



Barry-Eaton District Board of Health

February 16, 2024
1045 Independence Blvd, Charlotte, MI 48113
1:00 p.m.

AGENDA

1. Call to Order
2. Pledge of Allegiance
3. Attendance Roll Call
4. **Motion to Approve the Agenda (ACTION)**
5. Limited Public Comment (3 minutes per person)
6. Regular Board Items
 - a. **Motion to Approve the January 19, 2024 Board Meeting Minutes (ACTION)**
 - b. **Motion to Approve Payables in the Amount of \$133,582.30 (ACTION)**
 - c. **Motion to Approve Monthly Revenue/Expenditure Report (ACTION)**
7. Division Reports and Requests
 - a. Administration Division
 - i. Introduction of Kali Nichols, Personal and Community Health Director
 - ii. My Community Dental Centers - Report
 - iii. Program Update: Accreditation Cycles (Rebekah/Colette)
 - b. Environmental Health Division
 - i. Program Update: New Workload Distribution Process (David)
 - ii. **Proposal to change Environmental Health Specialist position from level one to two (ACTION)**
 - c. Personal and Community Health Division
 - i. Board Education: Lead (Megan)
8. Other Business (If needed)
9. Limited Public Comment (3 minutes per person)
10. Board Member Comments
11. Adjournment

NEXT MEETING: MARCH 15, 2024 in HASTINGS, MI

Should any person attending this meeting require special accommodations, please notify the office three business days prior to the meeting at 517-604-1921



Minutes of the Barry-Eaton District Board of Health
January 19, 2024
330 W. Woodlawn Avenue, Hastings, MI 49058
1:00 p.m.

1. Call to Order	The meeting was called to order by Chairperson Mulder at 1:00 pm
2. Pledge of Allegiance	All present joined for the Pledge of Allegiance.
3. Attendance Roll Call	Board Members Present: Commissioner Catherine Getty, Commissioner Jim Mott, Commissioner Bruce Campbell, Commissioner Bob Teunessen, Commissioner Joe Brehler, and Commissioner Blake Mulder. Staff Present: Colette Scrimger (Health Officer), Jay VanStee (Environmental Health Director), Rebekah Condon (Operations Manager), Milea Burgstahler (Planning, Promotion, and Evaluation Director), Taresa Lucas (Finance Director), Jodi Pessel (Environmental Health Supervisor), Sydney Nicholl (Community Health Promotion Specialist II)
4. Motion to Approve the Agenda (ACTION)	Motion by Commissioner Brehler, Supported by Commissioner Tuenessen All ayes, motion carries.
5. Annual By-Law Review (ACTION)	Motion by Commissioner Getty, Supported by Commissioner Mott All ayes, motion carries.
6. Motion to Approve the Annual Meeting Schedule (ACTION)	Motion by Commissioner Mott, Supported by Commissioner Campbell All ayes, motion carries.
7. Limited Public Comments (3 minutes per person)	One individual spoke during public comment.
8. Regular Board Items	<p>a. <u>Motion to approve December 15, 2023, Board Meeting Minutes (ACTION)</u> Motion by Commissioner Brehler, Supported by Commissioner Tuenessen to approve the December 15, 2023 meeting minutes as provided. All ayes, motion carried.</p> <p>b. <u>Motion to approve the November Payables</u> Motion by Commissioner Mott, Supported by Commissioner Brehler to approve the payables for \$367,375.44. All ayes, motion carried.</p>



	<p>c. <u>Motion to Approve Monthly Revenue/Expenditure Report including Quarterly Budget Amendments (ACTION)</u></p> <p>Taresa Lucas (Finance Director) presented the Monthly Revenue and Expenditure Report including the Quarterly Budget Amendments.</p> <p>Motion by Commissioner Brehler, Supported by Commissioner Mott to approve the Monthly Revenues and expenditures report and quarterly budget amendments. All ayes, motion carried.</p>
<p>9. Division Reports and Requests</p>	<p>a. Environmental Health</p> <p>i. Program Update: Radon</p> <p>Jodi Pessell (Environmental Health Supervisor) gave an overview of the dangers of Radon and emphasized the importance of knowing if there is Radon in your home. January is ‘Radon Action Month’ and both of our offices are handing out Radon test kits free of cost to community members. The Commissioners asked questions; all were answered.</p> <p>b. Personal and Community Health</p> <p>i. Impact Story: Pertussis</p> <p>Laura Brown (Public Health Nurse) told the board how her work on a Pertussis case was featured in an article for “The Guardian of Public Health.” Laura gave an overview of Pertussis and the case that she worked on. The Commissioners asked questions; all were answered.</p> <p>c. Administration</p> <p>i. Board Education: Community Health Improvement Plan (CHIP) Presentation</p> <p>Sydney Nicholl (Community Health Promotion Specialist II) gave the board an overview of the Community Health Assessment (CHA)/Community Health Improvement Plan (CHIP) results. She provided examples of action items and strategies we use to</p>



Barry-Eaton District Health Department

Barry County: 330 W. Woodlawn Ave., Hastings MI 49058
Phone: 269-945-9516 Fax: 517-543-7737

Eaton County: 1033 Health Care Dr., Charlotte, MI 48813
Phone: 517-543-2430 Fax: 517-543-7737

	<p>accomplish the goals outlined by the CHA/CHIP process. The Commissioners asked questions; all were answered.</p> <p>ii. Environmental Health Fee Schedule Correction (ACTION) Taresa Lucas (Finance Director) discussed changes to the Environmental Health Fee Schedule. One fee related to a Fixed Reduced Food Menu was inadvertently left off the fee schedule when adopted in August. The other changes are related to increased fees charged by a vendor for water testing.</p> <p>Motion by Commissioner Getty, Supported by Commissioner Brehler to approve the corrected Environmental Fee Schedule. All ayes, motion carries.</p>
10. Other Business (If needed)	Kali Nichols was hired as the new PCH Director and will be starting on February 5, 2024.
11. Limited Public Comments (3 minutes per person)	One individual spoke during public comment.
12. Board Member Comments	None
13. Adjournment	Chairperson Mulder adjourned the meeting at 1:50 pm.

Blake Mulder, Chair _____ Colette Scrimger, Health Officer _____

NEXT MEETING: February 16, 2024 in Charlotte, MI

Should any person attending this meeting require accommodations, please notify the office three business days prior to the meeting at 517-541-2694

Barry-Eaton District Health Dept.
 Monthly Revenue and Expenditure Statement

Page 1 of 2
 2/8/2024 12:02 PM

December 31, 2023 Represents 3/12ths of FY 2023/2024 Budget = 25%				
	3 Month Year to Date		Annual	Percent of Actual to Approved Budget
	ACTUAL	BUDGET	Current BOH Approved Budget	
REVENUES				
Comprehensive Supplemental	8,353	8,871	35,485	23.54%
Comprehensive Agreement Contracts	718,683	623,890	2,495,560	28.80%
ELPHS Contracts	129,900	219,059	876,236	14.82%
ELPHS Contracts - Local Community Stabilization	-	47,696	190,784	0.00%
MDEQ ELPHS Sewage/Water Contract	108,447	116,082	464,328	23.36%
Contracts Non-Comprehensive Agreement	84,031	321,985	1,287,941	6.52%
Miscellaneous Mini Grants	5,000	1,000	4,000	125.00%
Federally Funded Vaccine Expense - Inkind	-	63,250	253,000	0.00%
MCDC Dental Clinic Rent	17,580	17,580	70,320	25.00%
Barry County Solid Waste Oversight	177	1,300	5,200	3.40%
Hedis Bonus - HPM Physician Incentive Program	-	-	0	0.00%
Barry Appropriations	121,154	125,697	502,788	24.10%
Eaton Appropriations	214,745	214,746	858,982	25.00%
Medicaid Cost Reimbursement	18,323	34,585	138,338	13.25%
Fees for Service - EH	37,146	125,225	500,898	7.42%
Permit Fees - EH	30,681	41,096	164,384	18.66%
Fees for Service - EH Certification	1,178	5,182	20,729	5.68%
Fees for Service - Personal Health Clinics	4,377	4,275	17,101	25.59%
Service Fees-Commercial Insurance - Personal Health	28,453	36,355	145,419	19.57%
Service Fees-Medicaid - Personal Health	10,315	36,597	146,388	7.05%
Service Fees-Medicare - Personal Health	(1)	205	818	-0.08%
Donations	-	-	0	0.00%
Prior Year Revenue	-	-	0	0.00%
Miscellaneous Revenue	-	-	0	0.00%
MSHN MDCH/BSAS	-	-	0	0.00%
MSHN Local PA2	-	-	0	0.00%
County Central Services Local Support	130,697	130,697	522,788	25.00%
Total REVENUE	1,669,239	2,175,372	8,701,487	19.18%
CASH BALANCE AT END OF MONTH	1,660,664			

