







\* ... Over spent expenditure

Claim/	Check	Invoice #/Name/ #/Inv Date/Description	Document \$/ Line \$	Disc \$	PO #	Fund Org Acct	Object	Proj	Cash Account
5489		687 TCG Construction, Inc Pay Application No. 1 9/1/22-9/30/22 Mobilization, Construction Surveying, Project Sign, Grading, Drainage and Fill for Well House #5 Site	81,396.00	****					
		*** Claim from another period ( 9/22) ****							
		81,396.00							
		<b>Total for Vendor:</b>	<b>81,396.00</b>						
5486	E	253 United Oil	50.92						
		1004735 10/15/22 Fuel - Water	50.92						
		<b>Total for Vendor:</b>	<b>50.92</b>						
5476	E	617 ZIPLY FIBER	243.43						
		City Shop & Sewer Internet / Phone	121.71						
		10/07/22 Phone/Internet - Water	121.72						
		10/07/22 Phone/Internet - Sewer							
		<b>Total for Vendor:</b>	<b>243.43</b>						
		<b># of Claims</b>	<b>18</b>						
		<b># of Vendors</b>	<b>9</b>						
		<b>Total Electronic Claims</b>	<b>107,241.24</b>						
		<b>Total Non-Electronic Claims</b>	<b>8,635.35</b>						
		<b>Total Non-Electronic Claims</b>	<b>98605.89</b>						