

ADMINISTRATIVE/LEGISLATIVE _____
COMMUNITY/INTERGOVERNMENTAL AFFAIRS _____
FINANCE 11/2/15 8.3 _____
LAND USE _____
PUBLIC SERVICE _____
PUBHCSAFETY _____

VILLAGE OF CLARENDON HILLS

October 31, 2015

CLAIMS ORDINANCE # 15-10-01M

2016 Fiscal Year Disbursements

October 2015 Manual Checks

Claims Register

CLAIM NUMBER	DESCRIPTION	AMOUNT	ACCOUNT NAME	FUND & ACCOUNT	INVOICE	PO#	F/P ID LINE
INTERGOVERNMENTAL PERSON		42399					
LIBRARY HEALTH INS		3,084.25	DUE FROM CH LIBRARY	01.000.1340	OCT 15	771 00008	
LIBRARY DENTAL INS		201.78	DUE FROM CH LIBRARY	01.000.1340	OCT 15	771 00017	
RETIREE HEALTH INS		4,090.09	RETIREE/COBRA INSURANCE	01.000.1375	OCT 15	771 00009	
RETIREE DENTAL INS		458.37	RETIREE/COBRA INSURANCE	01.000.1375	OCT 15	771 00018	
SUPPLEMENTAL LIFE INS		248.57	EMPLOYEE SUPP. INS. CONT	01.000.2031	OCT 15	771 00019	
HEALTH/LIFE INSURANCE		1,124.38	HEALTH/DENTAL INSURANCE	01.510.4120	OCT 15	771 00001	
DENTAL INSURANCE		67.26	HEALTH/DENTAL INSURANCE	01.510.4120	OCT 15	771 00010	
HEALTH/LIFE INSURANCE		4,383.04	HEALTH/DENTAL INSURANCE	01.512.4120	OCT 15	771 00002	
DENTAL INSURANCE		223.47	HEALTH/DENTAL INSURANCE	01.512.4120	OCT 15	771 00011	
HEALTH/LIFE INSURANCE		17,701.40	HEALTH/DENTAL INSURANCE	01.520.4120	OCT 15	771 00003	
DENTAL INSURANCE		916.74	HEALTH/DENTAL INSURANCE	01.520.4120	OCT 15	771 00012	
HEALTH/LIFE INSURANCE		1,991.49	HEALTH/DENTAL INSURANCE	01.530.4120	OCT 15	771 00004	
DENTAL INSURANCE		134.06	HEALTH/DENTAL INSURANCE	01.530.4120	OCT 15	771 00013	
HEALTH/LIFE INSURANCE		6,154.05	HEALTH/DENTAL INSURANCE	01.540.4120	OCT 15	771 00005	
DENTAL INSURANCE		308.47	HEALTH/DENTAL INSURANCE	01.540.4120	OCT 15	771 00014	
HEALTH/LIFE INSURANCE		3,353.68	HEALTH/DENTAL INSURANCE	01.550.4120	OCT 15	771 00006	
DENTAL INSURANCE		156.59	HEALTH/DENTAL INSURANCE	01.550.4120	OCT 15	771 00015	
HEALTH/LIFE INSURANCE		4,102.70	HEALTH/DENTAL INSURANCE	20.560.4120	OCT 15	771 00007	
DENTAL INSURANCE		205.64	HEALTH/DENTAL INSURANCE	20.560.4120	OCT 15	771 00016	
RETIREE HEALTH INS		1,098.72	RETIREE/COBRA INSURANCE	71.000.1375	OCT 15	771 00020	
RETIREE DENTAL INS		89.37	RETIREE/COBRA INSURANCE	71.000.1375	OCT 15	771 00021	
		50,094.12	*TOTAL				
POSTMASTER, CLARENDON HI 10/15-11/15 TRUSTEE TOPI		71466	POSTAGE	01.504.4211	10062015	794 00001	
		316.81	**CLAIMS TOTAL				
		50,410.93					

