

CLAIMS PAYMENT REQUEST

DISTRICT: PORT OF ORCAS

FUND # 6723

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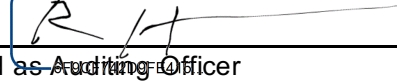
DATE: 1-Oct-24

SEE ATTACHED INVOICE ACCOUNTING REPORT

TOTAL CLAIMS \$36,367.96

I do hereby certify under penalty of perjury, that the materials have been furnished, the services rendered or the labor performed as described herein, and that the claim is just, due, and unpaid obligation against the district. I am authorized to authenticate and certify to these claims. Materials backing up these claims will be retained by the district according to state law and are available to the public on request.

DocuSigned by:



10/1/2024

Signed as Auditing Officer

Date

Signed as Chairman / Commissioner

Date

Board Authorization

As the duly elected board for this district we have reviewed the claims attached (including original backup materials) totaling \$ 36,367.96 for the period ending October 1, 2024 We approve payment with our signatures below.

Commissioner

Date

Commissioner

Date

Commissioner

Date

Commissioner

Date

apInAVnn
10/01/2024 5:24:04AM

Invoice Accounting Report by Vendor Name
San Juan County

Vendor Number: all244 **Name:** ALLIANT INSURANCE SVCS., INC.

<u>Invoice Number</u>	<u>Line No</u>	<u>Line Description</u>	<u>Account Number</u>	<u>Amount</u>	<u>Type</u>
2802756	1	24-25 Airport Liability Renewal	E 6723.00.546.10.46.0003	8,788.33	in

Vendor Number: asc155 **Name:** ASCENT AVIATION GROUP, INC.

<u>Invoice Number</u>	<u>Line No</u>	<u>Line Description</u>	<u>Account Number</u>	<u>Amount</u>	<u>Type</u>
1052636	1	Aviation fuel 09/23/2024	E 6723.00.546.10.32.0002	23,577.00	in

Vendor Number: cen657 **Name:** CENTURYLINK / LUMEN

<u>Invoice Number</u>	<u>Line No</u>	<u>Line Description</u>	<u>Account Number</u>	<u>Amount</u>	<u>Type</u>
300515092	1	Phone 2024 09 06	E 6723.00.546.10.42.0020	275.14	in

Vendor Number: cha091 **Name:** CHAPPYS SEPTIC SERVICE LLC

<u>Invoice Number</u>	<u>Line No</u>	<u>Line Description</u>	<u>Account Number</u>	<u>Amount</u>	<u>Type</u>
6951	1	Sanican - Aug 1	E 6723.00.546.10.47.0005	855.00	in

Vendor Number: chm100 **Name:** CSD ATTORNEYS AT LAW

<u>Invoice Number</u>	<u>Line No</u>	<u>Line Description</u>	<u>Account Number</u>	<u>Amount</u>	<u>Type</u>
125226	1	General Legal	E 6723.00.546.10.41.0005	56.00	in
125228	1	TTF Legal	E 6723.00.546.10.41.0005	405.36	in
Vendor Total:				461.36	

Vendor Number: mid002 **Name:** MIDNIGHT VENTURE

<u>Invoice Number</u>	<u>Line No</u>	<u>Line Description</u>	<u>Account Number</u>	<u>Amount</u>	<u>Type</u>
202409	1	Janitorial - Sept	E 6723.00.546.20.41.0001	965.51	in
	2	Tax - Janitorial	E 6723.00.546.20.41.0000	81.10	in
	3	Landscaping - Sept	E 6723.00.546.20.48.0006	263.13	in
	4	Tax - Landscaping	E 6723.00.546.20.48.0006	22.10	in
Vendor Total:				1,331.84	

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10/01/2024 5:24:04AM

Invoice Accounting Report by Vendor Name
San Juan County

Vendor Number: san180 **Name:** SAN JUAN COUNTY

<u>Invoice Number</u>	<u>Line No</u>	<u>Line Description</u>	<u>Account Number</u>	<u>Amount</u>	<u>Type</u>
03919	1	Accounting services - Q3	E 6723.00.546.10.41.0001	890.27	in

