

Batch Description: MONTHLY INVOICES

Processing Month: 10/2020

Credit Card Vendor ID:

End of Fiscal Year Expense Invoices:

Vendor ID: AXIS	AXIS	PO Number:	Invoice Number: 4850	Amount: 58.60
Description: Monthly Debit card fee		Invoice Date: 10/04/2020	Due Date: 10/04/2020	Status: A 1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u> <u>Asset/Asset Tag</u> <u>In Full</u>
01 2510 810 000	ADMIN OFFICE DUES/FEES		58.60	0.00 N
Vendor ID: BLACHILL	BLACK HILLS ENERGY	PO Number:	Invoice Number: MONTHLY	Amount: 570.76
Description: NAT. GAS		Invoice Date: 10/07/2020	Due Date: 10/15/2020	Status: A 1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u> <u>Asset/Asset Tag</u> <u>In Full</u>
01 2610 621 000	NAT. GAS		570.76	0.00 N
Vendor ID: BLUECROS	BLUE CROSS BLUE SHIELD	PO Number:	Invoice Number: nov2020 BM	Amount: 1,629.50
Description: Health & Dental Insurance		Invoice Date: 10/12/2020	Due Date: 10/12/2020	Status: A 1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u> <u>Asset/Asset Tag</u> <u>In Full</u>
01 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: 10/25/2020	Due Date: 10/25/2020	Status: A 1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u> <u>Asset/Asset Tag</u> <u>In Full</u>
01 2580 382 000	NETWORK PARTICIPATION FEE		232.49	0.00 N
Vendor ID: DAUELMINI	DAUEL MINI-STORAGE	PO Number:	Invoice Number: Monthly	Amount: 38.00
Description: STORAGE		Invoice Date: 10/21/2020	Due Date: 10/21/2020	Status: A 1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u> <u>Asset/Asset Tag</u> <u>In Full</u>
01 2610 733 000	STORAGE		38.00	0.00 N
Vendor ID: DCPD	DCPPD	PO Number:	Invoice Number: MONTHLY	Amount: 4,778.91
Description: ELECTRICITY		Invoice Date: 10/21/2020	Due Date: 10/21/2020	Status: A 1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u> <u>Asset/Asset Tag</u> <u>In Full</u>
01 2610 621 000 002	ELECTRICITY		4,591.03	0.00 N
01 2610 621 000 002	ballfield		96.37	0.00 N
01 2610 621 000 002	concessions		45.64	0.00 N
01 2610 621 000 002	park lot		45.87	0.00 N
Vendor ID: ESU10	ESU 10	PO Number:	Invoice Number: SEPT20	Amount: 25,647.59
Description: SEPT SERVICES		Invoice Date: 10/06/2020	Due Date: 10/06/2020	Status: A 1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u> <u>Asset/Asset Tag</u> <u>In Full</u>
01 2213 330 000	TEACHER TRAININGS		0.00	0.00 N

11/10/2020 10:57 AM

Unposted

User ID: LSK

01 1200 591 001	VOC EVALS	398.22	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	0.00	0.00 N
01 2151 591 002	DEAF ED SA ELEM	0.00	0.00 N
01 2171 591 001	PT SA SEC	339.74	0.00 N
01 2171 591 002	PT SA ELEM	339.74	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	961.82	0.00 N
01 1200 591 002	SPED SUPER ELEM	961.82	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	924.86	0.00 N
01 2161 591 002	OT SA ELEM	924.86	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	4,769.85	0.00 N
01 2151 591 002	SPEECH SA ELEM	6,320.05	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	499.69	0.00 N
01 2181 591 002	VISION SA ELEM	499.69	0.00 N
01 2141 591 001	PSYCH SA SEC	2,335.40	0.00 N
01 2141 591 002	PSYCH SA ELEM	2,335.40	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	59.70	0.00 N
01 2151 591 002	AUDIO SA ELEM	59.70	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 6408 591 002	Speech 3-4 IDEA	596.23	0.00 N
01 6408 591 002	SPEECH B-2 IDEA	238.49	N
01 6408 591 002	AUDIO 3-4 IDEA	14.92	N
01 6408 591 002	AUDIO B-2 IDEA	14.93	N
01 2151 591 001	DEAF ED SEC	418.62	N
01 2151 591 002	DEAF ED ELEM	418.62	N
01 6408 591 002	OT 3-4 IDEA	231.21	0.00 N
01 6408 591 002	OT B-2 IDEA	231.21	0.00 N

