# CHAVES COUNTY BOARD OF COMMISSIONERS
## REGULAR BUSINESS MEETING AGENDA
## January 28, 2016 –9:00 a.m.
## Chaves County Administrative Center – Joseph R. Skeen Building
## Commission Chambers - #1 St. Mary's Place

**CALL TO ORDER**

**PLEDGE OF ALLEGIANCE**

**DETERMINATION OF QUORUM**

**APPROVAL OF MINUTES**

**AGENDA ITEMS**

**A. AGREEMENTS AND RESOLUTIONS**

1. A. Resolution R-16-001-Notice for Public Meetings for the Chaves County Board of Commissioners
   B. Resolution R-16-002-Notice for Public Meetings for the Chaves County Indigent Hospital/Health Care Board

2. Resolution R-15-054-Local Emergency/Disaster Declaration

3. Resolution R-16-003-Adopting Required Community Development Block Grant Policies and Certification for the Tobosa Building Addition Project

4. Resolution R-16-004-Support for Historic Rights-of-Ways Legislation H.R. 4313

5. Agreement A-16-001-between New Mexico Energy, Minerals and Natural Resources and Chaves County

**B. OTHER BUSINESS**

6. Ratification of Approval for 2017 Annual EMS Fund Act Applications and Service Reports

7. Request for Out of State Travel-Planning and Zoning Department

8. Adopting NMAC Healthcare Policy Committee Resolution 2016-01

9. 2016 Commission Committee Appointments

**APPROVAL OF CHECKS**

**APPROVAL OF REPORTS**

**UNSCHEDULED COMMUNICATIONS LIMITED TO FIVE MINUTES PER VISITOR**
**NO FORMAL ACTION TAKEN BY COMMISSION**

- **COUNTY MANAGER'S COMMUNICATIONS**
- **COMMISSIONER'S COMMUNICATIONS**
- **SIGNATURE OF DOCUMENTS**
- **ADJOURNMENT**

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If you are an individual with a disability who is in need of a reader, qualified sign language interpreter, or any form of auxiliary aid or service to attend or participate in the hearing of a meeting, please contact the County Commissioner's office at 575-624-6600. This should be done at least one week prior to the meeting. Public documents, including the agenda and minutes, can be provided in various accessible formats. Please contact the County Commissioner's office if a summary or other type of accessible format is needed.

**AGENDA ITEM: ____1___**

A. Resolution R-16-001-Notice for Public Meetings for the Chaves County Board of Commissioners

B. Resolution R-16-002-Notice for Public Meetings for the Chaves County Indigent Hospital/Health Care Board

**MEETING DATE:** January 28, 2016

## STAFF SUMMARY REPORT

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**ACTION REQUESTED BY:** Stanton L. Riggs

**ACTION REQUESTED:** Approve Resolutions

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**ITEM SUMMARY:**

In accordance with the Open Meetings Act, the Commission is required to publish a notice for public meetings each year. The attached resolutions, if approved, would establish Commission and Indigent Hospital/Health Care Board meetings once monthly on third Thursday of each month with IHC at 8:30 a.m. and Commission at 9:00 a.m.

Staff recommends approval.

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**SUPPORT DOCUMENTS:** Resolution R-16-001 and R-16-002

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**SUMMARY BY:** Stanton L. Riggs

**TITLE:** County Manager

**RESOLUTION R-16-001**
**NOTICE FOR PUBLIC MEETINGS**

**WHEREAS,** Section 10-15-1(D) of the Open Meetings Act (NMSA 1978, Sections 10-15-1 to –4) states, that, except as may be otherwise provided in the Constitution for the provisions of the Open Meetings Act, all meetings of a quorum of any members of any boards, counsel, commission, administrative adjudicatory body or other policy making body of any state or local public agency for the purpose of formulating public policy, discussing public business, or for the purpose of taking any action within the authority of or the delegated authority of such body, are declared to be public meetings open to the public at all times; and

**WHEREAS**, any meeting subject to the Open Meetings Act at which the discussion or adoption of any proposed resolution, rule, regulation or formal action occurs shall be held only after reasonable notice to the public; and

**WHEREAS**, Section 10-15-1(D) of the Open Meetings Act requires the Chaves County Commission to determine annually what constitutes reasonable notice of its public meetings.

**NOW, THEREFORE BE IT RESOLVED** by the Board of Chaves County Commissioners that:

1. The Chaves County Commission will meet once monthly. The meetings will be held at 9:00 a.m. on the third Thursday of each month, unless otherwise specifically changed by the Chairman with ten (10) days' notice. The meetings will be held in the Chaves County Commission Chambers of the Chaves County Administrative Center located at #1 St. Mary's Place Roswell, New Mexico.

2. The agenda will be available at least seventy-two (72) hours prior to the meeting from the County Commissioner's Office located in the Chaves County Administrative Center, Roswell, New Mexico. Notice of any other regular meeting will be ten (10) days in advance of the meeting date. The notice shall indicate how a copy of the agenda may be obtained.

3. The Chairman or a majority of the members upon three (3) days notice shall call special meetings. The notice shall include an agenda for the meeting or information on how members of the public may obtain a copy of the agenda. The agenda shall be available to the public at least seventy-two (72) hours before any special meeting.

4. Emergency meetings will be called only under unforeseen circumstances, which demand immediate action to protect the health, safety and property of citizens or to protect the public body from substantial financial loss.

5. The Board of County Commissioners will avoid emergency meetings whenever possible. The Chairman or majority of the members upon twenty-four (24) hours notice may call emergency meetings, unless threats of personal injury or property damage require less notice. The notice for all emergency meetings shall include an agenda for the meeting or information on how the public may obtain a copy of the agenda.

6. For the purpose of regular meetings described in paragraph 2 of this Resolution, notice requirements are met if notice of the date, time, place and agenda is placed in newspapers of general circulation in Chaves County in the State of New Mexico and posted on the bulletin board located in the west hallway of the Chaves County Administrative Building. Although not a requirement, the agenda will also be posted on the County website at www.co.chaves.nm.us. The County Commissioner's office shall also fax and/or e-mail copies of the written notice to those broadcast stations licensed by the Federal Communications Commission and newspapers of general circulation, which have made a written request for notice of public meetings.

7. For the purpose of special meetings and emergency meetings described in paragraph 3 and 4 of this Resolution, notice requirements shall be met by posting notice of the date, time and place and agenda on the bulletin board located in the west hallway of the Chaves County Administrative Building. The County Commissioner's office shall also fax copies of the written notice to those broadcast stations licensed by the Federal Communications Commission and newspapers of general circulation, which have made a written request for notice of public meetings.

8. In addition to the information specified above, all notices shall include the following language:

   *If you are an individual with a disability who is in need of a reader, qualified sign language interpreter, or any form of auxiliary aid, or service to attend or participate in the hearing of a meeting, please contact the County Commissioner's office at 575-624-6600. This should be done at least one week prior to the meeting. Public documents, including the agenda and minutes can be provided in various accessible formats. Please contact the County Commissioner's office if a summary or other type of accessible format is needed.*

9. A member of the Chaves County Board of Commissioners may participate by telephone or other similar communications equipment when it is difficult or impossible for the Commissioner to attend the meeting in person, provided that the Commissioner can be identified when speaking, all participants are able to hear each other at the same time and members of the public attending the meeting are able to hear any member of the Commission.

10. The Board of Commissioners may close a meeting to the public only if the subject matter of such discussion or action is exempted from the open meeting requirements under Section 10-15-1(H) of the Open Meetings Act.

    a. If any meeting is closed during an open meeting, such closure shall be approved by the majority vote of a quorum of the Commission taken during the open meeting. The authority for the closure and the subject to be discussed shall be stated with reasonable specificity in the motion for closure and the vote on closure on each individual member shall be

recorded in the minutes. Only those subjects specified in the motion may be discussed in the closed meeting.

b. If a decision to hold a closed meeting is made when the Commission is not in an open meeting, the closed meeting shall not be held until public notice, appropriate under the circumstances, stating the specific provisions of law authorizing the closed meeting and the subject to be discussed with reasonable specificity is given to the members and the general public.

c. Following completion of any closed meeting, the minutes of the open meeting that was closed, or the minutes of the next open meeting if the closed meeting was separately scheduled, shall state whether the matters discussed in the closed meeting were limited only to those specified in the motion for notice for closure.

d. Except as provided in Section 10-15-1(H) of the Open Meetings Act, any action taken as a result of discussions in the closed meetings shall be made by the vote of the Commission in an open public meeting.

Passed this 28th day of January, 2016.

**BOARD OF CHAVES COUNTY COMMISSIONERS**

_____
Robert Corn, Chairman

_____
William E. Cavin, Vice-Chairman

_____
James W. Duffey, Member

_____
Kim Chesser, Member

_____
Kyle D. “Smiley” Wooton, Member

**ATTEST:**

_____
Dave Kunko
County Clerk

**RESOLUTION R-16-002**
**NOTICE FOR PUBLIC MEETINGS**

**WHEREAS,** Section 10-15-1(D) of the Open Meetings Act (NMSA 1978, Sections 10-15-1 to –4) states, that, except as may be otherwise provided in the Constitution for the provisions of the Open Meetings Act, all meetings of a quorum of any members of any boards, counsel, commission, administrative adjudicatory body or other policy making body of any state or local public agency for the purpose of formulating public policy, discussing public business, or for the purpose of taking any action within the authority of or the delegated authority of such body, are declared to be public meetings open to the public at all times; and

**WHEREAS**, any meeting subject to the Open Meetings Act at which the discussion or adoption of any proposed resolution, rule, regulation or formal action occurs shall be held only after reasonable notice to the public; and

**WHEREAS**, Section 10-15-1(D) of the Open Meetings Act requires the Chaves County Commission/Chaves County Indigent Hospital/Health Care Board to determine annually what constitutes reasonable notice of its public meetings.

**NOW, THEREFORE BE IT RESOLVED** by the Board of Chaves County Commissioners/Chaves County Indigent Hospital/Health Care Board that:

1. The Chaves County Indigent Hospital/Health Care Board will meet once monthly to approve claims. The meetings will be held at 8:30 a.m. on the third Thursday of each month, unless otherwise specifically changed by the Chairman with ten (10) days' notice. The meetings will be held in the Chaves County Commission Chambers of the Chaves County Administrative Center located at #1 St. Mary's Place Roswell, New Mexico.

2. The agenda will be available at least seventy-two (72) hours prior to the meeting from the IHC Coordinator whose office is located in the Chaves County Administrative Center, Roswell, New Mexico. Notice of any other regular meeting will be ten (10) days in advance of the meeting date. The notice shall indicate how a copy of the agenda may be obtained.

3. The Chairman or a majority of the members upon three (3) days notice shall call special meetings. The notice shall include an agenda for the meeting or information on how members of the public may obtain a copy of the agenda. The agenda shall be available to the public at least seventy-two (72) hours before any special meeting.

4. Emergency meetings will be called only under unforeseen circumstances, which demand immediate action to protect the health, safety and property of citizens or to protect the public body from substantial financial loss.

5. The Chaves County Indigent Hospital/Health Care Board will avoid emergency meetings whenever possible. The Chairman or majority of the members upon twenty-four (24) hours notice may call emergency meetings, unless threats of personal injury or property damage require less notice. The notice for all

emergency meetings shall include an agenda for the meeting or information on how the public may obtain a copy of the agenda.

6. For the purpose of regular meetings described in paragraph 2 of this Resolution, notice requirements are met if notice of the date, time, place and agenda is placed in newspapers of general circulation in Chaves County in the State of New Mexico and/or posted on the bulletin board located in the west hallway of the Chaves County Administrative Building. Although not a requirement, the agenda will also be posted on the County website at www.co.chaves.nm.us. The IHC Coordinator shall also fax and/or e-mail copies of the written notice to those broadcast stations licensed by the Federal Communications Commission and newspapers of general circulation, which have made a written request for notice of public meetings.

7. For the purpose of special meetings and emergency meetings described in paragraph 3 and 4 of this Resolution, notice requirements shall be met by posting notice of the date, time and place and agenda on the bulletin board located in the west hallway of the Chaves County Administrative Building. The IHC office shall also fax copies of the written notice to those broadcast stations licensed by the Federal Communications Commission and newspapers of general circulation, which have made a written request for notice of public meetings.

8. In addition to the information specified above, all notices shall include the following language:

   *If you are an individual with a disability who is in need of a reader, qualified sign language interpreter, or any form of auxiliary aid, or service to attend or participate in the hearing of a meeting, please contact the IHC Coordinator at 575-624-6547.This should be done at least one week prior to the meeting. Public documents, including the agenda and minutes can be provided in various accessible formats. Please contact the IHC Coordinator if a summary or other type of accessible format is needed.*

9. A member of the Chaves County Indigent Hospital/Health Care Board may participate by telephone or other similar communications equipment when it is difficult or impossible for the Commissioner to attend the meeting in person, provided that the Commissioner can be identified when speaking, all participants are able to hear each other at the same time and members of the public attending the meeting are able to hear any member of the Commission.

10. The IHC Board may close a meeting to the public only if the subject matter of such discussion or action is exempted from the open meeting requirements under Section 10-15-1(H) of the Open Meetings Act.

    a. If any meeting is closed during an open meeting, such closure shall be approved by the majority vote of a quorum of the IHC Board taken during the open meeting. The authority for the closure and the subject to be discussed shall be stated with reasonable specificity in the motion for closure and the vote on closure on each individual member shall be

recorded in the minutes. Only those subjects specified in the motion may be discussed in the closed meeting.

b. If a decision to hold a closed meeting is made when the IHC Board is not in an open meeting, the closed meeting shall not be held until public notice, appropriate under the circumstances, stating the specific provisions of law authorizing the closed meeting and the subject to be discussed with reasonable specificity is given to the members and the general public.

c. Following completion of any closed meeting, the minutes of the open meeting that was closed, or the minutes of the next open meeting if the closed meeting was separately scheduled, shall state whether the matters discussed in the closed meeting were limited only to those specified in the motion for notice for closure.

d. Except as provided in Section 10-15-1(H) of the Open Meetings Act, any action taken as a result of discussions in the closed meetings shall be made by the vote of the IHC Board in an open public meeting.

Passed this 28th day of January, 2016.

**BOARD OF CHAVES COUNTY COMMISSIONERS**

_____
Robert Corn, Chairman

_____
William E. Cavin, Vice-Chairman

**ATTEST:**

_____
James W. Duffey, Member

_____
Kim Chesser, Member

_____
Dave Kunko
County Clerk

_____
Kyle D. “Smiley” Wooton, Member

**AGENDA ITEM: ___2____** Resolution R-15-054 Local Emergency / Disaster Declaration

**MEETING DATE:** January 28, 2016

**STAFF SUMMARY REPORT**

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**ACTION REQUESTED BY:** Stanton L. Riggs, County Manager

**ACTION REQUESTED:** Approve Resolution

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**ITEM SUMMARY:**

Chaves County declared an emergency on December 28, 2015 due to the record snow storm. At this time, we are requesting ratification of this declaration. The Declaration of Emergency is required prior to any reimbursements the County may receive.

Staff recommends approval.

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**SUPPORT DOCUMENTS:** Resolution # R-15-054

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**SUMMARY BY:** Stanton L. Riggs

**TITLE:** County Manager

# RESOLUTION R-15-054
# LOCAL EMERGENCY / DISASTER DECLARATION

WHEREAS, Chaves County has suffered severe damage caused by a blizzard on or about December 26, 2015 and extending through December 27, 2015; and,

WHEREAS, extensive damage was caused to County roads, private roads, personal property, including livestock, dairy cattle and agricultural related businesses; and,

WHEREAS, this incident has resulted in undue human suffering and hardship and threatens the safety, health, welfare, and well-being of the citizens and local economy of Chaves County; and,

WHEREAS, all locally available public and private resources available to mitigate and alleviate the effects of this disaster have been insufficient to meet the needs of the situation, make repairs, and protect the public safety.

NOW, THEREFORE, BE IT RESOLVED by the Board of Chaves County Commissioners, by virtue of the authority provided by New Mexico State Statute 4-1-1 and by the New Mexico Civil Emergency Preparedness Act, NMSA 1978, 12-10-01 to 12-20-11, do hereby declare Chaves County to be under a state of Disaster for the purpose of exercising necessary emergency powers, for expending local resources, and for requesting aid, assistance, relief programs, and funding that may be available from the State of New Mexico.

DONE this 28th day of December, 2015.

BOARD OF CHAVES COUNTY COMMISSIONERS

By: _____
James W. Duffey, Chairman

ATTEST:

_____
Dave Kunko, County Clerk

**AGENDA ITEM:** 3

Requesting Approval of Resolution R-16-003 adopting Required Community Development Block Grant Policies and Certification for the Tobosa Building Addition Project.

**MEETING DATE:** 1/28/16

**STAFF SUMMARY**

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**Action Requested by:** Georgianna Hunt, Community Development Division

**Action Requested:** Approval of Resolution R-16-003

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**Item Summary:**

Staff requests approval of Resolution R-16-003 a Resolution adopting the Community Development Block Grant Policies and Certifications to include:

Citizen Participation Plan
Fair Housing Resolution or Proclamation
Residential Anti-Displacement & Relocation Assistance Plan
Section 3 Plan
Procurement Code

These Certifications are required as a process of the Community Development Block Grant on behalf of the Tobosa Building Addition Project. Grant funding requested is in the amount of $496,136.00

Staff recommends approval.

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**SUPPORT DOCUMENTS:** **Resolution R-16-003**

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Summary by: Georgianna Hunt

Title: Community Development Project Specialist

# Chaves County

## RESOLUTION R-16-003

### ADOPTION OF REQUIRED
### COMMUNITY DEVELOPMENT BLOCK GRANT POLICIES
### & CERTIFICATIONS

**WHEREAS,** municipalities or other entities that accept Community Development Block Grant Funds must adopt certain mandated federal policies; and

**WHEREAS,** ***Chaves County,*** hereinafter referred to as the ***County*** wishes to ensure compliance with federal guidelines by adopting the following required policies or certifications:

| | |
|---|---|
| **Citizen Participation Plan -** | encourages citizen participation with particular emphasis on low and moderate income persons; outlines the objectives and plan to implement those objectives |
| **Fair Housing Resolution or Proclamation** | certifies commitment to further the efforts of Fair Housing which prohibits discrimination in the sale, rental, leasing and financing of housing or land to be used for the construction of housing on the basis of race, color, religion, sex, disability, familial status or national origin |
| **Residential Anti-Displacement & Relocation Assistance Plan -** | certifies that it will replace all occupied and vacant occupiable low/moderate-income dwelling unites demolished or converted to a use other than as a low/moderate income housing as a direct result of activities assisted with Housing and Community Development Funds |
| **Section 3 Plan -** | encourages the use of small local businesses and the hiring of low income residents of the community |
| **Procurement Code** | certifies that the ***County*** will comply with the New Mexico State Procurement Code |

**NOW, THEREFORE, BE IT RESOLVED,** that the ***County*** adopts the above CDBG policies and affirmations which will have to be re-adopted annually.

**PASSED, APPROVED, SIGNED AND ADOPTED** at a duly called and convened regular meeting of the governing body of the ***Chaves County*** this 28th day of January, 2016.

SIGNED: _____
Commission Chair

ATTEST: _____
County Clerk

# CITIZEN PARTICIPATION PLAN

**Introduction**

**In accordance with the 1987 revisions to the Housing and Community Development Act and in an effort to further encourage citizen participation, has prepared and adopted this Citizen Participation Plan.**

**Objective A**

***Chaves County* will provide for and encourage citizen participation within its area of jurisdiction, with particular emphasis on participation by persons of low and moderate income. *Action items:***

1. ***Adopt and circulate an Open Meetings Resolution which provides citizens with reasonable notice of county/municipality upcoming meetings, actions and functions.***

2. ***Develop press releases on county/municipalitymeetings, actions and hearings, and circulate to newspapers, radio and television media.***

3. ***Develop and maintain listing of groups and representative of low and moderate income persons, and include on mailing lists of announcements, notices, press releases, etc.***

**Objective B**

***Chaves County* will provide citizens with reasonable and timely access to local meetings, information and records relating to the proposed and actual use of CDBG funds. *Action items:***

1. ***Public notices, press releases, etc., should allow for a maximum length of notice to citizens.***

2. ***Appropriate information and records relating to the proposed and actual use of CDBG funds must be available upon request to all citizens. Personnel and income records may be exempted from these requirements.***

3. ***Meetings, hearing, etc., should be conducted at times and locations conducive to public attendance, e.g., evenings, Saturdays.***

**Objective C**

***Chaves County* will provide technical assistance to groups and representatives of low and moderate income persons that request assistance in developing proposals. *Note: the level and type of assistance is to be determined by the county/municipality. Action items:***

1. ***Low and moderate income groups should be advised that technical assistance, particularly in the area of community development, is available from the county/municipalityupon request.***

2. ***Document technical assistance provided to such groups and has documentation available for review.***

**Objective D**

***Chaves County* provide a minimum of two public hearings to obtain citizen participation and respond to proposals and questions at all stages of the Community Development Block Grant Program. *Action items:***

1. *Advise citizens of the CDBG program objectives, range of activities that can be applied for and other pertinent information.*

2. *Conduct a minimum of two public hearings:*

   a. *One public hearing will be held to advise citizens of the program objectives and range of activities that can be applied for, and to obtain the citizen's views on community development and housing needs, to include the needs of low and moderate income people. This hearing will take place prior to the selection of the project to be submitted to the state for CDBG funding assistance.*

   b. *A second public hearing will be held to review program performances, past use of funds and make available to the public its community development and housing needs, including the needs of low and moderate income families, and the activities to be undertaken to meet such needs.*

3. *Publish public hearing notices in the non-legal section of newspapers or in other local media. Evidence of compliance with these regulations will be provided with each CDBG application, i.e., hearing notice minutes of public meetings, list of needs and activities to be undertaken, etc. Amendments to goals, objectives and applications are also subject to public participation.*

**Objective E**

***Chaves County*** **will provide timely written answers to written complaints and grievances within 15 working days where practical.** *Action items:*

1. *Adopt complaint handling procedures or policies to insure that complaints or grievances are responded to within 15 days, if possible.*

2. *Allow for appeal of a decision to a neutral authority.*

3. *File a detailed record of all complaints or grievances and responses in one central location with easy public access.*

**Objective F**

***Chaves County*** **will identify how the needs of non-English speaking residents will be met in the case of public hearings where a significant number of residents can be reasonably expected to participate.** *Action items:*

1. *Identify areas where large majorities of non-English speaking persons reside and make appropriate provisions when issues affecting these areas are to be discussed at public meetings, hearings, etc. Appropriate provisions will include having interpreters available at the meeting and having briefing material available in the appropriate language.*

2. *Maintain records/rosters of public hearing attendees and proceedings to verify compliance with this objective.*

**CHAVES COUNTY herewith certifies to follow the Citizen Participation Plan described above and adopt the plan by resolution annually.**

**Plan Adoption Date:** 1/28/16

**Adoption Instrument:** R-16-003

**Certified By:** _____ 1/28/16

**County Commission Chair** **Date**

# FAIR HOUSING RESOLUTION

A resolution of the (County Commission) of Chaves County, adopting a fair housing policy, making known its commitment to the principle of fair housing, and describing actions it shall undertake to affirmatively further fair housing.

WHEREAS; the Housing and Community Development act of 1974 as amended requires that all applicant for Community Development Block Grants funds certify that they shall affirmatively further fair housing; and

WHEREAS; the Civil Rights Act of 1968 (commonly known as the Federal Fair Housing Act) and the Fair Housing Amendments Act of 1988 declare a national policy to prohibit discrimination in the sale, rental, leasing and financing of housing or land to be used for the construction of housing or in the provision of brokerage services, on the basis of race, color, religion, sex, disability, familial status or national origin; and

WHEREAS; fairness is the foundation of the American system and reflects traditional American values; and

WHEREAS; discriminatory housing practices undermine the strength and vitality of America and its people;

NOW, THEREFORE, BE RESOLVED THAT the (County Commisssion) of Chaves County hereby wish all persons living, working, doing business in or traveling through this County to know that: discrimination in the sale, rental, leasing, and financing of housing or land to be used for construction of housing, or in the provision of brokerage services on the basis of race, color, religion, sex, handicap, familial status or national origin is prohibited by Title VIII of the Fair Housing Act Amendments of 1988; and that it is the policy of Chaves County to implement programs, within the constraints of its resources, to ensure equal opportunity in housing for all persons regardless of race, color, religion, sex, handicap, familial status or national origin; and within available resources Chaves County will assist all persons who feel they have been discriminated against in housing issues on the basis of race, color, religion, sex, handicap, familial status or national origin to seek equality under existing federal and state laws to file a complaint with the New Mexico Attorney General's Office or the U.S. Department of Housing and Urban Development; and that Chaves County shall publicize this Resolution and thereby encouraging owners of rental properties, developers, builders and others involved with housing to become aware of their respective responsibilities and rights under the Fair Housing Amendments Act of 1988 and any applicable state or local laws or ordinances; and that Chaves County shall undertake the following actions to affirmatively further fair housing:

(List all such actions to include: mailing copies of this resolution to the real estate community, banks, developers, community organizations and local media; posting copies of this resolution at identified locations; distributing flyers; sponsoring schools)

PASSED AND ADOPTED BY THE (County Commisssion) of Chaves County on this 28th day of January of 2016.

(County Commisssion)

**CHAVES COUNTY** herewith certifies to follow the Fair Housing Resolution described above and adopt the plan by resolution annually.

**Plan Adoption Date:** 1/28/2016

**Adoption Instrument:** R-16-003

**Certified By:** _____ 1/28/2016

**County Commission Chair** **Date**

# CHAVES COUNTY

# Residential Anti-Displacementand Relocation Assistance Plan

## I. Background/Introduction

Section 104(d) of the Housing and Community Development Act of 1974, as amended (42 U.S.C. 5304(d)(4)), Section 105(b)(16) of the Cranston-Gonzalez National Affordable Housing Act (42 U.S.C. 12705(b)(16)), and implementing regulations at 24 CFR Part 42, specify that a grantee under the Community Development Block Grant (CDBG) must certify that it has in effect and is following a "residential Anti-displacement and relocation assistance plan" (Plan). As a CDBG grantee, CHAVES COUNTY must certify to State of New Mexico Department of Finance and Administration Local Government Division that it has and is following such a Plan.

The Plan must include three components: 1) one-for-one replacement requirements for lower-income housing units, 2) relocation assistance, and 3) a description of the steps CHAVES COUNTY will take to minimize displacement.

## II. Activities Covered by the Plan

All activities involving the use of CDBG funds that cause displacement as a direct result of demolition or conversion of a lower-income dwelling are subject to the requirements specified in the Plan. Activities for which funds are first obligated on or after September 30, 1988 are subject to the requirements specified in the Plan, without regard to the source year of the funds.

## III. Uniform Relocation Act

The Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970, as amended (URA) govern displacement that directly results from acquisition, rehabilitation, or demolition of real property when federal funds are used. CHAVES COUNTY Residential Anti-displacement and Relocation Assistance Plan is in no way intended to supersede the URA. CDBG assisted activities may still be subject to the requirements of the URA.

## IV. One-for-One Replacement Units

All occupied and vacant occupiable lower-income dwelling units that are demolished or converted to a use other than as lower-income dwelling units in connection with an assisted activity must be replaced with comparable lower-income units. Replacement lower-income dwelling units may be provided by any governmental agency or private developer and must meet the following requirements:

A. The units must be located within CHAVES COUNTY to the extent feasible, the units shall be located within the same neighborhood as the units replaced

B. The units must be sufficient in number and size to house no fewer than the number of occupants who could have been housed in the units that are demolished or converted. The number of occupants who could have been housed in the units shall be in accordance with

applicable local housing occupancy codes. The units may not be replaced with smaller units (e.g., a 2-bedroom unit with two 1-bedroom units), unless **CHAVES COUNTY** has provided information demonstrating that such a proposed replacement is consistent with the needs assessment contained State of New Mexico Department of Finance and Administration Local Government Division HUD-approved Consolidated Plan.

C. The units must be in standard condition and must at a minimum meet Section 8 Program Housing Quality Standards. Replacement lower-income units may include units brought from a substandard condition to standard condition if: 1) no person was displaced from the unit; and 2) the unit was vacant for at least 3 months before execution of the agreement between **CHAVES COUNTY** and the property owner.

D. The units must initially be made available for occupancy at any time during the period beginning 1 year before the recipient makes public the information required under Section F below and ending 3 years after the commencement of the demolition or rehabilitation related to the conversion.

E. The units must be designed to remain lower-income dwelling units for at least 10 years from the date of initial occupancy. Replacement lower-income dwelling units may include, but are not limited to, public housing or existing housing receiving Section 8 project-based assistance

F. Before **CHAVES COUNTY** enters into a contract committing it to provide CDBG funds for any activity that will directly result in the demolition of lower-income dwelling units or the conversion of lower-income dwelling units to another use, **CHAVES COUNTY** must make public and submit in writing to State of New Mexico

Department of Finance and Administration Local Government Division the following information:

1. A description of the proposed assisted activity;
2. The location on a map and number of dwelling units by size (number of bedrooms) that will be demolished or converted to a use other than for lower-income dwelling units as a direct result of the assisted activity;
3. A time schedule for the commencement and completion of the demolition or conversion;
4. The location on a map and the number of dwelling units by size (number of bedrooms) that will be provided as replacement dwelling units. If such data is not available at the time of the submission to State of New Mexico Department of Finance and Administration Local Government Division, the submission shall identify the general location on an area map and the approximate number of dwelling units by size, and information identifying the specific location and number of dwellings units by size shall be submitted and disclosed to the public as soon as it is available;
5. The source of funding and time schedule for the provision of replacement dwelling units;
6. The basis for concluding that each replacement unit will remain a lower-income dwelling unit for at least 10 years from the date of initial occupancy; and
7. Information demonstrating that any proposed replacement of dwelling units with smaller dwelling units is consistent with the needs assessment contained in the State of New Mexico Department of Finance and Administration Local Government Division Consolidated Plan.

G. The one-for-one replacement requirements may not apply if HUD determines, based on objective data, that there is an adequate supply of vacant lower-income dwelling units in standard condition available on a non-discriminatory basis within **CHAVES COUNTY**. In making such a determination, State of New Mexico Department of Finance and Administration Local Government Division will consider such factors as vacancy rates, numbers of lower-income units in **CHAVES COUNTY** and the number of eligible families on the Section 8 waiting list.

## V. Relocation Assistance

Each lower-income person who is displaced as a direct result of CDBG assisted demolition or conversion of a lower-income dwelling shall be provided with relocation assistance.

Relocation assistance includes advisory services and reimbursement for moving expenses, security deposits, credit checks, other moving expenses, including certain interim living costs, and certain replacement housing assistance.

Displaced persons have the right to elect, as an alternative to the benefits described in this Plan, to receive benefits under the URA, if they determine that it is in their best interest to do so. The following relocation assistance shall be available to lower-income displacement persons:

A. Displaced lower-income persons will receive the relocation assistance required under 49 CFR 24, Subpart C (General Relocation Requirements) and Subpart D (Payment for Moving and Related Expenses) whether the person elects to receive assistance under the URA or the assistance required by CDBG regulations. Relocation notices must be distributed to the affected persons in accordance with 49 CFR 24.203 of the URA;

B. The reasonable and necessary cost of any security deposit required to rent the replacement dwelling unit and for credit checks required to rent or purchase the replacement dwelling unit;

C. Actual reasonable out-of-pocket costs incurred in connection with temporary relocation, including moving expenses and increased housing costs, if:

1. The person must relocate temporarily because continued occupancy of the dwelling unit constitutes a substantial danger to the health or safety of the person or the public; or
2. The person is displaced from a lower-income dwelling unit, none of the comparable replacement units to which the person has been referred qualifies as a lower-income dwelling unit, and a suitable lower-income dwelling unit is scheduled to become available through one-for-one replacement requirements

D. Replacement Housing Assistance. Displaced persons are eligible to receive one of the following two forms of replacement housing assistance:

1. Each person shall be offered rental assistance equal to 60 times the amount necessary to reduce the monthly rent and estimated average monthly cost of utilities for a replacement dwelling to the "Total Tenant Payment", as determined under 24 CFR 813.107. All or a portion of this assistance may be offered through a certificate or housing voucher for rental assistance under the Section 8 program.

Where Section 8 assistance is provided to the displaced person, **CHAVES COUNTY** must provide the person with
referrals to comparable units whose owners are willing to participate in Section 8 program to the extent that cash assistance is provided, it will be provided in installments.

2. In lieu of the housing voucher, certificate or cash assistance described above, the person may elect to receive a lump sum payment allowing them to secure participation in a housing cooperative or mutual housing association. This lump sum payment shall be equal to the capitalized value of 60 monthly installments of the amount that is obtained by subtracting the

   "Total Tenant Payment", as determined under 24 CFR 813.107, from the monthly cost of rent and average monthly cost of utilities at a comparable replacement dwelling unit. To compute the capitalized value, the installments shall be discounted at the rate of interest paid on passbook savings in a federally insured financial institution conducting business within **CHAVES COUNTY.**

Displaced lower-income tenants shall be advised of their right to elect relocation assistance pursuant to the URA and the regulations at 49 CFR 24 as an alternative to the relocation assistance available under CDBG regulations.

## VI. Eligibility for Relocation Assistance

A lower-income person is eligible for relocation assistance if they are considered to be a "displaced person" as defined in 24 CFR 42.305. A displaced person means a lower-income person who, in connection with an activity assisted under the CDBG program, permanently moves from real property or permanently moves personal property from real property as a direct result of demolition or conversion of a lower-income dwelling.

For purposes of this definition, a permanent move includes a move made permanently and:

A. After notice by the owner to move from the property, if the move occurs on or after the date of the submission of a request to **CHAVES COUNTY** for CDBG assistance that is later approved for the requested activity; or

B. After notice by the owner to move from the property, if the move occurs on or after the date of the initial official submission to HUD of the consolidated plan under 24 CFR Part 91 describing the assisted activity; or

C. Before the dates described in A & B above, if **CHAVES COUNTY** or State of New Mexico Department of Finance and Administration Local Government Division determines that the displacement was a direct result of conversion or demolition in connection with a CDBG assisted activity; or

D. By a tenant-occupant of a dwelling unit, if any one of the following three situations occurs:

   1. The tenant moves after execution of the CDBG agreement covering the acquisition, rehabilitation or demolition and the move occurs before the tenant is provided written notice offering the tenant the opportunity to lease and occupy a suitable, decent, safe and sanitary dwelling in the same building/complex upon completion of the project under reasonable terms and conditions, including a

monthly rent and estimated average monthly utility costs that do not exceed the greater of the tenant's monthly rent before such agreement, or the total tenant payment as determined under 24 CFR 813.107 if the tenant is lower-income, or 30 percent of gross household income if the tenant is not lower-income.

2. The tenant is required to relocate temporarily, does not return to the building/complex, and either is not offered payment for all reasonable out-of-pocket expenses incurred in connection with the temporary relocation, or other conditions of the temporary relocation are not reasonable.

3. The tenant is required to move to another dwelling unit in the same building/complex but is not offered reimbursement for all reasonable out-of-pocket expenses incurred in connection with the move, or other conditions of the move are not reasonable.

If the displacement occurs on or after the appropriate date described in A & B above, the lower-income person is not eligible for relocation assistance if:

A. The person is evicted for cause based upon a serious or repeated violation of the terms and conditions of the lease or occupancy agreement, violation of applicable federal, State or local law, or other good cause, and **CHAVES COUNTY** determines that the eviction was not undertaken for the purpose of evading the obligation to provide relocation assistance;

B. The person moved into the property on or after the date described in A & B above after receiving written notice of the expected displacement; or

C. **CHAVES COUNTY** determines that the displacement was not a direct result of the CDBG assisted activity and the State of New Mexico Department of Finance and Administration Local Government Division concurs with this determination.

## VII. Minimizing Displacement

The CDBG regulations regarding the demolition or conversion of lower-income dwelling units are designed to ensure that lower-income persons are provided with adequate, affordable replacement housing. Naturally, involuntary displacement should be discouraged whenever a reasonable alternative exists. Involuntary displacement is extremely disruptive and disturbing, especially to lower-income persons who do not have the means to locate alternative housing.

There are various ways that displacement can be minimized. The following are steps that will be taken to minimize the involuntary displacement of lower-income persons when CDBG funds are involved:

A. Screening of Applications All CDBG applications will be reviewed to determine whether involuntary displacement is likely to occur. Those applications involving displacement will receive a lower priority recommendation for funding unless it can be shown that alternatives are not available.

B. Acquisition of Property Applicants who apply for CDBG funds to acquire property for the development of lower-income housing will be encouraged to purchase vacant land. In the case of in-fill and other projects where this is not feasible and the project involves potential displacement, the applicant shall agree to allow the displaced lower-income person(s) to

occupy the new housing at an affordable rent.

Applicants who utilize CDBG funds to rehabilitate or convert a lower-income unit to a non-residential use will be required to supply replacement housing consistent with paragraph IV, as well as relocation assistance.

C. Cost of Relocation Assistance The cost of any required relocation assistance and the provision of replacement housing will be borne by the applicant and may be paid for out of CDBG funds awarded to the project.

## VIII. Definitions

A. "Comparable replacement dwelling unit" means a dwelling unit that:
   1 Meets the criteria of 49 CFR 24.2(d)(1) through (6); and

   2 Is available at a monthly cost for rent plus estimated average monthly utility costs that does not exceed the "Total Tenant Payment" determined under 24 CFR 813.107 after taking into account any rental assistance the household would receive.

B. "Lower-income dwelling unit" means a dwelling unit with a market rental (including utility costs) that does not exceed the applicable Fair Market Rent (FMR) for existing housing and moderate rehabilitation established under 24 CFR Part 888.

C. "Standard condition" means units that at a minimum meet the Existing Housing Quality Standards of the Section 8 rental subsidy program.

D. "Substandard condition suitable for rehabilitation" means units with code violations that can be brought to Section 8 Housing Quality Standards within reasonable monetary amounts.

E. "Vacant occupiable dwelling unit" means a dwelling unit that is in a standard condition; a vacant dwelling unit that is in substandard condition, but is suitable for rehabilitation; or a dwelling unit in any condition that has been occupied (except by a squatter) at any time within the period beginning 3 months before the date of execution of the agreement by the CHAVES COUNTY covering the rehabilitation or demolition.

## IX. Grievances

CHAVES COUNTY will provide timely written answers to written complaints and grievances within 15 working days where practical. Action items:

A. Adopt complaint handling procedures or policies to insure that complaints or grievances are responded to within 15 days, if possible.

B. Allow for appeal of a decision to a neutral authority.

C. File a detailed record of all complaints or grievances and responses in one central location with easy public access.

## IX. Certification

**CHAVES COUNTY** herewith certifies to follow the Anti-displacement relocation plan described above and adopt the plan by resolution annually.

**Plan Adoption Date:** 1/28/2016

**Adoption Instrument:** R-16-003

**Certified By:** _____ 1/28/2016

**County Commission Chair** **Date**

# SECTION 3 PLAN

**Chaves County** is committed to comply with Section 3 of the Housing and Urban Development Act of 1968. This Act encourages the use of small local businesses and the hiring of low income residents of the community.

**Chaves County** has appointed Susan Goldstrom as the Section 3 Coordinator, to advise and assist key personnel and staff on Section 3, to officially serve as focal point for Section 3 complaints, and as the on-site monitor of prime contractors and sub-contractors to insure the implementation and enforcement of their Section 3 plans. The approval or disapproval of the Section 3 plan is the ultimate responsibility of the . Documentation of efforts will be retained on file for monitoring by the state.

Therefore, **Chaves County** shall:

1. Hiring
   a. Advertise for all **County** positions in local newspapers
   b. List all **County** job opportunities with the State Employment Service
   c. Give preference in hiring to lower income persons residing in the **County**. This means that if two equally qualified persons apply and one is a resident of the **County** and one is not, the resident will be hired
   d. Maintain records of the **County** hiring as specified on this form

| ANTICIPATED HIRING YEAR 2016 Not applicable | | | 0 | |
|---|---|---|---|---|
| PLANNED -0- | | | ACTUAL -0- | |
| Job Classification | # of Positions to be Filled | # of Positions to be Filled by Lower Income **County** Residents | # of Positions Filled | Positions Filled by Lower Income **County** Residents |
| | | | | |
| | | | | |
| | | | | |

- Chart for Section 3 Plan **MUST** be filled out in its entirety.

2. Contracting

a. The **County** will compile a list of businesses, suppliers and contractors located in the **County**.

b. These vendors will be contacted for bid or quotes whenever the **County** requires supplies, services or construction.

c. Preference will be given to small local businesses. This means if identical bids/quotes are received from a small business located within the **County** and one from outside the **County**, the contract will be awarded to the business located within the community.

3. Training

**Chaves County** shall maintain a list of all training programs operated by the **County** and its agencies and will direct them to give preference to the **County** residents. The **County** will also direct all CDBG sponsored training to provide preference to the **County** residents.

4. CDBG Contracts

All CDBG bid proposals and contracts shall include the following Section 3 language.

a. The work to be performed under this contract is on a project assisted under a program providing direct federal financial assistance from the Department of Housing and Urban Development and is subject to the requirements of Section 3 of the Housing and Urban Development Act of 1968, as amended, 12 U.S.C. 170lu. Section 3 requires that the greatest extent feasible, opportunities for training and employment be given lower income residents of the project areas, and contracts for work in connection with the project be awarded to business concerns residing in the project area.

b. The parties to this contract will comply with the provision of said Section 3 and the regulations issued pursuant thereto by the Secretary of Housing and Urban Development set forth in 24 CFR and all applicable rules and orders of the Department issued there-under prior to the execution of this contract. The parties to this contract certify and agree that they are under no contractual or other disability which would prevent them from complying with these requirements.

c. The contractor will send to each labor organization or representative of workers with which he has a collective bargaining agreement or other contract or understanding, if any, a notice advising the said labor organization or workers' representative of his commitments under the Section 3 clause, and shall post copies of the notice in conspicuous places available to employees and applicants for employment or training.

d. The contractor will include this Section 3 clause in every subcontract for work in connection with the project and will, at the direction of the applicant for, or recipient of federal financial assistance, take appropriate action pursuant to the subcontract upon a finding that the subcontractor is in violation of regulations issued by the Secretary of Housing and Urban Development, 24 CFR 135. The contractor will not subcontract with any subcontractor where it has notice or knowledge that the latter has been found in violation of regulations under 24 CFR

135, and will not let any subcontract unless the subcontractor has first provided it with the requirements of these regulations.

e. Compliance with the provisions of Section 3, the regulations set forth in 24 CFR 135, and all applicable rules and orders of the Department, issued thereunder prior to the execution of the contract, shall be a condition of the federal financial assistance provided to the project, binding upon the applicant or recipient for such assistance, its successors and assigns. Failure to fulfill these requirements shall subject the applicant or recipient, its contractors and subcontractors, its successors and assigns to those sanctions specified by the grant or loan agreement or contract through which federal assistance is provided, and to such sanctions as are specified by 24 CFR 135.

**Chaves County** shall require each contractor to prepare a written Section 3 plan as a part of their bids on all jobs exceeding $100,000. All Section 3 plans shall be reviewed and approved by the County's Equal Opportunity Section 3 Compliance Officer and retained for monitoring by the state.

**Chaves County** will maintain all necessary reports and will insure that all contractors and subcontractors submit required reports.

LOWER INCOME CLARIFICATION

A family who resides in and whose income does not exceed the income limit for the size of family as per the attached Section 8 Income Limit for the **County**. Information contained in our Section 3 Plan reflects the status of the **County** employees regarding lower income considerations based on their salary paid by the **County**.

_____

Chief Executive Officer

1/28/2016

_____

Date

# Fair Housing Self-Assessment

**COMMUNITY OF:** **CHAVES COUNTY**

1. To the best of your knowledge has your community been involved in any complaints regarding discrimination the sale or rental of housing on the basis of race, color, religion, sex, national origin, familial status or handicap?

