

Invoice Listing - Detail
Quarter 1 Invoices 2024

Vendor ID: AMALLOY Aden, Malloy			PO Number:	Invoice Number: 20240215	Amount:	150.00
Description: Referee			Invoice Date: 02/06/2024	Due Date: 02/19/2024	Status: P	1099 Amount: 0.00
Sequence: 1	Check Type: Check	Checking Account ID: 1	Check Number: 55431	Check Date: 02/19/2024	CC:	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
10 1411 6411 065 4020 1 00000	Referee		150.00		N	
10 1411 6411 065 4020 1 00000	Reversal: Referee		(150.00)		N	
10 1421 6391 000 1050 1 00000	Correction: Referee		150.00	0.00	N	
Vendor ID: AFFLOORC Affordable Floor Covers			PO Number:	Invoice Number: 652	Amount:	2,700.00
Description: Gym Floor Cover			Invoice Date: 01/24/2024	Due Date: 04/23/2024	Status: P	1099 Amount: 0.00
Sequence: 1	Check Type: Check	Checking Account ID: 1	Check Number: 55432	Check Date: 02/19/2024	CC:	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
60 1411 6411 103 1050 1 00000	Gym floor cover		2,700.00		N	
Vendor ID: AIRGASUSAL AIRGAS USA LLC			PO Number:	Invoice Number: 1836965-MARCH	Amount:	114.81
Description: AG SHOP SUPPLIES			Invoice Date: 02/29/2024	Due Date: 03/30/2024	Status: P	1099 Amount: 0.00
Sequence: 1	Check Type: Check	Checking Account ID: 1	Check Number: 55504	Check Date: 03/18/2024	CC:	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
10 1311 6411 000 1050 1 00000	AG SUPPIES		114.81		N	
Vendor ID: AIRGASUSAL AIRGAS USA LLC			PO Number:	Invoice Number: 5504854334	Amount:	58.62
Description: SHOP SUPPLIES			Invoice Date: 01/10/2024	Due Date: 01/10/2024	Status: P	1099 Amount: 0.00
Sequence: 1	Check Type: Check	Checking Account ID: 1	Check Number: 55393	Check Date: 01/22/2024	CC:	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
10 1311 6411 000 1050 1 00000	SHOP SUPPLIES		58.62		N	
Vendor ID: AMAZON AMAZON			PO Number:	Invoice Number: 20240119	Amount:	3,861.46
Description: KITCHEN/MAINTENANCE/ TECH/ SPED			Invoice Date: 01/19/2024	Due Date: 01/19/2024	Status: AP	1099 Amount: 0.00
Sequence: 1	Check Type: Automatic Payment	Checking Account ID: 1	Check Number: 54192	Check Date: 01/19/2024	CC:	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
10 2541 6411 000 1050 1 00000	MAINTENANCE		198.08		N	
10 2562 6411 000 0000 1 00000	KITCHEN SUPPLIES		706.57		N	
10 2411 6411 000 1050 1 00000	GENERAL OFFICE SUPPLIES		657.72		N	
10 1151 6411 000 1050 1 00000	HS SUPPLIES		85.41		N	
10 1221 6411 000 4020 1 12210	SPED SUPPLIES		78.25		N	
10 2225 6411 000 1050 1 00000	TECH SUPPLIES		2,135.43		N	
Vendor ID: AMAZON AMAZON			PO Number:	Invoice Number: 20240218	Amount:	16,729.01
Description: AMAZON PURCHASES			Invoice Date: 02/18/2024	Due Date: 02/19/2024	Status: P	1099 Amount: 0.00
Sequence: 1	Check Type: Check	Checking Account ID: 1	Check Number: 55433	Check Date: 02/19/2024	CC:	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
60 1411 6411 103 1050 1 00000	ATHLETICS		266.67		N	
60 1411 6411 043 1050 1 00000	INCENTIVES		1,385.35		N	
10 2411 6411 000 1050 1 00000	SUPPLIES		1,388.78		N	

10 2541 6411 000 4020 1 00000	MAINT SUPPLIES	2,970.77	N
10 1251 6411 000 4020 4 45100	TITLE SUPPLIES	18.98	N
10 2562 6411 000 0000 1 00000	KITCHEN TOOL	224.25	N
10 1111 6411 000 4020 1 00000	ELEM SUPPLIES	502.95	N
60 1411 6411 084 1050 1 00000	CHEER	318.10	N
10 2411 6411 001 4020 1 00000	POWER UP GRANT	4,664.37	N
10 2331 6411 000 1050 4 42403	TECH SUPPLIES	68.98	N
10 1251 6411 000 1050 4 46100	TITLE IV SUPPLIES	3,386.01	N
10 2331 6411 000 1050 4 46501	STEM SUPPLIES	1,533.80	N

Vendor ID: ATT	AT&T MOBILITY	PO Number:	Invoice Number: 20240709	Amount:	687.50
Description: HOT SPOTS		Invoice Date: 07/09/2024	Due Date: 07/09/2024	Status: AP	1099 Amount: 0.00
Sequence: 1	Check Type: Automatic Payment	Checking Account ID: 1	Check Number: 54247	Check Date: 07/09/2024	CC:
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>
10 2541 6361 000 4020 1 00000	HOT SPOTS		687.50		N

Vendor ID: ATT	AT&T MOBILITY	PO Number:	Invoice Number: 20240709-0001	Amount:	687.50
Description: HOT SPOTS		Invoice Date: 07/09/2024	Due Date: 07/09/2024	Status: AP	1099 Amount: 0.00
Sequence: 1	Check Type: Automatic Payment	Checking Account ID: 1	Check Number: 54251	Check Date: 07/09/2024	CC:
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>
10 2541 6361 000 1050 1 00000	HOT SPOTS		687.50		N

Vendor ID: ATT	AT&T MOBILITY	PO Number:	Invoice Number: 20240709-0002	Amount:	687.50
Description: HOT SPOTS		Invoice Date: 07/09/2024	Due Date: 07/09/2024	Status: AP	1099 Amount: 0.00
Sequence: 1	Check Type: Automatic Payment	Checking Account ID: 1	Check Number: 54255	Check Date: 07/09/2024	CC:
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>
10 2541 6361 000 4020 1 00000	HOT SPOTS		687.50		N

Vendor ID: DBAKER	Baker, Daryl	PO Number:	Invoice Number: 20240216	Amount:	375.00
Description: Referee		Invoice Date: 02/09/2024	Due Date: 02/19/2024	Status: P	1099 Amount: 0.00
Sequence: 1	Check Type: Check	Checking Account ID: 1	Check Number: 55434	Check Date: 02/19/2024	CC:
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>
10 1411 6411 065 4020 1 00000	Referee		225.00		N
10 1411 6411 065 4020 1 00000	Referee		150.00	0.00	N
10 1411 6411 065 4020 1 00000	Reversal: Referee		(225.00)		N
10 1421 6391 000 1050 1 00000	Correction: Referee		225.00	0.00	N
10 1411 6411 065 4020 1 00000	Reversal: Referee		(150.00)	0.00	N
10 1421 6391 000 1050 1 00000	Correction: Referee		150.00	0.00	N

Vendor ID: BEATTIES	BEATTIES LLC	PO Number:	Invoice Number: 974964-974965	Amount:	1,695.00
Description: MINI SPLIT REPAIR/ REPLACE		Invoice Date: 01/18/2024	Due Date: 01/18/2024	Status: P	1099 Amount: 0.00
Sequence: 1	Check Type: Check	Checking Account ID: 1	Check Number: 55394	Check Date: 01/22/2024	CC:
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>
10 2541 6332 000 1050 1 00000	MINI SPLIT REPAIR/ REPLACEMENT		1,695.00		N

Vendor ID: BEAUDINRAY BEAUDIN, RAYMOND			PO Number:	Invoice Number: 20240218	Amount:	1,500.00
Description: TUTITION REIMBURSEMENT			Invoice Date: 02/18/2024 Due Date: 02/18/2024 Status: P 1099 Amount: 0.00			
Sequence: 1 Check Type: Check Checking Account ID: 1			Check Number: 55435 Check Date: 02/19/2024 CC:			
<u>Chart of Account Number</u> <u>Detail Description</u>			<u>Cost Center ID</u>	<u>Detail Amount</u> <u>1099 Detail Amount</u> <u>Asset/Asset Tag</u>	<u>In Full</u>	
10 1151 6391 000 1050 4 42302 TUITION REIMBURSEMENT				1,500.00 N		
Vendor ID: BRENDAJOHN BRENDA JOHNSTON			PO Number:	Invoice Number: 20240216	Amount:	28.61
Description: Reimbursement for dance supplies			Invoice Date: 01/31/2024 Due Date: 02/19/2024 Status: P 1099 Amount: 0.00			
Sequence: 1 Check Type: Check Checking Account ID: 1			Check Number: 55436 Check Date: 02/19/2024 CC:			
<u>Chart of Account Number</u> <u>Detail Description</u>			<u>Cost Center ID</u>	<u>Detail Amount</u> <u>1099 Detail Amount</u> <u>Asset/Asset Tag</u>	<u>In Full</u>	
10 1251 6411 000 4020 4 45100 Reimbursement for supplies				28.61 N		
10 1251 6411 000 4020 4 45100 Reversal: Reimbursement for supplies				(28.61) N		
10 1111 6411 000 4020 1 00000 Correction: Reimbursement for supplies				28.61 0.00 N		
Vendor ID: BRIGHTSPEE BRIGHTSPEED			PO Number:	Invoice Number: 301681215 -0011	Amount:	480.28
Description: TELEPHONE			Invoice Date: 01/24/2024 Due Date: 01/24/2024 Status: P 1099 Amount: 0.00			
Sequence: 1 Check Type: Check Checking Account ID: 1			Check Number: 55395 Check Date: 01/22/2024 CC:			
<u>Chart of Account Number</u> <u>Detail Description</u>			<u>Cost Center ID</u>	<u>Detail Amount</u> <u>1099 Detail Amount</u> <u>Asset/Asset Tag</u>	<u>In Full</u>	
10 2541 6361 000 1050 1 00000 TELEPHONE				480.28 0.00 N		
Vendor ID: BRIGHTSPEE BRIGHTSPEED			PO Number:	Invoice Number: 301681215 -0012	Amount:	388.72
Description: TELEPHONE			Invoice Date: 02/24/2024 Due Date: 02/24/2024 Status: P 1099 Amount: 0.00			
Sequence: 1 Check Type: Check Checking Account ID: 1			Check Number: 55437 Check Date: 02/19/2024 CC:			
<u>Chart of Account Number</u> <u>Detail Description</u>			<u>Cost Center ID</u>	<u>Detail Amount</u> <u>1099 Detail Amount</u> <u>Asset/Asset Tag</u>	<u>In Full</u>	
10 2541 6361 000 1050 1 00000 TELEPHONE				388.72 0.00 N		
Vendor ID: BRIGHTSPEE BRIGHTSPEED			PO Number:	Invoice Number: 301681215 -0013	Amount:	361.63
Description: TELEPHONE			Invoice Date: 03/24/2024 Due Date: 03/24/2024 Status: P 1099 Amount: 0.00			
Sequence: 1 Check Type: Check Checking Account ID: 1			Check Number: 55505 Check Date: 03/18/2024 CC:			
<u>Chart of Account Number</u> <u>Detail Description</u>			<u>Cost Center ID</u>	<u>Detail Amount</u> <u>1099 Detail Amount</u> <u>Asset/Asset Tag</u>	<u>In Full</u>	
10 2541 6361 000 1050 1 00000 TELEPHONE				361.63 0.00 N		
Vendor ID: BSNSPORTS BSN SPORTS			PO Number:	Invoice Number: 924375574	Amount:	2,205.00
Description: ELEMENTARY BASKETBALL UNIFORMS			Invoice Date: 01/18/2024 Due Date: 01/18/2024 Status: P 1099 Amount: 0.00			
Sequence: 1 Check Type: Check Checking Account ID: 1			Check Number: 55396 Check Date: 01/22/2024 CC:			
<u>Chart of Account Number</u> <u>Detail Description</u>			<u>Cost Center ID</u>	<u>Detail Amount</u> <u>1099 Detail Amount</u> <u>Asset/Asset Tag</u>	<u>In Full</u>	
60 1411 6411 103 1050 1 00000 UNIFORMS				2,205.00 N		
Vendor ID: NBURNETTE BURNETTE, NANCY			PO Number:	Invoice Number: 20240130	Amount:	7,000.00
Description: SCHOOL MAINTENANCE TRUCK			Invoice Date: 01/30/2024 Due Date: 01/30/2024 Status: PP 1099 Amount: 0.00			
Sequence: 1 Check Type: Check Checking Account ID: 1			Check Number: 55485 Check Date: 01/30/2024 CC:			
<u>Chart of Account Number</u> <u>Detail Description</u>			<u>Cost Center ID</u>	<u>Detail Amount</u> <u>1099 Detail Amount</u> <u>Asset/Asset Tag</u>	<u>In Full</u>	
40 2552 6551 000 0000 1 00000 MAINTENANCE TRUCK				7,000.00 N		
Vendor ID: CCAMPBELL Campbell, Carter			PO Number:	Invoice Number: 20240215	Amount:	90.00

