# HARRISVILLE CSD

Warrant Report
**Fiscal Year: 2025**

**Bank Account: COMMUNITY - GENERAL**
**Warrant: 0079-Field Trip 6/3/25**



| P.O. Number | Account | Description | Trans/Payment | Invoice Amt. For This Check | Payment Amt. | | Check Number |
|---|---|---|---|---|---|---|---|
| The Wild Center<br>45 Museum Drive<br>Tupper Lake, NY 12986 | | | | | | | |
| Invoice: admission students [AP ID# 001670] | | | | 95.00 | | | |
| | A-2110-406-00-00 | FIELD TRIPS | 06/03/2025 | | 95.00 | | |
| Invoice: wild classroom workshop [AP ID# 001670] | | | | 100.00 | | | |
| | A-2110-406-00-00 | FIELD TRIPS | 06/03/2025 | | 100.00 | | |
| **Check total for 000955-The Wild Center** | | | | | **195.00** | **C** | **069288** |
| **Total for Bank Account: GeneralComm COMMUNITY - GENERAL** | | | | | **195.00** | | |

# HARRISVILLE CSD

Warrant Report
Fiscal Year: 2025

Warrant: 0079-Field Trip 6/3/25



| P.O. Number | Account | Description | Trans/Payment | Invoice Amt. For This Check | Payment Amt. | Check Number |
|---|---|---|---|---|---|---|

| | |
|---|---|
| Total for computer generated checks | 195.00 |
| Total for manual checks | 0.00 |
| Total for automated payments | 0.00 |
| Total for electronic transfers (manual) | 0.00 |
| Certified warrant amount | 195.00 |
| Total of credits associated with cash replacement checks issued | 0.00 |
| Total for Warrant Report | 195.00 |

Net Disbursement by Fund - All Payments

Fund Summary
A $ 195.00

| Bank Account Summary | Computer Checks | Cash Replacement | Auto Paymnts | EFT's | Transactions | |
|---|---|---|---|---|---|---|
| COMMUNITY - GENERAL | 1 Check (069288) | 0 | 0 | 0 | 1 | $ 195.00 |

# HARRISVILLE CSD

Warrant Report
**Fiscal Year: 2025**

**Warrant: 0079-Field Trip 6/3/25**



**Payment Amt.**

**Selection Criteria**

Show check numbers
Show address
Don't show Non-PO Item Descriptions
Date From: 06/01/2025
Date To: 06/30/2025
Don't show check dates
Don't show voided notes
Don't show page with voided items
Sort by: Check
Printed by AMY N. FROST

# HARRISVILLE CSD

Warrant Report
Fiscal Year: 2025

Bank Account: COMMUNITY - GENERAL
Warrant: 0080-A/P 06/05/25



| P.O. Number | Account | Description | Trans/Payment | Invoice Amt. For This Check | Payment Amt. | | Check Number |
|---|---|---|---|---|---|---|---|
| TAMMY R. ARNOLD<br>PO BOX 201<br>HARRISVILLE, NY 13648 | | | | | | | |
| Invoice: 2025 dental dental[AP ID# 001661] | | | | 150.00 | | | |
| Invoice: 2025 VISION vision[AP ID# 001661] | | | | 150.00 | | | |
| | A-9060-800-20-00 | Vision & Dental Reimburse | 06/06/2025 | | 300.00 | | |
| Subtotal for group | | | | 300.00 | 300.00 | | |
| Check total for E00348-TAMMY R. ARNOLD | | | | | 300.00 | C | 069291 |
| TAMMEY S. BRETON<br>13398 HENRY ROAD<br>NATURAL BRIDGE, NY 13665 | | | | | | | |
| Invoice: 2025 dental dental[AP ID# 001659] | | | | 150.00 | | | |
| Invoice: 2025 VISION vision[AP ID# 001659] | | | | 150.00 | | | |
| | A-9060-800-20-00 | Vision & Dental Reimburse | 06/06/2025 | | 300.00 | | |
| Subtotal for group | | | | 300.00 | 300.00 | | |
| Check total for 1433-TAMMEY S. BRETON | | | | | 300.00 | C | 069293 |
| DEBBIE J. COBB<br>14387 N. SHORE ROAD<br>HARRISVILLE, NY 13648 | | | | | | | |
| Invoice: 2025 dental dental[AP ID# 001660] | | | | 150.00 | | | |
| Invoice: 2025 VISION vision[AP ID# 001660] | | | | 150.00 | | | |
| | A-9060-800-20-00 | Vision & Dental Reimburse | 06/06/2025 | | 300.00 | | |
| Subtotal for group | | | | 300.00 | 300.00 | | |
| Invoice: 2025 clothing alllowance [AP ID# 001666] | | | | 144.88 | | | |
| | A-1621-453-00-00 | MAINTENANCE - UNIFORMS | 06/06/2025 | | 144.88 | | |
| Check total for 001989-DEBBIE J. COBB | | | | | 444.88 | C | 069297 |
| FOLLETT CONTENT SOLUTIONS<br>PO BOX 7410597<br>CHICAGO, IL 60674-0597 | | | | | | | |
| Invoice: 569975F Acct # 34875[AP ID# 001667] | | | | 422.47 | | | |

# HARRISVILLE CSD

Warrant Report
Fiscal Year: 2025

Bank Account: COMMUNITY - GENERAL
Warrant: 0080-A/P 06/05/25

| P.O. Number | Account | Description | Trans/Payment | Invoice Amt. For This Check | Payment Amt. | | Check Number |
|---|---|---|---|---|---|---|---|
| 25-00049 | A-2610-460-00-00 | LIBRARY BOOKS | 06/06/2025 | | 422.47 | | |
| Check total for 026694-FOLLETT CONTENT SOLUTIONS | | | | | 422.47 | C | 069305 |
| GRAINGER | | | | | | | |
| DEPT 832636187 | | | | | | | |
| PALATINE, IL 60038-0001 | | | | | | | |
| Invoice: 9500014270 Acct # 832636187[AP ID# 001668] | | | | 250.02 | | | |
| | A-1621-450-00-00 | MAINTENANCE SUPPLIES | 06/06/2025 | | 250.02 | | |
| Check total for 029975-GRAINGER | | | | | 250.02 | C | 069306 |
| LALLIER, FRANCIS | | | | | | | |
| 3 INDIAN HEAD TRAIL | | | | | | | |
| GOUVERNEUR, NY 13642 | | | | | | | |
| Invoice: 2025 VISION. vision reimbursement[AP ID# 001658] | | | | 150.00 | | | |
| | A-9060-800-20-00 | Vision & Dental Reimburse | 06/06/2025 | | 150.00 | | |
| Check total for 002124-LALLIER, FRANCIS | | | | | 150.00 | C | 069309 |
| LEONARD BUS SALES, INC. | | | | | | | |
| PO BOX 291 | | | | | | | |
| CANAJOHARIE, NY 13317 | | | | | | | |
| Invoice: x102018850:01 Acct # 221[AP ID# 001665] | | | | 116.25 | | | |
| | A-5510-450-52-00 | TRANSPORTATION-VEHICLE PA | 06/06/2025 | | 116.25 | | |
| Check total for 000731-LEONARD BUS SALES, INC. | | | | | 116.25 | C | 069312 |
| LEWIS COUNTY BOARD OF ELECTIONS | | | | | | | |
| 7660 NORTH STATE STREET | | | | | | | |
| LOWVILLE, NY 13367 | | | | | | | |
| Invoice: 2025 school election[AP ID# 001663] | | | | 1,205.00 | | | |
| 25-00059 | A-1010-400-43-00 | BD OF ED - OTHER EXPENSE | 06/06/2025 | | 1,205.00 | | |
| Check total for 043570-LEWIS COUNTY BOARD OF ELECTIONS | | | | | 1,205.00 | C | 069313 |

# HARRISVILLE CSD

Warrant Report
Fiscal Year: 2025

Bank Account: COMMUNITY - GENERAL
Warrant: 0080-A/P 06/05/25



| P.O. Number | Account | Description | Trans/Payment | Invoice Amt. For This Check | Payment Amt. | | Check Number |
|---|---|---|---|---|---|---|---|
| LEWIS COUNTY SHERIFF<br>5252 OUTER STOWE STREET<br>LOWVILLE, NY 13367 | | | | | | | |
| Invoice: April 2025 SRO services[AP ID# 001664] | | | | 9,202.00 | | | |
| 25-00278 | A-2810-401-00-00 | School Resource Officer | 06/06/2025 | | 9,202.00 | | |
| Check total for 043573-LEWIS COUNTY SHERIFF | | | | | 9,202.00 | C | 069314 |
| MAG SPECIAL SERVICES<br>4383 ROUTE 23 STE 102<br>CAIRO, NY 12413 | | | | | | | |
| Invoice: s6949 Acct # 184[AP ID# 001669] | | | | 365.08 | | | |
| 25-00058 | A-2250-400-00-00 | CONTRACTUAL EXP - SPECIAL | 06/06/2025 | | 365.08 | | |
| Check total for 000773-MAG SPECIAL SERVICES | | | | | 365.08 | C | 069315 |
| TRENA MIDDLESTATE<br>155A CR 23A<br>HARRISVILLE, NY 13648 | | | | | | | |
| Invoice: 2025 Dental [AP ID# 001672] | | | | 150.00 | | | |
| | A-9060-800-20-00 | Vision & Dental Reimburse | 06/06/2025 | | 150.00 | | |
| Invoice: 2025 vision [AP ID# 001672] | | | | 150.00 | | | |
| | A-9060-800-20-00 | Vision & Dental Reimburse | 06/06/2025 | | 150.00 | | |
| Check total for 001174-TRENA MIDDLESTATE | | | | | 300.00 | C | 069317 |
| CHARLOTTE M. SCOTT<br>14179 STEAM MILL ROAD<br>HARRISVILLE, NY 13648 | | | | | | | |
| Invoice: 2025 dental dental[AP ID# 001662] | | | | 150.00 | | | |
| Invoice: 2025 VISION vision[AP ID# 001662] | | | | 150.00 | | | |
| | A-9060-800-20-00 | Vision & Dental Reimburse | 06/06/2025 | | 300.00 | | |
| Subtotal for group | | | | 300.00 | 300.00 | | |
| Check total for 001978-CHARLOTTE M. SCOTT | | | | | 300.00 | C | 069326 |

# HARRISVILLE CSD

Warrant Report
**Fiscal Year: 2025**

**Bank Account: COMMUNITY - GENERAL**
**Warrant: 0080-A/P 06/05/25**



| P.O. Number | Account | Description | Trans/Payment | Invoice Amt. For This Check | Payment Amt. | | Check Number |
|---|---|---|---|---|---|---|---|
| VERIZON<br>PO BOX 15043<br>ALBANY, NY 12212-5043 | | | | | | | |
| Invoice: 362000069354 Acct # 100000146487[AP ID# 001671] | | | | 189.50 | | | |
| 25-00004 | A-5510-400-00-00 | DIST TRANS - CONTRACTUAL | 06/06/2025 | | 189.50 | | |
| **Check total for 001907-VERIZON** | | | | | **189.50** | **C** | **069330** |

**Total for Bank Account: GeneralComm COMMUNITY - GENERAL** **13,545.20**

# HARRISVILLE CSD

Warrant Report
**Fiscal Year: 2025**

**Warrant: 0080-A/P 06/05/25**



| P.O. Number | Account | Description | Trans/Payment | Invoice Amt. For This Check | Payment Amt. | Check Number |
|---|---|---|---|---|---|---|

| | |
|---|---|
| Total for computer generated checks | 13,545.20 |
| Total for manual checks | 0.00 |
| Total for automated payments | 0.00 |
| Total for electronic transfers (manual) | 0.00 |
| Certified warrant amount | 13,545.20 |
| Total of credits associated with cash replacement checks issued | 0.00 |
| Total for Warrant Report | 13,545.20 |

**Net Disbursement by Fund - All Payments**

| Fund Summary | |
|---|---|
| A | $ 24,534.30 |
| F | 813.99 |
| Total for All Funds | $ 25,348.29 |

| Bank Account Summary | Computer Checks | Cash Replacement | Auto Paymnts | EFT's | Transactions | |
|---|---|---|---|---|---|---|
| COMMUNITY - GENERAL | 13 Checks (069291-069330) | 0 | 0 | 0 | 14 | $ 13,545.20 |

# HARRISVILLE CSD

Warrant Report
**Fiscal Year: 2025**

**Warrant: 0080-A/P 06/05/25**



**Payment Amt.**

**Selection Criteria**

Show check numbers
Show address
Don't show Non-PO Item Descriptions
Date From: 06/01/2025
Date To: 06/30/2025
Don't show check dates
Don't show voided notes
Don't show page with voided items
Sort by: Check
Printed by AMY N. FROST

# HARRISVILLE CSD

Warrant Report
**Fiscal Year: 2025**

**Bank Account: COMMUNITY - GENERAL**
**Warrant: 0081-6.11.25**



| P.O. Number | Account | Description | Trans/Payment | Invoice Amt. For This Check | Payment Amt. | | Check Number |
|---|---|---|---|---|---|---|---|
| TAYLORS WILD ENTERPRISE<br>7621 LAKEPORT ROAD<br>CHITTENANGO, NY 13037 | | | | | | | |
| Invoice: Students Students[AP ID# 001722] | | | | 630.00 | | | |
| Invoice: Teachers Teachers[AP ID# 001722] | | | | 41.97 | | | |
| | A-2110-406-00-00 | FIELD TRIPS | 06/11/2025 | | 671.97 | | |
| **Subtotal for group** | | | | **671.97** | **671.97** | | |
| **Check total for 001757-TAYLORS WILD ENTERPRISE** | | | | | **671.97** | **C** | **069332** |

**Total for Bank Account: GeneralComm COMMUNITY - GENERAL** **671.97**

# HARRISVILLE CSD

Warrant Report
Fiscal Year: 2025

Warrant: 0081-6.11.25



| P.O. Number | Account | Description | Trans/Payment | Invoice Amt. For This Check | Payment Amt. | Check Number |
|---|---|---|---|---|---|---|

| | |
|---|---|
| Total for computer generated checks | 671.97 |
| Total for manual checks | 0.00 |
| Total for automated payments | 0.00 |
| Total for electronic transfers (manual) | 0.00 |
| Certified warrant amount | 671.97 |
| Total of credits associated with cash replacement checks issued | 0.00 |
| Total for Warrant Report | 671.97 |

Net Disbursement by Fund - All Payments

Fund Summary
A $ 671.97

| Bank Account Summary | Computer Checks | Cash Replacement | Auto Paymnts | EFT's | Transactions | |
|---|---|---|---|---|---|---|
| COMMUNITY - GENERAL | 1 Check (069332) | 0 | 0 | 0 | 1 | $ 671.97 |

# HARRISVILLE CSD

Warrant Report
**Fiscal Year: 2025**

**Warrant: 0081-6.11.25**



**Payment Amt.**

**Selection Criteria**

Show check numbers
Show address
Don't show Non-PO Item Descriptions
Date From: 06/01/2025
Date To: 06/30/2025
Don't show check dates
Don't show voided notes
Don't show page with voided items
Sort by: Check
Printed by AMY N. FROST

# HARRISVILLE CSD



Warrant Report
**Fiscal Year: 2025**

**Bank Account: COMMUNITY - FEDERAL**
**Warrant: 0083-A/P 6/13/25**

| P.O. Number | Account | Description | Trans/Payment | Invoice Amt. For This Check | Payment Amt. | | Check Number |
|---|---|---|---|---|---|---|---|
| JEFFERSON-LEWIS BOCES<br>20104 STATE RT. 3<br>WATERTOWN, NY 13601 | | | | | | | |
| Invoice: SPEECH SERVICES PROVIDED -ESY [AP ID# 001714] | | | | 1,028.30 | | | |
| | F-SMHD25-2250-400-00 | Contractual Expense | 06/13/2025 | | 1,028.30 | | |
| **Check total for 000067-JEFFERSON-LEWIS BOCES** | | | | | **1,028.30** | **C** | **004769** |
| **Total for Bank Account: ederalComm COMMUNITY - FEDERAL** | | | | | **1,028.30** | | |

