Group by Vendor; Order by Vendor; No Range; Show Paid, PR Paid;

Line Account		Description	Vendor	Check	Amount
AMERICAN FAMILY LIFE					
10.481.55	1	P/R Vendor Withholding	— AMERICAN FAMILY LIFE	45883	105.42
80.481.55	1	P/R Vendor Withholding	AMERICAN FAMILY LIFE	45883	7.90
10.481.55	1	o	AMERICAN FAMILY LIFE	45883	105.42
	•	P/R Vendor Withholding			
80.481.55	1	P/R Vendor Withholding	AMERICAN FAMILY LIFE	45883	7.90 \$226.6 4
AMEREN CIPS			Total for AMERICAN	FAMILY LIFE	\$ 220.0 4
		OO EL FOTDIOITY	—	15051	0.045.00
20.2540.466 20.2540.466	3	GS ELECTRICITY BASEBALL FIELD	AMEREN CIPS AMEREN CIPS	45851 45851	2,945.63 82.38
20.2540.400	3	BASEBALL FIELD		MEREN CIPS	\$3,028.01
BISMARCK-HENNING SCHOOLS			Total for A	MEREN ON 3	ψ0,020.01
10.4110.600	2	AUG-SEPT SERVICE	BISMARCK-HENNING SCHOOLS	45852	115,475.76
10.4110.600	2	OCT TUITION	BISMARCK-HENNING SCHOOLS	45852	74,812.16
10.4110.000	2	OCT TOTTION	Total for BISMARCK-HENNIN		\$190,287.92
Bushue Screening			TOTAL TOLDISMARCK-HENNIN	IG SCHOOLS	Ψ130,207.32
80.2367.319	1	FINGERPRINTING	Bushue Screening	45849	52.00
80.2367.319	1	FINGERPRINTING	Bushue Screening	45849	52.0
80.2367.319	1	FINGERPRINTING	Bushue Screening	45849	52.0
80.2367.319	1	FINGERPRINTING	Bushue Screening	45849	52.00
80.2367.319	1	PROF/TECH SERVICES	Bushue Screening	45849	52.00
			Total for Bush	ue Screening	\$260.00
WASHINGTON NATIONAL INS.			_		
10.481.553	1	P/R Vendor Withholding	WASHINGTON NATIONAL INS.	45884	25.52
40.481.553	1	P/R Vendor Withholding	WASHINGTON NATIONAL INS.	45884	6.12
80.481.553	1	P/R Vendor Withholding	WASHINGTON NATIONAL INS.	45884	2.62
10.481.553	1	P/R Vendor Withholding	WASHINGTON NATIONAL INS.	45884	25.52
40.481.553	1	P/R Vendor Withholding	WASHINGTON NATIONAL INS.	45884	6.12
80.481.553	1	P/R Vendor Withholding	WASHINGTON NATIONAL INS.	45884	2.62
			Total for WASHINGTON NA	ATIONAL INS.	\$68.52
CORKY'S SERVICE CENTER					
40.2550.323	1	TEST LANE BUS 2	CORKY'S SERVICE CENTER	45853	46.00
			Total for CORKY'S SERV	ICE CENTER	\$46.00
CULLIGAN			_		
10.2560.410	1	FOOD SERVICE FOOD	CULLIGAN	45854	104.15
CUNNINGHAM CHILDRENS HOME			Total fo	or CULLIGAN	\$104.1
			<u> </u>		
10.4220.630	1	ZD SEPT TUITION	CUNNINGHAM CHILDRENS HOME	45855	4,825.80
10.4220.630	1	MF SEPT TUITION	CUNNINGHAM CHILDRENS HOME	45855	4,825.80
10.4220.630	1	JW SEPT TUITION	CUNNINGHAM CHILDRENS HOME	45855	4,825.80
			Total for CUNNINGHAM CHILD	RENS HOME	\$14,477.40
DOLLAR GENERAL STORE			_		
20.2540.410	3	FOOD SERVICE FOOD	DOLLAR GENERAL STORE	45856	29.80
10.2560.690	1	FOOD SERVICE MISC	DOLLAR GENERAL STORE	45856	7.07
10.2560.410	1	FOOD SERVICE FOOD	DOLLAR GENERAL STORE	45856	2.00
10.2560.410	1	FOOD SERVICE FOOD	DOLLAR GENERAL STORE	45856	30.00
10.1101.410	3	ELEM SUPPLIES	DOLLAR GENERAL STORE	45856	105.7
10.2410.410	3	ELEMENTARY PRINC GEN SUP	DOLLAR GENERAL STORE	45856	24.0
			Total for DOLLAR GENI	ERAL STORE	\$76.8
DTI OFFICE SOLUTIONS					
10.1101.413	4	TEACHER COPIER LEASE	DTI OFFICE SOLUTIONS	45850	512.94
EAM/IN 2.1.927: ornPoord		Duran and his CUD for December	illa Abrilla OLIOD #7		/204C 02-50 DI

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Group by Vendor; Order by Vendor; No Range; Show Paid, PR Paid;

