

CLAIMS PAYMENT REQUEST

FROM: Orcas Island Health Care District

Fund# 6541.00

Date:

6/4/2024

Page 1 of 1

Invoice #	Description	Inv. Date	Vendor #	Vendor Name	Amount	Grant /Level	Bars #	1099
400	Adobe Acrobat	5/11/2024	ban155	Banner Bank	\$ 52.01		6541.00.561.00.31.0002	
400	Fox's Boxes clinic storage	5/8/2024	ban155	Banner Bank	\$ 271.00		6541.00.561.00.48.0010	
400	OPALCO - clinic	4/15/2024	ban155	Banner Bank	\$ 765.20		6541.00.561.00.47.0010	
400	OPALCO - district office	4/15/2024	ban155	Banner Bank	\$ 132.44		6541.00.561.00.47.0011	
400	Rock Island - May 2024	5/7/2024	ban155	Banner Bank	\$ 85.00		6541.00.561.00.42.0020	
400	T-Mobile - April 2024	5/20/2024	ban155	Banner Bank	\$ 109.51		6541.00.561.00.42.0020	
400	Washington Alarm - May 2024	5/1/2024	ban155	Banner Bank	\$ 66.77		6541.00.561.00.31.0002	
400	Website domain renewal NameSilo	5/1/2024	ban155	Banner Bank	\$ 11.70		6541.00.561.00.42.0030	
400	Ace Hardware duct tape - office	5/1/2024	ban155	Banner Bank	\$ 7.58		6541.00.561.00.31.0000	
400	Eastsound Sewer & Water District	4/29/2024	ban155	Banner Bank	\$ 148.27		6541.00.561.00.47.0010	
400	USPS PO Box Renewal	5/31/2024	ban155	Banner Bank	\$ 120.00		6541.00.561.00.45.0000	
400	AWPHD Conference accommodation	5/26/2024	ban155	Banner Bank	\$ 387.76		6541.00.561.00.43.0020	
134279	Plumbing - generator install	5/24/2024	int159	Inter-Island Propane	\$ 729.99		6541.00.561.00.48.0010	
20240603	District office rent Q3	6/3/2024	bro005	Brown Dog Holdings LLC	\$ 2,547.00		6541.00.561.00.45.0000	
43979	Hazardous waste unit	5/20/2024	isi730	Island Hardware	\$ 86.45		6541.00.561.00.48.0010	
122790	CSD Attorneys	4/30/2024	chm100	CSD Attorneys at Law	\$ 640.00		6541.00.561.00.41.0030	
5882	Clinic landscaping	5/9/2024	nun155	Nunez Services PLLC	\$ 303.52		6541.00.561.00.48.0020	
1025	Dental consultant	6/2/2024	den656	DentALL PLLC	\$ 960.00		6541.00.561.00.41.0070	
54142	Technology services	6/1/2024	nwt155	NW Technology	\$ 363.52		6541.00.561.00.41.0040	

TOTAL THIS PAGE

\$ 7,787.72

I, the undersigned, do hereby certify under penalty of perjury that the materials have been furnished, the services rendered or the labor performed as described herein, that any advance payment is due and payable pursuant to a contract or is available as an option for full or partial fulfillment of a contractual obligation, and that the claim is a just, due and unpaid obligation against the Orcas Island Health Care District, and that I am authorized to authenticate and certify to said claim.



Chris Chord, Superintendent

6/3/2024

Date

I, the undersigned, do hereby certify under penalty of perjury that the claim is a just, due and unpaid obligation against the Orcas Island Health Care District, and that I am authorized to certify to said claim.

Pegi A. Groundwater

Pegi Groundwater, Auditing Officer

6/4/2024

Date

Board Authorization

I attest that the duly elected board for the OIHCD has reviewed the claims listed above (including original backup materials) and have approved said claims by majority vote at a meeting open to the public.

Mark Salierno, Commissioner/Board Secretary

Date

Note: It is the DISTRICTS' responsibility to maintain adequate, original, records to substantiate these claims.

