

Batch Description: MONTHLY INVOICES

Processing Month: 09/2020

Vendor ID: AXIS	AXIS	PO Number:	Invoice Number: 4850	Amount:	58.60
Description: Monthly Debit card fee		Invoice Date: 09/04/2020	Due Date: 09/04/2020	Status: A	1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:		Check Number:	Check Date:
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>
01 2510 810 000	ADMIN OFFICE DUES/FEES		58.60	0.00	N

Vendor ID: BLACHILL	BLACK HILLS ENERGY	PO Number:	Invoice Number: MONTHLY	Amount:	545.87
Description: NAT. GAS		Invoice Date: 09/07/2020	Due Date: 09/15/2020	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>
01 2610 621 000	NAT. GAS		545.87	0.00	N

Vendor ID: BLUECROS	BLUE CROSS BLUE SHIELD	PO Number:	Invoice Number: OCT2020 LN	Amount:	1,629.50
Description: Health & Dental Insurance		Invoice Date: 09/12/2020	Due Date: 09/12/2020	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>
01 9000 890 000	Nichols 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: 09/25/2020	Due Date: 09/25/2020	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>
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: 09/21/2020	Due Date: 09/21/2020	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>
01 2610 733 000	STORAGE		38.00	0.00	N

Vendor ID: DCPD	DCPPD	PO Number:	Invoice Number: MONTHLY	Amount:	6,451.22
Description: ELECTRICITY		Invoice Date: 09/21/2020	Due Date: 09/21/2020	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>
01 2610 621 000 002	ELECTRICITY		6,277.13	0.00	N
01 2610 621 000 002	ballfield		85.26	0.00	N
01 2610 621 000 002	concessions		42.94	0.00	N
01 2610 621 000 002	park lot		45.89	0.00	N

Vendor ID: ESU10	ESU 10	PO Number:	Invoice Number: SEPT20	Amount:	25,977.70
Description: SEPT SERVICES		Invoice Date: 09/06/2020	Due Date: 09/06/2020	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>
01 2213 330 000	TEACHER TRAININGS		0.00	0.00	N

Invoice Listing - Detail

Unposted

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	4,412.11	0.00 N
01 2151 591 002	SPEECH SA ELEM	6,797.04	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	414.74	0.00 N
01 2181 591 002	VISION SA ELEM	414.74	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	476.99	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	N
01 6408 591 002	OT B-2 IDEA	231.21	N

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
01 2510 351 000	LASERFICHE	500.00	N

Vendor ID: FRONTIER	FRONTIER	PO Number:	Invoice Number: MONTHLY	Amount: 611.72
Description: TELEPHONE		Invoice Date: 09/21/2020	Due Date: 09/21/2020	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 2580 382 000	PHONE		281.72	0.00 N
01 2610 621 000 002	PHONE REPAIR		330.00	N

Vendor ID: HOMELEAS	HOMETOWN LEASING	PO Number:	Invoice Number: MONTHLY	Amount: 534.50
Description: COPIER LEASE		Invoice Date: 09/21/2020	Due Date: 09/21/2020	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 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: 09/21/2020	Due Date: 09/21/2020	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 420 000	CLEANING		7,600.00	0.00 N

Vendor ID: PLUNKETT	PLUNKETT'S	PO Number:	Invoice Number: 6777523	Amount: 0.00
Description: MONTHLY PEST SERVICE		Invoice Date: 09/05/2020	Due Date: 09/05/2020	Status: A 1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<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

Vendor ID: RAVESANI	RAVENNA SANITATION	PO Number:	Invoice Number: MONTHLY	Amount: 213.50
Description: GARBAGE		Invoice Date: 09/21/2020	Due Date: 09/21/2020	Status: A 1099 Amount: 213.50
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u> <u>Asset/Asset Tag</u> <u>In Full</u>
01 2610 410 000	GARBAGE		213.50	213.50 N

Vendor ID: TMS	TIME MANAGEMENT SYSTEMS	PO Number:	Invoice Number: 242517	Amount: 62.70
Description: MONTHLY CONTRACT FOR TIME MGT		Invoice Date: 09/10/2020	Due Date: 09/10/2020	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 2510 643 000	MONTHLY FEE		62.70	0.00 N