Line	Account		Description	Vendor	Check	Amount
	10.1101.413	4	TEACHER COPIER LEASE	DTI OFFICE SOLUTIONS	45850	250.00
	10.1101.413	4	TEACHER COPIER LEASE	DTI OFFICE SOLUTIONS	45850	250.00
	10.1101.413	4	TEACHER COPIER LEASE	DTI OFFICE SOLUTIONS	45850	106.42
				Total for DTI OFFIC	E SOLUTIONS	\$1,119.36
EYE M	ED			<u></u>		
	10.481.555	1	P/R Vendor Withholding	EYE MED	45885	63.75
	40.481.555	1	P/R Vendor Withholding	EYE MED	45885	6.80
	80.481.555	1	P/R Vendor Withholding	EYE MED	45885	5.20
	20.481.555	1	P/R Vendor Withholding	EYE MED	45885	2.75
	10.481.555	1	P/R Vendor Withholding	EYE MED	45885	63.75
	40.481.555	1	P/R Vendor Withholding	EYE MED	45885	6.80
	80.481.555	1	P/R Vendor Withholding	EYE MED	45885	5.20
	20.481.555	1	P/R Vendor Withholding	EYE MED	45885	2.75 \$157.00
FRONT	TIED			TOG	al for EYE MED	\$157.00
FRON			NITERNET		45057	202.04
	10.2410.470 20.2540.340	4 2	INTERNET COMM - UNIT PHONES	FRONTIER FRONTIER	45857 45857	836.99 913.68
	20.2540.540	2	COMMINI - CINIT PHOMES		for FRONTIER	\$1,750.67
	EQ INC			Total	IOI PRONTIER	ψ1,730.07
ILLINI	FS, INC.					
	40.2550.461	1	TRANS-LP	ILLINI FS, INC.	45858	509.92
	40.2550.461	1	TRANS-LP	ILLINI FS, INC.	45858	962.02
	40.2550.464 40.2550.461	1	TRANS GAS/OIL TRANS-LP	ILLINI FS, INC. ILLINI FS, INC.	45858 45858	37.44 833.03
	40.2330.401	ı	IIVANO-LF		ILLINI FS, INC.	\$2,342.41
UNIT 4	1780 NCPERS LIFE INS			Total for		. ,-
	10.481.56	1	P/R Vendor Withholding	UNIT 4780 NCPERS LIFE INS	45886	4.00
	40.481.56	1	P/R Vendor Withholding	UNIT 4780 NCPERS LIFE INS	45886	2.80
	80.481.56	1	P/R Vendor Withholding	UNIT 4780 NCPERS LIFE INS	45886	1.20
	10.481.56	1	P/R Vendor Withholding	UNIT 4780 NCPERS LIFE INS	45886	4.00
	40.481.56	1	P/R Vendor Withholding	UNIT 4780 NCPERS LIFE INS	45886	2.80
	80.481.56	1	P/R Vendor Withholding	UNIT 4780 NCPERS LIFE INS	45886	1.20
				Total for UNIT 4780 NC	PERS LIFE INS	\$16.00
GORD	ON FOOD SERVICE					
	10.2560.410	1	FOOD SERVICE FOOD	GORDON FOOD SERVICE	45859	2,063.91
	10.2560.410	19	FOOD SERVICE BREAKFAST	GORDON FOOD SERVICE	45859	271.11
	10.2560.410	19	CREDIT MEMO	GORDON FOOD SERVICE	45859	10.65
	10.2560.410	1	FOOD SERVICE FOOD	GORDON FOOD SERVICE	45859	858.55
	10.2560.410	19	FOOD SERVICE BREAKFAST	GORDON FOOD SERVICE	45859	242.42
	10.2560.410	19	FOOD SERVICE BREAKFAST	GORDON FOOD SERVICE	45859	19.18
	10.2560.410	1	FOOD SERVICE FOOD	GORDON FOOD SERVICE	45859	1,363.30
	10.2560.410	19	FOOD SERVICE BREAKFAST	GORDON FOOD SERVICE	45859	445.83
	10.2560.410	1	FOOD SERVICE FOOD	GORDON FOOD SERVICE	45859	1,646.20
	10.2560.410	19	FOOD SERVICE BREAKFAST	GORDON FOOD SERVICE	45859	305.5
	10.2560.410 10.2560.410	1 19	FOOD SERVICE FOOD FOOD SERVICE BREAKFAST	GORDON FOOD SERVICE GORDON FOOD SERVICE	45859 45859	1,662.0 ⁴ 351.16
	10.2300.410	19	1 OOD SERVICE BREARI AST	Total for GORDON F		\$9,180.20
TSA C	ONSULTING GROUP					
	10.2310.690	1	AUG SERVICE	TSA CONSULTING GROUP	45860	50.00
		1	OCT SERVICE	TSA CONSULTING GROUP	45860	50.00
	10.2310.690	•	P/R Vendor Withholding	TSA CONSULTING GROUP	45887	595.00
	10.2310.690 10.481.56	1				
		1	P/R Vendor Withholding	TSA CONSULTING GROUP	45887	31.50
