

**Expenditure Approval Report**  
**Check Approval Date of 04/03/2015**



Invoice Number	Invoice Description	Amount
604-VEHICLE MAINTENANCE FUND		
30-ADMINISTRATIVE SERVICES		
36-VEHICLE MAINTENANCE		
2432-WYOMING DEPT OF TRANSPORTATION		
29343	NEW LICENSE PLATES UNIT #PD14 & #PD53	10.00
	VENDOR TOTAL:	10.00
	DIVISION TOTAL:	10.00
	DEPARTMENT TOTAL:	10.00
	FUND TOTAL:	10.00
	GRAND TOTAL:	10.00

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Invoice Number	Invoice Description	Amount
301-MADISON WATERLINE		
70-UTILITIES		
72-MADISON WATER LINE		
1859-FIRST AMERICAN TITLE		
29360	BALANCE DUE FOR TITLE INSURANCE	183.00
	VENDOR TOTAL:	183.00
	DIVISION TOTAL:	183.00
	DEPARTMENT TOTAL:	183.00
	FUND TOTAL:	183.00

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Invoice Number		Invoice Description	Amount
604-VEHICLE MAINTENANCE FUND			
30-ADMINISTRATIVE SERVICES			
37-VEHICLE REPLACEMENT			
2645-GREINER MOTOR COMPANY			
29356		CAB & CHASSIS TRUCKS	35,346.00
29357		CAB & CHASSIS TRUCKS	35,346.00
29358		SUV VEHICLES	28,088.00
29359		SUV VEHICLES	28,088.00
		<b>VENDOR TOTAL:</b>	<b>126,868.00</b>
		<b>DIVISION TOTAL:</b>	<b>126,868.00</b>
		<b>DEPARTMENT TOTAL:</b>	<b>126,868.00</b>
		<b>FUND TOTAL:</b>	<b>126,868.00</b>
		<b>GRAND TOTAL:</b>	<b>127,051.00</b>

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Invoice Number	Invoice Description	Amount
001-GENERAL FUND		
10-ADMINISTRATION		
04-SPECIAL PROJECTS		
2570-CITY OF GILLETTE-HEALTH PLAN		
29364	BUDGETED TRANSFER FROM GEN FUND TO HEALTH FUND	413,555.00
	VENDOR TOTAL:	413,555.00
	DIVISION TOTAL:	413,555.00
	DEPARTMENT TOTAL:	413,555.00
	FUND TOTAL:	413,555.00
	GRAND TOTAL:	413,555.00

**Expenditure Approval Report**  
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Invoice Number		Invoice Description	Amount
604-VEHICLE MAINTENANCE FUND			
30-ADMINISTRATIVE SERVICES			
36-VEHICLE MAINTENANCE			
2432-WYOMING DEPT OF TRANSPORTATION			
	29414	TRANSFER PLATE	2.00
		VENDOR TOTAL:	2.00
		DIVISION TOTAL:	2.00
		DEPARTMENT TOTAL:	2.00
		FUND TOTAL:	2.00
		GRAND TOTAL:	2.00

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Invoice Number	Invoice Description	Amount
701-HEALTH INSURANCE FUND		
00-UNDEFINED		
00-UNDEFINED		
1381-CITY OF GILLETTE		
29363	CLEAR DUE TO/DUE FROM BALANCES	4,901.28
	VENDOR TOTAL:	4,901.28
	DIVISION TOTAL:	4,901.28
	DEPARTMENT TOTAL:	4,901.28

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Invoice Number	Invoice Description	Amount
701-HEALTH INSURANCE FUND		
20-HUMAN RESOURCES		
22-HEALTH INSURANCE		
1344-CAMPBELL COUNTY COORDINATED BENEFITS TRUST		
29361	APRIL 2015 DELTA DENTAL ADMIN FEES	986.70
29362	APRIL 2015 STD ADMIN FEES	150.00
	<b>VENDOR TOTAL:</b>	<b>1,136.70</b>
2503-DELTA DENTAL OF WYOMING		
29344	MARCH 2015 CLAIMS	22,999.25
	<b>VENDOR TOTAL:</b>	<b>22,999.25</b>
	<b>DIVISION TOTAL:</b>	<b>24,135.95</b>
	<b>DEPARTMENT TOTAL:</b>	<b>24,135.95</b>
	<b>FUND TOTAL:</b>	<b>29,037.23</b>
	<b>GRAND TOTAL:</b>	<b>29,037.23</b>