

Report Criteria:
Detail report.
Invoices with totals above \$0.00 included.
Paid and unpaid invoices included.
Invoice Detail.GL account (2 Characters) = {=} "50"

Vendor	Vendor Name	Invoice Number	Description	GL Account and Title	Invoice Date	GL Per	Net Invoice Amount	Amount Paid	Date Paid	Voided
MORTON SALT, INC.										
4662	MORTON SALT, INC.	5403301021	138.26 TONS BULK SNOW SLICER	50-030-6040 Operating Su	01/21/2025	225	15,819.71	.00		
4662	MORTON SALT, INC.	5403304396	70.85 TONS BULK SNOW SLICER	50-030-6040 Operating Su	01/22/2025	225	8,106.66	.00		
Total MORTON SALT, INC.:							23,926.37	.00		
Grand Totals:							23,926.37	.00		

Vendor	Vendor Name	Invoice Number	Description	GL Account and Title	Invoice Date	GL Per	Net Invoice Amount	Amount Paid	Date Paid	Voided
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Department Key
010 Administration
012 Village Clerk
015 Liability Insurance
030 Public Works
040 Police/Public Safety
050 Parks and Recreation

Dated: _____

Administrator: _____

Trustees: _____

These signatures approve all invoices in this report. Any invoices not approved are circled in Red.

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