

CLAIMS PAYMENT REQUEST

FROM: Orcas Island Health Care District Fund# 6541.00


Date: 5/8/2023

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Invoice #	Description	Inv. Date	Vendor #	Vendor Name	Amount	Grant /Level	Bars #	1099
400	NameSilo - annual domain registration	5/1/2023	ban155	Banner Bank	\$ 11.69		6541.00.561.00.42.0030	
400	SJC Treasurer Tax Area Levy	4/30/2023	ban155	Banner Bank	\$ 121.89		6541.00.561.10.49.0000	
400	Physician Meet/Greet catering	4/30/2023	ban155	Banner Bank	\$ 118.96		6541.00.561.00.49.0001	
400	Physician Meet/Greet catering	4/30/2023	ban155	Banner Bank	\$ 121.84		6541.00.561.00.49.0001	
400	Physician Meet/Greet catering	4/30/2023	ban155	Banner Bank	\$ 12.36		6541.00.561.00.49.0001	
400	Physician Meet/Greet catering	4/30/2023	ban155	Banner Bank	\$ 35.06		6541.00.561.00.49.0001	
400	Physician Meet/Greet catering	4/30/2023	ban155	Banner Bank	\$ 206.50		6541.00.561.00.49.0001	
400	USPS PO Box renewal	5/4/2023	ban155	Banner Bank	\$ 114.00		6541.00.561.00.45.0000	
400	Website hosting/management	5/8/2023	ban155	Banner Bank	\$ 250.00		6541.00.561.00.42.0030	
400	Eastsound Sewer & Water District	5/1/2023	ban155	Banner Bank	\$ 138.18		6541.00.561.00.47.0010	
400	Washington Alarm Inc. - Monthly fee	5/1/2023	ban155	Banner Bank	\$ 60.65		6541.00.561.00.47.0010	
3627	SJC Accounting	8/8/2022	sjcaudit	San Juan County Auditor	\$ 444.60		6541.00.561.00.41.0020	
3720	SJC Accounting	5/2/2023	sjcaudit	San Juan County Auditor	\$ 451.38		6541.00.561.00.41.0020	
4297	Clinic Pest Control	5/5/2023	san246	San Juan Pest Control	\$ 312.99		6541.00.561.00.48.0010	
10797.01	Water Sewer - EWUA - Deye Ln	5/31/2023	eas350	EWUA	\$ 102.59		6541.00.561.00.47.0010	
10798.01	Water Sewer - EWUA - Deye Parcel	5/31/2023	eas350	EWUA	\$ 45.00		6541.00.561.00.47.0010	
1493	Snow plowing	3/28/2023	tim1145	Timberline Construction	\$ 365.52		6541.00.561.00.48.0020	
20230425	Landscaping Service April	4/25/2023	gao155	Chihuahua Team Services	\$ 1,732.80		6541.00.561.00.48.0020	
50434	Technology Services	5/1/2023	nwt155	NW Technology	\$ 378.62		6541.00.561.00.42.0030	

TOTAL THIS PAGE \$ 5,024.63

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

5/8/2023

 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

5/8/2023

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.

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05/08/2023 3:30:34PMInvoice Accounting Report
San Juan County

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Invoice #: 10797.01 **Invoice Date:** 05/01/2023 **Doc Date:** 05/08/2023 **Due Date:** 05/02/2023
Vendor #: eas350 **Name:** EASTSOUND WATER USERS ASSN **Type:** in

<u>Line No</u>	<u>Line Description</u>	<u>Account Number</u>	<u>Amount</u>	<u>PO Number</u>
1	EWUA Deye Ln	E 6541.00.561.00.47.0010	102.59	

Invoice #: 10798.01 **Invoice Date:** 05/01/2023 **Doc Date:** 05/08/2023 **Due Date:** 05/02/2023
Vendor #: eas350 **Name:** EASTSOUND WATER USERS ASSN **Type:** in

<u>Line No</u>	<u>Line Description</u>	<u>Account Number</u>	<u>Amount</u>	<u>PO Number</u>
1	EWUA Deye Parcel	E 6541.00.561.00.47.0010	45.00	

