

Waterford-Halfmoon UFSD



Check Warrant Report For C - 2: School Lunch- 09/10/20 For Dates 9/10/2020 - 9/10/2020

| Check # Account | Check Date | Vendor ID Vendor Name | Invoice Number | PO Number | Check Amount | Liquidated |
|----------------------------------|------------|--|----------------|-----------|------------------------|-----------------|
| 707592 C 2860.410 | 09/10/2020 | 4492 Decrescente Distributing Co., Inc | 128052 | 200351 | 354.90 | 354.90 |
| | | | | | Check Total: | 354.90 |
| 707593 C 2860.450 | 09/10/2020 | 5817 Heidi Donaldson | | | 50.00 | |
| | | | | | Check Total: | 50.00 |
| 707594 C 2860.410 | 09/10/2020 | 10300 Dzembo's Dairy Inc | 527110 | 200364 | 570.54 | 570.54 |
| | | | | | Check Total: | 570.54 |
| 707595 C 2860.410 | 09/10/2020 | 3473 Sysco Food Services | 225586060 | 200350 | 2,736.38 | 2,736.38 |
| | | | | | Check Total: | 2,736.38 |
| 707596 C 2860.410 | 09/10/2020 | 6317 US Food Service | 1091012 | 200352 | 1,278.79 | 1,278.79 |
| | | | | | Check Total: | 1,278.79 |
| Number of Transactions: 5 | | | | | Warrant Total: | 4,990.61 |
| | | | | | Vendor Portion: | 4,990.61 |

Certification of Warrant

To The District Treasurer: I hereby certify that I have verified the above claims, _____ in number, in the total amount of \$ _____. You are hereby authorized and directed to pay to the claimants certified above the amount of each claim allowed and charge each to the proper fund.

Date

Signature

Title