

**Invoice Listing - Detail**  
Unposted

Batch Description: FEB 2021 GF INVOICES FOR BOARD MTG		Processing Month: 02/2021	Credit Card Vendor ID:	End of Fiscal Year Expense Invoices:
<b>Vendor ID: AMAZON</b>	<b>AMAZON</b>	<b>PO Number: 20-21-0081</b>	<b>Invoice Number: 5666629</b>	<b>Amount: 46.31</b>
Description: Supplies		Invoice Date: 02/05/2021	Due Date: 02/05/2021	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> <u>In Full</u>
01 2410 610 000	White Cardstock		24.32	N Final
01 2410 610 000	Laminating Sheets		21.99	N Final
<b>Vendor ID: AMAZON</b>	<b>AMAZON</b>	<b>PO Number:</b>	<b>Invoice Number: 9223449</b>	<b>Amount: 55.11</b>
Description: BATTERIES		Invoice Date: 02/05/2021	Due Date: 02/05/2021	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> <u>In Full</u>
01 1100 610 000	BATTERIES		55.11	N
<b>Vendor ID: AXMAHEAT</b>	<b>AXMANN HEATING &amp; AIR</b>	<b>PO Number:</b>	<b>Invoice Number: 8048</b>	<b>Amount: 162.75</b>
Description: KD ROOM, ART ROOM ISSUES PRESS. SWITCH		Invoice Date: 02/05/2021	Due Date: 02/05/2021	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> <u>In Full</u>
01 2610 431 000	KD ROOM, ART ROOM ISSUES PRESS. SWITCH		162.75	N
<b>Vendor ID: CLEAACCT</b>	<b>CLEARING ACCOUNT</b>	<b>PO Number:</b>	<b>Invoice Number: JAN2021</b>	<b>Amount: 104.66</b>
Description: STAMPS, BOX RENT		Invoice Date: 02/05/2021	Due Date: 02/05/2021	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> <u>In Full</u>
01 2520 531 000	POSTAGE		74.66	N
01 2510 610 000	SAFETY DEP BOX RENT		30.00	N
<b>Vendor ID: EAKEOFC</b>	<b>EAKES OFFICE SOLUTIONS</b>	<b>PO Number:</b>	<b>Invoice Number: 8176463-0</b>	<b>Amount: 26.96</b>
Description: GLOVES FOR SPED ROOM		Invoice Date: 02/05/2021	Due Date: 02/05/2021	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> <u>In Full</u>
01 1200 610 001	GLOVES FOR SPED ROOM		26.96	N
<b>Vendor ID: EAKEOFC</b>	<b>EAKES OFFICE SOLUTIONS</b>	<b>PO Number:</b>	<b>Invoice Number: 8183210-0</b>	<b>Amount: 327.54</b>
Description: trash bags, tissue		Invoice Date: 02/05/2021	Due Date: 02/05/2021	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> <u>In Full</u>
01 2610 610 000	trash bags, tissue		327.54	N
<b>Vendor ID: EAKEOFC</b>	<b>EAKES OFFICE SOLUTIONS</b>	<b>PO Number:</b>	<b>Invoice Number: 8185509-0</b>	<b>Amount: 31.53</b>
Description: BOWL CLEANER, DETERGENT		Invoice Date: 02/05/2021	Due Date: 02/05/2021	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> <u>In Full</u>
01 2610 610 000	BOWL CLEANER, DETERGENT		31.53	N