# HARRISVILLE CSD

Warrant Report
Fiscal Year: 2025

Bank Account: COMMUNITY - CAFETERIA
Warrant: 0083-A/P 6/13/25



| P.O. Number | Account | Description | Trans/Payment | Invoice Amt. For This Check | Payment Amt. | | Check Number |
|---|---|---|---|---|---|---|---|
| BIMBO BAKERIES USA<br>P.O. BOX 412678<br>BOSTON, MA 02241-2678 | | | | | | | |
| Invoice: 66541290008831 Acct # 99-50265-9982-99[AP ID# 001673] | | | | 114.96 | | | |
| 25-00292 | C-2860-455-00 | Food Purchases | 06/13/2025 | | 114.96 | | |
| Invoice: 66541290008986 Acct # 99-50265-9982-99[AP ID# 001673] | | | | 91.23 | | | |
| 25-00292 | C-2860-455-00 | Food Purchases | 06/13/2025 | | 91.23 | | |
| Check total for 014700-BIMBO BAKERIES USA | | | | | 206.19 | C | 004901 |
| GLAZIER PACKING CO., INC.<br>3140 SR 11<br>PO BOX 58<br>MALONE, NY 12953 | | | | | | | |
| Invoice: 1134767 Acct # 0511[AP ID# 001681] | | | | 593.41 | | | |
| 25-00257 | C-2860-455-00 | Food Purchases | 06/13/2025 | | 593.41 | | |
| Invoice: 1135319 Acct # 0511[AP ID# 001681] | | | | 594.12 | | | |
| 25-00257 | C-2860-455-00 | Food Purchases | 06/13/2025 | | 594.12 | | |
| Invoice: INVOICE 1136139 Acct # 0511[AP ID# 001721] | | | | 158.29 | | | |
| | C-2860-455-00 | Food Purchases | 06/13/2025 | | 158.29 | | |
| Invoice: INVOICE 1136140 Acct # 0511[AP ID# 001721] | | | | 514.62 | | | |
| | C-2860-455-00 | Food Purchases | 06/13/2025 | | 514.62 | | |
| Check total for 000574-GLAZIER PACKING CO., INC. | | | | | 1,860.44 | C | 004902 |
| GLIDER OIL<br>PO Box 289<br>Pulaski, NY 13142 | | | | | | | |
| Invoice: PROPANE DELIVERY [AP ID# 001696] | | | | 183.07 | | | |
| | C-2860-427-34 | Propane | 06/13/2025 | | 183.07 | | |
| Check total for 000242-GLIDER OIL | | | | | 183.07 | C | 004903 |

# HARRISVILLE CSD

Warrant Report
Fiscal Year: 2025

Bank Account: COMMUNITY - CAFETERIA
Warrant: 0083-A/P 6/13/25



| P.O. Number | Account | Description | Trans/Payment | Invoice Amt. For This Check | Payment Amt. | | Check Number |
|---|---|---|---|---|---|---|---|
| HERSHEY CREAMERY CO<br>1370 UPPER LENOX AVE.<br>ONEIDA, NY 13421-2640 | | | | | | | |
| Invoice: INVE0021714766 Acct # HARPIRHAR0540[AP ID# 001683] | | | | 327.60 | | | |
| 25-00258 | C-2860-455-00 | Food Purchases | 06/13/2025 | | 327.60 | | |
| Invoice: INVOICE INVE0021769833 Acct # HARPIRHAR0540[AP ID# 001700] | | | | 233.76 | | | |
| | C-2860-455-00 | Food Purchases | 06/13/2025 | | 233.76 | | |
| Check total for 001120-HERSHEY CREAMERY CO | | | | | 561.36 | C | 004904 |
| PIERCE'S WELDING<br>8050 WASHINGTON ROAD<br>HARRISVILLE, NY 13648 | | | | | | | |
| Invoice: DRAIN HANDLE REPAIR [AP ID# 001707] | | | | 100.00 | | | |
| | C-2860-420-00 | Equipment Repairs | 06/13/2025 | | 100.00 | | |
| Check total for 002136-PIERCE'S WELDING | | | | | 100.00 | C | 004905 |
| SAVE A LOT<br>210 W MAIN ST<br>GOUVERNEUR, NY 13642 | | | | | | | |
| Invoice: 27MAY2025 SUPPLIES[AP ID# 001675] | | | | 78.59 | | | |
| 25-00325 | C-2860-455-00 | Food Purchases | 06/13/2025 | | 78.59 | | |
| Invoice: 28MAY2025 SUPPLIES[AP ID# 001675] | | | | 35.91 | | | |
| 25-00325 | C-2860-455-00 | Food Purchases | 06/13/2025 | | 35.91 | | |
| Check total for 001123-SAVE A LOT | | | | | 114.50 | C | 004906 |
| US Foods Inc<br>PO BOX 642554<br>Pittsburgh, PA 15264-2554 | | | | | | | |
| Invoice: 0544728 SUPPLIES[AP ID# 001682] | | | | 2,782.94 | | | |
| 25-00259 | C-2860-455-00 | Food Purchases | 06/13/2025 | | 2,782.94 | | |
| Invoice: INVOICE 0819279 [AP ID# 001702] | | | | 3,401.11 | | | |
| | C-2860-455-00 | Food Purchases | 06/13/2025 | | 3,401.11 | | |

# HARRISVILLE CSD

Warrant Report
Fiscal Year: 2025

Bank Account: COMMUNITY - CAFETERIA
Warrant: 0083-A/P 6/13/25



| P.O. Number | Account | Description | Trans/Payment | Invoice Amt. For This Check | Payment Amt. | | Check Number |
|---|---|---|---|---|---|---|---|
| Invoice: INVOICE 1085664 [AP ID# 001702] | | | | 2,343.49 | | | |
| | C-2860-455-00 | Food Purchases | 06/13/2025 | | 2,343.49 | | |
| Check total for 002096-US Foods Inc | | | | | 8,527.54 | C | 004907 |
| Total for Bank Account: CafeComm COMMUNITY - CAFETERIA | | | | | 11,553.10 | | |

# HARRISVILLE CSD

Warrant Report
**Fiscal Year: 2025**



**Bank Account: COMMUNITY - CAPITAL**
**Warrant: 0083-A/P 6/13/25**

| P.O. Number | Account | Description | Trans/Payment | Invoice Amt. For This Check | Payment Amt. | | Check Number |
|---|---|---|---|---|---|---|---|
| WHITTON CONSTRUCTION, LLC<br>710 CREAM OF THE VALLEY ROAD<br>GOUVERNEUR, NY 13642 | | | | | | | |
| Invoice: PAYMENT APPLICATION 2 [AP ID# 001690] | | | | 40,412.05 | | | |
| | H-CAPO25-1620-293 | General Construction | 06/13/2025 | | 40,412.05 | | |
| **Check total for 001649-WHITTON CONSTRUCTION, LLC** | | | | | **40,412.05** | **C** | **002364** |
| **Total for Bank Account: CapitalComm COMMUNITY - CAPITAL** | | | | | **40,412.05** | | |

# HARRISVILLE CSD

Warrant Report
**Fiscal Year: 2025**

**Bank Account: COMMUNITY - GENERAL**
**Warrant: 0083-A/P 6/13/25**

| P.O. Number | Account | Description | Trans/Payment | Invoice Amt. For This Check | Payment Amt. | | Check Number |
|---|---|---|---|---|---|---|---|
| AMAZON CAPITAL SERVICES<br>PO BOX 035184<br>SEATTLE, WA 98124-5184 | | | | | | | |
| Invoice: 1G93-JCM6-473C Acct # A3L783R2QLS7XP[AP ID# 001684] | | | | 121.14 | | | |
| 25-00335 | A-2110-450-59-00 | TEACHING SUPPLIES - HS | 06/13/2025 | | 121.14 | | |
| Check total for 001057-AMAZON CAPITAL SERVICES | | | | | 121.14 | C | 069333 |
| BLUE MOUNTAIN SPRING WATER INC.<br>1011 WATERMAN DR.<br>WATERTOWN, NY 13601 | | | | | | | |
| Invoice: 482442 WATER[AP ID# 001703] | | | | 147.10 | | | |
| 25-00084 | A-2855-450-00-00 | INTERSCHOL ATH - SUPPLIES | 06/13/2025 | | 147.10 | | |
| Invoice: 491529 WATER[AP ID# 001703] | | | | 95.50 | | | |
| 25-00084 | A-2855-450-00-00 | INTERSCHOL ATH - SUPPLIES | 06/13/2025 | | 95.50 | | |
| Invoice: RENT333698. RENT[AP ID# 001703] | | | | 18.00 | | | |
| 25-00084 | A-2855-450-00-00 | INTERSCHOL ATH - SUPPLIES | 06/13/2025 | | 18.00 | | |
| Invoice: 482443 WATER BUS GARAGE[AP ID# 001704] | | | | 19.90 | | | |
| 25-00098 | A-5530-450-00-00 | GARAGE BLDG. - SUPPLIES | 06/13/2025 | | 19.90 | | |
| Invoice: RENT333698 RENT[AP ID# 001704] | | | | 10.00 | | | |
| 25-00098 | A-5530-450-00-00 | GARAGE BLDG. - SUPPLIES | 06/13/2025 | | 10.00 | | |
| Check total for 014300-BLUE MOUNTAIN SPRING WATER INC. | | | | | 290.50 | C | 069334 |
| BRISTOL, CHRISTINE<br>2027 US HWY 11<br>GOUVERNEUR, NY 13642 | | | | | | | |
| Invoice: dental 2025 [AP ID# 001708] | | | | 150.00 | | | |
| | A-9060-800-20-00 | Vision & Dental Reimburse | 06/13/2025 | | 150.00 | | |
| Invoice: vision 2025 [AP ID# 001708] | | | | 150.00 | | | |
| | A-9060-800-20-00 | Vision & Dental Reimburse | 06/13/2025 | | 150.00 | | |
| Check total for 000977-BRISTOL, CHRISTINE | | | | | 300.00 | C | 069335 |

**Bank Account: COMMUNITY - GENERAL**
**Warrant: 0083-A/P 6/13/25**

| P.O. Number | Account | Description | Trans/Payment | Invoice Amt. For This Check | Payment Amt. | | Check Number |
|---|---|---|---|---|---|---|---|
| CINTAS | | | | | | | |
| PO BOX 630910 | | | | | | | |
| CINCINNATI, OH 45263-0910 | | | | | | | |
| Invoice: 4229576929 Acct # 18914890[AP ID# 001720] | | | | 215.40 | | | |
| Invoice: 4230335468 Acct # 18914890[AP ID# 001720] | | | | 780.24 | | | |
| Invoice: 4231054554 Acct # 18914890[AP ID# 001720] | | | | 215.40 | | | |
| Invoice: 4231669120 Acct # 18914890[AP ID# 001720] | | | | 215.40 | | | |
| 25-00100 | A-1620-400-00-00 | OPERATIONS - CONTRACTUAL | 06/13/2025 | | 524.93 | | |
| 25-00100 | A-1621-400-51-00 | MAINTENANCE - MOPS | 06/13/2025 | | 455.56 | | |
| 25-00100 | A-1621-453-00-00 | MAINTENANCE - UNIFORMS | 06/13/2025 | | 300.44 | | |
| 25-00100 | A-5510-400-00-00 | DIST TRANS - CONTRACTUAL | 06/13/2025 | | 64.71 | | |
| 25-00100 | A-5510-403-00-00 | DIST TRANS - UNIFORMS | 06/13/2025 | | 80.80 | | |
| Subtotal for group | | | | 1,426.44 | 1,426.44 | | |
| Check total for 001749-CINTAS | | | | | 1,426.44 | C | 069336 |
| ALEXIS N. EBERSOL | | | | | | | |
| 26804 KEYSER ROAD | | | | | | | |
| EVANS MILLS, NY 13637 | | | | | | | |
| Invoice: dental 2025 [AP ID# 001744] | | | | 150.00 | | | |
| | A-9060-800-20-00 | Vision & Dental Reimburse | 06/13/2025 | | 150.00 | | |
| Invoice: vision 2025 [AP ID# 001744] | | | | 150.00 | | | |
| | A-9060-800-20-00 | Vision & Dental Reimburse | 06/13/2025 | | 150.00 | | |
| Check total for 001871-ALEXIS N. EBERSOL | | | | | 300.00 | C | 069337 |
| TIMOTHY A. FOWLER II | | | | | | | |
| 7817 STATE RT 3 | | | | | | | |
| HARRISVILLE, NY 13648 | | | | | | | |
| Invoice: dental 2025 [AP ID# 001713] | | | | 150.00 | | | |
| | A-9060-800-20-00 | Vision & Dental Reimburse | 06/13/2025 | | 150.00 | | |
| Invoice: vision 2025 [AP ID# 001713] | | | | 150.00 | | | |
| | A-9060-800-20-00 | Vision & Dental Reimburse | 06/13/2025 | | 150.00 | | |
| Check total for 001937-TIMOTHY A. FOWLER II | | | | | 300.00 | C | 069338 |

# HARRISVILLE CSD

Warrant Report
**Fiscal Year: 2025**

**Bank Account: COMMUNITY - GENERAL**
**Warrant: 0083-A/P 6/13/25**



| P.O. Number | Account | Description | Trans/Payment | Invoice Amt. For This Check | Payment Amt. | | Check Number |
|---|---|---|---|---|---|---|---|
| **ASHLEE N. FOWLER**<br>**7817 STATE ROUTE 3**<br>**HARRISVILLE, NY 13648** | | | | | | | |
| Invoice: dental 2025 [AP ID# 001711] | | | | 150.00 | | | |
| | A-9060-800-20-00 | Vision & Dental Reimburse | 06/13/2025 | | 150.00 | | |
| Invoice: vision 2025 [AP ID# 001711] | | | | 150.00 | | | |
| | A-9060-800-20-00 | Vision & Dental Reimburse | 06/13/2025 | | 150.00 | | |
| **Check total for 001945-ASHLEE N. FOWLER** | | | | | **300.00** | **C** | **069339** |
| **ANITA FRANCIS**<br>**494 OLD RT. 11**<br>**CANTON, NY 13617** | | | | | | | |
| Invoice: MOD SOFTBALL 6/4/25 [AP ID# 001716] | | | | 105.40 | | | |
| | A-2855-418-70-00 | INTERSCHOL ATH - OFFICIAL | 06/13/2025 | | 105.40 | | |
| **Check total for 001681-ANITA FRANCIS** | | | | | **105.40** | **C** | **069340** |
| **Rebecca French**<br>**46 Dewey Road**<br>**Hermon, NY 13652** | | | | | | | |
| Invoice: dental 2025 [AP ID# 001737] | | | | 150.00 | | | |
| | A-9060-800-20-00 | Vision & Dental Reimburse | 06/13/2025 | | 150.00 | | |
| Invoice: vision 2025 [AP ID# 001737] | | | | 150.00 | | | |
| | A-9060-800-20-00 | Vision & Dental Reimburse | 06/13/2025 | | 150.00 | | |
| **Check total for 000997-Rebecca French** | | | | | **300.00** | **C** | **069341** |
| **AMY FROST**<br>**PO BOX 297**<br>**HARRISVILLE, NY 13648** | | | | | | | |
| Invoice: WATER VAULVE [AP ID# 001692] | | | | 52.00 | | | |
| | A-1621-450-00-00 | MAINTENANCE SUPPLIES | 06/13/2025 | | 52.00 | | |
| **Check total for 000585-AMY FROST** | | | | | **52.00** | **C** | **069342** |

| P.O. Number | Account | Description | Trans/Payment | Invoice Amt. For This Check | Payment Amt. | | Check Number |
|---|---|---|---|---|---|---|---|
| MICHELLE FULLER<br>33 PINNER RD.<br>HARRISVILLE, NY 13648 | | | | | | | |
| Invoice: dental 2025 [AP ID# 001709] | | | | 150.00 | | | |
| | A-9060-800-20-00 | Vision & Dental Reimburse | 06/13/2025 | | 150.00 | | |
| Invoice: vision 2025 [AP ID# 001709] | | | | 150.00 | | | |
| | A-9060-800-20-00 | Vision & Dental Reimburse | 06/13/2025 | | 150.00 | | |
| Check total for 000433-MICHELLE FULLER | | | | | 300.00 | C | 069343 |
| GLIDER OIL<br>PO Box 289<br>Pulaski, NY 13142 | | | | | | | |
| Invoice: PROPANE FOR SCIENCE ROOM [AP ID# 001694] | | | | 25.77 | | | |
| | A-2110-450-59-00 | TEACHING SUPPLIES - HS | 06/13/2025 | | 25.77 | | |
| Check total for 000242-GLIDER OIL | | | | | 25.77 | C | 069344 |
| HARRISVILLE CENTRAL SCHOOL PETTY CASH<br>C/O ALICIA MERA - HIGH SCHOOL<br>14371 PIRATE LANE<br>HARRISVILLE, NY 13648 | | | | | | | |
| Invoice: REFILL PETTY CASH [AP ID# 001697] | | | | 161.63 | | | |
| | A-1670-450-00-00 | MAILING & COPIER SUPPLIES | 06/13/2025 | | 161.63 | | |
| Check total for 000447-HARRISVILLE CENTRAL SCHOOL PETTY CASH | | | | | 161.63 | C | 069345 |
| HARRISVILLE CSD<br>PETTY CASH<br>14371 PIRATE LANE<br>HARRISVILLE, NY 13648 | | | | | | | |
| Invoice: REPLENISH PETTY CASH [AP ID# 001698] | | | | 39.10 | | | |
| | A-1240-450-00-00 | CSA - SUPPLIES | 06/13/2025 | | 39.10 | | |
| Check total for 000416-HARRISVILLE CSD | | | | | 39.10 | C | 069346 |

