

Check Register

Vendor Status Chk-Acct	Vendor Name Transaction-Description Account-Number	Invoice-No	Trans-mmyy PO-Number	Due Date Liq PO-Date	Invoice-Date Check-Date	Invoice-Total Amount	Claim-Number Check-Number	Remit-Addr Remit-Addr
214 Released	US POSTAL SERVICE* 913 ELECT VBM POSTCARDS	214-0720A	07/2020	07/23/2020	07/22/2020 07/24/2020	1,000.00	206070	1
01	100-913-533-210		POSTAGE			1,000.00	Expense	

*** Check-Number= 206070 Vendor Name= US POSTAL SERVICE* Check Date= 07/24/2020 Check Amount= 1,000.00 ***

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*** Run Totals ***

	Paid	Pre-Paid	Total
Check-Count	1.00		1.00
Invoice Total	1,000.00		1,000.00
Amount Paid	1,000.00		1,000.00
Amount Liquidated			

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*** Bank Account Activity By Fund ***

Fund Description	Check Account	Cash-Account-Number	Regular	Pre-Paid	Total
COUNTY GENERAL FUND	01	100-000-101-000	1,000.00		1,000.00
		*** Grand Totals ***	1,000.00		1,000.00