

CLAIMS PAYMENT REQUEST


FROM: Orcas Island Health Care District Fund# 6541.00

Date: 6/13/2023 Page 1 of 1

Invoice #	Description	Inv. Date	Vendor #	Vendor Name	Amount	Grant /Level	Bars #	1099
400	Rock Island - June 2023	6/6/2023	ban155	Banner Bank	\$ 85.00		6541.00.561.00.42.0020	
400	OPALCO - Electric Bill - Clinic	5/30/2023	ban155	Banner Bank	\$ 555.06		6541.00.561.00.47.0010	
400	OPALCO - Electric Bill - District Office	5/30/2023	ban155	Banner Bank	\$ 123.65		6541.00.561.00.47.0011	
400	WSHA Retreat fee	6/12/2023	ban155	Banner Bank	\$ 499.00		6541.00.561.00.43.0010	
400	Midtowner Motel - WSHA retreat	6/12/2023	ban155	Banner Bank	\$ 150.26		6541.00.561.00.43.0020	
400	Eastsound Sewer & Water District	6/1/2023	ban155	Banner Bank	\$ 142.33		6541.00.561.00.47.0010	
400	San Juan Brewing - Peace Health Lunch	5/25/2023	ban155	Banner Bank	\$ 23.38		6541.00.561.00.43.0020	
400	Washington Alarm Inc. - Monthly fee	6/1/2023	ban155	Banner Bank	\$ 60.65		6541.00.561.00.47.0010	
400	Sound Publishing	4/30/2023	ban155	Banner Bank	\$ 197.25		6541.00.561.00.41.0060	
400	Foxes Boxes - clinic storage	6/8/2023	ban155	Banner Bank	\$ 270.75		6541.00.561.00.48.0010	
10797.01	Water Sewer - EWUA - Deye Ln	6/30/2023	eas350	EWUA	\$ 100.98		6541.00.561.00.47.0010	
10798.01	Water Sewer - EWUA - Deye Parcel	6/30/2023	eas350	EWUA	\$ 45.00		6541.00.561.00.47.0010	
50588	Technology Services	6/1/2023	nwt155	NW Technology	\$ 378.62		6541.00.561.00.42.0030	

TOTAL THIS PAGE \$ 2,631.93

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.



 Chris Chord, Superintendent

6/12/2023

 Date

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.

Pegi A Groundwater

Pegi Groundwater, Auditing Officer

6/13/2023

Date

Board Authorization

I attest that the duly elected board for the OIHCD has reviewed the claims listed above (including original backup materials) and have approved said claims by majority vote at a meeting open to the public.

Diane Boteler, Commissioner/Board Secretary

Date

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

apInAinv
06/12/2023 3:52:29PMInvoice Accounting Report
San Juan County

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Invoice #: 10797.01 Invoice Date: 06/12/2023 Doc Date: 06/12/2023 Due Date: 06/13/2023
Vendor #: eas350 Name: EASTSOUND WATER USERS ASSN Type: in

Line No	Line Description	Account Number	Amount	PO Number
1	EWUA - Deye Lane	E 6541.00.561.00.47.0010	100.98	
2	EWUA - Deye Parcel	E 6541.00.561.00.47.0010	45.00	
Invoice Total:			145.98	

Invoice #: 400 Invoice Date: 06/12/2023 Doc Date: 06/12/2023 Due Date: 06/12/2023
Vendor #: ban155 Name: BANNER BANK Type: in

Line No	Line Description	Account Number	Amount	PO Number
1	Rock Island June 2023	E 6541.00.561.00.42.0020	85.00	
2	OPALCO Electric Bill, Clinic	E 6541.00.561.00.47.0010	555.06	
3	OPALCO Electric Bill, District Office	E 6541.00.561.00.47.0011	123.65	
4	WSHA Retreat Fee	E 6541.00.561.00.43.0010	499.00	
5	Midtownder Motel - WSHA retreat	E 6541.00.561.00.43.0020	150.26	
6	Eastsound Sewer & Water District	E 6541.00.561.00.47.0010	142.33	
7	San Juan Brewing - Peace Health Lunch	E 6541.00.561.00.43.0020	23.38	
8	Washington Alarm	E 6541.00.561.00.47.0010	60.65	
9	Sound Publishing	E 6541.00.561.00.41.0060	197.25	
10	Foxes Boxes, clinic storage	E 6541.00.561.00.48.0010	270.75	
Invoice Total:			2,107.33	

Invoice #: 50588 Invoice Date: 06/12/2023 Doc Date: 06/12/2023 Due Date: 06/12/2023
Vendor #: nwt155 Name: NW TECHNOLOGY SOLUTIONS, LLC Type: in

Line No	Line Description	Account Number	Amount	PO Number
1	NW Technology	E 6541.00.561.00.42.0030	378.62	
Grand Total:			2,631.93	

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