

AP466

Pre-Check Writing Report

For all A.P. GL Code

For all Holdback GL Code

Currency: LOCAL

Take all discounts: N

Report Sequence by Name: Y

Clear Invoices that net to zero: N

Direct Deposits Only: N

E-Paybles Only : N

Supplier Supplier

Code Name / Address

		Invoice	Invoice	Due	Discount	Invoice	Discount	Net
	Type	Number	Batch	Date	Date	Amount	To be taken	To be paid
03293	DI MARTINO/WSCFF DISABILITY TR							
	ATTN: LAURA ZIEBELL							
	1501 4TH AVENUE SUITE 2400							
	SEATTLE WA 98101							
	INVOICE 151202001							
		99415	12/01/15	12/01/15		678.01	.00	678.01
	Fund 636 FIRE DISTRICT #2					678.01		
	Check : 1 Supplier Total:					678.01	.00	678.01
01631	IAFF							
	C/O IAFF LOCAL 1758							
	PO BOX 981							
	ELLENBURG WA 98926							
	INVOICE 151202002							
		99415	12/01/15	12/01/15		940.14	.00	940.14
	Fund 636 FIRE DISTRICT #2					940.14		
	Check : 1 Supplier Total:					940.14	.00	940.14
00642	TRUSTEED PLANS SERVICE CORP							
	PO BOX 1894							
	TACOMA WA 98401							
	INVOICE 151202003							
		99415	12/01/15	12/01/15		20,037.52	.00	20,037.52
	Fund 636 FIRE DISTRICT #2					20,037.52		
	Check : 1 Supplier Total:					20,037.52	.00	20,037.52
D0613	WSCFF EMPLOYEE BENEFIT TRUST							
	BENEFIT SOLUTIONS INC							
	PO BOX 6							
	MUKILTEO WA 98275							
	INVOICE 151202004							
		99415	12/01/15	12/01/15		675.00	.00	675.00

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D0613	WSCFF EMPLOYEE BENEFIT TRUST						
	BENEFIT SOLUTIONS INC						
	PO BOX 6						
	MUKILTEO WA 98275						
	Fund 636 FIRE DISTRICT #2			675.00			
	Check	:	1	Supplier Total:	675.00	.00	675.00

Chc Regular To Issue	4	Check	:	4	Fund / Sub Fund	22,330.67	.00	22,330.67
Direct Dep. To Issue	0	Check	:	0	Fund / Sub Fund	.00	.00	.00
Total Payments	4	Check	:	4	Fund / Sub Fund	22,330.67	.00	22,330.67

Note: more Check may be required due to voids or multiple addresses per Supplier

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Invoice Expense Fund Distribution Summary

Fund 636 FIRE DISTRICT #2

22,330.67

Total Invoice Expense Distribution:

22,330.67