VILLAGE OF CLARENDON HILLS

February 20, 2024

CLAIMS # 24-02-02M

2024 Calendar Year Disbursements

February 2024 Manual Checks Total:$51,160.31

CLAIM NUMBER

DESCRIPTION	AMOUNT	ACCOUNT NAME	FUND & ACCOUNT	INVOICE	PO#	F/P ID LINE
INTERGOVERNMENTAL PERSON 42399						
02/24 LIB HEALTH/LIFE IN	3,085.30	DUE FROM CH LIBRARY	01.000.1340	FEBRUARY 2024		161 00010
02/24 LIBRARY DENTAL INS	176.30	DUE FROM CH LIBRARY	01.000.1340	FEBRUARY 2024		161 00021
02/24 RETIREE HEALTH INS	3,951.27CR	RETIREE/COBRA INSURANCE	01.000.1375	FEBRUARY 2024		161 00012
02/24 RETIREE DENTAL INS	445.20	RETIREE/COBRA INSURANCE	01.000.1375	FEBRUARY 2024		161 00030
02/24 SUPP LIFE INS	128.00	EMPLOYEE SUPP. INS. CONT	01.000.2031	FEBRUARY 2024		161 00035
02/24 FEE	145.00	EMPLOYEE HEALTH & SAFETY	01.510.4115	FEBRUARY 2024		161 00034
02/24 HEALTH/LIFE INS	2,074.34	HEALTH/DENTAL INSURANCE	01.510.4120	FEBRUARY 2024		161 00001
02/24 DENTAL INSURANCE	222.60	HEALTH/DENTAL INSURANCE	01.510.4120	FEBRUARY 2024		161 00014
02/24 HEALTH/LIFE INS	4,361.70	HEALTH/DENTAL INSURANCE	01.512.4120	FEBRUARY 2024		161 00002
02/24 DENTAL INSURANCE	187.34	HEALTH/DENTAL INSURANCE	01.512.4120	FEBRUARY 2024		161 00015
02/24 PSBA	2,036.74	PSEBA	01.520.4117	FEBRUARY 2024		161 00004
02/24 HEALTH/LIFE INS	21,689.77	HEALTH/DENTAL INSURANCE	01.520.4120	FEBRUARY 2024		161 00003
02/24 DENTAL INSURANCE	1,113.00	HEALTH/DENTAL INSURANCE	01.520.4120	FEBRUARY 2024		161 00016
02/24 HEALTH/LIFE INS	3,050.45	HEALTH/DENTAL INSURANCE	01.530.4120	FEBRUARY 2024		161 00005
02/24 DENTAL INSURANCE	140.51	HEALTH/DENTAL INSURANCE	01.530.4120	FEBRUARY 2024		161 00017
02/24 HEALTH/LIFE INS	6,018.80	HEALTH/DENTAL INSURANCE	01.540.4120	FEBRUARY 2024		161 00006
02/24 DENTAL INSURANCE	345.48	HEALTH/DENTAL INSURANCE	01.540.4120	FEBRUARY 2024		161 00018
02/24 HEALTH/LIFE INS	3,336.97	HEALTH/DENTAL INSURANCE	01.550.4120	FEBRUARY 2024		161 00007
2/24 DENTAL INSURANCE	140.50	HEALTH/DENTAL INSURANCE	01.550.4120	FEBRUARY 2024		161 00019
02/24 HEALTH/LIFE INS	5,438.03	HEALTH/DENTAL INSURANCE	20.560.4120	FEBRUARY 2024		161 00008
02/24 DENTAL INSURANCE	251.79	HEALTH/DENTAL INSURANCE	20.560.4120	FEBRUARY 2024		161 00020
02/24 RETIREE HEALTH INS	630.09	RETIREE/COBRA INSURANCE	71.000.1375	FEBRUARY 2024		161 00013
02/24 RETIREE DENTAL INS	93.67	RETIREE/COBRA INSURANCE	71.000.1375	FEBRUARY 2024		161 00031
	51,160.31	*TOTAL				
	51,160.31	**CLAIMS TOTAL				

CLAIM NUMBER / DESCRIPTION	AMOUNT	ACCOUNT NAME	FUND & ACCOUNT	INVOICE	PO#	F/P ID LINE
REPORT TOTALS:	51,160.31					

RECORDS PRINTED - 000023

FUND RECAP:

FUND	DESCRIPTION	DISBURSEMENTS
01	GENERAL FUND	44,746.73
20	WATER FUND	5,689.82
71	POLICE PENSION FUND	723.76
TOTAL ALL FUNDS		51,160.31

BANK RECAP:

BANK	NAME	DISBURSEMENTS
BANK	CLARENDON HILLS BANK	51,160.31
TOTAL ALL BANKS		51,160.31

THE PRECEDING LIST OF BILLS PAYABLE WAS REVIEWED AND APPROVED FOR PAYMENT.

DATE ..... APPROVED BY .....

.....

.....