# Kitsap Public Health District Consent Agenda March 5, 2024

KPHD Contract Number	Their Contract Number	Contractor and Agreement Name	Type of Agreement	Term of Agreement	Amount to District	Amount to Other Agency
2377	NA	Washington State Department of Health Acting Health Officer Coverage	Interlocal Agreement	03/05/2024- 03/04/2025	\$0	\$0

**Description:** Agreement for acting Health Officer coverage between Washington State Department of Health and Kitsap Public Health during a vacancy or period of absence or incapacity.

2392	NA	Summit Law Group Labor and Employment Legal Services	Contract for Services	01/01/2024- 12/31/2024	\$0	\$70,000
		Edoor and Emproyment Legal Services	Services	12/31/2021		

**Description:** The Contractor shall provide legal counsel and representation on behalf of the District for labor and employment-related issues, as requested by the District.

# INTERLOCAL AGREEMENT FOR ACTING HEALTH OFFICER COVERAGE BETWEEN WASHINGTON STATE DEPARTMENT OF HEALTH AND KITSAP PUBLIC HEALTH DISTRICT

Agreement made by and between Washington State Department of Health ("Department") and Kitsap Public Health District ("LHJ") pursuant to RCW 39.34.080.

WHEREAS, there may be periods when the position of Local Health Officer ("LHO") for the LHJ is vacant or the incumbent LHO may be absent or incapacitated and unable to fulfill the responsibilities of the LHO, and it is imperative that the responsibilities of the LHO that require timely public health action be fulfilled for the LHJ during these periods; and

WHEREAS, in its sole discretion and per its guidelines and process, the Department may agree to the appointment of a Department Regional Medical Officer ("RMO") or other qualified Department employee (referred to collectively as "Designee") to serve as acting health officer for the LHJ to fulfill the responsibilities of the LHO during a vacancy or period of absence or incapacity.

NOW, THEREFORE, IT IS MUTUALLY AGREED AS FOLLOWS:

## 1. Designation of Authority.

- a. Pursuant to RCW 70.05.080, Dr. Herbie Duber, Washington State Department of Health Regional Medical Officer for Northwest Washington, will serve as acting health officer for the LHJ as requested by an authorized official for the LHJ, provided that:
  - i. This Agreement has been fully executed by the Department and the LHJ and is in full force and effect;
  - ii. The local board of health or official responsible for appointing the LHO has appointed the Designee to serve as acting health officer for the LHJ;
  - iii. The LHJ has complied with the Department's guidelines and process for requesting LHO coverage;
  - iv. The Department has approved the request for LHO coverage in writing; and
  - v. The Designee has consented to serving as acting health officer as requested.
- b. This Agreement covers any and all LHJ requests for acting health officer coverage during the term of this Agreement. For acting health officer coverage to be effective, the Department must separately approve each request in writing, including the duration of coverage, and the Designee must separately consent to each request. The local board of health or official responsible for appointing the LHO must ensure that an appointment of the Designee to serve as acting health officer is in effect with respect to each request for coverage. One appointment may apply to multiple requests.
- c. The Department retains full authority and discretion to approve or deny any request for acting health officer coverage.
- d. The Designee shall have the same duties, powers, and authority as a regularly appointed LHO while serving as acting health officer and will exercise such duties, powers, and authority in accordance with applicable law and under the direction of the local board of health or, if any, the LHJ's administrative officer.
- e. Notwithstanding anything to the contrary herein, the Designee shall have the discretion to decline to take any action that the Designee is requested or directed to take, including, but not limited to, actions that, in the Designee's judgment, can be delayed

- until the appointment of a permanent LHO in the case of a vacancy or return of the incumbent LHO without jeopardizing the public health or do not protect or promote the public health.
- f. The Designee's authority to serve as acting health officer will terminate when this Agreement expires or is terminated, the Designee's appointment by the local board of health or official responsible for appointing the LHO expires or is terminated, a permanent LHO is appointed in the case of a vacancy, the incumbent LHO is no longer absent or incapacitated and is able to fulfill their responsibilities, when the Designee revokes their consent, the Department rescinds its approval, or when the Department's specified duration of coverage expires.
- 2. <u>Indemnification/Hold Harmless/Insurance.</u> The LHJ shall defend, indemnify, and hold harmless the Designee and the Department and its officers, officials, employees, and volunteers from any and all claims, injuries, damages, losses, or suits, including attorney fees, arising out of or in connection with the performance of this Agreement, except for injuries and damages caused by the willful and wanton negligence of the Designee or the Department or its officers, officials, employees, or volunteers. The LHJ must provide liability insurance coverage for the Designee that is equivalent to the coverage provided for the LHO.
- 3. <u>Term.</u> The term of this Agreement shall commence on the date this agreement is executed by all parties and shall remain in effect for one calendar year, unless terminated earlier per the terms of this Agreement. The parties may extend the term of this Agreement by written mutual agreement.
- 4. <u>Termination</u>. Either Party may terminate the agreement at their sole discretion. Termination shall be effective as provided in written notice provided by the terminating Party, though no earlier than upon receipt of written notice by mail or email, or within three days of the mailing of the notice, whichever occurs first.
- 5. Extent of Agreement/Modification. This Agreement, together with any attachments or addenda, represents the entire and integrated Agreement between the parties and supersedes all prior negotiations, representations, or agreements, either written or oral. This Agreement may be amended, modified, or added to only by written instrument properly signed by both parties.

### 6. Notices.

Notices to the LHJ shall be sent to:

The following mailing address: Yolanda Fong, Administrator 345 6<sup>th</sup> Street, Suite 300 Bremerton, WA 98337

Or the following email address: KPHD.Administrator@kitsappublichealth.org

Notices to the Department shall be sent to:

The following mailing address:

Washington State Department of Health 1610 NE 150<sup>th</sup> St Shoreline, WA 98155

Or the following email address:

Receipt of any notice shall be deemed effective upon actual receipt or three (3) days after deposit of written notice in the U.S. mail with proper postage and address, whichever occurs first.

- 7. **Property and Equipment.** Upon termination or non-renewal of this agreement, all property purchased by the LHJ in furtherance of this agreement shall remain the property of the LHJ and all property purchased by the Department in furtherance of this agreement shall remain the property of the Department. All property shall be returned to its owner upon termination or non-renewal of this Agreement.
- 8. **Filing.** The LHJ shall be responsible for complying with the requirements of RCW 39.34.040 with respect to this agreement.
- 9. Authority to Bind Parties and Enter Into Agreement. The undersigned represent that they have full authority to enter into this Agreement and to bind the parties for and on behalf of the legal entities set forth below.

Kitsap Public Health District	Washington State Department of Health
Signature	Signature
Name	Name
Title	Title
Date Signed	Date Signed

# KITSAP PUBLIC HEALTH DISTRICT CONTRACT FOR PROFESSIONAL SERVICES 2024

This Contract for Professional Services, is hereby made by and between the Kitsap Public Health District, hereinafter referred to as "District," and the Summit Law Group, hereinafter referred to as "Contractor."

# <u>I.</u> <u>DEFINITIONS</u>

As used in this Contract, the following terms shall have the meanings set forth below:

- A. **Contract** means this Contract for Services, and any other documents incorporated therein. Any oral representations or understandings not incorporated herein are excluded.
- B. **District Representative** means the individual or individuals designated and authorized by the District to receive notices, sign amendments or modifications are signed, and to act for it in all matters relating to this Contract, or the designee of such individual.
- C. **Contractor's Representative** means the individual designated and authorized by the Contractor to receive notices, sign amendments or modifications, and to act for him/herin all matters relating to this Contract.
- D. **Services** means all work performed by each party for the other pursuant to and governed by this Contract.
- E. **Records** means all documents including notes, reports, tapes, plans, computer diskettes, etc., which the Contractor has in its possession or under its control (including those held by its employees, agents, accountants, subcontractors, or attorneys) which relate in any way to the services performed under this Contract.
- F. **District's Confidential Information** means all non-public information that the District designates as being confidential, or that which under the circumstances ought to, in goodfaith, be treated as confidential.
- G. This Contract recognizes that the Contractor has an active legal practice and that the clients served as an attorney have legitimate and important expectations of privacy. **Contractor's Confidential Information** means any and all papers, other matter, or information in any form that in the Contractor's professional judgment is protected by any attorney-client privilege based in statute or otherwise belonging to a client other than the District or is protected by any attorney-client confidentiality rule by the rules of professional conduct or otherwise.
- H. **Liaison** means that person for the District or for the Contractor who will act as the primary contact relative to the operational details, scheduling, and any other matter that does not constitute a modification or amendment of the Contract or purport to be an official notice.