<b>Vendor ID: EAKEOFC</b>	<b>EAKES OFFICE SOLUTIONS</b>	<b>PO Number:</b>	<b>Invoice Number: 8188320-0</b>	<b>Amount:</b>	<b>21.96</b>
Description: sped gloves for HS sped		Invoice Date: 02/05/2021	Due Date: 02/05/2021	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 1200 610 001	sped gloves for HS sped		21.96		N
<b>Vendor ID: EAKEOFC</b>	<b>EAKES OFFICE SOLUTIONS</b>	<b>PO Number:</b>	<b>Invoice Number: 8189777-0</b>	<b>Amount:</b>	<b>219.60</b>
Description: sped gloves for HS sped		Invoice Date: 02/05/2021	Due Date: 02/05/2021	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 1200 610 001	sped gloves for HS sped		219.60		N
<b>Vendor ID: ELECSYST</b>	<b>ELECTRONIC SYSTEMS, INC.</b>	<b>PO Number:</b>	<b>Invoice Number: 31766</b>	<b>Amount:</b>	<b>90.00</b>
Description: fire alarm inspection		Invoice Date: 02/05/2021	Due Date: 02/05/2021	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 350 000	fire alarm inspection		90.00		N
<b>Vendor ID: HANDMACH</b>	<b>HAND MACHINING COMPANY</b>	<b>PO Number:</b>	<b>Invoice Number: 69427</b>	<b>Amount:</b>	<b>12.00</b>
Description: flat steel		Invoice Date: 02/05/2021	Due Date: 02/05/2021	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 610 001 005	flat steel		12.00		N
<b>Vendor ID: HANDMACH</b>	<b>HAND MACHINING COMPANY</b>	<b>PO Number:</b>	<b>Invoice Number: 69435</b>	<b>Amount:</b>	<b>83.00</b>
Description: lg. acetyline for shop class		Invoice Date: 02/05/2021	Due Date: 02/05/2021	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 610 001 005	lg. acetyline for shop class		83.00		N
<b>Vendor ID: JOSTENS</b>	<b>JOSTENS INC</b>	<b>PO Number:</b>	<b>Invoice Number: 25417322</b>	<b>Amount:</b>	<b>245.75</b>
Description: Diploma covers		Invoice Date: 02/05/2021	Due Date: 02/05/2021	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 2190 610 001	Diploma covers		245.75		N
<b>Vendor ID: KSBLAW</b>	<b>KSB LAW</b>	<b>PO Number:</b>	<b>Invoice Number: 9239</b>	<b>Amount:</b>	<b>412.50</b>
Description: Negotiations questions, staff contracts		Invoice Date: 02/05/2021	Due Date: 02/05/2021	Status: A	1099 Amount: 412.50
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>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>
01 2330 317 000	Negotiations questions, staff contracts		412.50	412.50	N
<b>Vendor ID: KSBLAW</b>	<b>KSB LAW</b>	<b>PO Number:</b>	<b>Invoice Number: 9404</b>	<b>Amount:</b>	<b>308.00</b>
Description: New Sup. contract, negotiations comm.		Invoice Date: 02/05/2021	Due Date: 02/05/2021	Status: A	1099 Amount: 308.00
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 2330 317 000	New Sup. contract, negotiations comm.		308.00	308.00	N	

**Vendor ID: MCGRAW MCGRAW-HILL EDUCATION PO Number: 20-21-0069 Invoice Number: 116008731001 Amount: 459.08**

Description: World Geography Student Textbooks  
 Invoice Date: 02/05/2021 Due Date: 02/05/2021 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 640 001	MHE I World Geography Student Edition I		414.45		N	Final
01 1100 640 001	Shipping and Handling		44.63		N	Final

**Vendor ID: MENARDS MENARDS PO Number: 20-21-0082 Invoice Number: 14266 Amount: 308.66**

Description: Closet & Door by sink in Shop area  
 Invoice Date: 02/05/2021 Due Date: 02/05/2021 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	oak board		37.98		N	Final
01 1100 610 001 005	roller and hinges		99.99		N	Final
01 1100 610 001 005	pine		31.95		N	Final
01 1100 610 001 005	2 x 4 pine		35.34		N	Final
01 1100 610 001 005	4 x 8 plywood		41.48		N	Final
01 1100 610 001 005	door handle		8.99		N	Final
01 1100 610 001 005	lock handle		12.98		N	Final
01 1100 610 001 005	brushes		9.97		N	Final
01 1100 610 001 005	stain		29.98		N	Final

**Vendor ID: NASB NASB PO Number: Invoice Number: 46009 Amount: 5,006.46**

Description: Strategic Planning  
 Invoice Date: 02/05/2021 Due Date: 02/05/2021 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	Strategic Planning		5,006.46		N	

**Vendor ID: NASB NASB PO Number: Invoice Number: 46160 Amount: 495.00**

Description: Policy Update for 2021  
 Invoice Date: 02/05/2021 Due Date: 02/05/2021 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	Policy Update for 2021		495.00		N	

**Vendor ID: NASBALIC NASB ALICAP PO Number: Invoice Number: 2020 ADJUSTMENT Amount: 91.00**

Description: AMT DUE AFTER PR AUDITED  
 Invoice Date: 02/05/2021 Due Date: 02/05/2021 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 2410 271 000	AMT DUE AFTER PR AUDITED		91.00		N	

