

Voucher Summary Report Parameters

Report ID:	FUND 4 -TB		
Report By:	Posted		
Year:	2017	To:	2017
Period:	1	To:	12
Date Range:	Pay Due Date	Range:	10/17/2017 To: 10/31/2017
Sort By:	Voucher Number	Range:	To:
Vendor Type.:		To:	Print Vendor Name 2: No
Vendor Code.:		To:	Print Vendor Address: No
Batch No.:		To:	Condense Report: Y
Check ID:	00004	To:	00004 Print Vch Dist Detail: No
Entered By:		To:	Print Quotes: No
Include:	All		Print Multi Inv Detail: No
User Defined:			Use Alt Fund: No
Print Certification:	Yes, no Page Break	Certification Option:	Voucher B
Cash Totals:	Yes, no Page Break	Fund Totals:	Yes, no Page Break
Account Table:			
Alt. Sort Table:			

TOWN OF WEST SENECA

Voucher Summary Report

Voucher No. Cash Account	Vendor Cd Vendor Name	Invoice No.	Inv. Date	Voucher Amt.	Disc. Amt. Taxable	Check ID	Period PO No.	Year	Check No. Due/Check Date	Account No.	Amount
102431	0000057508 *****		10/26/2017	7,354.03	0.00	00004	10	2017	HELD	004.0004.0040	4,164.22
										004.0004.0040	2,990.00
										004.0004.0040	199.81
0200.0000	NYS EMPLOYEES RETIREMENT SYSTEM		P/R SRS NRM 10/26/17						10/26/2017	Total Dist.	7,354.03
102432	0000057815 *****		10/26/2017	1,147.91	0.00	00004	10	2017	HELD	004.0004.0040	936.67
										004.0004.0040	211.24
0200.0000	NYS POLICE & FIRE RETIREMENT SYSTEM		P/R P&F NRM 10/26/17						10/26/2017	Total Dist.	1,147.91
102433	0000040076 *****		10/26/2017	1,329.61	0.00	00004	10	2017		004.0004.0010	118.75
										004.0004.0010	814.04
										004.0004.0010	396.82
0200.0000	PEARL CARROLL & ASSOC,LLC		P/R CSEA-OTHER 10/26/17		M				10/26/2017	Total Dist.	1,329.61
102434	0000017318 *****		10/26/2017	3,788.04	0.00	00004	10	2017		004.0004.0010	965.44
										004.0004.0010	2,822.60
0200.0000	CSEA, INC.		P/R CSEA WC DU 10/26/17						10/26/2017	Total Dist.	3,788.04
102435	0000999656 20171026029		10/26/2017	945.92	0.00	00004	10	2017		004.0004.0011	945.92
0200.0000	WEST SENECA PBA		P/R PBA DUES 10/26/17						10/26/2017		
102436	0000070370 20171026034		10/26/2017	212.00	0.00	00004	10	2017		004.0004.0014	212.00
0200.0000	ZEIS, CINDY L.		P/R ROBYN 10/26/17						10/26/2017		
102437	0000001255 *****		10/26/2017	538.34	0.00	00004	10	2017		004.0004.0047	15.88
										004.0004.0047	118.29
										004.0004.0047	114.49
										004.0004.0047	289.68
0200.0000	AFLAC NEW YORK		P/R AFLAC- HOS 10/26/17						10/26/2017	Total Dist.	538.34
102438	0000057153 *****		10/26/2017	31,227.60	0.00	00004	10	2017		004.0004.0018	1,008.90
										004.0004.0018	18,461.40
										004.0004.0018	11,757.30
0200.0000	NYS DEFERRED COMPENSATION PLAN		P/R ROTH 457b 10/26/17						10/26/2017	Total Dist.	31,227.60
102439	0000080799 *****		10/26/2017	169,220.03	0.00	00004	10	2017	HELD	004.0004.0026	71,832.20
										004.0004.0027	17,312.44
										004.0004.0022	80,075.39
0200.0000	US TREASURY-IRS		P/R FICA TAX 10/26/17						10/26/2017	Total Dist.	169,220.03
102440	0000057506 20171026STA		10/26/2017	28,906.25	0.00	00004	10	2017	HELD	004.0004.0021	28,906.25
0200.0000	NYS EMPLOYMENT CONTRIBUTIONS & TAX		P/R STATE TAX 10/26/17						10/26/2017		

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Total Vouchers reported: 10

Total GL Detail Reported 244,669.73
Total Amount All Vouchers 244,669.73

Fund	Cash Item		Regular	Prepaid	Wire Transfer	----- Direct Pay -----		Total
			Outstanding	Paid				
004 - TRUST FUND								
	0200.0000	TOWN	244,669.73	0.00	0.00	0.00	0.00	244,669.73
Fund Total			244,669.73	0.00	0.00	0.00	0.00	244,669.73
Grand Totals			244,669.73	0.00	0.00	0.00	0.00	244,669.73
Grand Total Regular, Prepaid, Wire Transfer and Direct Pay			244,669.73					

Fund		Regular	Prepaid	Wire Transfer	----- Direct Pay -----		Total	
			Outstanding	Paid				
004 - TRUST FUND								
		TOWN	244,669.73	0.00	0.00	0.00	0.00	244,669.73
Grand Totals			244,669.73	0.00	0.00	0.00	0.00	244,669.73
Grand Total Regular, Prepaid, Wire Transfer and Direct Pay			244,669.73					

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Voucher No.	Vendor Cd	Invoice No.	Inv. Date	Voucher Amt.	Disc. Amt.	Check ID	Period	Year	Check No.	Account No.	Amount
Cash Account	Vendor Name		Stub- Description		Taxable	PO No.			Due/Check Date		

ABSTRACT OF CLAIMS FOR TOWN BOARD AUDIT

The claims set forth bearing numbers _____ to _____ have been audited and allowed by us being members of the Town Board.

TOWN BOARD

DATE _____

TO THE SUPERVISOR OF THE TOWN

You are hereby authorized and directed to pay to the order of the following vendors the various amounts in payment of Claims hereinafter set forth, numbered the same as above inclusive, which have been audited and allowed and are chargeable to the fund and appropriation account as designated.