<u>II.</u> <u>TERM</u>

The term of this Contract shall be from <u>January 1, 2024</u>, through <u>December 31, 2024</u>, unless amended earlier pursuant to the terms and conditions of the Contract. Should this Contract be signed after the term beginning date stated herein, then it shall be retroactive and binding to that date.

# III. SCOPE OF WORK/REPRESENTATION

The Contractor shall provide legal counsel and representation on behalf of the District for labor and employment-related issues, as requested by the District. The Contractor will assign Rod Younker or his designee to provide the legal services described herein. Subject to the consent of the District, other attorneys with the Contractor may also participate as appropriate.

# <u>IV.</u> <u>PAYMENT</u>

The District shall pay an amount not to exceed <u>seventy thousand dollars (\$70,000.00)</u> for the services performed under this Contract, as set forth in the Scope of Work. Contractor's compensation forservices rendered shall be based on the hourly rate schedule attached hereto and incorporated hereinafter as ATTACHMENT A, Summit Law Group PLLC Labor and Employment Group 2024 Rates.

Contractor shall also receive reimbursement for travel expenses (including mileage at applicable IRS rates), high volume photocopying jobs, and other extraordinary out-of-pocket expenses associated with the performance of services under this Contract.

The District will pay Contractor upon receipt of properly completed invoices, which shall be submitted to the District's Liaison not more often than monthly. The invoices shall describe and document to the District's satisfaction a description of the work performed, and fees incurred. To receive reimbursement, Contractor must provide a detailed breakdown of authorized expenses, identifying what was expended and when. Payment shall be considered timely if made by the District within thirty (30) days after receipt of properly completed invoices. Payment shall be sent to the address designated by the Contractor.

# <u>V.</u> <u>HOLD HARMLESS</u>

Each party to this Contract shall be responsible for its own acts or omissions and for those of its directors or trustees, officers, employees, agents, and volunteers. Neither party shall be responsible to the other party for the acts or omissions of persons or entities not a party to this Agreement.

# <u>VI.</u> <u>RECORDS, CONFIDENTIALITY, AND OWNERSHIP OF WORK</u>

A. Contractor shall maintain and preserve, for the time period described in Section VI (B) below, all records despite any document retention policy to the contrary. The District, its attorneys, agents, and authorized representatives shall have the right, during the time period described in Section VI (B) below, to examine and copy all such records and shall have open access to said records for any purpose, including, but not limited to, the purpose of audit, inspection, and reproduction.

- B. The time period, for purposes of Section VI (A), shall end seven (7) years after the final payment, or final settlement under this Contract, or final resolution of any disputed matter arising out of the Contract, whichever occurs later.
- C. Contractor shall provide the District with prompt access to records. The District shall give reasonable notice to the Contractor to gain access to records.
- D. Contractor shall not submit to any agency or third party any data, records, reports, summaries, analyses, documents, other materials, or records developed by Contractor in connection with the services without first affording the District reasonable opportunity (to be not less than ten [10] business days) to review and approve the release of such material.
- E. All records required to be maintained by this Contract or by State law, except medical and client treatment records or records otherwise exempt by law, shall be considered to be public records, and maintained in accordance with applicable laws. Medical client treatment records of all kinds shall be considered confidential.
- F. All title and interest in anything, which is produced in the performance of this Contract, shall pass to the District when payment is made pursuant to Contract provisions.
- G. Contractor shall warrant that all Titles pass to the District free from claims, liens, special interests, or encumbrances.

# <u>VII.</u> <u>DEFAULT OR BREACH OF CONTRACT</u>

Either party hereunder may suspend or terminate this Contract for cause including the following:

- 1) The other party's failure to comply with the terms and conditions of this Contract;
- 2) The other party's ineffective, improper, or illegal use of Contract funds;
- 3) The other party's provision of materials, information, reports, or documentation which is incomplete, misleading, incorrect, or false, either knowingly or inadvertently;
- 4) The other party's failure to provide the services in a timely and reasonable manner;
- 5) The carrying out of this Contract is rendered not feasible or impossible;
- 6) Any illegal act on the part of the other party to the Contract.

The parties also agree that the forgiveness of the non-performance of any provision(s) of this Contract does not constitute a waiver of any ensuing or similar breach.

# <u>VIII.</u> <u>INSURANCE</u>

The Contractor will maintain professional liability/malpractice coverage with limits of no less than \$1,000,000.00. A Certificate of Insurance will be provided to the District within fourteen

(14) days of a request therefore, which will disclose the limits of liability herein described, as a condition of continuing under this Contract.

# IX. SUSPENSION/TERMINATION

Both parties reserve the right to terminate or cancel this Contract at its convenience and upon thirty (30) days written notice to the other party. Upon notice of termination, no further fees or expenses may be incurred except to the extent necessary to safeguard the interests of the District or as authorized by the District.

# X. CHANGE OF FUNDING

If the funding authorities of the District (*federal, state, and local agencies*) fail to appropriate funds to enable the District to continue payment as specified within this Contract, the District may modify or cancel this Contract without penalty or termination charges provided that the Contractor receives at least twenty-one (21) days prior written notice of lack of appropriate funds as the reason for the modification or termination.

# XI. <u>JURISDICTION</u>

This Contract shall be administered and interpreted under the laws of the State of Washington. Jurisdiction of litigation arising from this Contract shall be in the State of Washington. Venue for all actions arising pursuant to this Contract shall lie within Kitsap County, Washington.

# XII. <u>ATTORNEY FEES</u>

If disputes arise between the Contractor and the District out of this Contract, including litigation, each party shall be responsible for payment of their own attorney's fees and costs.

# XIII. INTEGRATED AGREEMENT

This Agreement represents the entire and integrated agreement between the District and the Contractor, and supersedes all prior negotiations, representations, or agreements written or oral, between the parties.

# XIV. NON-EXCLUSIVE AGREEMENT

This is a non-exclusive agreement, and the District may obtain outside legal services from additional persons or entities.

# XV. INTERPRETATION

The subtitles herein and the cover sheet are for convenience only and shall not be used for the purpose of interpretation.

# XVI. <u>INDEPENDENT CONTRACTOR</u>

- A. The Contractor and attorneys employed by them are independent agents, and not employees of the District.
- B. The Contractor acknowledges that the entire compensation for this Contract is specified

herein, and that it is not entitled to any District benefits including, but not limited to: overtime pay, worker's compensation, vacation pay, holiday pay, sick leave pay, medical, dental, or other insurance benefits, or any other rights or privileges afforded to District employees. The Contractor will be solely responsible for calculating, withholding, and paying taxes of any kind whatsoever that may arise from performance or payment hereunder.

# XVII. ASSIGNMENTS AND SUBCONTRACTING

The Contractor shall not sublet or assign any of the services covered by this Contract without the express written consent of the District.

# XVIII. NOTICE AND MODIFICATION OF CONTRACT

- A. All notices hereunder shall be made to the representatives of the parties of this Contract. Any notices required or permitted to be given under this Contract shall be in writing unless otherwise allowed herein and shall be effective upon receipt.
- B. Either party may request changes to this Contract. Proposed changes, which are mutually agreed upon, shall be incorporated by written amendments to this Contract. No changes to this Contract are valid or binding on either party unless first reduced to writing and signed by the Representatives of both parties.

# XIX. REPRESENTATIVES / LIAISONS

Representative for the District: Liaison for the District:

Yolanda Fong Karen Holt

Administrator Human Resources Manager 345 6<sup>th</sup> Street, Suite 300 345 6<sup>th</sup> Street, Suite 300

Bremerton, WA 98337-1866 Bremerton, WA 98337-1866

Office: (360) 535-9290 Office: (360) 728-2294 Fax: (360) 813-1468

Representative for the Contractor: Liaison for the Contractor:

Rod Younker Rod Younker

Summit Law Group Office (206) 676-7080

315 5<sup>th</sup> Ave. S, Suite 1000 Seattle, WA 98104

Office (206) 676-7000 Fax (206) 676-7001

## XX. COMPLIANCE WITH LAWS, POLICIES AND PROCEDURES

The Contractor shall, in performing the services contemplated by this Contract, faithfully observe, and comply with all federal, state, and local laws; ordinances; and regulations applicable of the services to be rendered under this Contract and agrees to adhere to and/or comply with all policies and procedures of the District. When necessary, the Contractor shall attend all applicable District meetings.