	10.481.56	•	· ·	TSA CONSULTING GROUP TSA CONSULTING GROUP	45887 45887	
	10.481.56 40.481.56	•	P/R Vendor Withholding			73.50
	10.481.56 40.481.56 80.481.56	1	P/R Vendor Withholding P/R Vendor Withholding	TSA CONSULTING GROUP	45887	31.50 73.50 544.00 96.00

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Group by Vendor; Order by Vendor; No Range; Show Paid, PR Paid;

Date: Nov, 2016;

Line	Account		Description	Vendor	Check	Amount
	10.1205.210.6	3	Employer Paid Benefits	TSA CONSULTING GROUP	45887	80.08
	80.1205.210.6	3	Employer Paid Benefits	TSA CONSULTING GROUP	45887	80.08
	10.2330.210.6	3	Employer Paid Benefits	TSA CONSULTING GROUP	45887	160.00
	80.2550.210.6	1	Employer Paid Benefits	TSA CONSULTING GROUP	45887	48.0
	40.2550.210.6	1	Employer Paid Benefits	TSA CONSULTING GROUP	45887	112.0
	10.481.56	1	P/R Vendor Withholding	TSA CONSULTING GROUP	45887	595.0
	40.481.56	1	P/R Vendor Withholding	TSA CONSULTING GROUP	45887	31.50
	80.481.56	1	P/R Vendor Withholding	TSA CONSULTING GROUP	45887	73.50
			i i i i i i i i i i i i i i i i i i i	Total for TSA CONS		\$2,780.0
HODGE	ES,LOIZZI,EISENHAMMER					
	80.2369.318	1	LEGAL SERVICES	HODGES,LOIZZI,EISENHAMMER	45861	1,038.80
				Total for HODGES,LOIZZI	,EISENHAMMER	\$1,038.8
нооре	STON AREA CUSD #11					
	10.4110.610	2	AUG-SEPT-OCT PAYMENTS	HOOPESTON AREA CUSD #11	45862	71,684.40
				Total for HOOPESTON	AREA CUSD #11	\$71,684.4
IASB						
	10.2310.319	1	BOARDBOOK SUBSCRIPTION	IASB	45863	2,000.00
	10.2310.319	1	PRESS SUBSCRIPTION	IASB	45863	800.0
					Total for IASB	\$2,800.0
JONES	SCHOOL SUPPLY CO					
	10.2190.410	3	SUPPORT/GRAD EXPENSE	JONES SCHOOL SUPPLY CO	45864	667.8
				Total for JONES SCHO	OOL SUPPLY CO	\$667.8
LEAF						
	10.1101.413	4	TEACHER COPIER LEASE	LEAF	45865	495.33
					Total for LEAF	\$495.3
LINCOL	N FINANCIAL GROUP			_		
	10.2411.221	3	Employer Paid Benefits	LINCOLN FINANCIAL GROUP	45888	1.60
	20.2540.221	3	Employer Paid Benefits	LINCOLN FINANCIAL GROUP	45888	4.33
	10.1205.221	3	Employer Paid Benefits	LINCOLN FINANCIAL GROUP	45888	10.3
	10.2410.221	3	Employer Paid Benefits	LINCOLN FINANCIAL GROUP	45888	2.4
	10.2520.221	1	Employer Paid Benefits	LINCOLN FINANCIAL GROUP	45888	3.2
	40.2550.221	1	Employer Paid Benefits	LINCOLN FINANCIAL GROUP	45888	6.2
	10.1250.221	10	Employer Paid Benefits	LINCOLN FINANCIAL GROUP	45888	3.2
	10.2560.221	1	Employer Paid Benefits	LINCOLN FINANCIAL GROUP	45888	4.6
	10.1101.221	3	Employer Paid Benefits	LINCOLN FINANCIAL GROUP	45888	35.2
	10.1125.221	5	Employer Paid Benefits	LINCOLN FINANCIAL GROUP	45888	4.8
	10.1102.221	3	Employer Paid Benefits	LINCOLN FINANCIAL GROUP	45888	19.2
	80.1205.221	3	Employer Paid Benefits	LINCOLN FINANCIAL GROUP	45888	2.4
	80.2410.221	3	Employer Paid Benefits	LINCOLN FINANCIAL GROUP	45888	0.8
	80.2540.221	3	Employer Paid Benefits	LINCOLN FINANCIAL GROUP	45888	2.0
	80.2550.221	1	Employer Paid Benefits	LINCOLN FINANCIAL GROUP	45888	1.7
	80.2560.221	1	Employer Paid Benefits	LINCOLN FINANCIAL GROUP	45888	1.7
	10.2330.221	3	Employer Paid Benefits	LINCOLN FINANCIAL GROUP	45888	1.60
			. ,	Total for LINCOLN FIN	ANCIAL GROUP	\$105.6
THE LIN	NCOLN NATIONAL INS.					
