Payment Register

Rochelle, IL

APPKT05076 - Exception Check Run 1/14/26 per JF MB

01 - Vendor Set 01

Bank: Allocated Cash - Allocated Cash

Vendor Number	Vendor Name				Total Vendor Amount
04452	ANDERSON, JASON				2,434.80
Payment Type	**Payment Number**			**Payment Date**	**Payment Amount**
Check	219542			01/14/2026	2,434.80
Payable Number	**Description**	**Payable Date**	**Due Date**	**Discount Amount**	**Payable Amount**
011326	REIMBURSEMENT FOR MEDICARE PREMIUMS 2026 PER (	01/13/2026	01/13/2026	0.00	2,434.80

Vendor Number	Vendor Name				Total Vendor Amount
INC1791	Dougherty, Benjamin				650.00
Payment Type	**Payment Number**			**Payment Date**	**Payment Amount**
Check	219543			01/14/2026	650.00
Payable Number	**Description**	**Payable Date**	**Due Date**	**Discount Amount**	**Payable Amount**
0000006	Community Video - Fiegenschuh	12/22/2025	12/22/2025	0.00	650.00

Payment Summary

Bank Code	Type		Payable Count	Payment Count	Discount	Payment
Allocated Cash	Check		2	2	0.00	3,084.80
		Packet Totals:	**2**	**2**	**0.00**	**3,084.80**

Cash Fund Summary

Fund	Name		Amount
91	Cash Allocation		-3,084.80
		Packet Totals:	**-3,084.80**