Date of Signature	Date of Signature
Authorized Contractor Signature	Authorized District Signature

Rodney B. Younker Summit Law Group 315 5<sup>th</sup> Ave., S, Suite 1000 Seattle, WA 98104

Yolanda Fong Administrator Kitsap Public Health District 345 6<sup>th</sup> Street, Suite 300 Bremerton, WA 98337

# **Attachment A**

# **Summit Law Group PLLC Labor and Employment Group**

# **2024 Public Hourly Rate Schedule**

Attorneys	Public
Altman, Peter	\$395
Anger, Kristin	\$410
Berntsen, Seth	\$410
Bolasina, Mike	\$410
Boyle, Colin	\$385
Burden, Hathaway	\$360
Chinn, Evan	\$375
Garrett, Britaney	\$375
Gibbons, Molly	\$320
Henry, John	\$385
Kennar, Beth	\$410
Klein, Otto	\$420
Lee, John	\$385
Mabee, Sofia	\$410
Miranda, Tréja	\$320
Oliver, Eva Sharf	\$320
Oppenheim, Quinn	\$395
Phillips, Shannon	\$410
Reynolds, Tim	\$375
Taylor, Jesse	\$360
Younker, Rodney	\$420
Legal Support Staff	
Barrientes, Dominique	\$250
Gail, Bonnie	\$250
Heine, Paige	\$210
Murbach, Donna	\$270
Vo, Nani	\$250
Welsh, Kim	\$250
Windes, Suzy	\$250

# Kitsap Public Health District

New or Renewed Contracts for the Period of 01/01/2024 through 01/31/2024

KPHD Contract ID	KPHD Program	Contract Type	Contract Length	KPHB Approved	Contract Amount	Signed Date	Start Date	End Date	Client Contract ID
Active (7 c	ontracts)								
ChangeLal	b Solutions								
	Administration, Gib Morrow otion: Public Health Law Fellowship Precep	Host Site Agreement oting Field Host Site	Closed			01/26/24	01/26/24	07/31/24	
	hingston State								
ID: 2393 Descrip	Accounting, Melissa Laird otion: Local Agencies Indirect Rate Agreen	nent. DOH is now the Cognizant Agency for I red by Washington State DOH, and other Sta		s the indirect cost i	rates in the agre	01/17/24 ement for K	01/01/24 PHD use on	12/31/24 subgrants, o	contracts, and
objectiv		Amendment ationship and planning efforts between KPHL Plan and facilitate the delivery of public healt					01/01/22 e intended to	12/31/24 o implement	CLH31014 applicable
ID: 2388 Descrip	Clinical Services, Elizabeth Davis otion: Information Sharing Agreement for E	Data Sharing Agreement xchange of Immunization Data.	Closed			01/23/24	01/23/24	01/22/27	
Jefferson (	County								
ID: 2384 Descrip	Parent/Child Health, Nancy Acosta otion: KPHD will provide Public Health Nur-	Amendment se services for NFP Supervisor.	Closed	01/02/24	\$75,000.00	01/02/24	01/01/23	12/31/24	N-22-058
	nent 1: Extends contract through 2024.								
Johns Hop									
ID: 2380 Descrip	Administration, Gib Morrow	Amendment ive healthcare systems assessment to identicate for community members.	Closed fy and document de	01/02/24 ficiencies and prov	vide an analysis	01/03/24 of opportun	03/15/23 ities and spe	03/31/24 ecific recomn	nendations to
	ment to extend agreement through 03/31/2	2024.							
					• • • • • • • • • • • • • • • • • • • •				

The Agreement may be extended for additional consecutive terms at the mutual agreement of the parties, not to exceed a total of five (5) years.

08:13 AM Page 1 of 1

Description: Kitsap County I/S will provide customized Geographic Information Systems (GIS) Services to Kitsap Public Health District.

# Kitsap Public Health Board Meeting Date: March 5, 2024

# CONSENT AGENDA ITEM: Warrant and Electronic Fund Transfer (EFT) Registers

Approvals:

	Signature	Date
Administrator		
	Yolanda Fong	2/23/2024
Finance Manager		
	Melissa laird	2/23/2024

Recommended Motion: Approval

## Items:

Туре	Warrant/EFT Date	Total Amount
Accounts Payable	1/4/2024	\$ 4,590.03
Accounts Payable	1/11/2024	9,689.33
Accounts Payable	1/18/2024	27,550.90
Accounts Payable	1/25/2024	254,138.50
NDGC Mortgage	1/3/2024	25,013.00
Vital Stats Transfer	1/19/2024	23,775.00
Accounts Payable Total		\$ 344,756.76
Payroll PERS Payment	1/12/2024	127,691.32
Payroll Taxes	1/31/2024	208,265.70
Payroll	1/31/2024	557,447.84
Payroll Total		\$ 557,447.84
	Grand Total	\$ 1,238,161.62

## **Kitsap Public Health Board Action:**

☐ Approve
☐ Deny
☐ Table / Continue

	Signature	Date
Kitsap Public Health Board Chair		

DocuSign Envelope ID: 4BB40B6A-693D-4A03-B1B3-0B8744B5C772

Settlement Run Information

STL-00003017 Kitsap Public Health District HH Kitsap Public Health District USD STL-00003017 Complete 01/04/2024 4,590.03 No Yes Organization Currency Filters Used Display Currency Outbound Total Number Status Date Settlement Run Name Include Payments On Behalf Of **Exclude Negative Payments** Express Settlement Inbound Total Additional Information Payment Information

Payment Groups
Payment Groups

Supplier Invoice Count

Expense Report Count

Miscellaneous Payment Request Count

View	Category	Bank Account	Payment Type	Date	Payments	Amount	Currency	Business Process	Status
Expense Payment(Direct Deposit) Expense Payment for Treasurer's Main account	Expense Payment	Treasurer's Main account	Direct Deposit	01/04/2024	2	1,023.76 USD		Payment Message: ID 2347 for Kitsap Public Health District on 01/04/2024	Successfully Completed
Miscellaneous Payment(Check) for Miscellaneous Payment Kitsap County Claims Fund Warrant Account	Miscellaneous Payment	Kitsap County Claims Check Fund Warrant Account	Check	01/04/2024	4	985.00 USD		Print Checks: Kitsap County Claims Fund Warrant Account for Miscellaneous Payment (Check) on 01/04/2024	Successfully Completed

# 09:08 AM 01/04/2024 Page 2 of 4

# View Settlement Run

DocuSign Envelope ID: 4BB40B6A-693D-4A03-B1B3-0B8744B5C772

Supplier Daymont

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Expense Report	Company	Рау То	Туре	Document Number	Expense Report Date	Memo	Reimbursable Amount	Currency
Expense Report: EXP-0007565	Kitsap Public Hea <b>l</b> th District	Angeline Berger (407902)	Employee	EXP-0007565	01/04/2024		234.01 USD	asc
Expense Report: EXP-0007566	Kitsap Public Health District	Callie Burton (434296)	Employee	EXP-0007566	01/04/2024		61.57 USD	JSD
Expense Report: EXP-0007567	Kitsap Public Hea <b>l</b> th District	Thomas Jury (434709)	Employee	EXP-0007567	01/04/2024		382.92 USD	JSD
Expense Report: EXP-0007568	Kitsap Public Health District	Kaela Moontree (406607)	Employee	EXP-0007568	01/04/2024		120.72 USD	JSD
Expense Report: EXP-0007569	Kitsap Public Hea <b>l</b> th District	Melissa O'Brien (433907) Employ	Employee	EXP-0007569	01/04/2024		105.72 USD	JSD
Expense Report: EXP-0007570	Kitsap Public Hea <b>l</b> th District	Jan Wendt (397255)	Employee	EXP-0007570	01/04/2024		60.26 USD	JSD
Expense Report: EXP-0007571	Kitsap Public Health District	Layken Winchester (431493)	Employee	EXP-0007571	01/04/2024		58.56 USD	JSD

# Miscellaneous Payment Requests

Miscellaneous Payment Request	Company	Payee	Document Number Payment Type	Payment Type	Request Category	Document Date	Payment Amount	Currency
MPR-13945	Kitsap Public Health District	JUSTIN PEARSON (Inactive)	MPR-13945	Check	POS Customer 01/04/2024 Refund	01/04/2024	270.00 USD	asr
MPR-13946	Kitsap Public Health District	RICHARD GAINES (Inactive)	MPR-13946	Check	POS Customer Refund	01/04/2024	185.00 USD	OSC
MPR-13947	Kitsap Public Health District	MITCHELL URBAN/URBANGUERILLAFILMS (Inactive)	MPR-13947	Check	POS Customer Refund	01/04/2024	200.00 USD	OSC
MPR-13948	Kitsap Public Health District	MARILYN EUBANKS (Inactive)	MPR-13948	Check	POS Customer Refund	01/04/2024	330.00 USD	JSD