	10.481.554	1	P/R Vendor Withholding	THE LINCOLN NATIONAL INS.	45889	375.38
	80.481.554	1	P/R Vendor Withholding	THE LINCOLN NATIONAL INS.	45889	29.4
	40.481.554	1	P/R Vendor Withholding	THE LINCOLN NATIONAL INS.	45889	38.4
	20.481.554	1	P/R Vendor Withholding	THE LINCOLN NATIONAL INS.	45889	15.7
	10.481.554	1	P/R Vendor Withholding	THE LINCOLN NATIONAL INS.	45889	375.3
	80.481.554	1	P/R Vendor Withholding	THE LINCOLN NATIONAL INS.	45889	29.4
	40.481.554	1	P/R Vendor Withholding	THE LINCOLN NATIONAL INS.	45889	38.4
	10.701.007	1	volidor vvidiliolanily	THE ENTOCKIN INATIONAL ING.	- 2009	30.4
	20.481.554	1	P/R Vendor Withholding	THE LINCOLN NATIONAL INS.	45889	15.7

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Group by Vendor; Order by Vendor; No Range; Show Paid, PR Paid;

Line Account		Description	Vendor	Check	Amount
			Total for THE LINCOLN N	ATIONAL INS.	\$918.00
LITHGOW AUTOMOTIVE, INC.					
40.2550.323	1	TURN SIGNAL LAMP ALL BUSES	LITHGOW AUTOMOTIVE, INC.	45866	3.68
40.2550.323	1	BRAKE INSPOECTION	LITHGOW AUTOMOTIVE, INC.	45893	89.00
			Total for LITHGOW AUTO	MOTIVE, INC.	\$92.68
MENARDS - DANVILLE			_		
20.2540.323	3	GS REPAIR/MAIN	MENARDS - DANVILLE	45867	19.88
20.2540.323	3	GS REPAIR/MAIN	MENARDS - DANVILLE	45867	47.77
			Total for MENARD	S - DANVILLE	\$67.65
MID-WEST TRUCKERS ASSOC			_		
40.2550.310	1	2017 ANNULA RANDOM INVOICE	MID-WEST TRUCKERS ASSOC	45868	419.65
			Total for MID-WEST TRUC	KERS ASSOC	\$419.65
M&T DISPOSAL			_		
20.2540.321	3	NOV SERVICE	M&T DISPOSAL	45869	200.00
			Total for Ma	&T DISPOSAL	\$200.00
NEXTEL PARTNERS			_		
40.2550.340	1	TRANS CELLULAR SERVICE	NEXTEL PARTNERS	45870	109.07
			Total for NEXTE	L PARTNERS	\$109.07
PERIPOLE-BERGERAULT, INC.			_		
10.1101.410.6	3	ELEM MUSIC SUPPLIES	PERIPOLE-BERGERAULT, INC.	45871	222.14
			Total for PERIPOLE-BERG	ERAULT, INC.	\$222.14
PRAIRIE FARMS			_		
10.2560.410	1	FOOD SERVICE FOOD	PRAIRIE FARMS	45872	663.20
10.1125.412	5	CARE-(PSFA)-SNACKS	PRAIRIE FARMS	45872	26.69
10.2560.410	17	FOOD SERVICE MILK	PRAIRIE FARMS	45872	385.58
10.2560.410	19	FOOD SERVICE BREAKFAST	PRAIRIE FARMS	45872	493.55
			Total for PR	AIRIE FARMS	\$1,569.02
QUALITY NETWORK SOLUTIONS			_		
10.2410.470	4	NOV SERVICES	QUALITY NETWORK SOLUTIONS	45873	1,843.71
			Total for QUALITY NETWORE	SOLUTIONS	\$1,843.71
QUILL CORPORATION			_		
10.2410.410	3	ELEMENTARY PRINC GEN SUP	QUILL CORPORATION	45874	35.97
			Total for QUILL Co	ORPORATION	\$35.97
RAEA			_		
10.481.59	1	P/R Vendor Withholding	RAEA	45890	909.93
20.481.59	1	P/R Vendor Withholding	RAEA	45890	23.45
40.481.59	1	P/R Vendor Withholding	RAEA	45890	41.24
80.481.59	1	P/R Vendor Withholding	RAEA	45890	42.94
10.481.59	1	P/R Vendor Withholding	RAEA	45890	909.93
20.481.59	1	P/R Vendor Withholding	RAEA	45890	23.45
40.481.59	1	P/R Vendor Withholding	RAEA	45890	41.24
80.481.59	1	P/R Vendor Withholding	RAEA -	45890	42.9 ⁴ \$ 2,035.1 2
DELIABLE ONE WA			ı	otal for RAEA	ಫ∠,∪ა ნ.1⊿
RELIABLE ONE INC.			- DELIABLE ONE (C)		
10.2560.412	1	FOOD SERVICE OTHER SUPPLIE	RELIABLE ONE INC.	45875	478.11
			Total for RELIAI	BLE ONE INC.	\$478.11

Group by Vendor; Order by Vendor; No Range; Show Paid, PR Paid;

Total for RELIABLE WATER SERVICE \$150	Line Account		Description	Vendor	Check	Amount