Vendor Number: san275 **Name:** SAN JUAN SANITATION, INC

<u>Invoice Number</u>	<u>Line No</u>	<u>Line Description</u>	<u>Account Number</u>	<u>Amount</u>	<u>Type</u>
2951110-SJ	1	Trash 20240831	E 6723.00.546.10.47.0004	189.02	in

Grand Total: 36,367.96

CLAIMS PAYMENT REQUEST

DISTRICT: PORT OF ORCAS

FUND # 6727

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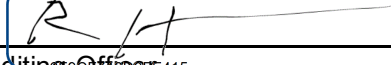
DATE: 1-Oct-24

SEE ATTACHED INVOICE ACCOUNTING REPORT

TOTAL CLAIMS \$4,045.05

I do hereby certify under penalty of perjury, that the materials have been furnished, the services rendered or the labor performed as described herein, and that the claim is just, due, and unpaid obligation against the district. I am authorized to authenticate and certify to these claims. Materials backing up these claims will be retained by the district according to state law and are available to the public on request.

DocuSigned by:



10/1/2024

Signed as Auditing Officer

Date

Signed as Chairman / Commissioner

Date

Board Authorization

As the duly elected board for this district we have reviewed the claims attached (including original backup materials) totaling \$ 4,045.05 for the period ending October 1, 2024 We approve payment with our signatures below.

Commissioner

Date

Commissioner

Date

Commissioner

Date

Commissioner

Date

aplAVnn
10/01/2024 5:33:20AM

Invoice Accounting Report by Vendor Name
San Juan County

Vendor Number: pre144 **Name:** PRECISION APPROACH ENGINEERING

<u>Invoice Number</u>	<u>Line No</u>	<u>Line Description</u>	<u>Account Number</u>	<u>Amount</u>	<u>Type</u>
6361	1	ORS-002 General Services	E 6727.00.594.46.61.0001	493.80	in
6362	1	ORS003 - ALP Update 3-53-0023-022-2023	E 6727.00.594.46.61.0001	1,801.25	in
Vendor Total:				<u>2,295.05</u>	

Vendor Number: wet925 **Name:** WETLAND RESOURCES INC

<u>Invoice Number</u>	<u>Line No</u>	<u>Line Description</u>	<u>Account Number</u>	<u>Amount</u>	<u>Type</u>
24063-0424	1	AIP Professional services	E 6727.00.594.46.61.0001	1,750.00	in
Grand Total:				<u>4,045.05</u>	

CLAIMS PAYMENT REQUEST

DISTRICT: PORT OF ORCAS

FUND # 6723

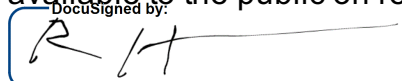
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DATE: 15-Oct-24

SEE ATTACHED INVOICE ACCOUNTING REPORT

TOTAL CLAIMS \$5,057.10

I do hereby certify under penalty of perjury, that the materials have been furnished, the services rendered or the labor performed as described herein, and that the claim is just, due, and unpaid obligation against the district. I am authorized to authenticate and certify to these claims. Materials backing up these claims will be retained by the district according to state law and are available to the public on request.

DocuSigned by:

6F0CF742B0FE415...
Signed as Auditing Officer 10/15/2024
Date

Signed as Chairman / Commissioner Date

Board Authorization

As the duly elected board for this district we have reviewed the claims attached (including original backup materials) totaling \$ 5,057.10 for the period ending October 15, 2024 We approve payment with our signatures below.