Invoice Listing - Detail
Unposted

Vendor ID: VILLAPLEAS	VILLAGE OF PLEASANTON	PO Number:	Invoice Number: MONTHLY	Amount:	1,152.60
Description: WATER		Invoice Date: 09/21/2020	Due Date: 09/21/2020	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>
01 2610 410 000	WATER school		889.00	0.00	N
01 2610 431 000	water fb field		221.60	0.00	N
01 2610 431 000	FB Conc.		42.00	0.00	N

Vendor ID: WEBELAWN	WEBER LAWN SERVICE, INC	PO Number:	Invoice Number: 6662	Amount:	0.00
Description: may, June, mow and treatments		Invoice Date: 09/04/2020	Due Date: 09/04/2020	Status: A	1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>
01 2630 420 000	July mow school & field		0.00	0.00	N

Batch 1099 Total: 213.50 Batch Total: 45,108.40

Batch Description: OCTOBER 2020 GENERAL FUND INVOICES Processing Month: 10/2020

Vendor ID: AMAZON	AMAZON	PO Number: 20-21-0014	Invoice Number: 2517836	Amount:	64.98
Description: Cot for Nurses station & protective		Invoice Date: 10/08/2020	Due Date: 10/08/2020	Status: A	1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>
01 2130 610 000	Cot		46.99		N Final
01 2130 610 000	Cot Sheet Covers		17.99		N Final

Vendor ID: AMAZON	AMAZON	PO Number: 20-21-0016	Invoice Number: 2960201	Amount:	30.98
Description: Pencil sharpener for Daycare Room		Invoice Date: 10/08/2020	Due Date: 10/08/2020	Status: A	1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>
01 3300 610 002	Xacto Sharpener		24.99		N Final
01 3300 610 002	FREIGHT		5.99		N Final

Vendor ID: AMAZON	AMAZON	PO Number: 19-20-0131	Invoice Number: 4583407	Amount:	590.97
Description: Microscopes		Invoice Date: 10/08/2020	Due Date: 10/08/2020	Status: A	1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>
01 1100 610 001	Omax Compound Microscopes. https://www.a		590.97		Y Final

Vendor ID: AMAZON	AMAZON	PO Number: 01-2020	Invoice Number: 7483425	Amount:	210.88
Description: School Nurse Office Supply		Invoice Date: 10/08/2020	Due Date: 10/08/2020	Status: A	1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>
01 2130 610 000	Rite Aid First Aid Antiseptic Ethyl Rubb		8.37		Y Final
01 2130 610 000	McKesson Antiseptic Hydrogen Peroxide 3%		5.75		Y Final
01 2130 610 000	Basic Care Extra Strength Pain Relief, A		10.00		N Final

Invoice Listing - Detail
Unposted

01 2130 610 002	Major Mapap Jr 160 Mg Ages 2-11 Chew Tab	14.99	N	Final
01 2130 610 002	Children's Pain Reliever Acetaminophen 8	14.64	N	Final
01 2130 610 002	Benadryl Original Strength Anti-Itch Rel	3.97	N	Final
01 2130 610 000	Transparent Eye Wash Cups for Effective	5.95	N	Final
01 2130 610 000	60 Pack Barf Bags Disposable, Valchoose	17.25	N	Final
01 2130 610 000	PhysiciansCare 32 oz. Eyewash Bottle, (2	10.44	N	Final
01 2130 610 000	Dixie Bath, 3 oz. -600 Cups,Varies Color	19.90	N	Final
01 2130 610 000	Dynarex Ammonia Inhalants, 33 Cc, 10 Amp	6.00	N	Final
01 2130 610 000	Eye Occluder 6pcs Professional Plastic E	7.88	N	Final
01 2130 610 000	MedPride Powder-Free Nitrile Exam Gloves	42.76	N	Final
01 2130 610 000	Wostar Nitrile Disposable Gloves 2.5 Mil	42.98	N	Final

Vendor ID: AMAZON	AMAZON	PO Number: 20-21-0022	Invoice Number: 8765827	Amount: 16.95
Description: Gloves for propane tank		Invoice Date: 10/08/2020	Due Date: 10/08/2020	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 890 000	Maximum Safety 120-4100/S Journeyman KV		16.95	N
				Final