December 31, 2023 Represents 3/12ths of FY 2023/2024 Budget = 25%				
	3 Month Year to Date		Annual	Percent of Actual to Approved Budget
	ACTUAL	BUDGET	Current BOH Approved Budget	
EXPENSES				
----- SALARY & FRINGE EXPENSE -----				
Salaries	946,121	1,020,962	4,083,848.00	23.17%
Social Security/Medicare	68,810	76,677	306,709.00	22.44%
Workers' Compensation	1,999	10,313	41,251.00	4.85%
Health Insurance	125,094	158,899	635,595.00	19.68%
Health Savings Account	5,700	26,700	106,801.00	5.34%
Dental Insurance	19,634	19,867	79,469.00	24.71%
Life Insurance	1,194	1,214	4,857.00	24.58%
Vision Insurance	5,559	5,996	23,984.00	23.18%
Pension	181,645	171,058	684,230.00	26.55%
Unemployment Benefits	-	1,825	7,300.00	0.00%
Short-Term Disability	5,107	5,606	22,422.00	22.78%
MERS UAL Expense	12,574	8,309	33,234.00	37.83%
Total SALARY & FRINGE EXPENSE	1,373,437	1,507,425	6,029,700	22.78%
----- OPERATING EXPENSE -----				
Travel-Mileage	231	-	-	0.00%
Travel-Other Expenses	7,392	8,990	35,960.00	20.56%
Travel-Clients	-	25	100.00	0.00%
Travel-Meals	547	1,145	4,580.00	11.94%
Contractual	99,980	219,459	877,834.00	11.39%
Equipment	-	-	-	0.00%
Computers Equipment & Supplies	27	15,788	63,150.00	0.04%
Computer Software/Subscriptions	13,546	8,919	35,674.00	37.97%
Supplies	13,273	18,607	74,427.00	17.83%
Supplies-Medical	1,693	3,343	13,372.00	12.66%
Supplies-Pharmaceutical	33,597	57,077	228,307.00	14.72%
Medical Services-Dr Bills	1,772	1,663	6,650.00	26.64%
Lab Fees	590	2,530	10,119.00	5.83%
Pamphlets & Brochures	75	1,438	5,750.00	1.30%
Outreach Materials	308	12,307	49,227.00	0.62%
Recruitment Advertising	-	1,413	5,650.00	0.00%
Membership Fees	8,503	2,603	10,411.00	81.67%
Books/Subscriptions/Film	346	494	1,977.00	17.48%
Insurance	32,340	10,720	42,880.00	75.42%
License Fees to St of MI	746	4,449	17,797.00	4.19%
Food Safety Certification Classes Exp	-	1,175	4,700.00	0.00%
Repairs & Maintenance	-	1,738	6,950.00	0.00%
Employee Training & Conferences	13,464	9,714	38,855.00	34.65%
Postage & Shipping	1,993	3,834	15,335.00	13.00%
Telephone	12,407	12,660	50,640.00	24.50%
Cellular Phone	6,074	10,589	42,356.00	14.34%
MCDC Rental Expense	17,580	17,580	70,320.00	25.00%
Rental Expenditures	-	250	1,000.00	0.00%
Lease Expenditures	31,884	31,260	125,039.00	25.50%
Miscellaneous Expense	6,614	12,121	48,482.00	13.64%
Local Match Expenses	-	-	-	0.00%
Bad Debt Expense	-	-	-	0.00%
Cash Short/Over	0	-	-	0.00%
Credit Card Discount Fees	1,970	2,115	8,458.00	23.29%
County Central Services Local Support	130,697	130,697	522,788.00	25.00%
Federally Funded Vaccine Expense - Inkind	-	63,250	253,000.00	0.00%
Total OPERATING EXPENSES	437,648	667,947	2,671,788	16.38%
Total EXPENSES	1,811,085	2,175,372	8,701,487	20.81%
Excess (Deficiency) of Revenue Sources Over (Under) Expenditures	(141,846)	(0)	-	-

BARRY-EATON DISTRICT HEALTH DEPARTMENT

PAYMENTS FOR DECEMBER 2023

BOARD OF HEALTH MEETING HELD AT CHARLOTTE, MI-EATON COUNTY

DATE: February 16, 2024

ACCOUNTS PAYABLE RUN 1	\$	84,824.91
ACCOUNTS PAYABLE RUN 2	\$	9,812.79
ACCOUNTS PAYABLE RUN 3	\$	38,944.60
ACCOUNTS PAYABLE RUN 4		
ACCOUNTS PAYABLE RUN 5		

TOTAL MONTHLY PAYMENTS SUBMITTED FOR APPROVAL: \$ **133,582.30**

SUMMARY OF APPROVED TO PAY REPORTS

1	Approved to pay report dated: 1/10/2024	\$ 55,140.90
2	Approved to pay report dated: 1/10/2024	\$ 29,684.01
3	Approved to pay report dated: 1/17/2024	\$ 5,583.69
4	Approved to pay report dated: 1/17/2024	\$ 4,229.10
5	Approved to pay report dated: 1/26/2024	\$ 23,870.61
6	Approved to pay report dated: 1/24/2024	\$ 15,073.99
7	Approved to pay report dated:	
8	Approved to pay report dated:	
9	Approved to pay report dated:	
10	Approved to pay report dated:	
11	Approved to pay report dated:	
12	Approved to pay report dated:	
13	Approved to pay report dated:	
14	Approved to pay report dated:	
15	Approved to pay report dated:	
16	Approved to pay report dated:	
TOTAL		\$ 133,582.30

APPROVED
TO
PAY
REPORT
#1

A/P Batch Listing - Invoice (APIBTCLZ)

From Batch Number [1145] To [1145]
From Batch Date [1/10/2024] To [1/10/2024]
Type [Entered, Imported, Generated, Recurring, External]
Status [Open, Ready To Post, Posted]
Reprint Previously Printed Batches [Yes]
Show Schedules [Yes]
Show Job Details [Yes]
Show Tax Details [Yes]
Show Comments [Yes]
Show Optional Fields [Yes]

Batch No.: 1145	Description: MERS & ALERUS EMPLOYER PENSION CONTRIBUTION	Total Amount: 55,140.90
Batch Date: 1/10/2024	Type: Entered	Source Application: AP
Last Edited: 1/10/2024	Status: Posted	No. of Entries: 2

Entry No.: 1	MERS EMPLOYER PENSION CONTRIBUTION	Vendor: MERS MUNICIPAL EMPLOYEES' RETIREMEN
Document Number: INV# 151279-3	Document Type: Invoice	Remit-To: MEETIN MERS OF MICHIGAN
	Document Date: 12/31/2023	Posting Date: 12/31/2023
Account Set: ACI	Import Declaration Number:	Year - Period: 2024 - 03
Terms: NET13	Due Date: 1/13/2024	Tax Group: TG

Distribution Code	G/L Account	Account Description	Detail Desc/ Tax Auth	Net Dist. Amt.	Allocated Tax	Est. Tax Withheld	Rev Charge
	12200-006	Prepaid Exp-A/P Bills	MERS-EMPLOYER PE	47,774.39			
			TA	0.00			
			Total:	47,774.39			

Entry No.: 2	ALERUS EMPLOYER PENSION CONTRIBUTION	Vendor: ALERUS ALERUS RETIREMENT SOLUTIONS
Document Number: INV# 01102024-1	Document Type: Invoice	Posting Date: 12/31/2023
	Document Date: 12/31/2023	Year - Period: 2024 - 03
Account Set: ACTSET	Import Declaration Number:	Tax Group: TG
Terms: TERM	Due Date: 12/31/2023	

Distribution Code	G/L Account	Account Description	Detail Desc/ Tax Auth	Net Dist. Amt.	Allocated Tax	Est. Tax Withheld	Rev Charge
	12200-006	Prepaid Exp-A/P Bills	ALERUS-EMPLOYER	7,366.51			
			TA	0.00			
			Total:	7,366.51			

A/P Batch Listing - Invoice (APIBTCLZ)

--- Batch Summary ---

<u>Documents</u>	
Total Invoices	55,140.90
Total Credit Notes	0.00
Total Debit Notes	0.00
Total Interest	0.00
Total for Batch 1,145	<u>55,140.90</u>

2 entries printed

1 batch printed

APPROVED
TO
PAY
REPORT
#2

A/P Batch Listing - Invoice (APIBTCLZ)

From Batch Number [1147] To [1147]
From Batch Date [1/10/2024] To [1/10/2024]
Type [Entered, Imported, Generated, Recurring, External]
Status [Open, Ready To Post, Posted]
Reprint Previously Printed Batches [Yes]
Show Schedules [Yes]
Show Job Details [Yes]
Show Tax Details [Yes]
Show Comments [Yes]
Show Optional Fields [Yes]

Batch No.: 1147	Description: AP INVOICES FOR WEEK OF 1.8.2024	Total Amount: 29,772.76
Batch Date: 1/10/2024	Type: Entered	Source Application: AP
Last Edited: 1/10/2024	Status: Posted	No. of Entries: 22

Entry No.: 1	AGENCY CLOTHING RETURN	Vendor: LANDSEND LAND'S END
Document Number: CM# SCR1446924	Document Type: Credit Note	
	Document Date: 1/10/2024	Posting Date: 1/10/2024
Account Set: ACTSET	Import Declaration Number:	Year - Period: 2024 - 04
		Tax Group: TG

<u>Distribution Code</u>	<u>G/L Account</u>	<u>Account Description</u>	<u>Detail Desc/ Tax Auth</u>	<u>Net Dist. Amt.</u>	<u>Allocated Tax</u>	<u>Est. Tax Withheld</u>	<u>Rev Charge</u>
	94000-999	Misc Exp-Unallocated 999	LANDS END-AGENCY	-76.12			
			TA	0.00			
			Total:	-76.12			

Entry No.: 2	AGENCY CLOTHING	Vendor: LANDSEND LAND'S END
Document Number: INV# SIN11746856	Document Type: Invoice	
	Document Date: 1/8/2024	Posting Date: 1/8/2024
Account Set: ACTSET	Import Declaration Number:	Year - Period: 2024 - 04
Terms: TERM	Due Date: 1/8/2024	Tax Group: TG