Yes ☐ No ☑

2. If yes, give a brief description of the nature of any complaints and resolutions.

Yes ☐ No ☐

3. Has your community adopted a Fair Housing Program to help local citizens be aware of their rights regarding fair housing under federal and state law, and in filing a complaint if discrimination is suspected?

Yes ☑ No ☐

4. What do you perceive as the most potentially serious problem areas regarding discrimination in fair housing in your community?

| Problem Area | Very Serious | Serious | Moderate | Not a Problem |
|---|---|---|---|---|
| Color | | | | ☑ |
| Familial Status | | | | ☑ |
| Handicap | | | | ☑ |
| National Origin | | | | ☑ |
| Race | | | | ☑ |
| Religion | | | | ☑ |
| Sex | | | | ☑ |

5. Does your community contain any subsidized housing units?

Yes ☑ No ☐

6. As best as can be determined, do relevant public policies/practices regarding zoning and building codes have an adverse impact on the achievement of fair housing choice?

Yes ☐ No ☑

7. Are you aware of any practices in the local real estate community as it relates to buying, selling and house rentals that may adversely affect the achievement of fair housing choice in your community?

Yes ☐ No ☑

8. Do your community records contain data on the actual number and percentage of persons residing in the community by race, color, religion, sex, national origin, age, handicap and familial status, as well as income characteristics by group?

Yes ☑ No ☐

9. Is information available to you that list major local employers by type and the number of people employed within your community by salary and racial group?

Yes ☑ No ☐

10. Is there public transportation available in your community?

Yes ☑ No ☐

11. Do your community records contain data on the total number of housing units in the community by type, and the number of vacant units?

Yes ☑ No ☐

12. Does your community contain any housing for the handicapped such as group homes, independent living complexes, etc.?

Yes ☑ No ☐

13. Has your community participated in the CDBG program prior to 1993?

Yes ☑ No ☐

14. Has your community been involved with any other state or federal programs that required the reporting of specific fair housing information?

Yes ☐ No ☑

01/28/2016

**Signature of Authorized County Official** **Date**

**AGENDA ITEM:** __4_____

Resolution R-16-004 Support for Historic Rights-of-Ways Legislation H.R. 4313

**MEETING DATE:** January 28, 2016

## STAFF SUMMARY REPORT

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**ACTION REQUESTED BY:** Stanton L. Riggs, County Manager

**ACTION REQUESTED:** Approve Resolution

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**ITEM SUMMARY:**

This resolution supports H.R. 4313. H.R. 4313 is designed to have a low cost method of the Federal government confirming R.S. 2477 Right-of-Ways. Currently the process by which a local government can confirm R.S. 2477 Right-of-Ways requires a quiet title action through Federal District Court. H.R. 4313 would eliminate this costly process and assist local governments in managing right-of-ways across federal lands.

Staff recommends approval.

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**SUPPORT DOCUMENTS:** Resolution # R-16-004 with Public Lands Steering Committee Support Document

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**SUMMARY BY:** Stanton L. Riggs

**TITLE:** County Manager

## PUBLIC LANDS STEERING COMMITTEE

## SUPPORT FOR HISTORIC RIGHTS-OF-WAYS LEGISLATION

**Issue:** While the NACo platform supports resolution of the claims of counties under R.S. 2477, it is general in nature, and the process in place requires quieting title through Federal District Court litigation and action. H.R. 4313, 114th Congress, has been introduced to provide an efficient and cost-effective method for the federal government to confirm such claims

**Proposed Policy**: NACo supports passage of H.R. 4313, and introduction, consideration and passage in the Senate of this bill or a companion creating an administrative process for confirming historic rights-of-ways on federal lands for qualifying roads, including the waiver of the statute of limitations regarding timely filing of such applications where qualifying roads cross "reserved" land.

**Background**: R.S. 2477 was repealed by the Federal Land Policy and Management Act of 1976 (FLPMA). Rights created under it were grandfathered. In the intervening 39 years the federal agencies have tried to impose a variety of resolutions on counties for confirming such rights-of-way, including only considering roads which have been substantially improved, e.g. with paving. The 2005 decision of the 10th Circuit Court of Appeals confirmed the rights-of-ways do exist, but set forth a confirmation process requiring the claimant to file a quiet title action in Federal District Court. Further, when "reserves" were created by Congressional or Administration action, e.g. land withdrawals, creation of National Park units, etc. a 12-year statute of limitations required immediate filing or the existence of the right-of-way could be held to be void, even as counties continued to maintain such routes, and the public utilized them. Meanwhile, none of the routes that exist under R.S. 2477 are recognized to exist on the official land records of the United States: the Master Title Plats (MTPs) maintained by the Bureau of Land Management (BLM).

The alternative means of recognizing such claims (suggested at various times by the BLM) is for counties to initiate an application under Title V of FLPMA. Using this however, can open the very existence of the route to question, and subjects such claim for an <u>existing road which already has a right-of-way granted under R.S. 2477,</u> to review under the National Environmental Policy Act (NEPA), Endangered Species Act (ESA), and the Section 106 of the Antiquities Act, among others, adding to costs as well as creating the need for expensive mitigation measures.

**Fiscal/Urban/Rural Impact:** Application under the proposed legislation would be voluntary, but must be taken within 25 years. For counties wishing to confirm their federal rights-of-way, the Secretary of the Interior will likely establish a filing fee, may require cost recovery for review. However, since review requires no field verification, and only consideration of the proof submitted, such costs should be quite low, as compared to filing for quiet title in Federal Court. There is no impact on either rural or urban interests in any county using the process, but there will be future clarity that the county has a legal and confirmed right-of-way and is expending funds for maintenance on a properly documented public road.

**Sponsor**: John Martin, Commissioner, Garfield County Colorado; Buster Johnson, Supervisor, Mohave County Arizona

**RESOLUTION R-16-004**
**SUPPORT FOR HISTORIC RIGHTS-OF-WAYS LEGISLATION H.R. 4313**

WHEREAS, the United States Congress granted a right-of-way for the construction of highways over public lands not otherwise reserved in Section 8 of the federal "Mining Law of 1866," reenacted and re-codified as Revised Statutes 2477, 43 U.S.C. §932; and

WHEREAS, R.S. 2477 was repealed by the Federal Land Policy and Management Act of 1976 (FLPMA). Rights created under RS-2477 were grandfathered; and

WHEREAS, in the intervening 39 years the federal agencies have tried to impose a variety of resolutions on counties for confirming such rights-of-way, including only considering roads which have been substantially improved, e.g. with paving; and

WHEREAS, the 2005 decision of the 10th Circuit Court of Appeals confirmed the rights-of-ways do exist, but set forth a confirmation process requiring the claimant to file a quiet title action in Federal District Court; and

WHEREAS, when "reserves" were created by Congressional or Administration action, e.g. land withdrawals, creation of National Park units, etc. a 12-year statute of limitations required immediate filing or the existence of the right-of-way could be held to be void, even as counties continued to maintain such routes, and the public utilized them; and

WHEREAS, none of the routes that exist under R.S. 2477 are recognized to exist on the official land records of the United States: the Master Title Plats (MTPs) maintained by the Bureau of Land Management (BLM); and

WHEREAS, the alternative means of recognizing such claims (suggested at various times by the BLM) is for counties to initiate an application under Title V of FLPMA; and

WHEREAS, using this however, can open the very existence of the route to question, and subjects such claim for an <u>existing road which already has a right-of-way granted under R.S. 2477,</u> to review under the National Environmental Policy Act (NEPA), Endangered Species Act (ESA), and the Section 106 of the Antiquities Act, among others, adding to costs as well as creating the need for expensive mitigation measures; and

WHEREAS, H.R. 4313, 114th Congress, has been introduced to provide an efficient and cost-effective method for the federal government to confirm such claims.

NOW, THEREFORE, BE IT RESOLVED that the Chaves County Board of Commissioners supports passage of H.R. 4313, and introduction, consideration and passage in the Senate of this bill or a companion creating an administrative process for confirming historic rights-of-ways on federal lands for qualifying roads, including the waiver of the statute of limitations regarding timely filing of such applications where qualifying roads cross "reserved" land.

DONE this 28th day of January, 2016.

BOARD OF CHAVES COUNTY COMMISSIONERS

_____
Robert Corn, Chairman

_____
William E. Cavin, Vice Chairman

ATTEST:

_____
Kim Chesser, Member

_____
Kyle D. “Smiley” Wooton, Member

_____
Dave Kunko
County Clerk

_____
James W. Duffey, Member

**AGENDA ITEM:** 5

Requesting Approval of Grant Agreement A-16-001 between New Mexico Energy, Minerals and Natural Resources and Chaves County on behalf of the East Grand Plains Volunteer Fire Department for a VFA Grant in the amount of $18,051.00.

**MEETING DATE:** 1/28/16

## STAFF SUMMARY

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**Action Requested by:** Georgianna Hunt, Community Development Division

**Action Requested:** Approval of Agreement A-16-001

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**Item Summary:**

Staff requests approval of Agreement #A-16-001 between Chaves County and the New Mexico Department of Energy, Minerals and Natural Resources Department for a Volunteer Fire Assistance Grant in the amount of $18,051.00 on behalf of the East Grand Plains Volunteer Fire Department for the purpose of purchasing Wildland Personal Protective Equipment and Wildland Firefighting Equipment. This Grant has a 10% cash match requirement for a total project budget of $19,856.10.

Staff recommends approval.

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**SUPPORT DOCUMENTS:** Agreement #A-16-001

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Summary by: Georgianna Hunt

Title: Community Development Project Specialist

# GRANT AWARD AGREEMENT BETWEEN THE NEW MEXICO ENERGY, MINERALS AND NATURAL RESOURCES DEPARTMENT AND THE CHAVES COUNTY

**THIS AGREEMENT** is made and entered into by and between the New Mexico Energy, Minerals and Natural Resources Department (EMNRD) and Chaves County for the East Grand Plains Volunteer Fire Department (EGPVFD).

This Agreement is entered by EMNRD's authority at NMSA 1978, §§ 68-2-6 and 68-2-8 and is subject to all federal legislation, regulations, and policies applicable to the U.S. Department of Agriculture, National Fire Plan - Volunteer Fire Assistance Program (VFA).

The parties mutually agree:

1. Scope of Work: EGPVFD shall purchase Personal Protection Equipment (PPE) or Fire Fighting Equipment (FFE) designated under the State of New Mexico – General Services, Price Agreement 40-521-14-05639 (Price Agreement). EMNRD's Forestry Division (Division) will provide EGPVFD with a copy of the Price Agreement with the Notice to Proceed.

A. EGPVFD may purchase the PPE or FFE directly from the Price Agreement or from another source as long as EGPVFD follows its own procurement rules and policy when selecting a vendor. Firefighting boots, and individual items with a cost greater than $5,000.00 are not eligible for purchase under this Agreement.

B. Communications equipment (portable and handheld radios) is eligible for purchase under this Agreement. All communications equipment EGPVFD purchases must be "Project 25" compliant (a national standard for communications equipment) and field programmable. No individual radio can cost more than $5,000.00.

C. EGPVFD has discretion as to the amount of equipment it acquires under this Agreement, as long as the items are covered under the Price Agreement. Any changes to or deviation from the items listed in the Price Agreement requires the EMNRD VFA Coordinator's written consent.

2. Compensation:

A. EMNRD shall reimburse EGPVFD 90% of items purchased only upon receipt of one detailed and certified statement evidencing purchase of and payment for equipment purchased under this Agreement along with copies of supplier invoices.

B. VFA grant award to EGPVFD shall be:

| | |
|---|---|
| Amount of Grant: | $18,051.00 |
| Local Match: | $ 1,805.10 |
| Total Budget: | $19,856.10 |

C. EGPVFD must submit one Reimbursement Form (Attachment 2), including purchase orders, invoices, and cancelled checks, no later than December 15, 2016, or

reimbursement cannot be made.

3. Auditing Procedures:

A. Equipment – Equipment EGPVFD acquires under this Agreement shall be subject to audit by EMNRD pursuant to Office of Management and Budget Circular A-133. Title to the equipment vests in Chaves County. EGPVFD shall manage, use, and dispose of the equipment in accordance with 7 C.F.R. 3016.32 (Attachment 1).

B. Supplies – Supplies EGPVFD acquires under this Agreement that are worth more than $100.00 shall be subject to EMNRD's audit pursuant to Office of Management and Budget Circular A-133. Title to the supplies vests in Chaves County.

C. Financial Records - EGPVFD's financial records involving procurement and all other related records including programmatic records, supporting documents, and statistical records under this Agreement shall comply with all federal, state, and local government auditing requirements, including 2 C.F.R. Part 225, Cost Principles for State, Local, and Indian Tribal Governments (OMB Circular A–87,) and in particular federal grant management rules pertaining to the National Fire Plan – Volunteer Fire Assistance Grant. EGPVFD shall retain these records until December 31, 2023.

4. Grant Award Provisions:

A. EGPVFD shall comply with all applicable provisions of U.S. Department of Agriculture, Forest Service, Grant No. 15-DG-11031600-017, FFY 2015 Consolidated Payment Grant – Cooperative Forestry Assistance Award. The Division shall provide EGPVFD with a copy of the grants with the Notice to Proceed.

B. This VFA grant is awarded on the basis of information provided in EGPVFD's application submitted for VFA funding in federal Fiscal Year 2016. To be eligible for cost sharing, EGPVFD shall purchase all equipment and supplies after the Agreement's effective date and no later than December 1, 2016.

C. EGPVFD must submit to EMNRD one reimbursement claim including reimbursement request, invoices, cancelled checks, and proof of payments no later than December 15, 2016 or reimbursement cannot be made. The reimbursement claim shall include the Agreement number for which the claim is being submitted, documentation of matching funds provided by EGPVFD and the total amount being requested by EGPVFD for reimbursement.

D. EGPVFD assures that it has legal authority to receive monies for purposes intended hereby and the ability and intention to finance its share of the costs of the PPE or FFE.

5. Term: This Agreement becomes effective when executed by an authorized representative of Chaves County and of EMNRD and when DFA encumbers funds for this Agreement. It shall terminate on December 31, 2016.

6. Termination: Either party may terminate this Agreement upon written notice delivered to the other at least 10 days prior to the intended termination date. By such termination, neither party may nullify or avoid any obligation required to have been performed

prior to termination.

7. Amendment: This Agreement shall not be altered, changed, or amended except by instrument in writing executed by the parties hereto.

8. Appropriations: This Agreement's terms are contingent upon the New Mexico State Legislature and U.S. Department of Agriculture, Forest Service, granting sufficient appropriation and authorization. If sufficient appropriation or authorization is not granted, EMNRD may terminate this Agreement, or in the alternative suspend performance pending approval of sufficient appropriation or authorization, upon written notice from EMNRD to EGPVFD. EMNRD's decision as to whether sufficient appropriations are available shall be at its sole and absolute discretion and shall be final, binding, and accepted by EGPVFD.

**IN WITNESS WHEREOF,** the parties hereto have herein below executed this Agreement.

**STATE OF NEW MEXICO, ENERGY, MINERALS AND NATURAL RESOURCES DEPARTMENT**

By: _____ Date: _____
Cabinet Secretary or Designee

**CHAVES COUNTY**

By: _____ Date: 1/28/2015
Authorized Representative Signature

Robert Corn, Chairman, Chaves County Commission
Printed Name and Title

**Attachment 1**

**Code of Federal Regulations**

**Title 7 – Agriculture**

Volume: 15

Date: 2014-01-01

Original Date: 2014-01-01

Title: Section 3016.32 - Equipment. Context: Title 7 - Agriculture. Subtitle B - Regulations of the Department of Agriculture (Continued).

CHAPTER XXX - OFFICE OF THE CHIEF FINANCIAL OFFICER, DEPARTMENT OF AGRICULTURE. PART 3016 - UNIFORM ADMINISTRATIVE REQUIREMENTS FOR GRANTS AND COOPERATIVE AGREEMENTS TO STATE AND LOCAL GOVERNMENTS.

Subpart C -- Changes, Property, and Subawards

§3016.32 Equipment.
(a) Title. Subject to the obligations and conditions set forth in this section, title to equipment acquired under a grant or subgrant will vest upon acquisition in the grantee or subgrantee respectively.

(b) States. A State will use, manage, and dispose of equipment acquired under a grant by the State in accordance with State laws and procedures. Other grantees and subgrantees will follow paragraphs (c) through (e) of this section.

(c) Use. (1) Equipment shall be used by the grantee or subgrantee in the program or project for which it was acquired as long as needed, whether or not the project or program continues to be supported by Federal funds. When no longer needed for the original program or project, the equipment may be used in other activities currently or previously supported by a Federal agency.

(2) The grantee or subgrantee shall also make equipment available for use on other projects or programs currently or previously supported by the Federal Government, providing such use will not interfere with the work on the projects or program for which it was originally acquired. First preference for other use shall be given to other programs or projects supported by the awarding agency. User fees should be considered if appropriate.

(3) Notwithstanding the encouragement in §3016.25(a) to earn program income, the grantee or subgrantee must not use equipment acquired with grant funds to provide services for a fee to compete unfairly with private companies that provide equivalent services, unless specifically permitted or contemplated by Federal statute.

(4) When acquiring replacement equipment, the grantee or subgrantee may use the equipment to be replaced as a trade-in or sell the property and use the proceeds to offset the cost of the replacement property, subject to the approval of the awarding agency.

(d) Management requirements. Procedures for managing equipment (including replacement equipment), whether acquired in whole or in part with grant funds, until disposition takes place will, as a minimum, meet the following requirements:

(1) Property records must be maintained that include a description of the property, a serial number or other identification number, the source of property, who holds title, the acquisition date, and cost of the property, percentage of Federal participation in the cost of the property, the location, use and condition of the property, and any ultimate disposition data including the date of disposal and sale price of the property.

(2) A physical inventory of the property must be taken and the results reconciled with the property records at least once every two years.

(3) A control system must be developed to ensure adequate safeguards to prevent loss, damage, or theft of the property. Any loss, damage, or theft shall be investigated.

(4) Adequate maintenance procedures must be developed to keep the property in good condition.

(5) If the grantee or subgrantee is authorized or required to sell the property, proper sales procedures must be established to ensure the highest possible return.

(e) Disposition. When original or replacement equipment acquired under a grant or subgrant is no longer needed for the original project or program or for other activities currently or previously supported by a Federal agency, disposition of the equipment will be made as follows:

(1) Items of equipment with a current per-unit fair market value of less than $5,000 may be retained, sold or otherwise disposed of with no further obligation to the awarding agency.

(2) Items of equipment with a current per unit fair market value in excess of $5,000 may be retained or sold and the awarding agency shall have a right to an amount calculated by multiplying the current market value or proceeds from sale by the awarding agency's share of the equipment.

(3) In cases where a grantee or subgrantee fails to take appropriate disposition actions, the awarding agency may direct the grantee or subgrantee to take excess and disposition actions.

(f) Federal equipment. In the event a grantee or subgrantee is provided federally-owned equipment:

(1) Title will remain vested in the Federal Government.

(2) Grantees or subgrantees will manage the equipment in accordance with Federal agency rules and procedures, and submit an annual inventory listing.

(3) When the equipment is no longer needed, the grantee or subgrantee will request disposition instructions from the Federal agency.

(g) Right to transfer title. The Federal awarding agency may reserve the right to transfer title to the Federal Government or a third part named by the awarding agency when such a third party

is otherwise eligible under existing statutes. Such transfers shall be subject to the following standards:

(1) The property shall be identified in the grant or otherwise made known to the grantee in writing.

(2) The Federal awarding agency shall issue disposition instruction within 120 calendar days after the end of the Federal support of the project for which it was acquired. If the Federal awarding agency fails to issue disposition instructions within the 120 calendar-day period the grantee shall follow §3016.32(e).

(3) When title to equipment is transferred, the grantee shall be paid an amount calculated by applying the percentage of participation in the purchase to the current fair market value of the property.

| Reimbursement Form | |
|---|---|
| Date: | |
| Volunteer Fire Department (VFD) Name: | |
| Fiscal Agent Name: | |
| VFD Representative Name: | |
| Address: | |
| SHARE Number: | |
| Reimbursement Request Number: | |
| Grant Amount Expended: | |
| Local Share Expended (Match):<br>(This amount must be at least 10% of grant amount.) | |
| Total Amount Expended:<br>(Total + Grant Amount + Local Share) | |
| Signature: | |
| Printed Name and Title: | |
| Must also attach the required purchase orders, invoices and cancelled checks | |
| Remit To: | Brian W. Filip<br>State of New Mexico<br>Energy, Minerals and Natural Resources Department<br>Forestry Division<br>1220 St. Francis Dr.<br>Santa Fe, New Mexico 87505 |

**AGENDA ITEM:** ___6____

Requesting Ratification of Approval for the 2017 Annual EMS Fund Act Applications and Service Reports

**MEETING DATE:** 1/28/16

**STAFF SUMMARY**

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**ACTION REQUESTED BY:** Georgianna Hunt, Community Development Division

**ACTION REQUESTED:** Requesting Ratification of Approval of the 2017 EMS Fund Act Applications and Service Reports on behalf of the Berrendo, East Grand Plains, Midway and Sierra Volunteer Fire Departments.

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**ITEM SUMMARY:**

Staff requests Ratification of Approval of the 2017 annual EMS Fund Act Applications and Service Reports on behalf of the Berrendo, East Grand Plains, Midway and Sierra Volunteer Fire Departments.

Staff recommends approval.

---

**SUPPORT DOCUMENTS:** EMS Application and Service Reports for the Berrendo, East Grand Plains, Midway and Sierra Volunteer Fire Departments

---

**SUMMARY BY:** Georgianna Hunt

**TITLE:** Community Development Project Specialist

NEW MEXICO DEPARTMENT OF HEALTH

# EMS FUND ACT

## LOCAL FUNDING PROGRAM APPLICATION

## FISCAL YEAR 2017

**Due Date: January 22, 2016**

Submit To:
EMS Bureau
1301 Siler Rd Bldg F
Santa Fe, NM 87507
Attn: Ann Martinez
505-476-8233

**To All Potential Applicants:**

The EMS Fund Act was created for the purpose of making funds available to municipalities and counties, in proportion to their needs, for use in the establishment and enhancement of local emergency medical services in order to reduce injury and loss of life.

In any fiscal year, no less than seventy-five percent of the money in the fund shall be used for the local emergency medical services funding program to support the cost of supplies and equipment and operational costs other than salaries and benefits for emergency medical services personnel. This money shall be distributed to municipalities and counties on behalf of eligible local recipients, using a formula established pursuant to rules adopted by the department. The formula shall determine each municipality's and county's share of the fund based on the relative geographic size and population of each county. The formula shall also base the distribution of money for each municipality and county on the relative number of runs of each local recipient eligible to participate in the distribution. **To be eligible,** an applicant must be an incorporated municipality or county applying on behalf of a local recipient. Your service must also be compliant with NMEMSTARS Data and Medical Rescue Certification, if not PRC.

Your Application and Annual Report **must be postmarked or hand-delivered** to the EMS Bureau by **5:00pm on Friday, January 22, 2016.** Please adhere to the following instructions, **as incomplete applications will not be processed:**

- Submit an **ORIGINAL AND THREE (3) COPIES – Annual Service Report as well. Failure to make copies will result in an incomplete application and will not be accepted.** (faxed or emailed applications will not be accepted as well)
- **NO SPECIAL BINDING** *(one staple in the left top corner only- NO PAPERCLIPS or BINDERS)*
- **Be sure to have necessary SIGNATURES and NOTARY.**

| | | | | |
|---|---|---|---|---|
| **Local Recipient:** | Midway Fire & EMS | | 0303310 | |
| | *(EMS Service that will benefit)* | | *(EMS Service #)* | |
| **Mailing Address:** | 6477 Templeton | Dexter | NM | 88230 |
| | *(Street/Mailing Address)* | *City)* | *(State)* | *(Zip)* |
| | 1 2 X 3 | 575-347-2145 | 575-626-4495 | 575-347-5147 |
| | *(EMS Region)* | *(Business Phone #)* | *(Emergency Phone #)* | *(Fax Phone #)* |
| **Contact Person:** | Tim Fuller | Assistant Chief | timfuller@plateautel.net | |
| | *(Name)* | *(Title)* | *(E-mail Address)* | |

| | | | | |
|---|---|---|---|---|
| **Applicant:** | Chaves County | | | |
| | *(County or Municipality serving as Fiscal Agent)* | | | |
| **Mailing Address:** | P.O. Box 1597 | Roswell | NM | 88202-1597 |
| | *(Mailing Address)* | *(City)* | *(State)* | *(Zip)* |
| **Contact Person:** | Georgianna Hunt | Project Specialist | | |
| | *(Name)* | *(Title)* | | |

NEW MEXICO DEPARTMENT OF HEALTH

# EMS ANNUAL SERVICE REPORT
## Fiscal Year 2017
Due Date: January 22, 2016

Submit To:
EMS Bureau
1301 Siler Rd Bldg. F
Santa Fe, NM 87507
Attn: Ann Martinez

| | |
|---|---|
| **Service Name:** | **Midway Fire & EMS** *(EMS Service)* |

| | | | | |
|---|---|---|---|---|
| **Mailing Address:** | #1 St. Mary's Place *(Mailing Address)* | | | |
| | Dexter *(City)* | NM *(State)* | 88230 *(Zip)* | *(+4)* |
| **Contact Person:** | Tim Fuller *(Name)* | Assistant Chief *(Title)* | | |
| | 575-347-2145 *(Business Phone)* | 575-626-4495 *(Emergency Phone)* | 575-347-5147 *(Fax)* | timfuller@plateautel.net *(E-mail Address)* |
| **Administration:** | Chaves County *(County or Municipality)* | | | |
| | #1 St. Mary's Place *(Mailing Address)* | | | |
| | Roswell *(City)* | NM *(State)* | 88203 *(Zip)* | *(+4)* |
| **Contact Person:** | Georgianna Hunt *(Name)* | Project Specialist *(Title)* | | |
| | 575-624-6689 *(Telephone #)* | 575-624-6576 *(Fax Phone #)* | ghunt@co.chaves.nm.us *(E-mail Address)* | |
| **EMS Region:** | **Region I** | **Region II** | **Region III** X | |

| **Physical Location of Ambulance/Medical Rescue Facilities** | | | | |
|---|---|---|---|---|
| **#1** | | | | |
| **Name of Facility:** | Midway Fire Station #1 | | | |
| | 33'17.316" *Latitude* | 104'26.695" *Longitude* | | |
| **Street Address:** | 6477 Templeton Road | | | |
| | Roswell *(City)* | NM *(State)* | 88230 *(Zip)* | *(+4)* |
| **#2** | | | | |
| **Name of Facility:** | Midway Fire Station #2 | | | |
| | 33'16.655' *Latitude* | 104'30.584' *Longitude* | | |
| **Street Address:** | 62 Honolulu Road | | | |
| | Roswell *(City)* | NM *(State)* | 88230 *(Zip)* | *(+4)* |

NEW MEXICO DEPARTMENT OF HEALTH

# EMS FUND ACT

## LOCAL FUNDING PROGRAM APPLICATION

## FISCAL YEAR 2017

**Due Date: January 22, 2016**

Submit To:
EMS Bureau
1301 Siler Rd Bldg F
Santa Fe, NM 87507
Attn: Ann Martinez
505-476-8233

**To All Potential Applicants:**

The EMS Fund Act was created for the purpose of making funds available to municipalities and counties, in proportion to their needs, for use in the establishment and enhancement of local emergency medical services in order to reduce injury and loss of life.

In any fiscal year, no less than seventy-five percent of the money in the fund shall be used for the local emergency medical services funding program to support the cost of supplies and equipment and operational costs other than salaries and benefits for emergency medical services personnel. This money shall be distributed to municipalities and counties on behalf of eligible local recipients, using a formula established pursuant to rules adopted by the department. The formula shall determine each municipality's and county's share of the fund based on the relative geographic size and population of each county. The formula shall also base the distribution of money for each municipality and county on the relative number of runs of each local recipient eligible to participate in the distribution. **To be eligible,** an applicant must be an incorporated municipality or county applying on behalf of a local recipient. Your service must also be compliant with NMEMSTARS Data and Medical Rescue Certification, if not PRC.

Your Application and Annual Report **must be postmarked or hand-delivered** to the EMS Bureau by **5:00pm on Friday, January 22, 2016.** Please adhere to the following instructions, **as incomplete applications will not be processed:**

- Submit an **ORIGINAL AND THREE (3) COPIES – Annual Service Report as well. Failure to make copies will result in an incomplete application and will not be accepted.** (faxed or emailed applications will not be accepted as well)
- **NO SPECIAL BINDING** *(one staple in the left top corner only- NO PAPERCLIPS or BINDERS)*
- **Be sure to have necessary SIGNATURES and NOTARY.**

| | | | | |
|---|---|---|---|---|
| **Local Recipient:** | Berrendo Fire/Rescue | | | |
| | *(EMS Service that will benefit)* | | | *(EMS Service #)* |
| **Mailing Address:** | P.O. Box 1149 | Roswell | NM | 88202-1149 |
| | *(Street/Mailing Address)* | *City)* | *(State)* | *(Zip)* |
| | 1 2 X 3 | 575-623-4210 | 575-626-7899 | 575-624-0914 |
| | *(EMS Region)* | *(Business Phone #)* | *(Emergency Phone #)* | *(Fax Phone #)* |
| **Contact Person:** | Jamie Higgins | Deputy Chief | Fh3180@yahoo.com | |
| | *(Name)* | *(Title)* | *(E-mail Address)* | |

| | | | | |
|---|---|---|---|---|
| **Applicant:** | Chaves County | | | |
| | *(County or Municipality serving as Fiscal Agent)* | | | |
| **Mailing Address:** | #1 St. Mary's Place | Roswell | NM | 88203 |
| | *(Mailing Address)* | *(City)* | *(State)* | *(Zip)* |
| **Contact Person:** | Angelo Gurule | Safety & Fire Services Director | | |
| | *(Name)* | *(Title)* | | |
| | 575-624-6608 | 575-624-6631 | agurule@co.chaves.nm.us | |

NEW MEXICO DEPARTMENT OF HEALTH

# EMS ANNUAL SERVICE REPORT
## Fiscal Year 2017
Due Date: January 22, 2016

Submit To:
EMS Bureau
1301 Siler Rd Bldg. F
Santa Fe, NM 87507
Attn: Ann Martinez

| | |
|---|---|
| **Service Name:** | **Berrendo Fire/Rescue** *(EMS Service)* |

| | | | | |
|---|---|---|---|---|
| **Mailing Address:** | P.O. Box 1149 *(Mailing Address)* | | | |
| | Roswell *(City)* | NM *(State)* | 88202 *(Zip)* | 1149 *(+4)* |
| **Contact Person:** | Jamie Higgins *(Name)* | Deputy Chief *(Title)* | | |
| | 575-623-4210 *(Business Phone)* | 575-420-7388 *(Emergency Phone)* | 575-624-0914 *(Fax)* | Fh3180@yahoo.com *(E-mail Address)* |
| **Administration:** | *(County or Municipality)* | | | |
| | Chaves County *(Mailing Address)* | | | |
| | #1 St. Mary's Place *(City)* | NM *(State)* | 88202 *(Zip)* | 1149 *(+4)* |
| **Contact Person:** | Angelo Gurule *(Name)* | Safety and Fire Services Director *(Title)* | | |
| | 575-624-6615 *(Telephone #)* | 575-624-6631 *(Fax Phone #)* | purchasing@co.chaves.nm.us *(E-mail Address)* | |
| **EMS Region:** | **Region I** | **Region II** | **Region III** x | |

| **Physical Location of Ambulance/Medical Rescue Facilities** | | | | |
|---|---|---|---|---|
| **#1** | | | | |
| **Name of Facility:** | Berrendo Fire/Rescue Station #1 | | | |
| | N33.24.505" *Latitude* | W104.29685 *Longitude* | | |
| **Street Address:** | 2004 East College | | | |
| | Roswell *(City)* | NM *(State)* | 88201 *(Zip)* | *(+4)* |
| **#2** | | | | |
| **Name of Facility:** | Berrendo Fire/Rescue Station #2 | | | |
| | N33.30.34.7 *Latitude* | W104.35430 *Longitude* | | |
| **Street Address:** | 906 Wiggins Road | | | |
| | Roswell *(City)* | NM *(State)* | 88201 *(Zip)* | *(+4)* |

NEW MEXICO DEPARTMENT OF HEALTH

# EMS FUND ACT

## LOCAL FUNDING PROGRAM APPLICATION

## FISCAL YEAR 2017

**Due Date: January 22, 2016**

Submit To:
EMS Bureau
1301 Siler Rd Bldg F
Santa Fe, NM 87507
Attn: Ann Martinez
505-476-8233

**To All Potential Applicants:**

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- **NO SPECIAL BINDING** ***(one staple in the left top corner only- NO PAPERCLIPS or BINDERS)***
- **Be sure to have necessary SIGNATURES and NOTARY.**

| | | | | |
|---|---|---|---|---|
| **Local Recipient:** | East Grand Plains Vol. Fire Dept. | | | 0303300 |
| | *(EMS Service that will benefit)* | | | *(EMS Service #)* |
| **Mailing Address:** | 3748 East Grand Plains Road | Roswell | NM | 88203 |
| | *(Street/Mailing Address)* | *City)* | *(State)* | *(Zip)* |
| | 1 2 X 3 | 575-6924-2018 | 575-626-7703 | 575-624-6631 |
| | *(EMS Region)* | *(Business Phone #)* | *(Emergency Phone #)* | *(Fax Phone #)* |
| **Contact Person:** | Monte Baker | Chief | egpfire@co.chaves.nm.us | |
| | *(Name)* | *(Title)* | *(E-mail Address)* | |

| | | | | |
|---|---|---|---|---|
| **Applicant:** | Chaves County Fire Services | | | |
| | *(County or Municipality serving as Fiscal Agent)* | | | |
| **Mailing Address:** | #1 St. Mary's Place | Roswell | NM | 88203 |
| | *(Mailing Address)* | *(City)* | *(State)* | *(Zip)* |
| **Contact Person:** | Angelo Gurule | Fire Services Director | | |
| | *(Name)* | *(Title)* | | |
| | 575-624-6608 | 575-627-7162 | Agurule@co.chaves.nm.us | |

NEW MEXICO DEPARTMENT OF HEALTH

# EMS ANNUAL SERVICE REPORT
## Fiscal Year 2017
Due Date: January 22, 2016

Submit To:
EMS Bureau
1301 Siler Rd Bldg. F
Santa Fe, NM
87507
Attn: Ann Martinez

| | |
|---|---|
| **Service Name:** | East Grand Plains Vol. Fire Department<br>*(EMS Service)* |

| | | | | |
|---|---|---|---|---|
| **Mailing Address:** | #1 St. Mary's Place<br>*(Mailing Address)* | | | |
| | Roswell<br>*(City)* | NM<br>*(State)* | 88203<br>*(Zip)* | <br>*(+4)* |
| **Contact Person:** | Monte Baker<br>*(Name)* | Chief<br>*(Title)* | | |
| | 575-624-2018<br>*(Business Phone)* | 575-626-7703<br>*(Emergency Phone)* | 575-627-7162<br>*(Fax)* | egpfire@co.chaves.nm.us<br>*(E-mail Address)* |
| **Administration:** | Chaves County Fire Services<br>*(County or Municipality)* | | | |
| | #1 St. Mary's Place<br>*(Mailing Address)* | | | |
| | Roswell<br>*(City)* | NM<br>*(State)* | 88203<br>*(Zip)* | <br>*(+4)* |
| **Contact Person:** | Angelo Gurule<br>*(Name)* | Fire Services Director<br>*(Title)* | | |
| | 575-624-6608<br>*(Telephone #)* | 575-624-6631<br>*(Fax Phone #)* | chavescofire@co.chaves.nm.us<br>*(E-mail Address)* | |
| **EMS Region:** | **Region I** | **Region II** | **Region III** X | |

| **Physical Location of Ambulance/Medical Rescue Facilities** | | | | |
|---|---|---|---|---|
| **#1** | | | | |
| **Name of Facility:** | East Grand Plains VFD Station #1 | | | |
| | | | | |
| | *Latitude* | *Longitude* | | |
| **Street Address:** | 3748 East Grand Plains Road | | | |
| | Roswell | NM | 88203 | |
| | *(City)* | *(State)* | *(Zip)* | *(+4)* |
| **#2** | | | | |
| **Name of Facility:** | East Grand Plains Station #2 | | | |
| | | | | |
| | *Latitude* | *Longitude* | | |
| **Street Address:** | 6268 Baker Road | | | |
| | Roswell | NM | 88203 | |
| | *(City)* | *(State)* | *(Zip)* | *(+4)* |

*(Use additional pages as necessary)*

NEW MEXICO DEPARTMENT OF HEALTH

# EMS FUND ACT

## LOCAL FUNDING PROGRAM APPLICATION

## FISCAL YEAR 2017

**Due Date: January 22, 2016**

Submit To:
EMS Bureau
1301 Siler Rd Bldg F
Santa Fe, NM 87507
Attn: Ann Martinez
505-476-8233

**To All Potential Applicants:**

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Your Application and Annual Report **must be postmarked or hand-delivered** to the EMS Bureau by **5:00pm on Friday, January 22, 2016.** Please adhere to the following instructions, **as incomplete applications will not be processed:**

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- **NO SPECIAL BINDING** *(one staple in the left top corner only- NO PAPERCLIPS or BINDERS)*
- **Be sure to have necessary SIGNATURES and NOTARY.**

| | | | | |
|---|---|---|---|---|
| **Local Recipient:** | Sierra Vol. Fire Department | | 303312 | |
| | *(EMS Service that will benefit)* | | *(EMS Service #)* | |
| **Mailing Address:** | 1 St. Mary Place | Roswell | NM | 88203 |
| | *(Street/Mailing Address)* | *City)* | *(State)* | *(Zip)* |
| | 1 2 X 3 | 575-623-1946 | 575-626-8281 | 5756232833 |
| | *(EMS Region)* | *(Business Phone #)* | *(Emergency Phone #)* | *(Fax Phone #)* |
| **Contact Person:** | Matthew Ford | Assistant Chief | Mford190@gmail.com | |
| | *(Name)* | *(Title)* | *(E-mail Address)* | |

| | | | | |
|---|---|---|---|---|
| **Applicant:** | Sierra Vol. Fire Department | | | |
| | *(County or Municipality serving as Fiscal Agent)* | | | |
| **Mailing Address:** | P.O. Box 1597 | Roswell | NM | 88202 |
| | *(Mailing Address)* | *(City)* | *(State)* | *(Zip)* |
| **Contact Person:** | Charlotte Andrade | Grant Administrator | | |
| | *(Name)* | *(Title)* | | |
| | 575-624-6659 | 575-624-6576 | ccgrants@co.chaves.nm.us | |
| | *(Telephone #)* | *(Fax Phone #)* | *(E-mail Address)* | |

NEW MEXICO DEPARTMENT OF HEALTH

# EMS ANNUAL SERVICE REPORT
## Fiscal Year 2017
Due Date: January 22, 2016

Submit To:
EMS Bureau
1301 Siler Rd Bldg. F
Santa Fe, NM 87507
Attn: Ann Martinez

| | |
|---|---|
| **Service Name:** | **Sierra Vol. Fire Department** *(EMS Service)* |

| | | | | |
|---|---|---|---|---|
| **Mailing Address:** | PO Box 1597 *(Mailing Address)* | | | |
| | Roswell *(City)* | NM *(State)* | 88202-1597 *(Zip)* | *(+4)* |
| **Contact Person:** | Matthew Ford *(Name)* | Deputy Chief *(Title)* | | |
| | 575-626-8281 *(Business Phone)* | *(Emergency Phone)* | *(Fax)* | sierrafire@co.chaves.nm.us *(E-mail Address)* |
| **Administration:** | Chaves County *(County or Municipality)* | | | |
| | #1 St. Mary's Place *(Mailing Address)* | | | |
| | Roswell *(City)* | NM *(State)* | 88203 *(Zip)* | *(+4)* |
| **Contact Person:** | Angelo Gurule *(Name)* | Chaves County fire Services *(Title)* | | |
| | 575-624-6608 *(Telephone #)* | 575-624-6631 *(Fax Phone #)* | agurule@co.chaves.nm.us *(E-mail Address)* | |
| **EMS Region:** | **Region I** | **Region II** | **Region III** x | |

| **Physical Location of Ambulance/Medical Rescue Facilities** | | | | |
|---|---|---|---|---|
| **#1** | | | | |
| **Name of Facility:** | Sierra Fire Station #1 | | | |
| | | | | |
| | *Latitude* | *Longitude* | | |
| **Street Address:** | 603 S Brown Rd. | | | |
| | Roswell *(City)* | NM *(State)* | 88203 *(Zip)* | *(+4)* |
| **#2** | | | | |
| **Name of Facility:** | Sierra Fire Stations #2 #3 & #4 | | | |
| | | | | |
| | *Latitude* | *Longitude* | | |
| **Street Address:** | 5106 S Lea / 69 Dogwood & 15 Tierra Grande | | | |
| | Roswell *(City)* | NM *(State)* | 88203 *(Zip)* | *(+4)* |

*(Use additional pages as necessary)*

**AGENDA ITEM:** 7 Request for Out of State Travel

**MEETING DATE:** January 28, 2016

# STAFF SUMMARY REPORT

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**ACTION REQUESTED BY:** Marlin Johnson, Planning and Zoning Director

**ACTION REQUESTED:** Approval for out of state travel to attend five days of the National Association of Counties (NACo) 2016 Legislation Conference in Washington, D.C.

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**ITEM SUMMARY:**

The NACo 2016 Legislation Conference is scheduled for February 20 through February 24. I was recently nominated by our state association and appointed to NACo's Environment, Energy and Land Use (EELU) Steering Committee by NACo's President Sallie Clark. I have participated in conference calls for the EELU sub-committee and for the NACo Western Interstate Regional committee. Attending NACo conferences is part of the commitment to the organization and will enable me to become a more effective member and to better serve Chaves County in this role.

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**SUPPORT DOCUMENTS:** NACo Legislative Conference Schedule

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**SUMMARY BY:** Marlin J. Johnson

**TITLE:** Planning & Zoning Director

## HOW TO: REGISTRATION AND HOUSING

### REGISTER ONLINE <https://members.naco.org/eweb/DynamicPage.aspx?site=naco_new&webcode=eventregnaco&Reg_evt_key=4a31b001-b8a6-4182-8011-564be9f1e160&RegPath=EventRegFees>

### REGISTRATION FORM (PDF)

### GUEST REGISTRATION FORM

### HOUSING FORM

### TRAVEL REQUEST LETTER TEMPLATE

### FREQUENTLY ASKED QUESTIONS

# SCHEDULE

## SATURDAY, FEB. 20

| | |
|---|---|
| All Day | Policy Committee Meetings and Affiliate Meetings |
| 7:00 a.m. – 5:00 p.m. | Registration Open |
| 8:30 a.m. - 5:00 p.m. | NACo Technology and Innovation Summit |
| 4:00 p.m. - 5:00 p.m. | Policy Coordinating Committee Meeting |

## SUNDAY, FEB. 21

| | |
|---|---|
| All Day | Policy Committee Meetings and Affiliate Meetings |
| 7:30 a.m. – 4:00 p.m. | Registration Open |
| 7:00 a.m. - 8:00 a.m. | Non-Denominational Worship Service |
| 3:00 p.m. - 4:00 p.m. | NACo Board of Directors Forum |

## MONDAY, FEB. 22

| | |
|---|---|
| 7:30 a.m. – 8:30 a.m. | NACo Regional Caucus Meetings |
| 7:30 a.m. – 3:00 p.m. | Registration Open |
| 9:00 a.m. - 10:30 a.m. | Opening General Session |
| 10:45 a.m. – 12:00 p.m. | Concurrent Educational Workshops |
| 12:00 p.m. – 1:30 p.m. | Attendee Luncheon |
| 1:45 p.m. – 3:00 p.m. | Concurrent Educational Workshops |
| 1:45 p.m. – 4:15 p.m. | NACo Board of Directors Business and Resolutions Meeting |
| 3:15 p.m. – 4:15 p.m. | Concurrent Educational Workshops |

## TUESDAY, FEB. 23

| | |
|---|---|
| 8:00 a.m. – 12:00 p.m. | Registration Open |
| 10:00 a.m. - 11:45 a.m. | General Session |
| 12:00 p.m. – 5:00 p.m. | Federal Agency and Capitol Hill Visits (self-arranged) |
| 1:00 p.m. – 3:30 p.m. | Concurrent Educational Workshops |
| 6:30 p.m. – 9:00 p.m. | NACo President's Reception |

## WEDNESDAY, FEB. 24

Federal Agency and Capitol Hill Visits (self-arranged)

## FEATURED SPEAKERS

**AGENDA ITEM: ___8____**

Adopting NMAC Healthcare Policy Committee Resolution 2016-01

**MEETING DATE:** January 28, 2016

**STAFF SUMMARY REPORT**

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**ACTION REQUESTED BY:** Stanton L. Riggs

**ACTION REQUESTED:** Approve NMAC Resolution 2016-01

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**ITEM SUMMARY:**

The NMAC Board of Directors is requesting that Chaves County adopt NMAC Healthcare Policy Committee Resolution 2016-01.