Total for RELIABLE WATER SERVICES SINCH SLAWN SERVICE SINCH	RELIABLE WATER SERVICES					
RICH'S LAWN SERVICE	20.2540.325	3	GS Oper/Maint Lease	RELIABLE WATER SERVICES	45876	148.92
1 OCT SERVICE RICHS LAWN SERVICE 45877 88 75 75 75 75 75 75				Total for RELIABLE WA	TER SERVICES	\$148.92
Total for RICH'S LAWN SERVICE SM Total for RICH'S LAWN SERVICE SM Total for TERMINEX 4 5878 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	RICH'S LAWN SERVICE					
Terminex	20.2540.319	1	OCT SERVICE	RICH'S LAWN SERVICE	45877	800.00
Total for TERMINEX				Total for RICH'S I	LAWN SERVICE	\$800.00
TYCO 80.2367.319 1 QUARTERLY SERVICE 1 TYCO 48979 7.7 Total for TYCO 57. UNITED HEALTHCARE 10.481.56 1 P/R Vendor Withholding 20.481.56 1 P/R Vendor Withholding 30.481.56 1 P/R Vendor Withholding 40.481.56 1 P/R Vendor Withholding 40.585.222 1 Employer Paid Benefits 40.481.56 1 P/R Vendor Withholding 40.481.56 40.48	TERMINEX					
TYCO 45879 7.7 Total for TYCO 45879 7.7 Total for TYCO 37.7 UNITED HEALTHCARE 1 P/R Vendor Withholding UNITED HEALTHCARE 45891 1.5 10.481.56 1 P/R Vendor Withholding UNITED HEALTHCARE 45891 1.5 40.481.56 1 P/R Vendor Withholding UNITED HEALTHCARE 45891 1.5 10.101.222 3 Employer Paid Benefits UNITED HEALTHCARE 45891 2.2 10.1101.222 3 Employer Paid Benefits UNITED HEALTHCARE 45891 3.3 10.1102.222 3 Employer Paid Benefits UNITED HEALTHCARE 45891 3.3 10.1102.222 3 Employer Paid Benefits UNITED HEALTHCARE 45891 3.3 10.1250.222 10 Employer Paid Benefits UNITED HEALTHCARE 45891 3.5 10.1250.222 10 Employer Paid Benefits UNITED HEALTHCARE 45891 3.5 10.250.222 10 Employer Paid Benefits UNITED HEALTHCARE 45891 3.5 10.250.222	20.2540.319	1	OCT SERVICE	TERMINEX	45878	75.00
1 QUARTERLY SERVICE				Tota	I for TERMINEX	\$75.00
UNITED HEALTHCARE	тусо					
UNITED HEALTHCARE	80.2367.319	1	QUARTERLY SERVICE	TYCO	45879	729.74
10.481.56					Total for TYCO	\$729.74
20.481.56 1 P/R Vendor Withholding UNITED HEALTHCARE 45891 22 40.481.56 1 P/R Vendor Withholding UNITED HEALTHCARE 45891 158 80.481.56 1 P/R Vendor Withholding UNITED HEALTHCARE 45891 22 10.1101.222 3 Employer Paid Benefits UNITED HEALTHCARE 45891 23 10.1125.222 5 Employer Paid Benefits UNITED HEALTHCARE 45891 23 10.1125.222 3 Employer Paid Benefits UNITED HEALTHCARE 45891 33 10.1102.222 3 Employer Paid Benefits UNITED HEALTHCARE 45891 76 40.2550.222 1 Employer Paid Benefits UNITED HEALTHCARE 45891 66 10.1250.222 1 Employer Paid Benefits UNITED HEALTHCARE 45891 66 10.1250.222 3 Employer Paid Benefits UNITED HEALTHCARE 45891 33 20.2540.222 3 Employer Paid Benefits UNITED HEALTHCARE 45891 158 20.2540.222 3 Employer Paid Benefits UNITED HEALTHCARE 45891 158 20.2550.222 1 Employer Paid Benefits UNITED HEALTHCARE 45891 158 20.2550.222 1 Employer Paid Benefits UNITED HEALTHCARE 45891 158 20.2481.56 1 P/R Vendor Withholding UNITED HEALTHCARE 45891 159 10.481.56 1 P/R Vendor Withholding UNITED HEALTHCARE 45891 159 40.481.56 1 P/R Vendor Withholding UNITED HEALTHCARE 45891 159 20.481.56 1 P/R Vendor Withholding UNITED HEALTHCARE 45891 159 20.481.56 1 P/R Vendor Withholding UNITED HEALTHCARE 45891 159 20.481.56 1 P/R Vendor Withholding UNITED HEALTHCARE 