











\* ... Over spent expenditure

Claim/	Check	Invoice #/Name/ Vendor #/Inv Date/Description	Document \$/ Line \$	Disc \$	PO #	Fund	Org	Acct	Object	Proj	Cash Account
4952	E	617 ZIPLY FIBER	485.32								
		City Shop & Sewer Internet / Phone									
		07/07/21 Phone/Internet - Water	242.66			60		43320	308		10102
		07/07/21 Phone/Internet - Sewer	242.66			65		43220	308		10102
		<b>Total for Vendor:</b>	<b>485.32</b>								
		<b># of Claims</b>	<b>23</b>								
		<b>Total Electronic Claims</b>		<b>16,508.60</b>							
		<b>Total Non-Electronic Claims</b>		<b>7,170.78</b>							
				<b>9337.82</b>							