City of Guadalupe AGENDA

Regular Meeting of the Guadalupe City Council Tuesday, November 12, 2019

At 6:00 pm City Hall, 918 Obispo Street, Council Chambers

Please be advised that, pursuant to State Law, any member of the public may address the City Council concerning any item on the Agenda, before or during Council consideration of that item. Please be aware that items on the Consent Calendar are considered to be routine and are normally enacted by one vote of the City Council. If you wish to speak on a Consent Calendar item, please do so during the Community Participation Forum.

The Agenda and related Staff reports are available on the City's website: www.ci.guadalupe.ca.us Friday before Council meeting.

Any documents produced by the City and distributed to a majority of the City Council regarding any item on this agenda will be made available the Friday before Council meetings at the Administration Office at City Hall 918 Obispo Street, Monday through Friday between 8:00 am and 4:30 pm, and also posted 72 hours prior to the meeting. The City may charge customary photocopying charges for copies of such documents. Any documents distributed to a majority of the City Council regarding any item on this agenda less than 72 hours before the meeting will be made available for inspection at the meeting and will be posted on the City's website and made available for inspection the day after the meeting at the Administrator Office at City Hall 918 Obispo Street, Monday through Friday between 8:00 am and 4:30 pm.

In compliance with the Americans with Disabilities Act, if you need special assistance to participate in this meeting, including review of the Agenda and related documents, please contact the Administration Office at (805) 356.3891 at least 72 hours prior to the meeting. This will allow time for the City to make reasonable arrangements to ensure accessibility to the meeting.

ROLL CALL:

Council Member Tony Ramirez
Council Member Eugene Costa Jr.
Council Member Liliana Cardenas
Mayor Pro Tempore Gina Rubalcaba
Mayor Ariston Julian

MOMENT OF SILENCE

PLEDGE OF ALLEGIANCE

SWEARING IN OF TODD BODEM, CITY ADMINISTRATOR

AGENDA REVIEW

At this time the City Council will review the order of business to be conducted and receive requests for, or make announcements regarding, any changes(s) in the order of the day. The Council should by motion adopt the agenda as presented or as revised.

CEREMONIAL CALENDAR

• Expressing Appreciation to Robert Perrault for his services as Interim City Administrator of the City of Guadalupe.

COMMUNITY PARTICIPATION FORUM

Each person will be limited to a discussion of three (3) minutes or as directed by the Mayor. This time is reserved to accept comments from the public on Consent items, Closed Session items, or matters not otherwise scheduled on this agenda. Pursuant to provisions of the Brown Act, no action may be taken on these matters unless they are listed on the agenda, or unless certain emergency or special circumstances exist. City Council may direct staff to investigate and/or schedule certain matters for consideration at a future City Council meeting.

CONSENT CALENDAR

The following items are presented for City Council approval without discussion as a single agenda items in order to expedite the meeting. Should a Council Member wish to discuss or disapprove an item, it must be dropped from the blanket motion of approval and considered as a separate item.

Recommendation of City Staff to waive the reading in full of all Ordinances and Resolutions. Ordinances on the Consent Calendar will be adopted by the same vote cast as the first meeting, unless City Council indicates otherwise.

- 1. Payment of warrants for the period ending November 7, 2019 to be approved for payment by the City Council.
- 2. Minutes of the City Council Regular Meeting of October 8, 2019 to be ordered filed.
- 3. Adoption of the Guadalupe/SMOOTH Drug & Alcohol Testing Program Manual and Certification.
- 4. 2019-20 First Quarterly Report July 1, 2019 through September 30, 2019.
- 5. Adoption of the Guadalupe Police Officers Association Memorandum of Understanding for the time period January 1, 2018 through June 30, 2020- Resolution No. 2019-70.
- 6. Adoption of Resolution No. 2019-71 authorizing the Police Department to auction three (3) police vehicles as surplus property.

7. MONTHLY REPORTS FROM DEPARTMENT HEADS

- a. Planning Department Report for October 2019
- b. Building Department Report for October 2019
- c. Public Works / City Engineer's Report for October 2019
- d. Recreation Department Update

<u>CITY ADMINISTRATOR REPORT</u>: (Information Only)

PUBLIC HEARING

8. Public hearing to consider amendments to the Accessory Dwelling Unit (ADU) Ordinance (Chapter 18.53) – Request for Continuance to December 10, 2019.

Written Report: Larry Appel, Contact Planning Director

Recommendation: That the City Council continue Ordinance No. 2019-480 to December

10, 2019 for first reading.

REGULAR BUSINESS

9. Consideration of a Resolution authorizing staff to apply for a Planning Grants Program (SB 2) grant to be submitted to the Department of Housing and Community Development (HCD).

Written Report: Larry Appel, Contact Planning Director

<u>Recommendation</u>: That the City Council received a presentation from staff and adopt Resolution No. 2019-69 allowing the City Administrator and Contract Planning Director to submit the grant proposal.

10. Authorizing the City of Guadalupe to enter into a contract with BRYCER, LLC for the "Brycer Compliance Engine System."

Written Report: Michael Cash, Director of Public Safety

<u>Recommendation</u>: That the City Council adopt Resolution No. 2019-66 approving the City of Guadalupe to enter into an agreement with BRYCER, LLC for the usage of the "Brycer Compliance Engine System" to help manage, verify, track and maintain current data for all levels of protection systems.

11. Basic Emergency Preparedness.

Written Report: Shannon Sweeney, Public Works Director & Michael Cash, Director of

Public Safety

<u>Recommendation</u>: That the City Council adopt Resolution No. 2019-72 approving the purchase of two generators and ancillary equipment and services to improve the City's ability to meet basic public health and safety needs during emergency conditions.

12. Proclamation Guidelines and Process.

Written Report:

Robert Perrault, Former Interim City Administrator

Recommendation:

That the City Council by motion approve the recommended

Proclamation Guidelines and Process document.

13. Appointments of a Policy Board Member and Alternate and an Operations Board Member and Alternate to the Monterey Bay Community Power Authority (MBCP).

Written Report:

Robert Perrault, Former Interim City Administrator

Recommendation:

That the City Council adopt Resolution No. 2019-73 appointing city

officials to serve as board members and alternates for the Monterey Bay Community

Authority (MBCP) Policy and Operations Boards.

FUTURE AGENDA ITEMS

ANNOUNCEMENTS – COUNCIL ACTIVITY/COMMITTEE REPORTS

ADJOURNMENT

I hereby certify under penalty of perjury under the laws of the State of California that the foregoing agenda was posted on the City Hall display case, Water Department bulletin board and website not less than 72 hours prior to the meeting. Dated this 8th day of November 2019.

Todd Bodem, City Administrator

PROPOSED FUTURE CITY COUNCIL AGENDA ITEMS

Council Meeting: Date and Subje	ect		Department	Agenda Category
Tuesday, November 26, 2019 at 6:00 pm	/ Regular Me	eting		
Technology Needs - Server Purchase		Admi	nistration	Regular Business
Mobility Study – Presentation by Josh Mey	/ers	Public	Works Department	Presentation
Water / Sewer Traffic Litigation Report		Finan	ce Department	Consent Calendar
Award of Contract – Landscape Maintenar	nce Services	Public	: Works Department	Regular Business
Tuesday, December 10, 2019 at 6:00 pm /	Regular Me	eting		
Amendment to the Accessory Dwelling Un Ordinance No. 2019-480– First Reading (Continuation)	it.	Plann	ing Department	Public Hearing
Modifications to the Purchasing Requirem	ents	City A	ttorney	Regular Business
Other Unscheduled Items	Proposed of Ite		Department	Agenda Category
Urban Foot Print Civic Plan			Ariston – Request CC	New Business
Planning Commission				New Business
City Hall Repairs				New Business
2018 State of California Tobacco Report City of Guadalupe – "F"			Ariston – Request CC	New Business
Team Building			Gina – Request CC	New Business

City of Guadalupe



Guadalupe, California

Hroclamation EXPRESSING APPRECIATION TO

ROBERT PERRAULT

FOR HIS SERVICE AS INTERIM CITY ADMINISTRATOR OF THE CITY OF GUADALUPE

WHEREAS, the City Council of the City of Guadalupe is responsible for exercising and performing all powers, privileges, and duties vested in or imposed upon it by General Law and Municipal Code; and

WHEREAS, Robert Perrault has served as the Interim City Administrator since March 4, 2019; and

WHEREAS, the term "interim" usually means temporary; in the workplace it is usually a caretaker, one who maintains the status quo. In this case, "interim" meant one who immediately took full ownership, assuming active leadership, executing duties as if it were a permanent position, not allowing the status quo to continue; and

WHEREAS, Robert Perrault chose to assist the City of Guadalupe as its Interim City Administrator and masterfully shared with the City, council members and city staff, his experience, professionalism, and desire to leave the City in a better position than when he arrived; and

WHEREAS, Over the past 8 months, Robert Perrault has provided his expertise to guide the City of Guadalupe, staff and council members toward a more promising future which has been ingrained in how staff and council members function; and

WHEREAS, the City of Guadalupe has benefitted from Robert Perrault's commitment of personal time, tenacity, knowledge and judgment to quickly evaluate and assess the condition of the City and to make foundational policy recommendations to favorably position the City in the years to come; and

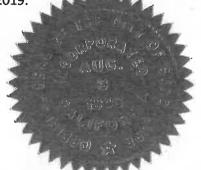
WHEREAS Robert Perrault exemplified the best characteristics of a professional truly dedicated to public service.

NOW, THEREFORE, BE IT RESOLVED, by virtue of the authority vested in me as Mayor and on behalf of the City Council of the City of Guadalupe, I, Ariston Julian, take this opportunity to express genuine and sincere appreciation and recognition to:

ROBERT PERRAULT

for his dedication, commitment, and valued contribution while serving our City.

IN WITNESS WHEREOF, I hereunto set my hand and caused the Seal of the City of Guadalupe to be affixed on this 12th day of November 2019.



Ariston Julian, Mayor

REPORT TO THE CITY COUNCIL Council Agenda of November 12, 2019

Prepared by

City Administrator

Finance Director

SUBJECT:

Payment of warrants for the period ending November 07, 2019 to be approved for payment by the City Council. Subject to having been certified as being in conformity with the budget by the Finance Department staff.

RECOMMENDATION:

That the City Council review and approve the listing of hand checks and warrants to be paid on November 13, 2019

BACKGROUND: Submittal of the listing of warrants issued by the City to vendors for the period and explanations for disbursement of these warrants. An exception, such as an emergency hand check may be required to be issued and paid prior to submittal of the warrant listing, however, this warrant will be identified as "Ratify" on the warrant listing.

REPORT.: Nov 07 19 Thursday RUN...: Nov 07 19 Time: 13:13 Run By.: Esther Britt City of Guadalupe Invoice/Pre-Paid Check Audit Trail Batch B91107 - 13:13 PAGE: 001 ID #: PY-IP CTL.: GUA

	-TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT N
AA-1084:	19 2 5" BOMMER DOUBLE ACTING HINGE US4 FINISH	11-19			
Line	Description			Unit(s) Unit Cost	
0001	2 5" BOMMER DOUBLE ACTING HINGE US4 FINISH		01 4145 1550	1 134.85 Lding Mtce Op Supp/Expense)	134.8
			,	Invoice Extension>	
				Vendor Total>	134.8
41 SUBT	URBAN ROAD STE C-1 *** VENDOR.: ABA01	(ABALONE	COAST ANALYTICAL, INC.)	
	-TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION (J/L ACCOUNT N
	61 WATER SAMPLES			A-NET30 FROM INVOICE	
	Description		G/L Account No	Unit(s) Unit Cost	Amount
001	WATER SAMPLES		12 4425 2150	1 90.00 (astewater Profl Services	90.00
				Invoice Extension>	90.0
	TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION C	}/L ACCOUNT N
	00 AMMONIA			A-NET30 FROM INVOICE	
	Description			Unit(s) Unit Cost	Amount
001	AMMONIA		12 4425 2150 (Wst.Wtr.Op.Fund W	1 305.00 astewater Profl Services)	305.0
				Invoice Extension>	
NVOICE-	TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION G	/L ACCOUNT N
	WATER SAMPLES			A-NET30 FROM INVOICE	
	Description		G/L Account No	Unit(s) Unit Cost	Amount
001	WATER SAMPLES		12 4425 2150		180.0
				Invoice Extension>	180.00
				Vendor Total>	575.00
	(6734 *** VENDOR.: ALLO8 (ALLW				
VOICE-	TYPE DESCRIPTION		DATE	TERM-DESCRIPTION G	/L ACCOUNT No
3592	29 LANDSCAPE MAINTENANCE FOR THE CURRENT MONTH				
ine	Description			Unit(s) Unit Cost	
001	LANDSCAPE MAINTENANCE FOR THE CURRENT MONTH		01 4300 2150		
002	LANDSCAPE MAINTENANCE FOR THE CURRENT MONTH			s & Rec Profl Services)	
003	LANDSCAPE MAINTENANCE FOR THE CURRENT MONTH			A Profl Services)	424.3
004	LANDSCAPE MAINTENANCE FOR THE CURRENT MONTH			ding Mtce Profl Services)	
	Babbon British Colonia Colonia Powin			uad.Assmt Dist Profl Service	
704				Invoice Extension>	3395.00
J 0 4					
			DATE		
NVOICE-	TYPE DESCRIPTION 3 MAINTENANCE PERFROM WEED ABATEMENT 390 PIONEER				
NVOICE- 3614			10/28/19 N N N G/L Account No	A-NET30 FROM INVOICE Unit(s) Unit Cost	2010 Amount
NVOICE- 3614	MAINTENANCE PERFROM WEED ABATEMENT 390 PIONEER		10/28/19 N N N G/L Account No 10 4420 1450	A-NET30 FROM INVOICE Unit(s) Unit Cost	2010 Amount 295.00

REPORT.: Nov 07 19 Thursday RUN....: Nov 07 19 Time: 13:13 Run By.: Esther Britt City of Guadalupe Invoice/Pre-Paid Check Audit Trail Batch B91107 - 13:13 PAGE: 002 ID #: PY-IP CTL.: GUA

P.O. BOX 6734 *** VENDOR.: ALLO8 (AL		ANDSCAPE MAINTENANCE	TN(°)	
INVOICE-TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No
36223 LANDSCAPE MAINTENANCE FOR 11/2019			A-NET30 FROM INVOICE	2010
Line Description		G/L Account No	Unit(s) Unit Cos	t Amount
0001 LANDSCAPE MAINTENANCE FOR 11/2019		01 4300 2150	1 2037.0	0 2037.00
0002 LANDSCAPE MAINTENANCE FOR 11/2019		(General Fund Parks	1 2037.0 s & Rec Profl Services) 1 424.3	8 424.38
0003 LANDSCAPE MAINTENANCE FOR 11/2019		01 4145 2150	A Profl Services) 1 424.3 ding Mtce Profl Services) 1 509.2	8 424.38
0004 LANDSCAPE MAINTENANCE FOR 11/2019		(General Fund Build 60 4490 2150 (Guad.Assmt.Dist Gu	ning Mtce Profi Services) 1 509.2 lad.Assmt Dist Profi Servi	4 509.24 ces)
			Invoice Extension	> 3395.00
INVOICE-TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No
36224 LANDSCAPE MAINTENANCE FOR 11/2019 ON 303 OBISPO	11-19	11/01/19 N N N	A-NET30 FROM INVOICE	2010
Line Description		G/L Account No	Unit(s) Unit Cos	t Amount
0001 LANDSCAPE MAINTENANCE FOR 11/2019 ON 303 OBISPO		10 4420 1450 (Wtr. Oper. Fund Wa	1 295.00 ater Operating Facilities I	0 295.00
			Invoice Extension	> 295.00
			Vendor Total	> 7380.00
543-C W. BETTERAVIA ROAD *** VENDOR.: AME04				
INVOICE-TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No
0336124IN ANTACID TABLETS, PAIN ZAPPERS, COUGH DROPS				2010
Line Description		G/L Account No	Unit(s) Unit Cost	t Amount
0001 ANTACID TABLETS, PAIN ZAPPERS, COUGH DROPS		12 4425 1550 (Wst.Wtr.Op.Fund Wa	Unit(s) Unit Cost 1 42.5 astewater Op Supp/Expense	3 42.53
			Invoice Extension	
INVOICE-TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No
0336141IN GLOVES NITRILE DERMA-PF/XLge		10/08/19 N N N	A-NET30 FROM INVOICE	2010
Line Description		G/L Account No	Unit(s) Unit Cost	
0001 GLOVES NITRILE DERMA-PF/XLge		12 4425 1550		9 117.99
			Invoice Extension	> 117.99
			Vendor Total	> 160.52
F.O. BOX 972943 *** VENDOR.: APP(
INVOICE-TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	
356641 1 NEW PD RADAR		10/22/19 N N N	A-NET30 FROM INVOICE	2010
Line Description		G/L Account No	Unit(s) Unit Cost	
0001 1 NEW PD RADAR		01 4200 1550 (General Fund Polic	1 2987.50 e Op Supp/Expense)	
			Invoice Extension	2987.50
			Vendor Total	> 2987.50
4050 FLAT ROCK DRIVE *** VENDOR.: AQU01 (A)	
INVOICE-TYPE DESCRIPTION	PERIOD		TERM-DESCRIPTION	
NV0075489 3/4" SL IPERL TR/PL 100CFT (METER REPLACEMENTS)				2010
Line Description		G/L Account No	Unit(s) Unit Cost	Amount

REPORT.: Nov 07 19 Thursday RUN....: Nov 07 19 Time: 13:13 Run By.: Esther Britt City of Guadalupe Invoice/Pre-Paid Check Audit Trail Batch B91107 - 13:13 PAGE: 003 ID #: PY-IP CTL.: GUA

	FROCK DRIVE *** VENDOR.: AQU01 FYPE DESCRIPTION				1/r. According
		PERIOD	DATE	TERM-DESCRIPTION G	ACCOUNT I
Line	Description		G/L Account No	Unit(s) Unit Cost 1 3848.58	Amount
0001	3/4" SL IPERL TR/PL 100CFT (METER REPLACEMENTS)		10 4420 1535 (Wtr. Oper. Fund)	1 3848.58 Water Operating Meters)	3848.
				Invoice Extension>	
INVOICE-T	TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION G	/L ACCOUNT
NV0075598	18 IPERL WATER METERS AND HOUSING ASSEMBLY	11-19		A-NET30 FROM INVOICE	2010
Line	Description		G/L Account No	Unit(s) Unit Cost	Amount
0001	18 IPERL WATER METERS AND HOUSING ASSEMBLY		01 2004 (General Fund D.J.	1 5194.34	
				Invoice Extension>	5194.
				Vendor Total>	9042.9
	LOCKBOX *** VENDOR.: AF				
INVOICE-T	YPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION G	/L ACCOUNT 1
	WET AND DUST MOPS			A-NET30 FROM INVOICE	
Line	Description		G/L Account No	Unit(s) Unit Cost	Amount
0001	WET AND DUST MOPS		01 4145 2150 (General Fund Buil	1 37.33 ding Mtce Profl Services)	
				Invoice Extension>	
	YPE DESCRIPTION	PERIOD		TERM-DESCRIPTION G	
34634449	UNIFORMS	11-19	10/22/19 N N N	A-NET30 FROM INVOICE	2010
Line	Description		G/L Account No		Amount
0001	UNIFORMS		10 4420 2150 (Wtr. Oper. Fund W		
0002	UNIFORMS		01 4145 2150 (General Fund Buil	Water Operating Profl Service 1 .28 ding Mtce Profl Services) 1 .29	
0003	UNIFORMS		01 4300 2150 (General Fund Park	1 .29 is & Rec Profl Services) 1 1.69 later Operating Profl Service	-:
0004	UNIFORMS		10 4420 2150 (Wtr. Oper. Fund W	1 1.69 Water Operating Profl Service	1. s)
0005	UNIFORMS		(Wst.Wtr.Op.Fund W	1 1.69 Wastewater Profl Services)	
0006	UNIFORMS			1 1.69 A Profl Services)	1.
				Invoice Extension>	13.
	YPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION G	/L ACCOUNT I
	UNIFORMS, TOWELS, MATS			A-NET30 FROM INVOICE	
ine	Description		G/L Account No	Unit(s) Unit Cost	
	UNIFORMS, TOWELS, MATS		12 4425 2150		72.3
				Invoice Extension>	72.
	YPE DESCRIPTION				
	UNIFORMS	11-19		A-NET30 FROM INVOICE	
ine	Description				
0001	UNIFORMS			ding Mtce Profl Services)	
002	UNIFORMS		(General Fund Park	1 .75 s & Rec Profl Services)	
0003	UNIFORMS			1 5.95 A Profl Services)	
				Invoice Extension>	

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	TYPE DESCRIPTION		DATE	TERM-DESCRIPTION		L ACCOUNT N
Line	Description		G/L Account No		Unit Cost	
	WET AND DUST MOPS.MAT		01 4145 2150 (General Fund Build		37.33	37.3
				Invoice Extens	sion>	37.3
	TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	V G/1	ACCOUNT N
	DUST MOP, MATS, TOWEL, UNIFORMS		10/29/19 N N N			
Line	Description		G/L Account No	Unit(s)	Unit Cost	Amount
0001	DUST MOP, MATS, TOWEL, UNIFORMS		12 4425 2150 (Wst.Wtr.Op.Fund Wa	1 astewater Profl Se	72.35 ervices)	72.3
				Invoice Extens	sion>	72.3
NVCICE-	TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	I G/1	ACCOUNT N
	3 UNIFORM		10/29/19 N N N			
	Description		G/L Account No			
001	UNIFORM		01 4145 2150		.75	. 7
002	UNIFORM		(General Fund Build 01 4300 2150 (General Fund Parks			.7
003	UNIFORM		(General Fund Parks 71 4454 2150 (MEASURE A MEASURE	1	5.95	
				Invoice Extens		7.4
NEZOT CE I	TYPE DESCRIPTION	DERTOR	DATE	WEDN DECEDIDATOR		ACCOUNTY N
	1 UNIFORMS		10/29/19 N N N			
	Description		G/L Account No	Unit(s)	Unit Cost	Amount
001	UNIFORMS		10 4420 2150 (Wtr. Oper. Fund Wa	ter Operating Pro	fl Services)
002	UNIFORMS		01 4145 2150 (General Fund Build	ling Mtce Profl Se	rvices)	
003	UNIFORMS		01 4300 2150 (General Fund Parks	& Rec Profl Serv	ices)	. 2
004	UNIFORMS		10 4420 2150 (Wtr. Oper. Fund Wa	ter Operating Pro	fl Services)
005	UNIFORMS		12 4425 2150 (Wst.Wtr.Op.Fund Wa	stewater Proil Se	rvices)	
006	UNIFORMS		71 4454 2150 (MEASURE A MEASURE	A Profl Services	1.69	1.6
				Invoice Extens	ion>	13.5
NVOICE-	TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/I	ACCOUNT N
3466868	WET AND DUST MOP, MAT	11-19	11/05/19 N N N	A-NET30 FROM INV	OICE	2010
ine	Description		G/L Account No			
001	WET AND DUST MOP, MAT		01 4145 1550 (General Fund Build		Expense)	37.3
				Invoice Extens		
	TYPE DESCRIPTION		DATE			
	2 UNIFORM		11/05/19 N N N			
ine	Description		G/L Account No			
001	UNIFORM		10 4420 2150 (Wtr. Oper. Fund Wa	1	7.91	7.9
002	UNIFORM		01 4145 2150 (General Fund Build	1	.29	
003	UNIFORM		01 4300 2150 (General Fund Parks	1	.28	.2
004	UNIFORM		10 4420 2150	1	1.69	1.6
005	UNIFORM		(Wtr. Oper. Fund Wa 12 4425 2150 (Wst.Wtr.Op.Fund Wa	1	1.69	1.6
			wst.wcr.up.fund Wa	scewater Proil Se	TATCGS }	

City of Guadalupe Invoice/Pre-Paid Check Audit Trail Batch B91107 - 13:13

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Vendor Total ---->

7.05 =========

2001	D71107	10,110		C1D G02
AUS WEST LOCKBOX *** VENDOR.: ARA01 P.O. BOX 101179	(ARAMAR	K UNIFORM SERVICES)		v
INVOICE-TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION G	/L ACCOUNT NO
534668683 MOP, MAT, TOWELS & UNIFORMS			A-NET30 FROM INVOICE	
Line Description		G/L Account No	Unit(s) Unit Cost	Amount
0001 MOP,MAT,TOWELS & UNIFORMS		12 4425 2150	1 72.35 astewater Profl Services)	72.35
			Invoice Extension>	72.35
INVOICE-TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION G	/L ACCOUNT NO
534668684 UNIFORMS			A-NET30 FROM INVOICE	
Line Description			Unit(s) Unit Cost	
0001 UNIFORMS		01 4145 2150	1 .75	€75
0002 UNIFORMS		01 4300 2150	1 .74 s & Rec Profl Services)	. 74
0003 UNIFORMS		71 4454 2150	1 5.95 A Profl Services)	5.95
		A DIOCALIN A DIOCALIN)	Invoice Extension>	7.44
INVOICE-TYPE DESCRIPTION	DEDION	האידים	TERM-DESCRIPTION G	/t account no
534668691 MAT NYLON			A-NET30 FROM INVOICE	
			Unit(s) Unit Cost	
Line Description O001 MAT NYLON		01 4200 1550		
			Invoice Extension>	88.03
2315 MEREDITH LANE STE E *** VENDOR.: BOB	01 (BOB	'S RUBBER STAMPS)		
INVOICE-TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION G	L ACCOUNT NO
1520 NAME PLATE & BUSINESS CARDS FOR TODD BODM				
Line Description		G/L Account No	Unit(s) Unit Cost	Amount
0001 NAME PLATE & BUSINESS CARDS FOR TODD BODM		01 4105 1550	1 161.89 nistration Op Supp/Expense)	161.89
			Invoice Extension>	
			Vendor Total>	161.89
23537 NETWORK PLACE *** VENDOR.: BOU01				
INVOICE-TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION G/	
70253234-C EXPIRED HYDROGEN PEROXIDE	11-19	10/11/19 N N N	A-NET30 FROM INVOICE	2010
Line Description		G/L Account No	Unit(s) Unit Cost	Amount
0001 EXPIRED HYDROGEN PEROXIDE		01 4220 1550 (General Fund Fire	-1 7.68	-7.68
			Invoice Extension>	-7.68
INVOICE-TYPE DESCRIPTION	PERIOD		TERM-DESCRIPTION G/	L ACCOUNT NO
83389045 STERILE WATER 4 IRRIGATION,250 PLASTIC POUR BOTTLE			A-NET30 FROM INVOICE	2010
Line Description		G/L Account No	Unit(s) Unit Cost	
0001 STERILE WATER 4 IRRIGATION, 250 PLASTIC POUR BOTTLE		01 4220 1550 (General Fund Fire	1 14.73	
			Invoice Extension>	14.73

REPORT.: Nov 07 19 Thursday RUN...: Nov 07 19 Time: 13:13 Run By.: Esther Britt

INVOICE-TYPE DESCRIPTION

City of Guadalupe Invoice/Pre-Paid Check Audit Trail Batch B91107 - 13:13

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INVOICE-TYP	E DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION G/L	ACCOUNT N
BPI993946	CHLROINE			A-NET30 FROM INVOICE	
ine	Description		G/L Account No	Unit(s) Unit Cost	Amount
0001			10 4420 1550	Unit(s) Unit Cost 1 248.30 Water Operating Op Supp/Expense	248.3
			(well oper, rund)	Invoice Extension>	
				Vendor Total>	248.3
301 DOKER				3	·
NVOICE-TYP		PERIOD		TERM-DESCRIPTION G/L	ACCOUNT N
	SCREEN IN TAKE			A-NET30 FROM INVOICE	
	Description				
	CREEN IN TAKE		01 4220 1460	Unit(s) Unit Cost	
			(General Fund Fire		-35.9
				Vendor Total>	-35.9
	7124 *** VENDOR.: CAE01 (CAI				
	D DEGERATION			menu pedantomiau a/i	
NVOICE-TYP	E DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION G/L	ACCOUNT N
26401349	400W RETROFIT	11-19	10/22/19 N N N	A-NET30 FROM INVOICE	2010
26401349 ine	400W RETROFIT Description	11-19	G/L Account No	A-NET30 FROM INVOICE Unit(s) Unit Cost	Amount
26401349 ine	400W RETROFIT Description	11-19	10/22/19 N N N G/L Account No	A-NET30 FROM INVOICE	2010 Amount 319.7
26401349 ine	400W RETROFIT Description	11-19	10/22/19 N N N G/L Account No	A-NET30 FROM INVOICE Unit(s) Unit Cost 1 319.73	2010 Amount 319.7
ine 001 4	400W RETROFIT Description 00W RETROFIT E DESCRIPTION	11-19 PERIOD	10/22/19 N N N G/L Account No 10 4420 1450 (Wtr. Oper. Fund W	A-NET30 FROM INVOICE Unit(s) Unit Cost 1 319.73 Vater Operating Facilities Main Invoice Extension> TERM-DESCRIPTION G/L	2010 Amount 319.7) 319.7 ACCOUNT N
26401349 ine 0001 4	400W RETROFIT Description OOW RETROFIT	PERIOD	10/22/19 N N N G/L Account No 10 4420 1450 (Wtr. Oper. Fund W	A-NET30 FROM INVOICE Unit(s) Unit Cost	2010 Amount 319.7) 319.7
26401349 ine 001 4 NVOICE-TYF 26400065 ine	400W RETROFIT Description 00W RETROFIT E DESCRIPTION SQUAD ROOM LIGHT UPGRADE Description	PERIOD	10/22/19 N N N G/L Account No 10 4420 1450 (Wtr. Oper. Fund W DATE 10/15/19 N N N G/L Account No	A-NET30 FROM INVOICE Unit(s) Unit Cost 1 319.73 Nater Operating Facilities Main Invoice Extension> TERM-DESCRIPTION G/L A-NET30 FROM INVOICE Unit(s) Unit Cost	2010 Amount 319.7 319.7 ACCOUNT N 2010 Amount
26401349 sine	400W RETROFIT Description 00W RETROFIT E DESCRIPTION SQUAD ROOM LIGHT UPGRADE	PERIOD	10/22/19 N N N G/L Account No 10 4420 1450 (Wtr. Oper. Fund W DATE 10/15/19 N N N G/L Account No 01 4145 1550	A-NET30 FROM INVOICE Unit(s) Unit Cost 1 319.73 Nater Operating Facilities Main Invoice Extension> TERM-DESCRIPTION G/L A-NET30 FROM INVOICE Unit(s) Unit Cost	2010 Amount 319.7) 319.7 ACCOUNT N 2010 Amount
26401349 sine	400W RETROFIT Description 00W RETROFIT E DESCRIPTION SQUAD ROOM LIGHT UPGRADE Description	PERIOD	10/22/19 N N N G/L Account No 10 4420 1450 (Wtr. Oper. Fund W DATE 10/15/19 N N N G/L Account No 01 4145 1550	A-NET30 FROM INVOICE Unit(s) Unit Cost 1 319.73 Nater Operating Facilities Main Invoice Extension> TERM-DESCRIPTION G/L A-NET30 FROM INVOICE Unit(s) Unit Cost	319.7 319.7 ACCOUNT N 2010 Amount 417.6
26401349 ine	400W RETROFIT Description 00W RETROFIT E DESCRIPTION SQUAD ROOM LIGHT UPGRADE Description	PERIOD	10/22/19 N N N G/L Account No 10 4420 1450 (Wtr. Oper. Fund W DATE 10/15/19 N N N G/L Account No 01 4145 1550	A-NET30 FROM INVOICE Unit(s) Unit Cost 1 319.73 Nater Operating Facilities Main Invoice Extension> TERM-DESCRIPTION G/L A-NET30 FROM INVOICE Unit(s) Unit Cost 1 417.60 ding Mtce Op Supp/Expense) Invoice Extension> Vendor Total>	319.7 319.7 ACCOUNT N 2010 Amount 417.6
26401349 ine	400W RETROFIT Description OOW RETROFIT E DESCRIPTION SQUAD ROOM LIGHT UPGRADE Description QUAD ROOM LIGHT UPGRADE	PERIOD	10/22/19 N N N G/L Account No 10 4420 1450 (Wtr. Oper. Fund W DATE 10/15/19 N N N G/L Account No 01 4145 1550 (General Fund Buil	A-NET30 FROM INVOICE Unit(s) Unit Cost 1 319.73 Nater Operating Facilities Main Invoice Extension> TERM-DESCRIPTION G/L A-NET30 FROM INVOICE Unit(s) Unit Cost 1 417.60 ding Mtce Op Supp/Expense) Invoice Extension> Vendor Total>	2010 Amount 319.7) 319.7 ACCOUNT N 2010 Amount 417.6
26401349 ine 001 4 NVOICE-TYF 26400065 ine 001 S	400W RETROFIT Description 00W RETROFIT E DESCRIPTION SQUAD ROOM LIGHT UPGRADE Description QUAD ROOM LIGHT UPGRADE 7409 *** VENDOR.: CAL19 (C	PERIOD 11-19 LALPORTLA PERIOD	10/22/19 N N N G/L Account No 10 4420 1450 (Wtr. Oper. Fund W DATE 10/15/19 N N N G/L Account No 01 4145 1550 (General Fund Buil ND CONSTRUCTION CORP	A-NET30 FROM INVOICE Unit(s) Unit Cost 1 319.73 Nater Operating Facilities Main Invoice Extension> TERM-DESCRIPTION G/L A-NET30 FROM INVOICE Unit(s) Unit Cost 1 417.60 ding Mtce Op Supp/Expense) Invoice Extension> Vendor Total> TERM-DESCRIPTION G/L	2010 Amount 319.7 319.7 ACCOUNT N 2010 Amount 417.6
26401349 ine 001 4 NVOICE-TYF 26400065 ine 001 S	400W RETROFIT Description 00W RETROFIT E DESCRIPTION SQUAD ROOM LIGHT UPGRADE Description QUAD ROOM LIGHT UPGRADE	PERIOD 11-19 CALPORTLA PERIOD	10/22/19 N N N G/L Account No 10 4420 1450 (Wtr. Oper. Fund W DATE 10/15/19 N N N G/L Account No 01 4145 1550 (General Fund Buil	A-NET30 FROM INVOICE Unit(s) Unit Cost 1 319.73 Nater Operating Facilities Main Invoice Extension> TERM-DESCRIPTION G/L A-NET30 FROM INVOICE Unit(s) Unit Cost 1 417.60 ding Mtce Op Supp/Expense) Invoice Extension> Vendor Total> Yendor Total> TERM-DESCRIPTION G/L A-NET30 FROM INVOICE	2010 Amount 319.7) 319.7 ACCOUNT N 2010 Amount 417.6 737.3
ine	400W RETROFIT Description 00W RETROFIT E DESCRIPTION SQUAD ROOM LIGHT UPGRADE Description QUAD ROOM LIGHT UPGRADE 7409 *** VENDOR.: CAL19 (C	PERIOD 11-19 CALPORTLA PERIOD	10/22/19 N N N G/L Account No 10 4420 1450 (Wtr. Oper. Fund W DATE 10/15/19 N N N G/L Account No 01 4145 1550 (General Fund Buil	A-NET30 FROM INVOICE Unit(s) Unit Cost 1 319.73 Nater Operating Facilities Main Invoice Extension> TERM-DESCRIPTION G/L A-NET30 FROM INVOICE Unit(s) Unit Cost 1 417.60 ding Mtce Op Supp/Expense) Invoice Extension> Vendor Total> Yendor Total>	2010 Amount 319.7) 319.7 ACCOUNT N 2010 Amount 417.6 737.3
26401349 ine 001 4 NVOICE-TYP 26400065 ine 001 S	400W RETROFIT Description 00W RETROFIT E DESCRIPTION SQUAD ROOM LIGHT UPGRADE Description QUAD ROOM LIGHT UPGRADE 7409 *** VENDOR.: CAL19 (CLASS 2 BASE, 3/4") Description	PERIOD 11-19 CALPORTLA PERIOD	10/22/19 N N N G/L Account No 10 4420 1450 (Wtr. Oper. Fund W DATE 10/15/19 N N N G/L Account No 01 4145 1550 (General Fund Buil ND CONSTRUCTION CORP DATE 10/10/19 N N N G/L Account No 71 4454 1550	A-NET30 FROM INVOICE Unit(s) Unit Cost 1 319.73 Nater Operating Facilities Main Invoice Extension> TERM-DESCRIPTION G/L A-NET30 FROM INVOICE Unit(s) Unit Cost 1 417.60 ding Mtce Op Supp/Expense) Invoice Extension> Vendor Total> Yendor Total> TERM-DESCRIPTION G/L A-NET30 FROM INVOICE	2010 Amount 319.7 319.7 ACCOUNT N 2010 Amount 417.6 737.3 ACCOUNT N 2010 Amount
26401349 ine 001 4 NVOICE-TYP 26400065 ine 001 S	400W RETROFIT Description 00W RETROFIT E DESCRIPTION SQUAD ROOM LIGHT UPGRADE Description QUAD ROOM LIGHT UPGRADE 7409 *** VENDOR:: CAL19 (CAL19 CLASS 2 BASE, 3/4") Description	PERIOD 11-19 CALPORTLA PERIOD	10/22/19 N N N G/L Account No 10 4420 1450 (Wtr. Oper. Fund W DATE 10/15/19 N N N G/L Account No 01 4145 1550 (General Fund Buil ND CONSTRUCTION CORP DATE 10/10/19 N N N G/L Account No 71 4454 1550	A-NET30 FROM INVOICE Unit(s) Unit Cost 1 319.73 Water Operating Facilities Main Invoice Extension> TERM-DESCRIPTION G/L A-NET30 FROM INVOICE Unit(s) Unit Cost 1 417.60 ding Mtce Op Supp/Expense) Invoice Extension> Vendor Total> Vendor Total> TERM-DESCRIPTION G/L A-NET30 FROM INVOICE Unit(s) Unit Cost 1 393.25	2010 Amount 319.7 319.7 ACCOUNT N 2010 Amount 417.6 737.3 ACCOUNT N 2010 Amount 1393.2

INVOICE-TYPE DESCRIPTION PERIOD DATE TERM-DESCRIPTION G/L ACCOUNT No

REPORT.: Nov 07 19 Thursday RUN....: Nov 07 19 Time: 13:13 Run By.: Esther Britt City of Guadalupe Invoice/Pre-Paid Check Audit Trail Batch B91107 - 13:13 PAGE: 007 ID #: PY-IP CTL.: GUA

