Invoice Date: 11/21/2019	Due Date: 11/21/2019	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 733 000	STORAGE		38.00	0.00	N

<b>Vendor ID: DCPD</b>	<b>DCPPD</b>	<b>PO Number:</b>	<b>Invoice Number: MONTHLY</b>	<b>Amount:</b>	<b>4,315.00</b>
Description: ELECTRICITY		Invoice Date: 11/21/2019	Due Date: 11/21/2019	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 622 000	ELECTRICITY		4,139.31	0.00	N
01 2610 622 000	ballfield		80.64	0.00	N
01 2610 622 000	concessions		52.45	0.00	N
01 2610 622 000	park lot		42.60	0.00	N

<b>Vendor ID: FRONTIER</b>	<b>FRONTIER</b>	<b>PO Number:</b>	<b>Invoice Number: MONTHLY</b>	<b>Amount:</b>	<b>271.63</b>
Description: TELEPHONE		Invoice Date: 11/21/2019	Due Date: 11/21/2019	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 2580 382 000	PHONE		271.63	0.00	N

<b>Vendor ID: HOMELEAS</b>	<b>HOMETOWN LEASING</b>	<b>PO Number:</b>	<b>Invoice Number: MONTHLY</b>	<b>Amount:</b>	<b>519.97</b>
Description: COPIER LEASE		Invoice Date: 11/21/2019	Due Date: 11/21/2019	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 2530 443 000	LEASE		519.97	0.00	N

**Vendor ID: HUNTCLEA HUNTER CLEANING SERVICE, INC** **PO Number:** **Invoice Number: MONTHLY** **Amount: 7,600.00**  
 Description: CLEANING SERVICE Invoice Date: 11/21/2019 Due Date: 11/21/2019 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 2610 420 000 CLEANING 7,600.00 0.00 N

**Vendor ID: PLUNKETT PLUNKETT'S** **PO Number:** **Invoice Number: 6443211** **Amount: 125.00**  
 Description: MONTHLY PEST SERVICE Invoice Date: 11/05/2019 Due Date: 11/05/2019 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 2610 431 000 MONTHLY PEST SERVICE 125.00 N

**Vendor ID: RAVESANI RAVENNA SANITATION** **PO Number:** **Invoice Number: MONTHLY** **Amount: 213.50**  
 Description: GARBAGE Invoice Date: 11/21/2019 Due Date: 11/21/2019 Status: A 1099 Amount: 213.50  
 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 2610 410 000 GARBAGE 213.50 213.50 N

**Vendor ID: TMS TIME MANAGEMENT SYSTEMS** **PO Number:** **Invoice Number: 227624** **Amount: 62.70**  
 Description: MONTHLY CONTRACT FOR TIME MGT Invoice Date: 11/10/2019 Due Date: 11/10/2019 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 2510 643 000 MONTHLY FEE 62.70 0.00 N

**Vendor ID: VILLAPLEAS VILLAGE OF PLEASANTON** **PO Number:** **Invoice Number: MONTHLY** **Amount: 741.40**  
 Description: WATER Invoice Date: 11/21/2019 Due Date: 11/21/2019 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 2610 410 000 WATER school 553.00 0.00 N  
 01 2610 410 000 Water Conc 26.00 0.00 N  
 01 2610 410 000 Water Field 162.40 0.00 N

**Vendor ID: WEBELAWN WEBER LAWN SERVICE, INC** **PO Number:** **Invoice Number: 5948** **Amount: 0.00**  
 Description: Mow Sept & 4th app. Invoice Date: 11/04/2019 Due Date: 11/04/2019 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 Mow Sept & 4th app. 0.00 0.00 N

Batch 1099 Total: 213.50 Batch Total: 15,418.96

Batch Description: NOVEMBER 2019 GENERAL FUND INVOICES

Processing Month: 11/2019

**Vendor ID: AMAZON AMAZON** **PO Number:** **Invoice Number: 0638629** **Amount: 12.18**  
 Description: Chair leg covers Invoice Date: 11/06/2019 Due Date: 11/06/2019 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 2610 610 000	Chair leg covers		12.18		N	
<b>Vendor ID: AMAZON      AMAZON</b>		<b>PO Number: 19-20-0041</b>	<b>Invoice Number: 0661055</b>		<b>Amount: 40.47</b>	
Description: Tech supplies		Invoice Date: 11/06/2019	Due Date: 11/06/2019	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 2230 650 000	USB-C USB Adapters 2 packs		19.98		N	Final
01 2230 650 000	HDMI Cable		20.49		N	Final
<b>Vendor ID: AMAZON      AMAZON</b>		<b>PO Number:</b>	<b>Invoice Number: 33783054</b>		<b>Amount: 17.08</b>	
Description: Med cups & Bandages		Invoice Date: 11/06/2019	Due Date: 11/06/2019	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 2130 610 000	Med cups & Bandages		17.08		N	
<b>Vendor ID: AMAZON      AMAZON</b>		<b>PO Number:</b>	<b>Invoice Number: 4055402</b>		<b>Amount: 210.90</b>	
Description: soap		Invoice Date: 11/06/2019	Due Date: 11/06/2019	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	soap		210.90		N	
<b>Vendor ID: AMAZON      AMAZON</b>		<b>PO Number:</b>	<b>Invoice Number: 4188248</b>		<b>Amount: 13.77</b>	
Description: Thermo caps		Invoice Date: 11/06/2019	Due Date: 11/06/2019	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 2130 610 000	Thermo caps		13.77		N	
<b>Vendor ID: APPLCOMP      APPLE COMPUTER, INC</b>		<b>PO Number: 19-20-0029</b>	<b>Invoice Number: AB03781811</b>		<b>Amount: 399.00</b>	
Description: iPad for 7-12 SPed student		Invoice Date: 11/06/2019	Due Date: 11/06/2019	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 1200 610 001	iPad		399.00		N	Final
<b>Vendor ID: AXMAHEAT      AXMANN HEATING &amp; AIR</b>		<b>PO Number:</b>	<b>Invoice Number: 6499</b>		<b>Amount: 880.27</b>	
Description: OCT. BOILER PUMP		Invoice Date: 11/06/2019	Due Date: 11/06/2019	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	OCT. BOILER PUMP		880.27		N	
<b>Vendor ID: CLEAACCT      CLEARING ACCOUNT</b>		<b>PO Number:</b>	<b>Invoice Number: OCT2019</b>		<b>Amount: 92.05</b>	
Description: STAMPS,		Invoice Date: 11/06/2019	Due Date: 11/06/2019	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	STAMPS,		92.05		N	

