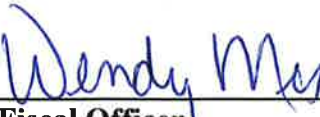


Accounts Payable Voucher Register # 21-5P

PARK VOUCHERS	05/31/21	\$	170.20
CIVIL TOWN VOUCHERS	05/31/21	\$	75,719.87
TOTAL VOUCHERS CONFIRMED	05/31/21	\$	75,890.07

I hereby certify that each of the above listed vouchers and the invoices or bills attached thereto, are true and correct and I have audited same in accordance with IC 5-11-10-1.6.

May 31, 2021


Fiscal Officer

(IC 5-11-10-2 permits the governing body to sign the Accounts Payable Voucher Register in lieu of signing each claim the governing body is allowing.)

We have examined the vouchers listed on the foregoing Accounts Payable Voucher Register, consisting of 6 pages, and except for the vouchers not allowed as shown on the

\$ 75,890.07

Approved and confirmed by the Town Council of the Town of Munster, Lake County Indiana, this 21st day of June, 2021 by a vote of _____ in favor and _____ opposed.

Andy Koultourides , President

ATTEST:

Wendy Mis, Clerk-Treasurer

FUND SUMMARY MAY 31, 2021

FUND	DESCRIPTON	AMOUNT
101	GENERAL FUND	\$ 3,745.80
204	PARK & RECREATION	\$ 170.20
280	SEWER MAINTENANCE	\$ 911.59
504	SELF-FUNDED MEDICAL/DENTAL/LIFE	\$ 3,614.58
580	SELF-FUNDED LIABILITY	\$ 50,000.00
601	WATER CASH OPERATING	\$ 16,035.93
623	SOLID WASTE MANAGEMENT	\$ 303.87
780	INTERGOVERNMENTAL ESCROW	\$ 1,108.10
	REPORT TOTAL	\$ 75,890.07

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FOR POST DATES FROM 01/2021 TO 05/31/2021

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Post Date	Journal	Description	GL Number	GL Description	DR Amount	CR Amount
05/26/2021	JE		Ref Num1: '4082'			
GL Trx #: 130686						
		MEDICAL INSURANCE	101-204-0100-61305000	MEDICAL INSURANCE	865.76	
		VISION INSURANCE	101-204-0100-61309000	VISION INSURANCE	9.21	
		DENTAL INSURANCE	101-204-0100-61335000	DENTAL INSURANCE	39.35	
		CASH	101-000-0000-11010000	CASH		914.32
		MEDICAL INSURANCE PREMIUM	504-935-0100-44909000	MEDICAL INSURANCE PREMI		865.76
		VISION INSURANCE PREMIUM	504-935-0100-44908000	VISION INSURANCE PREMIU		9.21
		DENTAL INSURANCE PREMIUM	504-935-0200-44910000	DENTAL INSURANCE PREMIU		39.35
		HEALTH ACCOUNT CASH	504-000-0000-11016000	HEALTH ACCOUNT CASH	914.32	
					<u>1,828.64</u>	<u>1,828.64</u>
05/28/2021	JE		Ref Num1: '4090'			
GL Trx #: 131001						
		CLAIMS -- EAP	504-935-0500-61422000	CLAIMS -- EAP	808.26	
		HEALTH ACCOUNT CASH	504-000-0000-11016000	HEALTH ACCOUNT CASH		808.26
		HEALTH ACCOUNT CASH	504-000-0000-11016000	HEALTH ACCOUNT CASH	808.26	
		CASH	504-000-0000-11010000	CASH		808.26
					<u>1,616.52</u>	<u>1,616.52</u>
					<u>145,739.82</u>	<u>145,739.82</u>
TOTALS:						
		CASH	101-000-0000-11010000			914.32
		CREDIT CARD ACCOUNT	101-000-0000-11017000			2,831.48
		VISA/MC FEES	101-105-0100-63107000		2,831.48	
		MEDICAL INSURANCE	101-204-0100-61305000		865.76	
		VISION INSURANCE	101-204-0100-61309000		9.21	
		DENTAL INSURANCE	101-204-0100-61335000		39.35	
		CASH	204-000-0000-11010000		587	
		CREDIT CARD ACCOUNT	204-000-0000-11017000			170.20
		MISCELLANEOUS REVENUES	204-551-0100-46001000			5.87
		VISA/MC FEES	204-551-0100-63107000		170.20	
		CREDIT CARD ACCOUNT	280-000-0000-11017000			911.59
		VISA/MC FEES	280-309-0100-63107000		911.59	
		CASH	504-000-0000-11010000			3,614.58
		HEALTH ACCOUNT CASH	504-000-0000-11016000		914.32	
		VISION INSURANCE PREMIUM	504-935-0100-44908000			9.21
		MEDICAL INSURANCE PREMIUM	504-935-0100-44909000			865.76
		DENTAL INSURANCE PREMIUM	504-935-0200-44910000			39.35
		CLAIMS -- EAP	504-935-0500-61422000		3,614.58	
		CASH	580-000-0000-11010000			50,000.00
		HEALTH ACCOUNT CASH	580-000-0000-11016000			
		PAID LIABILITY CLAIMS	580-945-0100-61402000		50,000.00	
		CASH	601-000-0000-11010000			14,212.75
		CREDIT CARD ACCOUNT	601-000-0000-11017000			1,823.18
		TAX ACCOUNT CASH	601-000-0000-11018000			

