

VENDOR SET: 01 City of Marshall
 PACKET: 06906 06/28/2019 Payroll Entrie
 FUND : 101 GENERAL FUND
 DEPARTMENT: N/A NON-DEPARTMENTAL

ITEMS PRINTED: PAID, UNPAID

BANK: ALL

VENDOR	NAME	ITEM #	G/L ACCOUNT	DESCRIPTION	CHECK#	AMOUNT
01-0966	DELTA DENTAL OF MINNESO	I-22F201906123542	101-21243	DENTAL FAMILY	000887	651.13
01-0966	DELTA DENTAL OF MINNESO	I-22F201906263572	101-21243	DENTAL FAMILY	000887	651.13
01-0966	DELTA DENTAL OF MINNESO	I-22S201906123542	101-21243	DENTAL SINGLE	000887	58.76
01-0966	DELTA DENTAL OF MINNESO	I-22S201906263572	101-21243	DENTAL SINGLE	000887	58.76
01-1358	INTERNAL REVENUE SERVIC	I-T1 201906263572	101-21221	FEDERAL W/H	000889	17,236.56
01-1358	INTERNAL REVENUE SERVIC	I-T3 201906263572	101-21222	SOCIAL SECURITY W/H	000889	10,600.45
01-1358	INTERNAL REVENUE SERVIC	I-T4 201906263572	101-21223	MEDICARE W/H	000889	3,347.08
01-1818	MN REVENUE	I-T2 201906263572	101-21224	STATE W/H	000891	9,023.04
01-2028	PERA OF MINNESOTA REG	I-11 201906263572	101-21226	PERA COUNCIL	000894	170.45
01-2028	PERA OF MINNESOTA REG	I-12 201906263572	101-21225	PERA POLICE AND FIRE	000894	7,220.16
01-2028	PERA OF MINNESOTA REG	I-13 201906263572	101-21225	PERA COORDINATED	000894	8,574.43
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201906123542	101-21231	FAMILY HSA 5000	000895	5,427.62
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201906263572	101-21231	FAMILY HSA 5000	000895	5,427.62
01-2321	SOUTHWEST WEST CENTRAL	I-FV5201906123542	101-21231	FAMILY VEBA 5000	000895	711.54
01-2321	SOUTHWEST WEST CENTRAL	I-FV5201906263572	101-21231	FAMILY VEBA 5000	000895	711.54
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201906123542	101-21231	SINGLE HSA 5000	000895	659.20
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201906263572	101-21231	SINGLE HSA 5000	000895	659.20
01-2321	SOUTHWEST WEST CENTRAL	I-SV5201906123542	101-21231	SINGLE VEBA 5000	000895	414.35
01-2321	SOUTHWEST WEST CENTRAL	I-SV5201906263572	101-21231	SINGLE VEBA 5000	000895	414.35
01-2512	NATIONWIDE RETIREMENT	I-33 201906263572	101-21251	USCM	000892	200.00
01-2513	NATIONWIDE RETIREMENT-F	I-34 201906263572	101-21252	USCM FIRE DEPT	000893	22.61
01-3443	VALIC DEFERRED COMP	I-35 201906263572	101-21257	VALIC DEFERRED COMP	000896	832.00
01-3443	VALIC DEFERRED COMP	I-35F201906263572	101-21257	VALIC - FIRE DEPARTMENT	000896	50.36
01-3443	VALIC DEFERRED COMP	I-35R201906263572	101-21255	VALIC ROTH	000896	600.00
01-3669	MINNESOTA STATE RETIREM	I-27A201906263572	101-21246	HEALTH CARE SAVINGS PLAN	000890	573.12
01-3669	MINNESOTA STATE RETIREM	I-27L201906263572	101-21246	HEALTH CARE SAVINGS PLAN	000890	1,275.00
01-3669	MINNESOTA STATE RETIREM	I-27N201906263572	101-21246	HEALTH CARE SAVINGS PLAN	000890	1,825.26
01-3669	MINNESOTA STATE RETIREM	I-27S201906263572	101-21246	HEALTH CARE SAVINGS PLAN	000890	200.00

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VENDOR	NAME	ITEM #	G/L ACCOUNT	DESCRIPTION	CHECK#	AMOUNT
01-3669	MINNESOTA STATE RETIREM	I-36 201906263572	101-21258	MNDP - DEFERRED COMP	000890	1,160.00
01-3669	MINNESOTA STATE RETIREM	I-36R201906263572	101-21259	MNDP - ROTH	000890	315.00
01-4805	FURTHER	I-HEC201906263572	101-21231	EMPLOYEE HSA CONTRIBUTION	000888	6,163.62
01-6085	VOYA - INVESTORS CHOICE	I-37D201906263572	101-21275	VOYA DEFERRED	000897	150.00
01-6085	VOYA - INVESTORS CHOICE	I-37R201906263572	101-21274	VOYA ROTH PLAN	000897	145.00
DEPARTMENT 0000 NON-DEPARTMENTAL					TOTAL:	85,529.34
01-1358	INTERNAL REVENUE SERVIC	I-T3 201906263572	101-40141-1122	SOCIAL SECURITY W/H	000889	82.90
01-1358	INTERNAL REVENUE SERVIC	I-T4 201906263572	101-40141-1125	MEDICARE W/H	000889	56.94
01-2028	PERA OF MINNESOTA REG	I-11 201906263572	101-40141-1121	PERA COUNCIL	000894	170.45
DEPARTMENT 0141 MAYOR & COUNCIL					TOTAL:	310.29
01-0966	DELTA DENTAL OF MINNESO	I-22F201906123542	101-50151-1132	DENTAL FAMILY	000887	847.21
01-0966	DELTA DENTAL OF MINNESO	I-22F201906123542	101-50151-1132	DENTAL FAMILY	000887	42.22
01-0966	DELTA DENTAL OF MINNESO	I-22F201906263572	101-50151-1132	DENTAL FAMILY	000887	839.17
01-0966	DELTA DENTAL OF MINNESO	I-22F201906263572	101-50151-1132	DENTAL FAMILY	000887	50.25
01-0966	DELTA DENTAL OF MINNESO	I-22S201906123542	101-50151-1132	DENTAL SINGLE	000887	90.45
01-0966	DELTA DENTAL OF MINNESO	I-22S201906263572	101-50151-1132	DENTAL SINGLE	000887	90.45
01-1358	INTERNAL REVENUE SERVIC	I-T3 201906263572	101-50151-1122	SOCIAL SECURITY W/H	000889	347.05
01-1358	INTERNAL REVENUE SERVIC	I-T4 201906263572	101-50151-1125	MEDICARE W/H	000889	880.14
01-1358	INTERNAL REVENUE SERVIC	I-T4 201906263572	101-50151-1125	MEDICARE W/H	000889	31.49
01-2028	PERA OF MINNESOTA REG	I-12 201906263572	101-50151-1121	PERA POLICE AND FIRE	000894	10,378.43
01-2028	PERA OF MINNESOTA REG	I-12 201906263572	101-50151-1121	PERA POLICE AND FIRE	000894	451.81
01-2028	PERA OF MINNESOTA REG	I-13 201906263572	101-50151-1121	PERA COORDINATED	000894	427.48
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201906123542	101-50151-1131	FAMILY HSA 5000	000895	10,141.52
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201906123542	101-50151-1131	FAMILY HSA 5000	000895	601.78
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201906263572	101-50151-1131	FAMILY HSA 5000	000895	10,027.08
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201906263572	101-50151-1131	FAMILY HSA 5000	000895	716.22
01-2321	SOUTHWEST WEST CENTRAL	I-FV5201906123542	101-50151-1131	FAMILY VEBA 5000	000895	612.07
01-2321	SOUTHWEST WEST CENTRAL	I-FV5201906263572	101-50151-1131	FAMILY VEBA 5000	000895	612.07
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201906123542	101-50151-1131	SINGLE HSA 5000	000895	1,390.25

VENDOR SET: 01 City of Marshall
 PACKET: 06906 06/28/2019 Payroll Entrie
 FUND : 101 GENERAL FUND
 DEPARTMENT: 0151 POLICE ADMINISTRATION

ITEMS PRINTED: PAID, UNPAID

BANK: ALL

VENDOR	NAME	ITEM #	G/L ACCOUNT	DESCRIPTION	CHECK#	AMOUNT
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201906263572	101-50151-1131	SINGLE HSA 5000	000895	1,390.25
01-2321	SOUTHWEST WEST CENTRAL	I-SV5201906123542	101-50151-1131	SINGLE VEBA 5000	000895	401.85
01-2321	SOUTHWEST WEST CENTRAL	I-SV5201906263572	101-50151-1131	SINGLE VEBA 5000	000895	401.84
01-4805	FURTHER	I-5FH201906263572	101-50151-1135	EMPLOYER CONTRIB FAM HSA 5000	000888	1,250.10
01-4805	FURTHER	I-5FV201906263572	101-50151-1135	EMPLOYER CONT FAM VEBA 5000	000888	187.50
01-4805	FURTHER	I-5SH201906263572	101-50151-1135	EMPLOYER CONTRIB SNGL HSA 500	000888	312.50
01-4805	FURTHER	I-5SV201906263572	101-50151-1135	EMPLOYER CONT SINGL VEBA 5000	000888	177.08

DEPARTMENT 0151 POLICE ADMINISTRATION TOTAL: 42,698.26

01-1358	INTERNAL REVENUE SERVIC	I-T3 201906263572	101-50156-1122	SOCIAL SECURITY W/H	000889	2.29
01-1358	INTERNAL REVENUE SERVIC	I-T3 201906263572	101-50156-1122	SOCIAL SECURITY W/H	000889	60.53
01-1358	INTERNAL REVENUE SERVIC	I-T4 201906263572	101-50156-1125	MEDICARE W/H	000889	0.54
01-1358	INTERNAL REVENUE SERVIC	I-T4 201906263572	101-50156-1125	MEDICARE W/H	000889	14.14
01-2028	PERA OF MINNESOTA REG	I-13 201906263572	101-50156-1121	PERA COORDINATED	000894	2.33
01-2028	PERA OF MINNESOTA REG	I-13 201906263572	101-50156-1121	PERA COORDINATED	000894	49.55

DEPARTMENT 0156 CHEMICAL ASSESSMENT TE TOTAL: 129.38

01-0966	DELTA DENTAL OF MINNESO	I-22F201906123542	101-60162-1132	DENTAL FAMILY	000887	122.18
01-0966	DELTA DENTAL OF MINNESO	I-22F201906123542	101-60162-1132	DENTAL FAMILY	000887	0.63
01-0966	DELTA DENTAL OF MINNESO	I-22F201906123542	101-60162-1132	DENTAL FAMILY	000887	1.26
01-0966	DELTA DENTAL OF MINNESO	I-22F201906123542	101-60162-1132	DENTAL FAMILY	000887	2.51
01-0966	DELTA DENTAL OF MINNESO	I-22F201906123542	101-60162-1132	DENTAL FAMILY	000887	31.79
01-0966	DELTA DENTAL OF MINNESO	I-22F201906123542	101-60162-1132	DENTAL FAMILY	000887	0.48
01-0966	DELTA DENTAL OF MINNESO	I-22F201906123542	101-60162-1132	DENTAL FAMILY	000887	36.79
01-0966	DELTA DENTAL OF MINNESO	I-22F201906123542	101-60162-1132	DENTAL FAMILY	000887	13.64
01-0966	DELTA DENTAL OF MINNESO	I-22F201906123542	101-60162-1132	DENTAL FAMILY	000887	2.51
01-0966	DELTA DENTAL OF MINNESO	I-22F201906123542	101-60162-1132	DENTAL FAMILY	000887	8.52
01-0966	DELTA DENTAL OF MINNESO	I-22F201906123542	101-60162-1132	DENTAL FAMILY	000887	1.54
01-0966	DELTA DENTAL OF MINNESO	I-22F201906123542	101-60162-1132	DENTAL FAMILY	000887	4.75
01-0966	DELTA DENTAL OF MINNESO	I-22F201906123542	101-60162-1132	DENTAL FAMILY	000887	48.04
01-0966	DELTA DENTAL OF MINNESO	I-22F201906263572	101-60162-1132	DENTAL FAMILY	000887	116.58
01-0966	DELTA DENTAL OF MINNESO	I-22F201906263572	101-60162-1132	DENTAL FAMILY	000887	5.03
01-0966	DELTA DENTAL OF MINNESO	I-22F201906263572	101-60162-1132	DENTAL FAMILY	000887	0.94
01-0966	DELTA DENTAL OF MINNESO	I-22F201906263572	101-60162-1132	DENTAL FAMILY	000887	32.53
01-0966	DELTA DENTAL OF MINNESO	I-22F201906263572	101-60162-1132	DENTAL FAMILY	000887	27.02
01-0966	DELTA DENTAL OF MINNESO	I-22F201906263572	101-60162-1132	DENTAL FAMILY	000887	23.36
01-0966	DELTA DENTAL OF MINNESO	I-22F201906263572	101-60162-1132	DENTAL FAMILY	000887	3.38
01-0966	DELTA DENTAL OF MINNESO	I-22F201906263572	101-60162-1132	DENTAL FAMILY	000887	8.35

VENDOR SET: 01 City of Marshall

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PACKET: 06906 06/28/2019 Payroll Entrie

