

VILLAGE OF CLARENDON HILLS

May 31, 2017

CLAIMS ORDINANCE # 17-05-01M

2017 Calendar Year Disbursements

May 2017 Manual Checks

Claims Register

CLAIM NUMBER	DESCRIPTION	AMOUNT	ACCOUNT NAME	FUND & ACCOUNT	INVOICE	PO#	F/P ID LINE
INTERGOVERNMENTAL PERSON		42399					
LIBRARY HEALTH INS	3,164.32		DUE FROM CH LIBRARY	01.000.1340	MAY 2017	470 00008	
LIBRARY DENTAL INS	213.30		DUE FROM CH LIBRARY	01.000.1340	MAY 2017	470 00018	
RETIREE HEALTH INS	3,068.20		RETIREE/COBRA INSURANCE	01.000.1375	MAY 2017	470 00009	
RETIREE DENTAL INS	425.58		RETIREE/COBRA INSURANCE	01.000.1375	MAY 2017	470 00019	
SUPPLEMENTAL LIFE INS	195.37		EMPLOYEE SUPP. INS. CONT	01.000.2031	MAY 2017	470 00021	
HEALTH/LIFE INSURANCE	1,152.16		HEALTH/DENTAL INSURANCE	01.510.4120	MAY 2017	470 00001	
DENTAL INSURANCE	71.10		HEALTH/DENTAL INSURANCE	01.510.4120	MAY 2017	470 00011	
HEALTH/LIFE INSURANCE	2,732.84		HEALTH/DENTAL INSURANCE	01.512.4120	MAY 2017	470 00002	
DENTAL INSURANCE	141.74		HEALTH/DENTAL INSURANCE	01.512.4120	MAY 2017	470 00012	
HEALTH/LIFE INSURANCE	17,616.09		HEALTH/DENTAL INSURANCE	01.520.4120	MAY 2017	470 00003	
DENTAL INSURANCE	933.43		HEALTH/DENTAL INSURANCE	01.520.4120	MAY 2017	470 00013	
HEALTH/LIFE INSURANCE	2,042.59		HEALTH/DENTAL INSURANCE	01.530.4120	MAY 2017	470 00004	
DENTAL INSURANCE	141.69		HEALTH/DENTAL INSURANCE	01.530.4120	MAY 2017	470 00014	
HEALTH/LIFE INSURANCE	6,312.75		HEALTH/DENTAL INSURANCE	01.540.4120	MAY 2017	470 00005	
DENTAL INSURANCE	382.72		HEALTH/DENTAL INSURANCE	01.540.4120	MAY 2017	470 00015	
HEALTH/LIFE INSURANCE	3,440.16		HEALTH/DENTAL INSURANCE	01.550.4120	MAY 2017	470 00006	
DENTAL INSURANCE	165.51		HEALTH/DENTAL INSURANCE	01.550.4120	MAY 2017	470 00016	
HEALTH/LIFE INSURANCE	4,208.50		HEALTH/DENTAL INSURANCE	20.560.4120	MAY 2017	470 00007	
DENTAL INSURANCE	255.14		HEALTH/DENTAL INSURANCE	20.560.4120	MAY 2017	470 00017	
RETIREE HEALTH INS	1,127.29		RETIREE/COBRA INSURANCE	71.000.1375	MAY 2017	470 00010	
RETIREE DENTAL INS	94.46		RETIREE/COBRA INSURANCE	71.000.1375	MAY 2017	470 00020	
	47,884.94		*TOTAL				
	47,884.94		**CLAIMS TOTAL				

ACS FINANCIAL SYSTEM
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Claims Register

VILLAGE OF CLARENDON HILLS
GL540R-V08.05 PAGE 2

CLAIM NUMBER	DESCRIPTION	AMOUNT	ACCOUNT NAME	FUND & ACCOUNT	INVOICE	PO#	F/P ID	LINE
REPORT TOTALS:		47,884.94						

RECORDS PRINTED - 000021

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Claims Register

VILLAGE OF CLARENDON HILLS
GL060S-V08.05 RECAPPAGE
GL540R

FUND RECAP:

FUND	DESCRIPTION	DISBURSEMENTS
01	GENERAL FUND	42,199.55
20	WATER FUND	4,463.64
71	POLICE PENSION FUND	1,221.75
TOTAL ALL FUNDS		47,884.94

BANK RECAP:

BANK	NAME	DISBURSEMENTS
BANK CLARENDON HILLS BANK		47,884.94
TOTAL ALL BANKS		47,884.94

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

DATE APPROVED BY
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Claims Register

VILLAGE OF CLARENDON HILLS
GL540R-V08.05 PAGE 1

CLAIM NUMBER	DESCRIPTION	AMOUNT	ACCOUNT NAME	FUND & ACCOUNT	INVOICE	PO#	F/P ID	LINE
EFFENEFF LLC 042016-272 STONEGATE		.01745	250.00CR REFUNDABLE DEP PKY/STR 250.00CR**CLAIMS TOTAL	01.000.2510	272 STONEGATE	496	00001	

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Claims Register

VILLAGE OF CLARENDON HILLS
GL540R-V08.05 PAGE 2

CLAIM NUMBER	DESCRIPTION	AMOUNT	ACCOUNT NAME	FUND & ACCOUNT	INVOICE	PO#	F/P ID	LINE
REPORT TOTALS:		250.00CR						

RECORDS PRINTED - 000001

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Claims Register

VILLAGE OF CLARENDON HILLS
GL060S-V08.05 RECAPPAGE
GL540R

FUND RECAP:

FUND	DESCRIPTION	DISBURSEMENTS
01	GENERAL FUND	250.00 CR
TOTAL ALL FUNDS		250.00 CR

BANK RECAP:

BANK	NAME	DISBURSEMENTS
BANK	CLARENDON HILLS BANK	250.00 CR
TOTAL ALL BANKS		250.00 CR

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

DATE APPROVED BY

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