Invoice Listing - Detail
Unposted

01 6408 591 002	PSYCH 3-4 IDEA	583.85	N
01 6408 591 002	PSYCH B-2 IDEA	583.85	N
01 6408 591 002	PT 3-4 IDEA	84.93	N
01 6408 591 002	PT B-2 IDEA	84.93	N
01 6408 591 002	SPED SUPER 3-4 IDEA	207.63	N
01 6408 591 002	SPED SUPER B-2 IDEA	207.63	N

Vendor ID: FRONTIER FRONTIER PO Number: Invoice Number: MONTHLY Amount: 282.11
 Description: TELEPHONE Invoice Date: 10/21/2020 Due Date: 10/21/2020 Status: A 1099 Amount: 0.00
 Sequence: 1 Check Type: Checking Account ID: Check Number: Check Date:
Chart of Account Number Detail Description Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag In Full
 01 2580 382 000 PHONE 282.11 0.00 N

Vendor ID: HOMELEAS HOMETOWN LEASING PO Number: Invoice Number: MONTHLY Amount: 534.50
 Description: COPIER LEASE Invoice Date: 10/21/2020 Due Date: 10/21/2020 Status: A 1099 Amount: 0.00
 Sequence: 1 Check Type: Checking Account ID: Check Number: Check Date:
Chart of Account Number Detail Description Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag In Full
 01 2530 443 000 LEASE 534.50 0.00 N

Vendor ID: HUNTCLEA HUNTER CLEANING SERVICE, INC PO Number: Invoice Number: MONTHLY Amount: 7,600.00
 Description: CLEANING SERVICE Invoice Date: 10/21/2020 Due Date: 10/21/2020 Status: A 1099 Amount: 0.00
 Sequence: 1 Check Type: Checking Account ID: Check Number: Check Date:
Chart of Account Number Detail Description Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag In Full
 01 2610 420 000 CLEANING 7,600.00 0.00 N

Vendor ID: PLUNKETT PLUNKETT'S PO Number: Invoice Number: 6842358 Amount: 65.00
 Description: MONTHLY PEST SERVICE Invoice Date: 10/05/2020 Due Date: 10/05/2020 Status: A 1099 Amount: 0.00
 Sequence: 1 Check Type: Checking Account ID: Check Number: Check Date:
Chart of Account Number Detail Description Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag In Full
 01 2610 431 000 MONTHLY PEST SERVICE 65.00 0.00 N

Vendor ID: RAVESANI RAVENNA SANITATION PO Number: Invoice Number: MONTHLY Amount: 213.50
 Description: GARBAGE Invoice Date: 10/21/2020 Due Date: 10/21/2020 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: 243749 Amount: 62.70
 Description: MONTHLY CONTRACT FOR TIME MGT Invoice Date: 10/10/2020 Due Date: 10/10/2020 Status: A 1099 Amount: 0.00
 Sequence: 1 Check Type: Checking Account ID: Check Number: Check Date:
Chart of Account Number Detail Description Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag In Full
 01 2510 643 000 MONTHLY FEE 62.70 0.00 N

Vendor ID: VILLAPLEAS VILLAGE OF PLEASANTON PO Number: Invoice Number: MONTHLY Amount: 962.60
 Description: WATER Invoice Date: 10/21/2020 Due Date: 10/21/2020 Status: A 1099 Amount: 0.00

Invoice Listing - Detail
Unposted

Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>
01 2610 410 000	WATER school		731.00	0.00 N
01 2610 431 000	water fb field		197.60	0.00 N
01 2610 431 000	FB Conc.		34.00	0.00 N

