

VENDOR I.D.	NAME	STATUS	CHECK DATE	AMOUNT	DISCOUNT	CHECK NO	CHECK STATUS	CHECK AMOUNT
C-CHECK	VOID CHECK	V	5/30/2025			070852		
C-CHECK	VOID CHECK	V	5/29/2025			070855		
C-CHECK	VOID CHECK	V	6/02/2025			070862		
C-CHECK	VOID CHECK	V	6/02/2025			070863		
C-CHECK	VOID CHECK	V	6/02/2025			070864		
C-CHECK	VOID CHECK	V	6/02/2025			070865		
C-CHECK	VOID CHECK	V	6/02/2025			070867		
C-CHECK	VOID CHECK	V	6/02/2025			070868		
C-CHECK	VOID CHECK	V	6/02/2025			070870		
C-CHECK	VOID CHECK	V	6/02/2025			070871		
C-CHECK	VOID CHECK	V	6/02/2025			070872		
C-CHECK	VOID CHECK	V	6/02/2025			070873		
C-CHECK	VOID CHECK	V	6/02/2025			070874		

* * T O T A L S * *	NO	INVOICE AMOUNT	DISCOUNTS	CHECK AMOUNT
REGULAR CHECKS:	0	0.00	0.00	0.00
HAND CHECKS:	0	0.00	0.00	0.00
DRAFTS:	0	0.00	0.00	0.00
EFT:	0	0.00	0.00	0.00
NON CHECKS:	0	0.00	0.00	0.00

VOID CHECKS:	13 VOID DEBITS	0.00		
	VOID CREDITS	0.00	0.00	0.00

TOTAL ERRORS: 0

VENDOR SET: 01	BANK: *	TOTALS:	NO	INVOICE AMOUNT	DISCOUNTS	CHECK AMOUNT
			13	0.00	0.00	0.00
BANK: *		TOTALS:	13	0.00	0.00	0.00

VENDOR I.D.	NAME	STATUS	CHECK DATE	AMOUNT	DISCOUNT	CHECK NO	CHECK STATUS	CHECK AMOUNT
029510	AFSCME DISTRICT COUNCIL 57							
I-72 202505271359	AFSCME UNION DUES	R	5/30/2025			070849		
010 2050	Union Dues Payable			104.66				
012 2050	Union Dues Payable			86.14				
013 2050	Union Dues Payable			79.47				
014 2050	Union Dues Payable			59.42				329.69
07550	POSTMASTER							
I-6/25 UTILITIES	6/25 UTILITIES	R	5/28/2025			070850		
012 5-1200-5327	Postage	WATER		737.32				
013 5-1300-5327	Postage	SEWER		737.32				1,474.64
19970	AFLAC							
I-58 202504291353	AFLAC (ACCOUNT # EMG85)	R	5/30/2025			070851		
010 2055	Aflac Payable			190.43				
012 2055	Aflac Payable			47.78				
013 2055	Aflac Payable			54.10				
014 2055	Aflac Payable			19.06				
I-58 202505121356	AFLAC (ACCOUNT # EMG85)	R	5/30/2025			070851		
010 2055	Aflac Payable			188.12				
012 2055	Aflac Payable			48.52				
013 2055	Aflac Payable			54.85				
014 2055	Aflac Payable			19.88				
I-58 202505271359	AFLAC (ACCOUNT # EMG85)	R	5/30/2025			070851		
010 2055	Aflac Payable			189.63				
012 2055	Aflac Payable			48.02				
013 2055	Aflac Payable			54.36				
014 2055	Aflac Payable			19.36				
I-59 202504291353	AFLAC SUPPLEMENTAL INSURANCE	R	5/30/2025			070851		
010 2055	Aflac Payable			78.05				
012 2055	Aflac Payable			27.60				
013 2055	Aflac Payable			26.22				
014 2055	Aflac Payable			10.78				
I-59 202505121356	AFLAC SUPPLEMENTAL INSURANCE	R	5/30/2025			070851		
010 2055	Aflac Payable			76.64				
012 2055	Aflac Payable			28.05				
013 2055	Aflac Payable			26.68				
014 2055	Aflac Payable			11.28				
I-59 202505271359	AFLAC SUPPLEMENTAL INSURANCE	R	5/30/2025			070851		
010 2055	Aflac Payable			77.59				
012 2055	Aflac Payable			27.74				
013 2055	Aflac Payable			26.37				
014 2055	Aflac Payable			10.95				1,362.06

VENDOR I.D.	NAME	STATUS	CHECK DATE	AMOUNT	DISCOUNT	CHECK NO	CHECK STATUS	CHECK AMOUNT
30515	HEALTHEQUITY, INC							
I-INV7872142	INVOICE # INV7872142	R	5/28/2025			070853		
010 2042	Employee FSA		INVOICE # INV7872142	12.32				
012 2042	Employee FSA		INVOICE # INV7872142	12.32				
013 2042	Employee FSA		INVOICE # INV7872142	12.32				
014 2042	Employee FSA		INVOICE # INV7872142	12.30				49.26
13445	CARD SERVICE CENTER, INC.							
I-4/7/25-5/7/25	4/7-5/7/25 CRDT CARD BILL	R	5/29/2025			070854		
010 5-1005-5333	Dues & Subscriptions		ANNUAL MEMBERSHP REN	195.00				
010 5-1005-5333	Dues & Subscriptions		CCAC ANNUAL MEMBER F	250.00				
010 5-1005-5335	Professional Development		MMC INSTITUTE SERIES	500.00				
010 5-1005-5335	Professional Development		COURSE-MMC DESIG- ME	75.00				
010 5-1005-5335	Professional Development		COURSE-MMC DESIG- ME	75.00				
010 5-1005-5301	Office Supplies		BOTTLED WTR- CONCIL	49.88				
010 5-1005-5301	Office Supplies		3 PLANNERS	73.97				
010 5-1005-5335	Professional Development		5/23/25 WRKSHP- MENC	75.00				
010 5-1005-5335	Professional Development		5/22/25 WRKSHP- MENC	100.00				
010 5-1005-5331	Travel, Lodging & Meals		5/22-5/23 HOTEL- MEC	130.34				
010 5-1005-5335	Professional Development		BOOK- 5/22/25- MENCH	14.89				
010 5-1005-5327	Postage		CERTIFIED MAIL FEES	9.68				
010 5-1005-5323	Communications		MONTHLY ZOOM BILL	100.00				
010 5-1005-5333	Dues & Subscriptions		SAM REG RENEWAL	399.00				
010 5-1005-5301	Office Supplies		LOCK BOX- DOCUMENTS	79.37				
013 5-1300-5303	Operating Supplies		PAPER TOWLES/ ZIPLOC	113.69				
013 5-1300-5337	Licenses and Permits		WWTP PERMIT FEES	648.56				
013 5-1300-5335	Professional Development		CRWA EXPO- HTL- T WR	500.36				
013 5-1300-5335	Professional Development		CRWA EXPO- HTL- M. R	418.56				
010 5-1035-5351	Community Promotion		LIVE OAK CLNP DAY CO	44.00				
010 5-1035-5351	Community Promotion		2 RIBBONS- GRAND OPE	21.86				
010 5-1035-5351	Community Promotion		2 FOAM TRIFOLD	11.80				
010 5-1035-5381	Snack Bar		4/11/25 SNACKBAR ITE	147.72				
010 5-1040-5311	Repair & Maintenance		4 GASKETS	33.08				
010 5-1035-5351	Community Promotion		ORGANIZER PRMT- FOOD	118.00				
010 5-1035-5399	Other Youth Programs		PIZZA- FIREFIGHTER C	28.49				
010 5-1035-5371	Youth Soccer		SOCCER REF PIZZA PAR	122.61				
010 5-1032-5309	Safety Items		CB- HOOD CLEAN AND F	485.00				
010 5-1035-5351	Community Promotion		STAFF LUNCH- FOOD FE	64.89				
010 5-1035-5351	Community Promotion		TABLE COVERS	12.87				
010 5-1040-5303	Operating Supplies		POOL MESH	482.40				
010 5-1035-5380	Skate Park Events		JAM SESH- SKATEPARK-	184.98				
010 5-1005-5333	Dues & Subscriptions		SHRM MEMNERHSP - AUT	299.00				
010 5-1035-5399	Other Youth Programs		SKATE PRK- JAM SESH-	61.00				
010 5-1035-5399	Other Youth Programs		SKATE PRK- JAM SESH-	191.83				
010 5-1005-5301	Office Supplies		OFFICE SUPPLIES	21.43				
012 5-1200-5301	Office Supplies		OFFICE SUPPLIES	21.43				
013 5-1300-5301	Office Supplies		OFFICE SUPPLIES	21.43				
014 5-1400-5301	Office Supplies		OFFICE SUPPLIES	21.42				

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13445	CARD SERVICE CENTER, ICONT							
I-4/7/25-5/7/25	4/7-5/7/25 CRDT CARD BILL	R	5/29/2025			070854		
010 5-1030-5702	Capital Outlay & Equipment	TRAILER		8,618.79				
010 5-1040-5309	Safety Items	LIFEGUARD FANNY PACK		67.56				14,889.89
29780	CINTAS CORPORATION NO. 2							
I-5239626209	FIRST AID ITEMS CORPYARD	R	5/29/2025			070856		
010 5-1030-5309	Safety Items	FIRST AID ITEMS CORP		30.40				
014 5-1400-5309	Safety Items	FIRST AID ITEMS CORP		30.39				
I-5244275501	FIRST AID ITEMS CORPYARD	R	5/29/2025			070856		
010 5-1030-5309	Safety Items	FIRST AID ITEMS CORP		14.14				
014 5-1400-5309	Safety Items	FIRST AID ITEMS CORP		14.13				
I-5248089801	FIRST AID ITEMS CORPYARD	R	5/29/2025			070856		
010 5-1030-5309	Safety Items	FIRST AID ITEMS CORP		14.02				
014 5-1400-5309	Safety Items	FIRST AID ITEMS CORP		14.02				
I-5252804501	FIRST AID ITEMS CORPYARD	R	5/29/2025			070856		
010 5-1030-5309	Safety Items	FIRST AID ITEMS CORP		55.41				
014 5-1400-5309	Safety Items	FIRST AID ITEMS CORP		55.40				
I-5257887401	FIRST AID ITEMS CORPYARD	R	5/29/2025			070856		
010 5-1030-5309	Safety Items	FIRST AID ITEMS CORP		51.42				
014 5-1400-5309	Safety Items	FIRST AID ITEMS CORP		51.41				
I-5262629104	FIRST AID ITEMS CORPYARD	R	5/29/2025			070856		
010 5-1030-5309	Safety Items	FIRST AID ITEMS CORP		103.08				
014 5-1400-5309	Safety Items	FIRST AID ITEMS CORP		103.07				
I-5267851809	FIRST AID ITEMS CORPYARD	R	5/29/2025			070856		
010 5-1030-5309	Safety Items	FIRST AID ITEMS CORP		49.69				
014 5-1400-5309	Safety Items	FIRST AID ITEMS CORP		49.68				636.26
16805	PACIFIC ECORISK, INC.							
I-20599	LAB TESTING-WWTP	R	5/29/2025			070857		
013 5-1300-5341	Professional Services	LAB TESTING-WWTP		3,094.58				3,094.58
28790	PURCHASE POWER							
I-8000-9090-10-5/25	5/9/25 POSTAGE REFILL	R	5/29/2025			070858		
010 5-1005-5327	Postage	5/9/25 POSTAGE REFIL		166.67				
012 5-1200-5327	Postage	5/9/25 POSTAGE REFIL		166.67				
013 5-1300-5327	Postage	5/9/25 POSTAGE REFIL		166.66				
I-8000-9090-10-5/25A	POSTAGE OVR CHRGE MAY 2025	R	5/29/2025			070858		
010 5-1005-5327	Postage	POSTAGE OVR CHRGE MA		0.75				
012 5-1200-5327	Postage	POSTAGE OVR CHRGE MA		0.75				
013 5-1300-5327	Postage	POSTAGE OVR CHRGE MA		0.75				502.25
09080	STAPLES BUSINESS ADVANTAGE							
I-6030215070	YELLOW PAPER	R	5/29/2025			070859		
010 5-1005-5301	Office Supplies	YELLOW PAPER		22.57				
012 5-1200-5301	Office Supplies	YELLOW PAPER		22.57				
013 5-1300-5301	Office Supplies	YELLOW PAPER		22.57				
014 5-1400-5301	Office Supplies	YELLOW PAPER		22.57				90.28

