

City of Omak

VENDOR PAYMENT OMAK PUBLIC LIBRARY

VENDOR:

US Linen & Uniform

MAILING ADDR:

1106 Harding St

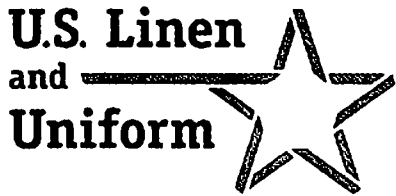
Richland, WA 99352

DATE OF INVOICE	DESCRIPTION OF ITEM OR SERVICE	AMOUNT
9-26-22	Mat cleaning	16.26
9-12-22	" "	16.26
		32.52

I, THE UNDERSIGNED, DO HEREBY CERTIFY UNDER PENALTY OF PERJURY, THAT THE MATERIALS HAVE BEEN FURNISHED, THE SERVICES RENDERED OR THE LABOR PERFORMED AS DESCRIBED HEREIN, AND THAT THE CLAIM IS A JUST, DUE AND UNPAID OBLIGATION AGAINST THE CITY OF OMAK, AND THAT I AM AUTHORIZED TO AUTHENTICATE AND CERTIFY TO SAID CLAIM.

APPROVED FOR PAYMENT:
OMAK LIBRARY BOARD:

DATE: _____



Delivery Invoice

U.S. LINEN & UNIFORM
 1106 HARDING ST
 RICHLAND, WA 99352 (888)875-4636

OMAK PUBLIC LIBRARY
 30 S ASH STREET
 OMAK, WA 98841

Date	Invoice	Day	Garment Mark	Freq.	Seq.	Term	Account	Route
09/26/2022	3009794	Mon	882610-02	5	1110	CHG	882610-00002	314

Line	Item	Empl	Name / Description	Sizes	Qty.	Inv.	Min.	Adj. Qty.	Adj. Amt.	OFFICE		ROUTE		Total
										Ext. Price	Adj. Qty.	Adj. Amt.		
1	6209		3X5 SCRAPER MAT		0	2	2		\$0.00		\$1.26			
2	6265		3X5 SLATE MAT		5	10			\$0.00		\$6.30			
3	6266		4X6 SLATE MAT		2	4			\$0.00		\$5.00			
STOP MINIMUM										\$0.00	\$2.44			

Total Due	Cur. Bus.	Cur. Bal.	30	60	90	120
\$ 65.04	\$ 16.26	\$ 48.78	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00

Office Adj.:	\$0.00	Subtotal:	\$15.00	Route Adj.:	<input type="text"/>
Tax Adj.:	\$0.00	Sales Tax:	\$1.26	Tax Adj.:	<input type="text"/>
Net Adj.:	\$0.00	Prebill:	\$16.26	Net Adj.:	<input type="text"/>

Comment: _____

Total Adj.:
 Tax Adj.:

Net Charge:

Received By: _____



Invoice

U.S. LINEN & UNIFORM
 1106 HARDING ST
 RICHLAND, WA 99352 (888)875-4636

OMAK PUBLIC LIBRARY
 30 S ASH STREET
 OMAK, WA 98841

Date	Invoice	Day	Garment Mark	Freq.	Seq	Term	Account	Route
09/12/2022	3002330	Mon	882610-02	5	1110	CHG	882610-00002	314

Line	Item	Empl	Name / Description	Sizes	Qty.	Inv.	Min.	Adj. Qty.	Adj. Amt.	OFFICE		ROUTE		Total
										Ext. Price	Adj. Qty.	Adj. Amt.		
1	6209		3X5 SCRAPER MAT		0	2	2	0	\$0.00	\$1.26	0	\$0.00	\$1.26	
2	6265		3X5 SLATE MAT		5	10		0	\$0.00	\$6.30	0	\$0.00	\$6.30	
3	6266		4X6 SLATE MAT		2	4		0	\$0.00	\$5.00	0	\$0.00	\$5.00	
STOP MINIMUM									\$0.00	\$2.44		\$0.00	\$2.44	