ACS FINANCIAL SYSTEM
10/28/2015 13:05:26

VILLAGE OF CLARENDON HILLS
GL540R-V07.27 PAGE 2

Claims Register

CLAIM NUMBER	DESCRIPTION	AMOUNT	ACCOUNT NAME	FUND & ACCOUNT	INVOICE	PO#	F/P ID	LINE
REPORT TOTALS:		50,410.93						

RECORDS PRINTED - 000022

ACS FINANCIAL SYSTEM
10/28/2015 13:05:26

Claims Register

VILLAGE OF CLARENDON HILLS
GL060S-V07.27 RECAPPAGE
GL540R

FUND RECAP:

FUND	DESCRIPTION	DISBURSEMENTS
01	GENERAL FUND	44,914.50
20	WATER FUND	4,308.34
71	POLICE PENSION FUND	1,188.09
TOTAL ALL FUNDS		50,410.93

BANK RECAP:

BANK	NAME	DISBURSEMENTS
BANK	CLARENDON HILLS BANK	50,410.93
TOTAL ALL BANKS		50,410.93

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

DATE APPROVED BY
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ACS FINANCIAL SYSTEM
10/28/2015 11:04:11

Claims Register

VILLAGE OF CLARENDON HILLS
GL540R-V07.27 PAGE 1

CLAIM NUMBER	DESCRIPTION	AMOUNT	ACCOUNT NAME	FUND & ACCOUNT	INVOICE	PO#	F/P ID	LINE
	MACNEIL AUTOMOTIVE PRODU FLOOR MATS 301-399	54174	234.85CR VEHICLE SUPPLIES 234.85CR**CLAIMS TOTAL	01.531.4604	497635		795	00001

ACS FINANCIAL SYSTEM
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Claims Register

VILLAGE OF CLARENDON HILLS
GL540R-V07.27 PAGE 2

CLAIM NUMBER	DESCRIPTION	AMOUNT	ACCOUNT NAME	FUND & ACCOUNT	INVOICE	PO#	F/P ID	LINE
			234.85CR					

REPORT TOTALS:

RECORDS PRINTED - 000001

ACS FINANCIAL SYSTEM
10/28/2015 11:04:11

Claims Register

VILLAGE OF CLARENDON HILLS
GL060S-V07.27 RECAPPAGE
GL540R

FUND RECAP:

FUND	DESCRIPTION	DISBURSEMENTS
01	GENERAL FUND	234.85 CR
TOTAL ALL FUNDS		234.85 CR

BANK RECAP:

BANK	NAME	DISBURSEMENTS
BANK	CLARENDON HILLS BANK	234.85 CR
TOTAL ALL BANKS		234.85 CR

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

DATE APPROVED BY

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ACS FINANCIAL SYSTEM
10/28/2015 11:04:06

Claims Register

VILLAGE OF CLARENDON HILLS
GL540R-V07.27 PAGE 1

CLAIM NUMBER DESCRIPTION	AMOUNT	ACCOUNT NAME	FUND & ACCOUNT	INVOICE	PO#	F/P ID LINE
MCGRAHAM'S HOME 082415-369 RUBY	.01539	322.00CR WATER METER FEE 322.00CR**CLAIMS TOTAL	20.371.3712	369 RUBY		796 00001

ACS FINANCIAL SYSTEM
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Claims Register

VILLAGE OF CLARENDON HILLS
GL540R-V07.27 PAGE 2

CLAIM NUMBER	DESCRIPTION	AMOUNT	ACCOUNT NAME	FUND & ACCOUNT	INVOICE	PO#	F/P ID	LINE
		322.00	CR					

REPORT TOTALS:

RECORDS PRINTED - 000001

ACS FINANCIAL SYSTEM
10/28/2015 11:04:06

Claims Register

VILLAGE OF CLARENDON HILLS
GL060S-V07.27 RECAPPAGE
GL540R

FUND RECAP:

FUND	DESCRIPTION
20	WATER FUND
TOTAL ALL FUNDS	

DISBURSEMENTS

322.00 CR
322.00 CR

BANK RECAP:

BANK	NAME
BANK	CLARENDON HILLS BANK
TOTAL ALL BANKS	

DISBURSEMENTS

322.00 CR
322.00 CR

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

DATE APPROVED BY

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