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09380	SUTTER COUNTY ENVIRONMENTAL HE							
I-INV-2350	PUBLIC POOL FEES	R	5/29/2025			070860		
010 5-1040-5337	Licenses and Permits	PUBLIC POOL FEES		604.00				
I-INV-2371	PUBLIC POOL ADDITONAL FEE	R	5/29/2025			070860		
010 5-1040-5337	Licenses and Permits	PUBLIC POOL ADDITONA		302.00				906.00
21140	SPECIAL DISTRICT RISK MANAGEME							
I-26 202504291353	VSP MEMBER NUMBER 0007716	R	6/02/2025			070861		
010 5-1005-5029	Vision Insurance	VSP MEMBER NUMBER 00		0.15				
010 5-1010-5029	Vision Insurance	VSP MEMBER NUMBER 00		3.81				
010 5-1015-5029	Vision Insurance	VSP MEMBER NUMBER 00		3.81				
010 5-1030-5029	Vision Insurance	VSP MEMBER NUMBER 00		1.20				
010 5-1030-5029	Vision Insurance	VSP MEMBER NUMBER 00		0.25				
010 5-1030-5029	Vision Insurance	VSP MEMBER NUMBER 00		0.46				
010 5-1032-5029	Vision Insurance	VSP MEMBER NUMBER 00		0.02				
010 5-1032-5029	Vision Insurance	VSP MEMBER NUMBER 00		0.13				
010 5-1032-5029	Vision Insurance	VSP MEMBER NUMBER 00		0.03				
010 5-1035-5029	Vision Insurance	VSP MEMBER NUMBER 00		0.03				
010 5-1035-5029	Vision Insurance	VSP MEMBER NUMBER 00		0.27				
010 5-1035-5029	Vision Insurance	VSP MEMBER NUMBER 00		0.06				
012 5-1200-5029	Vision Insurance	VSP MEMBER NUMBER 00		5.06				
012 5-1200-5029	Vision Insurance	VSP MEMBER NUMBER 00		1.18				
012 5-1200-5029	Vision Insurance	VSP MEMBER NUMBER 00		0.66				
013 5-1300-5029	Vision Insurance	VSP MEMBER NUMBER 00		4.38				
013 5-1300-5029	Vision Insurance	VSP MEMBER NUMBER 00		1.58				
013 5-1300-5029	Vision Insurance	VSP MEMBER NUMBER 00		0.74				
014 5-1400-5029	Vision Insurance	VSP MEMBER NUMBER 00		2.14				
014 5-1400-5029	Vision Insurance	VSP MEMBER NUMBER 00		0.25				
014 5-1400-5029	Vision Insurance	VSP MEMBER NUMBER 00		0.46				
I-26 202505121356	VSP MEMBER NUMBER 0007716	R	6/02/2025			070861		
010 5-1005-5029	Vision Insurance	VSP MEMBER NUMBER 00		0.20				
010 5-1010-5029	Vision Insurance	VSP MEMBER NUMBER 00		3.81				
010 5-1015-5029	Vision Insurance	VSP MEMBER NUMBER 00		3.81				
010 5-1030-5029	Vision Insurance	VSP MEMBER NUMBER 00		1.13				
010 5-1030-5029	Vision Insurance	VSP MEMBER NUMBER 00		0.31				
010 5-1030-5029	Vision Insurance	VSP MEMBER NUMBER 00		0.46				
010 5-1032-5029	Vision Insurance	VSP MEMBER NUMBER 00		0.15				
010 5-1032-5029	Vision Insurance	VSP MEMBER NUMBER 00		0.03				
010 5-1035-5029	Vision Insurance	VSP MEMBER NUMBER 00		0.29				
010 5-1035-5029	Vision Insurance	VSP MEMBER NUMBER 00		0.07				
012 5-1200-5029	Vision Insurance	VSP MEMBER NUMBER 00		4.85				
012 5-1200-5029	Vision Insurance	VSP MEMBER NUMBER 00		1.33				
012 5-1200-5029	Vision Insurance	VSP MEMBER NUMBER 00		0.70				
013 5-1300-5029	Vision Insurance	VSP MEMBER NUMBER 00		4.10				
013 5-1300-5029	Vision Insurance	VSP MEMBER NUMBER 00		1.77				
013 5-1300-5029	Vision Insurance	VSP MEMBER NUMBER 00		0.80				
014 5-1400-5029	Vision Insurance	VSP MEMBER NUMBER 00		2.09				
014 5-1400-5029	Vision Insurance	VSP MEMBER NUMBER 00		0.31				

VENDOR I.D.	NAME	STATUS	CHECK DATE	AMOUNT	DISCOUNT	CHECK NO	CHECK STATUS	CHECK AMOUNT
21140	SPECIAL DISTRICT RISK CONT							
I-26 202505121356	VSP MEMBER NUMBER 0007716	R	6/02/2025			070861		
014 5-1400-5029	Vision Insurance	VSP MEMBER NUMBER 00		0.46				
I-27 202504291353	VSP MEMBER NUMBER 0007716	R	6/02/2025			070861		
010 5-1005-5029	Vision Insurance	VSP MEMBER NUMBER 00		2.23				
010 5-1030-5029	Vision Insurance	VSP MEMBER NUMBER 00		0.82				
010 5-1030-5029	Vision Insurance	VSP MEMBER NUMBER 00		0.33				
010 5-1030-5029	Vision Insurance	VSP MEMBER NUMBER 00		0.74				
010 5-1030-5029	Vision Insurance	VSP MEMBER NUMBER 00		1.17				
010 5-1030-5029	Vision Insurance	VSP MEMBER NUMBER 00		0.65				
010 5-1032-5029	Vision Insurance	VSP MEMBER NUMBER 00		0.37				
010 5-1035-5029	Vision Insurance	VSP MEMBER NUMBER 00		0.75				
012 5-1200-5029	Vision Insurance	VSP MEMBER NUMBER 00		5.66				
012 5-1200-5029	Vision Insurance	VSP MEMBER NUMBER 00		0.33				
012 5-1200-5029	Vision Insurance	VSP MEMBER NUMBER 00		0.74				
012 5-1200-5029	Vision Insurance	VSP MEMBER NUMBER 00		1.17				
012 5-1200-5029	Vision Insurance	VSP MEMBER NUMBER 00		0.65				
013 5-1300-5029	Vision Insurance	VSP MEMBER NUMBER 00		7.47				
013 5-1300-5029	Vision Insurance	VSP MEMBER NUMBER 00		0.33				
013 5-1300-5029	Vision Insurance	VSP MEMBER NUMBER 00		0.74				
013 5-1300-5029	Vision Insurance	VSP MEMBER NUMBER 00		1.17				
013 5-1300-5029	Vision Insurance	VSP MEMBER NUMBER 00		0.65				
014 5-1400-5029	Vision Insurance	VSP MEMBER NUMBER 00		0.82				
014 5-1400-5029	Vision Insurance	VSP MEMBER NUMBER 00		0.33				
014 5-1400-5029	Vision Insurance	VSP MEMBER NUMBER 00		0.74				
014 5-1400-5029	Vision Insurance	VSP MEMBER NUMBER 00		1.17				
014 5-1400-5029	Vision Insurance	VSP MEMBER NUMBER 00		0.65				
I-27 202505121356	VSP MEMBER NUMBER 0007716	R	6/02/2025			070861		
010 5-1005-5029	Vision Insurance	VSP MEMBER NUMBER 00		2.23				
010 5-1030-5029	Vision Insurance	VSP MEMBER NUMBER 00		2.05				
010 5-1030-5029	Vision Insurance	VSP MEMBER NUMBER 00		0.63				
010 5-1030-5029	Vision Insurance	VSP MEMBER NUMBER 00		1.01				
010 5-1032-5029	Vision Insurance	VSP MEMBER NUMBER 00		0.37				
010 5-1035-5029	Vision Insurance	VSP MEMBER NUMBER 00		0.74				
012 5-1200-5029	Vision Insurance	VSP MEMBER NUMBER 00		6.88				
012 5-1200-5029	Vision Insurance	VSP MEMBER NUMBER 00		0.63				
012 5-1200-5029	Vision Insurance	VSP MEMBER NUMBER 00		1.01				
013 5-1300-5029	Vision Insurance	VSP MEMBER NUMBER 00		8.72				
013 5-1300-5029	Vision Insurance	VSP MEMBER NUMBER 00		0.63				
013 5-1300-5029	Vision Insurance	VSP MEMBER NUMBER 00		1.01				
014 5-1400-5029	Vision Insurance	VSP MEMBER NUMBER 00		2.07				
014 5-1400-5029	Vision Insurance	VSP MEMBER NUMBER 00		0.63				
014 5-1400-5029	Vision Insurance	VSP MEMBER NUMBER 00		1.07				
I-28 202504291353	VSP MEMBER NUMBER 0007716	R	6/02/2025			070861		
010 5-1005-5029	Vision Insurance	VSP MEMBER NUMBER 00		5.88				
010 5-1010-5029	Vision Insurance	VSP MEMBER NUMBER 00		1.18				
010 5-1015-5029	Vision Insurance	VSP MEMBER NUMBER 00		3.52				
010 5-1030-5029	Vision Insurance	VSP MEMBER NUMBER 00		18.22				

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21140	SPECIAL DISTRICT RISK CONT							
I-28 202504291353	VSP MEMBER NUMBER 0007716	R	6/02/2025			070861		
010 5-1030-5029	Vision Insurance	VSP MEMBER NUMBER 00		2.28				
010 5-1030-5029	Vision Insurance	VSP MEMBER NUMBER 00		3.45				
010 5-1030-5029	Vision Insurance	VSP MEMBER NUMBER 00		2.47				
010 5-1035-5029	Vision Insurance	VSP MEMBER NUMBER 00		21.15				
010 5-1040-5029	Vision Insurance	VSP MEMBER NUMBER 00		4.67				
012 5-1200-5029	Vision Insurance	VSP MEMBER NUMBER 00		13.51				
012 5-1200-5029	Vision Insurance	VSP MEMBER NUMBER 00		2.28				
012 5-1200-5029	Vision Insurance	VSP MEMBER NUMBER 00		3.45				
012 5-1200-5029	Vision Insurance	VSP MEMBER NUMBER 00		2.47				
013 5-1300-5029	Vision Insurance	VSP MEMBER NUMBER 00		14.69				
013 5-1300-5029	Vision Insurance	VSP MEMBER NUMBER 00		2.28				
013 5-1300-5029	Vision Insurance	VSP MEMBER NUMBER 00		3.45				
013 5-1300-5029	Vision Insurance	VSP MEMBER NUMBER 00		2.47				
014 5-1400-5029	Vision Insurance	VSP MEMBER NUMBER 00		1.78				
014 5-1400-5029	Vision Insurance	VSP MEMBER NUMBER 00		2.28				
014 5-1400-5029	Vision Insurance	VSP MEMBER NUMBER 00		3.45				
014 5-1400-5029	Vision Insurance	VSP MEMBER NUMBER 00		2.47				
I-28 202505121356	VSP MEMBER NUMBER 0007716	R	6/02/2025			070861		
010 5-1005-5029	Vision Insurance	VSP MEMBER NUMBER 00		5.87				
010 5-1010-5029	Vision Insurance	VSP MEMBER NUMBER 00		1.17				
010 5-1015-5029	Vision Insurance	VSP MEMBER NUMBER 00		3.52				
010 5-1030-5029	Vision Insurance	VSP MEMBER NUMBER 00		17.03				
010 5-1030-5029	Vision Insurance	VSP MEMBER NUMBER 00		1.33				
010 5-1030-5029	Vision Insurance	VSP MEMBER NUMBER 00		4.43				
010 5-1030-5029	Vision Insurance	VSP MEMBER NUMBER 00		2.47				
010 5-1035-5029	Vision Insurance	VSP MEMBER NUMBER 00		21.13				
010 5-1040-5029	Vision Insurance	VSP MEMBER NUMBER 00		4.69				
012 5-1200-5029	Vision Insurance	VSP MEMBER NUMBER 00		13.86				
012 5-1200-5029	Vision Insurance	VSP MEMBER NUMBER 00		1.33				
012 5-1200-5029	Vision Insurance	VSP MEMBER NUMBER 00		4.43				
012 5-1200-5029	Vision Insurance	VSP MEMBER NUMBER 00		2.47				
013 5-1300-5029	Vision Insurance	VSP MEMBER NUMBER 00		15.04				
013 5-1300-5029	Vision Insurance	VSP MEMBER NUMBER 00		1.33				
013 5-1300-5029	Vision Insurance	VSP MEMBER NUMBER 00		4.43				
013 5-1300-5029	Vision Insurance	VSP MEMBER NUMBER 00		2.47				
014 5-1400-5029	Vision Insurance	VSP MEMBER NUMBER 00		2.19				
014 5-1400-5029	Vision Insurance	VSP MEMBER NUMBER 00		1.33				
014 5-1400-5029	Vision Insurance	VSP MEMBER NUMBER 00		4.41				
014 5-1400-5029	Vision Insurance	VSP MEMBER NUMBER 00		2.47				
I-44 202504291353	VSP MEMBER NUMBER 0007716	R	6/02/2025			070861		
010 5-1000-5029	Vision Insurance	VSP MEMBER NUMBER 00		6.10				
012 5-1200-5029	Vision Insurance	VSP MEMBER NUMBER 00		0.76				
013 5-1300-5029	Vision Insurance	VSP MEMBER NUMBER 00		0.76				
I-53 202504291353	VSP MEMBER NUMBER 0007716	R	6/02/2025			070861		
010 5-1000-5029	Vision Insurance	VSP MEMBER NUMBER 00		26.70				
012 5-1200-5029	Vision Insurance	VSP MEMBER NUMBER 00		1.49				

