

BANK: ALL

VENDOR	NAME	ITEM #	G/L ACCOUNT	DESCRIPTION	CHECK#	AMOUNT
01-0966	DELTA DENTAL OF MINNESO	I-22F201907093620	101-21243	DENTAL FAMILY	000918	638.56
01-0966	DELTA DENTAL OF MINNESO	I-22F201907243690	101-21243	DENTAL FAMILY	000918	638.56
01-0966	DELTA DENTAL OF MINNESO	I-22S201907093620	101-21243	DENTAL SINGLE	000918	58.76
01-0966	DELTA DENTAL OF MINNESO	I-22S201907243690	101-21243	DENTAL SINGLE	000918	58.76
01-1358	INTERNAL REVENUE SERVIC	I-T1 201907243690	101-21221	FEDERAL W/H	000920	17,209.73
01-1358	INTERNAL REVENUE SERVIC	I-T3 201907243690	101-21222	SOCIAL SECURITY W/H	000920	10,762.80
01-1358	INTERNAL REVENUE SERVIC	I-T4 201907243690	101-21223	MEDICARE W/H	000920	3,364.67
01-1818	MN REVENUE	I-T2 201907243690	101-21224	STATE W/H	000922	9,013.52
01-2028	PERA OF MINNESOTA REG	I-11 201907243690	101-21226	PERA COUNCIL	000925	170.45
01-2028	PERA OF MINNESOTA REG	I-12 201907243690	101-21225	PERA POLICE AND FIRE	000925	7,055.29
01-2028	PERA OF MINNESOTA REG	I-13 201907243690	101-21225	PERA COORDINATED	000925	8,482.48
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201907093620	101-21231	FAMILY HSA 5000	000926	5,427.62
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201907243690	101-21231	FAMILY HSA 5000	000926	5,427.62
01-2321	SOUTHWEST WEST CENTRAL	I-FV5201907093620	101-21231	FAMILY VEBA 5000	000926	711.54
01-2321	SOUTHWEST WEST CENTRAL	I-FV5201907243690	101-21231	FAMILY VEBA 5000	000926	711.54
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201907093620	101-21231	SINGLE HSA 5000	000926	618.00
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201907243690	101-21231	SINGLE HSA 5000	000926	618.00
01-2321	SOUTHWEST WEST CENTRAL	I-SV5201907093620	101-21231	SINGLE VEBA 5000	000926	414.35
01-2321	SOUTHWEST WEST CENTRAL	I-SV5201907243690	101-21231	SINGLE VEBA 5000	000926	414.35
01-2512	NATIONWIDE RETIREMENT	I-33 201907243690	101-21251	USCM	000923	200.00
01-2513	NATIONWIDE RETIREMENT-F	I-34 201907243690	101-21252	USCM FIRE DEPT	000924	52.50
01-3443	VALIC DEFERRED COMP	I-35 201907243690	101-21257	VALIC DEFERRED COMP	000927	832.00
01-3443	VALIC DEFERRED COMP	I-35F201907243690	101-21257	VALIC - FIRE DEPARTMENT	000927	125.00
01-3443	VALIC DEFERRED COMP	I-35R201907243690	101-21255	VALIC ROTH	000927	600.00
01-3669	MINNESOTA STATE RETIREM	I-27A201907243690	101-21246	HEALTH CARE SAVINGS PLAN	000921	580.78
01-3669	MINNESOTA STATE RETIREM	I-27L201907243690	101-21246	HEALTH CARE SAVINGS PLAN	000921	1,275.00
01-3669	MINNESOTA STATE RETIREM	I-27N201907243690	101-21246	HEALTH CARE SAVINGS PLAN	000921	1,740.26
01-3669	MINNESOTA STATE RETIREM	I-27S201907243690	101-21246	HEALTH CARE SAVINGS PLAN	000921	200.00

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VENDOR	NAME	ITEM #	G/L ACCOUNT	DESCRIPTION	CHECK#	AMOUNT
01-3669	MINNESOTA STATE RETIREM	I-36 201907243690	101-21258	MNDP - DEFERRED COMP	000921	860.00
01-3669	MINNESOTA STATE RETIREM	I-36R201907243690	101-21259	MNDP - ROTH	000921	315.00
01-4805	FURTHER	I-HEC201907243690	101-21231	EMPLOYEE HSA CONTRIBUTION	000919	6,163.62
01-6085	VOYA - INVESTORS CHOICE	I-37D201907243690	101-21275	VOYA DEFERRED	000928	150.00
01-6085	VOYA - INVESTORS CHOICE	I-37R201907243690	101-21274	VOYA ROTH PLAN	000928	170.00
DEPARTMENT 0000 NON-DEPARTMENTAL					TOTAL:	85,060.76
01-1358	INTERNAL REVENUE SERVIC	I-T3 201907243690	101-40141-1122	SOCIAL SECURITY W/H	000920	82.90
01-1358	INTERNAL REVENUE SERVIC	I-T4 201907243690	101-40141-1125	MEDICARE W/H	000920	56.94
01-2028	PERA OF MINNESOTA REG	I-11 201907243690	101-40141-1121	PERA COUNCIL	000925	170.45
DEPARTMENT 0141 MAYOR & COUNCIL					TOTAL:	310.29
01-0966	DELTA DENTAL OF MINNESO	I-22F201907093620	101-50151-1132	DENTAL FAMILY	000918	868.62
01-0966	DELTA DENTAL OF MINNESO	I-22F201907093620	101-50151-1132	DENTAL FAMILY	000918	20.77
01-0966	DELTA DENTAL OF MINNESO	I-22F201907243690	101-50151-1132	DENTAL FAMILY	000918	855.19
01-0966	DELTA DENTAL OF MINNESO	I-22F201907243690	101-50151-1132	DENTAL FAMILY	000918	34.24
01-0966	DELTA DENTAL OF MINNESO	I-22S201907093620	101-50151-1132	DENTAL SINGLE	000918	90.45
01-0966	DELTA DENTAL OF MINNESO	I-22S201907243690	101-50151-1132	DENTAL SINGLE	000918	90.45
01-1358	INTERNAL REVENUE SERVIC	I-T3 201907243690	101-50151-1122	SOCIAL SECURITY W/H	000920	319.70
01-1358	INTERNAL REVENUE SERVIC	I-T4 201907243690	101-50151-1125	MEDICARE W/H	000920	841.02
01-1358	INTERNAL REVENUE SERVIC	I-T4 201907243690	101-50151-1125	MEDICARE W/H	000920	43.57
01-2028	PERA OF MINNESOTA REG	I-12 201907243690	101-50151-1121	PERA POLICE AND FIRE	000925	10,006.88
01-2028	PERA OF MINNESOTA REG	I-12 201907243690	101-50151-1121	PERA POLICE AND FIRE	000925	576.05
01-2028	PERA OF MINNESOTA REG	I-13 201907243690	101-50151-1121	PERA COORDINATED	000925	427.48
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201907093620	101-50151-1131	FAMILY HSA 5000	000926	10,447.31
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201907093620	101-50151-1131	FAMILY HSA 5000	000926	295.99
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201907243690	101-50151-1131	FAMILY HSA 5000	000926	10,255.23
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201907243690	101-50151-1131	FAMILY HSA 5000	000926	488.07
01-2321	SOUTHWEST WEST CENTRAL	I-FV5201907093620	101-50151-1131	FAMILY VEBA 5000	000926	612.07
01-2321	SOUTHWEST WEST CENTRAL	I-FV5201907243690	101-50151-1131	FAMILY VEBA 5000	000926	612.07
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201907093620	101-50151-1131	SINGLE HSA 5000	000926	1,390.25

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VENDOR	NAME	ITEM #	G/L ACCOUNT	DESCRIPTION	CHECK#	AMOUNT
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201907243690	101-50151-1131	SINGLE HSA 5000	000926	1,252.32
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201907243690	101-50151-1131	SINGLE HSA 5000	000926	137.93
01-2321	SOUTHWEST WEST CENTRAL	I-SV5201907093620	101-50151-1131	SINGLE VEBA 5000	000926	401.72
01-2321	SOUTHWEST WEST CENTRAL	I-SV5201907243690	101-50151-1131	SINGLE VEBA 5000	000926	401.85
01-4805	FURTHER	I-5FH201907243690	101-50151-1135	EMPLOYER CONTRIB FAM HSA 5000	000919	1,250.10
01-4805	FURTHER	I-5FV201907243690	101-50151-1135	EMPLOYER CONT FAM VEBA 5000	000919	187.50
01-4805	FURTHER	I-5SH201907243690	101-50151-1135	EMPLOYER CONTRIB SNGL HSA 500	000919	312.50
01-4805	FURTHER	I-5SV201907243690	101-50151-1135	EMPLOYER CONT SINGL VEBA 5000	000919	177.09
DEPARTMENT 0151 POLICE ADMINISTRATION TOTAL:						42,396.42
01-1358	INTERNAL REVENUE SERVIC	I-T3 201907243690	101-50156-1122	SOCIAL SECURITY W/H	000920	80.72
01-1358	INTERNAL REVENUE SERVIC	I-T4 201907243690	101-50156-1125	MEDICARE W/H	000920	18.89
01-2028	PERA OF MINNESOTA REG	I-13 201907243690	101-50156-1121	PERA COORDINATED	000925	87.19
DEPARTMENT 0156 CHEMICAL ASSESSMENT TE TOTAL:						186.80
01-0966	DELTA DENTAL OF MINNESO	I-22F201907093620	101-60162-1132	DENTAL FAMILY	000918	206.89
01-0966	DELTA DENTAL OF MINNESO	I-22F201907093620	101-60162-1132	DENTAL FAMILY	000918	3.45
01-0966	DELTA DENTAL OF MINNESO	I-22F201907093620	101-60162-1132	DENTAL FAMILY	000918	0.63
01-0966	DELTA DENTAL OF MINNESO	I-22F201907093620	101-60162-1132	DENTAL FAMILY	000918	0.63
01-0966	DELTA DENTAL OF MINNESO	I-22F201907093620	101-60162-1132	DENTAL FAMILY	000918	23.19
01-0966	DELTA DENTAL OF MINNESO	I-22F201907093620	101-60162-1132	DENTAL FAMILY	000918	6.71
01-0966	DELTA DENTAL OF MINNESO	I-22F201907093620	101-60162-1132	DENTAL FAMILY	000918	6.24
01-0966	DELTA DENTAL OF MINNESO	I-22F201907093620	101-60162-1132	DENTAL FAMILY	000918	4.77
01-0966	DELTA DENTAL OF MINNESO	I-22F201907093620	101-60162-1132	DENTAL FAMILY	000918	11.31
01-0966	DELTA DENTAL OF MINNESO	I-22F201907093620	101-60162-1132	DENTAL FAMILY	000918	1.26
01-0966	DELTA DENTAL OF MINNESO	I-22F201907093620	101-60162-1132	DENTAL FAMILY	000918	5.46
01-0966	DELTA DENTAL OF MINNESO	I-22F201907093620	101-60162-1132	DENTAL FAMILY	000918	9.61
01-0966	DELTA DENTAL OF MINNESO	I-22F201907243690	101-60162-1132	DENTAL FAMILY	000918	181.04
01-0966	DELTA DENTAL OF MINNESO	I-22F201907243690	101-60162-1132	DENTAL FAMILY	000918	4.40
01-0966	DELTA DENTAL OF MINNESO	I-22F201907243690	101-60162-1132	DENTAL FAMILY	000918	2.20
01-0966	DELTA DENTAL OF MINNESO	I-22F201907243690	101-60162-1132	DENTAL FAMILY	000918	26.05
01-0966	DELTA DENTAL OF MINNESO	I-22F201907243690	101-60162-1132	DENTAL FAMILY	000918	1.26
01-0966	DELTA DENTAL OF MINNESO	I-22F201907243690	101-60162-1132	DENTAL FAMILY	000918	2.20
01-0966	DELTA DENTAL OF MINNESO	I-22F201907243690	101-60162-1132	DENTAL FAMILY	000918	4.71
01-0966	DELTA DENTAL OF MINNESO	I-22F201907243690	101-60162-1132	DENTAL FAMILY	000918	1.88
01-0966	DELTA DENTAL OF MINNESO	I-22F201907243690	101-60162-1132	DENTAL FAMILY	000918	51.39
01-0966	DELTA DENTAL OF MINNESO	I-22S201907093620	101-60162-1132	DENTAL SINGLE	000918	1.21CR