Commissioner Date

Commissioner Date

Commissioner Date

Commissioner Date

Invoice Accounting Report by Vendor Name
San Juan County

Vendor Number: eas310 **Name:** EASTSOUND SEWER & WATER DIST

<u>Invoice Number</u>	<u>Line No</u>	<u>Line Description</u>	<u>Account Number</u>	<u>Amount</u>	<u>Type</u>
0005	1	Sewer 09/30/2024	E 6723.00.546.10.47.0003	66.31	in
0229	1	Sewer 09/30/2024	E 6723.00.546.10.47.0003	153.56	in
0707	1	Sewer 09/30/2024	E 6723.00.546.10.47.0003	87.25	in
Vendor Total:				307.12	

Vendor Number: eas350 **Name:** EASTSOUND WATER USERS ASSN

<u>Invoice Number</u>	<u>Line No</u>	<u>Line Description</u>	<u>Account Number</u>	<u>Amount</u>	<u>Type</u>
10831.01	1	Water 09/30/2024	E 6723.00.546.10.47.0003	149.26	in
10832.01	1	Water 09/30/2024	E 6723.00.546.10.47.0003	83.16	in
10833.01	1	Water 09/30/2024	E 6723.00.546.10.47.0003	55.39	in
Vendor Total:				287.81	

Vendor Number: isl730 **Name:** ISLAND HARDWARE & SUPPLY

<u>Invoice Number</u>	<u>Line No</u>	<u>Line Description</u>	<u>Account Number</u>	<u>Amount</u>	<u>Type</u>
40846	1	Vehicle maint	E 6723.00.546.20.31.0007	63.59	in
	2	Janitorial	E 6723.00.546.10.31.0004	91.22	in
	3	Fence maint	E 6723.00.546.20.31.0011	100.52	in
	4	Building maint	E 6723.00.546.20.31.0009	15.48	in
Vendor Total:				270.81	

Vendor Number: isl144 **Name:** ISLAND PETROLEUM SERVICES

<u>Invoice Number</u>	<u>Line No</u>	<u>Line Description</u>	<u>Account Number</u>	<u>Amount</u>	<u>Type</u>
PortofOrcas	1	Fuel 202409	E 6723.00.546.10.32.0001	117.31	in

Vendor Number: orc830 **Name:** OPALCO

<u>Invoice Number</u>	<u>Line No</u>	<u>Line Description</u>	<u>Account Number</u>	<u>Amount</u>	<u>Type</u>
2493001	1	Power 09/30/2024	E 6723.00.546.10.47.0002	432.82	in
2493003	1	Power 09/30/2024	E 6723.00.546.10.47.0002	130.53	in

Invoice Accounting Report by Vendor Name
San Juan County

2493007	1	Power 09/30/2024	E	6723.00.546.10.47.0002	59.56	in
2493008	1	Power 09/30/2024	E	6723.00.546.10.47.0002	61.25	in
2493009	1	Power 09/30/2024	E	6723.00.546.10.47.0002	62.42	in
2493010	1	Power 09/30/2024	E	6723.00.546.10.47.0002	60.20	in
2493011	1	Power 09/30/2024	E	6723.00.546.10.47.0002	243.66	in
Vendor Total:					1,050.44	

Vendor Number: pet513 **Name:** PETTY CASH - PORT OF ORCAS

<u>Invoice Number</u>	<u>Line No</u>	<u>Line Description</u>	<u>Account Number</u>	<u>Amount</u>	<u>Type</u>
20241015	1	Vehicle reistration	E 6723.00.546.30.49.0090	119.50	in
	2	Alliant - insurance	E 6723.00.546.10.46.0003	1,360.00	in
	3	Zoom	E 6723.00.546.10.31.0002	10.00	in
	4	Proogressive - auto ins	E 6723.00.546.10.46.0003	804.00	in
Vendor Total:					2,293.50

Vendor Number: roc201 **Name:** ROCK ISLAND COMMUNICATIONS INC

<u>Invoice Number</u>	<u>Line No</u>	<u>Line Description</u>	<u>Account Number</u>	<u>Amount</u>	<u>Type</u>
536821	1	Internet	E 6723.00.546.10.42.0030	9.90	in
538841	1	Internet domain	E 6723.00.546.10.42.0030	20.00	in
Vendor Total:					29.90

Vendor Number: san275 **Name:** SAN JUAN SANITATION, INC

<u>Invoice Number</u>	<u>Line No</u>	<u>Line Description</u>	<u>Account Number</u>	<u>Amount</u>	<u>Type</u>
2905665-SJ	1	Trash 09/30/2024	E 6723.00.546.10.47.0004	352.13	in