VENDOR I.D.	NAME	STATUS	CHECK DATE	AMOUNT	DISCOUNT	CHECK NO	CHECK STATUS	CHECK AMOUNT
21140	SPECIAL DISTRICT RISK CONT							
I-53 202504291353	VSP MEMBER NUMBER 0007716	R	6/02/2025			070861		
013 5-1300-5029	Vision Insurance	VSP MEMBER NUMBER 00		1.47				
I-54 202504291353	VSP MEMBER NUMBER 0007716	R	6/02/2025			070861		
010 5-1000-5029	Vision Insurance	VSP MEMBER NUMBER 00		23.48				
I-6/25 ADJUSTMENTS	SPECIAL DISTRICT RISK MANAGEME	R	6/02/2025			070861		
010 5-1005-5029	Vision Insurance	6/25 ADJUSTMENTS		0.01CR				
010 5-1010-5029	Vision Insurance	6/25 ADJUSTMENTS		0.01CR				
013 5-1300-5029	Vision Insurance	6/25 ADJUSTMENTS		0.01CR				
014 5-1400-5029	Vision Insurance	6/25 ADJUSTMENTS		14.82				423.05
22205	CSAC EXCESS INSURANCE AUTHORIT							
I-29 202504291353	POLICY # 316407, ACCT # 168	R	6/02/2025			070866		
010 5-1005-5031	Life Insurance	POLICY # 316407, ACC		5.65				
010 5-1010-5031	Life Insurance	POLICY # 316407, ACC		7.42				
010 5-1015-5031	Life Insurance	POLICY # 316407, ACC		8.77				
010 5-1030-5031	Life Insurance	POLICY # 316407, ACC		13.34				
010 5-1030-5031	Life Insurance	POLICY # 316407, ACC		2.05				
010 5-1030-5031	Life Insurance	POLICY # 316407, ACC		0.67				
010 5-1030-5031	Life Insurance	POLICY # 316407, ACC		3.88				
010 5-1030-5031	Life Insurance	POLICY # 316407, ACC		2.01				
010 5-1032-5031	Life Insurance	POLICY # 316407, ACC		0.36				
010 5-1032-5031	Life Insurance	POLICY # 316407, ACC		0.24				
010 5-1032-5031	Life Insurance	POLICY # 316407, ACC		0.05				
010 5-1035-5031	Life Insurance	POLICY # 316407, ACC		12.91				
010 5-1035-5031	Life Insurance	POLICY # 316407, ACC		0.47				
010 5-1035-5031	Life Insurance	POLICY # 316407, ACC		0.10				
010 5-1040-5031	Life Insurance	POLICY # 316407, ACC		2.69				
012 5-1200-5031	Life Insurance	POLICY # 316407, ACC		21.87				
012 5-1200-5031	Life Insurance	POLICY # 316407, ACC		3.70				
012 5-1200-5031	Life Insurance	POLICY # 316407, ACC		0.67				
012 5-1200-5031	Life Insurance	POLICY # 316407, ACC		4.23				
012 5-1200-5031	Life Insurance	POLICY # 316407, ACC		2.01				
013 5-1300-5031	Life Insurance	POLICY # 316407, ACC		23.04				
013 5-1300-5031	Life Insurance	POLICY # 316407, ACC		4.40				
013 5-1300-5031	Life Insurance	POLICY # 316407, ACC		0.67				
013 5-1300-5031	Life Insurance	POLICY # 316407, ACC		4.38				
013 5-1300-5031	Life Insurance	POLICY # 316407, ACC		2.01				
014 5-1400-5031	Life Insurance	POLICY # 316407, ACC		5.55				
014 5-1400-5031	Life Insurance	POLICY # 316407, ACC		2.05				
014 5-1400-5031	Life Insurance	POLICY # 316407, ACC		0.67				
014 5-1400-5031	Life Insurance	POLICY # 316407, ACC		3.88				
014 5-1400-5031	Life Insurance	POLICY # 316407, ACC		2.01				
I-29 202505121356	POLICY # 316407, ACCT # 168	R	6/02/2025			070866		
010 5-1005-5031	Life Insurance	POLICY # 316407, ACC		5.76				
010 5-1010-5031	Life Insurance	POLICY # 316407, ACC		7.43				
010 5-1015-5031	Life Insurance	POLICY # 316407, ACC		8.78				
010 5-1030-5031	Life Insurance	POLICY # 316407, ACC		13.67				

VENDOR I.D.	NAME	STATUS	CHECK DATE	AMOUNT	DISCOUNT	CHECK NO	CHECK STATUS	CHECK AMOUNT
22205	CSAC EXCESS INSURANCE CONT							
I-29 202505121356	POLICY # 316407, ACCT # 168	R	6/02/2025			070866		
010 5-1030-5031	Life Insurance		POLICY # 316407, ACC	1.90				
010 5-1030-5031	Life Insurance		POLICY # 316407, ACC	4.29				
010 5-1030-5031	Life Insurance		POLICY # 316407, ACC	1.42				
010 5-1032-5031	Life Insurance		POLICY # 316407, ACC	0.34				
010 5-1032-5031	Life Insurance		POLICY # 316407, ACC	0.26				
010 5-1032-5031	Life Insurance		POLICY # 316407, ACC	0.06				
010 5-1035-5031	Life Insurance		POLICY # 316407, ACC	12.83				
010 5-1035-5031	Life Insurance		POLICY # 316407, ACC	0.52				
010 5-1035-5031	Life Insurance		POLICY # 316407, ACC	0.12				
010 5-1040-5031	Life Insurance		POLICY # 316407, ACC	2.69				
012 5-1200-5031	Life Insurance		POLICY # 316407, ACC	22.82				
012 5-1200-5031	Life Insurance		POLICY # 316407, ACC	3.70				
012 5-1200-5031	Life Insurance		POLICY # 316407, ACC	4.71				
012 5-1200-5031	Life Insurance		POLICY # 316407, ACC	1.42				
013 5-1300-5031	Life Insurance		POLICY # 316407, ACC	23.83				
013 5-1300-5031	Life Insurance		POLICY # 316407, ACC	4.48				
013 5-1300-5031	Life Insurance		POLICY # 316407, ACC	4.89				
013 5-1300-5031	Life Insurance		POLICY # 316407, ACC	1.42				
014 5-1400-5031	Life Insurance		POLICY # 316407, ACC	6.78				
014 5-1400-5031	Life Insurance		POLICY # 316407, ACC	1.90				
014 5-1400-5031	Life Insurance		POLICY # 316407, ACC	4.31				
014 5-1400-5031	Life Insurance		POLICY # 316407, ACC	1.42				
I-50 202504291353	POLICY # 316407, ACCT # 168	R	6/02/2025			070866		
010 5-1000-5031	Life Insurance		POLICY # 316407, ACC	59.40				
012 5-1200-5031	Life Insurance		POLICY # 316407, ACC	4.05				
013 5-1300-5031	Life Insurance		POLICY # 316407, ACC	4.05				351.00
24515	BENEFIT COORDINATORS CORPORATI							
C-6/25 ADJUSTS	BENEFIT COORDINATORS CORPORATI	R	6/02/2025			070869		
010 5-1000-5027	Dental Insurance		6/25 ADJUSTMENTS	55.40CR				
010 5-1005-5027	Dental Insurance		6/25 ADJUSTMENTS	0.04CR				
010 5-1010-5027	Dental Insurance		6/25 ADJUSTMENTS	0.06CR				
010 5-1030-5027	Dental Insurance		6/25 ADJUSTMENTS	0.08CR				
013 5-1300-5027	Dental Insurance		6/25 ADJUSTMENTS	0.06CR				
014 5-1400-5027	Dental Insurance		6/25 ADJUSTMENTS	0.04CR				
I-23 202504291353	DENTAL GROUP ID PDV00122	R	6/02/2025			070869		
010 5-1005-5027	Dental Insurance		DENTAL GROUP ID PDV0	0.74				
010 5-1010-5027	Dental Insurance		DENTAL GROUP ID PDV0	18.90				
010 5-1015-5027	Dental Insurance		DENTAL GROUP ID PDV0	18.90				
010 5-1030-5027	Dental Insurance		DENTAL GROUP ID PDV0	5.93				
010 5-1030-5027	Dental Insurance		DENTAL GROUP ID PDV0	1.22				
010 5-1030-5027	Dental Insurance		DENTAL GROUP ID PDV0	2.29				
010 5-1032-5027	Dental Insurance		DENTAL GROUP ID PDV0	0.09				
010 5-1032-5027	Dental Insurance		DENTAL GROUP ID PDV0	0.66				
010 5-1032-5027	Dental Insurance		DENTAL GROUP ID PDV0	0.14				
010 5-1035-5027	Dental Insurance		DENTAL GROUP ID PDV0	0.18				

VENDOR I.D.	NAME	STATUS	CHECK DATE	AMOUNT	DISCOUNT	CHECK NO	CHECK STATUS	CHECK AMOUNT
24515	BENEFIT COORDINATORS CCONT							
I-23 202504291353	DENTAL GROUP ID PDV00122	R	6/02/2025			070869		
010 5-1035-5027	Dental Insurance		DENTAL GROUP ID PDVO	1.32				
010 5-1035-5027	Dental Insurance		DENTAL GROUP ID PDVO	0.28				
012 5-1200-5027	Dental Insurance		DENTAL GROUP ID PDVO	25.11				
012 5-1200-5027	Dental Insurance		DENTAL GROUP ID PDVO	5.83				
012 5-1200-5027	Dental Insurance		DENTAL GROUP ID PDVO	3.27				
013 5-1300-5027	Dental Insurance		DENTAL GROUP ID PDVO	21.68				
013 5-1300-5027	Dental Insurance		DENTAL GROUP ID PDVO	7.81				
013 5-1300-5027	Dental Insurance		DENTAL GROUP ID PDVO	3.69				
014 5-1400-5027	Dental Insurance		DENTAL GROUP ID PDVO	10.75				
014 5-1400-5027	Dental Insurance		DENTAL GROUP ID PDVO	1.22				
014 5-1400-5027	Dental Insurance		DENTAL GROUP ID PDVO	2.29				
I-23 202505121356	DENTAL GROUP ID PDV00122	R	6/02/2025			070869		
010 5-1005-5027	Dental Insurance		DENTAL GROUP ID PDVO	0.97				
010 5-1010-5027	Dental Insurance		DENTAL GROUP ID PDVO	18.90				
010 5-1015-5027	Dental Insurance		DENTAL GROUP ID PDVO	18.90				
010 5-1030-5027	Dental Insurance		DENTAL GROUP ID PDVO	5.62				
010 5-1030-5027	Dental Insurance		DENTAL GROUP ID PDVO	1.54				
010 5-1030-5027	Dental Insurance		DENTAL GROUP ID PDVO	2.29				
010 5-1032-5027	Dental Insurance		DENTAL GROUP ID PDVO	0.72				
010 5-1032-5027	Dental Insurance		DENTAL GROUP ID PDVO	0.17				
010 5-1035-5027	Dental Insurance		DENTAL GROUP ID PDVO	1.44				
010 5-1035-5027	Dental Insurance		DENTAL GROUP ID PDVO	0.33				
012 5-1200-5027	Dental Insurance		DENTAL GROUP ID PDVO	24.04				
012 5-1200-5027	Dental Insurance		DENTAL GROUP ID PDVO	6.59				
012 5-1200-5027	Dental Insurance		DENTAL GROUP ID PDVO	3.46				
013 5-1300-5027	Dental Insurance		DENTAL GROUP ID PDVO	20.35				
013 5-1300-5027	Dental Insurance		DENTAL GROUP ID PDVO	8.76				
013 5-1300-5027	Dental Insurance		DENTAL GROUP ID PDVO	3.96				
014 5-1400-5027	Dental Insurance		DENTAL GROUP ID PDVO	10.43				
014 5-1400-5027	Dental Insurance		DENTAL GROUP ID PDVO	1.54				
014 5-1400-5027	Dental Insurance		DENTAL GROUP ID PDVO	2.29				
I-24 202504291353	DENTAL GROUP ID PDV00122	R	6/02/2025			070869		
010 2039	Dental Insurance Payable		DENTAL GROUP ID PDVO	2.38				
010 5-1030-5027	Dental Insurance		DENTAL GROUP ID PDVO	3.62				
010 5-1030-5027	Dental Insurance		DENTAL GROUP ID PDVO	1.47				
010 5-1030-5027	Dental Insurance		DENTAL GROUP ID PDVO	3.27				
010 5-1030-5027	Dental Insurance		DENTAL GROUP ID PDVO	5.19				
010 5-1030-5027	Dental Insurance		DENTAL GROUP ID PDVO	2.86				
010 5-1032-5027	Dental Insurance		DENTAL GROUP ID PDVO	1.65				
010 5-1035-5027	Dental Insurance		DENTAL GROUP ID PDVO	3.27				
012 2039	Dental Insurance Payable		DENTAL GROUP ID PDVO	3.10				
012 5-1200-5027	Dental Insurance		DENTAL GROUP ID PDVO	15.10				
012 5-1200-5027	Dental Insurance		DENTAL GROUP ID PDVO	1.47				
012 5-1200-5027	Dental Insurance		DENTAL GROUP ID PDVO	3.27				
012 5-1200-5027	Dental Insurance		DENTAL GROUP ID PDVO	5.19				
012 5-1200-5027	Dental Insurance		DENTAL GROUP ID PDVO	2.86				