# HARRISVILLE CSD

Warrant Report
Fiscal Year: 2025

Bank Account: COMMUNITY - GENERAL
Warrant: 0083-A/P 6/13/25



| P.O. Number | Account | Description | Trans/Payment | Invoice Amt. For This Check | Payment Amt. | | Check Number |
|---|---|---|---|---|---|---|---|
| **HARRISVILLE HARDWARE**<br>**8288 STATE RT 3**<br>**PO BOX 85**<br>**HARRISVILLE, NY 13648** | | | | | | | |
| Invoice: HH246140 5/*13/2025[AP ID# 001705] | | | | 11.38 | | | |
| 25-00046 | A-1621-450-00-00 | MAINTENANCE SUPPLIES | 06/13/2025 | | 11.38 | | |
| Invoice: HH246477 5/16/2025[AP ID# 001705] | | | | 27.99 | | | |
| 25-00046 | A-1621-450-00-00 | MAINTENANCE SUPPLIES | 06/13/2025 | | 27.99 | | |
| Invoice: HH247581 5/28/2025[AP ID# 001705] | | | | 54.79 | | | |
| 25-00046 | A-1621-450-00-00 | MAINTENANCE SUPPLIES | 06/13/2025 | | 54.79 | | |
| Invoice: HH247787 5/30/2025[AP ID# 001705] | | | | 20.14 | | | |
| 25-00046 | A-1621-450-00-00 | MAINTENANCE SUPPLIES | 06/13/2025 | | 20.14 | | |
| **Check total for 076176-HARRISVILLE HARDWARE** | | | | | **114.30** | **C** | **069347** |
| **ANDREA G. HELLER**<br>**680 BLANCHARD HILL ROAD**<br>**RUSSELL, NY 13684** | | | | | | | |
| Invoice: dental 2025 [AP ID# 001712] | | | | 150.00 | | | |
| | A-9060-800-20-00 | Vision & Dental Reimburse | 06/13/2025 | | 150.00 | | |
| Invoice: vision 2025 [AP ID# 001712] | | | | 150.00 | | | |
| | A-9060-800-20-00 | Vision & Dental Reimburse | 06/13/2025 | | 150.00 | | |
| **Check total for 001927-ANDREA G. HELLER** | | | | | **300.00** | **C** | **069348** |
| **HILL, WILLIAM**<br>**10 TOWN BARN DR**<br>**EDWARDS, NY 13635** | | | | | | | |
| Invoice: dental 2025 [AP ID# 001710] | | | | 150.00 | | | |
| | A-9060-800-20-00 | Vision & Dental Reimburse | 06/13/2025 | | 150.00 | | |
| Invoice: vision 2025 [AP ID# 001710] | | | | 150.00 | | | |
| | A-9060-800-20-00 | Vision & Dental Reimburse | 06/13/2025 | | 150.00 | | |

| P.O. Number | Account | Description | Trans/Payment | Invoice Amt. For This Check | Payment Amt. | | Check Number |
|---|---|---|---|---|---|---|---|
| Check total for 002025-HILL, WILLIAM | | | | | 300.00 | C | 069349 |
| JOHNSON NEWSPAPER CORPORATION<br>260 WASHINGTON STREET<br>WATERTOWN, NY 13601 | | | | | | | |
| Invoice: W15144 Acct # 2290[AP ID# 001674] | | | | 880.48 | | | |
| 25-00218 | A-1060-400-00-00 | DISTRICT MTG - CONTRACTUA | 06/13/2025 | | 880.48 | | |
| Invoice: W15145 Acct # 2290[AP ID# 001674] | | | | 260.66 | | | |
| 25-00218 | A-1060-400-00-00 | DISTRICT MTG - CONTRACTUA | 06/13/2025 | | 260.66 | | |
| Check total for 076110-JOHNSON NEWSPAPER CORPORATION | | | | | 1,141.14 | C | 069350 |
| BRANDY L. KELLEY<br>167 STATE HIGHWAY 3<br>HARRISVILLE, NY 13648 | | | | | | | |
| Invoice: SUPPLIES [AP ID# 001695] | | | | 15.23 | | | |
| | A-2815-450-00-00 | HEALTH SERVICES NURSE | 06/13/2025 | | 15.23 | | |
| Check total for E00849-BRANDY L. KELLEY | | | | | 15.23 | C | 069351 |
| HENRY LAQUIER<br>P.O. BOX 10<br>RENSSELAER FALLS, NY 13680 | | | | | | | |
| Invoice: MOD BASEBALL 5-30-25 [AP ID# 001715] | | | | 174.40 | | | |
| | A-2855-418-70-00 | INTERSCHOL ATH - OFFICIAL | 06/13/2025 | | 174.40 | | |
| Check total for 000145-HENRY LAQUIER | | | | | 174.40 | C | 069352 |
| MOBILETECH COMMUNICATIONS CORP.<br>2365 FIRE HALL RD.<br>CANANDAIGUA, NY 14424 | | | | | | | |
| Invoice: 24167 Acct # 0801725[AP ID# 001676] | | | | 1,004.00 | | | |
| 25-00003 | A-5510-400-00-00 | DIST TRANS - CONTRACTUAL | 06/13/2025 | | 1,004.00 | | |
| Check total for 000560-MOBILETECH COMMUNICATIONS CORP. | | | | | 1,004.00 | C | 069353 |

**Bank Account: COMMUNITY - GENERAL**
**Warrant: 0083-A/P 6/13/25**

| P.O. Number | Account | Description | Trans/Payment | Invoice Amt. For This Check | Payment Amt. | | Check Number |
|---|---|---|---|---|---|---|---|
| **MX FUELS**<br>**BOX 638**<br>**MASSENA, NY 13662-0638** | | | | | | | |
| Invoice: F1251822 Acct # 1905116[AP ID# 001680] | | | | 413.14 | | | |
| 25-00214 | A-5510-450-53-00 | TRANSPORTATION - GASOLINE | 06/13/2025 | | 413.14 | | |
| **Check total for 048782-MX FUELS** | | | | | **413.14** | **C** | **069354** |
| **NATIONAL GRID**<br>**PO BOX 371376**<br>**PITTSBURGH, PA 15250-7376** | | | | | | | |
| Invoice: 4/28/25 ELECTRIC SERVICE[AP ID# 001687] | | | | 4,051.89 | | | |
| 25-00170 | A-1620-425-29-00 | OPERATIONS - ELECTRIC | 06/13/2025 | | 4,051.89 | | |
| Invoice: 04/28/2025. ELECTRIC SERVICE BUS GARAGE[AP ID# 001688] | | | | 336.35 | | | |
| 25-00171 | A-5530-400-29-00 | GARAGE BLDG - ELECTRICITY | 06/13/2025 | | 336.35 | | |
| **Check total for 049925-NATIONAL GRID** | | | | | **4,388.24** | **C** | **069355** |
| **TOM O'BRIEN**<br>**331 WEST ROAD**<br>**HERMON, NY 13652** | | | | | | | |
| Invoice: CORRECTION 5/16 VOUCHER [AP ID# 001689] | | | | 10.40 | | | |
| | A-2855-418-70-00 | INTERSCHOL ATH - OFFICIAL | 06/13/2025 | | 10.40 | | |
| Invoice: CORRECTION 5/4 VOUCHER [AP ID# 001689] | | | | 5.00 | | | |
| | A-2855-418-70-00 | INTERSCHOL ATH - OFFICIAL | 06/13/2025 | | 5.00 | | |
| Invoice: CORRECTION 5/6 VOUCHER [AP ID# 001689] | | | | 10.40 | | | |
| | A-2855-418-70-00 | INTERSCHOL ATH - OFFICIAL | 06/13/2025 | | 10.40 | | |
| **Check total for 000531-TOM O'BRIEN** | | | | | **25.80** | **C** | **069356** |
| **ORKIN**<br>**PO BOX 740847**<br>**CINCINNATI, OH 45274-0847** | | | | | | | |
| Invoice: 260588412 Acct # 32842763[AP ID# 001686] | | | | 867.00 | | | |

**Bank Account: COMMUNITY - GENERAL**
**Warrant: 0083-A/P 6/13/25**

| P.O. Number | Account | Description | Trans/Payment | Invoice Amt. For This Check | Payment Amt. | | Check Number |
|---|---|---|---|---|---|---|---|
| 25-00040 | A-1620-400-00-00 | OPERATIONS - CONTRACTUAL | 06/13/2025 | | 867.00 | | |
| Check total for 001625-ORKIN | | | | | 867.00 | C | 069357 |

ASHLEY OXENFORD
427 NORTH WASHINGTON STREET
CARTHAGE, NY 13619

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| Invoice: 2025 DENTAL [AP ID# 001677] | | | | 150.00 | | | |
| | A-9060-800-20-00 | Vision & Dental Reimburse | 06/13/2025 | | 150.00 | | |
| Invoice: 2025 VISION [AP ID# 001677] | | | | 150.00 | | | |
| | A-9060-800-20-00 | Vision & Dental Reimburse | 06/13/2025 | | 150.00 | | |
| Check total for 001516-ASHLEY OXENFORD | | | | | 300.00 | C | 069358 |

DAVID G. PRICE
809 HASBROUCK STREET
OGDENSBURG, NY 13669

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| Invoice: 2025 VISION [AP ID# 001678] | | | | 150.00 | | | |
| | A-9060-800-20-00 | Vision & Dental Reimburse | 06/13/2025 | | 150.00 | | |
| Check total for 001993-DAVID G. PRICE | | | | | 150.00 | C | 069359 |

KATIE L. REED
14380 MAPLE STREET
HARRISVILLE, NY 13648

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| Invoice: dental 2025 [AP ID# 001741] | | | | 150.00 | | | |
| | A-9060-800-20-00 | Vision & Dental Reimburse | 06/13/2025 | | 150.00 | | |
| Invoice: vision 2025 [AP ID# 001741] | | | | 150.00 | | | |
| | A-9060-800-20-00 | Vision & Dental Reimburse | 06/13/2025 | | 150.00 | | |
| Check total for 001870-KATIE L. REED | | | | | 300.00 | C | 069360 |

RING SQUARED TELECOM LLC
PO BOX 38
PITTSFIELD, MA 01201

# HARRISVILLE CSD

Warrant Report
Fiscal Year: 2025

Bank Account: COMMUNITY - GENERAL
Warrant: 0083-A/P 6/13/25

| P.O. Number | Account | Description | Trans/Payment | Invoice Amt. For This Check | Payment Amt. | | Check Number |
|---|---|---|---|---|---|---|---|
| Invoice: IN302700 Acct # 8538[AP ID# 001685] | | | | 998.71 | | | |
| 25-00053 | A-1620-425-32-00 | OPERATIONS - TELEPHONE | 06/13/2025 | | 850.70 | | |
| 25-00053 | A-5530-400-32-00 | GARAGE BLDG - PHONE | 06/13/2025 | | 148.01 | | |
| Subtotal for group | | | | 998.71 | 998.71 | | |
| Check total for 018040-RING SQUARED TELECOM LLC | | | | | 998.71 | C | 069361 |

SNIDER, DONALD
872 SUCKER LAKE ROAD
OSWEGATCHIE, NY 13670

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| Invoice: HYDROLIC HOSE AND FITTING [AP ID# 001691] | | | | 97.02 | | | |
| | A-1621-450-00-00 | MAINTENANCE SUPPLIES | 06/13/2025 | | 97.02 | | |
| Check total for 002049-SNIDER, DONALD | | | | | 97.02 | C | 069362 |

JOLIE SNIDER
872 Sucker Lake Road
Oswegatchie, NY 13670

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| Invoice: NOTARY LICENCE RENEWAL [AP ID# 001679] | | | | 60.00 | | | |
| | A-1240-404-00-00 | CSA - TRAVEL | 06/13/2025 | | 60.00 | | |
| Check total for 001323-JOLIE SNIDER | | | | | 60.00 | C | 069363 |

SAMUEL SOCHIA
24 GRAVES STREET
GOUVERNEUR, NY 13642

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| Invoice: MOD BASEBALL 6/6/25 [AP ID# 001719] | | | | 74.00 | | | |
| | A-2855-418-70-00 | INTERSCHOL ATH - OFFICIAL | 06/13/2025 | | 74.00 | | |
| Check total for 001763-SAMUEL SOCHIA | | | | | 74.00 | C | 069364 |

STEVE SULLIVAN
265 COLE RD.
GOUVERNEUR, NY 13642

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| Invoice: MOD SOFTBALL [AP ID# 001717] | | | | 84.60 | | | |
| | A-2855-418-70-00 | INTERSCHOL ATH - OFFICIAL | 06/13/2025 | | 84.60 | | |

**Bank Account: COMMUNITY - GENERAL**
**Warrant: 0083-A/P 6/13/25**

| P.O. Number | Account | Description | Trans/Payment | Invoice Amt. For This Check | Payment Amt. | | Check Number |
|---|---|---|---|---|---|---|---|
| Check total for 000532-STEVE SULLIVAN | | | | | 84.60 | C | 069365 |
| NICOLE TAYLOR<br>625 CR23<br>HARRISVILLE, NY 13648 | | | | | | | |
| Invoice: dental 2025 [AP ID# 001742] | | | | 150.00 | | | |
| | A-9060-800-20-00 | Vision & Dental Reimburse | 06/13/2025 | | 150.00 | | |
| Invoice: vision 2025 [AP ID# 001742] | | | | 150.00 | | | |
| | A-9060-800-20-00 | Vision & Dental Reimburse | 06/13/2025 | | 150.00 | | |
| Check total for 000196-NICOLE TAYLOR | | | | | 300.00 | C | 069366 |
| AUBREY THAYER<br>8502 N SHORE RD.<br>HARRISVILLE, NY 13648 | | | | | | | |
| Invoice: dental 2025 [AP ID# 001740] | | | | 150.00 | | | |
| | A-9060-800-20-00 | Vision & Dental Reimburse | 06/13/2025 | | 150.00 | | |
| Invoice: vision 2025 [AP ID# 001740] | | | | 150.00 | | | |
| | A-9060-800-20-00 | Vision & Dental Reimburse | 06/13/2025 | | 150.00 | | |
| Check total for 000229-AUBREY THAYER | | | | | 300.00 | C | 069367 |
| RONDA M. THERIAULT<br>75 ROSE ROAD<br>HARRISVILLE, NY 13648 | | | | | | | |
| Invoice: dental 2025 [AP ID# 001743] | | | | 150.00 | | | |
| | A-9060-800-20-00 | Vision & Dental Reimburse | 06/13/2025 | | 150.00 | | |
| Invoice: vision 2025 [AP ID# 001743] | | | | 150.00 | | | |
| | A-9060-800-20-00 | Vision & Dental Reimburse | 06/13/2025 | | 150.00 | | |
| Check total for 001314-RONDA M. THERIAULT | | | | | 300.00 | C | 069368 |

# HARRISVILLE CSD

Warrant Report
Fiscal Year: 2025

Bank Account: COMMUNITY - GENERAL
Warrant: 0083-A/P 6/13/25



| P.O. Number | Account | Description | Trans/Payment | Invoice Amt. For This Check | Payment Amt. | | Check Number |
|---|---|---|---|---|---|---|---|
| TODD SUPPLYINCORPORATED<br>4190 STATE RT 3<br>STAR LAKE, NY 13690 | | | | | | | |
| Invoice: INVOICE 229885 [AP ID# 001701] | | | | 42.96 | | | |
| | A-1621-450-00-00 | MAINTENANCE SUPPLIES | 06/13/2025 | | 42.96 | | |
| Check total for 002063-TODD SUPPLYINCORPORATED | | | | | 42.96 | C | 069369 |
| RONALD VROOMAN<br>325 STATE HWY 3<br>HARRISVILLE, NY 13648 | | | | | | | |
| Invoice: dental 2025 [AP ID# 001738] | | | | 150.00 | | | |
| | A-9060-800-20-00 | Vision & Dental Reimburse | 06/13/2025 | | 150.00 | | |
| Invoice: vision 2025 [AP ID# 001738] | | | | 150.00 | | | |
| | A-9060-800-20-00 | Vision & Dental Reimburse | 06/13/2025 | | 150.00 | | |
| Check total for 001896-RONALD VROOMAN | | | | | 300.00 | C | 069370 |
| JOSEPH F. WAHL JR.<br>45 E. BARNEY ST.<br>GOUVERNEUR, NY 13642 | | | | | | | |
| Invoice: MOD BASEBALL 6/6/25 [AP ID# 001718] | | | | 84.60 | | | |
| | A-2855-418-70-00 | INTERSCHOL ATH - OFFICIAL | 06/13/2025 | | 84.60 | | |
| Check total for 000178-JOSEPH F. WAHL JR. | | | | | 84.60 | C | 069371 |
| WAUGH, JORDAN<br>14547 HERMITAGE RD<br>HARRISVILLE, NY 13648 | | | | | | | |
| Invoice: dental 2025 [AP ID# 001739] | | | | 150.00 | | | |
| | A-9060-800-20-00 | Vision & Dental Reimburse | 06/13/2025 | | 150.00 | | |
| Invoice: vision 2025 [AP ID# 001739] | | | | 150.00 | | | |
| | A-9060-800-20-00 | Vision & Dental Reimburse | 06/13/2025 | | 150.00 | | |
| Check total for 002135-WAUGH, JORDAN | | | | | 300.00 | C | 069372 |

