

**ST. LAWRENCE-LEWIS BOCES**

Warrant Report

Fiscal Year: 2012

Bank Account: GENERAL FUND

Warrant: 0026-omni check for bishop & pickering

P.O. Number	Account	Description	Trans/Payment	Invoice Amt. For This Check	Payment Amt.	Check Number Check Date
<b>THE OMNI FINANCIAL GROUP INC</b>						
<b>DBA THE OMNI GROUP</b>						
<b>1099 JAY STREET BUILDING F</b>						
<b>ROCHESTER, NY 14611-1153</b>						
Invoice: Unused sick pay Kathy J. Bishop[AP ID# 001941]				2,456.25		
A12-00795	A-717-4010-456-000	SICK DAY PAYMENTS	09/20/2011		2,456.25	
Invoice: N. Pickering Vacation Time - Nancy Pickering[AP ID# 002001]				3,760.56		
	G/L Acct: A601-00	Accrued Liabilities	09/20/2011		3,760.56	
<b>Check total for 007651-THE OMNI FINANCIAL GROUP INC</b>					<b>6,216.81</b>	<b>C</b>
						<b>193479</b>
						<b>9/20/2011</b>

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P.O. Number	Account	Description	Trans/Payment	Invoice Amt. For This Check	Payment Amt.	Check Number Check Date
Total for assigned computer checks					6,216.81	
Total for unassigned payments					0.00	
Total for manual checks					0.00	
Total for electronic transfers (manual)					0.00	
Total for Warrant Report					<u>6,216.81</u>	

Net Disbursement by Fund - All Payments

Fund Summary					
A					\$ 6,216.81
Bank Account Summary	Computer Checks	EFT's	Transactions		
GENERAL FUND	1 Check (193479)	0	2	\$	6,216.81

I hereby certify that I have audited the claims for the 1 checks and 0 electronic disbursements above, in the total amount of \$ 6,216.81 You are hereby authorized and directed to pay to the claimants certified above the amount of each claim allowed and charge each to the proper fund.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Claims Auditor

\_\_\_\_\_  
Date

\_\_\_\_\_  
Purchasing Agent

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Payment Amt.

Check Date

**Selection Criteria**

- Show check numbers
- Show address
- Show Non-PO Item Descriptions
- Show check dates
- Don't show voided notes
- Don't show page with voided items
- Sort by: Remit Name
- Printed by Shirley Arno