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VENDOR	NAME	ITEM #	G/L ACCOUNT	DESCRIPTION	CHECK#	AMOUNT
01-0966	DELTA DENTAL OF MINNESO	I-22S201907093620	101-60162-1132	DENTAL SINGLE	000918	8.42
01-0966	DELTA DENTAL OF MINNESO	I-22S201907093620	101-60162-1132	DENTAL SINGLE	000918	10.88
01-0966	DELTA DENTAL OF MINNESO	I-22S201907243690	101-60162-1132	DENTAL SINGLE	000918	5.23CR
01-0966	DELTA DENTAL OF MINNESO	I-22S201907243690	101-60162-1132	DENTAL SINGLE	000918	0.90
01-0966	DELTA DENTAL OF MINNESO	I-22S201907243690	101-60162-1132	DENTAL SINGLE	000918	22.42
01-1358	INTERNAL REVENUE SERVIC	I-T3 201907243690	101-60162-1122	SOCIAL SECURITY W/H	000920	662.51
01-1358	INTERNAL REVENUE SERVIC	I-T3 201907243690	101-60162-1122	SOCIAL SECURITY W/H	000920	17.24
01-1358	INTERNAL REVENUE SERVIC	I-T3 201907243690	101-60162-1122	SOCIAL SECURITY W/H	000920	8.62
01-1358	INTERNAL REVENUE SERVIC	I-T3 201907243690	101-60162-1122	SOCIAL SECURITY W/H	000920	109.05
01-1358	INTERNAL REVENUE SERVIC	I-T3 201907243690	101-60162-1122	SOCIAL SECURITY W/H	000920	4.93
01-1358	INTERNAL REVENUE SERVIC	I-T3 201907243690	101-60162-1122	SOCIAL SECURITY W/H	000920	8.62
01-1358	INTERNAL REVENUE SERVIC	I-T3 201907243690	101-60162-1122	SOCIAL SECURITY W/H	000920	26.56
01-1358	INTERNAL REVENUE SERVIC	I-T3 201907243690	101-60162-1122	SOCIAL SECURITY W/H	000920	172.86
01-1358	INTERNAL REVENUE SERVIC	I-T3 201907243690	101-60162-1122	SOCIAL SECURITY W/H	000920	222.95
01-1358	INTERNAL REVENUE SERVIC	I-T4 201907243690	101-60162-1125	MEDICARE W/H	000920	154.94
01-1358	INTERNAL REVENUE SERVIC	I-T4 201907243690	101-60162-1125	MEDICARE W/H	000920	4.03
01-1358	INTERNAL REVENUE SERVIC	I-T4 201907243690	101-60162-1125	MEDICARE W/H	000920	2.02
01-1358	INTERNAL REVENUE SERVIC	I-T4 201907243690	101-60162-1125	MEDICARE W/H	000920	25.51
01-1358	INTERNAL REVENUE SERVIC	I-T4 201907243690	101-60162-1125	MEDICARE W/H	000920	1.15
01-1358	INTERNAL REVENUE SERVIC	I-T4 201907243690	101-60162-1125	MEDICARE W/H	000920	2.02
01-1358	INTERNAL REVENUE SERVIC	I-T4 201907243690	101-60162-1125	MEDICARE W/H	000920	6.21
01-1358	INTERNAL REVENUE SERVIC	I-T4 201907243690	101-60162-1125	MEDICARE W/H	000920	40.43
01-1358	INTERNAL REVENUE SERVIC	I-T4 201907243690	101-60162-1125	MEDICARE W/H	000920	52.14
01-2028	PERA OF MINNESOTA REG	I-13 201907243690	101-60162-1121	PERA COORDINATED	000925	836.84
01-2028	PERA OF MINNESOTA REG	I-13 201907243690	101-60162-1121	PERA COORDINATED	000925	22.91
01-2028	PERA OF MINNESOTA REG	I-13 201907243690	101-60162-1121	PERA COORDINATED	000925	11.45
01-2028	PERA OF MINNESOTA REG	I-13 201907243690	101-60162-1121	PERA COORDINATED	000925	140.70
01-2028	PERA OF MINNESOTA REG	I-13 201907243690	101-60162-1121	PERA COORDINATED	000925	6.54
01-2028	PERA OF MINNESOTA REG	I-13 201907243690	101-60162-1121	PERA COORDINATED	000925	11.45
01-2028	PERA OF MINNESOTA REG	I-13 201907243690	101-60162-1121	PERA COORDINATED	000925	34.55
01-2028	PERA OF MINNESOTA REG	I-13 201907243690	101-60162-1121	PERA COORDINATED	000925	209.34
01-2028	PERA OF MINNESOTA REG	I-13 201907243690	101-60162-1121	PERA COORDINATED	000925	253.90
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201907093620	101-60162-1131	FAMILY HSA 5000	000926	1,927.72
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201907093620	101-60162-1131	FAMILY HSA 5000	000926	136.62
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201907093620	101-60162-1131	FAMILY HSA 5000	000926	52.99
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201907093620	101-60162-1131	FAMILY HSA 5000	000926	120.86
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201907093620	101-60162-1131	FAMILY HSA 5000	000926	71.62
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201907243690	101-60162-1131	FAMILY HSA 5000	000926	1,206.17
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201907243690	101-60162-1131	FAMILY HSA 5000	000926	299.45
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201907243690	101-60162-1131	FAMILY HSA 5000	000926	732.57
01-2321	SOUTHWEST WEST CENTRAL	I-FV5201907093620	101-60162-1131	FAMILY VEBA 5000	000926	443.75
01-2321	SOUTHWEST WEST CENTRAL	I-FV5201907093620	101-60162-1131	FAMILY VEBA 5000	000926	61.21
01-2321	SOUTHWEST WEST CENTRAL	I-FV5201907093620	101-60162-1131	FAMILY VEBA 5000	000926	38.25
01-2321	SOUTHWEST WEST CENTRAL	I-FV5201907093620	101-60162-1131	FAMILY VEBA 5000	000926	15.30

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VENDOR	NAME	ITEM #	G/L ACCOUNT	DESCRIPTION	CHECK#	AMOUNT
01-2321	SOUTHWEST WEST CENTRAL	I-FV5201907093620	101-60162-1131	FAMILY VEBA 5000	000926	53.56
01-2321	SOUTHWEST WEST CENTRAL	I-FV5201907243690	101-60162-1131	FAMILY VEBA 5000	000926	558.52
01-2321	SOUTHWEST WEST CENTRAL	I-FV5201907243690	101-60162-1131	FAMILY VEBA 5000	000926	15.30
01-2321	SOUTHWEST WEST CENTRAL	I-FV5201907243690	101-60162-1131	FAMILY VEBA 5000	000926	15.30
01-2321	SOUTHWEST WEST CENTRAL	I-FV5201907243690	101-60162-1131	FAMILY VEBA 5000	000926	22.95
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201907093620	101-60162-1131	SINGLE HSA 5000	000926	29.11CR
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201907093620	101-60162-1131	SINGLE HSA 5000	000926	19.12
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201907093620	101-60162-1131	SINGLE HSA 5000	000926	3.48
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201907093620	101-60162-1131	SINGLE HSA 5000	000926	3.48
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201907093620	101-60162-1131	SINGLE HSA 5000	000926	31.28
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201907093620	101-60162-1131	SINGLE HSA 5000	000926	13.90
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201907093620	101-60162-1131	SINGLE HSA 5000	000926	129.47
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201907093620	101-60162-1131	SINGLE HSA 5000	000926	20.85
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201907093620	101-60162-1131	SINGLE HSA 5000	000926	15.64
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201907093620	101-60162-1131	SINGLE HSA 5000	000926	167.26
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201907243690	101-60162-1131	SINGLE HSA 5000	000926	78.63CR
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201907243690	101-60162-1131	SINGLE HSA 5000	000926	24.33
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201907243690	101-60162-1131	SINGLE HSA 5000	000926	12.16
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201907243690	101-60162-1131	SINGLE HSA 5000	000926	20.85
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201907243690	101-60162-1131	SINGLE HSA 5000	000926	6.95
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201907243690	101-60162-1131	SINGLE HSA 5000	000926	12.16
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201907243690	101-60162-1131	SINGLE HSA 5000	000926	33.02
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201907243690	101-60162-1131	SINGLE HSA 5000	000926	344.52
01-4805	FURTHER	I-5FH201907243690	101-60162-1135	EMPLOYER CONTRIB FAM HSA 5000	000919	260.44
01-4805	FURTHER	I-5FV201907243690	101-60162-1135	EMPLOYER CONT FAM VEBA 5000	000919	187.50
01-4805	FURTHER	I-5SH201907243690	101-60162-1135	EMPLOYER CONTRIB SNGL HSA 500	000919	84.37
DEPARTMENT 0162 ENGINEERING					TOTAL:	10,696.11
01-0966	DELTA DENTAL OF MINNESO	I-22F201907093620	101-60164-1132	DENTAL FAMILY	000918	222.35
01-0966	DELTA DENTAL OF MINNESO	I-22F201907243690	101-60164-1132	DENTAL FAMILY	000918	227.37
01-1358	INTERNAL REVENUE SERVIC	I-T3 201907243690	101-60164-1122	SOCIAL SECURITY W/H	000920	669.88
01-1358	INTERNAL REVENUE SERVIC	I-T4 201907243690	101-60164-1125	MEDICARE W/H	000920	156.66
01-2028	PERA OF MINNESOTA REG	I-13 201907243690	101-60164-1121	PERA COORDINATED	000925	941.30
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201907093620	101-60164-1131	FAMILY HSA 5000	000926	1,987.51
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201907243690	101-60164-1131	FAMILY HSA 5000	000926	2,059.13
01-2321	SOUTHWEST WEST CENTRAL	I-FV5201907093620	101-60164-1131	FAMILY VEBA 5000	000926	612.07
01-2321	SOUTHWEST WEST CENTRAL	I-FV5201907243690	101-60164-1131	FAMILY VEBA 5000	000926	612.07

BANK: ALL

VENDOR	NAME	ITEM #	G/L ACCOUNT	DESCRIPTION	CHECK#	AMOUNT
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201907093620	101-60164-1131	SINGLE HSA 5000	000926	180.73
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201907243690	101-60164-1131	SINGLE HSA 5000	000926	180.74
01-4805	FURTHER	I-5FH201907243690	101-60164-1135	EMPLOYER CONTRIB FAM HSA 5000	000919	239.60
01-4805	FURTHER	I-5FV201907243690	101-60164-1135	EMPLOYER CONT FAM VEBA 5000	000919	187.50
01-4805	FURTHER	I-5SH201907243690	101-60164-1135	EMPLOYER CONTRIB SNGL HSA 500	000919	40.63
DEPARTMENT 0164 COMMUNITY PLANNING					TOTAL:	8,317.54
01-1358	INTERNAL REVENUE SERVIC	I-T3 201907243690	101-70176-1122	SOCIAL SECURITY W/H	000920	878.76
01-1358	INTERNAL REVENUE SERVIC	I-T4 201907243690	101-70176-1125	MEDICARE W/H	000920	205.49
DEPARTMENT 0176 AQUATIC CENTER					TOTAL:	1,084.25
01-0966	DELTA DENTAL OF MINNESO	I-22F201907093620	101-60211-1132	DENTAL FAMILY	000918	133.51
01-0966	DELTA DENTAL OF MINNESO	I-22F201907093620	101-60211-1132	DENTAL FAMILY	000918	1.26
01-0966	DELTA DENTAL OF MINNESO	I-22F201907093620	101-60211-1132	DENTAL FAMILY	000918	33.92
01-0966	DELTA DENTAL OF MINNESO	I-22F201907093620	101-60211-1132	DENTAL FAMILY	000918	72.54
01-0966	DELTA DENTAL OF MINNESO	I-22F201907093620	101-60211-1132	DENTAL FAMILY	000918	45.88
01-0966	DELTA DENTAL OF MINNESO	I-22F201907093620	101-60211-1132	DENTAL FAMILY	000918	7.49
01-0966	DELTA DENTAL OF MINNESO	I-22F201907243690	101-60211-1132	DENTAL FAMILY	000918	50.07
01-0966	DELTA DENTAL OF MINNESO	I-22F201907243690	101-60211-1132	DENTAL FAMILY	000918	19.78
01-0966	DELTA DENTAL OF MINNESO	I-22F201907243690	101-60211-1132	DENTAL FAMILY	000918	13.50
01-0966	DELTA DENTAL OF MINNESO	I-22F201907243690	101-60211-1132	DENTAL FAMILY	000918	0.63
01-0966	DELTA DENTAL OF MINNESO	I-22F201907243690	101-60211-1132	DENTAL FAMILY	000918	40.20
01-0966	DELTA DENTAL OF MINNESO	I-22F201907243690	101-60211-1132	DENTAL FAMILY	000918	77.26
01-0966	DELTA DENTAL OF MINNESO	I-22F201907243690	101-60211-1132	DENTAL FAMILY	000918	52.04
01-0966	DELTA DENTAL OF MINNESO	I-22F201907243690	101-60211-1132	DENTAL FAMILY	000918	42.99
01-0966	DELTA DENTAL OF MINNESO	I-22S201907093620	101-60211-1132	DENTAL SINGLE	000918	3.96
01-0966	DELTA DENTAL OF MINNESO	I-22S201907093620	101-60211-1132	DENTAL SINGLE	000918	5.43
01-0966	DELTA DENTAL OF MINNESO	I-22S201907093620	101-60211-1132	DENTAL SINGLE	000918	5.99
01-0966	DELTA DENTAL OF MINNESO	I-22S201907093620	101-60211-1132	DENTAL SINGLE	000918	2.71
01-0966	DELTA DENTAL OF MINNESO	I-22S201907243690	101-60211-1132	DENTAL SINGLE	000918	0.57
01-0966	DELTA DENTAL OF MINNESO	I-22S201907243690	101-60211-1132	DENTAL SINGLE	000918	2.49
01-0966	DELTA DENTAL OF MINNESO	I-22S201907243690	101-60211-1132	DENTAL SINGLE	000918	0.90
01-0966	DELTA DENTAL OF MINNESO	I-22S201907243690	101-60211-1132	DENTAL SINGLE	000918	14.13
01-1358	INTERNAL REVENUE SERVIC	I-T3 201907243690	101-60211-1122	SOCIAL SECURITY W/H	000920	152.93
01-1358	INTERNAL REVENUE SERVIC	I-T3 201907243690	101-60211-1122	SOCIAL SECURITY W/H	000920	38.04
01-1358	INTERNAL REVENUE SERVIC	I-T3 201907243690	101-60211-1122	SOCIAL SECURITY W/H	000920	44.70
01-1358	INTERNAL REVENUE SERVIC	I-T3 201907243690	101-60211-1122	SOCIAL SECURITY W/H	000920	2.29
01-1358	INTERNAL REVENUE SERVIC	I-T3 201907243690	101-60211-1122	SOCIAL SECURITY W/H	000920	102.53
01-1358	INTERNAL REVENUE SERVIC	I-T3 201907243690	101-60211-1122	SOCIAL SECURITY W/H	000920	264.51

VENDOR SET: 01 City of Marshall
PACKET: 06949 7/26/19 PR 1w - 2
FUND : 101 GENERAL FUND
DEPARTMENT: 0211 STREET ADMINISTRATION

