

**CLAIMS PAYMENT REQUEST**

FROM: Orcas Island Health Care District Fund# 6541.00

Date: 10/15/2018

Invoice #	Description	Inv. Date	Vendor #	Vendor Name	Amount	Grant /Level	Bars #	1099
7873137	Advertisement	9/30/2018	sou100	Sound Publishing - ads for Town Halls	\$ 386.90		6541.00.561.00.41.0060	
3151	Accounting	10/1/2018	san180	San Juan County - Q3 2018 Quarterly Fees	\$ 130.54		6541.00.561.00.41.0020	
816424	Legal Services	9/12/2018	ogd100	Ogden Murphy Wallace, P.L.L.C.	\$ 4,573.50		6541.00.561.00.41.0030	
<b>TOTAL THIS PAGE</b>					<b>\$ 5,090.94</b>			

I, the undersigned, do hereby certify under penalty of perjury that the materials have been furnished, the services rendered or the labor performed as described herein, that any advance payment is due and payable pursuant to a contract or is available as an option for full or partial fulfillment of a contractual obligation, and that the claim is a just, due and unpaid obligation against the Orcas Island Health Care District, and that I am authorized to authenticate and certify to said claim.

I, the undersigned, do hereby certify under penalty of perjury that the claim is a just, due and unpaid obligation against the Orcas Island Health Care District, and that I am authorized to certify to said claim.

*Anne L. Presson*  
 Anne L. Presson, Superintendent

10/15/18  
 Date

*Patty Miller*  
 Patty Miller, Auditing Officer

10/15/18  
 Date

**Board Authorization**

As the duly elected board for this district we have reviewed the claims listed above (including original backup materials) totalling \$5090.94 for the period ending \_\_\_\_\_. We approve payment with our signatures below.

Art Lange, Commissioner

Date

Pegi Groundwater, Commissioner

Date

Diane Boteler, Commissioner

Date

Richard Frailick, Commissioner

Date

Patty Miller, Commissioner

Date

Note: It is the DISTRICTS' responsibility to maintain adequate, original, records to substantiate these claims.