Staff recommends approval.

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**SUPPORT DOCUMENTS:** NMAC Resolution 2016-01

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**SUMMARY BY:** Stanton L. Riggs

**TITLE:** County Manager

**NEW MEXICO ASSOCIATION OF COUNTIES**
**BOARD OF DIRECTORS**
**RESOLUTION 2016-01**

**NMAC Healthcare Policy Committee**

**WHEREAS,** New Mexico counties care greatly about health care for their local citizens and value their local hospitals, particularly in rural areas; and

**WHEREAS,** counties have long played an integral role in providing health care services for their indigent residents; and

**WHEREAS,** for nearly 20 years counties have worked collaboratively with their local community hospitals in helping fund the Sole Community Provider program and in coordinating health care for their local citizens; and

**WHEREAS,** the Sole Community Provider program has now been replaced by the Safety Net Care Pool (SNCP), which provides funding for community hospitals for Medicaid base rate increases and uncompensated care; and

**WHEREAS,** the counties' role under the SNCP has been significantly diminished and their financial contribution to the SNCP no longer has any relationship to the funds disseminated by the Human Services Department (HSD) to the counties' respective community hospitals; and

**WHEREAS,** finding a solution to funding the SNCP requires communication and cooperation among the various stakeholders—counties, hospitals, and the state, in both the legislative and executive branches.

**NOW THEREFORE BE IT RESOLVED THAT** the New Mexico Association of Counties strongly opposes any legislation that imposes a further financial obligation for counties to fund the SNCP and hospitals; and

**BE IT FURTHER RESOLVED THAT** the New Mexico Association of Counties will endorse and support legislation which protects Counties' autonomy and discretion over the use of County imposed Indigent Health Care gross receipts tax revenues; and

**BE IT FURTHER RESOLVED THAT** the New Mexico Association of Counties supports mandatory County participation as a critical stakeholder and primary funding source in all discussions and planning with the New Mexico Human Services Department regarding any and all funding methods to secure the future of safety net care pool for local hospitals both public and private.

**APPROVED, PASSED AND ADOPTED** this 19 day of January 2016.

Sharon Stover

By:_____
Sharon Stover, President

**ATTEST:**
By: _____
Steve Kopelman, Executive Director

**AGENDA ITEM: __9_____** 2016 Commission Committee Appointments

**MEETING DATE:** January 28, 2016

**STAFF SUMMARY REPORT**

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**ACTION REQUESTED BY:** County Manager

**ACTION REQUESTED:** Approval of Appointments

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**ITEM SUMMARY:**

Each year the Board of Commissioners are appointed to serve on standing committees, which run from January 1st to December 31st of each year. The following is a list of the committees on which the Commissioners must serve:

- Finance/Investment
- Road
- Detention
- Facilities
- Fire
- Legislative
- IHC
- DWI
- Extraterritorial Zoning Authority (ETZ)
- Public Lands Advisory Committee (PLAC)
- Economic Development Planning
- Southeastern NM Economic Development District (SNMEDD)
- Coalition of Arizona/New Mexico Counties
- Special Projects

Approval is requested for re-appointment of Commissioners to the prior year's committees.

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**SUPPORT DOCUMENTS:** 2016 Commission Committees

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**SUMMARY BY:** Stanton L. Riggs

**TITLE:** County Manager

# 2016 CHAVES COUNTY
# COMMISSION COMMITTEES

| COMMITTEE | MEMBERS |
|---|---|
| Finance/Investment | James Duffey and Robert Corn |
| Road | Kim Chesser and Smiley Wooton |
| Detention | Smiley Wooton and Robert Corn |
| Facilities | Smiley Wooton and James Duffey |
| Fire | Kim Chesser and James Duffey |
| Legislative | Will Cavin and Robert Corn |
| IHC | Will Cavin and Smiley Wooton |
| DWI | Will Cavin and Smiley Wooton |
| ETZ Authority | Robert Corn, James Duffey and Will Cavin |
| Chaves County Land Council | Kim Chesser and Smiley Wooton |
| Economic Development Planning | Will Cavin, Alternate-Robert Corn |
| SNMEDD | Robert Corn |
| Coalition of AZ/NM Counties | Kim Chesser and James Duffey |
| Special Projects | Will Cavin and Robert Corn |

1 _____ Approval of Checks

0 28-Jan-16

## STAFF SUMMARY REPORT

**ACTION REQUESTED BY:** Joe Sedillo, Finance Director
(624-6646)

**ACTION REQUESTED:**
Approval of Checks

**ITEM SUMMARY:**

| | | | |
|---|---|---|---|
| A/P: | 04-Dec-15 | | $322,624.10 |
| | 11-Dec-15 | | $799,186.42 |
| | 14-Dec-15 | | $224,267.58 |
| | 18-Dec-15 | | $375,402.74 |
| | 23-Dec-15 | | $534,646.44 |
| A/P VOID: | 14-Dec-15 | | -$222,984.24 |
| PAYROLL: | 03-Jan-16 | REGULAR | $278,365.46 |
| | | FINAL | $3,971.84 |
| | 17-Jan-16 | REGULAR | $274,584.38 |
| | | FINAL | $712.65 |

Grand Total Checks to be Approved: $2,590,777.37

**SUPPORT DOCUMENTS:**
Copies of Bills Lists

**SUMMARY BY:** Cindy Mealand

**TITLE:** A/P Officer

VENDOR SEQUENCE

| VENDOR | ITEM NO# | DESCRIPTION | BANK | CHECK | STAT | DUE DT / DISC DT | GROSS / BALANCE | PAYMENT / DISCOUNT | OUTSTANDING |
|---|---|---|---|---|---|---|---|---|---|
| 01-159 | ASA ARCHITECTS | | | | | | | | |
| | I 3410 | RENOVATIONS/CCDC | AP | | R | 12/04/2015 | 32,493.48 | 32,493.48CR | |
| | | G/L ACCOUNT | | | | | 32,493.48 | | |
| | | 650 6-685-381-000 Construction Projects | | | | 32,493.48 | PROJECT #12102R | | |
| | | | | REG. CHECK | | | 32,493.48 | 32,493.48CR | 0.00 |
| | | | | | | | 32,493.48 | 0.00 | |
| 01-1566 | ASPEN OF NEW MEXICO INC | | | | | | | | |
| | I 12-15/ASPEN | ALT. SENTENCING/DEC. 2015 | AP | | R | 12/04/2015 | 2,000.00 | 2,000.00CR | |
| | | G/L ACCOUNT | | | | | 2,000.00 | | |
| | | 432 7-761-267-000 CONTRACTUAL SERVICES | | | | 2,000.00 | DWI DISTRIBUTION FUNDS | | |
| | | | | REG. CHECK | | | 2,000.00 | 2,000.00CR | 0.00 |
| | | | | | | | 2,000.00 | 0.00 | |
| 01-181 | AT&T | | | | | | | | |
| | I CC012147 | MIDWAY F.D. #1 & 2 | AP | | R | 12/04/2015 | 39.40 | 39.40CR | |
| | | G/L ACCOUNT | | | | | 39.40 | | |
| | | 410 8-816-340-000 TELEPHONE | | | | 39.40 | ACCT.#017-239-9788-001 | | |
| | I CC012148 | SIERRA F.D. #2 & 3 | AP | | R | 12/04/2015 | 78.80 | 78.80CR | |
| | | G/L ACCOUNT | | | | | 78.80 | | |
| | | 412 8-815-340-000 TELEPHONE | | | | 39.40 | ACCT.#017-240-8197-001 | | |
| | | 412 8-815-340-000 TELEPHONE | | | | 39.40 | ACCT.#050-543-8481-001 | | |
| | | | | REG. CHECK | | | 118.20 | 118.20CR | 0.00 |
| | | | | | | | 118.20 | 0.00 | |
| 01-472 | BOB TURNERS FORD COUNTRY | | | | | | | | |
| | I 26262 | 2016 FORD F-250/ROAD | AP | | R | 12/04/2015 | 25,075.00 | 25,075.00CR | |
| | | G/L ACCOUNT | | | | | 25,075.00 | | |
| | | 402 6-681-372-000 VEHICLES | | | | 25,075.00 | VIN #1FT7X2B65GEB26262 | | |
| | | | | REG. CHECK | | | 25,075.00 | 25,075.00CR | 0.00 |
| | | | | | | | 25,075.00 | 0.00 | |

VENDOR SEQUENCE

| VENDOR | ITEM NO# | DESCRIPTION | BANK | CHECK | STAT | DUE DT / DISC DT | GROSS / BALANCE | PAYMENT / DISCOUNT | OUTSTANDING |
|---|---|---|---|---|---|---|---|---|---|
| 01-5084 | BRADBURY STAMM CONSTRUCTION | | | | | | | | |
| | I CC012473 | RENOVATIONS/CCDC | AP | | R | 12/04/2015 | 172,187.22 | 172,187.22CR | |
| | | G/L ACCOUNT | | | | | 172,187.22 | | |
| | | 650 6-685-381-000 Construction Projects | | | | 172,187.22 | PROJECT #1323 | | |
| | | | REG. CHECK | | | | 172,187.22 | 172,187.22CR | 0.00 |
| | | | | | | | 172,187.22 | 0.00 | |
| 01-574 | CABLE ONE | | | | | | | | |
| | I CC012258 | SIERRA F.D. #1 | AP | | R | 12/04/2015 | 75.58 | 75.58CR | |
| | | G/L ACCOUNT | | | | | 75.58 | | |
| | | 412 8-815-341-000 UTILITIES | | | | 75.58 | ACCT.#101646719 | | |
| | | | REG. CHECK | | | | 75.58 | 75.58CR | 0.00 |
| | | | | | | | 75.58 | 0.00 | |
| 01-705 | CATERPILLAR FINANCIAL SERVI | | | | | | | | |
| | I 16713201 | LEASE FOR LOADER/ROAD | AP | | R | 12/04/2015 | 846.16 | 846.16CR | |
| | | G/L ACCOUNT | | | | | 846.16 | | |
| | | 402 6-653-251-000 RENTALS | | | | 846.16 | ACCT.#47313 | | |
| | | | REG. CHECK | | | | 846.16 | 846.16CR | 0.00 |
| | | | | | | | 846.16 | 0.00 | |
| 01-698 | CENTRAL VALLEY ELECTRIC COO | | | | | | | | |
| | I CC012149 | MIDWAY F.D. | AP | | R | 12/04/2015 | 110.95 | 110.95CR | |
| | | G/L ACCOUNT | | | | | 110.95 | | |
| | | 410 8-816-341-000 UTILITIES | | | | 93.23 | ACCT.#10114001 | | |
| | | 410 8-816-341-000 UTILITIES | | | | 17.72 | ACCT.#23898800 | | |
| | I CC012250 | ROAD/DISTRICT 8/MIDWAY F.D. | AP | | R | 12/04/2015 | 870.53 | 870.53CR | |
| | | G/L ACCOUNT | | | | | 870.53 | | |
| | | 402 6-653-243-000 HIGHWAY LIGHTS 2002 | | | | 25.13 | ACCT. #10147201 | | |
| | | 402 6-653-243-000 HIGHWAY LIGHTS 2002 | | | | 460.76 | ACCT.#12209501 | | |
| | | 402 6-653-243-000 HIGHWAY LIGHTS 2002 | | | | 118.84 | ACCT.#6695501 | | |
| | | 414 8-819-341-000 UTILITIES | | | | 46.80 | ACCT.#12001802 | | |
| | | 437 6-659-341-000 UTILITIES | | | | 41.95 | ACCT.#12412501 | | |
| | | 437 6-659-341-000 UTILITIES | | | | 43.38 | ACCT.#22987100 | | |
| | | 410 8-816-341-000 UTILITIES | | | | 133.67 | ACCT,#23133100 | | |
| | I CC012251 | BERRENDO F.D. | AP | | R | 12/04/2015 | 94.21 | 94.21CR | |
| | | G/L ACCOUNT | | | | | 94.21 | | |
| | | 411 8-814-341-000 UTILITIES | | | | 36.05 | ACCT.#12413201 | | |

PACKET: 06814 Regular Payments
VENDOR SET: 01

VENDOR SEQUENCE

| VENDOR | ITEM NO# | DESCRIPTION | BANK | CHECK | STAT | DUE DT / DISC DT | GROSS / BALANCE | PAYMENT / DISCOUNT | OUTSTANDING |
|---|---|---|---|---|---|---|---|---|---|
| | | 411 8-814-341-000 | UTILITIES | | | | 39.66 | ACCT.#12026501 | |
| | | 411 8-814-341-000 | UTILITIES | | | | 9.64 | ACCT. #12413101 | |
| | | 411 8-814-341-000 | UTILITIES | | | | 8.86 | ACCT.#12413301 | |
| | | | | REG. CHECK | | | 1,075.69 | 1,075.69CR | 0.00 |
| | | | | | | | 1,075.69 | 0.00 | |
| 01-4730 | QWEST | | | | | | | | |
| I | CC012039 | MIDWAY F.D. #1 | AP | | R | 12/04/2015 | 134.72 | 134.72CR | |
| | | G/L ACCOUNT | | | | | 134.72 | | |
| | | 410 8-816-340-000 | TELEPHONE | | | | 80.30 | ACCT.#575-347-2145-601B | |
| | | 410 8-816-340-000 | TELEPHONE | | | | 54.42 | ACCT.#575-347-9811-962B | |
| I | CC012140 | SIERRA F.D. #2 | AP | | R | 12/04/2015 | 39.13 | 39.13CR | |
| | | G/L ACCOUNT | | | | | 39.13 | | |
| | | 412 8-815-340-000 | TELEPHONE | | | | 39.13 | ACCT.#575-622-1054-433B | |
| I | CC012141 | CCDC | AP | | R | 12/04/2015 | 56.48 | 56.48CR | |
| | | G/L ACCOUNT | | | | | 56.48 | | |
| | | 650 6-684-265-000 | MEDICAL CARE OF PRISONER | | | | 56.48 | ACCT.#575-622-0826-620B | |
| I | CC012142-1 | BERRENDO F.D. #1 | AP | | R | 12/04/2015 | 180.65 | 180.65CR | |
| | | G/L ACCOUNT | | | | | 180.65 | | |
| | | 411 8-814-340-000 | TELEPHONE | | | | 180.65 | ACCT.#575-623-4210-500B | |
| I | CC012143-1 | FLOOD CONTROL | AP | | R | 12/04/2015 | 111.88 | 111.88CR | |
| | | G/L ACCOUNT | | | | | 111.88 | | |
| | | 452 8-832-340-000 | TELEPHONE | | | | 111.88 | ACCT.#575-622-2043-769B | |
| I | CC012144-1 | COURTHOUSE | AP | | R | 12/04/2015 | 120.01 | 120.01CR | |
| | | G/L ACCOUNT | | | | | 120.01 | | |
| | | 401 6-692-340-000 | TELEPHONE | | | | 120.01 | ACCT.#575-622-0255-344B | |
| I | CC012145-1 | DWI PROGRAM | AP | | R | 12/04/2015 | 209.15 | 209.15CR | |
| | | G/L ACCOUNT | | | | | 209.15 | | |
| | | 432 7-761-340-000 | TELEPHONE | | | | 130.91 | ACCT.#575-622-3396-479B | |
| | | 432 7-761-340-000 | TELEPHONE | | | | 78.24 | ACCT.#575-622-3395-769B | |
| I | CC012146-1 | COMMISSION | AP | | R | 12/04/2015 | 146.61 | 146.61CR | |
| | | G/L ACCOUNT | | | | | 146.61 | | |
| | | 401 6-619-340-000 | TELEPHONE | | | | 56.48 | ACCT.#575-625-2617-516B | |
| | | 401 6-619-340-000 | TELEPHONE | | | | 33.67 | ACCT.#575-625-3740-553B | |
| | | 401 6-619-340-000 | TELEPHONE | | | | 56.46 | ACCT.#575-622-4051-782B | |
| I | CC012364 | COMMISSION | AP | | R | 12/04/2015 | 51.55 | 51.55CR | |
| | | G/L ACCOUNT | | | | | 51.55 | | |
| | | 401 6-619-340-000 | TELEPHONE | | | | 51.55 | ACCT.#575-625-3720-552B | |

VENDOR SEQUENCE

| VENDOR | ITEM NO# | DESCRIPTION | BANK | CHECK | STAT | DUE DT / DISC DT | GROSS / BALANCE | PAYMENT / DISCOUNT | OUTSTANDING |
|---|---|---|---|---|---|---|---|---|---|
| | | | REG. CHECK | | | | 1,050.18 / 1,050.18 | 1,050.18CR / 0.00 | 0.00 |
| 01-188 | CHAVES COUNTY C.A.S.A. | | | | | | | | |
| I 12-15/CASA | | DOMESTIC VIOLENCE/DEC. 2015 | AP | | R | 12/04/2015 | 2,000.00 / 2,000.00 | 2,000.00CR | |
| | | G/L ACCOUNT | | | | | | | |
| | | 432 7-761-267-000 CONTRACTUAL SERVICES | | | | 2,000.00 | DWI DISTRIBUTION FUNDS | | |
| | | | REG. CHECK | | | | 2,000.00 / 2,000.00 | 2,000.00CR / 0.00 | 0.00 |
| 01-4902 | HELEN CHEROMIAH | | | | | | | | |
| I CC012037 | | TRAVEL REIMBURSEMENT/ALBUQ | AP | | R | 12/04/2015 | 212.45 / 212.45 | 212.45CR | |
| | | G/L ACCOUNT | | | | | | | |
| | | 631 8-886-224-000 Training | | | | 212.45 | MILEAGE/PER DIEM | | |
| | | | REG. CHECK | | | | 212.45 / 212.45 | 212.45CR / 0.00 | 0.00 |
| 01-4027 | CUMBERLAND CO-OP WATER | | | | | | | | |
| I CC012361 | | MAINT. DEPT | AP | | R | 12/04/2015 | 36.18 / 36.18 | 36.18CR | |
| | | G/L ACCOUNT | | | | | | | |
| | | 401 6-691-341-000 UTILITIES | | | | 36.18 | ACCT.#G215 | | |
| I CC012362 | | MIDWAY F.D. #1 | AP | | R | 12/04/2015 | 21.43 / 21.43 | 21.43CR | |
| | | G/L ACCOUNT | | | | | | | |
| | | 410 8-816-341-000 UTILITIES | | | | 21.43 | ACCT. #G105 | | |
| I CC012363 | | EGP F.D. | AP | | R | 12/04/2015 | 21.43 / 21.43 | 21.43CR | |
| | | G/L ACCOUNT | | | | | | | |
| | | 408 8-812-341-000 UTILITIES | | | | 21.43 | ACCT.#B1085 | | |
| | | | REG. CHECK | | | | 79.04 / 79.04 | 79.04CR / 0.00 | 0.00 |
| 01-2395 | DEXTER CONSOLIDATED SCHOOLS | | | | | | | | |
| I 12-15/DEXTER TNT | | TNT/DEC. 2015 | AP | | R | 12/04/2015 | 1,200.00 / 1,200.00 | 1,200.00CR | |
| | | G/L ACCOUNT | | | | | | | |
| | | 432 7-761-267-000 CONTRACTUAL SERVICES | | | | 1,200.00 | DWI DISTRIBUTION FUNDS | | |

VENDOR SEQUENCE

| VENDOR | ITEM NO# | DESCRIPTION | BANK | CHECK | STAT | DUE DT / DISC DT | GROSS / BALANCE | PAYMENT / DISCOUNT | OUTSTANDING |
|---|---|---|---|---|---|---|---|---|---|
| | | | REG. CHECK | | | | 1,200.00 | 1,200.00CR | 0.00 |
| | | | | | | | 1,200.00 | 0.00 | |
| 01-5014 | TOWN OF DEXTER | | | | | | | | |
| I CC012471 | | HEALTH CLINIC/DEXTER | AP | | R | 12/04/2015 | 64.71 | 64.71CR | |
| | | G/L ACCOUNT | | | | | 64.71 | | |
| | | 401 6-693-341-000 UTILITIES | | | | 64.71 | ACCT.#1085 | | |
| | | | REG. CHECK | | | | 64.71 | 64.71CR | 0.00 |
| | | | | | | | 64.71 | 0.00 | |
| 01-179 | GOODES WELDING INC. | | | | | | | | |
| I 06495 | | SUPPLIES/ROAD | AP | | R | 12/04/2015 | 42.84 | 42.84CR | |
| | | G/L ACCOUNT | | | | | 42.84 | | |
| | | 402 6-653-221-000 VEH/HVY EQUIP. REPAIR | | | | 42.84 | SUPPLIES | | |
| | | | REG. CHECK | | | | 42.84 | 42.84CR | 0.00 |
| | | | | | | | 42.84 | 0.00 | |
| 01-2472 | HAGERMAN MUNICIPAL SCHOOLS | | | | | | | | |
| I 12-15/HAGERMAN TNT | | TNT/DEC. 2015 | AP | | R | 12/04/2015 | 1,200.00 | 1,200.00CR | |
| | | G/L ACCOUNT | | | | | 1,200.00 | | |
| | | 432 7-761-267-000 CONTRACTUAL SERVICES | | | | 1,200.00 | DWI DISTRIBUTION FUNDS | | |
| | | | REG. CHECK | | | | 1,200.00 | 1,200.00CR | 0.00 |
| | | | | | | | 1,200.00 | 0.00 | |
| 01-1583 | INLAND KENWORTH | | | | | | | | |
| I AL397367 | | BATTERIES/ROAD | AP | | R | 12/04/2015 | 315.96 | 315.96CR | |
| | | G/L ACCOUNT | | | | | 315.96 | | |
| | | 402 6-653-221-000 VEH/HVY EQUIP. REPAIR | | | | 315.96 | ACCT.#4646626 | | |
| | | | REG. CHECK | | | | 315.96 | 315.96CR | 0.00 |
| | | | | | | | 315.96 | 0.00 | |

PACKET: 06814 Regular Payments
VENDOR SET: 01

VENDOR SEQUENCE

| VENDOR | ITEM NO# | DESCRIPTION | BANK | CHECK | STAT | DUE DT / DISC DT | GROSS / BALANCE | PAYMENT / DISCOUNT | OUTSTANDING |
|---|---|---|---|---|---|---|---|---|---|
| 01-5357 | KLEEN TECH SERVICES CORPATI | | | | | | | | |
| | I 39319 | ADMIN. COMPLEX/NOV. 2015 | AP | | R | 12/04/2015 | 2,582.81 | 2,582.81CR | |
| | | G/L ACCOUNT | | | | | 2,582.81 | | |
| | | 401 6-691-267-000 CONTRACTUAL SERVICES | | | | 2,582.81 | JANITORIAL SERVICES | | |
| | I 39320 | HEALTH DEPT/NOV. 2015 | AP | | R | 12/04/2015 | 812.71 | 812.71CR | |
| | | G/L ACCOUNT | | | | | 812.71 | | |
| | | 401 6-693-267-000 CONTRACTUAL SERVICES | | | | 812.71 | JANITORIAL SERVICES | | |
| | I 39321 | ROAD DEPT/NOV. 2015 | AP | | R | 12/04/2015 | 206.21 | 206.21CR | |
| | | G/L ACCOUNT | | | | | 206.21 | | |
| | | 401 6-694-267-000 CONTRACTUAL SERVICES | | | | 206.21 | JANITORIAL SERVICES | | |
| | | | REG. CHECK | | | | 3,601.73 | 3,601.73CR | 0.00 |
| | | | | | | | 3,601.73 | 0.00 | |
| 01-3849 | LAKE ARTHUR SCHOOL DISTRICT | | | | | | | | |
| | I 12-15/LAKE ARTHUR | TNT/DEC. 2015 | AP | | R | 12/04/2015 | 1,200.00 | 1,200.00CR | |
| | | G/L ACCOUNT | | | | | 1,200.00 | | |
| | | 432 7-761-267-000 CONTRACTUAL SERVICES | | | | 1,200.00 | DWI DISTRIBUTION FUNDS | | |
| | | | REG. CHECK | | | | 1,200.00 | 1,200.00CR | 0.00 |
| | | | | | | | 1,200.00 | 0.00 | |
| 01-5482 | FRANK G. MAGOURILOS | | | | | | | | |
| | I 12-15/MARGOURILLOS | DWI EVALUATION/DEC. 2015 | AP | | R | 12/04/2015 | 1,500.00 | 1,500.00CR | |
| | | G/L ACCOUNT | | | | | 1,500.00 | | |
| | | 432 7-761-260-000 PROFESSIONAL SERVICES | | | | 1,500.00 | DWI DISTRIBUTION FUND | | |
| | | | REG. CHECK | | | | 1,500.00 | 1,500.00CR | 0.00 |
| | | | | | | | 1,500.00 | 0.00 | |
| 01-1683 | DIANNE MEDA | | | | | | | | |
| | I 12-15/MEDA | DWI SCREENING/DEC. 2015 | AP | | R | 12/04/2015 | 3,000.00 | 3,000.00CR | |
| | | G/L ACCOUNT | | | | | 3,000.00 | | |
| | | 432 7-766-267-000 CONTRACTUAL SERVICES | | | | 3,000.00 | DWI DISTRIBUTION FUNDS | | |
| | | | REG. CHECK | | | | 3,000.00 | 3,000.00CR | 0.00 |
| | | | | | | | 3,000.00 | 0.00 | |

PACKET: 06814 Regular Payments
VENDOR SET: 01

VENDOR SEQUENCE

| VENDOR | ITEM NO# | DESCRIPTION | BANK | CHECK | STAT | DUE DT / DISC DT | GROSS / BALANCE | PAYMENT / DISCOUNT | OUTSTANDING |
|---|---|---|---|---|---|---|---|---|---|
| 01-4002 | NEW MEXICO GAS COMPANY INC | | | | | | | | |
| I CC012252 | | SIERRA F.D. #1 | AP | | R | 12/04/2015 | 138.39 | 138.39CR | |
| | | G/L ACCOUNT | | | | | 138.39 | | |
| | | 412 8-815-341-000 | UTILITIES | | | 138.39 | ACCT.#075706312-0781188-7 | | |
| I CC012253 | | ROAD DEPT | AP | | R | 12/04/2015 | 541.44 | 541.44CR | |
| | | G/L ACCOUNT | | | | | 541.44 | | |
| | | 402 6-651-341-000 | UTILITIES | | | 541.44 | ACCT.#077702112-0801146-8 | | |
| I CC012254 | | SIERRA F.D. #2 | AP | | R | 12/04/2015 | 71.72 | 71.72CR | |
| | | G/L ACCOUNT | | | | | 71.72 | | |
| | | 412 8-815-341-000 | UTILITIES | | | 71.72 | ACCT.#077726812-0801393-5 | | |
| I CC012255 | | ROAD DEPT | AP | | R | 12/04/2015 | 1,331.02 | 1,331.02CR | |
| | | G/L ACCOUNT | | | | | 1,331.02 | | |
| | | 650 6-684-341-000 | UTILITIES | | | 1,331.02 | ACCT.#078156501-0805690-2 | | |
| I CC012256 | | ADMIN. BLDG. | AP | | R | 12/04/2015 | 478.42 | 478.42CR | |
| | | G/L ACCOUNT | | | | | 478.42 | | |
| | | 401 6-621-341-000 | UTILITIES | | | 10.38 | ACCT.#115435453-1201470-6 | | |
| | | 401 6-612-341-000 | UTILITIES | | | 10.43 | ACCT.#115435453-1201470-6 | | |
| | | 401 6-613-341-000 | UTILITIES | | | 6.94 | ACCT.#115435453-1201470-6 | | |
| | | 401 6-625-341-000 | UTILITIES | | | 6.94 | ACCT.#115435453-1201470-6 | | |
| | | 401 6-616-341-000 | UTILITIES | | | 6.94 | ACCT.#115435453-1201470-6 | | |
| | | 401 6-621-341-000 | UTILITIES | | | 6.94 | ACCT.#115435453-1201470-6 | | |
| | | 401 6-622-341-000 | UTILITIES | | | 26.31 | ACCT.#115435453-1201470-6 | | |
| | | 401 6-624-341-000 | UTILITIES | | | 31.81 | ACCT.#115435453-1201470-6 | | |
| | | 401 6-631-341-000 | UTILITIES | | | 14.35 | ACCT.#115435453-1201470-6 | | |
| | | 401 7-721-341-000 | UTILITIES | | | 98.51 | ACCT.#115435453-1201470-6 | | |
| | | 401 7-731-341-000 | UTILITIES | | | 58.42 | ACCT.#115435453-1201470-6 | | |
| | | 401 7-741-341-000 | UTILITIES | | | 42.29 | ACCT.#115435453-1201470-6 | | |
| | | 401 7-751-341-000 | UTILITIES | | | 134.53 | ACCT.#115435453-1201470-6 | | |
| | | 401 6-632-341-000 | UTILITIES | | | 9.28 | ACCT.#115435453-1201470-6 | | |
| | | 427 6-638-341-000 | UTILITIES | | | 14.35 | ACCT.#115435453-1201470-6 | | |
| I CC012257 | | ADMIN. BLDG. | AP | | R | 12/04/2015 | 29.35 | 29.35CR | |
| | | G/L ACCOUNT | | | | | 29.35 | | |
| | | 401 6-621-341-000 | UTILITIES | | | 0.64 | ACCT.#115435453-1203867-3 | | |
| | | 401 6-612-341-000 | UTILITIES | | | 0.64 | ACCT.#115435453-1203867-3 | | |
| | | 401 6-613-341-000 | UTILITIES | | | 0.43 | ACCT.#115435453-1203867-3 | | |
| | | 401 6-625-341-000 | UTILITIES | | | 0.43 | ACCT.#115435453-1203867-3 | | |
| | | 401 6-616-341-000 | UTILITIES | | | 0.43 | ACCT.#115435453-1203867-3 | | |
| | | 401 6-621-341-000 | UTILITIES | | | 0.43 | ACCT.#115435453-1203867-3 | | |
| | | 401 6-622-341-000 | UTILITIES | | | 1.61 | ACCT.#115435453-1203867-3 | | |
| | | 401 6-624-341-000 | UTILITIES | | | 1.95 | ACCT.#115435453-1203867-3 | | |
| | | 401 6-631-341-000 | UTILITIES | | | 0.88 | ACCT.#115435453-1203867-3 | | |

VENDOR SEQUENCE

| VENDOR | ITEM NO# | DESCRIPTION | BANK | CHECK | STAT | DUE DT / DISC DT | GROSS / BALANCE | PAYMENT / DISCOUNT | OUTSTANDING |
|---|---|---|---|---|---|---|---|---|---|
| | | 401 7-721-341-000 UTILITIES | | | | | 6.04 | ACCT.#115435453-1203867-3 | |
| | | 401 7-731-341-000 UTILITIES | | | | | 3.58 | ACCT.#115435453-1203867-3 | |
| | | 401 7-741-341-000 UTILITIES | | | | | 2.59 | ACCT.#115435453-1203867-3 | |
| | | 401 7-751-341-000 UTILITIES | | | | | 8.25 | ACCT.#115435453-1203867-3 | |
| | | 401 6-632-341-000 UTILITIES | | | | | 0.57 | ACCT.#115435453-1203867-3 | |
| | | 427 6-638-341-000 UTILITIES | | | | | 0.88 | ACCT.#115435453-1203867-3 | |
| | | REG. CHECK | | | | | 2,590.34 | 2,590.34CR | 0.00 |
| | | | | | | | 2,590.34 | 0.00 | |
| 01-4507 | NMAC - DETENTION AFFILIATE | | | | | | | | |
| I CC012470 | | AFFILIATE DUES/CCDC | AP | | R | 12/04/2015 | 100.00 | 100.00CR | |
| | | G/L ACCOUNT | | | | | 100.00 | | |
| | | 401 6-641-253-000 DUES & OTHER FEES | | | | | 100.00 | 2015 AFFILIATE DUES | |
| | | REG. CHECK | | | | | 100.00 | 100.00CR | 0.00 |
| | | | | | | | 100.00 | 0.00 | |
| 01-3799 | ROSWELL TIRE & APPLIANCE | | | | | | | | |
| I 137851 | | TIRES/ROAD | AP | | R | 12/04/2015 | 715.10 | 715.10CR | |
| | | G/L ACCOUNT | | | | | 715.10 | | |
| | | 402 6-653-222-000 TIRES/REPAIRS | | | | | 715.10 | ACCT.#980409932 | |
| I 138318 | | FILTER CLEANING/ROAD | AP | | R | 12/04/2015 | 167.89 | 167.89CR | |
| | | G/L ACCOUNT | | | | | 167.89 | | |
| | | 402 6-653-230-000 SUPPLIES/TOOLS | | | | | 167.89 | ACCT.#980409932 | |
| | | REG. CHECK | | | | | 882.99 | 882.99CR | 0.00 |
| | | | | | | | 882.99 | 0.00 | |
| 01-2567 | CITY OF ROSWELL | | | | | | | | |
| I 548-110315-PW | | CONSTRUCTION WATER/ROAD | AP | | R | 12/04/2015 | 2,991.60 | 2,991.60CR | |
| | | G/L ACCOUNT | | | | | 2,991.60 | | |
| | | 402 6-653-291-000 ROAD PROJECTS-OTHER | | | | | 2,991.60 | ACCT.#630-0000-349-18-00 | |
| | | REG. CHECK | | | | | 2,991.60 | 2,991.60CR | 0.00 |
| | | | | | | | 2,991.60 | 0.00 | |

PACKET: 06814 Regular Payments
VENDOR SET: 01

VENDOR SEQUENCE

| VENDOR | ITEM NO# | DESCRIPTION | BANK | CHECK | STAT | DUE DT / DISC DT | GROSS / BALANCE | PAYMENT / DISCOUNT | OUTSTANDING |
|---|---|---|---|---|---|---|---|---|---|
| 01-5485 | AMANDA SAIS | | | | | | | | |
| | I CC012472 | HAIRCUTS/JUVENILE | AP | | R | 12/04/2015 | 75.00 | 75.00CR | |
| | | G/L ACCOUNT | | | | | 75.00 | | |
| | | 401 6-645-234-000 INMATE SUPPLIES | | | | 75.00 | HAIRCUTS | | |
| | | | REG. CHECK | | | | 75.00 | 75.00CR | 0.00 |
| | | | | | | | 75.00 | 0.00 | |
| 01-5449 | SERENITY COUNSELING | | | | | | | | |
| | I 12-15/SERENITY | DWI TREATMENT/DEC. 2015 | AP | | R | 12/04/2015 | 4,333.00 | 4,333.00CR | |
| | | G/L ACCOUNT | | | | | 4,333.00 | | |
| | | 432 7-762-260-000 PROFESSIONAL SERVICES | | | | 4,333.00 | DWI DISTRIBUTION FUNDS | | |
| | | | REG. CHECK | | | | 4,333.00 | 4,333.00CR | 0.00 |
| | | | | | | | 4,333.00 | 0.00 | |
| 01-6305 | DIANE TAYLOR | | | | | | | | |
| | I 12-15/TAYLOR | DWI PREVENTION/DEC. 2015 | AP | | R | 12/04/2015 | 3,000.00 | 3,000.00CR | |
| | | G/L ACCOUNT | | | | | 3,000.00 | | |
| | | 432 7-761-267-000 CONTRACTUAL SERVICES | | | | 3,000.00 | DWI DISTRIBUTION FUNDS | | |
| | | | REG. CHECK | | | | 3,000.00 | 3,000.00CR | 0.00 |
| | | | | | | | 3,000.00 | 0.00 | |
| 01-969 | THE ROSWELL REFUGE | | | | | | | | |
| | I 12-15/REFUGE | DOMESTIC VIOLENCE/DEC. 2015 | AP | | R | 12/04/2015 | 2,500.00 | 2,500.00CR | |
| | | G/L ACCOUNT | | | | | 2,500.00 | | |
| | | 432 7-761-267-000 CONTRACTUAL SERVICES | | | | 2,500.00 | DWI DISTRIBUTION FUNDS | | |
| | | | REG. CHECK | | | | 2,500.00 | 2,500.00CR | 0.00 |
| | | | | | | | 2,500.00 | 0.00 | |
| 01-3731 | TYLER TECHNOLOGIES | | | | | | | | |
| | I 025-139892 | SOFTWARE SUPPORT/ASSESSOR | AP | | R | 12/04/2015 | 2,691.09 | 2,691.09CR | |
| | | G/L ACCOUNT | | | | | 2,691.09 | | |
| | | 401 7-732-249-000 EQUIPMENT MAINT/AGREEMENTS | | | | 1,345.54 | ACCT.#42484 | | |
| | | 628 7-733-249-000 EQUIPMENT MAINT/AGREEMENTS | | | | 1,345.55 | ACCT.#42484 | | |
| | I 025-140371 | DISASTER RECOVERY/FINANCE | AP | | R | 12/04/2015 | 34,728.33 | 34,728.33CR | |
| | | G/L ACCOUNT | | | | | 34,728.33 | | |
| | | 401 6-631-249-000 EQUIP MAINT/AGREEMENTS | | | | 34,728.33 | ACCT.#42486 | | |

VENDOR SEQUENCE

| VENDOR | ITEM NO# | DESCRIPTION | BANK | CHECK | STAT | DUE DT / DISC DT | GROSS / BALANCE | PAYMENT / DISCOUNT | OUTSTANDING |
|---|---|---|---|---|---|---|---|---|---|
| | | | REG. CHECK | | | | 37,419.42 | 37,419.42CR | 0.00 |
| | | | | | | | 37,419.42 | 0.00 | |
| 01-717 | WAKEFIELD OIL CO. INC. | | | | | | | | |
| I 114731 | | BULK FUELS/FLOOD | AP | | R | 12/04/2015 | 1,723.85 | 1,723.85CR | |
| | | G/L ACCOUNT | | | | | 1,723.85 | | |
| | | 452 8-832-223-000 VEHICLE FUELS | | | | 1,723.85 | ACCT.#CHACO | | |
| I 114890 | | BULK FUEL/FLOOD | AP | | R | 12/04/2015 | 1,130.70 | 1,130.70CR | |
| | | G/L ACCOUNT | | | | | 1,130.70 | | |
| | | 452 8-832-223-000 VEHICLE FUELS | | | | 1,130.70 | ACCT.#CHACO | | |
| I 115221 | | BULK FUEL/FLOOD | AP | | R | 12/04/2015 | 776.15 | 776.15CR | |
| | | G/L ACCOUNT | | | | | 776.15 | | |
| | | 452 8-832-223-000 VEHICLE FUELS | | | | 776.15 | ACCT.#CHACO | | |
| I 115510 | | BULK FUEL/FLOOD | AP | | R | 12/04/2015 | 1,272.77 | 1,272.77CR | |
| | | G/L ACCOUNT | | | | | 1,272.77 | | |
| | | 452 8-832-223-000 VEHICLE FUELS | | | | 1,272.77 | ACCT.#CHACO | | |
| | | | REG. CHECK | | | | 4,903.47 | 4,903.47CR | 0.00 |
| | | | | | | | 4,903.47 | 0.00 | |
| 01-3732 | ROSWELL W.F.L. | | | | | | | | |
| I 12-15/WFL | | ALT SENTENCING/DEC. 2015 | AP | | R | 12/04/2015 | 3,000.00 | 3,000.00CR | |
| | | G/L ACCOUNT | | | | | 3,000.00 | | |
| | | 432 7-761-267-000 CONTRACTUAL SERVICES | | | | 3,000.00 | DWI DISTRIBUTION FUND | | |
| I 2015-16-5 | | WINGS FOR LIFE/NOV. 2015 | AP | | R | 12/04/2015 | 5,842.00 | 5,842.00CR | |
| | | G/L ACCOUNT | | | | | 5,842.00 | | |
| | | 631 8-885-267-000 OTHER CONTRACT SERVICES | | | | 5,842.00 | CYFD CONTINUUM GRANT | | |
| | | | REG. CHECK | | | | 8,842.00 | 8,842.00CR | 0.00 |
| | | | | | | | 8,842.00 | 0.00 | |
| 01-416 | XCEL ENGERY | | | | | | | | |
| I CC012259 | | SHERIFF SUB-STATION/HAGERMA | AP | | R | 12/04/2015 | 98.58 | 98.58CR | |
| | | G/L ACCOUNT | | | | | 98.58 | | |
| | | 401 7-751-341-000 UTILITIES | | | | 98.58 | ACCT.#54-3943607-4 | | |
| I CC012360 | | COURTHOUSE | AP | | R | 12/04/2015 | 5,549.46 | 5,549.46CR | |
| | | G/L ACCOUNT | | | | | 5,549.46 | | |
| | | 401 6-692-341-000 UTILITIES | | | | 381.80 | ACCT.#54-3949442-7 | | |

PACKET: 06814 Regular Payments
VENDOR SET: 01

VENDOR SEQUENCE

| VENDOR | ITEM NO# | DESCRIPTION | BANK | CHECK | STAT | DUE DT / DISC DT | GROSS BALANCE | PAYMENT DISCOUNT | OUTSTANDING |
|---|---|---|---|---|---|---|---|---|---|
| | | 401 6-692-341-000 UTILITIES | | | | 4,321.92 | ACCT.#54-3949442-7 | | |
| | | 401 6-645-341-000 UTILITIES | | | | 845.74 | ACCT.#54-3949442-7 | | |
| | | | REG. CHECK | | | | 5,648.04 | 5,648.04CR | 0.00 |
| | | | | | | | 5,648.04 | 0.00 | |

PACKET: 06814 Regular Payments
VENDOR SET: 01

## REPORT TOTALS

### FUND DISTRIBUTION

| FUND NO# | FUND NAME | AMOUNT |
|---|---|---|
| 401 | General Fund | 46,410.24CR |
| 402 | Road Fund | 31,300.72CR |
| 408 | East Grand Plains VolFire | 21.43CR |
| 410 | Midway Volunteer Fire Fnd | 440.17CR |
| 411 | Berrendo Volunteer Fire | 274.86CR |
| 412 | Sierra Volunteer Fire Fnd | 403.62CR |
| 414 | CC Fire Dist #8 Vol Fire | 46.80CR |
| 427 | Indigent Hospital Claims | 15.23CR |
| 432 | DWI Grant Funds | 25,142.15CR |
| 437 | Environmental Tax | 85.33CR |
| 452 | Flood Control | 5,015.35CR |
| 628 | Property Valuation | 1,345.55CR |
| 631 | Other Grants & Contracts | 6,054.45CR |
| 650 | Detention Construction PJ | 206,068.20CR |
| | ** TOTALS ** | 322,624.10CR |