ITEMS PRINTED: PAID, UNPAID

BANK: ALL

VENDOR	NAME	ITEM #	G/L ACCOUNT	DESCRIPTION	CHECK#	AMOUNT
01-1358	INTERNAL REVENUE SERVIC	I-T3 201907243690	101-60211-1122	SOCIAL SECURITY W/H	000920	184.27
01-1358	INTERNAL REVENUE SERVIC	I-T3 201907243690	101-60211-1122	SOCIAL SECURITY W/H	000920	237.73
01-1358	INTERNAL REVENUE SERVIC	I-T3 201907243690	101-60211-1122	SOCIAL SECURITY W/H	000920	27.86
01-1358	INTERNAL REVENUE SERVIC	I-T4 201907243690	101-60211-1125	MEDICARE W/H	000920	35.76
01-1358	INTERNAL REVENUE SERVIC	I-T4 201907243690	101-60211-1125	MEDICARE W/H	000920	8.89
01-1358	INTERNAL REVENUE SERVIC	I-T4 201907243690	101-60211-1125	MEDICARE W/H	000920	10.46
01-1358	INTERNAL REVENUE SERVIC	I-T4 201907243690	101-60211-1125	MEDICARE W/H	000920	0.54
01-1358	INTERNAL REVENUE SERVIC	I-T4 201907243690	101-60211-1125	MEDICARE W/H	000920	23.98
01-1358	INTERNAL REVENUE SERVIC	I-T4 201907243690	101-60211-1125	MEDICARE W/H	000920	61.85
01-1358	INTERNAL REVENUE SERVIC	I-T4 201907243690	101-60211-1125	MEDICARE W/H	000920	43.10
01-1358	INTERNAL REVENUE SERVIC	I-T4 201907243690	101-60211-1125	MEDICARE W/H	000920	55.60
01-1358	INTERNAL REVENUE SERVIC	I-T4 201907243690	101-60211-1125	MEDICARE W/H	000920	6.52
01-2028	PERA OF MINNESOTA REG	I-13 201907243690	101-60211-1121	PERA COORDINATED	000925	208.34
01-2028	PERA OF MINNESOTA REG	I-13 201907243690	101-60211-1121	PERA COORDINATED	000925	56.88
01-2028	PERA OF MINNESOTA REG	I-13 201907243690	101-60211-1121	PERA COORDINATED	000925	63.02
01-2028	PERA OF MINNESOTA REG	I-13 201907243690	101-60211-1121	PERA COORDINATED	000925	3.20
01-2028	PERA OF MINNESOTA REG	I-13 201907243690	101-60211-1121	PERA COORDINATED	000925	140.16
01-2028	PERA OF MINNESOTA REG	I-13 201907243690	101-60211-1121	PERA COORDINATED	000925	350.15
01-2028	PERA OF MINNESOTA REG	I-13 201907243690	101-60211-1121	PERA COORDINATED	000925	243.45
01-2028	PERA OF MINNESOTA REG	I-13 201907243690	101-60211-1121	PERA COORDINATED	000925	324.98
01-2028	PERA OF MINNESOTA REG	I-13 201907243690	101-60211-1121	PERA COORDINATED	000925	37.54
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201907093620	101-60211-1131	FAMILY HSA 5000	000926	1,594.00
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201907093620	101-60211-1131	FAMILY HSA 5000	000926	17.91
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201907093620	101-60211-1131	FAMILY HSA 5000	000926	483.45
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201907093620	101-60211-1131	FAMILY HSA 5000	000926	626.74
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201907093620	101-60211-1131	FAMILY HSA 5000	000926	653.87
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201907093620	101-60211-1131	FAMILY HSA 5000	000926	106.72
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201907243690	101-60211-1131	FAMILY HSA 5000	000926	619.64
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201907243690	101-60211-1131	FAMILY HSA 5000	000926	282.01
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201907243690	101-60211-1131	FAMILY HSA 5000	000926	192.48
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201907243690	101-60211-1131	FAMILY HSA 5000	000926	8.95
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201907243690	101-60211-1131	FAMILY HSA 5000	000926	572.98
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201907243690	101-60211-1131	FAMILY HSA 5000	000926	814.70
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201907243690	101-60211-1131	FAMILY HSA 5000	000926	406.05
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201907243690	101-60211-1131	FAMILY HSA 5000	000926	612.66
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201907093620	101-60211-1131	SINGLE HSA 5000	000926	180.73
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201907093620	101-60211-1131	SINGLE HSA 5000	000926	241.56
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201907093620	101-60211-1131	SINGLE HSA 5000	000926	92.10
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201907093620	101-60211-1131	SINGLE HSA 5000	000926	41.71
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201907243690	101-60211-1131	SINGLE HSA 5000	000926	45.18
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201907243690	101-60211-1131	SINGLE HSA 5000	000926	149.45
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201907243690	101-60211-1131	SINGLE HSA 5000	000926	144.24
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201907243690	101-60211-1131	SINGLE HSA 5000	000926	217.23
01-2321	SOUTHWEST WEST CENTRAL	I-SV5201907093620	101-60211-1131	SINGLE VEBA 5000	000926	70.91

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VENDOR	NAME	ITEM #	G/L ACCOUNT	DESCRIPTION	CHECK#	AMOUNT
01-2321	SOUTHWEST WEST CENTRAL	I-SV5201907093620	101-60211-1131	SINGLE VEBA 5000	000926	17.73
01-2321	SOUTHWEST WEST CENTRAL	I-SV5201907093620	101-60211-1131	SINGLE VEBA 5000	000926	35.46
01-2321	SOUTHWEST WEST CENTRAL	I-SV5201907093620	101-60211-1131	SINGLE VEBA 5000	000926	112.28
01-2321	SOUTHWEST WEST CENTRAL	I-SV5201907243690	101-60211-1131	SINGLE VEBA 5000	000926	4.44CR
01-2321	SOUTHWEST WEST CENTRAL	I-SV5201907243690	101-60211-1131	SINGLE VEBA 5000	000926	67.96
01-2321	SOUTHWEST WEST CENTRAL	I-SV5201907243690	101-60211-1131	SINGLE VEBA 5000	000926	11.82
01-2321	SOUTHWEST WEST CENTRAL	I-SV5201907243690	101-60211-1131	SINGLE VEBA 5000	000926	107.85
01-2321	SOUTHWEST WEST CENTRAL	I-SV5201907243690	101-60211-1131	SINGLE VEBA 5000	000926	53.19
01-4805	FURTHER	I-5FH201907243690	101-60211-1135	EMPLOYER CONTRIB FAM HSA 5000	000919	408.36
01-4805	FURTHER	I-5SH201907243690	101-60211-1135	EMPLOYER CONTRIB SNGL HSA 500	000919	125.00
01-4805	FURTHER	I-5SV201907243690	101-60211-1135	EMPLOYER CONT SINGL VEBA 5000	000919	104.17
DEPARTMENT 0211 STREET ADMINISTRATION TOTAL:						12,571.18
01-0966	DELTA DENTAL OF MINNESO	I-22F201907093620	101-70276-1132	DENTAL FAMILY	000918	100.50
01-0966	DELTA DENTAL OF MINNESO	I-22F201907243690	101-70276-1132	DENTAL FAMILY	000918	100.50
01-0966	DELTA DENTAL OF MINNESO	I-22S201907093620	101-70276-1132	DENTAL SINGLE	000918	18.09
01-0966	DELTA DENTAL OF MINNESO	I-22S201907243690	101-70276-1132	DENTAL SINGLE	000918	18.09
01-1358	INTERNAL REVENUE SERVIC	I-T3 201907243690	101-70276-1122	SOCIAL SECURITY W/H	000920	1,292.77
01-1358	INTERNAL REVENUE SERVIC	I-T4 201907243690	101-70276-1125	MEDICARE W/H	000920	302.37
01-2028	PERA OF MINNESOTA REG	I-13 201907243690	101-70276-1121	PERA COORDINATED	000925	796.22
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201907093620	101-70276-1131	FAMILY HSA 5000	000926	716.22
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201907243690	101-70276-1131	FAMILY HSA 5000	000926	716.22
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201907093620	101-70276-1131	SINGLE HSA 5000	000926	278.05
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201907243690	101-70276-1131	SINGLE HSA 5000	000926	278.05
01-4805	FURTHER	I-5FH201907243690	101-70276-1135	EMPLOYER CONTRIB FAM HSA 5000	000919	83.34
01-4805	FURTHER	I-5SH201907243690	101-70276-1135	EMPLOYER CONTRIB SNGL HSA 500	000919	62.50
DEPARTMENT 0276 PARK MAINTENANCE & DEV TOTAL:						4,762.92
01-0966	DELTA DENTAL OF MINNESO	I-22F201907093620	101-60364-1132	DENTAL FAMILY	000918	15.88
01-0966	DELTA DENTAL OF MINNESO	I-22F201907093620	101-60364-1132	DENTAL FAMILY	000918	15.70
01-0966	DELTA DENTAL OF MINNESO	I-22F201907093620	101-60364-1132	DENTAL FAMILY	000918	9.40
01-0966	DELTA DENTAL OF MINNESO	I-22F201907093620	101-60364-1132	DENTAL FAMILY	000918	7.85
01-0966	DELTA DENTAL OF MINNESO	I-22F201907093620	101-60364-1132	DENTAL FAMILY	000918	4.95
01-0966	DELTA DENTAL OF MINNESO	I-22F201907093620	101-60364-1132	DENTAL FAMILY	000918	9.42

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VENDOR	NAME	ITEM #	G/L ACCOUNT	DESCRIPTION	CHECK#	AMOUNT
01-0966	DELTA DENTAL OF MINNESO	I-22F201907093620	101-60364-1132	DENTAL FAMILY	000918	7.54
01-0966	DELTA DENTAL OF MINNESO	I-22F201907093620	101-60364-1132	DENTAL FAMILY	000918	36.66
01-0966	DELTA DENTAL OF MINNESO	I-22F201907243690	101-60364-1132	DENTAL FAMILY	000918	24.50
01-0966	DELTA DENTAL OF MINNESO	I-22F201907243690	101-60364-1132	DENTAL FAMILY	000918	11.30
01-0966	DELTA DENTAL OF MINNESO	I-22F201907243690	101-60364-1132	DENTAL FAMILY	000918	6.28
01-0966	DELTA DENTAL OF MINNESO	I-22F201907243690	101-60364-1132	DENTAL FAMILY	000918	16.65
01-0966	DELTA DENTAL OF MINNESO	I-22F201907243690	101-60364-1132	DENTAL FAMILY	000918	2.51
01-0966	DELTA DENTAL OF MINNESO	I-22F201907243690	101-60364-1132	DENTAL FAMILY	000918	16.02
01-0966	DELTA DENTAL OF MINNESO	I-22F201907243690	101-60364-1132	DENTAL FAMILY	000918	13.19
01-0966	DELTA DENTAL OF MINNESO	I-22F201907243690	101-60364-1132	DENTAL FAMILY	000918	15.08
01-1358	INTERNAL REVENUE SERVIC	I-T3 201907243690	101-60364-1122	SOCIAL SECURITY W/H	000920	74.28
01-1358	INTERNAL REVENUE SERVIC	I-T3 201907243690	101-60364-1122	SOCIAL SECURITY W/H	000920	35.47
01-1358	INTERNAL REVENUE SERVIC	I-T3 201907243690	101-60364-1122	SOCIAL SECURITY W/H	000920	24.47
01-1358	INTERNAL REVENUE SERVIC	I-T3 201907243690	101-60364-1122	SOCIAL SECURITY W/H	000920	57.76
01-1358	INTERNAL REVENUE SERVIC	I-T3 201907243690	101-60364-1122	SOCIAL SECURITY W/H	000920	78.19
01-1358	INTERNAL REVENUE SERVIC	I-T3 201907243690	101-60364-1122	SOCIAL SECURITY W/H	000920	249.05
01-1358	INTERNAL REVENUE SERVIC	I-T3 201907243690	101-60364-1122	SOCIAL SECURITY W/H	000920	37.72
01-1358	INTERNAL REVENUE SERVIC	I-T3 201907243690	101-60364-1122	SOCIAL SECURITY W/H	000920	27.69
01-1358	INTERNAL REVENUE SERVIC	I-T4 201907243690	101-60364-1125	MEDICARE W/H	000920	17.36
01-1358	INTERNAL REVENUE SERVIC	I-T4 201907243690	101-60364-1125	MEDICARE W/H	000920	8.30
01-1358	INTERNAL REVENUE SERVIC	I-T4 201907243690	101-60364-1125	MEDICARE W/H	000920	5.72
01-1358	INTERNAL REVENUE SERVIC	I-T4 201907243690	101-60364-1125	MEDICARE W/H	000920	13.51
01-1358	INTERNAL REVENUE SERVIC	I-T4 201907243690	101-60364-1125	MEDICARE W/H	000920	18.28
01-1358	INTERNAL REVENUE SERVIC	I-T4 201907243690	101-60364-1125	MEDICARE W/H	000920	58.27
01-1358	INTERNAL REVENUE SERVIC	I-T4 201907243690	101-60364-1125	MEDICARE W/H	000920	8.82
01-1358	INTERNAL REVENUE SERVIC	I-T4 201907243690	101-60364-1125	MEDICARE W/H	000920	6.47
01-2028	PERA OF MINNESOTA REG	I-13 201907243690	101-60364-1121	PERA COORDINATED	000925	105.50
01-2028	PERA OF MINNESOTA REG	I-13 201907243690	101-60364-1121	PERA COORDINATED	000925	41.20
01-2028	PERA OF MINNESOTA REG	I-13 201907243690	101-60364-1121	PERA COORDINATED	000925	19.37
01-2028	PERA OF MINNESOTA REG	I-13 201907243690	101-60364-1121	PERA COORDINATED	000925	60.15
01-2028	PERA OF MINNESOTA REG	I-13 201907243690	101-60364-1121	PERA COORDINATED	000925	6.94
01-2028	PERA OF MINNESOTA REG	I-13 201907243690	101-60364-1121	PERA COORDINATED	000925	57.15
01-2028	PERA OF MINNESOTA REG	I-13 201907243690	101-60364-1121	PERA COORDINATED	000925	47.06
01-2028	PERA OF MINNESOTA REG	I-13 201907243690	101-60364-1121	PERA COORDINATED	000925	41.66
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201907093620	101-60364-1131	FAMILY HSA 5000	000926	226.37
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201907093620	101-60364-1131	FAMILY HSA 5000	000926	223.82
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201907093620	101-60364-1131	FAMILY HSA 5000	000926	133.92
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201907093620	101-60364-1131	FAMILY HSA 5000	000926	111.91
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201907093620	101-60364-1131	FAMILY HSA 5000	000926	70.64
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201907093620	101-60364-1131	FAMILY HSA 5000	000926	134.29
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201907093620	101-60364-1131	FAMILY HSA 5000	000926	107.43
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201907093620	101-60364-1131	FAMILY HSA 5000	000926	522.47
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201907243690	101-60364-1131	FAMILY HSA 5000	000926	349.16
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201907243690	101-60364-1131	FAMILY HSA 5000	000926	161.15
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201907243690	101-60364-1131	FAMILY HSA 5000	000926	89.53