1515 S. BROADWAY *** VENDOR.: CAR02 (CARR'S BOOTS INC.)	
INVOICE-TYPE DESCRIPTION PERIOD DATE TERM-DESCRIPTION G	/L ACCOUNT No
7785 STEEL TOE WOLVERINE BOOTS (JAIME) 11-19 10/30/19 N N N A-NET30 FROM INVOICE	
Line Description G/L Account No Unit(s) Unit Cost	Amount
0001 STEEL TOE WOLVERINE BOOTS (JAIME) 10 4420 0450 1 141.36	141.36
(Wtr. Oper. Fund Water Operating Other Benefit	
Invoice Extension>	141.36
INVOICE-TYPE DESCRIPTION PERIOD DATE TERM-DESCRIPTION G	/L ACCOUNT No
7786 STEEL TOE WOLVERINE BOOTS (JOE PUBLIC WORKS) 11-19 10/30/19 N N N A-NET30 FROM INVOICE	
Line Description G/L Account No Unit(s) Unit Cost	Amount
0001 STEEL TOE WOLVERINE BOOTS (JOE PUBLIC WORKS) 10 4420 0450 1 147.89	147.89
(Wtr. Oper. Fund Water Operating Other Benefit Invoice Extension>	
Involce according >	117.05
Vendor Total>	289.25
P.O. BOX 21228 *** VENDOR.: CCI01 (CCI OFFICE TECHNOLOGIES)	
DEPT 90 INVOICE-TYPE DESCRIPTION PERIOD DATE TERM-DESCRIPTION G	/L ACCOUNT No
NST184587 NEOPOST DOUBLE LABELS 11-19 10/31/19 N N N A-NET30 FROM INVOICE	
Line Description G/L Account No Unit(s) Unit Cost	Amount
0001 NEOPOST DOUBLE LABELS 01 4120 1550 1 117.88	
(General Fund Finance Op Supp/Expense)	
(General Fund Finance Op Supp/Expense) Invoice Extension>	
Invoice Extension>	117.88
	117.88
Invoice Extension> Vendor Total>	117.88
Invoice Extension> Vendor Total> 336 CAMPODONICO *** VENDOR.: CHA01 (MARIA GUADALUPE CHAVEZ)	117.88
Vendor Total> 336 CAMPODONICO	117.88
Vendor Total> 336 CAMPODONICO *** VENDOR.: CHA01 (MARIA GUADALUPE CHAVEZ) INVOICE-TYPE DESCRIPTION PERIOD DATE TERM-DESCRIPTION G, 110419 REIMBURSE CLEANING DEPOSIT FOR AUDOTORIUM RENTAL 11-19 10/22/19 N N N A-NET30 FROM INVOICE Line Description G/L Account No Unit(s) Unit Cost	117.88 117.88
Vendor Total> 336 CAMPODONICO	117.88 117.88 LACCOUNT NO 2010 Amount
Vendor Total> Vendor Total> Vendor Total> Vendor Total> Vendor Total> Vendor Total> Invoice Extension> Vendor Total> Vendor Total> Invoice Extension> Vendor Total> Vendor Total> Vendor Total> Invoice Extension> Vendor Total> Vendor Total> Vendor Total> Vendor Total> Of Account No Unit (s) Unit Cost Invoice Extension> Vendor Total> Vendor Total> Of Account No Unit (s) Unit Cost Invoice Extension> Vendor Total	117.88 117.88 L ACCOUNT NO 2010 Amount 500.00
Vendor Total> 336 CAMPODONICO	117.88 117.88 L ACCOUNT NO 2010 Amount 500.00
Vendor Total> Vendor Total	117.88 117.88 117.88 LACCOUNT NO 2010 Amount 500.00
Vendor Total> Vendor Total> Vendor Total> Vendor Total> Vendor Total> Vendor Total> Invoice Extension> Vendor Total> Vendor Total> Invoice Extension> Vendor Total> Vendor Total> Vendor Total> Invoice Extension> Vendor Total> Vendor Total> Vendor Total> Vendor Total> Of Account No Unit (s) Unit Cost Invoice Extension> Vendor Total> Vendor Total> Of Account No Unit (s) Unit Cost Invoice Extension> Vendor Total	117.88 117.88 117.88 LACCOUNT NO 2010 Amount 500.00
Vendor Total> Vendor Total> Vendor Total> The Vendor Total> Vendor Total> Vendor Total> Vendor Total> INVOICE-TYPE DESCRIPTION	117.88 117.88 LACCOUNT NO 2010 Amount 500.00
Vendor Total> Vendor Total> Vendor Total> Vendor Total> Vendor Total> Vendor Total> INVOICE-TYPE DESCRIPTION PERIOD DATE TERM-DESCRIPTION G, 110419 REIMBURSE CLEANING DEPOSIT FOR AUDOTORIUM RENTAL 11-19 10/22/19 N N N A-NET30 FROM INVOICE Line Description G/L Account No Unit(s) Unit Cost 0001 REIMBURSE CLEANING DEPOSIT FOR AUDOTORIUM RENTAL 01 2044 1 500.00 (General Fund Auditorium/Park Deposits) Invoice Extension> Vendor Total> P.O. BOX 60229 *** VENDOR: CHA03 (CHARTER COMMUNICATIONS)	117.88 117.88 117.88 2010 Amount 500.00 500.00
Vendor Total> Vendor Total> Vendor Total> Vendor Total> Vendor Total> Vendor Total> INVOICE-TYPE DESCRIPTION PERIOD DATE TERM-DESCRIPTION G, 110419 REIMBURSE CLEANING DEPOSIT FOR AUDOTORIUM RENTAL 11-19 10/22/19 N N N A-NET30 FROM INVOICE Line Description G/L Account No Unit(s) Unit Cost O001 REIMBURSE CLEANING DEPOSIT FOR AUDOTORIUM RENTAL 01 2044 1 500.00 (General Fund Auditorium/Park Deposits) Invoice Extension> Vendor Total> P.O. BOX 60229 *** VENDOR: CHA03 (CHARTER COMMUNICATIONS) INVOICE-TYPE DESCRIPTION PERIOD DATE TERM-DESCRIPTION G/	117.88 117.88 117.88 /L ACCOUNT No 2010 Amount 500.00 500.00
Vendor Total> Vendor Total> Vendor Total> Vendor Total> Vendor Total> Vendor Total> NVOICE-TYPE DESCRIPTION PERIOD DATE TERM-DESCRIPTION G, 110419 REIMBURSE CLEANING DEPOSIT FOR AUDOTORIUM RENTAL 11-19 10/22/19 N N N A-NET30 FROM INVOICE Line Description G/L Account No Unit(s) Unit Cost 0001 REIMBURSE CLEANING DEPOSIT FOR AUDOTORIUM RENTAL 01 2044 1 500.00 (General Fund Auditorium/Park Deposits) Invoice Extension> Vendor Total> P.O. BOX 60229 *** VENDOR.: CHA03 (CHARTER COMMUNICATIONS) INVOICE-TYPE DESCRIPTION PERIOD DATE TERM-DESCRIPTION G/ 362101319 INTERNET AT CITY HALL 11-19 10/13/19 N N N A-NET30 FROM INVOICE	117.88 117.88 117.88 LACCOUNT NO 2010 Amount 500.00 500.00
Vendor Total> INVOICE-TYPE DESCRIPTION PERIOD DATE TERM-DESCRIPTION G, 110419 REIMBURSE CLEANING DEPOSIT FOR AUDOTORIUM RENTAL 11-19 10/22/19 N N N A-NET30 FROM INVOICE Line Description G/L Account No Unit (s) Unit Cost (General Fund Auditorium/Park Deposits) Thvoice Extension> Vendor Total> P.O. BOX 60229 *** VENDOR: CHA03 (CHARTER COMMUNICATIONS) INVOICE-TYPE DESCRIPTION PERIOD DATE TERM-DESCRIPTION G/ 362101319 INTERNET AT CITY HALL 11-19 10/13/19 N N N A-NET30 FROM INVOICE Line Description G/L Account No Unit (s) Unit Cost	117.88 117.88 117.88 117.88 117.88 117.88 117.88 117.88 117.88 117.88 117.88 117.88 117.88 117.88
Vendor Total> INVOICE-TYPE DESCRIPTION PERIOD DATE TERM-DESCRIPTION G, 110419 REIMBURSE CLEANING DEPOSIT FOR AUDOTORIUM RENTAL 11-19 10/22/19 N N N A-NET30 FROM INVOICE Line Description G/L Account No Unit(s) Unit Cost (General Fund Auditorium/Park Deposits) Throice Extension> Vendor Total> P.O. BOX 60229 *** VENDOR.: CHA03 (CHARTER COMMUNICATIONS) INVOICE-TYPE DESCRIPTION PERIOD DATE TERM-DESCRIPTION G/ 362101319 INTERNET AT CITY HALL 11-19 10/13/19 N N N A-NET30 FROM INVOICE Line Description G/L Account No Unit (s) Unit Cost	117.88 117.88 117.88 117.88 117.88 117.88 117.88 117.88 117.88 117.88 117.88 117.88 117.88 117.88
Invoice Extension> Vendor Total> 336 CAMPODONICO	117.88 117.88 117.88 117.88 117.88 117.88 117.88 117.88 117.88 117.88 117.88
Vendor Total> 336 CAMPODONICO *** VENDOR: CHA01 (MARIA GUADALUPE CHAVEZ) INVOICE-TYPE DESCRIPTION PERIOD DATE TERM-DESCRIPTION G, 110419 REIMBURSE CLEANING DEPOSIT FOR AUDOTORIUM RENTAL 11-19 10/22/19 N N N A-NET30 FROM INVOICE Line Description G/L Account No Unit(s) Unit Cost 0001 REIMBURSE CLEANING DEPOSIT FOR AUDOTORIUM RENTAL 01 2044 1 500.00 (General Fund Auditorium/Park Deposits) Invoice Extension> P.O. BOX 60229 *** VENDOR: CHA03 (CHARTER COMMUNICATIONS) INVOICE-TYPE DESCRIPTION PERIOD DATE TERM-DESCRIPTION G/ 362101319 INTERNET AT CITY HALL 11-19 10/13/19 N N N A-NET30 FROM INVOICE Line Description G/L Account No Unit(s) Unit Cost 0001 INTERNET AT CITY HALL 01 4145 1000 1 144.97 (General Fund Building Mice Utilities)	117.88 117.88 117.88 117.88 117.88 117.88 117.88 117.88 117.88 117.88 117.88
Vendor Total> 336 CAMPODONICO *** VENDOR.: CHA01 (MARIA GUADALUPE CHAVEZ) INVOICE-TYPE DESCRIPTION PERIOD DATE TERM-DESCRIPTION G, 110419 REIMBURSE CLEANING DEPOSIT FOR AUDOTORIUM RENTAL 11-19 10/22/19 N N N A-NET30 FROM INVOICE Line Description G/L Account NO Unit(s) Unit Cost (General Fund Auditorium/Park Deposits) Invoice Extension> P.O. BOX 60229 *** VENDOR.: CHA03 (CHARTER COMMUNICATIONS) INVOICE-TYPE DESCRIPTION PERIOD DATE TERM-DESCRIPTION G/ 362101319 INTERNET AT CITY HALL 11-19 10/13/19 N N N A-NET30 FROM INVOICE Line Description G/L Account NO Unit(s) Unit Cost OO1 INTERNET AT CITY HALL 01 4145 1000 1 1 144.97 (General Fund Building Mtce Utilities)	117.88 117.88 117.88 117.88 117.88 117.88 117.88 117.88 117.88 117.88 117.88
TOUCICE Extension> Vendor Total> Vendor Total> Vendor Total> Vendor Total> Vendor Total> INVOICE-TYPE DESCRIPTION PERIOD DATE TERM-DESCRIPTION G, 10419 REIMBURSE CLEANING DEPOSIT FOR AUDOTORIUM RENTAL 11-19 10/22/19 N N N A-NET30 FROM INVOICE Line Description G/L Account No Unit(s) Unit Cost O001 REIMBURSE CLEANING DEPOSIT FOR AUDOTORIUM RENTAL 01 2044 01 500.00 (General Fund Auditorium/Park Deposits) Invoice Extension> Vendor Total> P.O. BOX 60229 *** VENDOR: CHA03 (CHARTER COMMUNICATIONS) INVOICE-TYPE DESCRIPTION PERIOD DATE TERM-DESCRIPTION G/ 362101319 INTERNET AT CITY HALL 11-19 10/13/19 N N N A-NET30 FROM INVOICE Line Description G/L Account No Unit(s) Unit Cost Line Description G/L Account No Unit(s) Unit Cost O001 INTERNET AT CITY HALL 01 4145 1000 1 1 144.97 (General Fund Building Mtce Utilities) Invoice Extension> Vendor Total> Vendor Total>	117.88 117.88 117.88 117.88 117.88 117.88 117.88 117.88 117.88 117.88 117.88
Invoice Extension> Vendor Total> Vendor Total> Vendor Total> Note: Chapter Description	117.88 117.88 117.88 117.88 117.88 117.88 117.88 117.88 117.88 117.88

REPORT.: Nov 07 19 Thursday RUN....: Nov 07 19 Time: 13:13 Run By.: Esther Britt City of Guadalupe Invoice/Pre-Paid Check Audit Trail Batch B91107 - 13:13 PAGE: 008 ID #: PY-IP CTL.: GUA

	*** VENDOR.: CIT08		F GUADALUPE (FINANC)	******************	6
	YPE DESCRIPTION		DATE	TERM-DESCRIPTION	G/L ACCOUNT No
	1025,1025A,884,330 GUADALUPE/4545,4550 10TH/918 OB				
	Description			Unit(s) Unit Cost	Amount
0001	1025,1025A,884,330 GUADALUPE/4545,4550 10TH/918 OB		01 4145 1000	1 445.03	445.01
0002	5125 W MAIN ST		(General Fund Buil 12 4425 1000	ding Mtce Utilities) 1 1302.09	1302.09
0003	5201,4913,5101,5001 W MAIN ST			Mastewater Utilities)	
0004	5301 MAIN,4800 3RD,406 TOG,4402 AMBER,4689-A 11TH+		(Guad.Assmt.Dist G 01 4300 1000	uad.Assmt Dist Utilities) 1 6602.43	6602.43
0005	1188,1070,912,873-A,949,1075,110 GUADALUPE		(General Fund Park 71 4454 1000	s & Rec Utilities) 1 203.28	
			(MEASURE A MEASURE	A Utilities) Invoice Extension	8678.65
				INVOICE EXCENSION	, 0070.03
				Vendor Total	8678.65
110 E. CO	OK STREET *** VENDOR.: CIT1			· · · · · · · · · · · · · · · · · · ·	
	YPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No
				A-NET30 FROM INVOICE	2010
Line	Description		G/L Account No	Unit(s) Unit Cost	
	FUEL FOR 08/2019		23 4461 1560		5375.19
				Invoice Extension>	5375.19
				Vendor Total>	5375.19
3755 WASH	INGTON BLVD *** VENDOR.: COR01 (
3755 WASH SUITE #20 INVOICE-T	INGTON BLVD *** VENDOR.: COR01 (4 4 YPE DESCRIPTION		WILLITS SYSTEM CORP) DATE	TERM-DESCRIPTION	G/L ACCOUNT NO
3755 WASH SUITE #20 INVOICE-T	INGTON BLVD *** VENDOR.: COR01 (4 YPE DESCRIPTION	CORBIN V	WILLITS SYSTEM CORP) DATE		G/L ACCOUNT No
3755 WASH SUITE #20 INVOICE-T	INGTON BLVD *** VENDOR.: COR01 (4 YPE DESCRIPTION MONTHLY INVOICE FOR 11/2019 Description	CORBIN V	DATE 10/15/19 N N N G/L Account No	TERM-DESCRIPTION A-NET30 FROM INVOICE Unit(s) Unit Cost	G/L ACCOUNT No 2010 Amount
3755 WASH SUITE #20 INVOICE-T 000B91015	INGTON BLVD *** VENDOR.: COR01 (4 YPE DESCRIPTION MONTHLY INVOICE FOR 11/2019	CORBIN V	DATE 10/15/19 N N N G/L Account No 01 4120 2150	TERM-DESCRIPTION A-NET30 FROM INVOICE Unit(s) Unit Cost	G/L ACCOUNT No 2010 Amount 604.47
3755 WASH SUITE #20 INVOICE-T 000B91015	INGTON BLVD *** VENDOR.: COR01 (4 YPE DESCRIPTION MONTHLY INVOICE FOR 11/2019 Description	CORBIN V	DATE 10/15/19 N N N G/L Account No 01 4120 2150	TERM-DESCRIPTION A-NET30 FROM INVOICE Unit(s) Unit Cost	G/L ACCOUNT No 2010 Amount 604.47
3755 WASH SUITE #20 INVOICE-T 000B91015	INGTON BLVD *** VENDOR.: COR01 (4 YPE DESCRIPTION MONTHLY INVOICE FOR 11/2019 Description	CORBIN V	DATE 10/15/19 N N N G/L Account No 01 4120 2150	TERM-DESCRIPTION A-NET30 FROM INVOICE Unit(s) Unit Cost 1 604.47 nce Profl Services)	G/L ACCOUNT NO 2010 Amount 604.47
3755 WASH SUITE #20 INVOICE-T 000B91015	INGTON BLVD *** VENDOR.: COR01 (4 YPE DESCRIPTION MONTHLY INVOICE FOR 11/2019 Description MONTHLY INVOICE FOR 11/2019	PERIOD PERIOD 11-19	DATE 10/15/19 N N N G/L Account No 01 4120 2150 (General Fund Finan	TERM-DESCRIPTION A-NET30 FROM INVOICE Unit(s) Unit Cost 1 604.47 nce Profl Services) Invoice Extension> Vendor Total>	G/L ACCOUNT No 2010 Amount 604.47
3755 WASH SUITE #20 INVOICE-T 000B91015 Line 0001	INGTON BLVD *** VENDOR.: COR01 (4 YPE DESCRIPTION MONTHLY INVOICE FOR 11/2019 Description MONTHLY INVOICE FOR 11/2019	PERIOD PERIOD 11-19	DATE 10/15/19 N N N G/L Account No 01 4120 2150 (General Fund Finan	TERM-DESCRIPTION A-NET30 FROM INVOICE Unit(s) Unit Cost 1 604.47 nce Profl Services) Invoice Extension> Vendor Total>	G/L ACCOUNT No 2010 Amount 604.47
3755 WASH SUITE #20 INVOICE-T 000B91015 Line 0001	INGTON BLVD *** VENDOR.: COR01 (4 YPE DESCRIPTION MONTHLY INVOICE FOR 11/2019 Description MONTHLY INVOICE FOR 11/2019 *** VENDOR.: COR0 YPE DESCRIPTION	PERIOD PERIOD 11-19 D2 (BBV	DATE 10/15/19 N N N G/L Account No 01 4120 2150 (General Fund Final	TERM-DESCRIPTION A-NET30 FROM INVOICE Unit(s) Unit Cost 1 604.47 nce Profl Services) Invoice Extension> Vendor Total>	G/L ACCOUNT No 2010 Amount 604.47 604.47
3755 WASH SUITE #20 INVOICE-T 000B91015 Line 0001 P.O BOX 6' INVOICE-T' 578982	INGTON BLVD *** VENDOR.: COR01 (4 YPE DESCRIPTION MONTHLY INVOICE FOR 11/2019 Description MONTHLY INVOICE FOR 11/2019 *** VENDOR.: COR YPE DESCRIPTION INSPECTION-ELEVATED WATER STORAGE & OBISPO TANK Description	PERIOD PERIOD 11-19 D2 (BBV	DATE 10/15/19 N N N G/L Account No 01 4120 2150 (General Fund Final VA COMPASS BANK) DATE 10/31/19 N N N G/L Account No	TERM-DESCRIPTION A-NET30 FROM INVOICE Unit(s) Unit Cost 1 604.47 nce Profl Services) Invoice Extension> Vendor Total> TERM-DESCRIPTION	G/L ACCOUNT NO 2010 Amount 604.47 604.47 604.47
3755 WASH SUITE #20 INVOICE-T 000B91015 Line 0001 P.O BOX 6' INVOICE-T	INGTON BLVD *** VENDOR.: COR01 (4 YPE DESCRIPTION MONTHLY INVOICE FOR 11/2019 Description MONTHLY INVOICE FOR 11/2019 *** VENDOR.: COR0 THE DESCRIPTION INSPECTION-ELEVATED WATER STORAGE & OBISPO TANK	PERIOD PERIOD 11-19 D2 (BBV	DATE 10/15/19 N N N G/L Account No 01 4120 2150 (General Fund Finant VA COMPASS BANK) DATE 10/31/19 N N N G/L Account No 10 4420 1450	TERM-DESCRIPTION A-NET30 FROM INVOICE Unit(s) Unit Cost 1 604.47 nce Profl Services) Invoice Extension> Vendor Total> TERM-DESCRIPTION A-NET30 FROM INVOICE Unit(s) Unit Cost 1 2055.00	G/L ACCOUNT NO 2010 Amount 604.47 604.47 604.47 G/L ACCOUNT No 2010 Amount 2055.00
3755 WASH SUITE #20 INVOICE-T 000B91015 Line 0001 P.O BOX 6' INVOICE-T' 578982	INGTON BLVD *** VENDOR.: COR01 (4 YPE DESCRIPTION MONTHLY INVOICE FOR 11/2019 Description MONTHLY INVOICE FOR 11/2019 *** VENDOR.: COR0 YPE DESCRIPTION INSPECTION-ELEVATED WATER STORAGE & OBISPO TANK Description	PERIOD PERIOD 11-19 D2 (BBV	DATE 10/15/19 N N N G/L Account No 01 4120 2150 (General Fund Finant VA COMPASS BANK) DATE 10/31/19 N N N G/L Account No 10 4420 1450	TERM-DESCRIPTION A-NET30 FROM INVOICE Unit(s) Unit Cost 1 604.47 nce Profl Services) Invoice Extension> Vendor Total> TERM-DESCRIPTION A-NET30 FROM INVOICE Unit(s) Unit Cost	G/L ACCOUNT No 2010 Amount 604.47 604.47 604.47 2010 Amount 2010 Amount
3755 WASH SUITE #20 INVOICE-T 000B91015 Line 0001 P.O BOX 6' INVOICE-T' 578982	INGTON BLVD *** VENDOR.: COR01 (4 YPE DESCRIPTION MONTHLY INVOICE FOR 11/2019 Description MONTHLY INVOICE FOR 11/2019 *** VENDOR.: COR0 YPE DESCRIPTION INSPECTION-ELEVATED WATER STORAGE & OBISPO TANK Description	PERIOD PERIOD 11-19 D2 (BBV	DATE 10/15/19 N N N G/L Account No 01 4120 2150 (General Fund Finant VA COMPASS BANK) DATE 10/31/19 N N N G/L Account No 10 4420 1450	TERM-DESCRIPTION A-NET30 FROM INVOICE Unit(s) Unit Cost 1 604.47 nce Profl Services) Invoice Extension> Vendor Total> TERM-DESCRIPTION A-NET30 FROM INVOICE Unit(s) Unit Cost 1 2055.00 ater Operating Facilities M Invoice Extension>	G/L ACCOUNT No 2010 Amount 604.47 604.47 604.47 2010 Amount 2010 Amount 2055.00
3755 WASH SUITE #20 INVOICE-T 000B91015 Line 0001 P.O BOX 6' INVOICE-T' 578982	INGTON BLVD *** VENDOR.: COR01 (4 YPE DESCRIPTION MONTHLY INVOICE FOR 11/2019 Description MONTHLY INVOICE FOR 11/2019 *** VENDOR.: COR0 YPE DESCRIPTION INSPECTION-ELEVATED WATER STORAGE & OBISPO TANK Description	PERIOD PERIOD 11-19 D2 (BBV	DATE 10/15/19 N N N G/L Account No 01 4120 2150 (General Fund Finant VA COMPASS BANK) DATE 10/31/19 N N N G/L Account No 10 4420 1450	TERM-DESCRIPTION A-NET30 FROM INVOICE Unit(s) Unit Cost 1 604.47 nce Profl Services) Invoice Extension> Vendor Total> TERM-DESCRIPTION A-NET30 FROM INVOICE Unit(s) Unit Cost 1 2055.00 ater Operating Facilities M	G/L ACCOUNT No 2010 Amount 604.47 604.47 604.47 2010 Amount 2010 Amount 2055.00
3755 WASH SUITE #20 INVOICE-T 000B91015 Line 0001 P.O BOX 6' INVOICE-T' 578982	INGTON BLVD *** VENDOR.: COR01 (4 YPE DESCRIPTION MONTHLY INVOICE FOR 11/2019 Description MONTHLY INVOICE FOR 11/2019 74173 *** VENDOR.: COR YPE DESCRIPTION INSPECTION-ELEVATED WATER STORAGE & OBISPO TANK Description INSPECTION-ELEVATED WATER STORAGE & OBISPO TANK	D2 (BBV PERIOD	DATE 10/15/19 N N N G/L Account No 10 4120 2150 (General Fund Finant DATE 10/31/19 N N N G/L Account No 10 4420 1450 (Wtr. Oper. Fund Wa	TERM-DESCRIPTION A-NET30 FROM INVOICE Unit(s) Unit Cost 1 604.47 nce Profl Services) Invoice Extension> Vendor Total> TERM-DESCRIPTION A-NET30 FROM INVOICE Unit(s) Unit Cost 1 2055.00 ater Operating Facilities M Invoice Extension> Vendor Total>	G/L ACCOUNT No 2010 Amount 604.47 604.47 604.47 2010 Amount 2010 Amount 2055.00 2055.00
3755 WASH SUITE #20 INVOICE-T 000B91015 Line 0001 P.O BOX 6' INVOICE-T 578982 Line 0001	INGTON BLVD *** VENDOR.: COR01 (4 YPE DESCRIPTION MONTHLY INVOICE FOR 11/2019 Description MONTHLY INVOICE FOR 11/2019 74173 *** VENDOR.: COR0 YPE DESCRIPTION INSPECTION-ELEVATED WATER STORAGE & OBISPO TANK Description INSPECTION-ELEVATED WATER STORAGE & OBISPO TANK DESCRIPTION INSPECTION-ELEVATED WATER STORAGE & OBISPO TANK ENDA DR *** VENDOR.: COR0 YPE DESCRIPTION	D2 (BBV PERIOD	DATE 10/15/19 N N N G/L Account No 10 4120 2150 (General Fund Finant VA COMPASS BANK) DATE 10/31/19 N N N G/L Account No 10 4420 1450 (Wtr. Oper. Fund Water)	TERM-DESCRIPTION A-NET30 FROM INVOICE Unit(s) Unit Cost 1 604.47 nce Profl Services) Invoice Extension> Vendor Total> TERM-DESCRIPTION A-NET30 FROM INVOICE Unit(s) Unit Cost 1 2055.00 ater Operating Facilities M Invoice Extension> Vendor Total>	G/L ACCOUNT No 2010 Amount 604.47 604.47 604.47 2010 Amount 2055.00 ain) 2055.00
3755 WASH SUITE #20 INVOICE-T 000B91015 Line 0001 P.O BOX 6' INVOICE-T 578982 Line 0001	INGTON BLVD *** VENDOR.: COR01 (4 YPE DESCRIPTION MONTHLY INVOICE FOR 11/2019 Description MONTHLY INVOICE FOR 11/2019 *** VENDOR.: COR0 YPE DESCRIPTION INSPECTION-ELEVATED WATER STORAGE & OBISPO TANK Description INSPECTION-ELEVATED WATER STORAGE & OBISPO TANK *** VENDOR.: COR0 *** VENDOR.: COR0	D2 (BBV PERIOD 11-19 06 (GAE PERIOD	DATE 10/15/19 N N N G/L Account No 01 4120 2150 (General Fund Finant VA COMPASS BANK) DATE 10/31/19 N N N G/L Account No 10 4420 1450 (Wtr. Oper. Fund Wa	TERM-DESCRIPTION A-NET30 FROM INVOICE Unit(s) Unit Cost 1 604.47 nce Profl Services) Invoice Extension> Vendor Total> TERM-DESCRIPTION 1 2055.00 ater Operating Facilities M Invoice Extension> Vendor Total>	G/L ACCOUNT No 2010 Amount 604.47 604.47 604.47 2010 Amount 2055.00 ain) 2055.00

INVOICE-TYPE DESCRIPTION

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4425 HACIENDA DR *** VENDOR.: COR	(GA)	BRIELLA CORTEZ)	ear - reces - reces - reces - reces -	······
INVOICE-TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION G	/L ACCOUNT No
Line Description		G/L Account No	Unit(s) Unit Cost	
0001 FULL CLEANNING, DEPOSIT REIMBURSABLE, SENIOR CENTER		01 2044	1 200.00 torium/Park Deposits)	200.00
			Invoice Extension>	200.00
			Vendor Total>	200.00
ANIMAL HEALTH & REGULATION *** VENDOR.: COU04 300 N. SAN ANTONIO ROAD			/44	
INVOICE-TYPE DESCRIPTION			TERM-DESCRIPTION G,	
FY19-20Q1 ANIMAL SERVICES QUARTERLY CONTRACT 07/2019-09/2019 Line Description	11-19	G/L Account No		2010
0001 ANIMAL SERVICES QUARTERLY CONTRACT 07/2019-09/2019		01 4140 2350		
<u> </u>			Departmentl Svcs.Other Agen)	
			Invoice Extension>	14808.25
			Vendor Total>	14808.25
966 HUBER ST *** VENDOR.: CUL01 (C				
INVOICE-TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION G/	'L ACCOUNT No
59129 STRONGBASE 9'' TANK RENTAL	11-19	10/31/19 N N N	A-NET30 FROM INVOICE	2010
Line Description		G/L Account No	Unit(s) Unit Cost	Amount
0001 STRONGBASE 9'' TANK RENTAL		01 4200 1550 (General Fund Poli	1 35.00 ce Op Supp/Expense)	35.00
			Invoice Extension>	35.00
			Vendor Total>	35.00
P.O. BOX 41602 *** VENDOR.: DELO3 (DE LAG			INC.)	3
INVOICE-TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION G/	L ACCOUNT No
65606622 FORD/F 350 LEASE PAYMENT WWTP FOR 11/2019	11-19	10/30/19 N N N	A-NET30 FROM INVOICE	2010
Line Description		G/L Account No	Unit(s) Unit Cost	
0001 FORD/F 350 LEASE PAYMENT WWTP FOR 11/2019		12 4425 4150 (Wst.Wtr.Op.Fund W	1 1225.39 astewater Lease-Purchase)	
			Invoice Extension>	1225.39
			Vendor Total>	1225.39
4875 EL CAMINO REAL *** VENDOR.: EIKO1				
INVOICE-TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION G/	L ACCOUNT NO
2019-237 2014-009 CITY ENGINEER-COORDINATION FOR LEROY PARK				
Line Description		G/L Account No		
0001 2014-009 CITY ENGINEER-COORDINATION FOR LEROY PARK		01 4405 2150 (General Fund Bldg	and Safety Profl Services)	80.00
			Invoice Extension>	

INVOICE-TYPE DESCRIPTION PERIOD DATE TERM-DESCRIPTION G/L ACCOUNT NO 2019-238 2017-017 IRWM ADMIN.PREPARE QUARTERLY REPORT 11-19 11/01/19 N N N A-NET30 FROM INVOICE 2010

City of Guadalupe Invoice/Pre-Paid Check Audit Trail Batch B91107 - 13:13

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	-TYPE DESCRIPTION	PERIOR	DATE	TERM-DESCRIPTION G	/L ACCOUNT N
Line	Description				
0001	Description 2017-017 IRWM ADMIN.PREPARE QUARTERLY REPORT		32 4470 3150 (Wstwtr.Cap.Fund W	1 160.00 Wastewater Cap. Imp.Other/Bui	160.0 Ld)
				Invoice Extension>	160.0
	TYPE DESCRIPTION		DATE	TERM-DESCRIPTION G,	L ACCOUNT N
				A-NET30 FROM INVOICE	
Line	Description		G/L Account No	Unit(s) Unit Cost	Amount
0001	2017-022 ATP CYCLE 3 PROJECT-		71 4454 1555 (MEASURE A MEASURE	E A ATP Cycle 3)	
				Invoice Extension>	560.0
	TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION G	L ACCOUNT N
	10 2017-027 MS4 RELATED WORK-MS4 ANNUAL REPORT				
Line	Description		G/L Account No	Unit(s) Unit Cost	Amount
0001	2017-027 MS4 RELATED WORK-MS4 ANNUAL REPORT		12 4425 2150		1400.0
				Invoice Extension>	1400.0
INVOICE	TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION G/	L ACCOUNT N
2019-24	2018-015 2019 PAVEMENT MAINTANENCE-EMAILS			A-NET30 FROM INVOICE	
Line	Description		G/L Account No	Unit(s) Unit Cost	Amount
0001	2018-015 2019 PAVEMENT MAINTANENCE-EMAILS			1 42.50 Tax-Streets Profl Services)	
				Invoice Extension>	42.5
INVOICE	TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION G/	L ACCOUNT N
2019-24	2019-017 PASADERA TRACT 29064 (LOT 9)			A-NET30 FROM INVOICE	
Line	Description		G/L Account No	Unit(s) Unit Cost	Amount
0001	2019-017 PASADERA TRACT 29064 (LOT 9)		01 2004 (General Fund D.J.	1 . 240.00 FARMS)	240.0
				Invoice Extension>	240.0
INVOICE-	TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION G/	L ACCOUNT N
	2017-032 ALVAREZ 11TH ST APARTMENTS			A-NET30 FROM INVOICE	
Line	Description		G/L Account No	Unit(s) Unit Cost	Amount
0001	2017-032 ALVAREZ 11TH ST APARTMENTS		01 2088	1 240.00 rez 4626 11th Apartments)	240.0
			, 0011011011111111111111111111111111111	Invoice Extension>	
	TYPE DESCRIPTION			TERM-DESCRIPTION G/	
	6 2017-034 CULTURAL ARTS CENTER			A-NET30 FROM INVOICE	
Line	Description		G/L Account No	Unit(s) Unit Cost	Amount
	2017-034 CULTURAL ARTS CENTER		01 2078	1 120.00 CULTURAL ARTS & EVENT CTR)	
				Invoice Extension>	120.00
0001	TYPE DESCRIPTION	PERIOD	DATE	Invoice Extension> TERM-DESCRIPTION G/	L ACCOUNT N
0001				TERM-DESCRIPTION G/	L ACCOUNT NO

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APPENDENT PROBLEM PR				
2019-101 PORTIONEER ST ADMINISTRY OF ADMINISTRY 11-19 11/01/13 N N N A-NETSH PROMISED 131-00 And ADMINISTRY	4875 EL CAMINO REAL *** VENDOR,:	K01 (EIKHOF DESIGN GROUP INC.)		
2019-01 FOREIRS TARRESSESS 11-19 1/07/19 N	INVOICE-TYPE DESCRIPTION	PERIOD DATE	FERM-DESCRIPTION G/L	ACCOUNT No
10.00 10.0	2019-248 2019-001 PIONEER ST APARTMENTS			
1213-001 1213-001	Line Description	G/L Account No	Unit(s) Unit Cost	Amount
INVOICE TYPE DESCRIPTION		01 2075	1 120.00	
2019021 2019-031 PRACEBER TRACT 20082 LOT 4)			-	120.00
2018-031 PARAMERA TRACT 2002 (LOT 4)	INVOICE-TYPE DESCRIPTION	PERIOD DATE	TERM-DESCRIPTION G/L	ACCOUNT NO
Oli 2014 Oli 2018-031 PASADERA TRACT 23062 (LOT 4) Oli 2004 (General Fund D.J. TARMS) 840.00 840.00 (General Fund D.J. TARMS) 840.00 840.00 (General Fund D.J. TARMS) 1840.00 840.00 Record For all Oliver Color Total Oliver Color Total	2019242 2018-031 PASADERA TRACT 29062 (LOT 4)	11-19 11/01/19 N N N	-NET30 FROM INVOICE	2010
Second S	Line Description	G/L Account No	Unit(s) Unit Cost	Amount
		01 2004	1 840.00 RMS)	840.00
200 LIMBERT ST				
NOTICE TYPE DESCRIPTION				
Notice	200 LAMBERT CT *** VENDOR	MO1 / CAMCON DIDE & COUDTY TVO	_	
			EDM DECORDEDAM C/I	AGGOIDIE NO
Description				
Number Compute Compu				
Number Compute Compu		G/L Account No 	Unit(s) Unit Cost	Amount 726.45
DET 4340		(Wtr. Oper. Fund Wate	r Operating Op Supp/Expense)
NOTICE-TYPE DESCRIPTION PERIOD DATE TERM-DESCRIPTION G/L ACCOUNT NO 1703282 2016 FORD F-350 TRUCK (4596510) LEASE PYMT-11/2019 11-19 11/01/19 N N N N A-NET30 FROM INVOICE 2010				
1703282 2016 FORD F-350 TRUCK (4596510) LEASE PYMT-11/2019 1-19 11/01/19 N N N A-NET30 FROM INVOICE 2010	DEPT 43401 *** VENDOR.: FO		=	=======
2016 FORD F-350 TRUCK (4596510) LEASE PYMT-11/2019	DEPT 43401 *** VENDOR.: FO. P.O. BOX 67000	3 (FORD MOTOR CREDIT COMPANY LLC)	=	
Communications 10/04/19-11/03/19 Communications	DEPT 43401 *** VENDOR.: FO. P.O. BOX 67000 INVOICE-TYPE DESCRIPTION 1703282 2016 FORD F-350 TRUCK (4596510) LEASE PYMT-	3 (FORD MOTOR CREDIT COMPANY LLC) PERIOD DATE 72019 11-19 11/01/19 N N N A	ERM-DESCRIPTION G/L :	ACCOUNT NO
Vendor Total	DEPT 43401 *** VENDOR.: FO. P.O. BOX 67000 INVOICE-TYPE DESCRIPTION 1703282 2016 FORD F-350 TRUCK (4596510) LEASE PYMT- Line Description	3 (FORD MOTOR CREDIT COMPANY LLC) PERIOD DATE T /2019 11-19 11/01/19 N N N A G/L Account No	ERM-DESCRIPTION G/L : -NET30 FROM INVOICE : Unit(s) Unit Cost	ACCOUNT No
P.O BOX 740407	DEPT 43401 *** VENDOR.: FO. P.O. BOX 67000 INVOICE-TYPE DESCRIPTION 1703282 2016 FORD F-350 TRUCK (4596510) LEASE PYMT- Line Description	3 (FORD MOTOR CREDIT COMPANY LLC) PERIOD DATE T /2019 11-19 11/01/19 N N N A G/L Account No 19 01 4220 4150	ERM-DESCRIPTION G/LNET30 FROM INVOICE : Unit(s) Unit Cost 1 3479.93 ase-Purchase)	ACCOUNT No 2010 Amount 3479.93
Notice	DEPT 43401 *** VENDOR.: FO. P.O. BOX 67000 INVOICE-TYPE DESCRIPTION 1703282 2016 FORD F-350 TRUCK (4596510) LEASE PYMT- Line Description	3 (FORD MOTOR CREDIT COMPANY LLC) PERIOD DATE T /2019 11-19 11/01/19 N N N A G/L Account No 19 01 4220 4150	ERM-DESCRIPTION G/L : -NET30 FROM INVOICE Unit(s) Unit Cost 1 3479.93 ase-Purchase)	ACCOUNT No 2010 Amount 3479.93
102419 COMMUNICATIONS 10/04/19-11/03/19 11-19 10/04/19 N N N A-NET30 FROM INVOICE 2010	DEPT 43401	PERIOD DATE T //2019 11-19 11/01/19 N N N A G/L Account No 19 01 4220 4150 (General Fund Fire Le	ERM-DESCRIPTION G/L : -NET30 FROM INVOICE Unit(s) Unit Cost 1 3479.93 ase-Purchase) Invoice Extension> Vendor Total>	ACCOUNT No 2010 Amount 3479.93 3479.93
102419 COMMUNICATIONS 10/04/19-11/03/19 11-19 10/04/19 N N N A-NET30 FROM INVOICE 2010	DEPT 43401	PERIOD DATE T /2019 11-19 11/01/19 N N N A G/L Account No 19 01 4220 4150 (General Fund Fire Le	ERM-DESCRIPTION G/L : -NET30 FROM INVOICE Unit(s) Unit Cost 1 3479.93 ase-Purchase) Invoice Extension> Vendor Total>	ACCOUNT No 2010 Amount 3479.93 3479.93
0001 COMMUNICATIONS 10/04/19-11/03/19 001 4220 1150 1 61.41 61.41 0002 COMMUNICATIONS 10/04/19-11/03/19 003 COMMUNICATIONS 10/04/19-11/03/19 004 COMMUNICATIONS 10/04/19-11/03/19 005 COMMUNICATIONS 10/04/19-11/03/19 006 COMMUNICATIONS 10/04/19-11/03/19 007 COMMUNICATIONS 10/04/19-11/03/19 008 COMMUNICATIONS 10/04/19-11/03/19 009 COMMUNICATIONS 10/04/19-11/03/19 009 COMMUNICATIONS 10/04/19-11/03/19 009 COMMUNICATIONS 10/04/19-11/03/19 009 COMMUNICATIONS 10/04/19-11/03/19 000 COMMUNICATIONS 10/04/19-11/03/19	DEPT 43401	PERIOD DATE T //2019 11-19 11/01/19 N N N A G/L Account No 19 01 4220 4150 (General Fund Fire Le	ERM-DESCRIPTION G/L: -NET30 FROM INVOICE Unit(s) Unit Cost 1 3479.93 ase-Purchase) Invoice Extension> Vendor Total>	ACCOUNT No 2010 Amount 3479.93 3479.93
0001 COMMUNICATIONS 10/04/19-11/03/19 001 4220 1150 1 61.41 61.41 0002 COMMUNICATIONS 10/04/19-11/03/19 003 COMMUNICATIONS 10/04/19-11/03/19 004 COMMUNICATIONS 10/04/19-11/03/19 005 COMMUNICATIONS 10/04/19-11/03/19 006 COMMUNICATIONS 10/04/19-11/03/19 007 COMMUNICATIONS 10/04/19-11/03/19 008 COMMUNICATIONS 10/04/19-11/03/19 009 COMMUNICATIONS 10/04/19-11/03/19 009 COMMUNICATIONS 10/04/19-11/03/19 009 COMMUNICATIONS 10/04/19-11/03/19 009 COMMUNICATIONS 10/04/19-11/03/19 000 COMMUNICATIONS 10/04/19-11/03/19	DEPT 43401	PERIOD DATE T /2019 11-19 11/01/19 N N N A G/L Account No 19 01 4220 4150 (General Fund Fire Le	ERM-DESCRIPTION G/L : -NET30 FROM INVOICE Unit(s) Unit Cost 1 3479.93 ase-Purchase) Invoice Extension> Vendor Total>	ACCOUNT No 2010 Amount 3479.93 3479.93
0002 COMMUNICATIONS 10/04/19-11/03/19 01 4105 1150 1 122.82 122.82 (General Fund Administration Communications) 1 122.82 (General Fund Administration Communications) 1 122.82 122.82 (General Fund Finance Communications) 1 122.82 122.82 (General Fund Finance Communications) 1 122.82 122.82 (General Fund Finance Communications) 1 1 184.23 184.23 (General Fund Police Communications) 1 1 184.23 184.23 (General Fund Fund Fund Fund Fund Fund Fund Fund	DEPT 43401	PERIOD DATE T G/L ACCOUNT NO 19 01 4220 4150 (General Fund Fire Le ROO1 (FRONTIER COMMUNICATIONS) PERIOD DATE T 11-19 10/04/19 N N N A	ERM-DESCRIPTION G/L : -NET30 FROM INVOICE Unit(s) Unit Cost 1 3479.93 ase-Purchase) Invoice Extension> Vendor Total> ERM-DESCRIPTION G/L : -NET30 FROM INVOICE :	ACCOUNT No 2010 Amount 3479.93 3479.93
0003 COMMUNICATIONS 10/04/19-11/03/19 01 4120 1150 1 122.82 122.82 (General Fund Finance Communications) 0004 COMMUNICATIONS 10/04/19-11/03/19 01 4200 1150 1 184.23 184.23 (General Fund Police Communications) 0005 COMMUNICATIONS 10/04/19-11/03/19 01 4105 1150 1 61.41 61.41 (General Fund Administration Communications) 0006 COMMUNICATIONS 10/04/19-11/03/19 01 4405 1150 1 61.41 61.41 (General Fund Bldg and Safety Communications)	DEPT 43401	PERIOD DATE G/L Account No (General Fund Fire Le TOTAL STATE ST	ERM-DESCRIPTION G/L: -NET30 FROM INVOICE Unit(s) Unit Cost 1 3479.93 ase-Purchase) Invoice Extension> Vendor Total> ERM-DESCRIPTION G/L: -NET30 FROM INVOICE Unit(s) Unit Cost 1 61.41	ACCOUNT No 2010 Amount 3479.93 3479.93 ACCOUNT No 2010 Amount
0004 COMMUNICATIONS 10/04/19-11/03/19 01 4200 1150 1 184.23 184.23 (General Fund Police Communications) 0005 COMMUNICATIONS 10/04/19-11/03/19 01 4105 1150 1 61.41 61.41 (General Fund Administration Communications) 0006 COMMUNICATIONS 10/04/19-11/03/19 01 4405 1150 1 61.41 61.41 (General Fund Administration Communications) 01 4405 1150 1 61.41 61.41 (General Fund Bldg and Safety Communications)	DEPT 43401	PERIOD DATE T //2019 11-19 11/01/19 N N N A G/L Account No 19 01 4220 4150 (General Fund Fire Le 11-19 10/04/19 N N N A G/L Account No 10 01 4220 1150 (General Fund Fire Communications)	ERM-DESCRIPTION G/L: -NET30 FROM INVOICE Unit(s) Unit Cost 1 3479.93 ase-Purchase) Invoice Extension> Vendor Total> ERM-DESCRIPTION G/L: -NET30 FROM INVOICE : Unit(s) Unit Cost 1 61.41 mmunications) 1 122.82	ACCOUNT No 2010 Amount 3479.93 3479.93 ACCOUNT No 2010 Amount 61.41
0005 COMMUNICATIONS 10/04/19-11/03/19 01 4105 1150 1 61.41 61.41 (General Fund Administration Communications) 01 4405 1150 1 61.41 61.41 (General Fund Bldg and Safety Communications) 01 4405 1150 1 61.41 61.41 61.41 61.41	DEPT 43401 P.O. BOX 67000 INVOICE-TYPE DESCRIPTION 1703282 2016 FORD F-350 TRUCK (4596510) LEASE PYMT- Line Description 0001 2016 FORD F-350 TRUCK (4596510) LEASE PYMT-11/2 P.O BOX 740407 *** VENDOR.: INVOICE-TYPE DESCRIPTION 102419 COMMUNICATIONS 10/04/19-11/03/19 Line Description 0001 COMMUNICATIONS 10/04/19-11/03/19 0002 COMMUNICATIONS 10/04/19-11/03/19	PERIOD DATE TOMPANY LLC) PERIOD DATE TOMPANY LLC) PERIOD DATE TOMPANY LLC) G/L ACCOUNT NO 19 01 4220 4150 (General Fund Fire Le 11-19 10/04/19 N N N A G/L ACCOUNT NO 11-19 10/04/19 N N N A G/L ACCOUNT NO 11-19 10/04/19 N N N A G/L ACCOUNT NO 11-19 10/04/19 N N N A G/L ACCOUNT NO 11-19 10/04/19 N N N N A G/L ACCOUNT NO 11-19 10/04/19 N N N N A G/L ACCOUNT NO 11-19 1150 (General Fund Fire Count No 11-19 1150 (General Fund Administration of 14120 1150)	ERM-DESCRIPTION G/L : -NET30 FROM INVOICE Unit(s) Unit Cost 1 3479.93 ase-Purchase) Invoice Extension> Vendor Total> ERM-DESCRIPTION G/L : -NET30 FROM INVOICE Unit(s) Unit Cost 1 61.41 mmunications) 1 122.82 cration Communications) 1 122.82	ACCOUNT No 2010 Amount 3479.93 3479.93 ACCOUNT No 2010 Amount 61.41 122.82
0006 COMMUNICATIONS 10/04/19-11/03/19 01 4405 1150 1 61.41 61.41 (General Fund Bldg and Safety Communications)	DEPT 43401	PERIOD DATE T // 2019 11-19 11/01/19 N N N A G/L Account No 19 01 4220 4150 (General Fund Fire Le 11-19 10/04/19 N N N A G/L Account No 10 01 4220 1150 (General Fund Fire Conduction No 10 1 4220 1150 (General Fund Fire Conduction No 10 4120 1150 (General Fund Administation No (General Fund Finance 01 4200 1150 (General Fund Finance 01 4200 1150	ERM-DESCRIPTION G/L: -NET30 FROM INVOICE Unit(s) Unit Cost 1 3479.93 ase-Purchase) Invoice Extension> Vendor Total> ERM-DESCRIPTION G/L: -NET30 FROM INVOICE Unit(s) Unit Cost 1 61.41 mmunications) 1 122.82 cration Communications) 1 122.82 Communications) 1 184.23	ACCOUNT No 2010 Amount 3479.93 3479.93 ACCOUNT No 2010 Amount 61.41 122.82 122.82
	DEPT 43401 P.O. BOX 67000 INVOICE-TYPE DESCRIPTION 1703282 2016 FORD F-350 TRUCK (4596510) LEASE PYMT- Line Description 0001 2016 FORD F-350 TRUCK (4596510) LEASE PYMT-11/3 P.O BOX 740407 *** VENDOR.: INVOICE-TYPE DESCRIPTION 102419 COMMUNICATIONS 10/04/19-11/03/19 Line Description 0001 COMMUNICATIONS 10/04/19-11/03/19 0002 COMMUNICATIONS 10/04/19-11/03/19 0003 COMMUNICATIONS 10/04/19-11/03/19 0004 COMMUNICATIONS 10/04/19-11/03/19	PERIOD DATE T 2019 11-19 11/01/19 N N N A	ERM-DESCRIPTION G/L : -NET30 FROM INVOICE Unit(s) Unit Cost 1 3479.93 ase-Purchase) Invoice Extension> Vendor Total> ERM-DESCRIPTION G/L : -NET30 FROM INVOICE Unit(s) Unit Cost 1 61.41 mmunications) 1 122.82 cration Communications) 1 122.82 Communications) 1 184.23 Communications) 1 61.41	ACCOUNT No 2010 Amount 3479.93 3479.93 3479.93 ACCOUNT No 2010 Amount 61.41 122.82 122.82 184.23
	DEPT 43401 P.O. BOX 67000 INVOICE-TYPE DESCRIPTION 1703282 2016 FORD F-350 TRUCK (4596510) LEASE PYMT- Line Description 0001 2016 FORD F-350 TRUCK (4596510) LEASE PYMT-11/3 INVOICE-TYPE DESCRIPTION 102419 COMMUNICATIONS 10/04/19-11/03/19 Line Description 0001 COMMUNICATIONS 10/04/19-11/03/19 0002 COMMUNICATIONS 10/04/19-11/03/19 0003 COMMUNICATIONS 10/04/19-11/03/19 0004 COMMUNICATIONS 10/04/19-11/03/19 0005 COMMUNICATIONS 10/04/19-11/03/19	PERIOD DATE T 2019 11-19 11/01/19 N N N A	ERM-DESCRIPTION G/L : 1 3479.93 ase-Purchase) Invoice Extension> Vendor Total> ERM-DESCRIPTION G/L : -NET30 FROM INVOICE Unit(s) Unit Cost 1 61.41 mmunications) 1 122.82 communications) 1 122.82 Communications) 1 184.23 Communications) 1 61.41 cration Communications) 1 61.41	ACCOUNT No 2010 Amount 3479.93 3479.93 3479.93 ACCOUNT No 2010 Amount 61.41 122.82 122.82 184.23 61.41