VENDOR I.D.	NAME	STATUS	CHECK DATE	AMOUNT	DISCOUNT	CHECK NO	CHECK STATUS	CHECK AMOUNT
24515	BENEFIT COORDINATORS CCONT							
I-24	202504291353	DENTAL GROUP ID PDV00122	R 6/02/2025			070869		
013	2039	Dental Insurance Payable	DENTAL GROUP ID PDVO	3.65				
013	5-1300-5027	Dental Insurance	DENTAL GROUP ID PDVO	20.03				
013	5-1300-5027	Dental Insurance	DENTAL GROUP ID PDVO	1.47				
013	5-1300-5027	Dental Insurance	DENTAL GROUP ID PDVO	3.27				
013	5-1300-5027	Dental Insurance	DENTAL GROUP ID PDVO	5.19				
013	5-1300-5027	Dental Insurance	DENTAL GROUP ID PDVO	2.86				
014	2039	Dental Insurance Payable	DENTAL GROUP ID PDVO	1.82				
014	5-1400-5027	Dental Insurance	DENTAL GROUP ID PDVO	3.60				
014	5-1400-5027	Dental Insurance	DENTAL GROUP ID PDVO	1.47				
014	5-1400-5027	Dental Insurance	DENTAL GROUP ID PDVO	3.27				
014	5-1400-5027	Dental Insurance	DENTAL GROUP ID PDVO	5.19				
014	5-1400-5027	Dental Insurance	DENTAL GROUP ID PDVO	2.86				
I-24	202505121356	DENTAL GROUP ID PDV00122	R 6/02/2025			070869		
010	2039	Dental Insurance Payable	DENTAL GROUP ID PDVO	2.38				
010	5-1030-5027	Dental Insurance	DENTAL GROUP ID PDVO	9.10				
010	5-1030-5027	Dental Insurance	DENTAL GROUP ID PDVO	2.82				
010	5-1030-5027	Dental Insurance	DENTAL GROUP ID PDVO	4.49				
010	5-1032-5027	Dental Insurance	DENTAL GROUP ID PDVO	1.64				
010	5-1035-5027	Dental Insurance	DENTAL GROUP ID PDVO	3.28				
012	2039	Dental Insurance Payable	DENTAL GROUP ID PDVO	3.10				
012	5-1200-5027	Dental Insurance	DENTAL GROUP ID PDVO	20.58				
012	5-1200-5027	Dental Insurance	DENTAL GROUP ID PDVO	2.82				
012	5-1200-5027	Dental Insurance	DENTAL GROUP ID PDVO	4.49				
013	2039	Dental Insurance Payable	DENTAL GROUP ID PDVO	3.65				
013	5-1300-5027	Dental Insurance	DENTAL GROUP ID PDVO	25.51				
013	5-1300-5027	Dental Insurance	DENTAL GROUP ID PDVO	2.82				
013	5-1300-5027	Dental Insurance	DENTAL GROUP ID PDVO	4.49				
014	2039	Dental Insurance Payable	DENTAL GROUP ID PDVO	1.82				
014	5-1400-5027	Dental Insurance	DENTAL GROUP ID PDVO	9.07				
014	5-1400-5027	Dental Insurance	DENTAL GROUP ID PDVO	2.82				
014	5-1400-5027	Dental Insurance	DENTAL GROUP ID PDVO	4.50				
I-25	202504291353	DENTAL GROUP ID PDV00122	R 6/02/2025			070869		
010	2039	Dental Insurance Payable	DENTAL GROUP ID PDVO	36.23				
010	5-1005-5027	Dental Insurance	DENTAL GROUP ID PDVO	46.19				
010	5-1010-5027	Dental Insurance	DENTAL GROUP ID PDVO	5.78				
010	5-1015-5027	Dental Insurance	DENTAL GROUP ID PDVO	17.33				
010	5-1030-5027	Dental Insurance	DENTAL GROUP ID PDVO	89.56				
010	5-1030-5027	Dental Insurance	DENTAL GROUP ID PDVO	11.22				
010	5-1030-5027	Dental Insurance	DENTAL GROUP ID PDVO	16.96				
010	5-1030-5027	Dental Insurance	DENTAL GROUP ID PDVO	12.13				
010	5-1035-5027	Dental Insurance	DENTAL GROUP ID PDVO	104.02				
010	5-1040-5027	Dental Insurance	DENTAL GROUP ID PDVO	23.07				
012	2039	Dental Insurance Payable	DENTAL GROUP ID PDVO	13.82				
012	5-1200-5027	Dental Insurance	DENTAL GROUP ID PDVO	83.87				
012	5-1200-5027	Dental Insurance	DENTAL GROUP ID PDVO	11.22				
012	5-1200-5027	Dental Insurance	DENTAL GROUP ID PDVO	16.96				

VENDOR I.D.	NAME	STATUS	CHECK DATE	AMOUNT	DISCOUNT	CHECK NO	CHECK STATUS	CHECK AMOUNT
24515	BENEFIT COORDINATORS CCONT							
I-25 202504291353	DENTAL GROUP ID PDV00122	R	6/02/2025			070869		
012 5-1200-5027	Dental Insurance		DENTAL GROUP ID PDVO	12.13				
013 2039	Dental Insurance Payable		DENTAL GROUP ID PDVO	15.10				
013 5-1300-5027	Dental Insurance		DENTAL GROUP ID PDVO	95.37				
013 5-1300-5027	Dental Insurance		DENTAL GROUP ID PDVO	11.22				
013 5-1300-5027	Dental Insurance		DENTAL GROUP ID PDVO	16.96				
013 5-1300-5027	Dental Insurance		DENTAL GROUP ID PDVO	12.13				
014 2039	Dental Insurance Payable		DENTAL GROUP ID PDVO	5.47				
014 5-1400-5027	Dental Insurance		DENTAL GROUP ID PDVO	8.71				
014 5-1400-5027	Dental Insurance		DENTAL GROUP ID PDVO	11.22				
014 5-1400-5027	Dental Insurance		DENTAL GROUP ID PDVO	16.96				
014 5-1400-5027	Dental Insurance		DENTAL GROUP ID PDVO	12.13				
I-25 202505121356	DENTAL GROUP ID PDV00122	R	6/02/2025			070869		
010 2039	Dental Insurance Payable		DENTAL GROUP ID PDVO	35.60				
010 5-1005-5027	Dental Insurance		DENTAL GROUP ID PDVO	46.19				
010 5-1010-5027	Dental Insurance		DENTAL GROUP ID PDVO	5.77				
010 5-1015-5027	Dental Insurance		DENTAL GROUP ID PDVO	17.32				
010 5-1030-5027	Dental Insurance		DENTAL GROUP ID PDVO	83.79				
010 5-1030-5027	Dental Insurance		DENTAL GROUP ID PDVO	6.53				
010 5-1030-5027	Dental Insurance		DENTAL GROUP ID PDVO	21.81				
010 5-1030-5027	Dental Insurance		DENTAL GROUP ID PDVO	12.16				
010 5-1035-5027	Dental Insurance		DENTAL GROUP ID PDVO	103.93				
010 5-1040-5027	Dental Insurance		DENTAL GROUP ID PDVO	23.09				
012 2039	Dental Insurance Payable		DENTAL GROUP ID PDVO	14.03				
012 5-1200-5027	Dental Insurance		DENTAL GROUP ID PDVO	85.52				
012 5-1200-5027	Dental Insurance		DENTAL GROUP ID PDVO	6.53				
012 5-1200-5027	Dental Insurance		DENTAL GROUP ID PDVO	21.81				
012 5-1200-5027	Dental Insurance		DENTAL GROUP ID PDVO	12.16				
013 2039	Dental Insurance Payable		DENTAL GROUP ID PDVO	15.31				
013 5-1300-5027	Dental Insurance		DENTAL GROUP ID PDVO	97.08				
013 5-1300-5027	Dental Insurance		DENTAL GROUP ID PDVO	6.53				
013 5-1300-5027	Dental Insurance		DENTAL GROUP ID PDVO	21.81				
013 5-1300-5027	Dental Insurance		DENTAL GROUP ID PDVO	12.16				
014 2039	Dental Insurance Payable		DENTAL GROUP ID PDVO	5.68				
014 5-1400-5027	Dental Insurance		DENTAL GROUP ID PDVO	10.47				
014 5-1400-5027	Dental Insurance		DENTAL GROUP ID PDVO	6.53				
014 5-1400-5027	Dental Insurance		DENTAL GROUP ID PDVO	21.79				
014 5-1400-5027	Dental Insurance		DENTAL GROUP ID PDVO	12.16				
I-37 202504291353	DENTAL GROUP ID PDV00122	R	6/02/2025			070869		
010 5-1000-5027	Dental Insurance		DENTAL GROUP ID PDVO	30.24				
012 5-1200-5027	Dental Insurance		DENTAL GROUP ID PDVO	3.78				
013 5-1300-5027	Dental Insurance		DENTAL GROUP ID PDVO	3.78				
I-38 202504291353	DENTAL GROUP ID PDV00122	R	6/02/2025			070869		
010 2039	Dental Insurance Payable		DENTAL GROUP ID PDVO	5.83				
010 5-1000-5027	Dental Insurance		DENTAL GROUP ID PDVO	52.49				
012 2039	Dental Insurance Payable		DENTAL GROUP ID PDVO	0.73				
012 5-1200-5027	Dental Insurance		DENTAL GROUP ID PDVO	6.56				

VENDOR I.D.	NAME	STATUS	CHECK DATE	AMOUNT	DISCOUNT	CHECK NO	CHECK STATUS	CHECK AMOUNT
24515	BENEFIT COORDINATORS CCONT							
I-38 202504291353	DENTAL GROUP ID PDV00122	R	6/02/2025			070869		
013 2039	Dental Insurance Payable			0.73				
013 5-1300-5027	Dental Insurance			6.56				
I-39 202504291353	DENTAL GROUP ID PDV00122	R	6/02/2025			070869		
010 2039	Dental Insurance Payable			53.36				
010 5-1000-5027	Dental Insurance			480.24				2,483.50
1	"RAJVEER SINGH", "							
I-5/2/25 R. SINGH	"	R	6/05/2025			070875		
010 2015	Customer Deposits	CB	CLEANING DPST FOR	525.00				525.00
18080	AT&T							
I-379 0-6/25	5/20/25-6/19/25 530-695-1325	R	6/05/2025			070876		
013 5-1300-5323	Communications		5/20/25-6/19/25 530-	733.09				733.09
01985	CA RURAL WATER ASSOCIATION							
I-20250123	2025 EXPO REG- WRIGHT/ ROACH	R	6/05/2025			070877		
013 5-1300-5335	Professional Development		2025 EXPO REG- WRIGH	1,350.00				1,350.00
32435	CALIBER COLLISION							
I-1189005563	2024 FORD SUPERCAB REPAIRS	R	6/05/2025			070878		
012 5-1200-5315	Repair & Maintenance Vehicles		2024 FORD SUPERCAB R	333.33				
013 5-1300-5315	Repair & Maintenance Vehicles		2024 FORD SUPERCAB R	333.33				
014 5-1400-5315	Repair & Maintenance Vehicles		2024 FORD SUPERCAB R	333.34				
014 5-1400-5315	Repair & Maintenance Vehicles		2024 FORD SUPERCAB R	20,675.43				21,675.43
32270	CDW GOVERNMENT LLC, CDW GOVERN							
I-AD65R1J	2 PANASONIC TOUGHBOOKS	R	6/05/2025			070879		
017 5-1700-5703	Vehicles & Heavy Equipment		2 PANASONIC TOUGHBOO	7,118.70				
I-AD6X31D	KEYBOARDS AND ROUTERS	R	6/05/2025			070879		
017 5-1700-5703	Vehicles & Heavy Equipment		KEYBOARDS AND ROUTER	2,993.05				
I-AD7BX3M	2 VEHICLE ADAPTERS	R	6/05/2025			070879		
017 5-1700-5703	Vehicles & Heavy Equipment		2 VEHICLE ADAPTERS	340.39				
I-AD8KG7P	2 PANARAMA ADAPTERS	R	6/05/2025			070879		
017 5-1700-5703	Vehicles & Heavy Equipment		2 PANARAMA ADAPTERS	63.64				
I-AE27K4Q	2 PANASONICS PUBLIC PACKAGES	R	6/05/2025			070879		
017 5-1700-5703	Vehicles & Heavy Equipment		2 PANASONICS PUBLIC	1,519.98				
I-AE2L94Z	2 HAVIS DOCKING STATIONS	R	6/05/2025			070879		
017 5-1700-5703	Vehicles & Heavy Equipment		2 HAVIS DOCKING STAT	1,559.54				13,595.30
10865	CITY OF YUBA CITY							
I-MS0009539	JAN- MARCH 2025 SASA OPS 9%	R	6/05/2025			070880		
010 5-1055-5341	Professional Services		JAN- MARCH 2025 SASA	77,622.57				77,622.57