Vendor ID: AMAZON	AMAZON	PO Number: 20-21-0007	Invoice Number: 9884222	Amount: 191.31
Description: REAP-TECH SUPPLIES		Invoice Date: 10/08/2020	Due Date: 10/08/2020	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	Short Throw Projector Wall Mount		88.98	N
01 6992 610 001	USB C to VGA Adapters		12.59	N
01 6992 610 001	Wireless Mouse		49.95	N
01 6992 610 000	USB Flash Drives 10 Pack		26.81	N
01 6992 610 001	HDMI Splitter		12.98	N
				Final

Vendor ID: BROABOOK	BROAD REACH BOOKS	PO Number:	Invoice Number: ARU0308149	Amount: 217.49
Description: BOOKS FOR LIBRARY		Invoice Date: 10/08/2020	Due Date: 10/08/2020	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 2220 640 000	BOOKS		217.49	0.00 N

Vendor ID: BUILWARE	BUILDERS WAREHOUSE	PO Number: 20-21-0002	Invoice Number: 1201053	Amount: 354.97
Description: Budget items for class		Invoice Date: 10/08/2020	Due Date: 10/08/2020	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 610 001 005	brushes		16.68	N
01 1100 610 001 005	drill bit		9.98	N
01 1100 610 001 005	wood filler		15.98	N
01 1100 610 001 005	socket		5.49	N
01 1100 610 001 005	socket		4.49	N
01 1100 610 001 005	sand paper		14.75	N
				Final

Invoice Listing - Detail
Unposted

01 1100 610 001 005	drill bit set	29.99	N	Final
01 1100 610 001 005	paint thinner	8.69	N	Final
01 1100 610 001 005	stain	31.99	N	Final
01 1100 610 001 005	door latch	25.99	N	Final
01 1100 610 001 005	hinges	41.94	N	Final
01 1100 610 001 005	impact driver	149.00	N	Final

Vendor ID: CLEAACCT CLEARING ACCOUNT PO Number: Invoice Number: SEPT2020 Amount: 106.61
 Description: CHECKS FOR THIS ACCT Invoice Date: 10/08/2020 Due Date: 10/08/2020 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 610 000 CHECKS FOR THIS ACCT 106.61 N

Vendor ID: CRUIANNA CRUISE, ANNA PO Number: Invoice Number: prek Refund Amount: 200.00
 Description: Refund of Prek for April 2020 Invoice Date: 10/08/2020 Due Date: 10/08/2020 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 1190 810 002 Refund of Prek for April 2020 200.00 N

Vendor ID: DANACOLE DANA F. COLE & COMPANY, LLP PO Number: Invoice Number: 3327134 Amount: 4,360.00
 Description: 80% progress bill of Audit Invoice Date: 10/08/2020 Due Date: 10/08/2020 Status: A 1099 Amount: 4,360.00
 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 80% progress bill of Audit 4,360.00 4,360.00 N

Vendor ID: EAKEOFC EAKES OFFICE SOLUTIONS PO Number: Invoice Number: 8101406-0 Amount: 308.72
 Description: paper supplies Invoice Date: 10/08/2020 Due Date: 10/08/2020 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 610 000 paper supplies 308.72 N

Vendor ID: EAKEOFC EAKES OFFICE SOLUTIONS PO Number: Invoice Number: 8104233-0 Amount: 111.50
 Description: Staple cartridges for new copiers Invoice Date: 10/08/2020 Due Date: 10/08/2020 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 610 000 Staple cartridges for new copiers 111.50 N

Vendor ID: EAKEOFC EAKES OFFICE SOLUTIONS PO Number: Invoice Number: 8117859-0 Amount: 168.14
 Description: bags & naturesol concentrate Invoice Date: 10/08/2020 Due Date: 10/08/2020 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 610 000 bags & naturesol concentrate 168.14 N

Vendor ID: EAKEOFC EAKES OFFICE SOLUTIONS PO Number: Invoice Number: c7664755-0 Amount: (98.00)
 Description: refund on Staple cartridges returned Invoice Date: 10/08/2020 Due Date: 10/08/2020 Status: A 1099 Amount: 0.00