**Bank Account: COMMUNITY - GENERAL**
**Warrant: 0083-A/P 6/13/25**

| P.O. Number | Account | Description | Trans/Payment | Invoice Amt. For This Check | Payment Amt. | | Check Number |
|---|---|---|---|---|---|---|---|
| TRENTON R. WHITE<br>445 DANA HILL ROAD<br>RUSSELL, NY 13684 | | | | | | | |
| Invoice: RIBBONS FOR FIELD DAY [AP ID# 001693] | | | | 56.00 | | | |
| | A-2110-450-58-00 | TEACHING SUPPLIES - ELEM | 06/13/2025 | | 56.00 | | |
| Check total for 001938-TRENTON R. WHITE | | | | | 56.00 | C | 069373 |
| WILLIAMSON SERVICES LLC.<br>12988 N CROGHAN RD<br>NATURAL BRIDGE, NY 13665 | | | | | | | |
| Invoice: JUNE 2025 Acct # 2233[AP ID# 001706] | | | | 946.95 | | | |
| 25-00036 | A-1620-424-00-00 | OPERATIONS - SOLID WASTE | 06/13/2025 | | 946.95 | | |
| Check total for 076966-WILLIAMSON SERVICES LLC. | | | | | 946.95 | C | 069374 |
| Xenolytic Data Solutions, LLC<br>PO Box 140850<br>Broken Arrow, OK 74014-9998 | | | | | | | |
| Invoice: 4700 XENOCOMM TRANSACTION[AP ID# 001699] | | | | 20.00 | | | |
| 25-00032 | A-5510-400-00-00 | DIST TRANS - CONTRACTUAL | 06/13/2025 | | 20.00 | | |
| Check total for 001991-Xenolytic Data Solutions, LLC | | | | | 20.00 | C | 069375 |
| Total for Bank Account: GeneralComm COMMUNITY - GENERAL | | | | | 17,480.07 | | |

# HARRISVILLE CSD

Warrant Report
Fiscal Year: 2025

Warrant: 0083-A/P 6/13/25



| P.O. Number | Account | Description | Trans/Payment | Invoice Amt. For This Check | Payment Amt. | Check Number |
|---|---|---|---|---|---|---|

| | |
|---|---|
| Total for computer generated checks | 70,473.52 |
| Total for manual checks | 0.00 |
| Total for automated payments | 0.00 |
| Total for electronic transfers (manual) | 0.00 |
| Certified warrant amount | 70,473.52 |
| Total of credits associated with cash replacement checks issued | 0.00 |
| Total for Warrant Report | 70,473.52 |

Net Disbursement by Fund - All Payments

| Fund Summary | |
|---|---|
| A | $ 17,480.07 |
| C | 11,553.10 |
| F | 1,028.30 |
| H | 40,412.05 |
| Total for All Funds | $ 70,473.52 |

| Bank Account Summary | Computer Checks | Cash Replacement | Auto Paymnts | EFT's | Transactions | |
|---|---|---|---|---|---|---|
| COMMUNITY - CAPITAL | 1 Check (002364) | 0 | 0 | 0 | 1 | $ 40,412.05 |
| COMMUNITY - FEDERAL | 1 Check (004769) | 0 | 0 | 0 | 1 | 1,028.30 |
| COMMUNITY - GENERAL | 43 Checks (069333-069375) | 0 | 0 | 0 | 45 | 17,480.07 |
| COMMUNITY - CAFETERI | 7 Checks (004901-004907) | 0 | 0 | 0 | 10 | 11,553.10 |
| Total for All Computer Checks | | | | | | $ 70,473.52 |

# HARRISVILLE CSD

Warrant Report
**Fiscal Year: 2025**

**Warrant: 0083-A/P 6/13/25**



**Payment Amt.**

**Selection Criteria**

Show check numbers
Show address
Don't show Non-PO Item Descriptions
Date From: 06/01/2025
Date To: 06/30/2025
Don't show check dates
Don't show voided notes
Don't show page with voided items
Sort by: Check
Printed by AMY N. FROST

# HARRISVILLE CSD

Warrant Report
**Fiscal Year: 2025**

**Bank Account: COMMUNITY - GENERAL**
**Warrant: 0084-Scholarship and field trip**



| P.O. Number | Account | Description | Trans/Payment | Invoice Amt. For This Check | Payment Amt. | | Check Number |
|---|---|---|---|---|---|---|---|
| NORTH COUNTRY CHILDREN'S MUSEUM<br>10 RAYMOND STREET<br>POTSDAM, NY 13676 | | | | | | | |
| Invoice: 000615 FEILD TRIP[AP ID# 001750] | | | | 168.00 | | | |
| 25-00332 | A-2110-406-00-00 | FIELD TRIPS | 06/16/2025 | | 168.00 | | |
| Check total for 001564-NORTH COUNTRY CHILDREN'S MUSEUM | | | | | 168.00 | C | 069376 |
| Total for Bank Account: GeneralComm COMMUNITY - GENERAL | | | | | 168.00 | | |

# HARRISVILLE CSD

Warrant Report
Fiscal Year: 2025

**Bank Account: COMMUNITY - SCHOLARSHIP**
**Warrant: 0084-Scholarship and field trip**



| P.O. Number | Account | Description | Trans/Payment | Invoice Amt. For This Check | Payment Amt. | | Check Number |
|---|---|---|---|---|---|---|---|
| BEAROR AVA<br>620 EDWARDS RD<br>HARRISVILLE, NY 13648 | | | | | | | |
| Invoice: Chuck Folsom Memorial Scholarship[AP ID# 001749] | | | | 500.00 | | | |
| | TE-SCHO25-1945-400 | Contractual and Other | 06/16/2025 | | 500.00 | | |
| Check total for 002142-BEAROR AVA | | | | | 500.00 | C | 001335 |
| MERA AIDEN<br>120 ST HWY 812<br>HARRISVILLE, NY 13648 | | | | | | | |
| Invoice: YORR MARCHIONE SCHOLARSHIP. [AP ID# 001746] | | | | 400.00 | | | |
| | TE-SCHO25-1945-400 | Contractual and Other | 06/16/2025 | | 400.00 | | |
| Check total for 002140-MERA AIDEN | | | | | 400.00 | C | 001336 |
| MERA AIDEN<br>120 ST HWY 812<br>HARRISVILLE, NY 13648 | | | | | | | |
| Invoice: Austin Scholarship [AP ID# 001747] | | | | 1,000.00 | | | |
| | TE-SCHO25-1945-400 | Contractual and Other | 06/16/2025 | | 1,000.00 | | |
| Check total for 002140-MERA AIDEN | | | | | 1,000.00 | C | 001337 |
| MILLER ISABEL<br>8264 HIGH ST<br>HARRISVILLE, NY 13648 | | | | | | | |
| Invoice: COMMUNITY BANK SCHOLARSHIP [AP ID# 001745] | | | | 250.00 | | | |
| | TE-SCHO25-1945-400 | Contractual and Other | 06/16/2025 | | 250.00 | | |
| Check total for 002139-MILLER ISABEL | | | | | 250.00 | C | 001338 |
| MORRIS GAVIN<br>PO BOX 47<br>HARRISVILLE, NY 13648 | | | | | | | |
| Invoice: Thomas LaDuc Memorial Scholarship[AP ID# 001748] | | | | 500.00 | | | |
| | TE-SCHO25-1945-400 | Contractual and Other | 06/16/2025 | | 500.00 | | |

# HARRISVILLE CSD

Warrant Report
Fiscal Year: 2025

Bank Account: COMMUNITY - SCHOLARSHIP
Warrant: 0084-Scholarship and field trip



| P.O. Number | Account | Description | Trans/Payment | Invoice Amt. For This Check | Payment Amt. | | Check Number |
|---|---|---|---|---|---|---|---|
| Check total for 002141-MORRIS GAVIN | | | | | 500.00 | C | 001339 |
| Total for Bank Account: ScholarComm COMMUNITY - SCHOLAR | | | | | 2,650.00 | | |

# HARRISVILLE CSD

Warrant Report
Fiscal Year: 2025



## Warrant: 0084-Scholarship and field trip

| P.O. Number | Account | Description | Trans/Payment | Invoice Amt. For This Check | Payment Amt. | Check Number |
|---|---|---|---|---|---|---|

| | |
|---|---|
| Total for computer generated checks | 2,818.00 |
| Total for manual checks | 0.00 |
| Total for automated payments | 0.00 |
| Total for electronic transfers (manual) | 0.00 |
| Certified warrant amount | 2,818.00 |
| Total of credits associated with cash replacement checks issued | 0.00 |
| Total for Warrant Report | 2,818.00 |

Net Disbursement by Fund - All Payments

| Fund Summary | |
|---|---|
| A | $ 168.00 |
| TE | 2,650.00 |
| Total for All Funds | $ 2,818.00 |

| Bank Account Summary | Computer Checks | Cash Replacement | Auto Paymnts | EFT's | Transactions | |
|---|---|---|---|---|---|---|
| COMMUNITY - GENERAL | 1 Check (069376) | 0 | 0 | 0 | 1 | $ 168.00 |
| COMMUNITY - SCHOLARS | 5 Checks (001335-001339) | 0 | 0 | 0 | 5 | 2,650.00 |
| Total for All Computer Checks | | | | | | $ 2,818.00 |

# HARRISVILLE CSD

Warrant Report
**Fiscal Year: 2025**

**Warrant: 0084-Scholarship and field trip**



**Payment Amt.**

**Selection Criteria**

Show check numbers
Show address
Don't show Non-PO Item Descriptions
Date From: 06/01/2025
Date To: 06/30/2025
Don't show check dates
Don't show voided notes
Don't show page with voided items
Sort by: Check
Printed by AMY N. FROST

# HARRISVILLE CSD



Warrant Report
**Fiscal Year: 2025**

**Bank Account: COMMUNITY - GENERAL**
**Warrant: 0085-BOCES**

| P.O. Number | Account | Description | Trans/Payment | Invoice Amt. For This Check | Payment Amt. | | Check Number |
|---|---|---|---|---|---|---|---|
| ST. LAWRENCE-LEWIS BOCES | | | | | | | |
| P.O. Box 231 | | | | | | | |
| Canton, NY 13617 | | | | | | | |
| Credit: CC114-25 2110.490.00.00[AP ID# 001814] | | | | -144.00 | | | |
| Invoice: MAY 2025 [AP ID# 001814] | | | | 161,596.35 | | | |
| | A-2110-490-00-00 | REGULAR SCHOOL - BOCES SE | 06/23/2025 | | -144.00 | | |
| 25-00275 | A-1010-490-00-00 | BD OF ED - BOCES | 06/23/2025 | | 189.50 | | |
| 25-00275 | A-1310-490-00-00 | BOCES COOP BUSINESS OFFIC | 06/23/2025 | | 8,006.20 | | |
| 25-00275 | A-1345-490-00-00 | BOCES COOP PURCHASING | 06/23/2025 | | 203.80 | | |
| 25-00275 | A-1430-490-00-00 | BOCES - PERSONNEL SERVICE | 06/23/2025 | | 2,286.00 | | |
| 25-00275 | A-1480-490-00-00 | PUBLIC INFO - BOCES SERVI | 06/23/2025 | | 5,785.17 | | |
| 25-00275 | A-1620-490-00-00 | BOCES Services Phone | 06/23/2025 | | 1,529.24 | | |
| 25-00275 | A-1621-490-00-00 | BOCES SAFETY/RISK MANAGEM | 06/23/2025 | | 992.95 | | |
| 25-00275 | A-1670-490-00-00 | BOCES Print Shop | 06/23/2025 | | 649.00 | | |
| 25-00275 | A-1981-490-00-00 | BOCES - ADMIN & OTHER | 06/23/2025 | | 21,617.30 | | |
| 25-00275 | A-1983-490-00-00 | BOCES - CAPITAL CONSTRUCT | 06/23/2025 | | 10,230.40 | | |
| 25-00275 | A-2070-490-00-00 | INSERVICE - BOCES | 06/23/2025 | | 1,606.20 | | |
| 25-00275 | A-2110-490-00-00 | REGULAR SCHOOL - BOCES SE | 06/23/2025 | | 8,267.72 | | |
| 25-00275 | A-2250-490-00-00 | BOCES - SPECIAL ED | 06/23/2025 | | 24,094.31 | | |
| 25-00275 | A-2270-490-00-00 | TITLE 1 COORDINATOR | 06/23/2025 | | 2,955.30 | | |
| 25-00275 | A-2280-490-00-00 | SOUTHWEST TECH BOCES | 06/23/2025 | | 34,918.40 | | |
| 25-00275 | A-2610-490-00-00 | INSTRUCTIONAL MEDIA - BOC | 06/23/2025 | | 4,056.49 | | |
| 25-00275 | A-2630-490-00-00 | BOCES COMPUTER CHARGES | 06/23/2025 | | 16,887.17 | | |
| 25-00275 | A-2820-490-00-00 | PSYCHOLOGICAL SERVICES | 06/23/2025 | | 5,440.00 | | |
| 25-00275 | A-2855-490-00-00 | INTRSCOL ATHETICS - BOCES | 06/23/2025 | | 1,113.90 | | |
| 25-00275 | A-5510-490-00-00 | DISTRICT TRANSPORTATION-B | 06/23/2025 | | 9,130.00 | | |
| 25-00275 | A-9089-495-00-00 | BOCES ACTUARIAL ADMIN | 06/23/2025 | | 510.00 | | |
| 25-00275 | A-9089-497-00-00 | BOCES WC ADMIN | 06/23/2025 | | 1,127.30 | | |
| **Subtotal for group** | | | | **161,452.35** | **161,452.35** | | |
| **Check total for BOCES-ST. LAWRENCE-LEWIS BOCES** | | | | | **161,452.35** | **C** | **069377** |

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| ST. LAWRENCE-LEWIS BOCES | | | | | | | |
| HEALTH INSURANCE | | | | | | | |
| P.O. BOX 231 | | | | | | | |
| CANTON, NY 13617 | | | | | | | |
| Invoice: 00123126 ACTIVE AND RETIRED INSURANCE PREMIUM[AP ID# 001815] | | | | 207,262.00 | | | |
| 25-00287 | A-9060-800-00-00 | HEALTH INS - RETIREES | 06/23/2025 | | 86,714.00 | | |

# HARRISVILLE CSD

Warrant Report
Fiscal Year: 2025

Bank Account: COMMUNITY - GENERAL
Warrant: 0085-BOCES



| P.O. Number | Account | Description | Trans/Payment | Invoice Amt. For This Check | Payment Amt. | | Check Number |
|---|---|---|---|---|---|---|---|
| 25-00287 | A-9060-800-10-00 | HEALTH INS - ACTIVES | 06/23/2025 | | 120,548.00 | | |
| Subtotal for group | | | | 207,262.00 | 207,262.00 | | |
| Check total for 066215-ST. LAWRENCE-LEWIS BOCES | | | | | 207,262.00 | C | 069378 |

Total for Bank Account: GeneralComm COMMUNITY - GENERAL 368,714.35

# HARRISVILLE CSD

Warrant Report
**Fiscal Year: 2025**

**Warrant: 0085-BOCES**



| P.O. Number | Account | Description | Trans/Payment | Invoice Amt. For This Check | Payment Amt. | Check Number |
|---|---|---|---|---|---|---|

| | |
|---|---|
| Total for computer generated checks | 368,714.35 |
| Total for manual checks | 0.00 |
| Total for automated payments | 0.00 |
| Total for electronic transfers (manual) | 0.00 |
| Certified warrant amount | 368,714.35 |
| Total of credits associated with cash replacement checks issued | 0.00 |
| Total for Warrant Report | 368,714.35 |

Net Disbursement by Fund - All Payments

Fund Summary
A $ 368,714.35

| Bank Account Summary | Computer Checks | Cash Replacement | Auto Paymnts | EFT's | Transactions | |
|---|---|---|---|---|---|---|
| COMMUNITY - GENERAL | 2 Checks (069377-069378) | 0 | 0 | 0 | 2 | $ 368,714.35 |