Invoice #: 1493 **Invoice Date:** 03/28/2023 **Doc Date:** 05/08/2023 **Due Date:** 03/28/2023
Vendor #: nflint **Name:** FLINT, NORMAN **Type:** in

<u>Line No</u>	<u>Line Description</u>	<u>Account Number</u>	<u>Amount</u>	<u>PO Number</u>
1	Clinic snow plowing	E 6541.00.561.00.48.0020	365.52	

Invoice #: 20230425 **Invoice Date:** 04/25/2023 **Doc Date:** 05/08/2023 **Due Date:** 04/25/2023
Vendor #: gao155 **Name:** CHIHUAHUA TEAM **Type:** in

<u>Line No</u>	<u>Line Description</u>	<u>Account Number</u>	<u>Amount</u>	<u>PO Number</u>
1	Chihuahua Team Services - clinic	E 6541.00.561.00.48.0020	1,732.80	

Invoice #: 3627 **Invoice Date:** 08/08/2022 **Doc Date:** 05/08/2023 **Due Date:** 08/08/2022
Vendor #: sjcaudit **Name:** SAN JUAN CO AUDITOR **Type:** in

<u>Line No</u>	<u>Line Description</u>	<u>Account Number</u>	<u>Amount</u>	<u>PO Number</u>
1	San Juan County Auditor Accounting fees	E 6541.00.561.00.41.0020	444.60	

Invoice #: 3720 **Invoice Date:** 05/22/2023 **Doc Date:** 05/08/2023 **Due Date:** 05/22/2023
Vendor #: sjcaudit **Name:** SAN JUAN CO AUDITOR **Type:** in

<u>Line No</u>	<u>Line Description</u>	<u>Account Number</u>	<u>Amount</u>	<u>PO Number</u>
1	San Juan County Auditor Accounting fees	E 6541.00.561.00.41.0020	451.38	

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Invoice Accounting Report

San Juan County

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Invoice #: 400**Invoice Date:** 05/08/2023**Doc Date:** 05/08/2023**Due Date:** 05/08/2023**Vendor #:** ban155**Name:** BANNER BANK**Type:** in

<u>Line No</u>	<u>Line Description</u>	<u>Account Number</u>	<u>Amount</u>	<u>PO Number</u>
1	NameSilo - domain registration	E 6541.00.561.00.42.0030	11.69	
2	San Juan County Tax Area Levy	E 6541.00.561.10.49.0000	121.89	
3	Physician Meet & Greet catering	E 6541.00.561.00.49.0001	118.96	
4	Physician Meet & Greet catering	E 6541.00.561.00.49.0001	121.84	
5	Physician Meet & Greet catering	E 6541.00.561.00.49.0001	12.36	
6	Physican Meet & Greet catering	E 6541.00.561.00.49.0001	35.06	
7	Physician Meet & Greet catering	E 6541.00.561.00.49.0001	206.50	
8	USPS PO box renewal	E 6541.00.561.00.45.0000	114.00	
9	Streamline website hosting	E 6541.00.561.00.42.0030	250.00	
10	Eastsound Sewer & Water	E 6541.00.561.00.47.0010	138.18	
11	Washington Alarm monthly fee	E 6541.00.561.00.47.0010	60.65	

Invoice Total: 1,191.13**Invoice #:** 4297**Invoice Date:** 05/05/2023**Doc Date:** 05/08/2023**Due Date:** 05/06/2023**Vendor #:** san246**Name:** SAN JUAN PEST CONTROL**Type:** in

<u>Line No</u>	<u>Line Description</u>	<u>Account Number</u>	<u>Amount</u>	<u>PO Number</u>
1	Clinic pest control	E 6541.00.561.00.48.0010	312.99	

Invoice #: 50434**Invoice Date:** 05/01/2023**Doc Date:** 05/08/2023**Due Date:** 05/01/2023**Vendor #:** nwt155**Name:** NW TECHNOLOGY SOLUTIONS, LLC**Type:** in

<u>Line No</u>	<u>Line Description</u>	<u>Account Number</u>	<u>Amount</u>	<u>PO Number</u>
1	Technology services	E 6541.00.561.00.42.0030	378.62	

Grand Total: 5,024.63

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