

EAL DESCRIPTION: EAL: SPECIAL  
VOUCHER SELECTION CRITERIA

Voucher/discount due date . . . . . 02/01/2013  
Bank code . . . . . 95 ACCOUNTS PAYABLE-OLD SECOND BANK

REPORT SEQUENCE OPTIONS:

Vendor . . . . . One vendor per page? (Y,N) . . . . . N  
Bank/Vendor . . . . . X One vendor per page? (Y,N) . . . . . N  
Fund/Dept/Div . . . . . X  
Fund/Dept/Div/Element/Obj  
Proj/Fund/Dept/Div/Elm/Obj  
This report is by: Fund/Dept/Div  
Process by bank code? (Y,N) . . . . . Y  
Print reports in vendor name sequence? (Y,N) . . . . . N  
Calendar year for 1099 withholding . . . . . 2013  
Disbursement year/per . . . . . 2013/02  
Check date . . . . . 02/01/2013

PREPARED 02/01/2013, 9:20:04  
PROGRAM: GM339L  
CITY OF AURORA, ILLINOIS  
ACCOUNTS PAYABLE-OLD SECOND BANK

EXPENDITURE APPROVAL LIST  
AS OF: 02/01/2013 CHECK DATE: 02/01/2013

BANK: 95

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FUND 101 GENERAL FUND  
VEND NO SEQ# VENDOR NAME  
INVOICE VOUCHER P.O. BNK CHECK/DUE ACCOUNT ITEM CHECK EFT, EPAY OR  
NO NO NO DATE NO DESCRIPTION AMOUNT HAND-ISSUED  
AMOUNT  
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DEPT 10 EXECUTIVE DIV 10 COMMISSION-ELECTION

0008202 00 AURORA ELECTION COMMISSION,CK GRP-8  
PAYMENT 000763 95 01/29/2013 101-1010-414.45-92 50% OF OPERATING SUBSIDY 370,155.00

VENDOR TOTAL \* 370,155.00  
DEPARTMENT TOTAL \*\* 370,155.00

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FUND 101 GENERAL FUND  
VEND NO SEQ# VENDOR NAME  
INVOICE VOUCHER P.O. BNK CHECK/DUE ACCOUNT ITEM CHECK EFT, EPAY OR  
NO NO NO DATE NO DESCRIPTION AMOUNT HAND-ISSUED  
AMOUNT  
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DEPT 25 FINANCE DIV 02 ADMINISTRATION

0003754	00	NOTARIES ASSN OF ILLINOIS INC,CK GRP-8								
E. MOENKEMIER	000764		95	01/29/2013	101-2502-415.43-09	BONDING FEES & STAMP		39.00		
STATE/MOENKEMIE	000764		95	01/29/2013	101-2502-415.45-22	STATE NOTARY FEES		10.00		
						VENDOR TOTAL *		49.00		
						DEPARTMENT TOTAL **		49.00		

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BANK: 95

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 FUND 101 GENERAL FUND  
 VEND NO SEQ# VENDOR NAME  
 INVOICE VOUCHER P.O. BNK CHECK/DUE ACCOUNT ITEM CHECK EFT, EPAY OR  
 NO NO NO DATE NO NO DESCRIPTION AMOUNT HAND-ISSUED  
 AMOUNT  
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DEPT 25 FINANCE DIV 43 MAILROOM

0005122 00 U S POSTAL SERVICE-POSTAGE BY PHONE,CK GRP-8  
 35924588 000490 95 01/29/2013 101-2543-415.45-03 POSTAGE FOR CITY HALL 9,000.00

VENDOR TOTAL \* 9,000.00  
 DEPARTMENT TOTAL \*\* 9,000.00  
 FUND TOTAL \*\*\* 379,204.00

101 GENERAL FUND CASH ON HAND .00

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EXPENDITURE APPROVAL LIST  
 AS OF: 02/01/2013 CHECK DATE: 02/01/2013

BANK: 95

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 FUND 215 GAMING TAX FUND  
 VEND NO SEQ# VENDOR NAME  
 INVOICE VOUCHER P.O. BNK CHECK/DUE ACCOUNT ITEM CHECK EFT, EPAY OR  
 NO NO NO DATE NO NO DESCRIPTION AMOUNT HAND-ISSUED  
 AMOUNT  
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DEPT 18 DEVELOPMENT SERVICES DIV 30 ECONOMIC DEVELOPMENT