VENDOR I.D.	NAME	STATUS	CHECK DATE	AMOUNT	DISCOUNT	CHECK NO	CHECK STATUS	CHECK AMOUNT
01880	DEPARTMENT OF JUSTICE							
I-814751	4/25- K. HAUCK- BACKGROUND	R	6/05/2025			070881		
010 5-1005-5341	Professional Services	4/25- K. HAUCK- BACK		32.00				32.00
32420	GLOBAL OFFICE INC							
I-GN15559	2/6/25-5/6/25 USAGE- TONER FEE	R	6/05/2025			070882		
010 5-1005-5321	Rents & Leases	2/6/25-5/6/25 USAGE-		184.29				
012 5-1200-5321	Rents & Leases	2/6/25-5/6/25 USAGE-		184.29				
013 5-1300-5321	Rents & Leases	2/6/25-5/6/25 USAGE-		184.29				
014 5-1400-5321	Rents & Leases	2/6/25-5/6/25 USAGE-		184.29				737.16
31280	JC NELSON CONSULTING							
I-2025-04-LO	4/7/25-5/2/25 PW CONSULTING	R	6/05/2025			070883		
012 5-1200-5341	Professional Services	4/7/25-5/2/25 PW CON		3,400.00				
013 5-1300-5341	Professional Services	4/7/25-5/2/25 PW CON		1,700.00				
013 5-1300-5704	Equipment	4/7/25-5/2/25 PW CON		3,315.00				
014 5-1400-5341	Professional Services	4/7/25-5/2/25 PW CON		2,125.00				10,540.00
14375	LANDSCAPES BY STENTZEL							
I-32513	4/25 MO SERV KB HOMES	R	6/05/2025			070884		
027 5-2700-5341	Professional Services	4/25 MO SERV KB HOME		499.13				
I-32514	4/25 MONTH HWY 99 SERVICE	R	6/05/2025			070884		
010 5-1035-5341	Professional Services	4/25 MONTH HWY 99 SE		875.00				
I-32515	4/25 MONTH PREMIER HOMES	R	6/05/2025			070884		
027 5-2700-5341	Professional Services	4/25 MONTH PREMIER H		166.38				1,540.51
13775	LOWE'S COMPANIES, INC.							
I-981835	RATCHET/ WEIGHT GAUGE	R	6/05/2025			070885		
012 5-1200-5311	Repair & Maintenance	RATCHET		27.64				
013 5-1300-5319	Small Tools & Equipment	200LB GAUGE		27.63				
I-994202	OPERATING SUPPLIES	R	6/05/2025			070885		
013 5-1300-5303	Operating Supplies	OPERATING SUPPLIES		35.78				
I-994810	OPERATING SUPPLIES	R	6/05/2025			070885		
013 5-1300-5303	Operating Supplies	OPERATING SUPPLIES		42.66				
I-999709	QUIKRETE/ SHOVELS	R	6/05/2025			070885		
014 5-1400-5311	Repair & Maintenance	QUIKRETE BAGS		99.19				
014 5-1400-5319	Small Tools & Equipment	SHOVELS		99.19				332.09
07160	PACIFIC GAS AND ELECTRIC COMPA							
I-3499345295-1-5/25	NW CO H99 & PENN 4/21-5/19	R	6/05/2025			070886		
014 5-1400-5339	Utilities	NW CO H99 & PENN 4/2		155.87				
I-4547071315-2-5/25	11391 LARKIN WELL #7 4/21-5/19	R	6/05/2025			070886		
012 5-1200-5339	Utilities	11391 LARKIN WELL #7		2,734.32				
I-5859440964-9-5/25	NW CO H99/KOLA 4/21-5/19	R	6/05/2025			070886		
014 5-1400-5339	Utilities	NW CO H99/KOLA 4/21-		138.47				
I-6112452238-6-5/25	NW CO H99/ ELM 4/21-5/19/25	R	6/05/2025			070886		
014 5-1400-5339	Utilities	NW CO H99/ ELM 4/21-		88.37				3,117.03

VENDOR I.D.	NAME	STATUS	CHECK DATE	AMOUNT	DISCOUNT	CHECK NO	CHECK STATUS	CHECK AMOUNT
08015	RICH, FUIDGE, BORDSEN & GALYEA							
I-203.LIVEOAK-4/25	4/25 CITY ATTORNEY FEES	R	6/05/2025			070887		
010 5-1060-5341	Professional Services	4/25	CITY ATTORNEY F	4,000.00				
010 5-1060-5341	Professional Services	4/25	CITY ATTORNEY O	6,464.25				10,464.25
08960	SORENSEN PEST CONTROL, INC.							
I-1345398	EVERY OTHR MONTH SERVICE	R	6/05/2025			070888		
010 5-1032-5313	Repair & Maint Builidings	5/25	EOM PEST SERVIC	49.60				
010 5-1032-5313	Repair & Maint Builidings	5/25	EOM PEST SERVIC	49.60				
010 5-1030-5311	Repair & Maintenance	5/25	EOM PEST SERV-P	37.20				
012 5-1200-5311	Repair & Maintenance	5/25	EOM PEST SERV-C	20.65				
013 5-1300-5311	Repair & Maintenance WWTP	5/25	EOM PEST SERV-C	20.67				
014 5-1400-5311	Repair & Maintenance	5/25	EOM PEST SERV-C	20.68				
013 5-1300-5311	Repair & Maintenance WWTP	5/25	EOM PEST SERV-W	62.00				
010 5-1030-5311	Repair & Maintenance	5/25	EOM PEST SERV-O	49.60				310.00
09290	SUTTER COUNTY SHERIFF							
I-568	5/25 MODEM DATA CHARGES	R	6/05/2025			070889		
010 5-1050-5323	Communications	5/25	530-218-4932	40.24				
010 5-1050-5323	Communications	5/25	530-301-3957	40.24				
010 5-1050-5323	Communications	5/25	530-301-5156	40.24				
010 5-1050-5323	Communications	5/25	530-301-5956	40.24				
010 5-1050-5323	Communications	5/25	530-301-3651	40.24				
010 5-1050-5323	Communications	5/25	530-301-3840	40.24				
010 5-1050-5323	Communications	5/25	530-301-3924	40.24				
010 5-1050-5323	Communications	5/25	530-301-3739	40.24				
010 5-1050-5323	Communications	5/25	530-301-5155	40.24				
010 5-1050-5323	Communications	5/25	530-301-5827	40.24				402.40
09290	SUTTER COUNTY SHERIFF							
I-573	6/25 MODEM DATA CHARGES	R	6/05/2025			070890		
010 5-1050-5323	Communications	6/25	530-218-4932	40.24				
010 5-1050-5323	Communications	6/25	530-301-3957	40.24				
010 5-1050-5323	Communications	6/25	530-301-5156	40.24				
010 5-1050-5323	Communications	6/25	530-301-5956	40.24				
010 5-1050-5323	Communications	6/25	530-301-3651	40.24				
010 5-1050-5323	Communications	6/25	530-301-3840	40.24				
010 5-1050-5323	Communications	6/25	530-301-3924	40.24				
010 5-1050-5323	Communications	6/25	530-301-3739	40.24				
010 5-1050-5323	Communications	6/25	530-301-5155	40.24				
010 5-1050-5323	Communications	6/25	530-301-5827	40.24				402.40
29960	ROMAN ONTIVEROS							
I-4/25 AFLAC PREM	REFUND APRIL 2025 AFLAC PREM	R	6/10/2025			070892		
010 4-0000-4167	Miscellaneous Income	REFUND APRIL 2025 AF		33.12				33.12

VENDOR I.D.	NAME	STATUS	CHECK DATE	AMOUNT	DISCOUNT	CHECK NO	CHECK STATUS	CHECK AMOUNT
* * T O T A L S * *								
		NO		INVOICE AMOUNT				CHECK AMOUNT
	REGULAR CHECKS:	30		170,004.81				170,004.81
	HAND CHECKS:	0		0.00				0.00
	DRAFTS:	0		0.00				0.00
	EFT:	0		0.00				0.00
	NON CHECKS:	0		0.00				0.00
	VOID CHECKS:	0	VOID DEBITS	0.00				
			VOID CREDITS	0.00	0.00			0.00

TOTAL ERRORS: 0

\*\* G/L ACCOUNT TOTALS \*\*

G/L ACCOUNT	NAME	AMOUNT
010 2015	Customer Deposits	525.00
010 2039	Dental Insurance Payable	135.78
010 2042	Employee FSA	12.32
010 2050	Union Dues Payable	104.66
010 2055	Aflac Payable	800.46
010 4-0000-4167	Miscellaneous Income	33.12
010 5-1000-5027	Dental Insurance	507.57
010 5-1000-5029	Vision Insurance	56.28
010 5-1000-5031	Life Insurance	59.40
010 5-1005-5027	Dental Insurance	94.05
010 5-1005-5029	Vision Insurance	16.55
010 5-1005-5031	Life Insurance	11.41
010 5-1005-5301	Office Supplies	247.22
010 5-1005-5321	Rents & Leases	184.29
010 5-1005-5323	Communications	100.00
010 5-1005-5327	Postage	177.10
010 5-1005-5331	Travel, Lodging & Meals	130.34
010 5-1005-5333	Dues & Subscriptions	1,143.00
010 5-1005-5335	Professional Development	839.89
010 5-1005-5341	Professional Services	32.00
010 5-1010-5027	Dental Insurance	49.29
010 5-1010-5029	Vision Insurance	9.96
010 5-1010-5031	Life Insurance	14.85
010 5-1015-5027	Dental Insurance	72.45
010 5-1015-5029	Vision Insurance	14.66
010 5-1015-5031	Life Insurance	17.55
010 5-1030-5027	Dental Insurance	305.79
010 5-1030-5029	Vision Insurance	62.89
010 5-1030-5031	Life Insurance	43.23

VENDOR SET: 01 City of Live Oak  
 BANK: GEN Cash & Investments  
 DATE RANGE: 5/28/2025 THRU 6/10/2025

## \*\* G/L ACCOUNT TOTALS \*\*

G/L ACCOUNT	NAME	AMOUNT
010 5-1030-5309	Safety Items	318.16
010 5-1030-5311	Repair & Maintenance	86.80
010 5-1030-5702	Capital Outlay & Equipment	8,618.79
010 5-1032-5027	Dental Insurance	5.07
010 5-1032-5029	Vision Insurance	1.10
010 5-1032-5031	Life Insurance	1.31
010 5-1032-5309	Safety Items	485.00
010 5-1032-5313	Repair & Maint Buildings	99.20
010 5-1035-5027	Dental Insurance	218.05
010 5-1035-5029	Vision Insurance	44.49
010 5-1035-5031	Life Insurance	26.95
010 5-1035-5341	Professional Services	875.00
010 5-1035-5351	Community Promotion	273.42
010 5-1035-5371	Youth Soccer	122.61
010 5-1035-5380	Skate Park Events	184.98
010 5-1035-5381	Snack Bar	147.72
010 5-1035-5399	Other Youth Programs	281.32
010 5-1040-5027	Dental Insurance	46.16
010 5-1040-5029	Vision Insurance	9.36
010 5-1040-5031	Life Insurance	5.38
010 5-1040-5303	Operating Supplies	482.40
010 5-1040-5309	Safety Items	67.56
010 5-1040-5311	Repair & Maintenance	33.08
010 5-1040-5337	Licenses and Permits	906.00
010 5-1050-5323	Communications	804.80
010 5-1055-5341	Professional Services	77,622.57
010 5-1060-5341	Professional Services	10,464.25
	*** FUND TOTAL ***	108,032.64
012 2039	Dental Insurance Payable	34.78
012 2042	Employee FSA	12.32
012 2050	Union Dues Payable	86.14
012 2055	Aflac Payable	227.71
012 5-1200-5027	Dental Insurance	384.62
012 5-1200-5029	Vision Insurance	76.90
012 5-1200-5031	Life Insurance	69.18
012 5-1200-5301	Office Supplies	44.00
012 5-1200-5311	Repair & Maintenance	48.29
012 5-1200-5315	Repair & Maintenance Vehicles	333.33
012 5-1200-5321	Rents & Leases	184.29
012 5-1200-5327	Postage	904.74
012 5-1200-5339	Utilities	2,734.32
012 5-1200-5341	Professional Services	3,400.00
	*** FUND TOTAL ***	8,540.62
013 2039	Dental Insurance Payable	38.44

VENDOR SET: 01 City of Live Oak  
 BANK: GEN Cash & Investments  
 DATE RANGE: 5/28/2025 THRU 6/10/2025

\*\* G/L ACCOUNT TOTALS \*\*

G/L ACCOUNT	NAME	AMOUNT
013 2042	Employee FSA	12.32
013 2050	Union Dues Payable	79.47
013 2055	Aflac Payable	242.58
013 5-1300-5027	Dental Insurance	415.43
013 5-1300-5029	Vision Insurance	82.47
013 5-1300-5031	Life Insurance	73.17
013 5-1300-5301	Office Supplies	44.00
013 5-1300-5303	Operating Supplies	192.13
013 5-1300-5311	Repair & Maintenance WWTP	82.67
013 5-1300-5315	Repair & Maintenance Vehicles	333.33
013 5-1300-5319	Small Tools & Equipment	27.63
013 5-1300-5321	Rents & Leases	184.29
013 5-1300-5323	Communications	733.09
013 5-1300-5327	Postage	904.73
013 5-1300-5335	Professional Development	2,268.92
013 5-1300-5337	Licenses and Permits	648.56
013 5-1300-5341	Professional Services	4,794.58
013 5-1300-5704	Equipment	3,315.00
	*** FUND TOTAL ***	14,472.81
014 2039	Dental Insurance Payable	14.79
014 2042	Employee FSA	12.30
014 2050	Union Dues Payable	59.42
014 2055	Aflac Payable	91.31
014 5-1400-5027	Dental Insurance	161.23
014 5-1400-5029	Vision Insurance	48.39
014 5-1400-5031	Life Insurance	28.57
014 5-1400-5301	Office Supplies	43.99
014 5-1400-5309	Safety Items	318.10
014 5-1400-5311	Repair & Maintenance	119.87
014 5-1400-5315	Repair & Maintenance Vehicles	21,008.77
014 5-1400-5319	Small Tools & Equipment	99.19
014 5-1400-5321	Rents & Leases	184.29
014 5-1400-5339	Utilities	382.71
014 5-1400-5341	Professional Services	2,125.00
	*** FUND TOTAL ***	24,697.93
017 5-1700-5703	Vehicles & Heavy Equipment	13,595.30
	*** FUND TOTAL ***	13,595.30
027 5-2700-5341	Professional Services	665.51
	*** FUND TOTAL ***	665.51

VENDOR SET: 01	BANK: GEN	TOTALS:	NO	INVOICE AMOUNT	DISCOUNTS	CHECK AMOUNT
			30	170,004.81	0.00	170,004.81
BANK: GEN	TOTALS:		30	170,004.81	0.00	170,004.81