### ---- TYPE OF CHECK TOTALS ----

| | NUMBER | GROSS BALANCE | PAYMENT DISCOUNT | OUTSTANDING |
|---|---|---|---|---|
| HAND CHECKS | | 0.00 | 0.00 | 0.00 |
| | | 0.00 | 0.00 | |
| DRAFTS | | 0.00 | 0.00 | 0.00 |
| | | 0.00 | 0.00 | |
| REG-CHECKS | | 322,624.10 | 322,624.10CR | 0.00 |
| | | 322,624.10 | 0.00 | |
| EFT | | 0.00 | 0.00 | 0.00 |
| | | 0.00 | 0.00 | |
| NON-CHECKS | | 0.00 | 0.00 | 0.00 |
| | | 0.00 | 0.00 | |
| ALL CHECKS | | 322,624.10 | 322,624.10CR | 0.00 |
| | | 322,624.10 | 0.00 | |

TOTAL CHECKS TO PRINT: 33

ERRORS: 0 WARNINGS: 0

Approved for Payment

PACKET: 06825 Regular Payments
VENDOR SET: 01 12-11-15

VENDOR SEQUENCE

| VENDOR | ITEM NO# | DESCRIPTION | BANK | CHECK | STAT | DUE DT / DISC DT | GROSS / BALANCE | PAYMENT / DISCOUNT | OUTSTANDING |
|---|---|---|---|---|---|---|---|---|---|
| 01-1238 | AG EQUIPMENT | | | | | | | | |
| I 108747 | | PARTS/ROAD | AP | | R | 12/11/2015 | 815.40 | 815.40CR | |
| | | G/L ACCOUNT | | | | | 815.40 | | |
| | | 402 6-653-221-000 VEH/HVY EQUIP. REPAIR | | | | 815.40 | ACCT.#030801 | | |
| | | | | REG. CHECK | | | 815.40 | 815.40CR | 0.00 |
| | | | | | | | 815.40 | 0.00 | |
| 01-5087 | HERITAGE MEMORIAL ALLIANCE | | | | | | | | |
| I CC012474 | | DOD 11/21/15 | AP | | R | 12/11/2015 | 600.00 | 600.00CR | |
| | | G/L ACCOUNT | | | | | 600.00 | | |
| | | 427 6-639-296-000 INDIGENT BURIAL | | | | 600.00 | INDIGENT CREMATION | | |
| | | | | REG. CHECK | | | 600.00 | 600.00CR | 0.00 |
| | | | | | | | 600.00 | 0.00 | |
| 01-181 | AT&T | | | | | | | | |
| I CC012708 | | MIDWAY F.D. #2 | AP | | R | 12/11/2015 | 39.40 | 39.40CR | |
| | | G/L ACCOUNT | | | | | 39.40 | | |
| | | 410 8-816-340-000 TELEPHONE | | | | 39.40 | ACCT.#050-543-9111-001 | | |
| | | | | REG. CHECK | | | 39.40 | 39.40CR | 0.00 |
| | | | | | | | 39.40 | 0.00 | |
| 01-138 | BERRENDO CO-OP WTR USERS IN | | | | | | | | |
| I CC012693 | | ROAD DEPT | AP | | R | 12/11/2015 | 162.82 | 162.82CR | |
| | | G/L ACCOUNT | | | | | 162.82 | | |
| | | 402 6-651-341-000 UTILITIES | | | | 162.82 | ACCT.#J1720000 | | |
| | | | | REG. CHECK | | | 162.82 | 162.82CR | 0.00 |
| | | | | | | | 162.82 | 0.00 | |
| 01-4670 | JEANINE CORN BEST | | | | | | | | |
| I C39201512087732 | | J.BEST/ Cause # DM-2007-019 | AP | | R | 12/06/2015 | 154.62 | 154.62CR | |
| | | G/L ACCOUNT | | | | | 154.62 | | |
| | | 452 2-200-018-000 CHILD ENFORCEMENT PAYABLE | | | | 154.62 | J.BEST/ Cause # DM-2007-0194 | | |
| | | | | REG. CHECK | | | 154.62 | 154.62CR | 0.00 |
| | | | | | | | 154.62 | 0.00 | |

VENDOR SEQUENCE

| VENDOR | ITEM NO# | DESCRIPTION | BANK | CHECK | STAT | DUE DT / DISC DT | GROSS / BALANCE | PAYMENT / DISCOUNT | OUTSTANDING |
|---|---|---|---|---|---|---|---|---|---|
| 01-5084 | BRADBURY STAMM CONSTRUCTION | | | | | | | | |
| | I CC012810 | RENOVATIONS/CCDC | AP | | R | 12/11/2015 | 144,159.65 | 144,159.65CR | |
| | | G/L ACCOUNT | | | | | 144,159.65 | | |
| | | 650 6-685-381-000 Construction Projects | | | | 144,159.65 | PROJECT #1323 | | |
| | | | REG. CHECK | | | | 144,159.65 | 144,159.65CR | 0.00 |
| | | | | | | | 144,159.65 | 0.00 | |
| 01-574 | CABLE ONE | | | | | | | | |
| | I CC012691 | BERRENDO F.D. #1, 2 & 3 | AP | | R | 12/11/2015 | 299.03 | 299.03CR | |
| | | G/L ACCOUNT | | | | | 299.03 | | |
| | | 411 8-814-341-000 UTILITIES | | | | 97.81 | ACCT.#101600476 | | |
| | | 411 8-814-341-000 UTILITIES | | | | 97.81 | ACCT.#101637692 | | |
| | | 411 8-814-341-000 UTILITIES | | | | 97.81 | ACCT.#101639300 | | |
| | | 411 8-814-341-000 UTILITIES | | | | 5.60 | ACCT.#101649580 | | |
| | I CC012692 | BY DEPT | AP | | R | 12/11/2015 | 269.84 | 269.84CR | |
| | | G/L ACCOUNT | | | | | 269.84 | | |
| | | 401 6-613-237-000 SUBSCRIPTIONS/PUBLICATIONS | | | | 2.37 | ACCT.#101614931 | | |
| | | 401 6-612-237-000 SUBSCRIPTIONS/PUBLICATIONS | | | | 2.37 | ACCT.#101614931 | | |
| | | 401 6-613-237-000 SUBSCRIPTIONS/PUBLICATIONS | | | | 2.37 | ACCT.#101614931 | | |
| | | 401 6-625-237-000 SUBSCRIPTIONS/PUBLICATIONS | | | | 2.37 | ACCT.#101614931 | | |
| | | 401 6-621-237-000 SUBSCRIPTIONS/PUBLICATIONS | | | | 2.37 | ACCT.#101614931 | | |
| | | 401 6-621-237-000 SUBSCRIPTIONS/PUBLICATIONS | | | | 2.37 | ACCT.#101614931 | | |
| | | 401 6-622-237-000 SUBSCRIPTIONS/PUBLICATIONS | | | | 7.11 | ACCT.#101614931 | | |
| | | 401 6-624-237-000 SUBSCRIPTIONS/PUBLICATIONS | | | | 9.48 | ACCT.#101614931 | | |
| | | 401 6-616-237-000 SUBSCRIPTIONS/PUBLICATIONS | | | | 2.37 | ACCT.#101614931 | | |
| | | 401 6-621-237-000 SUBSCRIPTIONS/PUBLICATIONS | | | | 2.37 | ACCT.#101614931 | | |
| | | 401 6-631-237-000 SUBSCRIPTIONS/PUBLICATIONS | | | | 9.48 | ACCT.#101614931 | | |
| | | 401 6-632-237-000 SUBSCRIPTIONS/PUBLICATIONS | | | | 7.11 | ACCT.#101614931 | | |
| | | 401 6-691-237-000 SUBSCRIPTIONS/PUBLICATIONS | | | | 7.11 | ACCT.#101614931 | | |
| | | 401 7-721-237-000 SUBSCRIPTIONS/PUBLICATIONS | | | | 35.55 | ACCT.#101614931 | | |
| | | 401 7-731-237-000 SUBSCRIPTIONS/PUBLICATIONS | | | | 18.96 | ACCT.#101614931 | | |
| | | 401 7-741-237-000 SUBSCRIPTIONS/PUBLICATIONS | | | | 21.33 | ACCT.#101614931 | | |
| | | 401 7-751-237-000 SUBSCRIPTIONS/PUBLICATIONS | | | | 42.83 | ACCT.#101614931 | | |
| | | 427 6-638-237-000 SUBSCRIPTIONS/PUBLICATIONS | | | | 7.11 | ACCT.#101614931 | | |
| | | 628 7-733-237-000 SUBSCRIPTIONS/PUBLICATIONS | | | | 9.48 | ACCT.#101614931 | | |
| | | 402 6-651-237-000 SUBSCRIPTIONS/PUBLICATIONS | | | | 16.59 | ACCT.#101614931 | | |
| | | 401 6-641-237-000 SUBSCRIPTIONS/PUBLICATIONS | | | | 26.07 | ACCT.#101614931 | | |
| | | 401 6-645-237-000 SUBSCRIPTIONS/PUBLICATIONS | | | | 11.85 | ACCT.#101614931 | | |
| | | 432 7-761-237-000 SUBSCRIPTIONS/PUBLICATIONS | | | | 7.11 | ACCT.#101614931 | | |
| | | 401 6-641-237-000 SUBSCRIPTIONS/PUBLICATIONS | | | | 4.74 | ACCT.#101614931 | | |
| | | 401 6-641-237-000 SUBSCRIPTIONS/PUBLICATIONS | | | | 6.60 | ACCT.#101614931 | | |
| | | 401 6-641-237-000 SUBSCRIPTIONS/PUBLICATIONS | | | | 2.37 | ACCT.#101614931 | | |

PACKET: 06825 Regular Payments
VENDOR SET: 01

VENDOR SEQUENCE

| VENDOR | ITEM NO# | DESCRIPTION | BANK | CHECK | STAT | DUE DT / DISC DT | GROSS / BALANCE | PAYMENT / DISCOUNT | OUTSTANDING |
|---|---|---|---|---|---|---|---|---|---|
| | | REG. CHECK | | | | | 568.87<br>568.87 | 568.87CR<br>0.00 | 0.00 |
| 01-705 | CATERPILLAR FINANCIAL SERVI | | | | | | | | |
| I 16742246 | | LEASE FOR WATER TRUCKS/ROAD | AP | | R | 12/11/2015 | 4,250.28<br>4,250.28 | 4,250.28CR | |
| | | G/L ACCOUNT<br>402 6-653-251-000 RENTALS | | | | 4,250.28 | ACCT.#47313 | | |
| I 16760528 | | LEASE FOR LOADER/ROAD | AP | | R | 12/11/2015 | 2,899.86<br>2,899.86 | 2,899.86CR | |
| | | G/L ACCOUNT<br>402 6-653-251-000 RENTALS | | | | 2,899.86 | ACCT.#47313 | | |
| | | REG. CHECK | | | | | 7,150.14<br>7,150.14 | 7,150.14CR<br>0.00 | 0.00 |
| 01-4730 | QWEST | | | | | | | | |
| I CC012586 | | SIERRA F.D. #3 | AP | | R | 12/11/2015 | 55.93<br>55.93 | 55.93CR | |
| | | G/L ACCOUNT<br>412 8-815-340-000 TELEPHONE | | | | 55.93 | ACCT.#575-623-3069-117B | | |
| I CC012587 | | COMMISSION | AP | | R | 12/11/2015 | 1,475.05<br>1,475.05 | 1,475.05CR | |
| | | G/L ACCOUNT<br>401 6-619-340-000 TELEPHONE | | | | 1,475.05 | ACCT.#575-622-2117-534B | | |
| I CC012588 | | SIERRA F.D. #1 & 4 | AP | | R | 12/11/2015 | 186.70<br>186.70 | 186.70CR | |
| | | G/L ACCOUNT<br>412 8-815-340-000 TELEPHONE | | | | 120.59 | ACCT.#575-623-1946-184B | | |
| | | 412 8-815-340-000 TELEPHONE | | | | 66.11 | ACCT.#575-623-3013-693B | | |
| I CC012589 | | COURTHOUSE | AP | | R | 12/11/2015 | 60.62<br>60.62 | 60.62CR | |
| | | G/L ACCOUNT<br>401 6-692-340-000 TELEPHONE | | | | 60.62 | ACCT.#575-623-1269-337B | | |
| I CC012690-1 | | CCDC | AP | | R | 12/11/2015 | 454.36<br>454.36 | 454.36CR | |
| | | G/L ACCOUNT<br>650 6-684-340-000 TELEPHONE | | | | 454.36 | ACCT.#575-623-3037-065B | | |
| | | REG. CHECK | | | | | 2,232.66<br>2,232.66 | 2,232.66CR<br>0.00 | 0.00 |

PACKET: 06825 Regular Payments
VENDOR SET: 01

VENDOR SEQUENCE

| VENDOR | ITEM NO# | DESCRIPTION | BANK | CHECK | STAT | DUE DT / DISC DT | GROSS / BALANCE | PAYMENT / DISCOUNT | OUTSTANDING |
|---|---|---|---|---|---|---|---|---|---|
| 01-188 | CHAVES COUNTY C.A.S.A. | | | | | | | | |
| | I ALT ED.#4 | ALTERNATIVE ED/NOV. 2015 | AP | | R | 12/11/2015 | 5,625.00 | 5,625.00CR | |
| | | G/L ACCOUNT | | | | | 5,625.00 | | |
| | | 631 8-885-267-000 OTHER CONTRACT SERVICES | | | | 5,625.00 | CYFD CONTINUUM GRANT | | |
| | I GC YA #5 | GIRLS CIRCLE/NOV. 2015 | AP | | R | 12/11/2015 | 1,850.00 | 1,850.00CR | |
| | | G/L ACCOUNT | | | | | 1,850.00 | | |
| | | 631 8-885-267-000 OTHER CONTRACT SERVICES | | | | 1,850.00 | CYFD CONTINUUM GRANT | | |
| | I YA #5 | YOUTH ADVOCACY/NOV. 2015 | AP | | R | 12/11/2015 | 4,330.00 | 4,330.00CR | |
| | | G/L ACCOUNT | | | | | 4,330.00 | | |
| | | 631 8-885-267-000 OTHER CONTRACT SERVICES | | | | 4,330.00 | CYFD CONTINUUM GRANT | | |
| | | REG. CHECK | | | | | 11,805.00 | 11,805.00CR | 0.00 |
| | | | | | | | 11,805.00 | 0.00 | |
| 01-5076 | CHAVES COUNTY FEDERAL PAYRO | | | | | | | | |
| | I T1 201512087732 | FEDERAL W/H PAYABLE | AP | | R | 12/06/2015 | 34,061.02 | 34,061.02CR | |
| | | G/L ACCOUNT | | | | | 34,061.02 | | |
| | | 401 2-200-003-000 FEDERAL WITHHOLDING PAYABLE | | | | 27,355.19 | FEDERAL W/H PAYABLE | | |
| | | 402 2-200-003-000 FEDERAL WITHHOLDING PAYABLE | | | | 4,443.15 | FEDERAL W/H PAYABLE | | |
| | | 427 2-200-003-000 FEDERAL WITHHOLDING PAYABLE | | | | 92.09 | FEDERAL W/H PAYABLE | | |
| | | 432 2-200-003-000 FEDERAL WITHHOLDING PAYABLE | | | | 384.03 | FEDERAL W/H PAYABLE | | |
| | | 435 2-200-003-000 FEDERAL WITHHOLDING PAYABLE | | | | 108.29 | FEDERAL W/H PAYABLE | | |
| | | 437 2-200-003-000 FEDERAL WITHHOLDING PAYABLE | | | | 244.02 | FEDERAL W/H PAYABLE | | |
| | | 452 2-200-003-000 FEDERAL WITHHOLDING PAYABLE | | | | 1,434.25 | FEDERAL W/H PAYABLE | | |
| | I T3 201512087732 | FICA PAYABLE | AP | | R | 12/06/2015 | 39,425.58 | 39,425.58CR | |
| | | G/L ACCOUNT | | | | | 39,425.58 | | |
| | | 401 2-200-001-000 FICA PAYABLE | | | | 14,492.97 | FICA PAYABLE | | |
| | | 401 6-611-108-000 F I C A | | | | 250.01 | FICA PAYABLE | | |
| | | 401 6-613-108-000 F I C A | | | | 229.57 | FICA PAYABLE | | |
| | | 401 6-616-108-000 F I C A | | | | 122.85 | FICA PAYABLE | | |
| | | 401 6-621-108-000 F I C A | | | | 427.51 | FICA PAYABLE | | |
| | | 401 6-622-108-000 F I C A | | | | 381.24 | FICA PAYABLE | | |
| | | 401 6-624-108-000 F I C A | | | | 406.21 | FICA PAYABLE | | |
| | | 401 6-625-108-000 F I C A | | | | 285.29 | FICA PAYABLE | | |
| | | 401 6-631-108-000 F I C A | | | | 422.95 | FICA PAYABLE | | |
| | | 401 6-632-108-000 F I C A | | | | 200.40 | FICA PAYABLE | | |
| | | 401 6-641-108-000 F I C A | | | | 974.49 | FICA PAYABLE | | |
| | | 401 6-642-108-000 F I C A | | | | 5,134.02 | FICA PAYABLE | | |
| | | 401 6-645-108-000 F I C A | | | | 1,556.93 | FICA PAYABLE | | |
| | | 401 6-691-108-000 F I C A | | | | 828.90 | FICA PAYABLE | | |
| | | 401 6-692-108-000 F I C A | | | | 224.82 | FICA PAYABLE | | |

PACKET: 06825 Regular Payments
VENDOR SET: 01

VENDOR SEQUENCE

| VENDOR | ITEM NO# | DESCRIPTION | BANK | CHECK | STAT | DUE DT / DISC DT | GROSS / BALANCE | PAYMENT / DISCOUNT | OUTSTANDING |
|---|---|---|---|---|---|---|---|---|---|
| | | 401 7-721-108-000 | F I C A | | | | 464.64 | FICA PAYABLE | |
| | | 401 7-722-108-000 | F I C A | | | | 286.90 | FICA PAYABLE | |
| | | 401 7-723-108-000 | F I C A | | | | 29.08 | FICA PAYABLE | |
| | | 401 7-731-108-000 | F I C A | | | | 632.06 | FICA PAYABLE | |
| | | 401 7-732-108-000 | F I C A | | | | 400.44 | FICA PAYABLE | |
| | | 401 7-741-108-000 | F I C A | | | | 602.20 | FICA PAYABLE | |
| | | 401 7-751-108-000 | F I C A | | | | 632.46 | FICA PAYABLE | |
| | | 402 2-200-001-000 | FICA PAYABLE | | | | 3,495.77 | FICA PAYABLE | |
| | | 402 6-651-108-000 | F I C A | | | | 320.45 | FICA PAYABLE | |
| | | 402 6-652-108-000 | F I C A | | | | 704.89 | FICA PAYABLE | |
| | | 402 6-653-108-000 | F I C A | | | | 2,274.86 | FICA PAYABLE | |
| | | 402 6-654-108-000 | F I C A | | | | 195.57 | FICA PAYABLE | |
| | | 427 2-200-001-000 | FICA PAYABLE | | | | 170.98 | FICA PAYABLE | |
| | | 427 6-638-108-000 | F I C A | | | | 170.98 | FICA PAYABLE | |
| | | 432 2-200-001-000 | FICA PAYABLE | | | | 285.10 | FICA PAYABLE | |
| | | 432 7-761-108-000 | F.I.C.A. | | | | 115.19 | FICA PAYABLE | |
| | | 432 7-765-108-000 | F.I.C.A. | | | | 169.91 | FICA PAYABLE | |
| | | 435 2-200-001-000 | FICA PAYABLE | | | | 143.39 | FICA PAYABLE | |
| | | 435 6-643-108-000 | F I C A | | | | 143.39 | FICA PAYABLE | |
| | | 437 2-200-001-000 | FICA PAYABLE | | | | 184.32 | FICA PAYABLE | |
| | | 437 6-659-108-000 | F I C A | | | | 184.32 | FICA PAYABLE | |
| | | 452 2-200-001-000 | FICA PAYABLE | | | | 940.26 | FICA PAYABLE | |
| | | 452 8-832-108-000 | F I C A | | | | 940.26 | FICA PAYABLE | |
| I | T3 201512087733 | FICA PAYABLE | AP | | R | 12/06/2015 | 1,750.18 | | 1,750.18CR |
| | | G/L ACCOUNT | | | | | 1,750.18 | | |
| | | 401 2-200-001-000 | FICA PAYABLE | | | | 875.09 | FICA PAYABLE | |
| | | 401 6-624-108-000 | F I C A | | | | 134.27 | FICA PAYABLE | |
| | | 401 6-641-108-000 | F I C A | | | | 120.90 | FICA PAYABLE | |
| | | 401 6-642-108-000 | F I C A | | | | 458.80 | FICA PAYABLE | |
| | | 401 7-721-108-000 | F I C A | | | | 80.56 | FICA PAYABLE | |
| | | 401 7-722-108-000 | F I C A | | | | 80.56 | FICA PAYABLE | |
| I | T3 201512087734 | FICA PAYABLE | AP | | R | 12/06/2015 | 25.34 | | 25.34CR |
| | | G/L ACCOUNT | | | | | 25.34 | | |
| | | 401 2-200-001-000 | FICA PAYABLE | | | | 12.67 | FICA PAYABLE | |
| | | 401 7-751-108-000 | F I C A | | | | 12.67 | FICA PAYABLE | |
| I | T4 201512087732 | MEDICARE PAYABLE | AP | | R | 12/06/2015 | 11,595.74 | | 11,595.74CR |
| | | G/L ACCOUNT | | | | | 11,595.74 | | |
| | | 401 2-200-006-000 | MEDICARE PAYABLE | | | | 4,577.09 | MEDICARE PAYABLE | |
| | | 401 6-611-106-000 | MEDICARE TAX | | | | 58.47 | MEDICARE PAYABLE | |
| | | 401 6-612-106-000 | MEDICARE TAX | | | | 75.83 | MEDICARE PAYABLE | |
| | | 401 6-613-106-000 | MEDICARE TAX | | | | 53.69 | MEDICARE PAYABLE | |
| | | 401 6-616-106-000 | MEDICARE TAX | | | | 28.73 | MEDICARE PAYABLE | |
| | | 401 6-621-106-000 | MEDICARE TAX | | | | 99.98 | MEDICARE PAYABLE | |
| | | 401 6-622-106-000 | MEDICARE TAX | | | | 89.16 | MEDICARE PAYABLE | |
| | | 401 6-624-106-000 | MEDICARE TAX | | | | 95.00 | MEDICARE PAYABLE | |

PACKET: 06825 Regular Payments
VENDOR SET: 01

VENDOR SEQUENCE

| VENDOR | ITEM NO# | DESCRIPTION | BANK | CHECK | STAT | DUE DT / DISC DT | GROSS / BALANCE | PAYMENT / DISCOUNT | OUTSTANDING |
|---|---|---|---|---|---|---|---|---|---|
| | | 401 6-625-106-000 | MEDICARE TAX | | | | 66.72 | MEDICARE PAYABLE | |
| | | 401 6-631-106-000 | MEDICARE TAX | | | | 98.93 | MEDICARE PAYABLE | |
| | | 401 6-632-106-000 | MEDICARE TAX | | | | 46.87 | MEDICARE PAYABLE | |
| | | 401 6-641-106-000 | MEDICARE TAX | | | | 227.90 | MEDICARE PAYABLE | |
| | | 401 6-642-106-000 | MEDICARE TAX | | | | 1,200.68 | MEDICARE PAYABLE | |
| | | 401 6-645-106-000 | MEDICARE TAX | | | | 364.14 | MEDICARE PAYABLE | |
| | | 401 6-691-106-000 | MEDICARE TAX | | | | 193.86 | MEDICARE PAYABLE | |
| | | 401 6-692-106-000 | MEDICARE TAX | | | | 52.59 | MEDICARE PAYABLE | |
| | | 401 7-721-106-000 | MEDICARE TAX | | | | 108.66 | MEDICARE PAYABLE | |
| | | 401 7-722-106-000 | MEDICARE TAX | | | | 67.10 | MEDICARE PAYABLE | |
| | | 401 7-723-106-000 | MEDICARE TAX | | | | 6.80 | MEDICARE PAYABLE | |
| | | 401 7-731-106-000 | MEDICARE TAX | | | | 147.83 | MEDICARE PAYABLE | |
| | | 401 7-732-106-000 | MEDICARE TAX | | | | 93.65 | MEDICARE PAYABLE | |
| | | 401 7-741-106-000 | MEDICARE TAX | | | | 140.85 | MEDICARE PAYABLE | |
| | | 401 7-751-106-000 | MEDICARE TAX | | | | 218.29 | MEDICARE PAYABLE | |
| | | 401 7-752-106-000 | MEDICARE TAX | | | | 865.71 | MEDICARE PAYABLE | |
| | | 401 7-758-106-000 | MEDICARE TAX | | | | 175.65 | MEDICARE PAYABLE | |
| | | 402 2-200-006-000 | MEDICARE PAYABLE | | | | 817.57 | MEDICARE PAYABLE | |
| | | 402 6-651-106-000 | MEDICARE TAX | | | | 74.95 | MEDICARE PAYABLE | |
| | | 402 6-652-106-000 | MEDICARE TAX | | | | 164.86 | MEDICARE PAYABLE | |
| | | 402 6-653-106-000 | MEDICARE TAX | | | | 532.02 | MEDICARE PAYABLE | |
| | | 402 6-654-106-000 | MEDICARE TAX | | | | 45.74 | MEDICARE PAYABLE | |
| | | 427 2-200-006-000 | MEDICARE PAYABLE | | | | 39.99 | MEDICARE PAYABLE | |
| | | 427 6-638-106-000 | MEDICARE TAX | | | | 39.99 | MEDICARE PAYABLE | |
| | | 432 2-200-006-000 | MEDICARE PAYABLE | | | | 66.68 | MEDICARE PAYABLE | |
| | | 432 7-761-106-000 | MEDICARE TAX | | | | 26.94 | MEDICARE PAYABLE | |
| | | 432 7-765-106-000 | MEDICARE TAX | | | | 39.74 | MEDICARE PAYABLE | |
| | | 435 2-200-006-000 | MEDICARE PAYABLE | | | | 33.53 | MEDICARE PAYABLE | |
| | | 435 6-643-106-000 | MEDICARE TAX | | | | 33.53 | MEDICARE PAYABLE | |
| | | 437 2-200-006-000 | MEDICARE PAYABLE | | | | 43.11 | MEDICARE PAYABLE | |
| | | 437 6-659-106-000 | MEDICARE TAX | | | | 43.11 | MEDICARE PAYABLE | |
| | | 452 2-200-006-000 | MEDICARE PAYABLE | | | | 219.90 | MEDICARE PAYABLE | |
| | | 452 8-832-106-000 | MEDICARE TAX | | | | 219.90 | MEDICARE PAYABLE | |
| I | T4 201512087733 | MEDICARE PAYABLE | AP | | R | 12/06/2015 | 428.48 | | 428.48CR |
| | | G/L ACCOUNT | | | | | 428.48 | | |
| | | 401 2-200-006-000 | MEDICARE PAYABLE | | | | 214.24 | MEDICARE PAYABLE | |
| | | 401 6-624-106-000 | MEDICARE TAX | | | | 31.40 | MEDICARE PAYABLE | |
| | | 401 6-641-106-000 | MEDICARE TAX | | | | 28.29 | MEDICARE PAYABLE | |
| | | 401 6-642-106-000 | MEDICARE TAX | | | | 107.36 | MEDICARE PAYABLE | |
| | | 401 7-721-106-000 | MEDICARE TAX | | | | 18.84 | MEDICARE PAYABLE | |
| | | 401 7-722-106-000 | MEDICARE TAX | | | | 18.84 | MEDICARE PAYABLE | |
| | | 401 7-752-106-000 | MEDICARE TAX | | | | 9.51 | MEDICARE PAYABLE | |
| I | T4 201512087734 | MEDICARE PAYABLE | AP | | R | 12/06/2015 | 14.90 | | 14.90CR |
| | | G/L ACCOUNT | | | | | 14.90 | | |
| | | 401 2-200-006-000 | MEDICARE PAYABLE | | | | 7.45 | MEDICARE PAYABLE | |
| | | 401 7-751-106-000 | MEDICARE TAX | | | | 2.96 | MEDICARE PAYABLE | |

VENDOR SEQUENCE

| VENDOR | ITEM NO# | DESCRIPTION | BANK | CHECK | STAT | DUE DT / DISC DT | GROSS / BALANCE | PAYMENT / DISCOUNT | OUTSTANDING |
|---|---|---|---|---|---|---|---|---|---|
| | | 401 7-758-106-000 MEDICARE TAX | | | | 4.49 | MEDICARE PAYABLE | | |
| | | | REG. CHECK | | | | 87,301.24 | 87,301.24CR | 0.00 |
| | | | | | | | 87,301.24 | 0.00 | |
| 01-4025 | KIM CHESSER | | | | | | | | |
| I CC012584 | | TRAVEL REIMBURSEMENT/ALBUQ. | AP | | R | 12/11/2015 | 179.10 | 179.10CR | |
| | | G/L ACCOUNT | | | | | 179.10 | | |
| | | 401 6-611-226-000 MILEAGE REIMBURSEMENT | | | | 179.10 | MILEAGE | | |
| | | | REG. CHECK | | | | 179.10 | 179.10CR | 0.00 |
| | | | | | | | 179.10 | 0.00 | |
| 01-4710 | JOHN DEERE CAPITAL CORPORAT | | | | | | | | |
| I 1633779 | | GRADER LEASES/ROAD | AP | | R | 12/11/2015 | 2,270.49 | 2,270.49CR | |
| | | G/L ACCOUNT | | | | | 2,270.49 | | |
| | | 402 6-653-251-000 RENTALS | | | | 2,270.49 | CONTRACT#030-0061556-001 | | |
| I 1633780 | | GRADER LEASES/ROAD | AP | | R | 12/11/2015 | 2,270.49 | 2,270.49CR | |
| | | G/L ACCOUNT | | | | | 2,270.49 | | |
| | | 402 6-653-251-000 RENTALS | | | | 2,270.49 | CONTRACT#030-0061556-002 | | |
| I 1633781 | | GRADER LEASES/ROAD | AP | | R | 12/11/2015 | 2,270.49 | 2,270.49CR | |
| | | G/L ACCOUNT | | | | | 2,270.49 | | |
| | | 402 6-653-251-000 RENTALS | | | | 2,270.49 | CONTRACT#030-0061556-003 | | |
| I 1633782 | | GRADER LEASES/ROAD | AP | | R | 12/11/2015 | 2,270.49 | 2,270.49CR | |
| | | G/L ACCOUNT | | | | | 2,270.49 | | |
| | | 402 6-653-251-000 RENTALS | | | | 2,270.49 | CONTRACT#030-0061556-004 | | |
| I 1633783 | | GRADER LEASES/ROAD | AP | | R | 12/11/2015 | 2,270.49 | 2,270.49CR | |
| | | G/L ACCOUNT | | | | | 2,270.49 | | |
| | | 402 6-653-251-000 RENTALS | | | | 2,270.49 | CONTRACT#030-0061556-005 | | |
| I 1633784 | | GRADER LEASES/ROAD | AP | | R | 12/11/2015 | 2,270.49 | 2,270.49CR | |
| | | G/L ACCOUNT | | | | | 2,270.49 | | |
| | | 402 6-653-251-000 RENTALS | | | | 2,270.49 | CONTRACT#030-0061556-000 | | |
| | | | REG. CHECK | | | | 13,622.94 | 13,622.94CR | 0.00 |
| | | | | | | | 13,622.94 | 0.00 | |

PACKET: 06825 Regular Payments
VENDOR SET: 01

VENDOR SEQUENCE

| VENDOR | ITEM NO# | DESCRIPTION | BANK | CHECK | STAT | DUE DT / DISC DT | GROSS / BALANCE | PAYMENT / DISCOUNT | OUTSTANDING |
|---|---|---|---|---|---|---|---|---|---|
| 01-459 | DEMAREE'S PUMPING SERVICE | | | | | | | | |
| | I 6076 | PT RENTAL/ROAD | AP | | R | 12/11/2015 | 365.50 | 365.50CR | |
| | | G/L ACCOUNT | | | | | 365.50 | | |
| | | 402 6-653-251-000 RENTALS | | | | 365.50 | RENTAL AND SERVICE | | |
| | | | | REG. CHECK | | | 365.50 | 365.50CR | 0.00 |
| | | | | | | | 365.50 | 0.00 | |
| 01-3088 | GLOBE LIFE AND ACCIDENT INS | | | | | | | | |
| | I 14 201512087732 | GLOBE LIFE PAYABLE | AP | | R | 12/06/2015 | 731.47 | 731.47CR | |
| | | G/L ACCOUNT | | | | | 731.47 | | |
| | | 401 2-200-016-000 GLOBE LIFE PAYABLE | | | | 348.39 | GLOBE LIFE PAYABLE | | |
| | | 402 2-200-016-000 GLOBE LIFE PAYABLE | | | | 383.08 | GLOBE LIFE PAYABLE | | |
| | | | | REG. CHECK | | | 731.47 | 731.47CR | 0.00 |
| | | | | | | | 731.47 | 0.00 | |
| 01-5069 | VANESSA GONZALES | | | | | | | | |
| | I C61201512087732 | A. PADILLA/DM-2012-839 | AP | | R | 12/06/2015 | 132.96 | 132.96CR | |
| | | G/L ACCOUNT | | | | | 132.96 | | |
| | | 401 2-200-018-000 CHILD ENFORCEMENT PAYABLE | | | | 132.96 | A. PADILLA/DM-2012-839 | | |
| | | | | REG. CHECK | | | 132.96 | 132.96CR | 0.00 |
| | | | | | | | 132.96 | 0.00 | |
| 01-3675 | DORA GONZALEZ | | | | | | | | |
| | I CC012582 | REIMBURSEMENT/MEDICAL INS. | AP | | R | 12/11/2015 | 27.75 | 27.75CR | |
| | | G/L ACCOUNT | | | | | 27.75 | | |
| | | 401 2-200-021-000 VISION CARE PAYABLE | | | | 27.75 | OVERPAYMENT ON VISION/MEDICAL | | |
| | | | | REG. CHECK | | | 27.75 | 27.75CR | 0.00 |
| | | | | | | | 27.75 | 0.00 | |
| 01-4446 | CARRIE HARDY | | | | | | | | |
| | I C37201512087732 | Thomas Ray/DM-2010-331 | AP | | R | 12/06/2015 | 250.00 | 250.00CR | |
| | | G/L ACCOUNT | | | | | 250.00 | | |
| | | 401 2-200-018-000 CHILD ENFORCEMENT PAYABLE | | | | 250.00 | Thomas Ray/DM-2010-331 | | |
| | | | | REG. CHECK | | | 250.00 | 250.00CR | 0.00 |
| | | | | | | | 250.00 | 0.00 | |

PACKET: 06825 Regular Payments
VENDOR SET: 01

VENDOR SEQUENCE

| VENDOR | ITEM NO# | DESCRIPTION | BANK | CHECK | STAT | DUE DT / DISC DT | GROSS / BALANCE | PAYMENT / DISCOUNT | OUTSTANDING |
|---|---|---|---|---|---|---|---|---|---|
| 01-5475 | TWILA DAWN HARDY | | | | | | | | |
| | I C70201512087732 | T. HARDY/D-504-DM-2015-442 | AP | | R | 12/06/2015 | 494.31 | 494.31CR | |
| | | G/L ACCOUNT | | | | | 494.31 | | |
| | | 401 2-200-018-000 CHILD ENFORCEMENT PAYABLE | | | | 494.31 | T. HARDY/D-504-DM-2015-442 | | |
| | | | | REG. CHECK | | | 494.31 | 494.31CR | 0.00 |
| | | | | | | | 494.31 | 0.00 | |
| 01-1583 | INLAND KENWORTH | | | | | | | | |
| | I AL397999 | BATTERIES/ROAD | AP | | R | 12/11/2015 | 434.94 | 434.94CR | |
| | | G/L ACCOUNT | | | | | 434.94 | | |
| | | 402 6-653-221-000 VEH/HVY EQUIP. REPAIR | | | | 434.94 | ACCT.#4646626 | | |
| | | | | REG. CHECK | | | 434.94 | 434.94CR | 0.00 |
| | | | | | | | 434.94 | 0.00 | |
| 01-4975 | KANSAS STATE BANK OF MANHAT | | | | | | | | |
| | I 11-2 | WHEEL LOADER LEASE/ROAD | AP | | R | 12/11/2015 | 1,410.42 | 1,410.42CR | |
| | | G/L ACCOUNT | | | | | 1,410.42 | | |
| | | 402 6-653-251-000 RENTALS | | | | 1,410.42 | ACCT.#3347498 | | |
| | I 25-2 | LEASE OF VOLVO GRADERS/ROAD | AP | | R | 12/11/2015 | 1,545.01 | 1,545.01CR | |
| | | G/L ACCOUNT | | | | | 1,545.01 | | |
| | | 402 6-653-251-000 RENTALS | | | | 1,545.01 | ACCT.#3345504 | | |
| | I 25-3 | LEASE OF VOLVO GRADERS/ROAD | AP | | R | 12/11/2015 | 1,545.01 | 1,545.01CR | |
| | | G/L ACCOUNT | | | | | 1,545.01 | | |
| | | 402 6-653-251-000 RENTALS | | | | 1,545.01 | ACCT.#3345505 | | |
| | I 37 | LEASE OF VOLVO GRADERS/ROAD | AP | | R | 12/11/2015 | 1,545.01 | 1,545.01CR | |
| | | G/L ACCOUNT | | | | | 1,545.01 | | |
| | | 402 6-653-251-000 RENTALS | | | | 1,545.01 | ACCT.#3344505 | | |
| | I 37-1 | LEASE OF VOLVO GRADERS/ROAD | AP | | R | 12/11/2015 | 1,545.01 | 1,545.01CR | |
| | | G/L ACCOUNT | | | | | 1,545.01 | | |
| | | 402 6-653-251-000 RENTALS | | | | 1,545.01 | ACCT.#3344506 | | |
| | | | | REG. CHECK | | | 7,590.46 | 7,590.46CR | 0.00 |
| | | | | | | | 7,590.46 | 0.00 | |

VENDOR SEQUENCE

| VENDOR | ITEM NO# | DESCRIPTION | BANK | CHECK | STAT | DUE DT / DISC DT | GROSS / BALANCE | PAYMENT / DISCOUNT | OUTSTANDING |
|---|---|---|---|---|---|---|---|---|---|
| 01-4779 | MANDI LEWALLEN | | | | | | | | |
| | I C51201512087732 | A.PADILLA/Cause # DM-2010-7 AP | | | R | 12/06/2015 | 132.80 | 132.80CR | |
| | | G/L ACCOUNT | | | | | 132.80 | | |
| | | 401 2-200-018-000 CHILD ENFORCEMENT PAYABLE | | | | 132.80 | A.PADILLA/Cause # DM-2010-75 | | |
| | | | REG. CHECK | | | | 132.80 | 132.80CR | 0.00 |
| | | | | | | | 132.80 | 0.00 | |
| 01-5495 | WATER DEPOT | | | | | | | | |
| | I 465926 | ICE/FLOOD | AP | | R | 12/11/2015 | 40.50 | 40.50CR | |
| | | G/L ACCOUNT | | | | | 40.50 | | |
| | | 452 8-832-230-000 SUPPLIES/TOOLS | | | | 40.50 | ICE FOR ROAD CREW | | |
| | | | REG. CHECK | | | | 40.50 | 40.50CR | 0.00 |
| | | | | | | | 40.50 | 0.00 | |
| 01-5040 | BAMBI NALLEY | | | | | | | | |
| | I C58201512087732 | SEELY DM-2013-443 | AP | | R | 12/06/2015 | 115.38 | 115.38CR | |
| | | G/L ACCOUNT | | | | | 115.38 | | |
| | | 401 2-200-018-000 CHILD ENFORCEMENT PAYABLE | | | | 115.38 | SEELY DM-2013-443 | | |
| | | | REG. CHECK | | | | 115.38 | 115.38CR | 0.00 |
| | | | | | | | 115.38 | 0.00 | |
| 01-3986 | NATIONWIDE RETIREMENT SOLUT | | | | | | | | |
| | I 15 201512087732 | Deferred Comp Payable | AP | | D | 12/06/2015 | 4,654.26 | 4,654.26CR | |
| | | G/L ACCOUNT | | | | | 4,654.26 | | |
| | | 401 2-200-017-000 DEFERRED COMP. PAYABLE | | | | 3,129.76 | Deferred Comp Payable | | |
| | | 402 2-200-017-000 DEFERRED COMP. PAYABLE | | | | 1,449.50 | Deferred Comp Payable | | |
| | | 432 2-200-017-000 DEFERRED COMP. PAYABLE | | | | 20.00 | Deferred Comp Payable | | |
| | | 435 2-200-017-000 DEFERRED COMP. PAYABLE | | | | 45.00 | Deferred Comp Payable | | |
| | | 437 2-200-017-000 DEFERRED COMP. PAYABLE | | | | 10.00 | Deferred Comp Payable | | |
| | | | DRAFTS | | | 1 | 4,654.26 | 4,654.26CR | 0.00 |
| | | | | | | | 4,654.26 | 0.00 | |

PACKET: 06825 Regular Payments
VENDOR SET: 01

VENDOR SEQUENCE

| VENDOR | ITEM NO# | DESCRIPTION | BANK | CHECK | STAT | DUE DT / DISC DT | GROSS / BALANCE | PAYMENT / DISCOUNT | OUTSTANDING |
|---|---|---|---|---|---|---|---|---|---|
| 01-4002 | NEW MEXICO GAS COMPANY INC | | | | | | | | |
| I | CC012698 | HEALTH DEPT/DEXTER | AP | | R | 12/11/2015 | 20.72 | 20.72CR | |
| | | G/L ACCOUNT | | | | | 20.72 | | |
| | | 401 6-693-341-000 UTILITIES | | | | 20.72 | ACCT.#076281612-0786941-8 | | |
| I | CC012699 | FLOOD CONTROL | AP | | R | 12/11/2015 | 71.87 | 71.87CR | |
| | | G/L ACCOUNT | | | | | 71.87 | | |
| | | 452 8-832-341-000 UTILITIES | | | | 71.87 | ACCT.#076333413-0787459-1 | | |
| I | CC012700 | BERRENDO F.D. #3 | AP | | R | 12/11/2015 | 80.94 | 80.94CR | |
| | | G/L ACCOUNT | | | | | 80.94 | | |
| | | 411 8-814-341-000 UTILITIES | | | | 80.94 | ACCT.#076846512-1202378-7 | | |
| I | CC012701 | DISTRICT 8 F.D. | AP | | R | 12/11/2015 | 109.85 | 109.85CR | |
| | | G/L ACCOUNT | | | | | 109.85 | | |
| | | 414 8-819-341-000 UTILITIES | | | | 109.85 | ACCT.#075706312-1236482-4 | | |
| | | | | REG. CHECK | | | 283.38 | 283.38CR | 0.00 |
| | | | | | | | 283.38 | 0.00 | |
| 01-131 | NM GEN SVCS RISK MGMT | | | | | | | | |
| C | 05 201511247730 | Medical Insurance Payable | AP | | R | 11/22/2015 | 1,268.40CR | 1,268.40 | |
| | | G/L ACCOUNT | | | | | 1,268.40CR | | |
| | | 452 2-200-007-000 MEDICAL INSURANCE PAYABLE | | | | 100.00CR | Medical Insurance Payable | | |
| | | 452 8-832-110-000 GROUP INSURANCE | | | | 1,168.40CR | Medical Insurance Payable | | |
| C | 19 201511247730 | Vision Insurance Payable | AP | | R | 11/22/2015 | 14.94CR | 14.94 | |
| | | G/L ACCOUNT | | | | | 14.94CR | | |
| | | 452 2-200-021-000 VISION CARE PAYABLE | | | | 14.94CR | Vision Insurance Payable | | |
| I | CC012476 | PREMIUMS/DISABILITY | AP | | R | 12/11/2015 | 1,833.00 | 1,833.00CR | |
| | | G/L ACCOUNT | | | | | 1,833.00 | | |
| | | 401 2-200-007-000 MEDICAL INSURANCE PAYABLE | | | | 1,325.40 | PAYROLL DEDUCTIONS | | |
| | | 402 2-200-007-000 MEDICAL INSURANCE PAYABLE | | | | 357.20 | PAYROLL DEDUCTIONS | | |
| | | 427 2-200-007-000 MEDICAL INSURANCE PAYABLE | | | | 18.80 | PAYROLL DEDUCTIONS | | |
| | | 432 2-200-007-000 MEDICAL INS. PAYABLE | | | | 28.20 | PAYROLL DEDUCTIONS | | |
| | | 435 2-200-007-000 MEDICAL INSURANCE PAYABLE | | | | 9.40 | PAYROLL DEDUCTIONS | | |
| | | 437 2-200-007-000 MEDICAL INSURANCE PAYABLE | | | | 9.40 | PAYROLL DEDUCTIONS | | |
| | | 452 2-200-007-000 MEDICAL INSURANCE PAYABLE | | | | 84.60 | PAYROLL DEDUCTIONS | | |
| I | CC012477 | HEALTH, LIFE PREMIUMS/FEES | AP | | R | 12/11/2015 | 146,073.73 | 146,073.73CR | |
| | | G/L ACCOUNT | | | | | 146,073.73 | | |
| | | 401 6-611-110-000 GROUP INSURANCE | | | | 3,231.92 | PREMIUMS/FEES | | |
| | | 401 6-612-110-000 GROUP INSURANCE | | | | 1,290.73 | PREMIUMS/FEES | | |

