

**VILLAGE OF CLARENDON HILLS**

**March 31, 2018**

CLAIMS ORDINANCE # 18-03-01M

2018 Calendar Year Disbursements

March 2018 Manual Checks

Claims Register

CLAIM NUMBER	DESCRIPTION	AMOUNT	ACCOUNT NAME	FUND & ACCOUNT	INVOICE	PO#	F/P ID LINE
13413	CELLEBRITE INC. TRAINING-KATSAROS	3,850.00	CONFERENCES/TRAINING/MEE	01.521.4291	Q-32911-1		241 00003
15438	COOK COUNTY SHERIFF'S PO ACADEMY-CALDERON/PACELLA	6,500.00	CONFERENCES/TRAINING/MEE	01.521.4291	18102		241 00001
42399	INTERGOVERNMENTAL PERSON LIBRARY HEALTH INS	2,247.33	DUE FROM CH LIBRARY	01.000.1340	MAR 2018		242 00008
	LIBRARY DENTAL INS	154.16	DUE FROM CH LIBRARY	01.000.1340	MAR 2018		242 00018
	RETIREE HEALTH INS	4,923.22	RETIREE/COBRA INSURANCE	01.000.1375	MAR 2018		242 00009
	RETIREE DENTAL INS	563.72	RETIREE/COBRA INSURANCE	01.000.1375	MAR 2018		242 00019
	SUPPLEMENTAL LIFE INS	195.10	EMPLOYEE SUPP. INS. CONT	01.000.2031	MAR 2018		242 00021
	HEALTH/LIFE INSURANCE	1,206.95	HEALTH/DENTAL INSURANCE	01.510.4120	MAR 2018		242 00001
	DENTAL INSURANCE	179.47	HEALTH/DENTAL INSURANCE	01.510.4120	MAR 2018		242 00011
	HEALTH/LIFE INSURANCE	4,139.64	HEALTH/DENTAL INSURANCE	01.512.4120	MAR 2018		242 00002
	DENTAL INSURANCE	340.96	HEALTH/DENTAL INSURANCE	01.512.4120	MAR 2018		242 00012
	HEALTH/LIFE INSURANCE	15,888.99	HEALTH/DENTAL INSURANCE	01.520.4120	MAR 2018		242 00003
	DENTAL INSURANCE	922.66	HEALTH/DENTAL INSURANCE	01.520.4120	MAR 2018		242 00013
	HEALTH/LIFE INSURANCE	2,139.09	HEALTH/DENTAL INSURANCE	01.530.4120	MAR 2018		242 00004
	DENTAL INSURANCE	153.59	HEALTH/DENTAL INSURANCE	01.530.4120	MAR 2018		242 00014
	HEALTH/LIFE INSURANCE	5,493.94	HEALTH/DENTAL INSURANCE	01.540.4120	MAR 2018		242 00005
	DENTAL INSURANCE	414.85	HEALTH/DENTAL INSURANCE	01.540.4120	MAR 2018		242 00015
	HEALTH/LIFE INSURANCE	3,602.19	HEALTH/DENTAL INSURANCE	01.550.4120	MAR 2018		242 00006
	DENTAL INSURANCE	222.19	HEALTH/DENTAL INSURANCE	01.550.4120	MAR 2018		242 00016
	HEALTH/LIFE INSURANCE	3,662.62	HEALTH/DENTAL INSURANCE	20.560.4120	MAR 2018		242 00007
	DENTAL INSURANCE	276.57	HEALTH/DENTAL INSURANCE	20.560.4120	MAR 2018		242 00017
	RETIREE HEALTH INS	1,180.27	RETIREE/COBRA INSURANCE	71.000.1375	MAR 2018		242 00010
	RETIREE DENTAL INS	102.39	RETIREE/COBRA INSURANCE	71.000.1375	MAR 2018		242 00020
		48,009.90	*TOTAL				
85290	TRITON COLLEGE ACADEMY-CALDERON/PACELLA	600.00	CONFERENCES/TRAINING/MEE	01.521.4291	18120		241 00002
		58,959.90	**CLAIMS TOTAL				

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Claims Register

VILLAGE OF CLARENDON HILLS  
GL540R-V08.05 PAGE 2

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CLAIM NUMBER	DESCRIPTION	AMOUNT	ACCOUNT NAME	FUND & ACCOUNT	INVOICE	PO#	F/P ID LINE
REPORT TOTALS:		58,959.90					

RECORDS PRINTED - 000024

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Claims Register

VILLAGE OF CLARENDON HILLS  
GL060S-V08.05 RECAPPAGE  
GL540R

FUND RECAP:

FUND	DESCRIPTION	DISBURSEMENTS
01	GENERAL FUND	53,738.05
20	WATER FUND	3,939.19
71	POLICE PENSION FUND	1,282.66
TOTAL ALL FUNDS		58,959.90

BANK RECAP:

BANK	NAME	DISBURSEMENTS
BANK	CLARENDON HILLS BANK	58,959.90
TOTAL ALL BANKS		58,959.90

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
HR SIMPLIFIED							
	02/18 COBRA MINIMUM FEE	37702					
	01/18 REIMB CHECK FEE	100.00CR	EMPLOYEE HEALTH & SAFETY	01.510.4115	54639		228 00001
		35.00CR	EMPLOYEE HEALTH & SAFETY	01.510.4115	54639		228 00002
		135.00CR	*TOTAL				
		135.00CR	**CLAIMS TOTAL				

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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:		135.00CR					

RECORDS PRINTED - 000002

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Claims Register

VILLAGE OF CLARENDON HILLS  
GL060S-V08.05 RECAPPAGE  
GL540R

FUND RECAP:

FUND	DESCRIPTION	DISBURSEMENTS
01	GENERAL FUND	135.00 CR
TOTAL ALL FUNDS		135.00 CR

BANK RECAP:

BANK	NAME	DISBURSEMENTS
BANK	CLARENDON HILLS BANK	135.00 CR
TOTAL ALL BANKS		135.00 CR

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

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