Waterford-Halfmoon UFSD

Check Warrant Report For A - 20: General Fund 10/22/2020 For Dates 10/22/2020 - 10/22/2020



| Check # | Check Date V | endor ID Vendor Name | | | DO N | | |
|--------------|--------------------|--|---|------------------------------|--------------------------|--------------|------------|
| Account | | | | Invoice Number | PO Number | Check Amount | Liquidated |
| 56003 | 10/22/2020 | 6923 Commissioner of Tax | & Finance | | | | |
| A 9040.800-0 | 00-74 | | | Quarter 3 GA-4 | | 558.39 | |
| | | | | Worker's Comp | | | |
| | | | | | Check Total: | 558.39 | |
| 56004 | 10/22/2020 | 9960 rSchool Today | | | | | |
| A 2630.452-0 | 00-21 | | | 55780 | 200438 | 499.00 | 499.00 |
| | | | | | Check Total: | 499.00 | |
| Numbo | r of Transactions: | • | | | Warrant Total: | 1,057.39 | |
| Numbe | i di Transactions. | 2 | | | Vendor Portion: | 1,057.39 | |
| | | | | | | , | |
| | | | | | | | |
| | | | Certification of Warra | ant | | | |
| | To The Dis | strict Treasurer: I hereby certify th | | | in the total amount of | | |
| | \$ | You are hereby author e each to the proper fund. | at I have verified the above claims, ized and directed to pay to the clain | nants certified above the an | nount of each claim allo | owed | |
| | and charg | e each to the proper fund. | | | | | |
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| | | Date | Signature | | Title | | |
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