

Board Report

Group by Vendor; Order by Vendor; Range by Check Num; Show Paid, PR Paid;

Date: Feb, 2016; Range: 45425 - ;

Line	Account	Description	Vendor	Check	Amount
AMERICAN FAMILY LIFE					
10.481.55	1	P/R Vendor Withholding	AMERICAN FAMILY LIFE	45426	109.68
80.481.55	1	P/R Vendor Withholding	AMERICAN FAMILY LIFE	45426	4.40
10.481.55	1	P/R Vendor Withholding	AMERICAN FAMILY LIFE	45426	109.68
80.481.55	1	P/R Vendor Withholding	AMERICAN FAMILY LIFE	45426	4.40
Total for AMERICAN FAMILY LIFE					\$228.16
WASHINGTON NATIONAL INS.					
10.481.553	1	P/R Vendor Withholding	WASHINGTON NATIONAL INS.	45427	34.26
10.481.553	1	P/R Vendor Withholding	WASHINGTON NATIONAL INS.	45427	34.26
Total for WASHINGTON NATIONAL INS.					\$68.52
EYE MED					
10.481.555	1	P/R Vendor Withholding	EYE MED	45428	75.91
40.481.555	1	P/R Vendor Withholding	EYE MED	45428	7.73
80.481.555	1	P/R Vendor Withholding	EYE MED	45428	2.90
20.481.555	1	P/R Vendor Withholding	EYE MED	45428	4.46
10.481.555	1	P/R Vendor Withholding	EYE MED	45428	75.91
40.481.555	1	P/R Vendor Withholding	EYE MED	45428	7.73
80.481.555	1	P/R Vendor Withholding	EYE MED	45428	2.90
20.481.555	1	P/R Vendor Withholding	EYE MED	45428	4.46
Total for EYE MED					\$182.00
UNIT 4780 NCPERS LIFE INS					
10.481.56	1	P/R Vendor Withholding	UNIT 4780 NCPERS LIFE INS	45429	8.00
10.481.56	1	P/R Vendor Withholding	UNIT 4780 NCPERS LIFE INS	45429	8.00
Total for UNIT 4780 NCPERS LIFE INS					\$16.00
TSA CONSULTING GROUP					
10.481.56	1	P/R Vendor Withholding	TSA CONSULTING GROUP	45430	550.00
80.481.56	1	P/R Vendor Withholding	TSA CONSULTING GROUP	45430	40.00
10.1205.210.4	3	Employer Paid Benefits	TSA CONSULTING GROUP	45430	288.00
10.1101.210.6	3	Employer Paid Benefits	TSA CONSULTING GROUP	45430	320.00
80.1205.210.4	3	Employer Paid Benefits	TSA CONSULTING GROUP	45430	32.00
10.2411.210.6	3	Employer Paid Benefits	TSA CONSULTING GROUP	45430	320.00
10.1205.210.6	3	Employer Paid Benefits	TSA CONSULTING GROUP	45430	284.80
80.1205.210.6	3	Employer Paid Benefits	TSA CONSULTING GROUP	45430	35.20
10.481.56	1	P/R Vendor Withholding	TSA CONSULTING GROUP	45430	550.00
80.481.56	1	P/R Vendor Withholding	TSA CONSULTING GROUP	45430	40.00
Total for TSA CONSULTING GROUP					\$2,460.00
HYATT REGENCY CHICAGO					
10.2310.332	1	BD OF ED TRAVEL	HYATT REGENCY CHICAGO	45425	3,080.84
Total for HYATT REGENCY CHICAGO					\$3,080.84
LINCOLN FINANCIAL GROUP					
10.2411.221	3	Employer Paid Benefits	LINCOLN FINANCIAL GROUP	45431	3.20
20.2540.221	3	Employer Paid Benefits	LINCOLN FINANCIAL GROUP	45431	5.28
10.1205.221	3	Employer Paid Benefits	LINCOLN FINANCIAL GROUP	45431	13.01
10.2410.221	3	Employer Paid Benefits	LINCOLN FINANCIAL GROUP	45431	3.03
10.2520.221	1	Employer Paid Benefits	LINCOLN FINANCIAL GROUP	45431	3.20
40.2550.221	1	Employer Paid Benefits	LINCOLN FINANCIAL GROUP	45431	5.78
10.1250.221	10	Employer Paid Benefits	LINCOLN FINANCIAL GROUP	45431	3.20
10.2560.221	1	Employer Paid Benefits	LINCOLN FINANCIAL GROUP	45431	5.86
10.1101.221	3	Employer Paid Benefits	LINCOLN FINANCIAL GROUP	45431	44.80
10.1125.221	5	Employer Paid Benefits	LINCOLN FINANCIAL GROUP	45431	4.80
10.1102.221	3	Employer Paid Benefits	LINCOLN FINANCIAL GROUP	45431	12.80
80.1205.221	3	Employer Paid Benefits	LINCOLN FINANCIAL GROUP	45431	1.39
80.2410.221	3	Employer Paid Benefits	LINCOLN FINANCIAL GROUP	45431	0.09
80.2540.221	3	Employer Paid Benefits	LINCOLN FINANCIAL GROUP	45431	1.12

