

PREPARED 02/16/2022, 14:58:42
 PROGRAM: GM339L
 CITY OF AURORA ILLINOIS
 ACCOUNTS PAYABLE-OLD SECOND BANK

EXPENDITURE APPROVAL LIST
 AS OF: 02/24/2022 PAYMENT DATE: 02/24/2022

BANK: 95

FUND 316 WARD #6 PROJECTS FUND									
VEND NO	SEQ#	VENDOR NAME		BNK	CHECK/DUE	ACCOUNT	ITEM	CHECK	EFT, EPAY OR
INVOICE	NO	VOUCHER	P.O.		DATE	NO	DESCRIPTION	AMOUNT	HAND-ISSUED
NO		NO	NO						AMOUNT
DEPT 13 COMMUNITY SERVICES DIV 50 HEALTH & WELFARE									
0009883	00	LIVING DAYLIGHT ORGANIZATION, CK GRP-D							
MICHAEL SAVILLE	001357			95	02/15/2022	316-1350-419.50-50	SPONSORSHIP-BLACK HISTORY	1,000.00	
								VENDOR TOTAL *	1,000.00
0010092	00	FOX VALLEY MONTESSORI SCHOOL, CK GRP-D							
MICHAEL SAVILLE	001356			95	02/15/2022	316-1350-419.50-50	SPONSORSHIP-GALA	500.00	
								VENDOR TOTAL *	500.00
								DEPARTMENT TOTAL **	1,500.00
316	WARD #6 PROJECTS FUND	CASH ON HAND					.00	FUND TOTAL ***	1,500.00

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FUND 318 WARD #8 PROJECTS FUND

VEND NO	SEQ#	VENDOR NAME	INVOICE NO	VOUCHER NO	P.O. NO	BNK CHECK/DUE DATE	ACCOUNT NO	ITEM DESCRIPTION	CHECK AMOUNT	EFT, EPAY OR HAND-ISSUED AMOUNT
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DEPT 13 COMMUNITY SERVICES DIV 50 HEALTH & WELFARE

0010620	01	WAUBONSIE VALLEY HIGH SCHOOL, CK GRP-D				95 02/15/2022	318-1350-419.50-50	SPONSORSHIP	1,000.00	
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PATRICIA SMITH 001353

VENDOR TOTAL *	1,000.00
DEPARTMENT TOTAL **	1,000.00
FUND TOTAL ***	1,000.00

318 WARD #8 PROJECTS FUND CASH ON HAND

.00

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FUND 312	WARD #2	PROJECTS FUND								
VEND NO	SEQ#	VENDOR NAME	INVOICE NO	VOUCHER NO	P.O. NO	BNK CHECK/DUE DATE	ACCOUNT NO	ITEM DESCRIPTION	CHECK AMOUNT	EFT, EPAY OR HAND-ISSUED AMOUNT

DEPT 13	COMMUNITY SERVICES				DIV 50		HEALTH & WELFARE			
9991295	00	GARZA, JUANY, CK	95	02/15/2022	312-1350-419.50-50			LUNCH FOR VACCINE CLINIC	EFT:	58.72
REIMB	001381									
									VENDOR TOTAL *	58.72
									DEPARTMENT TOTAL **	58.72
312	WARD #2	PROJECTS FUND			CASH ON HAND			.00	FUND TOTAL ***	58.72

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BANK: 95

 FUND 319 WARD #9 PROJECTS FUND
 VEND NO SEQ# VENDOR NAME
 INVOICE NO VOUCHER P.O. NO BNK CHECK/DUE DATE ACCOUNT NO ITEM DESCRIPTION CHECK AMOUNT EFT, EPAY OR HAND-ISSUED AMOUNT

DEPT 13 COMMUNITY SERVICES DIV 50 HEALTH & WELFARE

9995999 00 SUMMERLIN HOMEOWNERS
 EDWARD BUGG 007010 95 02/16/2022 319-1350-419.50-50 DONATION-WARD 9 BLOCK 565.46

VENDOR TOTAL * 565.46
 DEPARTMENT TOTAL ** 565.46
 FUND TOTAL *** 565.46

319 WARD #9 PROJECTS FUND CASH ON HAND .00