<u>Total Due</u>	<u>Cur. Bus.</u>	<u>Cur. Bal.</u>	<u>30</u>	<u>60</u>	<u>90</u>	<u>120</u>	Office Adj.:	\$0.00	Subtotal:	\$15.00	Rte. Adj.:	\$0.00
\$32.52	\$0.00	\$32.52	\$0.00	\$0.00	\$0.00	\$0.00	Tax Adj.:	\$0.00	Sales Tax:	\$1.26	Tax Adj.:	\$0.00
Comment: _____							Net Adj.:	\$0.00	Prebill:	\$16.26	Net Adj.:	\$0.00

NOA

Total Adj.: \$0.00
 Tax Adj.: \$0.00

Net Charge: \$16.26

Received By: _____ NOA 9/12/2022 10:18:38AM

City of Omak

VENDOR PAYMENT OMAK PUBLIC LIBRARY

VENDOR:

City of Omak

MAILING ADDR:

Po Box 72

Omak WA 98841

DATE OF INVOICE	DESCRIPTION OF ITEM OR SERVICE	AMOUNT
<i>9-30-21</i>	<i>Water Severs</i>	<i>155.16</i>
	<i>Total</i>	<i>155.16</i>

I, THE UNDERSIGNED, DO HEREBY CERTIFY UNDER PENALTY OF PERJURY, THAT THE MATERIALS HAVE BEEN FURNISHED, THE SERVICES RENDERED OR THE LABOR PERFORMED AS DESCRIBED HEREIN, AND THAT THE CLAIM IS A JUST, DUE AND UNPAID OBLIGATION AGAINST THE CITY OF OMAK, AND THAT I AM AUTHORIZED TO AUTHENTICATE AND CERTIFY TO SAID CLAIM.

APPROVED FOR PAYMENT:
OMAK LIBRARY BOARD:

DATE:

OMAK PUBLIC LIBRARY
 PO BOX 1630
 OMAK, WA 98841-1630

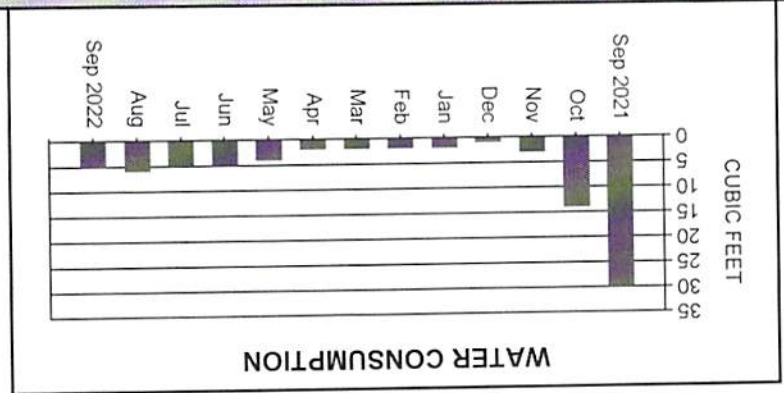
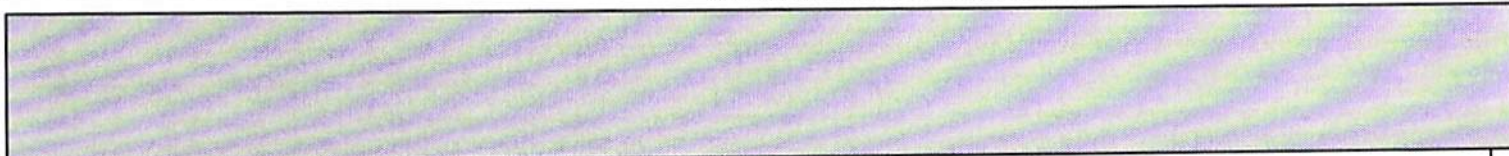


PLEASE RETURN THIS PORTION WITH YOUR PAYMENT

Make Check Payable To:

ACCOUNT NUMBER	2063.0
AMOUNT ENCLOSED	\$
SERVICE LOCATION	Ash, S 30
DUE DATE	10/15/2022
TOTAL DUE	\$155.16

PLEASE DETACH BOTTOM PORTION AND RETURN



SERVICE METER	DATE	PREVIOUS READING	DATE	CURRENT READING	CONS	TYPE	DESCRIPTION	AMOUNT
Water	48613636	8/15/2022	1575	9/15/2022	1580	5	CITY TAX WATER	\$4.02
							SEWER	\$83.68
							STORM DRAIN	\$17.14
							WATER	\$40.24
							CITY TAX SEWER	\$8.37
							CITY TAX STORM DRAIN	\$1.71
							TOTAL CURRENT CHARGES	\$155.16
							GRAND TOTAL	\$155.16

