

### List of Bills - Claims Account

Check#	Vendor	Description	Payment	Check Total
15886	6739 - STANDARD INSURANCE COMPANY	PO 6730 DISABILITY INS-ST/LT	7,278.59	
		PO 6730 DISABILITY INS-ST/LT	835.51	8,114.10
	TOTAL			8,114.10

Summary By Account

ACCOUNT	DESCRIPTION	CURRENT YR	APPROP. YEAR	NON-BUDGETARY	CREDIT
01-201-23-226-200	DISABILITY INS ST/LT	7,278.59			
01-260-05-100	DUE TO CLEARING			0.00	7,278.59
<b>TOTALS FOR</b>	<b>CURRENT FND</b>	<b>7,278.59</b>	<b>0.00</b>	<b>0.00</b>	<b>7,278.59</b>
05-201-55-544-510	STATUTORY EXPEND	835.51			
05-260-05-100	DUE TO CLEARING			0.00	835.51
<b>TOTALS FOR</b>	<b>SEWER FUND (WRF)</b>	<b>835.51</b>	<b>0.00</b>	<b>0.00</b>	<b>835.51</b>

Total to be paid from Fund 01 CURRENT FND 7,278.59  
 Total to be paid from Fund 05 SEWER FUND (WRF) 835.51  
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 8,114.10