BANK: ALL

VENDOR	NAME	ITEM #	G/L ACCOUNT	DESCRIPTION	CHECK#	AMOUNT
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201907243690	101-60364-1131	FAMILY HSA 5000	000926	237.24
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201907243690	101-60364-1131	FAMILY HSA 5000	000926	35.81
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201907243690	101-60364-1131	FAMILY HSA 5000	000926	228.30
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201907243690	101-60364-1131	FAMILY HSA 5000	000926	188.01
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201907243690	101-60364-1131	FAMILY HSA 5000	000926	214.87
01-4805	FURTHER	I-5FH201907243690	101-60364-1135	EMPLOYER CONTRIB FAM HSA 5000	000919	175.02
DEPARTMENT 0364 AIRPORT					TOTAL:	4,523.26
01-1358	INTERNAL REVENUE SERVIC	I-T3 201907243690	101-70377-1122	SOCIAL SECURITY W/H	000920	324.71
01-1358	INTERNAL REVENUE SERVIC	I-T4 201907243690	101-70377-1125	MEDICARE W/H	000920	76.03
DEPARTMENT 0377 MUNICIPAL BAND					TOTAL:	400.74
01-0966	DELTA DENTAL OF MINNESO	I-22F201907093620	101-50453-1132	DENTAL FAMILY	000918	15.11
01-0966	DELTA DENTAL OF MINNESO	I-22F201907243690	101-50453-1132	DENTAL FAMILY	000918	15.07
01-1358	INTERNAL REVENUE SERVIC	I-T3 201907243690	101-50453-1122	SOCIAL SECURITY W/H	000920	33.97
01-1358	INTERNAL REVENUE SERVIC	I-T4 201907243690	101-50453-1125	MEDICARE W/H	000920	7.95
01-2028	PERA OF MINNESOTA REG	I-13 201907243690	101-50453-1121	PERA COORDINATED	000925	44.12
01-2321	SOUTHWEST WEST CENTRAL	I-SV5201907093620	101-50453-1131	SINGLE VEBA 5000	000926	71.04
01-2321	SOUTHWEST WEST CENTRAL	I-SV5201907243690	101-50453-1131	SINGLE VEBA 5000	000926	70.91
01-4805	FURTHER	I-5SV201907243690	101-50453-1135	EMPLOYER CONT SINGL VEBA 5000	000919	31.25
DEPARTMENT 0453 ANIMAL IMPOUNDMENT					TOTAL:	289.42
01-0966	DELTA DENTAL OF MINNESO	I-22F201907093620	101-40671-1132	DENTAL FAMILY	000918	40.20
01-0966	DELTA DENTAL OF MINNESO	I-22F201907243690	101-40671-1132	DENTAL FAMILY	000918	40.20
01-0966	DELTA DENTAL OF MINNESO	I-22S201907093620	101-40671-1132	DENTAL SINGLE	000918	18.09
01-0966	DELTA DENTAL OF MINNESO	I-22S201907243690	101-40671-1132	DENTAL SINGLE	000918	18.09
01-1358	INTERNAL REVENUE SERVIC	I-T3 201907243690	101-40671-1122	SOCIAL SECURITY W/H	000920	214.63
01-1358	INTERNAL REVENUE SERVIC	I-T4 201907243690	101-40671-1125	MEDICARE W/H	000920	50.20
01-2028	PERA OF MINNESOTA REG	I-13 201907243690	101-40671-1121	PERA COORDINATED	000925	275.89
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201907093620	101-40671-1131	FAMILY HSA 5000	000926	572.98
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201907243690	101-40671-1131	FAMILY HSA 5000	000926	572.98

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VENDOR	NAME	ITEM #	G/L ACCOUNT	DESCRIPTION	CHECK#	AMOUNT
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201907093620	101-40671-1131	SINGLE HSA 5000	000926	278.05
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201907243690	101-40671-1131	SINGLE HSA 5000	000926	278.05
01-4805	FURTHER	I-5FH201907243690	101-40671-1135	EMPLOYER CONTRIB FAM HSA 5000	000919	66.67
01-4805	FURTHER	I-5SH201907243690	101-40671-1135	EMPLOYER CONTRIB SNGL HSA 500	000919	62.50
DEPARTMENT 0671 CABLE COMMISSION						TOTAL: 2,488.53
01-0966	DELTA DENTAL OF MINNESO	I-22F201907093620	101-70675-1132	DENTAL FAMILY	000918	100.50
01-0966	DELTA DENTAL OF MINNESO	I-22F201907243690	101-70675-1132	DENTAL FAMILY	000918	100.50
01-0966	DELTA DENTAL OF MINNESO	I-22S201907093620	101-70675-1132	DENTAL SINGLE	000918	18.09
01-0966	DELTA DENTAL OF MINNESO	I-22S201907243690	101-70675-1132	DENTAL SINGLE	000918	18.09
01-1358	INTERNAL REVENUE SERVIC	I-T3 201907243690	101-70675-1122	SOCIAL SECURITY W/H	000920	500.60
01-1358	INTERNAL REVENUE SERVIC	I-T4 201907243690	101-70675-1125	MEDICARE W/H	000920	117.07
01-2028	PERA OF MINNESOTA REG	I-13 201907243690	101-70675-1121	PERA COORDINATED	000925	633.24
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201907093620	101-70675-1131	FAMILY HSA 5000	000926	716.22
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201907243690	101-70675-1131	FAMILY HSA 5000	000926	716.22
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201907093620	101-70675-1131	SINGLE HSA 5000	000926	278.05
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201907243690	101-70675-1131	SINGLE HSA 5000	000926	278.05
01-2321	SOUTHWEST WEST CENTRAL	I-SV5201907093620	101-70675-1131	SINGLE VEBA 5000	000926	236.38
01-2321	SOUTHWEST WEST CENTRAL	I-SV5201907243690	101-70675-1131	SINGLE VEBA 5000	000926	236.38
01-4805	FURTHER	I-5FH201907243690	101-70675-1135	EMPLOYER CONTRIB FAM HSA 5000	000919	83.34
01-4805	FURTHER	I-5SH201907243690	101-70675-1135	EMPLOYER CONTRIB SNGL HSA 500	000919	62.50
01-4805	FURTHER	I-5SV201907243690	101-70675-1135	EMPLOYER CONT SINGL VEBA 5000	000919	104.17
DEPARTMENT 0675 COMM SERVICES ADMIN						TOTAL: 4,199.40
01-0966	DELTA DENTAL OF MINNESO	I-22F201907093620	101-40741-1132	DENTAL FAMILY	000918	100.50
01-0966	DELTA DENTAL OF MINNESO	I-22F201907243690	101-40741-1132	DENTAL FAMILY	000918	100.50
01-1358	INTERNAL REVENUE SERVIC	I-T3 201907243690	101-40741-1122	SOCIAL SECURITY W/H	000920	709.77
01-1358	INTERNAL REVENUE SERVIC	I-T4 201907243690	101-40741-1125	MEDICARE W/H	000920	166.01
01-2028	PERA OF MINNESOTA REG	I-13 201907243690	101-40741-1121	PERA COORDINATED	000925	923.76

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VENDOR	NAME	ITEM #	G/L ACCOUNT	DESCRIPTION	CHECK#	AMOUNT	
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201907093620	101-40741-1131	FAMILY HSA 5000	000926	1,432.44	
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201907243690	101-40741-1131	FAMILY HSA 5000	000926	1,432.44	
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201907093620	101-40741-1131	SINGLE HSA 5000	000926	278.05	
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201907243690	101-40741-1131	SINGLE HSA 5000	000926	278.05	
01-2321	SOUTHWEST WEST CENTRAL	I-SV5201907093620	101-40741-1131	SINGLE VEBA 5000	000926	236.38	
01-2321	SOUTHWEST WEST CENTRAL	I-SV5201907243690	101-40741-1131	SINGLE VEBA 5000	000926	236.38	
01-4805	FURTHER	I-5FH201907243690	101-40741-1135	EMPLOYER CONTRIB FAM HSA 5000	000919	166.68	
01-4805	FURTHER	I-5SH201907243690	101-40741-1135	EMPLOYER CONTRIB SNGL HSA 500	000919	62.50	
01-4805	FURTHER	I-5SV201907243690	101-40741-1135	EMPLOYER CONT SINGL VEBA 5000	000919	104.17	
DEPARTMENT 0741 CITY ADMINISTRATION						TOTAL:	6,227.63
01-0966	DELTA DENTAL OF MINNESO	I-22F201907093620	101-40821-1132	DENTAL FAMILY	000918	150.75	
01-0966	DELTA DENTAL OF MINNESO	I-22F201907243690	101-40821-1132	DENTAL FAMILY	000918	150.75	
01-1358	INTERNAL REVENUE SERVIC	I-T3 201907243690	101-40821-1122	SOCIAL SECURITY W/H	000920	506.08	
01-1358	INTERNAL REVENUE SERVIC	I-T4 201907243690	101-40821-1125	MEDICARE W/H	000920	118.37	
01-2028	PERA OF MINNESOTA REG	I-13 201907243690	101-40821-1121	PERA COORDINATED	000925	689.10	
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201907093620	101-40821-1131	FAMILY HSA 5000	000926	1,432.44	
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201907243690	101-40821-1131	FAMILY HSA 5000	000926	1,432.44	
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201907093620	101-40821-1131	SINGLE HSA 5000	000926	278.05	
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201907243690	101-40821-1131	SINGLE HSA 5000	000926	278.05	
01-4805	FURTHER	I-5FH201907243690	101-40821-1135	EMPLOYER CONTRIB FAM HSA 5000	000919	166.68	
01-4805	FURTHER	I-5SH201907243690	101-40821-1135	EMPLOYER CONTRIB SNGL HSA 500	000919	62.50	
DEPARTMENT 0821 FINANCE						TOTAL:	5,265.21
01-0966	DELTA DENTAL OF MINNESO	I-22F201907093620	101-70871-1132	DENTAL FAMILY	000918	50.25	
01-0966	DELTA DENTAL OF MINNESO	I-22F201907243690	101-70871-1132	DENTAL FAMILY	000918	50.25	
01-1358	INTERNAL REVENUE SERVIC	I-T3 201907243690	101-70871-1122	SOCIAL SECURITY W/H	000920	117.07	
01-1358	INTERNAL REVENUE SERVIC	I-T3 201907243690	101-70871-1122	SOCIAL SECURITY W/H	000920	23.72	
01-1358	INTERNAL REVENUE SERVIC	I-T3 201907243690	101-70871-1122	SOCIAL SECURITY W/H	000920	29.30	
01-1358	INTERNAL REVENUE SERVIC	I-T3 201907243690	101-70871-1122	SOCIAL SECURITY W/H	000920	32.10	
01-1358	INTERNAL REVENUE SERVIC	I-T3 201907243690	101-70871-1122	SOCIAL SECURITY W/H	000920	131.69	
01-1358	INTERNAL REVENUE SERVIC	I-T3 201907243690	101-70871-1122	SOCIAL SECURITY W/H	000920	149.59	

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VENDOR	NAME	ITEM #	G/L ACCOUNT	DESCRIPTION	CHECK#	AMOUNT
01-1358	INTERNAL REVENUE SERVIC	I-T3 201907243690	101-70871-1122	SOCIAL SECURITY W/H	000920	155.86
01-1358	INTERNAL REVENUE SERVIC	I-T4 201907243690	101-70871-1125	MEDICARE W/H	000920	27.38
01-1358	INTERNAL REVENUE SERVIC	I-T4 201907243690	101-70871-1125	MEDICARE W/H	000920	5.55
01-1358	INTERNAL REVENUE SERVIC	I-T4 201907243690	101-70871-1125	MEDICARE W/H	000920	6.85
01-1358	INTERNAL REVENUE SERVIC	I-T4 201907243690	101-70871-1125	MEDICARE W/H	000920	7.51
01-1358	INTERNAL REVENUE SERVIC	I-T4 201907243690	101-70871-1125	MEDICARE W/H	000920	30.80
01-1358	INTERNAL REVENUE SERVIC	I-T4 201907243690	101-70871-1125	MEDICARE W/H	000920	35.00
01-1358	INTERNAL REVENUE SERVIC	I-T4 201907243690	101-70871-1125	MEDICARE W/H	000920	36.47
01-2028	PERA OF MINNESOTA REG	I-13 201907243690	101-70871-1121	PERA COORDINATED	000925	144.00
DEPARTMENT 0871 COMM ED-SUMMER					TOTAL:	1,033.39
01-0966	DELTA DENTAL OF MINNESO	I-22F201907093620	101-40931-1132	DENTAL FAMILY	000918	50.25
01-0966	DELTA DENTAL OF MINNESO	I-22F201907243690	101-40931-1132	DENTAL FAMILY	000918	50.25
01-0966	DELTA DENTAL OF MINNESO	I-22S201907093620	101-40931-1132	DENTAL SINGLE	000918	35.73
01-0966	DELTA DENTAL OF MINNESO	I-22S201907093620	101-40931-1132	DENTAL SINGLE	000918	0.45
01-0966	DELTA DENTAL OF MINNESO	I-22S201907243690	101-40931-1132	DENTAL SINGLE	000918	35.96
01-0966	DELTA DENTAL OF MINNESO	I-22S201907243690	101-40931-1132	DENTAL SINGLE	000918	0.22
01-1358	INTERNAL REVENUE SERVIC	I-T3 201907243690	101-40931-1122	SOCIAL SECURITY W/H	000920	421.52
01-1358	INTERNAL REVENUE SERVIC	I-T3 201907243690	101-40931-1122	SOCIAL SECURITY W/H	000920	1.46
01-1358	INTERNAL REVENUE SERVIC	I-T4 201907243690	101-40931-1125	MEDICARE W/H	000920	98.58
01-1358	INTERNAL REVENUE SERVIC	I-T4 201907243690	101-40931-1125	MEDICARE W/H	000920	0.34
01-2028	PERA OF MINNESOTA REG	I-13 201907243690	101-40931-1121	PERA COORDINATED	000925	603.59
01-2028	PERA OF MINNESOTA REG	I-13 201907243690	101-40931-1121	PERA COORDINATED	000925	2.18
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201907093620	101-40931-1131	FAMILY HSA 5000	000926	2,130.75
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201907093620	101-40931-1131	FAMILY HSA 5000	000926	17.91
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201907243690	101-40931-1131	FAMILY HSA 5000	000926	2,140.00
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201907243690	101-40931-1131	FAMILY HSA 5000	000926	8.66
01-4805	FURTHER	I-5FH201907243690	101-40931-1135	EMPLOYER CONTRIB FAM HSA 5000	000919	250.02
DEPARTMENT 0931 APPRAISING & ASSESSING					TOTAL:	5,847.87
01-0966	DELTA DENTAL OF MINNESO	I-22F201907093620	101-70971-1132	DENTAL FAMILY	000918	50.25
01-0966	DELTA DENTAL OF MINNESO	I-22F201907243690	101-70971-1132	DENTAL FAMILY	000918	50.25
01-1358	INTERNAL REVENUE SERVIC	I-T3 201907243690	101-70971-1122	SOCIAL SECURITY W/H	000920	126.07
01-1358	INTERNAL REVENUE SERVIC	I-T3 201907243690	101-70971-1122	SOCIAL SECURITY W/H	000920	9.61
01-1358	INTERNAL REVENUE SERVIC	I-T3 201907243690	101-70971-1122	SOCIAL SECURITY W/H	000920	22.32
01-1358	INTERNAL REVENUE SERVIC	I-T3 201907243690	101-70971-1122	SOCIAL SECURITY W/H	000920	128.05

