

**Cash Requirement Summary (APLT30)**

**Huerfano County**

Fund	Cash Account	Cash Balance	AP Cash Pending	GL Cash Pending	Cash Available
001 GENERAL FUND	001-00000-10200	\$94,873.05	(\$58,559.00)	\$0.00	\$36,314.05
002 ROAD & BRIDGE FUND	002-00000-10200	\$595,389.36	(\$54,854.00)	\$0.00	\$540,535.36
004 SPECIAL PROJECT FUND	004-00000-10200	(\$1,303,926.19)	(\$22,500.00)	\$0.00	(\$1,326,426.19)
069 EMERGENCY SERVICES FUND	069-00000-10200	(\$327,179.45)	(\$1,666.00)	\$0.00	(\$328,845.45)
<b>Grand Totals:</b>		<b>(\$940,843.23)</b>	<b>(\$137,579.00)</b>	<b>\$0.00</b>	<b>(\$1,078,422.23)</b>

Approved by-----

Approved on Date: \_\_\_\_\_

County Commissioner: \_\_\_\_\_

County Commissioner: \_\_\_\_\_

County Commissioner: \_\_\_\_\_

# Invoice Initial Approval

Huerfano County

Batch ID: Pre Pay KST

Batch Post-On Date: 3/10/2025

Status Invoice	Vendor Name	Invoice Date	Due Date	Invoice Amount	Approved Amount	Wire?	Approved?
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O	2025 March	COUNTY WORKERS'	3/7/2025	3/10/2025	\$115,079.00	\$115,079.00	<input type="checkbox"/>	<input type="checkbox"/>
	County Workers' Compensation Pool				<b>Bank:</b> 3	031236331	Entered By: giones	

GL Account	Distribution Description	GL Amount
001-50100-51446	County Workers' Compensation Pool	\$2,777.00
001-42135-51446	County Workers' Compensation Pool	\$1,025.00
001-42130-51446	County Workers' Compensation Pool	\$122.00
001-42120-51446	County Workers' Compensation Pool	\$19,524.00
001-42110-51446	County Workers' Compensation Pool	\$25,000.00
001-40600-51446	County Workers' Compensation Pool	\$5,361.00
001-40400-51446	County Workers' Compensation Pool	\$4,065.00
001-40250-51446	County Workers' Compensation Pool	\$330.00
001-40124-51446	County Workers' Compensation Pool	\$355.00
002-43080-51446	County Workers' Compensation Pool	\$54,854.00
069-49000-51446	County Workers' Compensation Pool	\$1,666.00
<b>Invoice GL Total:</b>		\$115,079.00

O	2024	HUERFANO COUNTY ECON	3/7/2025	3/10/2025	\$22,500.00	\$22,500.00	<input type="checkbox"/>	<input type="checkbox"/>
	Statement for Professional Services Provided by HCED Staff				<b>Bank:</b> 3	031236331	Entered By: giones	
	<b>GL Account</b>	<b>Distribution Description</b>			<b>GL Amount</b>			
	004-45100-51907	Statement for Professional Services Provided by HCED Staff			\$22,500.00			
	<b>Invoice GL Total:</b>				\$22,500.00			

Grand Total - Invoices: \$137,579.00 \$137,579.00

## Fund Totals for Selected Batch

Fund	Fund Name	Fund Total
001	GENERAL FUND	\$58,559.00
002	ROAD & BRIDGE FUND	\$54,854.00
004	SPECIAL PROJECT FUND	\$22,500.00
069	EMERGENCY SERVICES F	\$1,666.00
<b>Total All Funds:</b>		<b>\$137,579.00</b>