**Invoice Listing - Detail**  
Unposted

<b>Vendor ID: NOVUS</b>	<b>DAVID SATTLER</b>	<b>PO Number:</b>	<b>Invoice Number: 51451</b>	<b>Amount:</b>	<b>50.00</b>
Description: bus 18 2 breaks		Invoice Date: 11/06/2019	Due Date: 11/06/2019	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 2730 430 000	bus 18 2 breaks		50.00		N
<b>Vendor ID: NOVUS</b>	<b>DAVID SATTLER</b>	<b>PO Number:</b>	<b>Invoice Number: 61514</b>	<b>Amount:</b>	<b>45.00</b>
Description: bus 11 repair also		Invoice Date: 11/06/2019	Due Date: 11/06/2019	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 2730 430 000	bus 11 repair also		45.00		N
<b>Vendor ID: NOVUS</b>	<b>DAVID SATTLER</b>	<b>PO Number:</b>	<b>Invoice Number: 61538</b>	<b>Amount:</b>	<b>45.00</b>
Description: bus 11 repair		Invoice Date: 11/06/2019	Due Date: 11/06/2019	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 2730 430 000	bus 11 repair		45.00		N
<b>Vendor ID: NOVUS</b>	<b>DAVID SATTLER</b>	<b>PO Number:</b>	<b>Invoice Number: 61543</b>	<b>Amount:</b>	<b>45.00</b>
Description: bus Windshield repair (blue bird)		Invoice Date: 11/06/2019	Due Date: 11/06/2019	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 2730 430 000	bus Windshield repair (blue bird)		45.00		N
<b>Vendor ID: EAKEOFC</b>	<b>EAKES OFFICE SOLUTIONS</b>	<b>PO Number:</b>	<b>Invoice Number: 7879003-0</b>	<b>Amount:</b>	<b>244.56</b>
Description: PAPER PRODUCTS		Invoice Date: 11/06/2019	Due Date: 11/06/2019	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	PAPER PRODUCTS		244.56		N
<b>Vendor ID: EAKEOFC</b>	<b>EAKES OFFICE SOLUTIONS</b>	<b>PO Number:</b>	<b>Invoice Number: 7884102-0</b>	<b>Amount:</b>	<b>37.26</b>
Description: SCOTT TOWEL		Invoice Date: 11/06/2019	Due Date: 11/06/2019	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	SCOTT TOWEL		37.26		N
<b>Vendor ID: EAKEOFC</b>	<b>EAKES OFFICE SOLUTIONS</b>	<b>PO Number:</b>	<b>Invoice Number: 7889633-0</b>	<b>Amount:</b>	<b>135.85</b>
Description: ICE MELT		Invoice Date: 11/06/2019	Due Date: 11/06/2019	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	ICE MELT		135.85		N
<b>Vendor ID: EAKEOFC</b>	<b>EAKES OFFICE SOLUTIONS</b>	<b>PO Number:</b>	<b>Invoice Number: 7892101-0</b>	<b>Amount:</b>	<b>272.67</b>
Description: TRASH BAGS & BATH TISSUE		Invoice Date: 11/06/2019	Due Date: 11/06/2019	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 2610 610 000	TRASH BAGS & BATH TISSUE		272.67		N	

**Vendor ID: EAKEOFC EAKES OFFICE SOLUTIONS**

**PO Number:** **Invoice Number: INV165824** **Amount: 2,350.17**

Description: COLOR COPIER COPIES CHRGS Invoice Date: 11/06/2019 Due Date: 11/06/2019 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 1100 610 000	COLOR COPIER COPIES CHRGS		2,350.17		N	

**Vendor ID: ESU10 ESU 10**

**PO Number:** **Invoice Number: Oct2019** **Amount: 27,896.58**

Description: Services in October Invoice Date: 11/06/2019 Due Date: 11/06/2019 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	Tech Training		25.00		N	
01 2151 591 001	Speech SA Sec		6,035.11		N	
01 2151 591 002	Speech SA elem		823.15		N	
01 6408 591 002	Speech SA elem		5,760.60		N	
01 6408 591 002	Speech 3-4		960.13		N	
01 6408 591 002	Speech B-2		137.16		N	
01 6408 591 001	Deaf Ed Sec		322.53		N	
01 6408 591 002	Deaf Ed Elem		322.53		N	
01 6408 591 001	Audio Sec		71.95		N	
01 6408 591 002	Adio Elem		71.95		N	
01 6408 591 002	Audio 3-4		17.99		N	
01 6408 591 002	Audio B-2		17.99		N	
01 6408 591 001	OT Sec		1,101.05		N	
01 6408 591 002	OT Elem		1,101.05		N	
01 6408 591 002	OT 3-4		275.26		N	
01 6408 591 002	OT B-2		275.26		N	
01 6408 591 001	PT Sec		364.05		N	
01 6408 591 002	PT Elem		364.05		N	
01 6408 591 002	PT 3-4		91.01		N	
01 6408 591 002	PT B-2		91.01		N	
01 6408 591 001	Psych Sec		2,514.20		N	
01 6408 591 002	Psych ELEM		2,514.20		N	
01 6408 591 002	Psych 3-4		628.55		N	
01 6408 591 002	Psych B-2		628.55		N	
01 6408 591 001	Vision Sec		162.10		N	
01 6408 591 002	Vision Elem		162.10		N	
01 6408 591 001	Sped Super Sec		1,057.79		N	
01 6408 591 002	Sped Super Elem		1,057.79		N	
01 6408 591 002	Sped Super 3-4		224.62		N	
01 6408 591 002	Sped Super B-2		224.62		N	

