For the Accounting Period: 2/19

Claim Checks

Check #	Type	Vendor #/Name	Check Amount	Date Issued	Period Redeemed	Claim #	Claim Amount
76638	S	5325 INNOVATIVE LIVING GROUP	10000.00	02/14/19	_________		
						CL 108581	10000.00
76639	S	2514 DIREK SMALL	75.00	02/14/19	_________		
						CL 108582	75.00
76640	S	4678 KRYSTAL FOURSOULS	800.00	02/14/19	_________		
						CL 108583	800.00
76641	S	5514 LOIS POTTER	150.00	02/14/19	_________		
						CL 108584	150.00
76642	S	2070 MERLE TENDOY	100.00	02/14/19	_________		
						CL 108585	100.00
76643	S	5342 REESE GRAY	75.00	02/14/19	_________		
						CL 108586	75.00
76644	S	5358 AARON MORSETTE	200.00	02/14/19	_________		
						CL 108587	200.00
76645	S	4856 HEATHER A. OATS	29.40	02/14/19	_________		
						CL 108588	29.40
76646	S	4941 JERRY COLEMAN	387.00	02/14/19	_________		
						CL 108589	387.00
76647	S	5469 MELISSA HAN	83.22	02/14/19	_________		
						CL 108590	83.22
76648	S	1163 ROBERT PARKER	48.80	02/14/19	_________		
						CL 108591	48.80
76649	S	5281 THERESA ELLISON	94.70	02/14/19	_________		
						CL 108592	94.70
76650	S	3871 ACADIA MONTANA	4226.64	02/14/19	_________		
						CL 108593	4226.64
76651	S	5343 BMO HARRIS MASTERCARD	9414.57	02/14/19	_________		
						CL 108594	9414.57
76652	S	5499 CHS BIG SKY	4590.00	02/14/19	_________		
						CL 108595	4590.00
76653	S	1081 FIRST ADVANTAGE OCC HEALTH SVCS	1031.92	02/14/19	_________		
						CL 108596	1031.92
76654	S	3400 GRAMMA'S MARKET	105.75	02/14/19	_________		
						CL 108597	105.75
76655	S	873 HAVRE CHAMBER OF COMMERCE	200.00	02/14/19	_________		
						CL 108598	200.00
76656	S	27 HILL COUNTY ELECTRIC	10952.99	02/14/19	_________		
						CL 108599	10952.99
76657	S	2863 JITTER BUGS	50.00	02/14/19	_________		
						CL 108600	50.00
76658	S	2371 MONTANA BUSINESS PROFEESIONALS OF AMERIC	780.00	02/14/19	_________		
						CL 108601	780.00
76659	S	4116 MONTANA INTERACTIVE	58.00	02/14/19	_________		
						CL 108602	58.00
76660	S	1924 ROCKY BOY SCHOOLS (DEPOSIT)	3978.91	02/15/19	_________		
						CL 108603	3978.91
76661	S	2144 STUDENT ACTIVITY ACCOUNT	360.00	02/15/19	_________		
						CL 108604	360.00

Claim Checks

Check #	Type	Vendor #/Name	Check Amount	Date Issued	Period Redeemed	Claim #	Claim Amount
76662	S	2144 STUDENT ACTIVITY ACCOUNT	165.00	02/15/19	_________		
						CL 108605	165.00
76663	S	3 TRIANGLE TELEPHONE	2439.97	02/15/19	_________		
						CL 108606	2439.97

Total for Claim Checks	**50396.87**
Count for Claim Checks	26

* denotes missing check number(s)

\# of Checks: 26 Total: 50396.87