

PREPARED 06/04/2013, 16:17:04
 PROGRAM: GM339L
 CITY OF GILLETTE/CITY CLERK
 FIRST INTERSTATE BANK

EXPENDITURE APPROVAL LIST

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BANK: 00

FUND 001	GENERAL FUND								
VEND NO	SEQ#	VENDOR NAME	BNK	CHECK/DUE	ACCOUNT	ITEM	CHECK	EFT, EPAY OR	
INVOICE		VOUCHER P.O.		DATE	NO	DESCRIPTION	AMOUNT	HAND-ISSUED	
NO		NO NO						AMOUNT	
DEPT 00 DIV 00									
0006370	00	EFLEXGROUP.COM, INC.							
P/R 5/29/13	18424	00 05/29/2013	001-0000-202.01-00	FLEX CONTRIBUTIONS	CHECK #:	8051335	5,523.78		
P/R 5/29/13	18424	00 05/29/2013	001-0000-202.01-00	DEPENDENT FLEX CONTRIB	CHECK #:	8051335	1,111.17		
				VENDOR TOTAL *		.00	6,634.95		
0001501	00	ICMA RETIREMENT TRUST 401							
P/R 5/29/13	18351	00 05/29/2013	001-0000-202.07-00	CONTRIBUTION FOR C NAPIER	CHECK #:	8051334	272.85		
				VENDOR TOTAL *		.00	272.85		
0021005	00	ICMA RETIREMENT TRUST-457							
P/R 5/29/13	18350	00 05/29/2013	001-0000-202.07-00	DEFERRED COMP	CHECK #:	8051336	6,667.18		
				VENDOR TOTAL *		.00	6,667.18		
0065649	00	U S TREASURY-EFTPS							
P/R 5/29/13	18353	00 05/29/2013	001-0000-202.03-00	FICA DEPOSIT	CHECK #:	8051333	107,825.94		
P/R 5/29/13	18353	00 05/29/2013	001-0000-202.04-00	WHT DEPOSIT	CHECK #:	8051333	97,069.22		
				VENDOR TOTAL *		.00	204,895.16		
				DEPARTMENT TOTAL **		.00	218,470.14		

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FUND 001	GENERAL FUND							
VEND NO	SEQ#	VENDOR NAME	BNK	CHECK/DUE	ACCOUNT	ITEM	CHECK	EFT, EPAY OR
INVOICE	VOUCHER	P.O.		DATE	NO	DESCRIPTION	AMOUNT	HAND-ISSUED
NO	NO	NO						AMOUNT

DEPT 10	ADMINISTRATION			DIV 50		SPECIAL PROJECTS		
0000366	00	FIRST INTERSTATE BANK-GILLETTE						
3227901	18680	00 05/31/2013	001-1050-419.29-30	INCENTIVE GIFT CARD		CHECK #: 8051338	103.95	
VENDOR TOTAL *							.00	103.95
DEPARTMENT TOTAL **							.00	103.95

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FUND 001 GENERAL FUND		VENDOR NAME		BNK	CHECK/DUE	ACCOUNT	ITEM	CHECK	EFT, EPAY OR
VEND NO	SEQ#	VOUCHER	P.O.		DATE	NO	DESCRIPTION	AMOUNT	HAND-ISSUED
NO	NO	NO	NO						AMOUNT
DEPT 20 FINANCE DIV 10 FINANCE									
0006421	00	ECOBRAADMIN.COM, INC.							
INV000000004865718352		00	05/29/2013		001-2010-415.23-20		COBRA PARTICIPANT FEE	CHECK #: 8051337	6.50
INV000000004865718352		00	05/29/2013		001-2010-415.23-20		COBRA NOTIFICATION FEE	CHECK #: 8051337	24.00
VENDOR TOTAL *								.00	30.50
DEPARTMENT TOTAL **								.00	30.50
001	GENERAL FUND	CASH ON HAND			52,651,933.14-		FUND TOTAL ***	.00	218,604.59

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FUND 504	POWER FUND								
VEND NO	SEQ#	VENDOR NAME							
INVOICE	VOUCHER	P.O.	BNK	CHECK/DUE	ACCOUNT	ITEM	CHECK	EFT, EPAY OR	
NO	NO	NO		DATE	NO	DESCRIPTION	AMOUNT	HAND-ISSUED	AMOUNT

DEPT 45	UTILITIES				DIV 40	POWER			
0003043	00	MUNICIPAL ENERGY AGENCY OF NEBRASKA							
APRIL 2013	18376		00	05/30/2013	504-4540-442.51-30	WHOLESALE POWER	CHECK #: 8051339		545,862.65
						VENDOR TOTAL *	.00		545,862.65
						DEPARTMENT TOTAL **	.00		545,862.65
504	POWER FUND				CASH ON HAND	2,495,401.87	FUND TOTAL ***	.00	545,862.65