01 6408 591 001	Voc Sec	448.23	N
01 2213 330 000	Workshop	45.00	N

<b>Vendor ID: FIRSCARE</b>	<b>FIRST CARE MEDICAL P.C. OF KEARNEY</b>	<b>PO Number:</b>	<b>Invoice Number: RB 00057</b>	<b>Amount: 175.00</b>
Description: RB Bus physical		Invoice Date: 11/06/2019	Due Date: 11/06/2019	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>
01 2710 890 000	RB Bus physical		175.00	N

<b>Vendor ID: FLINSCIE</b>	<b>FLINN SCIENTIFIC INC</b>	<b>PO Number: 18-19-0163</b>	<b>Invoice Number: 2378965</b>	<b>Amount: 52.15</b>
Description: nutrient agar		Invoice Date: 11/06/2019	Due Date: 11/06/2019	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>
01 1100 610 001	Molecular Model Set, 1" atoms		0.00	N
01 1100 610 001	Buret Brush, 50 mL		0.00	N
01 1100 610 001	Brush, Cylinder (pk of 3)		0.00	N
01 1100 610 001	Test tube brush (pk of 12)		0.00	N
01 1100 610 001	Flask BrusK, 250 mL size, (pack of 3)		0.00	N
01 1100 610 001	Allium Mitosis slide, Quad stain		0.00	N
01 1100 610 001	Nutrient Agar (23g packet, 1 L package)		12.25	N
01 1100 610 001	Pentane, 100 mL		0.00	N
01 1100 610 001	Sodium Hydroxide, 500 mL, 3 Molar		0.00	N
01 1100 610 001	Stethoscope, Ford		39.90	0.00 N
01 1100 610 001	Blood Typing Serum, A, B and Rh		0.00	N
01 1100 610 001	Blood Typing Slides		0.00	N
01 1100 610 001	Lancets, Spring Loaded		0.00	N
01 1100 610 001	C-Spectra Sheet		0.00	N

<b>Vendor ID: FLINSCIE</b>	<b>FLINN SCIENTIFIC INC</b>	<b>PO Number: 19-20-0046</b>	<b>Invoice Number: 2421858</b>	<b>Amount: 50.85</b>
Description: SCIENCE WEIGHING DISHES FOR CHEMICALS		Invoice Date: 11/06/2019	Due Date: 11/06/2019	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>
01 1100 610 001	3 1/16 x 3 1/16 weighing dishes (pack o		36.90	N
01 1100 610 001	shipping		13.95	N

<b>Vendor ID: HANDMACH</b>	<b>HAND MACHINING COMPANY</b>	<b>PO Number:</b>	<b>Invoice Number: 67700</b>	<b>Amount: 14.73</b>
Description: shipping tests		Invoice Date: 11/06/2019	Due Date: 11/06/2019	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>
01 2190 610 001	ups PSAT test		14.73	N

<b>Vendor ID: HANDMACH</b>	<b>HAND MACHINING COMPANY</b>	<b>PO Number:</b>	<b>Invoice Number: 67786</b>	<b>Amount: 8.08</b>
Description: square tubing for shop		Invoice Date: 11/06/2019	Due Date: 11/06/2019	Status: A 1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:

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<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 610 001 005	square tubing for shop		8.08		N	
<b>Vendor ID: HEARELEC HEARTLAND ELECTRIC</b>		<b>PO Number:</b>	<b>Invoice Number: 7002924</b>		<b>Amount: 615.56</b>	
Description: Parking lot pole lights		Invoice Date: 11/06/2019	Due Date: 11/06/2019	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 350 000	Parking lot pole lights		615.56		N	
<b>Vendor ID: KSBLAW KSB LAW</b>		<b>PO Number:</b>	<b>Invoice Number: 6696</b>		<b>Amount: 335.00</b>	
Description: Contract questions		Invoice Date: 11/06/2019	Due Date: 11/06/2019	Status: A	1099 Amount: 335.00	
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 317 000	Contract questions		335.00	335.00	N	
<b>Vendor ID: KULLYPIPES KULLY PIPE &amp; STEEL</b>		<b>PO Number: 19-20-0023</b>	<b>Invoice Number: 1155375</b>		<b>Amount: 787.51</b>	
Description: Propane Tank guard railings		Invoice Date: 11/06/2019	Due Date: 11/06/2019	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	4" pipe		621.84		N	Incomplete
01 2610 610 000	18 g. sheet		26.35		N	
01 2610 610 000	1x1 sq tubing		139.32		N	
<b>Vendor ID: LAKESHOR LAKESHORE</b>		<b>PO Number: 19-20-0040</b>	<b>Invoice Number: 2671481019</b>		<b>Amount: 160.96</b>	
Description: Elem sped supplies		Invoice Date: 11/06/2019	Due Date: 11/06/2019	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 1200 610 002	9 x 11 laminating sheets		59.98		N	Final
01 1200 610 002	11 X 17 laminating sheets		49.99		N	Final
01 1200 610 002	Touch & Read CVC Word match		29.99		N	Final
01 1200 610 002	shipping		21.00		N	
<b>Vendor ID: LOUPVALL LOUP VALLEY LIGHTING, INC</b>		<b>PO Number:</b>	<b>Invoice Number: 19-13880</b>		<b>Amount: 490.59</b>	
Description: Lightbulbs		Invoice Date: 11/06/2019	Due Date: 11/06/2019	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	Lightbulbs		490.59		N	
<b>Vendor ID: MATHESON MATHESON TRIGAS</b>		<b>PO Number:</b>	<b>Invoice Number: 20548611</b>		<b>Amount: 201.53</b>	
Description: Welding supplies		Invoice Date: 11/06/2019	Due Date: 11/06/2019	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 1100 610 001 005	Welding supplies		201.53		N	
<b>Vendor ID: MATHESON MATHESON TRIGAS</b>		<b>PO Number:</b>	<b>Invoice Number: 51537515</b>		<b>Amount: 52.16</b>	

