

County of Union, Illinois
Departmental Bill List

OFFICE/DEPARTMENT: ESDA
BOARD MEETING DATE: _____
DATE SUBMITTED: 09/03/2014

CHECK	BILL INFORMATION			AMOUNT
	INVOICE NUMBER	INVOICE DATE	DESCRIPTION	
	VENDOR NAME NewWave		OFFICE PHONE	38.72
	FUND LINE 01 5304 12 TELECOMMUNICATIONS			
	INVOICE NUMBER	INVOICE DATE	DESCRIPTION	
	VENDOR NAME Dana Pearson		CELL PHONE	54.00
	FUND LINE 01 5304 12 TELECOMMUNICATIONS			
	INVOICE NUMBER	INVOICE DATE	DESCRIPTION	
	VENDOR NAME CINTAS FIRE PROTECTION		ANNUAL INSPECTION AND SERVICE	145.00
	FUND LINE 01 5201 12 EQUIPMENT			
	INVOICE NUMBER	INVOICE DATE	DESCRIPTION	
	VENDOR NAME			
	FUND LINE [Select a Fund Line]			
	INVOICE NUMBER	INVOICE DATE	DESCRIPTION	
	VENDOR NAME Dana Pearson		ESDA COORDINATOR SALARY	495.19
	FUND LINE 01 5100 12 OFFICIALS			
	INVOICE NUMBER	INVOICE DATE	DESCRIPTION	
	VENDOR NAME			
	FUND LINE [Select a Fund Line]			
	INVOICE NUMBER	INVOICE DATE	DESCRIPTION	
	VENDOR NAME			
	FUND LINE [Select a Fund Line]			
	INVOICE NUMBER	INVOICE DATE	DESCRIPTION	
	VENDOR NAME			
	FUND LINE [Select a Fund Line]			
	INVOICE NUMBER	INVOICE DATE	DESCRIPTION	
	VENDOR NAME			
	FUND LINE [Select a Fund Line]			
	INVOICE NUMBER	INVOICE DATE	DESCRIPTION	
	VENDOR NAME			
	FUND LINE [Select a Fund Line]			
	INVOICE NUMBER	INVOICE DATE	DESCRIPTION	
	VENDOR NAME			
	FUND LINE [Select a Fund Line]			
	TOTAL			\$ 732.91

Consent given by the County Board



Dana Pearson

Official/Department Head Signature

Unless noted by circling an item on this form, board consent implies approval of all individual requests.