**Vendor ID: NECENTEQ NE CENTRAL EQUIPMENT, INC PO Number: Invoice Number: 0163485-IN Amount: 26.94**

Description: CAP, FILL, VALVE  
 Invoice Date: 02/05/2021 Due Date: 02/05/2021 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 2730 431 000	CAP, FILL, VALVE		26.94		N	
<b>Vendor ID: NICHREPA</b>	<b>NICHOLS REPAIR</b>	<b>PO Number:</b>	<b>Invoice Number: 33493</b>		<b>Amount:</b>	<b>1,231.18</b>
Description: 09 BUS REPAIR, FUEL FILTERS, WATER PUMP,		Invoice Date: 02/05/2021	Due Date: 02/05/2021	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 431 000	09 BUS REPAIR, FUEL FILTERS, WATER PUMP,		1,231.18		N	
<b>Vendor ID: NICHREPA</b>	<b>NICHOLS REPAIR</b>	<b>PO Number:</b>	<b>Invoice Number: 33510</b>		<b>Amount:</b>	<b>42.20</b>
Description: 16 VAN INSPECTIONS		Invoice Date: 02/05/2021	Due Date: 02/05/2021	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 431 000	16 VAN INSPECTIONS		42.20		N	
<b>Vendor ID: NICHREPA</b>	<b>NICHOLS REPAIR</b>	<b>PO Number:</b>	<b>Invoice Number: 33522</b>		<b>Amount:</b>	<b>128.89</b>
Description: 17 BUS INSP.WIPER BLADES		Invoice Date: 02/05/2021	Due Date: 02/05/2021	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 431 000	17 BUS INSP.		128.89		N	
<b>Vendor ID: NICHREPA</b>	<b>NICHOLS REPAIR</b>	<b>PO Number:</b>	<b>Invoice Number: 33523</b>		<b>Amount:</b>	<b>132.13</b>
Description: 07 BUS OIL, LIGHTS, INSP.		Invoice Date: 02/05/2021	Due Date: 02/05/2021	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 431 000	07 BUS OIL, LIGHTS, INSP.		132.13		N	
<b>Vendor ID: NICHREPA</b>	<b>NICHOLS REPAIR</b>	<b>PO Number:</b>	<b>Invoice Number: 33528</b>		<b>Amount:</b>	<b>115.31</b>
Description: 05 BUS HEADLIGHTS, INSPECT		Invoice Date: 02/05/2021	Due Date: 02/05/2021	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 431 000	05 BUS HEADLIGHTS, INSPECT		115.31		N	
<b>Vendor ID: NICHREPA</b>	<b>NICHOLS REPAIR</b>	<b>PO Number:</b>	<b>Invoice Number: 33532</b>		<b>Amount:</b>	<b>79.13</b>
Description: 2010 VAN INSP.		Invoice Date: 02/05/2021	Due Date: 02/05/2021	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 431 000	2010 VAN INSP.		79.13		N	
<b>Vendor ID: NICHREPA</b>	<b>NICHOLS REPAIR</b>	<b>PO Number:</b>	<b>Invoice Number: 33533</b>		<b>Amount:</b>	<b>89.79</b>
Description: 20 BUS INSP. COOLANT, TRANS. FLUID		Invoice Date: 02/05/2021	Due Date: 02/05/2021	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 431 000	20 BUS INSP. COOLANT, TRANS. FLUID		89.79		N	

