

Docket of Claims
Release date from 04/26/2024 thru 04/26/2024

Fund	Name of Claimant	Trans #	Release Date	Claim Date	Claim Number	Check Number	Claim Amount	Approved/Disapproved
001	PAYROLL CLEARING FUND	244167	04/26/2024	04/26/2024	2391		62,403.25	
	Account Number	Description	Invoice #	Date	P.O.	Amount		
	001-101-468	GUARDIAN EMP.VISION/DENTAL/LIF		04/26/2024		737.19		
	001-101-468	EMPLOYEE INS. MATCH PP		04/26/2024		6,300.00		
	001-102-468	GUARDIAN EMP.VISION/DENTAL/LIF		04/26/2024		655.28		
	001-102-468	EMPLOYEE INS. MATCH PP		04/26/2024		5,600.00		
	001-162-411	GROSS WAGES		04/26/2024		4,935.41		
	001-162-413	GROSS WAGES		04/26/2024		26,166.66		
	001-162-465	RETIREMENT MATCHING		04/26/2024		5,411.76		
	001-162-466	FICA MATCHING		04/26/2024		1,904.75		
	001-162-466	MEDICARE MATCHING		04/26/2024		445.46		
	001-162-468	UMR ELECTED OFFICIAL MEDICAL		04/26/2024		1,400.00		
	001-162-468	UMR EMPLOYEE MEDICAL		04/26/2024		700.00		
	001-162-468	GUARDIAN EMP.VISION/DENTAL/LIF		04/26/2024		81.91		
	001-162-468	GUARDIAN ELECTDENTAL/VIS/LIFE		04/26/2024		163.82		
	001-163-468	GUARDIAN EMP.VISION/DENTAL/LIF		04/26/2024		409.55		
	001-163-468	EMPLOYEE INS. MATCH PP		04/26/2024		3,500.00		
	001-180-468	GUARDIAN ELECTDENTAL/VIS/LIFE		04/26/2024		409.55		
	001-180-468	UMR ELECT OFF.MEDICAL MATCH PP		04/26/2024		2,800.00		
	001-630-468	GUARDIAN EMP.VISION/DENTAL/LIF		04/26/2024		81.91		
	001-630-468	EMPLOYEE INS. MATCH PP		04/26/2024		700.00		
FUND TOTAL	1 Claims	2391 to	2391 Checks	1 Total	62,403.25 Manual	Held	Total	62,403.25

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187	PAYROLL CLEARING FUND	244168	04/26/2024	04/26/2024	13		781.91	
	Account Number		Description	Invoice #	Date	P.O.	Amount	
	187-163-468		GUARDIAN EMP.VISION/DENTAL/LIF		04/26/2024		81.91	
	187-163-468		EMPLOYEE INS. MATCH PP		04/26/2024		700.00	
FUND TOTAL	187 Claims	13	to	13 Checks	1 Total	781.91 Manual	Held	Total 781.91

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Fund	Name of Claimant	Trans #	Release Date	Claim Date	Claim Number	Check Number	Claim Amount	Approved/Disapproved
194	PAYROLL CLEARING FUND	244170	04/26/2024	04/26/2024	54		187.19	
	Account Number		Description	Invoice #	Date	P.O.	Amount	
	194-161-468		GUARDIAN EMP.VISION/DENTAL/LIF		04/26/2024		19.61	
	194-161-468		EMPLOYEE INS. MATCH PP		04/26/2024		167.58	
FUND TOTAL	194 Claims	54	to	54 Checks	1 Total	187.19 Manual	Held	Total 187.19

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SUMMARY OF ALL FUNDS

FUND 1	Claims	2391	to	2391	Checks	1	Total	62,403.25	Manual	Held	Total	62,403.25
FUND 187	Claims	13	to	13	Checks	1	Total	781.91	Manual	Held	Total	781.91
FUND 190	Claims	48	to	48	Checks	1	Total	594.72	Manual	Held	Total	594.72
FUND 194	Claims	54	to	54	Checks	1	Total	187.19	Manual	Held	Total	187.19
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Total for all Funds				Checks		4	Total	63,967.07	Manual	Held	Total	63,967.07