Vendor Total ----->

REPORT.: Nov 07 19 Thursday RUN....: Nov 07 19 Time: 13:13 Run By.: Esther Britt City of Guadalupe Invoice/Pre-Paid Check Audit Trail Batch B91107 - 13:13 PAGE: 012 ID #: PY-IP CTL.: GUA

	*** VENDOR.: GA	AR04 (F			
INVOICE-T	YPE DESCRIPTION		DATE	TERM-DESCRIPTION G/	L ACCOUNT No
110419	UNIFORM			A-NET30 FROM INVOICE	2010
Line	Description		G/L Account No	Unit(s) Unit Cost	
0001	UNIFORM		01 4220 0450 (General Fund Fire	1 105.97	
				Invoice Extension>	
				Vendor Total>	105.97
4479 HOLL				2006	
INVOICE-T	YPE DESCRIPTION	PERIOD		TERM-DESCRIPTION G/	
110619	DEPOSIT IS FULLY REFUINDABLE			A-NET30 FROM INVOICE	
Line	Description		G/L Account No	Unit(s) Unit Cost	Amount
0001	DEPOSIT IS FULLY REFUINDABLE		01 2044 (General Fund Audit	1 500.00 torium/Park Deposits)	500.00
				Invoice Extension>	500.00
				Vendor Total>	500.00
ANDRES CAN		(GONZALI	ZZ AUTOMOTRIZ INC.)		
	/PE DESCRIPTION			TERM-DESCRIPTION G/1	L ACCOUNT NO
	OIL CHANGE F/350 FORD (STREET)				2010
	Description			Unit(s) Unit Cost	
0001	OIL CHANGE F/350 FORD (STREET)		71 4454 1460 (MEASURE A MEASURE	1 48.92 A Vehicle Maintnc)	48.92
				Invoice Extension>	48.92
				Vendor Total>	
					48.92
D 0 D011	*** VENDOR.: GUA02 (GU	JADALUPE	HARDWARE COMPANY INC.		
P.O. BOX 3) TERM-DESCRIPTION G/I	L ACCOUNT NO
INVOICE-TY	337	PERIOD	DATE) TERM-DESCRIPTION G/I	L ACCOUNT NO
INVOICE-TY 182867	PE DESCRIPTION 125V OUTLET Description	PERIOD	DATE 10/31/19 N N N G/L Account No	TERM-DESCRIPTION G/I A-NET30 FROM INVOICE Unit(s) Unit Cost	L ACCOUNT No 2010 Amount
182867	PE DESCRIPTION 125V OUTLET	PERIOD	DATE 10/31/19 N N N G/L Account No 01 4145 1550	TERM-DESCRIPTION G/I A-NET30 FROM INVOICE Unit(s) Unit Cost 1 21.59 ling Mtce Op Supp/Expense)	L ACCOUNT No 2010 Amount 21.59
182867	037 (PE DESCRIPTION 125V OUTLET Description	PERIOD	DATE 10/31/19 N N N G/L Account No 01 4145 1550	TERM-DESCRIPTION G/I A-NET30 FROM INVOICE Unit(s) Unit Cost 1 21.59 ling Mtce Op Supp/Expense)	L ACCOUNT No 2010 Amount 21.59
INVOICE-TY 182867 Line 0001	PE DESCRIPTION 125V OUTLET Description 125V OUTLET	PERIOD11-19	DATE 10/31/19 N N N G/L Account No 01 4145 1550 (General Fund Build	TERM-DESCRIPTION G/I A-NET30 FROM INVOICE Unit(s) Unit Cost 1 21.59 ling Mtce Op Supp/Expense) Invoice Extension>	ACCOUNT No 2010 Amount 21.59
182867 Line 0001	PE DESCRIPTION 125V OUTLET Description 125V OUTLET	PERIOD PERIOD	DATE 10/31/19 N N N G/L Account No 01 4145 1550 (General Fund Build DATE 10/14/19 N N N	TERM-DESCRIPTION G/I A-NET30 FROM INVOICE Unit(s) Unit Cost 1 21.59 ling Mtce Op Supp/Expense) Invoice Extension> TERM-DESCRIPTION G/I A-NET30 FROM INVOICE	ACCOUNT No 2010 Amount 21.59 21.59 ACCOUNT No 2010
INVOICE-TY 182867 Line 0001 INVOICE-TY 183585 Line	PE DESCRIPTION 125V OUTLET Description 125V OUTLET	PERIOD PERIOD	DATE 10/31/19 N N N G/L Account No 01 4145 1550 (General Fund Build DATE 10/14/19 N N N	TERM-DESCRIPTION G/I A-NET30 FROM INVOICE Unit(s) Unit Cost 1 21.59 ling Mtce Op Supp/Expense) Invoice Extension> TERM-DESCRIPTION G/I A-NET30 FROM INVOICE	ACCOUNT No 2010 Amount 21.59 21.59 ACCOUNT No 2010
INVOICE-TY 182867 Line 0001 INVOICE-TY 183585 Line	OPE DESCRIPTION 125V OUTLET Description 125V OUTLET OPE DESCRIPTION SAFTEY CAR PLUGS Description	PERIOD PERIOD	DATE 10/31/19 N N N G/L Account No 01 4145 1550 (General Fund Build DATE 10/14/19 N N N G/L Account No 71 4454 1550	TERM-DESCRIPTION G/I A-NET30 FROM INVOICE Unit(s) Unit Cost 1 21.59 ling Mtce Op Supp/Expense) Invoice Extension> TERM-DESCRIPTION G/I	ACCOUNT No 2010 Amount 21.59 21.59 ACCOUNT No 2010
INVOICE-TY 182867 Line 0001 INVOICE-TY 183585 Line	PE DESCRIPTION 125V OUTLET Description 125V OUTLET PE DESCRIPTION SAFTEY CAR PLUGS Description	PERIOD PERIOD	DATE 10/31/19 N N N G/L Account No 01 4145 1550 (General Fund Build DATE 10/14/19 N N N G/L Account No 71 4454 1550	TERM-DESCRIPTION G/I A-NET30 FROM INVOICE Unit(s) Unit Cost 1 21.59 ling Mtce Op Supp/Expense) Invoice Extension> TERM-DESCRIPTION G/I A-NET30 FROM INVOICE Unit(s) Unit Cost 1 36.72	ACCOUNT No 2010 Amount 21.59 21.59 2.1.59 ACCOUNT No 2010 Amount 36.72
INVOICE-TY 182867 Line 0001 INVOICE-TY 183585 Line 0001	PE DESCRIPTION 125V OUTLET Description 125V OUTLET PE DESCRIPTION SAFTEY CAR PLUGS Description SAFTEY CAR PLUGS	PERIOD PERIOD 11-19 PERIOD	DATE 10/31/19 N N N G/L Account No 01 4145 1550 (General Fund Build DATE 10/14/19 N N N G/L Account No 71 4454 1550 (MEASURE A MEASURE	TERM-DESCRIPTION G/I A-NET30 FROM INVOICE Unit(s) Unit Cost 1 21.59 ling Mtce Op Supp/Expense) Invoice Extension> TERM-DESCRIPTION G/I A-NET30 FROM INVOICE Unit(s) Unit Cost 1 36.72 A Op Supp/Expense) Invoice Extension> TERM-DESCRIPTION G/I	ACCOUNT No 2010 Amount 21.59 21.59 21.59 ACCOUNT No 2010 Amount 36.72 36.72
INVOICE-TY 182867 Line 0001 INVOICE-TY 183585 Line 0001	PE DESCRIPTION 125V OUTLET Description 125V OUTLET PE DESCRIPTION SAFTEY CAR PLUGS Description SAFTEY CAR PLUGS	PERIOD PERIOD 11-19 PERIOD PERIOD	DATE 10/31/19 N N N G/L Account No 01 4145 1550 (General Fund Build DATE 10/14/19 N N N G/L Account No 71 4454 1550 (MEASURE A MEASURE	TERM-DESCRIPTION G/I A-NET30 FROM INVOICE Unit(s) Unit Cost 1 21.59 ling Mtce Op Supp/Expense) Invoice Extension> TERM-DESCRIPTION G/I A-NET30 FROM INVOICE Unit(s) Unit Cost 1 36.72 A Op Supp/Expense) Invoice Extension> TERM-DESCRIPTION G/I	ACCOUNT No 2010 Amount 21.59 21.59 21.59 ACCOUNT No 2010 Amount 36.72 36.72
INVOICE-TY 182867 Line 0001 INVOICE-TY 183585 Line 0001 INVOICE-TY 183809 Line	PE DESCRIPTION 125V OUTLET Description 125V OUTLET PE DESCRIPTION SAFTEY CAR PLUGS Description SAFTEY CAR PLUGS	PERIOD	DATE 10/31/19 N N N G/L Account No 01 4145 1550 (General Fund Build DATE 10/14/19 N N N G/L Account No 71 4454 1550 (MEASURE A MEASURE DATE DATE	TERM-DESCRIPTION G/I A-NET30 FROM INVOICE Unit(s) Unit Cost 1 21.59 ling Mtce Op Supp/Expense) Invoice Extension> TERM-DESCRIPTION G/I A-NET30 FROM INVOICE Unit(s) Unit Cost 1 36.72 A Op Supp/Expense) Invoice Extension> TERM-DESCRIPTION G/I A-NET30 FROM INVOICE Unit(s) Unit Cost	ACCOUNT No 2010 Amount 21.59 21.59 21.59 ACCOUNT No 2010 Amount 36.72 36.72

Invoice Extension --->

REPORT.: Nov 07 19 Thursday Cit RUN: Nov 07 19 Time: 13:13 Invoice/Pre- Run By.: Esther Britt Batch	y of Guad Paid Chec B91107 -	dalupe ck Audit Trail · 13:13		PAGE: 013 ID #: PY-IP CTL.: GUA
*** VENDOR.: GUA02 (g
P.O. BOX 337				/L ACCOUNT No
INVOICE-TYPE DESCRIPTION	11-19	10/30/19 N N N	A-NET30 FROM INVOICE	2010
Line Description			Unit(s) Unit Cost	
0001 4 POLE TERMINAL			1 15.98	
TOTAL THAT IN THE		(General Fund Buil	ding Mtce Op Supp/Expense)	13.70
			Invoice Extension>	15.98
INVOICE-TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION G	/L ACCOUNT No
183896 EXTENSION CORD			A-NET30 FROM INVOICE	
Line Description		G/L Account No	Unit(s) Unit Cost	Amount
0001 EXTENSION CORD		71 4454 1550		17.26
			Invoice Extension>	
INVOICE-TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION G,	L ACCOUNT NO
183903 ENGINE DEGREASER, OUT DOOR CORD	11-19	10/31/19 N N N	A-NET30 FROM INVOICE	2010
Line Description		G/L Account No	Unit(s) Unit Cost	Amount
0001 ENGINE DEGREASER, OUT DOOR CORD			1 58.29 A Op Supp/Expense)	58.29
			Invoice Extension>	58.29
INVOICE-TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION G,	L ACCOUNT NO
183955 PAINT CAP,LOCKWASH,FENDER WASHER,GORILLA TAPE	11-19	10/31/19 N N N	A-NET30 FROM INVOICE	2010
Line Description		G/L Account No	Unit(s) Unit Cost	
0001 PAINT CAP,LOCKWASH,FENDER WASHER,GORILLA TAPE		G/L Account No 71 4454 1550		
INVOICE-TYPE DESCRIPTION	DEBTOD		A Op Supp/Expense) Invoice Extension> TERM-DESCRIPTION G/	
183987 BATTERIES			A-NET30 FROM INVOICE	
	11-19	G/L Account No		
Line Description 0001 BATTERIES		01 4145 1550	Unit(s) Unit Cost	12.41
		(General Fund Bullo	ling Mtce Op Supp/Expense) Invoice Extension>	
INVOICE-TYPE DESCRIPTION	מסדממ	DATE	TERM-DESCRIPTION G/	T. ACCOUNT NO

183989 HEAD LAMP, PLASTIC TRASH CAN, TOOL MAGNETIC LEVEL				
Line Description			Unit(s) Unit Cost	
0001 HEAD LAMP, PLASTIC TRASH CAN, TOOL MAGNETIC LEVEL		12 4425 1550 (Wst.Wtr.Op.Fund Wa	1 49.58 stewater Op Supp/Expense)	
			Invoice Extension>	
184116 1 TOOL 32" GRABBERS	11-19	10/22/19 N N N	A-NET30 FROM INVOICE	2010
Line Description			Unit(s) Unit Cost	
0001 1 TOOL 32" GRABBERS		71 4454 1550 (MEASURE A MEASURE	A Op Supp/Expense)	
•			Invoice Extension>	15.10
INVOICE-TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION G/	L ACCOUNT No
184606 TAPE, CUTTER, JIGSAW, PVC			A-NET30 FROM INVOICE	
Line Description		G/L Account No	Unit(s) Unit Cost	Amount
0001 TAPE, CUTTER, JIGSAW, PVC			1 60.70	
		(General Fund Build	ing Mtce Op Supp/Expense)	
			Invoice Extension>	60.70

REPORT.: Nov 07 19 Thursday RUN....: Nov 07 19 Time: 13:13 Run By.: Esther Britt City of Guadalupe Invoice/Pre-Paid Check Audit Trail Batch B91107 - 13:13 PAGE: 014 ID #: PY-IP CTL.: GUA

INVOICE-I	337 "YPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION G	/L ACCOUNT
	TYPE DESCRIPTION WINDEX, CAR WASH SOAP			A-NET30 FROM INVOICE	
	Description				
	WINDEX, CAR WASH SOAP		71 4454 1550	Unit(s) Unit Cost	
001	WINDEA, CAR WASH SOAP			A Op Supp/Expense)	
				Invoice Extension>	15.
	YPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION G	/L ACCOUNT
	BAR & CHAIN OIL, DIESEL GLOVES, ENGINEER GLOVES				
ine	Description		G/L Account No	Unit(s) Unit Cost	Amount
	BAR & CHAIN OIL, DIESEL GLOVES, ENGINEER GLOVES		71 4454 1550		
				Invoice Extension>	27.
NVOICE-T	YPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION G	
	PUSH BROOM, BOX CUTTER			A-NET30 FROM INVOICE	
ine	Description		G/L Account No	Unit(s) Unit Cost	Amount
001	PUSH BROOM, BOX CUTTER		10 4420 1550	1 39.93 ater Operating Op Supp/Expens	39.
				Invoice Extension>	39.
	YPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION G	L ACCOUNT
	PINE SOL, SPRAY BOTTLE, PUSH BROOM			A-NET30 FROM INVOICE	
ine	Description		G/L Account No	Unit(s) Unit Cost	
001	PINE SOL, SPRAY BOTTLE, PUSH BROOM		01 4145 1550	1 40.14 ling Mtce Op Supp/Expense)	40.
	YPE DESCRIPTION	PERIOD	DATE	Invoice Extension> TERM-DESCRIPTION G,	40.
	YPE DESCRIPTION CONNECTOR, WIRE STRIPPERS			TERM-DESCRIPTION G,	40.
184800	CONNECTOR, WIRE STRIPPERS Description		10/28/19 N N N	TERM-DESCRIPTION G,	/L ACCOUNT :
184800	CONNECTOR, WIRE STRIPPERS		10/28/19 N N N G/L Account No 01 4145 1550	TERM-DESCRIPTION G, A-NET30 FROM INVOICE Unit(s) Unit Cost	/L ACCOUNT : 2010 Amount
184800	CONNECTOR, WIRE STRIPPERS Description		10/28/19 N N N G/L Account No 01 4145 1550	TERM-DESCRIPTION G, A-NET30 FROM INVOICE Unit(s) Unit Cost 1 75.90	40. /L ACCOUNT 2010 Amount 75.
184800 ine 001	CONNECTOR, WIRE STRIPPERS Description CONNECTOR, WIRE STRIPPERS YPE DESCRIPTION	11-19	10/28/19 N N N G/L Account No 01 4145 1550 (General Fund Build	TERM-DESCRIPTION G, A-NET30 FROM INVOICE Unit(s) Unit Cost 1 75.90 ling Mtce Op Supp/Expense) Invoice Extension> TERM-DESCRIPTION G,	ACCOUNT 2010 Amount 75. 75.
184800	CONNECTOR, WIRE STRIPPERS Description CONNECTOR, WIRE STRIPPERS	11-19	10/28/19 N N N G/L Account No 01 4145 1550 (General Fund Build	TERM-DESCRIPTION G, A-NET30 FROM INVOICE Unit(s) Unit Cost 1 75.90 ding Mtce Op Supp/Expense) Invoice Extension>	ACCOUNT 2010 Amount 75. 75.
184800 ine 001 WOICE-T 184865	CONNECTOR, WIRE STRIPPERS Description CONNECTOR, WIRE STRIPPERS YPE DESCRIPTION BRWN TNT, SCOURING STICK Description	11-19	DATE 10/18/19 N N N G/L Account No 01 4145 1550 (General Fund Build DATE 10/18/19 N N N	TERM-DESCRIPTION G, A-NET30 FROM INVOICE Unit(s) Unit Cost 1 75.90 ling Mtce Op Supp/Expense) Invoice Extension> TERM-DESCRIPTION G, A-NET30 FROM INVOICE Unit(s) Unit Cost	40. /L ACCOUNT 2010 Amount 75. 75. /L ACCOUNT: 2010 Amount
184800 ne 01 VOICE-T 184865	CONNECTOR, WIRE STRIPPERS Description CONNECTOR, WIRE STRIPPERS YPE DESCRIPTION BRWN TNT, SCOURING STICK	11-19	DATE 10/18/19 N N N G/L Account No 01 4145 1550 (General Fund Build DATE 10/18/19 N N N G/L Account No 01 4300 1550	TERM-DESCRIPTION G, A-NET30 FROM INVOICE Unit(s) Unit Cost 1 75.90 ling Mtce Op Supp/Expense) Invoice Extension> TERM-DESCRIPTION G, A-NET30 FROM INVOICE Unit(s) Unit Cost 1 16.79	40. /L ACCOUNT 2010 Amount 75. 75. /L ACCOUNT 2010 Amount
184800 ne 01 VOICE-T 184865	CONNECTOR, WIRE STRIPPERS Description CONNECTOR, WIRE STRIPPERS YPE DESCRIPTION BRWN TNT, SCOURING STICK Description	11-19	DATE 10/18/19 N N N G/L Account No 01 4145 1550 (General Fund Build DATE 10/18/19 N N N G/L Account No 01 4300 1550	TERM-DESCRIPTION G, A-NET30 FROM INVOICE Unit(s) Unit Cost 1 75.90 ling Mtce Op Supp/Expense) Invoice Extension> TERM-DESCRIPTION G, A-NET30 FROM INVOICE Unit(s) Unit Cost	40. /L ACCOUNT 2010 Amount 75. /L ACCOUNT 2010 Amount 16.
184800 Ine 001 IVOICE-T 184865 Ine	CONNECTOR, WIRE STRIPPERS Description CONNECTOR, WIRE STRIPPERS YPE DESCRIPTION BRWN TNT, SCOURING STICK Description BRWN TNT, SCOURING STICK YPE DESCRIPTION	PERIOD 11-19	DATE O[L Account No O1 4145 1550 (General Fund Build DATE 10/18/19 N N N G/L Account No O1 4300 1550 (General Fund Parks	TERM-DESCRIPTION G, A-NET30 FROM INVOICE Unit(s) Unit Cost 1 75.90 ling Mtce Op Supp/Expense) Invoice Extension> TERM-DESCRIPTION G, A-NET30 FROM INVOICE Unit(s) Unit Cost 1 16.79 & Rec Op Supp/Expense) Invoice Extension> TERM-DESCRIPTION G,	40. /L ACCOUNT 2010 Amount 75. /L ACCOUNT 2010 Amount 16. /L ACCOUNT
184800 lne 001 WOICE-T 184865	CONNECTOR, WIRE STRIPPERS Description CONNECTOR, WIRE STRIPPERS YPE DESCRIPTION BRWN TNT, SCOURING STICK Description BRWN TNT, SCOURING STICK YPE DESCRIPTION	PERIOD 11-19	10/28/19 N N N G/L Account No 01 4145 1550 (General Fund Build DATE 10/18/19 N N N G/L Account No 01 4300 1550 (General Fund Parks	TERM-DESCRIPTION G, A-NET30 FROM INVOICE Unit(s) Unit Cost 1 75.90 ling Mtce Op Supp/Expense) Invoice Extension> TERM-DESCRIPTION G, A-NET30 FROM INVOICE Unit(s) Unit Cost 1 16.79 & Rec Op Supp/Expense) Invoice Extension>	A0. /L ACCOUNT 2010 Amount 75. /L ACCOUNT 2010 Amount 16. /L ACCOUNT
184800 line 001 WOICE-T 184865 line 001	CONNECTOR, WIRE STRIPPERS Description CONNECTOR, WIRE STRIPPERS YPE DESCRIPTION BRWN TNT, SCOURING STICK Description BRWN TNT, SCOURING STICK YPE DESCRIPTION CABLE TIES, MASONRY BIT Description	PERIOD 11-19	DATE Of Account No Of 4145 1550 (General Fund Build DATE 10/18/19 N N N G/L Account No Of 4300 1550 (General Fund Parks DATE DATE	TERM-DESCRIPTION G, A-NET30 FROM INVOICE Unit(s) Unit Cost 1 75.90 ling Mtce Op Supp/Expense) Invoice Extension> TERM-DESCRIPTION G, A-NET30 FROM INVOICE Unit(s) Unit Cost 1 16.79 & Rec Op Supp/Expense) Invoice Extension> TERM-DESCRIPTION G, A-NET30 FROM INVOICE	40. /L ACCOUNT 2010 Amount 75. /L ACCOUNT 2010 Amount 16. /L ACCOUNT 2010
184800 lne 001 IVOICE-T 184865 lne 001 IVOICE-T 184915	CONNECTOR, WIRE STRIPPERS Description CONNECTOR, WIRE STRIPPERS YPE DESCRIPTION BRWN TNT, SCOURING STICK Description BRWN TNT, SCOURING STICK YPE DESCRIPTION CABLE TIES, MASONRY BIT	PERIOD 11-19	DATE DATE 10/18/19 N N N G/L Account No 01 4145 1550 (General Fund Build DATE 10/18/19 N N N G/L Account No 01 4300 1550 (General Fund Parks DATE 10/17/19 N N N G/L Account No	TERM-DESCRIPTION G, A-NET30 FROM INVOICE Unit(s) Unit Cost 1 75.90 ling Mtce Op Supp/Expense) Invoice Extension> TERM-DESCRIPTION G, A-NET30 FROM INVOICE Unit(s) Unit Cost 1 16.79 & Rec Op Supp/Expense) Invoice Extension> TERM-DESCRIPTION G, A-NET30 FROM INVOICE Unit(s) Unit Cost 1 21.78	40. /L ACCOUNT 2010 Amount 75. /L ACCOUNT 2010 Amount 16. /L ACCOUNT 2010
184800 ne 01 VOICE-T 184865 ne 184915	CONNECTOR, WIRE STRIPPERS Description CONNECTOR, WIRE STRIPPERS YPE DESCRIPTION BRWN TNT, SCOURING STICK Description BRWN TNT, SCOURING STICK YPE DESCRIPTION CABLE TIES, MASONRY BIT Description	PERIOD 11-19	DATE DATE 10/18/19 N N N G/L Account No 01 4145 1550 (General Fund Build DATE 10/18/19 N N N G/L Account No 01 4300 1550 (General Fund Parks DATE 10/17/19 N N N G/L Account No	TERM-DESCRIPTION G, A-NET30 FROM INVOICE Unit(s) Unit Cost 1 75.90 ling Mtce Op Supp/Expense) Invoice Extension> TERM-DESCRIPTION G, A-NET30 FROM INVOICE Unit(s) Unit Cost 1 16.79 & Rec Op Supp/Expense) Invoice Extension> TERM-DESCRIPTION G, A-NET30 FROM INVOICE	40. /L ACCOUNT 2010 Amount 75. /L ACCOUNT 2010 Amount 16. /L ACCOUNT 2010 Amount 2010 Amount 2010
184800 .ne	CONNECTOR, WIRE STRIPPERS Description CONNECTOR, WIRE STRIPPERS YPE DESCRIPTION BRWN TNT, SCOURING STICK Description BRWN TNT, SCOURING STICK YPE DESCRIPTION CABLE TIES, MASONRY BIT Description	PERIOD 11-19	DATE DATE 10/18/19 N N N G/L Account No 01 4145 1550 (General Fund Build DATE 10/18/19 N N N G/L Account No 01 4300 1550 (General Fund Parks DATE 10/17/19 N N N G/L Account No	TERM-DESCRIPTION G, A-NET30 FROM INVOICE Unit(s) Unit Cost 1 75.90 ling Mtce Op Supp/Expense) Invoice Extension> TERM-DESCRIPTION G, A-NET30 FROM INVOICE Unit(s) Unit Cost 1 16.79 & Rec Op Supp/Expense) Invoice Extension> TERM-DESCRIPTION G, A-NET30 FROM INVOICE Unit(s) Unit Cost 1 21.78	40. /L ACCOUNT 2010 Amount 75. /L ACCOUNT 2010 Amount 16. /L ACCOUNT 2010 Amount 2010 Amount 2010
184800 lne	CONNECTOR, WIRE STRIPPERS Description CONNECTOR, WIRE STRIPPERS YPE DESCRIPTION BRWN TNT, SCOURING STICK Description BRWN TNT, SCOURING STICK YPE DESCRIPTION CABLE TIES, MASONRY BIT Description	PERIOD PERIOD 11-19 PERIOD 11-19	DATE Of Account No Of 4145 1550 (General Fund Build DATE 10/18/19 N N N G/L Account No Of 4300 1550 (General Fund Parks DATE 10/17/19 N N N G/L Account No 71 4454 1550 (MEASURE A MEASURE	TERM-DESCRIPTION G, A-NET30 FROM INVOICE Unit(s) Unit Cost 1 75.90 ling Mtce Op Supp/Expense) Invoice Extension> TERM-DESCRIPTION G, A-NET30 FROM INVOICE Unit(s) Unit Cost 1 16.79 & Rec Op Supp/Expense) Invoice Extension> TERM-DESCRIPTION G, A-NET30 FROM INVOICE Unit(s) Unit Cost 1 21.78 A Op Supp/Expense) Invoice Extension> TERM-DESCRIPTION G, A-NET30 FROM INVOICE Unit(s) Unit Cost 1 21.78 A Op Supp/Expense) Invoice Extension>	40. /L ACCOUNT 2010 Amount 75. /L ACCOUNT 2010 Amount 16. /L ACCOUNT 2010 Amount 2010 Amount 21.
184800 line 001 NVOICE-T 184865 line 001	CONNECTOR, WIRE STRIPPERS Description CONNECTOR, WIRE STRIPPERS YPE DESCRIPTION BRWN TNT, SCOURING STICK Description BRWN TNT, SCOURING STICK YPE DESCRIPTION CABLE TIES, MASONRY BIT Description CABLE TIES, MASONRY BIT	PERIOD 11-19 PERIOD 11-19	DATE DATE 10/18/19 N N N G/L Account No 01 4145 1550 (General Fund Build DATE 10/18/19 N N N G/L Account No 01 4300 1550 (General Fund Parks DATE 10/17/19 N N N G/L Account No	TERM-DESCRIPTION G, A-NET30 FROM INVOICE Unit(s) Unit Cost 1 75.90 ling Mtce Op Supp/Expense) Invoice Extension> TERM-DESCRIPTION G, A-NET30 FROM INVOICE Unit(s) Unit Cost 1 16.79 & Rec Op Supp/Expense) Invoice Extension> TERM-DESCRIPTION G, A-NET30 FROM INVOICE Unit(s) Unit Cost 1 21.78 A Op Supp/Expense) Invoice Extension> TERM-DESCRIPTION G, A-NET30 FROM INVOICE Unit(s) Unit Cost 1 21.78 A Op Supp/Expense) Invoice Extension>	40. /L ACCOUNT 2010 Amount 75. 75. /L ACCOUNT 2010 Amount 16. /L ACCOUNT 2010 Amount 21. L ACCOUNT
184800 ine	CONNECTOR, WIRE STRIPPERS Description CONNECTOR, WIRE STRIPPERS YPE DESCRIPTION BRWN TNT, SCOURING STICK Description BRWN TNT, SCOURING STICK YPE DESCRIPTION CABLE TIES, MASONRY BIT Description CABLE TIES, MASONRY BIT	PERIOD 11-19 PERIOD 11-19	DATE DATE 10/17/19 N N N G/L Account No 01 4145 1550 (General Fund Build DATE 10/18/19 N N N G/L Account No 01 4300 1550 (General Fund Parks DATE 10/17/19 N N N G/L Account No 71 4454 1550 (MEASURE A MEASURE	TERM-DESCRIPTION G, A-NET30 FROM INVOICE Unit(s) Unit Cost 1 75.90 ling Mtce Op Supp/Expense) Invoice Extension> TERM-DESCRIPTION G, A-NET30 FROM INVOICE Unit(s) Unit Cost 1 16.79 & Rec Op Supp/Expense) Invoice Extension> TERM-DESCRIPTION G, A-NET30 FROM INVOICE Unit(s) Unit Cost 1 21.78 A Op Supp/Expense) Invoice Extension> TERM-DESCRIPTION G, A-NET30 FROM INVOICE Unit(s) Unit Cost 1 21.78 A Op Supp/Expense) Invoice Extension>	40. /L ACCOUNT 2010 Amount 75. /L ACCOUNT 2010 Amount 16. /L ACCOUNT 2010 Amount 21. /L ACCOUNT 2010 Amount 21.

PAGE: 015 ID #: PY-IP CTL.: GUA

Vendor Total ---->

400.00 ==========

REPORT.: Nov 07 19 Thursday RUN....: Nov 07 19 Time: 13:13 Run By.: Esther Britt City of Guadalupe Invoice/Pre-Paid Check Audit Trail Batch B91107 - 13:13

	K 337 TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION G/1	ACCOUNT NO
18500	TYPE DESCRIPTION KEYS AND TAGS	11-19	11/01/19 N N N	A-NET30 FROM INVOICE	2010
	Description		G/L Account No	Unit(s) Unit Cost	Amount
0001	KEYS AND TAGS		01 4145 1550		13.96
				Invoice Extension>	13.96
	TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION G/I	ACCOUNT NO
18501	9 PIPE CUTTER			A-NET30 FROM INVOICE	
	Description		G/L Account No		
0001	PIPE CUTTER			1 6.67 ding Mtce Op Supp/Expense)	6.67
				Invoice Extension>	6.67
	TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION G/I	ACCOUNT NO
	8 WATER HOSE	11-19	11/04/19 N N N	A-NET30 FROM INVOICE	2010
Line	Description		G/L Account No	Unit(s) Unit Cost 1 48.59	Amount
0001	WATER HOSE			1 48.59 ding Mtce Op Supp/Expense)	48.59
				Invoice Extension>	48.59
NVOICE-	TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION G/L	ACCOUNT NO
18516	8 PHONE HOLDER	11-19	11/04/19 N N N	A-NET30 FROM INVOICE	
ine	Description		G/L Account No	Unit(s) Unit Cost	
0001	PHONE HOLDER		10 4420 1550 (Wtr. Oper. Fund W	1 12.95 ater Operating Op Supp/Expense	
				Invoice Extension>	12.95
NVOICE-	TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION G/L	ACCOUNT No
	7 PLUMBERS TAPE			A-NET30 FROM INVOICE	
Line	Description			Unit(s) Unit Cost	Amount
0001	PLUMBERS TAPE		01 4145 1550		3.43
				Invoice Extension>	3.43
				Vendor Total>	
.10025 . 002					
490 1070	H ST *** VENDOR.: GUAD9 (GUADA	ALUPE POI	JICE OFFICER ASSOCIAT.	ion)	
	TYPE DESCRIPTION	DEPTOD	DATE	TEDM_DESCRIPTION C./T.	ACCOUNT NO
NVOICE-	TYPE DESCRIPTION 9 DJ ANTHONY MARTINEZ REIMBURSEMENT		DATE 		ACCOUNT No
11061:				A-NET30 FROM INVOICE	2010
NVOICE-1	9 DJ ANTHONY MARTINEZ REIMBURSEMENT		10/21/19 N N N G/L Account No	A-NET30 FROM INVOICE Unit(s) Unit Cost 1 300.00	2010 Amount
NVOICE-1	9 DJ ANTHONY MARTINEZ REIMBURSEMENT Description		10/21/19 N N N G/L Account No	A-NET30 FROM INVOICE Unit(s) Unit Cost 1 300.00 RIBUTIONS)	2010 Amount
NVOICE- 11061: ine 001	9 DJ ANTHONY MARTINEZ REIMBURSEMENT Description DJ ANTHONY MARTINEZ REIMBURSEMENT	11-19	10/21/19 N N N G/L Account No 01 3479 (General Fund CONT)	A-NET30 FROM INVOICE Unit(s) Unit Cost 1 300.00 RIBUTIONS) Invoice Extension>	2010 Amount 300.00
NVOICE-	9 DJ ANTHONY MARTINEZ REIMBURSEMENT Description	11-19	10/21/19 N N N G/L Account No 01 3479 (General Fund CONT)	A-NET30 FROM INVOICE Unit(s) Unit Cost 1 300.00 RIBUTIONS)	2010 Amount 300.00 300.00
NVOICE-	9 DJ ANTHONY MARTINEZ REIMBURSEMENT Description DJ ANTHONY MARTINEZ REIMBURSEMENT TYPE DESCRIPTION	11-19	10/21/19 N N N G/L Account No 01 3479 (General Fund CONT)	A-NET30 FROM INVOICE Unit(s) Unit Cost 1 300.00 RIBUTIONS) Invoice Extension> TERM-DESCRIPTION G/L A-NET30 FROM INVOICE Unit(s) Unit Cost	2010 Amount 300.00 300.00 ACCOUNT No

REPORT.: Nov 07 19 Thursday

Line

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Description

40YD ROLLOFF @ WWTP

City of Guadalupe

RUN...: Nov 07 19 Time: 13:13 Invoice/Pre-Paid Check Audit Trail Run By.: Esther Britt Batch B91107 - 13:13

1421 PARK STREET VENDOR .: GWA01 (GREAT WESTERN ALARM & COMMUNICATION INC.) INVOICE-TYPE DESCRIPTION PERIOD DATE TERM-DESCRIPTION G/L ACCOUNT NO 191001752 303 OBISPO WATER STORAGE TANK FOR 10/2019 11-19 11/01/19 N N N A-NET30 FROM INVOICE 2010 Description G/L Account No Unit(s) Unit Cost Amount 0001 303 OBISPO WATER STORAGE TANK FOR 10/2019 10 4420 1150 1 47.00 (Wtr. Oper. Fund Water Operating Communications) Invoice Extension ----> Vendor Total ----> 47.00 _____ *** VENDOR.: HAC01 (HACH COMPANY) 2207 COLLECTIONS CENTER DRIVE INVOICE-TYPE DESCRIPTION PERIOD DATE G/L ACCOUNT No TERM-DESCRIPTION 11688278 DI WATER DEIONIZED (TESTING) 11-19 10/18/19 N N N A-NET30 FROM INVOICE 2010 Description Line Amount 0001 DI WATER DEIONIZED (TESTING) (Wtr. Oper. Fund Water Operating Op Supp/Expense) Invoice Extension ----> 45.88 Vendor Total ----> 45.88 ______ VENDOR.: HAM03 (KEN HAMPIAN) INVOICE-TYPE DESCRIPTION PERIOD DATE TERM-DESCRIPTION G/L ACCOUNT NO ETHICS AND GOOD GOVERNMENT WORKSHOP (COUNCIL) 11-19 10/30/19 N N N A-NET30 FROM INVOICE 2010 Description Unit Cost Amount Line G/L Account No Unit(s) 0001 01 4105 2150 ETHICS AND GOOD GOVERNMENT WORKSHOP (COUNCIL) 1000.00 (General Fund Administration Profl Services) Invoice Extension ----> 1000.00 Vendor Total ----> 1000 00 _____ VENDOR .: HAY01 (HAYWARD LUMBER COMPANY) 800 W. BETTERAVIA INVOICE-TYPE DESCRIPTION PERIOD DATE TERM-DESCRIPTION G/L ACCOUNT NO 164733200 REPAIRS AT THE SENIOR CENTER BRONZE DOOR SWEEP 11-19 10/14/19 N N N A-NET30 FROM INVOICE G/L Account No Description Line G/L Account No Unit(s) Unit Cost Amount. ----------26.08 0001 REPAIRS AT THE SENIOR CENTER BRONZE DOOR SWEEP 01 4145 1550 1 26.08 (General Fund Building Mtce Op Supp/Expense) Invoice Extension ----> 26.08 26.08 Vendor Total ----> _____ A DIVISION OF WASTE MANAGEMENT *** VENDOR.: HEA01 (HEALTH SANITATION SERVICE INC.) P O BOX 541065 INVOICE-TYPE DESCRIPTION PERIOD DATE TERM-DESCRIPTION G/L ACCOUNT NO 40YD ROLLOFF @ WWTP 11-19 10/01/19 N N N A-NET30 FROM INVOICE 2010

> Vendor Total ----> 241 45 -------

Invoice Extension ---->

Amount.