# Supplier Invoices

B5C772	
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31B3-0B874	
-4A03-B	
A-693D-4	
: 4BB40B6A	
<u>_</u>	
Envelope	VINNE
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Supplier Invoice	Company	Supplier	Supplier's Invoice Number	Payee	Payment Terms	Document Number	Invoice Date	Discount Date	Due Date	Discount Taken	Withheld Tax Amount	Amount to Pay	Currency
Supplier Invoice: SINV-2023- 95678	Kitsap Public Health District	FedEx	8-356-71832	FedEx - Remit- To: PO Box 371461 Pittsburgh	Net 30	SINV-2023-95678	01/04/2024		02/03/2024	00.00	00.0	44.47 USD	gs
Supplier Invoice: SINV-2023- 95679	Kitsap Public Hea <b>l</b> th District	ODP Business Solutions, LLC	346927169001	ODP Business Solutions, LLC	Net 30	SINV-2023-95679	01/04/2024		02/03/2024	00.00	00.00	58.01 USD	SD
Supplier Invoice: SINV-2023- 95680	Kitsap Public Hea <b>l</b> th District	ODP Business Solutions, LLC	346056790001	ODP Business Solutions, LLC	Net 30	SINV-2023-95680	01/04/2024		02/03/2024	00.00	00.00	72.78 USD	OS
Supplier Invoice: SINV-2023- 95681	Kitsap Public Hea <b>l</b> th District	ODP Business Solutions, LLC	344421731001	ODP Business Solutions, LLC	Net 30	SINV-2023-95681	01/04/2024		02/03/2024	00.00	0.00	638.66 USD	QS
Supplier Invoice: SINV-2023- 95682	Kitsap Public Hea <b>l</b> th District	Ozark Underground Laboratory	20231228WA47	Ozark Underground Laboratory	Net 30	SINV-2023-95682	01/04/2024		02/03/2024	00.00	0.00	441.00 USD	QS
Supplier Invoice: SINV-2023- 95691	Kitsap Public Hea <b>l</b> th District	Staples	3555203830	Staples - Remit- To: Staples	Net 30	SINV-2023-95691	01/04/2024		02/03/2024	00.00	0.00	64.36 USD	OS
Supplier Invoice: SINV-2023- 95692	Kitsap Public Hea <b>l</b> th District	Staples	3555203831	Staples - Remit- To: Staples	Net 30	SINV-2023-95692	01/04/2024		02/03/2024	0.00	0.00	327.59 U	USD
Supplier Invoice: SINV-2023- 95693	Kitsap Public Hea <b>l</b> th District	United Business Machines Of Wa	INV508672	United Business Machines Of Wa	Net 30	SINV-2023-95693	01/04/2024		02/03/2024	00.00	00.00	473.69 USD	QS
Supplier Invoice: SINV-2023- 95739	Kitsap Public Health District	Toyota Financial 12/2023 LEASE Services	12/2023 LEASE	Toyota Financial Services	Net 30	SINV-2023-95739	01/04/2024		02/03/2024	0.00	0.00	460.71 USD	SD
Process History Settlement Run Process History	istory												

Comment

All Persons

Person (Up to 5) Heather Hunsaker (434069)

Due Date

Completed On 01/04/2024 09:06:00 AM

Status

Step Completed

Settlement Run Event

Process

Settlement Run Event

# DocuSign Envelope ID: 4BB40B6A-693D-4A03-B1B3-0B8744B5C772

View Settlement Run



Process	Step	Status	Completed On	Due Date	Person (Up to 5)	All Persons	Comment
Settlement Run Event	To Do: Settlement Run has Payment Handling Instruction	Not Required				0	
Settlement Run Event	To Do: AP Wire was Settled	Not Required				0	
Settlement Run Event	To Do: Wire Payment Settled	Not Required				0	
Related Business Processes History							
	Business Process				Status		
Payment Message: ID 2346 for Kitsap Public Health District on 01/04/2024	blic Health District on 01/04/2024		Succe	Successfully Completed			
Payment Message: ID 2347 for Kitsap Public Health District on 01/04/2024	blic Health District on 01/04/2024		Succe	Successfully Completed			
Print Checks: Kitsap County Claims Fund Warrant Account for Miscellaneous Payment (Check) on 01/04/2024	Warrant Account for Miscellaneous F	Payment (Check) on 01/04/2024	Succe	Successfully Completed			
Print Checks: Kitsap County Claims Fund Warrant Account for Supplier Payment (Check) on 01/04/2024	Warrant Account for Supplier Payme	ent (Check) on 01/04/2024	Succe	Successfully Completed			
Remittance File: For United Business Machines Of Wa on 01/04/2024	chines Of Wa on 01/04/2024		Succe	Successfully Completed			
Remittance File: For FedEx - Remit-To: PO Box 371461 Pittsburgh on 01/04/2024	O Box 371461 Pittsburgh on 01/04/20	024	Succe	Successfully Completed			
Remittance File: For Ozark Underground Laboratory on 01/04/2024	Laboratory on 01/04/2024		Succe	Successfully Completed			
-							

# Background Processes

)								
Created Date and Time	Started Date and Time Process Type	Process Type	Process	Request	Status	Total Processing Time	Submitted by	Errors & Warnings
01/04/2024 09:06 AM	01/04/2024 09:06 AM	qof	Settlement Run Complete	Settlement Run Complete for STL-00003017	Completed	00:00:12	Heather Hunsaker	

DocuSign Envelope ID: 4BB40B6A-693D-4A03-B1B3-0B8744B5C772

Settlement Run Information	
Settlement Run STL-00003037	STL-00003037
Name	Kitsap Public Health District HH
Number	STL-00003037
Status	Complete
Date	01/11/2024
Include Payments On Behalf Of	No
Exclude Negative Payments	Yes
Express Settlement	No
Additional Information	Additional Information
Organization	Organization Kitsap Public Health District
Currency USD	USD
Deso sialilia	Desc. Salika
Payment Information	
Display Currency USD	USD
Outbound Total	9,689.33
Inbound Total	0.00
Expense Report Count	25
Miscellaneous Payment Request Count	
Supplier Invoice Count	12

Payment (
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a distriction of company									
View	Category	Bank Account	Payment Type	Date	Payments	Amount	Currency	Business Process	Status
Expense Payment(Check) for Kitsap	Expense Payment	Kitsap County Claims Check Fund Warrant Account		01/11/2024	-	01.57 USD	USD	Print Checks: Kitsap County Successfully Completed Claims Fund Warrant Account for Expense Payment (Check) on 01/11/2024	Successfully Completed
Expense Payment(Direct Deposit) for Expense Payment Treasurer's Main account	Expense Payment	Treasurer's Main account	Direct Deposit	Deposit 01/11/2024	24	3,352.95 USD	USD	Payment Message: ID 2365 Successfully Completed for Kitsap Public Health District on 01/11/2024	Successfully Completed
Miscellaneous Payment(Check) for Kitsap County Claims Fund Warrant Account	Miscellaneous Payment	Kitsap County Claims Check Fund Warrant Account	Check	01/11/2024	<del>-</del>	45.00 USD	OSD	Print Checks: Kitsap County Successfully Completed Claims Fund Warrant Account for Miscellaneous Payment (Check) on 01/11/10/02	Successfully Completed

# DocuSign Envelope ID: 4BB40B6A-693D-4A03-B1B3-0B8744B5C772

View Settlement Run

Status	essfully Completed	essfully Completed
Business Process	Print Checks: Kitsap County Successfully Completed Claims Fund Warrant Account for Supplier Payment (Check) on 01/11/2024	Payment Message: ID 2364 Successfully Completed for Kitsap Public Health District on 01/11/2024
Currency	asn	USD
Amount Currency	4,819.43 USD	1,410.38 USD
Payments	ω	2
Date	01/11/2024	11/11/2024
Payment Type Date		EFT 0
Bank Account	Kitsap County Claims Check Fund Warrant Account	Treasurer's Main account
Category	Supplier Payment	Supplier Payment
View	Supplier Payment (Check) for Kitsap Supplier Payment County Claims Fund Warrant Account	Supplier Payment(EFT) for Treasurer's Supplier Payment Main account

Supplier Payment(EFT) for Treasurer's Supplier Payment Main account	Treasurer's Main account	EFT	01/11/2024	2	1,410.38 USD	Payment Message: ID 2364 Successfully Completed for Kitsap Public Health District on 01/11/2024
Expense Reports						