# HARRISVILLE CSD

Warrant Report
**Fiscal Year: 2025**

**Warrant: 0085-BOCES**



**Payment Amt.**

**Selection Criteria**

Show check numbers
Show address
Don't show Non-PO Item Descriptions
Date From: 06/01/2025
Date To: 06/30/2025
Don't show check dates
Don't show voided notes
Don't show page with voided items
Sort by: Check
Printed by AMY N. FROST

# HARRISVILLE CSD

Warrant Report
Fiscal Year: 2025



**Bank Account: COMMUNITY - CAPITAL**
**Warrant: 0086-capital outlay**

| P.O. Number | Account | Description | Trans/Payment | Invoice Amt. For This Check | Payment Amt. | | Check Number |
|---|---|---|---|---|---|---|---|
| WHITTON CONSTRUCTION, LLC<br>710 CREAM OF THE VALLEY ROAD<br>GOUVERNEUR, NY 13642 | | | | | | | |
| Invoice: final payment [AP ID# 001813] | | | | 13,832.80 | | | |
| | H-CAPO25-1620-293 | General Construction | 06/23/2025 | | 13,832.80 | | |
| Check total for 001649-WHITTON CONSTRUCTION, LLC | | | | | 13,832.80 | C | 002365 |
| Total for Bank Account: CapitalComm COMMUNITY - CAPITAL | | | | | 13,832.80 | | |

# HARRISVILLE CSD

Warrant Report
Fiscal Year: 2025

Warrant: 0086-capital outlay



| P.O. Number | Account | Description | Trans/Payment | Invoice Amt. For This Check | Payment Amt. | Check Number |
|---|---|---|---|---|---|---|

| | |
|---|---|
| Total for computer generated checks | 13,832.80 |
| Total for manual checks | 0.00 |
| Total for automated payments | 0.00 |
| Total for electronic transfers (manual) | 0.00 |
| Certified warrant amount | 13,832.80 |
| Total of credits associated with cash replacement checks issued | 0.00 |
| Total for Warrant Report | 13,832.80 |

Net Disbursement by Fund - All Payments

Fund Summary
H $ 13,832.80

| Bank Account Summary | Computer Checks | Cash Replacement | Auto Paymnts | EFT's | Transactions | |
|---|---|---|---|---|---|---|
| COMMUNITY - CAPITAL | 1 Check (002365) | 0 | 0 | 0 | 1 | $ 13,832.80 |

# HARRISVILLE CSD

Warrant Report
**Fiscal Year: 2025**

**Warrant: 0086-capital outlay**



**Payment Amt.**

**Selection Criteria**

Show check numbers
Show address
Don't show Non-PO Item Descriptions
Date From: 06/01/2025
Date To: 06/30/2025
Don't show check dates
Don't show voided notes
Don't show page with voided items
Sort by: Check
Printed by AMY N. FROST

# HARRISVILLE CSD

Warrant Report
Fiscal Year: 2025

Bank Account: COMMUNITY - GENERAL
Warrant: 0087-medicare 6/20/25



| P.O. Number | Account | Description | Trans/Payment | Invoice Amt. For This Check | Payment Amt. | | Check Number |
|---|---|---|---|---|---|---|---|
| CHARLOTTE ATKINSON<br>77 GARRISON RD.<br>HARRISVILLE, NY 13648 | | | | | | | |
| Invoice: 6/25 MEDICARE REIMBURSEMENT [AP ID# 001751] | | | | 385.08 | | | |
| | A-9060-800-01-00 | Medicare Reimbursement | 06/23/2025 | | 385.08 | | |
| Check total for 000211-CHARLOTTE ATKINSON | | | | | 385.08 | C | 069379 |
| KELLY AVALLONE<br>398 GARRISON ROAD<br>HARRISVILLE, NY 13648 | | | | | | | |
| Invoice: 6/25 MEDICARE REIMBURSEMENT [AP ID# 001752] | | | | 317.88 | | | |
| | A-9060-800-01-00 | Medicare Reimbursement | 06/23/2025 | | 317.88 | | |
| Check total for 000184-KELLY AVALLONE | | | | | 317.88 | C | 069380 |
| MARIO AVALLONE<br>398 GARRISON ROAD<br>HARRISVILLE, NY 13648 | | | | | | | |
| Invoice: 6/25 MEDICARE REIMBURSEMENT [AP ID# 001753] | | | | 317.88 | | | |
| | A-9060-800-01-00 | Medicare Reimbursement | 06/23/2025 | | 317.88 | | |
| Check total for 001107-MARIO AVALLONE | | | | | 317.88 | C | 069381 |
| LEEANN BASSETTE<br>14315 DIANA DRIVE<br>HARRISVILLE, NY 13648 | | | | | | | |
| Invoice: 6/25 MEDICARE REIMBURSEMENT [AP ID# 001756] | | | | 64.26 | | | |
| | A-9060-800-01-00 | Medicare Reimbursement | 06/23/2025 | | 64.26 | | |
| Check total for 000282-LEEANN BASSETTE | | | | | 64.26 | C | 069382 |
| RICK BEAROR<br>224 ROSE ROAD<br>HARRISVILLE, NY 13648 | | | | | | | |
| Invoice: 6/25 MEDICARE REIMBURSEMENT [AP ID# 001754] | | | | 207.30 | | | |
| | A-9060-800-01-00 | Medicare Reimbursement | 06/23/2025 | | 207.30 | | |

# HARRISVILLE CSD

Warrant Report
**Fiscal Year: 2025**

**Bank Account: COMMUNITY - GENERAL**
**Warrant: 0087-medicare 6/20/25**



| P.O. Number | Account | Description | Trans/Payment | Invoice Amt. For This Check | Payment Amt. | | Check Number |
|---|---|---|---|---|---|---|---|
| Check total for E00009-RICK BEAROR | | | | | 207.30 | C | 069383 |
| KAREN BELLINGER<br>12808 SH 812<br>HARRISVILLE, NY 13648 | | | | | | | |
| Invoice: 6/25 MEDICARE REIMBURSEMENT [AP ID# 001755] | | | | 133.80 | | | |
| | A-9060-800-01-00 | Medicare Reimbursement | 06/23/2025 | | 133.80 | | |
| Check total for E00010-KAREN BELLINGER | | | | | 133.80 | C | 069384 |
| JEAN BERRY<br>860 GALLISON HILL ROAD<br>MONTPELIER, VT 05602 | | | | | | | |
| Invoice: 6/25 MEDICARE REIMBURSEMENT [AP ID# 001757] | | | | 555.00 | | | |
| | A-9060-800-01-00 | Medicare Reimbursement | 06/23/2025 | | 555.00 | | |
| Check total for 000884-JEAN BERRY | | | | | 555.00 | C | 069385 |
| THOMAS BEST<br>PO BOX 276<br>HARRISVILLE, NY 13648 | | | | | | | |
| Invoice: 6/25 MEDICARE REIMBURSEMENT [AP ID# 001758] | | | | 317.88 | | | |
| | A-9060-800-01-00 | Medicare Reimbursement | 06/23/2025 | | 317.88 | | |
| Check total for 001425-THOMAS BEST | | | | | 317.88 | C | 069386 |
| RICK CHARTRAND<br>P.O. BOX 419<br>HARRISVILLE, NY 13648 | | | | | | | |
| Invoice: 6/25 MEDICARE REIMBURSEMENT [AP ID# 001759] | | | | 284.28 | | | |
| | A-9060-800-01-00 | Medicare Reimbursement | 06/23/2025 | | 284.28 | | |
| Check total for 000089-RICK CHARTRAND | | | | | 284.28 | C | 069387 |

# HARRISVILLE CSD

Warrant Report
Fiscal Year: 2025

Bank Account: COMMUNITY - GENERAL
Warrant: 0087-medicare 6/20/25



| P.O. Number | Account | Description | Trans/Payment | Invoice Amt. For This Check | Payment Amt. | | Check Number |
|---|---|---|---|---|---|---|---|
| MARLENE CLARK<br>7 EDWARDS RD.<br>HARRISVILLE, NY 13648 | | | | | | | |
| Invoice: 6/25 MEDICARE REIMBURSEMENT [AP ID# 001760] | | | | 555.00 | | | |
| | A-9060-800-01-00 | Medicare Reimbursement | 06/23/2025 | | 555.00 | | |
| Check total for 017290-MARLENE CLARK | | | | | 555.00 | C | 069388 |
| LEROY DAVIS<br>PO BOX 149<br>14328 MAPLE STREET<br>HARRISVILLE, NY 13648 | | | | | | | |
| Invoice: 6/25 MEDICARE REIMBURSEMENT [AP ID# 001761] | | | | 427.80 | | | |
| | A-9060-800-01-00 | Medicare Reimbursement | 06/23/2025 | | 427.80 | | |
| Check total for 001319-LEROY DAVIS | | | | | 427.80 | C | 069389 |
| PENNY L. DECOTEAU<br>15721 COUNTY ROUTE 59<br>DEXTER, NY 13634 | | | | | | | |
| Invoice: 6/25 MEDICARE REIMBURSEMENT [AP ID# 001762] | | | | 406.80 | | | |
| | A-9060-800-01-00 | Medicare Reimbursement | 06/23/2025 | | 406.80 | | |
| Check total for 000232-PENNY L. DECOTEAU | | | | | 406.80 | C | 069390 |
| DIXIE D. DICKINSON<br>8259 HIGH STREET<br>HARRISVILLE, NY 13648 | | | | | | | |
| Invoice: 6/25 MEDICARE REIMBURSEMENT [AP ID# 001763] | | | | 374.64 | | | |
| | A-9060-800-01-00 | Medicare Reimbursement | 06/23/2025 | | 374.64 | | |
| Check total for E00028-DIXIE D. DICKINSON | | | | | 374.64 | C | 069391 |
| MARY DUGGAN<br>113 WILKSHIRE DRIVE<br>GREENVILLE, NC 27858 | | | | | | | |
| Invoice: 6/25 MEDICARE REIMBURSEMENT [AP ID# 001764] | | | | 173.70 | | | |

# HARRISVILLE CSD

Warrant Report
Fiscal Year: 2025

Bank Account: COMMUNITY - GENERAL
Warrant: 0087-medicare 6/20/25



| P.O. Number | Account | Description | Trans/Payment | Invoice Amt. For This Check | Payment Amt. | | Check Number |
|---|---|---|---|---|---|---|---|
| | A-9060-800-01-00 | Medicare Reimbursement | 06/23/2025 | | 173.70 | | |
| Check total for 021327-MARY DUGGAN | | | | | 173.70 | C | 069392 |
| CYNTHIA J. DURKISH<br>13489 FRENCH SETTLEMENT ROAD<br>HARRISVILLE, NY 13648 | | | | | | | |
| Invoice: 6/25 MEDICARE REIMBURSEMENT [AP ID# 001765] | | | | 330.00 | | | |
| | A-9060-800-01-00 | Medicare Reimbursement | 06/23/2025 | | 330.00 | | |
| Check total for E00032-CYNTHIA J. DURKISH | | | | | 330.00 | C | 069393 |
| JAMES DURKISH<br>13489 FRENCH SETTLEMENT ROAD<br>HARRISVILLE, NY 13648 | | | | | | | |
| Invoice: 6/25 MEDICARE REIMBURSEMENT [AP ID# 001766] | | | | 327.00 | | | |
| | A-9060-800-01-00 | Medicare Reimbursement | 06/23/2025 | | 327.00 | | |
| Check total for 001236-JAMES DURKISH | | | | | 327.00 | C | 069394 |
| SHIRLEY DUSHARM<br>7758 SR 3<br>HARRISVILLE, NY 13648 | | | | | | | |
| Invoice: 6/25 MEDICARE REIMBURSEMENT [AP ID# 001767] | | | | 179.70 | | | |
| | A-9060-800-01-00 | Medicare Reimbursement | 06/23/2025 | | 179.70 | | |
| Check total for 021350-SHIRLEY DUSHARM | | | | | 179.70 | C | 069395 |
| REITA K. ELLIS<br>392 STONE ROAD<br>HARRISVILLE, NY 13648 | | | | | | | |
| Invoice: 6/25 MEDICARE REIMBURSEMENT [AP ID# 001768] | | | | 184.80 | | | |
| | A-9060-800-01-00 | Medicare Reimbursement | 06/23/2025 | | 184.80 | | |
| Check total for E00035-REITA K. ELLIS | | | | | 184.80 | C | 069396 |

# HARRISVILLE CSD

Warrant Report
Fiscal Year: 2025

Bank Account: COMMUNITY - GENERAL
Warrant: 0087-medicare 6/20/25



| P.O. Number | Account | Description | Trans/Payment | Invoice Amt. For This Check | Payment Amt. | | Check Number |
|---|---|---|---|---|---|---|---|
| YVONNE EVANS<br>933 Leray Street<br>Lot 43<br>Watertown, NY 13601 | | | | | | | |
| Invoice: 6/25 MEDICARE REIMBURSEMENT [AP ID# 001769] | | | | 524.10 | | | |
| | A-9060-800-01-00 | Medicare Reimbursement | 06/23/2025 | | 524.10 | | |
| Check total for 000434-YVONNE EVANS | | | | | 524.10 | C | 069397 |
| KATHY FELIO<br>P.O. BOX 173<br>HARRISVILLE, NY 13648 | | | | | | | |
| Invoice: 6/25 MEDICARE REIMBURSEMENT [AP ID# 001770] | | | | 373.80 | | | |
| | A-9060-800-01-00 | Medicare Reimbursement | 06/23/2025 | | 373.80 | | |
| Check total for 000280-KATHY FELIO | | | | | 373.80 | C | 069398 |
| CATHERINE A. FINCH<br>PO BOX 173<br>14092 SOUTH CREEK ROAD<br>HARRISVILLE, NY 13648 | | | | | | | |
| Invoice: 6/25 MEDICARE REIMBURSEMENT [AP ID# 001771] | | | | 373.68 | | | |
| | A-9060-800-01-00 | Medicare Reimbursement | 06/23/2025 | | 373.68 | | |
| Check total for 000384-CATHERINE A. FINCH | | | | | 373.68 | C | 069399 |
| FRAZEE, BEVERLEY<br>14307 DIANA DRIVE<br>HARRISVILLE, NY 13648 | | | | | | | |
| Invoice: 6/25 MEDICARE REIMBURSEMENT [AP ID# 001772] | | | | 317.88 | | | |
| | A-9060-800-01-00 | Medicare Reimbursement | 06/23/2025 | | 317.88 | | |
| Check total for 002094-FRAZEE, BEVERLEY | | | | | 317.88 | C | 069400 |
| REBECCA A. GIBSON<br>PO BOX 101<br>HARRISVILLE, NY 13648 | | | | | | | |

# HARRISVILLE CSD

Warrant Report
Fiscal Year: 2025

Bank Account: COMMUNITY - GENERAL
Warrant: 0087-medicare 6/20/25



| P.O. Number | Account | Description | Trans/Payment | Invoice Amt. For This Check | Payment Amt. | | Check Number |
|---|---|---|---|---|---|---|---|
| Invoice: 6/25 MEDICARE REIMBURSEMENT [AP ID# 001773] | | | | 339.36 | | | |
| | A-9060-800-01-00 | Medicare Reimbursement | 06/23/2025 | | 339.36 | | |
| Check total for 000222-REBECCA A. GIBSON | | | | | 339.36 | C | 069401 |

BRENDA GRINDAL
P.O. BOX 4
HARRISVILLE, NY 13648

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| Invoice: 6/25 MEDICARE REIMBURSEMENT [AP ID# 001774] | | | | 261.90 | | | |
| | A-9060-800-01-00 | Medicare Reimbursement | 06/23/2025 | | 261.90 | | |
| Check total for 000283-BRENDA GRINDAL | | | | | 261.90 | C | 069402 |

REBECCA HEAGLE
25 STONE STREET
CARTHAGE, NY 13619

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| Invoice: 6/25 MEDICARE REIMBURSEMENT [AP ID# 001775] | | | | 689.16 | | | |
| | A-9060-800-01-00 | Medicare Reimbursement | 06/23/2025 | | 689.16 | | |
| Check total for 001580-REBECCA HEAGLE | | | | | 689.16 | C | 069403 |

RICHARD KAHN
P.O. BOX 421
HARRISVILLE, NY 13648

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| Invoice: 6/25 MEDICARE REIMBURSEMENT [AP ID# 001776] | | | | 330.00 | | | |
| | A-9060-800-01-00 | Medicare Reimbursement | 06/23/2025 | | 330.00 | | |
| Check total for 000612-RICHARD KAHN | | | | | 330.00 | C | 069404 |