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VENDOR	NAME	ITEM #	G/L ACCOUNT	DESCRIPTION	CHECK#	AMOUNT
01-1358	INTERNAL REVENUE SERVIC	I-T3 201907243690	101-70971-1122	SOCIAL SECURITY W/H	000920	194.00
01-1358	INTERNAL REVENUE SERVIC	I-T3 201907243690	101-70971-1122	SOCIAL SECURITY W/H	000920	30.74
01-1358	INTERNAL REVENUE SERVIC	I-T4 201907243690	101-70971-1125	MEDICARE W/H	000920	29.48
01-1358	INTERNAL REVENUE SERVIC	I-T4 201907243690	101-70971-1125	MEDICARE W/H	000920	2.25
01-1358	INTERNAL REVENUE SERVIC	I-T4 201907243690	101-70971-1125	MEDICARE W/H	000920	5.22
01-1358	INTERNAL REVENUE SERVIC	I-T4 201907243690	101-70971-1125	MEDICARE W/H	000920	29.95
01-1358	INTERNAL REVENUE SERVIC	I-T4 201907243690	101-70971-1125	MEDICARE W/H	000920	45.36
01-1358	INTERNAL REVENUE SERVIC	I-T4 201907243690	101-70971-1125	MEDICARE W/H	000920	7.20
01-2028	PERA OF MINNESOTA REG	I-13 201907243690	101-70971-1121	PERA COORDINATED	000925	180.00
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201907093620	101-70971-1131	FAMILY HSA 5000	000926	716.22
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201907243690	101-70971-1131	FAMILY HSA 5000	000926	716.22
01-4805	FURTHER	I-5FH201907243690	101-70971-1135	EMPLOYER CONTRIB FAM HSA 5000	000919	83.34
DEPARTMENT 0971 RECREATION-SUMMER					TOTAL:	2,426.53
01-1358	INTERNAL REVENUE SERVIC	I-T3 201907243690	101-70979-1122	SOCIAL SECURITY W/H	000920	139.50
01-1358	INTERNAL REVENUE SERVIC	I-T3 201907243690	101-70979-1122	SOCIAL SECURITY W/H	000920	9.61
01-1358	INTERNAL REVENUE SERVIC	I-T4 201907243690	101-70979-1125	MEDICARE W/H	000920	32.63
01-1358	INTERNAL REVENUE SERVIC	I-T4 201907243690	101-70979-1125	MEDICARE W/H	000920	2.25
DEPARTMENT 0979 RECREATION-WINTER					TOTAL:	183.99
01-0966	DELTA DENTAL OF MINNESO	I-22F201907093620	101-41231-1132	DENTAL FAMILY	000918	40.19
01-0966	DELTA DENTAL OF MINNESO	I-22F201907093620	101-41231-1132	DENTAL FAMILY	000918	0.16
01-0966	DELTA DENTAL OF MINNESO	I-22F201907093620	101-41231-1132	DENTAL FAMILY	000918	7.85
01-0966	DELTA DENTAL OF MINNESO	I-22F201907093620	101-41231-1132	DENTAL FAMILY	000918	0.79
01-0966	DELTA DENTAL OF MINNESO	I-22F201907093620	101-41231-1132	DENTAL FAMILY	000918	1.26
01-0966	DELTA DENTAL OF MINNESO	I-22F201907243690	101-41231-1132	DENTAL FAMILY	000918	0.63CR
01-0966	DELTA DENTAL OF MINNESO	I-22F201907243690	101-41231-1132	DENTAL FAMILY	000918	6.60
01-0966	DELTA DENTAL OF MINNESO	I-22F201907243690	101-41231-1132	DENTAL FAMILY	000918	37.37
01-0966	DELTA DENTAL OF MINNESO	I-22F201907243690	101-41231-1132	DENTAL FAMILY	000918	4.40
01-0966	DELTA DENTAL OF MINNESO	I-22F201907243690	101-41231-1132	DENTAL FAMILY	000918	2.51
01-0966	DELTA DENTAL OF MINNESO	I-22S201907093620	101-41231-1132	DENTAL SINGLE	000918	2.04
01-0966	DELTA DENTAL OF MINNESO	I-22S201907093620	101-41231-1132	DENTAL SINGLE	000918	16.05
01-0966	DELTA DENTAL OF MINNESO	I-22S201907243690	101-41231-1132	DENTAL SINGLE	000918	9.04
01-0966	DELTA DENTAL OF MINNESO	I-22S201907243690	101-41231-1132	DENTAL SINGLE	000918	9.05
01-1358	INTERNAL REVENUE SERVIC	I-T3 201907243690	101-41231-1122	SOCIAL SECURITY W/H	000920	52.48
01-1358	INTERNAL REVENUE SERVIC	I-T3 201907243690	101-41231-1122	SOCIAL SECURITY W/H	000920	17.11
01-1358	INTERNAL REVENUE SERVIC	I-T3 201907243690	101-41231-1122	SOCIAL SECURITY W/H	000920	32.87
01-1358	INTERNAL REVENUE SERVIC	I-T3 201907243690	101-41231-1122	SOCIAL SECURITY W/H	000920	143.48

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VENDOR	NAME	ITEM #	G/L ACCOUNT	DESCRIPTION	CHECK#	AMOUNT
01-1358	INTERNAL REVENUE SERVIC	I-T3 201907243690	101-41231-1122	SOCIAL SECURITY W/H	000920	39.52
01-1358	INTERNAL REVENUE SERVIC	I-T3 201907243690	101-41231-1122	SOCIAL SECURITY W/H	000920	6.70
01-1358	INTERNAL REVENUE SERVIC	I-T3 201907243690	101-41231-1122	SOCIAL SECURITY W/H	000920	2.98
01-1358	INTERNAL REVENUE SERVIC	I-T3 201907243690	101-41231-1122	SOCIAL SECURITY W/H	000920	37.01
01-1358	INTERNAL REVENUE SERVIC	I-T3 201907243690	101-41231-1122	SOCIAL SECURITY W/H	000920	6.00
01-1358	INTERNAL REVENUE SERVIC	I-T4 201907243690	101-41231-1125	MEDICARE W/H	000920	12.27
01-1358	INTERNAL REVENUE SERVIC	I-T4 201907243690	101-41231-1125	MEDICARE W/H	000920	4.00
01-1358	INTERNAL REVENUE SERVIC	I-T4 201907243690	101-41231-1125	MEDICARE W/H	000920	7.69
01-1358	INTERNAL REVENUE SERVIC	I-T4 201907243690	101-41231-1125	MEDICARE W/H	000920	33.55
01-1358	INTERNAL REVENUE SERVIC	I-T4 201907243690	101-41231-1125	MEDICARE W/H	000920	9.24
01-1358	INTERNAL REVENUE SERVIC	I-T4 201907243690	101-41231-1125	MEDICARE W/H	000920	1.57
01-1358	INTERNAL REVENUE SERVIC	I-T4 201907243690	101-41231-1125	MEDICARE W/H	000920	0.70
01-1358	INTERNAL REVENUE SERVIC	I-T4 201907243690	101-41231-1125	MEDICARE W/H	000920	8.66
01-1358	INTERNAL REVENUE SERVIC	I-T4 201907243690	101-41231-1125	MEDICARE W/H	000920	1.40
01-2028	PERA OF MINNESOTA REG	I-13 201907243690	101-41231-1121	PERA COORDINATED	000925	69.80
01-2028	PERA OF MINNESOTA REG	I-13 201907243690	101-41231-1121	PERA COORDINATED	000925	20.70
01-2028	PERA OF MINNESOTA REG	I-13 201907243690	101-41231-1121	PERA COORDINATED	000925	44.33
01-2028	PERA OF MINNESOTA REG	I-13 201907243690	101-41231-1121	PERA COORDINATED	000925	206.16
01-2028	PERA OF MINNESOTA REG	I-13 201907243690	101-41231-1121	PERA COORDINATED	000925	15.75
01-2028	PERA OF MINNESOTA REG	I-13 201907243690	101-41231-1121	PERA COORDINATED	000925	3.60
01-2028	PERA OF MINNESOTA REG	I-13 201907243690	101-41231-1121	PERA COORDINATED	000925	44.78
01-2028	PERA OF MINNESOTA REG	I-13 201907243690	101-41231-1121	PERA COORDINATED	000925	9.00
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201907093620	101-41231-1131	FAMILY HSA 5000	000926	572.97
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201907093620	101-41231-1131	FAMILY HSA 5000	000926	2.24
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201907093620	101-41231-1131	FAMILY HSA 5000	000926	111.91
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201907093620	101-41231-1131	FAMILY HSA 5000	000926	11.19
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201907093620	101-41231-1131	FAMILY HSA 5000	000926	17.91
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201907243690	101-41231-1131	FAMILY HSA 5000	000926	8.95CR
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201907243690	101-41231-1131	FAMILY HSA 5000	000926	94.00
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201907243690	101-41231-1131	FAMILY HSA 5000	000926	532.69
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201907243690	101-41231-1131	FAMILY HSA 5000	000926	62.67
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201907243690	101-41231-1131	FAMILY HSA 5000	000926	35.81
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201907093620	101-41231-1131	SINGLE HSA 5000	000926	31.28
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201907093620	101-41231-1131	SINGLE HSA 5000	000926	246.77
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201907243690	101-41231-1131	SINGLE HSA 5000	000926	139.02
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201907243690	101-41231-1131	SINGLE HSA 5000	000926	139.03
01-4805	FURTHER	I-5FH201907243690	101-41231-1135	EMPLOYER CONTRIB FAM HSA 5000	000919	83.34
01-4805	FURTHER	I-5SH201907243690	101-41231-1135	EMPLOYER CONTRIB SNGL HSA 500	000919	62.50
DEPARTMENT 1231 MUNICIPAL BLDG MAINT TOTAL:						3,102.41
01-0966	DELTA DENTAL OF MINNESO	I-22F201907093620	101-42071-1132	DENTAL FAMILY	000918	50.25

VENDOR SET: 01 City of Marshall

ITEMS PRINTED: PAID, UNPAID

PACKET: 06949 7/26/19 PR 1w - 2

FUND : 101 GENERAL FUND

DEPARTMENT: 2071 ADULT COMMUNITY CTR

BANK: ALL

VENDOR	NAME	ITEM #	G/L ACCOUNT	DESCRIPTION	CHECK#	AMOUNT
01-0966	DELTA DENTAL OF MINNESO	I-22F201907243690	101-42071-1132	DENTAL FAMILY	000918	50.25
01-1358	INTERNAL REVENUE SERVIC	I-T3 201907243690	101-42071-1122	SOCIAL SECURITY W/H	000920	215.12
01-1358	INTERNAL REVENUE SERVIC	I-T4 201907243690	101-42071-1125	MEDICARE W/H	000920	50.32
01-2028	PERA OF MINNESOTA REG	I-13 201907243690	101-42071-1121	PERA COORDINATED	000925	290.89
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201907093620	101-42071-1131	FAMILY HSA 5000	000926	716.22
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201907243690	101-42071-1131	FAMILY HSA 5000	000926	716.22
01-4805	FURTHER	I-5FH201907243690	101-42071-1135	EMPLOYER CONTRIB FAM HSA 5000	000919	83.34
DEPARTMENT 2071 ADULT COMMUNITY CTR					TOTAL:	2,172.61
FUND 101 GENERAL FUND					TOTAL:	203,547.26

7/25/2019 4:33 PM
 VENDOR SET: 01 City of Marshall
 PACKET: 06949 7/26/19 PR 1w - 2
 FUND : 208 EDA ADMINISTRATION
 DEPARTMENT: N/A NON-DEPARTMENTAL

DIRECT PAYABLES DEPARTMENT PAYMENT REGISTER

PAGE: 17
 ITEMS PRINTED: PAID, UNPAID

BANK: ALL

VENDOR	NAME	ITEM #	G/L ACCOUNT	DESCRIPTION	CHECK#	AMOUNT
01-1358	INTERNAL REVENUE SERVIC	I-T1 201907243690	208-21221	FEDERAL W/H	000920	21.38
01-1358	INTERNAL REVENUE SERVIC	I-T3 201907243690	208-21222	SOCIAL SECURITY W/H	000920	22.32
01-1358	INTERNAL REVENUE SERVIC	I-T4 201907243690	208-21223	MEDICARE W/H	000920	5.22
01-1818	MN REVENUE	I-T2 201907243690	208-21224	STATE W/H	000922	14.32
DEPARTMENT 0000 NON-DEPARTMENTAL					TOTAL:	63.24
01-1358	INTERNAL REVENUE SERVIC	I-T3 201907243690	208-41136-1122	SOCIAL SECURITY W/H	000920	22.32
01-1358	INTERNAL REVENUE SERVIC	I-T4 201907243690	208-41136-1125	MEDICARE W/H	000920	5.22
DEPARTMENT 1136 GENERAL COMMUNITY DEV					TOTAL:	27.54
FUND 208 EDA ADMINISTRATION					TOTAL:	90.78

1/25/2019 4:33 PM
 VENDOR SET: 01 City of Marshall
 PACKET: 06949 7/26/19 PR 1w - 2
 FUND : 211 LIBRARY FUND
 DEPARTMENT: N/A NON-DEPARTMENTAL