0000016 00 AURORA AREA CONVENTION &,CK GRP-8  
 GRANT 000490 95 01/29/2013 215-1830-465.50-22 GRANT FOR 1ST QUARTER 15,000.00

VENDOR TOTAL \* 15,000.00  
 DEPARTMENT TOTAL \*\* 15,000.00  
 FUND TOTAL \*\*\* 15,000.00

215 GAMING TAX FUND CASH ON HAND .00

BANK: 95

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FUND 255	SHAPE FUND									
VEND NO	SEQ#	VENDOR NAME							EFT, EPAY OR	
INVOICE	VOUCHER	P.O.	BNK	CHECK/DUE	ACCOUNT	ITEM	CHECK		HAND-ISSUED	
NO	NO	NO		DATE	NO	DESCRIPTION	AMOUNT		AMOUNT	
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DEPT 30	FIRE				DIV 33	FIRE				
0001933	00	FIRE SERVICE, INC								
38500	PI1053	270094	95	01/11/2013	255-3033-422.75-10	VEHICLES	784,648.00			
38499	PI1054	270095	95	01/11/2013	255-3033-422.75-10	VEHICLES	845,604.00			
						VENDOR TOTAL *	1,630,252.00			
						DEPARTMENT TOTAL **	1,630,252.00			
255	SHAPE FUND			CASH ON HAND	.00	FUND TOTAL ***	1,630,252.00			

BANK: 95

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 FUND 510 WATER & SEWER FUND  
 VEND NO SEQ# VENDOR NAME  
 INVOICE VOUCHER P.O. BNK CHECK/DUE ACCOUNT ITEM CHECK EFT, EPAY OR  
 NO NO NO DATE NO DESCRIPTION AMOUNT HAND-ISSUED  
 AMOUNT  
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DEPT 44 OPERATIONS DIV 70 WATER & SEWER MAINTENANCE

0007322 00 ILLINOIS DEPARTMENT OF REVENUE,CK GRP-8  
 349-74-4173 000490 95 01/29/2013 510-4470-511.38-45 LEVY PAYMENT-ELDON FOSTER 1,582.10

VENDOR TOTAL \* 1,582.10  
 DEPARTMENT TOTAL \*\* 1,582.10  
 FUND TOTAL \*\*\* 1,582.10

510 WATER & SEWER FUND CASH ON HAND .00

BANK: 95

FUND 602		EMPLOYEE HEALTH INSURANCE								EFT, EPAY OR
VEND NO	SEQ#	VENDOR NAME						CHECK	HAND-ISSUED	
INVOICE NO	VOUCHER NO	P.O. NO	BNK	CHECK/DUE DATE	ACCOUNT NO	ITEM DESCRIPTION		AMOUNT	AMOUNT	
DEPT 00				DIV 00						
0006919	00	ALLIED BENEFITS SYSTEMS,CK	GRP-Z							
268778	000680		95	01/31/2013	602-0000-410.28-02	ADMIN TPA FEES & STOP		11,043.30		
268778	000680		95	01/31/2013	602-0000-410.28-03	ADMIN TPA FEES & STOP		20,200.94		
268778	000680		95	01/31/2013	602-0000-410.28-04	ADMIN TPA FEES & STOP		12,512.10		
268778	000680		95	01/31/2013	602-0000-410.28-21	ADMIN TPA FEES & STOP		963.90		
268778	000680		95	01/31/2013	602-0000-410.28-04	ADMIN TPA FEES & STOP		752.50		
268778	000680		95	01/31/2013	602-0000-410.28-04	ADMIN TPA FEES & STOP		25.00		
						VENDOR TOTAL *		45,497.74		
						DEPARTMENT TOTAL **		45,497.74		
602		EMPLOYEE HEALTH INSURANCE		CASH ON HAND	.00	FUND TOTAL ***		45,497.74		
						TOTAL EXPENDITURES ****		2,071,535.84		
					GRAND TOTAL *****				2,071,535.84	