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Quarter 1 Invoices 2024

Description: Elem Referee	Invoice Date: 02/08/2024	Due Date: 02/15/2024	Status: P	1099 Amount: 0.00
Sequence: 1 Check Type: Check	Checking Account ID: 1	Check Number: 55438	Check Date: 02/19/2024	CC:
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u> <u>Asset/Asset Tag</u> <u>In Full</u>
10 1411 6391 000 1050 1 00000	Referee		90.00	N
10 1411 6391 000 1050 1 00000	Reversal: Referee		(90.00)	N
10 1421 6391 000 1050 1 00000	Correction: Referee		90.00	0.00 N
Vendor ID: CAPONE CAPITAL ONE	PO Number:	Invoice Number: 20240709	Amount:	1,886.59
Description: SUPPLIES	Invoice Date: 07/09/2024	Due Date: 07/09/2024	Status: AP	1099 Amount: 0.00
Sequence: 1 Check Type: Automatic Payment	Checking Account ID: 1	Check Number: 54253	Check Date: 07/09/2024	CC:
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u> <u>Asset/Asset Tag</u> <u>In Full</u>
10 2541 6411 000 1050 1 00000	SUPPLIES		1,886.59	N
Vendor ID: CAPONE CAPITAL ONE	PO Number:	Invoice Number: DEC-JAN	Amount:	397.36
Description: HS AND ELEMENTARY SUPPLIES	Invoice Date: 01/18/2024	Due Date: 01/18/2024	Status: AP	1099 Amount: 0.00
Sequence: 1 Check Type: Automatic Payment	Checking Account ID: 1	Check Number: 54191	Check Date: 01/18/2024	CC:
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u> <u>Asset/Asset Tag</u> <u>In Full</u>
10 1111 6411 000 4020 1 00000	ELEMENTARY SUPPLIES		198.68	N
10 1151 6411 000 1050 1 00000	HS SUPPLIES		198.68	N
Vendor ID: CAPTONE CAPITAL ONE	PO Number:	Invoice Number: 20240709	Amount:	471.87
Description: maintenance supplies	Invoice Date: 07/09/2024	Due Date: 07/09/2024	Status: AP	1099 Amount: 0.00
Sequence: 1 Check Type: Automatic Payment	Checking Account ID: 1	Check Number: 54246	Check Date: 07/09/2024	CC:
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u> <u>Asset/Asset Tag</u> <u>In Full</u>
10 2541 6411 000 1050 1 00000	maintenance		471.87	N
Vendor ID: CAPTONE CAPITAL ONE	PO Number:	Invoice Number: 20240709-0001	Amount:	1,391.85
Description: SUPPLIES	Invoice Date: 07/09/2024	Due Date: 07/09/2024	Status: AP	1099 Amount: 0.00
Sequence: 1 Check Type: Automatic Payment	Checking Account ID: 1	Check Number: 54250	Check Date: 07/09/2024	CC:
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u> <u>Asset/Asset Tag</u> <u>In Full</u>
10 2411 6411 000 1050 1 00000	SUPPLIES		1,391.85	N
Vendor ID: CAPTONE CAPITAL ONE	PO Number:	Invoice Number: 9520-0001	Amount:	1,297.67
Description: BUS REPAIR/ TOWING/ AG/ CHEER	Invoice Date: 02/18/2024	Due Date: 02/18/2024	Status: AP	1099 Amount: 0.00
Sequence: 1 Check Type: Automatic Payment	Checking Account ID: 1	Check Number: 54196	Check Date: 02/18/2024	CC:
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u> <u>Asset/Asset Tag</u> <u>In Full</u>
10 2411 6411 001 4020 1 00000	POWER UP BOOKS		43.67	N
10 1111 6411 000 4020 1 00000	DANCE SUPPLIES		30.84	N
10 2552 6391 000 0000 1 00000	TRANSPORTATION SUPPLIES/ TOWING		1,007.96	N
60 1411 6411 084 1050 1 00000	CHEER SHOES		92.75	N
10 1311 6411 000 1050 1 00000	SEEDS		122.45	N
Vendor ID: CASHSAVERP CASH SAVER PANTRY	PO Number:	Invoice Number: LUTIE-0005	Amount:	296.28
Description: FOOD	Invoice Date: 01/18/2024	Due Date: 01/18/2024	Status: P	1099 Amount: 0.00
Sequence: 1 Check Type: Check	Checking Account ID: 1	Check Number: 55397	Check Date: 01/22/2024	CC:

<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
10 2562 6471 000 0000 1 00000	FOOD		296.28	0.00	N	
Vendor ID: CASHSAVERP CASH SAVER PANTRY						
Description: FOOD		PO Number:	Invoice Number: LUTIE-0006		Amount:	250.08
Sequence: 1 Check Type: Check		Invoice Date: 02/18/2024	Due Date: 02/18/2024	Status: P	1099 Amount: 0.00	
Checking Account ID: 1		Check Number: 55439		Check Date: 02/19/2024		CC:
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
10 2562 6471 000 0000 1 00000	FOOD		250.08	0.00	N	
Vendor ID: CASHSAVERP CASH SAVER PANTRY						
Description: FOOD		PO Number:	Invoice Number: LUTIE-0007		Amount:	691.30
Sequence: 1 Check Type: Check		Invoice Date: 03/18/2024	Due Date: 03/18/2024	Status: P	1099 Amount: 0.00	
Checking Account ID: 1		Check Number: 55506		Check Date: 03/18/2024		CC:
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
10 2562 6471 000 0000 1 00000	FOOD		457.47	0.00	N	
10 1151 6471 000 1050 1 00000	FACS FOOD		101.46		N	
60 1411 6411 043 1050 1 00000	8TH GRADE DAY		88.42		N	
60 1411 6411 045 1050 1 00000	PI DAY		43.95		N	
Vendor ID: CENTURYBAN CENTURY BANK OF THE OZAR						
Description: Safe Deposit Box Rent		PO Number:	Invoice Number: 20240215		Amount:	50.00
Sequence: 1 Check Type: Check		Invoice Date: 02/01/2024	Due Date: 02/15/2024	Status: P	1099 Amount: 0.00	
Checking Account ID: 1		Check Number: 55440		Check Date: 02/19/2024		CC:
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
10 2311 6371 000 0000 1 00000	box rent		50.00	0.00	N	
Vendor ID: CHRISTIWES CHRISTI WEST						
Description: Fingerprint Reimbursement		PO Number:	Invoice Number: 20240216		Amount:	41.75
Sequence: 1 Check Type: Check		Invoice Date: 09/27/2024	Due Date: 02/16/2024	Status: P	1099 Amount: 0.00	
Checking Account ID: 1		Check Number: 55441		Check Date: 02/19/2024		CC:
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
10 1111 6391 000 4020 1 00000	Fingerprint Reimbursement		41.75		N	
10 1111 6391 000 4020 1 00000	Reversal: Fingerprint Reimbursement		(41.75)		N	
10 2643 6319 000 4020 1 00000	Correction: Fingerprint Reimbursement		41.75	0.00	N	
Vendor ID: KCONNER CONNER, KATHRYN						
Description: FINGERPRINT REIMBURSEMENT		PO Number:	Invoice Number: 20240312		Amount:	41.75
Sequence: 1 Check Type: Check		Invoice Date: 03/12/2024	Due Date: 03/12/2024	Status: P	1099 Amount: 0.00	
Checking Account ID: 1		Check Number: 55507		Check Date: 03/18/2024		CC:
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
10 2643 6319 000 4020 1 00000	BACKGROUND CHECK		41.75		N	
Vendor ID: CUSTOMMEE1 CUSTOM MEETING PLANNERS						
Description: PARENTS AS TEACHERS CONFERENCE		PO Number:	Invoice Number: 81218321		Amount:	270.00
Sequence: 1 Check Type: Check		Invoice Date: 03/12/2024	Due Date: 03/12/2024	Status: P	1099 Amount: 0.00	
Checking Account ID: 1		Check Number: 55508		Check Date: 03/18/2024		CC:
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
10 3511 6343 000 4020 3 32400	CONFERENCE		270.00		N	
Vendor ID: DENNISVACH DENNIS VACHA						
		PO Number:	Invoice Number: 20240119		Amount:	125.00

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Quarter 1 Invoices 2024

Description: HS REFEREE Sequence: 1 Check Type: Check <u>Chart of Account Number</u> <u>Detail Description</u> 10 1411 6391 000 1050 1 00000 HS REFEREE	Checking Account ID: 1	Invoice Date: 01/19/2024 Due Date: 01/19/2024 Status: P 1099 Amount: 0.00 Check Number: 55398 Check Date: 01/22/2024 CC: <u>Cost Center ID</u> <u>Detail Amount</u> <u>1099 Detail Amount</u> <u>Asset/Asset Tag</u> <u>In Full</u> 125.00 N
Vendor ID: DIXSONEMMA DIXSON, EMMA Description: Reimbursement Sequence: 1 Check Type: Check <u>Chart of Account Number</u> <u>Detail Description</u> 60 1411 6411 030 1050 1 00000 Reimbursement	Checking Account ID: 1	PO Number: Invoice Number: 20240216 Amount: 326.95 Invoice Date: 01/29/2024 Due Date: 02/19/2024 Status: P 1099 Amount: 0.00 Check Number: 55442 Check Date: 02/19/2024 CC: <u>Cost Center ID</u> <u>Detail Amount</u> <u>1099 Detail Amount</u> <u>Asset/Asset Tag</u> <u>In Full</u> 326.95 N
Vendor ID: DORARIIISC DORA R-III SCHOOL Description: Math Bee Sequence: 1 Check Type: Check <u>Chart of Account Number</u> <u>Detail Description</u> 10 1111 6391 000 4020 1 00000 Math Bee	Checking Account ID: 1	PO Number: Invoice Number: 1-0001 Amount: 45.00 Invoice Date: 02/15/2024 Due Date: 03/05/2024 Status: P 1099 Amount: 0.00 Check Number: 55443 Check Date: 02/19/2024 CC: <u>Cost Center ID</u> <u>Detail Amount</u> <u>1099 Detail Amount</u> <u>Asset/Asset Tag</u> <u>In Full</u> 45.00 N
Vendor ID: DWIGHTEVAN DWIGHT EVANS Description: Referee Sequence: 1 Check Type: Check <u>Chart of Account Number</u> <u>Detail Description</u> 10 1411 6411 065 4020 1 00000 Referee 10 1411 6411 065 4020 1 00000 Reversal: Referee 10 1421 6319 000 1050 1 00000 Correction: Referee	Checking Account ID: 1	PO Number: Invoice Number: 20240215 Amount: 90.00 Invoice Date: 02/15/2024 Due Date: 02/19/2024 Status: P 1099 Amount: 90.00 Check Number: 55444 Check Date: 02/19/2024 CC: <u>Cost Center ID</u> <u>Detail Amount</u> <u>1099 Detail Amount</u> <u>Asset/Asset Tag</u> <u>In Full</u> 90.00 90.00 N (90.00) (90.00) N 90.00 90.00 N
Vendor ID: DWIGHTEVAN DWIGHT EVANS Description: REFEREE Sequence: 1 Check Type: Check <u>Chart of Account Number</u> <u>Detail Description</u> 10 1421 6319 000 1050 1 00000 REFEREE	Checking Account ID: 1	PO Number: Invoice Number: 20240312 Amount: 90.00 Invoice Date: 03/12/2024 Due Date: 03/12/2024 Status: P 1099 Amount: 90.00 Check Number: 55509 Check Date: 03/18/2024 CC: <u>Cost Center ID</u> <u>Detail Amount</u> <u>1099 Detail Amount</u> <u>Asset/Asset Tag</u> <u>In Full</u> 90.00 90.00 N
Vendor ID: EDGELLARAN EDGELLAR AND HARPER Description: MOWER SUPPLIES Sequence: 1 Check Type: Check <u>Chart of Account Number</u> <u>Detail Description</u> 10 2541 6411 000 1050 1 00000 MOWER SUPPLIES	Checking Account ID: 1	PO Number: Invoice Number: 197008 Amount: 111.95 Invoice Date: 03/12/2024 Due Date: 03/12/2024 Status: P 1099 Amount: 0.00 Check Number: 55510 Check Date: 03/18/2024 CC: <u>Cost Center ID</u> <u>Detail Amount</u> <u>1099 Detail Amount</u> <u>Asset/Asset Tag</u> <u>In Full</u> 111.95 N
Vendor ID: EDLIO EDLIO Description: APP SET UP Sequence: 1 Check Type: Check <u>Chart of Account Number</u> <u>Detail Description</u> 10 2331 6316 000 1050 1 00000 APP SET UP	Checking Account ID: 1	PO Number: Invoice Number: N-2023-20977 Amount: 500.00 Invoice Date: 03/17/2024 Due Date: 03/17/2024 Status: P 1099 Amount: 0.00 Check Number: 55511 Check Date: 03/18/2024 CC: <u>Cost Center ID</u> <u>Detail Amount</u> <u>1099 Detail Amount</u> <u>Asset/Asset Tag</u> <u>In Full</u> 500.00 N
Vendor ID: EWELLEDUCA EWELL EDUCATIONAL SERVIC Description: FFA CONTESTS		PO Number: Invoice Number: 0270 Amount: 247.00 Invoice Date: 03/12/2024 Due Date: 03/12/2024 Status: P 1099 Amount: 0.00