FUND : 101 GENERAL FUND

DEPARTMENT: 0162 ENGINEERING

BANK: ALL

VENDOR	NAME	ITEM #	G/L ACCOUNT	DESCRIPTION	CHECK#	AMOUNT
01-0966	DELTA DENTAL OF MINNESO	I-22F201906263572	101-60162-1132	DENTAL FAMILY	000887	3.51
01-0966	DELTA DENTAL OF MINNESO	I-22F201906263572	101-60162-1132	DENTAL FAMILY	000887	60.70
01-0966	DELTA DENTAL OF MINNESO	I-22S201906123542	101-60162-1132	DENTAL SINGLE	000887	1.05
01-0966	DELTA DENTAL OF MINNESO	I-22S201906123542	101-60162-1132	DENTAL SINGLE	000887	1.53
01-0966	DELTA DENTAL OF MINNESO	I-22S201906123542	101-60162-1132	DENTAL SINGLE	000887	12.55
01-0966	DELTA DENTAL OF MINNESO	I-22S201906123542	101-60162-1132	DENTAL SINGLE	000887	0.62
01-0966	DELTA DENTAL OF MINNESO	I-22S201906123542	101-60162-1132	DENTAL SINGLE	000887	0.68
01-0966	DELTA DENTAL OF MINNESO	I-22S201906123542	101-60162-1132	DENTAL SINGLE	000887	1.66
01-0966	DELTA DENTAL OF MINNESO	I-22S201906263572	101-60162-1132	DENTAL SINGLE	000887	2.87
01-0966	DELTA DENTAL OF MINNESO	I-22S201906263572	101-60162-1132	DENTAL SINGLE	000887	10.04
01-0966	DELTA DENTAL OF MINNESO	I-22S201906263572	101-60162-1132	DENTAL SINGLE	000887	4.53
01-0966	DELTA DENTAL OF MINNESO	I-22S201906263572	101-60162-1132	DENTAL SINGLE	000887	0.65
01-1358	INTERNAL REVENUE SERVIC	I-T3 201906263572	101-60162-1122	SOCIAL SECURITY W/H	000889	484.24
01-1358	INTERNAL REVENUE SERVIC	I-T3 201906263572	101-60162-1122	SOCIAL SECURITY W/H	000889	21.30
01-1358	INTERNAL REVENUE SERVIC	I-T3 201906263572	101-60162-1122	SOCIAL SECURITY W/H	000889	3.72
01-1358	INTERNAL REVENUE SERVIC	I-T3 201906263572	101-60162-1122	SOCIAL SECURITY W/H	000889	134.11
01-1358	INTERNAL REVENUE SERVIC	I-T3 201906263572	101-60162-1122	SOCIAL SECURITY W/H	000889	110.06
01-1358	INTERNAL REVENUE SERVIC	I-T3 201906263572	101-60162-1122	SOCIAL SECURITY W/H	000889	178.77
01-1358	INTERNAL REVENUE SERVIC	I-T3 201906263572	101-60162-1122	SOCIAL SECURITY W/H	000889	13.68
01-1358	INTERNAL REVENUE SERVIC	I-T3 201906263572	101-60162-1122	SOCIAL SECURITY W/H	000889	35.27
01-1358	INTERNAL REVENUE SERVIC	I-T3 201906263572	101-60162-1122	SOCIAL SECURITY W/H	000889	56.13
01-1358	INTERNAL REVENUE SERVIC	I-T3 201906263572	101-60162-1122	SOCIAL SECURITY W/H	000889	245.22
01-1358	INTERNAL REVENUE SERVIC	I-T4 201906263572	101-60162-1125	MEDICARE W/H	000889	113.24
01-1358	INTERNAL REVENUE SERVIC	I-T4 201906263572	101-60162-1125	MEDICARE W/H	000889	4.98
01-1358	INTERNAL REVENUE SERVIC	I-T4 201906263572	101-60162-1125	MEDICARE W/H	000889	0.87
01-1358	INTERNAL REVENUE SERVIC	I-T4 201906263572	101-60162-1125	MEDICARE W/H	000889	31.37
01-1358	INTERNAL REVENUE SERVIC	I-T4 201906263572	101-60162-1125	MEDICARE W/H	000889	25.74
01-1358	INTERNAL REVENUE SERVIC	I-T4 201906263572	101-60162-1125	MEDICARE W/H	000889	41.80
01-1358	INTERNAL REVENUE SERVIC	I-T4 201906263572	101-60162-1125	MEDICARE W/H	000889	3.20
01-1358	INTERNAL REVENUE SERVIC	I-T4 201906263572	101-60162-1125	MEDICARE W/H	000889	8.25
01-1358	INTERNAL REVENUE SERVIC	I-T4 201906263572	101-60162-1125	MEDICARE W/H	000889	13.13
01-1358	INTERNAL REVENUE SERVIC	I-T4 201906263572	101-60162-1125	MEDICARE W/H	000889	57.35
01-2028	PERA OF MINNESOTA REG	I-13 201906263572	101-60162-1121	PERA COORDINATED	000894	578.15
01-2028	PERA OF MINNESOTA REG	I-13 201906263572	101-60162-1121	PERA COORDINATED	000894	28.25
01-2028	PERA OF MINNESOTA REG	I-13 201906263572	101-60162-1121	PERA COORDINATED	000894	4.91
01-2028	PERA OF MINNESOTA REG	I-13 201906263572	101-60162-1121	PERA COORDINATED	000894	173.12
01-2028	PERA OF MINNESOTA REG	I-13 201906263572	101-60162-1121	PERA COORDINATED	000894	143.02
01-2028	PERA OF MINNESOTA REG	I-13 201906263572	101-60162-1121	PERA COORDINATED	000894	221.03
01-2028	PERA OF MINNESOTA REG	I-13 201906263572	101-60162-1121	PERA COORDINATED	000894	17.51
01-2028	PERA OF MINNESOTA REG	I-13 201906263572	101-60162-1121	PERA COORDINATED	000894	46.59
01-2028	PERA OF MINNESOTA REG	I-13 201906263572	101-60162-1121	PERA COORDINATED	000894	69.43
01-2028	PERA OF MINNESOTA REG	I-13 201906263572	101-60162-1121	PERA COORDINATED	000894	310.06
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201906123542	101-60162-1131	FAMILY HSA 5000	000895	993.78
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201906123542	101-60162-1131	FAMILY HSA 5000	000895	269.60

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 DEPARTMENT: 0162 ENGINEERING

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VENDOR	NAME	ITEM #	G/L ACCOUNT	DESCRIPTION	CHECK#	AMOUNT
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201906123542	101-60162-1131	FAMILY HSA 5000	000895	6.89
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201906123542	101-60162-1131	FAMILY HSA 5000	000895	403.39
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201906123542	101-60162-1131	FAMILY HSA 5000	000895	44.76
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201906123542	101-60162-1131	FAMILY HSA 5000	000895	513.06
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201906263572	101-60162-1131	FAMILY HSA 5000	000895	1,088.25
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201906263572	101-60162-1131	FAMILY HSA 5000	000895	220.38
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201906263572	101-60162-1131	FAMILY HSA 5000	000895	201.43
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201906263572	101-60162-1131	FAMILY HSA 5000	000895	218.66
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201906263572	101-60162-1131	FAMILY HSA 5000	000895	599.00
01-2321	SOUTHWEST WEST CENTRAL	I-FV5201906123542	101-60162-1131	FAMILY VEBA 5000	000895	504.96
01-2321	SOUTHWEST WEST CENTRAL	I-FV5201906123542	101-60162-1131	FAMILY VEBA 5000	000895	53.56
01-2321	SOUTHWEST WEST CENTRAL	I-FV5201906123542	101-60162-1131	FAMILY VEBA 5000	000895	22.95
01-2321	SOUTHWEST WEST CENTRAL	I-FV5201906123542	101-60162-1131	FAMILY VEBA 5000	000895	30.60
01-2321	SOUTHWEST WEST CENTRAL	I-FV5201906263572	101-60162-1131	FAMILY VEBA 5000	000895	436.10
01-2321	SOUTHWEST WEST CENTRAL	I-FV5201906263572	101-60162-1131	FAMILY VEBA 5000	000895	15.30
01-2321	SOUTHWEST WEST CENTRAL	I-FV5201906263572	101-60162-1131	FAMILY VEBA 5000	000895	61.21
01-2321	SOUTHWEST WEST CENTRAL	I-FV5201906263572	101-60162-1131	FAMILY VEBA 5000	000895	45.91
01-2321	SOUTHWEST WEST CENTRAL	I-FV5201906263572	101-60162-1131	FAMILY VEBA 5000	000895	22.95
01-2321	SOUTHWEST WEST CENTRAL	I-FV5201906263572	101-60162-1131	FAMILY VEBA 5000	000895	30.60
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201906123542	101-60162-1131	SINGLE HSA 5000	000895	8.26CR
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201906123542	101-60162-1131	SINGLE HSA 5000	000895	3.48
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201906123542	101-60162-1131	SINGLE HSA 5000	000895	6.95
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201906123542	101-60162-1131	SINGLE HSA 5000	000895	13.90
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201906123542	101-60162-1131	SINGLE HSA 5000	000895	46.92
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201906123542	101-60162-1131	SINGLE HSA 5000	000895	42.58
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201906123542	101-60162-1131	SINGLE HSA 5000	000895	192.90
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201906123542	101-60162-1131	SINGLE HSA 5000	000895	13.90
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201906123542	101-60162-1131	SINGLE HSA 5000	000895	26.94
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201906123542	101-60162-1131	SINGLE HSA 5000	000895	10.43
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201906123542	101-60162-1131	SINGLE HSA 5000	000895	25.63
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201906263572	101-60162-1131	SINGLE HSA 5000	000895	7.59
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201906263572	101-60162-1131	SINGLE HSA 5000	000895	20.85
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201906263572	101-60162-1131	SINGLE HSA 5000	000895	5.21
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201906263572	101-60162-1131	SINGLE HSA 5000	000895	27.81
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201906263572	101-60162-1131	SINGLE HSA 5000	000895	36.49
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201906263572	101-60162-1131	SINGLE HSA 5000	000895	154.26
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201906263572	101-60162-1131	SINGLE HSA 5000	000895	10.43
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201906263572	101-60162-1131	SINGLE HSA 5000	000895	33.02
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201906263572	101-60162-1131	SINGLE HSA 5000	000895	69.79
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201906263572	101-60162-1131	SINGLE HSA 5000	000895	9.92
01-4805	FURTHER	I-5FH201906263572	101-60162-1135	EMPLOYER CONTRIB FAM HSA 5000	000888	270.86
01-4805	FURTHER	I-5FV201906263572	101-60162-1135	EMPLOYER CONT FAM VEBA 5000	000888	187.50
01-4805	FURTHER	I-5SH201906263572	101-60162-1135	EMPLOYER CONTRIB SNGL HSA 500	000888	84.37

DEPARTMENT 0162 ENGINEERING TOTAL: 10,843.53

VENDOR SET: 01 City of Marshall
 PACKET: 06906 06/28/2019 Payroll Entrie
 FUND : 101 GENERAL FUND
 DEPARTMENT: 0164 COMMUNITY PLANNING

ITEMS PRINTED: PAID, UNPAID

BANK: ALL

VENDOR	NAME	ITEM #	G/L ACCOUNT	DESCRIPTION	CHECK#	AMOUNT
01-0966	DELTA DENTAL OF MINNESO	I-22F201906123542	101-60164-1132	DENTAL FAMILY	000887	227.86
01-0966	DELTA DENTAL OF MINNESO	I-22F201906263572	101-60164-1132	DENTAL FAMILY	000887	221.10
01-1358	INTERNAL REVENUE SERVIC	I-T3 201906263572	101-60164-1122	SOCIAL SECURITY W/H	000889	645.53
01-1358	INTERNAL REVENUE SERVIC	I-T4 201906263572	101-60164-1125	MEDICARE W/H	000889	150.98
01-2028	PERA OF MINNESOTA REG	I-13 201906263572	101-60164-1121	PERA COORDINATED	000894	908.80
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201906123542	101-60164-1131	FAMILY HSA 5000	000895	2,065.84
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201906263572	101-60164-1131	FAMILY HSA 5000	000895	1,969.60
01-2321	SOUTHWEST WEST CENTRAL	I-FV5201906123542	101-60164-1131	FAMILY VEBA 5000	000895	612.07
01-2321	SOUTHWEST WEST CENTRAL	I-FV5201906263572	101-60164-1131	FAMILY VEBA 5000	000895	612.07
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201906123542	101-60164-1131	SINGLE HSA 5000	000895	180.73
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201906263572	101-60164-1131	SINGLE HSA 5000	000895	180.73
01-4805	FURTHER	I-5FH201906263572	101-60164-1135	EMPLOYER CONTRIB FAM HSA 5000	000888	229.18
01-4805	FURTHER	I-5FV201906263572	101-60164-1135	EMPLOYER CONT FAM VEBA 5000	000888	187.50
01-4805	FURTHER	I-5SH201906263572	101-60164-1135	EMPLOYER CONTRIB SNGL HSA 500	000888	40.63
DEPARTMENT 0164 COMMUNITY PLANNING					TOTAL:	8,232.62
01-1358	INTERNAL REVENUE SERVIC	I-T3 201906263572	101-70176-1122	SOCIAL SECURITY W/H	000889	731.67
01-1358	INTERNAL REVENUE SERVIC	I-T4 201906263572	101-70176-1125	MEDICARE W/H	000889	171.09
DEPARTMENT 0176 AQUATIC CENTER					TOTAL:	902.76
01-0966	DELTA DENTAL OF MINNESO	I-22F201906123542	101-60211-1132	DENTAL FAMILY	000887	114.68
01-0966	DELTA DENTAL OF MINNESO	I-22F201906123542	101-60211-1132	DENTAL FAMILY	000887	8.48
01-0966	DELTA DENTAL OF MINNESO	I-22F201906123542	101-60211-1132	DENTAL FAMILY	000887	0.94
01-0966	DELTA DENTAL OF MINNESO	I-22F201906123542	101-60211-1132	DENTAL FAMILY	000887	0.63
01-0966	DELTA DENTAL OF MINNESO	I-22F201906123542	101-60211-1132	DENTAL FAMILY	000887	25.13
01-0966	DELTA DENTAL OF MINNESO	I-22F201906123542	101-60211-1132	DENTAL FAMILY	000887	85.42
01-0966	DELTA DENTAL OF MINNESO	I-22F201906123542	101-60211-1132	DENTAL FAMILY	000887	11.87
01-0966	DELTA DENTAL OF MINNESO	I-22F201906123542	101-60211-1132	DENTAL FAMILY	000887	36.76
01-0966	DELTA DENTAL OF MINNESO	I-22F201906123542	101-60211-1132	DENTAL FAMILY	000887	5.03
01-0966	DELTA DENTAL OF MINNESO	I-22F201906263572	101-60211-1132	DENTAL FAMILY	000887	80.49
01-0966	DELTA DENTAL OF MINNESO	I-22F201906263572	101-60211-1132	DENTAL FAMILY	000887	31.72
01-0966	DELTA DENTAL OF MINNESO	I-22F201906263572	101-60211-1132	DENTAL FAMILY	000887	1.26
01-0966	DELTA DENTAL OF MINNESO	I-22F201906263572	101-60211-1132	DENTAL FAMILY	000887	0.94
01-0966	DELTA DENTAL OF MINNESO	I-22F201906263572	101-60211-1132	DENTAL FAMILY	000887	15.08
01-0966	DELTA DENTAL OF MINNESO	I-22F201906263572	101-60211-1132	DENTAL FAMILY	000887	122.99

VENDOR SET: 01 City of Marshall
 PACKET: 06906 06/28/2019 Payroll Entrie
 FUND : 101 GENERAL FUND
 DEPARTMENT: 0211 STREET ADMINISTRATION