Vendor ID: WEBELAWN	WEBER LAWN SERVICE, INC	PO Number:	Invoice Number: 6778	Amount: 3,800.25
Description: Aug & Sept mow and treatments		Invoice Date: 10/04/2020	Due Date: 10/04/2020	Status: A 1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>
01 2630 420 000	Aug & Sept mow and treatments		3,800.25	0.00 N

Batch 1099 Total: 213.50 Batch Total: 46,476.51

Batch Description: November 2020 GF Invoices for BM Processing Month: 11/2020 Credit Card Vendor ID: End of Fiscal Year Expense Invoices:

Vendor ID: ACTIACCT	ACTIVITY ACCOUNT	PO Number:	Invoice Number: TMOCT2020	Amount: 63.75
Description: BUS DR. DONATION		Invoice Date: 11/06/2020	Due Date: 11/06/2020	Status: A 1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>
01 2710 110 001	BUS DR. DONATION		63.75	N

Vendor ID: AMAZON	AMAZON	PO Number: 20-21-0047	Invoice Number: 0687433	Amount: 29.96
Description: REAP- MACBOOK CASES		Invoice Date: 11/06/2020	Due Date: 11/06/2020	Status: A 1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>
01 6992 610 002	Macbook Pro Cases		29.96	N

Vendor ID: AMAZON	AMAZON	PO Number: 20-21-0029	Invoice Number: 2909037	Amount: 217.71
Description: REAP-CHROMEBOOK CHARGERS		Invoice Date: 11/06/2020	Due Date: 11/06/2020	Status: A 1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>
01 6992 610 001	Type C Chromebook Chargers		217.71	N

Vendor ID: AMAZON	AMAZON	PO Number: 20-21-0050	Invoice Number: 7725867	Amount: 52.97
Description: BIG ROLLS OF COLORED PAPER		Invoice Date: 11/06/2020	Due Date: 11/06/2020	Status: A 1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>
01 1100 610 002	Black Paper Roll		18.99	N
01 1100 610 002	White Paper Roll		15.99	N
01 1100 610 002	Red Paper Roll		17.99	N

Vendor ID: APPLCOMP	APPLE COMPUTER, INC	PO Number: 20-21-0033	Invoice Number: AD17405451	Amount: 1,199.00
Description: REAP		Invoice Date: 11/06/2020	Due Date: 11/06/2020	Status: A 1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>

01 6992 610 002 Macbook Pro 1,199.00 N Final

Vendor ID: AXMAHEAT AXMANN HEATING & AIR PO Number: Invoice Number: 7746 Amount: 163.64
 Description: VENT LIMITER ISSUES Invoice Date: 11/06/2020 Due Date: 11/06/2020 Status: A 1099 Amount: 0.00
 Sequence: 1 Check Type: Checking Account ID: Check Number: Check Date:
Chart of Account Number Detail Description Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag In Full
 01 2610 431 000 VENT LIMITER ISSUES 163.64 N

Vendor ID: BUILWARE BUILDERS WAREHOUSE PO Number: 20-21-0036 Invoice Number: 1221800 Amount: 101.24
 Description: Grinder & wheels Invoice Date: 11/06/2020 Due Date: 11/06/2020 Status: A 1099 Amount: 0.00
 Sequence: 1 Check Type: Checking Account ID: Check Number: Check Date:
Chart of Account Number Detail Description Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag In Full
 01 1100 610 001 005 chalk line chalk 1.79 N Final
 01 1100 610 001 005 4 1/2 10.47 N Final
 01 1100 610 001 005 screws 9.98 N Final
 01 1100 610 001 005 grinder 79.00 N Final

Vendor ID: CLEAACCT CLEARING ACCOUNT PO Number: Invoice Number: OCT2020 Amount: 370.00
 Description: STAMPS, AND BUS PHYS. BS & RB Invoice Date: 11/06/2020 Due Date: 11/06/2020 Status: A 1099 Amount: 0.00
 Sequence: 1 Check Type: Checking Account ID: Check Number: Check Date:
Chart of Account Number Detail Description Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag In Full
 01 2520 531 000 STAMPS 70.00 N
 01 2710 340 000 BS & RB PHYS 300.00 N

