

CLAIMS PAYMENT REQUEST

FROM: Orcas Island Health Care District Fund# 6541.00

Date: 4/2/2024

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Invoice #	Description	Inv. Date	Vendor #	Vendor Name	Amount	Grant /Level	Bars #	1099
400	Adobe Acrobat	3/11/2024	ban155	Banner Bank	\$ 52.01		6541.00.561.00.31.0002	
400	Fox's Boxes clinic storage	3/8/2024	ban155	Banner Bank	\$ 271.00		6541.00.561.00.48.0010	
400	OPALCO - clinic	2/15/2024	ban155	Banner Bank	\$ 1,030.23		6541.00.561.00.47.0010	
400	OPALCO - district office	2/15/2024	ban155	Banner Bank	\$ 154.26		6541.00.561.00.47.0011	
400	Rock Island - March 2024	3/7/2024	ban155	Banner Bank	\$ 85.00		6541.00.561.00.42.0020	
400	T-Mobile - February 2024	2/29/2024	ban155	Banner Bank	\$ 119.84		6541.00.561.00.42.0020	
400	Washington Alarm - March 2024	3/1/2024	ban155	Banner Bank	\$ 66.77		6541.00.561.00.31.0002	
400	Rural Health Capital Resources Class - Chord	3/11/2024	ban155	Banner Bank	\$ 300.00		6541.00.561.00.43.0010	
400	MRSC training, Public Records Act - Fraser	3/11/2024	ban155	Banner Bank	\$ 140.00		6541.00.561.00.43.0010	
400	Eastsound Sewer & Water District	3/1/2024	ban155	Banner Bank	\$ 148.27		6541.00.561.00.47.0010	
400	Zoom - annual fee	3/19/2024	ban155	Banner Bank	\$ 170.29		6541.00.561.00.31.0002	
400	Clinic tablet stand	3/5/2024	ban155	Banner Bank	\$ 148.38		6541.00.594.61.64.0004	
400	Clinic faucet replacement	3/19/2024	ban155	Banner Bank	\$ 214.76		6541.00.561.00.48.0010	
400	NWPHPC Leadership Institute Hotel	3/15/2024	ban155	Banner Bank	\$ 781.35		6541.00.561.00.43.0020	
400	Dental consultant lunch	3/5/2024	ban155	Banner Bank	\$ 51.92		6541.00.561.00.41.0070	
342024	Clinic maintenance hours	3/4/2024	cap144	Carl Capdeville	\$ 715.00		6541.00.561.00.48.0010	
4012024	NWPHPC Leadership Institute Expenses	4/1/2024	cho002	Chris Chord	\$ 227.04		6541.00.561.00.43.0020	
121683	CSD Attorneys	2/29/2024	chm100	CSD Attorneys at Law	\$ 804.00		6541.00.561.00.41.0070	
5772	Clinic landscaping	4/1/2024	nun155	Nunez Services LLC	\$ 303.52		6541.00.561.00.48.0020	
1018	Dental consultant	3/29/2024	den656	DentALL PLLC	\$ 3,000.00		6541.00.561.00.41.0070	

TOTAL THIS PAGE

\$ 8,783.64

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

4/2/2024

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 Groundwater, Auditing Officer

4/2/2024

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.

Mark Salierno, Commissioner/Board Secretary

Date

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

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04/01/2024 4:03:49PM

Invoice Accounting Report
San Juan County

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Invoice #: 1018 **Invoice Date:** 04/01/2024 **Doc Date:** 04/01/2024 **Due Date:** 04/01/2024
Vendor #: den656 **Name:** DENTALL PLLC **Type:** in

<u>Line No</u>	<u>Line Description</u>	<u>Account Number</u>	<u>Amount</u>	<u>PO Number</u>
1	Dental Consultant	E 6541.00.561.00.41.0070	3,000.00	

Invoice #: 121683 **Invoice Date:** 04/01/2024 **Doc Date:** 04/01/2024 **Due Date:** 04/02/2024
Vendor #: chm100 **Name:** CSD ATTORNEYS AT LAW **Type:** in

<u>Line No</u>	<u>Line Description</u>	<u>Account Number</u>	<u>Amount</u>	<u>PO Number</u>
1	CSC Attorneys at Law	E 6541.00.561.00.41.0070	804.00	

Invoice #: 342024 **Invoice Date:** 04/01/2024 **Doc Date:** 04/01/2024 **Due Date:** 04/01/2024
Vendor #: cap144 **Name:** CAPDEVILLE, CARL E. **Type:** in

<u>Line No</u>	<u>Line Description</u>	<u>Account Number</u>	<u>Amount</u>	<u>PO Number</u>
1	Clinic maintenance hours	E 6541.00.561.00.48.0010	715.00	

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Invoice Accounting Report

San Juan County

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Invoice #: 400 **Invoice Date:** 04/01/2024 **Doc Date:** 04/01/2024 **Due Date:** 04/01/2024
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	Adobe Acrobat	E 6541.00.561.00.31.0002	52.01	
2	Fox's Boxes clinic storage	E 6541.00.561.00.48.0010	271.00	
3	OPALCO - clinic	E 6541.00.561.00.47.0010	1,030.23	
4	OPALCO - district office	E 6541.00.561.00.47.0011	154.26	
5	Rock Island - March 2024	E 6541.00.561.00.42.0020	85.00	
6	T-Mobile - February 2024	E 6541.00.561.00.42.0020	119.84	
7	Washington Alarm - March 2024	E 6541.00.561.00.31.0002	66.77	
8	Rural Health Capital Resources Class -	E 6541.00.561.00.43.0010	300.00	
9	MRSC training, PRA - Fraser	E 6541.00.561.00.43.0010	140.00	
10	Eastsound Sewer & Water District	E 6541.00.561.00.47.0010	148.27	
11	Clinic faucet replacement	E 6541.00.561.00.48.0010	214.76	
12	NWPHPC Leadership Institute Hotel	E 6541.00.561.00.43.0020	781.35	
13	Dental Consultant lunch	E 6541.00.561.00.41.0070	51.92	
14	Clinic tablet stand	E 6541.00.594.61.64.0004	148.38	
15	Zoom - annual fee	E 6541.00.561.00.31.0002	170.29	
Invoice Total:			3,734.08	

Invoice #: 4012024 **Invoice Date:** 04/01/2024 **Doc Date:** 04/01/2024 **Due Date:** 04/01/2024
Vendor #: cho002 **Name:** CHORD, CHRISTOPHER RYAN **Type:** in

<u>Line No</u>	<u>Line Description</u>	<u>Account Number</u>	<u>Amount</u>	<u>PO Number</u>
1	NWPHPC Leadership Institute Expenses	E 6541.00.561.00.43.0020	227.04	

Invoice #: 5772 **Invoice Date:** 04/01/2024 **Doc Date:** 04/01/2024 **Due Date:** 04/01/2024
Vendor #: nun155 **Name:** NUNEZ SERVICES LLC **Type:** in

<u>Line No</u>	<u>Line Description</u>	<u>Account Number</u>	<u>Amount</u>	<u>PO Number</u>
1	Clinic landscaping	E 6541.00.561.00.48.0020	303.52	

Grand Total: **8,783.64**

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