VENDOR I.D.	NAME	STATUS	CHECK DATE	AMOUNT	DISCOUNT	CHECK NO	CHECK STATUS	CHECK AMOUNT
14795	CITY OF LIVE OAK							
I-80	202505271359	HEALTH EQUITY FSA DEDUCTION	D 5/30/2025			000893		
010	2042	Employee FSA	HEALTH EQUITY FSA DE	90.43				
012	2042	Employee FSA	HEALTH EQUITY FSA DE	35.19				
013	2042	Employee FSA	HEALTH EQUITY FSA DE	46.69				
014	2042	Employee FSA	HEALTH EQUITY FSA DE	0.69				173.00
01795	CA DEPT OF E.D.D.							
I-36	202505271359	SDI WITHHOLDINGS	D 5/30/2025			000894		
010	2053	Miscellaneous Deduction Payabl	SDI WITHHOLDINGS	447.90				
012	2053	Miscellaneous Deduction Payabl	SDI WITHHOLDINGS	188.92				
013	2053	Miscellaneous Deduction Payabl	SDI WITHHOLDINGS	197.51				
014	2053	Miscellaneous Deduction Payabl	SDI WITHHOLDINGS	94.18				
I-43	202505271359	EMPLOYMENT TRAINING TAX	D 5/30/2025			000894		
010	5-1030-5017	Unemployment Insurance	EMPLOYMENT TRAINING	0.30				
010	5-1035-5017	Unemployment Insurance	EMPLOYMENT TRAINING	0.70				
012	5-1200-5017	Unemployment Insurance	EMPLOYMENT TRAINING	0.30				
013	5-1300-5017	Unemployment Insurance	EMPLOYMENT TRAINING	0.30				
014	5-1400-5017	Unemployment Insurance	EMPLOYMENT TRAINING	0.28				
I-T2	202505271359	STATE WITHHOLDINGS	D 5/30/2025			000894		
010	2031	State Withholding Payable	STATE WITHHOLDINGS	1,670.56				
012	2031	State Withholding Payable	STATE WITHHOLDINGS	513.02				
013	2031	State Withholding Payable	STATE WITHHOLDINGS	519.95				
014	2031	State Withholding Payable	STATE WITHHOLDINGS	350.71				
I-UI	202505271359	UNEMPLOYMENT	D 5/30/2025			000894		
010	5-1030-5017	Unemployment Insurance	UNEMPLOYMENT	9.77				
010	5-1035-5017	Unemployment Insurance	UNEMPLOYMENT	23.00				
012	5-1200-5017	Unemployment Insurance	UNEMPLOYMENT	9.77				
013	5-1300-5017	Unemployment Insurance	UNEMPLOYMENT	9.77				
014	5-1400-5017	Unemployment Insurance	UNEMPLOYMENT	9.76				4,046.70
04710	I.R.S. EFTPS (ONLY)							
I-T1	202505271359	FED WITHHOLDINGS	D 5/30/2025			000895		
010	2029	Federal Withholding Payable	FED WITHHOLDINGS	4,093.84				
012	2029	Federal Withholding Payable	FED WITHHOLDINGS	1,351.00				
013	2029	Federal Withholding Payable	FED WITHHOLDINGS	1,370.91				
014	2029	Federal Withholding Payable	FED WITHHOLDINGS	809.63				
I-T3	202505271359	FICA WITHHOLDINGS	D 5/30/2025			000895		
010	2025	Social Security Payable	FICA WITHHOLDINGS	2,314.24				
010	5-1005-5013	Social Security	FICA WITHHOLDINGS	663.53				
010	5-1010-5013	Social Security	FICA WITHHOLDINGS	180.80				
010	5-1015-5013	Social Security	FICA WITHHOLDINGS	266.38				
010	5-1030-5013	Social Security	FICA WITHHOLDINGS	380.84				
010	5-1030-5013	Social Security	FICA WITHHOLDINGS	77.03				
010	5-1030-5013	Social Security	FICA WITHHOLDINGS	184.59				
010	5-1030-5013	Social Security	FICA WITHHOLDINGS	32.44				
010	5-1032-5013	Social Security	FICA WITHHOLDINGS	7.13				
010	5-1032-5013	Social Security	FICA WITHHOLDINGS	5.14				

VENDOR I.D.	NAME	STATUS	CHECK DATE	AMOUNT	DISCOUNT	CHECK NO	CHECK STATUS	CHECK AMOUNT
04710	I.R.S. EFTPS (ONLY) CONT							
I-T3 202505271359	FICA WITHHOLDINGS	D	5/30/2025			000895		
010 5-1032-5013	Social Security	FICA WITHHOLDINGS		1.04				
010 5-1035-5013	Social Security	FICA WITHHOLDINGS		413.77				
010 5-1035-5013	Social Security	FICA WITHHOLDINGS		10.29				
010 5-1035-5013	Social Security	FICA WITHHOLDINGS		2.09				
010 5-1040-5013	Social Security	FICA WITHHOLDINGS		89.22				
012 2025	Social Security Payable	FICA WITHHOLDINGS		976.08				
012 5-1200-5013	Social Security	FICA WITHHOLDINGS		638.70				
012 5-1200-5013	Social Security	FICA WITHHOLDINGS		113.04				
012 5-1200-5013	Social Security	FICA WITHHOLDINGS		191.89				
012 5-1200-5013	Social Security	FICA WITHHOLDINGS		32.44				
013 2025	Social Security Payable	FICA WITHHOLDINGS		1,020.36				
013 5-1300-5013	Social Security	FICA WITHHOLDINGS		664.43				
013 5-1300-5013	Social Security	FICA WITHHOLDINGS		128.47				
013 5-1300-5013	Social Security	FICA WITHHOLDINGS		195.02				
013 5-1300-5013	Social Security	FICA WITHHOLDINGS		32.44				
014 2025	Social Security Payable	FICA WITHHOLDINGS		486.58				
014 5-1400-5013	Social Security	FICA WITHHOLDINGS		192.50				
014 5-1400-5013	Social Security	FICA WITHHOLDINGS		77.02				
014 5-1400-5013	Social Security	FICA WITHHOLDINGS		184.58				
014 5-1400-5013	Social Security	FICA WITHHOLDINGS		32.44				
I-T4 202505271359	MEDICARE WITHHOLDINGS	D	5/30/2025			000895		
010 2027	Medicare Payable	MEDICARE WITHHOLDING		541.16				
010 5-1005-5015	Medicare	MEDICARE WITHHOLDING		155.18				
010 5-1010-5015	Medicare	MEDICARE WITHHOLDING		42.28				
010 5-1015-5015	Medicare	MEDICARE WITHHOLDING		62.30				
010 5-1030-5015	Medicare	MEDICARE WITHHOLDING		89.07				
010 5-1030-5015	Medicare	MEDICARE WITHHOLDING		18.01				
010 5-1030-5015	Medicare	MEDICARE WITHHOLDING		43.17				
010 5-1030-5015	Medicare	MEDICARE WITHHOLDING		7.59				
010 5-1032-5015	Medicare	MEDICARE WITHHOLDING		1.67				
010 5-1032-5015	Medicare	MEDICARE WITHHOLDING		1.20				
010 5-1032-5015	Medicare	MEDICARE WITHHOLDING		0.24				
010 5-1035-5015	Medicare	MEDICARE WITHHOLDING		96.78				
010 5-1035-5015	Medicare	MEDICARE WITHHOLDING		2.41				
010 5-1035-5015	Medicare	MEDICARE WITHHOLDING		0.49				
010 5-1040-5015	Medicare	MEDICARE WITHHOLDING		20.86				
012 2027	Medicare Payable	MEDICARE WITHHOLDING		228.29				
012 5-1200-5015	Medicare	MEDICARE WITHHOLDING		149.37				
012 5-1200-5015	Medicare	MEDICARE WITHHOLDING		26.43				
012 5-1200-5015	Medicare	MEDICARE WITHHOLDING		44.88				
012 5-1200-5015	Medicare	MEDICARE WITHHOLDING		7.59				
013 2027	Medicare Payable	MEDICARE WITHHOLDING		238.67				
013 5-1300-5015	Medicare	MEDICARE WITHHOLDING		155.39				
013 5-1300-5015	Medicare	MEDICARE WITHHOLDING		30.04				
013 5-1300-5015	Medicare	MEDICARE WITHHOLDING		45.61				
013 5-1300-5015	Medicare	MEDICARE WITHHOLDING		7.59				

VENDOR I.D.	NAME	STATUS	CHECK DATE	AMOUNT	DISCOUNT	CHECK NO	CHECK STATUS	CHECK AMOUNT
04710	I.R.S. EFTPS (ONLY) CONT							
I-T4 202505271359	MEDICARE WITHHOLDINGS	D	5/30/2025			000895		
014 2027	Medicare Payable			113.82				
014 5-1400-5015	Medicare			45.00				
014 5-1400-5015	Medicare			17.99				
014 5-1400-5015	Medicare			43.21				
014 5-1400-5015	Medicare			7.59				19,463.78
02600	CITISTREET							
I-35 202505271359	DEF COMP WITHHOLDINGS	D	5/30/2025			000896		
010 2047	Deferred Compensation Payable	DEF COMP WITHHOLDING		407.85				
012 2047	Deferred Compensation Payable	DEF COMP WITHHOLDING		279.05				
013 2047	Deferred Compensation Payable	DEF COMP WITHHOLDING		302.80				
014 2047	Deferred Compensation Payable	DEF COMP WITHHOLDING		10.30				1,000.00
07070	CALPERS RETIREMENT							
I-10 202505271359	COVERAGE GRP 70003 EMP ID 1373	D	5/30/2025			000897		
010 5-1005-5021	Retirement PERS City	COVERAGE GRP 70003 E		119.56				
010 5-1010-5021	Retirement PERS City	COVERAGE GRP 70003 E		69.98				
010 5-1015-5021	Retirement PERS City	COVERAGE GRP 70003 E		69.98				
010 5-1030-5021	Retirement PERS City	COVERAGE GRP 70003 E		63.05				
010 5-1030-5021	Retirement PERS City	COVERAGE GRP 70003 E		80.79				
010 5-1030-5021	Retirement PERS City	COVERAGE GRP 70003 E		183.27				
010 5-1035-5021	Retirement PERS City	COVERAGE GRP 70003 E		250.49				
010 5-1040-5021	Retirement PERS City	COVERAGE GRP 70003 E		41.74				
012 5-1200-5021	Retirement PERS City	COVERAGE GRP 70003 E		744.20				
012 5-1200-5021	Retirement PERS City	COVERAGE GRP 70003 E		80.79				
012 5-1200-5021	Retirement PERS City	COVERAGE GRP 70003 E		183.27				
013 5-1300-5021	Retirement PERS City	COVERAGE GRP 70003 E		837.34				
013 5-1300-5021	Retirement PERS City	COVERAGE GRP 70003 E		80.79				
013 5-1300-5021	Retirement PERS City	COVERAGE GRP 70003 E		183.27				
014 5-1400-5021	Retirement PERS City	COVERAGE GRP 70003 E		104.80				
014 5-1400-5021	Retirement PERS City	COVERAGE GRP 70003 E		80.79				
014 5-1400-5021	Retirement PERS City	COVERAGE GRP 70003 E		183.27				
I-11 202505271359	COVERAGE GRP 70002 EMP ID 1373	D	5/30/2025			000897		
010 5-1010-5023	Retirement PERS Employee	COVERAGE GRP 70002 E		34.95				
010 5-1015-5023	Retirement PERS Employee	COVERAGE GRP 70002 E		34.95				
010 5-1035-5023	Retirement PERS Employee	COVERAGE GRP 70002 E		125.09				
010 5-1040-5023	Retirement PERS Employee	COVERAGE GRP 70002 E		20.85				
012 5-1200-5023	Retirement PERS Employee	COVERAGE GRP 70002 E		280.43				
013 5-1300-5023	Retirement PERS Employee	COVERAGE GRP 70002 E		307.06				
014 5-1400-5023	Retirement PERS Employee	COVERAGE GRP 70002 E		20.85				
I-15 202505271359	COVERAGE GRP 70003 EMP ID 137	D	5/30/2025			000897		
010 5-1005-5021	Retirement PERS City	COVERAGE GRP 70003 E		156.78				
010 5-1010-5021	Retirement PERS City	COVERAGE GRP 70003 E		185.13				
010 5-1015-5021	Retirement PERS City	COVERAGE GRP 70003 E		304.16				
010 5-1030-5021	Retirement PERS City	COVERAGE GRP 70003 E		412.62				
010 5-1030-5021	Retirement PERS City	COVERAGE GRP 70003 E		24.93				