DIRECT PAYABLES DEPARTMENT PAYMENT REGISTER

PAGE: 18
 ITEMS PRINTED: PAID, UNPAID

BANK: ALL

VENDOR	NAME	ITEM #	G/L ACCOUNT	DESCRIPTION	CHECK#	AMOUNT
01-0966	DELTA DENTAL OF MINNESO	I-22F201907093620	211-21243	DENTAL FAMILY	000918	37.71
01-0966	DELTA DENTAL OF MINNESO	I-22F201907243690	211-21243	DENTAL FAMILY	000918	37.71
01-0966	DELTA DENTAL OF MINNESO	I-22S201907093620	211-21243	DENTAL SINGLE	000918	13.56
01-0966	DELTA DENTAL OF MINNESO	I-22S201907243690	211-21243	DENTAL SINGLE	000918	13.56
01-1358	INTERNAL REVENUE SERVIC	I-T1 201907243690	211-21221	FEDERAL W/H	000920	1,926.59
01-1358	INTERNAL REVENUE SERVIC	I-T3 201907243690	211-21222	SOCIAL SECURITY W/H	000920	1,398.73
01-1358	INTERNAL REVENUE SERVIC	I-T4 201907243690	211-21223	MEDICARE W/H	000920	327.12
01-1818	MN REVENUE	I-T2 201907243690	211-21224	STATE W/H	000922	920.14
01-2028	PERA OF MINNESOTA REG	I-13 201907243690	211-21225	PERA COORDINATED	000925	1,462.35
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201907093620	211-21231	FAMILY HSA 5000	000926	266.06
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201907243690	211-21231	FAMILY HSA 5000	000926	266.06
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201907093620	211-21231	SINGLE HSA 5000	000926	123.60
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201907243690	211-21231	SINGLE HSA 5000	000926	123.60
01-3669	MINNESOTA STATE RETIREM	I-27B201907243690	211-21246	HEALTH CARE SAVINGS PLAN	000921	170.00
01-4805	FURTHER	I-HEC201907243690	211-21231	EMPLOYEE HSA CONTRIBUTION	000919	339.22
DEPARTMENT 0000 NON-DEPARTMENTAL					TOTAL:	7,426.01
01-0966	DELTA DENTAL OF MINNESO	I-22F201907093620	211-70437-1132	DENTAL FAMILY	000918	150.75
01-0966	DELTA DENTAL OF MINNESO	I-22F201907243690	211-70437-1132	DENTAL FAMILY	000918	150.75
01-0966	DELTA DENTAL OF MINNESO	I-22S201907093620	211-70437-1132	DENTAL SINGLE	000918	54.27
01-0966	DELTA DENTAL OF MINNESO	I-22S201907243690	211-70437-1132	DENTAL SINGLE	000918	54.27
01-1358	INTERNAL REVENUE SERVIC	I-T3 201907243690	211-70437-1122	SOCIAL SECURITY W/H	000920	1,398.73
01-1358	INTERNAL REVENUE SERVIC	I-T4 201907243690	211-70437-1125	MEDICARE W/H	000920	327.12
01-2028	PERA OF MINNESOTA REG	I-13 201907243690	211-70437-1121	PERA COORDINATED	000925	1,687.31
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201907093620	211-70437-1131	FAMILY HSA 5000	000926	1,432.44
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201907243690	211-70437-1131	FAMILY HSA 5000	000926	1,432.44
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201907093620	211-70437-1131	SINGLE HSA 5000	000926	834.15
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201907243690	211-70437-1131	SINGLE HSA 5000	000926	834.15
01-4805	FURTHER	I-5FH201907243690	211-70437-1135	EMPLOYER CONTRIB FAM HSA 5000	000919	166.68

7/25/2019 4:33 PM
VENDOR SET: 01 City of Marshall
PACKET: 06949 7/26/19 PR 1w - 2
FUND : 211 LIBRARY FUND
DEPARTMENT: 0437 LIBRARY

DIRECT PAYABLES DEPARTMENT PAYMENT REGISTER

PAGE: 19
ITEMS PRINTED: PAID, UNPAID

BANK: ALL

VENDOR	NAME	ITEM #	G/L ACCOUNT	DESCRIPTION	CHECK#	AMOUNT
01-4805	FURTHER	I-5SH201907243690	211-70437-1135	EMPLOYER CONTRIB SNGL HSA 500	000919	187.50
					DEPARTMENT 0437 LIBRARY	TOTAL: 8,710.56
					FUND 211 LIBRARY FUND	TOTAL: 16,136.57

BANK: ALL

VENDOR	NAME	ITEM #	G/L ACCOUNT	DESCRIPTION	CHECK#	AMOUNT
01-0966	DELTA DENTAL OF MINNESO	I-22F201907093620	258-21243	DENTAL FAMILY	000918	40.22
01-0966	DELTA DENTAL OF MINNESO	I-22F201907243690	258-21243	DENTAL FAMILY	000918	40.22
01-1358	INTERNAL REVENUE SERVIC	I-T1 201907243690	258-21221	FEDERAL W/H	000920	340.01
01-1358	INTERNAL REVENUE SERVIC	I-T3 201907243690	258-21222	SOCIAL SECURITY W/H	000920	366.84
01-1358	INTERNAL REVENUE SERVIC	I-T4 201907243690	258-21223	MEDICARE W/H	000920	85.79
01-1818	MN REVENUE	I-T2 201907243690	258-21224	STATE W/H	000922	189.63
01-2028	PERA OF MINNESOTA REG	I-13 201907243690	258-21225	PERA COORDINATED	000925	419.97
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201907093620	258-21231	FAMILY HSA 5000	000926	425.70
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201907243690	258-21231	FAMILY HSA 5000	000926	425.70
01-3669	MINNESOTA STATE RETIREM	I-27N201907243690	258-21246	HEALTH CARE SAVINGS PLAN	000921	29.01
01-3669	MINNESOTA STATE RETIREM	I-36R201907243690	258-21259	MNDPC - ROTH	000921	25.00
01-4805	FURTHER	I-HEC201907243690	258-21231	EMPLOYEE HSA CONTRIBUTION	000919	165.00
DEPARTMENT 0000 NON-DEPARTMENTAL						TOTAL: 2,553.09
01-0966	DELTA DENTAL OF MINNESO	I-22F201907093620	258-70579-1132	DENTAL FAMILY	000918	160.80
01-0966	DELTA DENTAL OF MINNESO	I-22F201907243690	258-70579-1132	DENTAL FAMILY	000918	160.80
01-1358	INTERNAL REVENUE SERVIC	I-T3 201907243690	258-70579-1122	SOCIAL SECURITY W/H	000920	366.84
01-1358	INTERNAL REVENUE SERVIC	I-T4 201907243690	258-70579-1125	MEDICARE W/H	000920	85.79
01-2028	PERA OF MINNESOTA REG	I-13 201907243690	258-70579-1121	PERA COORDINATED	000925	484.59
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201907093620	258-70579-1131	FAMILY HSA 5000	000926	2,291.90
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201907243690	258-70579-1131	FAMILY HSA 5000	000926	2,291.90
01-4805	FURTHER	I-5FH201907243690	258-70579-1135	EMPLOYER CONTRIB FAM HSA 5000	000919	266.69
DEPARTMENT 0579 AMATEUR SPORTS CENTER						TOTAL: 6,109.31
FUND 258 ASC ARENA						TOTAL: 8,662.40

BANK: ALL

VENDOR	NAME	ITEM #	G/L ACCOUNT	DESCRIPTION	CHECK#	AMOUNT
01-0966	DELTA DENTAL OF MINNESO	I-22F201907093620	270-21243	DENTAL FAMILY	000918	12.57
01-0966	DELTA DENTAL OF MINNESO	I-22F201907243690	270-21243	DENTAL FAMILY	000918	12.57
01-1358	INTERNAL REVENUE SERVIC	I-T1 201907243690	270-21221	FEDERAL W/H	000920	151.41
01-1358	INTERNAL REVENUE SERVIC	I-T3 201907243690	270-21222	SOCIAL SECURITY W/H	000920	136.59
01-1358	INTERNAL REVENUE SERVIC	I-T4 201907243690	270-21223	MEDICARE W/H	000920	31.95
01-1818	MN REVENUE	I-T2 201907243690	270-21224	STATE W/H	000922	87.69
01-2028	PERA OF MINNESOTA REG	I-13 201907243690	270-21225	PERA COORDINATED	000925	149.71
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201907093620	270-21231	FAMILY HSA 5000	000926	133.03
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201907243690	270-21231	FAMILY HSA 5000	000926	133.03
01-3669	MINNESOTA STATE RETIREM	I-27N201907243690	270-21246	HEALTH CARE SAVINGS PLAN	000921	23.03
01-4805	FURTHER	I-HEC201907243690	270-21231	EMPLOYEE HSA CONTRIBUTION	000919	25.00
DEPARTMENT 0000 NON-DEPARTMENTAL					TOTAL:	896.58
01-0966	DELTA DENTAL OF MINNESO	I-22F201907093620	270-50551-1132	DENTAL FAMILY	000918	50.25
01-0966	DELTA DENTAL OF MINNESO	I-22F201907243690	270-50551-1132	DENTAL FAMILY	000918	50.25
01-1358	INTERNAL REVENUE SERVIC	I-T3 201907243690	270-50551-1122	SOCIAL SECURITY W/H	000920	136.59
01-1358	INTERNAL REVENUE SERVIC	I-T4 201907243690	270-50551-1125	MEDICARE W/H	000920	31.95
01-2028	PERA OF MINNESOTA REG	I-13 201907243690	270-50551-1121	PERA COORDINATED	000925	172.74
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201907093620	270-50551-1131	FAMILY HSA 5000	000926	716.22
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201907243690	270-50551-1131	FAMILY HSA 5000	000926	716.22
01-4805	FURTHER	I-5FH201907243690	270-50551-1135	EMPLOYER CONTRIB FAM HSA 5000	000919	83.34
DEPARTMENT 0551 MERIT OPERATIONS					TOTAL:	1,957.56
FUND 270 MERIT					TOTAL:	2,854.14

BANK: ALL

VENDOR	NAME	ITEM #	G/L ACCOUNT	DESCRIPTION	CHECK#	AMOUNT
01-0966	DELTA DENTAL OF MINNESO	I-22F201907093620	602-21243	DENTAL FAMILY	000918	150.84
01-0966	DELTA DENTAL OF MINNESO	I-22F201907243690	602-21243	DENTAL FAMILY	000918	150.84
01-0966	DELTA DENTAL OF MINNESO	I-22S201907093620	602-21243	DENTAL SINGLE	000918	4.52
01-0966	DELTA DENTAL OF MINNESO	I-22S201907243690	602-21243	DENTAL SINGLE	000918	4.52
01-1358	INTERNAL REVENUE SERVIC	I-T1 201907243690	602-21221	FEDERAL W/H	000920	2,841.83
01-1358	INTERNAL REVENUE SERVIC	I-T3 201907243690	602-21222	SOCIAL SECURITY W/H	000920	1,874.35
01-1358	INTERNAL REVENUE SERVIC	I-T4 201907243690	602-21223	MEDICARE W/H	000920	438.35
01-1818	MN REVENUE	I-T2 201907243690	602-21224	STATE W/H	000922	1,418.48
01-2028	PERA OF MINNESOTA REG	I-13 201907243690	602-21225	PERA COORDINATED	000925	2,173.74
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201907093620	602-21231	FAMILY HSA 5000	000926	798.18
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201907243690	602-21231	FAMILY HSA 5000	000926	798.18
01-2321	SOUTHWEST WEST CENTRAL	I-FV5201907093620	602-21231	FAMILY VEBA 5000	000926	237.18
01-2321	SOUTHWEST WEST CENTRAL	I-FV5201907243690	602-21231	FAMILY VEBA 5000	000926	237.18
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201907093620	602-21231	SINGLE HSA 5000	000926	206.00
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201907243690	602-21231	SINGLE HSA 5000	000926	206.00
01-2321	SOUTHWEST WEST CENTRAL	I-SV5201907093620	602-21231	SINGLE VEBA 5000	000926	165.74
01-2321	SOUTHWEST WEST CENTRAL	I-SV5201907243690	602-21231	SINGLE VEBA 5000	000926	165.74
01-2512	NATIONWIDE RETIREMENT	I-33 201907243690	602-21251	USCM	000923	300.00
01-3443	VALIC DEFERRED COMP	I-35 201907243690	602-21257	VALIC DEFERRED COMP	000927	40.00
01-3443	VALIC DEFERRED COMP	I-35R201907243690	602-21255	VALIC ROTH	000927	650.00
01-3669	MINNESOTA STATE RETIREM	I-27A201907243690	602-21246	HEALTH CARE SAVINGS PLAN	000921	261.00
01-3669	MINNESOTA STATE RETIREM	I-27N201907243690	602-21246	HEALTH CARE SAVINGS PLAN	000921	500.99
01-4805	FURTHER	I-HEC201907243690	602-21231	EMPLOYEE HSA CONTRIBUTION	000919	1,188.25
01-6085	VOYA - INVESTORS CHOICE	I-37R201907243690	602-21274	VOYA ROTH PLAN	000928	630.00
DEPARTMENT 0000 NON-DEPARTMENTAL					TOTAL:	15,441.91
01-0966	DELTA DENTAL OF MINNESO	I-22F201907093620	602-90581-1132	DENTAL FAMILY	000918	603.00
01-0966	DELTA DENTAL OF MINNESO	I-22F201907243690	602-90581-1132	DENTAL FAMILY	000918	603.00
01-0966	DELTA DENTAL OF MINNESO	I-22S201907093620	602-90581-1132	DENTAL SINGLE	000918	18.09