Invoice Listing - Detail
Quarter 1 Invoices 2024

Sequence: 1	Check Type: Check	Checking Account ID: 1	Check Number: 55512	Check Date: 03/18/2024	CC:	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
60 1411 6411 030 1050 1 00000	FFA CONTEST		247.00		N	

Vendor ID: FORGEBUILD	FORGE AND BUILD	PO Number:	Invoice Number: 20240215	Amount:	1,215.72	
Description: Maintenance Supplies		Invoice Date: 01/25/2024	Due Date: 02/09/2024	Status: P	1099 Amount: 0.00	
Sequence: 1	Check Type: Check	Checking Account ID: 1	Check Number: 55445	Check Date: 02/19/2024	CC:	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
10 2541 6411 000 1050 1 00000	Maintenance Supplies		1,215.72		N	

Vendor ID: NFORTIN	FORTIN, NORMA	PO Number:	Invoice Number: 20240215	Amount:	48.02	
Description: Fingerprint Reimbursement		Invoice Date: 11/06/2023	Due Date: 02/19/2024	Status: P	1099 Amount: 0.00	
Sequence: 1	Check Type: Check	Checking Account ID: 1	Check Number: 55446	Check Date: 02/19/2024	CC:	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
10 2562 6391 000 1050 1 00000	Fingerprint Reimbursement		41.75		N	
10 2562 6471 000 0000 1 00000	Bread Reimbursement		6.27		N	
10 2562 6391 000 1050 1 00000	Reversal: Fingerprint Reimbursement		(41.75)		N	
10 2643 6319 000 4020 1 00000	Correction: Fingerprint Reimbursement		41.75	0.00	N	

Vendor ID: ZFOWLER	FOWLER, ZACHARY	PO Number:	Invoice Number: 20240312	Amount:	880.22	
Description: SUPPLY AND FINGERPRINT		Invoice Date: 03/12/2024	Due Date: 03/12/2024	Status: P	1099 Amount: 0.00	
Sequence: 1	Check Type: Check	Checking Account ID: 1	Check Number: 55513	Check Date: 03/18/2024	CC:	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
10 2643 6319 000 4020 1 00000	FINGERPRINTS		41.75		N	
10 2546 6411 000 1050 1 00000	SUPPLY REIMBURSEMENT		838.47		N	

Vendor ID: GAILMISEK	GAIL MISEK	PO Number:	Invoice Number: 65761-0034	Amount:	174.70	
Description: INSURANCE		Invoice Date: 01/14/2024	Due Date: 01/14/2024	Status: P	1099 Amount: 0.00	
Sequence: 1	Check Type: Check	Checking Account ID: 1	Check Number: 55399	Check Date: 01/22/2024	CC:	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
10 2411 6241 000 1050 1 00000	INSURANCE		174.70	0.00	N	

Vendor ID: GAILMISEK	GAIL MISEK	PO Number:	Invoice Number: 65761-0035	Amount:	174.70	
Description: INSURANCE		Invoice Date: 02/14/2024	Due Date: 02/14/2024	Status: P	1099 Amount: 0.00	
Sequence: 1	Check Type: Check	Checking Account ID: 1	Check Number: 55447	Check Date: 02/19/2024	CC:	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
10 2411 6241 000 1050 1 00000	INSURANCE		174.70	0.00	N	

Vendor ID: GAILMISEK	GAIL MISEK	PO Number:	Invoice Number: 65761-0036	Amount:	174.70	
Description: INSURANCE		Invoice Date: 03/14/2024	Due Date: 03/14/2024	Status: P	1099 Amount: 0.00	
Sequence: 1	Check Type: Check	Checking Account ID: 1	Check Number: 55514	Check Date: 03/18/2024	CC:	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
10 2411 6241 000 1050 1 00000	INSURANCE		174.70	0.00	N	

Vendor ID: GFLENIRO	GFL ENVIROMENTAL	PO Number:	Invoice Number: AP00010609-0001	Amount:	411.31
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Invoice Listing - Detail
Quarter 1 Invoices 2024

Description: Trash Service Sequence: 1 Check Type: Check <u>Chart of Account Number</u> <u>Detail Description</u> 10 2541 6336 000 1050 1 00000 Trash Service	Checking Account ID: 1	Invoice Date: 01/31/2024 Due Date: 02/19/2024 Status: P 1099 Amount: 0.00 Check Number: 55448 Check Date: 02/19/2024 CC: <u>Cost Center ID</u> <u>Detail Amount</u> <u>1099 Detail Amount</u> <u>Asset/Asset Tag</u> <u>In Full</u> 411.31 N
Vendor ID: GFLENIRO GFL ENVIROMENTAL Description: Trash Service Sequence: 1 Check Type: Check <u>Chart of Account Number</u> <u>Detail Description</u> 10 2541 6336 000 1050 1 00000 Trash Service	Checking Account ID: 1	PO Number: Invoice Number: AP00010609-0002 Amount: 462.99 Invoice Date: 03/31/2024 Due Date: 03/19/2024 Status: P 1099 Amount: 0.00 Check Number: 55515 Check Date: 03/18/2024 CC: <u>Cost Center ID</u> <u>Detail Amount</u> <u>1099 Detail Amount</u> <u>Asset/Asset Tag</u> <u>In Full</u> 462.99 0.00 N
Vendor ID: GOLDSTAR GOLD STAR FOODS Description: FOOD Sequence: 1 Check Type: Check <u>Chart of Account Number</u> <u>Detail Description</u> 10 2562 6471 000 0000 1 00000 FOOD	Checking Account ID: 1	PO Number: Invoice Number: 3154787 Amount: 2.16 Invoice Date: 02/19/2024 Due Date: 02/19/2024 Status: P 1099 Amount: 0.00 Check Number: 55449 Check Date: 02/19/2024 CC: <u>Cost Center ID</u> <u>Detail Amount</u> <u>1099 Detail Amount</u> <u>Asset/Asset Tag</u> <u>In Full</u> 2.16 N
Vendor ID: GRENNANCOM GRENNAN COMMUNICATIONS Description: INSPECTION Sequence: 1 Check Type: Check <u>Chart of Account Number</u> <u>Detail Description</u> 10 2541 6391 000 4020 1 00000 FIRE SYSTEM INSPECTION	Checking Account ID: 1	PO Number: Invoice Number: 80883 Amount: 542.00 Invoice Date: 01/10/2024 Due Date: 01/10/2024 Status: P 1099 Amount: 0.00 Check Number: 55400 Check Date: 01/22/2024 CC: <u>Cost Center ID</u> <u>Detail Amount</u> <u>1099 Detail Amount</u> <u>Asset/Asset Tag</u> <u>In Full</u> 542.00 N
Vendor ID: HEARTBUSIN HEARTLAND BUSINESS SYSTEMS Description: Internet Security Sequence: 1 Check Type: Check <u>Chart of Account Number</u> <u>Detail Description</u> 10 2321 6361 000 0000 1 00000 Internet Security	Checking Account ID: 1	PO Number: Invoice Number: 664744-H-0001 Amount: 1,755.00 Invoice Date: 01/19/2024 Due Date: 02/18/2024 Status: P 1099 Amount: 1,755.00 Check Number: 55450 Check Date: 02/19/2024 CC: <u>Cost Center ID</u> <u>Detail Amount</u> <u>1099 Detail Amount</u> <u>Asset/Asset Tag</u> <u>In Full</u> 1,755.00 1,755.00 N
Vendor ID: HEARTBUSIN HEARTLAND BUSINESS SYSTEMS Description: Internet Security Sequence: 1 Check Type: Check <u>Chart of Account Number</u> <u>Detail Description</u> 10 2331 6316 000 1050 1 00000 Internet Security	Checking Account ID: 1	PO Number: Invoice Number: 664744-H-0002 Amount: 1,755.00 Invoice Date: 03/19/2024 Due Date: 03/18/2024 Status: P 1099 Amount: 1,755.00 Check Number: 55516 Check Date: 03/18/2024 CC: <u>Cost Center ID</u> <u>Detail Amount</u> <u>1099 Detail Amount</u> <u>Asset/Asset Tag</u> <u>In Full</u> 1,755.00 1,755.00 N
Vendor ID: HEARTBUSIN HEARTLAND BUSINESS SYSTEMS Description: MONTHLY SERVICE Sequence: 1 Check Type: Check <u>Chart of Account Number</u> <u>Detail Description</u> 10 2321 6361 000 0000 1 00000 INTERNET SECURITY	Checking Account ID: 1	PO Number: Invoice Number: LUTIE-0005 Amount: 1,555.00 Invoice Date: 01/18/2024 Due Date: 01/18/2024 Status: P 1099 Amount: 0.00 Check Number: 55401 Check Date: 01/22/2024 CC: <u>Cost Center ID</u> <u>Detail Amount</u> <u>1099 Detail Amount</u> <u>Asset/Asset Tag</u> <u>In Full</u> 1,555.00 0.00 N
Vendor ID: HKING HEATHER KING MS, LPC Description: THERAPY SERVICES Sequence: 1 Check Type: Check <u>Chart of Account Number</u> <u>Detail Description</u>	Checking Account ID: 1	PO Number: Invoice Number: 20240118 Amount: 900.00 Invoice Date: 01/18/2024 Due Date: 01/18/2024 Status: P 1099 Amount: 0.00 Check Number: 55402 Check Date: 01/22/2024 CC: <u>Cost Center ID</u> <u>Detail Amount</u> <u>1099 Detail Amount</u> <u>Asset/Asset Tag</u> <u>In Full</u>

10 1221 6391 000 4020 1 12210 THERAPY SERVICES

900.00 N

Vendor ID: HKING HEATHER KING MS, LPC

Description: STUDENT TESTING

Sequence: 1 Check Type: Check

Checking Account ID: 1

Chart of Account Number Detail Description

10 2123 6391 000 1050 1 00000 TESTING

PO Number: Invoice Number: FEB 16 Amount: 450.00

Invoice Date: 03/12/2024 Due Date: 03/12/2024 Status: P 1099 Amount: 0.00

Check Number: 55517 Check Date: 03/18/2024 CC:

Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag In Full

450.00 N

Vendor ID: HILANDDAIR HILAND DAIRY FOODS CO

Description: Milk and Juice

Sequence: 1 Check Type: Check

Checking Account ID: 1

Chart of Account Number Detail Description

10 2562 6471 000 0000 1 00000 Milk and Juice

PO Number: Invoice Number: 4061951-0001 Amount: 1,173.32

Invoice Date: 02/10/2024 Due Date: 02/19/2024 Status: P 1099 Amount: 0.00

Check Number: 55451 Check Date: 02/19/2024 CC:

Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag In Full

1,173.32 N

Vendor ID: HILANDDAIR HILAND DAIRY FOODS CO

Description: Milk and Juice

Sequence: 1 Check Type: Check

Checking Account ID: 1

Chart of Account Number Detail Description

10 2562 6471 000 0000 1 00000 Milk and Juice

PO Number: Invoice Number: 4061951-0002 Amount: 1,152.03

Invoice Date: 03/10/2024 Due Date: 03/19/2024 Status: P 1099 Amount: 0.00

Check Number: 55518 Check Date: 03/18/2024 CC:

Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag In Full

1,152.03 0.00 N

Vendor ID: HILANDDAIR HILAND DAIRY FOODS CO

Description: MILK AND JUICE

Sequence: 1 Check Type: Check

Checking Account ID: 1

Chart of Account Number Detail Description

10 2562 6471 000 0000 1 00000 MILK AND JUICE

PO Number: Invoice Number: LUTIE-0005 Amount: 722.93

Invoice Date: 01/18/2024 Due Date: 01/18/2024 Status: P 1099 Amount: 0.00

Check Number: 55403 Check Date: 01/22/2024 CC:

Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag In Full

722.93 0.00 N

Vendor ID: HILLYARDSP HILLYARD/SPRINGFIELD

Description: KITCHEN/ MAINT SUPPLIES

Sequence: 1 Check Type: Check

Checking Account ID: 1

Chart of Account Number Detail Description

10 2541 6411 000 1050 1 00000 MAINT SUPPLIES

10 2562 6411 000 0000 1 00000 KITCHEN SUPPLIES

PO Number: Invoice Number: 224287-DEC Amount: 670.77

Invoice Date: 01/18/2024 Due Date: 01/18/2024 Status: P 1099 Amount: 0.00

Check Number: 55404 Check Date: 01/22/2024 CC:

Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag In Full

561.42 N

109.35 N

Vendor ID: HILLYARDSP HILLYARD/SPRINGFIELD

Description: MAITENANCE/ KITCHEN SUPPLIES

Sequence: 1 Check Type: Check

Checking Account ID: 1

Chart of Account Number Detail Description

10 2541 6411 000 1050 1 00000 SUPPLIES

10 2562 6411 000 0000 1 00000 FS SUPPLIES

PO Number: Invoice Number: 224287-MAR-0001 Amount: 941.88

Invoice Date: 03/17/2024 Due Date: 03/17/2024 Status: P 1099 Amount: 0.00

Check Number: 55519 Check Date: 03/18/2024 CC:

Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag In Full

780.50 N

161.38 N

Vendor ID: HILLYARDSP HILLYARD/SPRINGFIELD

Description: FLOOR MACHINE/ SUPPLIES

Sequence: 1 Check Type: Check

Checking Account ID: 1

Chart of Account Number Detail Description

40 2541 6541 000 0000 1 00000 FLOOR MACHINE

PO Number: Invoice Number: 700571421-605374883 Amount: 13,450.82

Invoice Date: 02/18/2024 Due Date: 02/18/2024 Status: P 1099 Amount: 0.00

Check Number: 55452 Check Date: 02/19/2024 CC:

Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag In Full

13,434.60 N

10 2541 6411 000 1050 1 00000 MAINTENANCE SUPPLIES

16.22

N

Vendor ID: THEODOSIAH HOMETOWN HARDWARE

Description: MAINTENANCE SUPPLIES

Sequence: 1 Check Type: Check

Checking Account ID: 1

[Chart of Account Number](#) [Detail Description](#)

10 2541 6411 000 4020 1 00000 SUPPLIES

PO Number:

Invoice Number: MARCH 24-0001

Amount:

783.51

Invoice Date: 03/17/2024 Due Date: 03/17/2024 Status: P 1099 Amount: 0.00

Check Number: 55520 Check Date: 03/18/2024 CC:

[Cost Center ID](#) [Detail Amount](#) [1099 Detail Amount](#) [Asset/Asset Tag](#) [In Full](#)

783.51 0.00 N

Vendor ID: THEODOSIAH HOMETOWN HARDWARE

Description: MAINTENANCE SUPPLIES

Sequence: 1 Check Type: Check

Checking Account ID: 1

[Chart of Account Number](#) [Detail Description](#)

10 2541 6411 000 4020 1 00000 SUPPLIES

PO Number:

Invoice Number: OCTOBER-0004

Amount:

14.68

Invoice Date: 01/17/2024 Due Date: 01/17/2024 Status: P 1099 Amount: 0.00

Check Number: 55405 Check Date: 01/22/2024 CC:

[Cost Center ID](#) [Detail Amount](#) [1099 Detail Amount](#) [Asset/Asset Tag](#) [In Full](#)

14.68 0.00 N

Vendor ID: THEODOSIAH HOMETOWN HARDWARE

Description: MAINTENANCE SUPPLIES

Sequence: 1 Check Type: Check

Checking Account ID: 1

[Chart of Account Number](#) [Detail Description](#)

10 2541 6411 000 4020 1 00000 SUPPLIES

PO Number:

Invoice Number: OCTOBER-0005

Amount:

70.88

Invoice Date: 02/17/2024 Due Date: 02/17/2024 Status: V 1099 Amount: 0.00

Check Number: 55453 Check Date: 02/19/2024 CC:

[Cost Center ID](#) [Detail Amount](#) [1099 Detail Amount](#) [Asset/Asset Tag](#) [In Full](#)

70.88 0.00 N

Vendor ID: THEODOSIAH HOMETOWN HARDWARE

Description: MAINTENANCE SUPPLIES

Sequence: 1 Check Type: Check

Checking Account ID: 1

[Chart of Account Number](#) [Detail Description](#)

10 2541 6411 000 4020 1 00000 SUPPLIES

PO Number:

Invoice Number: V*OCTOBER-0005

Amount:

(70.88)

Invoice Date: 02/28/2024 Due Date: 02/17/2024 Status: V 1099 Amount: 0.00

Check Number: 55453 Check Date: 02/19/2024 CC:

[Cost Center ID](#) [Detail Amount](#) [1099 Detail Amount](#) [Asset/Asset Tag](#) [In Full](#)

(70.88) 0.00 N

Vendor ID: HUMMERTINT HUMMERT INTERNATIONAL

Description: GREENHOUSE SUPPLIES

Sequence: 1 Check Type: Check

Checking Account ID: 1

[Chart of Account Number](#) [Detail Description](#)

60 1411 6411 030 1050 1 00000 GREENHOUSE SUPPLIES

PO Number:

Invoice Number: 20240312

Amount:

991.60

Invoice Date: 03/12/2024 Due Date: 03/12/2024 Status: P 1099 Amount: 0.00

Check Number: 55521 Check Date: 03/18/2024 CC:

[Cost Center ID](#) [Detail Amount](#) [1099 Detail Amount](#) [Asset/Asset Tag](#) [In Full](#)

991.60 0.00 N

Vendor ID: ISGTECHNOL ISG TECHNOLOGY INC

Description: TECH SERVICES

Sequence: 1 Check Type: Check

Checking Account ID: 1

[Chart of Account Number](#) [Detail Description](#)

10 2331 6316 000 1050 1 00000 CLOUD STORAGE

PO Number:

Invoice Number: 350803

Amount:

1,882.79

Invoice Date: 03/12/2024 Due Date: 03/12/2024 Status: P 1099 Amount: 0.00

Check Number: 55522 Check Date: 03/18/2024 CC:

[Cost Center ID](#) [Detail Amount](#) [1099 Detail Amount](#) [Asset/Asset Tag](#) [In Full](#)

1,882.79 N

Vendor ID: ISGTECHNOL ISG TECHNOLOGY INC

Description: Cloud Storage

Sequence: 1 Check Type: Check

Checking Account ID: 1

[Chart of Account Number](#) [Detail Description](#)

10 2225 6411 000 1050 1 00000 Cloud Storage

PO Number:

Invoice Number: ISG350803

Amount:

1,882.79

Invoice Date: 11/30/2023 Due Date: 12/10/2023 Status: V 1099 Amount: 0.00

Check Number: 55454 Check Date: 02/19/2024 CC:

[Cost Center ID](#) [Detail Amount](#) [1099 Detail Amount](#) [Asset/Asset Tag](#) [In Full](#)

1,882.79 N

Vendor ID: ISGTECHNOL ISG TECHNOLOGY INC

PO Number:

Invoice Number: V*ISG350803

Amount:

(1,882.79)

Invoice Listing - Detail
Quarter 1 Invoices 2024

Description: Cloud Storage	Invoice Date: 02/01/2024	Due Date: 12/10/2023	Status: V	1099 Amount: 0.00
Sequence: 1 Check Type: Check	Checking Account ID: 1	Check Number: 55454	Check Date: 02/19/2024	CC:
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>
10 2225 6411 000 1050 1 00000	Cloud Storage		(1,882.79)	N
Vendor ID: JACKSONEAG JACKSON EAGLE PEST MANG.	PO Number:	Invoice Number: 149827-0011	Amount:	100.00
Description: MONTHLY SPRAY	Invoice Date: 01/24/2024	Due Date: 01/24/2024	Status: P	1099 Amount: 0.00
Sequence: 1 Check Type: Check	Checking Account ID: 1	Check Number: 55406	Check Date: 01/22/2024	CC:
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>
10 2541 6391 000 4020 1 00000	MONTHLY SPRAY		100.00	0.00 N
Vendor ID: JACKSONEAG JACKSON EAGLE PEST MANG.	PO Number:	Invoice Number: 149827-0012	Amount:	100.00
Description: MONTHLY SPRAY	Invoice Date: 02/24/2024	Due Date: 02/24/2024	Status: P	1099 Amount: 0.00
Sequence: 1 Check Type: Check	Checking Account ID: 1	Check Number: 55455	Check Date: 02/19/2024	CC:
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>
10 2541 6391 000 4020 1 00000	MONTHLY SPRAY		100.00	0.00 N
Vendor ID: JACKSONEAG JACKSON EAGLE PEST MANG.	PO Number:	Invoice Number: 149827-0013	Amount:	100.00
Description: MONTHLY SPRAY	Invoice Date: 03/24/2024	Due Date: 03/24/2024	Status: P	1099 Amount: 0.00
Sequence: 1 Check Type: Check	Checking Account ID: 1	Check Number: 55523	Check Date: 03/18/2024	CC:
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>
10 2541 6332 000 1050 1 00000	MONTHLY SPRAY		100.00	0.00 N
Vendor ID: JEFFCOFFER JEFF COFFER	PO Number:	Invoice Number: 20240118	Amount:	110.00
Description: BACKFLOW TEST	Invoice Date: 01/18/2024	Due Date: 01/18/2024	Status: P	1099 Amount: 0.00
Sequence: 1 Check Type: Check	Checking Account ID: 1	Check Number: 55407	Check Date: 01/22/2024	CC:
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>
10 1111 6121 000 4020 1 00000	BACKFLOW TEST		110.00	N
Vendor ID: JOSTENS JOSTENS	PO Number:	Invoice Number: 20240216	Amount:	985.03
Description: Yearbook Deposit	Invoice Date: 02/16/2024	Due Date: 04/01/2024	Status: P	1099 Amount: 0.00
Sequence: 1 Check Type: Check	Checking Account ID: 1	Check Number: 55456	Check Date: 02/19/2024	CC:
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>
60 1411 6411 013 1050 1 00000	Yearbook Deposit		985.03	N
Vendor ID: JTMPROVISI JTM PROVISIONS	PO Number:	Invoice Number: 606861	Amount:	50.48
Description: FOOD	Invoice Date: 01/15/2024	Due Date: 02/19/2024	Status: P	1099 Amount: 0.00
Sequence: 1 Check Type: Check	Checking Account ID: 1	Check Number: 55457	Check Date: 02/19/2024	CC:
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>
10 2562 6471 000 0000 1 00000	FOOD		50.48	N
Vendor ID: JUNIORLIBR JUNIOR LIBRARY GUILD	PO Number:	Invoice Number: 669651	Amount:	1,869.36
Description: LIBRARY BOOKS	Invoice Date: 01/18/2024	Due Date: 01/18/2024	Status: P	1099 Amount: 0.00
Sequence: 1 Check Type: Check	Checking Account ID: 1	Check Number: 55408	Check Date: 01/22/2024	CC:
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>
				<u>Asset/Asset Tag</u>
				<u>In Full</u>