ITEMS PRINTED: PAID, UNPAID

BANK: ALL

VENDOR	NAME	ITEM #	G/L ACCOUNT	DESCRIPTION	CHECK#	AMOUNT
01-0966	DELTA DENTAL OF MINNESO	I-22F201906263572	101-60211-1132	DENTAL FAMILY	000887	11.10
01-0966	DELTA DENTAL OF MINNESO	I-22F201906263572	101-60211-1132	DENTAL FAMILY	000887	27.96
01-0966	DELTA DENTAL OF MINNESO	I-22F201906263572	101-60211-1132	DENTAL FAMILY	000887	4.93
01-0966	DELTA DENTAL OF MINNESO	I-22S201906123542	101-60211-1132	DENTAL SINGLE	000887	1.87
01-0966	DELTA DENTAL OF MINNESO	I-22S201906123542	101-60211-1132	DENTAL SINGLE	000887	4.45
01-0966	DELTA DENTAL OF MINNESO	I-22S201906123542	101-60211-1132	DENTAL SINGLE	000887	11.77
01-0966	DELTA DENTAL OF MINNESO	I-22S201906263572	101-60211-1132	DENTAL SINGLE	000887	0.34CR
01-0966	DELTA DENTAL OF MINNESO	I-22S201906263572	101-60211-1132	DENTAL SINGLE	000887	5.54
01-0966	DELTA DENTAL OF MINNESO	I-22S201906263572	101-60211-1132	DENTAL SINGLE	000887	1.36
01-0966	DELTA DENTAL OF MINNESO	I-22S201906263572	101-60211-1132	DENTAL SINGLE	000887	11.53
01-1358	INTERNAL REVENUE SERVIC	I-T3 201906263572	101-60211-1122	SOCIAL SECURITY W/H	000889	274.43
01-1358	INTERNAL REVENUE SERVIC	I-T3 201906263572	101-60211-1122	SOCIAL SECURITY W/H	000889	59.95
01-1358	INTERNAL REVENUE SERVIC	I-T3 201906263572	101-60211-1122	SOCIAL SECURITY W/H	000889	4.58
01-1358	INTERNAL REVENUE SERVIC	I-T3 201906263572	101-60211-1122	SOCIAL SECURITY W/H	000889	3.43
01-1358	INTERNAL REVENUE SERVIC	I-T3 201906263572	101-60211-1122	SOCIAL SECURITY W/H	000889	43.10
01-1358	INTERNAL REVENUE SERVIC	I-T3 201906263572	101-60211-1122	SOCIAL SECURITY W/H	000889	404.48
01-1358	INTERNAL REVENUE SERVIC	I-T3 201906263572	101-60211-1122	SOCIAL SECURITY W/H	000889	32.89
01-1358	INTERNAL REVENUE SERVIC	I-T3 201906263572	101-60211-1122	SOCIAL SECURITY W/H	000889	138.54
01-1358	INTERNAL REVENUE SERVIC	I-T3 201906263572	101-60211-1122	SOCIAL SECURITY W/H	000889	74.95
01-1358	INTERNAL REVENUE SERVIC	I-T4 201906263572	101-60211-1125	MEDICARE W/H	000889	64.17
01-1358	INTERNAL REVENUE SERVIC	I-T4 201906263572	101-60211-1125	MEDICARE W/H	000889	14.02
01-1358	INTERNAL REVENUE SERVIC	I-T4 201906263572	101-60211-1125	MEDICARE W/H	000889	1.07
01-1358	INTERNAL REVENUE SERVIC	I-T4 201906263572	101-60211-1125	MEDICARE W/H	000889	0.80
01-1358	INTERNAL REVENUE SERVIC	I-T4 201906263572	101-60211-1125	MEDICARE W/H	000889	10.08
01-1358	INTERNAL REVENUE SERVIC	I-T4 201906263572	101-60211-1125	MEDICARE W/H	000889	94.60
01-1358	INTERNAL REVENUE SERVIC	I-T4 201906263572	101-60211-1125	MEDICARE W/H	000889	7.69
01-1358	INTERNAL REVENUE SERVIC	I-T4 201906263572	101-60211-1125	MEDICARE W/H	000889	32.41
01-1358	INTERNAL REVENUE SERVIC	I-T4 201906263572	101-60211-1125	MEDICARE W/H	000889	17.53
01-2028	PERA OF MINNESOTA REG	I-13 201906263572	101-60211-1121	PERA COORDINATED	000894	369.31
01-2028	PERA OF MINNESOTA REG	I-13 201906263572	101-60211-1121	PERA COORDINATED	000894	89.85
01-2028	PERA OF MINNESOTA REG	I-13 201906263572	101-60211-1121	PERA COORDINATED	000894	6.41
01-2028	PERA OF MINNESOTA REG	I-13 201906263572	101-60211-1121	PERA COORDINATED	000894	4.81
01-2028	PERA OF MINNESOTA REG	I-13 201906263572	101-60211-1121	PERA COORDINATED	000894	58.82
01-2028	PERA OF MINNESOTA REG	I-13 201906263572	101-60211-1121	PERA COORDINATED	000894	518.88
01-2028	PERA OF MINNESOTA REG	I-13 201906263572	101-60211-1121	PERA COORDINATED	000894	46.80
01-2028	PERA OF MINNESOTA REG	I-13 201906263572	101-60211-1121	PERA COORDINATED	000894	188.58
01-2028	PERA OF MINNESOTA REG	I-13 201906263572	101-60211-1121	PERA COORDINATED	000894	102.21
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201906123542	101-60211-1131	FAMILY HSA 5000	000895	1,321.53
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201906123542	101-60211-1131	FAMILY HSA 5000	000895	120.86
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201906123542	101-60211-1131	FAMILY HSA 5000	000895	13.43
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201906123542	101-60211-1131	FAMILY HSA 5000	000895	8.95
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201906123542	101-60211-1131	FAMILY HSA 5000	000895	358.11
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201906123542	101-60211-1131	FAMILY HSA 5000	000895	1,002.69
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201906123542	101-60211-1131	FAMILY HSA 5000	000895	52.73

VENDOR SET: 01 City of Marshall

ITEMS PRINTED: PAID, UNPAID

PACKET: 06906 06/28/2019 Payroll Entrie

FUND : 101 GENERAL FUND

DEPARTMENT: 0211 STREET ADMINISTRATION

BANK: ALL

VENDOR	NAME	ITEM #	G/L ACCOUNT	DESCRIPTION	CHECK#	AMOUNT
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201906123542	101-60211-1131	FAMILY HSA 5000	000895	452.11
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201906123542	101-60211-1131	FAMILY HSA 5000	000895	71.62
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201906263572	101-60211-1131	FAMILY HSA 5000	000895	918.96
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201906263572	101-60211-1131	FAMILY HSA 5000	000895	452.12
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201906263572	101-60211-1131	FAMILY HSA 5000	000895	17.91
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201906263572	101-60211-1131	FAMILY HSA 5000	000895	13.43
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201906263572	101-60211-1131	FAMILY HSA 5000	000895	214.87
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201906263572	101-60211-1131	FAMILY HSA 5000	000895	1,265.16
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201906263572	101-60211-1131	FAMILY HSA 5000	000895	158.18
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201906263572	101-60211-1131	FAMILY HSA 5000	000895	398.55
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201906263572	101-60211-1131	FAMILY HSA 5000	000895	70.30
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201906123542	101-60211-1131	SINGLE HSA 5000	000895	150.38
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201906123542	101-60211-1131	SINGLE HSA 5000	000895	151.87
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201906123542	101-60211-1131	SINGLE HSA 5000	000895	45.18
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201906123542	101-60211-1131	SINGLE HSA 5000	000895	208.67
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201906263572	101-60211-1131	SINGLE HSA 5000	000895	83.42
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201906263572	101-60211-1131	SINGLE HSA 5000	000895	274.57
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201906263572	101-60211-1131	SINGLE HSA 5000	000895	20.85
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201906263572	101-60211-1131	SINGLE HSA 5000	000895	177.26
01-2321	SOUTHWEST WEST CENTRAL	I-SV5201906123542	101-60211-1131	SINGLE VEBA 5000	000895	43.28
01-2321	SOUTHWEST WEST CENTRAL	I-SV5201906123542	101-60211-1131	SINGLE VEBA 5000	000895	10.73
01-2321	SOUTHWEST WEST CENTRAL	I-SV5201906123542	101-60211-1131	SINGLE VEBA 5000	000895	32.18
01-2321	SOUTHWEST WEST CENTRAL	I-SV5201906123542	101-60211-1131	SINGLE VEBA 5000	000895	150.19
01-2321	SOUTHWEST WEST CENTRAL	I-SV5201906263572	101-60211-1131	SINGLE VEBA 5000	000895	69.61
01-2321	SOUTHWEST WEST CENTRAL	I-SV5201906263572	101-60211-1131	SINGLE VEBA 5000	000895	8.70
01-2321	SOUTHWEST WEST CENTRAL	I-SV5201906263572	101-60211-1131	SINGLE VEBA 5000	000895	24.65
01-2321	SOUTHWEST WEST CENTRAL	I-SV5201906263572	101-60211-1131	SINGLE VEBA 5000	000895	14.50
01-2321	SOUTHWEST WEST CENTRAL	I-SV5201906263572	101-60211-1131	SINGLE VEBA 5000	000895	118.92
01-4805	FURTHER	I-5FH201906263572	101-60211-1135	EMPLOYER CONTRIB FAM HSA 5000	000888	408.36
01-4805	FURTHER	I-5SH201906263572	101-60211-1135	EMPLOYER CONTRIB SNGL HSA 500	000888	125.00
01-4805	FURTHER	I-5SV201906263572	101-60211-1135	EMPLOYER CONT SINGL VEBA 5000	000888	104.17
DEPARTMENT 0211 STREET ADMINISTRATION TOTAL:						12,419.98
01-0966	DELTA DENTAL OF MINNESO	I-22F201906123542	101-70276-1132	DENTAL FAMILY	000887	100.50
01-0966	DELTA DENTAL OF MINNESO	I-22F201906263572	101-70276-1132	DENTAL FAMILY	000887	100.50
01-0966	DELTA DENTAL OF MINNESO	I-22S201906123542	101-70276-1132	DENTAL SINGLE	000887	18.09
01-0966	DELTA DENTAL OF MINNESO	I-22S201906263572	101-70276-1132	DENTAL SINGLE	000887	18.09
01-1358	INTERNAL REVENUE SERVIC	I-T3 201906263572	101-70276-1122	SOCIAL SECURITY W/H	000889	1,211.10
01-1358	INTERNAL REVENUE SERVIC	I-T4 201906263572	101-70276-1125	MEDICARE W/H	000889	283.26

VENDOR SET: 01 City of Marshall
 PACKET: 06906 06/28/2019 Payroll Entrie
 FUND : 101 GENERAL FUND
 DEPARTMENT: 0276 PARK MAINTENANCE & DEVEL.

ITEMS PRINTED: PAID, UNPAID

BANK: ALL

VENDOR	NAME	ITEM #	G/L ACCOUNT	DESCRIPTION	CHECK#	AMOUNT
01-2028	PERA OF MINNESOTA REG	I-13 201906263572	101-70276-1121	PERA COORDINATED	000894	772.63
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201906123542	101-70276-1131	FAMILY HSA 5000	000895	716.22
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201906263572	101-70276-1131	FAMILY HSA 5000	000895	716.22
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201906123542	101-70276-1131	SINGLE HSA 5000	000895	278.05
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201906263572	101-70276-1131	SINGLE HSA 5000	000895	278.05
01-4805	FURTHER	I-5FH201906263572	101-70276-1135	EMPLOYER CONTRIB FAM HSA 5000	000888	83.34
01-4805	FURTHER	I-5SH201906263572	101-70276-1135	EMPLOYER CONTRIB SNGL HSA 500	000888	62.50
DEPARTMENT 0276 PARK MAINTENANCE & DEV TOTAL:						4,638.55
01-0966	DELTA DENTAL OF MINNESO	I-22F201906123542	101-60364-1132	DENTAL FAMILY	000887	34.08
01-0966	DELTA DENTAL OF MINNESO	I-22F201906123542	101-60364-1132	DENTAL FAMILY	000887	6.28
01-0966	DELTA DENTAL OF MINNESO	I-22F201906123542	101-60364-1132	DENTAL FAMILY	000887	8.16
01-0966	DELTA DENTAL OF MINNESO	I-22F201906123542	101-60364-1132	DENTAL FAMILY	000887	5.66
01-0966	DELTA DENTAL OF MINNESO	I-22F201906123542	101-60364-1132	DENTAL FAMILY	000887	38.78
01-0966	DELTA DENTAL OF MINNESO	I-22F201906123542	101-60364-1132	DENTAL FAMILY	000887	17.59
01-0966	DELTA DENTAL OF MINNESO	I-22F201906123542	101-60364-1132	DENTAL FAMILY	000887	2.51
01-0966	DELTA DENTAL OF MINNESO	I-22F201906263572	101-60364-1132	DENTAL FAMILY	000887	31.40
01-0966	DELTA DENTAL OF MINNESO	I-22F201906263572	101-60364-1132	DENTAL FAMILY	000887	9.10
01-0966	DELTA DENTAL OF MINNESO	I-22F201906263572	101-60364-1132	DENTAL FAMILY	000887	19.48
01-0966	DELTA DENTAL OF MINNESO	I-22F201906263572	101-60364-1132	DENTAL FAMILY	000887	12.57
01-0966	DELTA DENTAL OF MINNESO	I-22F201906263572	101-60364-1132	DENTAL FAMILY	000887	8.80
01-0966	DELTA DENTAL OF MINNESO	I-22F201906263572	101-60364-1132	DENTAL FAMILY	000887	18.53
01-0966	DELTA DENTAL OF MINNESO	I-22F201906263572	101-60364-1132	DENTAL FAMILY	000887	5.65
01-1358	INTERNAL REVENUE SERVIC	I-T3 201906263572	101-60364-1122	SOCIAL SECURITY W/H	000889	80.03
01-1358	INTERNAL REVENUE SERVIC	I-T3 201906263572	101-60364-1122	SOCIAL SECURITY W/H	000889	22.43
01-1358	INTERNAL REVENUE SERVIC	I-T3 201906263572	101-60364-1122	SOCIAL SECURITY W/H	000889	66.71
01-1358	INTERNAL REVENUE SERVIC	I-T3 201906263572	101-60364-1122	SOCIAL SECURITY W/H	000889	36.36
01-1358	INTERNAL REVENUE SERVIC	I-T3 201906263572	101-60364-1122	SOCIAL SECURITY W/H	000889	78.92
01-1358	INTERNAL REVENUE SERVIC	I-T3 201906263572	101-60364-1122	SOCIAL SECURITY W/H	000889	206.84
01-1358	INTERNAL REVENUE SERVIC	I-T3 201906263572	101-60364-1122	SOCIAL SECURITY W/H	000889	20.97
01-1358	INTERNAL REVENUE SERVIC	I-T4 201906263572	101-60364-1125	MEDICARE W/H	000889	18.72
01-1358	INTERNAL REVENUE SERVIC	I-T4 201906263572	101-60364-1125	MEDICARE W/H	000889	5.24
01-1358	INTERNAL REVENUE SERVIC	I-T4 201906263572	101-60364-1125	MEDICARE W/H	000889	15.61
01-1358	INTERNAL REVENUE SERVIC	I-T4 201906263572	101-60364-1125	MEDICARE W/H	000889	8.50
01-1358	INTERNAL REVENUE SERVIC	I-T4 201906263572	101-60364-1125	MEDICARE W/H	000889	18.47
01-1358	INTERNAL REVENUE SERVIC	I-T4 201906263572	101-60364-1125	MEDICARE W/H	000889	48.37
01-1358	INTERNAL REVENUE SERVIC	I-T4 201906263572	101-60364-1125	MEDICARE W/H	000889	4.90
01-2028	PERA OF MINNESOTA REG	I-13 201906263572	101-60364-1121	PERA COORDINATED	000894	115.71
01-2028	PERA OF MINNESOTA REG	I-13 201906263572	101-60364-1121	PERA COORDINATED	000894	32.43
01-2028	PERA OF MINNESOTA REG	I-13 201906263572	101-60364-1121	PERA COORDINATED	000894	70.77