BANK: ALL

VENDOR	NAME	ITEM #	G/L ACCOUNT	DESCRIPTION	CHECK#	AMOUNT
01-0966	DELTA DENTAL OF MINNESO	I-22S201907243690	602-90581-1132	DENTAL SINGLE	000918	18.09
01-1358	INTERNAL REVENUE SERVIC	I-T3 201907243690	602-90581-1122	SOCIAL SECURITY W/H	000920	1,874.35
01-1358	INTERNAL REVENUE SERVIC	I-T4 201907243690	602-90581-1125	MEDICARE W/H	000920	438.35
01-2028	PERA OF MINNESOTA REG	I-13 201907243690	602-90581-1121	PERA COORDINATED	000925	2,508.17
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201907093620	602-90581-1131	FAMILY HSA 5000	000926	4,297.32
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201907243690	602-90581-1131	FAMILY HSA 5000	000926	4,297.32
01-2321	SOUTHWEST WEST CENTRAL	I-FV5201907093620	602-90581-1131	FAMILY VEBA 5000	000926	612.07
01-2321	SOUTHWEST WEST CENTRAL	I-FV5201907243690	602-90581-1131	FAMILY VEBA 5000	000926	612.07
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201907093620	602-90581-1131	SINGLE HSA 5000	000926	1,390.25
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201907243690	602-90581-1131	SINGLE HSA 5000	000926	1,390.25
01-2321	SOUTHWEST WEST CENTRAL	I-SV5201907093620	602-90581-1131	SINGLE VEBA 5000	000926	472.76
01-2321	SOUTHWEST WEST CENTRAL	I-SV5201907243690	602-90581-1131	SINGLE VEBA 5000	000926	472.76
01-4805	FURTHER	I-5FH201907243690	602-90581-1135	EMPLOYER CONTRIB FAM HSA 5000	000919	500.04
01-4805	FURTHER	I-5FV201907243690	602-90581-1135	EMPLOYER CONT FAM VEBA 5000	000919	187.50
01-4805	FURTHER	I-5SH201907243690	602-90581-1135	EMPLOYER CONTRIB SNGL HSA 500	000919	312.50
01-4805	FURTHER	I-5SV201907243690	602-90581-1135	EMPLOYER CONT SINGL VEBA 5000	000919	208.34
DEPARTMENT 0581 WW OPERATIONS					TOTAL:	20,816.23
FUND 602 WASTEWATER OPERATING					TOTAL:	36,258.14

BANK: ALL

VENDOR	NAME	ITEM #	G/L ACCOUNT	DESCRIPTION	CHECK#	AMOUNT
01-0966	DELTA DENTAL OF MINNESO	I-22F201907093620	609-21243	DENTAL FAMILY	000918	12.57
01-0966	DELTA DENTAL OF MINNESO	I-22F201907243690	609-21243	DENTAL FAMILY	000918	12.57
01-0966	DELTA DENTAL OF MINNESO	I-22S201907093620	609-21243	DENTAL SINGLE	000918	13.56
01-0966	DELTA DENTAL OF MINNESO	I-22S201907243690	609-21243	DENTAL SINGLE	000918	13.56
01-1358	INTERNAL REVENUE SERVIC	I-T1 201907243690	609-21221	FEDERAL W/H	000920	776.35
01-1358	INTERNAL REVENUE SERVIC	I-T3 201907243690	609-21222	SOCIAL SECURITY W/H	000920	696.39
01-1358	INTERNAL REVENUE SERVIC	I-T4 201907243690	609-21223	MEDICARE W/H	000920	162.88
01-1818	MN REVENUE	I-T2 201907243690	609-21224	STATE W/H	000922	419.55
01-2028	PERA OF MINNESOTA REG	I-13 201907243690	609-21225	PERA COORDINATED	000925	728.96
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201907093620	609-21231	SINGLE HSA 5000	000926	123.60
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201907243690	609-21231	SINGLE HSA 5000	000926	123.60
01-2321	SOUTHWEST WEST CENTRAL	I-SV5201907093620	609-21231	SINGLE VEBA 5000	000926	82.87
01-2321	SOUTHWEST WEST CENTRAL	I-SV5201907243690	609-21231	SINGLE VEBA 5000	000926	82.87
01-3443	VALIC DEFERRED COMP	I-35 201907243690	609-21257	VALIC DEFERRED COMP	000927	125.00
01-3669	MINNESOTA STATE RETIREM	I-27N201907243690	609-21246	HEALTH CARE SAVINGS PLAN	000921	141.80
01-4805	FURTHER	I-HEC201907243690	609-21231	EMPLOYEE HSA CONTRIBUTION	000919	138.56
01-6085	VOYA - INVESTORS CHOICE	I-37D201907243690	609-21275	VOYA DEFERRED	000928	100.00
01-6085	VOYA - INVESTORS CHOICE	I-37R201907243690	609-21274	VOYA ROTH PLAN	000928	100.00
DEPARTMENT 0000 NON-DEPARTMENTAL					TOTAL:	3,854.69
01-0966	DELTA DENTAL OF MINNESO	I-22F201907093620	609-90991-1132	DENTAL FAMILY	000918	50.25
01-0966	DELTA DENTAL OF MINNESO	I-22F201907243690	609-90991-1132	DENTAL FAMILY	000918	50.25
01-0966	DELTA DENTAL OF MINNESO	I-22S201907093620	609-90991-1132	DENTAL SINGLE	000918	54.27
01-0966	DELTA DENTAL OF MINNESO	I-22S201907243690	609-90991-1132	DENTAL SINGLE	000918	54.27
01-1358	INTERNAL REVENUE SERVIC	I-T3 201907243690	609-90991-1122	SOCIAL SECURITY W/H	000920	696.39
01-1358	INTERNAL REVENUE SERVIC	I-T4 201907243690	609-90991-1125	MEDICARE W/H	000920	162.88
01-2028	PERA OF MINNESOTA REG	I-13 201907243690	609-90991-1121	PERA COORDINATED	000925	841.10
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201907093620	609-90991-1131	SINGLE HSA 5000	000926	834.15
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201907243690	609-90991-1131	SINGLE HSA 5000	000926	834.15

7/25/2019 4:33 PM
 DIRECT PAYABLES DEPARTMENT PAYMENT REGISTER
 VENDOR SET: 01 City of Marshall
 PACKET: 06949 7/26/19 PR 1w - 2
 FUND : 609 LIQUOR
 DEPARTMENT: 0991 LIQUOR OPERATIONS

PAGE: 25
 ITEMS PRINTED: PAID, UNPAID

BANK: ALL

VENDOR	NAME	ITEM #	G/L ACCOUNT	DESCRIPTION	CHECK#	AMOUNT
01-2321	SOUTHWEST WEST CENTRAL	I-SV5201907093620	609-90991-1131	SINGLE VEBA 5000	000926	236.38
01-2321	SOUTHWEST WEST CENTRAL	I-SV5201907243690	609-90991-1131	SINGLE VEBA 5000	000926	236.38
01-4805	FURTHER	I-5SH201907243690	609-90991-1135	EMPLOYER CONTRIB SNGL HSA 500	000919	187.50
01-4805	FURTHER	I-5SV201907243690	609-90991-1135	EMPLOYER CONT SINGL VEBA 5000	000919	104.17
DEPARTMENT 0991 LIQUOR OPERATIONS					TOTAL:	4,342.14
FUND 609 LIQUOR					TOTAL:	8,196.83
REPORT GRA TOTAL:						275,746.12

** G/L ACCOUNT TOTALS **

YEAR	ACCOUNT	NAME	AMOUNT	=====LINE ITEM=====			=====GROUP BUDGET=====		
				ANNUAL BUDGET	BUDGET AVAILABLE	OVER BUDG	ANNUAL BUDGET	BUDGET AVAILABLE	OVER BUDG
2019	101-21221	FEDERAL WITHHOLDING	17,209.73						
	101-21222	FICA WITHHOLDING	10,762.80						
	101-21223	MEDICARE	3,364.67						
	101-21224	STATE WITHHOLDING	9,013.52						
	101-21225	PERA WITHHOLDING	15,537.77						
	101-21226	PERA WITHHOLDING COUNCIL	170.45						
	101-21231	HSA / VEBA (ER ONLY)	20,506.64						
	101-21243	DENTAL INSURANCE	1,394.64						
	101-21246	HEALTH CARE SAVINGS PLAN	3,796.04						
	101-21251	DEFERRED COMP - USCM	200.00						
	101-21252	DEFERRED COMPENSATION FIRE	52.50						
	101-21255	VALIC ROTH (TAXABLE)	600.00						
	101-21257	DEFERRED COMP--VALIC	957.00						
	101-21258	MNDPC--DEFERRED COMP	860.00						
	101-21259	MNDPC-ROTH	315.00						
	101-21274	DEFERRED COMP-VOYA ROTH	170.00						
	101-21275	VOYA - DEFERRED PRE TAX	150.00						
	101-40141-1121	PERA CONTRIBUTIONS	170.45	2,045	852.57				
	101-40141-1122	FICA CONTRIBUTIONS	82.90	994	414.56				
	101-40141-1125	MEDICARE CONTRIBUTIONS	56.94	683	284.83				
	101-40671-1121	PERA CONTRIBUTIONS	275.89	7,380	3,294.46				
	101-40671-1122	FICA CONTRIBUTIONS	214.63	7,049	3,501.10				
	101-40671-1125	MEDICARE CONTRIBUTIONS	50.20	1,648	818.79				
	101-40671-1131	HEALTH INSURANCE	1,702.06	23,524	12,087.77				
	101-40671-1132	DENTAL INSURANCE	116.58	1,388	605.54				
	101-40671-1135	INSURANCE BENEFITS ALLOTME	129.17	0	1,812.24-			Y	
	101-40741-1121	PERA CONTRIBUTIONS	923.76	25,052	8,907.26				
	101-40741-1122	FICA CONTRIBUTIONS	709.77	20,710	8,048.10				
	101-40741-1125	MEDICARE CONTRIBUTIONS	166.01	4,843	1,882.10				
	101-40741-1131	HEALTH INSURANCE	3,893.74	44,389	19,941.64				
	101-40741-1132	DENTAL INSURANCE	201.00	2,412	638.16				
	101-40741-1135	INSURANCE BENEFITS ALLOTME	333.35	0	4,958.50-			Y	
	101-40821-1121	PERA CONTRIBUTIONS	689.10	17,426	7,420.63				
	101-40821-1122	FICA CONTRIBUTIONS	506.08	14,405	7,012.56				
	101-40821-1125	MEDICARE CONTRIBUTIONS	118.37	3,369	1,639.95				
	101-40821-1131	HEALTH INSURANCE	3,420.98	46,551	23,631.19				
	101-40821-1132	DENTAL INSURANCE	301.50	3,618	1,597.95				
	101-40821-1135	INSURANCE BENEFITS ALLOTME	229.18	0	3,208.52-			Y	
	101-40931-1121	PERA CONTRIBUTIONS	605.77	15,652	6,634.81				
	101-40931-1122	FICA CONTRIBUTIONS	422.98	12,964	6,666.22				
	101-40931-1125	MEDICARE CONTRIBUTIONS	98.92	3,032	1,559.16				
	101-40931-1131	HEALTH INSURANCE	4,297.32	57,567	28,775.77				
	101-40931-1132	DENTAL INSURANCE	172.86	2,054	896.15				
	101-40931-1135	INSURANCE BENEFITS ALLOTME	250.02	0	3,500.28-			Y	

** G/L ACCOUNT TOTALS **

YEAR	ACCOUNT	NAME	AMOUNT	=====LINE ITEM=====			=====GROUP BUDGET=====		
				ANNUAL BUDGET	BUDGET AVAILABLE	OVER BUDG	ANNUAL BUDGET	BUDGET AVAILABLE	OVER BUDG
	101-41231-1121	PERA CONTRIBUTIONS	414.12	8,503	2,276.32				
	101-41231-1122	FICA CONTRIBUTIONS	338.15	9,056	4,031.38				
	101-41231-1125	MEDICARE CONTRIBUTIONS	79.08	2,118	942.82				
	101-41231-1131	HEALTH INSURANCE	1,988.54	27,362	14,039.22				
	101-41231-1132	DENTAL INSURANCE	136.68	1,630	714.36				
	101-41231-1135	INSURANCE BENEFITS ALLOTME	145.84	0	2,041.76-			Y	
	101-42071-1121	PERA CONTRIBUTIONS	290.89	7,748	3,503.82				
	101-42071-1122	FICA CONTRIBUTIONS	215.12	6,405	3,265.11				
	101-42071-1125	MEDICARE CONTRIBUTIONS	50.32	1,498	763.58				
	101-42071-1131	HEALTH INSURANCE	1,432.44	19,189	9,591.93				
	101-42071-1132	DENTAL INSURANCE	100.50	1,206	532.65				
	101-42071-1135	INSURANCE BENEFITS ALLOTME	83.34	0	1,166.76-			Y	
	101-50151-1121	PERA CONTRIBUTIONS	11,010.41	285,466	122,689.91				
	101-50151-1122	FICA CONTRIBUTIONS	319.70	9,015	3,925.63				
	101-50151-1125	MEDICARE CONTRIBUTIONS	884.59	24,368	11,132.46				
	101-50151-1131	HEALTH INSURANCE	26,294.81	372,805	203,656.27				
	101-50151-1132	DENTAL INSURANCE	1,959.72	24,248	11,443.86				
	101-50151-1135	INSURANCE BENEFITS ALLOTME	1,927.19	0	25,030.95-			Y	
	101-50156-1121	PERA CONTRIBUTIONS	87.19	1,173	577.47				
	101-50156-1122	FICA CONTRIBUTIONS	80.72	0	693.76-			Y	
	101-50156-1125	MEDICARE CONTRIBUTIONS	18.89	340	177.92				
	101-50453-1121	PERA CONTRIBUTIONS	44.12	1,147	399.81				
	101-50453-1122	FICA CONTRIBUTIONS	33.97	1,185	599.80				
	101-50453-1125	MEDICARE CONTRIBUTIONS	7.95	277	140.27				
	101-50453-1131	HEALTH INSURANCE	141.95	2,451	1,521.60				
	101-50453-1132	DENTAL INSURANCE	30.18	361	164.05				
	101-50453-1135	INSURANCE BENEFITS ALLOTME	31.25	0	428.75-			Y	
	101-60162-1121	PERA CONTRIBUTIONS	1,527.68	37,984	15,264.55				
	101-60162-1122	FICA CONTRIBUTIONS	1,233.34	32,058	14,432.46				
	101-60162-1125	MEDICARE CONTRIBUTIONS	288.45	7,497	3,375.25				
	101-60162-1131	HEALTH INSURANCE	6,522.87	91,628	47,569.14				
	101-60162-1132	DENTAL INSURANCE	591.46	7,117	3,123.36				
	101-60162-1135	INSURANCE BENEFITS ALLOTME	532.31	0	7,582.69-			Y	
	101-60164-1121	PERA CONTRIBUTIONS	941.30	23,270	9,280.10				
	101-60164-1122	FICA CONTRIBUTIONS	669.88	19,237	9,171.71				
	101-60164-1125	MEDICARE CONTRIBUTIONS	156.66	4,498	2,144.95				
	101-60164-1131	HEALTH INSURANCE	5,632.25	78,231	40,852.16				
	101-60164-1132	DENTAL INSURANCE	449.72	5,366	2,384.84				
	101-60164-1135	INSURANCE BENEFITS ALLOTME	467.73	0	6,417.87-			Y	
	101-60211-1121	PERA CONTRIBUTIONS	1,427.72	42,370	15,407.18				
	101-60211-1122	FICA CONTRIBUTIONS	1,054.86	35,911	15,241.94				
	101-60211-1125	MEDICARE CONTRIBUTIONS	246.70	8,398	3,564.62				
	101-60211-1131	HEALTH INSURANCE	8,577.12	137,736	74,829.63				
	101-60211-1132	DENTAL INSURANCE	627.25	10,733	6,122.44				
	101-60211-1135	INSURANCE BENEFITS ALLOTME	637.53	0	9,729.58-			Y	