241.45

G/L Account No Unit(s) Unit Cost
12 4425 1450

(Wst.Wtr.Op.Fund Wastewater Facilities Main)

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City of Guadalupe Invoice/Pre-Paid Check Audit Trail Batch B91107 - 13:13 REPORT.: Nov 07 19 Thursday RUN....: Nov 07 19 Time: 13:13 Run By.: Esther Britt PAGE: 017 ID #: PY-IP CTL.: GUA

Rair Dy	Baccii 1	031101 -	. 13:13		CIL.: GOA
P.O. BOX	825 *** VENDOR.: HEN01	(HENDER	SON PETROLEUM CORP)		
INVOICE-	TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION G/	ACCOUNT NO
16996	7 FUEL 10/01/19-10/15/19) FIRE, WATER, STREET & WWTP	11-19	10/15/19 N N N	A-NET30 FROM INVOICE	2010
Line	Description		G/L Account No	Unit(s) Unit Cost	Amount
0001	FUEL 10/01/19-10/15/19) FIRE		01 4220 1560	1 382.82	382.82
0002	FUEL 10/01/19-10/15/19) WATER		10 4420 1560	Fuels/Lubricant) 1 400.04	400.04
0003	FUEL 10/01/19-10/15/19) WWTP		12 4425 1560	ater Operating Fuels/Lubricant 1 248.20	248.20
0004	FUEL 10/01/19-10/15/19) STREET		(Wst.Wtr.Op.Fund W 71 4454 1560	astewater Fuels/Lubricant) 1 300.35 A Fuels/Lubricant)	
				Invoice Extension>	1331.41
INVOICE-	TYPE DESCRIPTION		DATE	TERM-DESCRIPTION G/I	
169988	FUEL (10/1/19- 10/15/19)			A-NET30 FROM INVOICE	
	Description		G/L Account No	Unit(s) Unit Cost	Amount
0001	FUEL (10/1/19- 10/15/19)		01 4220 1560	1 900.80	
			(General Fund Fire	Fuels/Lubricant) Invoice Extension>	900.80
TWOTCE-9	TYPE DESCRIPTION	DEDIOD	DA CUC	MUDAN DEGODERATION 6/1	a coornin ar-
		11-19		A-NET30 FROM INVOICE	
	Description		G/L Account No	Unit(s) Unit Cost 1 388.52	Amount
0001			01 4220 1560 (General Fund Fire	1 388.52 Fuels/Lubricant) 1 97.53	388.52
0002	FUEL		(Wtr. Oper. Fund Wa	ater Operating Fuels/Lubricant)
0003	FUEL		12 4425 1560 (Wst.Wtr.Op.Fund Wa	1 213.40 astewater Fuels/Lubricant)	213.40
0004	FUEL		(Wtr. Oper. Fund Wa	1 145.97 ater Operating Fuels/Lubricant)
0005	FUEL		71 4454 1560	1 457.03 A Fuels/Lubricant)	457.03
				Invoice Extension>	1302.45
INVOICE-T	TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION G/L	ACCOUNT No
170263	B FUEL			A-NET30 FROM INVOICE	
Line	Description		G/L Account No	Unit(s) Unit Cost	Amount
0001	FUEL		01 4200 1560	1 1287.90	1287.90
			(General Fund Polic	ce Fuels/Lubricant) Invoice Extension>	1287.90
				Vendor Total>	4822.56
P.O. BOX				TERM-DESCRIPTION G/L	ACCOUNT NO
				A-NET30 FROM INVOICE	
Line	Description		G/L Account No	Unit(s) Unit Cost	Amount
0001	NO PARKING SIGNS - W.MAIN		71 4454 1550	1 111.48	
			(MEASURE A MEASURE	A Op Supp/Expense)	
				Invoice Extension>	111.48
	YPE DESCRIPTION		DATE	TERM-DESCRIPTION G/L	ACCOUNT No
	BROWN HEM, STRIP LIGHT LIKABLE, MORTISE LOCKS SET				
Line	Description		G/L Account No		
0001	BROWN HEM, STRIP LIGHT LIKABLE, MORTISE LOCKS SET		01 4145 1550	1 98.86 ling Mtce Op Supp/Expense)	98.86
				Invoice Extension>	98.86

Vendor Total ----> 210.34

City of Guadalupe Invoice/Pre-Paid Check Audit Trail Batch B91107 - 13:13

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Vendor Total ---->

10208.91 ========

P.O. BOX 1516 *** VENDOR.: ICOO1	. (ICONIX	WATERWORKS (US) INC.)		
INVOICE-TYPE DESCRIPTION			TERM-DESCRIPTION G	
913042123 PLAIN END PIPE 20'			A-NET30 FROM INVOICE	
Line Description		G/L Account No	Unit(s) Unit Cost	Amount
0001 PLAIN END PIPE 20'		10 4420 1550 (Wtr. Oper. Fund W	1 129.60 ater Operating Op Supp/Expens	129.60
			Invoice Extension>	129.60
			Vendor Total>	129.60
3070 SKYWAY DR. *** VENDOR.: IND01			30000	
INVOICE-TYPE DESCRIPTION		DATE	TERM-DESCRIPTION G,	L ACCOUNT No
87731 PHYSICAL EXAM (ZARATE)	11-19	10/11/19 N N N	A-NET30 FROM INVOICE	2010
Line Description		G/L Account No	Unit(s) Unit Cost	
0001 PHYSICAL EXAM (ZARATE)		01 4120 2150		
		(delicted rend rind	Invoice Extension>	295 00
			IIIVOICE HADDIDIOII	275.00
INVOICE-TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION G	L ACCOUNT No
87732 BASIC PHYSICAL EXAM (SAGISI)	11-19	10/11/19 N N N	A-NET30 FROM INVOICE	2010
Line Description		G/L Account No	Unit(s) Unit Cost	Amount
0001 BASIC PHYSICAL EXAM (SAGISI)		10 4420 2150 (Wtr. Oper. Fund W	1 295.00 ater Operating Profl Services	295.00
4352 FOXENWOOD CIRCLE *** VENDOR.: I			Vendor Total>	
LARRY APPEL	NT01 (INT	EGRITY PLANNING)		=========
LARRY APPEL INVOICE-TYPE DESCRIPTION	NT01 (INT PERIOD	EGRITY PLANNING) DATE	TERM-DESCRIPTION G/	
LARRY APPEL INVOICE-TYPE DESCRIPTION	NT01 (INT	EGRITY PLANNING) DATE		L ACCOUNT NO
LARRY APPEL INVOICE-TYPE DESCRIPTION	PERIOD	EGRITY PLANNING) DATE 11/01/19 N N N	TERM-DESCRIPTION G/	L ACCOUNT NO 2010 Amount
LARRY APPEL INVOICE-TYPE DESCRIPTION 22 PROFESSIONAL SERVICES FOR 10/2019 Line Description	PERIOD	DATE 11/01/19 N N N G/L Account No 01 4405 2150	TERM-DESCRIPTION G/ A-NET30 FROM INVOICE Unit(s) Unit Cost	L ACCOUNT No 2010 Amount
LARRY APPEL INVOICE-TYPE DESCRIPTION 22 PROFESSIONAL SERVICES FOR 10/2019 Line Description	PERIOD	DATE 11/01/19 N N N G/L Account No 01 4405 2150 (General Fund Bldg 01 4405 2150	TERM-DESCRIPTION G/ A-NET30 FROM INVOICE Unit(s) Unit Cost 1 5481.50 and Safety Profl Services) 1 370.50	L ACCOUNT No 2010 Amount
LARRY APPEL INVOICE-TYPE DESCRIPTION 22 PROFESSIONAL SERVICES FOR 10/2019 Line Description 0001 PROFESSIONAL SERVICES FOR 10/19 GENERAL PLANNING	PERIOD	DATE 11/01/19 N N N G/L Account No 01 4405 2150 (General Fund Bldg 01 4405 2150 (General Fund Bldg	TERM-DESCRIPTION G/ A-NET30 FROM INVOICE Unit(s) Unit Cost 1 5481.50 and Safety Profl Services) 1 370.50 and Safety Profl Services) 2 95.00	L ACCOUNT No 2010 Amount 5481.50
LARRY APPEL INVOICE-TYPE DESCRIPTION 22 PROFESSIONAL SERVICES FOR 10/2019 Line Description 0001 PROFESSIONAL SERVICES FOR 10/19 GENERAL PLANNING 0002 PROFESSIONAL SERVICES FOR 10/19 ZONING CLEARANCE	PERIOD	DATE 11/01/19 N N N G/L Account No 01 4405 2150 (General Fund Bldg 01 4405 2150 (General Fund Bldg 01 2004 (General Fund Bldg 01 2004	TERM-DESCRIPTION G/ A-NET30 FROM INVOICE Unit(s) Unit Cost 1 5481.50 and Safety Profl Services) 1 370.50 and Safety Profl Services) 2 95.00	L ACCOUNT No 2010 Amount 5481.50 370.50 95.00 1852.50
LARRY APPEL INVOICE-TYPE DESCRIPTION 22 PROFESSIONAL SERVICES FOR 10/2019 Line Description 0001 PROFESSIONAL SERVICES FOR 10/19 GENERAL PLANNING 0002 PROFESSIONAL SERVICES FOR 10/19 ZONING CLEARANCE 0003 PROFESSIONAL SERVICES FOR 10/19 DJ FARMS-PASADERA	PERIOD	DATE 11/01/19 N N N G/L Account No 01 4405 2150 (General Fund Bldg 01 4405 2150 (General Fund Bldg 01 2004 (General Fund Bldg 01 2004	TERM-DESCRIPTION G/ A-NET30 FROM INVOICE Unit(s) Unit Cost 1 5481.50 and Safety Profl Services) 1 370.50 and Safety Profl Services) 1 95.00 FARMS) 1 1852.50	L ACCOUNT No 2010 Amount 5481.50 370.50 95.00 1852.50
LARRY APPEL INVOICE-TYPE DESCRIPTION 22 PROFESSIONAL SERVICES FOR 10/2019 Line Description 0001 PROFESSIONAL SERVICES FOR 10/19 GENERAL PLANNING 0002 PROFESSIONAL SERVICES FOR 10/19 ZONING CLEARANCE 0003 PROFESSIONAL SERVICES FOR 10/19 DJ FARMS-PASADERA	PERIOD	DATE 11/01/19 N N N G/L Account No 01 4405 2150 (General Fund Bldg 01 4405 2150 (General Fund Bldg 01 2004 (General Fund Bldg 01 2004	TERM-DESCRIPTION G/ A-NET30 FROM INVOICE Unit(s) Unit Cost 1 5481.50 and Safety Profl Services) 1 370.50 and Safety Profl Services) 1 95.00 FARMS) 1 1852.50 alupe Ranch Acres)	L ACCOUNT No 2010 Amount 5481.50 370.50 95.00 1852.50
LARRY APPEL INVOICE-TYPE DESCRIPTION 22 PROFESSIONAL SERVICES FOR 10/2019 Line Description 0001 PROFESSIONAL SERVICES FOR 10/19 GENERAL PLANNING 0002 PROFESSIONAL SERVICES FOR 10/19 ZONING CLEARANCE 0003 PROFESSIONAL SERVICES FOR 10/19 DJ FARMS-PASADERA	PERIOD (INT. 11-19	DATE 11/01/19 N N N G/L Account No 01 4405 2150 (General Fund Bldg 01 4405 2150 (General Fund Bldg 01 2004 (General Fund D.J. 01 2271 (General Fund Guada	TERM-DESCRIPTION G/ A-NET30 FROM INVOICE Unit(s) Unit Cost 1 5481.50 and Safety Profl Services) 1 370.50 and Safety Profl Services) 1 95.00 FARMS) 1 1852.50 alupe Ranch Acres) Invoice Extension>	L ACCOUNT No 2010 Amount 5481.50 370.50 95.00 1852.50 7799.50
LARRY APPEL INVOICE-TYPE DESCRIPTION 22 PROFESSIONAL SERVICES FOR 10/2019 Line Description 0001 PROFESSIONAL SERVICES FOR 10/19 GENERAL PLANNING 0002 PROFESSIONAL SERVICES FOR 10/19 ZONING CLEARANCE 0003 PROFESSIONAL SERVICES FOR 10/19 DJ FARMS-PASADERA 0004 PROFESSIONAL SERVICES FOR 10/19 HOUSING AUTHORITY	PERIOD 11-19 IRR01 (III PERIOD	DATE 11/01/19 N N N G/L Account No 01 4405 2150 (General Fund Bldg 01 4405 2150 (General Fund Bldg 01 2004 (General Fund D.J. 01 2271 (General Fund Guada	TERM-DESCRIPTION G/ A-NET30 FROM INVOICE Unit(s) Unit Cost 1 5481.50 and Safety Profl Services) 1 370.50 and Safety Profl Services) 1 95.00 FARMS) 1 1852.50 alupe Ranch Acres) Invoice Extension> Vendor Total>	L ACCOUNT NO 2010 Amount 5481.50 370.50 95.00 1852.50 7799.50
LARRY APPEL INVOICE-TYPE DESCRIPTION 22 PROFESSIONAL SERVICES FOR 10/2019 Line Description 0001 PROFESSIONAL SERVICES FOR 10/19 GENERAL PLANNING 0002 PROFESSIONAL SERVICES FOR 10/19 ZONING CLEARANCE 0003 PROFESSIONAL SERVICES FOR 10/19 DJ FARMS-PASADERA 0004 PROFESSIONAL SERVICES FOR 10/19 HOUSING AUTHORITY 2460 GRACIA WAY *** VENDOR.:	PERIOD IRRO1 (INT. PERIOD IRRO1 (I) PERIOD	DATE 11/01/19 N N N G/L Account No 01 4405 2150 (General Fund Bldg 01 4405 2150 (General Fund Bldg 01 2004 (General Fund D.J. 01 2271 (General Fund Guada	TERM-DESCRIPTION G/ A-NET30 FROM INVOICE Unit(s) Unit Cost 1 5481.50 and Safety Profl Services) 1 370.50 and Safety Profl Services) 1 95.00 FARMS) 1 1852.50 alupe Ranch Acres) Invoice Extension> Vendor Total>	L ACCOUNT No 2010 Amount 5481.50 370.50 95.00 1852.50 7799.50
LARRY APPEL INVOICE-TYPE DESCRIPTION 22 PROFESSIONAL SERVICES FOR 10/2019 Line Description 0001 PROFESSIONAL SERVICES FOR 10/19 GENERAL PLANNING 0002 PROFESSIONAL SERVICES FOR 10/19 ZONING CLEARANCE 0003 PROFESSIONAL SERVICES FOR 10/19 DJ FARMS-PASADERA 0004 PROFESSIONAL SERVICES FOR 10/19 HOUSING AUTHORITY 2460 GRACIA WAY *** VENDOR.:	PERIOD IRRO1 (INT. PERIOD IRRO1 (I) PERIOD	DATE 11/01/19 N N N G/L Account No 01 4405 2150 (General Fund Bldg 01 4405 2150 (General Fund Bldg 01 2004 (General Fund D.J. 01 2271 (General Fund Guada RRIGATION WEST) DATE 10/16/19 N N N G/L Account No	TERM-DESCRIPTION G/ A-NET30 FROM INVOICE Unit(s) Unit Cost 1 5481.50 and Safety Profl Services) 1 370.50 and Safety Profl Services) 1 95.00 FARMS) 1 1852.50 alupe Ranch Acres) Invoice Extension> Vendor Total> TERM-DESCRIPTION G/ A-NET30 FROM INVOICE	L ACCOUNT No 2010 Amount 5481.50 370.50 95.00 1852.50 7799.50 7799.50
LARRY APPEL INVOICE-TYPE DESCRIPTION 22 PROFESSIONAL SERVICES FOR 10/2019 Line Description 0001 PROFESSIONAL SERVICES FOR 10/19 GENERAL PLANNING 0002 PROFESSIONAL SERVICES FOR 10/19 ZONING CLEARANCE 0003 PROFESSIONAL SERVICES FOR 10/19 DJ FARMS-PASADERA 0004 PROFESSIONAL SERVICES FOR 10/19 HOUSING AUTHORITY 2460 GRACIA WAY *** VENDOR.: INVOICE-TYPE DESCRIPTION 2197879IN MAINLINE VALVE-IRRAGATION PIPING Line Description	PERIOD IRRO1 (INT. PERIOD IRRO1 (I) PERIOD	DATE 11/01/19 N N N G/L Account No 01 4405 2150 (General Fund Bldg 01 4405 2150 (General Fund Bldg 01 2004 (General Fund D.J. 01 2271 (General Fund Guada	TERM-DESCRIPTION G/ A-NET30 FROM INVOICE Unit(s) Unit Cost 1 5481.50 and Safety Profl Services) 1 370.50 and Safety Profl Services) 1 95.00 FARMS) 1 1852.50 alupe Ranch Acres) Invoice Extension> Vendor Total> TERM-DESCRIPTION G/ A-NET30 FROM INVOICE Unit(s) Unit Cost	L ACCOUNT No 2010 Amount 5481.50 370.50 95.00 1852.50 7799.50 7799.50 L ACCOUNT No 2010 Amount

REPORT.: Nov 07 19 Thursday RUN....: Nov 07 19 Time: 13:13

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3PT FIELD INTERVIEW REPORT

City of Guadalupe Invoice/Pre-Paid Check Audit Trail

RUN...: Nov 07 19 Time: 13:13 Invoice/Pre-Paid Check Audit Trail
Run By.: Esther Britt Batch B91107 - 13:13

*** VENDOR.: JAS01 (JAS PACIFIC, INC.) P.O. BOX 2002 PERIOD DATE INVOICE-TYPE DESCRIPTION G/L ACCOUNT NO TERM-DESCRIPTION PC5448 PLAN CHECK FOR 08/2019 11-19 09/05/19 N N N A-NET30 FROM INVOICE 2010 Description Line G/L Account No Unit(s) Unit Cost Amount PLAN CHECK FOR 08/2019 4217.50 0001 01 4405 2150 (General Fund Bldg and Safety Profl Services) Invoice Extension ----> 4217.50 INVOICE-TYPE DESCRIPTION TERM-DESCRIPTION G/L ACCOUNT No GENERAL PLANNING SERVICES- COMMUNITY DEVELOPMENT 11-19 10/05/19 N N N A-NET30 FROM INVOICE 2010 Description G/L Account No Unit(s) Unit Cost Amount 0001 GENERAL PLANNING SERVICES- COMMUNITY DEVELOPMENT 01 4405 2150 1550.00 (General Fund Bldg and Safety Profl Services) (General Fund D.J. FARMS) 0002 PASADERA 01 2004 6055.75 Invoice Extension ----> Vendor Total ----> 11823.25 *** VENDOR.: JAY01 (JAY CEE TROPHY CO., INC.) 120 N. ELIZABETH STREET INVOICE-TYPE DESCRIPTION PERTOD DATE TERM-DESCRIPTION G/L ACCOUNT NO 828805 BRONZE KEY, DESK LOGO, PLAGUE FOR ROBERT PERRAULT 11-19 11/01/19 N N A-NET30 FROM INVOICE 2010 /L Account No Unit(s) Unit Cost Amount

1 134.16 134.16 Line G/L Account No 01 4105 1550 0001 BRONZE KEY, DESK LOGO, PLAGUE FOR ROBERT PERRAULT (General Fund Administration Op Supp/Expense) Invoice Extension ----> Vendor Total ----> VENDOR.: JUL01 (ARISTON JULIAN) INVOICE-TYPE DESCRIPTION PERIOD DATE TERM-DESCRIPTION G/L ACCOUNT No FLOOR EDGER & FLOOR SANDER RENTALS-QUINN RENTAL 11-19 10/21/19 N N N A-NET30 FROM INVOICE 2010 Line G/L Account No Unit Cost Amount 0 1 109.44 10 Reimbursement for equipment rental & 0001 01 4145 1550 109.44 (General Fund Building Mtce Op Supp/Expense) Supplies - Recreation Room Floor 0002 109.43 01 4145 1550 109.43 1 (General Fund Building Mtce Op Supp/Expense) refinishing 0003 01 4145 1550 140.80 (General Fund Building Mtce Op Supp/Expense) Invoice Extension ----> 359.67 Vendor Total ----> 359.67 *** VENDOR.: KEN01 (KEN VERTREES PRINTERS INC.) 406 W. MAIN ST. INVOICE-TYPE DESCRIPTION PERIOD DATE TERM-DESCRIPTION G/L ACCOUNT No 195061 3PT FIELD INTERVIEW REPORT 11-19 10/22/19 N N N A-NET30 FROM INVOICE 2010 Unit Cost Am Description Line Unit(s) G/L Account No Amount

01 4200 1550

(General Fund Police Op Supp/Expense)

Vendor Total -----> 336.90

336.90

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Invoice Extension ---->

ID #: PY-IP

CTL.: GUA

REPORT.: Nov 07 19 Thursday RUN....: Nov 07 19 Time: 13:13 Run By.: Esther Britt

5100 COE AVENUE SPACE 140 INVOICE-TYPE DESCRIPTION

City of Guadalupe Invoice/Pre-Paid Check Audit Trail Batch B91107 - 13:13

PAGE: 020 ID #: PY-IP CTL.: GUA

INVOICE-	TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION G/	L ACCOUNT N
				A-NET30 FROM INVOICE	
	Description		G/L Account No	Unit(s) Unit Cost	Amount
0001	LANDSCAPE MAINTENANCE SERVICES RFP NOTICE		01 4105 1250		54.0
				Invoice Extension>	
				Vendor Total>	54.0
.O. BOX	823473 *** VENDOR.: LUT01 ()	
	TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION G/1	L ACCOUNT NO
	0 TEMPORARY HELP (RUIZ)			A-NET30 FROM INVOICE	
	Description		G/L Account No	Unit(s) Unit Cost	Amount
0001	TEMPORARY HELP (RUIZ)		10 4420 0150		
				Water Operating Temp Employees Invoice Extension>)
				INVOICE EXCENSION>	930.00
NVOICE-	TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION G/I	L ACCOUNT NO
1008413	3 TEMPORARY HELP	11-19	10/23/19 N N N	A-NET30 FROM INVOICE	2010
ina	Description		G/L Account No	Unit(s) Unit Cost	
	TEMPORARY HELP		10 4420 0150 (Wtr. Oper. Fund)	Water Operating Temp Employees	685.88
	***			Water Operating Temp Employees	685.88
	***			Water Operating Temp Employees Invoice Extension> Vendor Total>	685.88) 685.88
0001	TEMPORARY HELP		(Wtr. Oper. Fund)	Water Operating Temp Employees Invoice Extension> Vendor Total>	685.88
001 65 SHIRI	TEMPORARY HELP *** VENDOR:: MAGO1 ITYPE DESCRIPTION		(Wtr. Oper. Fund)	Water Operating Temp Employees Invoice Extension> Vendor Total> TERM-DESCRIPTION G/I	685.88 1615.88
0001 165 SHIRI INVOICE-T	TEMPORARY HELP LEY LANE *** VENDOR.: MAG01	(GILDAF	(Wtr. Oper. Fund) RDO & MARIA MAGANA) DATE	Water Operating Temp Employees Invoice Extension> Vendor Total>	685.88) 685.88 1615.88
65 SHIRI NVOICE-1	TEMPORARY HELP LEY LANE *** VENDOR.: MAGO1 TYPE DESCRIPTION PARKING CITATION - OVERPAYMENT Description	(GILDAF	(Wtr. Oper. Fund No. 10/29/19 N N No. 10/2 Account No. 10/20 No.	Water Operating Temp Employees Invoice Extension> Vendor Total> TERM-DESCRIPTION G/I A-NET30 FROM INVOICE Unit(s) Unit Cost	685.88 1615.88 1625.88 1615.88 2010 Amount
65 SHIRI NVOICE-T	TEMPORARY HELP LEY LANE *** VENDOR.: MAG01 TYPE DESCRIPTION PARKING CITATION - OVERPAYMENT	(GILDAF	(Wtr. Oper. Fund to the control of	Water Operating Temp Employees Invoice Extension> Vendor Total> TERM-DESCRIPTION G/I A-NET30 FROM INVOICE Unit(s) Unit Cost	685.88 1615.88 1615.88 2010 Amount 1.00
65 SHIRI NVOICE-T	TEMPORARY HELP LEY LANE *** VENDOR.: MAGO1 TYPE DESCRIPTION PARKING CITATION - OVERPAYMENT Description	(GILDAF	(Wtr. Oper. Fund to the control of	Water Operating Temp Employees Invoice Extension> Vendor Total> TERM-DESCRIPTION G/I A-NET30 FROM INVOICE Unit(s) Unit Cost	685.88 1615.88 1615.88 2010 Amount 1.00
0001 65 SHIRI INVOICE-T 110619	TEMPORARY HELP LEY LANE *** VENDOR.: MAGO1 TYPE DESCRIPTION PARKING CITATION - OVERPAYMENT Description	(GILDAF	(Wtr. Oper. Fund to the control of	Water Operating Temp Employees Invoice Extension> Vendor Total> TERM-DESCRIPTION G/I A-NET30 FROM INVOICE Unit(s) Unit Cost 1 1.00 Revenue - Police) Invoice Extension> Vendor Total>	685.88 1615.88 1615.88 2010 Amount 1.00
110619 Jine 10001	TEMPORARY HELP LEY LANE *** VENDOR.: MAGO1 TYPE DESCRIPTION PARKING CITATION - OVERPAYMENT Description PARKING CITATION - OVERPAYMENT PARKING CITATION - OVERPAYMENT (M. 742082 *** VENDOR.: MANO1 (M. 742082	(GILDAF	(Wtr. Oper. Fund No. 10/29/19 N N No. 10/20/19 N N No. 10/20/20/20/20/20/20/20/20/20/20/20/20/20	Water Operating Temp Employees Invoice Extension> Vendor Total> TERM-DESCRIPTION G/I A-NET30 FROM INVOICE Unit(s) Unit Cost 1 1.00 Revenue - Police) Invoice Extension> Vendor Total>	685.88 1615.88 1615.88 2010 Amount 1.00
65 SHIRI NVOICE-1 110619	TEMPORARY HELP LEY LANE *** VENDOR.: MAGO1 TYPE DESCRIPTION PARKING CITATION - OVERPAYMENT Description PARKING CITATION - OVERPAYMENT PARKING CITATION - OVERPAYMENT 742082 *** VENDOR.: MANO1 (M. MARRICA)	(GILDAF PERIOD - 11-19	(Wtr. Oper. Fund No. 10/29/19 N N N G/L Account No. 101 3643 (General Fund Miscount No. 101 Account No. 101	Water Operating Temp Employees Invoice Extension> Vendor Total> TERM-DESCRIPTION G/I A-NET30 FROM INVOICE Unit(s) Unit Cost 1 1.00 Revenue - Police) Invoice Extension> Vendor Total>	685.88 1615.88 1615.88 2010 Amount 1.00
65 SHIRI NVOICE-1 110619 ine 001	TEMPORARY HELP LEY LANE *** VENDOR.: MAGO1 TYPE DESCRIPTION PARKING CITATION - OVERPAYMENT Description PARKING CITATION - OVERPAYMENT PARKING CITATION - OVERPAYMENT 742082 *** VENDOR.: MANO1 (M. GITATION AND 1) (M. GITA	(GILDAF PERIOD - 11-19 ANAGED HE PERIOD	(Wtr. Oper. Fund to the control of	Water Operating Temp Employees Invoice Extension> Vendor Total> TERM-DESCRIPTION G/I A-NET30 FROM INVOICE Unit(s) Unit Cost 1 1.00 Revenue - Police) Invoice Extension> Vendor Total>	685.88 1615.88 1615.88 2010 Amount 1.00
001 65 SHIRI NVOICE-1 110619 ine 001	TEMPORARY HELP LEY LANE *** VENDOR.: MAGO1 TYPE DESCRIPTION PARKING CITATION - OVERPAYMENT Description PARKING CITATION - OVERPAYMENT PARKING CITATION - OVERPAYMENT 742082 *** VENDOR.: MANO1 (M. GITATION AND 1) (M. GITA	(GILDAF PERIOD - 11-19 ANAGED HE PERIOD	(Wtr. Oper. Fund to the control of	Water Operating Temp Employees Invoice Extension> Vendor Total> TERM-DESCRIPTION G/I A-NET30 FROM INVOICE Unit(s) Unit Cost 1 1.00 Revenue - Police) Invoice Extension> Vendor Total> Vendor Total>	685.88 1615.88 1615.88 L ACCOUNT No. 2010 Amount 1.00 1.00 2010 ACCOUNT No. 2010 AMount
001 65 SHIRI NVOICE-1 110619 ine 001 BOX ANK OF # NVOICE-1 RM045039 ine	TEMPORARY HELP *** VENDOR.: MAGO1 TYPE DESCRIPTION PARKING CITATION - OVERPAYMENT Description PARKING CITATION - OVERPAYMENT PARKING CITATION - OVERPAYMENT 742082 *** VENDOR.: MANO1 (M. M. M	(GILDAF PERIOD - 11-19 ANAGED HE PERIOD	COL ACCOUNT NO DATE 20/19/19 N N N G/L ACCOUNT NO DATE 20/17/19 N N N G/L ACCOUNT NO DATE	Water Operating Temp Employees Invoice Extension> Vendor Total> TERM-DESCRIPTION G/I A-NET30 FROM INVOICE Unit(s) Unit Cost 1 1.00 Revenue - Police) Invoice Extension> Vendor Total> Vendor Total> TERM-DESCRIPTION G/I A-NET30 FROM INVOICE Unit(s) Unit Cost 1 64.79 Departmentl Health Insuranc)	1615.88 1615.88 1615.88 1615.88 1615.88 1615.88 1615.88 1615.88 1615.88
110619 ine 0001	TEMPORARY HELP LEY LANE *** VENDOR.: MAGO1 TYPE DESCRIPTION PARKING CITATION - OVERPAYMENT Description PARKING CITATION - OVERPAYMENT PARKING CITATION - OVERPAYMENT 742082 *** VENDOR.: MANO1 (M. MERICA TYPE DESCRIPTION PROFESSIONAL SERVICE-GROUP HEALTH INSURANCE DESCRIPTION	(GILDAF PERIOD - 11-19 ANAGED HE PERIOD	COL ACCOUNT NO DATE 20/19/19 N N N G/L ACCOUNT NO DATE 20/17/19 N N N G/L ACCOUNT NO DATE	Water Operating Temp Employees Invoice Extension> Vendor Total> TERM-DESCRIPTION G/I A-NET30 FROM INVOICE Unit(s) Unit Cost 1 1.00 Revenue - Police) Invoice Extension> Vendor Total> Vendor Total> TERM-DESCRIPTION G/I A-NET30 FROM INVOICE Unit(s) Unit Cost 1 64.79 Departmentl Health Insuranc)	1615.88 1615.88 1615.88 1615.88 1615.88 1615.88 1615.88

PERIOD DATE TERM-DESCRIPTION G/L ACCOUNT No

REPORT.: Nov 07 19 Thursday RUN....: Nov 07 19 Time: 13:13 Run By.: Esther Britt

PAGE: 021 ID #: PY-IP CTL.: GUA

Invoice Extension ---->

Vendor Total ---->

383.96

383.96

City of Guadalupe Invoice/Pre-Paid Check Audit Trail Batch B91107 - 13:13

	PE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION G	L ACCOUNT N
110619				A-NET30 FROM INVOICE	
	Description		G/L Account No	Unit(s) Unit Cost	
	TODD BODEM, CITY ADM MOVING EXPENSES		01 4105 2150 (General Fund Admi		3000.0
				Invoice Extension>	3000.0
				Vendor Total>	3000.0
	*** VENDOR.: M			377	
		PERIOD		TERM-DESCRIPTION G/	L ACCOUNT N
				A-NET30 FROM INVOICE	
	Description		G/L Account No	Unit(s) Unit Cost	
	EXPENSES FOR KIDS DAY IN THE PARK-REIMBURSEMENT		01 3479 (General Fund CONT	1 49.88	
				Invoice Extension>	49.8
				Vendor Total>	49.8
	Description CAR WASH		01 4200 1550	Unit(s) Unit Cost 1 245.00 ce Op Supp/Expense)	245.0
				Invoice Extension>	
				Invoice Extension> Vendor Total>	
				Vendor Total>	245.0
GARDEN C JITE 300	COURT *** VENDOR.: MON03 (M	ONTEREY	BAY COMMUNITY POWER)	Vendor Total>	245.0
O GARDEN C JITE 300 NVOICE-TYE	COURT *** VENDOR.: MON03 (Me	PERIOD	BAY COMMUNITY POWER) DATE	Vendor Total>	245.0 245.0
O GARDEN C UITE 300 NVOICE-TYE GUA-1019 ine	COURT *** VENDOR.: MON03 (MODE DESCRIPTION IMPLEMENTATION PLAN REVISON COSTS Description	PERIOD	DATE	Vendor Total> TERM-DESCRIPTION G/ A-NET30 FROM INVOICE Unit(s) Unit Cost	245.0 245.0 L ACCOUNT N 2010 Amount
O GARDEN CUITE 300 NVOICE-TYP GUA-1019	COURT *** VENDOR.: MON03 (MOTE TO THE PROPERTY OF THE PROPERTY	PERIOD	DATE 09/18/19 N N N G/L Account No 101 4140 2350	Vendor Total> TERM-DESCRIPTION G/ A-NET30 FROM INVOICE Unit(s) Unit Cost	245.0 245.0 L ACCOUNT N 2010 Amount 6000.0
O GARDEN CUITE 300 NVOICE-TYPE	COURT *** VENDOR.: MON03 (MODEL OF THE PROPERTY OF THE PROPERT	PERIOD	DATE 09/18/19 N N N G/L Account No 101 4140 2350	Vendor Total> TERM-DESCRIPTION G/ A-NET30 FROM INVOICE Unit(s) Unit Cost 1 6000.00	245.0 245.0 L ACCOUNT N 2010 Amount 6000.0
O GARDEN CUITE 300 NVOICE-TYP GUA-1019	COURT *** VENDOR.: MON03 (MODEL OF THE PROPERTY OF THE PROPERT	PERIOD	DATE 09/18/19 N N N G/L Account No 101 4140 2350	Vendor Total> TERM-DESCRIPTION G/ A-NET30 FROM INVOICE Unit(s) Unit Cost 1 6000.00 Departmentl Svcs.Other Agen)	245.0 245.0 L ACCOUNT N 2010 Amount 6000.0
O GARDEN CUITE 300 NVOICE-TYP GUA-1019	COURT *** VENDOR.: MON03 (MODEL OF THE PROPERTY OF THE PROPERT	PERIOD 11-19	BAY COMMUNITY POWER) DATE 09/18/19 N N N G/L Account No 1 4140 2350 (General Fund Non-	Vendor Total> TERM-DESCRIPTION G/ A-NET30 FROM INVOICE Unit(s) Unit Cost 1 6000.00 Departmentl Svcs.Other Agen) Invoice Extension> Vendor Total>	245.0 245.0 LACCOUNT N 2010 Amount 6000.0
O GARDEN CUITE 300 NVOICE-TYF GUA-1019 ine 001 I	TOURT *** VENDOR.: MON03 (METER DESCRIPTION IMPLEMENTATION PLAN REVISON COSTS Description IMPLEMENTATION PLAN REVISON COSTS *** VENDOR.: NEW PE DESCRIPTION	PERIOD 11-19 G01 (MA	BAY COMMUNITY POWER) DATE 09/18/19 N N N G/L Account No 01 4140 2350 (General Fund Non-	Vendor Total> TERM-DESCRIPTION G/ A-NET30 FROM INVOICE Unit(s) Unit Cost 1 6000.00 Departmentl Svcs.Other Agen) Invoice Extension> Vendor Total> TERM-DESCRIPTION G/	245.0 245.0 L ACCOUNT N 2010 Amount 6000.0
O GARDEN CUITE 300 NVOICE-TYF GUA-1019 ine 001 I	COURT *** VENDOR.: MON03 (METER DESCRIPTION IMPLEMENTATION PLAN REVISON COSTS Description IMPLEMENTATION PLAN REVISON COSTS *** VENDOR.: NEC	PERIOD 11-19 G01 (MA	BAY COMMUNITY POWER) DATE 09/18/19 N N N G/L Account No 01 4140 2350 (General Fund Non-	Vendor Total> TERM-DESCRIPTION G/ A-NET30 FROM INVOICE Unit(s) Unit Cost 1 6000.00 Departmentl Svcs.Other Agen) Invoice Extension> Vendor Total>	245.0 245.0 L ACCOUNT N 2010 Amount 6000.0
GARDEN COUNTE 300 INVOICE-TYF GUA-1019 ine 10001 I	TOURT *** VENDOR.: MON03 (METER DESCRIPTION IMPLEMENTATION PLAN REVISON COSTS Description IMPLEMENTATION PLAN REVISON COSTS *** VENDOR.: NEC	PERIOD 11-19 G01 (MA	BAY COMMUNITY POWER) DATE 09/18/19 N N N G/L Account No 01 4140 2350 (General Fund Non-	Vendor Total> TERM-DESCRIPTION G/ A-NET30 FROM INVOICE Unit(s) Unit Cost 1 6000.00 Departmentl Svcs.Other Agen) Invoice Extension> Vendor Total>	245.0 245.0 245.0 L ACCOUNT N 2010 Amount 6000.0 6000.0

REPORT.: Nov 07 19 Thursday RUN...: Nov 07 19 Time: 13:13 Run By.: Esther Britt City of Guadalupe Invoice/Pre-Paid Check Audit Trail Batch B91107 - 13:13 PAGE: 022 ID #: PY-IP CTL.: GUA

			660 · · · 36806 · · · · 300600 · · · 30060	
TRAFFIC & SAFETY SOLUTIONS *** VENDOR.: NEXO- 13885 ALTON PARKWAY SUITEA INVOICE-TYPE DESCRIPTION	4 (NEXT	ECH SYSTEMS, INC.) DATE	TERM-DESCRIPTION	G/L ACCOUNT No
NEX19-344 LIGHT BAR W/CONFIRMATION LIGHTS,			A-NET30 FROM INVOICE	
Line Description		G/L Account No	Unit(s) Unit Cost	Amount
0001 LIGHT BAR W/CONFIRMATION LIGHTS,		71 4454 1400		
			Invoice Extension>	931.38
			Vendor Total>	931.38
P.O. BOX 3237 *** VENDOR.: NO				
INVOICE-TYPE DESCRIPTION		DATE	TERM-DESCRIPTION	G/L ACCOUNT No
432174 64E CHAIN LOOP,68DL CHAIN,PICCO			A-NET30 FROM INVOICE	
Line Description		G/L Account No	Unit(s) Unit Cost	Amount
0001 64E CHAIN LOOP, 68DL CHAIN, PICCO			1 135.27	135.27
		(MEASURE A MEASURE	A Equipment Maint)	
			Invoice Extension>	135.27
			Vendor Total>	135.27
P.O. BOX 153 *** VENDOR.: NOLO				
INVOICE-TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION (G/L ACCOUNT No
25258 TIRES, DISMOUNT&MOUNT, WHEEL BALANCING, TIRE DISPOSAL	11-19	10/03/19 N N N	A-NET30 FROM INVOICE	2010
Line Description		G/L Account No	Unit(s) Unit Cost	
0001 TIRES, DISMOUNT&MOUNT, WHEEL BALANCING, TIRE DISPOSAL		71 4454 1460	1 230.00 A Vehicle Maintnc)	
			Invoice Extension>	230.00
INVOICE-TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION (G/L ACCOUNT No
			A-NET30 FROM INVOICE	2010
Line Description		G/L Account No	Unit(s) Unit Cost	
0001 DISMOUNT&MOUNT, WHEEL BALANCING, TIRE DISPOSAL		71 4454 1460 (MEASURE A MEASURE	1 230.00	230.00
		ANOCHEM M ENOCHEM	Invoice Extension>	230.00
			Vendor Total>	460.00
P.O. BOX 1604 *** VENDOR.: NUN01 (MICHA				
INVOICE-TYPE DESCRIPTION	PERIOD		TERM-DESCRIPTION C	J/L ACCOUNT NO
6344 DJ FARMS CPS			A-NET30 FROM INVOICE	
Line Description		G/L Account No	Unit(s) Unit Cost	
0001 PRINCIPAL		01 2004	1 6401.85	
		(General Fund D.J.		
			Invoice Extension>	6401.85
INVOICE-TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION G	
6360 WATER RESORCE PLANNER	11-19	11/05/19 N N N	A-NET30 FROM INVOICE	2010
Line Description		G/L Account No	Unit(s) Unit Cost	
0001 WATER RESORCE PLANNER		01 2004 (General Fund D.J.	1 138.00	138.00
			Invoice Extension>	138.00