<u>Distribution Code</u>	<u>G/L Account</u>	<u>Account Description</u>	<u>Detail Desc/ Tax Auth</u>	<u>Net Dist. Amt.</u>	<u>Allocated Tax</u>	<u>Est. Tax Withheld</u>	<u>Rev Charge</u>
	94000-999	Misc Exp-Unallocated 999	LANDS END-AGENCY	85.07			
			TA	0.00			
			Total:	85.07			

Entry No.: 3	STD & LIFE PREMIUM FOR FEB	Vendor: DEARBORN NAT DEARBORN NATIONAL LIFI
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A/P Batch Listing - Invoice (APIBTCLZ)

Document Number: EAB2G00114-FEB2024	Document Type: Invoice	Remit-To: EAGLEW DEARBORN NATIONAL LIFE INSURANCE COMPANY
Account Set: ACTSET	Document Date: 1/8/2024	Posting Date: 1/8/2024
Terms: TERM	Due Date: 1/8/2024	Year - Period: 2024 - 04
	Import Declaration Number:	Tax Group: TG

Distribution Code	G/L Account	Account Description	Detail Desc/ Tax Auth	Net Dist. Amt.	Allocated Tax	Est. Tax Withheld	Rev Charge
	12200-004	Prepaid Exp-Insurances	DEARBORN-LIFE & S	2,297.78			
			TA	0.00			
			Total:	<u>2,297.78</u>			

Entry No.: 4	EMPLOYEE MEDICAL FEES	Vendor: SPARRO SPARROW
Document Number: INV# 64883	Document Type: Invoice	Remit-To: OCCUP SPARROW OCCUPATIONAL HEALTH
Account Set: AC1	Document Date: 12/31/2023	Posting Date: 12/31/2023
Terms: DUEUBD	Due Date: 12/31/2023	Year - Period: 2024 - 03
	Import Declaration Number:	Tax Group: TG
	I099 / CPRS Code: 6	I099 / CPRS Amt.: 100.00

Distribution Code	G/L Account	Account Description	Detail Desc/ Tax Auth	Net Dist. Amt.	Allocated Tax	Est. Tax Withheld	Rev Charge
	84100-400	Medical Services-Gen PH 400	SPARROW-RESPIRATC	100.00			
			TA	0.00			
			Total:	<u>100.00</u>			

Entry No.: 5	ANNUAL DUES FOR FY24	Vendor: FSCBC FAMILY SUPPORT CENTER OF BARR
Document Number: ANNUAL DUES 2024	Document Type: Invoice	Remit-To: FSCBC FAMILY SUPPORT CENTER OF BARRY COUNTY
Account Set: AC1	Document Date: 1/10/2024	Posting Date: 1/10/2024
Terms: DUEUBD	Due Date: 1/10/2024	Year - Period: 2024 - 04
	Import Declaration Number:	Tax Group: TG

Distribution Code	G/L Account	Account Description	Detail Desc/ Tax Auth	Net Dist. Amt.	Allocated Tax	Est. Tax Withheld	Rev Charge
	90100-400	Membership Fees-Gen PH 400	FAMILY SUPPORT CEI	50.00			
			TA	0.00			
			Total:	<u>50.00</u>			

Entry No.: 6	ANNUAL MEMBERSHIP FEES 2024	Vendor: MALEHA MALEHA ENVIRONMENTAL HEAL
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A/P Batch Listing - Invoice (APIBTCLZ)

Document Number: ANNUAL MEMBERSHIP 2024

Document Type: Invoice

Remit-To: WESTOV MALEHA

Document Date: 1/10/2024

Posting Date: 1/10/2024

Year - Period: 2024 - 04

Account Set: AC1

Import Declaration Number:

Tax Group: TG

Terms: DUEUBD **Due Date:** 1/10/2024

Distribution Code	G/L Account	Account Description	Detail Desc/ Tax Auth	Net Dist. Amt.	Allocated Tax	Est. Tax Withheld	Rev Charge
	90100-200	Membership Fees-Gen EH 200	MALEHA-ANNUAL M	70.00			
			TA	0.00			
			Total:	<u>70.00</u>			

Entry No.: 7 FUEL CHARGES FOR DEC

Vendor: WEX WEX BANK

Document Number: INV# 94226858

Document Type: Invoice

Posting Date: 12/31/2023

Year - Period: 2024 - 03

Document Date: 12/31/2023

Import Declaration Number:

Tax Group: TG

Account Set: ACTSET

Terms: TERM **Due Date:** 12/31/2023

Distribution Code	G/L Account	Account Description	Detail Desc/ Tax Auth	Net Dist. Amt.	Allocated Tax	Est. Tax Withheld	Rev Charge
	71601-188	Travel-Other Expenses-MCH 188	WEX/SPEEDWAY-FUE	4.13			
			TA	0.00			
	71601-190	Travel-Other-PPE 190	WEX/SPEEDWAY-FUE	6.80			
			TA	0.00			
	71601-200	Travel-Other-Gen EH 200	WEX/SPEEDWAY-FUE	81.76			
			TA	0.00			
	71601-215	Travel-Other-Food 215	WEX/SPEEDWAY-FUE	310.37			
			TA	0.00			
	71601-220	Travel-Other-Shelter/Recreation 220	WEX/SPEEDWAY-FUE	1.52			
			TA	0.00			
	71601-225	Travel-Other-Foster Care 225	WEX/SPEEDWAY-FUE	7.06			
			TA	0.00			
	71601-235	Travel-Other-On-Site Sewage 235	WEX/SPEEDWAY-FUE	228.89			
			TA	0.00			
	71601-240	Travel-Other-Drinking Water 240	WEX/SPEEDWAY-FUE	156.41			
			TA	0.00			
	71601-243	Travel-Other-C19V EH 243	WEX/SPEEDWAY-FUE	1.48			
			TA	0.00			
	71601-245	Travel-Other-Non-Community Water	WEX/SPEEDWAY-FUE	37.05			

A/P Batch Listing - Invoice (APIBTCLZ)

Distribution Code	G/L Account	Account Description	Detail Desc/ Tax Auth	Net Dist. Amt.	Allocated Tax	Est. Tax Withheld	Rev Charge
			TA	0.00			
	71601-252	Travel-Other-Property Change 252	WEX/SPEEDWAY-FUE	1.74			
			TA	0.00			
	71601-290	Travel-Other-EH Community Service	WEX/SPEEDWAY-FUE	1.84			
			TA	0.00			
	71601-400	Travel-Other-Gen PH 400	WEX/SPEEDWAY-FUE	15.46			
			TA	0.00			
	71601-441	Travel-Other-MCH 441	WEX/SPEEDWAY-FUE	1.37			
			TA	0.00			
	71601-442	Travel-Other-C19 PH 442	WEX/SPEEDWAY-FUE	0.88			
			TA	0.00			
	71601-443	Travel-Other-C19V PH 443	WEX/SPEEDWAY-FUE	9.19			
			TA	0.00			
	71601-459	Travel-Other-WIC Breastfeeding 459	WEX/SPEEDWAY-FUE	10.06			
			TA	0.00			
	71601-460	Travel-Other-WIC 460	WEX/SPEEDWAY-FUE	35.05			
			TA	0.00			
	71601-461	Travel-Other-Clinic Health Services/I	WEX/SPEEDWAY-FUE	2.72			
			TA	0.00			
	71601-462	Travel-Other-STD 462	WEX/SPEEDWAY-FUE	4.05			
			TA	0.00			
	71601-466	Travel-Other-HIV 466	WEX/SPEEDWAY-FUE	3.99			
			TA	0.00			
	71601-470	Travel-Other-MedOut PH 470	WEX/SPEEDWAY-FUE	1.60			
			TA	0.00			
	71601-480	Travel-Other-MCRH 480	WEX/SPEEDWAY-FUE	0.08			
			TA	0.00			
	71601-520	Travel-Other-IMMS 520	WEX/SPEEDWAY-FUE	56.60			
			TA	0.00			
	71601-530	Travel-Other-CD 530	WEX/SPEEDWAY-FUE	38.44			
			TA	0.00			
	71601-540	Travel-Other-CSHCS 540	WEX/SPEEDWAY-FUE	20.17			
			TA	0.00			
	71601-568	Travel-Other-Vision 568	WEX/SPEEDWAY-FUE	17.48			
			TA	0.00			

A/P Batch Listing - Invoice (APIBTCLZ)

Distribution Code	G/L Account	Account Description	Detail Desc/ Tax Auth	Net Dist. Amt.	Allocated Tax	Est. Tax Withheld	Rev Charge
	71601-569	Travel-Other-Hearing 569	WEX/SPEEDWAY-FUE	17.48			
			TA	0.00			
	71601-595	Travel-Other-EP PH 595	WEX/SPEEDWAY-FUE	2.85			
			TA	0.00			
			Total:	<u>1,076.52</u>			

Entry No.:	8	CELL PHONE CHARGES FOR DEC	Vendor:	VERIZO VERIZON WIRELESS
Document Number:	ACCT# 883223630-00001	Document Type: Invoice	Remit-To:	VERIZO VERIZON WIRELESS
Account Set:	AC1	Document Date: 12/31/2023	Posting Date: 12/31/2023	Year - Period: 2024 - 03
Terms:	DUEUBD	Due Date: 12/31/2023	Import Declaration Number:	Tax Group: TG