Vendor ID: CUMMCENT CUMMINS CENTRAL POWER, LLC PO Number: Invoice Number: J7-27117 Amount: 556.80
 Description: BUS 11 REPAIRS Invoice Date: 11/06/2020 Due Date: 11/06/2020 Status: A 1099 Amount: 0.00
 Sequence: 1 Check Type: Checking Account ID: Check Number: Check Date:
Chart of Account Number Detail Description Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag In Full
 01 2730 431 000 BUS 11 REPAIRS 556.80 N

Vendor ID: DANACOLE DANA F. COLE & COMPANY, LLP PO Number: Invoice Number: 3329023 Amount: 1,090.00
 Description: balance of AUDIT Invoice Date: 11/10/2020 Due Date: 11/10/2020 Status: A 1099 Amount: 1,090.00
 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 315 000 balance of AUDIT 1,090.00 1,090.00 N

Vendor ID: NOVUS DAVID SATTLER PO Number: Invoice Number: 63431 Amount: 60.00
 Description: BUS 05 WINDSHEILD REP Invoice Date: 11/06/2020 Due Date: 11/06/2020 Status: A 1099 Amount: 0.00
 Sequence: 1 Check Type: Checking Account ID: Check Number: Check Date:
Chart of Account Number Detail Description Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag In Full
 01 2730 431 000 BUS 05 WINDSHEILD REP 60.00 N

Vendor ID: NOVUS DAVID SATTLER PO Number: Invoice Number: 63432 Amount: 55.00
 Description: BLUEBIRD BUS BREAKS WS Invoice Date: 11/06/2020 Due Date: 11/06/2020 Status: A 1099 Amount: 0.00
 Sequence: 1 Check Type: Checking Account ID: Check Number: Check Date:

Invoice Listing - Detail
Unposted

<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
01 2730 431 000	BLUEBIRD BUS BREAKS WS		55.00		N	
Vendor ID: EAKEOFC EAKES OFFICE SOLUTIONS		PO Number:	Invoice Number: 8120695-0		Amount: 328.67	
Description: BAGS & P TOWELS, BATH TISSUE		Invoice Date: 11/06/2020	Due Date: 11/06/2020	Status: A	1099 Amount: 0.00	
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:		
01 2610 610 000	BAGS & P TOWELS, BATH TISSUE		328.67		N	
Vendor ID: EAKEOFC EAKES OFFICE SOLUTIONS		PO Number:	Invoice Number: 8126775-0		Amount: 185.25	
Description: ICE MELT		Invoice Date: 11/06/2020	Due Date: 11/06/2020	Status: A	1099 Amount: 0.00	
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:		
01 2620 610 000	ICE MELT		185.25		N	
Vendor ID: EAKEOFC EAKES OFFICE SOLUTIONS		PO Number:	Invoice Number: 8132914-0		Amount: 423.70	
Description: PAPER SUPPLY & CLEANERS		Invoice Date: 11/06/2020	Due Date: 11/06/2020	Status: A	1099 Amount: 0.00	
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:		
01 2610 610 000	PAPER SUPPLY & CLEANERS		423.70		N	
Vendor ID: ENABDEVI ENABLING DEVICES		PO Number: 20-21-0032	Invoice Number: 0469177-IN		Amount: 80.90	
Description: Vibrating Teethers		Invoice Date: 11/06/2020	Due Date: 11/06/2020	Status: A	1099 Amount: 0.00	
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:		
01 1200 610 001	Star Vibrating Teethers		65.90		N	Final
01 1200 610 001	FREIGHT		15.00		N	
Vendor ID: GLOBAL GLOBAL INDUSTRIAL		PO Number:	Invoice Number: 116798002		Amount: 575.99	
Description: SOAP		Invoice Date: 11/06/2020	Due Date: 11/06/2020	Status: A	1099 Amount: 0.00	
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:		
01 2610 610 000	SOAP		575.99		N	
Vendor ID: JWPEPPER J. W. PEPPER & SON INC.		PO Number: 20-21-0015	Invoice Number: 363023178		Amount: 359.65	
Description: Face mask for choral, flutes, NafME reco		Invoice Date: 11/06/2020	Due Date: 11/06/2020	Status: A	1099 Amount: 0.00	
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:		
01 1100 610 000 003	Face Masks for most of the musicians		339.66		N	Final
01 1100 610 000 003	Shipping		18.99		N	Final
01 1100 610 000 003	HANDLING		1.00		N	
Vendor ID: JUNILIBR JUNIOR LIBRARY GUILD		PO Number: 20-21-0028	Invoice Number: 529025		Amount: 758.00	
Description: Annual Subscription		Invoice Date: 11/06/2020	Due Date: 11/06/2020	Status: A	1099 Amount: 0.00	
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:		