REPORT.: Nov 07 19 Thursday RUN....: Nov 07 19 Time: 13:13 Run By.: Esther Britt

City of Guadalupe Invoice/Pre-Paid Check Audit Trail Batch B91107 - 13:13

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P.O. BOX 1604 *** VENDOR.: NUN01 (MICH INVOICE-TYPE DESCRIPTION	HAEL K. N PERIOD			G/I AGGOVERN N-
INVOICE-11FE DESCRIPTION			TERM-DESCRIPTION	G/L ACCOUNT No
s.			Vendor Total	-> 6539.85
P.O. BOX 948 *** VENDOR.: NUT01	 (NU-TECH	PEST MANAGEMENT INC	.)	
INVOICE-TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No
0146081 TREATING GROUND SQUIRRELS	11-19		A-NET30 FROM INVOICE	
Line Description		G/L Account No	Unit(s) Unit Cos	st Amount
0001 PROFESSIONAL SERVICES		12 4425 2150 (Wst.Wtr.Op.Fund	1 112.0 Wastewater Profl Services)	
		,,	Invoice Extension	
			Vendor Total	> 112.00
DEPT 56-8510102155 *** VENDOR.: OFF01				
P.O. BOX 78004 INVOICE-TYPE DESCRIPTION	PERIOD		TERM-DESCRIPTION	C/I ACCOUNT NO
11416909 CABLE FOR POSTAGE MACHINE			A-NET30 FROM INVOICE	2010
Line Description			Unit(s) Unit Cos	
0001 CABLE FOR POSTAGE MACHINE		10 4420 4150		
0002 CABLE FOR POSTAGE MACHINE		(Wtr. Oper. Fund 12 4425 4150	Water Operating Lease-Purch 1 14.8	ase)
0003 INK			Wastewater Lease-Purchase) 1 12.9	
0004 INK		(General Fund Pol	lice Op Supp/Expense) 1 154.4	
		(General Fund Pol	lice Op Supp/Expense)	
			Invoice Extension	> 197.14
			Vendor Total	> 197.14
140 PACIFIC DUNES WAY *** VENDOR.:			9300	154(4,4);
INVOICE-TYPE DESCRIPTION	PERIOD		TERM-DESCRIPTION	*
	11-19		A-NET30 FROM INVOICE	
Line Description		G/L Account No	Unit(s) Unit Cos	t Amount
0001 REIMBURSE CLEANING DEPOSIT-SENIOR CENTER		01 2044	1 200.0 litorium/Park Deposits)	0 200.00
			Invoice Extension	> 200.00
			Vendor Total	> 200.00
P.O. BOX 997300 *** VENDOR: PAC01			. 308300	
INVOICE-TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No
103119 945 GUADALUPE ST (CLOCK TOWER) 09/28/19-10/28/19	11-19	10/28/19 N N N	A-NET30 FROM INVOICE	2010
Line Description		G/L Account No		
945 GUADALUPE ST (CLOCK TOWER) 09/28/19-10/28/19		65 4485 1000 (Guad.Light Dist	1 24.4 Gdlpe Light Dis Utilities)	
			Invoice Extension	
INVOICE-TYPE DESCRIPTION		DATE		G/L ACCOUNT No
110419 995 GUADALUPE ST 09/26/19-10/24/19			A-NET30 FROM INVOICE	
Line Description		G/L Account No	Unit(s) Unit Cos	

INVOICE-TYPE DESCRIPTION

110519-D 884 GUADALUPE ST (10/02/19-10/30/19)

REPORT: Nov 07 19 Thursday City of Guadalupe
RUN...: Nov 07 19 Time: 13:13 Invoice/Pre-Paid Check Audit Trail
Run By: Esther Britt Batch B91107 - 13:13 PAGE: 024 ID #: PY-IP CTL.: GUA

Rai by.: ascher bilt	Batth Byllu/ -	13:13		CIL.: GUA
P.O. BOX 997300 *** VENDOR.:	PAC01 (PACIF	IC GAS & ELECTRIC)	0.00 600000 6000000 6000000 600000	**************************************
INVOICE-TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No
Line Description		G/L Account No	Unit(s) Unit Cost	Amount
0001 995 GUADALUPE ST 09/26/19-10/24/19		26 4500 1000 (RDA-Op.Fund Red	Unit(s) Unit Cost 1 1327.0° levelopment Utilities)	1327.07
			Invoice Extension	1327.07
INVOICE-TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No
110519 4240 GULARTE LANE			A-NET30 FROM INVOICE	
Line Description		G/L Account No	Unit(s) Unit Cost	Amount
0001 4240 GULARTE LANE		12 4425 1000	1 14.70	14.70
0002 PIONEER ST 1/2 MI N/O		10 4420 1000	Wastewater Utilities) 63.70	(2 70
0003 201 C.CESAR CHAVEZ		01 4300 1000	Water Operating Utilities) 1 155.89	155.89
0004 1 MI W/O HWY 1 1/4		12 4425 1000	rks & Rec Utilities) 1 1663.56	1663.56
0005 10TH ST 75FT W/O		10 4420 1000	Wastewater Utilities) 1 128.27	128.27
0006 CRN OF PIONEER/8TH		12 4425 1000	Water Operating Utilities) 1 51.29	51.29
0007 GUADALUPE ST C OF C TRAIN DEPOT		65 4485 1000	Wastewater Utilities) 1 147.63	147.63
0008 N/E CORNER OF PARK		01 4300 1000	Gdlpe Light Dis Utilities) 1 12.24	12.24
0009 GUAD DUNES WAY NE COR		(General Fund Pa 71 4454 1000	rks & Rec Utilities)	10.30
0010 W.MAIN ST NE COR & PT		60 4490 1000	1 10.30 RE A Utilities) 1 10.30	10.30
0011 1015 GUADALUPE ST		01 4145 1000	Guad.Assmt Dist Utilities) 1 263.14	263.14
0012 918 OBISPO ST		01 4145 1000	ilding Mtce Utilities) 1 1826.76	1826.76
0013 400 TOGNAZZINI		10 4420 1000	ilding Mtce Utilities) 1 6662.30	6662.30
0014 638 GUADALUPE		12 4425 1000	Water Operating Utilities) 1 120.99	120.99
0015 4699 5TH ST		10 4420 1000	Wastewater Utilities) 1 30.52	30.52
0016 W.MAIN SEWER PLANT IRR.		12 4425 1000	Water Operating Utilities) 1 3042.05	3042.05
0017 UTILITIES DIVISION		65 4485 1000	Wastewater Utilities) 1 3382.99	3382.99
0018 UTILITIES DIVISION		60 4490 1000	Gdlpe Light Dis Utilities) 1 597.00 Guad.Assmt Dist Utilities)	597.00
			Invoice Extension>	18183.63
INVOICE-TYPE DESCRIPTION		DATE	TERM-DESCRIPTION	
103119-A 303 OBISPO ST 09/27/19-10/27/19			A-NET30 FROM INVOICE	
Line Description		G/L Account No	Unit(s) Unit Cost	Amount
0001 303 OBISPO ST 09/27/19-10/27/19		10 4420 1000		6103.39
		, well oper. rund	Invoice Extension>	
INVOICE-TYPE DESCRIPTION	מחדמקם	DATE	TERM-DESCRIPTION	C/I. ACCOUNT NA
110519-B 5125 W. MAIN ST (09/30/19-10/28/19)				
Line Description	11-17		Unit(s) Unit Cost	
0001 5125 W. MAIN ST (09/30/19-10/28/19)		01 4145 1000		
010 1211. 21 (03, 30, 13 10, 20, 13,			ilding Mtce Utilities)	
			Invoice Extension>	
INVOICE-TYPE DESCRIPTION				
110519-C 4545 10TH ST (10/02/19-10/30/19)			A-NET30 FROM INVOICE	
Line Description		G/L Account No		
0001 4545 10TH ST (10/02/19-10/30/19)			1 127.14 Idding Mtce Utilities)	127.14
			Invoice Extension>	127.14
THEOLOG TUDE DECORIDATION				

PERIOD DATE TERM-DESCRIPTION G/L ACCOUNT NO
11-19 10/31/19 N N N A-NET30 FROM INVOICE 2010

INVOICE-TYPE DESCRIPTION

City of Guadalupe Invoice/Pre-Paid Check Audit Trail Batch B91107 - 13:13

REPORT.: Nov 07 19 Thursday RUN....: Nov 07 19 Time: 13:13 Run By.: Esther Britt PAGE: 025 ID #: PY-IP CTL.: GUA

Run By.: Esther Biltt	Batch B9110/ -	13:13		CIL.: GUA
P.O. BOX 997300 *** VENDOR.		IC GAS & ELECTRIC)	00x - 10000001 - 130000 - 1000000000 - 130000 - 13	
INVOICE-TYPE DESCRIPTION		DATE	TERM-DESCRIPTION G,	/L ACCOUNT No
Line Description		G/L Account No	Unit(s) Unit Cost	Amount
0001 884 GUADALUPE ST (10/02/19-10/30/19)		65 4485 1000 (Guad.Light Dist	1 150.10 Gdlpe Light Dis Utilities)	150.10
			Invoice Extension>	150.10
INVOICE-TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION G,	L ACCOUNT NO
110519-E GULARTE LANE (10/01/19-10/29/19)			A-NET30 FROM INVOICE	
Line Description			Unit(s) Unit Cost	
0001 GULARTE LANE		12 4425 1000 (Wst.Wtr.Op.Fund	1 49.17 Wastewater Utilities)	
			Invoice Extension>	49.17
			Vendor Total>	37455.20
2381 BRANT STREET *** VENDO		CHARLES PASQUINI)		
INVOICE-TYPE DESCRIPTION		DATE	TERM-DESCRIPTION G/	L ACCOUNT No
102419 ANNUAL LEASE PAYMENT PERIOD:11-2020		10/21/19 N N N	A-NET30 FROM INVOICE	2010
Line Description			Unit(s) Unit Cost	Amount
0001 ANNUAL LEASE PAYMENT PERIOD:11-2020		12 4425 2250	1 5191.27	
		(Wst.Wtr.Op.Fund	Wastewater Property Rental)	
			Invoice Extension>	5191.27
			Vendor Total>	========
ROBERT COBB *** VENDOR.:		ELECTRIC MOTORS INC		
414 S. WESTERN INVOICE-TYPE DESCRIPTION	PERIOD		TERM-DESCRIPTION G/	
23531 RE-INSPECT BLOWER	11-19		A-NET30 FROM INVOICE	
Line Description		G/L Account No	Unit(s) Unit Cost	Amount
0001 FACILITIES MAINTNANCE		12 4425 1450		262.50
		(Wst.Wtr.Op.Fund 1	Wastewater Facilities Main) Invoice Extension>	
			INVOICE EXCENSION>	202.30
INVOICE-TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION G/	L ACCOUNT NO
23532 FACILITIES MAINENANCE-INSTALL BLOWER			A-NET30 FROM INVOICE	2010
Line Description		G/L Account No	Unit(s) Unit Cost	
0001 FACILITIES MAINENANCE-INSTALL BLOWER		12 4425 1450		735.00
		(Wst.Wtr.Op.Fund)	Wastewater Facilities Main)	
			Invoice Extension>	735.00
INVOICE-TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION G/	L ACCOUNT No
23548 CLEAN UP, REPLACE BEARINS, SEAL KIT, GEARS, RE		10/18/19 N N N	A-NET30 FROM INVOICE	2010
Line Description			Unit(s) Unit Cost	Amount
0001 CLEAN UP, REPLACE BEARINS, SEAL KIT, GEARS, REASS		12 4425 1450		
			Wastewater Facilities Main)	
			Invoice Extension>	6589.21
			Vendor Total>	7586.71
P.O. BOX 37600 *** VENE		ILL CORPORATION)	s	

PERIOD DATE

TERM-DESCRIPTION G/L ACCOUNT No

City of Guadalupe Invoice/Pre-Paid Check Audit Trail Batch B91107 - 13:13

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P.O. BOX 37600 *** VENDOR.: QU)T01 (QU	ILL CORPORATION)		
INVOICE-TYPE DESCRIPTION			TERM-DESCRIPTION G	
1950515 4 2020 DESK CALENDARS			A-NET30 FROM INVOICE	
Line Description		G/L Account No	Unit(s) Unit Cost	Amount
0001 OFFICE SUPPLIES (FINANCE)		01 4120 1200 (General Fund Fina	1 38.86 nce Off Suppl/Postg)	38.86
			Invoice Extension>	38.86
INVOICE-TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION G	L ACCOUNT NO
1950517 COUNTER FEIT MONEY DETECTOR			A-NET30 FROM INVOICE	
Line Description		G/L Account No	Unit(s) Unit Cost	Amount
0001 OFFICE SUPPLIES MONEY DETECTOR (FINANCE)		01 4120 1200	1 31.09	
		(General Fund Fina	nce Off Suppl/Postg)	
			Invoice Extension>	31.09
INVOICE-TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION G	/L ACCOUNT No
2011532 OFFICE SUPPLIES (FINANCE) COPY PAPER, DESKPAD	11-19	10/17/19 N N N	A-NET30 FROM INVOICE	2010
Line Description		G/L Account No	Unit(s) Unit Cost	Amount
0001 OFFICE SUPPLIES (FINANCE) COPY PAPER, DESKPAD			1 268.82 nce Off Suppl/Postg)	
			Invoice Extension>	268.82
INVOICE-TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION G	/L ACCOUNT No
2180015 COPY PAPER, SHEET PROTECTORS, MISC.				2010
Line Description		G/L Account No	Unit(s) Unit Cost	Amount
0001 OFFICE SUPPLIES (ADMIN)			1 218.66 nistration Off Suppl/Postg)	218.66
			Invoice Extension>	218.66
			Vendor Total>	EE 7 42
				357.43
555 GUADALUPE ST *** VENDOR.: RE	 Y01 (RE	YNA AUTO REPAIR)		
	Y01 (RE	YNA AUTO REPAIR)		
555 GUADALUPE ST *** VENDOR.: RE JUAN C. REYNA	PERIOD	YNA AUTO REPAIR) DATE	TERM-DESCRIPTION G	/L ACCOUNT NO
555 GUADALUPE ST *** VENDOR.: RE JUAN C. REYNA INVOICE-TYPE DESCRIPTION 3671 CHANGE OIL & FILTER ON UNIT 17-01	PERIOD	DATE 10/24/19 N N N	TERM-DESCRIPTION G A-NET30 FROM INVOICE	/L ACCOUNT No
555 GUADALUPE ST *** VENDOR.: RE JUAN C. REYNA INVOICE-TYPE DESCRIPTION 3671 CHANGE OIL & FILTER ON UNIT 17-01	PERIOD	YNA AUTO REPAIR) DATE	TERM-DESCRIPTION G A-NET30 FROM INVOICE Unit(s) Unit Cost	/L ACCOUNT No 2010 Amount
555 GUADALUPE ST *** VENDOR.: RE JUAN C. REYNA INVOICE-TYPE DESCRIPTION 3671 CHANGE OIL & FILTER ON UNIT 17-01 Line Description	PERIOD	DATE 10/24/19 N N N G/L Account No 01 4200 1460	TERM-DESCRIPTION G A-NET30 FROM INVOICE Unit(s) Unit Cost	/L ACCOUNT No 2010 Amount
555 GUADALUPE ST *** VENDOR.: RE JUAN C. REYNA INVOICE-TYPE DESCRIPTION 3671 CHANGE OIL & FILTER ON UNIT 17-01 Line Description	PERIOD	DATE 10/24/19 N N N G/L Account No 01 4200 1460	TERM-DESCRIPTION G A-NET30 FROM INVOICE Unit(s) Unit Cost	/L ACCOUNT No 2010 Amount 61.04
555 GUADALUPE ST *** VENDOR.: RE JUAN C. REYNA INVOICE-TYPE DESCRIPTION 3671 CHANGE OIL & FILTER ON UNIT 17-01 Line Description	PERIOD	DATE 10/24/19 N N N G/L Account No 01 4200 1460	TERM-DESCRIPTION G A-NET30 FROM INVOICE Unit(s) Unit Cost 1 61.04 ce Vehicle Maintnc) Invoice Extension>	/L ACCOUNT No 2010 Amount 61.04
555 GUADALUPE ST *** VENDOR.; RE JUAN C. REYNA INVOICE-TYPE DESCRIPTION 3671 CHANGE OIL & FILTER ON UNIT 17-01 Line Description 0001 MOTOR OIL	PERIOD	DATE 10/24/19 N N N G/L Account No 01 4200 1460 (General Fund Poli	TERM-DESCRIPTION G A-NET30 FROM INVOICE Unit(s) Unit Cost 1 61.04 ce Vehicle Maintnc) Invoice Extension> Vendor Total>	/L ACCOUNT No 2010 Amount 61.04 61.04
555 GUADALUPE ST *** VENDOR.: RE JUAN C. REYNA INVOICE-TYPE DESCRIPTION 3671 CHANGE OIL & FILTER ON UNIT 17-01 Line Description	PERIOD 11-19	DATE 10/24/19 N N N G/L Account No 01 4200 1460 (General Fund Poli	TERM-DESCRIPTION G A-NET30 FROM INVOICE Unit(s) Unit Cost 1 61.04 ce Vehicle Maintnc) Invoice Extension> Vendor Total>	/L ACCOUNT No 2010 Amount 61.04 61.04
555 GUADALUPE ST *** VENDOR.; RE JUAN C. REYNA INVOICE-TYPE DESCRIPTION 3671 CHANGE OIL & FILTER ON UNIT 17-01 Line Description 0001 MOTOR OIL	PERIOD (SANTA I	DATE 10/24/19 N N N G/L Account No 01 4200 1460 (General Fund Poli	TERM-DESCRIPTION G A-NET30 FROM INVOICE Unit(s) Unit Cost 1 61.04 ce Vehicle Maintnc) Invoice Extension> Vendor Total> TERM-DESCRIPTION G	/L ACCOUNT No 2010 Amount 61.04 61.04
555 GUADALUPE ST *** VENDOR.; RE JUAN C. REYNA INVOICE-TYPE DESCRIPTION 3671 CHANGE OIL & FILTER ON UNIT 17-01 Line Description 0001 MOTOR OIL P.O. BOX 1188 *** VENDOR.; SAN81 INVOICE-TYPE DESCRIPTION	PERIOD (SANTA 1	DATE 10/24/19 N N N G/L Account No 01 4200 1460 (General Fund Poli	TERM-DESCRIPTION G A-NET30 FROM INVOICE Unit(s) Unit Cost 1 61.04 ce Vehicle Maintnc) Invoice Extension> Vendor Total> TERM-DESCRIPTION G	/L ACCOUNT No 2010 Amount 61.04 61.04
555 GUADALUPE ST *** VENDOR.; RE JUAN C. REYNA INVOICE-TYPE DESCRIPTION 3671 CHANGE OIL & FILTER ON UNIT 17-01 Line Description 0001 MOTOR OIL P.O. BOX 1188 *** VENDOR.; SAN81 INVOICE-TYPE DESCRIPTION	PERIOD (SANTA 1	DATE 10/24/19 N N N G/L Account No 01 4200 1460 (General Fund Poli	TERM-DESCRIPTION G A-NET30 FROM INVOICE Unit(s) Unit Cost 1 61.04 ce Vehicle Maintnc) Invoice Extension> Vendor Total> TERM-DESCRIPTION G A-NET30 FROM INVOICE	/L ACCOUNT No 2010 Amount 61.04 61.04
555 GUADALUPE ST *** VENDOR.; RE JUAN C. REYNA INVOICE-TYPE DESCRIPTION 3671 CHANGE OIL & FILTER ON UNIT 17-01 Line Description 0001 MOTOR OIL P.O. BOX 1188 *** VENDOR.; SAN81 INVOICE-TYPE DESCRIPTION 185496 VEHICLE MAINTENANCE 2016 FORD F350SD Line Description	PERIOD (SANTA 1	DATE 10/24/19 N N N G/L Account No 01 4200 1460 (General Fund Poli	TERM-DESCRIPTION G A-NET30 FROM INVOICE Unit(s) Unit Cost 1 61.04 ce Vehicle Maintnc) Invoice Extension> Vendor Total> TERM-DESCRIPTION G A-NET30 FROM INVOICE Unit(s) Unit Cost 1 1111.81	/L ACCOUNT No 2010 Amount 61.04 61.04 CACCOUNT NO 2010 Amount
JUAN C. REYNA INVOICE-TYPE DESCRIPTION 3671 CHANGE OIL & FILTER ON UNIT 17-01 Line Description 0001 MOTOR OIL P.O. BOX 1188 *** VENDOR.: SAN81 INVOICE-TYPE DESCRIPTION 185496 VEHICLE MAINTENANCE 2016 FORD F350SD Line Description	PERIOD (SANTA 1	DATE 10/24/19 N N N G/L Account No 01 4200 1460 (General Fund Poli MARIA FORD LINCOLN) DATE 10/21/19 N N N G/L Account No 01 4220 1460	TERM-DESCRIPTION G A-NET30 FROM INVOICE Unit(s) Unit Cost 1 61.04 ce Vehicle Maintnc) Invoice Extension> Vendor Total> TERM-DESCRIPTION G A-NET30 FROM INVOICE Unit(s) Unit Cost 1 1111.81	/L ACCOUNT No 2010 Amount 61.04 61.04 61.04 COUNT NO 2010 Amount 1111.81
JUAN C. REYNA INVOICE-TYPE DESCRIPTION 3671 CHANGE OIL & FILTER ON UNIT 17-01 Line Description 0001 MOTOR OIL P.O. BOX 1188 *** VENDOR.: SAN81 INVOICE-TYPE DESCRIPTION 185496 VEHICLE MAINTENANCE 2016 FORD F350SD Line Description 0001 VEHICLE MAINTENANCE 2016 FORD F350SD	PERIOD CSANTA I PERIOD 11-19 PERIOD PERIOD	DATE 10/24/19 N N N G/L Account No 01 4200 1460 (General Fund Poli MARIA FORD LINCOLN) DATE 10/21/19 N N N G/L Account No 01 4220 1460	TERM-DESCRIPTION G A-NET30 FROM INVOICE Unit(s) Unit Cost 1 61.04 ce Vehicle Maintnc) Invoice Extension> Vendor Total> TERM-DESCRIPTION G A-NET30 FROM INVOICE Unit(s) Unit Cost 1 1111.81 Vehicle Maintnc)	/L ACCOUNT No 2010 Amount 61.04 61.04
JUAN C. REYNA INVOICE-TYPE DESCRIPTION 3671 CHANGE OIL & FILTER ON UNIT 17-01 Line Description 0001 MOTOR OIL P.O. BOX 1188 *** VENDOR.: SAN81 INVOICE-TYPE DESCRIPTION 185496 VEHICLE MAINTENANCE 2016 FORD F350SD Line Description 0001 VEHICLE MAINTENANCE 2016 FORD F350SD	PERIOD (SANTA 1 PERIOD 11-19	DATE 10/24/19 N N N G/L Account No 11 4200 1460 (General Fund Poli MARIA FORD LINCOLN) DATE 10/21/19 N N N G/L Account No 01 4220 1460 (General Fund Fire	TERM-DESCRIPTION G A-NET30 FROM INVOICE Unit(s) Unit Cost 1 61.04 ce Vehicle Maintnc) Invoice Extension> Vendor Total> TERM-DESCRIPTION G A-NET30 FROM INVOICE Unit(s) Unit Cost 1 1111.81 Vehicle Maintnc) Invoice Extension> TERM-DESCRIPTION G	/L ACCOUNT No 2010 Amount 61.04 61.04
JUAN C. REYNA INVOICE-TYPE DESCRIPTION 3671 CHANGE OIL & FILTER ON UNIT 17-01 Line Description 0001 MOTOR OIL P.O. BOX 1188 *** VENDOR.: SAN81 INVOICE-TYPE DESCRIPTION 185496 VEHICLE MAINTENANCE 2016 FORD F350SD Line Description 0001 VEHICLE MAINTENANCE 2016 FORD F350SD	PERIOD (SANTA 1 PERIOD 11-19	DATE 10/24/19 N N N G/L Account No 11 4200 1460 (General Fund Poli MARIA FORD LINCOLN) DATE 10/21/19 N N N G/L Account No 01 4220 1460 (General Fund Fire	TERM-DESCRIPTION G A-NET30 FROM INVOICE Unit(s) Unit Cost 1 61.04 ce Vehicle Maintnc) Invoice Extension> Vendor Total> TERM-DESCRIPTION G A-NET30 FROM INVOICE Unit(s) Unit Cost 1 1111.81 Vehicle Maintnc) Invoice Extension> TERM-DESCRIPTION G A-NET30 FROM INVOICE	/L ACCOUNT No 2010 Amount 61.04 61.04 61.04 2010 Amount 1111.81 /L ACCOUNT No 2010

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P.O. BOX 1188 *** VENDOR.: SAN81				ξį
INVOICE-TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No
Line Description		G/L Account No	Unit(s) Unit Cost	
0001 WHEEL PURCHASE		01 4200 1460 (General Fund Polic	1 296.90 ce Vehicle Maintnc)	
			Invoice Extension>	296.90
			Vendor Total>	1408.71
*** VENDOR.: SO	CH01 (P	ATRICK SCHMITZ)		
INVOICE-TYPE DESCRIPTION		DATE	TERM-DESCRIPTION	G/L ACCOUNT No
				2010
Line Description		G/L Account No	Unit(s) Unit Cost	
0001 REIMBURSEMENT FOR STRIKE TEAM BRYCEBURG		01 4220 1550	1 49.46	
		(General Fund Fire	Invoice Extension>	49.46
			Vendor Total>	49.46 ======
LABORATORIES, INC. *** VENDOR.: SIR01				
100 HUNTER PLACE			TERM-DESCRIPTION (G/L ACCOUNT NO
INVOICE-TYPE DESCRIPTION 0419200IN SYRINGE COLLECTION TUBES			A-NET30 FROM INVCICE	
Line Description		G/L Account No	Unit(s) Unit Cost	
0001 SYRINGE COLLECTION TUBES		01 4200 1550 (General Fund Polic	1 99.38 ce Op Supp/Expense)	
			Invoice Extension>	99.38
			Vendor Total>	99.38
270 TOGNAZZINI AVE *** VENDOR.: SOL04				
SHAI OLIVAREZ INVOICE-TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION (G/L ACCOUNT NO
000010 REMOVE & REPLACE WINDOWS IN RECREATION OFFICE				
Line Description		G/L Account No	Unit(s) Unit Cost	Amount
0001 REMOVE & REPLACE WINDOWS IN RECREATION OFFICE		01 4145 2150 (General Fund Build	Unit(s) Unit Cost 1 3600.00 ding Mtce Profl Services)	3600.00
			Invoice Extension>	3600.00
			Vendor Total>	3600.00
AND			384 · · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·
P.O. BOX C INVOICE-TYPE DESCRIPTION			TERM-DESCRIPTION (I/L ACCOUNT NO
			A-NET30 FROM INVOICE	
	TT-13		Unit(s) Unit Cost	
Line Description 0001 4545 10TH ST 09/20/19-10/21/19		01 4145 1000	1 92.59	
		(General Fund Build	ding Mtce Utilities) Invoice Extension>	92.59
INVOICE-TYPE DESCRIPTION				
102919 4646 10 TH ST 09/24/19-10/23/19	11-19	10/15/19 N N N	A-NET30 FROM INVOICE	2010

INVOICE-TYPE DESCRIPTION

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	*** VENDOR.: SOU01	(SOUTH	ERN CALIFORNIA GAS)	KT - KENNE - CHEKEN - KANKET CHEKE K	
P.O. BOX INVOICE-T				TERM-DESCRIPTION G/	L ACCOUNT N
	Description		G/L Account No	Unit(s) Unit Cost	Amount
	4646 10 TH ST 09/24/19-10/23/19		26 4500 1000 (RDA-Op.Fund Redeve	Unit(s) Unit Cost 1 971.15 elopment Utilities)	971.15
				Invoice Extension>	971.1
INVOICE-I	TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION G/	L ACCOUNT NO
102919-A				A-NET30 FROM INVOICE	
ine	Description		G/L Account No	Unit(s) Unit Cost 1 73.22	Amount
	1025 GUADALUPE 09/24/19-10/23/19		01 4145 1000 (General Fund Build	1 73.22 ding Mtce Utilities)	73.22
				Invoice Extension>	
	TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION G/	
				A-NET30 FROM INVOICE	
Line	Description			Unit(s) Unit Cost	
	918 OBISPO 09/24/19-10/23/19		01 4145 1000	1 233.91 ling Mtce Utilities)	233.91
				Invoice Extension>	
				Vendor Total>	1370.87
a					
P.O. BOX	31001-2620 *** VENDOR.: STA02 (STATE	PERIOD	AFFIC SAFETY & SIGNS I	TERM-DESCRIPTION G/1	L ACCOUNT No
P.O. BOX INVOICE-T 03014302	31001-2620 *** VENDOR.: STA02 (STATE	PERIOD 11-19	DATE	TERM-DESCRIPTION G/1	L ACCOUNT No
P.O. BOX INVOICE-T 03014302	31001-2620 *** VENDOR.: STA02 (STATE TYPE DESCRIPTION SIGNS "DO NOT DRINK" Description	PERIOD 11-19	DATE 10/16/19 N N N G/L Account No	TERM-DESCRIPTION G/1 A-NET30 FROM INVOICE Unit(s) Unit Cost	L ACCOUNT No 2010 Amount
P.O. BOX INVOICE-T 03014302	31001-2620 *** VENDOR.: STA02 (STATE TYPE DESCRIPTION SIGNS "DO NOT DRINK" Description	PERIOD 11-19	DATE	TERM-DESCRIPTION G/1 A-NET30 FROM INVOICE Unit(s) Unit Cost	L ACCOUNT No 2010 Amount 57.98
P.O. BOX INVOICE-T 03014302 sine	31001-2620 *** VENDOR.: STA02 (STATE TYPE DESCRIPTION SIGNS "DO NOT DRINK" Description SIGNS	PERIOD TRA	DATE	TERM-DESCRIPTION G/1 A-NET30 FROM INVOICE Unit(s) Unit Cost 1 57.98 Invoice Extension>	2010 Amount 57.98
NVOICE-T	31001-2620 *** VENDOR.: STA02 (STATE TYPE DESCRIPTION SIGNS "DO NOT DRINK" Description SIGNS SIGNS	PERIOD 11-19 PERIOD	DATE 10/16/19 N N N G/L Account No 89 4444 3081 (CIP CIP 089-501)	TERM-DESCRIPTION G/1 A-NET30 FROM INVOICE Unit(s) Unit Cost 1 57.98 Invoice Extension> TERM-DESCRIPTION G/1	ACCOUNT No 2010 Amount 57.98 57.98
NVOICE-T	31001-2620 *** VENDOR.: STA02 (STATE TYPE DESCRIPTION SIGNS "DO NOT DRINK" Description SIGNS SIG	PERIOD 11-19 PERIOD	DATE	TERM-DESCRIPTION G/1 A-NET30 FROM INVOICE Unit(s) Unit Cost 1 57.98 Invoice Extension> TERM-DESCRIPTION G/1 A-NET30 FROM INVOICE	ACCOUNT No 2010 Amount 57.98 57.98 ACCOUNT No
.O. BOX NVOICE-T 03014302 ine 001 NVOICE-T 03014366 ine	31001-2620 *** VENDOR.: STA02 (STATE TYPE DESCRIPTION SIGNS "DO NOT DRINK" Description SIGNS SIGNS SIGNS SIGNS SIGNS SIGN, LARGE POST STRAP, FLARED LEG BRACKET W/ BOLT Description	PERIOD 11-19 PERIOD	DATE 10/16/19 N N N G/L Account No 89 4444 3081 (CIP CIP 089-501) DATE 10/23/19 N N N G/L Account No	TERM-DESCRIPTION G/1 A-NET30 FROM INVOICE Unit(s) Unit Cost 1 57.98 Invoice Extension> TERM-DESCRIPTION G/1 A-NET30 FROM INVOICE Unit(s) Unit Cost	ACCOUNT No 2010 Amount 57.98 57.98 ACCOUNT No 2010 Amount
NVOICE-T 03014302 ine 0001 NVOICE-T 03014366 ine	31001-2620 *** VENDOR.: STA02 (STATE TYPE DESCRIPTION SIGNS "DO NOT DRINK" Description SIGNS SIGNS SIGNS SIGNS SIGN, LARGE POST STRAP, FLARED LEG BRACKET W/ BOLT Description	PERIOD 11-19 PERIOD	DATE 10/16/19 N N N G/L Account No 89 4444 3081 (CIP CIP 089-501) DATE 10/23/19 N N N	TERM-DESCRIPTION G/1 A-NET30 FROM INVOICE Unit(s) Unit Cost 1 57.98 Invoice Extension> TERM-DESCRIPTION G/1 A-NET30 FROM INVOICE Unit(s) Unit Cost 1 190.13	ACCOUNT No. 2010 Amount 57.98 57.98 ACCOUNT No. 2010 Amount 190.13
NVOICE-T 03014302 sine 0001 NVOICE-T 03014366	31001-2620 *** VENDOR.: STA02 (STATE TYPE DESCRIPTION SIGNS "DO NOT DRINK" Description SIGNS SIGNS SIGNS SIGNS SIGNS SIGN, LARGE POST STRAP, FLARED LEG BRACKET W/ BOLT Description	PERIOD 11-19 PERIOD	DATE 10/16/19 N N N G/L Account No 89 4444 3081 (CIP CIP 089-501) DATE 10/23/19 N N N G/L Account No 89 4444 3081	TERM-DESCRIPTION G/1 A-NET30 FROM INVOICE Unit(s) Unit Cost 1 57.98 Invoice Extension> TERM-DESCRIPTION G/1 A-NET30 FROM INVOICE Unit(s) Unit Cost	ACCOUNT No. 2010 Amount 57.98 57.98 ACCOUNT No. 2010 Amount 190.13
NVOICE-T	31001-2620 *** VENDOR.: STA02 (STATE TYPE DESCRIPTION SIGNS "DO NOT DRINK" Description SIGNS SIGNS SIGNS SIGNS SIGNS SIGN, LARGE POST STRAP, FLARED LEG BRACKET W/ BOLT Description	PERIOD 11-19 PERIOD	DATE 10/16/19 N N N G/L Account No 89 4444 3081 (CIP CIP 089-501) DATE 10/23/19 N N N G/L Account No 89 4444 3081	TERM-DESCRIPTION G/1 A-NET30 FROM INVOICE Unit(s) Unit Cost 1 57.98 Invoice Extension> TERM-DESCRIPTION G/1 A-NET30 FROM INVOICE Unit(s) Unit Cost 1 190.13	2010 Amount 57.98 57.98 2 ACCOUNT No 2010 Amount 190.13
NVOICE-T 03014366 ine 0001	31001-2620 *** VENDOR.: STA02 (STATE TYPE DESCRIPTION SIGNS "DO NOT DRINK" Description SIGNS SIGNS SIGN, LARGE POST STRAP, FLARED LEG BRACKET W/ BOLT Description SIGN, LARGE POST STRAP, FLARED LEG BRACKET W/ BOLT *** VENDOR.: STA07 (STATE)	PERIOD PERIOD PERIOD 11-19	DATE 10/16/19 N N N G/L Account No 89 4444 3081 (CIP CIP 089-501) DATE 10/23/19 N N N G/L Account No 89 4444 3081 (CIP CIP 089-501)	TERM-DESCRIPTION G/1 A-NET30 FROM INVOICE Unit(s) Unit Cost 1 57.98 Invoice Extension> TERM-DESCRIPTION G/1 A-NET30 FROM INVOICE Unit(s) Unit Cost 1 190.13 Invoice Extension> Vendor Total>	2010 Amount 57.98 57.98 ACCOUNT No. 2010 Amount 190.13
NVOICE-T 03014366 ine 03014366 ine TTO: TTO: SOO: TTO: SOO: NVOICE-T	31001-2620 *** VENDOR.: STA02 (STATE TYPE DESCRIPTION SIGNS "DO NOT DRINK" Description SIGNS SIGN, LARGE POST STRAP, FLARED LEG BRACKET W/ BOLT Description SIGN, LARGE POST STRAP, FLARED LEG BRACKET W/ BOLT Description SIGN, LARGE POST STRAP, FLARED LEG BRACKET W/ BOLT *** VENDOR.: STA07 (STATE) *** FEES YPE DESCRIPTION	PERIOD PERIOD 11-19 PERIOD 11-19	DATE DATE 10/16/19 N N N G/L Account No 89 4444 3081 (CIP CIP 089-501) DATE 10/23/19 N N N G/L Account No 89 4444 3081 (CIP CIP 089-501)	TERM-DESCRIPTION G/1 A-NET30 FROM INVOICE Unit(s) Unit Cost 1 57.98 Invoice Extension> TERM-DESCRIPTION G/I A-NET30 FROM INVOICE Unit(s) Unit Cost 1 190.13 Invoice Extension> Vendor Total> TERM-DESCRIPTION G/I	ACCOUNT No. 2010 Amount 57.98 57.98 ACCOUNT No. 2010 Amount 190.13 248.11
NVOICE-T O3014302 ine O3014302 ine O3014366 ine O01	31001-2620 *** VENDOR.: STA02 (STATE TYPE DESCRIPTION SIGNS "DO NOT DRINK" Description SIGNS SIGNS SIGN, LARGE POST STRAP, FLARED LEG BRACKET W/ BOLT Description SIGN, LARGE POST STRAP, FLARED LEG BRACKET W/ BOLT Description SIGN, LARGE POST STRAP, FLARED LEG BRACKET W/ BOLT *** VENDOR: STA07 (STATE) 1888 *** VENDOR: STA07 (STATE)	PERIOD 11-19 PERIOD 11-19	DATE 10/16/19 N N N G/L Account No 89 4444 3081 (CIP CIP 089-501) DATE 10/23/19 N N N G/L Account No 89 4444 3081 (CIP CIP 089-501)	TERM-DESCRIPTION G/1 A-NET30 FROM INVOICE Unit(s) Unit Cost 1 57.98 Invoice Extension> TERM-DESCRIPTION G/I A-NET30 FROM INVOICE Unit(s) Unit Cost 1 190.13 Invoice Extension> Vendor Total> TERM-DESCRIPTION G/I	ACCOUNT No. 2010 Amount 57.98 57.98 ACCOUNT No. 2010 Amount 190.13 248.11
NVOICE-T 03014302 ine 0001 NVOICE-T 03014366 ine 001 BOX TTN: SSO NVOICE-T W0174390 ine	31001-2620 *** VENDOR.: STA02 (STATE TYPE DESCRIPTION SIGNS "DO NOT DRINK" Description SIGNS SIGNS SIGN, LARGE POST STRAP, FLARED LEG BRACKET W/ BOLT Description SIGN, LARGE POST STRAP, FLARED LEG BRACKET W/ BOLT DESCRIPTION *** VENDOR.: STA07 (STATE) FEES YPE DESCRIPTION ANNUAL PERMIT FEE ID# 3 42M20000107 Description	PERIOD 11-19 PERIOD 11-19	DATE DATE 10/16/19 N N N G/L Account No 89 4444 3081 (CIP CIP 089-501) DATE 10/23/19 N N N G/L Account No 89 4444 3081 (CIP CIP 089-501) BOARD ACCOUNTING OFFI DATE 10/23/19 N N N G/L Account No	TERM-DESCRIPTION G/1 A-NET30 FROM INVOICE Unit(s) Unit Cost 1 57.98 Invoice Extension> TERM-DESCRIPTION G/1 A-NET30 FROM INVOICE Unit(s) Unit Cost 1 190.13 Invoice Extension> Vendor Total> TERM-DESCRIPTION G/1 A-NET30 FROM INVOICE Unit(s) Unit Cost	ACCOUNT No 2010 Amount 57.98 57.98 ACCOUNT No 2010 Amount 190.13 248.11
CO. BOX CNVOICE-T CO3014302 CNVOICE-T CO3014366 CNVOICE-T COCO BOX CNTTN: SSO CNVOICE-T CW0174390 Cine	31001-2620 *** VENDOR.: STA02 (STATE TYPE DESCRIPTION SIGNS "DO NOT DRINK" Description SIGNS SIGNS SIGNS SIGNS SIGN, LARGE POST STRAP, FLARED LEG BRACKET W/ BOLT Description SIGN, LARGE POST STRAP, FLARED LEG BRACKET W/ BOLT DESCRIPTION SIGN, LARGE POST STRAP, FLARED LEG BRACKET W/ BOLT ANNUAL PERMIT FEE ID# 3 42M20000107	PERIOD 11-19 PERIOD 11-19	DATE DATE 10/16/19 N N N G/L Account No 89 4444 3081 (CIP CIP 089-501) DATE 10/23/19 N N N G/L Account No 89 4444 3081 (CIP CIP 089-501) DATE 10/23/19 N N N G/L Account No 10/23/19 N N N G/L Account No 10/23/19 N N N	TERM-DESCRIPTION G/I A-NET30 FROM INVOICE Unit(s) Unit Cost 1 57.98 Invoice Extension> TERM-DESCRIPTION G/I A-NET30 FROM INVOICE Unit(s) Unit Cost 1 190.13 Invoice Extension> Vendor Total> CE) TERM-DESCRIPTION G/I A-NET30 FROM INVOICE Unit(s) Unit Cost	ACCOUNT No 2010 Amount 57.98 57.98 ACCOUNT No 2010 Amount 190.13 248.11 ACCOUNT No 2010 Amount 5692.00
NVOICE-T O3014366 ine O3014366 ine O001	31001-2620 *** VENDOR.: STA02 (STATE TYPE DESCRIPTION SIGNS "DO NOT DRINK" Description SIGNS SIGNS SIGN, LARGE POST STRAP, FLARED LEG BRACKET W/ BOLT Description SIGN, LARGE POST STRAP, FLARED LEG BRACKET W/ BOLT DESCRIPTION *** VENDOR.: STA07 (STATE) ANNUAL PERMIT FEE ID# 3 42M20000107 Description	PERIOD 11-19 PERIOD 11-19	DATE DATE 10/16/19 N N N G/L Account No 89 4444 3081 (CIP CIP 089-501) DATE 10/23/19 N N N G/L Account No 89 4444 3081 (CIP CIP 089-501) DATE 10/23/19 N N N G/L Account No 10/23/19 N N N G/L Account No 10/23/19 N N N	TERM-DESCRIPTION G/I A-NET30 FROM INVOICE Unit(s) Unit Cost 1 57.98 Invoice Extension> TERM-DESCRIPTION G/I A-NET30 FROM INVOICE Unit(s) Unit Cost 1 190.13 Invoice Extension> Vendor Total> TERM-DESCRIPTION G/I A-NET30 FROM INVOICE Unit(s) Unit Cost 1 190.13	ACCOUNT No 2010 Amount 57.98 57.98 ACCOUNT No 2010 Amount 190.13 248.11 248.11 ACCOUNT No 2010 Amount 5692.00