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<b>Vendor ID: NICHREPA</b>	<b>NICHOLS REPAIR</b>	<b>PO Number:</b>	<b>Invoice Number: 33534</b>	<b>Amount:</b>	<b>90.99</b>
Description: 18 BUS INSP. COOLANT		Invoice Date: 02/05/2021	Due Date: 02/05/2021	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 431 000	18 BUS INSP. COOLANT		90.99		N
<b>Vendor ID: NICHREPA</b>	<b>NICHOLS REPAIR</b>	<b>PO Number:</b>	<b>Invoice Number: 33536</b>	<b>Amount:</b>	<b>237.76</b>
Description: 08 VAN INSP & BATTERY		Invoice Date: 02/05/2021	Due Date: 02/05/2021	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 431 000	08 VAN INSP & BATTERY		237.76		N
<b>Vendor ID: NICHREPA</b>	<b>NICHOLS REPAIR</b>	<b>PO Number:</b>	<b>Invoice Number: 33539</b>	<b>Amount:</b>	<b>1,133.22</b>
Description: BUS 11 REPAIRS. INSP.		Invoice Date: 02/05/2021	Due Date: 02/05/2021	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 431 000	BUS 11 REPAIRS. INSP.		1,133.22		N
<b>Vendor ID: NICHREPA</b>	<b>NICHOLS REPAIR</b>	<b>PO Number:</b>	<b>Invoice Number: 33544</b>	<b>Amount:</b>	<b>88.41</b>
Description: 97 VAN INSP OIL		Invoice Date: 02/05/2021	Due Date: 02/05/2021	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 431 000	97 VAN INSP OIL		88.41		N
<b>Vendor ID: PLEALUNC</b>	<b>PLEASANTON SCHOOL LUNCH</b>	<b>PO Number:</b>	<b>Invoice Number: JAN_DC 2021</b>	<b>Amount:</b>	<b>132.00</b>
Description: DAYCARE SNACKS FOR JAN.		Invoice Date: 02/05/2021	Due Date: 02/05/2021	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 3300 610 002	DAYCARE SNACKS FOR JAN.		132.00		N
<b>Vendor ID: PLEALUNC</b>	<b>PLEASANTON SCHOOL LUNCH</b>	<b>PO Number:</b>	<b>Invoice Number: JAN_PREk 2021</b>	<b>Amount:</b>	<b>170.00</b>
Description: AM PREK SNACKS		Invoice Date: 02/05/2021	Due Date: 02/05/2021	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 1190 610 002	AM PREK SNACKS		170.00		N
<b>Vendor ID: QUILCORP</b>	<b>QUILL CORPORATION</b>	<b>PO Number: 20-21-0076</b>	<b>Invoice Number: 14269348</b>	<b>Amount:</b>	<b>99.89</b>
Description: TONER FOR HS SPED PRINTER		Invoice Date: 02/05/2021	Due Date: 02/05/2021	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 1200 610 001	HP 53A Black Toner		99.89		N
<b>Vendor ID: RIVERSTOP</b>	<b>RIVER STOP LLC</b>	<b>PO Number:</b>	<b>Invoice Number: 12257741</b>	<b>Amount:</b>	<b>41.89</b>
Description: GAS		Invoice Date: 02/05/2021	Due Date: 02/05/2021	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> 41.89	<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: 1257079</b>		<b>Amount:</b>	<b>69.63</b>
Description: GAS		Invoice Date: 02/05/2021	Due Date: 02/05/2021	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> 69.63	<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: 1257099</b>		<b>Amount:</b>	<b>77.69</b>
Description: DIESEL		Invoice Date: 02/05/2021	Due Date: 02/05/2021	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> 77.69	<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: 1257749</b>		<b>Amount:</b>	<b>41.33</b>
Description: DIESEL		Invoice Date: 02/05/2021	Due Date: 02/05/2021	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> 41.33	<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: 1258860</b>		<b>Amount:</b>	<b>18.19</b>
Description: HOWES DIESEL TREATMENT		Invoice Date: 02/05/2021	Due Date: 02/05/2021	Status: A	1099 Amount: 0.00	
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:		
<u>Chart of Account Number</u> 01 2730 431 000	<u>Detail Description</u> HOWES DIESEL TREATMENT	<u>Cost Center ID</u>	<u>Detail Amount</u> 18.19	<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: 1259809</b>		<b>Amount:</b>	<b>47.61</b>
Description: GAS		Invoice Date: 02/05/2021	Due Date: 02/05/2021	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> 47.61	<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: 1262207</b>		<b>Amount:</b>	<b>4.99</b>
Description: WASHER FLUID		Invoice Date: 02/05/2021	Due Date: 02/05/2021	Status: A	1099 Amount: 0.00	
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:		
<u>Chart of Account Number</u> 01 2730 431 000	<u>Detail Description</u> WASHER FLUID	<u>Cost Center ID</u>	<u>Detail Amount</u> 4.99	<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: 1262640</b>		<b>Amount:</b>	<b>38.95</b>
Description: GAS		Invoice Date: 02/05/2021	Due Date: 02/05/2021	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> 38.95	<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: 8898</b>	<b>Amount:</b>	<b>95.67</b>
Description: DIESEL		Invoice Date: 02/05/2021	Due Date: 02/05/2021	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		95.67		N
<b>Vendor ID: RIVERSTOP</b>	<b>RIVER STOP LLC</b>	<b>PO Number:</b>	<b>Invoice Number: 8902</b>	<b>Amount:</b>	<b>122.73</b>
Description: DIESEL		Invoice Date: 02/05/2021	Due Date: 02/05/2021	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		122.73		N
<b>Vendor ID: RIVERSTOP</b>	<b>RIVER STOP LLC</b>	<b>PO Number:</b>	<b>Invoice Number: 8908</b>	<b>Amount:</b>	<b>70.79</b>
Description: DIESEL		Invoice Date: 02/05/2021	Due Date: 02/05/2021	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		70.79		N
<b>Vendor ID: RIVERSTOP</b>	<b>RIVER STOP LLC</b>	<b>PO Number:</b>	<b>Invoice Number: 8914</b>	<b>Amount:</b>	<b>114.72</b>
Description: DIESEL		Invoice Date: 02/05/2021	Due Date: 02/05/2021	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		114.72		N
<b>Vendor ID: RIVERSTOP</b>	<b>RIVER STOP LLC</b>	<b>PO Number:</b>	<b>Invoice Number: 8922</b>	<b>Amount:</b>	<b>107.46</b>
Description: DIESEL		Invoice Date: 02/05/2021	Due Date: 02/05/2021	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		107.46		N
<b>Vendor ID: RIVERSTOP</b>	<b>RIVER STOP LLC</b>	<b>PO Number:</b>	<b>Invoice Number: 8924</b>	<b>Amount:</b>	<b>35.18</b>
Description: GAS		Invoice Date: 02/05/2021	Due Date: 02/05/2021	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		35.18		N
<b>Vendor ID: RIVERSTOP</b>	<b>RIVER STOP LLC</b>	<b>PO Number:</b>	<b>Invoice Number: 8931</b>	<b>Amount:</b>	<b>94.02</b>
Description: DIESEL		Invoice Date: 02/05/2021	Due Date: 02/05/2021	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		94.02		N
<b>Vendor ID: RIVERSTOP</b>	<b>RIVER STOP LLC</b>	<b>PO Number:</b>	<b>Invoice Number: 8932</b>	<b>Amount:</b>	<b>113.27</b>
Description: DIESEL		Invoice Date: 02/05/2021	Due Date: 02/05/2021	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		113.27		N	
<b>Vendor ID: RIVERSTOP</b>	<b>RIVER STOP LLC</b>	<b>PO Number:</b>	<b>Invoice Number: 8933</b>		<b>Amount:</b>	<b>49.61</b>
Description: DIESEL		Invoice Date: 02/05/2021	Due Date: 02/05/2021	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		49.61		N	
<b>Vendor ID: RIVERSTOP</b>	<b>RIVER STOP LLC</b>	<b>PO Number:</b>	<b>Invoice Number: 8944</b>		<b>Amount:</b>	<b>99.80</b>
Description: DIESEL		Invoice Date: 02/05/2021	Due Date: 02/05/2021	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		99.80		N	
<b>Vendor ID: RIVERSTOP</b>	<b>RIVER STOP LLC</b>	<b>PO Number:</b>	<b>Invoice Number: 8945</b>		<b>Amount:</b>	<b>77.92</b>
Description: DIESEL		Invoice Date: 02/05/2021	Due Date: 02/05/2021	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		77.92		N	
<b>Vendor ID: RIVERSTOP</b>	<b>RIVER STOP LLC</b>	<b>PO Number:</b>	<b>Invoice Number: 8948</b>		<b>Amount:</b>	<b>19.07</b>
Description: GAS		Invoice Date: 02/05/2021	Due Date: 02/05/2021	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		19.07		N	
<b>Vendor ID: RIVERSTOP</b>	<b>RIVER STOP LLC</b>	<b>PO Number:</b>	<b>Invoice Number: 8949</b>		<b>Amount:</b>	<b>23.86</b>
Description: GAS		Invoice Date: 02/05/2021	Due Date: 02/05/2021	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		23.86		N	
<b>Vendor ID: TRAMANDR</b>	<b>TRAMPE, ANDREA</b>	<b>PO Number:</b>	<b>Invoice Number: FEB_2021 CHEER</b>		<b>Amount:</b>	<b>28.75</b>
Description: MILEAGE FOR DRIVING PERS. CAR TO FKC		Invoice Date: 02/05/2021	Due Date: 02/05/2021	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 333 001	MILEAGE FOR DRIVING PERS. CAR TO FKC		28.75		N	
<b>Vendor ID: TROTSEV</b>	<b>TROTTER SERVICE</b>	<b>PO Number:</b>	<b>Invoice Number: 169010</b>		<b>Amount:</b>	<b>98.76</b>
Description: DIESEL		Invoice Date: 02/05/2021	Due Date: 02/05/2021	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		98.76		N	