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BANK: 02

FUND 701 HEALTH BENEFIT PLAN											
VEND NO	SEQ#	VENDOR NAME								EFT, EPAY OR	
INVOICE	VOUCHER	P.O.	BNK	CHECK/DUE	ACCOUNT	ITEM	CHECK			HAND-ISSUED	
NO	NO	NO		DATE	NO	DESCRIPTION	AMOUNT			AMOUNT	
DEPT 15 ADMINISTRATIVE SERVICES DIV 95 INSURANCE											
0005570	00	BLUE CROSS-BLUE SHIELD OF WYOMING									
W/E 5/21/13	18335		02	05/31/2013	701-1595-419.52-50	WEEKLY CLAIMS LISTING	CHECK #: 8051340			59,300.02	
W/E 5/28/13	18335		02	05/31/2013	701-1595-419.52-50	WEEKLY CLAIMS LISTING	CHECK #: 8051340			21,344.30	
VENDOR TOTAL *							.00			80,644.32	
0066273	00	EXPRESS-SCRIPTS, INC.									
W/E 5/19/13	18333		02	05/31/2013	701-1595-419.52-60	PRESCRIPTION DRUG COSTS	CHECK #: 8051341			7,388.25	
W/E 5/26/13	18334		02	05/31/2013	701-1595-419.52-60	PRESCRIPTION DRUG COSTS	CHECK #: 8051342			10,061.82	
VENDOR TOTAL *							.00			17,450.07	
DEPARTMENT TOTAL **							.00			98,094.39	
FUND TOTAL ***							.00			98,094.39	
HAND ISSUED TOTAL ***										862,561.63	
TOTAL EXPENDITURES ****							.00			862,561.63	
GRAND TOTAL *****										862,561.63	
701 HEALTH BENEFIT PLAN			CASH ON HAND		183,683.83						

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BANK: 00

VEND NO	SEQ#	VENDOR NAME						EFT, EPAY OR
INVOICE	VOUCHER	P.O.	BNK	CHECK/DUE	ACCOUNT	ITEM	CHECK	HAND-ISSUED
NO	NO	NO		DATE	NO	DESCRIPTION	AMOUNT	AMOUNT

DEPT 00 DIV 00

0065651	00	WYOSTAR						
WIRE 6/7/13	18599	00 06/07/2013	301-0000-151.24-00	MADISON CAP TAX		CHECK #:	8061304	1,514,999.62
WIRE 6/7/13	18599	00 06/07/2013	301-0000-151.25-00	DISTRICT CAP TAX		CHECK #:	8061304	401,029.31
				VENDOR TOTAL *			.00	1,916,028.93
				DEPARTMENT TOTAL **			.00	1,916,028.93
301	MADISON WATER LINE	CASH ON HAND	27,574,110.51	FUND TOTAL ***			.00	1,916,028.93

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BANK: 00

FUND 504	POWER FUND							
VEND NO	SEQ#	VENDOR NAME						
INVOICE	VOUCHER	P.O.	BNK	CHECK/DUE	ACCOUNT	ITEM	CHECK	EFT, EPAY OR
NO	NO	NO		DATE	NO	DESCRIPTION	AMOUNT	HAND-ISSUED
								AMOUNT

DEPT 00

DIV 00

0059676	00	WYOMING STATE-REVENUE & TAX						
MAY 2013	18253	00 06/11/2013	504-0000-207.01-00	SALES & USE TAX		CHECK #: 8061303	94,041.81	
				VENDOR TOTAL *		.00	94,041.81	
				DEPARTMENT TOTAL **		.00	94,041.81	

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FUND 504 POWER FUND		VENDOR NAME		BNK CHECK/DUE		ACCOUNT	ITEM	CHECK	EFT, EPAY OR
VEND NO	SEQ#	VOUCHER	P.O.	NO	DATE	NO	DESCRIPTION	AMOUNT	HAND-ISSUED
INVOICES	NO	NO	NO	NO	DATE	NO	DESCRIPTION	AMOUNT	AMOUNT
DEPT 45 UTILITIES DIV 40 POWER									
0003701	00	BLACK HILLS POWER & LIGHT							
MAY 2013	18379	00	06/11/2013	504-4540-442.78-10	WHOLESALE POWER		CHECK #: 8061301	208,290.12	
VENDOR TOTAL *								.00	208,290.12
0066538	00	WYODAK RESOURCES DEVELOPMENT CORP.							
MAY 2013	18380	00	06/11/2013	504-4540-442.51-35	WHOLESALE POWER		CHECK #: 8061302	173,914.50	
VENDOR TOTAL *								.00	173,914.50
DEPARTMENT TOTAL **								.00	382,204.62
FUND TOTAL ***								.00	476,246.43
504 POWER FUND		CASH ON HAND		2,310,298.12					

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FUND 701	HEALTH BENEFIT PLAN							
VEND NO	SEQ#	VENDOR NAME	BNK	CHECK/DUE	ACCOUNT	ITEM	CHECK	EFT, EPAY OR
INVOICE	VOUCHER	P.O.		DATE	NO	DESCRIPTION	AMOUNT	HAND-ISSUED
NO	NO	NO						AMOUNT
DEPT 15 ADMINISTRATIVE SERVICES DIV 95 INSURANCE								
0005570	00	BLUE CROSS-BLUE SHIELD OF WYOMING						
MAY 2013	18594		02	06/05/2013	701-1595-419.38-10	ADMIN FEES	CHECK #: 8061305	9,781.80
VENDOR TOTAL *							.00	9,781.80
0066273	00	EXPRESS-SCRIPTS, INC.						
W/E 6/2/13	18597		02	06/05/2013	701-1595-419.52-60	PRESCRIPTION DRUG COSTS	CHECK #: 8061306	5,811.52
VENDOR TOTAL *							.00	5,811.52
DEPARTMENT TOTAL **							.00	15,593.32
FUND TOTAL ***							.00	15,593.32
HAND ISSUED TOTAL ***								2,407,868.68
TOTAL EXPENDITURES ****							.00	2,407,868.68
GRAND TOTAL *****								2,407,868.68
701 HEALTH BENEFIT PLAN		CASH ON HAND			178,286.93			