VENDOR I.D.	NAME	STATUS	CHECK DATE	AMOUNT	DISCOUNT	CHECK NO	CHECK STATUS	CHECK AMOUNT
07070	CALPERS RETIREMENT CONT							
I-15 202505271359	COVERAGE GRP 70003 EMP ID 137	D	5/30/2025			000897		
010 5-1030-5021	Retirement PERS City		COVERAGE GRP 70003 E	110.80				
010 5-1030-5021	Retirement PERS City		COVERAGE GRP 70003 E	35.61				
010 5-1032-5021	Retirement PERS City		COVERAGE GRP 70003 E	9.26				
010 5-1032-5021	Retirement PERS City		COVERAGE GRP 70003 E	6.14				
010 5-1032-5021	Retirement PERS City		COVERAGE GRP 70003 E	1.25				
010 5-1035-5021	Retirement PERS City		COVERAGE GRP 70003 E	339.47				
010 5-1035-5021	Retirement PERS City		COVERAGE GRP 70003 E	12.28				
010 5-1035-5021	Retirement PERS City		COVERAGE GRP 70003 E	2.49				
010 5-1040-5021	Retirement PERS City		COVERAGE GRP 70003 E	92.17				
012 5-1200-5021	Retirement PERS City		COVERAGE GRP 70003 E	391.48				
012 5-1200-5021	Retirement PERS City		COVERAGE GRP 70003 E	67.91				
012 5-1200-5021	Retirement PERS City		COVERAGE GRP 70003 E	119.52				
012 5-1200-5021	Retirement PERS City		COVERAGE GRP 70003 E	35.61				
013 5-1300-5021	Retirement PERS City		COVERAGE GRP 70003 E	382.96				
013 5-1300-5021	Retirement PERS City		COVERAGE GRP 70003 E	86.33				
013 5-1300-5021	Retirement PERS City		COVERAGE GRP 70003 E	123.26				
013 5-1300-5021	Retirement PERS City		COVERAGE GRP 70003 E	35.61				
014 5-1400-5021	Retirement PERS City		COVERAGE GRP 70003 E	146.45				
014 5-1400-5021	Retirement PERS City		COVERAGE GRP 70003 E	24.94				
014 5-1400-5021	Retirement PERS City		COVERAGE GRP 70003 E	110.76				
014 5-1400-5021	Retirement PERS City		COVERAGE GRP 70003 E	35.61				
I-16 202505271359	COVERAGE GRP 70002 EMP ID 137	D	5/30/2025			000897		
010 2049	PERS Payable Employee		COVERAGE GRP 70002 E	1,667.24				
012 2049	PERS Payable Employee		COVERAGE GRP 70002 E	605.15				
013 2049	PERS Payable Employee		COVERAGE GRP 70002 E	618.60				
014 2049	PERS Payable Employee		COVERAGE GRP 70002 E	312.96				
I-9 202505271359	COVERAGE GRP 70002 EMP ID 137	D	5/30/2025			000897		
010 2049	PERS Payable Employee		COVERAGE GRP 70002 E	223.04				
012 2049	PERS Payable Employee		COVERAGE GRP 70002 E	223.06				
013 2049	PERS Payable Employee		COVERAGE GRP 70002 E	242.96				
014 2049	PERS Payable Employee		COVERAGE GRP 70002 E	163.36				11,491.46
07055	CALPERS HEALTH INSURANCE							
D-6/25 ADJUSTMENTS	CALPERS HEALTH INSURANCE	D	6/09/2025			000898		
010 5-1010-5025	Health Insurance		6/25 ADJUSTMENTS	0.02CR				
012 5-1200-5025	Health Insurance		6/25 ADJUSTMENTS	885.64				
013 5-1300-5025	Health Insurance		6/25 ADMIN FEES	0.02CR				
010 5-1000-5025	Health Insurance		6/25 ADMIN FEES	15.72				
010 5-1005-5025	Health Insurance		6/25 ADMIN FEES	14.19				
010 5-1010-5025	Health Insurance		6/25 ADMIN FEES	14.81				
010 5-1010-5025	Health Insurance		6/25 ADMIN FEES	14.81				
010 5-1020-5025	Health Insurance		6/25 ADMIN FEES	14.81				
010 5-1030-5025	Health Insurance		6/25 ADMIN FEES	14.81				
010 5-1032-5025	Health Insurance		6/25 ADMIN FEES	14.81				
010 5-1040-5025	Health Insurance		6/25 ADMIN FEES	14.81				
012 5-1200-5025	Health Insurance		6/25 ADMIN FEES	20.35				

VENDOR I.D.	NAME	STATUS	CHECK DATE	AMOUNT	DISCOUNT	CHECK NO	CHECK STATUS	CHECK AMOUNT
07055	CALPERS HEALTH INSURANCONT							
D-6/25	ADJUSTMENTS							
	CALPERS HEALTH INSURANCE	D	6/09/2025			000898		
013	5-1300-5025		Health Insurance	6/25 ADMIN FEES	20.34			
014	5-1400-5025		Health Insurance	6/25 ADMIN FEES	14.81			
010	5-1005-5025		Health Insurance	6/25 RETIRED PREM/AD	790.00			
I-20	202504291353		REGION 1 PLATINUM EMPLOYEE	D	6/09/2025	000898		
010	2037		Health Insurance Payable Empl	REGION 1 PLATINUM EM	110.73			
010	5-1015-5025		Health Insurance	REGION 1 PLATINUM EM	664.25			
010	5-1030-5025		Health Insurance	REGION 1 PLATINUM EM	208.57			
010	5-1030-5025		Health Insurance	REGION 1 PLATINUM EM	42.98			
010	5-1030-5025		Health Insurance	REGION 1 PLATINUM EM	80.59			
012	2037		Health Insurance Payable Empl	REGION 1 PLATINUM EM	36.90			
012	5-1200-5025		Health Insurance	REGION 1 PLATINUM EM	208.58			
012	5-1200-5025		Health Insurance	REGION 1 PLATINUM EM	42.98			
012	5-1200-5025		Health Insurance	REGION 1 PLATINUM EM	80.59			
013	2037		Health Insurance Payable Empl	REGION 1 PLATINUM EM	36.90			
013	5-1300-5025		Health Insurance	REGION 1 PLATINUM EM	208.58			
013	5-1300-5025		Health Insurance	REGION 1 PLATINUM EM	42.98			
013	5-1300-5025		Health Insurance	REGION 1 PLATINUM EM	80.59			
014	2037		Health Insurance Payable Empl	REGION 1 PLATINUM EM	36.90			
014	5-1400-5025		Health Insurance	REGION 1 PLATINUM EM	208.49			
014	5-1400-5025		Health Insurance	REGION 1 PLATINUM EM	42.98			
014	5-1400-5025		Health Insurance	REGION 1 PLATINUM EM	80.59			
I-20	202505121356		REGION 1 PLATINUM EMPLOYEE	D	6/09/2025	000898		
010	2037		Health Insurance Payable Empl	REGION 1 PLATINUM EM	110.73			
010	5-1015-5025		Health Insurance	REGION 1 PLATINUM EM	664.25			
010	5-1030-5025		Health Insurance	REGION 1 PLATINUM EM	197.35			
010	5-1030-5025		Health Insurance	REGION 1 PLATINUM EM	54.28			
010	5-1030-5025		Health Insurance	REGION 1 PLATINUM EM	80.49			
012	2037		Health Insurance Payable Empl	REGION 1 PLATINUM EM	36.90			
012	5-1200-5025		Health Insurance	REGION 1 PLATINUM EM	197.35			
012	5-1200-5025		Health Insurance	REGION 1 PLATINUM EM	54.28			
012	5-1200-5025		Health Insurance	REGION 1 PLATINUM EM	80.49			
013	2037		Health Insurance Payable Empl	REGION 1 PLATINUM EM	36.90			
013	5-1300-5025		Health Insurance	REGION 1 PLATINUM EM	197.35			
013	5-1300-5025		Health Insurance	REGION 1 PLATINUM EM	54.28			
013	5-1300-5025		Health Insurance	REGION 1 PLATINUM EM	80.49			
014	2037		Health Insurance Payable Empl	REGION 1 PLATINUM EM	36.90			
014	5-1400-5025		Health Insurance	REGION 1 PLATINUM EM	197.37			
014	5-1400-5025		Health Insurance	REGION 1 PLATINUM EM	54.28			
014	5-1400-5025		Health Insurance	REGION 1 PLATINUM EM	80.49			
I-21	202504291353		REGION 1 PLATINUM EMPLOYEE 2	D	6/09/2025	000898		
010	2037		Health Insurance Payable Empl	REGION 1 PLATINUM EM	59.05			
010	5-1030-5025		Health Insurance	REGION 1 PLATINUM EM	62.65			
010	5-1030-5025		Health Insurance	REGION 1 PLATINUM EM	59.31			
010	5-1030-5025		Health Insurance	REGION 1 PLATINUM EM	210.16			
010	5-1032-5025		Health Insurance	REGION 1 PLATINUM EM	66.41			
010	5-1035-5025		Health Insurance	REGION 1 PLATINUM EM	132.88			

VENDOR I.D.	NAME	STATUS	CHECK DATE	AMOUNT	DISCOUNT	CHECK NO	CHECK STATUS	CHECK AMOUNT
07055	CALPERS HEALTH INSURANCONT							
I-21 202504291353	REGION 1 PLATINUM EMPLOYEE 2	D	6/09/2025			000898		
012 2037	Health Insurance Payable Empl	REGION 1	PLATINUM EM	88.56				
012 5-1200-5025	Health Insurance	REGION 1	PLATINUM EM	527.62				
012 5-1200-5025	Health Insurance	REGION 1	PLATINUM EM	59.32				
012 5-1200-5025	Health Insurance	REGION 1	PLATINUM EM	210.17				
013 2037	Health Insurance Payable Empl	REGION 1	PLATINUM EM	110.71				
013 5-1300-5025	Health Insurance	REGION 1	PLATINUM EM	726.88				
013 5-1300-5025	Health Insurance	REGION 1	PLATINUM EM	59.32				
013 5-1300-5025	Health Insurance	REGION 1	PLATINUM EM	210.17				
014 2037	Health Insurance Payable Empl	REGION 1	PLATINUM EM	36.90				
014 5-1400-5025	Health Insurance	REGION 1	PLATINUM EM	62.60				
014 5-1400-5025	Health Insurance	REGION 1	PLATINUM EM	59.32				
014 5-1400-5025	Health Insurance	REGION 1	PLATINUM EM	210.17				
I-21 202505121356	REGION 1 PLATINUM EMPLOYEE 2	D	6/09/2025			000898		
010 2037	Health Insurance Payable Empl	REGION 1	PLATINUM EM	59.05				
010 5-1030-5025	Health Insurance	REGION 1	PLATINUM EM	35.90				
010 5-1030-5025	Health Insurance	REGION 1	PLATINUM EM	114.34				
010 5-1030-5025	Health Insurance	REGION 1	PLATINUM EM	181.87				
010 5-1032-5025	Health Insurance	REGION 1	PLATINUM EM	66.42				
010 5-1035-5025	Health Insurance	REGION 1	PLATINUM EM	132.85				
012 2037	Health Insurance Payable Empl	REGION 1	PLATINUM EM	88.56				
012 5-1200-5025	Health Insurance	REGION 1	PLATINUM EM	500.87				
012 5-1200-5025	Health Insurance	REGION 1	PLATINUM EM	114.35				
012 5-1200-5025	Health Insurance	REGION 1	PLATINUM EM	181.87				
013 2037	Health Insurance Payable Empl	REGION 1	PLATINUM EM	110.71				
013 5-1300-5025	Health Insurance	REGION 1	PLATINUM EM	700.15				
013 5-1300-5025	Health Insurance	REGION 1	PLATINUM EM	114.35				
013 5-1300-5025	Health Insurance	REGION 1	PLATINUM EM	181.87				
014 2037	Health Insurance Payable Empl	REGION 1	PLATINUM EM	36.90				
014 5-1400-5025	Health Insurance	REGION 1	PLATINUM EM	35.90				
014 5-1400-5025	Health Insurance	REGION 1	PLATINUM EM	114.35				
014 5-1400-5025	Health Insurance	REGION 1	PLATINUM EM	181.89				
I-22 202504291353	REGION 1 PLATINUM FAMILY PLAN	D	6/09/2025			000898		
010 2037	Health Insurance Payable Empl	REGION 1	PLATINUM FA	940.28				
010 5-1005-5025	Health Insurance	REGION 1	PLATINUM FA	1,381.65				
010 5-1010-5025	Health Insurance	REGION 1	PLATINUM FA	172.72				
010 5-1015-5025	Health Insurance	REGION 1	PLATINUM FA	518.08				
010 5-1030-5025	Health Insurance	REGION 1	PLATINUM FA	2,097.13				
010 5-1030-5025	Health Insurance	REGION 1	PLATINUM FA	335.41				
010 5-1030-5025	Health Insurance	REGION 1	PLATINUM FA	172.06				
010 5-1030-5025	Health Insurance	REGION 1	PLATINUM FA	507.28				
010 5-1030-5025	Health Insurance	REGION 1	PLATINUM FA	513.50				
010 5-1035-5025	Health Insurance	REGION 1	PLATINUM FA	2,420.63				
010 5-1040-5025	Health Insurance	REGION 1	PLATINUM FA	344.03				
012 2037	Health Insurance Payable Empl	REGION 1	PLATINUM FA	470.12				
012 5-1200-5025	Health Insurance	REGION 1	PLATINUM FA	2,702.97				
012 5-1200-5025	Health Insurance	REGION 1	PLATINUM FA	335.44				