Distribution Code	G/L Account	Account Description	Detail Desc/ Tax Auth	Net Dist. Amt.	Allocated Tax	Est. Tax Withheld	Rev Charge
	93302-140	Cellular-ADM 140	VERIZON-CELL PHON	128.47			
			TA	0.00			
	93302-190	Cellular-PPE 190	VERIZON-CELL PHON	52.36			
			TA	0.00			
	93302-195	Cellular-EP ADM 195	VERIZON-CELL PHON	310.23			
			TA	0.00			
	93302-200	Cellular-Gen EH 200	VERIZON-CELL PHON	125.87			
			TA	0.00			
	93302-245	Cellular-Non-Community Water Type	VERIZON-CELL PHON	48.41			
			TA	0.00			
	93302-400	Cellular-Gen PH 400	VERIZON-CELL PHON	63.58			
			TA	0.00			
	93302-459	Cellular-WIC Breastfeeding 459	VERIZON-CELL PHON	52.36			
			TA	0.00			
	93302-480	Cellular-MCRH 480	VERIZON-CELL PHON	116.17			
			TA	0.00			
	93302-520	Cellular-IMMS 520	VERIZON-CELL PHON	288.51			
			TA	0.00			
	93302-530	Cellular-CD 530	VERIZON-CELL PHON	139.08			
			TA	0.00			
	93302-540	Cellular-CSCHS 540	VERIZON-CELL PHON	63.76			

A/P Batch Listing - Invoice (APIBTCLZ)

Distribution Code	G/L Account	Account Description	Detail Desc/ Tax Auth	Net Dist. Amt.	Allocated Tax	Est. Tax Withheld	Rev Charge
			TA	0.00			
	93302-568	Cellular-Vision 568	VERIZON-CELL PHON	24.20			
			TA	0.00			
	93302-569	Cellular-Hearing 569	VERIZON-CELL PHON	24.21			
			TA	0.00			
			Total:	<u>1,437.21</u>			

Entry No.: 9 PHONE CHARGES FOR JAN **Vendor:** TELNET TELNET WORLDWIDE, INC.
Document Number: INV# 39204 **Document Type:** Invoice **Remit-To:** DEARBO TELNET WORLDWIDE
Document Date: 1/10/2024 **Posting Date:** 1/10/2024 **Year - Period:** 2024 - 04
Account Set: ACI **Import Declaration Number:** **Tax Group:** TG
Terms: DUEUBD **Due Date:** 1/10/2024

Distribution Code	G/L Account	Account Description	Detail Desc/ Tax Auth	Net Dist. Amt.	Allocated Tax	Est. Tax Withheld	Rev Charge
	93301-140	Telephone-ADM 140	TELNET-PHONE CHAI	965.66			
			TA	0.00			
	93301-195	Telephone-EP ADM 195	TELNET-PHONE CHAI	80.47			
			TA	0.00			
			Total:	<u>1,046.13</u>			

Entry No.: 10 SHREDDING FOR DEC **Vendor:** SHRED SHRED-IT
Document Number: INV# 8005757502 **Document Type:** Invoice **Remit-To:** CHICAG STERICYCLE INC
Document Date: 12/31/2023 **Posting Date:** 12/31/2023 **Year - Period:** 2024 - 03
Account Set: ACI **Import Declaration Number:** **Tax Group:** TG
Terms: DUEUBD **Due Date:** 12/31/2023

Distribution Code	G/L Account	Account Description	Detail Desc/ Tax Auth	Net Dist. Amt.	Allocated Tax	Est. Tax Withheld	Rev Charge
	71706-140	Contractual-ADM 140	SHREDIT-SHREDDINC	345.78			
			TA	0.00			
			Total:	<u>345.78</u>			

Entry No.: 11 PLANT MAINT FOR DEC **Vendor:** SORREN ROBIN SORRENTINO
Document Number: PLANT MAINT DEC 2023 **Document Type:** Invoice

A/P Batch Listing - Invoice (APIBTCLZ)

Account Set: AC1	Document Date: 12/31/2023	Posting Date: 12/31/2023	Year - Period: 2024 - 03
Terms: DUEUBD	Import Declaration Number:		Tax Group: TG
Due Date: 12/31/2023		1099 / CPRS Code: 7	1099 / CPRS Amt.: 160.00

Distribution Code	G/L Account	Account Description	Detail Desc/ Tax Auth	Net Dist. Amt.	Allocated Tax	Est. Tax Withheld	Rev Charge
	71706-140	Contractual-ADM 140	R SORRENTINO-PLAN	160.00			
			TA	0.00			
			Total:	<u>160.00</u>			

Entry No.: 12 ANNUAL ACCREDITATION **Vendor:** PHAB PUBLIC HEALTH ACCREDITATION BO

Document Number: INV#42741	Document Type: Invoice	Posting Date: 12/30/2023	Year - Period: 2024 - 03
Account Set: AC1	Document Date: 12/30/2023		Tax Group: TG
Terms: DUEUBD	Import Declaration Number:		
Due Date: 12/30/2023			

Distribution Code	G/L Account	Account Description	Detail Desc/ Tax Auth	Net Dist. Amt.	Allocated Tax	Est. Tax Withheld	Rev Charge
	71706-140	Contractual-ADM 140	PHAB-CATEGORY 2 S	2,800.00			
			TA	0.00			
			Total:	<u>2,800.00</u>			

Entry No.: 13 MEMBERSHIP DUES **Vendor:** NALBOH NALBOH

Document Number: INV# 300004517	Document Type: Invoice	Remit-To: 563 NATIONAL ASSOCIATION OF LOCAL BOARDS OF HEALTH	Year - Period: 2024 - 04
Account Set: AC1	Document Date: 1/10/2024	Posting Date: 1/10/2024	Tax Group: TG
Terms: DUEUBD	Import Declaration Number:		
Due Date: 1/10/2024			

Distribution Code	G/L Account	Account Description	Detail Desc/ Tax Auth	Net Dist. Amt.	Allocated Tax	Est. Tax Withheld	Rev Charge
	90100-140	Membership Fees-ADM 140	NALBOH-ANNUAL M	350.00			
			TA	0.00			
			Total:	<u>350.00</u>			

Entry No.: 14 CONF REG **Vendor:** NACCHO NATIONAL ASSOCIATION OF COUP

Document Number: INV# 372827	Document Type: Invoice	Remit-To: 79197 NACCHO
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A/P Batch Listing - Invoice (APIBTCLZ)

Account Set: AC1	Document Date: 12/19/2023	Posting Date: 12/19/2023	Year - Period: 2024 - 03
Terms: DUEUBD	Import Declaration Number:		Tax Group: TG
Due Date: 12/19/2023			

Distribution Code	G/L Account	Account Description	Detail Desc/ Tax Auth	Net Dist. Amt.	Allocated Tax	Est. Tax Withheld	Rev Charge
	93100-140	Training/Conferences-Admin 140	NACCHO-CONFEREN	870.00			
			TA	0.00			
			Total:	<u>870.00</u>			

Entry No.: 15 SHIPPING **Vendor:** FEDEX FEDERAL EXPRESS CORPORATION

Document Number: INV# 836706191	Document Type: Invoice	Remit-To: FEDEX FEDEX	Year - Period: 2024 - 04
Account Set: AC1	Document Date: 1/2/2024	Posting Date: 1/2/2024	Tax Group: TG
Terms: DUEUBD	Import Declaration Number:		
Due Date: 1/2/2024			

Distribution Code	G/L Account	Account Description	Detail Desc/ Tax Auth	Net Dist. Amt.	Allocated Tax	Est. Tax Withheld	Rev Charge
	93200-190	Postage-PPE 190	FEDEX-PAYROLL SHI	44.57			
			TA	0.00			
			Total:	<u>44.57</u>			

Entry No.: 16 FLEET LEASE CHARGES FOR JAN **Vendor:** ENTERPRISE ENTERPRISE FLEET MGMT

Document Number: INV# 602245-010524	Document Type: Invoice	Remit-To: 800089 ENTERPRISE FLEET MGMT CUST BILLING	Year - Period: 2024 - 04
Account Set: ACTSET	Document Date: 1/10/2024	Posting Date: 1/10/2024	Tax Group: TG
Terms: TERM	Import Declaration Number:		
Due Date: 1/10/2024			

1099 / CPRS Code: 7 **1099 / CPRS Amt.:** 13,304.91

Distribution Code	G/L Account	Account Description	Detail Desc/ Tax Auth	Net Dist. Amt.	Allocated Tax	Est. Tax Withheld	Rev Charge
	93901-999	Leases - 999	ENTERPRISE-FLEET I	10,419.91			
			TA	0.00			
	72601-140	Supplies-ADM 140	ENTERPRISE-PLATE F	2,885.00			
			TA	0.00			
			Total:	<u>13,304.91</u>			

A/P Batch Listing - Invoice (APIBTCLZ)

Entry No.: 17	ANSWERING SERVICE FOR DEC	Vendor:	AMBS AMBS MESSAGE CENTER, INC.
Document Number:	INV# 231200411	Document Type:	Invoice
Account Set:	AC1	Document Date:	12/31/2023
Terms:	DUEUBD	Posting Date:	12/31/2023
Due Date:	12/31/2023	Year - Period:	2024 - 03
		Import Declaration Number:	
		Tax Group:	TG

Distribution Code	G/L Account	Account Description	Detail Desc/ Tax Auth	Net Dist. Amt.	Allocated Tax	Est. Tax Withheld	Rev Charge
	71706-140	Contractual-ADM 140	AMBS-ANSWERING S	35.00			
			TA	0.00			
			Total:	<u>35.00</u>			