VENDOR SET: 01 City of Marshall

ITEMS PRINTED: PAID, UNPAID

PACKET: 06906 06/28/2019 Payroll Entrie

FUND : 101 GENERAL FUND

DEPARTMENT: 0364 AIRPORT

BANK: ALL

VENDOR	NAME	ITEM #	G/L ACCOUNT	DESCRIPTION	CHECK#	AMOUNT
01-2028	PERA OF MINNESOTA REG	I-13 201906263572	101-60364-1121	PERA COORDINATED	000894	48.53
01-2028	PERA OF MINNESOTA REG	I-13 201906263572	101-60364-1121	PERA COORDINATED	000894	25.31
01-2028	PERA OF MINNESOTA REG	I-13 201906263572	101-60364-1121	PERA COORDINATED	000894	66.11
01-2028	PERA OF MINNESOTA REG	I-13 201906263572	101-60364-1121	PERA COORDINATED	000894	20.17
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201906123542	101-60364-1131	FAMILY HSA 5000	000895	485.70
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201906123542	101-60364-1131	FAMILY HSA 5000	000895	89.53
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201906123542	101-60364-1131	FAMILY HSA 5000	000895	116.39
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201906123542	101-60364-1131	FAMILY HSA 5000	000895	80.57
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201906123542	101-60364-1131	FAMILY HSA 5000	000895	552.83
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201906123542	101-60364-1131	FAMILY HSA 5000	000895	250.68
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201906123542	101-60364-1131	FAMILY HSA 5000	000895	35.81
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201906263572	101-60364-1131	FAMILY HSA 5000	000895	447.62
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201906263572	101-60364-1131	FAMILY HSA 5000	000895	129.82
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201906263572	101-60364-1131	FAMILY HSA 5000	000895	277.54
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201906263572	101-60364-1131	FAMILY HSA 5000	000895	179.06
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201906263572	101-60364-1131	FAMILY HSA 5000	000895	125.34
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201906263572	101-60364-1131	FAMILY HSA 5000	000895	264.11
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201906263572	101-60364-1131	FAMILY HSA 5000	000895	80.57
01-4805	FURTHER	I-5FH201906263572	101-60364-1135	EMPLOYER CONTRIB FAM HSA 5000	000888	175.02
DEPARTMENT 0364 AIRPORT					TOTAL:	4,520.28
01-1358	INTERNAL REVENUE SERVIC	I-T3 201906263572	101-70377-1122	SOCIAL SECURITY W/H	000889	261.27
01-1358	INTERNAL REVENUE SERVIC	I-T4 201906263572	101-70377-1125	MEDICARE W/H	000889	61.07
DEPARTMENT 0377 MUNICIPAL BAND					TOTAL:	322.34
01-0966	DELTA DENTAL OF MINNESO	I-22F201906123542	101-50453-1132	DENTAL FAMILY	000887	15.07
01-0966	DELTA DENTAL OF MINNESO	I-22F201906263572	101-50453-1132	DENTAL FAMILY	000887	15.08
01-1358	INTERNAL REVENUE SERVIC	I-T3 201906263572	101-50453-1122	SOCIAL SECURITY W/H	000889	33.97
01-1358	INTERNAL REVENUE SERVIC	I-T4 201906263572	101-50453-1125	MEDICARE W/H	000889	7.95
01-2028	PERA OF MINNESOTA REG	I-13 201906263572	101-50453-1121	PERA COORDINATED	000894	44.12
01-2321	SOUTHWEST WEST CENTRAL	I-SV5201906123542	101-50453-1131	SINGLE VEBA 5000	000895	70.91
01-2321	SOUTHWEST WEST CENTRAL	I-SV5201906263572	101-50453-1131	SINGLE VEBA 5000	000895	70.92
01-4805	FURTHER	I-5SV201906263572	101-50453-1135	EMPLOYER CONT SINGL VEBA 5000	000888	31.26
DEPARTMENT 0453 ANIMAL IMPOUNDMENT					TOTAL:	289.28

VENDOR SET: 01 City of Marshall
 PACKET: 06906 06/28/2019 Payroll Entrie
 FUND : 101 GENERAL FUND
 DEPARTMENT: 0671 CABLE COMMISSION

ITEMS PRINTED: PAID, UNPAID

BANK: ALL

VENDOR	NAME	ITEM #	G/L ACCOUNT	DESCRIPTION	CHECK#	AMOUNT
01-0966	DELTA DENTAL OF MINNESO	I-22F201906123542	101-40671-1132	DENTAL FAMILY	000887	40.20
01-0966	DELTA DENTAL OF MINNESO	I-22F201906263572	101-40671-1132	DENTAL FAMILY	000887	40.20
01-0966	DELTA DENTAL OF MINNESO	I-22S201906123542	101-40671-1132	DENTAL SINGLE	000887	18.09
01-0966	DELTA DENTAL OF MINNESO	I-22S201906263572	101-40671-1132	DENTAL SINGLE	000887	18.09
01-1358	INTERNAL REVENUE SERVIC	I-T3 201906263572	101-40671-1122	SOCIAL SECURITY W/H	000889	220.07
01-1358	INTERNAL REVENUE SERVIC	I-T4 201906263572	101-40671-1125	MEDICARE W/H	000889	51.47
01-2028	PERA OF MINNESOTA REG	I-13 201906263572	101-40671-1121	PERA COORDINATED	000894	272.02
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201906123542	101-40671-1131	FAMILY HSA 5000	000895	572.98
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201906263572	101-40671-1131	FAMILY HSA 5000	000895	572.98
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201906123542	101-40671-1131	SINGLE HSA 5000	000895	278.05
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201906263572	101-40671-1131	SINGLE HSA 5000	000895	278.05
01-4805	FURTHER	I-5FH201906263572	101-40671-1135	EMPLOYER CONTRIB FAM HSA 5000	000888	66.67
01-4805	FURTHER	I-5SH201906263572	101-40671-1135	EMPLOYER CONTRIB SNGL HSA 500	000888	62.50
DEPARTMENT 0671 CABLE COMMISSION						TOTAL: 2,491.37
01-0966	DELTA DENTAL OF MINNESO	I-22F201906123542	101-70675-1132	DENTAL FAMILY	000887	100.50
01-0966	DELTA DENTAL OF MINNESO	I-22F201906263572	101-70675-1132	DENTAL FAMILY	000887	100.50
01-0966	DELTA DENTAL OF MINNESO	I-22S201906123542	101-70675-1132	DENTAL SINGLE	000887	18.09
01-0966	DELTA DENTAL OF MINNESO	I-22S201906263572	101-70675-1132	DENTAL SINGLE	000887	18.09
01-1358	INTERNAL REVENUE SERVIC	I-T3 201906263572	101-70675-1122	SOCIAL SECURITY W/H	000889	492.78
01-1358	INTERNAL REVENUE SERVIC	I-T4 201906263572	101-70675-1125	MEDICARE W/H	000889	115.24
01-2028	PERA OF MINNESOTA REG	I-13 201906263572	101-70675-1121	PERA COORDINATED	000894	633.24
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201906123542	101-70675-1131	FAMILY HSA 5000	000895	716.22
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201906263572	101-70675-1131	FAMILY HSA 5000	000895	716.22
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201906123542	101-70675-1131	SINGLE HSA 5000	000895	278.05
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201906263572	101-70675-1131	SINGLE HSA 5000	000895	278.05
01-2321	SOUTHWEST WEST CENTRAL	I-SV5201906123542	101-70675-1131	SINGLE VEBA 5000	000895	236.38
01-2321	SOUTHWEST WEST CENTRAL	I-SV5201906263572	101-70675-1131	SINGLE VEBA 5000	000895	236.38
01-4805	FURTHER	I-5FH201906263572	101-70675-1135	EMPLOYER CONTRIB FAM HSA 5000	000888	83.34
01-4805	FURTHER	I-5SH201906263572	101-70675-1135	EMPLOYER CONTRIB SNGL HSA 500	000888	62.50

VENDOR SET: 01 City of Marshall
 PACKET: 06906 06/28/2019 Payroll Entrie
 FUND : 101 GENERAL FUND
 DEPARTMENT: 0675 COMM SERVICES ADMIN

ITEMS PRINTED: PAID, UNPAID

BANK: ALL

VENDOR	NAME	ITEM #	G/L ACCOUNT	DESCRIPTION	CHECK#	AMOUNT
01-4805	FURTHER	I-5SV201906263572	101-70675-1135	EMPLOYER CONT SINGL VEBA 5000	000888	104.17
DEPARTMENT 0675 COMM SERVICES ADMIN						TOTAL: 4,189.75
01-0966	DELTA DENTAL OF MINNESO	I-22F201906123542	101-40741-1132	DENTAL FAMILY	000887	150.75
01-0966	DELTA DENTAL OF MINNESO	I-22F201906263572	101-40741-1132	DENTAL FAMILY	000887	150.75
01-1358	INTERNAL REVENUE SERVIC	I-T3 201906263572	101-40741-1122	SOCIAL SECURITY W/H	000889	852.26
01-1358	INTERNAL REVENUE SERVIC	I-T4 201906263572	101-40741-1125	MEDICARE W/H	000889	199.33
01-2028	PERA OF MINNESOTA REG	I-13 201906263572	101-40741-1121	PERA COORDINATED	000894	1,103.76
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201906123542	101-40741-1131	FAMILY HSA 5000	000895	1,432.44
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201906263572	101-40741-1131	FAMILY HSA 5000	000895	1,432.44
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201906123542	101-40741-1131	SINGLE HSA 5000	000895	556.10
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201906263572	101-40741-1131	SINGLE HSA 5000	000895	556.10
01-2321	SOUTHWEST WEST CENTRAL	I-SV5201906123542	101-40741-1131	SINGLE VEBA 5000	000895	236.38
01-2321	SOUTHWEST WEST CENTRAL	I-SV5201906263572	101-40741-1131	SINGLE VEBA 5000	000895	236.38
01-4805	FURTHER	I-5FH201906263572	101-40741-1135	EMPLOYER CONTRIB FAM HSA 5000	000888	166.68
01-4805	FURTHER	I-5SH201906263572	101-40741-1135	EMPLOYER CONTRIB SNGL HSA 500	000888	125.00
01-4805	FURTHER	I-5SV201906263572	101-40741-1135	EMPLOYER CONT SINGL VEBA 5000	000888	104.17
DEPARTMENT 0741 CITY ADMINISTRATION						TOTAL: 7,302.54
01-0966	DELTA DENTAL OF MINNESO	I-22F201906123542	101-40821-1132	DENTAL FAMILY	000887	150.75
01-0966	DELTA DENTAL OF MINNESO	I-22F201906263572	101-40821-1132	DENTAL FAMILY	000887	150.75
01-1358	INTERNAL REVENUE SERVIC	I-T3 201906263572	101-40821-1122	SOCIAL SECURITY W/H	000889	505.31
01-1358	INTERNAL REVENUE SERVIC	I-T4 201906263572	101-40821-1125	MEDICARE W/H	000889	118.18
01-2028	PERA OF MINNESOTA REG	I-13 201906263572	101-40821-1121	PERA COORDINATED	000894	689.10
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201906123542	101-40821-1131	FAMILY HSA 5000	000895	1,432.44
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201906263572	101-40821-1131	FAMILY HSA 5000	000895	1,432.44
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201906123542	101-40821-1131	SINGLE HSA 5000	000895	278.05
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201906263572	101-40821-1131	SINGLE HSA 5000	000895	278.05
01-4805	FURTHER	I-5FH201906263572	101-40821-1135	EMPLOYER CONTRIB FAM HSA 5000	000888	166.68

VENDOR SET: 01 City of Marshall
 PACKET: 06906 06/28/2019 Payroll Entrie
 FUND : 101 GENERAL FUND
 DEPARTMENT: 0821 FINANCE

ITEMS PRINTED: PAID, UNPAID

BANK: ALL

VENDOR	NAME	ITEM #	G/L ACCOUNT	DESCRIPTION	CHECK#	AMOUNT
01-4805	FURTHER	I-5SH201906263572	101-40821-1135	EMPLOYER CONTRIB SNGL HSA 500	000888	62.50
DEPARTMENT 0821 FINANCE					TOTAL:	5,264.25
01-0966	DELTA DENTAL OF MINNESO	I-22F201906123542	101-70871-1132	DENTAL FAMILY	000887	50.25
01-0966	DELTA DENTAL OF MINNESO	I-22F201906263572	101-70871-1132	DENTAL FAMILY	000887	50.25
01-1358	INTERNAL REVENUE SERVIC	I-T3 201906263572	101-70871-1122	SOCIAL SECURITY W/H	000889	117.07
01-1358	INTERNAL REVENUE SERVIC	I-T3 201906263572	101-70871-1122	SOCIAL SECURITY W/H	000889	80.30
01-1358	INTERNAL REVENUE SERVIC	I-T3 201906263572	101-70871-1122	SOCIAL SECURITY W/H	000889	8.68
01-1358	INTERNAL REVENUE SERVIC	I-T3 201906263572	101-70871-1122	SOCIAL SECURITY W/H	000889	44.62
01-1358	INTERNAL REVENUE SERVIC	I-T3 201906263572	101-70871-1122	SOCIAL SECURITY W/H	000889	191.54
01-1358	INTERNAL REVENUE SERVIC	I-T3 201906263572	101-70871-1122	SOCIAL SECURITY W/H	000889	120.78
01-1358	INTERNAL REVENUE SERVIC	I-T3 201906263572	101-70871-1122	SOCIAL SECURITY W/H	000889	229.94
01-1358	INTERNAL REVENUE SERVIC	I-T3 201906263572	101-70871-1122	SOCIAL SECURITY W/H	000889	55.35
01-1358	INTERNAL REVENUE SERVIC	I-T4 201906263572	101-70871-1125	MEDICARE W/H	000889	27.38
01-1358	INTERNAL REVENUE SERVIC	I-T4 201906263572	101-70871-1125	MEDICARE W/H	000889	18.77
01-1358	INTERNAL REVENUE SERVIC	I-T4 201906263572	101-70871-1125	MEDICARE W/H	000889	2.03
01-1358	INTERNAL REVENUE SERVIC	I-T4 201906263572	101-70871-1125	MEDICARE W/H	000889	10.43
01-1358	INTERNAL REVENUE SERVIC	I-T4 201906263572	101-70871-1125	MEDICARE W/H	000889	44.78
01-1358	INTERNAL REVENUE SERVIC	I-T4 201906263572	101-70871-1125	MEDICARE W/H	000889	28.25
01-1358	INTERNAL REVENUE SERVIC	I-T4 201906263572	101-70871-1125	MEDICARE W/H	000889	53.78
01-1358	INTERNAL REVENUE SERVIC	I-T4 201906263572	101-70871-1125	MEDICARE W/H	000889	12.94
01-2028	PERA OF MINNESOTA REG	I-13 201906263572	101-70871-1121	PERA COORDINATED	000894	144.00
DEPARTMENT 0871 COMM ED-SUMMER					TOTAL:	1,291.14
01-0966	DELTA DENTAL OF MINNESO	I-22F201906123542	101-40931-1132	DENTAL FAMILY	000887	50.25
01-0966	DELTA DENTAL OF MINNESO	I-22F201906263572	101-40931-1132	DENTAL FAMILY	000887	50.25
01-0966	DELTA DENTAL OF MINNESO	I-22S201906123542	101-40931-1132	DENTAL SINGLE	000887	35.73
01-0966	DELTA DENTAL OF MINNESO	I-22S201906123542	101-40931-1132	DENTAL SINGLE	000887	0.45
01-0966	DELTA DENTAL OF MINNESO	I-22S201906263572	101-40931-1132	DENTAL SINGLE	000887	35.95
01-0966	DELTA DENTAL OF MINNESO	I-22S201906263572	101-40931-1132	DENTAL SINGLE	000887	0.23
01-1358	INTERNAL REVENUE SERVIC	I-T3 201906263572	101-40931-1122	SOCIAL SECURITY W/H	000889	415.02
01-1358	INTERNAL REVENUE SERVIC	I-T3 201906263572	101-40931-1122	SOCIAL SECURITY W/H	000889	1.45
01-1358	INTERNAL REVENUE SERVIC	I-T4 201906263572	101-40931-1125	MEDICARE W/H	000889	97.05
01-1358	INTERNAL REVENUE SERVIC	I-T4 201906263572	101-40931-1125	MEDICARE W/H	000889	0.34
01-2028	PERA OF MINNESOTA REG	I-13 201906263572	101-40931-1121	PERA COORDINATED	000894	598.65
01-2028	PERA OF MINNESOTA REG	I-13 201906263572	101-40931-1121	PERA COORDINATED	000894	2.19
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201906123542	101-40931-1131	FAMILY HSA 5000	000895	2,130.75