Invoice Listing - Detail
Unposted

Sequence: 1 Check Type: Checking Account ID:
Chart of Account Number Detail Description
01 1100 610 000 refund on Staple cartridges returned

Check Number: Check Date:
Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag In Full
 (98.00) N

Vendor ID: ENABDEVI ENABLING DEVICES PO Number: 20-21-0011 Invoice Number: 0468388-IN Amount: 184.90
Description: mini popper for Lucas, fiber optic light Invoice Date: 10/08/2020 Due Date: 10/08/2020 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 1200 610 001 Mini Popper 119.95 N Final
01 1200 610 001 fiber optic light 45.95 N Final
01 1200 610 001 freight 19.00 N Final

Vendor ID: HADDOCK HADDOCK CORPORATION PO Number: 19-20-0162 Invoice Number: 00003553 Amount: 3,470.20
Description: Promethean Board Invoice Date: 10/08/2020 Due Date: 10/08/2020 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 1200 733 002 ActivPanel Titanium 75 inch 2,400.00 N Final
01 1200 733 002 Installment 349.00 N Final
01 1200 733 002 Installation service trip charge 371.20 N Final
01 1200 733 002 shipping 350.00 N Final

Vendor ID: KEARHUB KEARNEY HUB PO Number: 20-21-0017 Invoice Number: OCT2020 Amount: 78.00
Description: Newspaper renewal Invoice Date: 10/08/2020 Due Date: 10/08/2020 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 2220 640 000 Newspaper Renewal 78.00 N Final

Vendor ID: KNOWBUDD KNOW BUDDY RESOURCES PO Number: Invoice Number: ARU0307984 Amount: 82.84
Description: BOOKS FOR LIB Invoice Date: 10/08/2020 Due Date: 10/08/2020 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 2220 640 000 BOOKS FOR LIB 82.84 N

Vendor ID: LOOKOUT LOOKOUT BOOKS PO Number: Invoice Number: ARU0308116 Amount: 122.70
Description: BOOKS FOR LIB Invoice Date: 10/08/2020 Due Date: 10/08/2020 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 2220 640 000 BOOKS FOR LIB 122.70 N

Vendor ID: LOOMCASE LOOMIS, CASEY PO Number: Invoice Number: MILEAGE SEPT2020 Amount: 51.75
Description: BERTRAND VB 9-26 Invoice Date: 10/08/2020 Due Date: 10/08/2020 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 333 001 BERTRAND VB 9-26 51.75 N

Vendor ID: LOUPPROP	LOUP CITY PROPANE	PO Number:	Invoice Number: 4616	Amount:	904.24
Description: BUS PROPANE		Invoice Date: 10/08/2020	Due Date: 10/08/2020	Status: A	1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>
01 2710 626 000	BUS PROPANE		904.24		N
Vendor ID: LYRILEAR	LYRICS2LEARN.COM	PO Number: 19-20-0175	Invoice Number: 2554	Amount:	150.00
Description: SUBS. RENEWAL		Invoice Date: 10/08/2020	Due Date: 10/08/2020	Status: A	1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>
01 1100 610 002	Lyrics2Learn Subscription		150.00		N
					Final
Vendor ID: MATHESON	MATHESON TRIGAS	PO Number:	Invoice Number: 22423676	Amount:	66.42
Description: WHEEL CUTOFF & CARBON DIOXIDE		Invoice Date: 10/08/2020	Due Date: 10/08/2020	Status: A	1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>
01 1100 610 001 005	WHEEL CUTOFF & CARBON DIOXIDE		66.42		N
Vendor ID: NCSA	NEBRASKA COUNCIL OF SCHOOL ADMINISTRATORS	PO Number:	Invoice Number: LK 2020-21	Amount:	125.00
Description: MEMBERSHIP		Invoice Date: 10/08/2020	Due Date: 10/08/2020	Status: A	1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>
01 2510 810 000	MEMBERSHIP		125.00		N
Vendor ID: NICHREPA	NICHOLS REPAIR	PO Number:	Invoice Number: 33026	Amount:	192.88
Description: 20 BUS NO START , REPAIRS		Invoice Date: 10/08/2020	Due Date: 10/08/2020	Status: A	1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>
01 2730 431 000	20 BUS NO START , REPAIRS		192.88		N
Vendor ID: NICHREPA	NICHOLS REPAIR	PO Number:	Invoice Number: 33032	Amount:	13.96
Description: BELT FOR AIR COMPRESSOR		Invoice Date: 10/08/2020	Due Date: 10/08/2020	Status: A	1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>
01 2610 610 000	BELT FOR AIR COMPRESSOR		13.96		N
Vendor ID: NICHREPA	NICHOLS REPAIR	PO Number:	Invoice Number: 33038	Amount:	64.66
Description: 11 BUS FUSE		Invoice Date: 10/08/2020	Due Date: 10/08/2020	Status: A	1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>
01 2730 431 000	11 BUS FUSE		64.66		N
Vendor ID: NICHREPA	NICHOLS REPAIR	PO Number:	Invoice Number: 33049	Amount:	41.78
Description: 20 BUS MIRROR REP		Invoice Date: 10/08/2020	Due Date: 10/08/2020	Status: A	1099 Amount: 0.00