VENDOR SEQUENCE

| VENDOR | ITEM NO# | DESCRIPTION | BANK | CHECK | STAT | DUE DT / DISC DT | GROSS / BALANCE | PAYMENT / DISCOUNT | OUTSTANDING |
|---|---|---|---|---|---|---|---|---|---|
| | | 401 6-613-110-000 GROUP INSURANCE | | | | | 1,688.55 PREMIUMS/FEES | | |
| | | 401 6-616-110-000 GROUP INSURANCE | | | | | 397.82 PREMIUMS/FEES | | |
| | | 401 6-621-110-000 GROUP INSURANCE | | | | | 2,261.67 PREMIUMS/FEES | | |
| | | 401 6-622-110-000 GROUP INSURANCE | | | | | 2,449.58 PREMIUMS/FEES | | |
| | | 401 6-624-110-000 GROUP INSURANCE | | | | | 3,087.38 PREMIUMS/FEES | | |
| | | 401 6-625-110-000 GROUP INSURANCE | | | | | 768.88 PREMIUMS/FEES | | |
| | | 401 6-631-110-000 GROUP INSURANCE | | | | | 2,484.19 PREMIUMS/FEES | | |
| | | 401 6-632-110-000 GROUP INSURANCE | | | | | 969.64 PREMIUMS/FEES | | |
| | | 401 6-641-110-000 GROUP INSURANCE | | | | | 10,703.83 PREMIUMS/FEES | | |
| | | 401 6-642-110-000 GROUP INSURANCE | | | | | 36,657.54 PREMIUMS/FEES | | |
| | | 401 6-645-110-000 GROUP INSURANCE | | | | | 8,689.91 PREMIUMS/FEES | | |
| | | 401 6-691-110-000 GROUP INSURANCE | | | | | 7,670.15 PREMIUMS/FEES | | |
| | | 401 6-692-110-000 GROUP INSURANCE | | | | | 1,758.73 PREMIUMS/FEES | | |
| | | 401 6-641-110-000 GROUP INSURANCE | | | | | 562.92 PREMIUMS/FEES | | |
| | | 401 6-641-110-000 GROUP INSURANCE | | | | | 277.26CRPREMIUMS/FEES | | |
| | | 401 7-721-110-000 GROUP INSURANCE | | | | | 5,233.10 PREMIUMS/FEES | | |
| | | 401 7-722-110-000 GROUP INSURANCE | | | | | 3,377.10 PREMIUMS/FEES | | |
| | | 401 7-723-110-000 GROUP INSURANCE | | | | | 1,261.07 PREMIUMS/FEES | | |
| | | 401 7-731-110-000 GROUP INSURANCE | | | | | 3,485.20 PREMIUMS/FEES | | |
| | | 401 7-732-110-000 GROUP INSURANCE | | | | | 4,015.51 PREMIUMS/FEES | | |
| | | 401 7-741-110-000 GROUP INSURANCE | | | | | 5,066.61 PREMIUMS/FEES | | |
| | | 401 7-751-110-000 GROUP INSURANCE | | | | | 8,130.47 PREMIUMS/FEES | | |
| | | 401 7-752-110-000 GROUP INSURANCE | | | | | 25,504.33 PREMIUMS/FEES | | |
| | | 401 7-758-110-000 GROUP INSURANCE | | | | | 5,604.16 PREMIUMS/FEES | | |
| I | CC012478 | HEALTH, LIFE PREMIUMS/FEES | AP | | R | 12/11/2015 | 45,459.63 | 45,459.63CR | |
| | | G/L ACCOUNT | | | | | 45,459.63 | | |
| | | 402 6-651-110-000 GROUP INSURANCE | | | | | 2,088.72 PREMIUMS/FEES | | |
| | | 402 6-652-110-000 GROUP INSURANCE | | | | | 7,094.60 PREMIUMS/FEES | | |
| | | 402 6-653-110-000 GROUP INSURANCE | | | | | 20,689.60 PREMIUMS/FEES | | |
| | | 402 6-654-110-000 GROUP INSURANCE | | | | | 2,581.46 PREMIUMS/FEES | | |
| | | 427 6-638-110-000 GROUP INSURANCE | | | | | 1,158.85 PREMIUMS/FEES | | |
| | | 432 7-761-110-000 GROUP INSURANCE | | | | | 397.82 PREMIUMS/FEES | | |
| | | 432 7-765-110-000 GROUP INSURANCE | | | | | 795.64 PREMIUMS/FEES | | |
| | | 435 6-643-110-000 GROUP INSURANCE | | | | | 2,051.76 PREMIUMS/FEES | | |
| | | 437 6-659-110-000 GROUP INSURANCE | | | | | 2,253.82 PREMIUMS/FEES | | |
| | | 452 8-832-110-000 GROUP INSURANCE | | | | | 6,347.36 PREMIUMS/FEES | | |
| I | CC012479 | PREMIUMS/HEALTH INS. | AP | | R | 12/11/2015 | 27,929.58 | 27,929.58CR | |
| | | G/L ACCOUNT | | | | | 27,929.58 | | |
| | | 401 2-200-007-000 MEDICAL INSURANCE PAYABLE | | | | | 21,257.25 PAYROLL DEDUCTION | | |
| | | 402 2-200-007-000 MEDICAL INSURANCE PAYABLE | | | | | 4,551.35 PAYROLL DEDUCTION | | |
| | | 427 2-200-007-000 MEDICAL INSURANCE PAYABLE | | | | | 205.00 PAYROLL DEDUCTION | | |
| | | 432 2-200-007-000 MEDICAL INS. PAYABLE | | | | | 270.00 PAYROLL DEDUCTION | | |
| | | 435 2-200-007-000 MEDICAL INSURANCE PAYABLE | | | | | 255.00 PAYROLL DEDUCTION | | |
| | | 437 2-200-007-000 MEDICAL INSURANCE PAYABLE | | | | | 270.00 PAYROLL DEDUCTION | | |
| | | 452 2-200-007-000 MEDICAL INSURANCE PAYABLE | | | | | 1,106.35 PAYROLL DEDUCTION | | |
| | | 401 2-200-007-000 MEDICAL INSURANCE PAYABLE | | | | | 25.37CRPAYROLL DEDUCTION | | |

VENDOR SEQUENCE

| VENDOR | ITEM NO# | DESCRIPTION | BANK | CHECK | STAT | DUE DT / DISC DT | GROSS / BALANCE | PAYMENT / DISCOUNT | OUTSTANDING |
|---|---|---|---|---|---|---|---|---|---|
| | | 401 2-200-007-000 MEDICAL INSURANCE PAYABLE | | | | | 40.00 PAYROLL DEDUCTION | | |
| I CC012580 | | PREMIUMS/STANDARD INS. | AP | | R | 12/11/2015 | 844.94 | 844.94CR | |
| | | G/L ACCOUNT | | | | | 844.94 | | |
| | | 401 2-200-005-000 GROUP INSURANCE PAYABLE | | | | | 689.05 PAYROLL DEDUCTION | | |
| | | 402 2-200-005-000 GROUP INSURANCE PAYABLE | | | | | 70.56 PAYROLL DEDUCTION | | |
| | | 452 2-200-005-000 GROUP INSURANCE PAYABLE | | | | | 85.33 PAYROLL DEDUCTION | | |
| I CC012581 | | PREMIUMS/VISION | AP | | R | 12/11/2015 | 2,126.70 | 2,126.70CR | |
| | | G/L ACCOUNT | | | | | 2,126.70 | | |
| | | 401 2-200-021-000 VISION CARE PAYABLE | | | | | 1,641.01 PAYROLL DEDUCTION | | |
| | | 402 2-200-021-000 VISION CARE PAYABLE | | | | | 327.71 PAYROLL DEDUCTION | | |
| | | 427 2-200-021-000 VISION CARE PAYABLE | | | | | 17.19 PAYROLL DEDUCTION | | |
| | | 432 2-200-021-000 VISION CARE PAYABLE | | | | | 10.76 PAYROLL DEDUCTION | | |
| | | 435 2-200-021-000 VISION CARE PAYABLE | | | | | 26.75 PAYROLL DEDUCTION | | |
| | | 437 2-200-021-000 VISION CARE PAYABLE | | | | | 25.08 PAYROLL DEDUCTION | | |
| | | 452 2-200-021-000 VISION CARE PAYABLE | | | | | 75.82 PAYROLL DEDUCTION | | |
| | | 401 2-200-021-000 VISION CARE PAYABLE | | | | | 4.76 PAYROLL DEDUCTION | | |
| | | 401 2-200-021-000 VISION CARE PAYABLE | | | | | 2.38CRPAYROLL DEDUCTION | | |
| | | | REG. CHECK | | | | 222,984.24 | 222,984.24CR | 0.00 |
| | | | | | | | 222,984.24 | 0.00 | |

01-4532 NM RETIREE HEALTH CARE AUTH

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| I RHC201512087732 | | NM RETIREE HEALTH CARE PAYA | AP | | R | 12/06/2015 | 9,030.49 | 9,030.49CR | |
| | | G/L ACCOUNT | | | | | 9,030.49 | | |
| | | 401 2-200-020-000 RETIREE H/C PAYABLE | | | | | 2,159.72 NM RETIREE HEALTH CARE PAYABLE | | |
| | | 401 6-611-111-000 RETIREE HEALTH CARE | | | | | 17.56 NM RETIREE HEALTH CARE PAYABLE | | |
| | | 401 6-612-111-000 RETIREE HEALTH CARE | | | | | 107.70 NM RETIREE HEALTH CARE PAYABLE | | |
| | | 401 6-613-111-000 RETIREE HEALTH CARE | | | | | 77.78 NM RETIREE HEALTH CARE PAYABLE | | |
| | | 401 6-616-111-000 RETIREE HEALTH CARE | | | | | 41.54 NM RETIREE HEALTH CARE PAYABLE | | |
| | | 401 6-621-111-000 RETIREE HEALTH CARE | | | | | 33.07 NM RETIREE HEALTH CARE PAYABLE | | |
| | | 401 6-622-111-000 RETIREE HEALTH CARE | | | | | 130.28 NM RETIREE HEALTH CARE PAYABLE | | |
| | | 401 6-624-111-000 RETIREE HEALTH CARE | | | | | 140.98 NM RETIREE HEALTH CARE PAYABLE | | |
| | | 401 6-625-111-000 RETIREE HEALTH CARE | | | | | 85.46 NM RETIREE HEALTH CARE PAYABLE | | |
| | | 401 6-631-111-000 RETIREE HEALTH CARE | | | | | 135.01 NM RETIREE HEALTH CARE PAYABLE | | |
| | | 401 6-632-111-000 RETIREE HEALTH CARE | | | | | 57.05 NM RETIREE HEALTH CARE PAYABLE | | |
| | | 401 6-641-111-000 RETIREE HEALTH CARE | | | | | 341.34 NM RETIREE HEALTH CARE PAYABLE | | |
| | | 401 6-642-111-000 RETIREE HEALTH CARE | | | | | 1,408.57 NM RETIREE HEALTH CARE PAYABLE | | |
| | | 401 6-645-111-000 RETIREE HEALTH CARE | | | | | 373.61 NM RETIREE HEALTH CARE PAYABLE | | |
| | | 401 6-691-111-000 RETIREE HEALTH CARE | | | | | 284.21 NM RETIREE HEALTH CARE PAYABLE | | |
| | | 401 6-692-111-000 RETIREE HEALTH CARE | | | | | 69.01 NM RETIREE HEALTH CARE PAYABLE | | |
| | | 401 7-721-111-000 RETIREE HEALTH CARE | | | | | 163.89 NM RETIREE HEALTH CARE PAYABLE | | |
| | | 401 7-722-111-000 RETIREE HEALTH CARE | | | | | 102.56 NM RETIREE HEALTH CARE PAYABLE | | |
| | | 401 7-731-111-000 RETIREE HEALTH CARE | | | | | 208.21 NM RETIREE HEALTH CARE PAYABLE | | |
| | | 401 7-732-111-000 RETIREE HEALTH CARE | | | | | 145.23 NM RETIREE HEALTH CARE PAYABLE | | |

VENDOR SEQUENCE

| VENDOR | ITEM NO# | DESCRIPTION | BANK | CHECK | STAT | DUE DT / DISC DT | GROSS / BALANCE | PAYMENT / DISCOUNT | OUTSTANDING |
|---|---|---|---|---|---|---|---|---|---|
| | | 401 7-741-111-000 RETIREE HEALTH CARE | | | | | 174.48 | NM RETIREE HEALTH CARE PAYABLE | |
| | | 401 7-751-111-000 RETIREE HEALTH CARE | | | | | 221.91 | NM RETIREE HEALTH CARE PAYABLE | |
| | | 402 2-200-020-000 RETIREE H/C PAYABLE | | | | | 574.84 | NM RETIREE HEALTH CARE PAYABLE | |
| | | 402 6-651-111-000 RETIREE HEALTH CARE | | | | | 109.93 | NM RETIREE HEALTH CARE PAYABLE | |
| | | 402 6-652-111-000 RETIREE HEALTH CARE | | | | | 218.53 | NM RETIREE HEALTH CARE PAYABLE | |
| | | 402 6-653-111-000 RETIREE HEALTH CARE | | | | | 752.42 | NM RETIREE HEALTH CARE PAYABLE | |
| | | 402 6-654-111-000 RETIREE HEALTH CARE | | | | | 68.86 | NM RETIREE HEALTH CARE PAYABLE | |
| | | 427 2-200-020-000 RETIREE H/C PAYABLE | | | | | 29.73 | NM RETIREE HEALTH CARE PAYABLE | |
| | | 427 6-638-111-000 RETIREE HEALTH CARE | | | | | 59.47 | NM RETIREE HEALTH CARE PAYABLE | |
| | | 432 2-200-020-000 RETIREE H/C PAYABLE | | | | | 48.79 | NM RETIREE HEALTH CARE PAYABLE | |
| | | 432 7-761-111-000 RETIREE HEALTH CARE | | | | | 38.96 | NM RETIREE HEALTH CARE PAYABLE | |
| | | 432 7-765-111-000 RETIREE HEALTH CARE | | | | | 58.62 | NM RETIREE HEALTH CARE PAYABLE | |
| | | 435 2-200-020-000 RETIREE H/C PAYABLE | | | | | 25.95 | NM RETIREE HEALTH CARE PAYABLE | |
| | | 435 6-643-111-000 RETIREE HEALTH CARE | | | | | 51.89 | NM RETIREE HEALTH CARE PAYABLE | |
| | | 437 2-200-020-000 RETIREE H/C PAYABLE | | | | | 28.38 | NM RETIREE HEALTH CARE PAYABLE | |
| | | 437 6-659-111-000 RETIREE HEALTH CARE | | | | | 56.75 | NM RETIREE HEALTH CARE PAYABLE | |
| | | 452 2-200-020-000 RETIREE H/C PAYABLE | | | | | 142.73 | NM RETIREE HEALTH CARE PAYABLE | |
| | | 452 8-832-111-000 RETIREE HEALTH CARE | | | | | 285.47 | NM RETIREE HEALTH CARE PAYABLE | |
| I RHL201512087732 | | NM Retiree HealthCare Law E | AP | | R | 12/06/2015 | 2,586.35 | 2,586.35CR | |
| | | G/L ACCOUNT | | | | | 2,586.35 | | |
| | | 401 2-200-020-000 RETIREE H/C PAYABLE | | | | | 862.13 | NM Retiree HealthCare Law Enf | |
| | | 401 7-751-111-000 RETIREE HEALTH CARE | | | | | 62.71 | NM Retiree HealthCare Law Enf | |
| | | 401 7-752-111-000 RETIREE HEALTH CARE | | | | | 1,361.01 | NM Retiree HealthCare Law Enf | |
| | | 401 7-758-111-000 RETIREE HEALTH CARE | | | | | 300.50 | NM Retiree HealthCare Law Enf | |
| | | REG. CHECK | | | | | 11,616.84 | 11,616.84CR | 0.00 |
| | | | | | | | 11,616.84 | 0.00 | |
| 01-3663 | OHIO CHILD SUPPORT CENTRAL | | | | | | | | |
| I C33201512087732 | | Order #86DR6120 | AP | | R | 12/06/2015 | 102.00 | 102.00CR | |
| | | G/L ACCOUNT | | | | | 102.00 | | |
| | | 401 2-200-018-000 CHILD ENFORCEMENT PAYABLE | | | | | 102.00 | Order #86DR6120 | |
| | | REG. CHECK | | | | | 102.00 | 102.00CR | 0.00 |
| | | | | | | | 102.00 | 0.00 | |
| 01-4786 | GERALDINE PADILLA | | | | | | | | |
| I C52201512087732 | | A.PADILLA/DM-2006-76 | AP | | R | 12/06/2015 | 138.46 | 138.46CR | |
| | | G/L ACCOUNT | | | | | 138.46 | | |
| | | 401 2-200-018-000 CHILD ENFORCEMENT PAYABLE | | | | | 138.46 | A.PADILLA/DM-2006-76 | |
| | | REG. CHECK | | | | | 138.46 | 138.46CR | 0.00 |
| | | | | | | | 138.46 | 0.00 | |

VENDOR SEQUENCE

| VENDOR | ITEM NO# | DESCRIPTION | BANK | CHECK | STAT | DUE DT / DISC DT | GROSS / BALANCE | PAYMENT / DISCOUNT | OUTSTANDING |
|---|---|---|---|---|---|---|---|---|---|
| 01-319 | PENASCO VALLEY TELEPHONE CO | | | | | | | | |
| I CC012705 | | PENASCO F.D. | AP | | R | 12/11/2015 | 283.08 | 283.08CR | |
| | | G/L ACCOUNT | | | | | 283.08 | | |
| | | 409 8-813-340-000 | TELEPHONE | | | 283.08 | ACCT.#10278100 | | |
| I CC012706 | | DUNKEN F.D. | AP | | R | 12/11/2015 | 166.70 | 166.70CR | |
| | | G/L ACCOUNT | | | | | 166.70 | | |
| | | 407 8-811-340-000 | TELEPHONE | | | 166.70 | ACCT.#10266600 | | |
| I CC012707 | | RIO FELIX F.D. | AP | | R | 12/11/2015 | 265.78 | 265.78CR | |
| | | G/L ACCOUNT | | | | | 265.78 | | |
| | | 413 8-818-340-000 | TELEPHONE | | | 40.18 | ACCT.#10207400 | | |
| | | 413 8-818-340-000 | TELEPHONE | | | 109.55 | ACCT.#10244300 | | |
| | | 402 6-651-340-000 | TELEPHONE | | | 116.05 | ACCT.#10223000 | | |
| | | | | REG. CHECK | | | 715.56 | 715.56CR | 0.00 |
| | | | | | | | 715.56 | 0.00 | |
| 01-3915 | PUBLIC EMPLOYEES RETIREMENT | | | | | | | | |
| I LEO201512087732 | | PERA PAYABLE | AP | | D | 12/06/2015 | 22,994.97 | 22,994.97CR | |
| | | G/L ACCOUNT | | | | | 22,994.97 | | |
| | | 401 2-200-002-000 | PERA PAYABLE | | | 8,959.87 | PERA PAYABLE | | |
| | | 401 7-751-109-000 | P E R A | | | 561.90 | PERA PAYABLE | | |
| | | 401 7-752-109-000 | P E R A | | | 11,243.02 | PERA PAYABLE | | |
| | | 401 7-758-109-000 | P.E.R.A. | | | 2,230.18 | PERA PAYABLE | | |
| I LER201512087732 | | PERA PAYABLE | AP | | D | 12/06/2015 | 2,316.87 | 2,316.87CR | |
| | | G/L ACCOUNT | | | | | 2,316.87 | | |
| | | 401 2-200-002-000 | PERA PAYABLE | | | 902.76 | PERA PAYABLE | | |
| | | 401 7-752-109-000 | P E R A | | | 951.74 | PERA PAYABLE | | |
| | | 401 7-758-109-000 | P.E.R.A. | | | 462.37 | PERA PAYABLE | | |
| I PRE201512087732 | | PERA PAYABLE | AP | | D | 12/06/2015 | 85,743.06 | 85,743.06CR | |
| | | G/L ACCOUNT | | | | | 85,743.06 | | |
| | | 401 2-200-002-000 | PERA PAYABLE | | | 28,970.38 | PERA PAYABLE | | |
| | | 401 6-611-109-000 | P E R A | | | 273.10 | PERA PAYABLE | | |
| | | 401 6-612-109-000 | P E R A | | | 837.34 | PERA PAYABLE | | |
| | | 401 6-613-109-000 | P E R A | | | 604.80 | PERA PAYABLE | | |
| | | 401 6-616-109-000 | P E R A | | | 322.96 | PERA PAYABLE | | |
| | | 401 6-621-109-000 | P E R A | | | 257.13 | PERA PAYABLE | | |
| | | 401 6-622-109-000 | P E R A | | | 1,012.96 | PERA PAYABLE | | |
| | | 401 6-624-109-000 | P E R A | | | 1,096.10 | PERA PAYABLE | | |
| | | 401 6-625-109-000 | P E R A | | | 664.43 | PERA PAYABLE | | |
| | | 401 6-631-109-000 | P E R A | | | 1,049.69 | PERA PAYABLE | | |

VENDOR SEQUENCE

| VENDOR | ITEM NO# | DESCRIPTION | BANK | CHECK | STAT | DUE DT / DISC DT | GROSS / BALANCE | PAYMENT / DISCOUNT | OUTSTANDING |
|---|---|---|---|---|---|---|---|---|---|
| | | 401 6-632-109-000 P E R A | | | | | 443.61 | PERA PAYABLE | |
| | | 401 6-641-109-000 P E R A | | | | | 2,654.06 | PERA PAYABLE | |
| | | 401 6-642-109-000 P E R A | | | | | 10,950.91 | PERA PAYABLE | |
| | | 401 6-645-109-000 P E R A | | | | | 2,904.77 | PERA PAYABLE | |
| | | 401 6-691-109-000 P E R A | | | | | 2,209.64 | PERA PAYABLE | |
| | | 401 6-692-109-000 P E R A | | | | | 536.53 | PERA PAYABLE | |
| | | 401 7-721-109-000 P E R A | | | | | 931.77 | PERA PAYABLE | |
| | | 401 7-722-109-000 P E R A | | | | | 797.41 | PERA PAYABLE | |
| | | 401 7-731-109-000 P E R A | | | | | 1,244.63 | PERA PAYABLE | |
| | | 401 7-732-109-000 P E R A | | | | | 1,129.10 | PERA PAYABLE | |
| | | 401 7-741-109-000 P E R A | | | | | 1,356.60 | PERA PAYABLE | |
| | | 401 7-751-109-000 P E R A | | | | | 1,725.34 | PERA PAYABLE | |
| | | 402 2-200-002-000 PERA PAYABLE | | | | | 7,349.89 | PERA PAYABLE | |
| | | 402 6-651-109-000 P E R A | | | | | 482.67 | PERA PAYABLE | |
| | | 402 6-652-109-000 P E R A | | | | | 1,699.07 | PERA PAYABLE | |
| | | 402 6-653-109-000 P E R A | | | | | 5,655.79 | PERA PAYABLE | |
| | | 402 6-654-109-000 P E R A | | | | | 535.42 | PERA PAYABLE | |
| | | 427 2-200-002-000 PERA PAYABLE | | | | | 405.89 | PERA PAYABLE | |
| | | 427 6-638-109-000 P E R A | | | | | 462.39 | PERA PAYABLE | |
| | | 432 2-200-002-000 PERA PAYABLE | | | | | 666.00 | PERA PAYABLE | |
| | | 432 7-761-109-000 P.E.R.A. | | | | | 302.91 | PERA PAYABLE | |
| | | 432 7-765-109-000 P.E.R.A | | | | | 455.80 | PERA PAYABLE | |
| | | 435 2-200-002-000 Pera Payable | | | | | 354.14 | PERA PAYABLE | |
| | | 435 6-643-109-000 P E R A | | | | | 403.43 | PERA PAYABLE | |
| | | 437 2-200-002-000 PERA PAYABLE | | | | | 387.33 | PERA PAYABLE | |
| | | 437 6-659-109-000 P E R A | | | | | 441.25 | PERA PAYABLE | |
| | | 452 2-200-002-000 PERA PAYABLE | | | | | 1,948.31 | PERA PAYABLE | |
| | | 452 8-832-109-000 P E R A | | | | | 2,219.51 | PERA PAYABLE | |
| I prc201512087732 | | PERA PAYABLE | AP | | D | 12/06/2015 | 1,766.04 | 1,766.04CR | |
| | | G/L ACCOUNT | | | | | 1,766.04 | | |
| | | 401 2-200-002-000 PERA PAYABLE | | | | | 328.45 | PERA PAYABLE | |
| | | 401 7-731-109-000 P E R A | | | | | 374.17 | PERA PAYABLE | |
| | | 402 2-200-002-000 PERA PAYABLE | | | | | 497.11 | PERA PAYABLE | |
| | | 402 6-651-109-000 P E R A | | | | | 372.00 | PERA PAYABLE | |
| | | 402 6-653-109-000 P E R A | | | | | 194.31 | PERA PAYABLE | |
| | | | DRAFTS | | | 1 | 112,820.94 | 112,820.94CR | 0.00 |
| | | | | | | | 112,820.94 | 0.00 | |

01-5018 ROSWELL CHAMBER OF COMMERCE

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| I 9394 | | COUNTY FUNDING/DEC. 2015 | AP | | R | 12/11/2015 | 3,750.00 | 3,750.00CR | |
| | | G/L ACCOUNT | | | | | 3,750.00 | | |
| | | 401 6-672-426-000 CHAMBER OF COMMERCE | | | | 3,750.00 | ANNUAL ALLOCATION FY15-16 | | |
| | | | REG. CHECK | | | | 3,750.00 | 3,750.00CR | 0.00 |
| | | | | | | | 3,750.00 | 0.00 | |

VENDOR SEQUENCE

| VENDOR | ITEM NO# | DESCRIPTION | BANK | CHECK | STAT | DUE DT / DISC DT | GROSS / BALANCE | PAYMENT / DISCOUNT | OUTSTANDING |
|---|---|---|---|---|---|---|---|---|---|
| 01-3709 | CITY OF ROSWELL | | | | | | | | |
| I CC012585 | | LANDFILL FEES/ROAD | AP | | R | 12/11/2015 | 11,166.90 | 11,166.90CR | |
| | | G/L ACCOUNT | | | | | 11,166.90 | | |
| | | 437 6-659-242-000 LANDFILL EXPENSES | | | | 11,166.90 | ACCT.#44 | | |
| | | | REG. CHECK | | | | 11,166.90 | 11,166.90CR | 0.00 |
| | | | | | | | 11,166.90 | 0.00 | |
| 01-84 | CITY OF ROSWELL | | | | | | | | |
| I CC012694 | | JUVENILE DETENTION | AP | | R | 12/11/2015 | 123.40 | 123.40CR | |
| | | G/L ACCOUNT | | | | | 123.40 | | |
| | | 401 6-645-341-000 UTILITIES | | | | 123.40 | ACCT.#2021-40268 | | |
| I CC012695 | | COURTHOUSE | AP | | R | 12/11/2015 | 33.25 | 33.25CR | |
| | | G/L ACCOUNT | | | | | 33.25 | | |
| | | 401 6-691-341-000 UTILITIES | | | | 33.25 | ACCT.#2051-42964 | | |
| I CC012696 | | COURTHOUSE | AP | | R | 12/11/2015 | 266.07 | 266.07CR | |
| | | G/L ACCOUNT | | | | | 266.07 | | |
| | | 401 6-692-341-000 UTILITIES | | | | 18.31 | ACCT.#2053-49366 | | |
| | | 401 6-692-341-000 UTILITIES | | | | 207.22 | ACCT.#2053-49366 | | |
| | | 401 6-645-341-000 UTILITIES | | | | 40.54 | ACCT.#2053-49366 | | |
| I CC012697 | | FLOOD CONTROL | AP | | R | 12/11/2015 | 16.59 | 16.59CR | |
| | | G/L ACCOUNT | | | | | 16.59 | | |
| | | 452 8-832-341-000 UTILITIES | | | | 16.59 | ACCT.#18435-41020 | | |
| | | | REG. CHECK | | | | 439.31 | 439.31CR | 0.00 |
| | | | | | | | 439.31 | 0.00 | |
| 01-5058 | KIRA SHANNON | | | | | | | | |
| I C59201512087732 | | FLORES DM-2012-744 | AP | | R | 12/06/2015 | 36.98 | 36.98CR | |
| | | G/L ACCOUNT | | | | | 36.98 | | |
| | | 401 2-200-018-000 CHILD ENFORCEMENT PAYABLE | | | | 36.98 | FLORES DM-2012-744 | | |
| | | | REG. CHECK | | | | 36.98 | 36.98CR | 0.00 |
| | | | | | | | 36.98 | 0.00 | |

VENDOR SEQUENCE

| VENDOR | ITEM NO# | DESCRIPTION | BANK | CHECK | STAT | DUE DT / DISC DT | GROSS / BALANCE | PAYMENT / DISCOUNT | OUTSTANDING |
|---|---|---|---|---|---|---|---|---|---|
| 01-5472 | SOUTHWEST CORRECTIONAL MEDI | | | | | | | | |
| | I 000078 | DEC. 2015/CCDC | AP | | R | 12/11/2015 | 136,881.84 | 136,881.84CR | |
| | | G/L ACCOUNT | | | | | 136,881.84 | | |
| | | 427 6-639-268-000 CARE OF PRISONER SERVICES | | | | | 136,881.84 | HEALTH CARE FOR INMATES | |
| | | | | REG. CHECK | | | 136,881.84 | 136,881.84CR | 0.00 |
| | | | | | | | 136,881.84 | 0.00 | |
| 01-688 | STATE OF NEW MEXICO | | | | | | | | |
| | I C03201512087732 | C Childress/Cause# 00011106 | AP | | R | 12/06/2015 | 71.08 | 71.08CR | |
| | | G/L ACCOUNT | | | | | 71.08 | | |
| | | 401 2-200-018-000 CHILD ENFORCEMENT PAYABLE | | | | | 71.08 | C Childress/Cause# 000111063 | |
| | I C18201512087732 | A.Perez/Cause# 165742 | AP | | R | 12/06/2015 | 151.85 | 151.85CR | |
| | | G/L ACCOUNT | | | | | 151.85 | | |
| | | 401 2-200-018-000 CHILD ENFORCEMENT PAYABLE | | | | | 151.85 | A.Perez/Cause# 165742 | |
| | I C38201512087732 | S Ouillette/000085580 | AP | | R | 12/06/2015 | 201.23 | 201.23CR | |
| | | G/L ACCOUNT | | | | | 201.23 | | |
| | | 401 2-200-018-000 CHILD ENFORCEMENT PAYABLE | | | | | 201.23 | S Ouillette/000085580 | |
| | I C50201512087732 | A.PADILLA/CASEID 000017516 | AP | | R | 12/06/2015 | 85.27 | 85.27CR | |
| | | G/L ACCOUNT | | | | | 85.27 | | |
| | | 401 2-200-018-000 CHILD ENFORCEMENT PAYABLE | | | | | 85.27 | A.PADILLA/CASEID 000017516 | |
| | I C55201512087732 | T. ESTRADA/000313284 | AP | | R | 12/06/2015 | 147.69 | 147.69CR | |
| | | G/L ACCOUNT | | | | | 147.69 | | |
| | | 401 2-200-018-000 CHILD ENFORCEMENT PAYABLE | | | | | 147.69 | T. ESTRADA/000313284 | |
| | I C62201512087732 | J.JOHNSON 000088516 | AP | | R | 12/06/2015 | 121.21 | 121.21CR | |
| | | G/L ACCOUNT | | | | | 121.21 | | |
| | | 401 2-200-018-000 CHILD ENFORCEMENT PAYABLE | | | | | 121.21 | J.JOHNSON 000088516 | |
| | I C68201512087732 | DELAROSA ID 000121193 | AP | | R | 12/06/2015 | 158.41 | 158.41CR | |
| | | G/L ACCOUNT | | | | | 158.41 | | |
| | | 401 2-200-018-000 CHILD ENFORCEMENT PAYABLE | | | | | 158.41 | DELAROSA ID 000121193 | |
| | I C71201512087732 | RAMIREZ/000327532 | AP | | R | 12/06/2015 | 213.23 | 213.23CR | |
| | | G/L ACCOUNT | | | | | 213.23 | | |
| | | 401 2-200-018-000 CHILD ENFORCEMENT PAYABLE | | | | | 213.23 | RAMIREZ/000327532 | |
| | I C73201512087732 | 000154416 J. TARIN | AP | | R | 12/06/2015 | 130.15 | 130.15CR | |
| | | G/L ACCOUNT | | | | | 130.15 | | |
| | | 401 2-200-018-000 CHILD ENFORCEMENT PAYABLE | | | | | 130.15 | 000154416 J. TARIN | |

PACKET: 06825 Regular Payments
VENDOR SET: 01

VENDOR SEQUENCE

| VENDOR | ITEM NO# | DESCRIPTION | BANK | CHECK | STAT | DUE DT / DISC DT | GROSS / BALANCE | PAYMENT / DISCOUNT | OUTSTANDING |
|---|---|---|---|---|---|---|---|---|---|
| | | REG. CHECK | | | | | 1,280.12 / 1,280.12 | 1,280.12CR / 0.00 | 0.00 |

01-4733 TEXAS CHILD SUPPORT SDU

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| I C12201512087732 | AG# 0012436698/Cause#CC-22, | AP | R | 12/06/2015 | 158.31 | 158.31CR | |
| | G/L ACCOUNT | | | | 158.31 | | |
| | 401 2-200-018-000 | CHILD ENFORCEMENT PAYABLE | | | 158.31 | AG# 0012436698/Cause#CC-22,891 | |
| I C42201512087732 | AG#0009985060/CAUSE#2002AG6 | AP | R | 12/06/2015 | 126.92 | 126.92CR | |
| | G/L ACCOUNT | | | | 126.92 | | |
| | 401 2-200-018-000 | CHILD ENFORCEMENT PAYABLE | | | 126.92 | AG#0009985060/CAUSE#2002AG6679 | |
| I C43201512087732 | AG#0009305066/CAUSE#98CM105 | AP | R | 12/06/2015 | 132.46 | 132.46CR | |
| | G/L ACCOUNT | | | | 132.46 | | |
| | 401 2-200-018-000 | CHILD ENFORCEMENT PAYABLE | | | 132.46 | AG#0009305066/CAUSE#98CM1057 | |
| I C66201512087732 | 00106595922005CM5278/480000 | AP | R | 12/06/2015 | 121.21 | 121.21CR | |
| | G/L ACCOUNT | | | | 121.21 | | |
| | 401 2-200-018-000 | CHILD ENFORCEMENT PAYABLE | | | 121.21 | 00106595922005CM5278/4800000 | |
| I C67201512087732 | 237188961196AG6808/4800000 | AP | R | 12/06/2015 | 121.21 | 121.21CR | |
| | G/L ACCOUNT | | | | 121.21 | | |
| | 401 2-200-018-000 | CHILD ENFORCEMENT PAYABLE | | | 121.21 | 237188961196AG6808/4800000 | |
| | | REG. CHECK | | | 660.11 / 660.11 | 660.11CR / 0.00 | 0.00 |

01-5415 TORRES SECURITY STORAGE

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| I 397395 | RENTAL FEE/DEC. 2015 | AP | R | 12/11/2015 | 100.00 | 100.00CR | |
| | G/L ACCOUNT | | | | 100.00 | | |
| | 401 6-696-251-000 | RENTALS | | | 100.00 | STORAGE CONTAINER RENTAL | |
| | | REG. CHECK | | | 100.00 / 100.00 | 100.00CR / 0.00 | 0.00 |

01-717 WAKEFIELD OIL CO. INC.

