



JUNIOR TAXING DISTRICT CLAIMS PAYMENT REQUEST FORM

Junior taxing districts (JTD) must complete this form to request claims payments for all accounts payable and payroll disbursements.

NOTE: It is the district's responsibility to maintain adequate records to substantiate claims.

Submit completed form to San Juan County Payroll Deputy by 10:00 A.M. on Tuesday morning.

Date of request: December 16, 2025

District name: Orcas Island Health Care District

Requestor name: Chris Chord

Requestor phone & email address: chris@orcashealth.org, 360-317-3545

Total amount: \$33,580.51

BARS code: 6541 .00.589.40.00.0000

Request type: Accounts Payable Warrants

Description of claim(s):

December 16, 2025 AP warrants

Last four digits of bank account (EFT's ONLY): N/A

Warrant delivery: SJC mail warrants to vendor(s) (JTD must provide remittances)

Auditing Officer Certification:

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.

Auditing Officer or Commissioner Signature(s) for Approval of Claims:

Name and title Chris Chord	Superintendent
Signature and date 	Dec 15, 2025

Name and title Trey Holland	Auditing Officer
Signature and date <small>Trey Holland (Dec 15, 2025 13:01:45 PST)</small>	Dec 15, 2025

Name and title	
Signature and date	

Name and title	
Signature and date	

Name and title	
Signature and date	

Name and title	
Signature and date	

Invoice Accounting Report
San Juan County

Invoice #: 10797.01 **Invoice Date:** 12/15/2025 **Doc Date:** 12/16/2025 **Due Date:** 12/17/2025
Vendor #: eas350 **Name:** EASTSOUND WATER USERS ASSN **Type:** in

<u>Line No</u>	<u>Line Description</u>	<u>Account Number</u>	<u>Amount</u>	<u>PO Number</u>
1	Water sewer EWUA clinic	E 6541.00.589.40.00.0000	90.39	

Invoice #: 10798.01 **Invoice Date:** 12/15/2025 **Doc Date:** 12/16/2025 **Due Date:** 12/17/2025
Vendor #: eas350 **Name:** EASTSOUND WATER USERS ASSN **Type:** in

<u>Line No</u>	<u>Line Description</u>	<u>Account Number</u>	<u>Amount</u>	<u>PO Number</u>
1	Water sewer EWUA parcel	E 6541.00.589.40.00.0000	50.00	

Invoice #: 1354 **Invoice Date:** 12/08/2025 **Doc Date:** 12/16/2025 **Due Date:** 12/17/2025
Vendor #: j00109 **Name:** SEIB POLICY & PUBLIC AFFAIRS **Type:** in

<u>Line No</u>	<u>Line Description</u>	<u>Account Number</u>	<u>Amount</u>	<u>PO Number</u>
1	Policy consulting	E 6541.00.589.40.00.0000	6,500.00	

Invoice #: 1411 **Invoice Date:** 12/08/2025 **Doc Date:** 12/16/2025 **Due Date:** 12/17/2025
Vendor #: orc170 **Name:** ORCAS COMMUNITY RESOURCE **Type:** in

<u>Line No</u>	<u>Line Description</u>	<u>Account Number</u>	<u>Amount</u>	<u>PO Number</u>
1	OCRC vision support, Oct 2025 balance	E 6541.00.589.40.00.0000	30.00	

Invoice #: 1414 **Invoice Date:** 12/08/2025 **Doc Date:** 12/16/2025 **Due Date:** 12/17/2025
Vendor #: orc170 **Name:** ORCAS COMMUNITY RESOURCE **Type:** in

<u>Line No</u>	<u>Line Description</u>	<u>Account Number</u>	<u>Amount</u>	<u>PO Number</u>
1	OCRC, med travel, Nov 2025	E 6541.00.589.40.00.0000	4,765.71	

Invoice #: 1415 **Invoice Date:** 12/08/2025 **Doc Date:** 12/16/2025 **Due Date:** 12/17/2025
Vendor #: orc170 **Name:** ORCAS COMMUNITY RESOURCE **Type:** in

<u>Line No</u>	<u>Line Description</u>	<u>Account Number</u>	<u>Amount</u>	<u>PO Number</u>
1	OCRC med support, Nov 2025	E 6541.00.589.40.00.0000	1,390.06	

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Invoice #: 20251208 Invoice Date: 12/15/2025 Doc Date: 12/16/2025 Due Date: 12/17/2025
Vendor #: j00250 Name: O'CONNOR, DEBRA Type: in

<u>Line No</u>	<u>Line Description</u>	<u>Account Number</u>	<u>Amount</u>	<u>PO Number</u>
1	Comm Health project support	E 6541.00.589.40.00.0000	795.00	

