PREPARED 04/30/2014 10:15:55 EXPENDITURE APPROVAL LIST
PROGRAM: GM339L REPORT PARAMETER SELECTIONS

EAL DESCRIPTION: EAL: SPECIAL
VOUCHER SELECTION CRITERIA
Voucher/discount due date 04/30/2014
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 2014
Disbursement year/per 2014/04
Check date 04/30/2014

FUND 601 PROP & CASUALTY INSURANCE

VEND NO / INVOICE NO	SEQ#	VENDOR NAME / VOUCHER NO	P.O. NO	BNK	CHECK/DUE DATE	ACCOUNT NO	ITEM DESCRIPTION	CHECK AMOUNT	EFT, EPAY OR HAND-ISSUED AMOUNT
DEPT 00			DIV 00						
0006050	00	ALL SEASONS RESTORATION INC.,CK GRP-Z							
JOB1625		005167		95	04/30/2014	601-0000-410.40-84	WATER MAIN BREAK-CLEANUP	4,329.92	
							VENDOR TOTAL *	4,329.92	
0007745	00	TECALITLAN RESTAURANT,CK GRP-Z							
SETTLEMENT		005168		95	04/30/2014	601-0000-410.40-84	PROP DAMANGED-NO BUSINESS	6,400.89	
							VENDOR TOTAL *	6,400.89	
0008822	00	RJ KUHN PLUMBING HEATING COOLING,CK GRP-Z							
0000017382		005167		95	04/30/2014	601-0000-410.40-84	WATER MAIN BREAK-REPLACE	5,519.32	
							VENDOR TOTAL *	5,519.32	
9995997	00	SANDRA RAYFORD RP-Z							
SETTLEMENT		005167		95	04/30/2014	601-0000-410.40-84	LOSS OF BUSINESS-DUE TO	380.00	
							VENDOR TOTAL *	380.00	
9995997	00	DON'S DOWNTOWN INK, LTD RP-Z							
SETTLEMENT		005168		95	04/30/2014	601-0000-410.40-84	LOSS OF BUSINESS-DUE TO	2,100.00	
							VENDOR TOTAL *	2,100.00	
9995997	00	ZACHARY GOFORTH RP-Z							
SETTLEMENT		005168		95	04/30/2014	601-0000-410.40-84	PROP DAMANGED-NO BUSINESS	1,290.00	
							VENDOR TOTAL *	1,290.00	
							DEPARTMENT TOTAL **	20,020.13	
601		PROP & CASUALTY INSURANCE				CASH ON HAND .00	FUND TOTAL ***	20,020.13	
							TOTAL EXPENDITURES ****	20,020.13	
						GRAND TOTAL	**********		20,020.13

PREPARED 05/06/2014 11:32:40 EXPENDITURE APPROVAL LIST
PROGRAM: GM339L REPORT PARAMETER SELECTIONS

EAL DESCRIPTION: EAL: HAND TYPED CHECKS
VOUCHER SELECTION CRITERIA
Voucher/discount due date 05/06/2014
Bank code . . . . . 00 OLD SECOND NATIONAL BANK
REPORT SEQUENCE OPTIONS:
Vendor . . . . . One vendor per page? (Y,N) . . . . . N
Bank/Vendor . . . . . 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 2014
Disbursement year/per 2014/05
Check date 05/06/2014

FUND 101 GENERAL FUND

VEND NO / INVOICE NO	SEQ#	VENDOR NAME / VOUCHER NO	P.O. NO	BNK	CHECK/DUE DATE	ACCOUNT NO	ITEM DESCRIPTION	CHECK AMOUNT	EFT, EPAY OR HAND-ISSUED AMOUNT
DEPT 10	EXECUTIVE				DIV 07	BOARDS AND COMMISSIONS			
0008202	00	AURORA ELECTION COMMISSION							
PAYMENT		HANDCK		00	05/06/2014	101-1007-413.45-92	OPERATING SUBSIDY	CHECK #: 87321	78,741.92
							VENDOR TOTAL *	.00	78,741.92
							DEPARTMENT TOTAL **	.00	78,741.92

FUND 101 GENERAL FUND

VEND NO / INVOICE NO	SEQ#	VENDOR NAME / VOUCHER NO	P.O. NO	BNK	CHECK/DUE DATE	ACCOUNT NO	ITEM DESCRIPTION	CHECK AMOUNT	EFT, EPAY OR HAND-ISSUED AMOUNT
DEPT 44 PUBLIC PROPERTIES					DIV 30 MAINTENANCE SERVICES				
0005820	00	UNIVERSITY OF ILLINOIS-PSEP							
O'BRIEN&LANGE		HANDCK		00	05/06/2014	101-4430-418.42-01	PESTICIDE TRNG.5/6-7/14	CHECK #: 87322	80.00
							VENDOR TOTAL *	.00	80.00
							DEPARTMENT TOTAL **	.00	80.00
101	GENERAL FUND					CASH ON HAND 3,242,532.50	FUND TOTAL ***	.00	78,821.92
							HAND ISSUED TOTAL ***		78,821.92
							TOTAL EXPENDITURES ****	.00	78,821.92
						GRAND TOTAL	**********		78,821.92

PREPARED 05/06/2014 11:15:15 EXPENDITURE APPROVAL LIST
PROGRAM: GM339L REPORT PARAMETER SELECTIONS

EAL DESCRIPTION: EAL: SPECIAL
VOUCHER SELECTION CRITERIA
Voucher/discount due date 05/06/2014
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 2014
Disbursement year/per 2014/05
Check date 05/06/2014

FUND 602 EMPLOYEE HEALTH INSURANCE

VEND NO / INVOICE NO	SEQ#	VENDOR NAME / VOUCHER NO	P.O. NO	BNK	CHECK/DUE DATE	ACCOUNT NO	ITEM DESCRIPTION	CHECK AMOUNT	EFT, EPAY OR HAND-ISSUED AMOUNT
DEPT 00			DIV 00						
0006919	00	ALLIED BENEFITS SYSTEMS,CK GRP-Z							
312916		005750		95	05/06/2014	602-0000-410.28-02	ADMIN TPA FEES & STOP	10,866.45	
312916		005750		95	05/06/2014	602-0000-410.28-03	ADMIN TPA FEES & STOP	18,120.88	
312916		005750		95	05/06/2014	602-0000-410.28-04	ADMIN TPA FEES & STOP	12,473.62	
312916		005750		95	05/06/2014	602-0000-410.28-21	ADMIN TPA FEES & STOP	902.70	
312916		005750		95	05/06/2014	602-0000-410.28-04	ADMIN TPA FEES & STOP	45.00	
312916		005750		95	05/06/2014	602-0000-410.28-04	ADMIN TPA FEES & STOP	25.00	
							VENDOR TOTAL *	42,433.65	
0008360	00	DEARBORN NATIONAL,CK GRP-Z							
F017790		005750		95	05/06/2014	602-0000-410.28-26	GROUP LIFE INSURANCE	25,409.87	
							VENDOR TOTAL *	25,409.87	
							DEPARTMENT TOTAL **	67,843.52	
602	EMPLOYEE HEALTH INSURANCE		CASH ON HAND			.00	FUND TOTAL ***	67,843.52	
							TOTAL EXPENDITURES ****	67,843.52	
						GRAND TOTAL	**********		67,843.52