ACCOUNT NUMBER	2063.0
CUSTOMER NAME	Omak Public Library
SERVICE LOCATION	Ash, S 30
BILLING DATE	9/30/2022
TENANT NAME	
SERVICE PERIOD	8/16/2022 to 9/15/2022
DUE DATE	10/15/2022
TOTAL DUE	\$155.16



City of Omak

**VENDOR PAYMENT
OMAK PUBLIC LIBRARY**

VENDOR: PUD

MAILING ADDR: Po Box 912

Okanogan, WA 98840

DATE OF INVOICE	DESCRIPTION OF ITEM OR SERVICE	AMOUNT
<u>10-6-22</u>	<u>Electricity</u>	<u>425.23</u>
		<u>705.1</u>
		<u>425.23</u>

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APPROVED FOR PAYMENT:
OMAK LIBRARY BOARD:

DATE: _____

Log Out

OMAK PUBLIC LIBRARY
PO BOX 1630
OMAK, WA 98841

OMAK
PUBLIC
LIBRARY

Select All Accounts With a Payment Amount Entered

Total amount may differ from your statement due to recent payments and/or adjustments.

ELECTRIC SERVICE
Account 3585
30 ASH ST S, OMAK, WA | LIBRARY

Date Due	Total Due	Make a Payment
10/24/2022	\$425.23	\$ 425.23
18 Days Left		

Total Due
 Other Amount

\$425.23

Pay Now »

Version: 13.9.0

City of Omak

VENDOR PAYMENT OMAK PUBLIC LIBRARY

VENDOR:

MAILING ADDR:

Weinstein Beverage Co
410 Peters St. E
Wenatchee, WA 98801

DATE OF INVOICE	DESCRIPTION OF ITEM OR SERVICE	AMOUNT
9-22-22	Toilet paper & paper towels	104.91
	Total	104.91

I, THE UNDERSIGNED, DO HEREBY CERTIFY UNDER PENALTY OF PERJURY, THAT THE MATERIALS HAVE BEEN FURNISHED, THE SERVICES RENDERED OR THE LABOR PERFORMED AS DESCRIBED HEREIN, AND THAT THE CLAIM IS A JUST, DUE AND UNPAID OBLIGATION AGAINST THE CITY OF OMAK, AND THAT I AM AUTHORIZED TO AUTHENTICATE AND CERTIFY TO SAID CLAIM.

APPROVED FOR PAYMENT:
OMAK LIBRARY BOARD:

DATE:

WEINSTEIN BEVERAGE CO.

410 PETERS ST E
WENATCHEE, WA
(509) 662-9631

Printed: Thu Sep 22, 2022 9:51 AM
Delivered: Thu Sep 22, 2022 9:50 AM

Account: CD182
CITY OF OMAK
CITY OF OMAK LIBRARY
P.O. BOX 72
OMAK, WA 98841-9484
(509) 826-1170

License : (none)
Invoice#: 384714 PO#:
Load : 4330
Terms : 20 DAYS
Driver : 330 - RT 330
Salesrep: 711 - DUSTIH PFITZER

ITEM#	DESCRIPTION	U.P.C.	QTY	PRICE	DISC	DEP	AMOUNT
20101	JRT 2PLY TP 1000/12CT	067220612406	1	49.89	0.00	0.00	49.89
20112	HARD ROLL TWL WHT 800' 6	000000000000	1	46.89	0.00	0.00	46.89
MISCELLANEOUS TOTALS			2				96.78

Total Sales	96.78
Total Discount	-0.00
Total Extended	96.78
Total Deposit	0.00
Fountain Soda Tax	0.00
Total Credits	0.00
MISC. SALES TAX	8.13
Invoice Total	104.91

20 DAYS INVOICE

PAYMENT

INVOICE#	PAYMENT TYPE	AMOUNT
384714	Charge	104.91

PAYMENT TOTALS

PAYMENT TYPE	AMOUNT
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Customer Signature:

Driver Signature:

Inv# 384714 \$104.91



330 - RT 330

Final