Invoice Listing - Detail
Unposted

<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
01 2220 640 000	Annual Subscription		750.00		N	Final
01 2220 640 000	ADJ		8.00		N	
Vendor ID: LAKESHOR LAKESHORE		PO Number: 20-21-0038		Invoice Number: 1856481020		Amount: 126.47
Description: Elem. Sped supplies		Invoice Date: 11/06/2020		Due Date: 11/06/2020		Status: A 1099 Amount: 0.00
Sequence: 1 Check Type:		Checking Account ID:		Check Number:		Check Date:
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
01 1200 610 002	9 by 11 inch laminating pouches		29.99		N	Final
01 1200 610 002	Magnetic Write & Wipe Boards		79.98		N	Final
01 1200 610 002	FREIGHT		16.50		N	
Vendor ID: LARSELEC LARSEN ELECTRIC, INC		PO Number:		Invoice Number: 4519		Amount: 679.19
Description: REPLACEMENT LAMPS		Invoice Date: 11/06/2020		Due Date: 11/06/2020		Status: A 1099 Amount: 0.00
Sequence: 1 Check Type:		Checking Account ID:		Check Number:		Check Date:
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
01 2620 431 000	REPLACEMENT LAMPS		679.19		N	
Vendor ID: MATHESON MATHESON TRIGAS		PO Number:		Invoice Number: 22504127		Amount: 93.74
Description: SHOP SUPPLIES		Invoice Date: 11/06/2020		Due Date: 11/06/2020		Status: A 1099 Amount: 0.00
Sequence: 1 Check Type:		Checking Account ID:		Check Number:		Check Date:
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
01 1100 610 001 005	SHOP SUPPLIES		93.74		N	
Vendor ID: NASB NASB		PO Number:		Invoice Number: 45916		Amount: 2,100.00
Description: 60% SUP SEARCH FEES		Invoice Date: 11/06/2020		Due Date: 11/06/2020		Status: A 1099 Amount: 0.00
Sequence: 1 Check Type:		Checking Account ID:		Check Number:		Check Date:
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
01 2310 340 000	60% SUP SEARCH FEES		2,100.00		N	
Vendor ID: NICHREPA NICHOLS REPAIR		PO Number:		Invoice Number: 33128		Amount: 32.56
Description: 11 bus head light		Invoice Date: 11/10/2020		Due Date: 11/10/2020		Status: A 1099 Amount: 0.00
Sequence: 1 Check Type:		Checking Account ID:		Check Number:		Check Date:
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
01 2730 431 000	11 bus head light		32.56		N	
Vendor ID: NICHREPA NICHOLS REPAIR		PO Number:		Invoice Number: 33196		Amount: 1,193.90
Description: bus 08 stop arm, mirror, fuses		Invoice Date: 11/10/2020		Due Date: 11/10/2020		Status: A 1099 Amount: 0.00
Sequence: 1 Check Type:		Checking Account ID:		Check Number:		Check Date:
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
01 2730 431 000	bus 08 stop arm, mirror, fuses		1,193.90		N	
Vendor ID: NICHREPA NICHOLS REPAIR		PO Number:		Invoice Number: 33202		Amount: 103.24
Description: 07 bus antifreeze, inspection		Invoice Date: 11/10/2020		Due Date: 11/10/2020		Status: A 1099 Amount: 0.00
Sequence: 1 Check Type:		Checking Account ID:		Check Number:		Check Date:

Invoice Listing - Detail
Unposted

<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
01 2730 431 000	07 bus antifreeze, inspection		103.24		N	
Vendor ID: NICHREPA	NICHOLS REPAIR	PO Number:	Invoice Number: 33205		Amount:	687.81
Description: 18 bus repairs		Invoice Date: 11/10/2020	Due Date: 11/10/2020	Status: A	1099 Amount: 0.00	
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:		
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
01 2730 431 000	18 bus repairs		687.81		N	
Vendor ID: PLEAIRRI	PLEASANTON IRRIGATION INC	PO Number:	Invoice Number: 79601		Amount:	126.26
Description: SUPPLIES		Invoice Date: 11/06/2020	Due Date: 11/06/2020	Status: A	1099 Amount: 0.00	
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:		
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
01 2610 610 000	SUPPLIES		126.26		N	
Vendor ID: PLEALUNC	PLEASANTON SCHOOL LUNCH	PO Number:	Invoice Number: DCOCT2020		Amount:	158.50
Description: DAYCARE SNACKS		Invoice Date: 11/06/2020	Due Date: 11/06/2020	Status: A	1099 Amount: 0.00	
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:		
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
01 3300 610 002	DAYCARE SNACKS		158.50		N	
Vendor ID: PLEALUNC	PLEASANTON SCHOOL LUNCH	PO Number:	Invoice Number: PREK102020		Amount:	200.00
Description: PREK SNACKS		Invoice Date: 11/06/2020	Due Date: 11/06/2020	Status: A	1099 Amount: 0.00	
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:		
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
01 1190 610 002	PREK SNACKS		200.00		N	
Vendor ID: PROVIDENCE	PROVIDENCE WORKING CANINES	PO Number:	Invoice Number: 9212		Amount:	401.43
Description: DOG VISIT 10-14-20		Invoice Date: 11/06/2020	Due Date: 11/06/2020	Status: A	1099 Amount: 0.00	
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:		
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
01 2670 340 000	DOG VISIT 10-14-20		401.43		N	
Vendor ID: TROTSEV	TROTTER SERVICE	PO Number:	Invoice Number: 167114		Amount:	912.29
Description: fuel		Invoice Date: 11/10/2020	Due Date: 11/10/2020	Status: A	1099 Amount: 0.00	
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:		
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
01 2710 626 000	fuel		912.29		N	
Vendor ID: USBANK	US BANK	PO Number:	Invoice Number: GENFUND102020		Amount:	511.87
Description: FLOCAB, BG CHECKS, SCI SUPP, BUS PH MV		Invoice Date: 11/06/2020	Due Date: 11/06/2020	Status: A	1099 Amount: 0.00	
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:		
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
01 2710 340 000	MV BUS PHYS		155.00		N	
01 1100 610 002	VL SUBS FLOCABULARY		96.00		N	

Invoice Listing - Detail
 Unposted

01 1100 610 001	SCIENCE SUPPLY-WALMART	26.23	N
01 1100 610 001	BW SUPPLY	44.64	N
01 2710 590 000	BACKGROUND CHECKS	190.00	N

Vendor ID: WPCI	WPCI	PO Number:	Invoice Number: 0052444-IN	Amount: 150.00
Description: ANNUAL FEE FOR RANDOM TESTING MGT		Invoice Date: 11/10/2020	Due Date: 11/10/2020	Status: A 1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>
01 2710 590 000	ANNUAL FEE FOR RANDOM TESTING MGT		150.00	N

<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
	150.00		N	
Batch 1099 Total:	1,090.00			Batch Total: 14,149.49
Report 1099 Total:	1,303.50			Report Total: 60,626.00