PERIOD DATE TERM-DESCRIPTION G/L ACCOUNT NO

PAGE: 029 ID #: PY-IP CTL.: GUA

Invoice Extension ---->

161.00

REPORT.: Nov 07 19 Thursday RUN....: Nov 07 19 Time: 13:13 Run By.: Esther Britt City of Guadalupe Invoice/Pre-Paid Check Audit Trail Batch B91107 - 13:13

DEPT, CH 10651 *** VENDOR.: STA08 (STANL)	EY CONVER	SENI SECURITI SOLOT	ION IN./	
INVOICE-TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION G/	L ACCOUNT NO
16961948 PROFESSIONAL SERVICES-(ALARM ADMIN)			A-NET30 FROM INVOICE	
Line Description		G/L Account No	Unit(s) Unit Cost	Amount
0001 PROFESSIONAL SERVICES-(ALARM ADMIN)		01 4105 2150		53.08
			Invoice Extension>	53.08
INVOICE-TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION G/	'L ACCOUNT No
16962384 PROFESSIONAL SERVICES FOR 12/2019			A-NET30 FROM INVOICE	
Line Description		G/L Account No	Unit(s) Unit Cost	Amount
0001 PROFESSIONAL SERVICES FOR 12/2019		01 4120 2150	1 49.13 nance Profl Services)	49.13
		(General rund Fi	Invoice Extension>	49.13
			Vendor Total>	102.21
2004 PREISKER LANE STE1 *** VENDOR.: TAC01				s
INVOICE-TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION G/	L ACCOUNT NO
059 OFFICER REQUALIFICATION (RUIZ)			A-NET30 FROM INVOICE	
Line Description		G/L Account No	Unit(s) Unit Cost	
0001 OFFICER REQUALIFICATION (RUIZ)		01 4200 1550 (General Fund Po		
			Invoice Extension>	20.28
			Vendor Total>	20.28
				========

654 OSOS STREET *** VENDOR.: TE	EC01 (TEC	CHXPRESS- CORP)	TERM-DESCRIPTION G/	907
654 OSOS STREET *** VENDOR.: TE	PERIOD	DATE	TERM-DESCRIPTION G/	L ACCOUNT No
654 OSOS STREET *** VENDOR.: TE INVOICE-TYPE DESCRIPTION 6988 MANAGED SERVICE PLAN FOR SERVERS/WORKSTATIONS Line Description	PERIOD	DATE 11/01/19 N N N G/L Account No	TERM-DESCRIPTION G/ A-NET30 FROM INVOICE Unit(s) Unit Cost	L ACCOUNT No
654 OSOS STREET *** VENDOR.: TE INVOICE-TYPE DESCRIPTION 6988 MANAGED SERVICE PLAN FOR SERVERS/WORKSTATIONS	PERIOD 11-19	DATE 11/01/19 N N N G/L Account No 01 4140 2151	TERM-DESCRIPTION G/ A-NET30 FROM INVOICE Unit(s) Unit Cost 1 2652.00	L ACCOUNT No 2010 Amount 2652.00
654 OSOS STREET *** VENDOR.: TE INVOICE-TYPE DESCRIPTION 6988 MANAGED SERVICE PLAN FOR SERVERS/WORKSTATIONS Line Description	PERIOD 11-19	DATE 11/01/19 N N N G/L Account No 01 4140 2151	TERM-DESCRIPTION G/ A-NET30 FROM INVOICE Unit(s) Unit Cost	L ACCOUNT No 2010 Amount 2652.00
654 OSOS STREET *** VENDOR.: TE INVOICE-TYPE DESCRIPTION 6988 MANAGED SERVICE PLAN FOR SERVERS/WORKSTATIONS Line Description 0001 MANAGED SERVICE PLAN FOR SERVERS/WORKSTATIONS INVOICE-TYPE DESCRIPTION	PERIOD PERIOD PERIOD	DATE 11/01/19 N N N G/L Account No 01 4140 2151 (General Fund Nor	TERM-DESCRIPTION G/ A-NET30 FROM INVOICE Unit(s) Unit Cost 1 2652.00 1-Department1 IT Services) Invoice Extension> TERM-DESCRIPTION G/	L ACCOUNT NO 2010 Amount 2652.00 2652.00 L ACCOUNT NO
654 OSOS STREET *** VENDOR.: TE INVOICE-TYPE DESCRIPTION 6988 MANAGED SERVICE PLAN FOR SERVERS/WORKSTATIONS Line Description 0001 MANAGED SERVICE PLAN FOR SERVERS/WORKSTATIONS	PERIOD PERIOD PERIOD	DATE 11/01/19 N N N G/L Account No 01 4140 2151 (General Fund Nor	TERM-DESCRIPTION G/ A-NET30 FROM INVOICE Unit(s) Unit Cost 1 2652.00 1-Department1 IT Services) Invoice Extension> TERM-DESCRIPTION G/	L ACCOUNT No 2010 Amount 2652.00 2652.00 L ACCOUNT No
#** VENDOR: TE INVOICE-TYPE DESCRIPTION 6988 MANAGED SERVICE PLAN FOR SERVERS/WORKSTATIONS Line Description 0001 MANAGED SERVICE PLAN FOR SERVERS/WORKSTATIONS INVOICE-TYPE DESCRIPTION 7001 EMAIL ARCHIVER RENEWAL Line Description	PERIOD PERIOD PERIOD	DATE 11/01/19 N N N G/L Account No 01 4140 2151 (General Fund Nor DATE 10/25/19 N N N G/L Account No	TERM-DESCRIPTION G/ A-NET30 FROM INVOICE Unit(s) Unit Cost 1 2652.00 1-Department1 IT Services) Invoice Extension> TERM-DESCRIPTION G/ A-NET30 FROM INVOICE Unit(s) Unit Cost	L ACCOUNT No 2010 Amount 2652.00 2652.00 L ACCOUNT No 2010 Amount
654 OSOS STREET *** VENDOR.: TE INVOICE-TYPE DESCRIPTION 6988 MANAGED SERVICE PLAN FOR SERVERS/WORKSTATIONS Line Description 0001 MANAGED SERVICE PLAN FOR SERVERS/WORKSTATIONS INVOICE-TYPE DESCRIPTION 7001 EMAIL ARCHIVER RENEWAL	PERIOD PERIOD PERIOD	DATE 11/01/19 N N N G/L Account No 01 4140 2151 (General Fund Nor DATE 10/25/19 N N N G/L Account No	TERM-DESCRIPTION G/ A-NET30 FROM INVOICE Unit(s) Unit Cost 1 2652.00 1-Department1 IT Services) Invoice Extension> TERM-DESCRIPTION G/ A-NET30 FROM INVOICE Unit(s) Unit Cost	L ACCOUNT No 2010 Amount 2652.00 L ACCOUNT No 2010 Amount
654 OSOS STREET *** VENDOR.: TE INVOICE-TYPE DESCRIPTION 6988 MANAGED SERVICE PLAN FOR SERVERS/WORKSTATIONS Line Description 0001 MANAGED SERVICE PLAN FOR SERVERS/WORKSTATIONS INVOICE-TYPE DESCRIPTION 7001 EMAIL ARCHIVER RENEWAL Line Description	PERIOD PERIOD PERIOD	DATE 11/01/19 N N N G/L Account No 01 4140 2151 (General Fund Nor DATE 10/25/19 N N N G/L Account No	TERM-DESCRIPTION G/ A-NET30 FROM INVOICE Unit(s) Unit Cost 1 2652.00 1-Department1 IT Services) Invoice Extension> TERM-DESCRIPTION G/ A-NET30 FROM INVOICE Unit(s) Unit Cost	L ACCOUNT No 2010 Amount 2652.00 2652.00 L ACCOUNT No 2010 Amount 1502.81
654 OSOS STREET *** VENDOR.: TE INVOICE-TYPE DESCRIPTION 6988 MANAGED SERVICE PLAN FOR SERVERS/WORKSTATIONS Line Description 0001 MANAGED SERVICE PLAN FOR SERVERS/WORKSTATIONS INVOICE-TYPE DESCRIPTION 7001 EMAIL ARCHIVER RENEWAL Line Description	PERIOD PERIOD PERIOD	DATE 11/01/19 N N N G/L Account No 01 4140 2151 (General Fund Nor DATE 10/25/19 N N N G/L Account No	TERM-DESCRIPTION G/ A-NET30 FROM INVOICE Unit(s) Unit Cost 1 2652.00 1-Department1 IT Services) Invoice Extension> TERM-DESCRIPTION G/ A-NET30 FROM INVOICE Unit(s) Unit Cost 1 1502.81 1-Department1 Prof1 Services)	L ACCOUNT No 2010 Amount 2652.00 L ACCOUNT No 2010 Amount 1502.81
#** VENDOR: TE INVOICE-TYPE DESCRIPTION 6988 MANAGED SERVICE PLAN FOR SERVERS/WORKSTATIONS Line Description 0001 MANAGED SERVICE PLAN FOR SERVERS/WORKSTATIONS INVOICE-TYPE DESCRIPTION 7001 EMAIL ARCHIVER RENEWAL Line Description	PERIOD PERIOD 11-19	DATE 11/01/19 N N N G/L Account No 01 4140 2151 (General Fund Nor DATE 10/25/19 N N N G/L Account No 01 4140 2150 (General Fund Nor	TERM-DESCRIPTION G/ A-NET30 FROM INVOICE Unit(s) Unit Cost 1 2652.00 1-Department1 IT Services) Invoice Extension> TERM-DESCRIPTION G/ A-NET30 FROM INVOICE Unit(s) Unit Cost 1 1502.81 1-Department1 Prof1 Services) Invoice Extension> Vendor Total>	L ACCOUNT No 2010 Amount 2652.00 2652.00 L ACCOUNT No 2010 Amount 1502.81
#** VENDOR: TE INVOICE-TYPE DESCRIPTION 6988 MANAGED SERVICE PLAN FOR SERVERS/WORKSTATIONS Line Description 0001 MANAGED SERVICE PLAN FOR SERVERS/WORKSTATIONS INVOICE-TYPE DESCRIPTION 7001 EMAIL ARCHIVER RENEWAL Line Description 0001 EMAIL ARCHIVER RENEWAL	PERIOD PERIOD 11-19	DATE 11/01/19 N N N G/L Account No 01 4140 2151 (General Fund Nor DATE 10/25/19 N N N G/L Account No 01 4140 2150 (General Fund Nor O1 4140 2150 (General Fund Nor	TERM-DESCRIPTION G/ A-NET30 FROM INVOICE Unit(s) Unit Cost 1 2652.00 1-Department1 IT Services) Invoice Extension> TERM-DESCRIPTION G/ A-NET30 FROM INVOICE Unit(s) Unit Cost 1 1502.81 1-Department1 Prof1 Services) Invoice Extension> Vendor Total>	L ACCOUNT No 2010 Amount 2652.00 2652.00 L ACCOUNT No 2010 Amount 1502.81 4154.81
#** VENDOR: TE INVOICE-TYPE DESCRIPTION 6988 MANAGED SERVICE PLAN FOR SERVERS/WORKSTATIONS Line Description 0001 MANAGED SERVICE PLAN FOR SERVERS/WORKSTATIONS INVOICE-TYPE DESCRIPTION 7001 EMAIL ARCHIVER RENEWAL Line Description 0001 EMAIL ARCHIVER RENEWAL P.O. BOX 742592 *** VENDOR: TER01 (T	PERIOD PERIOD 11-19 PERIOD 11-19	DATE 11/01/19 N N N G/L Account No 01 4140 2151 (General Fund Nor DATE 10/25/19 N N N G/L Account No 01 4140 2150 (General Fund Nor PROCESSING CENTER CO	TERM-DESCRIPTION G/ A-NET30 FROM INVOICE Unit(s) Unit Cost 1 2652.00 1-Department1 IT Services) Invoice Extension> TERM-DESCRIPTION G/ A-NET30 FROM INVOICE Unit(s) Unit Cost 1 1502.81 1-Department1 Prof1 Services) Invoice Extension> Vendor Total>	L ACCOUNT No 2010 Amount 2652.00 L ACCOUNT No 2010 Amount 1502.81 4154.81
#** VENDOR: TE INVOICE-TYPE DESCRIPTION 6988 MANAGED SERVICE PLAN FOR SERVERS/WORKSTATIONS Line Description 0001 MANAGED SERVICE PLAN FOR SERVERS/WORKSTATIONS INVOICE-TYPE DESCRIPTION 7001 EMAIL ARCHIVER RENEWAL Line Description 0001 EMAIL ARCHIVER RENEWAL P.O. BOX 742592 *** VENDOR: TER01 (TINVOICE-TYPE DESCRIPTION	PERIOD PERIOD 11-19 PERIOD 11-19	DATE 11/01/19 N N N G/L Account No 01 4140 2151 (General Fund Nor DATE 10/25/19 N N N G/L Account No 01 4140 2150 (General Fund Nor ROCESSING CENTER CC DATE 10/18/19 N N N	TERM-DESCRIPTION G/ A-NET30 FROM INVOICE Unit(s) Unit Cost 1 2652.00 1-Department1 IT Services) Invoice Extension> TERM-DESCRIPTION G/ A-NET30 FROM INVOICE Unit(s) Unit Cost 1 1502.81 1-Department1 Prof1 Services) Invoice Extension> Vendor Total> Vendor Total> TERM-DESCRIPTION G/ A-NET30 FROM INVOICE Unit(s) Unit Cost	L ACCOUNT No 2010 Amount 2652.00 L ACCOUNT No 2010 Amount 1502.81 4154.81
INVOICE-TYPE DESCRIPTION 6988 MANAGED SERVICE PLAN FOR SERVERS/WORKSTATIONS Line Description 0001 MANAGED SERVICE PLAN FOR SERVERS/WORKSTATIONS INVOICE-TYPE DESCRIPTION 7001 EMAIL ARCHIVER RENEWAL Line Description 0001 EMAIL ARCHIVER RENEWAL P.O. BOX 742592 *** VENDOR: TER01 (TINVOICE-TYPE DESCRIPTION 1NVOICE-TYPE DESCRIPTION 390782413 PEST CONTROL @ 918 PBISPO ST.	PERIOD PERIOD 11-19 PERIOD 11-19	DATE 11/01/19 N N N G/L Account No 01 4140 2151 (General Fund Nor DATE 10/25/19 N N N G/L Account No 01 4140 2150 (General Fund Nor ROCESSING CENTER CC DATE 10/18/19 N N N	TERM-DESCRIPTION G/ A-NET30 FROM INVOICE Unit(s) Unit Cost 1 2652.00 n-Department1 IT Services) Invoice Extension> TERM-DESCRIPTION G/ A-NET30 FROM INVOICE Unit(s) Unit Cost 1 1502.81 n-Department1 Prof1 Services) Invoice Extension> Vendor Total> Vendor Total> TERM-DESCRIPTION G/ A-NET30 FROM INVOICE Unit(s) Unit Cost	L ACCOUNT No 2010 Amount 2652.00 2652.00 L ACCOUNT No 2010 Amount 1502.81 4154.81 4154.81 L ACCOUNT No 2010 Amount

INVOICE-TYPE DESCRIPTION

PAGE: 030 ID #: PY-IP CTL.: GUA

REPORT: Nov 07 19 Thursday RUN...: Nov 07 19 Time: 13:13 Run By.: Esther Britt City of Guadalupe Invoice/Pre-Paid Check Audit Trail Batch B91107 - 13:13

	PERIOD	DATE	TERM-DESCRIPTION	
			Vendor Total	> 161.00
835 EAST CYPRESS ST *** VENDO	R.: THE07 (P	HILIP F. SINCO)	30······	1819
INVOICE-TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT NO
10048 PROFESSIONAL SERVICES (09/2019)			A-NET30 FROM INVOICE	
Line Description		G/L Account No	Unit(s) Unit Cost	. Amount
0001 PROFESSIONAL SERVICES (09/2019)			Unit(s) Unit Cost 1 5494.5(Attorney Profl Services)	
			Invoice Extension	> 5494.50
			Vendor Total	5494.50
P.O. BOX 6813 *** VEN	DOR.: TOT02	(TOTALFUNDS)		
INVOICE-TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT NO
102419 POSTAGE WATER/WASTE WATER			A-NET30 FROM INVOICE	
Line Description		G/L Account No	Unit(s) Unit Cost	Amount
0001 POSTAGE WATER/WASTE WATER		10 4420 1200		1500.00
0002 POSTAGE WATER/WASTE WATER		12 4425 1200	1 1500.00 astewater Off Suppl/Postg)	1500.00
			Invoice Extension>	
			Vendor Total>	3000.00
	ENDOR.: ULT01	(ULTREX)	Vendor Total>	3000.00
712 FIERO LANE SUITE #33 *** VI INVOICE-TYPE DESCRIPTION	ENDOR.: ULT01	(ULTREX) DATE	Vendor Total> TERM-DESCRIPTION	3000.00 3000.00 ========================
712 FIERO LANE SUITE #33 *** VI	PERIOD	(ULTREX) DATE	Vendor Total>	3000.00 3000.00 222222222 G/L ACCOUNT No
712 FIERO LANE SUITE #33 *** VI INVOICE-TYPE DESCRIPTION 110618-C CREDIT FOR COPIES Line Description	PERIOD 11-19	DATE 10/31/19 N N N G/L Account No	Vendor Total> TERM-DESCRIPTION A-NET30 FROM INVOICE Unit(s) Unit Cost	3000.00 3000.00 3000.00 G/L ACCOUNT No 2010 Amount
712 FIERO LANE SUITE #33 *** VI INVOICE-TYPE DESCRIPTION 110618-C CREDIT FOR COPIES	PERIOD 11-19	(ULTREX) DATE 10/31/19 N N N G/L Account No 01 4105 1550	Vendor Total> TERM-DESCRIPTION A-NET30 FROM INVOICE Unit(s) Unit Cost	3000.00 3000.00 G/L ACCOUNT No 2010 Amount -6.98
712 FIERO LANE SUITE #33 *** VI INVOICE-TYPE DESCRIPTION 110618-C CREDIT FOR COPIES Line Description	PERIOD 11-19	(ULTREX) DATE 10/31/19 N N N G/L Account No 01 4105 1550	Vendor Total> TERM-DESCRIPTION A-NET30 FROM INVOICE Unit(s) Unit Cost -1 6.98	3000.00 3000.00 G/L ACCOUNT No 2010 Amount -6.98
712 FIERO LANE SUITE #33 *** VI INVOICE-TYPE DESCRIPTION 110618-C CREDIT FOR COPIES Line Description 0001 CREDIT FOR COPIES	PERIOD PERIOD 11-19 PERIOD	ULTREX) DATE 10/31/19 N N N G/L Account No 01 4105 1550 (General Fund Admir	Vendor Total> TERM-DESCRIPTION A-NET30 FROM INVOICE Unit(s) Unit Cost -1 6.98 nistration Op Supp/Expense Invoice Extension> TERM-DESCRIPTION	3000.00 3000.00 3000.00 G/L ACCOUNT No 2010 Amount
712 FIERO LANE SUITE #33 *** VI INVOICE-TYPE DESCRIPTION 110618-C CREDIT FOR COPIES Line Description 0001 CREDIT FOR COPIES	PERIOD PERIOD 11-19	(ULTREX) DATE 10/31/19 N N N G/L Account No 01 4105 1550 (General Fund Admin	Vendor Total> TERM-DESCRIPTION A-NET30 FROM INVOICE Unit(s) Unit Cost -1 6.98 mistration Op Supp/Expense Invoice Extension>	3000.00 3000.00 3000.00 G/L ACCOUNT No 2010 Amount -6.98 G/L ACCOUNT No
712 FIERO LANE SUITE #33 *** VI INVOICE-TYPE DESCRIPTION 110618-C CREDIT FOR COPIES Line Description 0001 CREDIT FOR COPIES INVOICE-TYPE DESCRIPTION 305840 COPIES Line Description	PERIOD PERIOD 11-19 PERIOD	ULTREX) DATE 10/31/19 N N N G/L Account No 01 4105 1550 (General Fund Admin	Vendor Total> TERM-DESCRIPTION A-NET30 FROM INVOICE Unit(s) Unit Cost -1 6.98 mistration Op Supp/Expense Invoice Extension> TERM-DESCRIPTION A-NET30 FROM INVOICE	3000.00 3000.00 3000.00 G/L ACCOUNT No 2010 Amount -6.98) -6.98 G/L ACCOUNT No
712 FIERO LANE SUITE #33 *** VI INVOICE-TYPE DESCRIPTION 110618-C CREDIT FOR COPIES Line Description 0001 CREDIT FOR COPIES INVOICE-TYPE DESCRIPTION 305840 COPIES	PERIOD PERIOD 11-19 PERIOD	DATE 10/31/19 N N N G/L Account No 01 4105 1550 (General Fund Admin DATE 10/31/19 N N N G/L Account No 01 4105 1550	Vendor Total> TERM-DESCRIPTION A-NET30 FROM INVOICE Unit(s) Unit Cost -1 6.98 nistration Op Supp/Expense Invoice Extension> TERM-DESCRIPTION A-NET30 FROM INVOICE Unit(s) Unit Cost 1 275.18	3000.00 3000.00 3000.00 G/L ACCOUNT No 2010 Amount
712 FIERO LANE SUITE #33 *** VI INVOICE-TYPE DESCRIPTION 110618-C CREDIT FOR COPIES Line Description 0001 CREDIT FOR COPIES INVOICE-TYPE DESCRIPTION 305840 COPIES Line Description	PERIOD PERIOD 11-19 PERIOD	ULTREX) DATE 10/31/19 N N N G/L Account No 01 4105 1550 (General Fund Admin DATE 10/31/19 N N N G/L Account No 01 4105 1550 (General Fund Admin 01 4105 1550	Vendor Total> TERM-DESCRIPTION A-NET30 FROM INVOICE Unit(s) Unit Cost -1 6.98 nistration Op Supp/Expense Invoice Extension> TERM-DESCRIPTION A-NET30 FROM INVOICE Unit(s) Unit Cost 1 275.18 nistration Op Supp/Expense 1 52.79	3000.00 3000.00 3000.00 G/L ACCOUNT No 2010 Amount
712 FIERO LANE SUITE #33 *** VI INVOICE-TYPE DESCRIPTION 110618-C CREDIT FOR COPIES Line Description 0001 CREDIT FOR COPIES INVOICE-TYPE DESCRIPTION 305840 COPIES Line Description 0001 COPIES	PERIOD PERIOD 11-19 PERIOD	DATE 10/31/19 N N N G/L Account No 01 4105 1550 (General Fund Admin DATE 10/31/19 N N N G/L Account No 01 4105 1550 (General Fund Admin A	Vendor Total> TERM-DESCRIPTION A-NET30 FROM INVOICE Unit(s) Unit Cost -1 6.98 mistration Op Supp/Expense Invoice Extension> TERM-DESCRIPTION A-NET30 FROM INVOICE Unit(s) Unit Cost 1 275.18 mistration Op Supp/Expense 1 52.79 mice Op Supp/Expense) 1 33.84	3000.00 3000.00 3000.00 3000.00 G/L ACCOUNT No 2010 Amount6.98 G/L ACCOUNT No 2010 Amount 275.18
712 FIERO LANE SUITE #33 *** VI INVOICE-TYPE DESCRIPTION 110618-C CREDIT FOR COPIES Line Description 0001 CREDIT FOR COPIES INVOICE-TYPE DESCRIPTION 305840 COPIES Line Description 0001 COPIES 0002 COPIES	PERIOD PERIOD 11-19 PERIOD	DATE 10/31/19 N N N G/L Account No 01 4105 1550 (General Fund Admin DATE 10/31/19 N N N G/L Account No 01 4105 1550 (General Fund Admin 01 4100 1550 (General Fund Finar 01 4220 1550 (General Fund Fire 01 4220 1550	Vendor Total> TERM-DESCRIPTION	3000.00 3000.00 3000.00 G/L ACCOUNT No 2010 Amount -6.98 G/L ACCOUNT No 2010 Amount 275.18
712 FIERO LANE SUITE #33 *** VI INVOICE-TYPE DESCRIPTION 110618-C CREDIT FOR COPIES Line Description 0001 CREDIT FOR COPIES INVOICE-TYPE DESCRIPTION 305840 COPIES Line Description 0001 COPIES 0002 COPIES	PERIOD PERIOD 11-19 PERIOD	DATE 10/31/19 N N N G/L Account No 01 4105 1550 (General Fund Admin DATE 10/31/19 N N N G/L Account No 01 4105 1550 (General Fund Admin 01 4120 1550 (General Fund Finar 01 4220 1550 (General Fund Fire 01 4220 1550 (General Fund Fire 01 4220 1550 (General Fund Fire 01 420 1550 (General Fund Fire 01 420 1550	Vendor Total> TERM-DESCRIPTION A-NET30 FROM INVOICE Unit(s) Unit Cost -1 6.98 nistration Op Supp/Expense Invoice Extension> TERM-DESCRIPTION A-NET30 FROM INVOICE Unit(s) Unit Cost 1 275.18 nistration Op Supp/Expense 1 52.79 nce Op Supp/Expense) 1 33.84 Op Supp/Expense) 1 68.29 Op Supp/Expense)	3000.00 3000.00 3000.00 G/L ACCOUNT No 2010 Amount -6.98 G/L ACCOUNT No 2010 Amount 275.18) 52.79 33.84 68.29 10.18
712 FIERO LANE SUITE #33 *** VI INVOICE-TYPE DESCRIPTION 110618-C CREDIT FOR COPIES Line Description O001 CREDIT FOR COPIES INVOICE-TYPE DESCRIPTION 305840 COPIES Line Description 0001 COPIES 0002 COPIES 0003 COPIES	PERIOD PERIOD 11-19 PERIOD	DATE 10/31/19 N N N G/L Account No 01 4105 1550 (General Fund Admin DATE 10/31/19 N N N G/L Account No 01 4105 1550 (General Fund Admin 01 4120 1550 (General Fund Finar 01 4220 1550 (General Fund Fire 01 4220 1550 (General Fund Fire 01 4220 1550 (General Fund Fire 01 420 1550 (General Fund Fire 01 420 1550	Vendor Total> TERM-DESCRIPTION A-NET30 FROM INVOICE Unit(s) Unit Cost -1 6.98 mistration Op Supp/Expense Invoice Extension> TERM-DESCRIPTION A-NET30 FROM INVOICE Unit(s) Unit Cost 1 275.18 mistration Op Supp/Expense 1 52.79 nce Op Supp/Expense) 1 33.84 Op Supp/Expense) 1 68.29 Op Supp/Expense) 1 1 68.29	3000.00 3000.00 3000.00 G/L ACCOUNT No 2010 Amount -6.98 G/L ACCOUNT No 2010 Amount 275.18) 52.79 33.84 68.29 10.18)

INVOICE-TYPE DESCRIPTION PERIOD DATE TERM-DESCRIPTION G/L ACCOUNT NO

REPORT:: Nov 07 19 Thursday RUN...: Nov 07 19 Time: 13:18 Run By.: Esther Britt City of Guadalupe Invoice/Pre-Paid Check Audit Trail Batch B91107 - 13:18 PAGE: 031 ID #: PY-IP CTL.: GUA

P.O. BOX 6	60108	*** VENDOR.: VE		RIZON WIRELESS)		
INVOICE-TY	PE DESCRIPTION		PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No
102519	COMMUNICATION-	09/19/19-10/18/19	11-19	10/18/19 N N N	A-NET30 FROM INVOICE	2010
Line	Description			G/L Account No	Unit(s) Unit Cost	Amount
0001	COMMUNICATION-09/	19/19-10/18/19		01 4100 1150	1 54.53	54.53
0002	COMMUNICATION-09/	19/19-10/18/19		01 4105 1150	ty Council Communications / 1 54.53 Mministration Communications)	54.53
0003	COMMUNICATION-09/	19/19-10/18/19		01 4145 1150	1 13.68	13.68
0004	COMMUNICATION-09/	19/19-10/18/19	7.9	01 4300 1150	ilding Mtce Communications) 1 13.68	13.68
0005	COMMUNICATION-09/	19/19-10/18/19		(General Fund Pa 10 4420 1150	rks & Rec Communications) 1 204.91	204.91
0006	COMMUNICATION-09/	19/19-10/18/19		(Wtr. Oper. Fund 12 4425 1150	Water Operating Communication 1 163.79	ns) 163.79
0007	COMMUNICATION-09/	19/19-10/18/19		71 4454 1150	Wastewater Communications) 1 114.84	114.84
				(MEASURE A MEASU	RE A Communications)	
					Invoice Extension>	619.96
INVOICE-TY	PE DESCRIPTION		PERIOD	DATE	TERM-DESCRIPTION C	S/L ACCOUNT No
		310-2761,363-6528,363-6529 9/9-10/8				
Line	Description			G/L Account No	Unit(s) Unit Cost	Amount
		0-2761,363-6528,363-6529 9/9-10/8		01 4220 1150 (General Fund Fi	Unit(s) Unit Cost 1 119.32 re Communications)	
					Invoice Extension>	119.32
	PE DESCRIPTION		PERIOD	DATE	TERM-DESCRIPTION G	JL ACCOUNT NO
					A-NET30 FROM INVOICE	
	Description			G/L Account No	Unit(s) Unit Cost	Amount
	COMMUNICATIC	99•38+		01 4200 1150 (General Fund Po	1 54.53 lice Communications)	54.53
		3,600.+			Invoice Extension>	54.53
		1.370.87+				
		248 • 11+			Vendor Total>	793 81
		5 • 6 9 2 • +				
4412 HOLLY	STREET	102·21+ vi		MELIA VILLEGAS)		· · · · · · · · · · · · · · · · · · ·
INVOICE-TY	PE DESCRIPTI	20 • 28 +	PERIOD	DATE	TERM-DESCRIPTION G	/L ACCOUNT No
	JOB POSTI				A-NET30 FROM INVOICE	2010
Line	Descriptio	161•+		G/L Account No	Unit(s) Unit Cost	Amount
0001	JOB POSTING	5,494.5+		01 4105 1250	1 225.00	225.00
		3 • 0 0 0 • +			ministration Advertisin/Pub.)	
		440 • 28 +			Invoice Extension>	225.00
		793 • 81+				
		225•+			Vendor Total>	225.00
		203,537.71*				
					** Total Invoices>	203530.73
		203,537.71+			*** Total Purchases>	203530.73
		203.530.73-			TOTAL FULCHASES>	203530.73
		Credit - 6.98*				
		C1 (00 C 0) 0 *				

REPORT: Nov 07 19 Thursday RUN...: Nov 07 19 Time: 13:13 Run By.: Esther Britt

City of Guadalupe Invoice/Pre-Paid Check Audit Trail General Ledger Accounts with Budget Summary November 07, 2019 Accounting Period is November, 2019 PAGE: 032 ID #: PY-IP CTL.: GUA

FUND	DEPT	OBJT	Description (DEPT/OBJT/FUND)	Activity	Actual	Encumbrance	Total	Budget	Variance
01	2004		D.J. FARMS//General Fund	18964.94					
01	2010		Accounts Payable//General Fund	-117442.30					
01	2044		Auditorium/Park Deposits//Gener	1400.00					
01	2075		Pioneer Street Apartments//Gene	120.00					
01	2078		GUAD CULTURAL ARTS & EVENT C//G	120.00					
01	2088		Alvarez 4626 11th Apartments//G	240.00					
01	2093		PSHH - Guadalupe Court//General	440.00					
01	2271		Guadalupe Ranch Acres//General	1852.50					
01	3479		*>CONTRIBUTIONS//General Fund	449.88	.00	535.95	985.83	.00	-985.83
01	3643	<	*>Misc Revenue - Police//General	1.00	-8554.83	6230.41	-2323,42	-26000.00	-23676.58
01	4100	1150	City Council/Communication/Gene	54.53	108.90	54.45	217.88	660.00	442.12
01	4105	1150	Administratio/Communication/Gen	238.76	1044.58	427.89	1711.23	5500.00	3788.77
01	4105	1200	Administratio/Off Suppl/Pos/Gen	218.66	406.21	141.88	766.75	1800.00	1033.25
01	4105	1250	Administratio/Advertisin/Pu/Gen	279.00	605.05	.00	884.05	4000.00	3115.95
01	4105	1550	Administratio/Op Supp/Expen/Gen	564.25	491.80	325.43	1381.48	1500.00	118.52
01	4105	2150	Administratio/Profl Service/Gen	4053.08	945.52	1653.10	6651.70	7000.00	348.30
01	4110	2150	City Attorney/Profl Service/Gen	5494.50	14495.60	9467.25	29457.35	110000.00	80542.65
01	4120	1150	Finance/Communication/General F	122.82	631.80	288.20	1042.82	3200.00	2157.18
01	4120	1200	Finance/Off Suppl/Pos/General F	338.77	597.05	.00	935.82	2500.00	1564.18
01	4120	1550	Finance/Op Supp/Expen/General F	170.67	73.10	1066.28	1310.05	2000.00	689.95
01	4120	2150	Finance/Profl Service/General F	948.60	3452.13	653.60	5054.33	20000.00	14945.67
01	4140		*>Non-Departmen/Health Insura/Gen	64.79	123.31	64.79	252.89	.00	-252.89
01	4140	2150	Non-Departmen/Profl Service/Gen	1502.81	21.90	10.95	1535.66	11000.00	9464.34
01	4140	2151	Non-Departmen/IT Services/Gener	2652.00	7726.00	3062.00	13440.00	30000.00	16560.00
01	4140	2350	Non-Departmen/Svcs.Other Ag/Gen	20808.25	.00	.00	20808.25	62000.00	41191.75
01	4145	1000	Building Mtce/Utilities/General	14697.03	6401.53	3485.90	24584.46	35000.00	10415.54
01	4145	1150	Building Mtce/Communication/Gen	13.68	27.39	13.66	54.73	190.00	135.27
01	4145	1550	Building Mtce/Op Supp/Expen/Gen	1373.76	2592.56	2531.84	6498.16	7800.00	1301.84
01	4145	2150	Building Mtce/Profl Service/Gen	4687.51	5899.77	4027.46	14614.74	23000.00	8385.26
01	4200	1150	Police/Communication/General Fu	238.76	1005.58	195.75	1440.09	9000.00	7559.91
01	4200	1300	Police/Bus Exp/Train/General Fu	383.96	1023.60	125.00	1532.56	15062.00	13529.44
01	4200	1460	Police/Vehicle Maint/General Fu	357.94	2749.90	81.04	3188.88	5000.00	1811.12
01	4200	1550	Police/Op Supp/Expen/General Fu	3979.50	2291.62	1141.56	7412.68	19888.00	12475.32
01	4200	1560	Police/Fuels/Lubrica/General Fu	1287.90	4095.42	2181.76	7565.08	24731.00	17165.92
01	4220	0450	Fire/Other Benefit/General Fund	105.97	-4807.38	.00	-4701.41	3000.00	7701.41
01	4220	1150	Fire/Communication/General Fund	180.73	754.67	466.88	1402.28	4600.00	3197.72
01	4220	1460	Fire/Vehicle Maint/General Fund	1075.84	.00	14.84	1090.68	10000.00	8909.32
01	4220	1550	Fire/Op Supp/Expen/General Fund	158.64	2887.83	1106.26	4152.73	12000.00	7847.27
01	4220	1560	Fire/Fuels/Lubrica/General Fund	1672.14	942.27	591.90	3206.31	9000.00	5793.69
01	4220	4150<	*>Fire/Lease-Purchas/General Fund	3479.93	.00	.00	3479.93	.00	-3479.93
01	4300	1000	Parks & Rec/Utilities/General F	6770.56	14728.00	12259.75	33758.31	64000.00	30241.69
01	4300	1150	Parks & Rec/Communication/Gener	13.68	315.53	301.86	631.07	1900.00	1268,93
01	4300	1550	Parks & Rec/Op Supp/Expen/Gener	16.79	3463.85	101.08	3581.72	4000.00	418.28
01	4300	2150	Parks & Rec/Profl Service/Gener	4077.08	5445.38	58.28	9580.74	30000.00	20419.26

REPORT.: Nov 07 19 Thursday RUN....: Nov 07 19 Time: 13:13 Run By.: Esther Britt

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City of Guadalupe Invoice/Pre-Paid Check Audit Trail General Ledger Accounts with Budget Summary November 07, 2019 Accounting Period is November, 2019

PAGE: 033 ID #: PY-IP CTL.: GUA

			11000	anding reriou	ID NOVEMBEL,	2015			
FUNI	DEPT	OBJT	Description (DEPT/OBJT/FUND)	Activity	Actual	Encumbrance	Total	Budget	Variance
01	4405	1150	Bldg and Safe/Communication/Gen	61.41	505.51	288,20	855.12	2550.00	1694.88
01	4405	1550	Bldg and Safe/Op Supp/Expen/Gen	10.18	37.91	57.33	105.42	2500.00	2394.58
01	4405	2150	Bldg and Safe/Profl Service/Gen		22192,25	26980.00	60871.75	200000.00	139128.25
			Fund (01) Total>	.00	94721.31	79992.53	269018.70	718381.00	449362.30
				=========					
10	2010		Accounts Payable//Wtr. Oper. Fu	-31351.98					
10	4420	0150<*	>Water Operati/Temp Employee/Wtr	1615.88	11197.25	1674.00	14487.13	.00	-14487.13
10	4420	0450	Water Operati/Other Benefit/Wtr	289.25	2343.86	.00	2633.11	12000.00	9366.89
10	4420	1000	Water Operati/Utilities/Wtr. Op	12988.18	24093.53	12485.04	49566.75	110000.00	60433.25
10	4420	1150	Water Operati/Communication/Wtr	251.91	975.19	716.69	1943.79	4500.00	2556.21
10	4420	1200	Water Operati/Off Suppl/Pos/Wtr	1500.00	1598.88	145.69	3244.57	9000.00	5755.43
10	4420	1450	Water Operati/Facilities Ma/Wtr	2964.73	2130.00	3268.64	8363.37	20000.00	11636.63
10	4420	1535	Water Operati/Meters/Wtr. Oper.	3848.58	5273.64	.00	9122.22	10000.00	877.78
10	4420	1550	Water Operati/Op Supp/Expen/Wtr	1219.25	6308.20	2512.63	10040.08	40000.00	29959.92
10	4420	1560	Water Operati/Fuels/Lubrica/Wtr	643.54	1204.35	1255.17	3103.06	6500.00	3396.94
10	4420	2150	Water Operati/Profl Service/Wtr	323.80	10951.76	1847,13	13122.69	50000.00	36877.31
10	4420	2350	Water Operati/Svcs.Other Ag/Wtr	5692.00	26406.25	.00	32098.25	45000.00	12901.75
10	4420	4150	Water Operati/Lease-Purchas/Wtr	14.86	4129.75	3618.10	7762.71	18500.00	10737.29
			Fund (10) Total>	.00	96612.66	27523,09	155487.73	325500.00	170012.27
			=		222222	==========			
12	2010		Accounts Payable//Wst.Wtr.Op.Fu	-25148.15					
12	4425	1000	Wastewater/Utilities/Wst.Wtr.Op	6243.85	42104.56	23775.08	72123.49	220000.00	147876.51
12	4425	1150	Wastewater/Communication/Wst.Wt	163.79	1173.50	598.15	1935.44	4800.00	2864.56
12	4425	1200	Wastewater/Off Suppl/Pos/Wst.Wt	1500.00	1598.87	198.27	3297.14	8000.00	4702.86
12	4425	1450	Wastewater/Facilities Ma/Wst.Wt	7828.16	667.50	580.00	9075.66	10000.00	924.34
12	4425	1550	Wastewater/Op Supp/Expen/Wst.Wt	210.10	5766.32	878.42	6854.84	32000.00	25145.16
12	4425	1560	Wastewater/Fuels/Lubrica/Wst.Wt	461.60	1092.32	340.00	1893.92	9000.00	7106.08
12	4425	2150	Wastewater/Profl Service/Wst.Wt	2309.12	17266.33	8503.30	28078.75	150000.00	121921.25
12	4425	2250<*	>Wastewater/Property Rent/Wst.Wt	5191.27	.00	.00	5191.27	5000.00	-191.27
12	4425	4150	Wastewater/Lease-Purchas/Wst.Wt	1240.26	7805.91	4843.50	13889.67	34000.00	20110.33
			-						
			Fund (12) Total>	.00	77475.31	39716.72	142340.18	472800.00	330459.82
			=	=========					
20	2010		Accounts Payable//Gas Tax Fund	-42.50					
20	4430	2150<*	>Gas Tax-Stree/Profl Service/Gas	42.50	9050.00	9915.00	19007.50	.00	-19007.50
			Fund (20) Total>	.00	9050.00	9915.00	19007.50	.00	-19007.50
			-			========			