VENDOR SET: 01 City of Marshall
 PACKET: 06906 06/28/2019 Payroll Entrie
 FUND : 101 GENERAL FUND
 DEPARTMENT: 0931 APPRAISING & ASSESSING

ITEMS PRINTED: PAID, UNPAID

BANK: ALL

VENDOR	NAME	ITEM #	G/L ACCOUNT	DESCRIPTION	CHECK#	AMOUNT
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201906123542	101-40931-1131	FAMILY HSA 5000	000895	17.91
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201906263572	101-40931-1131	FAMILY HSA 5000	000895	2,139.71
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201906263572	101-40931-1131	FAMILY HSA 5000	000895	8.95
01-4805	FURTHER	I-5FH201906263572	101-40931-1135	EMPLOYER CONTRIB FAM HSA 5000	000888	250.02
DEPARTMENT 0931 APPRAISING & ASSESSING TOTAL:						5,834.90
01-0966	DELTA DENTAL OF MINNESO	I-22F201906123542	101-70971-1132	DENTAL FAMILY	000887	50.25
01-0966	DELTA DENTAL OF MINNESO	I-22F201906263572	101-70971-1132	DENTAL FAMILY	000887	50.25
01-1358	INTERNAL REVENUE SERVIC	I-T3 201906263572	101-70971-1122	SOCIAL SECURITY W/H	000889	126.07
01-1358	INTERNAL REVENUE SERVIC	I-T3 201906263572	101-70971-1122	SOCIAL SECURITY W/H	000889	8.14
01-1358	INTERNAL REVENUE SERVIC	I-T3 201906263572	101-70971-1122	SOCIAL SECURITY W/H	000889	111.01
01-1358	INTERNAL REVENUE SERVIC	I-T3 201906263572	101-70971-1122	SOCIAL SECURITY W/H	000889	31.88
01-1358	INTERNAL REVENUE SERVIC	I-T3 201906263572	101-70971-1122	SOCIAL SECURITY W/H	000889	156.38
01-1358	INTERNAL REVENUE SERVIC	I-T3 201906263572	101-70971-1122	SOCIAL SECURITY W/H	000889	51.62
01-1358	INTERNAL REVENUE SERVIC	I-T3 201906263572	101-70971-1122	SOCIAL SECURITY W/H	000889	30.25
01-1358	INTERNAL REVENUE SERVIC	I-T4 201906263572	101-70971-1125	MEDICARE W/H	000889	29.48
01-1358	INTERNAL REVENUE SERVIC	I-T4 201906263572	101-70971-1125	MEDICARE W/H	000889	1.90
01-1358	INTERNAL REVENUE SERVIC	I-T4 201906263572	101-70971-1125	MEDICARE W/H	000889	25.97
01-1358	INTERNAL REVENUE SERVIC	I-T4 201906263572	101-70971-1125	MEDICARE W/H	000889	7.46
01-1358	INTERNAL REVENUE SERVIC	I-T4 201906263572	101-70971-1125	MEDICARE W/H	000889	36.56
01-1358	INTERNAL REVENUE SERVIC	I-T4 201906263572	101-70971-1125	MEDICARE W/H	000889	12.07
01-1358	INTERNAL REVENUE SERVIC	I-T4 201906263572	101-70971-1125	MEDICARE W/H	000889	7.08
01-2028	PERA OF MINNESOTA REG	I-13 201906263572	101-70971-1121	PERA COORDINATED	000894	180.00
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201906123542	101-70971-1131	FAMILY HSA 5000	000895	716.22
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201906263572	101-70971-1131	FAMILY HSA 5000	000895	716.22
01-4805	FURTHER	I-5FH201906263572	101-70971-1135	EMPLOYER CONTRIB FAM HSA 5000	000888	83.34
DEPARTMENT 0971 RECREATION-SUMMER TOTAL:						2,432.15
01-1358	INTERNAL REVENUE SERVIC	I-T3 201906263572	101-70979-1122	SOCIAL SECURITY W/H	000889	5.35
01-1358	INTERNAL REVENUE SERVIC	I-T4 201906263572	101-70979-1125	MEDICARE W/H	000889	1.25
DEPARTMENT 0979 RECREATION-WINTER TOTAL:						6.60
01-0966	DELTA DENTAL OF MINNESO	I-22F201906123542	101-41231-1132	DENTAL FAMILY	000887	5.03
01-0966	DELTA DENTAL OF MINNESO	I-22F201906123542	101-41231-1132	DENTAL FAMILY	000887	2.20
01-0966	DELTA DENTAL OF MINNESO	I-22F201906123542	101-41231-1132	DENTAL FAMILY	000887	33.29
01-0966	DELTA DENTAL OF MINNESO	I-22F201906123542	101-41231-1132	DENTAL FAMILY	000887	1.88

VENDOR SET: 01 City of Marshall
 PACKET: 06906 06/28/2019 Payroll Entrie
 FUND : 101 GENERAL FUND
 DEPARTMENT: 1231 MUNICIPAL BLDG MAINT

ITEMS PRINTED: PAID, UNPAID

BANK: ALL

VENDOR	NAME	ITEM #	G/L ACCOUNT	DESCRIPTION	CHECK#	AMOUNT
01-0966	DELTA DENTAL OF MINNESO	I-22F201906123542	101-41231-1132	DENTAL FAMILY	000887	0.31
01-0966	DELTA DENTAL OF MINNESO	I-22F201906123542	101-41231-1132	DENTAL FAMILY	000887	0.94
01-0966	DELTA DENTAL OF MINNESO	I-22F201906123542	101-41231-1132	DENTAL FAMILY	000887	6.60
01-0966	DELTA DENTAL OF MINNESO	I-22F201906263572	101-41231-1132	DENTAL FAMILY	000887	3.42
01-0966	DELTA DENTAL OF MINNESO	I-22F201906263572	101-41231-1132	DENTAL FAMILY	000887	4.82
01-0966	DELTA DENTAL OF MINNESO	I-22F201906263572	101-41231-1132	DENTAL FAMILY	000887	30.96
01-0966	DELTA DENTAL OF MINNESO	I-22F201906263572	101-41231-1132	DENTAL FAMILY	000887	5.60
01-0966	DELTA DENTAL OF MINNESO	I-22F201906263572	101-41231-1132	DENTAL FAMILY	000887	0.47
01-0966	DELTA DENTAL OF MINNESO	I-22F201906263572	101-41231-1132	DENTAL FAMILY	000887	0.62
01-0966	DELTA DENTAL OF MINNESO	I-22F201906263572	101-41231-1132	DENTAL FAMILY	000887	4.36
01-0966	DELTA DENTAL OF MINNESO	I-22S201906123542	101-41231-1132	DENTAL SINGLE	000887	1.41
01-0966	DELTA DENTAL OF MINNESO	I-22S201906123542	101-41231-1132	DENTAL SINGLE	000887	1.36
01-0966	DELTA DENTAL OF MINNESO	I-22S201906123542	101-41231-1132	DENTAL SINGLE	000887	1.58
01-0966	DELTA DENTAL OF MINNESO	I-22S201906123542	101-41231-1132	DENTAL SINGLE	000887	13.51
01-0966	DELTA DENTAL OF MINNESO	I-22S201906123542	101-41231-1132	DENTAL SINGLE	000887	0.23
01-0966	DELTA DENTAL OF MINNESO	I-22S201906263572	101-41231-1132	DENTAL SINGLE	000887	1.53
01-0966	DELTA DENTAL OF MINNESO	I-22S201906263572	101-41231-1132	DENTAL SINGLE	000887	0.90
01-0966	DELTA DENTAL OF MINNESO	I-22S201906263572	101-41231-1132	DENTAL SINGLE	000887	1.24
01-0966	DELTA DENTAL OF MINNESO	I-22S201906263572	101-41231-1132	DENTAL SINGLE	000887	13.85
01-0966	DELTA DENTAL OF MINNESO	I-22S201906263572	101-41231-1132	DENTAL SINGLE	000887	0.57
01-1358	INTERNAL REVENUE SERVIC	I-T3 201906263572	101-41231-1122	SOCIAL SECURITY W/H	000889	17.38
01-1358	INTERNAL REVENUE SERVIC	I-T3 201906263572	101-41231-1122	SOCIAL SECURITY W/H	000889	19.16
01-1358	INTERNAL REVENUE SERVIC	I-T3 201906263572	101-41231-1122	SOCIAL SECURITY W/H	000889	32.85
01-1358	INTERNAL REVENUE SERVIC	I-T3 201906263572	101-41231-1122	SOCIAL SECURITY W/H	000889	157.69
01-1358	INTERNAL REVENUE SERVIC	I-T3 201906263572	101-41231-1122	SOCIAL SECURITY W/H	000889	31.42
01-1358	INTERNAL REVENUE SERVIC	I-T3 201906263572	101-41231-1122	SOCIAL SECURITY W/H	000889	5.96
01-1358	INTERNAL REVENUE SERVIC	I-T3 201906263572	101-41231-1122	SOCIAL SECURITY W/H	000889	3.74
01-1358	INTERNAL REVENUE SERVIC	I-T3 201906263572	101-41231-1122	SOCIAL SECURITY W/H	000889	35.53
01-1358	INTERNAL REVENUE SERVIC	I-T3 201906263572	101-41231-1122	SOCIAL SECURITY W/H	000889	10.53
01-1358	INTERNAL REVENUE SERVIC	I-T4 201906263572	101-41231-1125	MEDICARE W/H	000889	4.07
01-1358	INTERNAL REVENUE SERVIC	I-T4 201906263572	101-41231-1125	MEDICARE W/H	000889	4.48
01-1358	INTERNAL REVENUE SERVIC	I-T4 201906263572	101-41231-1125	MEDICARE W/H	000889	7.69
01-1358	INTERNAL REVENUE SERVIC	I-T4 201906263572	101-41231-1125	MEDICARE W/H	000889	36.87
01-1358	INTERNAL REVENUE SERVIC	I-T4 201906263572	101-41231-1125	MEDICARE W/H	000889	7.36
01-1358	INTERNAL REVENUE SERVIC	I-T4 201906263572	101-41231-1125	MEDICARE W/H	000889	1.39
01-1358	INTERNAL REVENUE SERVIC	I-T4 201906263572	101-41231-1125	MEDICARE W/H	000889	0.87
01-1358	INTERNAL REVENUE SERVIC	I-T4 201906263572	101-41231-1125	MEDICARE W/H	000889	8.31
01-1358	INTERNAL REVENUE SERVIC	I-T4 201906263572	101-41231-1125	MEDICARE W/H	000889	2.46
01-2028	PERA OF MINNESOTA REG	I-13 201906263572	101-41231-1121	PERA COORDINATED	000894	24.53
01-2028	PERA OF MINNESOTA REG	I-13 201906263572	101-41231-1121	PERA COORDINATED	000894	23.86
01-2028	PERA OF MINNESOTA REG	I-13 201906263572	101-41231-1121	PERA COORDINATED	000894	44.00
01-2028	PERA OF MINNESOTA REG	I-13 201906263572	101-41231-1121	PERA COORDINATED	000894	222.51
01-2028	PERA OF MINNESOTA REG	I-13 201906263572	101-41231-1121	PERA COORDINATED	000894	24.75
01-2028	PERA OF MINNESOTA REG	I-13 201906263572	101-41231-1121	PERA COORDINATED	000894	3.48
01-2028	PERA OF MINNESOTA REG	I-13 201906263572	101-41231-1121	PERA COORDINATED	000894	4.95

VENDOR SET: 01 City of Marshall
PACKET: 06906 06/28/2019 Payroll Entrie
FUND : 101 GENERAL FUND
DEPARTMENT: 1231 MUNICIPAL BLDG MAINT