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Vendor ID:	TROTTER SERVICE	PO Number:	Invoice Number:	Amount:
<b>TROTSERV</b>	<b>TROTTER SERVICE</b>		<b>169027</b>	<b>57.00</b>
Description: GAS		Invoice Date: 02/05/2021	Due Date: 02/05/2021	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 626 000	GAS		57.00	Asset/Asset Tag N
				<u>In Full</u>
<b>TROTSERV</b>	<b>TROTTER SERVICE</b>		<b>169039</b>	<b>26.65</b>
Description: GAS		Invoice Date: 02/05/2021	Due Date: 02/05/2021	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 626 000	GAS		26.65	Asset/Asset Tag N
				<u>In Full</u>
<b>TROTSERV</b>	<b>TROTTER SERVICE</b>		<b>169040</b>	<b>117.99</b>
Description: DIESEL		Invoice Date: 02/05/2021	Due Date: 02/05/2021	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 626 000	DIESEL		117.99	Asset/Asset Tag N
				<u>In Full</u>
<b>TROTSERV</b>	<b>TROTTER SERVICE</b>		<b>169043</b>	<b>54.63</b>
Description: DIESEL		Invoice Date: 02/05/2021	Due Date: 02/05/2021	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 626 000	DIESEL		54.63	Asset/Asset Tag N
				<u>In Full</u>
<b>TROTSERV</b>	<b>TROTTER SERVICE</b>		<b>169116</b>	<b>19.10</b>
Description: BOBCAT DIESEL		Invoice Date: 02/05/2021	Due Date: 02/05/2021	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 2650 626 000	BOBCAT DIESEL		19.10	Asset/Asset Tag N
				<u>In Full</u>
<b>TROTSERV</b>	<b>TROTTER SERVICE</b>		<b>169126</b>	<b>133.33</b>
Description: DIESEL		Invoice Date: 02/05/2021	Due Date: 02/05/2021	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 626 000	DIESEL		133.33	Asset/Asset Tag N
				<u>In Full</u>
<b>TROTSERV</b>	<b>TROTTER SERVICE</b>		<b>169151</b>	<b>115.01</b>
Description: DIESEL		Invoice Date: 02/05/2021	Due Date: 02/05/2021	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 626 000	DIESEL		115.01	Asset/Asset Tag N
				<u>In Full</u>
<b>TROTSERV</b>	<b>TROTTER SERVICE</b>		<b>169215</b>	<b>85.94</b>
Description: DIESEL		Invoice Date: 02/05/2021	Due Date: 02/05/2021	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		85.94		N	
<b>Vendor ID: TROTSERV</b>	<b>TROTTER SERVICE</b>	<b>PO Number:</b>	<b>Invoice Number: 169228</b>		<b>Amount:</b>	<b>56.99</b>
Description: DEF CASE, HOWES		Invoice Date: 02/05/2021	Due Date: 02/05/2021	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 431 000	DEF CASE, HOWES		56.99		N	
<b>Vendor ID: TROTSERV</b>	<b>TROTTER SERVICE</b>	<b>PO Number:</b>	<b>Invoice Number: 169252</b>		<b>Amount:</b>	<b>78.24</b>
Description: DIESEL		Invoice Date: 02/05/2021	Due Date: 02/05/2021	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		78.24		N	
<b>Vendor ID: TROTSERV</b>	<b>TROTTER SERVICE</b>	<b>PO Number:</b>	<b>Invoice Number: 169258</b>		<b>Amount:</b>	<b>(103.22)</b>
Description: TAX CREDITS		Invoice Date: 02/05/2021	Due Date: 02/05/2021	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		(103.22)		N	
<b>Vendor ID: TROTSERV</b>	<b>TROTTER SERVICE</b>	<b>PO Number:</b>	<b>Invoice Number: 169273</b>		<b>Amount:</b>	<b>123.99</b>
Description: DIESEL		Invoice Date: 02/05/2021	Due Date: 02/05/2021	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</b>	<b>TROTTER SERVICE</b>	<b>PO Number:</b>	<b>Invoice Number: 169316</b>		<b>Amount:</b>	<b>118.51</b>
Description: DIESEL		Invoice Date: 02/05/2021	Due Date: 02/05/2021	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		118.51		N	
<b>Vendor ID: TROTSERV</b>	<b>TROTTER SERVICE</b>	<b>PO Number:</b>	<b>Invoice Number: 169390</b>		<b>Amount:</b>	<b>111.00</b>
Description: DIESEL		Invoice Date: 02/05/2021	Due Date: 02/05/2021	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		111.00		N	
<b>Vendor ID: TROTSERV</b>	<b>TROTTER SERVICE</b>	<b>PO Number:</b>	<b>Invoice Number: 169399</b>		<b>Amount:</b>	<b>24.25</b>
Description: DIESEL		Invoice Date: 02/05/2021	Due Date: 02/05/2021	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		24.25		N	