Accounts Payable//LTF - Transit -5375.19

REPORT.: Nov 07 19 Thursday RUN....: Nov 07 19 Time: 13:13 Run By.: Esther Britt

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Accounts Payable//CIP

City of Guadalupe Invoice/Pre-Paid Check Audit Trail General Ledger Accounts with Budget Summary November 07, 2019 Accounting Period is November, 2019

PAGE: 034 ID #: PY-IP CTL.: GUA

FUND	DEPT	OBJT	Description (DEPT/OBJT/FUND)	Activity	Actual	Encumbrance	Total	Budget	Variance
23	4461	1560	LTF Transit/Fuels/Lubrica/LTF	5375.19	.00	5241.13	10616.32	68350.00	57733.68
			Fund (23) Total>	.00	.00	5241.13	10616.32	68350.00	
				========	~~=======	========	========	*******	========
6	2010		Accounts Payable//RDA-Op.Fund	-2298.22					
6	4500	1000<	>Redevelopment/Utilities/RDA-Op	. 2298.22	8127.49	5529.83	15955.54	14000.00	-1955.54
			Fund (26) Total>	.00	8127.49	5529.83	15955.54	14000.00	-1955.54
								==========	
2	2010		3						
	2010 4470	3150-4	Accounts Payable//Wstwtr.Cap.Fu >Wastewater Ca/Imp.Other/Bui/Wst		7004 21	.00	0164 01	0.0	7164 01
	4470	2720<	>wastewater ca/imp.other/Bul/wst	160.00	7004.31	.00	7164.31	.00	-7164.31
			Fund (32) Total>	.00	7004.31	.00	7164.31	.00	-7164.31
				=========		=========	========	=========	=========
	2010		Accounts Payable//Guad.Assmt.Di	-1751.63					
	4490	1000	Guad. Assmt Di/Utilities/Guad. As		1519.76	732.00	2984.90	10500.00	7515.10
	4490	2150	Guad.Assmt Di/Profl Service/Gua	1018.49	3077.75	160.00	4256.24	6700.00	2443.76
			Fund (60) Total>	.00	4597.51	892.00	7241.14	17200.00	9958.86
				=============		=========			=========
	2010		Accounts Payable//Guad.Light Di	-3705,13					
	4485	1000	Gdlpe Light D/Utilities/Guad.Li		7521.40	3705.50	14932.03	41310.00	26377.97
			Fund (65) Total>						
			rund (65) Total>	.00	7521.40	3705.50	14932.03	41310.00	26377.97
	2010		Accounts Payable//MEASURE A	-5798.61					
	4454	1000	MEASURE A/Utilities/MEASURE A	213.58	427.14	214.60	855.32	2500.00	1644.68
	4454	1150	MEASURE A/Communication/MEASURE		434.61	319.54	868.99	2300.00	1431.01
	4454		>MEASURE A/Equipment Mai/MEASURE		.00	.00	1066.65	1000.00	-66.65
	4454	1460	MEASURE A/Vehicle Maint/MEASURE		54.54	.00	563.46	1500.00	936.54
	4454	1550	MEASURE A/Op Supp/Expen/MEASURE		3273.03	433.08	5411.67	10000.00	4588.33
	4454		>MEASURE A/ATP Cycle 3/MEASURE A		600.00	1355.00	2515.00	.00	-2515.00
	4454	1560	MEASURE A/Fuels/Lubrica/MEASURE		928.66	619.34	2305.38	6000.00	3694.62
	4454	2150	MEASURE A/Profl Service/MEASURE	871.68	1219.01	62.82	2153.51	20000.00	17846.49
			Fund (71) Total>	.00	6936.99	3004.38	15739.98	43300.00	27560.02

-10457.02

REPORT.: Nov 07 19 Thursday RUN....: Nov 07 19 Time: 13:13 Run By.: Esther Britt

City of Guadalupe Invoice/Pre-Paid Check Audit Trail General Ledger Accounts with Budget Summary November 07, 2019 Accounting Period is November, 2019 PAGE: 035 ID #: PY-IP CTL.: GUA

FUND DEPT OBJT Description (DEPT/OBJT/FUND) Activity Actual Encumbrance Total Budget Variance
89 4444 3081<*>CIP/089-501/CIP 10457.02 2420.00 12513.48 25390.50 .00 -25390.50
Fund (89) Total ----> .00 2420.00 12513.48 25390.50 .00 -25390.50

Page.: 1 RPT.: DEPT

City of Guadalupe Departmental Expenditure Report As Of September 30, 2019

4100 - City Council

25 Year Completed

				Total Activity			
EMPLOYEE SERVICES							
01 0100 Permanent Employees 01 0125 Part Time Employees 01 0300 Social Security Taxes - FICA 01 0350 Workers' Compensation	150.00 750.00 68.88 0	300.00 2,400.00 206.64	0 0 0		528.00	482.36 528.00	.00
TOTAL EMPLOYEE SERVICES>	968.88	2,906.64	0			7,310.36	
SUPPLIES & SERVICES							
01 1300 Business Expense and Training 01 1350 Memberships, Dues and Subscripti	158.40 1,100.00 0	1,100.00 19.00 51.91	0 0 0 0	51.91	1,800.00 2,500.00 0 200.00 5,160.00	1,433.37 1,400.00 (19.00) 148.09 3,513.56	20.37 44.00 .00 25.96
DEBT SERVICE							
OTHER FINANCING USES							
TOTAL EXPENDITURES>	-,		0	4,553.08		10,823.92	

Page.: 1 RPT.: DEPT

City of Guadalupe Departmental Expenditure Report As Of September 30, 2019

4105 - Administration

25 Year Completed

Account/Description	Month to Date			Total Activity			% Spent
EMPLOYEE SERVICES							
01 0100 Permanent Employees	5,238.00	20,115.28	0	20.115 28	147,555.00	127,439.72	13.63
01 0125 Part Time Employees	4,091.02	13,323.13	Õ	13,323.13	67,736.00	54,412.87	19.67
01 0150 Temporary Employees	6,710.00	20,562.14	0	20,562.14	52,800.00		38.94
01 0200 Overtime	24.56	181.12	0	181.12	223.00		81.22
01 0250 Retirement - PERS	3,720.75	12,679.22	0	12,679.22			34.60
01 0300 Social Security Taxes - FICA	1 159 59	4,493.60	0	4,493.60	17,024.00		26.40
01 0350 Workers' Compensation	1,632.82 0	0	0	0		13,049.00	.00
01 0400 Health Insurance	1,632.82	4,801.13 (2,758.80)	0	4,801.13			14.34
01 0450 Other Benefits	0	(2,758.80)	0	(2,758.80)	0	28,684.87 2,758.80	.00
01 0560 Est Dental Insurance Payable fr	121.02	354.42	0	354.42	1,986.00	1,631.58	17.85
01 0570 Vision Empr Paid	18.54	54.30	0	54.30	300.00	245.70	18.10
TOTAL EMPLOYEE SERVICES>				73,805.54			19.90
SUPPLIES & SERVICES							
01 1150 Communications	469.30	1,044.58	0	1,044.58	5,500.00	4,455.42	18.99
01 1200 Office Supplies & Postage	213.02	406.21	0	406.21	1,800.00	1,393.79	22.57
01 1250 Advertising & Publication	120.50	605.05	0	605.05	4,000.00	3,394.95	15.13
01 1300 Business Expense and Training	0	5.85	0	5.85	1,000.00	994.15	.59
01 1550 Operating Supplies and Expenses	235.79	491.80 945.52	0	491.80	1,500.00	1,008.20	32.79
01 2150 Other Professional Services	845.36	945.52	0	945.52	7,000.00		13.51
TOTAL SUPPLIES & SERVICES>				3,499.01		17,300.99	
CAPITAL OUTLAY							
DEBT SERVICE							
OTHER FINANCING USES							
OTHER FIRMWOING OBES							
TOTAL EXPENDITURES>	24,600.26	77,304.55	0	77,304.55	391,608.00	314,303.45	19.74
	==========						

Page.: 1 RPT.: DEPT

City of Guadalupe Departmental Expenditure Report As Of September 30, 2019

4110 - City Attorney

25 Year Completed

Account/Description	Month to Date	Year to Date	Encumbrances	Total Activity	Budget	\$ Remaining	% Spent
EMPLOYEE SERVICES							
SUPPLIES & SERVICES							
01 2150 Other Professional Services TOTAL SUPPLIES & SERVICES>	480.00	14,495.60	0	14,495.60	110,000.00	95,504.40	13.18
TOTAL SUPPLIES & SERVICES>	480.00	14,495.60	0	14,495.60	110,000.00	95,504.40	13.18
CAPITAL OUTLAY							
DEBT SERVICE							
OTHER FINANCING USES							
TOTAL EXPENDITURES>	480.00	14,495.60	0	14,495.60	110,000.00	95,504.40	13.18

REPORT.: Oct 30 19 Wednesday RUN....: Oct 30 19 Time: 13:22 Run By.: Esther Britt

City of Guadalupe Invoice/Pre-Paid Check Audit Trail Batch B91030 - 13:22

PAGE: 001 ID #: PY-IP CTL.: GUA

*** VENDOR.: SAN86 (SANTA BARBARA COUNTY SHERIFF'S) 605 CAMINO DEL REMEDIO INVOICE-TYPE DESCRIPTION PERIOD DATE TERM-DESCRIPTION G/L ACCOUNT NO 103019 SBSO-CRIME SCENE INVESTIGATIONS COURSE- TUITION 10-19 10/30/19 N N N A-NET30 FROM INVOICE G/L Account No Unit(s) Unit Cost Amount
01 4200 1300 1 125.00
(General Fund Police Bus Exp/Train) Description Line 0001 SBSO-CRIME SCENE INVESTIAGATIONS COURSE- TUITION Invoice Extension ----> 125.00 Vendor Total ----> 125.00 -----** Total Invoices ----> 125.00 ** Total Checks ----> .00 *** Total Purchases ---> 125.00 =========

REPORT.: Oct 30 19 Wednesday RUN....: Oct 30 19 Time: 13:22 Run By.: Esther Britt

City of Guadalupe

Invoice/Pre-Paid Check Audit Trail General Ledger Accounts with Budget Summary October 30, 2019
Accounting Period is October, 2019

PAGE: 002

ID #: PY-IP

CTL.: GUA

FUND DEPT OBJT Description (DEPT/OBJT/FUND) Activity Actual Encumbrance Budget Variance 01 2010 Accounts Payable//General Fund -125.00 01 4200 1300 Police/Bus Exp/Train/General Fu 125.00 1023.60 .00 1023.60 .00 1148.60 15062.00 13913.40 Fund (01) Total ---->

MINUTES City of Guadalupe

Regular Meeting of the Guadalupe City Council Tuesday, October 8, 2019 at 6:00 pm City Hall, 918 Obispo Street, Council Chambers

ROLL CALL:

Council Member Tony Ramirez
Council Member Eugene Costa Jr.
Council Member Liliana Cardenas
Mayor Pro Tempore Gina Rubalcaba
Mayor Ariston Julian

Mayor Pro Tempore Rubalcaba is absent.

MOMENT OF SILENCE

PLEDGE OF ALLEGIANCE

AGENDA REVIEW

CEREMONIAL CALENDAR

1. Breast Cancer Awareness Month – October 2019

Mayor Julian read aloud the proclamation honoring Breast Cancer Awareness this month. It was orally read in Spanish by Councilwoman Cardenas.

COMMUNITY PARTICIPATION FORUM

CONSENT CALENDAR

- 2. Payment of Warrants for the period ending October 3, 2019 to be approved for payment by the City Council.
- 3. Minutes of the City Council Regular Meeting of August 27, 2019 to be ordered filed.
- **4.** Second Reading of Ordinance No. 2019-481 to consider amendments to the City's Fire Code contained in Chapter 15.08 Sections 903.2.2.1, 903.2.7, and 903.2.21 related to fire sprinkler requirements.

- Designating the Public Works Director/City Engineer Shannon Sweeney, as the Authorized Agent and Signatory for Integrated Regional Water Management (IRWM) Round 1 Implementation Grant Resolution No. 2019-60.
- **6.** Surplus of Public Works Vehicles and Equipment Resolution No. 2019-61.
- 7. Change in Alternate member to the Central Coast Water Authority (CCWA) Board.

Item 2 was pulled

Motion made by Councilman Ramirez and 2nd by Councilman Costa to approve the balance of the Consent Calendar. 4/0 passed.

Ms. Shirley Boydston asked for an explanation of the charge for car wash as it seemed excessive at \$240.00.

Chief Cash spoke saying that the City once a moth washed and thoroughly had cleaned all the mobile equipment of the city, including the fire trucks, in order to keep them in good running order and maintained. Weekly, they do it by hand.

Motion made by Councilman Costa and 2nd by Councilwoman Cardenas to approve #2 on the Consent Calendar. 4/0 passed.

8. MONTHLY REPORTS FROM DEPARTMENT HEADS

- a. Planning Department Report for September 2019
- b. Building Department Report for September 2019
- c. Public Works and Engineers Report for September 2019

INTERIM CITY ADMINISTRATOR REPORT: (Information Only)

Administrator Perrault reported that the first Recreation and Parks Commission meeting will be held on Wednesday, October 30th, 5:30 pm in the Council Chambers. Kids Day in the Park is on October 19th with all our public safety equipment and staff will be out there. The former manager of San Luis Obispo, Mr. Ken Hampian, will be coming in to do some training for the staff and anyone interested. Tuesday, October 29th, 5 pm in Council Chambers.

PUBLIC HEARING

9. Public hearing to consider AP2019-067- Vesting Tentative Tract Map – 29,064 proposal to subdivide Lot 9of Tract Map 29,060 filed on May 9, 2014

Written Report: Jake Raper, Contract City Planner

Recommendation: That the City Council; a. Receive a presentation from staff; and

b. Conduct a public hearing and approve Resolution No. 2019-62 approving Vesting Tentative Tract Map No. 29,064 (Planning Application #2019-067) subject to the attached findings and conditions of approval.

Mr. Jake Raper, City Planner, working with Pasadera project, presented the tentative tract map for Lot 9 proposing to subdivide the lot for developing the housing to be built on it. The site consists of 11.5 acres and proposing 79 single family lots and 5 common lots for storm water and infiltration. The lots are 3,000 square ft. lots in a higher density area. He stated the project was in compliance with section 15182. This project is exempt from further environmental review.

He stated that it should be filed and accepted for review. He then spent some time showing on the map and explaining in further detail the layout and surrounding areas of the impending construction. He discussed entries and exits to the area and its access to the greater community. The primary plot of Pasadera was adopted in 2012 and amended in 2018. This was in relation to 3,000 square feet and shortened driveways.

He clarified the information about the block wall that is going to surround the entire project and the wall being erected north of Highway 166 opposite the project. He also stated that the plan of Pasadera and the agreement of developing it has a twenty-five-year lifespan. The plan was developed in 2012, first amended in 2014, and 2nd amendment occurred in 2015. This was a consolidated plan, allowing both City and Developer quick access and refreshed knowledge of what each is responsible to the other for. The CEQA EIR was approved in 2012; mitigation markers were approved 2012. All conditions of approval are in this application of the tract lot 9. He listed previous maps and portions of the developments previously approved. These consisted of single-family homes and the plans for parks. He enumerated all previous portions and agreements of the ongoing development to be in compliance and asked that all attachments and exhibits as well as staff report be incorporated into the approval of the tract map Lot 9 submittal. He stated the Lighting District for Pasadera did need to be incorporated and set up as part of the improvements' agreement. He asked for all comments and reports on this subject be included.

Open to the Public: 6:24

Ms. Boydstun spoke saying how pleased she was that the agreement to support the Public Library was clearly spelled out in Section 8. The County could not be looked at for funds as they weren't including money for libraries in their budget. Cities have historically funded libraries.

Mr. Raper corrected the timing of the brick wall as being when the development is built out enough for the need of a security measure. The developer wants to close the drainage ditch with a pipe for drainage embedded. This is concerning the wall on Highway 166, north side.

Motion made by Councilman Costa and 2nd by Councilwoman Cardenas to approve the Application 2019-067. Roll Call Ramirez—abstained (Conflict of Interest) Cardenas—aye Costa—aye Mayor Julian-aye 3/1 abstention. Passed.

10. Proposed ordinance regulating, and requiring a Conditional Use Permit for, employee housing of seven (7) or more persons in a dwelling unit.

Written Report: Philip Sinco, City Attorney

<u>Recommendation</u>: That the City Council introduce, on the first reading, Ordinance No. 2019-482 regarding regulating, and requiring a conditional use permit for, employee housing of seven (7) or more persons in a dwelling unit, and continue to the meeting of October 22, 2019 for second reading and adoption.

Attorney Sinco, by way of background, related that the City was sued by the Olivera Apartments in 2017. They alleged that the City passed an ordinance prohibiting any new boarding house in residential zone R3 for purposes of discriminating against farm labor temporary immigrants. Agricultural companies were considering purchasing the apartments to house H2A workers. This is the Federal program which allows temporary farm workers to work and live in the United States for a temporary time. Thirty days after that ordinance, the City passed an ordinance requiring a conditional use permit. The potential buyer who was planning to use the apartments for housing H2A workers declined to buy the apartments and the owns sued the City.

In a trial court, the City lost, but it ultimately was favorable for the City when the Court found that the City had acted accordingly with the law in passing the urgency ordinance. The Court found that the City in passing the permanent ordinance acted rationally relation to a specific government purpose and upheld the rationality. The Court did not reverse the first Court's decision and it did not involve the California Housing act. It just never came up. This law is important because it includes housing of employees which H2A housing is a part of. There are some gaps; however, while it does include a conditional permit for housing 7 or more employees in that space, it is not entirely clear. How the housing regulations applying for group housing would apply to H2A housing may or may not be a legal question. This ordinance clarifies that situation. The Employee Housing Act specifically prohibits regulation of housing of 6 or less persons, so 7 is important milestone for regulation. This regulation has been modified from the one passed by Santa Maria to fit Guadalupe. This also will apply to any dwelling or assessory dwelling in the City. Assessory dwelling units are new in the State, so no litigation has occurred to challenge these ordinances. The staff believes that we are safe from legal challenge on this particular issue.

Open to Public: 6:37

Ms. Claire Wineman, President of the Grower-Shipper Association, spoke in dissent of the conditional use permit requirement as she felt none should pertain to employee housing as to where and how many could be housed. They have fought this in court. She wished to highlight a few key points as she felt we were not correcting our ordinance. She is for no

restrictions on the 6 or less as it better conforms with the California Housing Act. It differs from Santa Maria's code in that it requires a conditional permit where 7 or more dwell on a single parcel when there is an assessor unit in existence. She asks to delete the wording of the ordinance if H2A workers are housed in an ADU. She feels the ordinances will be subject to revisions as the State continues to evolve rapidly the conditions and laws governing housing. She feels the treatment of ADU housing different than other housing in a residential area. She feels it could potentially violate the Federal Housing Act by segregating people by national origin. She felt that housing for 7 or more should be permitted in all zones of the City. She disagreed with our parking standards.

Mr. Steve Simons agreed with Ms. Wineman and felt Santa Maria's ordinances should be ours as they had met with the farmers for over a year to construct them.

Closed to Public: 6:40

Attorney Sinco stated that our situation is different; politically, socially, and economically. He further stated he wanted to address the issue of the ADU use. The reason the Council addressed the Assessory unit on a parcel and the home as a whole is because not to would lead to absurdities. By dividing living quarters, it would simply be providing a loophole for allowing no regulation on how many persons could dwell on a property. This could lead to diseases from unhealth living quarters and all sorts of ills. To apply a law written years before they were created is not rational or lawful as they are a grey area and an untried sector of living. He believes it will withstand legal challenge if that happens. Council would have to find valid reasons to deny a conditional permit if they purported to do so. Mr. Sinco expanded for the Council and Ms. Wineman issues that might come up in the R2 zones that could be a problem. He speculated on why Santa Maria might not have been more restrictive and why it doesn't apply to us.

Major Julian expressed his agreement with Attorney Sinco. We are different than Santa Maria.

Motion made by Councilwoman Cardenas and 2nd by Councilman Costa to approve Ordinance No. 2019-482. Roll Call. Ramirez—aye Cardenas---aye Costa—aye Mayor Julian—aye. 4/0 passed.

REGULAR BUSINESS

11. Letter to the Department of Parks and Recreation Resources in support of the Palace Hotel/Far Western Tavern's Nomination to the California Register of Historical Places.

Written Report: Robert Perrault, Interim City Administrator

<u>Recommendations</u>: That the City Council by motion approve the transmission of the attached letter to the Historical Resources Commission and authorize the Mayor's signature on behalf of the Council.

Administrator Perrault stated that the Dunes Center has requested that the building that once was the Far Western be designated a historical building. That nomination will be heard at the Restorative Resources Commission at its quarterly meeting on November 7th. Staff has developed the attached letter in support to go to the Committee as requested. This is an important building to the City as it was constructed in 1912 and the architecture is very dominate and a central part of the downtown core. It has operated for 107 years as a historic gathering place for the community. Being a historical building does not restrict the use and insides of the building, but preserves the outside and integrity of the building. Fire codes would be the States and far less costly than Guadalupe's. Grants for renovation and retrofitting would be easier to get.

Ms. Shirley Boydston spoke giving the history of the building. The building goes back to 1909 when it was a wooden structure. It first was the Palace Hotel, a wooden structure which burned in 1910 when the Santa Maria Oil and Gas was installing gas lines. It was reconstructed as it is now in 1912. In 1958 the Marretti family bought it and renamed it the Far Western Building. There are restrictions on what you can do to the building and she hopes the Dunes Center is aware of that.

Motion made by Councilwoman Cardenas and 2nd by Councilman Costa for Mayor Julian to sign and mail the letter to California Register of Historical Places.

12. Adoption of a resolution appointing Mr. Todd Bodem as City Administrator and approving the Employment Agreement between the City and Mr. Bodem. 4/0

Written Report: Robert Perrault, Interim City Administrator

<u>Recommendations</u>: That the City Council adopt Resolution No. 2019-63 appointing Todd Bodem as City Administrator and approving the Employment Agreement between the City and Mr. Bodem.

Administrator Perrault presented Mr. Todd Bodem, incoming City Administrator to the Council and Public. The City started recruiting for a permanent Administrator in February of this year. It was extensive and the look in the western states of the United States. After narrowing it down to most qualified and interviews, Mr. Bodem was deemed the man for the job. His was recently Administrator of Sand City in Monterey County. Prior to that he was in Minnesota where he served a variety of small communities. He has a Masters Degree from the University of Minnesota and his background in work experience gives him a variety of experiences with problems similar to our community. He will start on November 1st, 2019.

Mayor Julian stated that he will have a 3-year contract with options for ongoing terms; will be entitled to all the benefits such as life insurance, 137,000 dollars salary and 50 dollars for his phone. Moving expenses will be compensated at \$3,000.

Mr. Todd Bodem thanked the Council and Mr. Perrault. He was very excited and felt happy that he had been chosen after such a thorough search.

Motion made by Councilman Costa and 2nd by Ramirez to adopt the Resolution appointing Mr. Bodem as Administrator of Guadalupe. Roll Call. 4/0 passed.

13. Consideration of a resolution for the CalPERS exception to the 180 Day Wait Period Pursuant to Government Code Section 7522.56(f) and 21221(h) for Appointment of Amelia Villegas as Interim Human Resources Manager.

Written Report: Robert Perrault, Interim City Administrator

<u>Recommendations</u>: That the City Council adopt Resolution No. 2019-64 appointing Amelia Villegas as the interim Human Resources Manager.

Administrator Perrault asked for an exception to CalPers 180 day wait period for reemployment of a former employee. Amelia Villegas retired effective October1st and is willing to serve as interim Human Resource Director until a replacement is found. Amelia has served the City for 13 years in that capacity and is missed. Staff finds it challenging to try to wear all her hats, as Mr. Perrault finds himself doing. Qualified candidates answering the adds earlier placed were few and none ended taking the job. Amelia will work on an as needed basis until a replacement is found. She will not be eligible for the benefits package or sick leave.

Mr. Perrault enumerated other vacancies we are trying to fill and many issues that need attention timely and couldn't wait.

Motion made by Councilman Costa and 2nd by Councilwoman Cardenas to adopt Resolution No. 2019-64 appointing Ms. Villegas as interim Human Resources Director. 4/0 passed.

14. Discussion and direction regarding resolution to be presented at the League of California Cities' annual meeting.

Written Report: Robert Perrault, Interim City Administrator

<u>Recommendations</u>: That the City Council review the resolutions and by consensus provide direction the City's Delegate to the League of California Cities' annual meeting.

Mayor announced he would be on Jury duty. Mr. Perrault gave a quick summery of the two items they will be considering. 1. The Public Utilities proposals for expanding underground installation of utilities, especially in high risk areas. 2. A proclamation for U.S. and Mexico to address water quality issues along the borders.

Motion made by Councilman Ramirez and 2nd by Councilman Costa and by consensus the Council agreed and adopted the support of these issues.

FUTURE AGENDA ITEMS

Councilman Ramirez asked to review how items and issues get placed on the Agenda.

ANNOUNCEMENTS - COUNCIL ACTIVITY/COMMITTEE REPORTS

Councilman Costa attended a kid's golf tournament; they had goals which they met and won four cases of toilet paper. Donated to the City. A non-profit for school district. He announced he attended the Righetti football game.

Mayor Julian announced: Ms. Sweeney and her crew worked on the Parks and City landscape.

This Friday the 200 trees for Guadalupe locations will arrive to begin the planting process.

Resiliency meeting held at Senior Center on Friday the 29th. Twenty-five people attended and Ms. Sweeney attended as greeter and hostess.

Mayor's Ball is this Saturday at the Santa Maria Country Club. Benefits United Way.

The Amigos meeting on the 15th at LeRoy Park.

McKenzie Cross Country Event this Saturday, the 12th. This is its nineteenth year.

Guadalupe Seniors Meeting to regenerate it.

City Clerk Raguz announced that the sculptures were doing well.

Chief Cash announced that Beverly Hills is donating Police and fire equipment and it is a lot of good stuff. They want to visit Guadalupe to see the City and deliver what we will be taking. They are willing to do a program of training here in Guadalupe.

He announced that we are trying to improve our intelligence and information gathering on gang associations and criminal activity. He received some forms from departments south of us to assist in organizing. We are reaching out north and south and making good collaborating partners.

Motion made by Councilman Ramirez and 22nd by Councilman Costa to adjourn. 4/0 passed.

ADJOURNMENT TO CLOSED SESSION MEETING

CLOSED SESSION

15. CONFERENCE WITH LABOR NEGOTIATORS

(Subdivision (a) of Gov. Code Section 54957.6)

Agency designated representatives: City Administrator and Human Resources Manager Employee organizations: Guadalupe Police Officers Associations (POA)

ADJOURNMENT TO OPEN SESSION MEETING

CLOSED SESSION ANNOUNCEMENT ADJOURNMENT PREPARED BY: APPROVED BY:

Ariston Julian, Mayor

Joice Earleen Raguz, City Clerk

Item: 3.

REPORT TO CITY COUNCIL OF THE CITY OF GUADALUPE Council Agenda of November 12, 2019

Prepared by:

Shannon Sweeney, Public Works Director

Approved by:

Todd Bodem, City Administrator

SUBJECT: City Council Adoption

Guadalupe/SMOOTH Drug & Alcohol Testing Program Manual, as amended.

RECOMMENDATION: Approve and Execute Attached "Adoption Certification"

DISCUSSION:

As the transit contractor for the City of Guadalupe's transit operations and administration, SMOOTH, Inc. maintains a Drug and Alcohol Program Testing Program Manual and testing procedures that covers all "Safety Sensitive" employees (Drivers, Office Staff and Mechanics) who may be assigned to Guadalupe transit duties. This Testing Manual is reviewed periodically by Caltrans, the transit oversight administrator for the California Department of Transportation (DOT). One such Desk Review was started in late July 2019 with a Desk Review Report delivered to SMOOTH on October 9, 2019.

The Report included direction from the department to update several Manual sections that have been changed/updated by the Federal Transit Administration's (FTA) Drug and Alcohol Program. Referring to the attached revised Drug and Alcohol Program Testing Program Manual, the majority of the Manual changes involve final verbiage related to the 2018 addition of opioids as a tested substance, first adopted by the City Council on April 10, 2018. All current changes have been noted in the attached Manual with a symbol. The revised Manual has been re-submitted to Desk Review staff and has been approved as revised.

The California DOT and the FTA require that all substantive changes/revisions to Drug and Alcohol Testing Program Manuals are reviewed and formally adopted by the appropriate Governing Body, in this case both the Guadalupe City Council and the SMOOTH Board of Directors. The SMOOTH Board adopted the revised Manual during their November 6th meeting.

The revised Guadalupe/SMOOTH Drug & Alcohol Testing Program Manual is hereby offered for Council adoption.

FISCAL IMPACT:

There are no fiscal impacts that will result from the requested adoption of this Manual.

ATTACHMENTS:

Guadalupe/SMOOTH Drug & Alcohol Policy, as revised Adoption Certification (please use submitted document format)

DRUG AND ALCOHOL TESTING PROGRAM MANUAL GUADALUPE TRANSIT / SMOOTH, INC.

Adopted - NOV. 6, 2019 (SMOOTH) and NOV. 12, 2019 (City Council) (Nov-2019 Revisions indicated with © symbol)

A. PURPOSE

- 1) The GUADALUPE TRANSIT / SMOOTH, INC. provides public transit and paratransit services for the residents of the City of Guadalupe, CA and the Central Coast of California. Part of our mission is to ensure that this service is delivered safely, efficiently, and effectively by establishing a drug and alcohol-free work environment, and to ensure that the workplace remains free from the effects of drugs and alcohol in order to promote the health and safety of employees and the general public. In keeping with this mission, GUADALUPE TRANSIT / SMOOTH, INC. declares that the unlawful manufacture, distribution, dispense, possession, or use of controlled substances or misuse of alcohol is prohibited for all employees.
- 2) Additionally, the purpose of this policy is to establish guidelines to maintain a drug and alcohol-free workplace in compliance with the Drug-Free Workplace Act of 1988, and the Omnibus Transportation Employee Testing Act of 1991. This policy is intended to comply with all applicable Federal regulations governing workplace anti-drug and alcohol programs in the transit industry. Specifically, the Federal Transit Administration (FTA) of the U.S. Department of Transportation has published 49 CFR Part 655, as amended, that mandates urine drug testing and breath alcohol testing for safety-sensitive positions, and prohibits performance of safety-sensitive functions when there is a positive test result, or test refusal for FTA; 49 CFR Part 382 for Federal Motor Carrier Safety Administration (FMCSA); and The U. S. Department of Transportation (USDOT) has also published 49 CFR Part 40, as amended, that sets standards for the collection and testing of urine and breath specimens.
- 3) Any provisions set forth in this policy that are included under the sole authority of **SMOOTH**, **INC**. and <u>are not</u> provided under the authority of the above named Federal regulations are underlined. Tests conducted under the sole authority of **SMOOTH**, **INC**. will be performed on non-USDOT forms and will be separate from USDOT testing in all respects.

B. APPLICABILITY

This Drug and Alcohol Testing Policy applies to all safety-sensitive employees (full- or part-time) when performing safety sensitive duties. See Attachment A for a list of employees and the authority under which they are included.

This policy applies to every person whose position requires the possession of a commercial driver's license (CDL); every employee performing a "safety-sensitive function" as defined below, and any person applying for such positions.

Under FMCSA (Part 382), you are a covered employee if you perform any of the following safety-sensitive functions:

- Driving a commercial motor vehicle which requires the driver to have a CDL
- Waiting to be dispatched to operate a commercial motor vehicle
- Inspecting, servicing, or conditioning any commercial motor vehicle
- Performing all other functions in or upon a commercial motor vehicle (except resting in a sleeper berth)
- Loading or unloading a commercial motor vehicle, supervising or assisting in the loading or unloading, attending a vehicle being loaded or unloading, remaining in readiness to operate the vehicle, or giving or receiving receipts for shipments being loaded or unloaded
- Repairing, obtaining assistance, or remaining in attendance upon a disabled vehicle

Under FTA (Part 655), you are a covered employee if you perform and of the following: (1) operation of public transit service including the operation of a revenue service vehicle (whether or not the vehicle is in revenue service), (2) maintenance of a revenue service vehicle or equipment used in revenue service, (3) security personnel who carry firearms, (4) dispatchers or persons controlling the movement of revenue service vehicles and (4) any transit employee who operates a vehicle that requires a Commercial Driver's License to operate. Maintenance functions include the repair, overhaul, and rebuild of engines, vehicles and/or equipment used in revenue service. A list of safety-sensitive positions who perform one or more of the above mentioned duties is provided in Attachment A. Supervisors are only safety sensitive if they perform one of the above functions. Volunteers are considered safety sensitive and subject to testing if they are required to hold a CDL, or receive remuneration for service in excess of actual expense.

C. <u>DEFINITIONS</u>

FTA Accident: An occurrence associated with the operation of a vehicle even when not in revenue service, if as a result:

- a. An individual dies:
- b. An individual suffers a bodily injury and immediately receives medical treatment away from the scene of the accident; or,

c. One or more vehicles incur disabling damage as the result of the occurrence and is transported away from the scene by a tow truck or other vehicle. For purposes of this definition, disabling damage means damage which precludes departure of any vehicle from the scene of the occurrence in its usual manner in daylight after simple repairs. Disabling damage includes damage to vehicles that could have been operated but would have been further damaged if so operated, but does not include damage which can be remedied temporarily at the scene of the occurrence without special tools or parts, tire disablement without other damage even if no spare tire is available, or damage to headlights, taillights, turn signals, horn, or windshield wipers that makes them inoperative.

Adulterated specimen: A specimen that has been altered, as evidence by test results showing either a substance that is not a normal constituent for that type of specimen or showing an abnormal concentration of an endogenous substance.

Alcohol: The intoxicating agent in beverage alcohol, ethyl alcohol, or other low molecular weight alcohols contained in any beverage, mixture, mouthwash, candy, food, preparation or medication.

Alcohol Concentration: Expressed in terms of grams of alcohol per 210 liters of breath as indicated by a breath test under 49 CFR Part 40.

Aliquot: A fractional part of a specimen used for testing, It is taken as a sample representing the whole specimen.

Canceled Test: A drug or alcohol test that has a problem identified that cannot be or has not been corrected, or which is cancelled. A canceled test is neither positive nor negative.

Confirmatory Drug Test: A second analytical procedure performed on a different aliquot of the original specimen to identify and quantify the presence of a specific drug or metabolite.

Confirmatory Validity Test: A second test performed on a different aliquot of the original urine specimen to further support a validity test result.

Covered Employee Under FTA/FMCSA Authority: An employee who performs a safety-sensitive function including an applicant or transferee who is being considered for hire into a safety-sensitive function (See Attachment A for a list of covered employees).

Designated Employer Representative (DER): An employee authorized by the employer to take immediate action to remove employees from safety-sensitive duties and to make required decisions in testing. The DER also receives test results and other communications for the employer, consistent with the requirements of 49 CFR Parts 40 and 655.

DOT, The Department, DOT Agency: These terms encompass all DOT agencies, including, but not limited to, the Federal Aviation Administration (FAA), the Federal Railroad Administration (FRA), the Federal Motor Carrier Safety Administration (FMCSA), the Federal Transit Administration (FTA), the National Highway Traffic Safety Administration (NHTSA), the Pipeline and Hazardous Materials Safety Administration (PHMSA), and the Office of the Secretary (OST). For purposes of 49 CFR Part 40, the United States Coast Guard (USCG), in the Department of Homeland Security, is considered to be a DOT agency for drug testing purposes. These terms include any designee of a DOT agency.

Department of Transportation (DOT): For the purposes of Drug and Alcohol regulatory oversight, DOT is the department of the federal government which includes the, Federal Transit Administration, Federal Railroad Administration, Federal Aviation Administration, Federal Motor Carriers' Safety Administration, Pipeline & Hazardous Materials Safety Administration, United States Coast Guard, and the Office of the Secretary of Transportation.

Dilute specimen: A urine specimen with creatinine and specific gravity values that are lower than expected for human urine.

Disabling damage: Damage which precludes departure of any vehicle from the scene of the occurrence in its usual manner in daylight after simple repairs. Disabling damage includes damage to vehicles that could have been operated but would have been further damaged if so operated, but does not include damage which can be remedied temporarily at the scene of the occurrence without special tools or parts, tire disablement without other damage even if no spare tire is available, or damage to headlights, taillights, turn signals, horn, or windshield wipers that makes them inoperative.

Evidentiary Breath Testing Device (EBT): A Device approved by the NHTSA for the evidential testing of breath at the 0.02 and the 0.04 alcohol concentrations, and appears on ODAPC's Web page for "Approved Evidential Breath Measurement Devices" because it conforms with the model specifications available from NHTSA. Approved devises are listed on the National Traffic Safety Administration (NHTSA) conforming products list.

Initial Drug Test: (Screening Drug Test) The test used to differentiate a negative specimen from one that requires further testing for drugs or drug metabolites.

Initial Specimen Validity Test: The first test used to determine if a urine specimen is adulterated, diluted, substituted, or invalid

Invalid Result: The result reported by an HHS-certified laboratory in accordance with the criteria established by the HHS Mandatory Guidelines when a positive, negative, adulterated, or substituted result cannot be established for a specific drug or specimen validity test.

Laboratory: Any U.S. laboratory certified by HHS under the National Laboratory Certification program as meeting standards of Subpart C of the HHS Mandatory Guidelines for Federal Workplace Drug Testing Programs; or, in the case of foreign laboratories, a laboratory approved for participation by DOT under this part.

Limit of Detection (LOD): The lowest concentration at which a measurand can be identified, but (for quantitative assays) the concentration cannot be accurately calculated.

Limit of Quantitation: For quantitative assays, the lowest concentration at which the identity and concentration of the measurand can be accurately established.

Medical Review Officer (MRO): A licensed physician (medical doctor or doctor of osteopathy) responsible for receiving laboratory results generated by the drug testing program who has knowledge of substance abuse disorders, and has appropriate medical training to interpret and evaluate an individual's confirmed positive test result, together with his/her medical history, and any other relevant bio-medical information.

Negative Dilute: A drug test result which is negative for the five drug/drug metabolites but has a specific gravity value lower than expected for human urine.

Negative result: The result reported by an HHS-certified laboratory to an MRO when a specimen contains no drug or the concentration of the drug is less than the cutoff concentration for the drug or drug class and the specimen is a valid specimen.

Non-negative test result: A urine specimen that is reported as adulterated, substituted, invalid, or positive for drug/drug metabolites.

Oxidizing Adulterant: A substance that acts alone or in combination with other substances to oxidize drugs or drug metabolites to prevent the detection of the drug or metabolites, or affects the reagents in either the initial or confirmatory drug test.

Performing (a safety-sensitive function): A covered employee is considered to be performing a safety-sensitive function and includes any period in which he or she is actually performing, ready to perform, or immediately available to perform such functions.

Positive result: The result reported by an HHS- Certified laboratory when a specimen contains a drug or drug metabolite equal or greater to the cutoff concentrations.

Prohibited drug: Identified as marijuana, cocaine, opioids, amphetamines, or phencyclidine at levels above the minimum thresholds specified in 49 CFR Part 40, as amended. Effective January 1, 2018, four semi-synthetic opioids will be tested, hydrocodone, oxycodone, hydromorphone, and oxymorphone.

Reconfirmed: The result reported for a split specimen when the second laboratory is able to corroborate the original result reported for the primary specimen.

Rejected for Testing: The result reported by an HHS- Certified laboratory when no tests are performed for specimen because of a fatal flaw or a correctable flaw that has not been corrected.

Revenue Service Vehicles: All transit vehicles that are used for passenger transportation service.

Safety-sensitive functions: Employee duties identified as:

- (1) The operation of a transit revenue service vehicle even when the vehicle is not in revenue service.
- (2) The operation of a non-revenue service vehicle by an employee when the operation of such a vehicle requires the driver to hold a Commercial Drivers License (CDL).
- (3) Maintaining a revenue service vehicle or equipment used in revenue service.
- (4) Controlling the movement of a revenue service vehicle and
- (5) Carrying a firearm for security purposes.

Split Specimen Collection: A collection in which the urine collected is divided into two separate bottles, the primary specimen (Bottle A) and the split specimen (Bottle B).