LINDA KELLERHALS
PO BOX 127
14311 MAPLE ST
HARRISVILLE, NY 13648

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| Invoice: 6/25 MEDICARE REIMBURSEMENT [AP ID# 001777] | | | | 494.88 | | | |
| | A-9060-800-01-00 | Medicare Reimbursement | 06/23/2025 | | 494.88 | | |
| Check total for 001198-LINDA KELLERHALS | | | | | 494.88 | C | 069405 |

# HARRISVILLE CSD

Warrant Report
**Fiscal Year: 2025**

**Bank Account: COMMUNITY - GENERAL**
**Warrant: 0087-medicare 6/20/25**



| P.O. Number | Account | Description | Trans/Payment | Invoice Amt. For This Check | Payment Amt. | | Check Number |
|---|---|---|---|---|---|---|---|
| WILLIAM KELLERHALS<br>PO BOX 127<br>14311 MAPLE ST<br>HARRISVILLE, NY 13648 | | | | | | | |
| Invoice: 6/25 MEDICARE REIMBURSEMENT [AP ID# 001778] | | | | 555.00 | | | |
| | A-9060-800-01-00 | Medicare Reimbursement | 06/23/2025 | | 555.00 | | |
| Check total for 000946-WILLIAM KELLERHALS | | | | | 555.00 | C | 069406 |
| ROBERT KRATZAT<br>35 Bridge Street<br>Carthage, NY 13619 | | | | | | | |
| Invoice: 6/25 MEDICARE REIMBURSEMENT [AP ID# 001780] | | | | 314.34 | | | |
| | A-9060-800-01-00 | Medicare Reimbursement | 06/23/2025 | | 314.34 | | |
| Check total for 000220-ROBERT KRATZAT | | | | | 314.34 | C | 069407 |
| LELA LADUC<br>PO BOX 392<br>HARRISVILLE, NY 13648 | | | | | | | |
| Invoice: 6/25 MEDICARE REIMBURSEMENT [AP ID# 001781] | | | | 267.96 | | | |
| | A-9060-800-01-00 | Medicare Reimbursement | 06/23/2025 | | 267.96 | | |
| Check total for 000695-LELA LADUC | | | | | 267.96 | C | 069408 |
| JUANITA LANCOR<br>133 EDWARDS ROAD<br>HARRISVILLE, NY 13684 | | | | | | | |
| Invoice: 6/25 MEDICARE REIMBURSEMENT [AP ID# 001782] | | | | 457.92 | | | |
| | A-9060-800-01-00 | Medicare Reimbursement | 06/23/2025 | | 457.92 | | |
| Check total for 001200-JUANITA LANCOR | | | | | 457.92 | C | 069409 |

# HARRISVILLE CSD

Warrant Report
**Fiscal Year: 2025**

**Bank Account: COMMUNITY - GENERAL**
**Warrant: 0087-medicare 6/20/25**



| P.O. Number | Account | Description | Trans/Payment | Invoice Amt. For This Check | Payment Amt. | | Check Number |
|---|---|---|---|---|---|---|---|
| DARLENE D. LAPLATNEY<br>5 ATKINSON ROAD<br>HARRISVILLE, NY 13648 | | | | | | | |
| Invoice: 6/25 MEDICARE REIMBURSEMENT [AP ID# 001783] | | | | 42.90 | | | |
| | A-9060-800-01-00 | Medicare Reimbursement | 06/23/2025 | | 42.90 | | |
| Check total for E00058-DARLENE D. LAPLATNEY | | | | | 42.90 | C | 069410 |
| MARIE LAVANCHA<br>14170 CHURCH STREET<br>APT 1D<br>HARRISVILLE, NY 13648 | | | | | | | |
| Invoice: 6/25 MEDICARE REIMBURSEMENT [AP ID# 001784] | | | | 327.00 | | | |
| | A-9060-800-01-00 | Medicare Reimbursement | 06/23/2025 | | 327.00 | | |
| Check total for 000054-MARIE LAVANCHA | | | | | 327.00 | C | 069411 |
| ROSEMARY LAVANCHA<br>173 COUNTY ROUTE 23<br>HARRISVILLE, NY 13648 | | | | | | | |
| Invoice: 6/25 MEDICARE REIMBURSEMENT [AP ID# 001785] | | | | 368.52 | | | |
| | A-9060-800-01-00 | Medicare Reimbursement | 06/23/2025 | | 368.52 | | |
| Check total for 000533-ROSEMARY LAVANCHA | | | | | 368.52 | C | 069412 |
| BARBARA MANCHESTER<br>P.O. BOX 88<br>HARRISVILLE, NY 13648 | | | | | | | |
| Invoice: 6/25 MEDICARE REIMBURSEMENT [AP ID# 001786] | | | | 524.10 | | | |
| | A-9060-800-01-00 | Medicare Reimbursement | 06/23/2025 | | 524.10 | | |
| Check total for 000387-BARBARA MANCHESTER | | | | | 524.10 | C | 069413 |
| BILLIE MANCHESTER<br>20 EDWARDS RD.<br>HARRISVILLE, NY 13648 | | | | | | | |
| Invoice: 6/25 MEDICARE REIMBURSEMENT [AP ID# 001787] | | | | 136.86 | | | |

**Bank Account: COMMUNITY - GENERAL**
**Warrant: 0087-medicare 6/20/25**

| P.O. Number | Account | Description | Trans/Payment | Invoice Amt. For This Check | Payment Amt. | | Check Number |
|---|---|---|---|---|---|---|---|
| | A-9060-800-01-00 | Medicare Reimbursement | 06/23/2025 | | 136.86 | | |
| Check total for 000086-BILLIE MANCHESTER | | | | | 136.86 | C | 069414 |
| PENNY MARCHIONE<br>439 SH 812<br>HARRISVILLE, NY 13648 | | | | | | | |
| Invoice: 6/25 MEDICARE REIMBURSEMENT [AP ID# 001788] | | | | 228.66 | | | |
| | A-9060-800-01-00 | Medicare Reimbursement | 06/23/2025 | | 228.66 | | |
| Check total for 000233-PENNY MARCHIONE | | | | | 228.66 | C | 069415 |
| JOAN MCMILLAN<br>8147 CENTERPORT RD.<br>PORT BYRON, NY 13140 | | | | | | | |
| Invoice: 6/25 MEDICARE REIMBURSEMENT [AP ID# 001789] | | | | 747.60 | | | |
| | A-9060-800-01-00 | Medicare Reimbursement | 06/23/2025 | | 747.60 | | |
| Check total for 046289-JOAN MCMILLAN | | | | | 747.60 | C | 069416 |
| VICKIE D. MEALUS<br>8532 N SHORE ROAD<br>HARRISVILLE, NY 13648-0380 | | | | | | | |
| Invoice: 6/25 MEDICARE REIMBURSEMENT [AP ID# 001790] | | | | 568.56 | | | |
| | A-9060-800-01-00 | Medicare Reimbursement | 06/23/2025 | | 568.56 | | |
| Check total for 000354-VICKIE D. MEALUS | | | | | 568.56 | C | 069417 |
| JOAN PAROW<br>10970 INDIES DRIVE NORTH<br>JACKSONVILLE, FL 32246 | | | | | | | |
| Invoice: 6/25 MEDICARE REIMBURSEMENT [AP ID# 001791] | | | | 333.00 | | | |
| | A-9060-800-01-00 | Medicare Reimbursement | 06/23/2025 | | 333.00 | | |
| Check total for 000271-JOAN PAROW | | | | | 333.00 | C | 069418 |

# HARRISVILLE CSD

Warrant Report
**Fiscal Year: 2025**

**Bank Account: COMMUNITY - GENERAL**
**Warrant: 0087-medicare 6/20/25**



| P.O. Number | Account | Description | Trans/Payment | Invoice Amt. For This Check | Payment Amt. | | Check Number |
|---|---|---|---|---|---|---|---|
| CAROL L. PHILLIPS<br>PO BOX 69<br>14138 SO CREEK ROAD<br>HARRISVILLE, NY 13648 | | | | | | | |
| Invoice: 6/25 MEDICARE REIMBURSEMENT [AP ID# 001792] | | | | 388.20 | | | |
| | A-9060-800-01-00 | Medicare Reimbursement | 06/23/2025 | | 388.20 | | |
| Check total for E00075-CAROL L. PHILLIPS | | | | | 388.20 | C | 069419 |
| CHERIE PIGNONE-LANDL<br>6108 FOX PATH<br>LOWVILLE, NY 13367 | | | | | | | |
| Invoice: 6/25 MEDICARE REIMBURSEMENT [AP ID# 001793] | | | | 362.10 | | | |
| | A-9060-800-01-00 | Medicare Reimbursement | 06/23/2025 | | 362.10 | | |
| Check total for 000846-CHERIE PIGNONE-LANDL | | | | | 362.10 | C | 069420 |
| JOHN PRATT<br>776 COUNTY ROUTE 24<br>GOUVERNEUR, NY 13642 | | | | | | | |
| Invoice: 6/25 MEDICARE REIMBURSEMENT [AP ID# 001794] | | | | 269.82 | | | |
| | A-9060-800-01-00 | Medicare Reimbursement | 06/23/2025 | | 269.82 | | |
| Check total for 001651-JOHN PRATT | | | | | 269.82 | C | 069421 |
| PATRICIA A. ROSE<br>869 STATE HIGHWAY 812<br>HARRISVILLE, NY 13648 | | | | | | | |
| Invoice: 6/25 MEDICARE REIMBURSEMENT [AP ID# 001795] | | | | 494.88 | | | |
| | A-9060-800-01-00 | Medicare Reimbursement | 06/23/2025 | | 494.88 | | |
| Check total for 000274-PATRICIA A. ROSE | | | | | 494.88 | C | 069422 |
| JENNIFER SANDEFER<br>223 FULLERVILLE RD.<br>HARRISVILLE, NY 13648 | | | | | | | |
| Invoice: 6/25 MEDICARE REIMBURSEMENT [AP ID# 001796] | | | | 566.58 | | | |

# HARRISVILLE CSD

Warrant Report
**Fiscal Year: 2025**

**Bank Account: COMMUNITY - GENERAL**
**Warrant: 0087-medicare 6/20/25**



| P.O. Number | Account | Description | Trans/Payment | Invoice Amt. For This Check | Payment Amt. | | Check Number |
|---|---|---|---|---|---|---|---|
| | A-9060-800-01-00 | Medicare Reimbursement | 06/23/2025 | | 566.58 | | |
| **Check total for 000322-JENNIFER SANDEFER** | | | | | **566.58** | **C** | **069423** |

**JANNET SEELMAN**
**5466 CAMPBELL STREET**
**APT 1**
**LOWVILLE, NY 13367**

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| Invoice: 6/25 MEDICARE REIMBURSEMENT [AP ID# 001797] | | | | 404.70 | | | |
| | A-9060-800-01-00 | Medicare Reimbursement | 06/23/2025 | | 404.70 | | |
| **Check total for 000345-JANNET SEELMAN** | | | | | **404.70** | **C** | **069424** |

**BERNARD SLATE**
**41743 NYS 180**
**CLAYTON, NY 13624**

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| Invoice: 6/25 MEDICARE REIMBURSEMENT [AP ID# 001798] | | | | 314.70 | | | |
| | A-9060-800-01-00 | Medicare Reimbursement | 06/23/2025 | | 314.70 | | |
| **Check total for 000613-BERNARD SLATE** | | | | | **314.70** | **C** | **069425** |

**LISA SMITH**
**PO BOX 105**
**14305 CHURCH STREET**
**HARRISVILLE, NY 13648**

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| Invoice: 6/25 MEDICARE REIMBURSEMENT [AP ID# 001799] | | | | 266.64 | | | |
| | A-9060-800-01-00 | Medicare Reimbursement | 06/23/2025 | | 266.64 | | |
| **Check total for 001652-LISA SMITH** | | | | | **266.64** | **C** | **069426** |

**KEATHA SWANSON**
**326 STATE HIGHWAY 3**
**HARRISVILLE, NY 13648**

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| Invoice: 6/25 MEDICARE REIMBURSEMENT [AP ID# 001800] | | | | 146.16 | | | |
| | A-9060-800-01-00 | Medicare Reimbursement | 06/23/2025 | | 146.16 | | |
| **Check total for 000230-KEATHA SWANSON** | | | | | **146.16** | **C** | **069427** |

# HARRISVILLE CSD

Warrant Report
**Fiscal Year: 2025**

**Bank Account: COMMUNITY - GENERAL**
**Warrant: 0087-medicare 6/20/25**



| P.O. Number | Account | Description | Trans/Payment | Invoice Amt. For This Check | Payment Amt. | | Check Number |
|---|---|---|---|---|---|---|---|
| MARCIA SWEET<br>1048 N. ALAMO RD<br>LOT 96<br>ALAMO, TX 78516 | | | | | | | |
| Invoice: 6/25 MEDICARE REIMBURSEMENT [AP ID# 001801] | | | | 353.40 | | | |
| | A-9060-800-01-00 | Medicare Reimbursement | 06/23/2025 | | 353.40 | | |
| Check total for 000269-MARCIA SWEET | | | | | 353.40 | C | 069428 |
| RICHARD TARR<br>14623 HERMITAGE ROAD<br>HARRISVILLE, NY 13648 | | | | | | | |
| Invoice: 6/25 MEDICARE REIMBURSEMENT [AP ID# 001802] | | | | 503.40 | | | |
| | A-9060-800-01-00 | Medicare Reimbursement | 06/23/2025 | | 503.40 | | |
| Check total for 000270-RICHARD TARR | | | | | 503.40 | C | 069429 |
| LANCE TWYMAN<br>1995 NY CARY PARKWAY<br>APT #337<br>MORRISVILLE, NC 27560 | | | | | | | |
| Invoice: 6/25 MEDICARE REIMBURSEMENT [AP ID# 001803] | | | | 555.00 | | | |
| | A-9060-800-01-00 | Medicare Reimbursement | 06/23/2025 | | 555.00 | | |
| Check total for 069200-LANCE TWYMAN | | | | | 555.00 | C | 069430 |
| HELEN VALENTINE<br>2350 Haitian Drive<br>Clearwater, FL 33763 | | | | | | | |
| Invoice: 6/25 MEDICARE REIMBURSEMENT [AP ID# 001804] | | | | 555.00 | | | |
| | A-9060-800-01-00 | Medicare Reimbursement | 06/23/2025 | | 555.00 | | |
| Check total for 074993-HELEN VALENTINE | | | | | 555.00 | C | 069431 |

# HARRISVILLE CSD

Warrant Report
Fiscal Year: 2025

Bank Account: COMMUNITY - GENERAL
Warrant: 0087-medicare 6/20/25



| P.O. Number | Account | Description | Trans/Payment | Invoice Amt. For This Check | Payment Amt. | | Check Number |
|---|---|---|---|---|---|---|---|
| THERESA VALLENCOUR<br>1571 FITZGERALD STREET NW<br>CONCORD, NC 28027 | | | | | | | |
| Invoice: 6/25 MEDICARE REIMBURSEMENT [AP ID# 001805] | | | | 314.34 | | | |
| | A-9060-800-01-00 | Medicare Reimbursement | 06/23/2025 | | 314.34 | | |
| Check total for 000285-THERESA VALLENCOUR | | | | | 314.34 | C | 069432 |
| PATRICIA VISCONTI<br>34 E. BARNEY ST.<br>GOUVERNEUR, NY 13642 | | | | | | | |
| Invoice: 6/25 MEDICARE REIMBURSEMENT [AP ID# 001806] | | | | 404.70 | | | |
| | A-9060-800-01-00 | Medicare Reimbursement | 06/23/2025 | | 404.70 | | |
| Check total for 075017-PATRICIA VISCONTI | | | | | 404.70 | C | 069433 |
| ANNA WEAVER<br>7709 SR 3<br>HARRISVILLE, NY 13648 | | | | | | | |
| Invoice: 6/25 MEDICARE REIMBURSEMENT [AP ID# 001807] | | | | 510.30 | | | |
| | A-9060-800-01-00 | Medicare Reimbursement | 06/23/2025 | | 510.30 | | |
| Check total for 076200-ANNA WEAVER | | | | | 510.30 | C | 069434 |
| CATHERINE WHITFORD<br>70 CR 23A<br>HARRISVILLE, NY 13648 | | | | | | | |
| Invoice: 6/25 MEDICARE REIMBURSEMENT [AP ID# 001808] | | | | 427.80 | | | |
| | A-9060-800-01-00 | Medicare Reimbursement | 06/23/2025 | | 427.80 | | |
| Check total for 000664-CATHERINE WHITFORD | | | | | 427.80 | C | 069435 |
| KAREN WILTSE<br>4346 LEGION ROAD<br>HOPE MILLS, NC 28348 | | | | | | | |
| Invoice: 6/25 MEDICARE REIMBURSEMENT [AP ID# 001809] | | | | 347.22 | | | |
| | A-9060-800-01-00 | Medicare Reimbursement | 06/23/2025 | | 347.22 | | |