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FOR POST DATES FROM 06/01/2021 TO 05/31/2021

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Post Date	Journal	Description	GL Number	GL Description	DR Amount	CR Amount
		VISA/MC FEES	601-374-0100-63107000		1,823.18	
		SALES TAX PAID	601-906-8100-63998000	16,035.93	14,212.75	
		CREDIT CARD ACCOUNT	623-000-0000-11017000			303.87
		VISA/MC FEES	623-310-0100-63107000		303.87	
		CASH	780-000-0000-11010000			1,108.10
		TAX ACCOUNT CASH	780-000-0000-11018000			
		SALES TAX PAID	780-906-8100-63998000		1,108.10	
		GRAND TOTAL:			76,810.26	76,810.26

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Post Date	Journal	Description	GL Number	GL Description	DR Amount	CR Amount
05/20/2021	JE		Ref Num1: '4055'			
GL Trx #: 129923						
		VISA/MC FEES	101-105-0100-63107000	VISA/MC FEES	2,831.48	
		VISA/MC FEES	280-309-0100-63107000	VISA/MC FEES	120.56	
		VISA/MC FEES	601-374-0100-63107000	VISA/MC FEES	241.12	
		VISA/MC FEES	623-310-0100-63107000	VISA/MC FEES	40.19	
		VISA/MC FEES	204-551-0100-63107000	VISA/MC FEES	170.20	
		CREDIT CARD ACCOUNT	101-000-0000-11017000	CREDIT CARD ACCOUNT		2,831.48
		CREDIT CARD ACCOUNT	280-000-0000-11017000	CREDIT CARD ACCOUNT		120.56
		CREDIT CARD ACCOUNT	601-000-0000-11017000	CREDIT CARD ACCOUNT		241.12
		CREDIT CARD ACCOUNT	623-000-0000-11017000	CREDIT CARD ACCOUNT		40.19
		CREDIT CARD ACCOUNT	204-000-0000-11017000	CREDIT CARD ACCOUNT		170.20
					3,403.55	3,403.55
05/20/2021	JE		Ref Num1: '4056'			
GL Trx #: 129924						
		VISA/MC FEES	280-309-0100-63107000	VISA/MC FEES	791.03	
		VISA/MC FEES	601-374-0100-63107000	VISA/MC FEES	1,582.06	
		VISA/MC FEES	623-310-0100-63107000	VISA/MC FEES	263.68	
		CREDIT CARD ACCOUNT	280-000-0000-11017000	CREDIT CARD ACCOUNT		791.03
		CREDIT CARD ACCOUNT	601-000-0000-11017000	CREDIT CARD ACCOUNT		1,582.06
		CREDIT CARD ACCOUNT	623-000-0000-11017000	CREDIT CARD ACCOUNT		263.68
					2,636.77	2,636.77
05/21/2021	JE		Ref Num1: '4061'			
GL Trx #: 130498						
		CLAIMS -- EAP	504-935-0500-61422000	CLAIMS -- EAP	1,469.49	
		HEALTH ACCOUNT CASH	504-000-0000-11016000	HEALTH ACCOUNT CASH		1,469.49
		HEALTH ACCOUNT CASH	504-000-0000-11016000	HEALTH ACCOUNT CASH	1,469.49	
		CASH	504-000-0000-11010000	CASH		1,469.49
					2,938.98	2,938.98
05/26/2021	JE		Ref Num1: '4081'			
GL Trx #: 130685						
		CASH	601-000-0000-11010000	CASH		14,212.75
		TAX ACCOUNT CASH	601-000-0000-11018000	TAX ACCOUNT CASH	14,212.75	
		CASH	780-000-0000-11010000	CASH		1,102.23
		TAX ACCOUNT CASH	780-000-0000-11018000	TAX ACCOUNT CASH	1,102.23	
					15,314.98	15,314.98