10 2222 6441 000 4020 1 00000 LIBRARY BOOKS

1,869.36 N

Vendor ID: KRISTIWILL KRISTI WILLIAMS

Description: MSBA REPORTING

Sequence: 1 Check Type: Check

Checking Account ID: 1

Chart of Account Number Detail Description

10 2411 6391 000 1050 1 00000 MSBA BILLING

PO Number: **Invoice Number: 20240110** **Amount: 200.00**

Invoice Date: 01/10/2024 Due Date: 01/10/2024 Status: P 1099 Amount: 200.00

Check Number: 55409 Check Date: 01/22/2024 CC:

Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag In Full

200.00 200.00 N

Vendor ID: LININGTARA LININGER, TARA

Description: Reimbursement for testing

Sequence: 1 Check Type: Check

Checking Account ID: 1

Chart of Account Number Detail Description

10 1251 6411 000 4020 4 45100 testing reimbursement

PO Number: **Invoice Number: 20240216** **Amount: 102.95**

Invoice Date: 02/09/2024 Due Date: 02/19/2024 Status: P 1099 Amount: 0.00

Check Number: 55458 Check Date: 02/19/2024 CC:

Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag In Full

102.95 N

Vendor ID: MASTERSTRA MASTERS TRANSPORTATION

Description: BUS REPAIR

Sequence: 1 Check Type: Check

Checking Account ID: 1

Chart of Account Number Detail Description

10 2552 6332 000 0000 1 00000 BUS REPAIR

PO Number: **Invoice Number: 20240219** **Amount: 2,660.28**

Invoice Date: 12/01/2023 Due Date: 02/19/2024 Status: P 1099 Amount: 0.00

Check Number: 55459 Check Date: 02/19/2024 CC:

Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag In Full

2,660.28 N

Vendor ID: MIKENABENA MIKE NABENA

Description: HS REFEREE

Sequence: 1 Check Type: Check

Checking Account ID: 1

Chart of Account Number Detail Description

10 1411 6391 000 1050 1 00000 REFEREE

PO Number: **Invoice Number: 20240118** **Amount: 125.00**

Invoice Date: 01/18/2024 Due Date: 01/18/2024 Status: P 1099 Amount: 0.00

Check Number: 55410 Check Date: 01/22/2024 CC:

Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag In Full

125.00 N

Vendor ID: MODIVEMPLO MO DIV EMPLOYMENT SECURI

Description: EMPLOYMENT TAXES

Sequence: 1 Check Type: Automatic Payment

Checking Account ID: 1

Chart of Account Number Detail Description

10 2311 6271 000 0000 1 00000 EMPLOYMENT TAXES

PO Number: **Invoice Number: 20240709** **Amount: 90.00**

Invoice Date: 07/09/2024 Due Date: 07/09/2024 Status: AP 1099 Amount: 0.00

Check Number: 54248 Check Date: 07/09/2024 CC:

Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag In Full

90.00 N

Vendor ID: MSBA MSBA

Description: SDAC CLAIMS

Sequence: 1 Check Type: Check

Checking Account ID: 1

Chart of Account Number Detail Description

10 1111 6121 000 4020 1 00000 SDAC CLAIMS

10 1111 6121 000 4020 1 00000 Reversal: SDAC CLAIMS

10 2529 6398 000 0000 1 00000 Correction: SDAC CLAIMS

PO Number: **Invoice Number: 22521-N9G3G7** **Amount: 61.98**

Invoice Date: 01/18/2024 Due Date: 01/18/2024 Status: P 1099 Amount: 0.00

Check Number: 55411 Check Date: 01/22/2024 CC:

Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag In Full

61.98 N

(61.98) N

61.98 0.00 N

Vendor ID: NARDONE NARDONE BROS BAKING CO

Description: FOOD

Sequence: 1 Check Type: Check

Checking Account ID: 1

Chart of Account Number Detail Description

10 2562 6471 000 0000 1 00000 FOOD

PO Number: **Invoice Number: 109661** **Amount: 31.93**

Invoice Date: 01/18/2024 Due Date: 01/18/2024 Status: P 1099 Amount: 0.00

Check Number: 55412 Check Date: 01/22/2024 CC:

Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag In Full

31.93 N

Vendor ID: NARDONE NARDONE BROS BAKING CO

Description: FOOD

Sequence: 1

Check Type: Check

Checking Account ID: 1

Chart of Account Number

Detail Description

10 2562 6471 000 0000 1 00000 FOOD

PO Number:

Invoice Number: 113770

Amount:

55.11

Invoice Date: 03/12/2024 Due Date: 03/12/2024 Status: P 1099 Amount: 0.00

Check Number: 55524

Check Date: 03/18/2024

CC:

Cost Center ID

Detail Amount

1099 Detail Amount

Asset/Asset Tag

In Full

55.11

N

Vendor ID: NEXUS NEXUS THERAPY

Description: SPEECH/ PHYSICAL THER/ BCBA

Sequence: 1

Check Type: Check

Checking Account ID: 1

Chart of Account Number

Detail Description

10 2152 6311 000 4020 1 00000 SPEECH THERAPIST

10 2172 6311 000 4020 1 00000 PHYSICAL THERAPIST

10 2191 6311 000 4020 1 00000 BCBA THERAPIST

PO Number:

Invoice Number: 135

Amount:

2,698.75

Invoice Date: 03/12/2024 Due Date: 03/12/2024 Status: P 1099 Amount: 0.00

Check Number: 55525

Check Date: 03/18/2024

CC:

Cost Center ID

Detail Amount

1099 Detail Amount

Asset/Asset Tag

In Full

913.75

N

892.50

N

892.50

N

Vendor ID: NEXUS NEXUS THERAPY

Description: Speech Therapy

Sequence: 1

Check Type: Check

Checking Account ID: 1

Chart of Account Number

Detail Description

10 2162 6391 000 4020 1 00000 Speech Therapy

PO Number:

Invoice Number: 20240216

Amount:

3,017.50

Invoice Date: 02/16/2024 Due Date: 02/19/2024 Status: P 1099 Amount: 0.00

Check Number: 55460

Check Date: 02/19/2024

CC:

Cost Center ID

Detail Amount

1099 Detail Amount

Asset/Asset Tag

In Full

3,017.50

N

Vendor ID: NEXUS NEXUS THERAPY

Description: PT AND OT

Sequence: 1

Check Type: Check

Checking Account ID: 1

Chart of Account Number

Detail Description

10 2152 6391 000 4020 1 00000 SPEECH

10 2162 6391 000 4020 1 00000 PT

PO Number:

Invoice Number: 73

Amount:

1,253.75

Invoice Date: 01/18/2024 Due Date: 01/18/2024 Status: P 1099 Amount: 0.00

Check Number: 55413

Check Date: 01/22/2024

CC:

Cost Center ID

Detail Amount

1099 Detail Amount

Asset/Asset Tag

In Full

318.75

N

935.00

N

Vendor ID: OREILLYAUT OREILLY AUTOMOTIVE INC

Description: BUS PARTS

Sequence: 1

Check Type: Check

Checking Account ID: 1

Chart of Account Number

Detail Description

10 2552 6411 000 0000 1 00000 BUS PARTS

PO Number:

Invoice Number: 20240312

Amount:

63.94

Invoice Date: 03/12/2024 Due Date: 03/12/2024 Status: P 1099 Amount: 0.00

Check Number: 55526

Check Date: 03/18/2024

CC:

Cost Center ID

Detail Amount

1099 Detail Amount

Asset/Asset Tag

In Full

63.94

N

Vendor ID: OTTFOODPRO OTT FOOD PRODUCTS CO

Description: FOOD

Sequence: 1

Check Type: Check

Checking Account ID: 1

Chart of Account Number

Detail Description

10 2562 6471 000 0000 1 00000 FOOD

PO Number:

Invoice Number: 224076

Amount:

24.75

Invoice Date: 03/12/2024 Due Date: 03/12/2024 Status: P 1099 Amount: 0.00

Check Number: 55527

Check Date: 03/18/2024

CC:

Cost Center ID

Detail Amount

1099 Detail Amount

Asset/Asset Tag

In Full

24.75

N

Vendor ID: OZARKTRADE OZARK HORSE TRADER

Description: OFFICE FORMS

Sequence: 1

Check Type: Check

Checking Account ID: 1

Chart of Account Number

Detail Description

10 2411 6411 000 1050 1 00000 OFFICE FORMS

PO Number:

Invoice Number: 20240118

Amount:

1,445.00

Invoice Date: 01/18/2024 Due Date: 01/18/2024 Status: P 1099 Amount: 0.00

Check Number: 55414

Check Date: 01/22/2024

CC:

Cost Center ID

Detail Amount

1099 Detail Amount

Asset/Asset Tag

In Full

1,445.00

N

Vendor ID: OZARKTRADE OZARK HORSE TRADER

Description: Office forms

Sequence: 1 Check Type: Check

Checking Account ID: 1

Chart of Account Number Detail Description

10 2411 6411 000 1050 1 00000 Office forms

PO Number:

Invoice Number: 20240216

Amount: 1,466.68

Invoice Date: 01/31/2024 Due Date: 02/10/2024 Status: V 1099 Amount: 0.00

Check Number: 55461 Check Date: 02/19/2024 CC:

Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag In Full

1,466.68 N

Vendor ID: OZARKTRADE OZARK HORSE TRADER

Description: Office forms

Sequence: 1 Check Type: Check

Checking Account ID: 1

Chart of Account Number Detail Description

10 2411 6411 000 1050 1 00000 Office forms

PO Number:

Invoice Number: V*20240216

Amount: (1,466.68)

Invoice Date: 02/28/2024 Due Date: 02/10/2024 Status: V 1099 Amount: 0.00

Check Number: 55461 Check Date: 02/19/2024 CC:

Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag In Full

(1,466.68) N

Vendor ID: OZARKSMED1 OZARKS MEDICAL CENTER

Description: OT SERVICES

Sequence: 1 Check Type: Check

Checking Account ID: 1

Chart of Account Number Detail Description

10 2162 6391 000 4020 1 00000 OT SERVICES

PO Number:

Invoice Number: 10

Amount: 640.91

Invoice Date: 01/18/2024 Due Date: 01/18/2024 Status: P 1099 Amount: 0.00

Check Number: 55415 Check Date: 01/22/2024 CC:

Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag In Full

640.91 N

Vendor ID: OZARKSMEDI OZARKS MEDICAL CENTER

Description: Occupational Therapy

Sequence: 1 Check Type: Check

Checking Account ID: 1

Chart of Account Number Detail Description

10 2162 6391 000 4020 1 00000 Occupational therapy

PO Number:

Invoice Number: 20240216

Amount: 1,051.07

Invoice Date: 01/31/2024 Due Date: 02/08/2024 Status: P 1099 Amount: 0.00

Check Number: 55462 Check Date: 02/19/2024 CC:

Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag In Full

1,051.07 N

Vendor ID: PWSD P W S D

Description: WATER

Sequence: 1 Check Type: Check

Checking Account ID: 1

Chart of Account Number Detail Description

10 2541 6335 000 1050 1 00000 WATER

PO Number:

Invoice Number: #84-0010

Amount: 383.00

Invoice Date: 01/17/2024 Due Date: 01/17/2024 Status: P 1099 Amount: 383.00

Check Number: 55416 Check Date: 01/22/2024 CC:

Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag In Full

383.00 383.00 N

Vendor ID: PWSD P W S D

Description: WATER

Sequence: 1 Check Type: Check

Checking Account ID: 1

Chart of Account Number Detail Description

10 2541 6335 000 1050 1 00000 WATER

PO Number:

Invoice Number: #84-0011

Amount: 225.32

Invoice Date: 02/17/2024 Due Date: 02/17/2024 Status: P 1099 Amount: 225.32

Check Number: 55463 Check Date: 02/19/2024 CC:

Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag In Full

225.32 225.32 N

Vendor ID: PWSD P W S D

Description: WATER

Sequence: 1 Check Type: Check

Checking Account ID: 1

Chart of Account Number Detail Description

10 2541 6335 000 1050 1 00000 WATER

PO Number:

Invoice Number: #84/85-0001

Amount: 1,126.50

Invoice Date: 03/17/2024 Due Date: 03/17/2024 Status: P 1099 Amount: 1,126.50

Check Number: 55528 Check Date: 03/18/2024 CC:

Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag In Full

1,126.50 1,126.50 N

Vendor ID: PARENTSAST PARENTS AS TEACHERS

Description: Employee Training

Sequence: 1 Check Type: Check

Checking Account ID: 1

PO Number:

Invoice Number: 852544

Amount: 700.00

Invoice Date: 02/16/2024 Due Date: 02/19/2024 Status: P 1099 Amount: 0.00

Check Number: 55464 Check Date: 02/19/2024 CC:

<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
10 2214 6312 000 1050 3 00000	Employee Training		700.00		N	
Vendor ID: PEARSON PEARSON		PO Number:	Invoice Number: 20240312		Amount:	63.00
Description: SPED TESTING FORMS		Invoice Date: 03/12/2024 Due Date: 03/12/2024 Status: P 1099 Amount: 0.00				
Sequence: 1 Check Type: Check Checking Account ID: 1		Check Number: 55529 Check Date: 03/18/2024 CC:				
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
10 2126 6411 000 4020 1 00000	TESTING SUPPLIES		63.00		N	
10 2126 6411 000 4020 1 00000	Reversal: TESTING SUPPLIES		(63.00)		N	
10 2123 6391 000 1050 1 00000	Correction: TESTING SUPPLIES		63.00	0.00	N	
Vendor ID: POWERSCHOO POWERSCHOOL		PO Number:	Invoice Number: INV374341		Amount:	1,456.02
Description: TAX FORMS/ SCHOOL MESSENGER		Invoice Date: 01/10/2024 Due Date: 01/10/2024 Status: P 1099 Amount: 0.00				
Sequence: 1 Check Type: Check Checking Account ID: 1		Check Number: 55417 Check Date: 01/22/2024 CC:				
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
10 2321 6411 000 0000 1 00000	TAX FORMS		206.03		N	
10 2411 6391 000 1050 1 00000	SCHOOL MESSENGER		1,249.99		N	
Vendor ID: DPRICE Price, Don		PO Number:	Invoice Number: 20240216		Amount:	198.00
Description: Referee		Invoice Date: 02/09/2024 Due Date: 02/19/2024 Status: P 1099 Amount: 0.00				
Sequence: 1 Check Type: Check Checking Account ID: 1		Check Number: 55465 Check Date: 02/19/2024 CC:				
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
10 1411 6411 065 4020 1 00000	referee		198.00		N	
10 1411 6411 065 4020 1 00000	Reversal: refereee		(198.00)		N	
10 1421 6391 000 1050 1 00000	Correction: refereee		198.00	0.00	N	
Vendor ID: RAYGRCONST RAY GRISHAM CONSTRUCTION		PO Number:	Invoice Number: 0307551		Amount:	1,000.00
Description: BUS BARN CONCRETE		Invoice Date: 01/03/2024 Due Date: 01/03/2024 Status: PP 1099 Amount: 0.00				
Sequence: 1 Check Type: Check Checking Account ID: 1		Check Number: 55378 Check Date: 01/03/2024 CC:				
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
10 2541 6391 000 1050 1 00000	BUS BARN CONCRETE		1,000.00		N	
Vendor ID: RAYGRCONST RAY GRISHAM CONSTRUCTION		PO Number:	Invoice Number: 174289		Amount:	16,900.00
Description: COVERED WALKWAY		Invoice Date: 01/03/2024 Due Date: 01/03/2024 Status: PP 1099 Amount: 0.00				
Sequence: 1 Check Type: Check Checking Account ID: 1		Check Number: 55379 Check Date: 01/03/2024 CC:				
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
40 2541 6521 000 0000 1 00000	COVERED WALKWAY		16,900.00		N	
Vendor ID: REXJOHNSON REX JOHNSON		PO Number:	Invoice Number: 20240216-0001		Amount:	180.00
Description: Referee		Invoice Date: 02/05/2024 Due Date: 02/19/2024 Status: P 1099 Amount: 0.00				
Sequence: 1 Check Type: Check Checking Account ID: 1		Check Number: 55466 Check Date: 02/19/2024 CC:				
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
10 1411 6411 065 4020 1 00000	Referee		90.00		N	
10 1411 6411 065 4020 1 00000	Referee		90.00		N	
10 1411 6411 065 4020 1 00000	Reversal: Referee		(90.00)		N	

10 1421 6319 000 1050 1 00000 Correction: Referee

90.00 0.00 N

Vendor ID: REXJOHNSON REX JOHNSON

Description: REFEREE

Sequence: 1 Check Type: Check

Chart of Account Number Detail Description

10 1421 6319 000 1050 1 00000 REFEREE

Checking Account ID: 1

PO Number:

Invoice Number: 20240312

Amount:

90.00

Invoice Date: 03/12/2024 Due Date: 03/12/2024 Status: P 1099 Amount: 0.00

Check Number: 55530 Check Date: 03/18/2024 CC:

Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag In Full

90.00 N

Vendor ID: RICHPRODUC RICH PRODUCTS CORP

Description: FOOD

Sequence: 1 Check Type: Check

Chart of Account Number Detail Description

10 2562 6471 000 0000 1 00000 FOOD

Checking Account ID: 1

PO Number:

Invoice Number: 34532070

Amount:

50.75

Invoice Date: 01/18/2024 Due Date: 01/18/2024 Status: P 1099 Amount: 0.00

Check Number: 55418 Check Date: 01/22/2024 CC:

Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag In Full

50.75 N

Vendor ID: RICOHUSA RICOH USA

Description: MONTHLY COPIES

Sequence: 1 Check Type: Check

Chart of Account Number Detail Description

10 2411 6334 000 4020 1 00000 MONTHLY COPIES

Checking Account ID: 1

PO Number:

Invoice Number: 5068804641

Amount:

236.99

Invoice Date: 03/17/2024 Due Date: 03/17/2024 Status: P 1099 Amount: 0.00

Check Number: 55531 Check Date: 03/18/2024 CC:

Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag In Full

236.99 N

Vendor ID: RICOHUSA1 RICOH USA

Description: MACHINE RENT

Sequence: 1 Check Type: Check

Chart of Account Number Detail Description

10 2411 6391 000 1050 1 00000 MACHINE RENT

Checking Account ID: 1

PO Number:

Invoice Number: 107883224-0001

Amount:

772.27

Invoice Date: 01/24/2024 Due Date: 01/24/2024 Status: P 1099 Amount: 0.00

Check Number: 55419 Check Date: 01/22/2024 CC:

Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag In Full

772.27 0.00 N

Vendor ID: RICOHUSA1 RICOH USA

Description: MACHINE RENT

Sequence: 1 Check Type: Check

Chart of Account Number Detail Description

10 2411 6391 000 1050 1 00000 MACHINE RENT

10 2411 6391 000 1050 1 00000 Reversal: MACHINE RENT

10 2311 6371 000 0000 1 00000 Correction: MACHINE RENT

Checking Account ID: 1

PO Number:

Invoice Number: 107883224-0002

Amount:

236.99

Invoice Date: 02/24/2024 Due Date: 02/24/2024 Status: P 1099 Amount: 0.00

Check Number: 55467 Check Date: 02/19/2024 CC:

Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag In Full

236.99 0.00 N

(236.99) 0.00 N

236.99 0.00 N

Vendor ID: RICOHUSA1 RICOH USA

Description: MACHINE RENT

Sequence: 1 Check Type: Check

Chart of Account Number Detail Description

10 2331 6338 000 1050 1 00000 MACHINE RENT

Checking Account ID: 1

PO Number:

Invoice Number: 107883224-0003

Amount:

316.03

Invoice Date: 03/24/2024 Due Date: 03/24/2024 Status: P 1099 Amount: 0.00

Check Number: 55532 Check Date: 03/18/2024 CC:

Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag In Full

316.03 0.00 N

Vendor ID: SCHOOLLUNC SCHOOL LUNCH SOLUTIONS

Description: Food

Sequence: 1 Check Type: Check

Chart of Account Number Detail Description

10 2562 6471 000 0000 1 00000 Food

Checking Account ID: 1

PO Number:

Invoice Number: 000117583

Amount:

364.22

Invoice Date: 12/29/2023 Due Date: 02/16/2024 Status: P 1099 Amount: 0.00

Check Number: 55468 Check Date: 02/19/2024 CC:

Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag In Full

275.98 N

10 2562 6471 000 0000 1 00000 Food

88.24

N

Vendor ID: SCHOOLLUNC SCHOOL LUNCH SOLUTIONS

PO Number: **Invoice Number: 118492** **Amount: 125.44**

Description: FOOD

Invoice Date: 03/17/2024 Due Date: 03/17/2024 Status: P 1099 Amount: 0.00

Sequence: 1 Check Type: Check

Checking Account ID: 1

Check Number: 55533

Check Date: 03/18/2024 CC:

Chart of Account Number Detail Description

Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag In Full

10 2562 6471 000 0000 1 00000 FOOD

125.44

N

Vendor ID: SPRINGFIE5 SPRINGFIELD GROCER CO

PO Number: **Invoice Number: 75020-MARCH** **Amount: 4,463.28**

Description: FOOD

Invoice Date: 03/17/2024 Due Date: 03/17/2024 Status: P 1099 Amount: 4,463.28

Sequence: 1 Check Type: Check

Checking Account ID: 1

Check Number: 55534

Check Date: 03/18/2024 CC:

Chart of Account Number Detail Description

Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag In Full

10 2562 6471 000 0000 1 00000 FOOD

4,463.28

4,463.28 N

Vendor ID: SPRINGFIE5 SPRINGFIELD GROCER CO

PO Number: **Invoice Number: 75020-MAY-0009** **Amount: 2,689.07**

Description: SCHOOL FOOD

Invoice Date: 01/15/2024 Due Date: 01/15/2024 Status: P 1099 Amount: 2,689.07

Sequence: 1 Check Type: Check

Checking Account ID: 1

Check Number: 55420

Check Date: 01/22/2024 CC:

Chart of Account Number Detail Description

Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag In Full

10 2562 6491 000 0000 1 00000 FOOD

2,689.07

2,689.07 N

Vendor ID: SPRINGFIE5 SPRINGFIELD GROCER CO

PO Number: **Invoice Number: 75020-MAY-0010** **Amount: 6,052.85**

Description: SCHOOL FOOD

Invoice Date: 02/15/2024 Due Date: 02/15/2024 Status: P 1099 Amount: 6,052.85

Sequence: 1 Check Type: Check

Checking Account ID: 1

Check Number: 55469

Check Date: 02/19/2024 CC:

Chart of Account Number Detail Description

Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag In Full

10 2562 6491 000 0000 1 00000 FOOD

6,052.85

6,052.85 N

Vendor ID: SWENTCRAIG SWENTY, CRAIG

PO Number: **Invoice Number: 20240125** **Amount: 611.70**

Description: INSURANCE REIMBURSEMENT

Invoice Date: 01/25/2024 Due Date: 01/25/2024 Status: PP 1099 Amount: 0.00

Sequence: 1 Check Type: Check

Checking Account ID: 1

Check Number: 55484

Check Date: 01/25/2024 CC:

Chart of Account Number Detail Description

Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag In Full

20 1251 6241 000 4020 1 00000 INSURANCE

611.70

N

Vendor ID: SWENTCRAIG SWENTY, CRAIG

PO Number: **Invoice Number: 20240216** **Amount: 611.70**

Description: Insurance

Invoice Date: 02/16/2024 Due Date: 02/19/2024 Status: P 1099 Amount: 0.00

Sequence: 1 Check Type: Check

Checking Account ID: 1

Check Number: 55470

Check Date: 02/19/2024 CC:

Chart of Account Number Detail Description

Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag In Full

10 1111 6241 000 4020 1 00000 Insurance

611.70

0.00 N

Vendor ID: SWENTCRAIG SWENTY, CRAIG

PO Number: **Invoice Number: ins- 24-0001** **Amount: 611.70**

Description: EMPLOYEE INSURANCE

Invoice Date: 03/12/2024 Due Date: 03/12/2024 Status: P 1099 Amount: 0.00

Sequence: 1 Check Type: Check

Checking Account ID: 1

Check Number: 55535

Check Date: 03/18/2024 CC:

Chart of Account Number Detail Description

Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag In Full

20 1111 6241 000 4020 1 00000 EMPLOYEE INSURANCE

611.70

N

Vendor ID: SYSCO SYSCO KANSAS CITY

PO Number: **Invoice Number: 20240709** **Amount: 2,222.01**

Invoice Listing - Detail
Quarter 1 Invoices 2024

Description: FOOD	Invoice Date: 01/31/2024	Due Date: 01/31/2024	Status: AP	1099 Amount: 0.00
Sequence: 1 Check Type: Automatic Payment Checking Account ID: 1	Check Number: 54244	Check Date: 01/31/2024	CC:	
<u>Chart of Account Number</u> <u>Detail Description</u>	<u>Cost Center ID</u> <u>Detail Amount</u> <u>1099 Detail Amount</u> <u>Asset/Asset Tag</u> <u>In Full</u>			
10 2562 6471 000 0000 1 00000 FOOD	2,222.01		N	
Vendor ID: SYSCO SYSCO KANSAS CITY	PO Number:	Invoice Number: 240218	Amount:	1,784.82
Description: FOOD	Invoice Date: 02/18/2024	Due Date: 02/18/2024	Status: AP	1099 Amount: 0.00
Sequence: 1 Check Type: Automatic Payment Checking Account ID: 1	Check Number: 54198	Check Date: 02/18/2024	CC:	
<u>Chart of Account Number</u> <u>Detail Description</u>	<u>Cost Center ID</u> <u>Detail Amount</u> <u>1099 Detail Amount</u> <u>Asset/Asset Tag</u> <u>In Full</u>			
10 2562 6471 000 0000 1 00000 FOOD	1,784.82		N	
Vendor ID: TARALINING TARA LININGER	PO Number:	Invoice Number: 20240125	Amount:	147.96
Description: TITLE I REIMBURSEMENT	Invoice Date: 01/25/2024	Due Date: 01/25/2024	Status: PP	1099 Amount: 0.00
Sequence: 1 Check Type: Check Checking Account ID: 1	Check Number: 55483	Check Date: 01/25/2024	CC:	
<u>Chart of Account Number</u> <u>Detail Description</u>	<u>Cost Center ID</u> <u>Detail Amount</u> <u>1099 Detail Amount</u> <u>Asset/Asset Tag</u> <u>In Full</u>			
10 1251 6411 000 4020 4 45100 TITLE I NIGHT	147.96		N	
Vendor ID: TASTYBRAND TASTY BRANDS LLC	PO Number:	Invoice Number: 64354	Amount:	125.18
Description: FOOD	Invoice Date: 01/16/2024	Due Date: 02/19/2024	Status: P	1099 Amount: 0.00
Sequence: 1 Check Type: Check Checking Account ID: 1	Check Number: 55471	Check Date: 02/19/2024	CC:	
<u>Chart of Account Number</u> <u>Detail Description</u>	<u>Cost Center ID</u> <u>Detail Amount</u> <u>1099 Detail Amount</u> <u>Asset/Asset Tag</u> <u>In Full</u>			
10 2562 6471 000 0000 1 00000 FOOD	125.18		N	
Vendor ID: TEACHERSYN TEACHER SYNERGY LLC	PO Number:	Invoice Number: 20240119	Amount:	161.31
Description: COUNSELING/ ELEMENTARY	Invoice Date: 01/19/2024	Due Date: 01/19/2024	Status: P	1099 Amount: 0.00
Sequence: 1 Check Type: Check Checking Account ID: 1	Check Number: 55421	Check Date: 01/22/2024	CC:	
<u>Chart of Account Number</u> <u>Detail Description</u>	<u>Cost Center ID</u> <u>Detail Amount</u> <u>1099 Detail Amount</u> <u>Asset/Asset Tag</u> <u>In Full</u>			
10 2121 6411 000 1050 1 00000 CURRICULUM	92.69		N	
10 1111 6431 000 4020 1 00000 CURRICULUM	68.62		N	
Vendor ID: TEACHERSYN TEACHER SYNERGY LLC	PO Number:	Invoice Number: 255059905/255060186	Amount:	217.79
Description: Curriculum Supplies	Invoice Date: 01/29/2024	Due Date: 02/19/2024	Status: P	1099 Amount: 217.79
Sequence: 1 Check Type: Check Checking Account ID: 1	Check Number: 55472	Check Date: 02/19/2024	CC:	
<u>Chart of Account Number</u> <u>Detail Description</u>	<u>Cost Center ID</u> <u>Detail Amount</u> <u>1099 Detail Amount</u> <u>Asset/Asset Tag</u> <u>In Full</u>			
10 1111 6431 000 4020 1 00000 Textbooks	135.20	135.20	N	
10 2121 6411 000 1050 1 00000 Textbooks	82.59	82.59	N	
Vendor ID: THOMASDOUG THOMAS & COMPANY	PO Number:	Invoice Number: 82	Amount:	14,028.75
Description: AUDIT SERVICES	Invoice Date: 12/31/2023	Due Date: 02/19/2024	Status: P	1099 Amount: 0.00
Sequence: 1 Check Type: Check Checking Account ID: 1	Check Number: 55473	Check Date: 02/19/2024	CC:	
<u>Chart of Account Number</u> <u>Detail Description</u>	<u>Cost Center ID</u> <u>Detail Amount</u> <u>1099 Detail Amount</u> <u>Asset/Asset Tag</u> <u>In Full</u>			
10 2311 6315 000 0000 1 00000 AUDIT SERVICES	14,028.75		N	
Vendor ID: TOUCHTONEC TOUCHTONE COMMUNICATIONS	PO Number:	Invoice Number: 4172734274-0011	Amount:	71.90
Description: PHONE BILL	Invoice Date: 01/15/2024	Due Date: 01/15/2024	Status: P	1099 Amount: 0.00

Invoice Listing - Detail
Quarter 1 Invoices 2024

Sequence: 1	Check Type: Check	Checking Account ID: 1	Check Number: 55422	Check Date: 01/22/2024	CC:	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
10 2541 6361 000 1050 1 00000	PHONE BILL		71.90	0.00	N	
Vendor ID: TOUCHTONEC TOUCHTONE COMMUNICATIONS			PO Number:	Invoice Number: 4172734274-0012	Amount:	135.04
Description: PHONE BILL			Invoice Date: 02/15/2024	Due Date: 02/15/2024	Status: P	1099 Amount: 0.00
Sequence: 1	Check Type: Check	Checking Account ID: 1	Check Number: 55474	Check Date: 02/19/2024	CC:	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
10 2541 6361 000 1050 1 00000	PHONE BILL		135.04	0.00	N	
Vendor ID: TOUCHTONEC TOUCHTONE COMMUNICATIONS			PO Number:	Invoice Number: 4172734274-0013	Amount:	84.45
Description: PHONE BILL			Invoice Date: 03/15/2024	Due Date: 03/15/2024	Status: P	1099 Amount: 0.00
Sequence: 1	Check Type: Check	Checking Account ID: 1	Check Number: 55536	Check Date: 03/18/2024	CC:	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
10 2541 6361 000 1050 1 00000	PHONE BILL		84.45	0.00	N	
Vendor ID: TOWNCOUNT2 TOWN & COUNTRY			PO Number:	Invoice Number: 2210124- FEBRUARY	Amount:	80.19
Description: SENIOR FUNDRAISER SUPPLIES			Invoice Date: 03/17/2024	Due Date: 03/17/2024	Status: P	1099 Amount: 0.00
Sequence: 1	Check Type: Check	Checking Account ID: 1	Check Number: 55537	Check Date: 03/18/2024	CC:	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
10 1411 6411 000 4020 1 00000	FUNDRAISER SUPPLIES		80.19		N	
Vendor ID: WHITEOAK USA INVESTMENTS LLC			PO Number:	Invoice Number: 20240317	Amount:	29.97
Description: CLASS PARTY- DRUG AWARENESS			Invoice Date: 03/17/2024	Due Date: 03/17/2024	Status: P	1099 Amount: 0.00
Sequence: 1	Check Type: Check	Checking Account ID: 1	Check Number: 55538	Check Date: 03/18/2024	CC:	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
60 1411 6411 043 1050 1 00000	CLASS PARTY		29.97		N	
Vendor ID: LAKELYVAUG VAUGHT, LAKELYNN			PO Number:	Invoice Number: 20240218	Amount:	1,500.00
Description: Tuition reimbursement			Invoice Date: 02/18/2024	Due Date: 02/18/2024	Status: P	1099 Amount: 0.00
Sequence: 1	Check Type: Check	Checking Account ID: 1	Check Number: 55475	Check Date: 02/19/2024	CC:	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
10 2411 6411 000 1050 4 42301	Tuition Reimbursement		1,500.00		N	
10 2411 6411 000 1050 4 42301	Reversal: Tuition Reimbursement		(1,500.00)		N	
10 1151 6391 000 1050 4 42302	Correction: Tuition Reimbursement		1,500.00	0.00	N	
Vendor ID: BRITTVEACH VEACH, BRITTNEY			PO Number:	Invoice Number: 20240218	Amount:	327.00
Description: TUITION REIMBURSEMENT			Invoice Date: 02/18/2024	Due Date: 02/18/2024	Status: P	1099 Amount: 0.00
Sequence: 1	Check Type: Check	Checking Account ID: 1	Check Number: 55476	Check Date: 02/19/2024	CC:	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
10 2411 6411 000 1050 4 42301	TUITION REIMBURSEMENT		327.00		N	
10 2411 6411 000 1050 4 42301	Reversal: TUITION REIMBURSEMENT		(327.00)		N	
10 1151 6391 000 1050 4 42302	Correction: TUITION REIMBURSEMENT		327.00	0.00	N	
Vendor ID: VERIZONWIR VERIZON WIRELESS			PO Number:	Invoice Number: 20240709	Amount:	112.96