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Description: Carbon Diox and C-25 for welding class  
Sequence: 1 Check Type: Checking Account ID:  
Chart of Account Number Detail Description  
01 1100 610 001 005 Carbon Diox and C-25 for welding class

Invoice Date: 11/06/2019 Due Date: 11/06/2019 Status: A 1099 Amount: 0.00  
Check Number: Check Date:  
Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag In Full  
52.16 N

**Vendor ID: MENARDS MENARDS**  
Description: Tape, bolts  
Sequence: 1 Check Type: Checking Account ID:  
Chart of Account Number Detail Description  
01 2610 610 000 Tape, bolts

**PO Number: Invoice Number: 89559 Amount: 65.73**  
Invoice Date: 11/06/2019 Due Date: 11/06/2019 Status: A 1099 Amount: 0.00  
Check Number: Check Date:  
Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag In Full  
65.73 N

**Vendor ID: MENARDS MENARDS**  
Description: WOOD  
Sequence: 1 Check Type: Checking Account ID:  
Chart of Account Number Detail Description  
01 2610 610 000 WOOD

**PO Number: Invoice Number: 91016 Amount: 31.87**  
Invoice Date: 11/06/2019 Due Date: 11/06/2019 Status: A 1099 Amount: 0.00  
Check Number: Check Date:  
Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag In Full  
31.87 N

**Vendor ID: NESAFECEN NEBRASKA SAFETY CENTER @ UNK**  
Description: DEANS CLASSES  
Sequence: 1 Check Type: Checking Account ID:  
Chart of Account Number Detail Description  
01 2710 330 000 DEANS CLASSES

**PO Number: Invoice Number: 57-7076BUS Amount: 200.00**  
Invoice Date: 11/06/2019 Due Date: 11/06/2019 Status: A 1099 Amount: 0.00  
Check Number: Check Date:  
Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag In Full  
200.00 N

**Vendor ID: NICHREPA NICHOLS REPAIR**  
Description: van clear codes  
Sequence: 1 Check Type: Checking Account ID:  
Chart of Account Number Detail Description  
01 2730 430 000 van clear codes

**PO Number: Invoice Number: 31850 Amount: 42.20**  
Invoice Date: 11/06/2019 Due Date: 11/06/2019 Status: A 1099 Amount: 0.00  
Check Number: Check Date:  
Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag In Full  
42.20 N

**Vendor ID: NICHREPA NICHOLS REPAIR**  
Description: 01 bus removed mirrors, tires, stop sign  
Sequence: 1 Check Type: Checking Account ID:  
Chart of Account Number Detail Description  
01 2730 430 000 01 bus removed mirrors, tires, stop sign

**PO Number: Invoice Number: 31854 Amount: 284.85**  
Invoice Date: 11/06/2019 Due Date: 11/06/2019 Status: A 1099 Amount: 0.00  
Check Number: Check Date:  
Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag In Full  
284.85 N

**Vendor ID: NICHREPA NICHOLS REPAIR**  
Description: bus 11 lights  
Sequence: 1 Check Type: Checking Account ID:  
Chart of Account Number Detail Description  
01 2730 430 000 bus 11 lights

**PO Number: Invoice Number: 31918 Amount: 52.08**  
Invoice Date: 11/06/2019 Due Date: 11/06/2019 Status: A 1099 Amount: 0.00  
Check Number: Check Date:  
Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag In Full  
52.08 N

**Vendor ID: NICHREPA NICHOLS REPAIR**  
Description: 08 bus mirrors and head lights  
Sequence: 1 Check Type: Checking Account ID:  
Chart of Account Number Detail Description

**PO Number: Invoice Number: 31928 Amount: 47.93**  
Invoice Date: 11/06/2019 Due Date: 11/06/2019 Status: A 1099 Amount: 0.00  
Check Number: Check Date:  
Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag In Full



01 2730 430 000                      08 bus mirrors and head lights                      47.93                      N

**Vendor ID: NICHREPA                      NICHOLS REPAIR                      PO Number:                      Invoice Number: 31970                      Amount:                      48.80**  
 Description: bus 08 repairs/ light and mirror                      Invoice Date: 11/06/2019                      Due Date: 11/06/2019                      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 2730 430 000                      bus 08 repairs/ light and mirror                      48.80                      N