Entry No.: 18	REISSUE	Vendor:	HASD HASTINGS AREA SCHOOL DISTRICT
Document Number:	INV#352	Document Type:	Invoice
Account Set:	AC1	Document Date:	1/8/2024
Terms:	DUEUBD	Posting Date:	1/8/2024
Due Date:	1/8/2024	Year - Period:	2024 - 04
		Import Declaration Number:	
		Tax Group:	TG

Distribution Code	G/L Account	Account Description	Detail Desc/ Tax Auth	Net Dist. Amt.	Allocated Tax	Est. Tax Withheld	Rev Charge
	93900-235	Rentals-On Site Sewage-235	HASTINGS SCHOOLS-	88.75			
			TA	0.00			
			Total:	<u>88.75</u>			

**ALREADY REQUESTED
3.15.2023**

Entry No.: 19	LEGAL FEES FOR DEC	Vendor:	ABBOTTNICHOL ABBOTT NICHOLSON, PC
Document Number:	INV# 239363	Document Type:	Invoice
Account Set:	ACTSET	Document Date:	12/31/2023
Terms:	DUEUBD	Posting Date:	12/31/2023
Due Date:	12/31/2023	Year - Period:	2024 - 03
		Import Declaration Number:	
		Tax Group:	TG

Distribution Code	G/L Account	Account Description	Detail Desc/ Tax Auth	Net Dist. Amt.	Allocated Tax	Est. Tax Withheld	Rev Charge
	71706-140	Contractual-ADM 140	ABBOTT NICHOLSON	247.50			
			TA	0.00			
	71706-215	Contractual-Food 215	ABBOTT NICHOLSON	132.00			
			TA	0.00			

1099 / CPRS Code: 14	1099 / CPRS Amt.:	544.50
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A/P Batch Listing - Invoice (APIBTCLZ)

Distribution Code	G/L Account	Account Description	Detail Desc/ Tax Auth	Net Dist. Amt.	Allocated Tax	Est. Tax Withheld	Rev Charge
	71706-144	Contractual-OD2A ADM 144	ABBOTT NICHOLSON	165.00			
			TA	0.00			
			Total:	544.50			

Entry No.: 20 SOFTWARE SUPPORT FOR JAN **Vendor:** KRONOS KRONOS SAASHR INCORPORATEE

Document Number: INV# 12188940 **Document Type:** Invoice **Remit-To:** UKG UKG KRONOS SYSTEMS, LLC

Account Set: AC1 **Document Date:** 1/8/2024 **Posting Date:** 1/8/2024 **Year - Period:** 2024 - 04

Terms: DUEUBD **Due Date:** 1/8/2024 **Import Declaration Number:** **Tax Group:** TG

Distribution Code	G/L Account	Account Description	Detail Desc/ Tax Auth	Net Dist. Amt.	Allocated Tax	Est. Tax Withheld	Rev Charge
	71706-999	Contractual-999	KRONOS/UKG-SOFTV	1,806.31			
			TA	0.00			
			Total:	1,806.31			

Entry No.: 21 DENTAL CLAIMS FOR DEC **Vendor:** DELDEN DELTA DENTAL PLAN OF MICHIGA

Document Number: INV# ASO0000538106 **Document Type:** Invoice **Remit-To:** 16082 DELTA DENTAL

Account Set: AC1 **Document Date:** 12/31/2023 **Posting Date:** 12/31/2023 **Year - Period:** 2024 - 03

Terms: DUEUBD **Due Date:** 12/31/2023 **Import Declaration Number:** **Tax Group:** TG

Distribution Code	G/L Account	Account Description	Detail Desc/ Tax Auth	Net Dist. Amt.	Allocated Tax	Est. Tax Withheld	Rev Charge
	25555-000	LIABILITY-DENTAL SELF FUNDIN	DELTA DENTAL-CLAI	3,246.35			
			TA	0.00			
			Total:	3,246.35			

Entry No.: 22 WASTE PICK UP FOR DEC **Vendor:** HNHS HOSPITAL NETWORK HEALTHCARE S

Document Number: INV# 90604 & 90603 **Document Type:** Invoice **Posting Date:** 12/31/2023 **Year - Period:** 2024 - 03

Account Set: AC1 **Document Date:** 12/31/2023 **Import Declaration Number:** **Tax Group:** TG

Terms: DUEUBD **Due Date:** 12/31/2023

1099 / CPRS Code: 6 **1099 / CPRS Amt.:** 90.00

A/P Batch Listing - Invoice (APIBTCLZ)

Distribution Code	G/L Account	Account Description	Detail Desc/ Tax Auth	Net Dist. Amt.	Allocated Tax	Est. Tax Withheld	Rev Charge
	71706-460	Contractual-WIC 460	HNHS-WASTE PICKUI	9.00			
			TA	0.00			
	71706-520	Contractual-IMMS 520	HNHS-WASTE PICKUI	81.00			
			TA	0.00			
			Total:	<u>90.00</u>			

--- Batch Summary ---

Documents	
Total Invoices	29,848.88
Total Credit Notes	-76.12
Total Debit Notes	0.00
Total Interest	0.00
Total for Batch 1,147	<u>29,772.76</u>
	-88.75
	29,684.01

22 entries printed
1 batch printed

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A/P Batch Listing - Invoice (APIBTCLZ)

From Batch Number [1148] To [1148]
From Batch Date [1/17/2024] To [1/17/2024]
Type [Entered, Imported, Generated, Recurring, External]
Status [Open, Ready To Post, Posted]
Reprint Previously Printed Batches [Yes]
Show Schedules [Yes]
Show Job Details [Yes]
Show Tax Details [Yes]
Show Comments [Yes]
Show Optional Fields [Yes]

Batch No.: 1148	Description: PO INVOICES FOR WEEK OF 1.15.2024	Total Amount: 5,583.69
Batch Date: 1/17/2024	Type: External	Source Application: PO
Last Edited: 1/17/2024	Status: Posted	No. of Entries: 9

Entry No.: 1	OFFICE SUPPLIES	Vendor: AMAZON AMAZON CAPITAL SERVICES, INC
Document Number: 17WMM4417CKG	Document Type: Invoice	Remit-To: CAPITA AMAZON CAPITAL SERVICES
PO Number: PO00000000000000001937	Document Date: 1/11/2024	Posting Date: 1/14/2024
Account Set: AC1	Import Declaration Number:	Year - Period: 2024 - 04
Terms: DUEUBD T	Due Date: 1/11/2024	Tax Group: TG

Distribution Code	G/L Account	Account Description	Detail Desc/ Tax Auth	Net Dist. Amt.	Allocated Tax	Est. Tax Withheld	Rev Charge
	72601-140	Supplies-ADM 140	AMAZON-HEX HEAD	15.99			
			TA	0.00			
			Total:	15.99			

Entry No.: 2	OFFICE SUPPLIES	Vendor: AMAZON AMAZON CAPITAL SERVICES, INC
Document Number: 1GHCRHPWD1JV	Document Type: Invoice	Remit-To: CAPITA AMAZON CAPITAL SERVICES
PO Number: PO00000000000000001937	Document Date: 1/16/2024	Posting Date: 1/15/2024
Account Set: AC1	Import Declaration Number:	Year - Period: 2024 - 04
Terms: DUEUBD T	Due Date: 1/16/2024	Tax Group: TG

Distribution Code	G/L Account	Account Description	Detail Desc/ Tax Auth	Net Dist. Amt.	Allocated Tax	Est. Tax Withheld	Rev Charge
	72601-140	Supplies-ADM 140	AMAZON-MASONRY	22.47			
			TA	0.00			
			Total:	22.47			

A/P Batch Listing - Invoice (APIBTCLZ)

Entry No.: 3	OFFICE SUPPLIES	Vendor:	AMAZON AMAZON CAPITAL SERVICES, INC		
Document Number:	IDK3JTYKKWHQ	Document Type:	Invoice	Remit-To:	CAPITA AMAZON CAPITAL SERVICES
PO Number:	PO00000000000000001916	Document Date:	12/21/2023	Posting Date:	12/21/2023
Account Set:	AC1	Import Declaration Number:		Year - Period:	2024 - 03
Terms:	DUEUBD T	Due Date:	12/21/2023	Tax Group:	TG

Distribution Code	G/L Account	Account Description	Detail Desc/ Tax Auth	Net Dist. Amt.	Allocated Tax	Est. Tax Withheld	Rev Charge
	90200-460	Books/Subscriptions/Film-WIC 460	AMAZON-PRACTITIO TA	53.63 0.00			
	72601-520	Supplies-IMMS 520	AMAZON-DELL LAPT TA	39.56 0.00			
	72601-140	Supplies-ADM 140	AMAZON-HAND SAN TA	85.17 0.00			
			Total:	<u>178.36</u>			

Entry No.: 4	VACCINE	Vendor:	MERCK MERCK & CO., INC.		
Document Number:	7017393823 & 701739424	Document Type:	Invoice	Remit-To:	94000 MERCK SHARP & DOHME LLC
PO Number:	PO00000000000000001933	Document Date:	1/12/2024	Posting Date:	1/10/2024
Account Set:	AC1	Import Declaration Number:		Year - Period:	2024 - 04
Terms:	DUEUBD T	Due Date:	1/12/2024	Tax Group:	TG

Distribution Code	G/L Account	Account Description	Detail Desc/ Tax Auth	Net Dist. Amt.	Allocated Tax	Est. Tax Withheld	Rev Charge
	72604-520	Supplies-Pharmaceutical-IMMS 520	MERCK-GARDASIL TA	2,817.94 0.00			
	72601-520	Supplies-IMMS 520	MERCK-VARIVAX	1,708.47			
			Total:	<u>4,526.41</u>			