45891 159 20.481.56 1 P/R Vendor Withholding UNITED HEALTHCARE 45891 159 20.481.56 1 P/R Vendor Withholding UNITED HEALTHCARE 45891 159 20.481.56 1 P/R Vendor Withholding UNITED HEALTHCARE 45891 159 20.481.56 1 P/R Vendor Withholding UNITED HEALTHCARE 45891 159 20.481.56 1 P/R Vendor Withholding UNITED HEALTHCARE 45891 159 20.481.56 1 P/R Vendor Withholding UNITED HEALTHCARE 45891 159 20.481.56 1 P/R Vendor Withholding UNITED HEALTHCARE 45891 159 20.481.56 1 P/R Vendor Withholding UNITED HEALTHCARE 45891 159 20.481.56 1 P/R Vendor Withholding UNITED HEALTHCARE 45891 159 20.481.56 1 P/R Vendor Withholding UNITED HEALTHCARE 45891 159 20.481.56 1 P/R Vendor Withholding UNITED HEALTHCARE 45891 159 20.481.56 1 P/R Vendor Withholding UNITED HEALTHCARE 45891 159 20.481.56 1 P/R	UNITED HEALTHCARE					
20.481.56	10.481.56	1	P/R Vendor Withholding	UNITED HEALTHCARE	45891	1,514.00
40.481.56			· ·	*····== ··=····=		201.25
80.481,56			· ·			197.6
10.1101.222 3			-			250.65
10.1125.222 5 Employer Paid Benefits UNITED HEALTHCARE 45891 36			· ·			2,370.00
10.1102.222 3 Employer Paid Benefits UNITED HEALTHCARE 45891 75 40.2550.222 1 Employer Paid Benefits UNITED HEALTHCARE 45891 65 10.1250.222 10 Employer Paid Benefits UNITED HEALTHCARE 45891 33 20.2540.222 3 Employer Paid Benefits UNITED HEALTHCARE 45891 11 80.2540.222 3 Employer Paid Benefits UNITED HEALTHCARE 45891 11 80.2550.222 1 Employer Paid Benefits UNITED HEALTHCARE 45891 11 10.481.56 1 P/R Vendor Withholding UNITED HEALTHCARE 45891 115 10.481.56 1 P/R Vendor Withholding UNITED HEALTHCARE 45891 1.55 20.481.56 1 P/R Vendor Withholding UNITED HEALTHCARE 45891 1.55 20.481.56 1 P/R Vendor Withholding UNITED HEALTHCARE 45891 1.55 40.481.56 1 P/R Vendor Withholding UNITED HEALTHCARE 45891 1.55 20.481.56 1 P/R Vendor Withholding UNITED HEALTHCARE 45891 1.55 20.481.56 1 P/R Vendor Withholding UNITED HEALTHCARE 45891 1.55 20.481.56 1 P/R Vendor Withholding UNITED HEALTHCARE 45891 1.55 20.481.59 1 P/R Vendor Withholding UNITED HEALTHCARE 45891 1.55 20.481.59 1 P/R Vendor Withholding UNITED HEALTHCARE 45891 1.55 20.481.59 1 P/R Vendor Withholding UNITED HEALTHCARE 45891 1.55 20.481.59 1 P/R Vendor Withholding UNITED HEALTHCARE 45891 1.55 20.481.59 1 P/R Vendor Withholding UNITED HEALTHCARE 45891 1.55 20.481.59 1 P/R Vendor Withholding UNITED HEALTHCARE 45891 1.55 20.481.59 1 P/R Vendor Withholding UNITED HEALTHCARE 45891 1.55 20.481.59 1 P/R Vendor Withholding UNITED HEALTHCARE 45891 1.55 20.481.59 1 P/R Vendor Withholding UNITED HEALTHCARE 45891 1.55 20.481.59 1 P/R Vendor Withholding UNITED HEALTHCARE 45891 1.55 20.481.59 1 P/R Vendor Withholding UNITED HEALTHCARE 45891 1.55 20.481.59 1 P/R Vendor Withholding UNITED HEALTHCARE 45891 1.55 20.481.59 1 P/R Vendor Withholding UNITED HEALTHCARE 45891 1.55 20.481.59 1 P/R Vendor Withholding UNITED HEALTHCARE 45891 1.55 20.481.59 1 P/R Vendor Withholding UNITED HEALTHCARE 45891 1.55 20.481.50 1 P/R Vendor Withholding UNITED HEALTHCARE 45891 1.55 20.481.50 1 P/R Vendor Withholding UNITED HEALTHCARE 45891 1.55 20.481.50 1 P/R Vendor Withholding UNITED HEALTHCARE 45891 1.5						395.00
40,2550,222			· ·			790.0
10.1250.222						632.00