**Vendor ID: NRCSA                      NRCSA                      PO Number:                      Invoice Number: 2019-20                      Amount:                      850.00**  
 Description: 19-20 MEMBERSHIP                      Invoice Date: 11/06/2019                      Due Date: 11/06/2019                      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 2310 810 000                      19-20 MEMBERSHIP                      850.00                      N

**Vendor ID: PLEAIRRI                      PLEASANTON IRRIGATION INC                      PO Number:                      Invoice Number: 77464                      Amount:                      27.60**  
 Description: Supplies                      Invoice Date: 11/06/2019                      Due Date: 11/06/2019                      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 2610 610 000                      Supplies                      27.60                      N

**Vendor ID: PLEALUNC                      PLEASANTON SCHOOL LUNCH                      PO Number:                      Invoice Number: oct2019                      Amount:                      283.00**  
 Description: prek Snacks                      Invoice Date: 11/06/2019                      Due Date: 11/06/2019                      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 1190 610 002                      prek Snacks                      283.00                      N

**Vendor ID: PROMETHE                      PROMETHEAN, INC                      PO Number: 19-20-0033                      Invoice Number: 200/60225779                      Amount:                      196.00**  
 Description: projector for promethean board                      Invoice Date: 11/06/2019                      Due Date: 11/06/2019                      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 1200 610 002                      PRM-30A Projector                      180.00                      N                      Final  
 01 1200 610 002                      delivery                      16.00                      N                      Final

**Vendor ID: RIVERSTOP                      RIVER STOP LLC                      PO Number:                      Invoice Number: 1158406                      Amount:                      12.38**  
 Description: exhaust fluid                      Invoice Date: 11/06/2019                      Due Date: 11/06/2019                      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 2730 430 000                      exhaust fluid                      12.38                      N

**Vendor ID: RIVERSTOP                      RIVER STOP LLC                      PO Number:                      Invoice Number: 1158984                      Amount:                      85.39**  
 Description: Diesel                      Invoice Date: 11/06/2019                      Due Date: 11/06/2019                      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 2710 626 000                      Diesel                      85.39                      N

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<b>Vendor ID: RIVERSTOP</b>	<b>RIVER STOP LLC</b>	<b>PO Number:</b>	<b>Invoice Number: 1159475</b>	<b>Amount:</b>	<b>6.19</b>
Description: exhaust fluid		Invoice Date: 11/06/2019	Due Date: 11/06/2019	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 2730 430 000	exhaust fluid		6.19		N
<b>Vendor ID: RIVERSTOP</b>	<b>RIVER STOP LLC</b>	<b>PO Number:</b>	<b>Invoice Number: 1160474</b>	<b>Amount:</b>	<b>18.15</b>
Description: gas		Invoice Date: 11/06/2019	Due Date: 11/06/2019	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 2710 626 000	gas		18.15		N
<b>Vendor ID: RIVERSTOP</b>	<b>RIVER STOP LLC</b>	<b>PO Number:</b>	<b>Invoice Number: 1160957</b>	<b>Amount:</b>	<b>50.35</b>
Description: gas		Invoice Date: 11/06/2019	Due Date: 11/06/2019	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 2710 626 000	gas		50.35		N
<b>Vendor ID: RIVERSTOP</b>	<b>RIVER STOP LLC</b>	<b>PO Number:</b>	<b>Invoice Number: 1163120</b>	<b>Amount:</b>	<b>12.38</b>
Description: Diesel exh fluid		Invoice Date: 11/06/2019	Due Date: 11/06/2019	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 2730 430 000	Diesel exh fluid		12.38		N
<b>Vendor ID: RIVERSTOP</b>	<b>RIVER STOP LLC</b>	<b>PO Number:</b>	<b>Invoice Number: 1164353</b>	<b>Amount:</b>	<b>18.19</b>
Description: Diesel treatment		Invoice Date: 11/06/2019	Due Date: 11/06/2019	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 2710 626 000	Diesel treatment		18.19		N
<b>Vendor ID: RIVERSTOP</b>	<b>RIVER STOP LLC</b>	<b>PO Number:</b>	<b>Invoice Number: 1165775</b>	<b>Amount:</b>	<b>12.38</b>
Description: Exhaust fluid		Invoice Date: 11/06/2019	Due Date: 11/06/2019	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 2730 430 000	Exhaust fluid		12.38		N
<b>Vendor ID: RIVERSTOP</b>	<b>RIVER STOP LLC</b>	<b>PO Number:</b>	<b>Invoice Number: 217</b>	<b>Amount:</b>	<b>35.97</b>
Description: gas		Invoice Date: 11/06/2019	Due Date: 11/06/2019	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 2710 626 000	gas		35.97		N
<b>Vendor ID: RIVERSTOP</b>	<b>RIVER STOP LLC</b>	<b>PO Number:</b>	<b>Invoice Number: 341</b>	<b>Amount:</b>	<b>47.12</b>
Description: gas		Invoice Date: 11/06/2019	Due Date: 11/06/2019	Status: A	1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:	

