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: ${\tt N}$

 $\mbox{ Direct Deposits Only: N } \mbox{ E-Paybles Only: N } \mbox{ Check } \mbox{ Only: N } \mbox{ EDI Only: N } \mbox{ Comm. Card Only: N } \mbox{ } \mb$

Supplier	Supplier											
Code												
	Invoice			Invoice	Due	Discount	Invoice	Discount	Net			
	Type	Number	Batch	Date	Date	Date	Amount	To be taken	To be paid			
									_			
01683	AFLAC											
	*FIRE DISTR	ICT #2										
	INVOICE	160402001	L									
			101347	04/01/16	04/01/16		183.95	.00	183.95			
	Fun	d 636 FIF	RE DISTRICT	#2		183.95						
			Check	: 1	Supplier	Total:	183.95	.00	183.95			
00003	DEPARTMENT (OF LABOR &	S INDUSTRY									
	PO BOX 9003											
	EMPLOYER SE											
	OLYMPIA WA	98504										
	INVOICE	160402002	2									
			101347	04/01/16	04/01/16		7,312.74	.00	7,312.74			
	Fun	d 636 FIF	RE DISTRICT	#2		7,312.74						
			Check	: 1	Supplier	Total:	7,312.74	.00	7,312.74			
03293	DI MARTINO/	MCCEE DICZ	ADTITMY MD									
03293	ATTN: LAURA		ABILITY TR									
	1501 4TH AV		2400									
	SEATTLE WA											
		160402003	3									
			101347	04/01/16	04/01/16		1,028.39	.00	1,028.39			
	Fun	d 636 FIF	RE DISTRICT	#2		1,028.39						
			Check	: 1	Supplier	Total:	1,028.39	.00	1,028.39			
01631	IAFF											
	C/O IAFF LO	CAL 1758										
	ELLENSBURG	WA 00026										
		160402004	1									
	INVOICE	130402004		04/01/16	04/01/16		1,278.72	.00	1,278.72			
	Fun	d 636 FIF	RE DISTRICT		,,	1,278.72	=,=	. 30	_,			
						,						
			Check	: 1	Supplier	Total:	1,278.72	.00	1,278.72			

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Direct Deposits Only: N E-Paybles Only: N Check Only: N EDI Only: N Comm. Card Only: N

Supplion	Cumplion										
Supplier Supplier Code Name / Address											
code	Nume / He	Invoice		Invo	ice	Due	Discount	Invoice	Discount	Net	
	Type	Number	Batch	Date	•	Date	Date	Amount	To be taken	To be paid	
										_	
00642	0642 TRUSTEED PLANS SERVICE CORP										
	PO BOX 1894										
	TACOMA WA 98401										
INVOICE 160402005											
			101347	04/0	1/16	04/01/16		26,602.97	.00	26,602.97	
	Fur	d 636 F	IRE DISTRICT	#2			26,602.97				
			Check	:	1	Supplier	Total:	26,602.97	.00	26,602.97	
D0613	WSCFF EMPLO	YEE BENEI	TTT TRUST								
20013	D0613 WSCFF EMPLOYEE BENEFIT TRUST BENEFIT SOLUTIONS INC										
	ро вох 6										
	MUKILTEO WA 98275										
	INVOICE	16040200	06								
	101347		04/01/16 0		04/01/16		1,800.00	.00	1,800.00		
	Fur	d 636 F	RE DISTRICT	#2			1,800.00				
			Check	:	1	Supplier	Total:	1,800.00	.00	1,800.00	
		. 6									
Chc Regular To Issue			Check	:	6		/ Sub Fund	38,206.77	.00	38,206.77	
	ep. To Issue		Check	:	0		/ Sub Fund	.00	.00	.00	
Total Pa	yments	6	Check	:	6	Fund	/ Sub Fund	38,206.77	.00	38,206.77	

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

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Report Sequence by Name: Y

Clear Invoices that net to zero: ${\tt N}$

Direct Deposits Only: N E-Paybles Only: N Check Only: N EDI Only: N Comm. Card Only: N

Invoice Expense Fund Distribution Summary

Fund 636 FIRE DISTRICT #2

38,206.77

Total Invoice Expense Distribution: 38,206.77