20.2540.222 3 Employer Paid Benefits UNITED HEALTHCARE 45891 158 80.2540.222 3 Employer Paid Benefits UNITED HEALTHCARE 45891 158 80.2550.222 1 Employer Paid Benefits UNITED HEALTHCARE 45891 158 10.481.56 1 P/R Vendor Withholding UNITED HEALTHCARE 45891 1.57 20.481.56 1 P/R Vendor Withholding UNITED HEALTHCARE 45891 1.57 20.481.56 1 P/R Vendor Withholding UNITED HEALTHCARE 45891 258 40.481.56 1 P/R Vendor Withholding UNITED HEALTHCARE 45891 158 40.481.56 1 P/R Vendor Withholding UNITED HEALTHCARE 45891 158 40.481.56 1 P/R Vendor Withholding UNITED HEALTHCARE 45891 158 40.481.59 1 P/R Vendor Withholding USA FUNDS 45892 168 40.481.59 1 P/R Vendor Withholding USA FUNDS 45892 168 40.481.59 1 P/R Vendor Withholding USA FUNDS 45892 168 50.481.59 1 P/R Vendor Withholding USA FUNDS 45892 168 50.481.59 1 P/R Vendor Withholding USA FUNDS 45892 168 50.481.59 1 P/R Vendor Withholding USA FUNDS 45892 168 50.481.59 1 P/R Vendor Withholding USA FUNDS 45892 168 50.481.59 1 P/R Vendor Withholding USA FUNDS 45892 168 50.481.59 1 P/R Vendor Withholding USA FUNDS 45892 168 50.481.59 1 P/R Vendor Withholding USA FUNDS 45892 168 50.481.59 1 P/R Vendor Withholding USA FUNDS 45892 168 50.481.59 1 P/R Vendor Withholding USA FUNDS 45892 168 50.481.59 1 P/R Vendor Withholding USA FUNDS 45892 168 50.481.59 1 P/R Vendor Withholding USA FUNDS 45892 168 50.481.59 1 P/R Vendor Withholding USA FUNDS 45892 168 50.481.59 1 P/R Vendor Withholding USA FUNDS 45892 168 50.481.59 1 P/R Vendor Withholding USA FUNDS 45892 168 50.481.59 1 P/R Vendor Withholding USA FUNDS 45892 168 50.481.59 1 P/R Vendor Withholding USA FUNDS 1 P/R Vendor Withholding USA FUNDS 1 P/R Vendor Withholding USA FUNDS 1 P/R Vendor Withholding		-	· ·			395.00
80.2540.222 3 Employer Paid Benefits UNITED HEALTHCARE 45891 158 80.2550.222 1 Employer Paid Benefits UNITED HEALTHCARE 45891 158 10.481.56 1 P/R Vendor Withholding UNITED HEALTHCARE 45891 1.57 20.481.56 1 P/R Vendor Withholding UNITED HEALTHCARE 45891 2.57 40.481.56 1 P/R Vendor Withholding UNITED HEALTHCARE 45891 2.57 40.481.56 1 P/R Vendor Withholding UNITED HEALTHCARE 45891 1.58 80.481.56 1 P/R Vendor Withholding UNITED HEALTHCARE 45891 1.58 80.481.56 1 P/R Vendor Withholding UNITED HEALTHCARE 45891 2.57 Total for UNITED HEALTHCARE 45891 2.57 Total for UNITED HEALTHCARE 45891 2.57 VERMILION ASSOC OF SP ED 45892 1.67 10.481.59 1 P/R Vendor Withholding USA FUNDS 45892 1.67 Total for USA FUNDS 3.37 VERMILION ASSOC OF SP ED 45890 16.26 VERMICOUNTY HEALTH DEPT VERMICION ASSOC OF SP ED 45880 16.26 Total for VERMICION ASSOC OF SP ED 45881 6.26 VERM COUNTY HEALTH DEPT 45881 6.26 Total for VERM COUNTY HEALTH DEPT 45882 3.36 VILLAGE OF ROSSVILLE 45882			· ·			197.50
80.2550.222						197.50
10.481.56			· ·			158.00
20.481.56		•				1,514.00
40.481.56 1 P/R Vendor Withholding UNITED HEALTHCARE 45891 158 80.481.56 1 P/R Vendor Withholding UNITED HEALTHCARE 45891 258 Total for UNITED HEALTHCARE \$9,44 USA FUNDS 10.481.59 1 P/R Vendor Withholding USA FUNDS 45892 168 10.481.59 1 P/R Vendor Withholding USA FUNDS 45892 168 Total for USA FUNDS \$33 VERMILION ASSOC OF SP ED 10.4120.620 2 1ST INSTALLMENT 16/17 VERMILION ASSOC OF SP ED 45880 16,258 Total for VERMILION ASSOC OF SP ED \$16,258 VERM COUNTY HEALTH DEPT 10.2560.640 1 FOOD SERVICE PERMIT VERM COUNTY HEALTH DEPT 45881 688 VILLAGE OF ROSSVILLE 20.2540.370 3 WATER/SEWER/GAS GS VILLAGE OF ROSSVILLE 45882 31			_			201.25