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<u>Chart of Account Number</u> 01 2710 626 000	<u>Detail Description</u> gas	<u>Cost Center ID</u>	<u>Detail Amount</u> 47.12	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u> N	<u>In Full</u>		
<b>Vendor ID: RIVERSTOP</b>	<b>RIVER STOP LLC</b>	<b>PO Number:</b>	<b>Invoice Number: 7997</b>		<b>Amount:</b>	<b>59.23</b>		
Description: gas		Invoice Date: 11/06/2019	Due Date: 11/06/2019	Status: A	1099 Amount: 0.00			
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:				
<u>Chart of Account Number</u> 01 2710 626 000	<u>Detail Description</u> gas	<u>Cost Center ID</u>	<u>Detail Amount</u> 59.23	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u> N	<u>In Full</u>		
<b>Vendor ID: RIVERSTOP</b>	<b>RIVER STOP LLC</b>	<b>PO Number:</b>	<b>Invoice Number: 7998</b>		<b>Amount:</b>	<b>114.42</b>		
Description: Diesel		Invoice Date: 11/06/2019	Due Date: 11/06/2019	Status: A	1099 Amount: 0.00			
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:				
<u>Chart of Account Number</u> 01 2710 626 000	<u>Detail Description</u> Diesel	<u>Cost Center ID</u>	<u>Detail Amount</u> 114.42	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u> N	<u>In Full</u>		
<b>Vendor ID: RIVERSTOP</b>	<b>RIVER STOP LLC</b>	<b>PO Number:</b>	<b>Invoice Number: 8009</b>		<b>Amount:</b>	<b>207.80</b>		
Description: Diesel		Invoice Date: 11/06/2019	Due Date: 11/06/2019	Status: A	1099 Amount: 0.00			
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:				
<u>Chart of Account Number</u> 01 2710 626 000	<u>Detail Description</u> Diesel	<u>Cost Center ID</u>	<u>Detail Amount</u> 207.80	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u> N	<u>In Full</u>		
<b>Vendor ID: RIVERSTOP</b>	<b>RIVER STOP LLC</b>	<b>PO Number:</b>	<b>Invoice Number: 8015</b>		<b>Amount:</b>	<b>74.51</b>		
Description: diesel		Invoice Date: 11/06/2019	Due Date: 11/06/2019	Status: A	1099 Amount: 0.00			
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:				
<u>Chart of Account Number</u> 01 2710 626 000	<u>Detail Description</u> diesel	<u>Cost Center ID</u>	<u>Detail Amount</u> 74.51	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u> N	<u>In Full</u>		
<b>Vendor ID: RIVERSTOP</b>	<b>RIVER STOP LLC</b>	<b>PO Number:</b>	<b>Invoice Number: 8021</b>		<b>Amount:</b>	<b>53.84</b>		
Description: Gas		Invoice Date: 11/06/2019	Due Date: 11/06/2019	Status: A	1099 Amount: 0.00			
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:				
<u>Chart of Account Number</u> 01 2710 626 000	<u>Detail Description</u> Gas	<u>Cost Center ID</u>	<u>Detail Amount</u> 53.84	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u> N	<u>In Full</u>		
<b>Vendor ID: RIVERSTOP</b>	<b>RIVER STOP LLC</b>	<b>PO Number:</b>	<b>Invoice Number: 8024</b>		<b>Amount:</b>	<b>206.74</b>		
Description: Diesel		Invoice Date: 11/06/2019	Due Date: 11/06/2019	Status: A	1099 Amount: 0.00			
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:				
<u>Chart of Account Number</u> 01 2710 626 000	<u>Detail Description</u> Diesel	<u>Cost Center ID</u>	<u>Detail Amount</u> 206.74	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u> N	<u>In Full</u>		
<b>Vendor ID: RIVERSTOP</b>	<b>RIVER STOP LLC</b>	<b>PO Number:</b>	<b>Invoice Number: 8028</b>		<b>Amount:</b>	<b>109.06</b>		
Description: Diesel		Invoice Date: 11/06/2019	Due Date: 11/06/2019	Status: A	1099 Amount: 0.00			
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:				
<u>Chart of Account Number</u> 01 2710 626 000	<u>Detail Description</u> Diesel	<u>Cost Center ID</u>	<u>Detail Amount</u> 109.06	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u> N	<u>In Full</u>		

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<b>Vendor ID: RIVERSTOP</b>	<b>RIVER STOP LLC</b>	<b>PO Number:</b>	<b>Invoice Number: 8045</b>	<b>Amount:</b>	<b>95.79</b>
Description: Diesel		Invoice Date: 11/06/2019	Due Date: 11/06/2019	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 2710 626 000	Diesel		95.79		N
<b>Vendor ID: RIVERSTOP</b>	<b>RIVER STOP LLC</b>	<b>PO Number:</b>	<b>Invoice Number: 8050</b>	<b>Amount:</b>	<b>219.50</b>
Description: Diesel		Invoice Date: 11/06/2019	Due Date: 11/06/2019	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 2710 626 000	Diesel		219.50		N
<b>Vendor ID: RIVERSTOP</b>	<b>RIVER STOP LLC</b>	<b>PO Number:</b>	<b>Invoice Number: 8058</b>	<b>Amount:</b>	<b>82.51</b>
Description: Diesel		Invoice Date: 11/06/2019	Due Date: 11/06/2019	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 2710 626 000	Diesel		82.51		N
<b>Vendor ID: RIVERSTOP</b>	<b>RIVER STOP LLC</b>	<b>PO Number:</b>	<b>Invoice Number: 8059</b>	<b>Amount:</b>	<b>62.18</b>
Description: Gas		Invoice Date: 11/06/2019	Due Date: 11/06/2019	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 2710 626 000	Gas		62.18		N
<b>Vendor ID: RIVERSTOP</b>	<b>RIVER STOP LLC</b>	<b>PO Number:</b>	<b>Invoice Number: 8072</b>	<b>Amount:</b>	<b>98.46</b>
Description: Diesel		Invoice Date: 11/06/2019	Due Date: 11/06/2019	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 2710 626 000	Diesel		98.46		N
<b>Vendor ID: ROSEPUBL</b>	<b>ROSEN PUBLISHING</b>	<b>PO Number: 18-19-0209</b>	<b>Invoice Number: 20191106</b>	<b>Amount:</b>	<b>219.00</b>
Description: Teen Health & wellness		Invoice Date: 11/06/2019	Due Date: 11/06/2019	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 2220 643 000	Teen Health and Wellness Database		219.00		N
					Final
<b>Vendor ID: TRANE</b>	<b>TRANE US, INC</b>	<b>PO Number:</b>	<b>Invoice Number: 310356480</b>	<b>Amount:</b>	<b>771.00</b>
Description: vav-159 over heat		Invoice Date: 11/06/2019	Due Date: 11/06/2019	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 430 000	vav-159 over heat		771.00		N
<b>Vendor ID: TRANE</b>	<b>TRANE US, INC</b>	<b>PO Number:</b>	<b>Invoice Number: 310364915</b>	<b>Amount:</b>	<b>739.50</b>
Description: RTU 2 IGNITOR WIRE OFF		Invoice Date: 11/06/2019	Due Date: 11/06/2019	Status: A	1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:	