Invoice Listing - Detail
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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 MIRROR REP		41.78		N	
Vendor ID: NICHREPA	NICHOLS REPAIR	PO Number:	Invoice Number: 33068	Amount:	411.72	
Description: 18 BUS WIPERS, HEADLAMP		Invoice Date: 10/08/2020	Due Date: 10/08/2020	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 WIPERS, HEADLAMP		411.72		N	
Vendor ID: NICHREPA	NICHOLS REPAIR	PO Number:	Invoice Number: 33092	Amount:	547.63	
Description: 11 BUS EXH CLAMP, TAIL PIPE		Invoice Date: 10/08/2020	Due Date: 10/08/2020	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 EXH CLAMP, TAIL PIPE		547.63		N	
Vendor ID: PLEAIRRI	PLEASANTON IRRIGATION INC	PO Number:	Invoice Number: 79409	Amount:	6.78	
Description: MASONARY BITS		Invoice Date: 10/08/2020	Due Date: 10/08/2020	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	MASONARY BITS		6.78		N	
Vendor ID: PLEALUNC	PLEASANTON SCHOOL LUNCH	PO Number:	Invoice Number: DC SEPT2020	Amount:	169.50	
Description: DC SNACKS FOR SEPT		Invoice Date: 10/08/2020	Due Date: 10/08/2020	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	DC SNACKS FOR SEPT		169.50		N	
Vendor ID: PLEALUNC	PLEASANTON SCHOOL LUNCH	PO Number:	Invoice Number: PREK2020SNACKS	Amount:	204.00	
Description: PREK SNACKS SEPT		Invoice Date: 10/08/2020	Due Date: 10/08/2020	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 SEPT		204.00		N	
Vendor ID: RIVERSTOP	RIVER STOP LLC	PO Number:	Invoice Number: 1229964	Amount:	45.65	
Description: GAS		Invoice Date: 10/08/2020	Due Date: 10/08/2020	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	GAS		45.65		N	
Vendor ID: RIVERSTOP	RIVER STOP LLC	PO Number:	Invoice Number: 1231409	Amount:	53.33	
Description: DIESEL		Invoice Date: 10/08/2020	Due Date: 10/08/2020	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	DIESEL		53.33		N	