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	80.2550.221	1 Employer Paid Benefits	LINCOLN FINANCIAL GROUP	45431	0.70
	80.2560.221	1 Employer Paid Benefits	LINCOLN FINANCIAL GROUP	45431	0.54
Total for LINCOLN FINANCIAL GROUP					\$108.80
THE LINCOLN NATIONAL INS.					
	10.481.554	1 P/R Vendor Withholding	THE LINCOLN NATIONAL INS.	45432	438.49
	80.481.554	1 P/R Vendor Withholding	THE LINCOLN NATIONAL INS.	45432	15.97
	40.481.554	1 P/R Vendor Withholding	THE LINCOLN NATIONAL INS.	45432	43.52
	20.481.554	1 P/R Vendor Withholding	THE LINCOLN NATIONAL INS.	45432	25.52
	10.481.554	1 P/R Vendor Withholding	THE LINCOLN NATIONAL INS.	45432	438.49
	80.481.554	1 P/R Vendor Withholding	THE LINCOLN NATIONAL INS.	45432	15.97
	40.481.554	1 P/R Vendor Withholding	THE LINCOLN NATIONAL INS.	45432	43.52
	20.481.554	1 P/R Vendor Withholding	THE LINCOLN NATIONAL INS.	45432	25.52
Total for THE LINCOLN NATIONAL INS.					\$1,047.00
RAEA					
	10.481.59	1 P/R Vendor Withholding	RAEA	45433	857.43
	20.481.59	1 P/R Vendor Withholding	RAEA	45433	24.72
	40.481.59	1 P/R Vendor Withholding	RAEA	45433	40.45
	80.481.59	1 P/R Vendor Withholding	RAEA	45433	24.93
	10.481.59	1 P/R Vendor Withholding	RAEA	45433	857.43
	20.481.59	1 P/R Vendor Withholding	RAEA	45433	24.72
	40.481.59	1 P/R Vendor Withholding	RAEA	45433	40.45
	80.481.59	1 P/R Vendor Withholding	RAEA	45433	24.93
Total for RAEA					\$1,895.06
UNITED HEALTHCARE					
	10.481.56	1 P/R Vendor Withholding	UNITED HEALTHCARE	45434	1,400.50
	20.481.56	1 P/R Vendor Withholding	UNITED HEALTHCARE	45434	283.50
	40.481.56	1 P/R Vendor Withholding	UNITED HEALTHCARE	45434	170.00
	80.481.56	1 P/R Vendor Withholding	UNITED HEALTHCARE	45434	87.50
	10.1101.222	3 Employer Paid Benefits	UNITED HEALTHCARE	45434	3,160.00
	10.1125.222	5 Employer Paid Benefits	UNITED HEALTHCARE	45434	395.00
	10.1102.222	3 Employer Paid Benefits	UNITED HEALTHCARE	45434	790.00
	40.2550.222	1 Employer Paid Benefits	UNITED HEALTHCARE	45434	703.10
	10.1250.222	10 Employer Paid Benefits	UNITED HEALTHCARE	45434	395.00
	20.2540.222	3 Employer Paid Benefits	UNITED HEALTHCARE	45434	319.95
	80.2540.222	3 Employer Paid Benefits	UNITED HEALTHCARE	45434	75.05
	80.2550.222	1 Employer Paid Benefits	UNITED HEALTHCARE	45434	86.90
	10.481.56	1 P/R Vendor Withholding	UNITED HEALTHCARE	45434	1,400.50
	20.481.56	1 P/R Vendor Withholding	UNITED HEALTHCARE	45434	283.50
	40.481.56	1 P/R Vendor Withholding	UNITED HEALTHCARE	45434	170.00
	80.481.56	1 P/R Vendor Withholding	UNITED HEALTHCARE	45434	87.50
Total for UNITED HEALTHCARE					\$9,808.00
USA FUNDS					
	10.481.59	1 P/R Vendor Withholding	USA FUNDS	45435	166.46
	10.481.59	1 P/R Vendor Withholding	USA FUNDS	45435	166.46
Total for USA FUNDS					\$332.92

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Fund 10	Debits	Credits
Expense	9,127.54	0.00
Asset	0.00	16,409.00
Liability	7,281.46	0.00
Total for Fund 10	16,409.00	16,409.00

Fund 20	Debits	Credits
Expense	325.23	0.00
Asset	0.00	1,001.63
Liability	676.40	0.00
Total for Fund 20	1,001.63	1,001.63

Fund 40	Debits	Credits
Expense	708.88	0.00
Asset	0.00	1,232.28
Liability	523.40	0.00
Total for Fund 40	1,232.28	1,232.28

Fund 80	Debits	Credits
Expense	232.99	0.00
Asset	0.00	584.39
Liability	351.40	0.00
Total for Fund 80	584.39	584.39

Grand Total	Debits	Credits
Expense	10,394.64	0.00
Asset	0.00	19,227.30
Liability	8,832.66	0.00
Grand Total	19,227.30	19,227.30