						Dis	District on 01/11/2024	
Expense Reports								
Expense Report	Company	Pay To	Туре	Document Number	Expense Report Date	Memo	Reimbursable Amount	Currency
Expense Report: EXP-0007623	Kitsap Public Health District	Kitsap Public Health Sam Ader (413193) District	Employee	EXP-0007623	01/11/2024		52'68	89.79 USD
Expense Report: EXP-0007624	Kitsap Public Health District	Kitsap Public Health Zachary Ahlin (434420) District	Employee	EXP-0007624	01/11/2024		244.55	244.55 USD
Expense Report: EXP-0007625	Kitsap Public Health District	Kitsap Public Health Jami Armstrong (434291) District	Employee	EXP-0007625	01/11/2024		163.75	163.75 USD
Expense Report: EXP-0007626	Kitsap Public Health District	Kitsap Public Health Leslie Banigan (215189) District	Employee	EXP-0007626	01/11/2024		50.18	50.18 USD
Expense Report: EXP-0007627	Kitsap Public Health District	Kitsap Public Health Christine Bronder (434436) District	Employee	EXP-0007627	01/11/2024		792.81	792.81 USD
Expense Report: EXP-0007628	Kitsap Public Health District	Kitsap Public Health Callie Burton (434296) District	Employee	EXP-0007628	01/11/2024		15.41	15.41 USD
Expense Report: EXP-0007629	Kitsap Public Health District	Kitsap Public Health Dara Deseamus (434593) District	Employee	EXP-0007629	01/11/2024		65.39	65.39 USD
Expense Report: EXP-0007630	Kitsap Public Health District	Kitsap Public Health Ashley Duren (430735) District	Employee	EXP-0007630	01/11/2024		27.77	77.72 USD
Expense Report: EXP-0007631	Kitsap Public Health District	Kitsap Public Health Paul Giuntoli (337331) District	Employee	EXP-0007631	01/11/2024		61.57	61.57 USD
Expense Report: EXP-0007632	Kitsap Public Health District	Kitsap Public Health Cristian Inga Dominguez (434769) District	Employee	EXP-0007632	01/11/2024		52,42	52.42 USD
Expense Report: EXP-0007633	Kitsap Public Health District	Kitsap Public Health Brandon Kindschy (421430) District	Employee	EXP-0007633	01/11/2024		52.01	52.01 USD
Expense Report: EXP-0007634	Kitsap Public Health District	Kitsap Public Health Ross Lytle (285038) District	Employee	EXP-0007634	01/11/2024		98.25	98.25 USD
Expense Report: EXP-0007635	Kitsap Public Health District	Kitsap Public Health Martha May (434674) District	Employee	EXP-0007635	01/11/2024		175.41	175.41 USD
Expense Report: EXP-0007636	Kitsap Public Health District	Kitsap Public Health   Karina Mazur (388104) District	Employee	EXP-0007636	01/11/2024		101,62	101.62 USD
Expense Report: EXP-0007637	Kitsap Public Health District	Kitsap Public Health Anne Moen (279971) District	Employee	EXP-0007637	01/11/2024		31.69	31.69 USD
Expense Report: EXP-0007638	Kitsap Public Health	Kitsap Public Health Alexandra Moore (434254)	Employee	EXP-0007638	01/11/2024		238 <u>.</u> 43 USD	USD (

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Expense Report	Company	Рау То	Туре	Document Number	Expense Report Date	Memo	Reimbursable Amount	Currency
Expense Report: EXP-0007639	Kitsap Public Health District	Kitsap Public Health Gabreiel Outlaw-Spencer (434984) Employee District	Employee	EXP-0007639	01/11/2024		210.46 USD	OSI
Expense Report: EXP-0007640	Kitsap Public Health District	Kitsap Public Health Kayla Petersen (434695) District	Employee	EXP-0007640	01/11/2024		147.90 USD	JSD
Expense Report: EXP-0007641	Kitsap Public Health District	Kitsap Public Health Emmy Shelby (434658) District	Employee	EXP-0007641	01/11/2024		74.02 USD	JSD
Expense Report: EXP-0007642	Kitsap Public Health District	Kitsap Public Health Nolan Simmons (434365) District	Employee	EXP-0007642	01/11/2024		53.45 USD	JSD
Expense Report: EXP-0007643	Kitsap Public Health District	Kitsap Public Health Lisa Warren (434273) District	Employee	EXP-0007643	01/11/2024		113.91 USD	JSD
Expense Report: EXP-0007644	Kitsap Public Health District	Kitsap Public Health Jan Wendt (397255) District	Employee	EXP-0007644	01/11/2024		202 <u>.</u> 99 USD	JSD
Expense Report: EXP-0007645	Kitsap Public Health District	Kitsap Public Health Laura Westervelt (434382) District	Employee	EXP-0007645	01/11/2024		39.30 USD	JSD
Expense Report: EXP-0007646	Kitsap Public Health District	Kitsap Public Health Mark Wickhamshire (434070) District	Employee	EXP-0007646	01/11/2024		189.30 USD	JSD
Expense Report: EXP-0007647	Kitsap Public Health District	Kitsap Public Health Janet Wyatt (434415) District	Employee	EXP-0007647	01/11/2024		72.19 USD	JSD
Miscellaneous Payment Requests								

Miscellaneous Payment Requests  Miscellaneous Payment Request	Company Kitsap Public Health	Payee CLAIRE YOUNKER MOE	Document Number MPR-13974	Payment Type Check	Payment Type Request Category Check POS Customer	Document Date 01/11/2024	Payment Amount 45.00 USD	Currency
Supplier Invoices	District	District (Inactive)			Refund			

Amount to Currency Pay

352.66 USD

472.38 USD

3.26 USD

300,00 USD

Withheld Tax Amount	00'0	00.0	00.00	00.0
Discount Taken	00.0	0.00	0.00	0.00
Due Date	02/10/2024	02/10/2024	02/10/2024	02/10/2024
Discount Date				
Invoice Date	01/11/2024	01/11/2024	01/11/2024	01/11/2024
Document Number	SINV-2024-00684	SINV-2024-00685	SINV-2024-00686	SINV-2024-00687
Payment Terms	Net 30			Net 30
Рауее	Clean Harbors Environmental Service, Inc	01/2024 Comcast - Remit-To: Net 30 PO Box 60533	Comcast - Remit-To: Net 30 PO Box 60533	Lamar Companies
Supplier's Invoice Number	1004868126	1644737 01/2024	1685177 01/2024	115488972
Supplier	Clean Harbors Environmental Service, Inc	Comcast	Comcast	Lamar Companies
Company		Kitsap Public Health District	Kitsap Public Health District	Kitsap Public Health District
Supplier Invoice	Supplier Invoice: SINV-2024- Kitsap 00684 Public Health District	Supplier Invoice: SINV-2024- Kitsap 00685 Public Public Infinity District	Supplier Invoice: SINV-2024- Kitsap 00686 Public Public Harith District	Supplier Invoice: SINV-2024- Kitsap 00687 Public Public Health District

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Process	Step	Status	Completed On	Due Date	Person (Up to 5)	All Persons	Comment
Settlement Run Event	To Do: Wire Payment Settled	Not Required				0	
Related Business Processes History							
	Business Process				Status		
Payment Message: ID 2365 for Kitsap Public Health District on 01/11/2024	Health District on 01/11/2024		Succes	Successfully Completed			
Payment Message: ID 2364 for Kitsap Public Health District on 01/11/2024	Health District on 01/11/2024		Succes	Successfully Completed			
Print Checks: Kitsap County Claims Fund Warrant Account for Expense Payment (Check) on 01/11	rant Account for Expense Payment	(Check) on 01/11/2024	Succes	Successfully Completed			
Print Checks: Kitsap County Claims Fund Warrant Account for Miscellaneous Payment (Check) on	rant Account for Miscellaneous Pay	/ment (Check) on 01/11/2024	Succes	Successfully Completed			
Print Checks: Kitsap County Claims Fund Warrant Account for Supplier Payment (Check) on 01/11	rant Account for Supplier Payment	(Check) on 01/11/2024	Succes	Successfully Completed			
Remittance File: For United Business Machines Of Wa on 01/11/2024	s Of Wa on 01/11/2024		Succes	Successfully Completed			
Remittance File: For Spectra Laboratories - Kitsap, LLC - Remit-To: 26276 Twelve Trees Ln Suite	tsap, LLC - Remit-To: 26276 Twelve	e Trees Ln Suite C Poulsbo on 01/11/2024		Successfully Completed			

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Background Processes								
Created Date and Time	Started Date and Time Process Type	Process Type	Process	Request	Status	Total Processing Time	Submitted by	Errors & Warnings
01/11/2024 09:39 AM	01/11/2024 09:39 AM	qor	Settlement Run Complete	Complete Settlement Run Complete for STL-00003037	Completed	00:00:12	Heather Hunsaker	