Invoice #: 20251215 Invoice Date: 12/15/2025 Doc Date: 12/16/2025 Due Date: 12/17/2025
Vendor #: j00209 Name: WALTERS, SCOTT M Type: in

<u>Line No</u>	<u>Line Description</u>	<u>Account Number</u>	<u>Amount</u>	<u>PO Number</u>
1	Facilities planning	E 6541.00.589.40.00.0000	6,666.67	

Invoice #: 2965836-SJ Invoice Date: 12/15/2025 Doc Date: 12/16/2025 Due Date: 12/17/2025
Vendor #: san275 Name: SAN JUAN SANITATION, INC Type: in

<u>Line No</u>	<u>Line Description</u>	<u>Account Number</u>	<u>Amount</u>	<u>PO Number</u>
1	Dental trash pick-up	E 6541.00.589.40.00.0000	19.39	

Invoice #: 3307 Invoice Date: 12/15/2025 Doc Date: 12/16/2025 Due Date: 12/15/2025
Vendor #: nex654 Name: NEXCO INC. Type: in

<u>Line No</u>	<u>Line Description</u>	<u>Account Number</u>	<u>Amount</u>	<u>PO Number</u>
1	Airport Center, Dec 2025	E 6541.00.589.40.00.0000	942.00	

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Invoice #: 400 **Invoice Date:** 12/08/2025 **Doc Date:** 12/16/2025 **Due Date:** 12/17/2025
Vendor #: ban155 **Name:** BANNER BANK **Type:** in

<u>Line No</u>	<u>Line Description</u>	<u>Account Number</u>	<u>Amount</u>	<u>PO Number</u>
1	Ace Hardware, dental office	E 6541.00.589.40.00.0000	65.66	
2	OPALCO clinic, Sept 2025	E 6541.00.589.40.00.0000	574.16	
3	OPALCO district office, Sept 2025	E 6541.00.589.40.00.0000	103.33	
4	OPALCO dental, Sept 2025	E 6541.00.589.40.00.0000	300.38	
5	MRSC roster renewal	E 6541.00.589.40.00.0000	225.00	
6	QuickBooks payroll, Nov 2025	E 6541.00.589.40.00.0000	105.91	
7	Washington Alarm, Nov 2025	E 6541.00.589.40.00.0000	76.75	
8	Rock Island, Nov 2025	E 6541.00.589.40.00.0000	85.00	
9	Adobe Acrobat	E 6541.00.589.40.00.0000	51.99	
10	T-Mobile, Oct 2025	E 6541.00.589.40.00.0000	111.50	
11	ESWD, Aug 2025	E 6541.00.589.40.00.0000	154.64	
Invoice Total:			1,854.32	

Invoice #: 49182 **Invoice Date:** 12/08/2025 **Doc Date:** 12/16/2025 **Due Date:** 12/17/2025
Vendor #: j00223 **Name:** BUSINESS SUPPORT SERVICES NW **Type:** in

<u>Line No</u>	<u>Line Description</u>	<u>Account Number</u>	<u>Amount</u>	<u>PO Number</u>
1	Accounting support, Dec 2025	E 6541.00.589.40.00.0000	695.00	

Invoice #: 58887 **Invoice Date:** 12/08/2025 **Doc Date:** 12/16/2025 **Due Date:** 12/17/2025
Vendor #: j00205 **Name:** NW TECHNOLOGY LLC **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 6541.00.589.40.00.0000	363.52	

Invoice #: 59012 **Invoice Date:** 12/08/2025 **Doc Date:** 12/16/2025 **Due Date:** 12/17/2025
Vendor #: j00205 **Name:** NW TECHNOLOGY LLC **Type:** in

<u>Line No</u>	<u>Line Description</u>	<u>Account Number</u>	<u>Amount</u>	<u>PO Number</u>
1	Microsoft software, new laptop	E 6541.00.589.40.00.0000	278.46	

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Invoice #: 8INV00021430 Invoice Date: 12/08/2025 Doc Date: 12/16/2025 Due Date: 12/17/2025
Vendor #: shi001 Name: SHIMADZU MEDICAL SYSTEMS USA Type: in

<u>Line No</u>	<u>Line Description</u>	<u>Account Number</u>	<u>Amount</u>	<u>PO Number</u>
1	X-ray maintenance	E 6541.00.589.40.00.0000	5,011.19	

Invoice #: 900D71 Invoice Date: 12/15/2025 Doc Date: 12/16/2025 Due Date: 12/17/2025
Vendor #: sta900 Name: STATE OF WASHINGTON Type: in

<u>Line No</u>	<u>Line Description</u>	<u>Account Number</u>	<u>Amount</u>	<u>PO Number</u>
1	PEBB, Dec 2025	E 6541.00.589.40.00.0000	4,128.80	

Grand Total: 33,580.51