## CERTIFICATION OF CLAIMS

I, the undersigned, do hereby certify under penalty of perjury that the materials have been furnished, the services rendered, or the labor performed as described herein, that any advance payment is due and payable pursuant to a contract or is available as an option for full or partial fulfillment of a contractual obligation, and that the claim is a just, due and unpaid obligation against the City of Mercer Island, and that I am authorized to authenticate and certify to said claim.

**Finance Director** 

I, the undersigned, do hereby certify that the City Council has reviewed the documentation supporting claims paid and approved all checks or warrants issued in payment of claims.

Mayor

Date

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## Accounts Payable Report by GL Key

PO #	Check #	Vendor:	Transaction Description	Check Amount
Org Key:	<b>DS1100</b> - A	Administration (DS)		
P0119677	00217736	LAPP, WADE	PUMPKIN CARVING 10/29/23	800.00
Org Key:	YF2600 - F	Family Assistance		
	00217737	•	rental assistance for EA clien	2,000.00

Finance Department

Check No Check Date Vendor Name/Description	<b>PO</b> #	Invoice #	Invoice Date Ch	eck Amount
00217736 11/09/2023 LAPP, WADE PUMPKIN CARVING 10/29/23	P0119677	102923	10/29/2023	800.00
00217737 11/09/2023 MOSIO, CHRIS rental assistance for EA clien	P0119734	102723	10/27/2023	2,000.00
			Total	2,800.00

City of Mercer Island