ITEMS PRINTED: PAID, UNPAID

BANK: ALL

VENDOR	NAME	ITEM #	G/L ACCOUNT	DESCRIPTION	CHECK#	AMOUNT	
01-2028	PERA OF MINNESOTA REG	I-13 201906263572	101-41231-1121	PERA COORDINATED	000894	42.98	
01-2028	PERA OF MINNESOTA REG	I-13 201906263572	101-41231-1121	PERA COORDINATED	000894	15.75	
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201906123542	101-41231-1131	FAMILY HSA 5000	000895	71.62	
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201906123542	101-41231-1131	FAMILY HSA 5000	000895	31.33	
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201906123542	101-41231-1131	FAMILY HSA 5000	000895	474.50	
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201906123542	101-41231-1131	FAMILY HSA 5000	000895	26.86	
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201906123542	101-41231-1131	FAMILY HSA 5000	000895	4.48	
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201906123542	101-41231-1131	FAMILY HSA 5000	000895	13.43	
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201906123542	101-41231-1131	FAMILY HSA 5000	000895	94.00	
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201906263572	101-41231-1131	FAMILY HSA 5000	000895	48.78	
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201906263572	101-41231-1131	FAMILY HSA 5000	000895	68.74	
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201906263572	101-41231-1131	FAMILY HSA 5000	000895	441.26	
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201906263572	101-41231-1131	FAMILY HSA 5000	000895	79.83	
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201906263572	101-41231-1131	FAMILY HSA 5000	000895	6.65	
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201906263572	101-41231-1131	FAMILY HSA 5000	000895	8.87	
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201906263572	101-41231-1131	FAMILY HSA 5000	000895	62.09	
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201906123542	101-41231-1131	SINGLE HSA 5000	000895	21.72	
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201906123542	101-41231-1131	SINGLE HSA 5000	000895	20.85	
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201906123542	101-41231-1131	SINGLE HSA 5000	000895	24.33	
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201906123542	101-41231-1131	SINGLE HSA 5000	000895	207.67	
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201906123542	101-41231-1131	SINGLE HSA 5000	000895	3.48	
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201906263572	101-41231-1131	SINGLE HSA 5000	000895	23.46	
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201906263572	101-41231-1131	SINGLE HSA 5000	000895	13.90	
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201906263572	101-41231-1131	SINGLE HSA 5000	000895	19.12	
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201906263572	101-41231-1131	SINGLE HSA 5000	000895	212.88	
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201906263572	101-41231-1131	SINGLE HSA 5000	000895	8.69	
01-4805	FURTHER	I-5FH201906263572	101-41231-1135	EMPLOYER CONTRIB FAM HSA 5000	000888	83.34	
01-4805	FURTHER	I-5SH201906263572	101-41231-1135	EMPLOYER CONTRIB SNGL HSA 500	000888	62.50	
DEPARTMENT 1231 MUNICIPAL BLDG MAINT						TOTAL:	3,065.63
01-0966	DELTA DENTAL OF MINNESO	I-22F201906123542	101-42071-1132	DENTAL FAMILY	000887	50.25	
01-0966	DELTA DENTAL OF MINNESO	I-22F201906263572	101-42071-1132	DENTAL FAMILY	000887	50.25	
01-1358	INTERNAL REVENUE SERVIC	I-T3 201906263572	101-42071-1122	SOCIAL SECURITY W/H	000889	222.90	
01-1358	INTERNAL REVENUE SERVIC	I-T4 201906263572	101-42071-1125	MEDICARE W/H	000889	52.13	
01-2028	PERA OF MINNESOTA REG	I-13 201906263572	101-42071-1121	PERA COORDINATED	000894	302.16	
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201906123542	101-42071-1131	FAMILY HSA 5000	000895	716.22	
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201906263572	101-42071-1131	FAMILY HSA 5000	000895	716.22	
01-4805	FURTHER	I-5FH201906263572	101-42071-1135	EMPLOYER CONTRIB FAM HSA 5000	000888	83.34	
DEPARTMENT 2071 ADULT COMMUNITY CTR						TOTAL:	2,193.47
FUND 101 GENERAL FUND						TOTAL:	204,908.41

VENDOR SET: 01 City of Marshall

ITEMS PRINTED: PAID, UNPAID

PACKET: 06906 06/28/2019 Payroll Entry

FUND : 208 EDA ADMINISTRATION

DEPARTMENT: N/A NON-DEPARTMENTAL

BANK: ALL

VENDOR	NAME	ITEM #	G/L ACCOUNT	DESCRIPTION	CHECK#	AMOUNT
01-1358	INTERNAL REVENUE SERVIC	I-T1 201906263572	208-21221	FEDERAL W/H	000889	21.38
01-1358	INTERNAL REVENUE SERVIC	I-T3 201906263572	208-21222	SOCIAL SECURITY W/H	000889	22.32
01-1358	INTERNAL REVENUE SERVIC	I-T4 201906263572	208-21223	MEDICARE W/H	000889	5.22
01-1818	MN REVENUE	I-T2 201906263572	208-21224	STATE W/H	000891	14.32
DEPARTMENT 0000 NON-DEPARTMENTAL					TOTAL:	63.24
01-1358	INTERNAL REVENUE SERVIC	I-T3 201906263572	208-41136-1122	SOCIAL SECURITY W/H	000889	22.32
01-1358	INTERNAL REVENUE SERVIC	I-T4 201906263572	208-41136-1125	MEDICARE W/H	000889	5.22
DEPARTMENT 1136 GENERAL COMMUNITY DEV					TOTAL:	27.54
FUND 208 EDA ADMINISTRATION					TOTAL:	90.78

VENDOR SET: 01 City of Marshall

ITEMS PRINTED: PAID, UNPAID

PACKET: 06906 06/28/2019 Payroll Entrie

FUND : 211 LIBRARY FUND

DEPARTMENT: N/A NON-DEPARTMENTAL

BANK: ALL

VENDOR	NAME	ITEM #	G/L ACCOUNT	DESCRIPTION	CHECK#	AMOUNT
01-0966	DELTA DENTAL OF MINNESO	I-22F201906123542	211-21243	DENTAL FAMILY	000887	37.71
01-0966	DELTA DENTAL OF MINNESO	I-22F201906263572	211-21243	DENTAL FAMILY	000887	37.71
01-0966	DELTA DENTAL OF MINNESO	I-22S201906123542	211-21243	DENTAL SINGLE	000887	13.56
01-0966	DELTA DENTAL OF MINNESO	I-22S201906263572	211-21243	DENTAL SINGLE	000887	13.56
01-1358	INTERNAL REVENUE SERVIC	I-T1 201906263572	211-21221	FEDERAL W/H	000889	1,904.12
01-1358	INTERNAL REVENUE SERVIC	I-T3 201906263572	211-21222	SOCIAL SECURITY W/H	000889	1,382.88
01-1358	INTERNAL REVENUE SERVIC	I-T4 201906263572	211-21223	MEDICARE W/H	000889	323.42
01-1818	MN REVENUE	I-T2 201906263572	211-21224	STATE W/H	000891	909.62
01-2028	PERA OF MINNESOTA REG	I-13 201906263572	211-21225	PERA COORDINATED	000894	1,438.90
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201906123542	211-21231	FAMILY HSA 5000	000895	266.06
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201906263572	211-21231	FAMILY HSA 5000	000895	266.06
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201906123542	211-21231	SINGLE HSA 5000	000895	123.60
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201906263572	211-21231	SINGLE HSA 5000	000895	123.60
01-3669	MINNESOTA STATE RETIREM	I-27B201906263572	211-21246	HEALTH CARE SAVINGS PLAN	000890	170.00
01-4805	FURTHER	I-HEC201906263572	211-21231	EMPLOYEE HSA CONTRIBUTION	000888	339.22
DEPARTMENT 0000 NON-DEPARTMENTAL					TOTAL:	7,350.02
01-0966	DELTA DENTAL OF MINNESO	I-22F201906123542	211-70437-1132	DENTAL FAMILY	000887	150.75
01-0966	DELTA DENTAL OF MINNESO	I-22F201906263572	211-70437-1132	DENTAL FAMILY	000887	150.75
01-0966	DELTA DENTAL OF MINNESO	I-22S201906123542	211-70437-1132	DENTAL SINGLE	000887	54.27
01-0966	DELTA DENTAL OF MINNESO	I-22S201906263572	211-70437-1132	DENTAL SINGLE	000887	54.27
01-1358	INTERNAL REVENUE SERVIC	I-T3 201906263572	211-70437-1122	SOCIAL SECURITY W/H	000889	1,382.88
01-1358	INTERNAL REVENUE SERVIC	I-T4 201906263572	211-70437-1125	MEDICARE W/H	000889	323.42
01-2028	PERA OF MINNESOTA REG	I-13 201906263572	211-70437-1121	PERA COORDINATED	000894	1,660.28
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201906123542	211-70437-1131	FAMILY HSA 5000	000895	1,432.44
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201906263572	211-70437-1131	FAMILY HSA 5000	000895	1,432.44
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201906123542	211-70437-1131	SINGLE HSA 5000	000895	834.15
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201906263572	211-70437-1131	SINGLE HSA 5000	000895	834.15
01-4805	FURTHER	I-5FH201906263572	211-70437-1135	EMPLOYER CONTRIB FAM HSA 5000	000888	166.68

VENDOR SET: 01 City of Marshall

ITEMS PRINTED: PAID, UNPAID

PACKET: 06906 06/28/2019 Payroll Entries

FUND : 211 LIBRARY FUND

DEPARTMENT: 0437 LIBRARY

BANK: ALL

VENDOR	NAME	ITEM #	G/L ACCOUNT	DESCRIPTION	CHECK#	AMOUNT
01-4805	FURTHER	I-5SH201906263572	211-70437-1135	EMPLOYER CONTRIB SNGL HSA 500	000888	187.50
DEPARTMENT 0437 LIBRARY					TOTAL:	8,663.98
FUND 211 LIBRARY FUND					TOTAL:	16,014.00

VENDOR SET: 01 City of Marshall
 PACKET: 06906 06/28/2019 Payroll Entrie
 FUND : 258 ASC ARENA
 DEPARTMENT: N/A NON-DEPARTMENTAL

ITEMS PRINTED: PAID, UNPAID

BANK: ALL

VENDOR	NAME	ITEM #	G/L ACCOUNT	DESCRIPTION	CHECK#	AMOUNT	
01-0966	DELTA DENTAL OF MINNESO	I-22F201906123542	258-21243	DENTAL FAMILY	000887	40.22	
01-0966	DELTA DENTAL OF MINNESO	I-22F201906263572	258-21243	DENTAL FAMILY	000887	40.22	
01-1358	INTERNAL REVENUE SERVIC	I-T1 201906263572	258-21221	FEDERAL W/H	000889	340.01	
01-1358	INTERNAL REVENUE SERVIC	I-T3 201906263572	258-21222	SOCIAL SECURITY W/H	000889	365.16	
01-1358	INTERNAL REVENUE SERVIC	I-T4 201906263572	258-21223	MEDICARE W/H	000889	85.40	
01-1818	MN REVENUE	I-T2 201906263572	258-21224	STATE W/H	000891	189.63	
01-2028	PERA OF MINNESOTA REG	I-13 201906263572	258-21225	PERA COORDINATED	000894	419.97	
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201906123542	258-21231	FAMILY HSA 5000	000895	425.70	
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201906263572	258-21231	FAMILY HSA 5000	000895	425.70	
01-3669	MINNESOTA STATE RETIREM	I-27N201906263572	258-21246	HEALTH CARE SAVINGS PLAN	000890	29.01	
01-3669	MINNESOTA STATE RETIREM	I-36R201906263572	258-21259	MNDPC - ROTH	000890	25.00	
01-4805	FURTHER	I-HEC201906263572	258-21231	EMPLOYEE HSA CONTRIBUTION	000888	165.00	
DEPARTMENT 0000 NON-DEPARTMENTAL						TOTAL:	2,551.02
01-0966	DELTA DENTAL OF MINNESO	I-22F201906123542	258-70579-1132	DENTAL FAMILY	000887	160.80	
01-0966	DELTA DENTAL OF MINNESO	I-22F201906263572	258-70579-1132	DENTAL FAMILY	000887	160.80	
01-1358	INTERNAL REVENUE SERVIC	I-T3 201906263572	258-70579-1122	SOCIAL SECURITY W/H	000889	365.16	
01-1358	INTERNAL REVENUE SERVIC	I-T4 201906263572	258-70579-1125	MEDICARE W/H	000889	85.40	
01-2028	PERA OF MINNESOTA REG	I-13 201906263572	258-70579-1121	PERA COORDINATED	000894	484.58	
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201906123542	258-70579-1131	FAMILY HSA 5000	000895	2,291.90	
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201906263572	258-70579-1131	FAMILY HSA 5000	000895	2,291.90	
01-4805	FURTHER	I-5FH201906263572	258-70579-1135	EMPLOYER CONTRIB FAM HSA 5000	000888	266.69	
DEPARTMENT 0579 AMATEUR SPORTS CENTER						TOTAL:	6,107.23
FUND 258 ASC ARENA						TOTAL:	8,658.25

VENDOR SET: 01 City of Marshall
 PACKET: 06906 06/28/2019 Payroll Entrie
 FUND : 270 MERIT
 DEPARTMENT: N/A NON-DEPARTMENTAL

ITEMS PRINTED: PAID, UNPAID

BANK: ALL

VENDOR	NAME	ITEM #	G/L ACCOUNT	DESCRIPTION	CHECK#	AMOUNT
01-0966	DELTA DENTAL OF MINNESO	I-22F201906123542	270-21243	DENTAL FAMILY	000887	12.57
01-0966	DELTA DENTAL OF MINNESO	I-22F201906263572	270-21243	DENTAL FAMILY	000887	12.57
01-1358	INTERNAL REVENUE SERVIC	I-T1 201906263572	270-21221	FEDERAL W/H	000889	146.41
01-1358	INTERNAL REVENUE SERVIC	I-T3 201906263572	270-21222	SOCIAL SECURITY W/H	000889	130.79
01-1358	INTERNAL REVENUE SERVIC	I-T4 201906263572	270-21223	MEDICARE W/H	000889	30.59
01-1818	MN REVENUE	I-T2 201906263572	270-21224	STATE W/H	000891	77.69
01-2028	PERA OF MINNESOTA REG	I-13 201906263572	270-21225	PERA COORDINATED	000894	149.71
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201906123542	270-21231	FAMILY HSA 5000	000895	133.03
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201906263572	270-21231	FAMILY HSA 5000	000895	133.03
01-3669	MINNESOTA STATE RETIREM	I-27N201906263572	270-21246	HEALTH CARE SAVINGS PLAN	000890	23.03
01-4805	FURTHER	I-HEC201906263572	270-21231	EMPLOYEE HSA CONTRIBUTION	000888	25.00
DEPARTMENT 0000 NON-DEPARTMENTAL					TOTAL:	874.42
01-0966	DELTA DENTAL OF MINNESO	I-22F201906123542	270-50551-1132	DENTAL FAMILY	000887	50.25
01-0966	DELTA DENTAL OF MINNESO	I-22F201906263572	270-50551-1132	DENTAL FAMILY	000887	50.25
01-1358	INTERNAL REVENUE SERVIC	I-T3 201906263572	270-50551-1122	SOCIAL SECURITY W/H	000889	130.79
01-1358	INTERNAL REVENUE SERVIC	I-T4 201906263572	270-50551-1125	MEDICARE W/H	000889	30.59
01-2028	PERA OF MINNESOTA REG	I-13 201906263572	270-50551-1121	PERA COORDINATED	000894	172.74
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201906123542	270-50551-1131	FAMILY HSA 5000	000895	716.22
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201906263572	270-50551-1131	FAMILY HSA 5000	000895	716.22
01-4805	FURTHER	I-5FH201906263572	270-50551-1135	EMPLOYER CONTRIB FAM HSA 5000	000888	83.34
DEPARTMENT 0551 MERIT OPERATIONS					TOTAL:	1,950.40
FUND 270 MERIT					TOTAL:	2,824.82