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ocuSign En	KITEMF COUN	

STL-00003058 Kitsap Public Health Dist, JS STL-00003058 Kitsap Public Health District USD Complete 01/18/2024 USD 27,550.90 00.00 s ≺ s Number Status Organization Currency Display Currency Outbound Total Include Payments On Behalf Of Exclude Negative Payments Exclude Settlement Name Date Miscellaneous Payment Request Count Supplier Invoice Count Settlement Run Expense Report Count Inbound Total Filters Used Settlement Run Information Additional Information Payment Information

ayment Groups	ayment Groups

ViewCategoryBank AccountPaymentDatePaymentsAmountCurrencyBusiness ProcessStatusExpense Payment (Check) for Kitsap County Claims Fund Warrant Account AccountExpense Payment (Direct Deposit)Check01/18/20242211<	- ayılıcılı Gloups									
Expense Payment Kitsap County Claims Check: Missap County Claims Checks: Kitsap County Claims Fund Warrant Account Fund Warrant Account for Expense Payment Account Treasurer's Main Deposit account Deposit Account Deposit Check County Claims Fund Naturant Account for Expense Payment Check) on 01/18/2024    Check County Claims Fund Warrant Account for Expense Payment Message: ID 2288 for Kitsap Public Health District on 01/18/2024	View	Category	Bank Account	Payment Type	Date	Payments	Amount	Currency	Business Process	Status
Expense Payment Treasurer's Main Direct 01/18/2024 15 1,485,41 USD Payment Message: ID 2288 for Kitsap Public Health District on 01/18/2024 15 1,485,41 USD Payment Message: ID 2288 for Kitsap Public Health District on 01/18/2024	Expense Payment(Check) for Kitsap County Claims Fund Warrant Account	Expense Payment	Kitsap County Claims Fund Warrant Account	Check	01/18/2024	2	202.62		Print Checks: Kitsap County Claims Fund Warrant Account for Expense Payment (Check) on 01/18/2024	Successfully Completed
		Expense Payment	Treasurer's Main account	Direct Deposit	01/18/2024	15	1,485.41		Payment Message: ID 2388 for Kitsap Public Health District on 01/18/2024	Successfully Completed

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View	Category	Bank Account	Payment Type	Date	Payments	Amount	Currency	Business Process	Status
Miscellaneous Payment (Check) for Kitsap County Claims Fund Warrant Account	Miscellaneous Payment	Kitsap County Claims Check Fund Warrant Account	Check	01/18/2024	<del>-</del>	350.00 USD	OSC	Print Checks: Kitsap County Claims Fund Warrant Account for Miscellaneous Payment (Check) on 01/18/2024	Successfully Completed
Supplier Payment(Check) for Kitsap Supplier Payment County Claims Fund Warrant Account	Supplier Payment	Kitsap County Claims Check Fund Warrant Account	Check	01/18/2024	18	22,520.77 USD	JSD	Print Checks: Kitsap County Claims Fund Warrant Account for Supplier Payment (Check) on 01/18/2024	Successfully Completed
Supplier Payment(EFT) for Treasurer's Main account	Supplier Payment	Treasurer's Main account	EFT	01/18/2024	2	2,992.10 USD	JSD	Payment Message: ID 2387 for Kitsap Public Health District on 01/18/2024	Successfully Completed

Expense Reports								
Expense Report	Company	Pay To	Type	Document Number	Expense Report Date	Memo	Reimbursable Amount	

Experies Teports								
Expense Report	Company	Рау То	Туре	Document Number	Expense Report Date	Memo	Reimbursable Amount	Currency
Expense Report: EXP-0007674	Kitsap Public Health District	Kitsap Public Health Elizabeth Davis (433997) Employ District	Employee	EXP-0007674	01/18/2024		24.89 USD	OSD
Expense Report: EXP-0007675	Kitsap Public Health District	Kitsap Public Health George Fine (421693) District	Employee	EXP-0007675	01/18/2024		39.10 USD	USD
Expense Report: EXP-0007676	Kitsap Public Health District	Kitsap Public Health Yolanda Fong (356883) District	Employee	EXP-0007676	01/18/2024		138.80 USD	USD
Expense Report: EXP-0007688	Kitsap Public Health District	Kitsap Public Health Brittany Sample (434976) Employ District	Employee	EXP-0007688	01/18/2024		102.00 USD	USD
Expense Report: EXP-0007689	Kitsap Public Health District	Kitsap Public Health Kelly Snow (435021) District	Employee	EXP-0007689	01/18/2024		145.00 USD	USD
Expense Report: EXP-0007690	Kitsap Pub <b>l</b> ic Health District	Kitsap Public Health Jan Wendt (397255) District	Employee	EXP-0007690	01/18/2024		80.00 USD	USD
Expense Report: EXP-0007691	Kitsap Public Health Jacob Wimpenny District (434923)	Jacob Wimpenny (434923)	Employee	EXP-0007691	01/18/2024		69.52 USD	USD
Expense Report: EXP-0007692	Kitsap Public Health Layken Winchester District (431493)	Layken Winchester (431493)	Employee	EXP-0007692	01/18/2024		21.22 USD	USD
Expense Report: EXP-0007696	Kitsap Pub <b>l</b> ic Health District	Kitsap Public Health Paul Giuntoli (337331) District	Employee	EXP-0007696	01/18/2024		57.62 USD	USD
Expense Report: EXP-0007697	Kitsap Pub <b>l</b> ic Health District	Kitsap Public Health Melina Knoop (16125) District	Employee	EXP-0007697	01/18/2024		49.78 USD	USD
Expense Report: EXP-0007698	Kitsap Pub <b>l</b> ic Health District	Kitsap Public Health Melissa Laird (416539) District	Employee	EXP-0007698	01/18/2024		17.99 USD	USD
Expense Report: EXP-0007699	Kitsap Pub <b>l</b> ic Health District	Kitsap Public Health Albert Lawver (434888) District	Employee	EXP-0007699	01/18/2024		150.65 USD	USD
Expense Report: EXP-0007700	Kitsap Public Health District	Kitsap Public Health Martha May (434674) District	Employee	EXP-0007700	01/18/2024		95.11 USD	USD

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Expense Report	Company	Pay To	Туре	Document Number	Expense Report Date Memo	Memo	Reimbursable Amount	Currency
Expense Report: EXP-0007701	Kitsap Public Health District	Kitsap Public Health Melissa O'Brien (433907) Employee District	Employee	EXP-0007701	01/18/2024		109.91 USD	usp
Expense Report: EXP-0007702	Kitsap Public Health District	Kitsap Public Health Nolan Simmons (434365) Employee District	Employee	EXP-0007702	01/18/2024		106.83 USD	USD
Expense Report: EXP-0007703	Kitsap Pub <b>l</b> ic Health District	Kitsap Public Health Brian Burchett (409212) Employee District	Employee	EXP-0007703	01/18/2024		381.74 USD	USD
Expense Report: EXP-0007704	Kitsap Pub <b>l</b> ic Health District	Kitsap Public Health Maria Fergus (434648) Employee District	Employee	EXP-0007704	01/18/2024		97.87 USD	USD
Miscellaneous Payment Requests								

Miscellaneous Payment Request Company	Payee	Document Number	Payment Type	Request Category	Document Date	Payment Amount	Currency
MPR-14048 Kitsap Public Heal District	Ith JULIE BRUMMOND (Inactive)	MPR-14048	Check	One-Time Payment	01/18/2024	350.00 USD	USD

# upplier Invoice

Company												
	Supplier	Supplier's Invoice Number	Payee	Payment Terms	Document Number	Invoice Date E	Discount Date	Due Date	Discount Taken	Withheld Tax Amount	Amount to Pay	Currency
О	Kitsap County Q3	Q3 2023 KPHD LEGAL F	Kitsap County - N Remit-To: KC Prosecuting Dept (Hold)	Net 30	SINV-2024-01585	01/18/2024		02/17/2024	0.00	00.00	8,156.70 USD	OSC
n G tme	Griffin Glen Apartments LLC	2/2024 RENT		Net 30	SINV-2024-01587	01/18/2024		02/17/2024	00.0	00.00	1,360.00 USD	OSC
Wex Bank		94383719	Wex Bank	Net 30	SINV-2024-01588	01/18/2024		02/17/2024	0.00	0.00	558.07 USD	OSC
e ia, S	Kania, Sharon 18 Faye	18643 F	Kania, Sharon Faye	Net 30	SINV-2024-01799	01/18/2024		02/17/2024	0.00	0.00	635.00 USD	OSC
e Heigeridar	The Heights at Sheridan Road	11243	The Heights at Sheridan Road	Net 30	SINV-2024-01801	01/18/2024		02/17/2024	0.00	0.00	585.00 USD	OSC
shing	Washington Home 10160 Solutions		Washington Home Net 30 Solutions	Net 30	SINV-2024-01802	01/18/2024		02/17/2024	0.00	0.00	696.00 USD	JSD

