

**CLAIMS PAYMENT REQUEST**

FROM: Orcas Island Health Care District Fund# 6541.00

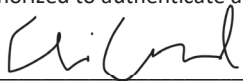
Date: 2/14/2023

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Invoice #	Description	Inv. Date	Vendor #	Vendor Name	Amount	Grant /Level	Bars #	1099
400	Chubb Insurance	12/30/2022	ban155	Banner Bank	\$ 6,983.00		6541.00.561.00.46.0002	
400	OPALCO - Prune Alley	1/3/2023	ban155	Banner Bank	\$ 134.09		6541.00.561.00.47.0011	
400	OPALCO - Deye Ln	1/3/2023	ban155	Banner Bank	\$ 774.55		6541.00.561.00.47.0010	
400	Washington Alarm - Monthly Fee	1/6/2023	ban155	Banner Bank	\$ 60.65		6541.00.561.00.47.0010	
400	T-Mobile	1/20/2023	ban155	Banner Bank	\$ 114.91		6541.00.561.00.42.0020	
400	Office Cupboard	1/4/2023	ban155	Banner Bank	\$ 8.38		6541.00.561.00.31.0000	
400	Sound Publishing - Recruitment Ad	1/6/2023	ban155	Banner Bank	\$ 138.50		6541.00.561.00.41.0060	
400	WordPress Engine - Website	1/9/2023	ban155	Banner Bank	\$ 300.00		6541.00.561.00.42.0030	
400	Vortex Café - Lopez Visit Lunch	1/12/2023	ban155	Banner Bank	\$ 26.15		6541.00.561.00.43.0020	
400	WSF - Lopez Ferry	1/12/2023	ban155	Banner Bank	\$ 26.20		6541.00.561.00.43.0020	
400	Target - Office Microwave	1/14/2023	ban155	Banner Bank	\$ 86.87		6541.00.561.00.35.0000	
400	Fred Meyer - GiveOrcas Cards	1/19/2023	ban155	Banner Bank	\$ 22.22		6541.00.561.00.49.0050	
400	Hampton Inn - North Sound ACH Conf	1/19/2023	ban155	Banner Bank	\$ 127.85		6541.00.561.00.43.0020	
400	WSF - Friday Harbor Ferry	1/25/2023	ban155	Banner Bank	\$ 26.20		6541.00.561.00.43.0020	
400	San Juan Brewing - FH Lunch	1/25/2023	ban155	Banner Bank	\$ 23.38		6541.00.561.00.43.0020	
20220117	Island Health - Wilson Sign-on Bonus	12/13/2022	isl726	Island Hospital	\$ 25,000.00		6541.00.561.00.41.0003	
000404220	Rock Island Internet	1/7/2023	roc201	Rock Island	\$ 85.00		6541.00.561.00.42.0020	
10217	Cloud52 - Web Maintenance	1/13/2023	ray195	CLOUD52	\$ 900.00		6541.00.561.00.42.0030	
20230114	Landscaping service	1/14/2023	gao155	Chihuahua Team Services	\$ 866.40		6541.00.561.00.48.0020	
20230120	Landscaping service	1/20/2023	gao155	Chihuahua Team Services	\$ 866.40		6541.00.561.00.48.0020	
10797-01	Water - Deye Clinic	1/31/2023	eas350	EWUA	\$ 91.77		6541.00.561.00.47.0010	
10798-01	Water - Deye Parcel	1/31/2023	eas350	EWUA	\$ 41.00		6541.00.561.00.47.0010	
1312023	Water/Sewer ESWD 7 Deye Ln	1/31/2023	eas310	ESWD	\$ 128.70		6541.00.561.00.47.0010	
49010	Technology Services	2/1/2023	nwt155	NW Technology	\$ 382.98		6541.00.561.00.41.0040	

TOTAL THIS PAGE \$ 37,215.20

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

02/13/2023  
 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.

DocuSigned by:  
*Pegi A. Groundwater*  
A80A84BC16C84A6...  
Pegi Groundwater, Auditing Officer

2/14/2023  
\_\_\_\_\_  
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.

\_\_\_\_\_  
Diane Boteler, Commissioner/Board Secretary                      \_\_\_\_\_  
Date

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