VENDOR SET: 01 City of Marshall
 PACKET: 06906 06/28/2019 Payroll Entrie
 FUND : 602 WASTEWATER OPERATING
 DEPARTMENT: N/A NON-DEPARTMENTAL

ITEMS PRINTED: PAID, UNPAID

BANK: ALL

VENDOR	NAME	ITEM #	G/L ACCOUNT	DESCRIPTION	CHECK#	AMOUNT
01-0966	DELTA DENTAL OF MINNESO	I-22F201906123542	602-21243	DENTAL FAMILY	000887	138.27
01-0966	DELTA DENTAL OF MINNESO	I-22F201906263572	602-21243	DENTAL FAMILY	000887	138.27
01-0966	DELTA DENTAL OF MINNESO	I-22S201906123542	602-21243	DENTAL SINGLE	000887	4.52
01-0966	DELTA DENTAL OF MINNESO	I-22S201906263572	602-21243	DENTAL SINGLE	000887	4.52
01-1358	INTERNAL REVENUE SERVIC	I-T1 201906263572	602-21221	FEDERAL W/H	000889	2,741.91
01-1358	INTERNAL REVENUE SERVIC	I-T3 201906263572	602-21222	SOCIAL SECURITY W/H	000889	1,809.03
01-1358	INTERNAL REVENUE SERVIC	I-T4 201906263572	602-21223	MEDICARE W/H	000889	423.06
01-1818	MN REVENUE	I-T2 201906263572	602-21224	STATE W/H	000891	1,367.02
01-2028	PERA OF MINNESOTA REG	I-13 201906263572	602-21225	PERA COORDINATED	000894	2,121.71
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201906123542	602-21231	FAMILY HSA 5000	000895	665.15
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201906263572	602-21231	FAMILY HSA 5000	000895	665.15
01-2321	SOUTHWEST WEST CENTRAL	I-FV5201906123542	602-21231	FAMILY VEBA 5000	000895	237.18
01-2321	SOUTHWEST WEST CENTRAL	I-FV5201906263572	602-21231	FAMILY VEBA 5000	000895	237.18
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201906123542	602-21231	SINGLE HSA 5000	000895	206.00
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201906263572	602-21231	SINGLE HSA 5000	000895	206.00
01-2321	SOUTHWEST WEST CENTRAL	I-SV5201906123542	602-21231	SINGLE VEBA 5000	000895	165.74
01-2321	SOUTHWEST WEST CENTRAL	I-SV5201906263572	602-21231	SINGLE VEBA 5000	000895	165.74
01-2512	NATIONWIDE RETIREMENT	I-33 201906263572	602-21251	USCM	000892	300.00
01-3443	VALIC DEFERRED COMP	I-35 201906263572	602-21257	VALIC DEFERRED COMP	000896	40.00
01-3443	VALIC DEFERRED COMP	I-35R201906263572	602-21255	VALIC ROTH	000896	650.00
01-3669	MINNESOTA STATE RETIREM	I-27A201906263572	602-21246	HEALTH CARE SAVINGS PLAN	000890	258.48
01-3669	MINNESOTA STATE RETIREM	I-27N201906263572	602-21246	HEALTH CARE SAVINGS PLAN	000890	501.59
01-4805	FURTHER	I-HEC201906263572	602-21231	EMPLOYEE HSA CONTRIBUTION	000888	1,188.25
01-6085	VOYA - INVESTORS CHOICE	I-37R201906263572	602-21274	VOYA ROTH PLAN	000897	630.00
DEPARTMENT 0000 NON-DEPARTMENTAL					TOTAL:	14,864.77
01-0966	DELTA DENTAL OF MINNESO	I-22F201906123542	602-90581-1132	DENTAL FAMILY	000887	552.75
01-0966	DELTA DENTAL OF MINNESO	I-22F201906263572	602-90581-1132	DENTAL FAMILY	000887	552.75
01-0966	DELTA DENTAL OF MINNESO	I-22S201906123542	602-90581-1132	DENTAL SINGLE	000887	18.09

VENDOR SET: 01 City of Marshall
 PACKET: 06906 06/28/2019 Payroll Entry
 FUND : 602 WASTEWATER OPERATING
 DEPARTMENT: 0581 WW OPERATIONS

ITEMS PRINTED: PAID, UNPAID

BANK: ALL

VENDOR	NAME	ITEM #	G/L ACCOUNT	DESCRIPTION	CHECK#	AMOUNT
01-0966	DELTA DENTAL OF MINNESO	I-22S201906263572	602-90581-1132	DENTAL SINGLE	000887	18.09
01-1358	INTERNAL REVENUE SERVIC	I-T3 201906263572	602-90581-1122	SOCIAL SECURITY W/H	000889	1,809.03
01-1358	INTERNAL REVENUE SERVIC	I-T4 201906263572	602-90581-1125	MEDICARE W/H	000889	423.06
01-2028	PERA OF MINNESOTA REG	I-13 201906263572	602-90581-1121	PERA COORDINATED	000894	2,448.13
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201906123542	602-90581-1131	FAMILY HSA 5000	000895	3,581.10
01-2321	SOUTHWEST WEST CENTRAL	I-FH5201906263572	602-90581-1131	FAMILY HSA 5000	000895	3,581.10
01-2321	SOUTHWEST WEST CENTRAL	I-FV5201906123542	602-90581-1131	FAMILY VEBA 5000	000895	612.07
01-2321	SOUTHWEST WEST CENTRAL	I-FV5201906263572	602-90581-1131	FAMILY VEBA 5000	000895	612.07
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201906123542	602-90581-1131	SINGLE HSA 5000	000895	1,390.25
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201906263572	602-90581-1131	SINGLE HSA 5000	000895	1,390.25
01-2321	SOUTHWEST WEST CENTRAL	I-SV5201906123542	602-90581-1131	SINGLE VEBA 5000	000895	472.76
01-2321	SOUTHWEST WEST CENTRAL	I-SV5201906263572	602-90581-1131	SINGLE VEBA 5000	000895	472.76
01-4805	FURTHER	I-5FH201906263572	602-90581-1135	EMPLOYER CONTRIB FAM HSA 5000	000888	416.70
01-4805	FURTHER	I-5FV201906263572	602-90581-1135	EMPLOYER CONT FAM VEBA 5000	000888	187.50
01-4805	FURTHER	I-5SH201906263572	602-90581-1135	EMPLOYER CONTRIB SNGL HSA 500	000888	312.50
01-4805	FURTHER	I-5SV201906263572	602-90581-1135	EMPLOYER CONT SINGL VEBA 5000	000888	208.34
DEPARTMENT 0581 WW OPERATIONS					TOTAL:	19,059.30
FUND 602 WASTEWATER OPERATING					TOTAL:	33,924.07

VENDOR SET: 01 City of Marshall

ITEMS PRINTED: PAID, UNPAID

PACKET: 06906 06/28/2019 Payroll Entrie

FUND : 609 LIQUOR

DEPARTMENT: N/A NON-DEPARTMENTAL

BANK: ALL

VENDOR	NAME	ITEM #	G/L ACCOUNT	DESCRIPTION	CHECK#	AMOUNT
01-0966	DELTA DENTAL OF MINNESO	I-22F201906123542	609-21243	DENTAL FAMILY	000887	12.57
01-0966	DELTA DENTAL OF MINNESO	I-22F201906263572	609-21243	DENTAL FAMILY	000887	12.57
01-0966	DELTA DENTAL OF MINNESO	I-22S201906123542	609-21243	DENTAL SINGLE	000887	13.56
01-0966	DELTA DENTAL OF MINNESO	I-22S201906263572	609-21243	DENTAL SINGLE	000887	13.56
01-1358	INTERNAL REVENUE SERVIC	I-T1 201906263572	609-21221	FEDERAL W/H	000889	767.34
01-1358	INTERNAL REVENUE SERVIC	I-T3 201906263572	609-21222	SOCIAL SECURITY W/H	000889	704.70
01-1358	INTERNAL REVENUE SERVIC	I-T4 201906263572	609-21223	MEDICARE W/H	000889	164.80
01-1818	MN REVENUE	I-T2 201906263572	609-21224	STATE W/H	000891	417.84
01-2028	PERA OF MINNESOTA REG	I-13 201906263572	609-21225	PERA COORDINATED	000894	754.15
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201906123542	609-21231	SINGLE HSA 5000	000895	123.60
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201906263572	609-21231	SINGLE HSA 5000	000895	123.60
01-2321	SOUTHWEST WEST CENTRAL	I-SV5201906123542	609-21231	SINGLE VEBA 5000	000895	82.87
01-2321	SOUTHWEST WEST CENTRAL	I-SV5201906263572	609-21231	SINGLE VEBA 5000	000895	82.87
01-3443	VALIC DEFERRED COMP	I-35 201906263572	609-21257	VALIC DEFERRED COMP	000896	125.00
01-3669	MINNESOTA STATE RETIREM	I-27N201906263572	609-21246	HEALTH CARE SAVINGS PLAN	000890	141.80
01-4805	FURTHER	I-HEC201906263572	609-21231	EMPLOYEE HSA CONTRIBUTION	000888	138.56
01-6085	VOYA - INVESTORS CHOICE	I-37D201906263572	609-21275	VOYA DEFERRED	000897	100.00
01-6085	VOYA - INVESTORS CHOICE	I-37R201906263572	609-21274	VOYA ROTH PLAN	000897	100.00
DEPARTMENT 0000 NON-DEPARTMENTAL					TOTAL:	3,879.39
01-0966	DELTA DENTAL OF MINNESO	I-22F201906123542	609-90991-1132	DENTAL FAMILY	000887	50.25
01-0966	DELTA DENTAL OF MINNESO	I-22F201906263572	609-90991-1132	DENTAL FAMILY	000887	50.25
01-0966	DELTA DENTAL OF MINNESO	I-22S201906123542	609-90991-1132	DENTAL SINGLE	000887	54.27
01-0966	DELTA DENTAL OF MINNESO	I-22S201906263572	609-90991-1132	DENTAL SINGLE	000887	54.27
01-1358	INTERNAL REVENUE SERVIC	I-T3 201906263572	609-90991-1122	SOCIAL SECURITY W/H	000889	704.70
01-1358	INTERNAL REVENUE SERVIC	I-T4 201906263572	609-90991-1125	MEDICARE W/H	000889	164.80
01-2028	PERA OF MINNESOTA REG	I-13 201906263572	609-90991-1121	PERA COORDINATED	000894	870.18
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201906123542	609-90991-1131	SINGLE HSA 5000	000895	834.15
01-2321	SOUTHWEST WEST CENTRAL	I-SH5201906263572	609-90991-1131	SINGLE HSA 5000	000895	834.15

VENDOR SET: 01 City of Marshall

ITEMS PRINTED: PAID, UNPAID

PACKET: 06906 06/28/2019 Payroll Entries

FUND : 609 LIQUOR

DEPARTMENT: 0991 LIQUOR OPERATIONS

BANK: ALL

VENDOR	NAME	ITEM #	G/L ACCOUNT	DESCRIPTION	CHECK#	AMOUNT	
01-2321	SOUTHWEST WEST CENTRAL	I-SV5201906123542	609-90991-1131	SINGLE VEBA 5000	000895	236.38	
01-2321	SOUTHWEST WEST CENTRAL	I-SV5201906263572	609-90991-1131	SINGLE VEBA 5000	000895	236.38	
01-4805	FURTHER	I-5SH201906263572	609-90991-1135	EMPLOYER CONTRIB SNGL HSA 500	000888	187.50	
01-4805	FURTHER	I-5SV201906263572	609-90991-1135	EMPLOYER CONT SINGL VEBA 5000	000888	104.17	
					DEPARTMENT 0991 LIQUOR OPERATIONS	TOTAL:	4,381.45
					FUND 609 LIQUOR	TOTAL:	8,260.84
						REPORT GRA TOTAL:	274,681.17