** G/L ACCOUNT TOTALS **

YEAR	ACCOUNT	NAME	AMOUNT	=====LINE ITEM=====			=====GROUP BUDGET=====		
				ANNUAL BUDGET	BUDGET AVAILABLE	OVER BUDG	ANNUAL BUDGET	BUDGET AVAILABLE	OVER BUDG
101-60364-1121		PERA CONTRIBUTIONS	379.03	9,687	2,641.50				
101-60364-1122		FICA CONTRIBUTIONS	584.63	10,032	3,887.90				
101-60364-1125		MEDICARE CONTRIBUTIONS	136.73	2,346	909.21				
101-60364-1131		HEALTH INSURANCE	3,034.92	40,297	18,527.20				
101-60364-1132		DENTAL INSURANCE	212.93	2,532	1,005.15				
101-60364-1135		INSURANCE BENEFITS ALLOTME	175.02	0	2,653.24-			Y	
101-70176-1122		FICA CONTRIBUTIONS	878.76	6,364	3,122.92				
101-70176-1125		MEDICARE CONTRIBUTIONS	205.49	1,488	730.47				
101-70276-1121		PERA CONTRIBUTIONS	796.22	15,018	4,491.73				
101-70276-1122		FICA CONTRIBUTIONS	1,292.77	17,980	6,761.59				
101-70276-1125		MEDICARE CONTRIBUTIONS	302.37	4,205	1,581.27				
101-70276-1131		HEALTH INSURANCE	1,988.54	46,551	33,228.54				
101-70276-1132		DENTAL INSURANCE	237.18	2,836	1,568.65				
101-70276-1135		INSURANCE BENEFITS ALLOTME	145.84	0	2,041.76-			Y	
101-70377-1122		FICA CONTRIBUTIONS	324.71	611	27.15				
101-70377-1125		MEDICARE CONTRIBUTIONS	76.03	143	6.30				
101-70675-1121		PERA CONTRIBUTIONS	633.24	16,696	7,202.19				
101-70675-1122		FICA CONTRIBUTIONS	500.60	14,434	7,135.63				
101-70675-1125		MEDICARE CONTRIBUTIONS	117.07	3,375	1,668.91				
101-70675-1131		HEALTH INSURANCE	2,461.30	35,535	19,044.96				
101-70675-1132		DENTAL INSURANCE	237.18	2,836	1,247.05				
101-70675-1135		INSURANCE BENEFITS ALLOTME	250.01	0	3,500.14-			Y	
101-70871-1121		PERA CONTRIBUTIONS	144.00	1,221	512.08				
101-70871-1122		FICA CONTRIBUTIONS	639.33	2,780	298.50				
101-70871-1125		MEDICARE CONTRIBUTIONS	149.56	650	69.76				
101-70871-1132		DENTAL INSURANCE	100.50	397	196.98				
101-70971-1121		PERA CONTRIBUTIONS	180.00	1,544	644.31				
101-70971-1122		FICA CONTRIBUTIONS	510.79	3,284	1,371.60				
101-70971-1125		MEDICARE CONTRIBUTIONS	119.46	768	320.82				
101-70971-1131		HEALTH INSURANCE	1,432.44	6,332	3,467.58				
101-70971-1132		DENTAL INSURANCE	100.50	397	196.98				
101-70971-1135		INSURANCE BENEFITS ALLOTME	83.34	0	333.36-			Y	
101-70979-1122		FICA CONTRIBUTIONS	149.11	2,920	198.00				
101-70979-1125		MEDICARE CONTRIBUTIONS	34.88	683	46.29				
208-21221		FEDERAL W/H	21.38						
208-21222		FICA W/H	22.32						
208-21223		MEDICARE W/H	5.22						
208-21224		STATE W/H	14.32						
208-41136-1122		FICA CONTRIBUTIONS	22.32	0	111.60-			Y	
208-41136-1125		MEDICARE CONTRIBUTIONS	5.22	0	26.10-			Y	
211-21221		FEDERAL W/H	1,926.59						
211-21222		FICA W/H	1,398.73						
211-21223		MEDICARE W/H	327.12						
211-21224		STATE W/H	920.14						
211-21225		PERA W/H	1,462.35						

** G/L ACCOUNT TOTALS **

YEAR	ACCOUNT	NAME	AMOUNT	=====LINE ITEM=====			=====GROUP BUDGET=====		
				ANNUAL BUDGET	BUDGET AVAILABLE	OVER BUDG	ANNUAL BUDGET	BUDGET AVAILABLE	OVER BUDG
	211-21231	HSA /VEBA (ER ONLY)	1,118.54						
	211-21243	DENTAL INSURANCE	102.54						
	211-21246	HEALTH CARE SAVINGS PLAN	170.00						
	211-70437-1121	PERA CONTRIBUTIONS	1,687.31	46,090	21,757.40				
	211-70437-1122	FICA CONTRIBUTIONS	1,398.73	38,085	17,961.69				
	211-70437-1125	MEDICARE CONTRIBUTIONS	327.12	8,927	4,220.72				
	211-70437-1131	HEALTH INSURANCE	4,533.18	59,302	28,805.79				
	211-70437-1132	DENTAL INSURANCE	410.04	4,424	1,676.73				
	211-70437-1135	INSURANCE BENEFITS ALLOTME	354.18	5,450	491.48				
	258-21221	FEDERAL WITHHOLDING	340.01						
	258-21222	FICA WITHHOLDING	366.84						
	258-21223	MEDICARE	85.79						
	258-21224	STATE WITHHOLDING	189.63						
	258-21225	PERA WITHHOLDING	419.97						
	258-21231	HSA/VBA (ER ONLY)	1,016.40						
	258-21243	DENTAL INSURANCE	80.44						
	258-21246	HEALTH CARE SAVINGS PLAN	29.01						
	258-21259	MNDP-ROTH	25.00						
	258-70579-1121	PERA CONTRIBUTIONS	484.59	14,867	7,248.17				
	258-70579-1122	FICA CONTRIBUTIONS	366.84	13,871	7,661.65				
	258-70579-1125	MEDICARE CONTRIBUTIONS	85.79	3,244	1,791.73				
	258-70579-1131	HEALTH INSURANCE	4,583.80	69,578	38,835.58				
	258-70579-1132	DENTAL INSURANCE	321.60	4,283	1,854.58				
	258-70579-1135	INSURANCE BENEFITS ALLOTME	266.69	0	3,729.80-			Y	
	270-21221	FEDERAL WITHHOLDING	151.41						
	270-21222	FICA WITHHOLDING	136.59						
	270-21223	MEDICARE	31.95						
	270-21224	STATE WITHHOLDING	87.69						
	270-21225	PERA WITHHOLDING	149.71						
	270-21231	HSA / VEBA (ER ONLY)	291.06						
	270-21243	DENTAL INSURANCE	25.14						
	270-21246	HEALTH CARE SAVINGS PLAN	23.03						
	270-50551-1121	PERA CONTRIBUTIONS	172.74	4,656	2,065.06				
	270-50551-1122	FICA CONTRIBUTIONS	136.59	4,325	2,314.69				
	270-50551-1125	MEDICARE CONTRIBUTIONS	31.95	1,011	541.32				
	270-50551-1131	HEALTH INSURANCE	1,432.44	19,189	9,571.28				
	270-50551-1132	DENTAL INSURANCE	100.50	1,206	532.65				
	270-50551-1135	INSURANCE BENEFITS ALLOTME	83.34	0	1,166.76-			Y	
	602-21221	FEDERAL WITHHOLDING	2,841.83						
	602-21222	FICA WITHHOLDING	1,874.35						
	602-21223	MEDICARE	438.35						
	602-21224	STATE WITHHOLDING	1,418.48						
	602-21225	PERA WITHHOLDING	2,173.74						
	602-21231	HSA / VEBA (ER ONLY)	4,002.45						
	602-21243	DENTAL INSURANCE	310.72						

** G/L ACCOUNT TOTALS **

YEAR	ACCOUNT	NAME	AMOUNT	=====LINE ITEM=====			=====GROUP BUDGET=====		
				ANNUAL BUDGET	BUDGET AVAILABLE	OVER BUDG	ANNUAL BUDGET	BUDGET AVAILABLE	OVER BUDG
	602-21246	HEALTH CARE SAVINGS PLAN	761.99						
	602-21251	DEFERRED COMP - USCM	300.00						
	602-21255	VALIC ROTH (TAXABLE)	650.00						
	602-21257	DEFERRED COMP--VALIC	40.00						
	602-21274	DEFERRED COMP-VOYA ROTH	630.00						
	602-90581-1121	PERA CONTRIBUTIONS	2,508.17	61,533	26,515.12				
	602-90581-1122	FICA CONTRIBUTIONS	1,874.35	50,867	24,853.30				
	602-90581-1125	MEDICARE CONTRIBUTIONS	438.35	11,896	5,812.61				
	602-90581-1131	HEALTH INSURANCE	13,544.80	172,348	91,170.74				
	602-90581-1132	DENTAL INSURANCE	1,242.18	13,690	6,133.93				
	602-90581-1135	INSURANCE BENEFIT ALLOTMEN	1,208.38	0	15,410.12-			Y	
	609-21221	FEDERAL WITHHOLDING	776.35						
	609-21222	FICA WITHHOLDING	696.39						
	609-21223	MEDICARE	162.88						
	609-21224	STATE WITHHOLDING	419.55						
	609-21225	PERA WITHHOLDING	728.96						
	609-21231	HSA / VEBA (ER ONLY)	551.50						
	609-21243	DENTAL INSURANCE	52.26						
	609-21246	HEALTH CARE SAVINGS PLAN	141.80						
	609-21257	DEFERRED COMP--VALIC	125.00						
	609-21274	DEFERRED COMP-VOYA ROTH	100.00						
	609-21275	VOYA - DEFERRED PRE TAX	100.00						
	609-90991-1121	PERA CONTRIBUTIONS	841.10	16,386	3,088.33				
	609-90991-1122	FICA CONTRIBUTIONS	696.39	17,759	7,076.53				
	609-90991-1125	MEDICARE CONTRIBUTIONS	162.88	4,153	1,655.04				
	609-90991-1131	HEALTH INSURANCE	2,141.06	32,692	18,265.09				
	609-90991-1132	DENTAL INSURANCE	209.04	3,260	1,859.75				
	609-90991-1135	INSURANCE BENEFIT ALLOTMEN	291.67	0	4,083.38-			Y	
	** 2019 YEAR TOTALS		275,746.12						

** DEPARTMENT TOTALS **

ACCT	NAME	AMOUNT
101	NON-DEPARTMENTAL	85,060.76
101-0141	MAYOR & COUNCIL	310.29
101-0151	POLICE ADMINISTRATION	42,396.42
101-0156	CHEMICAL ASSESSMENT TEAM	186.80
101-0162	ENGINEERING	10,696.11
101-0164	COMMUNITY PLANNING	8,317.54
101-0176	AQUATIC CENTER	1,084.25

** DEPARTMENT TOTALS **

ACCT	NAME	AMOUNT
101-0211	STREET ADMINISTRATION	12,571.18
101-0276	PARK MAINTENANCE & DEVEL.	4,762.92
101-0364	AIRPORT	4,523.26
101-0377	MUNICIPAL BAND	400.74
101-0453	ANIMAL IMPOUNDMENT	289.42
101-0671	CABLE COMMISSION	2,488.53
101-0675	COMM SERVICES ADMIN	4,199.40
101-0741	CITY ADMINISTRATION	6,227.63
101-0821	FINANCE	5,265.21
101-0871	COMM ED-SUMMER	1,033.39
101-0931	APPRAISING & ASSESSING	5,847.87
101-0971	RECREATION-SUMMER	2,426.53
101-0979	RECREATION-WINTER	183.99
101-1231	MUNICIPAL BLDG MAINT	3,102.41
101-2071	ADULT COMMUNITY CTR	2,172.61

101 TOTAL	GENERAL FUND	203,547.26
208	NON-DEPARTMENTAL	63.24
208-1136	GENERAL COMMUNITY DEV	27.54

208 TOTAL	EDA ADMINISTRATION	90.78
211	NON-DEPARTMENTAL	7,426.01
211-0437	LIBRARY	8,710.56

211 TOTAL	LIBRARY FUND	16,136.57
258	NON-DEPARTMENTAL	2,553.09
258-0579	AMATEUR SPORTS CENTER	6,109.31

258 TOTAL	ASC ARENA	8,662.40
270	NON-DEPARTMENTAL	896.58
270-0551	MERIT OPERATIONS	1,957.56

270 TOTAL	MERIT	2,854.14
602	NON-DEPARTMENTAL	15,441.91
602-0581	WW OPERATIONS	20,816.23

602 TOTAL	WASTEWATER OPERATING	36,258.14

** DEPARTMENT TOTALS **

ACCT	NAME	AMOUNT
609	NON-DEPARTMENTAL	3,854.69
609-0991	LIQUOR OPERATIONS	4,342.14

609 TOTAL	LIQUOR	8,196.83

	** TOTAL **	275,746.12

NO ERRORS

** END OF REPORT **