**Invoice Listing - Detail**  
Unposted

**Vendor ID: USBANK US BANK PO Number: Invoice Number: gf\_Jan\_2021 Amount: 177.12**  
 Description: gas, Science suppy, RB laptop anti-virus Invoice Date: 02/05/2021 Due Date: 02/05/2021 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 gas in van in Elgin 54.32 N  
 01 1100 610 001 Science supplies-walmart 23.80 N  
 01 1100 610 001 anti-virus for Vinyl cutter laptop 99.00 N

**Vendor ID: USBANK US BANK PO Number: Invoice Number: Sped\_Jan\_2021 Amount: 108.21**  
 Description: Sped supplies, Masks, LB Teethers Invoice Date: 02/05/2021 Due Date: 02/05/2021 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 610 001 Sped supplies, Masks, LB Teethers 108.21 N

**Vendor ID: WPCI WPCI PO Number: Invoice Number: 142754 Amount: 55.00**  
 Description: DRUG SCREEN MV Invoice Date: 02/05/2021 Due Date: 02/05/2021 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 590 000 DRUG SCREEN MV 55.00 N

**Vendor ID: YANDMUSI YANDA'S MUSIC PO Number: Invoice Number: 503970 Amount: 23.00**  
 Description: ALTO REEDS Invoice Date: 02/05/2021 Due Date: 02/05/2021 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 1100 610 000 003 ALTO REEDS 23.00 N

**Vendor ID: YANDMUSI YANDA'S MUSIC PO Number: Invoice Number: 506021 Amount: 43.64**  
 Description: REPAIR TROMBONE Invoice Date: 02/05/2021 Due Date: 02/05/2021 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 1100 610 000 003 REPAIR TROMBONE 43.64 N

**Vendor ID: YANDMUSI YANDA'S MUSIC PO Number: Invoice Number: 506023 Amount: 81.44**  
 Description: REPAIR TENOR SAX Invoice Date: 02/05/2021 Due Date: 02/05/2021 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 1100 610 000 003 REPAIR TENOR SAX 81.44 N