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| I 115826 | SUPPLIES/ROAD | AP | R | 12/11/2015 | 759.55 | 759.55CR | |
| | G/L ACCOUNT | | | | 759.55 | | |
| | 402 6-653-230-000 | SUPPLIES/TOOLS | | | 759.55 | ACCT.#CHACO | |
| I 116131 | BULK FUELS/ROAD | AP | R | 12/11/2015 | 11,515.35 | 11,515.35CR | |
| | G/L ACCOUNT | | | | 11,515.35 | | |
| | 402 6-653-223-000 | VEHICLE FUELS | | | 11,515.35 | ACCT.#CHACO | |

PACKET: 06825 Regular Payments
VENDOR SET: 01

VENDOR SEQUENCE

| VENDOR | ITEM NO# | DESCRIPTION | BANK | CHECK | STAT | DUE DT / DISC DT | GROSS / BALANCE | PAYMENT / DISCOUNT | OUTSTANDING |
|---|---|---|---|---|---|---|---|---|---|
| | | REG. CHECK | | | | | 12,274.90 | 12,274.90CR | 0.00 |
| | | | | | | | 12,274.90 | 0.00 | |
| 01-416 | XCEL ENGERY | | | | | | | | |
| I | CC012702-1 | SYCAMORE & W. RELIEF RT. | AP | | R | 12/11/2015 | 39.33 | 39.33CR | |
| | | G/L ACCOUNT | | | | | 39.33 | | |
| | | 402 6-653-243-000 HIGHWAY LIGHTS 2002 | | | | 39.33 | ACCT.#54-3943758-6 | | |
| I | CC012703-1 | BERRENDO RD & W. RELIEF RT. | AP | | R | 12/11/2015 | 16.29 | 16.29CR | |
| | | G/L ACCOUNT | | | | | 16.29 | | |
| | | 402 6-653-243-000 HIGHWAY LIGHTS 2002 | | | | 16.29 | ACCT.#54-3943777-9 | | |
| I | CC012704-1 | COUNTRY CLUB RD & W. RELIEF | AP | | R | 12/11/2015 | 17.05 | 17.05CR | |
| | | G/L ACCOUNT | | | | | 17.05 | | |
| | | 402 6-653-243-000 HIGHWAY LIGHTS 2002 | | | | 17.05 | ACCT.#54-1485939-1 | | |
| | | REG. CHECK | | | | | 72.67 | 72.67CR | 0.00 |
| | | | | | | | 72.67 | 0.00 | |
| 01-5497 | ZUNI CHILD SUPPORT | | | | | | | | |
| I | C72201512087732 | ZCSP-2015-0402 W. B. ZUNIE | AP | | R | 12/06/2015 | 100.00 | 100.00CR | |
| | | G/L ACCOUNT | | | | | 100.00 | | |
| | | 401 2-200-018-000 CHILD ENFORCEMENT PAYABLE | | | | 100.00 | ZCSP-2015-0402 W. B. ZUNIE | | |
| | | REG. CHECK | | | | | 100.00 | 100.00CR | 0.00 |
| | | | | | | | 100.00 | 0.00 | |

PACKET: 06825 Regular Payments
VENDOR SET: 01

## REPORT TOTALS

### FUND DISTRIBUTION

| FUND NO# | FUND NAME | AMOUNT |
|---|---|---|
| 401 | General Fund | 348,957.68CR |
| 402 | Road Fund | 113,796.86CR |
| 407 | Dunken Volunteer Fire Fnd | 166.70CR |
| 409 | Penasco Volunteer Fire Fd | 283.08CR |
| 410 | Midway Volunteer Fire Fnd | 39.40CR |
| 411 | Berrendo Volunteer Fire | 379.97CR |
| 412 | Sierra Volunteer Fire Fnd | 242.63CR |
| 413 | Rio Felix Volunteer Fire | 149.73CR |
| 414 | CC Fire Dist #8 Vol Fire | 109.85CR |
| 427 | Indigent Hospital Claims | 140,360.30CR |
| 432 | DWI Grant Funds | 4,188.20CR |
| 435 | Correction Grants | 3,685.45CR |
| 437 | Environmental Tax | 15,347.79CR |
| 452 | Flood Control | 15,050.29CR |
| 628 | Property Valuation | 9.48CR |
| 631 | Other Grants & Contracts | 11,805.00CR |
| 650 | Detention Construction PJ | 144,614.01CR |
| | ** TOTALS ** | 799,186.42CR |

### ---- TYPE OF CHECK TOTALS ----

| | NUMBER | GROSS BALANCE | PAYMENT DISCOUNT | OUTSTANDING |
|---|---|---|---|---|
| HAND CHECKS | | 0.00 | 0.00 | 0.00 |
| | | 0.00 | 0.00 | |
| DRAFTS | 2 | 117,475.20 | 117,475.20CR | 0.00 |
| | | 117,475.20 | 0.00 | |
| REG-CHECKS | | 681,711.22 | 681,711.22CR | 0.00 |
| | | 681,711.22 | 0.00 | |
| EFT | | 0.00 | 0.00 | 0.00 |
| | | 0.00 | 0.00 | |
| NON-CHECKS | | 0.00 | 0.00 | 0.00 |
| | | 0.00 | 0.00 | |
| ALL CHECKS | 2 | 799,186.42 | 799,186.42CR | 0.00 |
| | | 799,186.42 | 0.00 | |

TOTAL CHECKS TO PRINT: 41

ERRORS: 0 WARNINGS: 0

Approved for Payment

PACKET: 06828 Regular Payments
VENDOR SET: 01 12-14-15

VENDOR SEQUENCE

| VENDOR | ITEM NO# | DESCRIPTION | BANK | CHECK | STAT | DUE DT / DISC DT | GROSS / BALANCE | PAYMENT / DISCOUNT | OUTSTANDING |
|---|---|---|---|---|---|---|---|---|---|
| 01-131 | NM GEN SVCS RISK MGMT | | | | | | | | |
| I CC012476-1 | | DISABILITY PREMIUMS | AP | | R | 12/14/2015 | 1,833.00 | 1,833.00CR | |
| | | G/L ACCOUNT | | | | | 1,833.00 | | |
| | | 401 2-200-007-000 | MEDICAL INSURANCE PAYABLE | | | | 1,325.40 | PAYROLL DEDUCTIONS | |
| | | 402 2-200-007-000 | MEDICAL INSURANCE PAYABLE | | | | 357.20 | PAYROLL DEDUCTIONS | |
| | | 427 2-200-007-000 | MEDICAL INSURANCE PAYABLE | | | | 18.80 | PAYROLL DEDUCTIONS | |
| | | 432 2-200-007-000 | MEDICAL INS. PAYABLE | | | | 28.20 | PAYROLL DEDUCTIONS | |
| | | 435 2-200-007-000 | MEDICAL INSURANCE PAYABLE | | | | 9.40 | PAYROLL DEDUCTIONS | |
| | | 437 2-200-007-000 | MEDICAL INSURANCE PAYABLE | | | | 9.40 | PAYROLL DEDUCTIONS | |
| | | 452 2-200-007-000 | MEDICAL INSURANCE PAYABLE | | | | 84.60 | PAYROLL DEDUCTIONS | |
| I CC012477-1 | | HEALTH, LIFE PREMIUMS/FEES | AP | | R | 12/14/2015 | 146,073.73 | 146,073.73CR | |
| | | G/L ACCOUNT | | | | | 146,073.73 | | |
| | | 401 6-611-110-000 | GROUP INSURANCE | | | | 3,231.92 | PREMIUMS/FEES | |
| | | 401 6-612-110-000 | GROUP INSURANCE | | | | 1,290.73 | PREMIUMS/FEES | |
| | | 401 6-613-110-000 | GROUP INSURANCE | | | | 1,688.55 | PREMIUMS/FEES | |
| | | 401 6-616-110-000 | GROUP INSURANCE | | | | 397.82 | PREMIUMS/FEES | |
| | | 401 6-621-110-000 | GROUP INSURANCE | | | | 2,261.67 | PREMIUMS/FEES | |
| | | 401 6-622-110-000 | GROUP INSURANCE | | | | 2,449.58 | PREMIUMS/FEES | |
| | | 401 6-624-110-000 | GROUP INSURANCE | | | | 3,087.38 | PREMIUMS/FEES | |
| | | 401 6-625-110-000 | GROUP INSURANCE | | | | 768.88 | PREMIUMS/FEES | |
| | | 401 6-631-110-000 | GROUP INSURANCE | | | | 2,484.19 | PREMIUMS/FEES | |
| | | 401 6-632-110-000 | GROUP INSURANCE | | | | 969.64 | PREMIUMS/FEES | |
| | | 401 6-641-110-000 | GROUP INSURANCE | | | | 10,703.83 | PREMIUMS/FEES | |
| | | 401 6-642-110-000 | GROUP INSURANCE | | | | 36,657.54 | PREMIUMS/FEES | |
| | | 401 6-645-110-000 | GROUP INSURANCE | | | | 8,689.91 | PREMIUMS/FEES | |
| | | 401 6-691-110-000 | GROUP INSURANCE | | | | 7,670.15 | PREMIUMS/FEES | |
| | | 401 6-692-110-000 | GROUP INSURANCE | | | | 1,758.73 | PREMIUMS/FEES | |
| | | 401 6-641-110-000 | GROUP INSURANCE | | | | 562.92 | PREMIUMS/FEES | |
| | | 401 6-641-110-000 | GROUP INSURANCE | | | | 277.26CR | PREMIUMS/FEES | |
| | | 401 7-721-110-000 | GROUP INSURANCE | | | | 5,233.10 | PREMIUMS/FEES | |
| | | 401 7-722-110-000 | GROUP INSURANCE | | | | 3,377.10 | PREMIUMS/FEES | |
| | | 401 7-723-110-000 | GROUP INSURANCE | | | | 1,261.07 | PREMIUMS/FEES | |
| | | 401 7-731-110-000 | GROUP INSURANCE | | | | 3,485.20 | PREMIUMS/FEES | |
| | | 401 7-732-110-000 | GROUP INSURANCE | | | | 4,015.51 | PREMIUMS/FEES | |
| | | 401 7-741-110-000 | GROUP INSURANCE | | | | 5,066.61 | PREMIUMS/FEES | |
| | | 401 7-751-110-000 | GROUP INSURANCE | | | | 8,130.47 | PREMIUMS/FEES | |
| | | 401 7-752-110-000 | GROUP INSURANCE | | | | 25,504.33 | PREMIUMS/FEES | |
| | | 401 7-758-110-000 | GROUP INSURANCE | | | | 5,604.16 | PREMIUMS/FEES | |
| I CC012478-1 | | HEALTH, LIFE PREMIUMS/FEES | AP | | R | 12/14/2015 | 45,459.63 | 45,459.63CR | |
| | | G/L ACCOUNT | | | | | 45,459.63 | | |
| | | 402 6-651-110-000 | GROUP INSURANCE | | | | 2,088.72 | PAYROLL/FEES | |
| | | 402 6-652-110-000 | GROUP INSURANCE | | | | 7,094.60 | PAYROLL/FEES | |
| | | 402 6-653-110-000 | GROUP INSURANCE | | | | 20,689.60 | PAYROLL/FEES | |
| | | 402 6-654-110-000 | GROUP INSURANCE | | | | 2,581.46 | PAYROLL/FEES | |

PACKET: 06828 Regular Payments
VENDOR SET: 01

VENDOR SEQUENCE

| VENDOR | ITEM NO# | DESCRIPTION | BANK | CHECK | STAT | DUE DT / DISC DT | GROSS / BALANCE | PAYMENT / DISCOUNT | OUTSTANDING |
|---|---|---|---|---|---|---|---|---|---|
| | | 427 6-638-110-000 GROUP INSURANCE | | | | | 1,158.85 PAYROLL/FEES | | |
| | | 432 7-761-110-000 GROUP INSURANCE | | | | | 397.82 PAYROLL/FEES | | |
| | | 432 7-765-110-000 GROUP INSURANCE | | | | | 795.64 PAYROLL/FEES | | |
| | | 435 6-643-110-000 GROUP INSURANCE | | | | | 2,051.76 PAYROLL/FEES | | |
| | | 437 6-659-110-000 GROUP INSURANCE | | | | | 2,253.82 PAYROLL/FEES | | |
| | | 452 8-832-110-000 GROUP INSURANCE | | | | | 6,347.36 PAYROLL/FEES | | |
| I | CC012479-1 | HEALTH, LIFE PREMIUMS/FEES | AP | | R | 12/14/2015 | 27,929.58 | 27,929.58CR | |
| | | G/L ACCOUNT | | | | | 27,929.58 | | |
| | | 401 2-200-007-000 MEDICAL INSURANCE PAYABLE | | | | | 21,257.25 PREMIUMS/FEES | | |
| | | 402 2-200-007-000 MEDICAL INSURANCE PAYABLE | | | | | 4,551.35 PREMIUMS/FEES | | |
| | | 427 2-200-007-000 MEDICAL INSURANCE PAYABLE | | | | | 205.00 PREMIUMS/FEES | | |
| | | 432 2-200-007-000 MEDICAL INS. PAYABLE | | | | | 270.00 PREMIUMS/FEES | | |
| | | 435 2-200-007-000 MEDICAL INSURANCE PAYABLE | | | | | 255.00 PREMIUMS/FEES | | |
| | | 437 2-200-007-000 MEDICAL INSURANCE PAYABLE | | | | | 270.00 PREMIUMS/FEES | | |
| | | 452 2-200-007-000 MEDICAL INSURANCE PAYABLE | | | | | 1,106.35 PREMIUMS/FEES | | |
| | | 401 2-200-007-000 MEDICAL INSURANCE PAYABLE | | | | | 25.37CRPREMIUMS/FEES | | |
| | | 401 2-200-007-000 MEDICAL INSURANCE PAYABLE | | | | | 40.00 PREMIUMS/FEES | | |
| I | CC012580-1 | STANDARD INSURANCE PRMIUMS | AP | | R | 12/14/2015 | 844.94 | 844.94CR | |
| | | G/L ACCOUNT | | | | | 844.94 | | |
| | | 401 2-200-005-000 GROUP INSURANCE PAYABLE | | | | | 689.05 PAYROLL DEDUCTION | | |
| | | 402 2-200-005-000 GROUP INSURANCE PAYABLE | | | | | 70.56 PAYROLL DEDUCTION | | |
| | | 452 2-200-005-000 GROUP INSURANCE PAYABLE | | | | | 85.33 PAYROLL DEDUCTION | | |
| I | CC012581-1 | VISION INSURANCE/PREMIUMS | AP | | R | 12/14/2015 | 2,126.70 | 2,126.70CR | |
| | | G/L ACCOUNT | | | | | 2,126.70 | | |
| | | 401 2-200-021-000 VISION CARE PAYABLE | | | | | 1,641.01 PAYROLL DEDUCTION | | |
| | | 402 2-200-021-000 VISION CARE PAYABLE | | | | | 327.71 PAYROLL DEDUCTION | | |
| | | 427 2-200-021-000 VISION CARE PAYABLE | | | | | 17.19 PAYROLL DEDUCTION | | |
| | | 432 2-200-021-000 VISION CARE PAYABLE | | | | | 10.76 PAYROLL DEDUCTION | | |
| | | 435 2-200-021-000 VISION CARE PAYABLE | | | | | 26.75 PAYROLL DEDUCTION | | |
| | | 437 2-200-021-000 VISION CARE PAYABLE | | | | | 25.08 PAYROLL DEDUCTION | | |
| | | 452 2-200-021-000 VISION CARE PAYABLE | | | | | 75.82 PAYROLL DEDUCTION | | |
| | | 401 2-200-021-000 VISION CARE PAYABLE | | | | | 4.76 PAYROLL DEDUCTION | | |
| | | 401 2-200-021-000 VISION CARE PAYABLE | | | | | 2.38CRPAYROLL DEDUCTION | | |
| | | REG. CHECK | | | | | 224,267.58 | 224,267.58CR | 0.00 |
| | | | | | | | 224,267.58 | 0.00 | |

PACKET: 06828 Regular Payments
VENDOR SET: 01

## REPORT TOTALS

### FUND DISTRIBUTION

| FUND NO# | FUND NAME | AMOUNT |
|---|---|---|
| 401 | General Fund | 171,003.45CR |
| 402 | Road Fund | 37,761.20CR |
| 427 | Indigent Hospital Claims | 1,399.84CR |
| 432 | DWI Grant Funds | 1,502.42CR |
| 435 | Correction Grants | 2,342.91CR |
| 437 | Environmental Tax | 2,558.30CR |
| 452 | Flood Control | 7,699.46CR |
| | ** TOTALS ** | 224,267.58CR |

### ---- TYPE OF CHECK TOTALS ----

| | NUMBER | GROSS BALANCE | PAYMENT DISCOUNT | OUTSTANDING |
|---|---|---|---|---|
| HAND CHECKS | | 0.00 | 0.00 | 0.00 |
| | | 0.00 | 0.00 | |
| DRAFTS | | 0.00 | 0.00 | 0.00 |
| | | 0.00 | 0.00 | |
| REG-CHECKS | | 224,267.58 | 224,267.58CR | 0.00 |
| | | 224,267.58 | 0.00 | |
| EFT | | 0.00 | 0.00 | 0.00 |
| | | 0.00 | 0.00 | |
| NON-CHECKS | | 0.00 | 0.00 | 0.00 |
| | | 0.00 | 0.00 | |
| ALL CHECKS | | 224,267.58 | 224,267.58CR | 0.00 |
| | | 224,267.58 | 0.00 | |

TOTAL CHECKS TO PRINT: 1

ERRORS: 0 WARNINGS: 0

Approved for Payment

ACKET: 06843 Regular Payments
ENDOR SET: 01 12-18-15

VENDOR SEQUENCE

| VENDOR | ITEM NO# | DESCRIPTION | BANK | CHECK | STAT | DUE DT / DISC DT | GROSS / BALANCE | PAYMENT / DISCOUNT | OUTSTANDING |
|---|---|---|---|---|---|---|---|---|---|
| 01-5455 | CIT BANK | | | | | | | | |
| I 27782537 | | LEASE OF PHONE SYSTEM | AP | | R | 12/18/2015 | 8,953.62 | 8,953.62CR | |
| | | G/L ACCOUNT | | | | | 8,953.62 | | |
| | | 670 6-671-375-000 LEASE PURCHASE PAYMENTS | | | | 8,953.62 | ACCT.#4000030047 | | |
| | | | | REG. CHECK | | | 8,953.62 | 8,953.62CR | 0.00 |
| | | | | | | | 8,953.62 | 0.00 | |
| 01-3856 | ROBERT A. MENAGH | | | | | | | | |
| I CCS1215 | | TOKENS/SHERIFF | AP | | R | 12/18/2015 | 124.16 | 124.16CR | |
| | | G/L ACCOUNT | | | | | 124.16 | | |
| | | 401 7-752-221-000 VEH/HVY EQUIP. REPAIR | | | | 124.16 | CAR WASH TOKENS | | |
| | | | | REG. CHECK | | | 124.16 | 124.16CR | 0.00 |
| | | | | | | | 124.16 | 0.00 | |
| 01-5084 | BRADBURY STAMM CONSTRUCTION | | | | | | | | |
| I CC012147 | | RENOVATIONS/CCDC | AP | | R | 12/18/2015 | 241,413.09 | 241,413.09CR | |
| | | G/L ACCOUNT | | | | | 241,413.09 | | |
| | | 650 6-685-381-000 Construction Projects | | | | 241,413.09 | PROJECT #1323 | | |
| | | | | REG. CHECK | | | 241,413.09 | 241,413.09CR | 0.00 |
| | | | | | | | 241,413.09 | 0.00 | |
| 01-4730 | QWEST | | | | | | | | |
| I CC012030 | | EGP F.D. #2 | AP | | R | 12/18/2015 | 136.23 | 136.23CR | |
| | | G/L ACCOUNT | | | | | 136.23 | | |
| | | 408 8-812-340-000 TELEPHONE | | | | 136.23 | ACCT.#575-627-7152-074B | | |
| I CC012146-2 | | COMMISSION | AP | | R | 12/18/2015 | 1,745.72 | 1,745.72CR | |
| | | G/L ACCOUNT | | | | | 1,745.72 | | |
| | | 401 6-619-340-000 TELEPHONE | | | | 711.54 | ACCT.#N-575-622-0506-881M | | |
| | | 401 6-619-340-000 TELEPHONE | | | | 711.54 | ACCT.#N-575-622-0507-708M | | |
| | | 401 6-619-340-000 TELEPHONE | | | | 266.16 | ACCT.#N-575-622-0510-473M | | |
| | | 401 6-619-340-000 TELEPHONE | | | | 56.48 | ACCT.#575-622-6646-830B | | |
| I CC012812 | | SHERIFF DEPT | AP | | R | 12/18/2015 | 1,104.20 | 1,104.20CR | |
| | | G/L ACCOUNT | | | | | 1,104.20 | | |
| | | 401 7-751-340-000 TELEPHONE | | | | 672.78 | ACCT.#N-575-622-0159-876M | | |
| | | 401 7-751-340-000 TELEPHONE | | | | 158.44 | ACCT.#575-627-3201-123B | | |

VENDOR SEQUENCE

| ENDOR | ITEM NO# | DESCRIPTION | BANK | CHECK | STAT | DUE DT / DISC DT | GROSS / BALANCE | PAYMENT / DISCOUNT | OUTSTANDING |
|---|---|---|---|---|---|---|---|---|---|
| | | 401 7-751-340-000 TELEPHONE | | | | | 70.08 | ACCT.#N-575-622-0354-081M | |
| | | 401 7-751-340-000 TELEPHONE | | | | | 202.90 | ACCT.#575-627-5864-573B | |
| I CC012813 | | SHERIFF/STATE POLICE | AP | | R | 12/18/2015 | 69.74 | 69.74CR | |
| | | G/L ACCOUNT | | | | | 69.74 | | |
| | | 401 7-751-340-000 TELEPHONE | | | | | 69.74 | ACCT.#N-575-622-3128-276M | |
| I CC012814 | | SHERIFF/INTOXIMETER | AP | | R | 12/18/2015 | 66.78 | 66.78CR | |
| | | G/L ACCOUNT | | | | | 66.78 | | |
| | | 401 7-751-340-000 TELEPHONE | | | | | 66.78 | ACCT.#575-622-8394-328B | |
| I CC012817 | | ADMIN. CENTER | AP | | R | 12/18/2015 | 210.50 | 210.50CR | |
| | | G/L ACCOUNT | | | | | 210.50 | | |
| | | 401 6-621-340-000 TELEPHONE | | | | | 21.77 | ACCT.#N-575-623-3001-584M | |
| | | 401 6-612-340-000 TELEPHONE | | | | | 7.26 | ACCT.#N-575-623-3001-584M | |
| | | 401 6-613-340-000 TELEPHONE | | | | | 2.42 | ACCT.#N-575-623-3001-584M | |
| | | 401 6-625-340-000 TELEPHONE | | | | | 2.42 | ACCT.#N-575-623-3001-584M | |
| | | 401 6-616-340-000 TELEPHONE | | | | | 7.26 | ACCT.#N-575-623-3001-584M | |
| | | 401 6-621-340-000 TELEPHONE | | | | | 2.42 | ACCT.#N-575-623-3001-584M | |
| | | 401 6-622-340-000 TELEPHONE | | | | | 24.20 | ACCT.#N-575-623-3001-584M | |
| | | 401 6-624-340-000 TELEPHONE | | | | | 9.68 | ACCT.#N-575-623-3001-584M | |
| | | 401 6-631-340-000 TELEPHONE | | | | | 19.36 | ACCT.#N-575-623-3001-584M | |
| | | 401 6-645-340-000 TELEPHONE | | | | | 16.94 | ACCT.#N-575-623-3001-584M | |
| | | 401 6-691-340-000 TELEPHONE | | | | | 7.26 | ACCT.#N-575-623-3001-584M | |
| | | 401 7-721-340-000 TELEPHONE | | | | | 16.94 | ACCT.#N-575-623-3001-584M | |
| | | 401 7-731-340-000 TELEPHONE | | | | | 14.52 | ACCT.#N-575-623-3001-584M | |
| | | 401 7-741-340-000 TELEPHONE | | | | | 9.68 | ACCT.#N-575-623-3001-584M | |
| | | 401 7-751-340-000 TELEPHONE | | | | | 48.37 | ACCT.#N-575-623-3001-584M | |
| I CC012818 | | ROAD | AP | | R | 12/18/2015 | 16.94 | 16.94CR | |
| | | G/L ACCOUNT | | | | | 16.94 | | |
| | | 402 6-651-340-000 TELEPHONE | | | | | 16.94 | ACCT.#N-575-623-3001-584M | |
| I CC012819 | | CCDC | AP | | R | 12/18/2015 | 21.78 | 21.78CR | |
| | | G/L ACCOUNT | | | | | 21.78 | | |
| | | 435 6-643-340-000 TELEPHONE | | | | | 21.78 | ACCT.#N-575-623-3001-584M | |
| I CC012920 | | IHC DEPT | AP | | R | 12/18/2015 | 16.94 | 16.94CR | |
| | | G/L ACCOUNT | | | | | 16.94 | | |
| | | 427 6-638-340-000 TELEPHONE | | | | | 16.94 | ACCT.#N-575-623-3001-584M | |
| I CC012921 | | COURT & CCDC | AP | | R | 12/18/2015 | 237.18 | 237.18CR | |
| | | G/L ACCOUNT | | | | | 237.18 | | |
| | | 650 6-684-340-000 TELEPHONE | | | | | 237.18 | ACCT.#N-575-624-0006-751M | |
| I CC012922 | | ROAD DEPT | AP | | R | 12/18/2015 | 55.93 | 55.93CR | |
| | | G/L ACCOUNT | | | | | 55.93 | | |
| | | 402 6-651-340-000 TELEPHONE | | | | | 55.93 | ACCT.#575-627-0081-230B | |

VENDOR SEQUENCE

| ENDOR | ITEM NO# | DESCRIPTION | BANK | CHECK | STAT | DUE DT / DISC DT | GROSS / BALANCE | PAYMENT / DISCOUNT | OUTSTANDING |
|---|---|---|---|---|---|---|---|---|---|
| I | CC012923 | CCDC/VIDEO ARRAIGNMENT | AP | | R | 12/18/2015 | 97.79 / 97.79 | 97.79CR | |
| | | G/L ACCOUNT 435 6-643-340-000 TELEPHONE | | | | 97.79 | ACCT.#575-627-5495-192B | | |
| I | CC012924 | IHC/FAX | AP | | R | 12/18/2015 | 54.42 / 54.42 | 54.42CR | |
| | | G/L ACCOUNT 427 6-638-340-000 TELEPHONE | | | | 54.42 | ACCT.#575-627-7554-233B | | |
| I | CC012925 | BERRENDO F.D. #3 | AP | | R | 12/18/2015 | 54.74 / 54.74 | 54.74CR | |
| | | G/L ACCOUNT 411 8-814-340-000 TELEPHONE | | | | 54.74 | ACCT.#575-627-7979-937B | | |
| I | CC012926 | COURTHOUSE/HVAC CONTROLS | AP | | R | 12/18/2015 | 56.48 / 56.48 | 56.48CR | |
| | | G/L ACCOUNT 401 6-692-340-000 TELEPHONE | | | | 56.48 | ACCT.#575-627-2191-059B | | |
| I | CC012927 | MAINT. SHOP/HOBBS ST. | AP | | R | 12/18/2015 | 116.06 / 116.06 | 116.06CR | |
| | | G/L ACCOUNT 401 6-691-340-000 TELEPHONE | | | | 116.06 | ACCT.#575-627-7608-739B | | |
| I | CC012928 | MAINT. DEPT/HVAC LINES | AP | | R | 12/18/2015 | 92.92 / 92.92 | 92.92CR | |
| | | G/L ACCOUNT 401 6-691-340-000 TELEPHONE | | | | 92.92 | ACCT.#575-627-0977-957B | | |
| I | CC012929 | MAINT. SHOP/CIRCUIT # | AP | | R | 12/18/2015 | 140.16 / 140.16 | 140.16CR | |
| | | G/L ACCOUNT 401 6-691-340-000 TELEPHONE | | | | 70.08 | ACCT.#N-575-622-0219-677M | | |
| | | 401 6-691-340-000 TELEPHONE | | | | 70.08 | ACCT.#N-575-622-0220-678M | | |
| | | REG. CHECK | | | | | 4,294.51 / 4,294.51 | 4,294.51CR / 0.00 | 0.00 |

01-2659 FRONTIER MEDICAL HOME CARE

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| I | CC012251 | DEC. 2015/IHC DEPT | AP | | R | 12/18/2015 | 220.00 / 220.00 | 220.00CR | |
| | | G/L ACCOUNT 427 6-639-270-000 PAYMENT OF HOSPITAL CLAIMS | | | | 220.00 | HEALTH CARE PAYMENT | | |
| | | REG. CHECK | | | | | 220.00 / 220.00 | 220.00CR / 0.00 | 0.00 |

ACKET: 06843 Regular Payments
ENDOR SET: 01

VENDOR SEQUENCE

| ENDOR | ITEM NO# | DESCRIPTION | BANK | CHECK | STAT | DUE DT / DISC DT | GROSS / BALANCE | PAYMENT / DISCOUNT | OUTSTANDING |
|---|---|---|---|---|---|---|---|---|---|
| 1-4540 | HEINFELD, MEECH & CO., PC | | | | | | | | |
| I 64975 | | AUDIT SERVICES/FY 14-15 | AP | | R | 12/18/2015 | 6,165.58 | 6,165.58CR | |
| | | G/L ACCOUNT | | | | | 6,165.58 | | |
| | | 401 6-619-260-000 PROFESSIONAL SERVICES | | | | 6,165.58 | ACCT.#TCO002 | | |
| | | | REG. CHECK | | | | 6,165.58 | 6,165.58CR | 0.00 |
| | | | | | | | 6,165.58 | 0.00 | |
| 1-3804 | DANNY D. HUTSON | | | | | | | | |
| I CC012811 | | REIMBURSEMENT/VISION INS. | AP | | R | 12/18/2015 | 14.94 | 14.94CR | |
| | | G/L ACCOUNT | | | | | 14.94 | | |
| | | 452 2-200-001-000 FICA PAYABLE | | | | 14.94 | VISON INS. REIMBURSEMENT | | |
| | | | REG. CHECK | | | | 14.94 | 14.94CR | 0.00 |
| | | | | | | | 14.94 | 0.00 | |
| 01-3838 | LA CASA DE BUENA SALUD | | | | | | | | |
| I CC012250 | | DEC. 2015/IHC DEPT | AP | | R | 12/18/2015 | 64,025.30 | 64,025.30CR | |
| | | G/L ACCOUNT | | | | | 64,025.30 | | |
| | | 427 6-639-273-000 HEALTH CLINIC CLAIMS | | | | 64,025.30 | HEALTH CARE PAYMENT | | |
| | | | REG. CHECK | | | | 64,025.30 | 64,025.30CR | 0.00 |
| | | | | | | | 64,025.30 | 0.00 | |
| 01-5037 | GREAT PLAINS MANUFACTURING | | | | | | | | |
| I 002270454 | | 60" PALLET FORK/ROAD | AP | | R | 12/18/2015 | 1,678.75 | 1,678.75CR | |
| | | G/L ACCOUNT | | | | | 1,678.75 | | |
| | | 402 6-681-373-000 HEAVY EQUIPMENT | | | | 1,678.75 | ACCT.#112248 | | |
| I 002271099 | | SKID CUTTER/ROAD | AP | | R | 12/18/2015 | 4,753.00 | 4,753.00CR | |
| | | G/L ACCOUNT | | | | | 4,753.00 | | |
| | | 402 6-681-373-000 HEAVY EQUIPMENT | | | | 4,753.00 | ACCT.#112248 | | |
| I 002290389 | | ANGLE BROOM/ROAD | AP | | R | 12/18/2015 | 5,412.25 | 5,412.25CR | |
| | | G/L ACCOUNT | | | | | 5,412.25 | | |
| | | 402 6-681-373-000 HEAVY EQUIPMENT | | | | 5,412.25 | ACCT.#112248 | | |
| I 002290393 | | 108" QT TRIP EDGE/ROAD | AP | | R | 12/18/2015 | 4,304.25 | 4,304.25CR | |
| | | G/L ACCOUNT | | | | | 4,304.25 | | |
| | | 402 6-681-373-000 HEAVY EQUIPMENT | | | | 4,304.25 | ACCT.#112248 | | |

VENDOR SEQUENCE

| ENDOR | ITEM NO# | DESCRIPTION | BANK | CHECK | STAT | DUE DT / DISC DT | GROSS / BALANCE | PAYMENT / DISCOUNT | OUTSTANDING |
|---|---|---|---|---|---|---|---|---|---|
| I 002295536 | | ROCK GRAPPLE/ROAD | AP | | R | 12/18/2015 | 3,814.75 | 3,814.75CR | |
| | | G/L ACCOUNT | | | | | 3,814.75 | | |
| | | 402 6-681-373-000 HEAVY EQUIPMENT | | | | 3,814.75 | ACCT.#112248 | | |
| I 002299619 | | HYD AUGER/ROAD | AP | | R | 12/18/2015 | 3,325.75 | 3,325.75CR | |
| | | G/L ACCOUNT | | | | | 3,325.75 | | |
| | | 402 6-681-373-000 HEAVY EQUIPMENT | | | | 3,325.75 | ACCT.#112248 | | |
| | | | | REG. CHECK | | | 23,288.75 | 23,288.75CR | 0.00 |
| | | | | | | | 23,288.75 | 0.00 | |
| 01-3836 | LEA COUNTY GOVERNMENT | | | | | | | | |
| I CC012149 | | HOUSING OF INMATES/CCDC | AP | | R | 12/18/2015 | 675.00 | 675.00CR | |
| | | G/L ACCOUNT | | | | | 675.00 | | |
| | | 650 6-684-268-000 HOUSING OF PRISONERS | | | | 675.00 | HOUSING OF INMATES | | |
| | | | | REG. CHECK | | | 675.00 | 675.00CR | 0.00 |
| | | | | | | | 675.00 | 0.00 | |
| 01-5498 | MELTEL VALENTINE | | | | | | | | |
| I W0677W-XX02 JAN | | CAPITAN TOWER LEASE/SHERIFF | AP | | R | 12/18/2015 | 1,400.00 | 1,400.00CR | |
| | | G/L ACCOUNT | | | | | 1,400.00 | | |
| | | 401 7-751-251-000 RENTALS | | | | 1,400.00 | TOWER LEASE | | |
| | | | | REG. CHECK | | | 1,400.00 | 1,400.00CR | 0.00 |
| | | | | | | | 1,400.00 | 0.00 | |
| 01-4002 | NEW MEXICO GAS COMPANY INC | | | | | | | | |
| I CC012141 | | COURTHOUSE | AP | | R | 12/18/2015 | 1,886.50 | 1,886.50CR | |
| | | G/L ACCOUNT | | | | | 1,886.50 | | |
| | | 401 6-692-341-000 UTILITIES | | | | 129.70 | ACCT.#076424512-0788370-4 | | |
| | | 401 6-692-341-000 UTILITIES | | | | 1,469.21 | ACCT.#076424512-0788370-4 | | |
| | | 401 6-645-341-000 UTILITIES | | | | 287.59 | ACCT.#076424512-0788370-4 | | |
| I CC012142 | | BERRENDO F.D. #1 | AP | | R | 12/18/2015 | 197.76 | 197.76CR | |
| | | G/L ACCOUNT | | | | | 197.76 | | |
| | | 411 8-814-341-000 UTILITIES | | | | 197.76 | ACCT.#076846512-0792590-0 | | |
| I CC012143 | | MIDWAY F.D. #1 | AP | | R | 12/18/2015 | 81.21 | 81.21CR | |
| | | G/L ACCOUNT | | | | | 81.21 | | |
| | | 410 8-816-341-000 UTILITIES | | | | 81.21 | ACCT.#077058012-0794705-0 | | |

VENDOR SEQUENCE

| ENDOR | ITEM NO# | DESCRIPTION | BANK | CHECK | STAT | DUE DT / DISC DT | GROSS / BALANCE | PAYMENT / DISCOUNT | OUTSTANDING |
|---|---|---|---|---|---|---|---|---|---|
| I CC012144 | | EGP F.D.#2 | AP | | R | 12/18/2015 | 85.57 | 85.57CR | |
| | | G/L ACCOUNT | | | | | 85.57 | | |
| | | 408 8-812-341-000 UTILITIES | | | | 85.57 | ACCT.#077227312-1237385-6 | | |
| I CC012145 | | BERRENDO F.D. #2 | AP | | R | 12/18/2015 | 101.72 | 101.72CR | |
| | | G/L ACCOUNT | | | | | 101.72 | | |
| | | 411 8-814-341-000 UTILITIES | | | | 101.72 | ACCT.#077937001-0803495-3 | | |
| | | | | REG. CHECK | | | 2,352.76 | 2,352.76CR | 0.00 |
| | | | | | | | 2,352.76 | 0.00 | |
| 01-4327 | OCCAM CONSULTING ENGINEERS | | | | | | | | |
| I E0789-5 | | REPAIRS/HOBSON ROAD | AP | | R | 12/18/2015 | 8,922.50 | 8,922.50CR | |
| | | G/L ACCOUNT | | | | | 8,922.50 | | |
| | | 631 8-884-247-000 CONSTRUCTION | | | | 8,922.50 | PROFESSIONAL ENGINEERING | | |
| | | | | REG. CHECK | | | 8,922.50 | 8,922.50CR | 0.00 |
| | | | | | | | 8,922.50 | 0.00 | |
| 01-308 | OTERO COUNTY ELECTRIC CO | | | | | | | | |
| I CC012036 | | DUNKEN F.D. | AP | | R | 12/18/2015 | 99.00 | 99.00CR | |
| | | G/L ACCOUNT | | | | | 99.00 | | |
| | | 407 8-811-341-000 UTILITIES | | | | 99.00 | ACCT.#2157800 | | |
| I CC012037 | | ROAD/DUNKEN | AP | | R | 12/18/2015 | 215.00 | 215.00CR | |
| | | G/L ACCOUNT | | | | | 215.00 | | |
| | | 402 6-651-341-000 UTILITIES | | | | 99.00 | ACCT.#583601 | | |
| | | 402 6-651-341-000 UTILITIES | | | | 116.00 | ACCT.#1628300 | | |
| I CC012038 | | ELECTRICITY TO WATERWELL/RD | AP | | R | 12/18/2015 | 132.00 | 132.00CR | |
| | | G/L ACCOUNT | | | | | 132.00 | | |
| | | 402 6-653-341-000 UTILITIES | | | | 132.00 | ACCT.#583703 | | |
| I CC012039 | | PENASCO F.D. | AP | | R | 12/18/2015 | 285.00 | 285.00CR | |
| | | G/L ACCOUNT | | | | | 285.00 | | |
| | | 409 8-813-341-000 UTILITIES | | | | 84.00 | ACCT.#2157700 | | |
| | | 409 8-813-341-000 UTILITIES | | | | 74.00 | ACCT.#1311501 | | |
| | | 409 8-813-341-000 UTILITIES | | | | 127.00 | ACCT.#1750900 | | |
| I CC012140 | | RIO FELIX F.D. | AP | | R | 12/18/2015 | 102.00 | 102.00CR | |
| | | G/L ACCOUNT | | | | | 102.00 | | |
| | | 413 8-818-341-000 UTILITIES | | | | 102.00 | ACCT.#1314001 | | |
| | | | | REG. CHECK | | | 833.00 | 833.00CR | 0.00 |
| | | | | | | | 833.00 | 0.00 | |

VENDOR SEQUENCE

| VENDOR | ITEM NO# | DESCRIPTION | BANK | CHECK | STAT | DUE DT / DISC DT | GROSS / BALANCE | PAYMENT / DISCOUNT | OUTSTANDING |
|---|---|---|---|---|---|---|---|---|---|
| 01-3669 | SUMMIT FOOD SERVICE LLC | | | | | | | | |
| I | INV2000000696 | JUVENILE MEALS/NOV. 2015 | AP | | R | 12/18/2015 | 2,696.94 | 2,696.94CR | |
| | | G/L ACCOUNT | | | | | 2,696.94 | | |
| | | 401 6-645-264-000 FEEDING OF PRISONERS | | | | 2,696.94 | ACCT.#C1921001 | | |
| | | | | REG. CHECK | | | 2,696.94 | 2,696.94CR | 0.00 |
| | | | | | | | 2,696.94 | 0.00 | |
| 01-5984 | SUPERIOR AMBULANCE | | | | | | | | |
| I | CC012252 | DEC. 2015/IHC DEPT | AP | | R | 12/18/2015 | 1,160.48 | 1,160.48CR | |
| | | G/L ACCOUNT | | | | | 1,160.48 | | |
| | | 427 6-639-270-000 PAYMENT OF HOSPITAL CLAIMS | | | | 1,160.48 | HEATLH CARE PAYMENT | | |
| | | | | REG. CHECK | | | 1,160.48 | 1,160.48CR | 0.00 |
| | | | | | | | 1,160.48 | 0.00 | |
| 01-3974 | WEX BANK | | | | | | | | |
| I | 43172161 | DISTRICT 8/SIERRA F.D./SHER | AP | | R | 12/18/2015 | 1,295.28 | 1,295.28CR | |
| | | G/L ACCOUNT | | | | | 1,295.28 | | |
| | | 414 8-819-227-000 TRANSPORTATION EXPENSE | | | | 269.03 | ACCT.#0496-00-237636-6 | | |
| | | 401 7-751-227-000 TRANSPORTATION EXPENSE | | | | 33.80 | ACCT.#0496-00-237636-6 | | |
| | | 401 7-752-227-000 TRANSPORTATION EXPENSE | | | | 890.26 | ACCT.#0496-00-237636-6 | | |
| | | 401 7-752-227-000 TRANSPORTATION EXPENSE | | | | 8.19CR | ACCT.#0496-00-237636-6 | | |
| | | 412 8-815-227-000 TRANSPORTATION EXPENSE | | | | 110.38 | ACCT.#0496-00-237636-6 | | |
| | | | | REG. CHECK | | | 1,295.28 | 1,295.28CR | 0.00 |
| | | | | | | | 1,295.28 | 0.00 | |
| 01-416 | XCEL ENGERY | | | | | | | | |
| I | CC012031 | HEALTH DEPT | AP | | R | 12/18/2015 | 1,024.35 | 1,024.35CR | |
| | | G/L ACCOUNT | | | | | 1,024.35 | | |
| | | 401 6-693-341-000 UTILITIES | | | | 1,024.35 | ACCT.#54-3943804-3 | | |
| I | CC012032 | EGP F.D. #1 | AP | | R | 12/18/2015 | 71.13 | 71.13CR | |
| | | G/L ACCOUNT | | | | | 71.13 | | |
| | | 408 8-812-341-000 UTILITIES | | | | 71.13 | ACCT.#54-3943725-7 | | |
| I | CC012033 | BERRENDO F.D. #1 | AP | | R | 12/18/2015 | 142.99 | 142.99CR | |
| | | G/L ACCOUNT | | | | | 142.99 | | |
| | | 411 8-814-341-000 UTILITIES | | | | 142.99 | ACCT.#54-3949473-4 | | |

PACKET: 06843 Regular Payments
VENDOR SET: 01

VENDOR SEQUENCE

| VENDOR | ITEM NO# | DESCRIPTION | BANK | CHECK | STAT | DUE DT / DISC DT | GROSS / BALANCE | PAYMENT / DISCOUNT | OUTSTANDING |
|---|---|---|---|---|---|---|---|---|---|
| I CC012034 | | COMMISSION | AP | | R | 12/18/2015 | 15.31 | 15.31CR | |
| | | G/L ACCOUNT | | | | | 15.31 | | |
| | | 401 6-619-341-000 | UTILITIES | | | 15.31 | ACCT.#54-3943764-4 | | |
| I CC012035 | | ADMIN. CENTER | AP | | R | 12/18/2015 | 6,313.05 | 6,313.05CR | |
| | | G/L ACCOUNT | | | | | 6,313.05 | | |
| | | 401 6-621-341-000 | UTILITIES | | | 183.08 | ACCT.#54-3943824-7 | | |
| | | 401 6-612-341-000 | UTILITIES | | | 91.54 | ACCT.#54-3943824-7 | | |
| | | 401 6-613-341-000 | UTILITIES | | | 91.54 | ACCT.#54-3943824-7 | | |
| | | 401 6-625-341-000 | UTILITIES | | | 91.54 | ACCT.#54-3943824-7 | | |
| | | 401 6-616-341-000 | UTILITIES | | | 91.54 | ACCT.#54-3943824-7 | | |
| | | 401 6-621-341-000 | UTILITIES | | | 91.54 | ACCT.#54-3943824-7 | | |
| | | 401 6-622-341-000 | UTILITIES | | | 347.22 | ACCT.#54-3943824-7 | | |
| | | 401 6-624-341-000 | UTILITIES | | | 419.82 | ACCT.#54-3943824-7 | | |
| | | 401 6-631-341-000 | UTILITIES | | | 189.39 | ACCT.#54-3943824-7 | | |
| | | 401 7-721-341-000 | UTILITIES | | | 1,299.86 | ACCT.#54-3943824-7 | | |
| | | 401 7-731-341-000 | UTILITIES | | | 770.82 | ACCT.#54-3943824-7 | | |
| | | 401 7-741-341-000 | UTILITIES | | | 558.07 | ACCT.#54-3943824-7 | | |
| | | 401 7-751-341-000 | UTILITIES | | | 1,775.23 | ACCT.#54-3943824-7 | | |
| | | 401 6-632-341-000 | UTILITIES | | | 122.47 | ACCT.#54-3943824-7 | | |
| | | 427 6-638-341-000 | UTILITIES | | | 189.39 | ACCT.#54-3943824-7 | | |
| | | | REG. CHECK | | | | 7,566.83 | 7,566.83CR | 0.00 |
| | | | | | | | 7,566.83 | 0.00 | |

ACKET: 06843 Regular Payments
ENDOR SET: 01

## REPORT TOTALS

### FUND DISTRIBUTION

| FUND NO# | FUND NAME | AMOUNT |
|---|---|---|
| 401 | General Fund | 23,954.93CR |
| 402 | Road Fund | 23,708.62CR |
| 407 | Dunken Volunteer Fire Fnd | 99.00CR |
| 408 | East Grand Plains VolFire | 292.93CR |
| 409 | Penasco Volunteer Fire Fd | 285.00CR |
| 410 | Midway Volunteer Fire Fnd | 81.21CR |
| 411 | Berrendo Volunteer Fire | 497.21CR |
| 412 | Sierra Volunteer Fire Fnd | 110.38CR |
| 413 | Rio Felix Volunteer Fire | 102.00CR |
| 414 | CC Fire Dist #8 Vol Fire | 269.03CR |
| 427 | Indigent Hospital Claims | 65,666.53CR |
| 435 | Correction Grants | 119.57CR |
| 452 | Flood Control | 14.94CR |
| 631 | Other Grants & Contracts | 8,922.50CR |
| 650 | Detention Construction PJ | 242,325.27CR |
| 670 | INTERNAL SERVICES | 8,953.62CR |
| | ** TOTALS ** | 375,402.74CR |

### ---- TYPE OF CHECK TOTALS ----

| | NUMBER | GROSS BALANCE | PAYMENT DISCOUNT | OUTSTANDING |
|---|---|---|---|---|
| HAND CHECKS | | 0.00<br>0.00 | 0.00<br>0.00 | 0.00 |
| DRAFTS | | 0.00<br>0.00 | 0.00<br>0.00 | 0.00 |
| REG-CHECKS | | 375,402.74<br>375,402.74 | 375,402.74CR<br>0.00 | 0.00 |
| EFT | | 0.00<br>0.00 | 0.00<br>0.00 | 0.00 |
| NON-CHECKS | | 0.00<br>0.00 | 0.00<br>0.00 | 0.00 |
| ALL CHECKS | | 375,402.74<br>375,402.74 | 375,402.74CR<br>0.00 | 0.00 |

TOTAL CHECKS TO PRINT: 18

ERRORS: 0 WARNINGS: 0

Approved for Payment

PACKET: 06857 Regular Payments
VENDOR SET: 01 12-23-15

VENDOR SEQUENCE

| VENDOR | ITEM NO# | DESCRIPTION | BANK | CHECK | STAT | DUE DT / DISC DT | GROSS / BALANCE | PAYMENT / DISCOUNT | OUTSTANDING |
|---|---|---|---|---|---|---|---|---|---|
| 01-687 | A F L A C | | | | | | | | |
| I 06 | 201512217737 | AFLAC Payable | AP | | R | 12/20/2015 | 239.40 | 239.40CR | |
| | | G/L ACCOUNT | | | | | 239.40 | | |
| | | 401 2-200-008-000 | AMERICAN FAMILY PAYABLE | | | 138.44 | AFLAC Payable | | |
| | | 437 2-200-008-000 | AMERICAN FAMILY PAYABLE | | | 43.68 | AFLAC Payable | | |
| | | 452 2-200-008-000 | AMERICAN FAMILY PAYABLE | | | 57.28 | AFLAC Payable | | |
| I 06X | 201512217737 | AFLAC PAYABLE | AP | | R | 12/20/2015 | 4,853.16 | 4,853.16CR | |
| | | G/L ACCOUNT | | | | | 4,853.16 | | |
| | | 401 2-200-008-000 | AMERICAN FAMILY PAYABLE | | | 4,151.61 | AFLAC PAYABLE | | |
| | | 402 2-200-008-000 | AMERICAN FAMILY PAYABLE | | | 429.02 | AFLAC PAYABLE | | |
| | | 432 2-200-008-000 | AMERICAN FAMILY PAYABLE | | | 65.00 | AFLAC PAYABLE | | |
| | | 437 2-200-008-000 | AMERICAN FAMILY PAYABLE | | | 35.36 | AFLAC PAYABLE | | |
| | | 452 2-200-008-000 | AMERICAN FAMILY PAYABLE | | | 172.17 | AFLAC PAYABLE | | |
| | | | REG. CHECK | | | | 5,092.56 | 5,092.56CR | 0.00 |
| | | | | | | | 5,092.56 | 0.00 | |
| 01-3911 | ALTON'S POWER BLOCK GYM INC | | | | | | | | |
| I ALT | 201512217737 | ALTON'S POWER BLOCK GYM | AP | | R | 12/20/2015 | 88.81 | 88.81CR | |
| | | G/L ACCOUNT | | | | | 88.81 | | |
| | | 402 2-200-024-000 | ALTONS POWER BLOCK GYM PAYABLE | | | 64.71 | ALTON'S POWER BLOCK GYM | | |
| | | 427 2-200-024-000 | ALTONS POWER BLOCK GYM PAYABLE | | | 24.10 | ALTON'S POWER BLOCK GYM | | |
| | | | REG. CHECK | | | | 88.81 | 88.81CR | 0.00 |
| | | | | | | | 88.81 | 0.00 | |
| 01-4670 | JEANINE CORN BEST | | | | | | | | |
| I C39 | 201512217737 | J.BEST/ Cause # DM-2007-019 | AP | | R | 12/20/2015 | 154.62 | 154.62CR | |
| | | G/L ACCOUNT | | | | | 154.62 | | |
| | | 452 2-200-018-000 | CHILD ENFORCEMENT PAYABLE | | | 154.62 | J.BEST/ Cause # DM-2007-0194 | | |
| | | | REG. CHECK | | | | 154.62 | 154.62CR | 0.00 |
| | | | | | | | 154.62 | 0.00 | |
| 01-472 | BOB TURNERS FORD COUNTRY | | | | | | | | |
| I 3766 | | 2016 FORD F-250/ROAD | AP | | R | 12/23/2015 | 22,983.00 | 22,983.00CR | |
| | | G/L ACCOUNT | | | | | 22,983.00 | | |
| | | 402 6-681-372-000 | VEHICLES | | | 22,983.00 | VIN #1FTBF2B68GEB43716 | | |
| | | | REG. CHECK | | | | 22,983.00 | 22,983.00CR | 0.00 |
| | | | | | | | 22,983.00 | 0.00 | |