Entry No.: 5	STICKERS	Vendor:	SMILEM SMILEMAKERS		
Document Number:	9477648	Document Type:	Invoice	Posting Date:	1/10/2024
PO Number:	PO00000000000000001931	Document Date:	1/12/2024	Year - Period:	2024 - 04
Account Set:	AC1	Import Declaration Number:		Tax Group:	TG
Terms:	DUEUBD T	Due Date:	1/12/2024		

Distribution Code	G/L Account	Account Description	Detail Desc/ Tax Auth	Net Dist. Amt.	Allocated Tax	Est. Tax Withheld	Rev Charge
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A/P Batch Listing - Invoice (APIBTCLZ)

Distribution Code	G/L Account	Account Description	Detail Desc/ Tax Auth	Net Dist. Amt.	Allocated Tax	Est. Tax Withheld	Rev Charge
	72601-520	Supplies-IMMS 520	SMILEMAKERS-STICI	104.89			
			TA	0.00			
			Total:	<u>104.89</u>			

Entry No.: 6 OXYGEN TANKS **Vendor:** PURITYGAS PURITY CYLINDER GASES
Document Number: INV 1870495 **Document Type:** Invoice **Remit-To:** 9390 PURITY CYLINDER GASES, INC
PO Number: PO0000000000000000001919 **Document Date:** 1/11/2024 **Posting Date:** 1/11/2024 **Year - Period:** 2024 - 04
Account Set: ACTSET **Import Declaration Number:** **Tax Group:** TG
Terms: TERM T **Due Date:** 1/11/2024

Distribution Code	G/L Account	Account Description	Detail Desc/ Tax Auth	Net Dist. Amt.	Allocated Tax	Est. Tax Withheld	Rev Charge
	72603-520	Supplies-Medical-IMMS 520	PURITY GAS-OXYGEI	82.45			
			TA	0.00			
			Total:	<u>82.45</u>			

Entry No.: 7 VACCINE **Vendor:** GSK GLAXOSMITHKLINE PHARMACEUTICA
Document Number: INV 8254229641 **Document Type:** Invoice
PO Number: PO0000000000000000001934 **Document Date:** 1/11/2024 **Posting Date:** 1/10/2024 **Year - Period:** 2024 - 04
Account Set: ACTSET **Import Declaration Number:** **Tax Group:** TG
Terms: TERM T **Due Date:** 1/11/2024

Distribution Code	G/L Account	Account Description	Detail Desc/ Tax Auth	Net Dist. Amt.	Allocated Tax	Est. Tax Withheld	Rev Charge
	72604-520	Supplies-Pharmaceutical-IMMS 520	GSK-VACCINE	414.60			
			TA	0.00			
			Total:	<u>414.60</u>			

Entry No.: 8 MEDICAL SUPPLIES **Vendor:** HENRYS HENRY SCHEIN, INC.
Document Number: INV 68852162 **Document Type:** Invoice **Remit-To:** 10241 HENRY SCHEIN, INC.
PO Number: PO0000000000000000001936 **Document Date:** 1/11/2024 **Posting Date:** 1/10/2024 **Year - Period:** 2024 - 04
Account Set: AC1 **Import Declaration Number:** **Tax Group:** TG
Terms: DUEUBD T **Due Date:** 1/11/2024

A/P Batch Listing - Invoice (APIBTCLZ)

Distribution Code	G/L Account	Account Description	Detail Desc/ Tax Auth	Net Dist. Amt.	Allocated Tax	Est. Tax Withheld	Rev Charge
	72603-520	Supplies-Medical-IMMS 520	HENRY SCHEIN - MEI	95.60			
			TA	0.00			
			Total:	<u>95.60</u>			

Entry No.:	9	MEDICAL SUPPLIES	Vendor:	HENRYS HENRY SCHEIN, INC.			
Document Number:	INV 68852035	Document Type: Invoice	Remit-To:	10241 HENRY SCHEIN, INC.			
PO Number:	PO000000000000000000001935	Document Date: 1/10/2024	Posting Date:	1/9/2024	Year - Period: 2024 - 04		
Account Set:	AC1	Import Declaration Number:			Tax Group:	TG	
Terms:	DUEUBD T	Due Date:	1/10/2024				

Distribution Code	G/L Account	Account Description	Detail Desc/ Tax Auth	Net Dist. Amt.	Allocated Tax	Est. Tax Withheld	Rev Charge
	72603-460	Supplies-Medical-WIC 460	HENRY SCHEIN-MED	142.92			
			TA	0.00			
			Total:	<u>142.92</u>			

--- Batch Summary ---

Documents	
Total Invoices	5,583.69
Total Credit Notes	0.00
Total Debit Notes	0.00
Total Interest	0.00
Total for Batch I,148	<u>5,583.69</u>

T: Terms have been edited

9 entries printed

1 batch printed

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A/P Batch Listing - Invoice (APIBTCLZ)

From Batch Number [1149] To [1149]
From Batch Date [1/17/2024] To [1/17/2024]
Type [Entered, Imported, Generated, Recurring, External]
Status [Open, Ready To Post, Posted]
Reprint Previously Printed Batches [Yes]
Show Schedules [Yes]
Show Job Details [Yes]
Show Tax Details [Yes]
Show Comments [Yes]
Show Optional Fields [Yes]

Batch No.: 1149 **Description:** AP INVOICES FOR WEEK OF 1.15.2024 **Total Amount:** 4,229.10
Batch Date: 1/17/2024 **Type:** Entered **Source Application:** AP **No. of Entries:** 6
Last Edited: 1/17/2024 **Status:** Posted

Entry No.: 1 DENTAL PREMIUMS FOR FEB **Vendor:** DELDEN DELTA DENTAL PLAN OF MICHIGA
Document Number: CLIENT#15482001 **Document Type:** Invoice **Remit-To:** 16082 DELTA DENTAL
Account Set: ACI **Document Date:** 1/17/2024 **Posting Date:** 1/17/2024 **Year - Period:** 2024 - 04
Terms: DUEUBD **Due Date:** 1/17/2024 **Import Declaration Number:** **Tax Group:** TG

Distribution Code	G/L Account	Account Description	Detail Desc/ Tax Auth	Net Dist. Amt.	Allocated Tax	Est. Tax Withheld	Rev Charge
	12200-004	Prepaid Exp-Insurances	DELTA DENTAL-FEB I	416.00			
			TA	0.00			
			Total:	<u>416.00</u>			

Entry No.: 2 SOFTWARE SUPPORT **Vendor:** DIMAGI DIMAGI INC
Document Number: INV# VOT000700 **Document Type:** Invoice **Posting Date:** 12/31/2023 **Year - Period:** 2024 - 03
Account Set: ACTSET **Document Date:** 12/31/2023 **Import Declaration Number:** **Tax Group:** TG
Terms: TERM **Due Date:** 12/31/2023

Distribution Code	G/L Account	Account Description	Detail Desc/ Tax Auth	Net Dist. Amt.	Allocated Tax	Est. Tax Withheld	Rev Charge
	71706-530	Contractual-CD 530	DIMAGI-SOFTWARE S	75.00			
			TA	0.00			
			Total:	<u>75.00</u>			

A/P Batch Listing - Invoice (APIBTCLZ)

Entry No.: 3 MERAKI SUPPORT **Vendor:** PDT PEOPLE DRIVEN TECHNOLOGY

Document Number: INV9271 **Document Type:** Invoice
Document Date: 12/31/2023 **Posting Date:** 12/31/2023 **Year - Period:** 2024 - 03
Account Set: ACTSET **Import Declaration Number:** **Tax Group:** TG
Terms: TERM **Due Date:** 12/31/2023

Distribution Code	G/L Account	Account Description	Detail Desc/ Tax Auth	Net Dist. Amt.	Allocated Tax	Est. Tax Withheld	Rev Charge
	72003-999	Computer Software/Subscriptions-999	PEOPLE DRIVEN TEC	990.00			
			TA	0.00			
			Total:	990.00			

Entry No.: 4 SOFTWARE SUPPORT FOR DEC **Vendor:** LEHMAN LEHMAN & WESLEY INC

Document Number: INV 96780 **Document Type:** Invoice
Document Date: 12/31/2023 **Posting Date:** 12/31/2023 **Year - Period:** 2024 - 03
Account Set: AC1 **Import Declaration Number:** **Tax Group:** TG
Terms: DUEUBD **Due Date:** 12/31/2023

Distribution Code	G/L Account	Account Description	Detail Desc/ Tax Auth	Net Dist. Amt.	Allocated Tax	Est. Tax Withheld	Rev Charge
	71706-140	Contractual-ADM 140	LEHMAN WESLEY-SC	612.50			
			TA	0.00			
			Total:	612.50			

Entry No.: 5 EMPLOYEE ASSISTANCE PROGRAM FOR 2024 **Vendor:** ENCOMPASS ENCOMPASS LLC

Document Number: INV# ENC-IN-100010 **Document Type:** Invoice
Document Date: 1/17/2024 **Posting Date:** 1/17/2024 **Year - Period:** 2024 - 04
Account Set: ACTSET **Import Declaration Number:** **Tax Group:** TG
Terms: TERM **Due Date:** 1/17/2024

Distribution Code	G/L Account	Account Description	Detail Desc/ Tax Auth	Net Dist. Amt.	Allocated Tax	Est. Tax Withheld	Rev Charge
	71706-999	Contractual-999	ENCOMPASS- ANNUA	1,792.80			
			TA	0.00			
			Total:	1,792.80			