Batch 1099 Total: 720.50 Batch Total: 15,305.42

Batch Description: MONTHLY INVOICES Processing Month: 01/2021 Credit Card Vendor ID: End of Fiscal Year Expense Invoices:

**Vendor ID: AXIS AXIS PO Number: Invoice Number: 5121 Amount: 51.65**  
 Description: Monthly Debit card fee Invoice Date: 01/04/2021 Due Date: 01/04/2021 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 810 000 ADMIN OFFICE DUES/FEES 51.65 0.00 N

**Vendor ID: BLACHILL BLACK HILLS ENERGY PO Number: Invoice Number: MONTHLY Amount: 3,317.47**  
 Description: NAT. GAS Invoice Date: 01/07/2021 Due Date: 01/15/2021 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 621 000 NAT. GAS 3,317.47 0.00 N

**Vendor ID: BLUECROS BLUE CROSS BLUE SHIELD PO Number: Invoice Number: feb2021 BM Amount: 1,629.50**  
 Description: Health & Dental Insurance Invoice Date: 01/12/2021 Due Date: 01/12/2021 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 9000 890 000 BM Health & Dental 1,629.50 0.00 N

**Vendor ID: DASCENT DAS STATE ACCOUNTING-CENTRAL FINANCE PO Number: Invoice Number: MONTHLY Amount: 232.49**  
 Description: NETWORK PARTICIPATION FEE Invoice Date: 01/25/2021 Due Date: 01/25/2021 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 2580 382 000 NETWORK PARTICIPATION FEE 232.49 0.00 N

**Vendor ID: DAUELMINI DAUEL MINI-STORAGE PO Number: Invoice Number: Monthly Amount: 38.00**  
 Description: STORAGE Invoice Date: 01/21/2021 Due Date: 01/21/2021 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 733 000 STORAGE 38.00 0.00 N

**Vendor ID: DCPD DCPD PO Number: Invoice Number: MONTHLY Amount: 3,951.20**  
 Description: ELECTRICITY Invoice Date: 01/21/2021 Due Date: 01/21/2021 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 621 000 002 ELECTRICITY 3,832.37 0.00 N  
 01 2610 621 000 002 ballfield 32.00 0.00 N  
 01 2610 621 000 002 concessions 33.69 0.00 N  
 01 2610 621 000 002 park lot 53.14 0.00 N

**Vendor ID: ESU10 ESU 10 PO Number: Invoice Number: dec2020 Amount: 10,105.75**  
 Description: DEC SERVICES Invoice Date: 01/06/2021 Due Date: 01/06/2021 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 2213 330 000 TEACHER TRAININGS 40.00 0.00 N  
 01 1200 591 001 VOC EVALS 108.54 0.00 N  
 01 3535 610 000 ANNUAL FEE 0.00 0.00 N  
 01 2230 591 000 ESU Technology FEES 0.00 0.00 N  
 01 2151 591 001 DEAF ED SA SEC 86.80 0.00 N  
 01 2151 591 002 DEAF ED SA ELEM 86.80 0.00 N

**Invoice Listing - Detail**  
Unposted

01 2171 591 001	PT SA SEC	378.74	0.00 N
01 2171 591 002	PT SA ELEM	378.74	0.00 N
01 2172 591 002	PT 3-5	0.00	0.00 N
01 2173 591 002	PT 0-2	0.00	0.00 N
01 1200 591 001	SPED SUPER SEC	464.29	0.00 N
01 1200 591 002	SPED SUPER ELEM	464.29	0.00 N
01 1291 591 002	SPED 3-5	0.00	0.00 N
01 1292 591 002	SPED B-2	0.00	0.00 N
01 2161 591 001	OT SA SEC	508.79	0.00 N
01 2161 591 002	OT SA ELEM	508.79	0.00 N
01 2162 591 002	OT 3-5	0.00	0.00 N
01 2163 591 002	OT B-2	0.00	0.00 N
01 2151 591 001	SPEECH SA SEC	2,480.92	0.00 N
01 2151 591 002	SPEECH SA ELEM	3,562.34	0.00 N
01 2152 591 002	SPEECH 3-5	0.00	0.00 N
01 2153 591 002	SPEECH 0-2	0.00	0.00 N
01 2181 591 001	VISION SA SEC	128.35	0.00 N
01 2181 591 002	VISION SA ELEM	128.35	0.00 N
01 2141 591 001	PSYCH SA SEC	(112.87)	0.00 N
01 2141 591 002	PSYCH SA ELEM	(112.87)	0.00 N
01 2142 591 002	PSYCH 3-5	0.00	0.00 N
01 2143 591 002	PSYCH 0-2	0.00	0.00 N
01 2151 591 001	AUDIO SA SEC	19.84	0.00 N
01 2151 591 002	AUDIO SA ELEM	19.84	0.00 N
01 2152 591 002	AUDIO 3-5	0.00	0.00 N
01 2153 591 002	AUDIO B-2	0.00	0.00 N
01 2230 432 000	Computer repair	0.00	0.00 N
01 2190 610 001	quiz bowl meals	0.00	0.00 N
01 3535 610 000	Annual HAL fee	0.00	0.00 N
01 6406 591 002	Speech 3-4 IDEA	190.84	0.00 N
01 6408 591 002	SPEECH B-2 IDEA	127.23	0.00 N
01 6408 591 002	AUDIO 3-4 IDEA	4.97	0.00 N
01 6408 591 002	AUDIO B-2 IDEA	4.96	0.00 N
01 6408 591 002	OT 3-4 IDEA	127.21	0.00 N
01 6408 591 002	OT B-2 IDEA	127.21	0.00 N
01 6408 591 002	PSYCH 3-4 IDEA	(28.21)	0.00 N
01 6408 591 002	PSYCH B-2 IDEA	(28.21)	0.00 N
01 6408 591 002	PT 3-4 IDEA	94.70	0.00 N
01 6408 591 002	PT B-2 IDEA	94.70	0.00 N
01 6408 591 002	SPED SUPER 3-4 IDEA	125.34	0.00 N
01 6408 591 002	SPED SUPER B-2 IDEA	125.33	0.00 N