PACKET: 06857 Regular Payments
VENDOR SET: 01

VENDOR SEQUENCE

| VENDOR | ITEM NO# | DESCRIPTION | BANK | CHECK | STAT | DUE DT / DISC DT | GROSS / BALANCE | PAYMENT / DISCOUNT | OUTSTANDING |
|---|---|---|---|---|---|---|---|---|---|
| 01-5500 | MARK BRADY | | | | | | | | |
| I | CC012256 | TRAVEL REIMB/BERNALILLO | AP | | R | 12/23/2015 | 192.60 | 192.60CR | |
| | | G/L ACCOUNT | | | | | 192.60 | | |
| | | 432 7-761-226-000 MILEAGE REIMBURSEMENT | | | | 192.60 | MILEAGE | | |
| | | | REG. CHECK | | | | 192.60 | 192.60CR | 0.00 |
| | | | | | | | 192.60 | 0.00 | |
| 01-4730 | QWEST | | | | | | | | |
| I | CC012257 | JUVENILE DETENTION | AP | | R | 12/23/2015 | 70.08 | 70.08CR | |
| | | G/L ACCOUNT | | | | | 70.08 | | |
| | | 401 6-645-340-000 TELEPHONE | | | | 70.08 | ACCT.#N-575-622-0163-429M | | |
| I | CC012258 | EGP F.D. #1 | AP | | R | 12/23/2015 | 131.51 | 131.51CR | |
| | | G/L ACCOUNT | | | | | 131.51 | | |
| | | 408 8-812-340-000 TELEPHONE | | | | 131.51 | ACCT.#575-624-2018-4770B | | |
| | | | REG. CHECK | | | | 201.59 | 201.59CR | 0.00 |
| | | | | | | | 201.59 | 0.00 | |
| 01-5076 | CHAVES COUNTY FEDERAL PAYRO | | | | | | | | |
| I | T1 201512217737 | FEDERAL W/H PAYABLE | AP | | R | 12/20/2015 | 34,911.35 | 34,911.35CR | |
| | | G/L ACCOUNT | | | | | 34,911.35 | | |
| | | 401 2-200-003-000 FEDERAL WITHHOLDING PAYABLE | | | | 27,151.39 | FEDERAL W/H PAYABLE | | |
| | | 402 2-200-003-000 FEDERAL WITHHOLDING PAYABLE | | | | 5,013.68 | FEDERAL W/H PAYABLE | | |
| | | 427 2-200-003-000 FEDERAL WITHHOLDING PAYABLE | | | | 130.48 | FEDERAL W/H PAYABLE | | |
| | | 432 2-200-003-000 FEDERAL WITHHOLDING PAYABLE | | | | 475.01 | FEDERAL W/H PAYABLE | | |
| | | 435 2-200-003-000 FEDERAL WITHHOLDING PAYABLE | | | | 142.81 | FEDERAL W/H PAYABLE | | |
| | | 437 2-200-003-000 FEDERAL WITHHOLDING PAYABLE | | | | 295.78 | FEDERAL W/H PAYABLE | | |
| | | 452 2-200-003-000 FEDERAL WITHHOLDING PAYABLE | | | | 1,702.20 | FEDERAL W/H PAYABLE | | |
| I | T1 201512217738 | FEDERAL W/H PAYABLE | AP | | R | 12/21/2015 | 1,046.71 | 1,046.71CR | |
| | | G/L ACCOUNT | | | | | 1,046.71 | | |
| | | 401 2-200-003-000 FEDERAL WITHHOLDING PAYABLE | | | | 1,046.71 | FEDERAL W/H PAYABLE | | |
| I | T1 201512217740 | FEDERAL W/H PAYABLE | AP | | R | 12/20/2015 | 160.24 | 160.24CR | |
| | | G/L ACCOUNT | | | | | 160.24 | | |
| | | 401 2-200-003-000 FEDERAL WITHHOLDING PAYABLE | | | | 160.24 | FEDERAL W/H PAYABLE | | |
| I | T1 201512227741 | FEDERAL W/H PAYABLE | AP | | R | 12/20/2015 | 38.35 | 38.35CR | |
| | | G/L ACCOUNT | | | | | 38.35 | | |
| | | 401 2-200-003-000 FEDERAL WITHHOLDING PAYABLE | | | | 38.35 | FEDERAL W/H PAYABLE | | |

PACKET: 06857 Regular Payments
VENDOR SET: 01

VENDOR SEQUENCE

| VENDOR | ITEM NO# | DESCRIPTION | BANK | CHECK | STAT | DUE DT / DISC DT | GROSS / BALANCE | PAYMENT / DISCOUNT | OUTSTANDING |
|---|---|---|---|---|---|---|---|---|---|
| I T3 | 201512167735 | FICA PAYABLE | AP | | R | 12/20/2015 | 9.24 | 9.24CR | |
| | | G/L ACCOUNT | | | | | 9.24 | | |
| | | 401 2-200-001-000 | FICA PAYABLE | | | 4.62 | FICA PAYABLE | | |
| | | 401 6-642-108-000 | F I C A | | | 4.62 | FICA PAYABLE | | |
| I T3 | 201512217737 | FICA PAYABLE | AP | | R | 12/20/2015 | 40,465.86 | 40,465.86CR | |
| | | G/L ACCOUNT | | | | | 40,465.86 | | |
| | | 401 2-200-001-000 | FICA PAYABLE | | | 14,504.46 | FICA PAYABLE | | |
| | | 401 6-611-108-000 | F I C A | | | 277.40 | FICA PAYABLE | | |
| | | 401 6-613-108-000 | F I C A | | | 246.26 | FICA PAYABLE | | |
| | | 401 6-616-108-000 | F I C A | | | 127.12 | FICA PAYABLE | | |
| | | 401 6-621-108-000 | F I C A | | | 433.15 | FICA PAYABLE | | |
| | | 401 6-622-108-000 | F I C A | | | 401.69 | FICA PAYABLE | | |
| | | 401 6-624-108-000 | F I C A | | | 436.48 | FICA PAYABLE | | |
| | | 401 6-625-108-000 | F I C A | | | 233.49 | FICA PAYABLE | | |
| | | 401 6-631-108-000 | F I C A | | | 395.81 | FICA PAYABLE | | |
| | | 401 6-632-108-000 | F I C A | | | 165.93 | FICA PAYABLE | | |
| | | 401 6-641-108-000 | F I C A | | | 1,042.79 | FICA PAYABLE | | |
| | | 401 6-642-108-000 | F I C A | | | 5,126.56 | FICA PAYABLE | | |
| | | 401 6-645-108-000 | F I C A | | | 1,300.96 | FICA PAYABLE | | |
| | | 401 6-691-108-000 | F I C A | | | 919.19 | FICA PAYABLE | | |
| | | 401 6-692-108-000 | F I C A | | | 224.65 | FICA PAYABLE | | |
| | | 401 7-721-108-000 | F I C A | | | 494.22 | FICA PAYABLE | | |
| | | 401 7-722-108-000 | F I C A | | | 317.93 | FICA PAYABLE | | |
| | | 401 7-723-108-000 | F I C A | | | 54.92 | FICA PAYABLE | | |
| | | 401 7-731-108-000 | F I C A | | | 700.20 | FICA PAYABLE | | |
| | | 401 7-732-108-000 | F I C A | | | 447.75 | FICA PAYABLE | | |
| | | 401 7-741-108-000 | F I C A | | | 520.20 | FICA PAYABLE | | |
| | | 401 7-751-108-000 | F I C A | | | 637.76 | FICA PAYABLE | | |
| | | 402 2-200-001-000 | FICA PAYABLE | | | 3,793.75 | FICA PAYABLE | | |
| | | 402 6-651-108-000 | F I C A | | | 335.10 | FICA PAYABLE | | |
| | | 402 6-652-108-000 | F I C A | | | 757.72 | FICA PAYABLE | | |
| | | 402 6-653-108-000 | F I C A | | | 2,487.35 | FICA PAYABLE | | |
| | | 402 6-654-108-000 | F I C A | | | 213.58 | FICA PAYABLE | | |
| | | 427 2-200-001-000 | FICA PAYABLE | | | 192.60 | FICA PAYABLE | | |
| | | 427 6-638-108-000 | F I C A | | | 192.60 | FICA PAYABLE | | |
| | | 432 2-200-001-000 | FICA PAYABLE | | | 332.99 | FICA PAYABLE | | |
| | | 432 7-761-108-000 | F.I.C.A. | | | 155.29 | FICA PAYABLE | | |
| | | 432 7-765-108-000 | F.I.C.A. | | | 177.70 | FICA PAYABLE | | |
| | | 435 2-200-001-000 | FICA PAYABLE | | | 160.85 | FICA PAYABLE | | |
| | | 435 6-643-108-000 | F I C A | | | 160.85 | FICA PAYABLE | | |
| | | 437 2-200-001-000 | FICA PAYABLE | | | 207.63 | FICA PAYABLE | | |
| | | 437 6-659-108-000 | F I C A | | | 207.63 | FICA PAYABLE | | |
| | | 452 2-200-001-000 | FICA PAYABLE | | | 1,040.65 | FICA PAYABLE | | |
| | | 452 8-832-108-000 | F I C A | | | 1,040.65 | FICA PAYABLE | | |
| I T3 | 201512217738 | FICA PAYABLE | AP | | R | 12/21/2015 | 620.24 | 620.24CR | |
| | | G/L ACCOUNT | | | | | 620.24 | | |
| | | 401 2-200-001-000 | FICA PAYABLE | | | 310.12 | FICA PAYABLE | | |

VENDOR SEQUENCE

| VENDOR | ITEM NO# | DESCRIPTION | BANK | CHECK | STAT | DUE DT / DISC DT | GROSS / BALANCE | PAYMENT / DISCOUNT | OUTSTANDING |
|---|---|---|---|---|---|---|---|---|---|
| | | 401 6-642-108-000 | F I C A | | | | 33.25 | FICA PAYABLE | |
| | | 401 6-691-108-000 | F I C A | | | | 276.87 | FICA PAYABLE | |
| I | T3 201512217740 | FICA PAYABLE | AP | | R | 12/20/2015 | 238.46 | 238.46CR | |
| | | G/L ACCOUNT | | | | | 238.46 | | |
| | | 401 2-200-001-000 | FICA PAYABLE | | | | 119.23 | FICA PAYABLE | |
| | | 401 6-625-108-000 | F I C A | | | | 119.23 | FICA PAYABLE | |
| I | T4 201512167735 | MEDICARE PAYABLE | AP | | R | 12/20/2015 | 2.16 | 2.16CR | |
| | | G/L ACCOUNT | | | | | 2.16 | | |
| | | 401 2-200-006-000 | MEDICARE PAYABLE | | | | 1.08 | MEDICARE PAYABLE | |
| | | 401 6-642-106-000 | MEDICARE TAX | | | | 1.08 | MEDICARE PAYABLE | |
| I | T4 201512217737 | MEDICARE PAYABLE | AP | | R | 12/20/2015 | 11,815.26 | 11,815.26CR | |
| | | G/L ACCOUNT | | | | | 11,815.26 | | |
| | | 401 2-200-006-000 | MEDICARE PAYABLE | | | | 4,567.93 | MEDICARE PAYABLE | |
| | | 401 6-611-106-000 | MEDICARE TAX | | | | 64.88 | MEDICARE PAYABLE | |
| | | 401 6-612-106-000 | MEDICARE TAX | | | | 78.08 | MEDICARE PAYABLE | |
| | | 401 6-613-106-000 | MEDICARE TAX | | | | 57.59 | MEDICARE PAYABLE | |
| | | 401 6-616-106-000 | MEDICARE TAX | | | | 29.73 | MEDICARE PAYABLE | |
| | | 401 6-621-106-000 | MEDICARE TAX | | | | 101.31 | MEDICARE PAYABLE | |
| | | 401 6-622-106-000 | MEDICARE TAX | | | | 93.93 | MEDICARE PAYABLE | |
| | | 401 6-624-106-000 | MEDICARE TAX | | | | 102.09 | MEDICARE PAYABLE | |
| | | 401 6-625-106-000 | MEDICARE TAX | | | | 54.61 | MEDICARE PAYABLE | |
| | | 401 6-631-106-000 | MEDICARE TAX | | | | 92.57 | MEDICARE PAYABLE | |
| | | 401 6-632-106-000 | MEDICARE TAX | | | | 38.81 | MEDICARE PAYABLE | |
| | | 401 6-641-106-000 | MEDICARE TAX | | | | 243.87 | MEDICARE PAYABLE | |
| | | 401 6-642-106-000 | MEDICARE TAX | | | | 1,198.96 | MEDICARE PAYABLE | |
| | | 401 6-645-106-000 | MEDICARE TAX | | | | 304.27 | MEDICARE PAYABLE | |
| | | 401 6-691-106-000 | MEDICARE TAX | | | | 214.98 | MEDICARE PAYABLE | |
| | | 401 6-692-106-000 | MEDICARE TAX | | | | 52.53 | MEDICARE PAYABLE | |
| | | 401 7-721-106-000 | MEDICARE TAX | | | | 115.60 | MEDICARE PAYABLE | |
| | | 401 7-722-106-000 | MEDICARE TAX | | | | 74.36 | MEDICARE PAYABLE | |
| | | 401 7-723-106-000 | MEDICARE TAX | | | | 12.84 | MEDICARE PAYABLE | |
| | | 401 7-731-106-000 | MEDICARE TAX | | | | 163.75 | MEDICARE PAYABLE | |
| | | 401 7-732-106-000 | MEDICARE TAX | | | | 104.71 | MEDICARE PAYABLE | |
| | | 401 7-741-106-000 | MEDICARE TAX | | | | 121.65 | MEDICARE PAYABLE | |
| | | 401 7-751-106-000 | MEDICARE TAX | | | | 224.69 | MEDICARE PAYABLE | |
| | | 401 7-752-106-000 | MEDICARE TAX | | | | 841.32 | MEDICARE PAYABLE | |
| | | 401 7-758-106-000 | MEDICARE TAX | | | | 180.80 | MEDICARE PAYABLE | |
| | | 402 2-200-006-000 | MEDICARE PAYABLE | | | | 887.22 | MEDICARE PAYABLE | |
| | | 402 6-651-106-000 | MEDICARE TAX | | | | 78.37 | MEDICARE PAYABLE | |
| | | 402 6-652-106-000 | MEDICARE TAX | | | | 177.22 | MEDICARE PAYABLE | |
| | | 402 6-653-106-000 | MEDICARE TAX | | | | 581.69 | MEDICARE PAYABLE | |
| | | 402 6-654-106-000 | MEDICARE TAX | | | | 49.94 | MEDICARE PAYABLE | |
| | | 427 2-200-006-000 | MEDICARE PAYABLE | | | | 45.05 | MEDICARE PAYABLE | |
| | | 427 6-638-106-000 | MEDICARE TAX | | | | 45.05 | MEDICARE PAYABLE | |
| | | 432 2-200-006-000 | MEDICARE PAYABLE | | | | 77.88 | MEDICARE PAYABLE | |

VENDOR SEQUENCE

| VENDOR | ITEM NO# | DESCRIPTION | BANK | CHECK | STAT | DUE DT / DISC DT | GROSS / BALANCE | PAYMENT / DISCOUNT | OUTSTANDING |
|---|---|---|---|---|---|---|---|---|---|
| | | 432 7-761-106-000 MEDICARE TAX | | | | | 36.32 MEDICARE PAYABLE | | |
| | | 432 7-765-106-000 MEDICARE TAX | | | | | 41.56 MEDICARE PAYABLE | | |
| | | 435 2-200-006-000 MEDICARE PAYABLE | | | | | 37.62 MEDICARE PAYABLE | | |
| | | 435 6-643-106-000 MEDICARE TAX | | | | | 37.62 MEDICARE PAYABLE | | |
| | | 437 2-200-006-000 MEDICARE PAYABLE | | | | | 48.56 MEDICARE PAYABLE | | |
| | | 437 6-659-106-000 MEDICARE TAX | | | | | 48.56 MEDICARE PAYABLE | | |
| | | 452 2-200-006-000 MEDICARE PAYABLE | | | | | 243.37 MEDICARE PAYABLE | | |
| | | 452 8-832-106-000 MEDICARE TAX | | | | | 243.37 MEDICARE PAYABLE | | |
| I T4 | 201512217738 | MEDICARE PAYABLE | AP | | R | 12/21/2015 | 162.90 | 162.90CR | |
| | | G/L ACCOUNT | | | | | 162.90 | | |
| | | 401 2-200-006-000 MEDICARE PAYABLE | | | | | 81.45 MEDICARE PAYABLE | | |
| | | 401 6-642-106-000 MEDICARE TAX | | | | | 7.78 MEDICARE PAYABLE | | |
| | | 401 6-691-106-000 MEDICARE TAX | | | | | 64.75 MEDICARE PAYABLE | | |
| | | 401 7-752-106-000 MEDICARE TAX | | | | | 8.92 MEDICARE PAYABLE | | |
| I T4 | 201512217740 | MEDICARE PAYABLE | AP | | R | 12/20/2015 | 55.76 | 55.76CR | |
| | | G/L ACCOUNT | | | | | 55.76 | | |
| | | 401 2-200-006-000 MEDICARE PAYABLE | | | | | 27.88 MEDICARE PAYABLE | | |
| | | 401 6-625-106-000 MEDICARE TAX | | | | | 27.88 MEDICARE PAYABLE | | |
| I T4 | 201512227741 | MEDICARE PAYABLE | AP | | R | 12/20/2015 | 13.40 | 13.40CR | |
| | | G/L ACCOUNT | | | | | 13.40 | | |
| | | 401 2-200-006-000 MEDICARE PAYABLE | | | | | 6.70 MEDICARE PAYABLE | | |
| | | 401 7-751-106-000 MEDICARE TAX | | | | | 6.70 MEDICARE PAYABLE | | |
| | | | REG. CHECK | | | | 89,539.93 | 89,539.93CR | 0.00 |
| | | | | | | | 89,539.93 | 0.00 | |

01-5094 COUNTY OF LINCOLN

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| I 005 | | HOUSING OF INMATE/CCDC | AP | | R | 12/23/2015 | 360.00 | 360.00CR | |
| | | G/L ACCOUNT | | | | | 360.00 | | |
| | | 650 6-684-268-000 HOUSING OF PRISONERS | | | | | 360.00 HOUSING OF INMATE | | |
| | | | REG. CHECK | | | | 360.00 | 360.00CR | 0.00 |
| | | | | | | | 360.00 | 0.00 | |

01-5196 DOMINION VOTING SYSTEM INC

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| I DVS115063 | | VOTING MACHINE SUPPLIES/CLE | AP | | R | 12/23/2015 | 397.56 | 397.56CR | |
| | | G/L ACCOUNT | | | | | 397.56 | | |
| | | 401 7-722-230-000 SUPPLIES/TOOLS | | | | | 397.56 ACCT.#USNMCHAVES | | |
| | | | REG. CHECK | | | | 397.56 | 397.56CR | 0.00 |
| | | | | | | | 397.56 | 0.00 | |

PACKET: 06857 Regular Payments
VENDOR SET: 01

VENDOR SEQUENCE

| VENDOR | ITEM NO# | DESCRIPTION | BANK | CHECK | STAT | DUE DT / DISC DT | GROSS / BALANCE | PAYMENT / DISCOUNT | OUTSTANDING |
|---|---|---|---|---|---|---|---|---|---|
| 01-1064 | DREIKOSEN & SONS CONSTRUCTI | | | | | | | | |
| | I CC012253 | CHANGE LOCKS/PENASCO F.D. | AP | | R | 12/23/2015 | 615.96 | 615.96CR | |
| | | G/L ACCOUNT | | | | | 615.96 | | |
| | | 409 8-813-257-000 FACILITY MAINTENANCE/REPAIR | | | | 615.96 | LABOR & MATERIAL | | |
| | | | REG. CHECK | | | | 615.96 | 615.96CR | 0.00 |
| | | | | | | | 615.96 | 0.00 | |
| 01-5069 | VANESSA GONZALES | | | | | | | | |
| | I C61201512217737 | A. PADILLA/DM-2012-839 | AP | | R | 12/20/2015 | 132.96 | 132.96CR | |
| | | G/L ACCOUNT | | | | | 132.96 | | |
| | | 401 2-200-018-000 CHILD ENFORCEMENT PAYABLE | | | | 132.96 | A. PADILLA/DM-2012-839 | | |
| | | | REG. CHECK | | | | 132.96 | 132.96CR | 0.00 |
| | | | | | | | 132.96 | 0.00 | |
| 01-4446 | CARRIE HARDY | | | | | | | | |
| | I C37201512217737 | Thomas Ray/DM-2010-331 | AP | | R | 12/20/2015 | 250.00 | 250.00CR | |
| | | G/L ACCOUNT | | | | | 250.00 | | |
| | | 401 2-200-018-000 CHILD ENFORCEMENT PAYABLE | | | | 250.00 | Thomas Ray/DM-2010-331 | | |
| | | | REG. CHECK | | | | 250.00 | 250.00CR | 0.00 |
| | | | | | | | 250.00 | 0.00 | |
| 01-5475 | TWILA DAWN HARDY | | | | | | | | |
| | I C70201512217737 | T. HARDY/D-504-DM-2015-442 | AP | | R | 12/20/2015 | 494.31 | 494.31CR | |
| | | G/L ACCOUNT | | | | | 494.31 | | |
| | | 401 2-200-018-000 CHILD ENFORCEMENT PAYABLE | | | | 494.31 | T. HARDY/D-504-DM-2015-442 | | |
| | | | REG. CHECK | | | | 494.31 | 494.31CR | 0.00 |
| | | | | | | | 494.31 | 0.00 | |
| 01-4780 | LEGALSHIELD | | | | | | | | |
| | I 12 201512217737 | LEGAL SHIELD PAYABLE | AP | | R | 12/20/2015 | 934.75 | 934.75CR | |
| | | G/L ACCOUNT | | | | | 934.75 | | |
| | | 401 2-200-022-000 PRE-PAID LEGAL PAYABLE | | | | 727.45 | LEGAL SHIELD PAYABLE | | |
| | | 402 2-200-022-000 PRE-PAID LEGAL PAYABLE | | | | 173.40 | LEGAL SHIELD PAYABLE | | |
| | | 437 2-200-022-000 PRE-PAID LEGAL PAYABLE | | | | 33.90 | LEGAL SHIELD PAYABLE | | |

VENDOR SEQUENCE

| VENDOR | ITEM NO# | DESCRIPTION | BANK | CHECK | STAT | DUE DT / DISC DT | GROSS / BALANCE | PAYMENT / DISCOUNT | OUTSTANDING |
|---|---|---|---|---|---|---|---|---|---|
| | | REG. CHECK | | | | | 934.75 / 934.75 | 934.75CR / 0.00 | 0.00 |
| 01-4779 | MANDI LEWALLEN | | | | | | | | |
| I C51201512217737 | | A.PADILLA/Cause # DM-2010-7 | AP | | R | 12/20/2015 | 132.80 / 132.80 | 132.80CR | |
| | | G/L ACCOUNT | | | | | | | |
| | | 401 2-200-018-000 CHILD ENFORCEMENT PAYABLE | | | | | 132.80 | A.PADILLA/Cause # DM-2010-75 | |
| | | REG. CHECK | | | | | 132.80 / 132.80 | 132.80CR / 0.00 | 0.00 |
| 01-4280 | MIRANDA PEST CONTROL | | | | | | | | |
| I CC012486 | | FLOOD/DEC. 2015 | AP | | R | 12/23/2015 | 26.71 / 26.71 | 26.71CR | |
| | | G/L ACCOUNT | | | | | | | |
| | | 452 8-832-267-000 CONTRACTUAL SERVICES | | | | | 26.71 | PEST CONTROL SERVICE | |
| | | REG. CHECK | | | | | 26.71 / 26.71 | 26.71CR / 0.00 | 0.00 |
| 01-5040 | BAMBI NALLEY | | | | | | | | |
| I C58201512217737 | | SEELY DM-2013-443 | AP | | R | 12/20/2015 | 115.38 / 115.38 | 115.38CR | |
| | | G/L ACCOUNT | | | | | | | |
| | | 401 2-200-018-000 CHILD ENFORCEMENT PAYABLE | | | | | 115.38 | SEELY DM-2013-443 | |
| | | REG. CHECK | | | | | 115.38 / 115.38 | 115.38CR / 0.00 | 0.00 |
| 01-3986 | NATIONWIDE RETIREMENT SOLUT | | | | | | | | |
| I 15 201512217737 | | Deferred Comp Payable | AP | | D | 12/20/2015 | 4,629.26 / 4,629.26 | 4,629.26CR | |
| | | G/L ACCOUNT | | | | | | | |
| | | 401 2-200-017-000 DEFERRED COMP. PAYABLE | | | | | 3,104.76 | Deferred Comp Payable | |
| | | 402 2-200-017-000 DEFERRED COMP. PAYABLE | | | | | 1,449.50 | Deferred Comp Payable | |
| | | 432 2-200-017-000 DEFERRED COMP. PAYABLE | | | | | 20.00 | Deferred Comp Payable | |
| | | 435 2-200-017-000 DEFERRED COMP. PAYABLE | | | | | 45.00 | Deferred Comp Payable | |
| | | 437 2-200-017-000 DEFERRED COMP. PAYABLE | | | | | 10.00 | Deferred Comp Payable | |
| I 15 201512217740 | | Deferred Comp Payable | AP | | D | 12/20/2015 | 25.00 / 25.00 | 25.00CR | |
| | | G/L ACCOUNT | | | | | | | |
| | | 401 2-200-017-000 DEFERRED COMP. PAYABLE | | | | | 25.00 | Deferred Comp Payable | |

VENDOR SEQUENCE

| VENDOR | ITEM NO# | DESCRIPTION | BANK | CHECK | STAT | DUE DT / DISC DT | GROSS / BALANCE | PAYMENT / DISCOUNT | OUTSTANDING |
|---|---|---|---|---|---|---|---|---|---|
| | | DRAFTS | | | | 1 | 4,654.26<br>4,654.26 | 4,654.26CR<br>0.00 | 0.00 |

01-226 NM BUREAU OF TAX & REVENUE

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| I 201512187736 | NM BUREAU OF TAX & REVENUE | AP | 12/18/2015 | D | 12/25/2015 | 96.46 | 96.46CR | |
| | G/L ACCOUNT | | | | | 96.46 | | |
| | 901 2-250-000-598 | TREASURER'S LIABILITY TO FUND | | | | 96.46 | NM BUREAU OF TAX & REVENUE | |
| | | DRAFTS | | | | 1 | 96.46<br>96.46 | 96.46CR<br>0.00 | 0.00 |

01-4532 NM RETIREE HEALTH CARE AUTH

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| I RHC201512217737 | NM RETIREE HEALTH CARE PAYA | AP | | R | 12/20/2015 | 9,078.26 | 9,078.26CR | |
| | G/L ACCOUNT | | | | | 9,078.26 | | |
| | 401 2-200-020-000 | RETIREE H/C PAYABLE | | | | 2,167.95 | NM RETIREE HEALTH CARE PAYABLE | |
| | 401 6-611-111-000 | RETIREE HEALTH CARE | | | | 17.56 | NM RETIREE HEALTH CARE PAYABLE | |
| | 401 6-612-111-000 | RETIREE HEALTH CARE | | | | 107.70 | NM RETIREE HEALTH CARE PAYABLE | |
| | 401 6-613-111-000 | RETIREE HEALTH CARE | | | | 77.78 | NM RETIREE HEALTH CARE PAYABLE | |
| | 401 6-616-111-000 | RETIREE HEALTH CARE | | | | 41.54 | NM RETIREE HEALTH CARE PAYABLE | |
| | 401 6-621-111-000 | RETIREE HEALTH CARE | | | | 33.07 | NM RETIREE HEALTH CARE PAYABLE | |
| | 401 6-622-111-000 | RETIREE HEALTH CARE | | | | 130.28 | NM RETIREE HEALTH CARE PAYABLE | |
| | 401 6-624-111-000 | RETIREE HEALTH CARE | | | | 140.98 | NM RETIREE HEALTH CARE PAYABLE | |
| | 401 6-625-111-000 | RETIREE HEALTH CARE | | | | 76.93 | NM RETIREE HEALTH CARE PAYABLE | |
| | 401 6-631-111-000 | RETIREE HEALTH CARE | | | | 128.22 | NM RETIREE HEALTH CARE PAYABLE | |
| | 401 6-632-111-000 | RETIREE HEALTH CARE | | | | 57.05 | NM RETIREE HEALTH CARE PAYABLE | |
| | 401 6-641-111-000 | RETIREE HEALTH CARE | | | | 341.34 | NM RETIREE HEALTH CARE PAYABLE | |
| | 401 6-642-111-000 | RETIREE HEALTH CARE | | | | 1,442.28 | NM RETIREE HEALTH CARE PAYABLE | |
| | 401 6-645-111-000 | RETIREE HEALTH CARE | | | | 395.30 | NM RETIREE HEALTH CARE PAYABLE | |
| | 401 6-691-111-000 | RETIREE HEALTH CARE | | | | 278.59 | NM RETIREE HEALTH CARE PAYABLE | |
| | 401 6-692-111-000 | RETIREE HEALTH CARE | | | | 69.01 | NM RETIREE HEALTH CARE PAYABLE | |
| | 401 7-721-111-000 | RETIREE HEALTH CARE | | | | 163.89 | NM RETIREE HEALTH CARE PAYABLE | |
| | 401 7-722-111-000 | RETIREE HEALTH CARE | | | | 102.56 | NM RETIREE HEALTH CARE PAYABLE | |
| | 401 7-731-111-000 | RETIREE HEALTH CARE | | | | 206.43 | NM RETIREE HEALTH CARE PAYABLE | |
| | 401 7-732-111-000 | RETIREE HEALTH CARE | | | | 145.23 | NM RETIREE HEALTH CARE PAYABLE | |
| | 401 7-741-111-000 | RETIREE HEALTH CARE | | | | 174.48 | NM RETIREE HEALTH CARE PAYABLE | |
| | 401 7-751-111-000 | RETIREE HEALTH CARE | | | | 205.71 | NM RETIREE HEALTH CARE PAYABLE | |
| | 402 2-200-020-000 | RETIREE H/C PAYABLE | | | | 575.63 | NM RETIREE HEALTH CARE PAYABLE | |
| | 402 6-651-111-000 | RETIREE HEALTH CARE | | | | 109.93 | NM RETIREE HEALTH CARE PAYABLE | |
| | 402 6-652-111-000 | RETIREE HEALTH CARE | | | | 218.53 | NM RETIREE HEALTH CARE PAYABLE | |
| | 402 6-653-111-000 | RETIREE HEALTH CARE | | | | 754.00 | NM RETIREE HEALTH CARE PAYABLE | |
| | 402 6-654-111-000 | RETIREE HEALTH CARE | | | | 68.86 | NM RETIREE HEALTH CARE PAYABLE | |
| | 427 2-200-020-000 | RETIREE H/C PAYABLE | | | | 31.06 | NM RETIREE HEALTH CARE PAYABLE | |
| | 427 6-638-111-000 | RETIREE HEALTH CARE | | | | 62.13 | NM RETIREE HEALTH CARE PAYABLE | |

VENDOR SEQUENCE

| VENDOR | ITEM NO# | DESCRIPTION | BANK | CHECK | STAT | DUE DT / DISC DT | GROSS / BALANCE | PAYMENT / DISCOUNT | OUTSTANDING |
|---|---|---|---|---|---|---|---|---|---|
| | | 432 2-200-020-000 RETIREE H/C PAYABLE | | | | | 54.36 | NM RETIREE HEALTH CARE PAYABLE | |
| | | 432 7-761-111-000 RETIREE HEALTH CARE | | | | | 50.09 | NM RETIREE HEALTH CARE PAYABLE | |
| | | 432 7-765-111-000 RETIREE HEALTH CARE | | | | | 58.62 | NM RETIREE HEALTH CARE PAYABLE | |
| | | 435 2-200-020-000 RETIREE H/C PAYABLE | | | | | 25.95 | NM RETIREE HEALTH CARE PAYABLE | |
| | | 435 6-643-111-000 RETIREE HEALTH CARE | | | | | 51.89 | NM RETIREE HEALTH CARE PAYABLE | |
| | | 437 2-200-020-000 RETIREE H/C PAYABLE | | | | | 28.38 | NM RETIREE HEALTH CARE PAYABLE | |
| | | 437 6-659-111-000 RETIREE HEALTH CARE | | | | | 56.75 | NM RETIREE HEALTH CARE PAYABLE | |
| | | 452 2-200-020-000 RETIREE H/C PAYABLE | | | | | 142.73 | NM RETIREE HEALTH CARE PAYABLE | |
| | | 452 8-832-111-000 RETIREE HEALTH CARE | | | | | 285.47 | NM RETIREE HEALTH CARE PAYABLE | |
| I | RHC201512217740 | NM RETIREE HEALTH CARE PAYA | AP | | R | 12/20/2015 | 57.69 | 57.69CR | |
| | | G/L ACCOUNT | | | | | 57.69 | | |
| | | 401 2-200-020-000 RETIREE H/C PAYABLE | | | | | 19.23 | NM RETIREE HEALTH CARE PAYABLE | |
| | | 401 6-625-111-000 RETIREE HEALTH CARE | | | | | 38.46 | NM RETIREE HEALTH CARE PAYABLE | |
| I | RHL201512217737 | NM Retiree HealthCare Law E | AP | | R | 12/20/2015 | 2,524.82 | 2,524.82CR | |
| | | G/L ACCOUNT | | | | | 2,524.82 | | |
| | | 401 2-200-020-000 RETIREE H/C PAYABLE | | | | | 841.62 | NM Retiree HealthCare Law Enf | |
| | | 401 7-751-111-000 RETIREE HEALTH CARE | | | | | 62.71 | NM Retiree HealthCare Law Enf | |
| | | 401 7-752-111-000 RETIREE HEALTH CARE | | | | | 1,319.99 | NM Retiree HealthCare Law Enf | |
| | | 401 7-758-111-000 RETIREE HEALTH CARE | | | | | 300.50 | NM Retiree HealthCare Law Enf | |
| | | REG. CHECK | | | | | 11,660.77 | 11,660.77CR | 0.00 |
| | | | | | | | 11,660.77 | 0.00 | |
| 01-2646 | NORTHSTAR PLUMBING & HEATIN | | | | | | | | |
| I | 5120 | REPAIR LIEBERT UNIT/MAINT. | AP | | R | 12/23/2015 | 322.50 | 322.50CR | |
| | | G/L ACCOUNT | | | | | 322.50 | | |
| | | 401 6-691-257-000 FACILITY MAINT/REPAIR | | | | | 322.50 | LABOR & MATERIAL | |
| | | REG. CHECK | | | | | 322.50 | 322.50CR | 0.00 |
| | | | | | | | 322.50 | 0.00 | |
| 01-4327 | OCCAM CONSULTING ENGINEERS | | | | | | | | |
| I | 5043 | REDUCE SECTION ON DAM/FLOOD | AP | | R | 12/23/2015 | 1,027.48 | 1,027.48CR | |
| | | G/L ACCOUNT | | | | | 1,027.48 | | |
| | | 452 8-832-267-000 CONTRACTUAL SERVICES | | | | | 1,027.48 | PROFESSIONAL SERVICES | |
| | | REG. CHECK | | | | | 1,027.48 | 1,027.48CR | 0.00 |
| | | | | | | | 1,027.48 | 0.00 | |

VENDOR SEQUENCE

| VENDOR | ITEM NO# | DESCRIPTION | BANK | CHECK | STAT | DUE DT / DISC DT | GROSS / BALANCE | PAYMENT / DISCOUNT | OUTSTANDING |
|---|---|---|---|---|---|---|---|---|---|
| 01-3663 | OHIO CHILD SUPPORT CENTRAL | | | | | | | | |
| I | C33201512217737 | Order #86DR6120 | AP | | R | 12/20/2015 | 102.00 | 102.00CR | |
| | | G/L ACCOUNT | | | | | 102.00 | | |
| | | 401 2-200-018-000 | CHILD ENFORCEMENT PAYABLE | | | 102.00 | Order #86DR6120 | | |
| | | | REG. CHECK | | | | 102.00 | 102.00CR | 0.00 |
| | | | | | | | 102.00 | 0.00 | |
| 01-4786 | GERALDINE PADILLA | | | | | | | | |
| I | C52201512217737 | A.PADILLA/DM-2006-76 | AP | | R | 12/20/2015 | 138.46 | 138.46CR | |
| | | G/L ACCOUNT | | | | | 138.46 | | |
| | | 401 2-200-018-000 | CHILD ENFORCEMENT PAYABLE | | | 138.46 | A.PADILLA/DM-2006-76 | | |
| | | | REG. CHECK | | | | 138.46 | 138.46CR | 0.00 |
| | | | | | | | 138.46 | 0.00 | |
| 01-3915 | PUBLIC EMPLOYEES RETIREMENT | | | | | | | | |
| I | LEO201512217737 | PERA PAYABLE | AP | | D | 12/20/2015 | 22,392.76 | 22,392.76CR | |
| | | G/L ACCOUNT | | | | | 22,392.76 | | |
| | | 401 2-200-002-000 | PERA PAYABLE | | | 8,725.22 | PERA PAYABLE | | |
| | | 401 7-751-109-000 | P E R A | | | 561.90 | PERA PAYABLE | | |
| | | 401 7-752-109-000 | P E R A | | | 10,875.46 | PERA PAYABLE | | |
| | | 401 7-758-109-000 | P.E.R.A. | | | 2,230.18 | PERA PAYABLE | | |
| I | LER201512217737 | PERA PAYABLE | AP | | D | 12/20/2015 | 2,316.86 | 2,316.86CR | |
| | | G/L ACCOUNT | | | | | 2,316.86 | | |
| | | 401 2-200-002-000 | PERA PAYABLE | | | 902.75 | PERA PAYABLE | | |
| | | 401 7-752-109-000 | P E R A | | | 951.74 | PERA PAYABLE | | |
| | | 401 7-758-109-000 | P.E.R.A. | | | 462.37 | PERA PAYABLE | | |
| I | PRE201512217737 | PERA PAYABLE | AP | | D | 12/20/2015 | 86,208.16 | 86,208.16CR | |
| | | G/L ACCOUNT | | | | | 86,208.16 | | |
| | | 401 2-200-002-000 | PERA PAYABLE | | | 29,082.89 | PERA PAYABLE | | |
| | | 401 6-611-109-000 | P E R A | | | 273.10 | PERA PAYABLE | | |
| | | 401 6-612-109-000 | P E R A | | | 837.34 | PERA PAYABLE | | |
| | | 401 6-613-109-000 | P E R A | | | 604.80 | PERA PAYABLE | | |
| | | 401 6-616-109-000 | P E R A | | | 322.96 | PERA PAYABLE | | |
| | | 401 6-621-109-000 | P E R A | | | 257.13 | PERA PAYABLE | | |
| | | 401 6-622-109-000 | P E R A | | | 1,012.96 | PERA PAYABLE | | |
| | | 401 6-624-109-000 | P E R A | | | 1,096.10 | PERA PAYABLE | | |
| | | 401 6-625-109-000 | P E R A | | | 598.13 | PERA PAYABLE | | |
| | | 401 6-631-109-000 | P E R A | | | 996.88 | PERA PAYABLE | | |

PACKET: 06857 Regular Payments
VENDOR SET: 01

VENDOR SEQUENCE

| VENDOR | ITEM NO# | DESCRIPTION | BANK | CHECK | STAT | DUE DT / DISC DT | GROSS / BALANCE | PAYMENT / DISCOUNT | OUTSTANDING |
|---|---|---|---|---|---|---|---|---|---|
| | | 401 6-632-109-000 | P E R A | | | 443.61 | PERA PAYABLE | | |
| | | 401 6-641-109-000 | P E R A | | | 2,654.06 | PERA PAYABLE | | |
| | | 401 6-642-109-000 | P E R A | | | 11,212.92 | PERA PAYABLE | | |
| | | 401 6-645-109-000 | P E R A | | | 3,073.50 | PERA PAYABLE | | |
| | | 401 6-691-109-000 | P E R A | | | 2,165.94 | PERA PAYABLE | | |
| | | 401 6-692-109-000 | P E R A | | | 536.53 | PERA PAYABLE | | |
| | | 401 7-721-109-000 | P E R A | | | 931.77 | PERA PAYABLE | | |
| | | 401 7-722-109-000 | P E R A | | | 797.41 | PERA PAYABLE | | |
| | | 401 7-731-109-000 | P E R A | | | 1,230.78 | PERA PAYABLE | | |
| | | 401 7-732-109-000 | P E R A | | | 1,129.10 | PERA PAYABLE | | |
| | | 401 7-741-109-000 | P E R A | | | 1,356.60 | PERA PAYABLE | | |
| | | 401 7-751-109-000 | P E R A | | | 1,599.42 | PERA PAYABLE | | |
| | | 402 2-200-002-000 | PERA PAYABLE | | | 7,360.67 | PERA PAYABLE | | |
| | | 402 6-651-109-000 | P E R A | | | 482.67 | PERA PAYABLE | | |
| | | 402 6-652-109-000 | P E R A | | | 1,699.07 | PERA PAYABLE | | |
| | | 402 6-653-109-000 | P E R A | | | 5,668.07 | PERA PAYABLE | | |
| | | 402 6-654-109-000 | P E R A | | | 535.42 | PERA PAYABLE | | |
| | | 427 2-200-002-000 | PERA PAYABLE | | | 424.02 | PERA PAYABLE | | |
| | | 427 6-638-109-000 | P E R A | | | 483.04 | PERA PAYABLE | | |
| | | 432 2-200-002-000 | PERA PAYABLE | | | 742.01 | PERA PAYABLE | | |
| | | 432 7-761-109-000 | P.E.R.A. | | | 389.49 | PERA PAYABLE | | |
| | | 432 7-765-109-000 | P.E.R.A | | | 455.80 | PERA PAYABLE | | |
| | | 435 2-200-002-000 | Pera Payable | | | 354.14 | PERA PAYABLE | | |
| | | 435 6-643-109-000 | P E R A | | | 403.43 | PERA PAYABLE | | |
| | | 437 2-200-002-000 | PERA PAYABLE | | | 387.33 | PERA PAYABLE | | |
| | | 437 6-659-109-000 | P E R A | | | 441.25 | PERA PAYABLE | | |
| | | 452 2-200-002-000 | PERA PAYABLE | | | 1,948.31 | PERA PAYABLE | | |
| | | 452 8-832-109-000 | P E R A | | | 2,219.51 | PERA PAYABLE | | |
| I | PRE201512217740 | PERA PAYABLE | AP | | D | 12/20/2015 | 561.54 | 561.54CR | |
| | | G/L ACCOUNT | | | | | 561.54 | | |
| | | 401 2-200-002-000 | PERA PAYABLE | | | 262.50 | PERA PAYABLE | | |
| | | 401 6-625-109-000 | P E R A | | | 299.04 | PERA PAYABLE | | |
| I | prc201512217737 | PERA PAYABLE | AP | | D | 12/20/2015 | 1,766.04 | 1,766.04CR | |
| | | G/L ACCOUNT | | | | | 1,766.04 | | |
| | | 401 2-200-002-000 | PERA PAYABLE | | | 328.45 | PERA PAYABLE | | |
| | | 401 7-731-109-000 | P E R A | | | 374.17 | PERA PAYABLE | | |
| | | 402 2-200-002-000 | PERA PAYABLE | | | 497.11 | PERA PAYABLE | | |
| | | 402 6-651-109-000 | P E R A | | | 372.00 | PERA PAYABLE | | |
| | | 402 6-653-109-000 | P E R A | | | 194.31 | PERA PAYABLE | | |
| | | | DRAFTS | | | 1 | 113,245.36 | 113,245.36CR | 0.00 |
| | | | | | | | 113,245.36 | 0.00 | |