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Vendor ID:	RIVER STOP LLC	PO Number:	Invoice Number:	Amount:
Description: DIESEL		1231462	1231462	90.69
Sequence: 1	Check Type:	Invoice Date: 10/08/2020	Due Date: 10/08/2020	Status: A
<u>Chart of Account Number</u>	<u>Detail Description</u>	Checking Account ID:	Check Number:	Check Date:
01 2710 626 000	DIESEL	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>
			90.69	<u>Asset/Asset Tag</u>
				N
				<u>In Full</u>
Vendor ID:	RIVER STOP LLC	PO Number:	Invoice Number:	Amount:
Description: GAS		1231547	1231547	35.44
Sequence: 1	Check Type:	Invoice Date: 10/08/2020	Due Date: 10/08/2020	Status: A
<u>Chart of Account Number</u>	<u>Detail Description</u>	Checking Account ID:	Check Number:	Check Date:
01 2710 626 000	GAS	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>
			35.44	<u>Asset/Asset Tag</u>
				N
				<u>In Full</u>
Vendor ID:	RIVER STOP LLC	PO Number:	Invoice Number:	Amount:
Description: GAS		1231990	1231990	32.92
Sequence: 1	Check Type:	Invoice Date: 10/08/2020	Due Date: 10/08/2020	Status: A
<u>Chart of Account Number</u>	<u>Detail Description</u>	Checking Account ID:	Check Number:	Check Date:
01 2710 626 000	GAS	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>
			32.92	<u>Asset/Asset Tag</u>
				N
				<u>In Full</u>
Vendor ID:	RIVER STOP LLC	PO Number:	Invoice Number:	Amount:
Description: diesel		1231997	1231997	57.46
Sequence: 1	Check Type:	Invoice Date: 10/08/2020	Due Date: 10/08/2020	Status: A
<u>Chart of Account Number</u>	<u>Detail Description</u>	Checking Account ID:	Check Number:	Check Date:
01 2710 626 000	diesel	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>
			57.46	<u>Asset/Asset Tag</u>
				N
				<u>In Full</u>
Vendor ID:	RIVER STOP LLC	PO Number:	Invoice Number:	Amount:
Description: diesel		1232857	1232857	57.33
Sequence: 1	Check Type:	Invoice Date: 10/08/2020	Due Date: 10/08/2020	Status: A
<u>Chart of Account Number</u>	<u>Detail Description</u>	Checking Account ID:	Check Number:	Check Date:
01 2710 626 000	diesel	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>
			57.33	<u>Asset/Asset Tag</u>
				N
				<u>In Full</u>
Vendor ID:	RIVER STOP LLC	PO Number:	Invoice Number:	Amount:
Description: Diesel		1234894	1234894	129.86
Sequence: 1	Check Type:	Invoice Date: 10/08/2020	Due Date: 10/08/2020	Status: A
<u>Chart of Account Number</u>	<u>Detail Description</u>	Checking Account ID:	Check Number:	Check Date:
01 2710 626 000	Diesel	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>
			129.86	<u>Asset/Asset Tag</u>
				N
				<u>In Full</u>
Vendor ID:	RIVER STOP LLC	PO Number:	Invoice Number:	Amount:
Description: Gas		1236645	1236645	70.74
Sequence: 1	Check Type:	Invoice Date: 10/08/2020	Due Date: 10/08/2020	Status: A
<u>Chart of Account Number</u>	<u>Detail Description</u>	Checking Account ID:	Check Number:	Check Date:
01 2710 626 000	Gas	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>
			70.74	<u>Asset/Asset Tag</u>
				N
				<u>In Full</u>
Vendor ID:	RIVER STOP LLC	PO Number:	Invoice Number:	Amount:
Description: DIESEL		8689	8689	71.15
Sequence: 1	Check Type:	Invoice Date: 10/08/2020	Due Date: 10/08/2020	Status: A
		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		71.15		N	
Vendor ID: RIVERSTOP	RIVER STOP LLC	PO Number:	Invoice Number: 8697		Amount:	83.20
Description: DIESEL		Invoice Date: 10/08/2020	Due Date: 10/08/2020	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	DIESEL		83.20		N	
Vendor ID: RIVERSTOP	RIVER STOP LLC	PO Number:	Invoice Number: 8706		Amount:	83.80
Description: diesel		Invoice Date: 10/08/2020	Due Date: 10/08/2020	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	diesel		83.80		N	
Vendor ID: RIVERSTOP	RIVER STOP LLC	PO Number:	Invoice Number: 8720		Amount:	86.34
Description: Diesel		Invoice Date: 10/08/2020	Due Date: 10/08/2020	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	Diesel		86.34		N	
Vendor ID: RIVERSTOP	RIVER STOP LLC	PO Number:	Invoice Number: 8731		Amount:	89.44
Description: Diesel		Invoice Date: 10/08/2020	Due Date: 10/08/2020	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	Diesel		89.44		N	
Vendor ID: SCHOINC	SCHOLASTIC INC	PO Number: 19-20-0107	Invoice Number: M7010792		Amount:	274.73
Description: Scholastic Scope magazines		Invoice Date: 10/09/2020	Due Date: 10/09/2020	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 640 001	9-Month Scholastic Scope Magazine Issue		249.75		N	Final
01 1100 640 001	Shipping and Handling		24.98		N	Final
Vendor ID: SCHOHEAL	SCHOOL HEALTH CORP.	PO Number: 02-2020	Invoice Number: 3825484		Amount:	457.01
Description: AED supplies		Invoice Date: 10/08/2020	Due Date: 10/08/2020	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 2130 610 001	Physio-Control LIFEPAK CRPlus/EXPRESS CH		209.00		N	Final
01 2130 610 002	Physio-Control Infant/Child Electrode Pa		226.00		N	Final
01 2130 610 002	FREIGHT		22.01		N	
Vendor ID: STUDYWEEK	STUDIES WEEKLY	PO Number: 20-21-0012	Invoice Number: 362479		Amount:	1,526.13
Description: Elementary Studies Weekly		Invoice Date: 10/09/2020	Due Date: 10/09/2020	Status: A	1099 Amount: 0.00	

