

CLAIMS PAYMENT REQUEST

FROM: Orcas Island Health Care District Fund# 6541.00

Date: 7/15/2019

Invoice #	Description	Inv. Date	Vendor #	Vendor Name	Amount	Grant /Level	Bars #	1099
Jul-19	Training	6/24/2019	pre159	Anne Presson - reimbursement for MRSC Purchasing Workshop	\$ 125.00		6541.00.561.00.43.0010	
135871	Building Other Services	6/28/2019	har559	Hargis Engineers, Inc. - HVAC consulting services	\$ 8,900.00		6541.00.561.00.48.0030	
June 3-9	Printing	6/30/2019	rai160	Rainbow Services - printing plans for HVAC consultant	\$ 64.32		6541.00.561.00.49.0000	
7929968	Advertising	6/30/2019	sou100	Sound Publishing - article on state of PHD	\$ 50.00		6541.00.561.00.41.0060	
3253	Building Maintenance	7/8/2019	sut065	Sutherland Property Services - replace light bulbs in clinic	\$ 426.03		6541.00.561.00.48.0010	
35771	Technology Services	7/1/2019	nwt155	NW Technology - July Mo. Billing - Services	\$ 259.50		6541.00.561.00.41.0040	
35771	Technology Services	7/1/2019	nwt155	NW Technology - July Mo. Billing - Sales Tax	\$ 22.58		6541.00.561.00.41.0040	
TOTAL THIS PAGE					\$ 9,847.43			

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.


 Anne L. Presson, Superintendent

7/15/19
 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.


 Patty Miller or Richard Fralick, Auditing Officer

7/15/19
 Date

Board Authorization

As the duly elected board for the OIHCD we have reviewed the claims listed above (including original backup materials) totaling \$9847.43 for the period ending _____. We approve payment with our signatures below.

Art Lange, Commissioner	_____	Date	_____
			Pegi Groundwater, Commissioner

			Richard Fralick, Commissioner

			Patty Miller, Commissioner

			Date

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