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<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	RTU 2 IGNITOR WIRE OFF		739.50		N	
<b>Vendor ID: TROTSERV TROTTER SERVICE</b>		<b>PO Number:</b>	<b>Invoice Number: 00160557</b>		<b>Amount:</b>	<b>93.44</b>
Description: Diesel		Invoice Date: 11/06/2019	Due Date: 11/06/2019	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 2730 430 000	Diesel		93.44		N	
<b>Vendor ID: TROTSERV TROTTER SERVICE</b>		<b>PO Number:</b>	<b>Invoice Number: 0159487</b>		<b>Amount:</b>	<b>113.65</b>
Description: DIESEL		Invoice Date: 11/06/2019	Due Date: 11/06/2019	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 2710 626 000	DIESEL		113.65		N	
<b>Vendor ID: TROTSERV TROTTER SERVICE</b>		<b>PO Number:</b>	<b>Invoice Number: 0159488</b>		<b>Amount:</b>	<b>123.99</b>
Description: DIESEL		Invoice Date: 11/06/2019	Due Date: 11/06/2019	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 2710 626 000	DIESEL		123.99		N	
<b>Vendor ID: TROTSERV TROTTER SERVICE</b>		<b>PO Number:</b>	<b>Invoice Number: 0159494</b>		<b>Amount:</b>	<b>70.99</b>
Description: DIESEL		Invoice Date: 11/06/2019	Due Date: 11/06/2019	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 2710 626 000	DIESEL		70.99		N	
<b>Vendor ID: TROTSERV TROTTER SERVICE</b>		<b>PO Number:</b>	<b>Invoice Number: 0159508</b>		<b>Amount:</b>	<b>52.49</b>
Description: GAS		Invoice Date: 11/06/2019	Due Date: 11/06/2019	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 2710 626 000	GAS		52.49		N	
<b>Vendor ID: TROTSERV TROTTER SERVICE</b>		<b>PO Number:</b>	<b>Invoice Number: 0159509</b>		<b>Amount:</b>	<b>45.99</b>
Description: GAS		Invoice Date: 11/06/2019	Due Date: 11/06/2019	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 2710 626 000	GAS		45.99		N	
<b>Vendor ID: TROTSERV TROTTER SERVICE</b>		<b>PO Number:</b>	<b>Invoice Number: 0159519</b>		<b>Amount:</b>	<b>116.21</b>
Description: diesel		Invoice Date: 11/06/2019	Due Date: 11/06/2019	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 2710 626 000	diesel		116.21		N	

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<b>Vendor ID: TROTSEV</b>	<b>TROTTER SERVICE</b>	<b>PO Number:</b>	<b>Invoice Number: 0159520</b>	<b>Amount:</b>	<b>55.50</b>
Description: Diesel		Invoice Date: 11/06/2019	Due Date: 11/06/2019	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 2710 626 000	Diesel		55.50		N
<b>Vendor ID: TROTSEV</b>	<b>TROTTER SERVICE</b>	<b>PO Number:</b>	<b>Invoice Number: 0159578</b>	<b>Amount:</b>	<b>85.00</b>
Description: Diesel		Invoice Date: 11/06/2019	Due Date: 11/06/2019	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 2710 626 000	Diesel		85.00		N
<b>Vendor ID: TROTSEV</b>	<b>TROTTER SERVICE</b>	<b>PO Number:</b>	<b>Invoice Number: 0159588</b>	<b>Amount:</b>	<b>125.00</b>
Description: Diesel		Invoice Date: 11/06/2019	Due Date: 11/06/2019	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 2710 626 000	Diesel		125.00		N
<b>Vendor ID: TROTSEV</b>	<b>TROTTER SERVICE</b>	<b>PO Number:</b>	<b>Invoice Number: 0160169</b>	<b>Amount:</b>	<b>121.76</b>
Description: Diesel		Invoice Date: 11/06/2019	Due Date: 11/06/2019	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 2710 626 000	Diesel		121.76		N
<b>Vendor ID: TROTSEV</b>	<b>TROTTER SERVICE</b>	<b>PO Number:</b>	<b>Invoice Number: 0160217</b>	<b>Amount:</b>	<b>101.75</b>
Description: Diesel		Invoice Date: 11/06/2019	Due Date: 11/06/2019	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 2710 626 000	Diesel		101.75		N
<b>Vendor ID: TROTSEV</b>	<b>TROTTER SERVICE</b>	<b>PO Number:</b>	<b>Invoice Number: 0160266</b>	<b>Amount:</b>	<b>42.30</b>
Description: gas		Invoice Date: 11/06/2019	Due Date: 11/06/2019	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 2710 626 000	gas		42.30		N
<b>Vendor ID: TROTSEV</b>	<b>TROTTER SERVICE</b>	<b>PO Number:</b>	<b>Invoice Number: 0160273</b>	<b>Amount:</b>	<b>128.00</b>
Description: Diesel		Invoice Date: 11/06/2019	Due Date: 11/06/2019	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 2710 626 000	Diesel		128.00		N
<b>Vendor ID: TROTSEV</b>	<b>TROTTER SERVICE</b>	<b>PO Number:</b>	<b>Invoice Number: 0160284</b>	<b>Amount:</b>	<b>107.85</b>
Description: Diesel		Invoice Date: 11/06/2019	Due Date: 11/06/2019	Status: A	1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:	

