

VILLAGE OF CLARENDON HILLS

February 28, 2017

CLAIMS ORDINANCE # 17-02-01M

2017 Calendar Year Disbursements

February 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	FEB 2017		024 00008
	LIBRARY DENTAL INS	213.30	DUE FROM CH LIBRARY	01.000.1340	FEB 2017		024 00018
	RETIREE HEALTH INS	3,068.20	RETIREE/COBRA INSURANCE	01.000.1375	FEB 2017		024 00009
	RETIREE DENTAL INS	425.58	RETIREE/COBRA INSURANCE	01.000.1375	FEB 2017		024 00019
	SUPPLEMENTAL LIFE INS	195.37	EMPLOYEE SUPP. INS. CONT	01.000.2031	FEB 2017		024 00021
	HEALTH/LIFE INSURANCE	1,152.16	HEALTH/DENTAL INSURANCE	01.510.4120	FEB 2017		024 00001
	DENTAL INSURANCE	71.10	HEALTH/DENTAL INSURANCE	01.510.4120	FEB 2017		024 00011
	HEALTH/LIFE INSURANCE	2,732.84	HEALTH/DENTAL INSURANCE	01.512.4120	FEB 2017		024 00002
	DENTAL INSURANCE	141.74	HEALTH/DENTAL INSURANCE	01.512.4120	FEB 2017		024 00012
	HEALTH/LIFE INSURANCE	17,616.09	HEALTH/DENTAL INSURANCE	01.520.4120	FEB 2017		024 00003
	DENTAL INSURANCE	933.43	HEALTH/DENTAL INSURANCE	01.520.4120	FEB 2017		024 00013
	HEALTH/LIFE INSURANCE	2,042.59	HEALTH/DENTAL INSURANCE	01.530.4120	FEB 2017		024 00004
	DENTAL INSURANCE	141.69	HEALTH/DENTAL INSURANCE	01.530.4120	FEB 2017		024 00014
	HEALTH/LIFE INSURANCE	6,312.75	HEALTH/DENTAL INSURANCE	01.540.4120	FEB 2017		024 00005
	DENTAL INSURANCE	382.72	HEALTH/DENTAL INSURANCE	01.540.4120	FEB 2017		024 00015
	HEALTH/LIFE INSURANCE	3,440.16	HEALTH/DENTAL INSURANCE	01.550.4120	FEB 2017		024 00006
	DENTAL INSURANCE	165.51	HEALTH/DENTAL INSURANCE	01.550.4120	FEB 2017		024 00016
	HEALTH/LIFE INSURANCE	4,208.50	HEALTH/DENTAL INSURANCE	20.560.4120	FEB 2017		024 00007
	DENTAL INSURANCE	255.14	HEALTH/DENTAL INSURANCE	20.560.4120	FEB 2017		024 00017
	RETIREE HEALTH INS	1,127.29	RETIREE/COBRA INSURANCE	71.000.1375	FEB 2017		024 00010
	RETIREE DENTAL INS	94.46	RETIREE/COBRA INSURANCE	71.000.1375	FEB 2017		024 00020
		47,884.94	*TOTAL				
		47,884.94	**CLAIMS TOTAL				

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Claims Register

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GL540R-V08.05 PAGE 2

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

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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