Invoice Accounting Report
San Juan County

apInInv
06/03/2024 1:13:37PM

Invoice #: 1025 **Invoice Date:** 06/03/2024 **Doc Date:** 06/03/2024 **Due Date:** 06/03/2024
Vendor #: den656 **Name:** DENTALL PLLC **Type:** in

Line No Line Description Account Number Amount PO Number
1 Dental consultant E 6541.00.561.00.41.0070 960.00

Invoice #: 122790 **Invoice Date:** 06/03/2024 **Doc Date:** 06/03/2024 **Due Date:** 06/04/2024
Vendor #: chm100 **Name:** CSD ATTORNEYS AT LAW **Type:** in

Line No Line Description Account Number Amount PO Number
1 CSD Attorneys E 6541.00.561.00.41.0030 640.00

Invoice #: 134279 **Invoice Date:** 06/03/2024 **Doc Date:** 06/03/2024 **Due Date:** 06/03/2024
Vendor #: int159 **Name:** INTER ISLAND PROPANE LLC **Type:** in

Line No Line Description Account Number Amount PO Number
1 Plumbing - generator install E 6541.00.561.00.48.0010 729.99

Invoice #: 20240603 **Invoice Date:** 06/03/2024 **Doc Date:** 06/03/2024 **Due Date:** 06/03/2024
Vendor #: bro005 **Name:** BROWN DOG HOLDINGS, LLC **Type:** in

Line No Line Description Account Number Amount PO Number
1 District office rent Q3 E 6541.00.561.00.45.0000 2,547.00

Invoice Accounting Report

San Juan County

Invoice #: 400
Vendor #: ban155

Invoice Date: 06/03/2024
Name: BANNER BANK

Doc Date: 06/03/2024
Due Date: 06/03/2024
Type: in

<u>Line No</u>	<u>Line Description</u>	<u>Account Number</u>	<u>Amount</u>	<u>PO Number</u>
1	Adobe Acrobat	E 6541.00.561.00.31.0002	52.01	
2	Fox's Boxes clinic storage	E 6541.00.561.00.48.0010	271.00	
3	OPALCO - clinic	E 6541.00.561.00.47.0010	765.20	
4	OPALCO - district office	E 6541.00.561.00.47.0011	132.44	
5	Rock Island - May 2024	E 6541.00.561.00.42.0020	85.00	
6	T-Mobile - April 2024	E 6541.00.561.00.42.0020	109.51	
7	Washington Alarm - May 2024	E 6541.00.561.00.31.0002	66.77	
8	Website domain renewal - NameSilo	E 6541.00.561.00.42.0030	11.70	
9	Ace Hardware duct tape - office	E 6541.00.561.00.31.0000	7.58	
10	Eastsound Sewer & Water District	E 6541.00.561.00.47.0010	148.27	
11	USPS PO Box Renewal	E 6541.00.561.00.45.0000	120.00	
12	AWPHD conference accommodation	E 6541.00.561.00.43.0020	387.76	
Invoice Total:			2,157.24	

Invoice #: 43979

Vendor #: is1730

Invoice Date: 06/03/2024
Name: ISLAND HARDWARE & SUPPLY

Doc Date: 06/03/2024
Due Date: 06/04/2024
Type: in

<u>Line No</u>	<u>Line Description</u>	<u>Account Number</u>	<u>Amount</u>	<u>PO Number</u>
1	Hazardous waste unit	E 6541.00.561.00.48.0010	86.45	

Invoice #: 54142

Vendor #: nwt155

Invoice Date: 06/03/2024
Name: NW TECHNOLOGY SOLUTIONS, LLC

Doc Date: 06/03/2024
Due Date: 06/03/2024
Type: in

<u>Line No</u>	<u>Line Description</u>	<u>Account Number</u>	<u>Amount</u>	<u>PO Number</u>
1	Technology services	E 6541.00.561.00.41.0040	363.52	

Invoice #: 5882

Vendor #: nun155

Invoice Date: 06/03/2024
Name: NUNEZ SERVICES LLC

Doc Date: 06/03/2024
Due Date: 06/03/2024
Type: in

<u>Line No</u>	<u>Line Description</u>	<u>Account Number</u>	<u>Amount</u>	<u>PO Number</u>
1	Clinic landscaping	E 6541.00.561.00.48.0020	303.52	

Grand Total: 7,787.72