Vendor ID: FRONTIER

FRONTIER

PO Number:

Invoice Number: MONTHLY

Amount:

294.03

**Invoice Listing - Detail**  
Unposted

Description: TELEPHONE	Invoice Date: 01/21/2021	Due Date: 01/21/2021	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	PHONE		294.03	0.00 N
<b>Vendor ID: HOMELEAS      HOMETOWN LEASING</b>	<b>PO Number:</b>	<b>Invoice Number: MONTHLY</b>	<b>Amount:</b>	<b>534.50</b>
Description: COPIER LEASE	Invoice Date: 01/21/2021	Due Date: 01/21/2021	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 2530 443 000	LEASE		534.50	0.00 N
<b>Vendor ID: HUNTCLEA      HUNTER CLEANING SERVICE, INC</b>	<b>PO Number:</b>	<b>Invoice Number: MONTHLY</b>	<b>Amount:</b>	<b>7,600.00</b>
Description: CLEANING SERVICE	Invoice Date: 01/21/2021	Due Date: 01/21/2021	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 420 000	CLEANING		7,600.00	0.00 N
<b>Vendor ID: PLUNKETT      PLUNKETT'S</b>	<b>PO Number:</b>	<b>Invoice Number: 6867829</b>	<b>Amount:</b>	<b>0.00</b>
Description: MONTHLY PEST SERVICE	Invoice Date: 01/05/2021	Due Date: 01/05/2021	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 431 000	MONTHLY PEST SERVICE		0.00	0.00 N
<b>Vendor ID: RAVESANI      RAVENNA SANITATION</b>	<b>PO Number:</b>	<b>Invoice Number: MONTHLY</b>	<b>Amount:</b>	<b>213.50</b>
Description: GARBAGE	Invoice Date: 01/21/2021	Due Date: 01/21/2021	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>	<u>1099 Detail Amount</u> <u>Asset/Asset Tag</u> <u>In Full</u>
01 2610 410 000	GARBAGE		213.50	213.50 N
<b>Vendor ID: TMS      TIME MANAGEMENT SYSTEMS</b>	<b>PO Number:</b>	<b>Invoice Number: 247471</b>	<b>Amount:</b>	<b>59.85</b>
Description: MONTHLY CONTRACT FOR TIME MGT	Invoice Date: 01/10/2021	Due Date: 01/10/2021	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 643 000	MONTHLY FEE		59.85	0.00 N
<b>Vendor ID: VILLAPLEAS      VILLAGE OF PLEASANTON</b>	<b>PO Number:</b>	<b>Invoice Number: MONTHLY</b>	<b>Amount:</b>	<b>469.00</b>
Description: WATER	Invoice Date: 01/21/2021	Due Date: 01/21/2021	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 410 000	WATER school		469.00	0.00 N
01 2610 431 000	water fb field		0.00	0.00 N
01 2610 431 000	FB Conc.		0.00	0.00 N
<b>Vendor ID: WEBELAWN      WEBER LAWN SERVICE, INC</b>	<b>PO Number:</b>	<b>Invoice Number: 7076</b>	<b>Amount:</b>	<b>0.00</b>
Description: Aug & Sept mow and treatments	Invoice Date: 01/04/2021	Due Date: 01/04/2021	Status: A	1099 Amount: 0.00

**Invoice Listing - Detail**  
 Unposted

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

01 2630 420 000      5th 6th lawn care program

0.00      0.00 N

In Full

Batch 1099 Total:      213.50

Batch Total:      28,496.94

Report 1099 Total:      934.00

Report Total:      43,802.36