Entry No.: 6 REIMBURSEMENT **Vendor:** 676 REBEKAH CONDON

A/P Batch Listing - Invoice (APIBTCLZ)

Document Number: HOTEL STAY REIMB

Document Type: Invoice

Document Date: 1/17/2024

Posting Date: 1/17/2024

Year - Period: 2024 - 04

Account Set: ACTSET

Import Declaration Number:

Tax Group: TG

Terms: TERM Due Date: 1/17/2024

Distribution Code	G/L Account	Account Description	Detail Desc/ Tax Auth	Net Dist. Amt.	Allocated Tax	Est. Tax Withheld	Rev Charge
	71601-140	Travel-Other-ADM 140	R CONDON-HOTEL S	342.80			
			TA	0.00			
			Total:	<u>342.80</u>			

--- Batch Summary ---

Documents	
Total Invoices	4,229.10
Total Credit Notes	0.00
Total Debit Notes	0.00
Total Interest	0.00
Total for Batch 1,149	<u>4,229.10</u>

6 entries printed

1 batch printed

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A/P Batch Listing - Payment (APCBTCLZ)

From Batch Number [1288] To [1288]
 From Batch Date [1/26/2024] To [1/26/2024]
 Type [Entered, Imported, Generated, System, External]
 Status [Open, Ready To Post, Posted]
 Reprint Previously Printed Batches [Yes]
 Show Job Details [Yes]
 Show Tax Details [Yes]
 Show Adjustment Details [Yes]
 Show Optional Fields [Yes]

Batch No.: 1288 Description: ACH PYMTS FOR WEEK OF 1.22.2024 PD 1.26.2024 Total Amount: 23,870.61
 Batch Date: 1/26/2024 Type: System Source Application: AP No. of Entries: 7
 Last Edited: 1/24/2024 Status: Posted Bank: SYSI No. of Checks Printed: 7

Entry No.: 1 DELL INC Document No.: PY00000000000000024148 Payment Amt.: 16,437.98 E

Transaction Type: Payment Payment Date: 1/26/2024 Posting Date: 1/26/2024 Year - Period: 2024 - 04
 Vendor: DELLINC DELL INC Account Set: ACTSET
 Payment Code: ACH Payment Type: Check Check No.: 10001333

Document No.	Sched. No.	Adj. No.	Adj. Reference	Adj. Description	Adjustment	Discount	Tax Withheld	Amount
INV 10725056838					0.00	0.00	0.00	16,437.98
Total :					0.00	0.00	0.00	16,437.98

Entry No.: 2 EATON COUNTY Document No.: PY00000000000000024149 Payment Amt.: 5,859.96 E

Transaction Type: Payment Payment Date: 1/26/2024 Posting Date: 1/26/2024 Year - Period: 2024 - 04
 Vendor: ECTREA EATON COUNTY TREASURER Account Set: AC1
 Remit-To: CONTRO EATON COUNTY
 Payment Code: ACH Payment Type: Check Check No.: 10001334

Document No.	Sched. No.	Adj. No.	Adj. Reference	Adj. Description	Adjustment	Discount	Tax Withheld	Amount
JAN24 DENTAL RENT					0.00	0.00	0.00	5,859.96
Total :					0.00	0.00	0.00	5,859.96

Entry No.: 3 ISOLVED BENEFIT SERVICES Document No.: PY00000000000000024150 Payment Amt.: 143.85 E

Transaction Type: Payment Payment Date: 1/26/2024 Posting Date: 1/26/2024 Year - Period: 2024 - 04
 Vendor: ISOLVED ISOLVED BENEFIT SERVICES Account Set: ACTSET
 ISOLVE
 Payment Code: ACH Payment Type: Check Check No.: 10001335

A/P Batch Listing - Payment (APCBTCLZ)

Document No.	Sched. No.	Adj. No.	Adj. Reference	Adj. Description	Adjustment	Discount	Tax Withheld	Amount
INV# 113498801					0.00	0.00	0.00	143.85
Total :					0.00	0.00	0.00	143.85

Entry No.: 4 LEHMAN & WESLEY INC Document No.: PY00000000000000024151 Payment Amt.: 315.00 E

Transaction Type: Payment Payment Date: 1/26/2024 Posting Date: 1/26/2024 Year - Period: 2024 - 04

Vendor: LEHMAN LEHMAN & WESLEY INC Account Set: AC1

Payment Code: ACH Payment Type: Check Check No.: 10001336

Document No.	Sched. No.	Adj. No.	Adj. Reference	Adj. Description	Adjustment	Discount	Tax Withheld	Amount
INV# 0032332-IN					0.00	0.00	0.00	315.00
Total :					0.00	0.00	0.00	315.00

Entry No.: 5 PITNEY BOWES GLOBAL FINANCIAL SERVICE Document No.: PY00000000000000024152 Payment Amt.: 624.45 E

Transaction Type: Payment Payment Date: 1/26/2024 Posting Date: 1/26/2024 Year - Period: 2024 - 04

Vendor: PITNEY PITNEY BOWES GLOBAL FINANCIAL SERVICE Account Set: AC2

981022

Payment Code: ACH Payment Type: Check Check No.: 10001337

Document No.	Sched. No.	Adj. No.	Adj. Reference	Adj. Description	Adjustment	Discount	Tax Withheld	Amount
INV 3318601328					0.00	0.00	0.00	315.90
INV# 3318590524					0.00	0.00	0.00	308.55
Total :					0.00	0.00	0.00	624.45

Entry No.: 6 STAPLES Document No.: PY00000000000000024153 Payment Amt.: 274.97 E

Transaction Type: Payment Payment Date: 1/26/2024 Posting Date: 1/26/2024 Year - Period: 2024 - 04

Vendor: STAPLE STAPLES CONTRACT & COMMERCIAL, INC Account Set: AC1

Remit-To: SADVAN STAPLES

Payment Code: ACH Payment Type: Check Check No.: 10001338

Document No.	Sched. No.	Adj. No.	Adj. Reference	Adj. Description	Adjustment	Discount	Tax Withheld	Amount
INV 8072945810					0.00	0.00	0.00	313.28
INV 8073010720					0.00	0.00	0.00	100.00
INV# 8072224299					0.00	0.00	0.00	85.02
INV# 8072663658					0.00	0.00	0.00	80.40

A/P Batch Listing - Payment (APCBTCLZ)

INV# 8072883683	0.00	0.00	0.00	70.84
INV#8073010720	0.00	0.00	0.00	35.42
CM#8072129811	0.00	0.00	0.00	-324.97
CM#807229811	0.00	0.00	0.00	-85.02
Total :	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>274.97</u>

Entry No.: 7 **VOICES FOR HEALTH** **Document No.:** PY00000000000000024154 **Payment Amt.:** 214.40 *E*
Transaction Type: Payment **Payment Date:** 1/26/2024 **Posting Date:** 1/26/2024 **Year - Period:** 2024 - 04
Vendor: VOICES VOICES FOR HEALTH INC **Account Set:** AC1
Remit-To: VOICES VOICES FOR HEALTH
Payment Code: ACH **Payment Type:** Check **Check No.:** 10001339

<u>Document No.</u>	<u>Sched. No.</u>	<u>Adj. No.</u>	<u>Adj. Reference</u>	<u>Adj. Description</u>	<u>Adjustment</u>	<u>Discount</u>	<u>Tax Withheld</u>	<u>Amount</u>
INV#96334					0.00	0.00	0.00	214.40
Total :					<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>214.40</u>

---- Batch Summary ----

	<u>Invoice</u>	<u>Adjustment</u>	<u>Discount</u>	<u>Payment</u>	<u>Advance Credit</u>	<u>Bank Amount</u>
Total for Batch 1288:	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>23,870.61</u>	<u>0.00</u>	<u>23,870.61</u>

E: Entry has been edited.

7 entries printed

1 batch printed

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A/P Batch Listing - Payment (APCBTCLZ)

From Batch Number [1289] To [1289]
 From Batch Date [1/24/2024] To [1/24/2024]
 Type [Entered, Imported, Generated, System, External]
 Status [Open, Ready To Post, Posted]
 Reprint Previously Printed Batches [Yes]
 Show Job Details [Yes]
 Show Tax Details [Yes]
 Show Adjustment Details [Yes]
 Show Optional Fields [Yes]

Batch No.: 1289 Description: CHECK PYMTS FOR WEEK OF 1.22.2024 Total Amount: 15,073.99
 Batch Date: 1/24/2024 Type: System Source Application: AP No. of Entries: 9
 Last Edited: 1/24/2024 Status: Posted Bank: SYS1 No. of Checks Printed: 9

Entry No.: 1 ACCIDENT FUND Document No.: PY0000000000000024155 Payment Amt.: 1,927.80 E

Transaction Type: Payment Payment Date: 1/24/2024 Posting Date: 1/24/2024 Year - Period: 2024 - 04
 Vendor: ACCIDE ACCIDENT FUND INS CO OF AMER Account Set: AC1
 Remit-To: CHICAG ACCIDENT FUND
 Payment Code: CHECK Payment Type: Check Check No.: 45070

Document No.	Sched. No.	Adj. No.	Adj. Reference	Adj. Description	Adjustment	Discount	Tax Withheld	Amount
INV 1001098443					0.00	0.00	0.00	1,927.80
Total :					0.00	0.00	0.00	1,927.80