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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 640 002	K-6 Studies Weekly Quote		1,526.13		N	Final
Vendor ID: TFCU	TRIUUS FEDERAL CREDIT UNION	PO Number:	Invoice Number: 000001	Amount:	200.00	
Description: MITEL HX CONTROLLER FOR PHONES		Invoice Date: 10/09/2020	Due Date: 10/09/2020	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 2230 650 000	MITEL HX CONTROLLER FOR PHONES		200.00		N	
Vendor ID: TROTSEV	TROTTER SERVICE	PO Number:	Invoice Number: 0166538	Amount:	96.78	
Description: DIESEL		Invoice Date: 10/09/2020	Due Date: 10/09/2020	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	DIESEL		96.78		N	
Vendor ID: TROTSEV	TROTTER SERVICE	PO Number:	Invoice Number: 0166569	Amount:	98.50	
Description: DIESEL		Invoice Date: 10/09/2020	Due Date: 10/09/2020	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	DIESEL		98.50		N	
Vendor ID: TROTSEV	TROTTER SERVICE	PO Number:	Invoice Number: 0166579	Amount:	57.40	
Description: DIESEL		Invoice Date: 10/09/2020	Due Date: 10/09/2020	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	DIESEL		57.40		N	
Vendor ID: TROTSEV	TROTTER SERVICE	PO Number:	Invoice Number: 0166646	Amount:	81.36	
Description: DIESEL		Invoice Date: 10/09/2020	Due Date: 10/09/2020	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	DIESEL		81.36		N	
Vendor ID: TROTSEV	TROTTER SERVICE	PO Number:	Invoice Number: 0166684	Amount:	70.51	
Description: DIESEL		Invoice Date: 10/09/2020	Due Date: 10/09/2020	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	DIESEL		70.51		N	
Vendor ID: TROTSEV	TROTTER SERVICE	PO Number:	Invoice Number: 0166694	Amount:	(105.06)	
Description: TAX CREDITS		Invoice Date: 10/09/2020	Due Date: 10/09/2020	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	TAX CREDITS		(105.06)		N	