Currency	USD (	USD (	950.00 USD	194.40 USD	OSD (	USD	USD ,	418.13 USD	28.35 USD	100.00 USD
Amount to Pay	1,214.00 USD	1,080.00 USD	950.00	194.40	2,797.70 USD	3,322.96 USD	1,828.27 USD	418.13	28.35	100.00
Withheld Tax Amount	0.00	0.00	0.00	0.00	0.00	00.0	0.00	0.00	0.00	0.00
Discount Taken	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Due Date	02/17/2024	02/17/2024	02/17/2024	02/17/2024	02/17/2024	02/17/2024	02/17/2024	02/17/2024	02/17/2024	02/17/2024
Discount Date										
Invoice Date	01/18/2024	01/18/2024	01/18/2024	01/18/2024	01/18/2024	01/18/2024	01/18/2024	01/18/2024	01/18/2024	01/18/2024
Document Number	SINV-2024-01804	SINV-2024-01805	SINV-2024-01808	SINV-2024-01810	SINV-2024-01811	SINV-2024-01812	SINV-2024-01813	SINV-2024-01814	SINV-2024-01818	SINV-2024-01819
Payment Terms	Net 30	Net 30	Net 30	Net 30	Net 30	Net 30	Net 30	Net 30	Net 30	Net 30
Payee	Silverdale Home Associates	Daniel R. Niblock	Paul Simmons	Iron Mountain - Remit-To: Po Box 27128	Spectra Laboratories - Kitsap, LLC - Remit-To: 2221 Ross Way Tacoma	Zoho Corporation	Blue Sky Printing	Salesforce, Inc.	Telelanguage LLC	West Sound Wildlife Shelter
Supplier's Invoice Number	3736	9856	5754	202814367	DEC2023	2392421	N16634	28339830	0310071223	206
Supplier	Silverdale Home Associates	Daniel R. Niblock	Paul Simmons	Iron Mountain	Spectra Laboratories - Kitsap, LLC	Zoho Corporation 2392421	Blue Sky Printing	Salesforce, Inc.	Telelanguage LLC 0310071223	West Sound Wildlife Shelter
Company	Kitsap Public Health District	Kitsap Public Hea <b>l</b> th District	Kitsap Public Health District	Kitsap Public Hea <b>l</b> th District	Kitsap Public Health District	Kitsap Public Health District	Kitsap Public Hea <b>l</b> th District	Kitsap Public Health District	Kitsap Public Hea <b>l</b> th District	Kitsap Public Health District
Supplier Invoice	Supplier Invoice: SINV-2024- 01804	Supplier Invoice: SINV-2024-01805	Supplier Invoice: SINV-2024-01808	Supplier Invoice: SINV-2024- 01810	Supplier Invoice: SINV-2024- 01811	Supplier Invoice: SINV-2024- 01812	Supplier Invoice: SINV-2024- 01813	Supplier Invoice: SINV-2024- 01814	Supplier Invoice: SINV-2024- 01818	Supplier Invoice: SINV-2024- 01819

# DocuSign Envelope ID: 4BB40B6A-693D-4A03-B1B3-0B8744B5C772

View Settlement Run



Currency	USD	USD	USD	OSD	OSD	USD	
Amount to Pay	33.08 USD	483.75 USD	333.13 USD	133.42 USD	00.009 00.009	(55.09) USD	
Withheld Tax Amount	0.00	0.00	00.0	0.00	0.00	0.00	
Discount Taken	0.00	0.00	0.00	0.00	0.00	0.00	
Due Date	02/17/2024	02/17/2024	02/17/2024	02/17/2024	02/17/2024	02/17/2024	
Discount Date							
Invoice Date	01/18/2024	01/18/2024	01/18/2024	01/18/2024	01/18/2024	01/18/2024	
Document Number	SINV-2024-01822	SINV-2024-01823	SINV-2024-01824	SINV-2024-01825	SINV-2024-01845	SINV-2024-01826	
Payment Terms	Net 30	Net 30	Net 30	Net 30		Net 30	
Payee	Laboratory Corporation of America	Toyota Financial Services	Staples - Remit- To: Staples	Staples - Remit- To: Staples	Indigo Apartments 02/2024 RENT Indigo Apartments Net 30	Staples - Remit- To: Staples	
Supplier's Invoice Number	78777057	03 0322 CU922 01/10/2024	3556619288	3556312829	02/2024 RENT	3556387192	
Supplier	Laboratory Corporation of America	Toyota Financia <b>l</b> Services	Staples	Staples	Indigo Apartments	Staples	
Company		Kitsap Public Health District	Kitsap Public Hea <b>lt</b> h District	Kitsap Public Hea <b>l</b> th District	Kitsap Public Hea <b>l</b> th District	Kitsap Public Hea <b>l</b> th District	
Supplier Invoice	Supplier Invoice: SINV-2024- Kitsap 01822 Health Health District	Supplier Invoice: SINV-2024- 01823	Supplier Invoice: SINV-2024- 01824	Supplier Invoice: SINV-2024- 01825	Supplier Invoice: SINV-2024- 01845	Supplier Invoice Adjustment: SINV-2024-01826	

Process History
Settlement Run Process History

Process	Step	Status	Completed On	Due Date	Person (Up to 5)	All Persons	Comment
Settlement Run Event	Settlement Run Event	Step Completed	01/18/2024 09:01:40 AM		Junille Schmeling (430378)	1	
Settlement Run Event	To Do: Settlement Run has Payment Handling Instruction	Not Required				0	
Settlement Run Event	To Do: AP Wire was Settled	Not Required				0	
Settlement Run Event	To Do: Wire Payment Settled	Not Required				0	
Related Business Processes History							

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Business Process	Status
Payment Message: ID 2387 for Kitsap Public Health District on 01/18/2024	Successfully Completed
Payment Message: ID 2388 for Kitsap Public Health District on 01/18/2024	Successfully Completed
Print Checks: Kitsap County Claims Fund Warrant Account for Miscellaneous Payment (Check) on 01/18/2024	Successfully Completed
Print Checks: Kitsap County Claims Fund Warrant Account for Supplier Payment (Check) on 01/18/2024	Successfully Completed

# DocuSign Envelope ID: 4BB40B6A-693D-4A03-B1B3-0B8744B5C772

# View Settlement Run

Business Process Print Checks: Kitsap County Claims Fund Warrant Account for Expense Payment (Check) on 01/ Remittance File: For Spectra Laboratories - Kitsap, LLC - Remit-To: 2221 Ross Way Tacoma on Remittance File: For Iron Mountain - Remit-To: Po Box 27128 on 01/18/2024
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Background Processes								
Created Date and Time	Started Date and Time Process Type	Process Type	Process	Request	Status	Total Processing Time	Submitted by	Errors & Warnings
01/18/2024 09:01 AM	01/18/2024 09:01 AM	qof	Settlement Run Complete	Settlement Run Complete for Co	Completed	00:00:17	Junille Schmeling	

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Settlement Run Information	Settlement Run Information
Settlement Run	STL-00003083
Name	Kitsap Public Health Dist, JS
Number	STL-00003083
Status	Complete
Date	01/25/2024
Include Payments On Behalf Of	9.Z
Exclude Negative Payments	Yes
Express Settlement	Express Settlement No
Additional Information	Additional Information
Organization	Kitsap Public Health District
Currency USD	USD

Payment Information	
Display Currency	USD
Outbound Total 254,138.50	254,138.50
Inbound Total	0.00
Expense Report Count	2
Supplier Invoice Count 31	31

Payment Groups

Filters Used

Payment Groups									
View	Category	Bank Account	Payment Type	Date	Payments	Amount	Currency	Business Process	Status
Expense Payment(Direct Deposit) for Treasurer's Main account	Expense Payment	Treasurer's Main account	Direct Deposit 01/25/2024	01/25/2024	2	180.96 USD	USD	Payment Message: ID 2406 for Kitsap Public Health District on 01/25/2024	Payment Message: ID Successfully Completed 2406 for Kitsap Public Health District on 01/126/2024
Supplier Payment(Check) for Kitsap County Claims Fund Warrant Account	Supplier Payment	Supplier Payment Kitsap County Claims Fund Warrant Account	Check	01/25/2024	27	239,741.17 USD	USD	Print Checks: Kitsap County Claims Fund Warrant Account for Supplier Payment (Check) on 01/25/2024	Successfully Completed
Supplier Payment(EFT) for Treasurer's Main account	Supplier Payment Treasurer's Main account	Treasurer's Main account	ЕFT	01/25/2024	4	14,216.37 USD	USD	Payment Message: ID 2407 for Kitsap Public Health District on 01/25/2024	Payment Message: ID Successfully Completed 2407 for Kitsap Public Health District on 01/25/2024

Expense Reports



Expense Report	Company	Pay To	Туре	Document Number	Expense Report Date	Memo	Reimbursable Amount	Currency
Expense Report: EXP-0007730	Kitsap Public Health Callie Burton District (434296)	Callie Burton (434296)	Employee	EXP-0007730	01/25/2024		27.95 USD	asc
Expense Report: EXP-0007732	Kitsap Public Health District	Nolan Simmons (434365)	Employee	EXP-0007732	01/25/2024		123.01 USD	JSD