Entry No.: 2 BASIC Document No.: PY0000000000000024156 Payment Amt.: 209.43 E

Transaction Type: Payment Payment Date: 1/24/2024 Posting Date: 1/24/2024 Year - Period: 2024 - 04
 Vendor: BASIC BASIC Account Set: AC1
 88297
 Payment Code: CHECK Payment Type: Check Check No.: 45071

Document No.	Sched. No.	Adj. No.	Adj. Reference	Adj. Description	Adjustment	Discount	Tax Withheld	Amount
INV# IN 2995038					0.00	0.00	0.00	209.43
Total :					0.00	0.00	0.00	209.43

Entry No.: 3 DBI BUSINESS INTERIORS Document No.: PY0000000000000024157 Payment Amt.: 1,185.04 E

Transaction Type: Payment Payment Date: 1/24/2024 Posting Date: 1/24/2024 Year - Period: 2024 - 04
 Vendor: DBI DBI HOLDING CO. Account Set: AC1
 Remit-To: DBI DBI BUSINESS INTERIORS

A/P Batch Listing - Payment (APCBTCLZ)

Payment Code: CHECK Payment Type: Check Check No.: 45072

Document No.	Sched. No.	Adj. No.	Adj. Reference	Adj. Description	Adjustment	Discount	Tax Withheld	Amount
INV# 315303-0					0.00	0.00	0.00	1,185.04
Total :					0.00	0.00	0.00	1,185.04

Entry No.: 4 SUZAN FOSTER Document No.: PY0000000000000024158 Payment Amt.: 120.00 *E*

Transaction Type: Payment Payment Date: 1/24/2024 Posting Date: 1/24/2024 Year - Period: 2024 - 04

Vendor: FOSTERS SUZAN FOSTER Account Set: ACTSET

Payment Code: CHECK Payment Type: Check Check No.: 45073

Document No.	Sched. No.	Adj. No.	Adj. Reference	Adj. Description	Adjustment	Discount	Tax Withheld	Amount
FOOD CLASS REFUND					0.00	0.00	0.00	120.00
Total :					0.00	0.00	0.00	120.00

Entry No.: 5 GUN LAKE AREA SEWER AUTHORITY Document No.: PY0000000000000024159 Payment Amt.: 46.00 *E*

Transaction Type: Payment Payment Date: 1/24/2024 Posting Date: 1/24/2024 Year - Period: 2024 - 04

Vendor: GUNLAKESEWER GUN LAKE AREA SEWER AUTHORITY Account Set: ACTSET

Payment Code: CHECK Payment Type: Check Check No.: 45074

Document No.	Sched. No.	Adj. No.	Adj. Reference	Adj. Description	Adjustment	Discount	Tax Withheld	Amount
INV# 2370					0.00	0.00	0.00	46.00
Total :					0.00	0.00	0.00	46.00

Entry No.: 6 HAWORTH, INC. Document No.: PY0000000000000024160 Payment Amt.: 7,521.55 *E*

Transaction Type: Payment Payment Date: 1/24/2024 Posting Date: 1/24/2024 Year - Period: 2024 - 04

Vendor: HAWORTH HAWORTH, INC. Account Set: ACTSET

Payment Code: CHECK Payment Type: Check Check No.: 45075

Document No.	Sched. No.	Adj. No.	Adj. Reference	Adj. Description	Adjustment	Discount	Tax Withheld	Amount
PAYER ID 6K4444					0.00	0.00	0.00	7,521.55
Total :					0.00	0.00	0.00	7,521.55

Entry No.: 7 NUTRITION MATTERS, INC Document No.: PY0000000000000024161 Payment Amt.: 126.00 *E*

A/P Batch Listing - Payment (APCBTCLZ)

Transaction Type: Payment Payment Date: 1/24/2024 Posting Date: 1/24/2024 Year - Period: 2024 - 04
 Vendor: NUTMAT NUTRITION MATTERS, INC Account Set: ACTSET
 Payment Code: CHECK Payment Type: Check Check No.: 45076

Document No.	Sched. No.	Adj. No.	Adj. Reference	Adj. Description	Adjustment	Discount	Tax Withheld	Amount
INV#22069					0.00	0.00	0.00	126.00
Total :					0.00	0.00	0.00	126.00

Entry No.: 8 UNEMPLOYMENT INSURANCE AGENCY Document No.: PY0000000000000024162 Payment Amt.: 2,728.92 *E*

Transaction Type: Payment Payment Date: 1/24/2024 Posting Date: 1/24/2024 Year - Period: 2024 - 04
 Vendor: STATE STATE OF MICHIGAN Account Set: AC1
 Remit-To: UIA UNEMPLOYMENT INSURANCE AGENCY
 Payment Code: CHECK Payment Type: Check Check No.: 45077

Document No.	Sched. No.	Adj. No.	Adj. Reference	Adj. Description	Adjustment	Discount	Tax Withheld	Amount
ACCT#0807210 000					0.00	0.00	0.00	2,728.92
Total :					0.00	0.00	0.00	2,728.92

Entry No.: 9 WOW! BUSINESS Document No.: PY0000000000000024163 Payment Amt.: 1,209.25 *E*

Transaction Type: Payment Payment Date: 1/24/2024 Posting Date: 1/24/2024 Year - Period: 2024 - 04
 Vendor: WOW WIDOPENWEST INC. Account Set: AC1
 Remit-To: WOW WOW! BUSINESS
 Payment Code: CHECK Payment Type: Check Check No.: 45078

Document No.	Sched. No.	Adj. No.	Adj. Reference	Adj. Description	Adjustment	Discount	Tax Withheld	Amount
ACCT 14038932 JAN 2024					0.00	0.00	0.00	596.39
ACCT14038916 JAN2024					0.00	0.00	0.00	612.86
Total :					0.00	0.00	0.00	1,209.25

---- Batch Summary ----

	Invoice	Adjustment	Discount	Payment	Advance Credit	Bank Amount
Total for Batch 1289:	0.00	0.00	0.00	15,073.99	0.00	15,073.99

E: Entry has been edited.

EHS Assigned Areas

As of December 4th, 2023

<p><u>Barry County</u> Carol Balkon (269) 798-4106 Matt Hill (269) 798-4108</p>				
Thornapple Carol	Irving Matt	Carlton Wynn	Woodland Wynn	
Yankee Springs Carol	Rutland Matt	Hastings Matt	Castleton Wynn	
Orangeville Carol	Hope Matt	Baltimore Matt	Maple Grove Wynn	
Prairieville Carol	Barry Carol	Johnstown Shane	Assyria Shane	

<p><u>Eaton County</u> Shane Adams (517) 541-2672 Wynn Berry (517) 541-2658</p>				
Sunfield Wynn	Roxand Wynn	Oneida Wynn	Delta Wynn	
Vermontville Wynn	Chester Wynn	Benton Wynn	Windsor Wynn	
Kalamo Shane	Carmel Shane	Eaton Shane	Eaton Rapids Shane	
Bellevue Shane	Walton Shane	Brookfield Shane	Hamlin Shane	

Barry County

Thornapple 61 79 111 84	Irving 98 96 63 86	Carlton 85 32 36 51	Woodland 27 22 32 27
Yankee Springs 61 53 38 51	Rutland 90 47 46 61	Hastings 101 58 37 65	Castleton 31 23 12 22
Orangeville 48 41 51 47	Hope 55 52 54 54	Baltimore 23 24 28 25	Maple Grove 30 36 18 28
Prairieville 51 59 19 43	Barry 61 48 40 50	Johnstown 47 33 37 39	Assyria 26 27 24 26

Eaton County

Sunfield 30 10 9 16	Roxand 24 12 13 16	Oneida 3 24 20 16	Delta 21 29 16 22
Vermontville 13 30 13 19	Chester 18 10 10 13	Benton 24 20 18 21	Windsor 26 51 37 38
Kalamo 16 13 25 18	Carmel 20 23 26 23	Eaton 57 57 27 47	Eaton Rapids 31 36 16 28
Bellevue 28 27 24 26	Walton 12 38 21 24	Brookfield 11 19 14 15	Hamlin 41 28 22 30

FY20-21
 FY21-22
 FY22-23
 Average

County	Township	FY20-21	FY21-22	FY22-23	Average
Barry	Assyria	26	27	24	25.67
	Baltimore	23	24	28	25.00
	Barry	61	48	40	49.67
	Carlton	85	32	36	51.00
	Castleton	31	23	12	22.00
	Hastings	101	58	37	65.33
	Hope	55	52	54	53.67
	Irving	98	96	63	85.67
	Johnstown	47	33	37	39.00
	Maple Grove	30	36	18	28.00
	Orangeville	48	41	51	46.67
	Prairieville	51	59	19	43.00
	Rutland	90	47	46	61.00
	Thornapple	61	79	111	83.67
	Woodland	27	22	32	27.00
	Yankee Springs	61	53	38	50.67
Eaton	Bellevue	28	27	24	26.33
	Benton	24	20	18	20.67
	Brookfield	11	19	14	14.67
	Carmel	20	23	26	23.00
	Chester	18	10	10	12.67
	Delta	21	29	16	22.00
	Eaton	57	57	27	47.00
	Eaton Rapids	31	36	16	27.67
	Hamlin	41	28	22	30.33
	Kalamo	16	13	25	18.00
	Oneida	3	24	20	15.67
	Roxand	24	12	13	16.33
	Sunfield	30	10	9	16.33
	Vermontville	13	30	13	18.67
	Walton	12	38	21	23.67
	Windsor	26	51	37	38.00

Workloads by Township