1 P/R Vendor Withholding			· ·			197.60
Total for UNITED HEALTHCARE \$9,40		-	-			250.65
USA FUNDS	00.401.50	'	F/R veridor withholding			\$9,462.00
10.481.59	USA FUNDS					. ,
10.481.59		1	P/R Vendor Withholding	LISA FUNDS	45892	166.46
Total for USA FUNDS \$33 VERMILION ASSOC OF SP ED 45880 16,29 Total for VERMILION ASSOC OF SP ED 45880 16,29 VERM COUNTY HEALTH DEPT VERM COUNTY HEALTH DEPT 45881 66 Total for VERM COUNTY HEALTH DEPT \$6 VILLAGE OF ROSSVILLE 20.2540.370 3 WATER/SEWER/GAS GS VILLAGE OF ROSSVILLE 45882 31			_			166.46
10.4120.620 2 1ST INSTALLMENT 16/17 VERMILION ASSOC OF SP ED 45880 16,29 VERM COUNTY HEALTH DEPT 10.2560.640 1 FOOD SERVICE PERMIT VERM COUNTY HEALTH DEPT 45881 60 Total for VERM COUNTY HEALTH DEPT \$6 VILLAGE OF ROSSVILLE 20.2540.370 3 WATER/SEWER/GAS GS VILLAGE OF ROSSVILLE 45882 31		·	. A. C. Condon Condining			\$332.92
Total for VERMILION ASSOC OF SP ED \$16,29 VERM COUNTY HEALTH DEPT VERM COUNTY HEALTH DEPT 45881 6 Total for VERM COUNTY HEALTH DEPT \$6 VILLAGE OF ROSSVILLE 20.2540.370 3 WATER/SEWER/GAS GS VILLAGE OF ROSSVILLE 45882 31	VERMILION ASSOC OF SP ED					
VERM COUNTY HEALTH DEPT 45881 6 10.2560.640 1 FOOD SERVICE PERMIT VERM COUNTY HEALTH DEPT \$6 Total for VERM COUNTY HEALTH DEPT \$6 VILLAGE OF ROSSVILLE 20.2540.370 3 WATER/SEWER/GAS GS VILLAGE OF ROSSVILLE 45882 31	10.4120.620	2	1ST INSTALLMENT 16/17	VERMILION ASSOC OF SP ED	45880	16,296.97
10.2560.640 1 FOOD SERVICE PERMIT VERM COUNTY HEALTH DEPT 45881 6 Total for VERM COUNTY HEALTH DEPT \$ VILLAGE OF ROSSVILLE 20.2540.370 3 WATER/SEWER/GAS GS VILLAGE OF ROSSVILLE 45882 31				Total for VERMILION AS	SSOC OF SP ED	\$16,296.97
VILLAGE OF ROSSVILLE 20.2540.370 3 WATER/SEWER/GAS GS VILLAGE OF ROSSVILLE 45882 31	VERM COUNTY HEALTH DEPT					
VILLAGE OF ROSSVILLE 20.2540.370 3 WATER/SEWER/GAS GS VILLAGE OF ROSSVILLE 45882 31	10.2560.640	1	FOOD SERVICE PERMIT	VERM COUNTY HEALTH DEPT	45881	60.00
20.2540.370 3 WATER/SEWER/GAS GS VILLAGE OF ROSSVILLE 45882 31				Total for VERM COUNTY	HEALTH DEPT	\$60.00
	VILLAGE OF ROSSVILLE					
Total for VII LAGE OF ROSSVII I E \$3'	20.2540.370	3	WATER/SEWER/GAS GS	VILLAGE OF ROSSVILLE	45882	315.99
TOTAL TO VILLAGE OF ROOSVILLE				Total for VILLAGE	OF ROSSVILLE	\$315.99

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Group by Vendor; Order by Vendor; No Range; Show Paid, PR Paid;

Fund 10	Debits	Credits
Expense	317,346.27	0.00
Asset	0.00	324,865.19
Liability	7,518.92	0.00
Total for Fund 10	324,865.19	324,865.19
Fund 20	Debits	Credits
Expense	5,721.27	0.00
Asset	0.00	6,207.67
Liability	486.40	0.00
Total for Fund 20	6,207.67	6,207.67
Fund 40	Debits	Credits
Expense	3,760.05	0.00
Asset	0.00	4,408.97
Liability	648.92	0.00
Total for Fund 40	4,408.97	4,408.97
Fund 80	Debits	Credits
Expense	2,616.95	0.00
Asset	0.00	3,443.91
Liability	826.96	0.00
Total for Fund 80	3,443.91	3,443.91
Grand Total	Debits	Credits
Expense	329,444.54	0.00
Asset	0.00	338,925.74
Liability	9,481.20	0.00
Grand Total	338,925.74	338,925.74