Vendor Number: sta065 **Name:** STARR EXCAVATION

<u>Invoice Number</u>	<u>Line No</u>	<u>Line Description</u>	<u>Account Number</u>	<u>Amount</u>	<u>Type</u>
127852	1	Sanican 10/08/2024	E 6723.00.546.10.47.0005	160.00	in

Vendor Number: off003 **Name:** THE OFFICE CUPBOARD

<u>Invoice Number</u>	<u>Line No</u>	<u>Line Description</u>	<u>Account Number</u>	<u>Amount</u>	<u>Type</u>
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Invoice Accounting Report by Vendor Name
San Juan County

5285	1 Office supplies	E	6723.00.546.10.31.0002	7.13 in
	2 Janitorial supplies	E	6723.00.546.10.31.0004	180.95 in
			Vendor Total:	<u>188.08</u>
			Grand Total:	<u>5,057.10</u>

CLAIMS PAYMENT REQUEST

DISTRICT: PORT OF ORCAS

FUND # 6723

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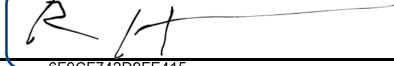
DATE: 22-Oct-24

SEE ATTACHED INVOICE ACCOUNTING REPORT

TOTAL CLAIMS \$279.69

I do hereby certify under penalty of perjury, that the materials have been furnished, the services rendered or the labor performed as described herein, and that the claim is just, due, and unpaid obligation against the district. I am authorized to authenticate and certify to these claims. Materials backing up these claims will be retained by the district according to state law and are available to the public on request.

DocuSigned by:



10/22/2024

Signed as Auditing Officer

Date

Signed as Chairman / Commissioner

Date

Board Authorization

As the duly elected board for this district we have reviewed the claims attached (including original backup materials) totaling \$ 279.69 for the period ending October 22, 2024 We approve payment with our signatures below.

Commissioner

Date

Commissioner

Date

Commissioner

Date

Commissioner

Date

apInAVnn
10/22/2024 6:09:09AM

Invoice Accounting Report by Vendor Name
San Juan County

Vendor Number: cen657 **Name:** CENTURYLINK / LUMEN

<u>Invoice Number</u>	<u>Line No</u>	<u>Line Description</u>	<u>Account Number</u>	<u>Amount</u>	<u>Type</u>
300515092	1	Phone 10/29/2024	E 6723.00.546.10.42.0020	279.69	in
Grand Total:				279.69	

CLAIMS PAYMENT REQUEST

DISTRICT: PORT OF ORCAS

FUND # 6727

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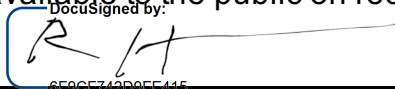
DATE: 22-Oct-24

SEE ATTACHED INVOICE ACCOUNTING REPORT

TOTAL CLAIMS \$1,947.22

I do hereby certify under penalty of perjury, that the materials have been furnished, the services rendered or the labor performed as described herein, and that the claim is just, due, and unpaid obligation against the district. I am authorized to authenticate and certify to these claims. Materials backing up these claims will be retained by the district according to state law and are available to the public on request.

DocuSigned by:



10/22/2024

Signed as Auditing Officer

Date

Signed as Chairman / Commissioner

Date

Board Authorization

As the duly elected board for this district we have reviewed the claims attached (including original backup materials) totaling \$ 1,947.22 for the period ending October 22, 2024 We approve payment with our signatures below.

Commissioner

Date

Commissioner

Date

Commissioner

Date

Commissioner

Date

apInAVnn
10/22/2024 6:09:50AM

Invoice Accounting Report by Vendor Name
San Juan County

Vendor Number: bos001 **Name:** BOSS CONSTRUCTION, INC

<u>Invoice Number</u>	<u>Line No</u>	<u>Line Description</u>	<u>Account Number</u>	<u>Amount</u>	<u>Type</u>
2	1	3-53-0023-021-2022 Bi-Plane	E 6727.00.594.46.61.0001	1,947.22	in
Grand Total:				1,947.22	