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FOR POST DATES FROM 0 1/2021 TO 05/31/2021

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Post Date	Journal	Description	GL Number	GL Description	DR Amount	CR Amount
05/07/2021	JE		Ref Num1: '4038'			
GL Trx #: 129548						
		CLAIMS -- EAP	504-935-0500-61422000	CLAIMS -- EAP	583.78	
		HEALTH ACCOUNT CASH	504-000-0000-11016000	HEALTH ACCOUNT CASH		583.78
		HEALTH ACCOUNT CASH	504-000-0000-11016000	HEALTH ACCOUNT CASH	583.78	
		CASH	504-000-0000-11010000	CASH		583.78
					1,167.56	1,167.56
05/14/2021	JE		Ref Num1: '4039'			
GL Trx #: 129549						
		CLAIMS -- EAP	504-935-0500-61422000	CLAIMS -- EAP	753.05	
		HEALTH ACCOUNT CASH	504-000-0000-11016000	HEALTH ACCOUNT CASH		753.05
		HEALTH ACCOUNT CASH	504-000-0000-11016000	HEALTH ACCOUNT CASH	753.05	
		CASH	504-000-0000-11010000	CASH		753.05
					1,506.10	1,506.10
05/17/2021	JE		Ref Num1: '4040'			
GL Trx #: 129550						
		PAID LIABILITY CLAIMS	580-945-0100-61402000	PAID LIABILITY CLAIMS	50,000.00	
		HEALTH ACCOUNT CASH	580-000-0000-11016000	HEALTH ACCOUNT CASH		50,000.00
		HEALTH ACCOUNT CASH	580-000-0000-11016000	HEALTH ACCOUNT CASH	50,000.00	
		CASH	580-000-0000-11010000	CASH		50,000.00
					100,000.00	100,000.00
05/19/2021	JE		Ref Num1: '4051'			
GL Trx #: 129559						
		SALES TAX PAID	601-906-8100-63998000	SALES TAX PAID	14,212.75	
		TAX ACCOUNT CASH	601-000-0000-11018000	TAX ACCOUNT CASH		14,212.75
					14,212.75	14,212.75
05/19/2021	JE		Ref Num1: '4052'			
GL Trx #: 129560						
		SALES TAX PAID	780-906-8100-63998000	SALES TAX PAID	1,102.23	
		TAX ACCOUNT CASH	780-000-0000-11018000	TAX ACCOUNT CASH		1,102.23
					1,102.23	1,102.23
05/19/2021	JE		Ref Num1: '4065'			
GL Trx #: 130501						
		SALES TAX PAID	780-906-8100-63998000	SALES TAX PAID	5.87	
		CASH	780-000-0000-11010000	CASH		5.87
		MISCELLANEOUS REVENUES	204-551-0100-46001000	MISCELLANEOUS REVENUES		5.87
		CASH	204-000-0000-11010000	CASH	5.87	
					11.74	11.74