Substance Abuse Professional (SAP): A licensed physician (medical doctor or doctor of osteopathy) or licensed or certified psychologist, social worker,

employee assistance professional, state-licensed or certified marriage and family therapist, or drug and alcohol counselor (certified by an organization listed at https://transportation.gov/odapc/sap) with knowledge of and clinical experience in the diagnosis and treatment of drug and alcohol related disorders.

Substituted specimen: A urine specimen with creatinine and specific gravity values that are so diminished or so divergent that they are not consistent with normal human urine.

Test Refusal: The following are considered a refusal to test if the employee:

- (1) Fail to appear for any test (except a pre-employment test) within a reasonable time, as determined by the employer.
- (2) Fail to remain at the testing site until the testing process is complete. An employee who leaves the testing site before the testing process commences for a pre-employment test has not refused to test.
- (3) Fail to attempt to provide a breath or urine specimen. An employee who does not provide a urine or breath specimen because he or she has left the testing site before the testing process commenced for a preemployment test has not refused to test.
- (4) In the case of a directly-observed or monitored urine drug collection, fail to permit monitoring or observation of your provision of a specimen.
- (5) Fail to provide a sufficient quantity of urine or breath without a valid medical explanation.
- (6) Fail or decline to take a second test as directed by the collector or the employer for drug testing.
- (7) Fail to undergo a medical evaluation as required by the MRO or the employer's Designated Employer Representative (DER).
- (8) Fail to cooperate with any part of the testing process.
- (9) Fail to follow an observer's instructions to raise and lower clothing and turn around during a directly-observed test.
- (10) Possess or wear a prosthetic or other device used to tamper with the collection process.
- (11) Admit to the adulteration or substitution of a specimen to the collector or MRO.
- (12) Refuse to sign the certification at Step 2 of the Alcohol Testing Form (ATF).
- (13) Fail to remain readily available following an accident.
- (14) As a covered employee, if the MRO reports that you have a verified adulterated or substituted test result, you have refused to take a drug test.

Vehicle: A bus, electric bus, van, automobile, rail car, trolley car, trolley bus, or vessel. A public transit vehicle is a vehicle used for public transportation or for ancillary services.

Verified negative test: A drug test result reviewed by a medical review officer and determined to have no evidence of prohibited drug use above the minimum cutoff levels established by the Department of Health and Human Services (HHS).

Verified positive test: A drug test result reviewed by a medical review officer and determined to have evidence of prohibited drug use above the minimum cutoff levels specified in 49 CFR Part 40 as revised.

Validity testing: The evaluation of the specimen to determine if it is consistent with normal human urine. Specimen validity testing will be conducted on all urine specimens provided for testing under DOT authority. The purpose of validity testing is to determine whether certain adulterants or foreign substances were added to the urine, if the urine was diluted, or if the specimen was substituted.

D. EDUCATION AND TRAINING

- 1) Every covered employee will receive a copy of this policy and will have ready access to the corresponding federal regulations including 49 CFR Parts 655 and 40, as amended. In addition, all covered employees will undergo a minimum of 60 minutes of training on the signs and symptoms of drug use including the effects and consequences of drug use on personal health, safety, and the work environment. The training also includes manifestations and behavioral cues that may indicate prohibited drug use.
- 2) All supervisory personnel or company officials who are in a position to determine employee fitness for duty will receive 60 minutes of reasonable suspicion training on the physical, behavioral, and performance indicators of probable drug use and 60 minutes of additional reasonable suspicion training on the physical, behavioral, speech, and performance indicators of probable alcohol misuse.

E. PROHIBITED SUBSTANCES

- 1) Prohibited substances addressed by this policy include the following.
 - a. Illegally Used Controlled Substance or Drugs Under the Drug-Free Workplace Act of 1988 any drug or any substance identified in Schedule I through V of Section 202 of the Controlled Substance Act (21 U.S.C. 812), and as further defined by 21 CFR 1300.11 through 1300.15 is prohibited at all times in the workplace unless a

legal prescription has been written for the substance. This includes, but is not limited to: marijuana, amphetamine, opioids, phencyclidine (PCP), and cocaine, as well as any drug not approved for medical use by the U.S. Drug Enforcement Administration or the U.S. Food and Drug Administration.

a. Illegal use includes use of any illegal drug, misuse of legally prescribed drugs, and use of illegally obtained prescription drugs. Also, the medical use of marijuana, or the use of hemp related products, which cause drug or drug metabolites to be present in the body above the minimum thresholds is a violation of this policy

Federal Transit Administration drug testing regulations (49 CFR Part 655) require that all employees covered under FTA/FMCSA authority be tested for marijuana, cocaine, amphetamines, opioids, and phencyclidine as described in Section H of this policy. Illegal use of these five drugs is prohibited at all times and thus, covered employees may be tested for these drugs anytime that they are on duty.

- b. Legal Drugs: The appropriate use of legally prescribed drugs and non-prescription medications is not prohibited. However, the use of any substance which carries a warning label that indicates that mental functioning, motor skills, or judgment may be adversely affected must be reported to a GUADALUPE TRANSIT / SMOOTH, INC. supervisor and the employee is required to provide a written release from his/her doctor or pharmacist indicating that the employee can perform his/her safety-sensitive functions.
- c. Alcohol: The use of beverages containing alcohol (including any mouthwash, medication, food, candy) or any other substances such that alcohol is present in the body while performing safety-sensitive job functions is prohibited.

F. PROHIBITED CONDUCT

- All covered employees are prohibited from reporting for duty or remaining on duty any time there is a quantifiable presence of a prohibited drug in the body above the minimum thresholds defined in 49 CFR Part 40, as amended.
- 2) Each covered employee is prohibited from consuming alcohol while performing safety-sensitive job functions or while on-call to perform safety-sensitive job functions. If an on-call employee has consumed alcohol,

they must acknowledge the use of alcohol at the time that they are called to report for duty. The covered employee will subsequently be relieved of his/her on-call responsibilities and subject to discipline for not fulfilling his/her on-call responsibilities.

- 3) The Transit Department shall not permit any covered employee to perform or continue to perform safety-sensitive functions if it has actual knowledge that the employee is using alcohol
- 4) Each covered employee is prohibited from reporting to work or remaining on duty requiring the performance of safety-sensitive functions while having an alcohol concentration of 0.02 or greater regardless of when the alcohol was consumed.
 - a. A covered employee with a breath alcohol concentration which measures 0.02-0.039 is not considered to have violated the USDOT drug and alcohol regulations, provided the employee hasn't consumed the alcohol within four (4) hours of performing a safety-sensitive duty. However, if a safety-sensitive employee has a breath alcohol concentration of 0.02-0.039, USDOT regulations require the employee to be removed from the performance of safety-sensitive duties until:
 - i. The employee's alcohol concentration measures less than 0.02; or
 - ii. FOR FTA COVERED EMPLOYEES: The start of the employee's next regularly scheduled duty period, but not less than eight hours following administration of the test.
 - iii. FOR FMCSA COVERED EMPLOYEES: The start of the employee's next regularly scheduled duty period, but not less than twenty-four hours following administration of the test.
- 5) No covered employee shall consume alcohol for eight (8) hours following involvement in an accident or until he/she submits to the post-accident drug/alcohol test, whichever occurs first.
- 6) No covered employee shall consume alcohol within four (4) hours prior to the performance of safety-sensitive job functions.
- 7) GUADALUPE TRANSIT / SMOOTH, INC., under its own authority, also prohibits the consumption of alcohol at all times the employee is on duty, or anytime the employee is in uniform.
- 8) Consistent with the Drug-free Workplace Act of 1988, all **GUADALUPE TRANSIT / SMOOTH, INC.** employees are prohibited from engaging in

the unlawful manufacture, distribution, dispensing, possession, or use of prohibited substances in the work place including transit system premises and transit vehicles.

G. DRUG STATUTE CONVICTION

Consistent with the Drug Free Workplace Act of 1998, all employees are required to notify the **GUADALUPE TRANSIT** / **SMOOTH, INC.** management of any criminal drug statute conviction for a violation occurring in the workplace within five days after such conviction. Failure to comply with this provision shall result in disciplinary action as defined in Section Q of this policy.

H. TESTING REQUIREMENTS

- 1) Analytical urine drug testing and breath testing for alcohol will be conducted as required by 49 CFR Part 40 as amended. All employees covered under FTA/FMCSA authority shall be subject to testing prior to performing safety-sensitive duty, for reasonable suspicion, following an accident, and random as defined in Section K, L, M, and N of this policy, and return to duty/follow-up.
- 2) A drug test can be performed any time a covered employee is on duty. A reasonable suspicion or random alcohol test can only be performed just before, during, or after the performance of a safety-sensitive job function. Under SMOOTH, INC. authority, a non-DOT alcohol test can be performed any time a covered employee is on duty.
- 3) All covered employees will be subject to urine drug testing and breath alcohol testing as a condition of ongoing employment with **GUADALUPE TRANSIT / SMOOTH, INC.**. Any safety-sensitive employee who refuses to comply with a request for testing shall be removed from duty and subject to discipline as defined in Section Q of this policy.

I. DRUG TESTING PROCEDURES

1) Testing shall be conducted in a manner to assure a high degree of accuracy and reliability and using techniques, equipment, and laboratory facilities which have been approved by the U.S. Department of Health and Human Service (HHS). All testing will be conducted consistent with the procedures set forth in 49 CFR Part 40, as amended. The procedures will be performed in a private, confidential manner and every effort will be

- made to protect the employee, the integrity of the drug testing procedure, and the validity of the test result.
- 2) The drugs that will be tested for include marijuana, cocaine, opioids, amphetamines, and phencyclidine. After the identity of the donor is checked using picture identification, a urine specimen will be collected using the split specimen collection method described in 49 CFR Part 40, as amended. Each specimen will be accompanied by a DOT Custody and Control Form and identified using a unique identification number that attributes the specimen to the correct individual. The specimen analysis will be conducted at a HHS certified laboratory. An initial drug screen and validity test will be conducted on the primary urine specimen. For those specimens that are not negative. а confirmatory Chromatography/Mass Spectrometry (GC/MS) test will be performed. The test will be considered positive if the amounts of the drug(s) and/or its metabolites identified by the GC/MS test are above the minimum thresholds established in 49 CFR Part 40, as amended.
- 3) The test results from the HHS certified laboratory will be reported to a Medical Review Officer. A Medical Review Officer (MRO) is a licensed physician with detailed knowledge of substance abuse disorders and drug testing. The MRO will review the test results to ensure the scientific validity of the test and to determine whether there is a legitimate medical explanation for a confirmed positive, substitute, or adulterated test result. The MRO will attempt to contact the employee to notify the employee of the non-negative laboratory result, and provide the employee with an opportunity to explain the confirmed laboratory test result. The MRO will subsequently review the employee's medical history/medical records as appropriate to determine whether there is a legitimate medical explanation for a non-negative laboratory result. If no legitimate medical explanation is found, the test will be verified positive or refusal to test and reported to the GUADALUPE TRANSIT / SMOOTH, INC. Drug and Alcohol Program Manager (DAPM). If a legitimate explanation is found, the MRO will report the test result as negative to the DAPM.
- 4) If the test is invalid without a medical explanation, a retest will be conducted under direct observation. Employees do not have access to a test of their split specimen following an invalid result.
- 5) Any covered employee who questions the results of a required drug test under paragraphs L through P of this policy may request that the split sample be tested. The split sample test must be conducted at a second HHS-certified laboratory. The test must be conducted on the split sample that was provided by the employee at the same time as the primary

sample. The method of collecting, storing, and testing the split sample will be consistent with the procedures set forth in 49 CFR Part 40, as amended. The employee's request for a split sample test must be made to the Medical Review Officer within 72 hours of notice of the original sample verified test result. Requests after 72 hours will only be accepted at the discretion of the MRO if the delay was due to documentable facts that were beyond the control of the employee. **GUADALUPE TRANSIT / SMOOTH, INC.** will ensure that the cost for the split specimen analysis is covered in order for a timely analysis of the sample, however **GUADALUPE TRANSIT / SMOOTH, INC.** will seek reimbursement for the split sample test from the employee.

- 6) If the analysis of the split specimen fails to confirm the presence of the drug(s) detected in the primary specimen, if the split specimen is not able to be analyzed, or if the results of the split specimen are not scientifically adequate, the MRO will declare the original test to be canceled.
- 7) The split specimen will be stored at the initial laboratory until the analysis of the primary specimen is completed. If the primary specimen is negative, the split will be discarded. If the primary specimen is positive, it will be retained in frozen storage for one year and the split specimen will also be retained for one year. If the primary is positive, the primary and the split will be retained for longer than one year for testing if so requested by the employee through the Medical Review Officer, or by the employer, by the MRO, or by the relevant DOT agency.

8) Observed collections

- a. Consistent with 49 CFR Part 40, as amended, collection under direct observation (by a person of the same gender) with no advance notice will occur if:
 - i. The laboratory reports to the MRO that a specimen is invalid, and the MRO reports to GUADALUPE TRANSIT / SMOOTH, INC. that there was not an adequate medical explanation for the result;
 - ii. The MRO reports to GUADALUPE TRANSIT / SMOOTH, INC. that the original positive, adulterated, or substituted test result had to be cancelled because the test of the split specimen could not be performed;
 - iii. The laboratory reported to the MRO that the specimen was negative-dilute with a creatinine concentration greater than

or equal to 2 mg/dL but less than or equal to 5 mg/dL, and the MRO reported the specimen as negative-dilute and that a second collection must take place under direct observation (see §40.197(b)(1)).

- iv. The collector observes materials brought to the collection site or the employee's conduct clearly indicates an attempt to tamper with a specimen;
- v. The temperature on the original specimen was out of range;
- vi. Anytime the employee is directed to provide another specimen because the original specimen appeared to have been tampered with.
- vii. All follow-up-tests; or
- viii. All return-to-duty tests

J. ALCOHOL TESTING PROCEDURES

1) Tests for breath alcohol concentration will be conducted utilizing a National Highway Traffic Safety Administration (NHTSA)-approved Evidential Breath Testing device (EBT) operated by a trained Breath Alcohol Technician (BAT). A list of approved EBT devises will be found at https://www.transportation.gov/odapc . A list of approved ASDs can be found on ODAPC's Web page for "Approved Screening Devices to Measure Alcohol in Bodily Fluids". Alcohol screening tests may be performed using a non-evidential testing device which is also approved by NHTSA. If the initial test indicates an alcohol concentration of 0.02 or greater, a second test will be performed to confirm the results of the initial test. The confirmatory test must occur on an EBT. The confirmatory test will be conducted no sooner than fifteen minutes after the completion of the initial test. The confirmatory test will be performed using a NHTSAapproved EBT operated by a trained BAT. The EBT will identify each test by a unique sequential identification number. This number, time, and unit identifier will be provided on each EBT printout. The EBT printout, along with an approved alcohol testing form, will be used to document the test, the subsequent results, and to attribute the test to the correct employee. The test will be performed in a private, confidential manner as required by 49 CFR Part 40, as amended. The procedure will be followed as

- prescribed to protect the employee and to maintain the integrity of the alcohol testing procedures and validity of the test result.
- 2) A confirmed alcohol concentration of 0.04 or greater will be considered a positive alcohol test and in violation of this policy. The consequences of a positive alcohol test are described in Section Q. of this policy. Even though an employee who has a confirmed alcohol concentration of 0.02 to 0.039 is not considered positive, the employee shall still be removed from duty for at least eight hours of for FTA covered employees, and twenty-four hours for FMCSA covered employees or for the duration of the work day whichever is longer and will be subject to the consequences described in Section Q of this policy. An alcohol concentration of less than 0.02 will be considered a negative test.
- 3) GUADALUPE TRANSIT / SMOOTH, INC. affirms the need to protect individual dignity, privacy, and confidentiality throughout the testing process. If at any time the integrity of the testing procedures or the validity of the test results is compromised, the test will be canceled. Minor inconsistencies or procedural flaws that do not impact the test result will not result in a cancelled test.
- 4) The alcohol testing form (ATF) required by 49 CFR Part 40 as amended, shall be used for all FTA/FMCSA required testing. Failure of an employee to sign step 2 of the ATF will be considered a refusal to submit to testing.

K. PRE-EMPLOYMENT TESTING

- 1) All applicants for covered transit positions shall undergo urine drug testing and preath alcohol testing prior to performance of a safety-sensitive function.
 - a. All offers of employment for covered positions shall be extended conditional upon the applicant passing a drug and alcohol test. An applicant will not be allowed to perform safety-sensitive functions unless the applicant takes a drug and alcohol test with verified negative results.
 - b. An employee shall not be placed, transferred or promoted into a position covered under FTA/FMCSA authority or company authority until the employee takes a drug and alcohol test with verified negative results.

- c. If an applicant fails a pre-employment drug or alcohol test, the conditional offer of employment shall be rescinded and the applicant will be referred to a Substance Abuse Professional. Failure of a pre-employment drug or alcohol test will disqualify an applicant for employment for a period of at least one year. Before being considered for future employment the applicant must provide the employer proof of having successfully completed a referral, evaluation and treatment plan as described in section 655.62 of subpart G. The cost for the assessment and any subsequent treatment will be the sole responsibility of the applicant.
- d. When an employee being placed, transferred, or promoted from a non-covered position to a position covered under FTA/FMCSA authority or company authority submits a drug and alcohol test with a verified positive result, the employee shall be subject to disciplinary action in accordance with Section Q herein.
- e. If a pre-employment test is canceled, **GUADALUPE TRANSIT** / **SMOOTH, INC.** will require the applicant to take and pass another pre-employment drug and alcohol test.
- f. In instances where a FTA/FMCSA covered employee does not perform a safety-sensitive function for a period of 90 consecutive days or more regardless of reason, and during that period is not in the random testing pool the employee will be required to take a pre-employment drug and alcohol test under 49 CFR Part 655 and have negative test results prior to the conduct of safety-sensitive job functions.
- g. Following a negative dilute the employee will be required to undergo another test. Should this second test result in a negative dilute result, the test will be considered a negative and no additional testing will be required unless directed to do so by the MRO.
- h. Applicants are required (even if ultimately not hired) to provide GUADALUPE TRANSIT / SMOOTH, INC. with signed written releases requesting FTA/FMCSA drug and alcohol records from all previous, DOT-covered, employers that the applicant has worked for within the last two years. Failure to do so will result in the employment offer being rescinded. GUADALUPE TRANSIT / SMOOTH, INC. is required to ask all applicants (even if ultimately not hired) if they have tested positive or refused to test on a preemployment test for a DOT covered employer within the last two

years. If the applicant has tested positive or refused to test on a pre-employment test for a DOT covered employer, the applicant must provide **GUADALUPE TRANSIT / SMOOTH, INC.** proof of having successfully completed a referral, evaluation and treatment plan as described in section 655.62 of subpart G.

2) FMCSA Drug Testing Exceptions

A driver is not required to undergo a pre-employment test if:

- I. The driver has participated in a DOT testing program within the previous 30 days; and
- II. While participating in that program, either:
 - a. Was drug tested within the past six months (from the date of application with the employer), or
 - Participated in the random drug testing program for the previous 12 months (from the date of application with the employer); and
- III. The Arc of Ulster-Greene can ensure that no prior employer of the driver of whom The Arc of Ulster-Greene has knowledge has records of a violation of this part or the controlled substances use rule of another DOT agency within the previous six months

L. <u>REASONABLE SUSPICION TESTING</u>

1) All GUADALUPE TRANSIT / SMOOTH, INC. FTA/FMCSA covered employees will be subject to a reasonable suspicion drug and/or alcohol test when the employer has reasonable suspicion to believe that the covered employee has used a prohibited drug and/or engaged in alcohol misuse. Reasonable suspicion shall mean that there is objective evidence. based upon specific, contemporaneous, articulable observations of the employee's appearance, behavior, speech or body odor that are consistent with possible drug use and/or alcohol misuse. Reasonable suspicion referrals must be made by one or more supervisors who are trained to detect the signs and symptoms of drug and alcohol use, and who reasonably concludes that an employee may be adversely affected or impaired in his/her work performance due to possible prohibited substance abuse or alcohol misuse. A reasonable suspicion alcohol test can only be conducted just before, during, or just after the performance of a safety-sensitive job function. However, under SMOOTH, INC.' authority, a non-DOT reasonable suspicion alcohol test may be performed any time the covered employee is on duty. A reasonable

- suspicion drug test can be performed any time the covered employee is on duty.
- 2) GUADALUPE TRANSIT / SMOOTH, INC. shall be responsible for transporting the employee to the testing site. Supervisors should avoid placing themselves and/or others into a situation which might endanger the physical safety of those present. The employee shall be placed on administrative leave pending disciplinary action described in Section Q of this policy. An employee who refuses an instruction to submit to a drug/alcohol test shall not be permitted to finish his or her shift and shall immediately be placed on administrative leave pending disciplinary action as specified in Section Q of this policy.
- 3) A written record of the observations which led to a drug/alcohol test based on reasonable suspicion shall be prepared and signed by the supervisor making the observation. This written record shall be submitted to the **GUADALUPE TRANSIT / SMOOTH, INC.**
- 4) When there are no specific contemporaneous, articulable objective facts that indicate current drug or alcohol use, but the employee (who is not already a participant in a treatment program) admits the abuse of alcohol or other substances to a supervisor in his/her chain of command, the employee shall be referred for assessment and treatment consistent with Section Q of this policy. GUADALUPE TRANSIT / SMOOTH, INC. shall place the employee on administrative leave in accordance with the provisions set forth under Section Q of this policy. Testing in this circumstance would be performed under the direct authority of the GUADALUPE TRANSIT / SMOOTH, INC.. Since the employee selfreferred to management, testing under this circumstance would not be considered a violation of this policy or a positive test result under Federal authority. However, self-referral does not exempt the covered employee from testing under Federal authority as specified in Sections L through N of this policy or the associated consequences as specified in Section Q.

M. POST-ACCIDENT TESTING

FTA Procedures:

1) <u>FATAL ACCIDENTS</u> – A covered employee will be required to undergo urine and breath testing if they are involved in an accident with a transit vehicle, whether or not the vehicle is in revenue service at the time of the

accident, that results in a fatality. This includes all surviving covered employees that are operating the vehicle at the time of the accident and any other whose performance could have contributed to the accident, as determined by the employer using the best information available at the time of the decision.

- 2) <u>NON-FATAL ACCIDENTS</u> A post-accident test of the employee operating the public transportation vehicle will be conducted if an accident occurs and at least one of the following conditions is met:
 - a. The accident results in injuries requiring immediate medical treatment away from the scene, unless the covered employee can be completely discounted as a contributing factor to the accident.
 - b. One or more vehicles incurs disabling damage as a result of the occurrence and must be transported away from the scene, unless the covered employee can be completely discounted as a contributing factor to the accident.

In addition, any other covered employee whose performance could have contributed to the accident, as determined by the employer using the best information available at the time of the decision, will be tested.

As soon as practicable following an accident, as defined in this policy, the transit supervisor investigating the accident will notify the transit employee operating the transit vehicle and all other covered employees whose performance could have contributed to the accident of the need for the test. The supervisor will make the determination using the best information available at the time of the decision.

FMCSA Procedures:

Covered employees shall be subject to FMCSA post-accident drug and alcohol testing under the following circumstances:

<u>FATAL ACCIDENTS</u> - As soon as practicable following an occurrence involving a commercial motor vehicle operating on a public road in commerce, and involving the loss of a human life, drug and alcohol tests will be conducted on each surviving covered employee who was performing safety-sensitive functions with respect to the vehicle.

NON-FATAL ACCIDENTS - As soon as practicable following an occurrence involving a commercial motor vehicle operating on a public road in commerce, and not involving the loss of a human life, an alcohol test will be conducted on each driver who receives a citation within eight (8) hours of the occurrence

under State or local law for a moving traffic violation arising from the accident, if:

- 1. The accident results in injuries requiring immediate medical treatment away from the scene,; or
- 2. One or more motor vehicles incur disabling damage and must be transported away from the scene by a tow truck or other motor vehicle.

As soon as practicable following an occurrence involving a commercial motor vehicle operating on a public road in commerce, and not involving the loss of a human life, a drug test will be conducted on each driver who receives a citation within thirty-two (32) hours of the occurrence under State or local law for a moving traffic violation arising from the accident, if:

- 1. The accident results in injuries requiring immediate medical treatment away from the scene; or
- 2. One or more motor vehicles incur disabling damage and must be transported away from the scene by a tow truck or other motor vehicle.

General Accident Procedures:

The appropriate transit supervisor shall ensure that an employee, required to be tested under this section, is tested as soon as practicable, but no longer than eight (8) hours of the accident for alcohol, and no longer than 32 hours for drugs. If an alcohol test is not performed within two hours of the accident, the Supervisor will document the reason(s) for the delay. If the alcohol test is not conducted within (8) eight hours, or the drug test within 32 hours, attempts to conduct the test must cease and the reasons for the failure to test documented.

Any covered employee involved in an accident must refrain from alcohol use for eight (8) hours following the accident, or until he/she undergoes a post-accident alcohol test.

An employee who is subject to post-accident testing who fails to remain readily available for such testing, including notifying a supervisor of his or her location if he or she leaves the scene of the accident prior to submission to such test, may be deemed to have refused to submit to testing.

Nothing in this section shall be construed to require the delay of necessary medical attention for the injured following an accident, or to prohibit an employee from leaving the scene of an accident for the period necessary to obtain assistance in responding to the accident, or to obtain necessary emergency medical care.

In the rare event that **GUADALUPE TRANSIT** / **SMOOTH**, **INC**. is unable to perform an FTA drug and alcohol test (i.e., employee is unconscious, employee is detained by law enforcement agency), **GUADALUPE TRANSIT** / **SMOOTH**, **INC**. may use drug and alcohol post-accident test results administered by local law enforcement officials in lieu of the FTA/FMCSA test. The local law enforcement officials must have independent authority for the test and the employer must obtain the results in conformance with local law.

N. RANDOM TESTING

- 1) All covered employees will be subjected to random, unannounced testing. The selection of employees shall be made by a scientifically valid method of randomly generating an employee identifier from the appropriate pool of safety-sensitive employees. Employees who may be covered under company authority will be selected from a pool of non-DOT-covered employees.
- 2) The dates for administering unannounced testing of randomly selected employees shall be spread reasonably throughout the calendar year, day of the week and hours of the day.
- 3) The number of employees randomly selected for drug/alcohol testing during the calendar year shall be not less than the percentage rates set each year by the FTA/FMCSA administrator. The current year testing rates can be viewed online at http://www.dot.gov/odapc/random-testing-rates.
- 4) Each covered employee shall be in a pool from which the random selection is made. Each covered employee in the pool shall have an equal chance of selection each time the selections are made. Employees will remain in the pool and subject to selection, whether or not the employee has been previously tested. There is no discretion on the part of management in the selection.
- 5) Covered transit employees that fall under the Federal Transit Administration regulations will be included in one random pool maintained separately from the testing pool of non-safety-sensitive employees that are included solely under **SMOOTH**, **INC**. authority.
- 6) Random tests can be conducted at any time during an employee's shift for drug testing. Alcohol random tests can only be performed just before, during, or just after the performance of a safety sensitive duty. <u>However</u>, <u>under SMOOTH, INC.</u> authority, a non-DOT random alcohol test may be

- performed any time the covered employee is on duty. Testing can occur during the beginning, middle, or end of an employee's shift.
- 7) Employees are required to proceed <u>immediately</u> to the collection site upon notification of their random selection.

O. RETURN-TO-DUTY TESTING

All covered employees who previously tested positive on a drug or alcohol test or refused a test, must test negative for drugs, alcohol (below 0.02 for alcohol), or both and be evaluated and released by the Substance Abuse Professional before returning to work. For an initial positive drug test a Return-to-Duty drug test is required and an alcohol test is allowed. For an initial positive alcohol test a Return-to-Duty alcohol test is required and a drug test is allowed. Following the initial assessment, the SAP will recommend a course of rehabilitation unique to the individual. The SAP will recommend the return-to-duty test only when the employee has successfully completed the treatment requirement and is known to be drug and alcohol-free and there are no undue concerns for public safety.

P. FOLLOW-UP TESTING

Covered employees that have returned to duty following a positive or refused test will be required to undergo frequent, unannounced drug and/or alcohol testing following their return-to-duty test. The follow-up testing will be performed for a period of one to five years with a minimum of six tests to be performed the first year. The frequency and duration of the follow-up tests (beyond the minimums) will be determined by the SAP reflecting the SAP's assessment of the employee's unique situation and recovery progress. Follow-up testing should be frequent enough to deter and/or detect a relapse. Follow-up testing is separate and in addition to the random, post-accident, reasonable suspicion and return-to-duty testing.

In the instance of a self-referral or a management referral, the employee will be subject to non-USDOT follow-up tests and follow-up testing plans modeled using the process described in 49 CFR Part 40. However, all non-USDOT follow-up tests and all paperwork associated with an employee's return-to-work agreement that was not precipitated by a positive test result (or refusal to test) does not constitute a violation of the Federal regulations will be conducted under company authority and will be performed using non-DOT testing forms.

Q. RESULT OF DRUG/ALCOHOL TEST

- 1) Any covered employee that has a verified positive drug or alcohol test result of 0.04 or above, or test refusal, will be removed from his/her safety-sensitive position, informed of educational and rehabilitation programs available, referred to a Substance Abuse Professional (SAP) for assessment, and will be terminated.
- 2) Following a negative dilute the employee will be required to undergo another test. Should this second test result in a negative dilute result, the test will be considered a negative and no additional testing will be required unless directed to do so by the MRO.
- 3) Refusal to submit to a drug/alcohol test shall be considered equivalent to a positive test result <u>and a direct act of insubordination and shall result in</u> <u>termination and referral to an SAP</u>. A test refusal includes the following circumstances:
 - a. Fail to appear for any test (except a pre-employment test) within a reasonable time, as determined by the employer.
 - b. Fail to remain at the testing site until the testing process is complete. An employee who leaves the testing site before the testing process commences for a pre-employment test has not refused to test.
 - c. Fail to attempt to provide a breath or urine specimen. An employee who does not provide a urine or breath specimen because he or she has left the testing site before the testing process commenced for a pre-employment test has not refused to test.
 - d. In the case of a directly-observed or monitored urine drug collection, fail to permit monitoring or observation of your provision of a specimen.
 - e. Fail to provide a sufficient quantity of urine or breath without a valid medical explanation.
 - f. Fail or decline to take a second test as directed by the collector or the employer for drug testing.
 - g. Fail to undergo a medical evaluation as required by the MRO or the employer's Designated Employer Representative (DER).
 - h. Fail to cooperate with any part of the testing process.
 - i. Fail to follow an observer's instructions to raise and lower clothing and turn around during a directly-observed test.
 - j. Possess or wear a prosthetic or other device used to tamper with the collection process.
 - k. Admit to the adulteration or substitution of a specimen to the collector or MRO.

- I. Refuse to sign the certification at Step 2 of the Alcohol Testing Form (ATF).
- m. Fail to remain readily available following an accident.

As a covered employee, if the MRO reports that you have a verified adulterated or substituted test result, you have refused to take a drug test.

- 4) For the first instance of a verified positive test from a sample submitted as the result of a random drug/alcohol test, disciplinary action against the employee shall include:
 - Mandatory referral to Substance Abuse Professional for assessment, formulation of a treatment plan, and execution of a return to duty agreement;
 - b. Failure to execute, or remain compliant with the return-to-duty agreement shall result in termination from GUADALUPE TRANSIT / SMOOTH, INC. employment.
 - i. Compliance with the return-to-duty agreement means that the employee has submitted to a drug/alcohol test immediately prior to returning to work; the result of that test is negative; in the judgment of the SAP the employee is cooperating with his/her SAP recommended treatment program; and, the employee has agreed to periodic unannounced follow-up testing as defined in Section P of this policy.
 - c. Refusal to submit to a periodic unannounced follow-up drug/alcohol test shall be considered a direct act of insubordination and shall result in termination.
 - d. A periodic unannounced follow-up drug/alcohol test which results in a verified positive shall result in termination from GUADALUPE TRANSIT / SMOOTH, INC. employment.
- 5) The first instance of a verified positive post-accident or reasonable suspicion drug and/or alcohol test shall result in termination.
- 6) Regardless of the testing category, the second instance of a verified positive drug or alcohol test result of testing shall result in termination from GUADALUPE TRANSIT / SMOOTH, INC. employment.
- 7) An alcohol test result of ≥0.02 to ≤ 0.039 BAC shall result in the removal of the employee from duty of for eight hours for FTA covered employees, and twenty-four hours for FMCSA covered employees or the remainder or the work day whichever is longer. The employee will not be allowed to

- return to safety-sensitive duty for his/her next shift until he/she submits to an NON-DOT alcohol test with a result of less than 0.02 BAC.
- 8) In the instance of a self-referral or a management referral, disciplinary action against the employee shall include:
 - a. Mandatory referral for an assessment by an employer approved counseling professional for assessment, formulation of a treatment plan, and execution of a return to work agreement;
 - b. Failure to execute, or remain compliant with the return-to-work agreement shall result in termination from GUADALUPE TRANSIT / SMOOTH, INC. employment.
 - i. Compliance with the return-to-work agreement means that the employee has submitted to a drug/alcohol test immediately prior to returning to work; the result of that test is negative; the employee is cooperating with his/her recommended treatment program; and, the employee has agreed to periodic unannounced follow-up testing as described in Section P of this policy; however, all follow-up testing performed as part of a return-to-work agreement required under section Q of this policy is under the sole authority of SMOOTH, INC. and will be performed using non-DOT testing forms.
 - c. Refusal to submit to a periodic unannounced follow-up drug/alcohol test shall be considered a direct act of insubordination and shall result in termination. All tests conducted as part of the return to work agreement will be conducted under company authority and will be performed using non-DOT testing forms.
 - d. A self-referral or management referral to the employer's counseling professional that was not precipitated by a positive test result does not constitute a violation of the Federal regulations and will not be considered as a positive test result in relation to the progressive discipline defined in Section Q of this policy.
 - e. Periodic unannounced follow-up drug/alcohol testing conducted as a result of a self-referral or management referral which results in a verified positive shall be considered a positive test result in relation to the progressive discipline defined in Section Q of this policy.
 - f. A Voluntary Referral does not shield an employee from disciplinary action or guarantee employment with GUADALUPE TRANSIT / SMOOTH, INC...
 - g. A Voluntary Referral does not shield an employee from the requirement to comply with drug and alcohol testing.

Failure of an employee to report within five days a criminal drug statute conviction for a violation occurring in the workplace shall result in termination.

R. GRIEVANCE AND APPEAL

The consequences specified by 49 CFR Part 40.149 (c) for a positive test or test refusal is not subject to arbitration.

S. PROPER APPLICATION OF THE POLICY

equitable application of this substance abuse policy. Therefore, supervisors/managers are required to use and apply all aspects of this policy in an unbiased and impartial manner. Any supervisors/manager who knowingly disregards the requirements of this policy, or who is found to deliberately misuse the policy in regard to subordinates, shall be subject to disciplinary action, up to and including termination.

T. INFORMATION DISCLOSURE

- Drug/alcohol testing records shall be maintained by the GUADALUPE TRANSIT / SMOOTH, INC. Drug and Alcohol Program Manager and, except as provided below or by law, the results of any drug/alcohol test shall not be disclosed without express written consent of the tested employee.
- 2) The employee, upon written request, is entitled to obtain copies of any records pertaining to their use of prohibited drugs or misuse of alcohol including any drug or alcohol testing records. Covered employees have the right to gain access to any pertinent records such as equipment calibration records, and records of laboratory certifications. Employees may not have access to SAP follow-up testing plans.
- Records of a verified positive drug/alcohol test result shall be released to the Drug and Alcohol Program Manager, and other transit system management personnel on a need to know basis.
- 4) Records will be released to a subsequent employer only upon receipt of a written request from the employee.

- 5) Records of an employee's drug/alcohol tests shall be released to the adjudicator in a grievance, lawsuit, or other proceeding initiated by or on behalf of the tested individual arising from the results of the drug/alcohol test. The records will be released to the decision maker in the proceeding.
- 6) Records will be released to the National Transportation Safety Board during an accident investigation.
- 7) Information will be released in a criminal or civil action resulting from an employee's performance of safety-sensitive duties, in which a court of competent jurisdiction determines that the drug or alcohol test information is relevant to the case and issues an order to the employer to release the information. The employer will release the information to the decision maker in the proceeding with a binding stipulation that it will only be released to parties of the proceeding.
- 8) Records will be released to the DOT or any DOT agency with regulatory authority over the employer or any of its employees.
- 9) Records will be released if requested by a Federal, state or local safety agency with regulatory authority over GUADALUPE TRANSIT / SMOOTH, INC. or the employee.
- 10) If a party seeks a court order to release a specimen or part of a specimen contrary to any provision of Part 40 as amended, necessary legal steps to contest the issuance of the order will be taken
- 11)In cases of a contractor or sub-recipient of a state department of transportation, records will be released when requested by such agencies that must certify compliance with the regulation to the FTA.

ADOPTION CERTIFICATION

This Policy, as revised, was approved by the SMOOTH, Inc. Board of Directors, during the regular meeting of the Board, <u>NOVEMBER 2, 2016</u> at the SMOOTH Office in Santa Maria, CA.

Following a MOTIOI	N by, a SE	COND by	and Board			
discussion,	Votes in FAVOR,	Votes AG	SAINST,			
and Votes ABSTAINING were received.						
Attested to by:						
Board Member / Office	Date	_				
Board Member / Office	Date	_				

Attachment A

SAFETY-SENSITIVE EMPLOYEES

Job Title	Job Duties	Testing Authority
Bus Driver	Vehicle Operator	FTA - FMCSA *
Opener/Closer	Dispatch/Bus Driver	FTA - FMCSA *
Driver Trainer	Training/Bus Driver	FTA - FMCSA **
Route Specialist	Training/Bus Driver	FTA – FMCSA
Fleet Mechanic	Vehicle Repair/Maintenance	FTA - FMCSA
Administrative Assistant	Clerical/Dispatch/Bus Driver	FTA - FMCSA **
Office Manger	Administration/Dispatch/Bus Driver	FTA - FMCSA **
Operations Manager	Management/Bus Driver	FTA - FMCSA **
Director of Operations	Management/Bus Driver	FTA - FMCSA **
Executive Director	Management/Bus Driver	FTA - FMCSA **

- * A <u>Post-Accident Test</u> involving a safety-sensitive Bus Driver assigned solely to the operation of a <u>Guadalupe Transit vehicle</u> (bus or van) will be conducted using a <u>FTA DOT</u> test.
- * A <u>Post-Accident Test</u> involving a safety-sensitive Bus Driver assigned to the operation of a vehicle (bus or van) under the sole authority of SMOOTH, INC. (Any assignment NOT in a Guadalupe bus or van) will be conducted using a FMCSA test.
- ** The Safety-Sensitive Employees identified above (**) may possess Commercial Driver Licenses and may be assigned to temporary driver duties.

A Post-Accident Test involving these employees when assigned solely to the operation of a <u>Guadalupe Transit vehicle</u> (bus or van) will be conducted using a <u>FTA – DOT test</u>.

A Post-Accident Test involving these employees when assigned to the operation of a vehicle under sole authority of SMOOTH, INC. (Any assignment NOT in a Guadalupe bus or van) will be conducted using a <u>FMCSA test</u>.

Attachment B Contacts

Any questions regarding this policy or any other aspect of the substance abuse policy should be directed to the following individual(s).

GUADALUPE TRANSIT / SMOOTH, INC. Drug and Alcohol Program Manager

Name/Title: Jim Talbott, Executive Director

Address: 240 East Roemer Way, Santa Maria, CA 93454

Telephone Number: (805) 922-8476

Collection Site

Name: Industrial Medical Group (IMG)

Address: 3070 Skyway Drive, #106, Santa Maria, CA 93455

Telephone Number: (805) 922-8282

Medical Review Officer (MRO)

Name/Title: Paul Christensen, MD / Medical Review Officer (MRO)

Address: 3070 Skyway Drive, #106, Santa Maria, CA 93455

Telephone Number: (805) 922-8282

Substance Abuse Professional (SAP)

Name: Heather L. Sorenson

Title: Addictions Counselor, DOT-SAP Credentialed

Address: 555 13th Street, Ste. C, Grover Beach

Appointments Scheduled in Santa Maria

Telephone Number: (805) 710-8159 Email: 805dotsap@gmail.com

Substance Abuse Professional (SAP)

Name: Dominick LaCovara

Title: DOT-SAP Credentialed - SAP Referral Specialist

Address: 1798 10th St., Los Osos, CA 93402
Appointments Scheduled in San Luis Obispo

Telephone Number: (805) 748-4051 Email: domlacovara@gmail.com

HHS Certified Laboratory Primary Specimen

Name: Clinical Reference Laboratory

Address: 8433 Quivira, Lenexa, Kansas 66215

Telephone Number: (800) 452-5677

HHS Certified Laboratory Split Specimen

Name: Quest

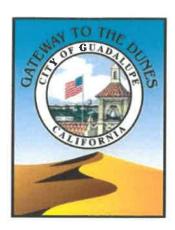
Address: 2822 F. Street, #A, Bakersfield, CA 93301

Telephone Number: (800) 877-2525

Drug and Alcohol Policy

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ADOPTION CERTIFICATION

The Guadalupe Transit and SMOOTH, Inc. Drug and Alcohol Testing Program Manual, as revised, was adopted by the City Council of Guadalupe, during the regular Council meeting, November 12, 2019 at the Guadalupe City Council Chambers, 918 Obispo Street, Guadalupe, CA 93434.

Following a MOTI	ON by	, a SECOND by	and Council
discussion,	Votes in FAV	OR,	Votes AGAINST,
andVo	otes ABSTAINING	were received.	
Attested to by:			
Council Member / Office	Date		
Staff Member / Office	Date		