

Scotia-Glenville Central School District
900 Preddice Parkway, Scotia, NY 12302

Warrant Number: A-67
Checks Dated: 3/21/2025

Number of Payments: 3
Voided Checks: None

Wires Numered: 1038-1040
Checks Numbered: None

Amount of Warrant: \$2,047.50

Findings Summary

| Description | Number | Check # | Amount | Department | Resolution |
|------------------------------------|--------|---------|--------|------------|------------|
| No claims auditing findings noted. | | | | | |

4/2/25 Dorie A. Nunn

SCOTIA-GLENVILLE CSD



Check Warrant Report For A - 67: 3/21/25 PAY - RECREATE 1/31/25 VOIDED CHECKES For Dates 3/1/2025 - 3/31/2025

| Check # | Check Date | Vendor ID | Vendor Name | Explanation | Invoice Number | Check Description | Check Amount | Liquidated |
|-----------|----------------------|-----------|------------------------|-------------|----------------|------------------------|--------------|------------|
| Account | Account Description | | | | | PO Number | | |
| 1038 | 03/20/2025 | 2412 | SCOTIA-GLENVILLE CSD | | | Trust & Agency Payment | | |
| A 710 | CONSOLIDATED PAYROLL | | Trust & Agency Payment | | | | 1,390.61 | |
| | | | | | | Check Total: | 1,390.61 | |
| 1039 | 03/20/2025 | 7328 | NYS WITHHOLDING TAX | | | Trust & Agency Payment | | |
| A 721 | NYS INCOME TAX | | Trust & Agency Payment | | | | 13.27 | |
| | | | | | | Check Total: | 13.27 | |
| 1040 | 03/20/2025 | 7329 | EFTPS | | | Trust & Agency Payment | | |
| A 726FICA | FICA TAX | | Trust & Agency Payment | | | | 205.17 | |
| A 726FICA | FICA TAX | | Trust & Agency Payment | | | | 205.17 | |
| A 722 | FEDERAL INCOME TAX | | Trust & Agency Payment | | | | 136.74 | |
| A 726MED | MED TAX | | Trust & Agency Payment | | | | 48.27 | |
| A 726MED | MED TAX | | Trust & Agency Payment | | | | 48.27 | |
| | | | | | | Check Total: | 643.62 | |
| | | | | | | Warrant Total: | 2,047.50 | |
| | | | | | | Vendor Portion: | 2,047.50 | |

Number of Transactions: 3

Certification of Warrant

To The District Treasurer: I hereby certify that I have verified the above claims, 1038-1040 in number, in the total amount of \$ 2047.50. 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.

4/2/25
Date

Doreen Munn
Signature

Claims Auditor
Title

Certification of Warrant

To The District Treasurer: I hereby certify that I have audited the above claims in the total amount of \$ _____. 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

Auditor's Signature

Title