VENDOR I.D.	NAME	STATUS	CHECK DATE	AMOUNT	DISCOUNT	CHECK NO	CHECK STATUS	CHECK AMOUNT
07055	CALPERS HEALTH INSURANCONT							
I-22 202504291353	REGION 1 PLATINUM FAMILY PLAN	D	6/09/2025			000898		
012 5-1200-5025	Health Insurance	REGION 1	PLATINUM FA	172.06				
012 5-1200-5025	Health Insurance	REGION 1	PLATINUM FA	507.27				
012 5-1200-5025	Health Insurance	REGION 1	PLATINUM FA	513.51				
013 2037	Health Insurance Payable Emplo	REGION 1	PLATINUM FA	470.13				
013 5-1300-5025	Health Insurance	REGION 1	PLATINUM FA	2,702.95				
013 5-1300-5025	Health Insurance	REGION 1	PLATINUM FA	335.44				
013 5-1300-5025	Health Insurance	REGION 1	PLATINUM FA	172.06				
013 5-1300-5025	Health Insurance	REGION 1	PLATINUM FA	507.27				
013 5-1300-5025	Health Insurance	REGION 1	PLATINUM FA	513.51				
014 2037	Health Insurance Payable Emplo	REGION 1	PLATINUM FA	230.26				
014 5-1400-5025	Health Insurance	REGION 1	PLATINUM FA	544.19				
014 5-1400-5025	Health Insurance	REGION 1	PLATINUM FA	335.44				
014 5-1400-5025	Health Insurance	REGION 1	PLATINUM FA	172.06				
014 5-1400-5025	Health Insurance	REGION 1	PLATINUM FA	507.27				
014 5-1400-5025	Health Insurance	REGION 1	PLATINUM FA	513.51				
I-22 202505121356	REGION 1 PLATINUM FAMILY PLAN	D	6/09/2025			000898		
010 2037	Health Insurance Payable Emplo	REGION 1	PLATINUM FA	921.56				
010 5-1005-5025	Health Insurance	REGION 1	PLATINUM FA	1,381.63				
010 5-1010-5025	Health Insurance	REGION 1	PLATINUM FA	172.70				
010 5-1015-5025	Health Insurance	REGION 1	PLATINUM FA	518.11				
010 5-1030-5025	Health Insurance	REGION 1	PLATINUM FA	2,247.07				
010 5-1030-5025	Health Insurance	REGION 1	PLATINUM FA	195.24				
010 5-1030-5025	Health Insurance	REGION 1	PLATINUM FA	652.09				
010 5-1030-5025	Health Insurance	REGION 1	PLATINUM FA	363.78				
010 5-1035-5025	Health Insurance	REGION 1	PLATINUM FA	2,417.87				
010 5-1040-5025	Health Insurance	REGION 1	PLATINUM FA	345.40				
012 2037	Health Insurance Payable Emplo	REGION 1	PLATINUM FA	476.36				
012 5-1200-5025	Health Insurance	REGION 1	PLATINUM FA	3,076.37				
012 5-1200-5025	Health Insurance	REGION 1	PLATINUM FA	195.24				
012 5-1200-5025	Health Insurance	REGION 1	PLATINUM FA	652.09				
012 5-1200-5025	Health Insurance	REGION 1	PLATINUM FA	363.77				
013 2037	Health Insurance Payable Emplo	REGION 1	PLATINUM FA	476.37				
013 5-1300-5025	Health Insurance	REGION 1	PLATINUM FA	3,076.37				
013 5-1300-5025	Health Insurance	REGION 1	PLATINUM FA	195.24				
013 5-1300-5025	Health Insurance	REGION 1	PLATINUM FA	652.09				
013 5-1300-5025	Health Insurance	REGION 1	PLATINUM FA	363.77				
014 2037	Health Insurance Payable Emplo	REGION 1	PLATINUM FA	236.50				
014 5-1400-5025	Health Insurance	REGION 1	PLATINUM FA	917.51				
014 5-1400-5025	Health Insurance	REGION 1	PLATINUM FA	195.24				
014 5-1400-5025	Health Insurance	REGION 1	PLATINUM FA	652.09				
014 5-1400-5025	Health Insurance	REGION 1	PLATINUM FA	363.77				
I-40 202504291353	REGION 1 PLATINUM EL EMPLOYEE	D	6/09/2025			000898		
010 2035	Health Insurance Payable Elect	REGION 1	PLATINUM EL	118.09				
010 5-1000-5025	Health Insurance	REGION 1	PLATINUM EL	1,062.77				
012 2035	Health Insurance Payable Elect	REGION 1	PLATINUM EL	14.76				
012 5-1200-5025	Health Insurance	REGION 1	PLATINUM EL	132.85				

VENDOR I.D.	NAME	STATUS	CHECK DATE	AMOUNT	DISCOUNT	CHECK NO	CHECK STATUS	CHECK AMOUNT
07055	CALPERS HEALTH INSURANCONT							
I-40 202504291353	REGION 1 PLATINUM EL EMPLOYEE	D	6/09/2025			000898		
013 2035	Health Insurance Payable Elect	REGION 1 PLATINUM EL		14.76				
013 5-1300-5025	Health Insurance	REGION 1 PLATINUM EL		132.87				
I-61 202504291353	REGION 1 PLATINUM EL FAMILY	D	6/09/2025			000898		
010 2035	Health Insurance Payable Elect	REGION 1 PLATINUM EL		767.58				
010 5-1000-5025	Health Insurance	REGION 1 PLATINUM EL		6,908.14				
I-71 202504291353	REGION 1 BLUE SHIELD FAMILY	D	6/09/2025			000898		
010 2037	Health Insurance Payable Empl	REGION 1 BLUE SHIELD		152.12				
010 5-1030-5025	Health Insurance	REGION 1 BLUE SHIELD		547.64				
010 5-1035-5025	Health Insurance	REGION 1 BLUE SHIELD		547.64				
010 5-1040-5025	Health Insurance	REGION 1 BLUE SHIELD		273.82				
I-71 202505121356	REGION 1 BLUE SHIELD FAMILY	D	6/09/2025			000898		
010 2037	Health Insurance Payable Empl	REGION 1 BLUE SHIELD		152.12				
010 5-1030-5025	Health Insurance	REGION 1 BLUE SHIELD		547.64				
010 5-1035-5025	Health Insurance	REGION 1 BLUE SHIELD		547.64				
010 5-1040-5025	Health Insurance	REGION 1 BLUE SHIELD		273.82				
I-77 202504291353	REGION 1 KAISER FAMILY PLAN	D	6/09/2025			000898		
012 2037	Health Insurance Payable Empl	REGION 1 KAISER FAMI		65.11				
012 5-1200-5025	Health Insurance	REGION 1 KAISER FAMI		585.94				
013 2037	Health Insurance Payable Empl	REGION 1 KAISER FAMI		79.57				
013 5-1300-5025	Health Insurance	REGION 1 KAISER FAMI		716.15				
I-77 202505121356	REGION 1 KAISER FAMILY PLAN	D	6/09/2025			000898		
012 2037	Health Insurance Payable Empl	REGION 1 KAISER FAMI		65.11				
012 5-1200-5025	Health Insurance	REGION 1 KAISER FAMI		585.94				
013 2037	Health Insurance Payable Empl	REGION 1 KAISER FAMI		79.57				
013 5-1300-5025	Health Insurance	REGION 1 KAISER FAMI		716.15				69,486.89

* * T O T A L S * *	NO	INVOICE AMOUNT	DISCOUNTS	CHECK AMOUNT
REGULAR CHECKS:	0	0.00	0.00	0.00
HAND CHECKS:	0	0.00	0.00	0.00
DRAFTS:	6	105,661.83	0.00	105,661.83
EFT:	0	0.00	0.00	0.00
NON CHECKS:	0	0.00	0.00	0.00
VOID CHECKS:	0 VOID DEBITS	0.00		
	VOID CREDITS	0.00	0.00	0.00

TOTAL ERRORS: 0

\*\* G/L ACCOUNT TOTALS \*\*

G/L ACCOUNT	NAME	AMOUNT
010 2025	Social Security Payable	2,314.24
010 2027	Medicare Payable	541.16
010 2029	Federal Withholding Payable	4,093.84
010 2031	State Withholding Payable	1,670.56
010 2035	Health Insurance Payable Elect	885.67
010 2037	Health Insurance Payable Emplo	2,505.64
010 2042	Employee FSA	90.43
010 2047	Deferred Compensation Payable	407.85
010 2049	PERS Payable Employee	1,890.28
010 2053	Miscellaneous Deduction Payabl	447.90
010 5-1000-5025	Health Insurance	7,986.63
010 5-1005-5013	Social Security	663.53
010 5-1005-5015	Medicare	155.18
010 5-1005-5021	Retirement PERS City	276.34
010 5-1005-5025	Health Insurance	3,567.47
010 5-1010-5013	Social Security	180.80
010 5-1010-5015	Medicare	42.28
010 5-1010-5021	Retirement PERS City	255.11
010 5-1010-5023	Retirement PERS Employee	34.95
010 5-1010-5025	Health Insurance	375.02
010 5-1015-5013	Social Security	266.38
010 5-1015-5015	Medicare	62.30
010 5-1015-5021	Retirement PERS City	374.14
010 5-1015-5023	Retirement PERS Employee	34.95
010 5-1015-5025	Health Insurance	2,364.69
010 5-1020-5025	Health Insurance	14.81
010 5-1030-5013	Social Security	674.90
010 5-1030-5015	Medicare	157.84
010 5-1030-5017	Unemployment Insurance	10.07
010 5-1030-5021	Retirement PERS City	911.07
010 5-1030-5025	Health Insurance	9,522.14
010 5-1032-5013	Social Security	13.31
010 5-1032-5015	Medicare	3.11
010 5-1032-5021	Retirement PERS City	16.65
010 5-1032-5025	Health Insurance	147.64
010 5-1035-5013	Social Security	426.15
010 5-1035-5015	Medicare	99.68
010 5-1035-5017	Unemployment Insurance	23.70
010 5-1035-5021	Retirement PERS City	604.73
010 5-1035-5023	Retirement PERS Employee	125.09
010 5-1035-5025	Health Insurance	6,199.51
010 5-1040-5013	Social Security	89.22
010 5-1040-5015	Medicare	20.86
010 5-1040-5021	Retirement PERS City	133.91
010 5-1040-5023	Retirement PERS Employee	20.85
010 5-1040-5025	Health Insurance	1,251.88
	*** FUND TOTAL ***	51,954.46

\*\* G/L ACCOUNT TOTALS \*\*

G/L ACCOUNT	NAME	AMOUNT
012 2025	Social Security Payable	976.08
012 2027	Medicare Payable	228.29
012 2029	Federal Withholding Payable	1,351.00
012 2031	State Withholding Payable	513.02
012 2035	Health Insurance Payable Elect	14.76
012 2037	Health Insurance Payable Emplo	1,327.62
012 2042	Employee FSA	35.19
012 2047	Deferred Compensation Payable	279.05
012 2049	PERS Payable Employee	828.21
012 2053	Miscellaneous Deduction Payabl	188.92
012 5-1200-5013	Social Security	976.07
012 5-1200-5015	Medicare	228.27
012 5-1200-5017	Unemployment Insurance	10.07
012 5-1200-5021	Retirement PERS City	1,622.78
012 5-1200-5023	Retirement PERS Employee	280.43
012 5-1200-5025	Health Insurance	12,987.91
	*** FUND TOTAL ***	21,847.67
013 2025	Social Security Payable	1,020.36
013 2027	Medicare Payable	238.67
013 2029	Federal Withholding Payable	1,370.91
013 2031	State Withholding Payable	519.95
013 2035	Health Insurance Payable Elect	14.76
013 2037	Health Insurance Payable Emplo	1,400.86
013 2042	Employee FSA	46.69
013 2047	Deferred Compensation Payable	302.80
013 2049	PERS Payable Employee	861.56
013 2053	Miscellaneous Deduction Payabl	197.51
013 5-1300-5013	Social Security	1,020.36
013 5-1300-5015	Medicare	238.63
013 5-1300-5017	Unemployment Insurance	10.07
013 5-1300-5021	Retirement PERS City	1,729.56
013 5-1300-5023	Retirement PERS Employee	307.06
013 5-1300-5025	Health Insurance	12,761.20
	*** FUND TOTAL ***	22,040.95
014 2025	Social Security Payable	486.58
014 2027	Medicare Payable	113.82
014 2029	Federal Withholding Payable	809.63
014 2031	State Withholding Payable	350.71
014 2037	Health Insurance Payable Emplo	614.36
014 2042	Employee FSA	0.69
014 2047	Deferred Compensation Payable	10.30
014 2049	PERS Payable Employee	476.32
014 2053	Miscellaneous Deduction Payabl	94.18
014 5-1400-5013	Social Security	486.54

\*\* G/L ACCOUNT TOTALS \*\*

G/L ACCOUNT	NAME	AMOUNT
014 5-1400-5015	Medicare	113.79
014 5-1400-5017	Unemployment Insurance	10.04
014 5-1400-5021	Retirement PERS City	686.62
014 5-1400-5023	Retirement PERS Employee	20.85
014 5-1400-5025	Health Insurance	5,544.32
	*** FUND TOTAL ***	9,818.75

VENDOR SET: 01	BANK: PY	TOTALS:	NO	INVOICE AMOUNT	DISCOUNTS	CHECK AMOUNT
			6	105,661.83	0.00	105,661.83
BANK: PY	TOTALS:		6	105,661.83	0.00	105,661.83
REPORT TOTALS:			36	275,666.64	0.00	275,666.64

SELECTION CRITERIA

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VENDOR SET: 01-City of Live Oak  
VENDOR: ALL  
BANK CODES: All  
FUNDS: All

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CHECK SELECTION

CHECK RANGE: 000000 THRU 999999  
DATE RANGE: 5/28/2025 THRU 6/10/2025  
CHECK AMOUNT RANGE: 0.00 THRU 999,999,999.99  
INCLUDE ALL VOIDS: YES

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PRINT OPTIONS

SEQUENCE: CHECK NUMBER

PRINT TRANSACTIONS: YES  
PRINT G/L: YES  
UNPOSTED ONLY: NO  
EXCLUDE UNPOSTED: NO  
MANUAL ONLY: NO  
STUB COMMENTS: NO  
REPORT FOOTER: NO  
CHECK STATUS: NO  
PRINT STATUS: \* - All

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