Invoice Listing - Detail
Quarter 1 Invoices 2024

Description: cell phone	Invoice Date: 07/09/2024	Due Date: 07/09/2024	Status: AP	1099 Amount: 112.96
Sequence: 1 Check Type: Automatic Payment Checking Account ID: 1	Check Number: 54245	Check Date: 07/09/2024	CC:	
<u>Chart of Account Number</u> <u>Detail Description</u>	<u>Cost Center ID</u> <u>Detail Amount</u> <u>1099 Detail Amount</u> <u>Asset/Asset Tag</u> <u>In Full</u>			
10 2541 6361 000 1050 1 00000 cell phone	112.96	112.96	N	
Vendor ID: VERIZONWIR VERIZON WIRELESS	PO Number:	Invoice Number: 20240709-0001	Amount:	112.26
Description: CELL PHONE	Invoice Date: 07/09/2024	Due Date: 07/09/2024	Status: AP	1099 Amount: 112.26
Sequence: 1 Check Type: Automatic Payment Checking Account ID: 1	Check Number: 54249	Check Date: 07/09/2024	CC:	
<u>Chart of Account Number</u> <u>Detail Description</u>	<u>Cost Center ID</u> <u>Detail Amount</u> <u>1099 Detail Amount</u> <u>Asset/Asset Tag</u> <u>In Full</u>			
10 2541 6361 000 1050 1 00000 CELL PHONE	112.26	112.26	N	
Vendor ID: VERIZONWIR VERIZON WIRELESS	PO Number:	Invoice Number: 20240709-0002	Amount:	112.26
Description: CELL PHONE	Invoice Date: 07/09/2024	Due Date: 07/09/2024	Status: AP	1099 Amount: 112.26
Sequence: 1 Check Type: Automatic Payment Checking Account ID: 1	Check Number: 54252	Check Date: 07/09/2024	CC:	
<u>Chart of Account Number</u> <u>Detail Description</u>	<u>Cost Center ID</u> <u>Detail Amount</u> <u>1099 Detail Amount</u> <u>Asset/Asset Tag</u> <u>In Full</u>			
10 2541 6361 000 1050 1 00000 CELL PHONE	112.26	112.26	N	
Vendor ID: VILLAGEOFT VILLAGE OF THEODOSIA	PO Number:	Invoice Number: 1102	Amount:	92.32
Description: SEWER	Invoice Date: 01/19/2024	Due Date: 01/19/2024	Status: P	1099 Amount: 0.00
Sequence: 1 Check Type: Check Checking Account ID: 1	Check Number: 55423	Check Date: 01/22/2024	CC:	
<u>Chart of Account Number</u> <u>Detail Description</u>	<u>Cost Center ID</u> <u>Detail Amount</u> <u>1099 Detail Amount</u> <u>Asset/Asset Tag</u> <u>In Full</u>			
10 2541 6335 000 4020 1 00000 SEWER	92.32	N		
Vendor ID: VILLAGEOFT VILLAGE OF THEODOSIA	PO Number:	Invoice Number: 1102-1103-0001	Amount:	219.32
Description: SEWER	Invoice Date: 02/18/2024	Due Date: 02/18/2024	Status: P	1099 Amount: 0.00
Sequence: 1 Check Type: Check Checking Account ID: 1	Check Number: 55477	Check Date: 02/19/2024	CC:	
<u>Chart of Account Number</u> <u>Detail Description</u>	<u>Cost Center ID</u> <u>Detail Amount</u> <u>1099 Detail Amount</u> <u>Asset/Asset Tag</u> <u>In Full</u>			
10 2541 6335 000 1050 1 00000 SEWER	219.32	N		
Vendor ID: VILLAGEOFT VILLAGE OF THEODOSIA	PO Number:	Invoice Number: 1102-1103-0002	Amount:	126.32
Description: SEWER	Invoice Date: 03/18/2024	Due Date: 03/18/2024	Status: P	1099 Amount: 0.00
Sequence: 1 Check Type: Check Checking Account ID: 1	Check Number: 55539	Check Date: 03/18/2024	CC:	
<u>Chart of Account Number</u> <u>Detail Description</u>	<u>Cost Center ID</u> <u>Detail Amount</u> <u>1099 Detail Amount</u> <u>Asset/Asset Tag</u> <u>In Full</u>			
10 2541 6335 000 1050 1 00000 SEWER	126.32	0.00	N	
Vendor ID: WALMARTCOM WALMART CAPITAL ONE	PO Number:	Invoice Number: 20240218	Amount:	619.17
Description: STUDENT HOLIDAY SUPPLIES	Invoice Date: 02/18/2024	Due Date: 02/18/2024	Status: AP	1099 Amount: 0.00
Sequence: 1 Check Type: Automatic Payment Checking Account ID: 1	Check Number: 54197	Check Date: 02/18/2024	CC:	
<u>Chart of Account Number</u> <u>Detail Description</u>	<u>Cost Center ID</u> <u>Detail Amount</u> <u>1099 Detail Amount</u> <u>Asset/Asset Tag</u> <u>In Full</u>			
60 1411 6411 043 1050 1 00000 STUDENT HOLILDAY SUPPLIES	619.17	N		
Vendor ID: WALMARTCOM WALMART CAPITAL ONE	PO Number:	Invoice Number: 20240312-0004	Amount:	479.54
Description: HOLIDAY INCENTIVES	Invoice Date: 01/01/2024	Due Date: 01/31/2024	Status: AP	1099 Amount: 0.00
Sequence: 1 Check Type: Automatic Payment Checking Account ID: 1	Check Number: 54207	Check Date: 01/31/2024	CC:	
<u>Chart of Account Number</u> <u>Detail Description</u>	<u>Cost Center ID</u> <u>Detail Amount</u> <u>1099 Detail Amount</u> <u>Asset/Asset Tag</u> <u>In Full</u>			

60 1411 6411 043 1050 1 00000 HOLIDAY INCENTIVES

479.54

N

Vendor ID: WALMARTCOM WALMART CAPITAL ONE

PO Number: **Invoice Number: 20240317** **Amount: 464.39**

Description: FS/CONCESSIONS/ MATH CLUB

Invoice Date: 03/17/2024 Due Date: 03/17/2024 Status: AP 1099 Amount: 0.00

Sequence: 1 Check Type: Automatic Payment Checking Account ID: 1

Check Number: 54208 Check Date: 03/17/2024 CC:

Chart of Account Number Detail Description

Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag In Full

10 2562 6471 000 0000 1 00000

FOOD

29.64

N

60 1411 6411 103 1050 1 00000

SPIRIT WEEK

90.95

N

10 1491 6411 000 1050 1 00000

CONCESSIONS

141.84

N

10 3911 6411 000 4020 1 00000

TITLE NIGHT

146.88

N

60 1411 6411 045 1050 1 00000

PI DAY

55.08

N

Vendor ID: WALMARTCOM WALMART CAPITAL ONE

PO Number: **Invoice Number: 20240709** **Amount: 804.07**

Description: SUPPLIES

Invoice Date: 07/09/2024 Due Date: 07/09/2024 Status: AP 1099 Amount: 0.00

Sequence: 1 Check Type: Automatic Payment Checking Account ID: 1

Check Number: 54254 Check Date: 07/09/2024 CC:

Chart of Account Number Detail Description

Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag In Full

10 1111 6411 000 4020 1 00000

SUPPLIES

804.07

N

Vendor ID: WASTECONN WASTE CONNECTIONS OF ARKANSAS/METHVIN

PO Number: **Invoice Number: 3222-6679-0004** **Amount: 588.30**

Description: TRASH SERVICES

Invoice Date: 01/15/2024 Due Date: 01/15/2024 Status: P 1099 Amount: 0.00

Sequence: 1 Check Type: Check Checking Account ID: 1

Check Number: 55424 Check Date: 01/22/2024 CC:

Chart of Account Number Detail Description

Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag In Full

10 2541 6336 000 1050 1 00000

TRASH SERVICES

588.30

0.00 N

Vendor ID: WASTECONN WASTE CONNECTIONS OF ARKANSAS/METHVIN

PO Number: **Invoice Number: 3222-6679-0005** **Amount: 992.24**

Description: TRASH SERVICES

Invoice Date: 02/15/2024 Due Date: 02/15/2024 Status: P 1099 Amount: 0.00

Sequence: 1 Check Type: Check Checking Account ID: 1

Check Number: 55478 Check Date: 02/19/2024 CC:

Chart of Account Number Detail Description

Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag In Full

10 2541 6336 000 1050 1 00000

TRASH SERVICES

992.24

0.00 N

Vendor ID: WASTECONN WASTE CONNECTIONS OF ARKANSAS/METHVIN

PO Number: **Invoice Number: 3222-6679-0006** **Amount: 549.38**

Description: TRASH SERVICES

Invoice Date: 03/15/2024 Due Date: 03/15/2024 Status: P 1099 Amount: 0.00

Sequence: 1 Check Type: Check Checking Account ID: 1

Check Number: 55540 Check Date: 03/18/2024 CC:

Chart of Account Number Detail Description

Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag In Full

10 2541 6336 000 1050 1 00000

TRASH SERVICES

549.38

0.00 N

Vendor ID: WESTPLAIN4 WEST PLAINS PROPANE

PO Number: **Invoice Number: LUTIE-0005** **Amount: 2,416.86**

Description: PROPANE

Invoice Date: 01/18/2024 Due Date: 01/18/2024 Status: P 1099 Amount: 0.00

Sequence: 1 Check Type: Check Checking Account ID: 1

Check Number: 55425 Check Date: 01/22/2024 CC:

Chart of Account Number Detail Description

Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag In Full

10 2541 6483 000 1050 1 00000

PROPANE

350.60

0.00 N

10 2552 6412 000 0000 1 00000

FUEL

2,066.26

0.00 N

Vendor ID: WESTPLAIN4 WEST PLAINS PROPANE

PO Number: **Invoice Number: LUTIE-0006** **Amount: 3,094.47**

Description: PROPANE

Invoice Date: 02/18/2024 Due Date: 02/18/2024 Status: P 1099 Amount: 0.00

Invoice Listing - Detail
Quarter 1 Invoices 2024

Sequence: 1	Check Type: Check	Checking Account ID: 1	Check Number: 55479	Check Date: 02/19/2024	CC:	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
10 2541 6483 000 1050 1 00000	PROPANE		1,466.83	0.00	N	
10 2552 6412 000 0000 1 00000	FUEL		1,627.64	0.00	N	
Vendor ID: WESTPLAIN4	WEST PLAINS PROPANE	PO Number:	Invoice Number: LUTIE-0007	Amount:	1,931.44	
Description: PROPANE		Invoice Date: 03/18/2024	Due Date: 03/18/2024	Status: P	1099 Amount: 0.00	
Sequence: 1	Check Type: Check	Checking Account ID: 1	Check Number: 55541	Check Date: 03/18/2024	CC:	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
10 2552 6412 000 0000 1 00000	FUEL		1,931.44	0.00	N	
Vendor ID: LAURENWEY	WEYRAUCH, LAUREN	PO Number:	Invoice Number: 20240216	Amount:	407.43	
Description: Reimbursement		Invoice Date: 02/16/2024	Due Date: 02/19/2024	Status: P	1099 Amount: 0.00	
Sequence: 1	Check Type: Check	Checking Account ID: 1	Check Number: 55480	Check Date: 02/19/2024	CC:	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
10 1111 6411 000 4020 1 00000	Art Supplies		19.16		N	
10 1251 6312 000 4020 1 00000	PD		347.17		N	
10 1251 6312 000 4020 1 00000	PD		41.10		N	
Vendor ID: LAURENWEY	WEYRAUCH, LAUREN	PO Number:	Invoice Number: 20240317	Amount:	81.02	
Description: MINI CHEER SUPPLIES		Invoice Date: 03/17/2024	Due Date: 03/17/2024	Status: P	1099 Amount: 0.00	
Sequence: 1	Check Type: Check	Checking Account ID: 1	Check Number: 55542	Check Date: 03/18/2024	CC:	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
60 1411 6411 084 1050 1 00000	SUPPLY REIMBURSEMENT		81.02		N	
Vendor ID: WHIDDONSAI	WHIDDONS AIR	PO Number:	Invoice Number: 14880	Amount:	353.55	
Description: OFFICE HEATER REPAIR		Invoice Date: 01/19/2024	Due Date: 01/19/2024	Status: P	1099 Amount: 0.00	
Sequence: 1	Check Type: Check	Checking Account ID: 1	Check Number: 55426	Check Date: 01/22/2024	CC:	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
10 2541 6391 000 4020 1 00000	OFFICE HEATER REPAIR		353.55		N	
Vendor ID: WRVECINC	WRVEC INC	PO Number:	Invoice Number: 20240317	Amount:	3,448.46	
Description: ELECTRIC		Invoice Date: 03/17/2024	Due Date: 03/17/2024	Status: AP	1099 Amount: 0.00	
Sequence: 1	Check Type: Automatic Payment	Checking Account ID: 1	Check Number: 54209	Check Date: 03/17/2024	CC:	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
10 2541 6481 000 4020 1 00000	ELECTRIC		3,448.46		N	
Vendor ID: WRVECINC	WRVEC INC	PO Number:	Invoice Number: MAY 9363-0009	Amount:	3,166.14	
Description: ELECTRIC		Invoice Date: 01/17/2024	Due Date: 01/17/2024	Status: AP	1099 Amount: 0.00	
Sequence: 1	Check Type: Automatic Payment	Checking Account ID: 1	Check Number: 54189	Check Date: 01/17/2024	CC:	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
10 2541 6481 000 1050 1 00000	ELECTRIC		3,166.14	0.00	N	
Vendor ID: WRVECINC	WRVEC INC	PO Number:	Invoice Number: MAY 9363-0010	Amount:	4,299.29	
Description: ELECTRIC		Invoice Date: 02/17/2024	Due Date: 02/17/2024	Status: AP	1099 Amount: 0.00	

Invoice Listing - Detail
Quarter 1 Invoices 2024

Sequence: 1	Check Type: Automatic Payment	Checking Account ID: 1	Check Number: 54193	Check Date: 02/17/2024	CC:	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
10 2541 6481 000 1050 1 00000	ELECTRIC		4,299.29		0.00 N	
Vendor ID: ZEPTIVE		ZEPTIVE INC		PO Number:	Invoice Number: 20240119	Amount: 2,194.00
Description: VAPE DETECTOR		Invoice Date: 01/19/2024	Due Date: 01/19/2024	Status: P	1099 Amount: 0.00	
Sequence: 1	Check Type: Check	Checking Account ID: 1	Check Number: 55427	Check Date: 01/22/2024	CC:	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
10 2411 6411 000 1050 4 42200	VAPE DETECTOR		2,194.00		N	
Report 1099 Total:			19,385.29		Report Total:	184,593.07