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<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 2710 626 000	Diesel		107.85		N	
<b>Vendor ID: TROTSERV</b>	<b>TROTTER SERVICE</b>	<b>PO Number:</b>	<b>Invoice Number: 0160291</b>		<b>Amount:</b>	<b>93.35</b>
Description: Diesel		Invoice Date: 11/06/2019	Due Date: 11/06/2019	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 2710 626 000	Diesel		93.35		N	
<b>Vendor ID: TROTSERV</b>	<b>TROTTER SERVICE</b>	<b>PO Number:</b>	<b>Invoice Number: 0160347</b>		<b>Amount:</b>	<b>97.99</b>
Description: Diesel		Invoice Date: 11/06/2019	Due Date: 11/06/2019	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 2710 626 000	Diesel		97.99		N	
<b>Vendor ID: TROTSERV</b>	<b>TROTTER SERVICE</b>	<b>PO Number:</b>	<b>Invoice Number: 0160372</b>		<b>Amount:</b>	<b>2.99</b>
Description: washer fluid		Invoice Date: 11/06/2019	Due Date: 11/06/2019	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 2730 430 000	washer fluid		2.99		N	
<b>Vendor ID: TROTSERV</b>	<b>TROTTER SERVICE</b>	<b>PO Number:</b>	<b>Invoice Number: 0160420</b>		<b>Amount:</b>	<b>106.99</b>
Description: diesel		Invoice Date: 11/06/2019	Due Date: 11/06/2019	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 2730 430 000	diesel		106.99		N	
<b>Vendor ID: TROTSERV</b>	<b>TROTTER SERVICE</b>	<b>PO Number:</b>	<b>Invoice Number: 0160424</b>		<b>Amount:</b>	<b>127.57</b>
Description: Diesel		Invoice Date: 11/06/2019	Due Date: 11/06/2019	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 2730 430 000	Diesel		127.57		N	
<b>Vendor ID: TROTSERV</b>	<b>TROTTER SERVICE</b>	<b>PO Number:</b>	<b>Invoice Number: 0160454</b>		<b>Amount:</b>	<b>45.01</b>
Description: gas		Invoice Date: 11/06/2019	Due Date: 11/06/2019	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 2730 430 000	gas		45.01		N	
<b>Vendor ID: TROTSERV</b>	<b>TROTTER SERVICE</b>	<b>PO Number:</b>	<b>Invoice Number: 0160466</b>		<b>Amount:</b>	<b>125.61</b>
Description: Diesel		Invoice Date: 11/06/2019	Due Date: 11/06/2019	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 2730 430 000	Diesel		125.61		N	

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Vendor ID:	Vendor Name:	PO Number:	Invoice Number:	Amount:
<b>TROTTSERV</b>	<b>TROTTER SERVICE</b>		<b>0160558</b>	<b>108.73</b>
Description: Diesel		Invoice Date: 11/06/2019	Due Date: 11/06/2019	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 2730 430 000	Diesel		108.73	N
<b>TROTTSERV</b>	<b>TROTTER SERVICE</b>		<b>0160573</b>	<b>105.98</b>
Description: Diesel		Invoice Date: 11/06/2019	Due Date: 11/06/2019	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 2730 430 000	Diesel		105.98	N
<b>TROTTSERV</b>	<b>TROTTER SERVICE</b>		<b>0160600</b>	<b>(169.05)</b>
Description: Tax credits on Diesel & Gas		Invoice Date: 11/06/2019	Due Date: 11/06/2019	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 2710 626 000	Tax credits on Diesel & Gas		(169.05)	N
<b>USBANK</b>	<b>US BANK</b>		<b>Nov2019DC</b>	<b>129.36</b>
Description: dc snacks		Invoice Date: 11/06/2019	Due Date: 11/06/2019	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 3300 610 002	dc snacks-walmart		129.36	N
<b>USBANK</b>	<b>US BANK</b>		<b>Nov2019Sped</b>	<b>217.65</b>
Description: Apps, iPad case, screen protector		Invoice Date: 11/06/2019	Due Date: 11/06/2019	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 1200 610 001	iPad case/screen protector		25.97	N
01 1200 610 002	Apps LAMPS		159.74	N
01 1200 610 002	Apps Lively Letters		31.94	N
<b>USBANK</b>	<b>US BANK</b>		<b>oct2019 General</b>	<b>725.78</b>
Description: Flocabulary, Bus phys, keys, bg checks		Invoice Date: 11/06/2019	Due Date: 11/06/2019	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 1100 610 002	Flocabulary		96.00	N
01 2710 890 000	bus phys. MV & DS		310.00	N
01 1100 610 000 003	Method Books		257.15	N
01 2710 590 000	Bg Checks		18.50	N
01 2610 610 000	Keys		20.61	N
01 1100 610 001	Science supplies		23.52	N
<b>WPCI</b>	<b>WPCI</b>		<b>0048866-IN</b>	<b>100.00</b>
Description: RANDOM POOL MGMT		Invoice Date: 11/06/2019	Due Date: 11/06/2019	Status: A 1099 Amount: 0.00