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Vendor ID: TROTSEV	TROTTER SERVICE	PO Number:	Invoice Number: 0166786	Amount:	92.74
Description: DIESEL		Invoice Date: 10/09/2020	Due Date: 10/09/2020	Status: A	1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>
01 2710 626 000	DIESEL		92.74		N
Vendor ID: TROTSEV	TROTTER SERVICE	PO Number:	Invoice Number: 0166793	Amount:	103.79
Description: DIESEL		Invoice Date: 10/09/2020	Due Date: 10/09/2020	Status: A	1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>
01 2710 626 000	DIESEL		103.79		N
Vendor ID: TROTSEV	TROTTER SERVICE	PO Number:	Invoice Number: 0166960	Amount:	91.75
Description: DIESEL		Invoice Date: 10/09/2020	Due Date: 10/09/2020	Status: A	1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>
01 2710 626 000	DIESEL		91.75		N
Vendor ID: TROTSEV	TROTTER SERVICE	PO Number:	Invoice Number: 0166962	Amount:	74.33
Description: DIESEL		Invoice Date: 10/09/2020	Due Date: 10/09/2020	Status: A	1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>
01 2710 626 000	DIESEL		74.33		N
Vendor ID: TROTSEV	TROTTER SERVICE	PO Number:	Invoice Number: 0167063	Amount:	49.33
Description: GAS		Invoice Date: 10/09/2020	Due Date: 10/09/2020	Status: A	1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>
01 2710 626 000	GAS		49.33		N
Vendor ID: TROTSEV	TROTTER SERVICE	PO Number:	Invoice Number: 0167077	Amount:	93.08
Description: DIESEL		Invoice Date: 10/09/2020	Due Date: 10/09/2020	Status: A	1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>
01 2710 626 000	DIESEL		93.08		N
Vendor ID: TROTSEV	TROTTER SERVICE	PO Number:	Invoice Number: 0167081	Amount:	86.86
Description: DIESEL		Invoice Date: 10/09/2020	Due Date: 10/09/2020	Status: A	1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>
01 2710 626 000	DIESEL		86.86		N
Vendor ID: USBANK	US BANK	PO Number:	Invoice Number: GF_9_2020	Amount:	210.80
Description: STAMPED ENVELOPES & THETA MUSIC SUBS		Invoice Date: 10/09/2020	Due Date: 10/09/2020	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 2520 531 000	STAMPED ENVELOPES		111.80		N	
01 1100 610 000 003	THETA MUSIC SUBS		99.00		N	

Vendor ID: USBANK US BANK PO Number: Invoice Number: SP_9_2020 Amount: 225.85

Description: SPED SUPPLIES Invoice Date: 10/09/2020 Due Date: 10/09/2020 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	LIVELY LETTER APP		31.94		N	
01 1200 610 002	LIVELY LETTER APP		27.24		N	
01 1200 610 002	WALMART, BAGS, BATTERIES,CD PLAYER		166.67		N	

Vendor ID: VOYAGER VOYAGER SOPRIS LEARNING PO Number: 19-20-0182 Invoice Number: 2731349 Amount: 217.69

Description: HS Sped workbooks and Teacher ed. Invoice Date: 10/09/2020 Due Date: 10/09/2020 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 640 001	Rewards Intermediate TE 2nd Edition		97.95		N	Final
01 1200 640 001	Set of 10 Student Workbooks for Rewards		99.95		N	Final
01 1200 640 001	FREIGHT		19.79		N	

Vendor ID: YANDMUSI YANDA'S MUSIC PO Number: 20-21-0006 Invoice Number: 485232 Amount: 670.88

Description: Bell covers to reduce aerosol emissions Invoice Date: 10/09/2020 Due Date: 10/09/2020 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 610 000 003	Baritone Bell Covers		28.72		N	Final
01 1100 610 000 003	Tuba Bell Covers		36.72		N	Final
01 1100 610 000 003	Trumpet Bell Covers		306.24		N	Final
01 1100 610 000 003	Saxophone Bell Covers		127.60		N	Final
01 1100 610 000 003	Trombone Bell Covers		143.60		N	Final
01 1100 610 000 003	BLUE JOICE VALVE OIL		10.00		N	Final
01 1100 610 000 003	REEDS		18.00		N	Final

Vendor ID: YANDMUSI YANDA'S MUSIC PO Number: Invoice Number: 486867 Amount: 54.80

Description: TRUMPET BOOKS,PART Invoice Date: 10/09/2020 Due Date: 10/09/2020 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 610 000 003	TRUMPET BOOKS,PART		54.80		N	

Vendor ID: ZANEBLOS ZANER-BLOSER PO Number: Invoice Number: 10258546 Amount: 40.97

Description: HW 2ND GR Invoice Date: 10/09/2020 Due Date: 10/09/2020 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 640 002	HW 2ND GR		40.97		N	

Invoice Listing - Detail

Unposted

Batch 1099 Total: 4,360.00

Batch Total: 19,482.04

Report 1099 Total: 4,573.50

Report Total: 64,590.44