# HARRISVILLE CSD

Warrant Report
Fiscal Year: 2025

Bank Account: COMMUNITY - GENERAL
Warrant: 0087-medicare 6/20/25



| P.O. Number | Account | Description | Trans/Payment | Invoice Amt. For This Check | Payment Amt. | | Check Number |
|---|---|---|---|---|---|---|---|
| Check total for 001736-KAREN WILTSE | | | | | 347.22 | C | 069436 |
| JACQUELINE WOOD<br>7743 SR 3<br>HARRISVILLE, NY 13648 | | | | | | | |
| Invoice: 6/25 MEDICARE REIMBURSEMENT [AP ID# 001810] | | | | 555.00 | | | |
| | A-9060-800-01-00 | Medicare Reimbursement | 06/23/2025 | | 555.00 | | |
| Check total for 100011-JACQUELINE WOOD | | | | | 555.00 | C | 069437 |
| LYNDA WOOD<br>286 SOUTH 3RD STREET<br>ST. LAKE MARY, FL 32746 | | | | | | | |
| Invoice: 6/25 MEDICARE REIMBURSEMENT [AP ID# 001811] | | | | 510.30 | | | |
| | A-9060-800-01-00 | Medicare Reimbursement | 06/23/2025 | | 510.30 | | |
| Check total for 077651-LYNDA WOOD | | | | | 510.30 | C | 069438 |
| KELLEY ZIMMERMAN<br>P.O. BOX 122<br>ELLISBURG, NY 13636 | | | | | | | |
| Invoice: 6/25 MEDICARE REIMBURSEMENT [AP ID# 001812] | | | | 314.34 | | | |
| | A-9060-800-01-00 | Medicare Reimbursement | 06/23/2025 | | 314.34 | | |
| Check total for 000800-KELLEY ZIMMERMAN | | | | | 314.34 | C | 069439 |
| Total for Bank Account: GeneralComm COMMUNITY - GENERAL | | | | | 22,684.56 | | |

# HARRISVILLE CSD

Warrant Report
Fiscal Year: 2025

Warrant: 0087-medicare 6/20/25



| P.O. Number | Account | Description | Trans/Payment | Invoice Amt. For This Check | Payment Amt. | Check Number |
|---|---|---|---|---|---|---|

| | |
|---|---|
| Total for computer generated checks | 22,684.56 |
| Total for manual checks | 0.00 |
| Total for automated payments | 0.00 |
| Total for electronic transfers (manual) | 0.00 |
| Certified warrant amount | 22,684.56 |
| Total of credits associated with cash replacement checks issued | 0.00 |
| Total for Warrant Report | 22,684.56 |

Net Disbursement by Fund - All Payments

Fund Summary
A $ 22,684.56

| Bank Account Summary | Computer Checks | Cash Replacement | Auto Paymnts | EFT's | Transactions | |
|---|---|---|---|---|---|---|
| COMMUNITY - GENERAL | 61 Checks (069379-069439) | 0 | 0 | 0 | 61 | $ 22,684.56 |

# HARRISVILLE CSD

Warrant Report
**Fiscal Year: 2025**

**Warrant: 0087-medicare 6/20/25**



**Payment Amt.**

**Selection Criteria**

Show check numbers
Show address
Don't show Non-PO Item Descriptions
Date From: 06/01/2025
Date To: 06/30/2025
Don't show check dates
Don't show voided notes
Don't show page with voided items
Sort by: Check
Printed by AMY N. FROST

# HARRISVILLE CSD

Warrant Report
**Fiscal Year: 2025**

**Bank Account: COMMUNITY - CAFETERIA**
**Warrant: 0089-A/P 6/30/25**



| P.O. Number | Account | Description | Trans/Payment | Invoice Amt. For This Check | Payment Amt. | | Check Number |
|---|---|---|---|---|---|---|---|
| **BIMBO BAKERIES USA**<br>**P.O. BOX 412678**<br>**BOSTON, MA 02241-2678** | | | | | | | |
| Invoice: 66541290009088 Acct # 99-50265-9982-99[AP ID# 001833] | | | | 95.22 | | | |
| 25-00292 | C-2860-455-00 | Food Purchases | 06/30/2025 | | 95.22 | | |
| **Check total for 014700-BIMBO BAKERIES USA** | | | | | **95.22** | **C** | **004908** |
| **CHUCK'S MARKET**<br>**84 ATKINSON ROAD**<br>**HARRISVILLE,, NY 13648** | | | | | | | |
| Invoice: 6/10/25 [AP ID# 001841] | | | | 30.47 | | | |
| | C-2860-455-00 | Food Purchases | 06/30/2025 | | 30.47 | | |
| Invoice: 6/7/25 [AP ID# 001841] | | | | 34.45 | | | |
| | C-2860-455-00 | Food Purchases | 06/30/2025 | | 34.45 | | |
| **Check total for 029988-CHUCK'S MARKET** | | | | | **64.92** | **C** | **004909** |
| **GLAZIER PACKING CO., INC.**<br>**3140 SR 11**<br>**PO BOX 58**<br>**MALONE, NY 12953** | | | | | | | |
| Invoice: 1137255 Acct # 0511[AP ID# 001835] | | | | 560.30 | | | |
| 25-00257 | C-2860-455-00 | Food Purchases | 06/30/2025 | | 560.30 | | |
| Invoice: 1137923 Acct # 0511[AP ID# 001835] | | | | 560.30 | | | |
| 25-00257 | C-2860-455-00 | Food Purchases | 06/30/2025 | | 560.30 | | |
| **Check total for 000574-GLAZIER PACKING CO., INC.** | | | | | **1,120.60** | **C** | **004910** |
| **HERSHEY CREAMERY CO**<br>**1370 UPPER LENOX AVE.**<br>**ONEIDA, NY 13421-2640** | | | | | | | |
| Invoice: INVE0021850068 Acct # HARPIRHAR0540[AP ID# 001834] | | | | 172.80 | | | |
| 25-00258 | C-2860-455-00 | Food Purchases | 06/30/2025 | | 172.80 | | |
| **Check total for 001120-HERSHEY CREAMERY CO** | | | | | **172.80** | **C** | **004911** |

# HARRISVILLE CSD

Warrant Report
**Fiscal Year: 2025**

**Bank Account: COMMUNITY - CAFETERIA**
**Warrant: 0089-A/P 6/30/25**



| P.O. Number | Account | Description | Trans/Payment | Invoice Amt. For This Check | Payment Amt. | | Check Number |
|---|---|---|---|---|---|---|---|
| **KEMPNEY AIR** | | | | | | | |
| **10765 LIMBURG FORKS RD** | | | | | | | |
| **CARTHAGE, NY 13619** | | | | | | | |
| Invoice: 021205 [AP ID# 001840] | | | | 241.00 | | | |
| | C-2860-420-00 | Equipment Repairs | 06/30/2025 | | 241.00 | | |
| Invoice: 021206 [AP ID# 001840] | | | | 150.00 | | | |
| | C-2860-420-00 | Equipment Repairs | 06/30/2025 | | 150.00 | | |
| **Check total for 001417-KEMPNEY AIR** | | | | | **391.00** | **C** | **004912** |
| **SAVE A LOT** | | | | | | | |
| **210 W MAIN ST** | | | | | | | |
| **GOUVERNEUR, NY 13642** | | | | | | | |
| Invoice: 6/11/25 SUPPLIES[AP ID# 001836] | | | | 20.45 | | | |
| 25-00325 | C-2860-455-00 | Food Purchases | 06/30/2025 | | 20.45 | | |
| Invoice: 6/19/25 SUPPLIES[AP ID# 001836] | | | | 35.21 | | | |
| 25-00325 | C-2860-455-00 | Food Purchases | 06/30/2025 | | 35.21 | | |
| Invoice: 6/22/25 SUPPLIES[AP ID# 001836] | | | | 12.00 | | | |
| 25-00325 | C-2860-455-00 | Food Purchases | 06/30/2025 | | 12.00 | | |
| Invoice: 6/5/25 SUPPLIES[AP ID# 001836] | | | | 13.96 | | | |
| 25-00325 | C-2860-455-00 | Food Purchases | 06/30/2025 | | 13.96 | | |
| Invoice: 6/6/25 SUPPLIES[AP ID# 001836] | | | | 18.21 | | | |
| 25-00325 | C-2860-455-00 | Food Purchases | 06/30/2025 | | 18.21 | | |
| **Check total for 001123-SAVE A LOT** | | | | | **99.83** | **C** | **004913** |
| **US Foods Inc** | | | | | | | |
| **PO BOX 642554** | | | | | | | |
| **Pittsburgh, PA 15264-2554** | | | | | | | |
| Invoice: 1603813 [AP ID# 001832] | | | | 1,644.29 | | | |
| | C-2860-455-00 | Food Purchases | 06/30/2025 | | 1,644.29 | | |
| Invoice: 1603814 [AP ID# 001832] | | | | 207.58 | | | |

# HARRISVILLE CSD

Warrant Report
**Fiscal Year: 2025**

**Bank Account: COMMUNITY - CAFETERIA**
**Warrant: 0089-A/P 6/30/25**



| P.O. Number | Account | Description | Trans/Payment | Invoice Amt. For This Check | Payment Amt. | | Check Number |
|---|---|---|---|---|---|---|---|
| | C-2860-455-00 | Food Purchases | 06/30/2025 | | 207.58 | | |
| Invoice: 1837044 [AP ID# 001832] | | | | 2,604.65 | | | |
| | C-2860-455-00 | Food Purchases | 06/30/2025 | | 2,604.65 | | |
| Invoice: 1837045 [AP ID# 001832] | | | | 121.47 | | | |
| | C-2860-455-00 | Food Purchases | 06/30/2025 | | 121.47 | | |
| Invoice: 2104185 [AP ID# 001832] | | | | 404.05 | | | |
| | C-2860-455-00 | Food Purchases | 06/30/2025 | | 404.05 | | |
| **Check total for 002096-US Foods Inc** | | | | | **4,982.04** | **C** | **004914** |

**Total for Bank Account: CafeComm COMMUNITY - CAFETERIA** **6,926.41**

# HARRISVILLE CSD

Warrant Report
Fiscal Year: 2025

Bank Account: COMMUNITY - GENERAL
Warrant: 0089-A/P 6/30/25



| P.O. Number | Account | Description | Trans/Payment | Invoice Amt. For This Check | Payment Amt. | | Check Number |
|---|---|---|---|---|---|---|---|
| AMAZON CAPITAL SERVICES<br>PO BOX 035184<br>SEATTLE, WA 98124-5184 | | | | | | | |
| Invoice: INF9-VVMN-QTG6 Acct # A3L783R2QLS7XP[AP ID# 001842] | | | | 29.92 | | | |
| | A-2110-450-58-00 | TEACHING SUPPLIES - ELEM | 06/30/2025 | | 29.92 | | |
| Invoice: INVOICE 164J-4KCJ-J-H3JV Acct # A3L783R2QLS7XP[AP ID# 001843] | | | | 157.31 | | | |
| | A-1620-450-49-00 | OPERATIONS - CLEANING SUP | 06/30/2025 | | 157.31 | | |
| Invoice: 1VMF-YRCT-J9JM Acct # A3L783R2QLS7XP[AP ID# 001853] | | | | 58.08 | | | |
| 25-00334 | A-2110-450-59-00 | TEACHING SUPPLIES - HS | 06/30/2025 | | 58.08 | | |
| Check total for 001057-AMAZON CAPITAL SERVICES | | | | | 245.31 | C | 069440 |
| BONAPARTE PHARMACY<br>PO BOX 218<br>8210 MAIN ST<br>HARRISVILLE, NY 13648 | | | | | | | |
| Invoice: 90881 06/16/25[AP ID# 001830] | | | | 14.55 | | | |
| 25-00083 | A-2815-450-00-00 | HEALTH SERVICES NURSE | 06/30/2025 | | 14.55 | | |
| Check total for 001156-BONAPARTE PHARMACY | | | | | 14.55 | C | 069441 |
| BRICK & MORTAR MUSIC<br>15 MARKET STREET<br>POTSDAM, NY 13676 | | | | | | | |
| Invoice: M014998 REPAIRS[AP ID# 001829] | | | | 565.00 | | | |
| 25-00240 | A-2110-450-59-02 | Supplies - Music | 06/30/2025 | | 565.00 | | |
| Check total for 001158-BRICK & MORTAR MUSIC | | | | | 565.00 | C | 069442 |
| CEDAR KNOLL FARM<br>13036 STATE ROUTE 812<br>HARRISVILLE, NY 13648 | | | | | | | |
| Invoice: HCS -25 [AP ID# 001862] | | | | 660.00 | | | |
| | A-2110-400-00-00 | REGULAR SCH - CONTRACTUAL | 06/30/2025 | | 660.00 | | |
| Check total for 001934-CEDAR KNOLL FARM | | | | | 660.00 | C | 069443 |

# HARRISVILLE CSD

Warrant Report
Fiscal Year: 2025

Bank Account: COMMUNITY - GENERAL
Warrant: 0089-A/P 6/30/25

| P.O. Number | Account | Description | Trans/Payment | Invoice Amt. For This Check | Payment Amt. | | Check Number |
|---|---|---|---|---|---|---|---|
| CINTAS | | | | | | | |
| PO BOX 630910 | | | | | | | |
| CINCINNATI, OH 45263-0910 | | | | | | | |
| Invoice: 4232543055 Acct # 18914890[AP ID# 001858] | | | | 221.87 | | | |
| Invoice: 4233266125 Acct # 18914890[AP ID# 001858] | | | | 802.53 | | | |
| Invoice: 4234017044 Acct # 18914890[AP ID# 001858] | | | | 221.96 | | | |
| Invoice: 4234741132 Acct # 18914890[AP ID# 001858] | | | | 211.82 | | | |
| 25-00100 | A-1620-400-00-00 | OPERATIONS - CONTRACTUAL | 06/30/2025 | | 544.86 | | |
| 25-00100 | A-1621-400-51-00 | MAINTENANCE - MOPS | 06/30/2025 | | 460.34 | | |
| 25-00100 | A-1621-453-00-00 | MAINTENANCE - UNIFORMS | 06/30/2025 | | 308.70 | | |
| 25-00100 | A-5510-400-00-00 | DIST TRANS - CONTRACTUAL | 06/30/2025 | | 61.20 | | |
| 25-00100 | A-5510-403-00-00 | DIST TRANS - UNIFORMS | 06/30/2025 | | 83.08 | | |
| Subtotal for group | | | | 1,458.18 | 1,458.18 | | |
| Check total for 001749-CINTAS | | | | | 1,458.18 | C | 069444 |
| DA-LITE SCREEN STORE | | | | | | | |
| 3002 WEST POTTER DRIVE | | | | | | | |
| PHOENIX, AZ 85027 | | | | | | | |
| Invoice: QUOTE 6007880 99779 PROFESSIONAL ELECTROL 216D 106X188[AP ID# 001863] | | | | 6,871.00 | | | |
| 25-00337 | A-2630-201-00-00 | COMPUTER HARDWARE | 06/30/2025 | | 6,871.00 | | |
| Check total for 002134-DA-LITE SCREEN STORE | | | | | 6,871.00 | C | 069445 |
| Digital Insurance LLC | | | | | | | |
| PO BOX 734429 | | | | | | | |
| DALLAS, TX 75373-4429 | | | | | | | |
| Invoice: 147337 COBRA ACTIVE EMPLOYEES[AP ID# 001828] | | | | 47.00 | | | |
| 25-00216 | A-9089-800-00-00 | Benefits | 06/30/2025 | | 47.00 | | |
| Check total for 001912-Digital Insurance LLC | | | | | 47.00 | C | 069446 |