** 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	17,236.56						
	101-21222	FICA WITHHOLDING	10,600.45						
	101-21223	MEDICARE	3,347.08						
	101-21224	STATE WITHHOLDING	9,023.04						
	101-21225	PERA WITHHOLDING	15,794.59						
	101-21226	PERA WITHHOLDING COUNCIL	170.45						
	101-21231	HSA / VEBA (ER ONLY)	20,589.04						
	101-21243	DENTAL INSURANCE	1,419.78						
	101-21246	HEALTH CARE SAVINGS PLAN	3,873.38						
	101-21251	DEFERRED COMP - USCM	200.00						
	101-21252	DEFERRED COMPENSATION FIRE	22.61						
	101-21255	VALIC ROTH (TAXABLE)	600.00						
	101-21257	DEFERRED COMP--VALIC	882.36						
	101-21258	MNDP--DEFERRED COMP	1,160.00						
	101-21259	MNDP-ROTH	315.00						
	101-21274	DEFERRED COMP-VOYA ROTH	145.00						
	101-21275	VOYA - DEFERRED PRE TAX	150.00						
	101-40141-1121	PERA CONTRIBUTIONS	170.45	2,045	1,023.02				
	101-40141-1122	FICA CONTRIBUTIONS	82.90	994	497.46				
	101-40141-1125	MEDICARE CONTRIBUTIONS	56.94	683	341.77				
	101-40671-1121	PERA CONTRIBUTIONS	272.02	7,380	3,842.37				
	101-40671-1122	FICA CONTRIBUTIONS	220.07	7,049	3,931.20				
	101-40671-1125	MEDICARE CONTRIBUTIONS	51.47	1,648	919.39				
	101-40671-1131	HEALTH INSURANCE	1,702.06	23,524	13,789.83				
	101-40671-1132	DENTAL INSURANCE	116.58	1,388	722.12				
	101-40671-1135	INSURANCE BENEFITS ALLOTME	129.17	0	1,553.89-			Y	
	101-40741-1121	PERA CONTRIBUTIONS	1,103.76	25,052	10,826.78				
	101-40741-1122	FICA CONTRIBUTIONS	852.26	20,710	9,608.82				
	101-40741-1125	MEDICARE CONTRIBUTIONS	199.33	4,843	2,247.14				
	101-40741-1131	HEALTH INSURANCE	4,449.84	44,389	24,895.38				
	101-40741-1132	DENTAL INSURANCE	301.50	2,412	839.16				
	101-40741-1135	INSURANCE BENEFITS ALLOTME	395.85	0	4,291.80-			Y	
	101-40821-1121	PERA CONTRIBUTIONS	689.10	17,426	8,798.83				
	101-40821-1122	FICA CONTRIBUTIONS	505.31	14,405	8,024.66				
	101-40821-1125	MEDICARE CONTRIBUTIONS	118.18	3,369	1,876.67				
	101-40821-1131	HEALTH INSURANCE	3,420.98	46,551	27,052.17				
	101-40821-1132	DENTAL INSURANCE	301.50	3,618	1,899.45				
	101-40821-1135	INSURANCE BENEFITS ALLOTME	229.18	0	2,750.16-			Y	
	101-40931-1121	PERA CONTRIBUTIONS	600.84	15,652	7,841.42				
	101-40931-1122	FICA CONTRIBUTIONS	416.47	12,964	7,505.67				
	101-40931-1125	MEDICARE CONTRIBUTIONS	97.39	3,032	1,755.47				
	101-40931-1131	HEALTH INSURANCE	4,297.32	57,567	33,073.09				
	101-40931-1132	DENTAL INSURANCE	172.86	2,054	1,069.01				
	101-40931-1135	INSURANCE BENEFITS ALLOTME	250.02	0	3,000.24-			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	406.81	8,503	3,093.76				
	101-41231-1122	FICA CONTRIBUTIONS	314.26	9,056	4,696.37				
	101-41231-1125	MEDICARE CONTRIBUTIONS	73.50	2,118	1,098.34				
	101-41231-1131	HEALTH INSURANCE	1,988.54	27,362	16,027.76				
	101-41231-1132	DENTAL INSURANCE	136.68	1,630	851.04				
	101-41231-1135	INSURANCE BENEFITS ALLOTME	145.84	0	1,750.08-			Y	
	101-42071-1121	PERA CONTRIBUTIONS	302.16	7,748	4,079.97				
	101-42071-1122	FICA CONTRIBUTIONS	222.90	6,405	3,689.16				
	101-42071-1125	MEDICARE CONTRIBUTIONS	52.13	1,498	862.77				
	101-42071-1131	HEALTH INSURANCE	1,432.44	19,189	11,024.37				
	101-42071-1132	DENTAL INSURANCE	100.50	1,206	633.15				
	101-42071-1135	INSURANCE BENEFITS ALLOTME	83.34	0	1,000.08-			Y	
	101-50151-1121	PERA CONTRIBUTIONS	11,257.72	285,466	145,258.14				
	101-50151-1122	FICA CONTRIBUTIONS	347.05	9,015	4,603.83				
	101-50151-1125	MEDICARE CONTRIBUTIONS	911.63	24,368	12,957.98				
	101-50151-1131	HEALTH INSURANCE	26,294.93	372,805	232,288.08				
	101-50151-1132	DENTAL INSURANCE	1,959.75	24,248	13,574.44				
	101-50151-1135	INSURANCE BENEFITS ALLOTME	1,927.18	0	21,176.63-			Y	
	101-50156-1121	PERA CONTRIBUTIONS	51.88	1,173	664.66				
	101-50156-1122	FICA CONTRIBUTIONS	62.82	0	613.04-			Y	
	101-50156-1125	MEDICARE CONTRIBUTIONS	14.68	340	196.81				
	101-50453-1121	PERA CONTRIBUTIONS	44.12	1,147	500.75				
	101-50453-1122	FICA CONTRIBUTIONS	33.97	1,185	678.24				
	101-50453-1125	MEDICARE CONTRIBUTIONS	7.95	277	158.61				
	101-50453-1131	HEALTH INSURANCE	141.83	2,451	1,663.55				
	101-50453-1132	DENTAL INSURANCE	30.15	361	194.23				
	101-50453-1135	INSURANCE BENEFITS ALLOTME	31.26	0	366.19-			Y	
	101-60162-1121	PERA CONTRIBUTIONS	1,592.07	37,984	18,289.77				
	101-60162-1122	FICA CONTRIBUTIONS	1,282.50	32,058	16,868.31				
	101-60162-1125	MEDICARE CONTRIBUTIONS	299.93	7,497	3,944.94				
	101-60162-1131	HEALTH INSURANCE	6,534.08	91,628	54,092.01				
	101-60162-1132	DENTAL INSURANCE	592.22	7,117	3,714.82				
	101-60162-1135	INSURANCE BENEFITS ALLOTME	542.73	0	6,509.72-			Y	
	101-60164-1121	PERA CONTRIBUTIONS	908.80	23,270	11,127.92				
	101-60164-1122	FICA CONTRIBUTIONS	645.53	19,237	10,485.69				
	101-60164-1125	MEDICARE CONTRIBUTIONS	150.98	4,498	2,452.25				
	101-60164-1131	HEALTH INSURANCE	5,621.04	78,231	46,484.41				
	101-60164-1132	DENTAL INSURANCE	448.96	5,366	2,834.56				
	101-60164-1135	INSURANCE BENEFITS ALLOTME	457.31	0	5,490.76-			Y	
	101-60211-1121	PERA CONTRIBUTIONS	1,385.67	42,370	18,197.07				
	101-60211-1122	FICA CONTRIBUTIONS	1,036.35	35,911	17,318.99				
	101-60211-1125	MEDICARE CONTRIBUTIONS	242.37	8,398	4,050.39				
	101-60211-1131	HEALTH INSURANCE	8,496.47	137,736	83,406.75				
	101-60211-1132	DENTAL INSURANCE	621.59	10,733	6,749.69				
	101-60211-1135	INSURANCE BENEFITS ALLOTME	637.53	0	8,457.63-			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	3,407.63				
	101-60364-1122	FICA CONTRIBUTIONS	512.26	10,032	4,968.07				
	101-60364-1125	MEDICARE CONTRIBUTIONS	119.81	2,346	1,161.85				
	101-60364-1131	HEALTH INSURANCE	3,115.57	40,297	21,562.12				
	101-60364-1132	DENTAL INSURANCE	218.59	2,532	1,218.08				
	101-60364-1135	INSURANCE BENEFITS ALLOTME	175.02	0	2,300.09-			Y	
	101-70176-1122	FICA CONTRIBUTIONS	731.67	6,364	4,894.39				
	101-70176-1125	MEDICARE CONTRIBUTIONS	171.09	1,488	1,144.71				
	101-70276-1121	PERA CONTRIBUTIONS	772.63	15,018	6,092.98				
	101-70276-1122	FICA CONTRIBUTIONS	1,211.10	17,980	9,313.99				
	101-70276-1125	MEDICARE CONTRIBUTIONS	283.26	4,205	2,178.24				
	101-70276-1131	HEALTH INSURANCE	1,988.54	46,551	35,217.08				
	101-70276-1132	DENTAL INSURANCE	237.18	2,836	1,805.83				
	101-70276-1135	INSURANCE BENEFITS ALLOTME	145.84	0	1,750.08-			Y	
	101-70377-1122	FICA CONTRIBUTIONS	261.27	611	350.64				
	101-70377-1125	MEDICARE CONTRIBUTIONS	61.07	143	82.04				
	101-70675-1121	PERA CONTRIBUTIONS	633.24	16,696	8,468.67				
	101-70675-1122	FICA CONTRIBUTIONS	492.78	14,434	8,129.18				
	101-70675-1125	MEDICARE CONTRIBUTIONS	115.24	3,375	1,901.26				
	101-70675-1131	HEALTH INSURANCE	2,461.30	35,535	21,506.26				
	101-70675-1132	DENTAL INSURANCE	237.18	2,836	1,484.23				
	101-70675-1135	INSURANCE BENEFITS ALLOTME	250.01	0	3,000.12-			Y	
	101-70871-1121	PERA CONTRIBUTIONS	144.00	1,221	800.08				
	101-70871-1122	FICA CONTRIBUTIONS	848.28	2,780	1,558.88				
	101-70871-1125	MEDICARE CONTRIBUTIONS	198.36	650	364.59				
	101-70871-1132	DENTAL INSURANCE	100.50	397	297.48				
	101-70971-1121	PERA CONTRIBUTIONS	180.00	1,544	1,004.31				
	101-70971-1122	FICA CONTRIBUTIONS	515.35	3,284	2,165.02				
	101-70971-1125	MEDICARE CONTRIBUTIONS	120.52	768	506.37				
	101-70971-1131	HEALTH INSURANCE	1,432.44	6,332	4,900.02				
	101-70971-1132	DENTAL INSURANCE	100.50	397	297.48				
	101-70971-1135	INSURANCE BENEFITS ALLOTME	83.34	0	166.68-			Y	
	101-70979-1122	FICA CONTRIBUTIONS	5.35	2,920	437.63				
	101-70979-1125	MEDICARE CONTRIBUTIONS	1.25	683	102.35				
	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	66.96-			Y	
	208-41136-1125	MEDICARE CONTRIBUTIONS	5.22	0	15.66-			Y	
	211-21221	FEDERAL W/H	1,904.12						
	211-21222	FICA W/H	1,382.88						
	211-21223	MEDICARE W/H	323.42						
	211-21224	STATE W/H	909.62						
	211-21225	PERA W/H	1,438.90						

** 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	1,660.28	46,090	25,076.56				
	211-70437-1122	FICA CONTRIBUTIONS	1,382.88	38,085	20,704.33				
	211-70437-1125	MEDICARE CONTRIBUTIONS	323.42	8,927	4,862.14				
	211-70437-1131	HEALTH INSURANCE	4,533.18	59,302	33,356.67				
	211-70437-1132	DENTAL INSURANCE	410.04	4,424	2,086.77				
	211-70437-1135	INSURANCE BENEFITS ALLOTME	354.18	5,450	1,199.84				
	258-21221	FEDERAL WITHHOLDING	340.01						
	258-21222	FICA WITHHOLDING	365.16						
	258-21223	MEDICARE	85.40						
	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	484.58	14,867	8,217.34				
	258-70579-1122	FICA CONTRIBUTIONS	365.16	13,871	8,388.16				
	258-70579-1125	MEDICARE CONTRIBUTIONS	85.40	3,244	1,961.63				
	258-70579-1131	HEALTH INSURANCE	4,583.80	69,578	43,428.23				
	258-70579-1132	DENTAL INSURANCE	321.60	4,283	2,176.18				
	258-70579-1135	INSURANCE BENEFITS ALLOTME	266.69	0	3,196.43-			Y	
	270-21221	FEDERAL WITHHOLDING	146.41						
	270-21222	FICA WITHHOLDING	130.79						
	270-21223	MEDICARE	30.59						
	270-21224	STATE WITHHOLDING	77.69						
	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	2,410.54				
	270-50551-1122	FICA CONTRIBUTIONS	130.79	4,325	2,582.07				
	270-50551-1125	MEDICARE CONTRIBUTIONS	30.59	1,011	603.86				
	270-50551-1131	HEALTH INSURANCE	1,432.44	19,189	11,006.67				
	270-50551-1132	DENTAL INSURANCE	100.50	1,206	633.15				
	270-50551-1135	INSURANCE BENEFITS ALLOTME	83.34	0	1,000.08-			Y	
	602-21221	FEDERAL WITHHOLDING	2,741.91						
	602-21222	FICA WITHHOLDING	1,809.03						
	602-21223	MEDICARE	423.06						
	602-21224	STATE WITHHOLDING	1,367.02						
	602-21225	PERA WITHHOLDING	2,121.71						
	602-21231	HSA / VEBA (ER ONLY)	3,736.39						
	602-21243	DENTAL INSURANCE	285.58						

** 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	760.07						
	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	2,448.13	61,533	31,530.70				
	602-90581-1122	FICA CONTRIBUTIONS	1,809.03	50,867	28,598.16				
	602-90581-1125	MEDICARE CONTRIBUTIONS	423.06	11,896	6,688.42				
	602-90581-1131	HEALTH INSURANCE	12,112.36	172,348	106,452.39				
	602-90581-1132	DENTAL INSURANCE	1,141.68	13,690	7,501.75				
	602-90581-1135	INSURANCE BENEFIT ALLOTMEN	1,125.04	0	12,993.36-			Y	
	609-21221	FEDERAL WITHHOLDING	767.34						
	609-21222	FICA WITHHOLDING	704.70						
	609-21223	MEDICARE	164.80						
	609-21224	STATE WITHHOLDING	417.84						
	609-21225	PERA WITHHOLDING	754.15						
	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	870.18	16,386	5,187.09				
	609-90991-1122	FICA CONTRIBUTIONS	704.70	17,759	8,498.73				
	609-90991-1125	MEDICARE CONTRIBUTIONS	164.80	4,153	1,987.68				
	609-90991-1131	HEALTH INSURANCE	2,141.06	32,692	20,417.95				
	609-90991-1132	DENTAL INSURANCE	209.04	3,260	2,068.79				
	609-90991-1135	INSURANCE BENEFIT ALLOTMEN	291.67	0	3,500.04-			Y	
		** 2019 YEAR TOTALS	274,681.17						

** DEPARTMENT TOTALS **

ACCT	NAME	AMOUNT
101	NON-DEPARTMENTAL	85,529.34
101-0141	MAYOR & COUNCIL	310.29
101-0151	POLICE ADMINISTRATION	42,698.26
101-0156	CHEMICAL ASSESSMENT TEAM	129.38
101-0162	ENGINEERING	10,843.53
101-0164	COMMUNITY PLANNING	8,232.62
101-0176	AQUATIC CENTER	902.76

** DEPARTMENT TOTALS **

ACCT	NAME	AMOUNT
101-0211	STREET ADMINISTRATION	12,419.98
101-0276	PARK MAINTENANCE & DEVEL.	4,638.55
101-0364	AIRPORT	4,520.28
101-0377	MUNICIPAL BAND	322.34
101-0453	ANIMAL IMPOUNDMENT	289.28
101-0671	CABLE COMMISSION	2,491.37
101-0675	COMM SERVICES ADMIN	4,189.75
101-0741	CITY ADMINISTRATION	7,302.54
101-0821	FINANCE	5,264.25
101-0871	COMM ED-SUMMER	1,291.14
101-0931	APPRAISING & ASSESSING	5,834.90
101-0971	RECREATION-SUMMER	2,432.15
101-0979	RECREATION-WINTER	6.60
101-1231	MUNICIPAL BLDG MAINT	3,065.63
101-2071	ADULT COMMUNITY CTR	2,193.47

101 TOTAL	GENERAL FUND	204,908.41
208	NON-DEPARTMENTAL	63.24
208-1136	GENERAL COMMUNITY DEV	27.54

208 TOTAL	EDA ADMINISTRATION	90.78
211	NON-DEPARTMENTAL	7,350.02
211-0437	LIBRARY	8,663.98

211 TOTAL	LIBRARY FUND	16,014.00
258	NON-DEPARTMENTAL	2,551.02
258-0579	AMATEUR SPORTS CENTER	6,107.23

258 TOTAL	ASC ARENA	8,658.25
270	NON-DEPARTMENTAL	874.42
270-0551	MERIT OPERATIONS	1,950.40

270 TOTAL	MERIT	2,824.82
602	NON-DEPARTMENTAL	14,864.77
602-0581	WW OPERATIONS	19,059.30

602 TOTAL	WASTEWATER OPERATING	33,924.07

** DEPARTMENT TOTALS **

ACCT	NAME	AMOUNT
609	NON-DEPARTMENTAL	3,879.39
609-0991	LIQUOR OPERATIONS	4,381.45

609 TOTAL	LIQUOR	8,260.84

	** TOTAL **	274,681.17

NO ERRORS

** END OF REPORT **