CITY OF NEW MEADOWS, IDAHO
Claim Approval List
For the Accounting Period: 3/21

* ... Over spent expenditure

Claim/	Check	Vendor #/Name/ Invoice #/Inv Date/Description	Document $/ Line $	Disc $	PO #	Fund	Org	Acct	Object	Proj	Cash Account
4836	E	25 Analytical Labs, Inc.	3,357.89								
79403		03/31/21 Water Sampling / Testing	15.20			60		43320	745		10102
79404		03/31/21 Sewer Sampling / Testing	3,342.69			65		43220	745		10102
		Total for Vendor:	**3,357.89**								
		# of Claims 1	**Total:**	**3,357.89**							
		Total Electronic Claims		**3,357.89**							
		Total Non-Electronic Claims									