# HARRISVILLE CSD

Warrant Report
**Fiscal Year: 2025**

**Bank Account: COMMUNITY - GENERAL**
**Warrant: 0089-A/P 6/30/25**



| P.O. Number | Account | Description | Trans/Payment | Invoice Amt. For This Check | Payment Amt. | | Check Number |
|---|---|---|---|---|---|---|---|
| BRIDGET N. FAVRY<br>26143 MUSTARD ROAD<br>WATERTOWN, NY 13601 | | | | | | | |
| Invoice: 2025 CLOTHING ALLOWANCE [AP ID# 001856] | | | | 150.00 | | | |
| | A-2815-417-26-00 | HEALTH SERVICES - CONTRAC | 06/30/2025 | | 150.00 | | |
| Check total for 001602-BRIDGET N. FAVRY | | | | | 150.00 | C | 069447 |
| ROBERT N. FINSTER<br>704 NELLIS STREET<br>WATERTOWN, NY 13601 | | | | | | | |
| Invoice: GRAZING TABLE [AP ID# 001864] | | | | 625.00 | | | |
| | A-1060-450-00-00 | DISTRICT MTG - SUPPLIES | 06/30/2025 | | 625.00 | | |
| Check total for E00468-ROBERT N. FINSTER | | | | | 625.00 | C | 069448 |
| FIRST NATIONAL BANK OF OMAHA<br>PO BOX 2818<br>OMAHA, NE 68103-2818 | | | | | | | |
| Invoice: PEAP ACHEIVEMENT PIN [AP ID# 001845] | | | | 11.25 | | | |
| | A-2810-450-00-00 | GUIDANCE - SUPPLIES | 06/30/2025 | | 11.25 | | |
| Invoice: PEAP HIGH SCHOOL EXCELLENCE PI [AP ID# 001845] | | | | 30.00 | | | |
| | A-2810-450-00-00 | GUIDANCE - SUPPLIES | 06/30/2025 | | 30.00 | | |
| Invoice: SHIPPING [AP ID# 001845] | | | | 22.64 | | | |
| | A-2810-450-00-00 | GUIDANCE - SUPPLIES | 06/30/2025 | | 22.64 | | |
| Invoice: FEILD TRIP MIDDLE SCHOOL FIELD TRIP[AP ID# 001855] | | | | 157.25 | | | |
| 25-00336 | A-2110-406-00-00 | FIELD TRIPS | 06/30/2025 | | 157.25 | | |
| Invoice: FOOD FOR boe MEETING [AP ID# 001861] | | | | 77.76 | | | |
| | A-1010-404-00-00 | BD OF ED - TRAINING | 06/30/2025 | | 77.76 | | |
| Check total for 001966-FIRST NATIONAL BANK OF OMAHA | | | | | 298.90 | C | 069449 |

# HARRISVILLE CSD

Warrant Report
**Fiscal Year: 2025**

**Bank Account: COMMUNITY - GENERAL**
**Warrant: 0089-A/P 6/30/25**



| P.O. Number | Account | Description | Trans/Payment | Invoice Amt. For This Check | Payment Amt. | | Check Number |
|---|---|---|---|---|---|---|---|
| TIMOTHY A. FOWLER II<br>7817 STATE RT 3<br>HARRISVILLE, NY 13648 | | | | | | | |
| Invoice: CATCHER GEAR [AP ID# 001838] | | | | 250.00 | | | |
| | A-2855-450-00-00 | INTERSCHOL ATH - SUPPLIES | 06/30/2025 | | 250.00 | | |
| Invoice: FEILDS DAY SUPPLIES [AP ID# 001846] | | | | 52.94 | | | |
| | A-2110-450-58-00 | TEACHING SUPPLIES - ELEM | 06/30/2025 | | 52.94 | | |
| **Check total for 001937-TIMOTHY A. FOWLER II** | | | | | **302.94** | **C** | **069450** |
| HANCOCK ESTABROOK, LLP<br>1800 AXA TOWER1<br>100 MADISON STREET<br>SYRACUSE, NY 13202 | | | | | | | |
| Invoice: 510007 LEGAL SERVICES[AP ID# 001827] | | | | 450.00 | | | |
| 25-00068 | A-1420-418-25-00 | ATTORNEY SERVICE FEES - C | 06/30/2025 | | 450.00 | | |
| **Check total for 002001-HANCOCK ESTABROOK, LLP** | | | | | **450.00** | **C** | **069451** |
| HARRISVILLE HARDWARE<br>8288 STATE RT 3<br>PO BOX 85<br>HARRISVILLE, NY 13648 | | | | | | | |
| Invoice: HH248118 SUPPLIES[AP ID# 001831] | | | | 24.97 | | | |
| 25-00046 | A-1621-450-00-00 | MAINTENANCE SUPPLIES | 06/30/2025 | | 24.97 | | |
| **Check total for 076176-HARRISVILLE HARDWARE** | | | | | **24.97** | **C** | **069452** |
| ANDREA G. HELLER<br>680 BLANCHARD HILL ROAD<br>RUSSELL, NY 13684 | | | | | | | |
| Invoice: WEBINAR [AP ID# 001844] | | | | 79.00 | | | |
| | A-2810-400-00-00 | GUIDANCE - CONTRACTUAL EX | 06/30/2025 | | 79.00 | | |
| **Check total for 001927-ANDREA G. HELLER** | | | | | **79.00** | **C** | **069453** |

# HARRISVILLE CSD

Warrant Report
**Fiscal Year: 2025**

**Bank Account: COMMUNITY - GENERAL**
**Warrant: 0089-A/P 6/30/25**



| P.O. Number | Account | Description | Trans/Payment | Invoice Amt. For This Check | Payment Amt. | | Check Number |
|---|---|---|---|---|---|---|---|
| HYDE-STONE, MECHANICAL CONTRACTORS, INC.<br>22962 MURROCK CIRCLE<br>WATERTOWN, NY 13601 | | | | | | | |
| Invoice: APPLICATION 1 REPLACE TRIPLE DUTY VALVE[AP ID# 001850] | | | | 13,667.00 | | | |
| 25-00316 | A-1621-420-00-00 | MAINTENANCE - REPAIRS | 06/30/2025 | | 13,667.00 | | |
| Check total for 033995-HYDE-STONE, MECHANICAL CONTRACTORS, INC. | | | | | 13,667.00 | C | 069454 |
| DANA JACKSON<br>390 FULLERVILLE RD<br>HARRISVILLE, NY 13648 | | | | | | | |
| Invoice: RE K GRADUATION SUPPLIES [AP ID# 001847] | | | | 103.40 | | | |
| | A-2110-450-16-01 | PreK M&S | 06/30/2025 | | 103.40 | | |
| Check total for 000051-DANA JACKSON | | | | | 103.40 | C | 069455 |
| JOHNSON NEWSPAPER CORPORATION<br>260 WASHINGTON STREET<br>WATERTOWN, NY 13601 | | | | | | | |
| Invoice: W15554 Acct # 2290[AP ID# 001859] | | | | 185.54 | | | |
| 25-00218 | A-1060-400-00-00 | DISTRICT MTG - CONTRACTUA | 06/30/2025 | | 185.54 | | |
| Check total for 076110-JOHNSON NEWSPAPER CORPORATION | | | | | 185.54 | C | 069456 |
| BRANDY L. KELLEY<br>167 STATE HIGHWAY 3<br>HARRISVILLE, NY 13648 | | | | | | | |
| Invoice: DENTALVISION [AP ID# 001857] | | | | 150.00 | | | |
| | A-9060-800-20-00 | Vision & Dental Reimburse | 06/30/2025 | | 150.00 | | |
| Invoice: VISION [AP ID# 001857] | | | | 150.00 | | | |
| | A-9060-800-20-00 | Vision & Dental Reimburse | 06/30/2025 | | 150.00 | | |
| Check total for E00849-BRANDY L. KELLEY | | | | | 300.00 | C | 069457 |

# HARRISVILLE CSD

Warrant Report
**Fiscal Year: 2025**

**Bank Account: COMMUNITY - GENERAL**
**Warrant: 0089-A/P 6/30/25**



| P.O. Number | Account | Description | Trans/Payment | Invoice Amt. For This Check | Payment Amt. | | Check Number |
|---|---|---|---|---|---|---|---|
| KRAMER/DOROTHY | | | | | | | |
| 13036 ST. RTE 812 | | | | | | | |
| HARRISVILLE, NY 13648 | | | | | | | |
| Invoice: DENTAL [AP ID# 001860] | | | | 150.00 | | | |
| | A-9060-800-20-00 | Vision & Dental Reimburse | 06/30/2025 | | 150.00 | | |
| Invoice: VISION [AP ID# 001860] | | | | 150.00 | | | |
| | A-9060-800-20-00 | Vision & Dental Reimburse | 06/30/2025 | | 150.00 | | |
| Check total for 002013-KRAMER/DOROTHY | | | | | 300.00 | C | 069458 |
| LANGUAGE TESTING INTERNATIONAL | | | | | | | |
| PO BOX 24088 | | | | | | | |
| New York, NY 10087-4088 | | | | | | | |
| Invoice: AAPPL SPANISH TESTING [AP ID# 001848] | | | | 505.00 | | | |
| | A-2110-400-00-00 | REGULAR SCH - CONTRACTUAL | 06/30/2025 | | 505.00 | | |
| Check total for 001908-LANGUAGE TESTING INTERNATIONAL | | | | | 505.00 | C | 069459 |
| LEWIS COUNTY SHERIFF'S OFFICE | | | | | | | |
| INCOME EXECUTIONS | | | | | | | |
| PO BOX 233 | | | | | | | |
| LOWVILLE, NY, 315-3765253 13367 | | | | | | | |
| Invoice: 2025-05HCS SRO SERVICES[AP ID# 001865] | | | | 9,376.10 | | | |
| 25-00278 | A-2810-401-00-00 | School Resource Officer | 06/30/2025 | | 9,376.10 | | |
| Check total for 043573-LEWIS COUNTY SHERIFF'S OFFICE | | | | | 9,376.10 | C | 069460 |
| Lifetime Benefit Solutions Inc | | | | | | | |
| PO Box 5510 | | | | | | | |
| Binghamton, NY 13902 | | | | | | | |
| Invoice: A084835-IN REIMBURSEMENT SINGLE RATE[AP ID# 001866] | | | | 22.50 | | | |
| 25-00077 | A-9089-800-00-00 | Benefits | 06/30/2025 | | 22.50 | | |
| Check total for 002004-Lifetime Benefit Solutions Inc | | | | | 22.50 | C | 069461 |

# HARRISVILLE CSD

Warrant Report
**Fiscal Year: 2025**

**Bank Account: COMMUNITY - GENERAL**
**Warrant: 0089-A/P 6/30/25**



| P.O. Number | Account | Description | Trans/Payment | Invoice Amt. For This Check | Payment Amt. | | Check Number |
|---|---|---|---|---|---|---|---|
| TRENA MIDDLESTATE<br>155A CR 23A<br>HARRISVILLE, NY 13648 | | | | | | | |
| Invoice: CLOTHING ALLOWANCE [AP ID# 001839] | | | | 47.99 | | | |
| | A-1621-453-00-00 | MAINTENANCE - UNIFORMS | 06/30/2025 | | 47.99 | | |
| Check total for 001174-TRENA MIDDLESTATE | | | | | 47.99 | C | 069462 |
| MICHAEL MORGAN<br>2251 COUNTY ROUTE 14<br>CANTON, NY 13617 | | | | | | | |
| Invoice: 5/22/25 BOYS VASITY [AP ID# 001854] | | | | 124.00 | | | |
| | A-2855-418-70-00 | INTERSCHOL ATH - OFFICIAL | 06/30/2025 | | 124.00 | | |
| Check total for 001523-MICHAEL MORGAN | | | | | 124.00 | C | 069463 |
| NATIONAL ART & SCHOOL SUPPLIES, INC.<br>PO BOX 1134<br>2195 ELIZABETH AVE.<br>RAHWAY, NJ 07065 | | | | | | | |
| Invoice: 36933-13188 ART SUPPLIES[AP ID# 001852] | | | | 262.90 | | | |
| 25-00134 | A-2110-450-58-00 | TEACHING SUPPLIES - ELEM | 06/30/2025 | | 7.90 | | |
| 25-00134 | A-2110-450-59-00 | TEACHING SUPPLIES - HS | 06/30/2025 | | 255.00 | | |
| Subtotal for group | | | | 262.90 | 262.90 | | |
| Check total for 000816-NATIONAL ART & SCHOOL SUPPLIES, INC. | | | | | 262.90 | C | 069464 |
| PIDGEON/ALFRED<br>PO BOX 115<br>MORRISTOWN, NY 13664 | | | | | | | |
| Invoice: 05/22/20025 [AP ID# 001851] | | | | 145.40 | | | |
| | A-2855-418-70-00 | INTERSCHOL ATH - OFFICIAL | 06/30/2025 | | 145.40 | | |
| Check total for 001985-PIDGEON/ALFRED | | | | | 145.40 | C | 069465 |

# HARRISVILLE CSD

Warrant Report
**Fiscal Year: 2025**

**Bank Account: COMMUNITY - GENERAL**
**Warrant: 0089-A/P 6/30/25**



| P.O. Number | Account | Description | Trans/Payment | Invoice Amt. For This Check | Payment Amt. | | Check Number |
|---|---|---|---|---|---|---|---|
| SCHOLASTIC BOOK FAIRS - 14<br>PO BOX 639849<br>CINCINNATI, OH 45263-9850 | | | | | | | |
| Invoice: W5744765PO Acct # 13648009 CLSRM MAG[AP ID# 001837] | | | | 753.02 | | | |
| 25-00102 | A-2110-400-00-00 | REGULAR SCH - CONTRACTUAL | 06/30/2025 | | 753.02 | | |
| Check total for 064290-SCHOLASTIC BOOK FAIRS - 14 | | | | | 753.02 | C | 069466 |
| SMEC<br>P.O. BOX 1916<br>BUFFALO, NY 14240-1916 | | | | | | | |
| Invoice: 05255105 INVOICE FOR ELECTRIC[AP ID# 001826] | | | | 3,070.15 | | | |
| 25-00055 | A-1620-425-29-00 | OPERATIONS - ELECTRIC | 06/30/2025 | | 2,826.32 | | |
| 25-00055 | A-5530-400-29-00 | GARAGE BLDG - ELECTRICITY | 06/30/2025 | | 243.83 | | |
| Subtotal for group | | | | 3,070.15 | 3,070.15 | | |
| Check total for 100023-SMEC | | | | | 3,070.15 | C | 069467 |
| Total for Bank Account: GeneralComm COMMUNITY - GENERAL | | | | | 40,654.85 | | |

# HARRISVILLE CSD

Warrant Report
**Fiscal Year: 2025**

**Bank Account: COMMUNITY - SCHOLARSHIP**
**Warrant: 0089-A/P 6/30/25**



| P.O. Number | Account | Description | Trans/Payment | Invoice Amt. For This Check | Payment Amt. | | Check Number |
|---|---|---|---|---|---|---|---|
| NORTH COUNTRY YOUTH SOCCER<br>MICHAEL MORGAN<br>951 COUNTY RT 26<br>CHASE MILLS, NY 13621 | | | | | | | |
| Invoice: 025 GIRLS UQ18 HARRISVILLE CS [AP ID# 001849] | | | | 470.00 | | | |
| | TE-SCHO25-1945-400 | Contractual and Other | 06/30/2025 | | 470.00 | | |
| Invoice: U18 BOYS 2025 HARRISVILLE CSD [AP ID# 001849] | | | | 470.00 | | | |
| | TE-SCHO25-1945-400 | Contractual and Other | 06/30/2025 | | 470.00 | | |
| Check total for 001062-NORTH COUNTRY YOUTH SOCCER | | | | | 940.00 | C | 001340 |
| Total for Bank Account: ScholarComm COMMUNITY - SCHOLAR | | | | | 940.00 | | |

# HARRISVILLE CSD

Warrant Report
Fiscal Year: 2025

Warrant: 0089-A/P 6/30/25



| P.O. Number | Account | Description | Trans/Payment | Invoice Amt. For This Check | Payment Amt. | Check Number |
|---|---|---|---|---|---|---|

| | |
|---|---|
| Total for computer generated checks | 48,521.26 |
| Total for manual checks | 0.00 |
| Total for automated payments | 0.00 |
| Total for electronic transfers (manual) | 0.00 |
| Certified warrant amount | 48,521.26 |
| Total of credits associated with cash replacement checks issued | 0.00 |
| Total for Warrant Report | 48,521.26 |

Net Disbursement by Fund - All Payments

| Fund Summary | |
|---|---|
| A | $ 40,654.85 |
| C | 6,926.41 |
| TE | 940.00 |
| Total for All Funds | $ 48,521.26 |

| Bank Account Summary | Computer Checks | Cash Replacement | Auto Paymnts | EFT's | Transactions | |
|---|---|---|---|---|---|---|
| COMMUNITY - GENERAL | 28 Checks (069440-069467) | 0 | 0 | 0 | 33 | $ 40,654.85 |
| COMMUNITY - CAFETERI | 7 Checks (004908-004914) | 0 | 0 | 0 | 7 | 6,926.41 |
| COMMUNITY - SCHOLARS | 1 Check (001340) | 0 | 0 | 0 | 1 | 940.00 |
| Total for All Computer Checks | | | | | | $ 48,521.26 |

# HARRISVILLE CSD

Warrant Report
**Fiscal Year: 2025**

**Warrant: 0089-A/P 6/30/25**



**Payment Amt.**

**Selection Criteria**

Show check numbers
Show address
Don't show Non-PO Item Descriptions
Date From: 06/01/2025
Date To: 06/30/2025
Don't show check dates
Don't show voided notes
Don't show page with voided items
Sort by: Check
Printed by AMY N. FROST