PACKET: 06857 Regular Payments
VENDOR SET: 01

VENDOR SEQUENCE

| VENDOR | ITEM NO# | DESCRIPTION | BANK | CHECK | STAT | DUE DT / DISC DT | GROSS / BALANCE | PAYMENT / DISCOUNT | OUTSTANDING |
|---|---|---|---|---|---|---|---|---|---|
| 01-5326 | PETTY CASH FUND-FLOOD CONTR | | | | | | | | |
| | I CC012488 | PETTY CASH REIMBURSEMENT | AP | | R | 12/23/2015 | 52.75 | 52.75CR | |
| | | G/L ACCOUNT | | | | | 52.75 | | |
| | | 452 8-832-221-000 VEH/HVY EQUIP. REPAIR | | | | 30.00 | EQUIPMENT REPAIRS | | |
| | | 452 8-832-230-000 SUPPLIES/TOOLS | | | | 22.75 | SUPPLIES | | |
| | | | | REG. CHECK | | | 52.75 | 52.75CR | 0.00 |
| | | | | | | | 52.75 | 0.00 | |
| 01-99 | PRECISION AIR OF ROSWELL | | | | | | | | |
| | I 3229 | REPAIR COMPRESSOR/MAINT. | AP | | R | 12/23/2015 | 184.90 | 184.90CR | |
| | | G/L ACCOUNT | | | | | 184.90 | | |
| | | 401 6-691-257-000 FACILITY MAINT/REPAIR | | | | 184.90 | LABOR & MATERIAL | | |
| | | | | REG. CHECK | | | 184.90 | 184.90CR | 0.00 |
| | | | | | | | 184.90 | 0.00 | |
| 01-84 | CITY OF ROSWELL | | | | | | | | |
| | I CC012365 | MEDICAL COMPLEX #C & D | AP | | R | 12/23/2015 | 202.01 | 202.01CR | |
| | | G/L ACCOUNT | | | | | 202.01 | | |
| | | 401 6-693-341-000 UTILITIES | | | | 51.50 | ACCT.#80013-39998 | | |
| | | 401 6-693-341-000 UTILITIES | | | | 150.51 | ACCT.#80013-40220 | | |
| | I CC012367 | HEALTH DEPT | AP | | R | 12/23/2015 | 160.02 | 160.02CR | |
| | | G/L ACCOUNT | | | | | 160.02 | | |
| | | 401 6-693-341-000 UTILITIES | | | | 160.02 | ACCT.#54027-19848 | | |
| | I CC012368 | CCDC | AP | | R | 12/23/2015 | 732.11 | 732.11CR | |
| | | G/L ACCOUNT | | | | | 732.11 | | |
| | | 650 6-684-341-000 UTILITIES | | | | 732.11 | ACCT.#55251-43540 | | |
| | I CC012369 | CCDC | AP | | R | 12/23/2015 | 33.25 | 33.25CR | |
| | | G/L ACCOUNT | | | | | 33.25 | | |
| | | 650 6-684-341-000 UTILITIES | | | | 33.25 | ACCT.#55251-48486 | | |
| | I CC012369-1 | MEDICAL COMPLEX #A & B | AP | | R | 12/23/2015 | 615.81 | 615.81CR | |
| | | G/L ACCOUNT | | | | | 615.81 | | |
| | | 401 6-693-341-000 UTILITIES | | | | 50.38 | ACCT.#80013-40384 | | |
| | | 401 6-693-341-000 UTILITIES | | | | 548.72 | ACCT.#80013-40986 | | |
| | | 401 6-693-341-000 UTILITIES | | | | 16.71 | ACCT.#80013-44388 | | |
| | I CC012470 | MAINT. DEPT | AP | | R | 12/23/2015 | 24.06 | 24.06CR | |
| | | G/L ACCOUNT | | | | | 24.06 | | |
| | | 401 6-691-341-000 UTILITIES | | | | 24.06 | ACCT.#80013-40562 | | |

PACKET: 06857 Regular Payments
VENDOR SET: 01

VENDOR SEQUENCE

| VENDOR | ITEM NO# | DESCRIPTION | BANK | CHECK | STAT | DUE DT / DISC DT | GROSS / BALANCE | PAYMENT / DISCOUNT | OUTSTANDING |
|---|---|---|---|---|---|---|---|---|---|
| I CC012471 | | ADMIN. BLDG. | AP | | R | 12/23/2015 | 312.05 | 312.05CR | |
| | | G/L ACCOUNT | | | | | 312.05 | | |
| | | 401 6-612-341-000 | UTILITIES | | | 9.05 | ACCT.#92573-38102 | | |
| | | 401 6-621-341-000 | UTILITIES | | | 4.52 | ACCT.#92573-38102 | | |
| | | 401 6-613-341-000 | UTILITIES | | | 4.52 | ACCT.#92573-38102 | | |
| | | 401 6-625-341-000 | UTILITIES | | | 4.52 | ACCT.#92573-38102 | | |
| | | 401 6-616-341-000 | UTILITIES | | | 4.52 | ACCT.#92573-38102 | | |
| | | 401 6-621-341-000 | UTILITIES | | | 4.52 | ACCT.#92573-38102 | | |
| | | 401 6-622-341-000 | UTILITIES | | | 17.16 | ACCT.#92573-38102 | | |
| | | 401 6-624-341-000 | UTILITIES | | | 20.75 | ACCT.#92573-38102 | | |
| | | 401 6-631-341-000 | UTILITIES | | | 9.36 | ACCT.#92573-38102 | | |
| | | 401 7-721-341-000 | UTILITIES | | | 64.25 | ACCT.#92573-38102 | | |
| | | 401 7-731-341-000 | UTILITIES | | | 38.10 | ACCT.#92573-38102 | | |
| | | 401 7-741-341-000 | UTILITIES | | | 27.59 | ACCT.#92573-38102 | | |
| | | 401 7-751-341-000 | UTILITIES | | | 87.75 | ACCT.#92573-38102 | | |
| | | 427 6-638-341-000 | UTILITIES | | | 9.36 | ACCT.#92573-38102 | | |
| | | 401 6-632-341-000 | UTILITIES | | | 6.08 | ACCT.#92573-38102 | | |
| I CC012472 | | ADMIN. BLDG. | AP | | R | 12/23/2015 | 100.87 | 100.87CR | |
| | | G/L ACCOUNT | | | | | 100.87 | | |
| | | 401 6-612-341-000 | UTILITIES | | | 2.93 | ACCT.#92573-48964 | | |
| | | 401 6-621-341-000 | UTILITIES | | | 1.46 | ACCT.#92573-48964 | | |
| | | 401 6-613-341-000 | UTILITIES | | | 1.46 | ACCT.#92573-48964 | | |
| | | 401 6-625-341-000 | UTILITIES | | | 1.46 | ACCT.#92573-48964 | | |
| | | 401 6-616-341-000 | UTILITIES | | | 1.46 | ACCT.#92573-48964 | | |
| | | 401 6-621-341-000 | UTILITIES | | | 1.46 | ACCT.#92573-48964 | | |
| | | 401 6-622-341-000 | UTILITIES | | | 5.55 | ACCT.#92573-48964 | | |
| | | 401 6-624-341-000 | UTILITIES | | | 6.71 | ACCT.#92573-48964 | | |
| | | 401 6-631-341-000 | UTILITIES | | | 3.03 | ACCT.#92573-48964 | | |
| | | 401 7-721-341-000 | UTILITIES | | | 20.77 | ACCT.#92573-48964 | | |
| | | 401 7-731-341-000 | UTILITIES | | | 12.32 | ACCT.#92573-48964 | | |
| | | 401 7-741-341-000 | UTILITIES | | | 8.92 | ACCT.#92573-48964 | | |
| | | 401 7-751-341-000 | UTILITIES | | | 28.36 | ACCT.#92573-48964 | | |
| | | 401 6-632-341-000 | UTILITIES | | | 1.96 | ACCT.#92573-48964 | | |
| | | 427 6-638-341-000 | UTILITIES | | | 3.02 | ACCT.#92573-48964 | | |
| | | | REG. CHECK | | | | 2,180.18 | 2,180.18CR | 0.00 |
| | | | | | | | 2,180.18 | 0.00 | |

01-5499 MEAGAN SANDERS

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| I CC012255 | | TRAVEL REIMB./BERNALILLO | AP | | R | 12/23/2015 | 192.60 | 192.60CR | |
| | | G/L ACCOUNT | | | | | 192.60 | | |
| | | 432 7-761-226-000 | MILEAGE REIMBURSEMENT | | | 192.60 | MILEAGE | | |
| | | | REG. CHECK | | | | 192.60 | 192.60CR | 0.00 |
| | | | | | | | 192.60 | 0.00 | |

PACKET: 06857 Regular Payments
VENDOR SET: 01

VENDOR SEQUENCE

| VENDOR | ITEM NO# | DESCRIPTION | BANK | CHECK | STAT | DUE DT / DISC DT | GROSS / BALANCE | PAYMENT / DISCOUNT | OUTSTANDING |
|---|---|---|---|---|---|---|---|---|---|
| 01-3632 | SANTA FE COUNTY | | | | | | | | |
| I CHAV 10-2015 | | HOUSING OF INMATE/CCDC | AP | | R | 12/23/2015 | 170.00 | 170.00CR | |
| | | G/L ACCOUNT | | | | | 170.00 | | |
| | | 650 6-684-268-000 HOUSING OF PRISONERS | | | | 170.00 | HOUSING OF INMATE | | |
| | | | | REG. CHECK | | | 170.00 | 170.00CR | 0.00 |
| | | | | | | | 170.00 | 0.00 | |
| 01-5058 | KIRA SHANNON | | | | | | | | |
| I C59201512217737 | | FLORES DM-2012-744 | AP | | R | 12/20/2015 | 36.98 | 36.98CR | |
| | | G/L ACCOUNT | | | | | 36.98 | | |
| | | 401 2-200-018-000 CHILD ENFORCEMENT PAYABLE | | | | 36.98 | FLORES DM-2012-744 | | |
| | | | | REG. CHECK | | | 36.98 | 36.98CR | 0.00 |
| | | | | | | | 36.98 | 0.00 | |
| 01-688 | STATE OF NEW MEXICO | | | | | | | | |
| I C03201512217737 | | C Childress/Cause# 00011106 | AP | | R | 12/20/2015 | 71.08 | 71.08CR | |
| | | G/L ACCOUNT | | | | | 71.08 | | |
| | | 401 2-200-018-000 CHILD ENFORCEMENT PAYABLE | | | | 71.08 | C Childress/Cause# 000111063 | | |
| I C18201512217737 | | A.Perez/Cause# 165742 | AP | | R | 12/20/2015 | 151.85 | 151.85CR | |
| | | G/L ACCOUNT | | | | | 151.85 | | |
| | | 401 2-200-018-000 CHILD ENFORCEMENT PAYABLE | | | | 151.85 | A.Perez/Cause# 165742 | | |
| I C38201512217737 | | S Ouillette/000085580 | AP | | R | 12/20/2015 | 201.23 | 201.23CR | |
| | | G/L ACCOUNT | | | | | 201.23 | | |
| | | 401 2-200-018-000 CHILD ENFORCEMENT PAYABLE | | | | 201.23 | S Ouillette/000085580 | | |
| I C50201512217737 | | A.PADILLA/CASEID 000017516 | AP | | R | 12/20/2015 | 85.27 | 85.27CR | |
| | | G/L ACCOUNT | | | | | 85.27 | | |
| | | 401 2-200-018-000 CHILD ENFORCEMENT PAYABLE | | | | 85.27 | A.PADILLA/CASEID 000017516 | | |
| I C55201512217737 | | T. ESTRADA/000313284 | AP | | R | 12/20/2015 | 147.69 | 147.69CR | |
| | | G/L ACCOUNT | | | | | 147.69 | | |
| | | 401 2-200-018-000 CHILD ENFORCEMENT PAYABLE | | | | 147.69 | T. ESTRADA/000313284 | | |
| I C62201512217737 | | J.JOHNSON 000088516 | AP | | R | 12/20/2015 | 121.21 | 121.21CR | |
| | | G/L ACCOUNT | | | | | 121.21 | | |
| | | 401 2-200-018-000 CHILD ENFORCEMENT PAYABLE | | | | 121.21 | J.JOHNSON 000088516 | | |
| I C68201512217737 | | DELAROSA ID 000121193 | AP | | R | 12/20/2015 | 158.41 | 158.41CR | |
| | | G/L ACCOUNT | | | | | 158.41 | | |
| | | 401 2-200-018-000 CHILD ENFORCEMENT PAYABLE | | | | 158.41 | DELAROSA ID 000121193 | | |

VENDOR SEQUENCE

| VENDOR | ITEM NO# | DESCRIPTION | BANK | CHECK | STAT | DUE DT / DISC DT | GROSS / BALANCE | PAYMENT / DISCOUNT | OUTSTANDING |
|---|---|---|---|---|---|---|---|---|---|
| I C71201512217737 | | RAMIREZ/000327532 | AP | | R | 12/20/2015 | 213.23 | 213.23CR | |
| | | G/L ACCOUNT | | | | | 213.23 | | |
| | | 401 2-200-018-000 CHILD ENFORCEMENT PAYABLE | | | | 213.23 | RAMIREZ/000327532 | | |
| I C73201512217737 | | 000154416 J. TARIN | AP | | R | 12/20/2015 | 130.15 | 130.15CR | |
| | | G/L ACCOUNT | | | | | 130.15 | | |
| | | 401 2-200-018-000 CHILD ENFORCEMENT PAYABLE | | | | 130.15 | 000154416 J. TARIN | | |
| | | REG. CHECK | | | | | 1,280.12 | 1,280.12CR | 0.00 |
| | | | | | | | 1,280.12 | 0.00 | |
| 01-4415 STATE OF NEW MEXICO TAXATIO | | | | | | | | | |
| I G33201512217737 | | Levy # 200173 T. SALAZAR | AP | | R | 12/20/2015 | 374.03 | 374.03CR | |
| | | G/L ACCOUNT | | | | | 374.03 | | |
| | | 401 2-200-011-000 MISCELLANEOUS PAYABLE | | | | 374.03 | Levy # 200173 T. SALAZAR | | |
| | | REG. CHECK | | | | | 374.03 | 374.03CR | 0.00 |
| | | | | | | | 374.03 | 0.00 | |
| 01-5312 STATE OF NM OF FINANCE | | | | | | | | | |
| I CC012583 | | SNCP SECOND QUARTER FY 15-1 | AP | | R | 12/23/2015 | 253,757.63 | 253,757.63CR | |
| | | G/L ACCOUNT | | | | | 253,757.63 | | |
| | | 427 6-639-271-000 Safety Net Care Pool Fund | | | | 253,757.63 | SAFETY NET CARE POOL | | |
| | | REG. CHECK | | | | | 253,757.63 | 253,757.63CR | 0.00 |
| | | | | | | | 253,757.63 | 0.00 | |
| 01-4733 TEXAS CHILD SUPPORT SDU | | | | | | | | | |
| I C12201512217737 | | AG# 0012436698/Cause#CC-22, | AP | | R | 12/20/2015 | 158.31 | 158.31CR | |
| | | G/L ACCOUNT | | | | | 158.31 | | |
| | | 401 2-200-018-000 CHILD ENFORCEMENT PAYABLE | | | | 158.31 | AG# 0012436698/Cause#CC-22,891 | | |
| I C42201512217737 | | AG#0009985060/CAUSE#2002AG6 | AP | | R | 12/20/2015 | 126.92 | 126.92CR | |
| | | G/L ACCOUNT | | | | | 126.92 | | |
| | | 401 2-200-018-000 CHILD ENFORCEMENT PAYABLE | | | | 126.92 | AG#0009985060/CAUSE#2002AG6679 | | |
| I C43201512217737 | | AG#0009305066/CAUSE#98CM105 | AP | | R | 12/20/2015 | 132.46 | 132.46CR | |
| | | G/L ACCOUNT | | | | | 132.46 | | |
| | | 401 2-200-018-000 CHILD ENFORCEMENT PAYABLE | | | | 132.46 | AG#0009305066/CAUSE#98CM1057 | | |
| I C66201512217737 | | 00106595922005CM5278/480000 | AP | | R | 12/20/2015 | 121.21 | 121.21CR | |
| | | G/L ACCOUNT | | | | | 121.21 | | |
| | | 401 2-200-018-000 CHILD ENFORCEMENT PAYABLE | | | | 121.21 | 00106595922005CM5278/4800000 | | |

VENDOR SEQUENCE

| VENDOR | ITEM NO# | DESCRIPTION | BANK | CHECK | STAT | DUE DT / DISC DT | GROSS / BALANCE | PAYMENT / DISCOUNT | OUTSTANDING |
|---|---|---|---|---|---|---|---|---|---|
| I C67201512217737 | | 237188961196AG6808/4800000 | AP | | R | 12/20/2015 | 121.21 | 121.21CR | |
| | | G/L ACCOUNT | | | | | 121.21 | | |
| | | 401 2-200-018-000 CHILD ENFORCEMENT PAYABLE | | | | 121.21 | 237188961196AG6808/4800000 | | |
| | | REG. CHECK | | | | | 660.11 | 660.11CR | 0.00 |
| | | | | | | | 660.11 | 0.00 | |
| 01-695 UNITED WAY OF CHAVES COUNTY | | | | | | | | | |
| I 08 201512217737 | | UNITED WAY PAYABLE | AP | | R | 12/20/2015 | 145.03 | 145.03CR | |
| | | G/L ACCOUNT | | | | | 145.03 | | |
| | | 401 2-200-010-000 UNITED WAY PAYABLE | | | | 136.37 | UNITED WAY PAYABLE | | |
| | | 402 2-200-010-000 UNITED WAY PAYABLE | | | | 8.66 | UNITED WAY PAYABLE | | |
| | | REG. CHECK | | | | | 145.03 | 145.03CR | 0.00 |
| | | | | | | | 145.03 | 0.00 | |
| 01-717 WAKEFIELD OIL CO. INC. | | | | | | | | | |
| I 116642 | | BULK FUELS/ROAD | AP | | R | 12/23/2015 | 948.25 | 948.25CR | |
| | | G/L ACCOUNT | | | | | 948.25 | | |
| | | 402 6-653-223-000 VEHICLE FUELS | | | | 948.25 | ACCT.#CHACO | | |
| I 116687 | | BULK FUELS/ROAD | AP | | R | 12/23/2015 | 11,002.05 | 11,002.05CR | |
| | | G/L ACCOUNT | | | | | 11,002.05 | | |
| | | 402 6-653-223-000 VEHICLE FUELS | | | | 11,002.05 | ACCT.#CHACO | | |
| | | REG. CHECK | | | | | 11,950.30 | 11,950.30CR | 0.00 |
| | | | | | | | 11,950.30 | 0.00 | |
| 01-4576 NM BUREAU OF TAX & REVENUE | | | | | | | | | |
| I 10 201512217737 | | W/C ADMINISTRATIVE FEE | AP | | D | 12/20/2015 | 1,139.50 | 1,139.50CR | |
| | | G/L ACCOUNT | | | | | 1,139.50 | | |
| | | 401 2-200-013-000 WORKER'S COMP ASSESSMENT FEE | | | | 404.00 | W/C ADMINISTRATIVE FEE | | |
| | | 401 6-611-312-000 WORKERS COMPENSATION | | | | 11.50 | W/C ADMINISTRATIVE FEE | | |
| | | 401 6-612-312-000 WORKERS COMPENSATION | | | | 2.30 | W/C ADMINISTRATIVE FEE | | |
| | | 401 6-613-312-000 WORKERS COMPENSATION | | | | 6.90 | W/C ADMINISTRATIVE FEE | | |
| | | 401 6-616-312-000 WORKERS COMPENSATION | | | | 2.30 | W/C ADMINISTRATIVE FEE | | |
| | | 401 6-621-312-000 WORKERS COMPENSATION | | | | 9.20 | W/C ADMINISTRATIVE FEE | | |
| | | 401 6-622-312-000 WORKERS COMPENSATION | | | | 6.90 | W/C ADMINISTRATIVE FEE | | |
| | | 401 6-624-312-000 WORKERS COMPENSATION | | | | 9.20 | W/C ADMINISTRATIVE FEE | | |
| | | 401 6-625-312-000 WORKERS COMPENSATION | | | | 4.60 | W/C ADMINISTRATIVE FEE | | |
| | | 401 6-631-312-000 WORKERS COMPENSATION | | | | 6.90 | W/C ADMINISTRATIVE FEE | | |

PACKET: 06857 Regular Payments
VENDOR SET: 01

VENDOR SEQUENCE

| VENDOR | ITEM NO# | DESCRIPTION | BANK | CHECK | STAT | DUE DT / DISC DT | GROSS / BALANCE | PAYMENT / DISCOUNT | OUTSTANDING |
|---|---|---|---|---|---|---|---|---|---|
| | | 401 6-632-312-000 | WORKERS COMPENSATION | | | | 4.60 | W/C ADMINISTRATIVE FEE | |
| | | 401 6-641-312-000 | WORKERS COMPENSATION | | | | 23.00 | W/C ADMINISTRATIVE FEE | |
| | | 401 6-642-312-000 | WORKERS COMPENSATION | | | | 144.90 | W/C ADMINISTRATIVE FEE | |
| | | 401 6-645-312-000 | WORKERS COMPENSATION | | | | 41.40 | W/C ADMINISTRATIVE FEE | |
| | | 401 6-691-312-000 | WORKERS COMPENSATION | | | | 23.00 | W/C ADMINISTRATIVE FEE | |
| | | 401 6-692-312-000 | WORKERS COMPENSATION | | | | 6.90 | W/C ADMINISTRATIVE FEE | |
| | | 401 7-721-312-000 | WORKERS COMPENSATION | | | | 11.50 | W/C ADMINISTRATIVE FEE | |
| | | 401 7-722-312-000 | WORKERS COMPENSATION | | | | 9.20 | W/C ADMINISTRATIVE FEE | |
| | | 401 7-723-312-000 | WORKERS COMPENSATION | | | | 2.30 | W/C ADMINISTRATIVE FEE | |
| | | 401 7-731-312-000 | WORKERS COMPENSATION | | | | 16.10 | W/C ADMINISTRATIVE FEE | |
| | | 401 7-732-312-000 | WORKERS COMPENSATION | | | | 11.50 | W/C ADMINISTRATIVE FEE | |
| | | 401 7-741-312-000 | WORKERS COMPENSATION | | | | 11.50 | W/C ADMINISTRATIVE FEE | |
| | | 401 7-751-312-000 | WORKERS COMPENSATION | | | | 23.00 | W/C ADMINISTRATIVE FEE | |
| | | 401 7-752-312-000 | WORKERS COMPENSATION | | | | 62.10 | W/C ADMINISTRATIVE FEE | |
| | | 401 7-758-312-000 | WORKERS COMPENSATION | | | | 13.80 | W/C ADMINISTRATIVE FEE | |
| | | 402 2-200-013-000 | WORKER'S COMP ASSESSMENT FEE | | | | 84.00 | W/C ADMINISTRATIVE FEE | |
| | | 402 6-651-312-000 | WORKERS COMPENSATION | | | | 6.90 | W/C ADMINISTRATIVE FEE | |
| | | 402 6-652-312-000 | WORKERS COMPENSATION | | | | 16.10 | W/C ADMINISTRATIVE FEE | |
| | | 402 6-653-312-000 | WORKERS COMPENSATION | | | | 69.00 | W/C ADMINISTRATIVE FEE | |
| | | 402 6-654-312-000 | WORKERS COMPENSATION | | | | 4.60 | W/C ADMINISTRATIVE FEE | |
| | | 427 2-200-013-000 | WORKER'S COMP ASSESSMENT FEE | | | | 4.00 | W/C ADMINISTRATIVE FEE | |
| | | 427 6-638-312-000 | WORKERS COMPENSATION | | | | 4.60 | W/C ADMINISTRATIVE FEE | |
| | | 432 2-200-013-000 | WORKER'S COMP. ASSESSMENT FEE | | | | 8.00 | W/C ADMINISTRATIVE FEE | |
| | | 432 7-761-312-000 | WORKERS COMPENSATION | | | | 4.60 | W/C ADMINISTRATIVE FEE | |
| | | 432 7-765-312-000 | WORKERS COMPENSATION | | | | 4.60 | W/C ADMINISTRATIVE FEE | |
| | | 435 2-200-013-000 | WORKER'S COMP ASSESSMENT FEE | | | | 4.00 | W/C ADMINISTRATIVE FEE | |
| | | 435 6-643-312-000 | WORKERS COMPENSATION | | | | 4.60 | W/C ADMINISTRATIVE FEE | |
| | | 437 2-200-013-000 | WORKER'S COMP ASSESSMENT FEE | | | | 4.00 | W/C ADMINISTRATIVE FEE | |
| | | 437 6-659-312-000 | WORKERS COMPENSATION | | | | 4.60 | W/C ADMINISTRATIVE FEE | |
| | | 452 2-200-013-000 | WORKER'S COMP ASSESSMENT FEE | | | | 22.00 | W/C ADMINISTRATIVE FEE | |
| | | 452 8-832-312-000 | WORKERS COMPENSATION | | | | 25.30 | W/C ADMINISTRATIVE FEE | |
| I 10 | 201512217740 | W/C ADMINISTRATIVE FEE | AP | | D | 12/20/2015 | 4.30 | 4.30CR | |
| | | G/L ACCOUNT | | | | | 4.30 | | |
| | | 401 2-200-013-000 | WORKER'S COMP ASSESSMENT FEE | | | | 2.00 | W/C ADMINISTRATIVE FEE | |
| | | 401 6-625-312-000 | WORKERS COMPENSATION | | | | 2.30 | W/C ADMINISTRATIVE FEE | |
| | | | DRAFTS | | | | 1 | 1,143.80 | 1,143.80CR 0.00 |
| | | | | | | | | 1,143.80 | 0.00 |

01-416 XCEL ENGERY

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| I | CC012473 | US 285 & NM 2 | AP | | R | 12/23/2015 | 76.20 | 76.20CR | |
| | | G/L ACCOUNT | | | | | 76.20 | | |
| | | 402 6-653-243-000 | HIGHWAY LIGHTS 2002 | | | | 76.20 | ACCT.#54-1797003-1 | |
| I | CC012474 | CCDC | AP | | R | 12/23/2015 | 7,007.77 | 7,007.77CR | |
| | | G/L ACCOUNT | | | | | 7,007.77 | | |
| | | 650 6-684-341-000 | UTILITIES | | | | 7,007.77 | ACCT.#54-3949471-2 | |

PACKET: 06857 Regular Payments
VENDOR SET: 01

VENDOR SEQUENCE

| VENDOR | ITEM NO# | DESCRIPTION | BANK | CHECK | STAT | DUE DT / DISC DT | GROSS / BALANCE | PAYMENT / DISCOUNT | OUTSTANDING |
|---|---|---|---|---|---|---|---|---|---|
| I CC012475 | | BY PASS @ SUNSET | AP | | R | 12/23/2015 | 28.28 | 28.28CR | |
| | | G/L ACCOUNT | | | | | 28.28 | | |
| | | 402 6-653-243-000 | HIGHWAY LIGHTS 2002 | | | 28.28 | ACCT.#54-3943737-1 | | |
| I CC012476 | | SE MAIN US 285 & BYPASS N O | AP | | R | 12/23/2015 | 96.90 | 96.90CR | |
| | | G/L ACCOUNT | | | | | 96.90 | | |
| | | 402 6-653-243-000 | HIGHWAY LIGHTS 2002 | | | 96.90 | ACCT.#54-3943798-4 | | |
| I CC012477 | | MAINT. DEPT/MEDICAL COMP. C | AP | | R | 12/23/2015 | 1,022.90 | 1,022.90CR | |
| | | G/L ACCOUNT | | | | | 1,022.90 | | |
| | | 401 6-691-341-000 | UTILITIES | | | 597.78 | ACCT.#54-1632663-1 | | |
| | | 401 6-699-341-000 | UTILITIES | | | 154.71 | ACCT.#54-1632663-1 | | |
| | | 401 6-699-341-000 | UTILITIES | | | 138.09 | ACCT.#54-1632663-1 | | |
| | | 401 6-691-341-000 | UTILITIES | | | 42.53 | ACCT.#54-1632663-1 | | |
| | | 401 6-691-341-000 | UTILITIES | | | 61.36 | ACCT.#54-1632663-1 | | |
| | | 401 6-699-341-000 | UTILITIES | | | 28.43 | ACCT.#54-1632663-1 | | |
| I CC012478 | | BYPASS @ BRASHER | AP | | R | 12/23/2015 | 35.72 | 35.72CR | |
| | | G/L ACCOUNT | | | | | 35.72 | | |
| | | 402 6-653-243-000 | HIGHWAY LIGHTS 2002 | | | 35.72 | ACCT.#54-3943772-4 | | |
| I CC012479 | | US 285 & HOBSON RD | AP | | R | 12/23/2015 | 40.58 | 40.58CR | |
| | | G/L ACCOUNT | | | | | 40.58 | | |
| | | 402 6-653-243-000 | HIGHWAY LIGHTS 2002 | | | 40.58 | ACCT.#54-3943719-9 | | |
| I CC012480 | | ROAD DEPT | AP | | R | 12/23/2015 | 863.41 | 863.41CR | |
| | | G/L ACCOUNT | | | | | 863.41 | | |
| | | 402 6-653-243-000 | HIGHWAY LIGHTS 2002 | | | 863.41 | ACCT.#54-3949465-4 | | |
| I CC012481 | | EGP F.D. #2 | AP | | R | 12/23/2015 | 88.68 | 88.68CR | |
| | | G/L ACCOUNT | | | | | 88.68 | | |
| | | 408 8-812-341-000 | UTILITIES | | | 88.68 | ACCT.#54-7497040-6 | | |
| I CC012482 | | HEALTH DEPT/DEXTER | AP | | R | 12/23/2015 | 70.46 | 70.46CR | |
| | | G/L ACCOUNT | | | | | 70.46 | | |
| | | 401 6-693-341-000 | UTILITIES | | | 70.46 | ACCT.#54-1485939-1 | | |
| I CC012483 | | BYPASS @ MCGAFFEY | AP | | R | 12/23/2015 | 38.32 | 38.32CR | |
| | | G/L ACCOUNT | | | | | 38.32 | | |
| | | 402 6-653-243-000 | HIGHWAY LIGHTS 2002 | | | 38.32 | ACCT.#54-3943703-1 | | |
| I CC012484 | | BYPASS @ POE | AP | | R | 12/23/2015 | 28.10 | 28.10CR | |
| | | G/L ACCOUNT | | | | | 28.10 | | |
| | | 402 6-653-243-000 | HIGHWAY LIGHTS 2002 | | | 28.10 | ACCT.#54-3943686-9 | | |
| I CC012485 | | SIERRA F.D. #2 | AP | | R | 12/23/2015 | 59.86 | 59.86CR | |
| | | G/L ACCOUNT | | | | | 59.86 | | |
| | | 412 8-815-341-000 | UTILITIES | | | 59.86 | ACCT.#54-3949421-2 | | |

•PACKET: 06857 Regular Payments
VENDOR SET: 01

VENDOR SEQUENCE

| VENDOR | ITEM NO# | DESCRIPTION | BANK | CHECK | STAT | DUE DT / DISC DT | GROSS / BALANCE | PAYMENT / DISCOUNT | OUTSTANDING |
|---|---|---|---|---|---|---|---|---|---|
| | | REG. CHECK | | | | | 9,457.18 | 9,457.18CR | 0.00 |
| | | | | | | | 9,457.18 | 0.00 | |
| 01-5497 | ZUNI CHILD SUPPORT | | | | | | | | |
| I C72201512217737 | | ZCSP-2015-0402 W. B. ZUNIE | AP | | R | 12/20/2015 | 100.00 | 100.00CR | |
| | | G/L ACCOUNT | | | | | 100.00 | | |
| | | 401 2-200-018-000 CHILD ENFORCEMENT PAYABLE | | | | 100.00 | ZCSP-2015-0402 W. B. ZUNIE | | |
| | | REG. CHECK | | | | | 100.00 | 100.00CR | 0.00 |
| | | | | | | | 100.00 | 0.00 | |

PACKET: 06857 Regular Payments
VENDOR SET: 01

## REPORT TOTALS

### FUND DISTRIBUTION

| FUND NO# | FUND NAME | AMOUNT |
|---|---|---|
| 401 | General Fund | 181,362.25CR |
| 402 | Road Fund | 71,358.59CR |
| 408 | East Grand Plains VolFire | 220.19CR |
| 409 | Penasco Volunteer Fire Fd | 615.96CR |
| 412 | Sierra Volunteer Fire Fnd | 59.86CR |
| 427 | Indigent Hospital Claims | 255,408.74CR |
| 432 | DWI Grant Funds | 3,534.52CR |
| 435 | Correction Grants | 1,428.76CR |
| 437 | Environmental Tax | 1,853.41CR |
| 452 | Flood Control | 10,404.57CR |
| 650 | Detention Construction PJ | 8,303.13CR |
| 901 | Fiduciary Accounts | 96.46CR |
| | ** TOTALS ** | 534,646.44CR |

### ---- TYPE OF CHECK TOTALS ----

| | NUMBER | GROSS BALANCE | PAYMENT DISCOUNT | OUTSTANDING |
|---|---|---|---|---|
| HAND CHECKS | | 0.00 | 0.00 | 0.00 |
| | | 0.00 | 0.00 | |
| DRAFTS | 4 | 119,139.88 | 119,139.88CR | 0.00 |
| | | 119,139.88 | 0.00 | |
| REG-CHECKS | | 415,506.56 | 415,506.56CR | 0.00 |
| | | 415,506.56 | 0.00 | |
| EFT | | 0.00 | 0.00 | 0.00 |
| | | 0.00 | 0.00 | |
| NON-CHECKS | | 0.00 | 0.00 | 0.00 |
| | | 0.00 | 0.00 | |
| ALL CHECKS | 4 | 534,646.44 | 534,646.44CR | 0.00 |
| | | 534,646.44 | 0.00 | |

TOTAL CHECKS TO PRINT: 36

ERRORS: 0 WARNINGS: 0

Approved for Payment

**CHAVES COUNTY**
**ROAD DEPARTMENT**
1505 East Brasher Road
Roswell, New Mexico 88203
Phone: 575-624-6610
Fax: 575-627-4360

Joseph R. Skeen Building

**COMMISSIONERS**
James W. Duffey · District 1
Kim Chesser · District 2
Kyle D. "Smiley" Wooton · District 3
Robert Corn · District 4
William E. Cavin · District 5

**Road Operations Director**
Terry Allensworth

**County Manager**
Stanton L. Riggs

# November 2015

| | | |
|---|---|---|
| MAN-HOURS | 8,272.00 | |
| MANPOWER COST | | $250,561.47 |
| MAN-HOURS ON ROAD PROJECTS | 6,088.50 | |
| MANPOWER COST ON ROAD PROJECTS | | $185,030.83 |
| MILES BLADED | 204.80 | |
| MILES MOWED | 127.75 | |
| VEHICLE MILEAGE and OFF-ROAD HOURS | 5,033.80 | |
| VEHICLE AND EQUIPMENT COSTS | | $190,356.97 |
| GALLONS WATER HAULED | 201,475.00 | |
| COST OF CITY WATER | | $176.97 |
| COST OF PRIVATE BILLED WATER | | $0.00 |
| MATERIAL HAULED (cubic yards) | | |
| CHIPS USED ON ROAD PROJECTS | 0.00 | $0.00 |
| BASE COURSE USED ON ROAD PROJECTS | 2,880.00 | $9,619.20 |
| COLD MIX USED ON ROAD PROJECTS | 84.60 | $5,922.00 |
| FINES USED ON ROAD PROJECTS | 0.00 | $0.00 |
| MILLINGS | 0.00 | $0.00 |
| PIT RUN USED ON ROAD PROJECTS | 1,150.00 | $6,900.00 |
| RIP RAP USED ON ROAD PROJECTS | 10.00 | $200.00 |
| ROAD OIL | | $0.00 |
| PRIMER | | $0.00 |
| CHFRS-2P | | $0.00 |
| DEMURRAGE | | $0.00 |
| GAS (gallons) | 2456.10 | $4,228.18 |
| DIESEL (gallons) | 10271.10 | $16,211.88 |
| GAS - Dunken (gallons) | 125.00 | $209.52 |
| DIESEL - Dunken (gallons) | 1020.90 | $1,604.94 |
| COST OF ROADWORK | | $420,460.49 |
| COST OF SOLID WASTE | | $11,522.87 |

**TERRY ALLENSWORTH**
**ROAD OPERATIONS DIRECTOR**

**Chaves County Clerk's Office**

Dave Kunko
#1 St. Mary's Place
PO Box 580
Roswell, NM 88203
Phone: 575-624-6614
Fax: 575-624-6523
Email: coclerk@co.chaves.nm.us

CHAVES COUNTY
Joseph R. Skeen Building

**COMMISSIONERS**

James W. Duffey • District 1
Kim Chesser • District 2
Kyle D. "Smiley" Wooton • District 3
Robert B. Corn • District 4
William E. Cavin • District 5

# Chaves County Clerk

## *Summary Report -*

## *12/01/2015-12/31/2015*

| | | |
|---|---|---|
| **CLERK FEES (EQUIPMENT)** | **$** | **5,145.00** |
| **GEN CLERK'S FEES** | **$** | **13,883.58** |
| **LIQUOR LICENSE** | **$** | **-** |
| **CHILDREN'S TRUST FUND** | **$** | **615.00** |
| **PROBATE** | **$** | **459.40** |
| **PHOTOCOPIES** | **$** | **782.25** |
| **GOVT GROSS RECEIPTS TAX** | **$** | **87.31** |
| **TOTAL AMOUNT:** | **$** | **20,972.54** |
| **TOTAL DOCUMENTS FILED** | | **636** |
| **NEW MARRIAGE LICENSES** | | **41** |
| **NEW PROBATES** | | **12** |
| **NEW SURVEYS** | | **16** |
| **NEW PLATS** | | **4** |
| **NEW VOTERS** | | **77** |
| **VOTER CHANGES** | | **159** |

# P-Card December 2015

| Account | Department Description | Amount |
|---|---|---|
| **401-2-200 Total** | Benefit Source (Payroll) | $10,415.32 |
| **401-6-611 Total** | Commissioners | $2,350.00 |
| **401-6-612 Total** | County Manager | $1,340.34 |
| **401-6-613 Total** | Human Resources | $1,867.85 |
| **401-6-614 Total** | Safety | $384.80 |
| **401-6-616 Total** | Fire & Emerg Services | $1,149.16 |
| **401-6-621 Total** | Public Works | $4,186.94 |
| **401-6-622 Total** | Information Technology | $6,091.59 |
| **401-6-624 Total** | Planning & Zoning | $5,015.84 |
| **401-6-625 Total** | Purchasing | $918.59 |
| **401-6-631 Total** | Finance Dept | $2,462.70 |
| **401-6-632 Total** | Community Development | $54.20 |
| **401-6-641 Total** | Detention Administration | $2,097.61 |
| **401-6-642 Total** | Adult Detention | $251.00 |
| **401-6-645 Total** | Juvenile CCJD | $539.37 |
| **401-6-691 Total** | Facility Maintenance | $5,288.05 |
| **401-6-692 Total** | Courthouse Maintenance | $8,504.21 |
| **401-6-693 Total** | Facility Maint. Health Dept. | $150.68 |
| **401-6-694 Total** | Facility Maint. CC Road Dept. | $1,450.42 |
| **401-6-696 Total** | Operating Exp - CCDC | $3,048.98 |
| **401-6-699 Total** | St. Mary Complex | $163.83 |
| **401-7-721 Total** | Clerk Admin | $5,604.57 |
| **401-7-722 Total** | Clerk Bureau Elec. | $3,073.77 |
| **401-7-731 Total** | Assessor Admin | $3,036.94 |
| **401-7-732 Total** | Assessor Appriasal | $2,435.38 |
| **401-7-741 Total** | Treasurer Dept. | $380.11 |
| **401-7-751 Total** | Sheriff Admin | $12,297.10 |
| **401-7-752 Total** | Sheriff Patrol & Investigation | $3,045.35 |
| **402-6-651 Total** | Road Admin | $1,958.24 |
| **402-6-652 Total** | Road Shop | $2,005.05 |
| **402-6-653 Total** | Road Construction & Maintenance | $22,680.35 |
| **408-8-812 Total** | East Grand Plains FD | $2,292.72 |
| **408-8-828 Total** | East Grand Plains FD | $270.00 |
| **409-8-813 Total** | Penasco FD | $33.88 |
| **410-8-816 Total** | Midway FD | $3,607.66 |
| **410-8-828 Total** | Midway FD | $270.00 |
| **411-8-814 Total** | Berrendo FD | $3,853.88 |

| | | |
|---|---|---|
| **411-8-828 Total** | Berrendo FD | $180.00 |
| **412-8-815 Total** | Sierra FD | $19,470.31 |
| **412-8-873 Total** | Sierra FD | $11,631.38 |
| **413-8-818 Total** | Rio Felix FD | $55.27 |
| **414-8-819 Total** | Fire District #8 | $1,674.87 |
| **427-6-638 Total** | Indigent | $3.36 |
| **430-7-753 Total** | Law Enforcement | $1,374.04 |
| **432-7-761 Total** | DWI | $676.62 |
| **435-6-643 Total** | Court Services | $140.94 |
| **452-8-832 Total** | Flood Dept. | $7,951.97 |
| **628-7-733 Total** | Assessor | $2,250.00 |
| **631-8-885 Total** | Other Grant's & Contracts | $163.69 |
| **631-8-886 Total** | Other Grant's & Contracts | $448.50 |
| **631-8-889 Total** | Other Grant's & Contracts | $88,716.08 |
| **650-6-684 Total** | CCDC Construction Fund | $16,299.16 |
| **650-6-685 Total** | CCDC Construction Fund | $9,161.52 |
| **670-6-671 Total** | Internal Services | $3,904.77 |
| **GRAND TOTAL** | | $288,678.96 |