Currency 1,025.81 USD 117.00 USD 52.25 USD 519.18 USD 658.56 USD 2,500,00 USD 288.00 USD 60.00 USD 2,120.00 USD Amount to Pay 0.00 0.00 0.00 0.00 0.00 00.00 0.00 0.00 0.00 Withheld Tax Amount 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 Discount Taken 0.00 **Due Date** 02/24/2024 02/24/2024 02/24/2024 02/24/2024 02/24/2024 02/24/2024 02/24/2024 02/24/2024 02/24/2024 Discount Date Invoice Date 01/25/2024 01/25/2024 01/25/2024 01/25/2024 01/25/2024 01/25/2024 01/25/2024 01/25/2024 01/25/2024 Document Number SINV-2024-02540 SINV-2024-02537 SINV-2024-02538 SINV-2024-02541 SINV-2024-02543 SINV-2024-02553 SINV-2024-02556 SINV-2024-02558 SINV-2024-02536 Payment Terms Net 30 Acranet Cbs Branch Net 30 Griffen Caldwell, Inc Net 30 Costco Wholesale - N Remit-To: Seattle Po Box 34783 Lamar Companies Comcast - Remit-To: PO Box 37601 United Business Machines Of Wa A.W. Rehn & Associates, Inc Stericycle Inc -Remit-To: Stericycle Inc Payee Trumpia Griffen Caldwell, Inc FEB/MARCH 2024 RENT Supplier's Invoice Number 111854106324 8005760898 / 8005755093 #TRU010923 #INV509833 191289663 115552737 Acranet Cbs Branch #25017 14302 Lamar Companies Costco Wholesale United Business Machines Of Wa A.W. Rehn & Associates, Inc Supplier Stericycle Inc Trumpia Comcast Company Kitsap Public Hea**l**th District Kitsap Public Health District Kitsap Public Health District Kitsap Public Health District Kitsap Public Health District Health District Health District Kitsap Public Health Kitsap Public Health Kitsap Public Health District Kitsap Public Health District Kitsap Public Health Health Health Health Health Health District Kitsap Public Health Healt Kitsap Public Health District Kitsap Public Health Supplier Invoice: SINV-2024-02537 Supplier Invoice: SINV-2024-02541 Supplier Invoice: SINV-2024-02558 Supplier Invoice: SINV-2024-02536 Supplier Invoice: SINV-2024-02538 Supplier Invoice: SINV-2024-02540 Supplier Invoice: SINV-2024-02543 Supplier Invoice: SINV-2024-02553 Supplier Invoice: SINV-2024-02556 Supplier Invoice Supplier Invoices

ıcy										
Currency	65.80 USD	USD	OSD	USD	USD	OSD	OSD	OSD	OSD	USD
Amount to Pay	65.80	1,855.00 USD	338.86 USD	12,415.00 USD	2,224.88 USD	6,141.78 USD	3,298.40 USD	1,590.00 USD	28,796.65 USD	7,295.00 USD
Withheld Tax Amount	00'0	00.00	0.00	0.00	00.00	00.0	0.00	00.00	00.0	0.00
Discount Taken	00'0	00.0	00.00	0.00	00.0	0.00	0.00	00.0	00.0	0.00
Due Date	02/24/2024	02/24/2024	02/24/2024	02/24/2024	02/24/2024	02/24/2024	02/24/2024	02/24/2024	02/24/2024	02/24/2024
Discount Date										
Invoice Date	01/25/2024	01/25/2024	01/25/2024	01/25/2024	01/25/2024	01/25/2024	01/25/2024	01/25/2024	01/25/2024	01/25/2024
Document Number	SINV-2024-02559	SINV-2024-02560	SINV-2024-02561	SINV-2024-02563	SINV-2024-02898	SINV-2024-02899	SINV-2024-02900	SINV-2024-02901	SINV-2024-02902	SINV-2024-02903
Payment Terms	Net 30	Net 30	Net 30	Net 30	Net 30	Net 30	Net 30	Net 30	Net 30	Net 30
Payee	ODP Business Solutions, LLC	Pottery Creek	Staples - Remit-To: Staples	WA State Assoc of Local Public Health Officials	American Family Life Assurance Company	WA State Employment Security - Remit-To: PO Box 84249 Paid Family & Medical	WA State Employment Security - Remit-To: WA Cares Fund PO Box 3537	Health Equity	Hra Veba Trust	Nationwide Retirement Solutions
Supplier's Invoice Number	INV 349248031001	FEBRUARY 2024 RENT	3557084381	WSALPHO024-14	JAN 2024 BENEFITS	JAN 2024 BENEFITS	JAN 2024 BENEFITS	JAN 2024 BENEFITS	JAN 2024 BENEFITS	JAN 2024 BENEFITS
Supplier	ODP Business Solutions, LLC	Pottery Creek	Staples	WA State Assoc of Local Public Health Officials	American Family Life Assurance Company	WA State Employment Security	WA State Employment Security	Health Equity	Hra Veba Trust	Nationwide Retirement Solutions
Company	Kitsap Public Hea <b>l</b> th District	Kitsap Public Hea <b>l</b> th District	Kitsap Public Hea <b>l</b> th District	Kitsap Public Hea <b>l</b> th District	Kitsap Public Hea <b>l</b> th District	Kitsap Public Health District	Kitsap Public Health District	Kitsap Public Hea <b>l</b> th District	Kitsap Public Hea <b>l</b> th District	Kitsap Public Health District
Supplier Invoice	Supplier Invoice: SINV-2024- 02559	Supplier Invoice: SINV-2024- 02560	Supplier Invoice: SINV-2024- 02561	Supplier Invoice: SINV-2024-02563	Supplier Invoice: SINV-2024-02898	Supplier Invoice: SINV-2024- 02899	Supplier Invoice: SINV-2024- 02900	Supplier Invoice: SINV-2024-02901	Supplier Invoice: SINV-2024- 02902	Supplier Invoice: SINV-2024- 02903

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Currency	OSD	OSD	OSD	OSD	USD	USD	OSD	OSD	OSD	USD
Amount to Pay	621.75 USD	1,398.67 USD	3,393.34 USD	28.00 USD	275.00 USD	6,013.07 USD	12,612,36 USD	130,919.47 USD	6,134.97 USD	11,563.14 USD
Withheld Tax Amount	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Discount Taken	0.00	00.00	0.00	0.00	0.00	0.00	00.00	0.00	00.0	0.00
Due Date	02/24/2024	02/24/2024	02/24/2024	02/24/2024	02/24/2024	02/24/2024	02/24/2024	02/24/2024	02/24/2024	02/24/2024
Discount Date										
Invoice Date	01/25/2024	01/25/2024	01/25/2024	01/25/2024	01/25/2024	01/25/2024	01/25/2024	01/25/2024	01/25/2024	01/25/2024
Document Number	SINV-2024-02904	SINV-2024-02905	SINV-2024-02906	SINV-2024-02908	SINV-2024-02909	SINV-2024-02910	SINV-2024-02912	SINV-2024-02913	SINV-2024-02914	SINV-2024-02916
Payment Terms	Net 30	Net 30	Net 30	Net 30	Net 30	Net 30	Of Net 30	Net 30	Net 30	Net 30
Payee	A.W. Rehn & Associates, Inc	A.W. Rehn & Associates, Inc	Prof & Technical Eng XPH - Remit- To: Local Union 17	Prof & Technical Eng XPH - Remit- To: Local 17 Union/PAC	Voya Institutional Trust Company - Remit-To: Voya Institutional Trust Co (Public Health Payroll)	WA State Dept of Labor & Industries - Remit-To: Industrial Insurance Po Box 34022	Wash State Dept Of Retirement	Wa Health Care Authority - Uniform	Vimly Benefit Solutions Inc	Whit-Delta Dental Of Washington
Supplier's Invoice Number	PARKING JAN BENEFITS	DCFSA JAN BENEFITS	JAN 2024	JAN PAC	JAN BENEFITS	JAN 2024 BENEFITS	JAN 2024 BENEFITS	JAN 2024 BENEFITS	JAN 2024 BENEFITS	JAN 2024 BENEFITS
Supplier	A.W. Rehn & Associates, Inc	A.W. Rehn & Associates, Inc	Prof & Technical Eng XPH	Prof & Technical Eng XPH	Voya Institutional Trust Company	WA State Dept of Labor & Industries	Wash State Dept Of JAN 2024 Retirement BENEFITS	Wa Health Care Authority - Uniform	Vimly Benefit Solutions Inc	Whit-Delta Dental Of Washington
Company	Kitsap Public Hea <b>l</b> th District	Kitsap Public Hea <b>l</b> th District	Kitsap Public Hea <b>l</b> th District	Kitsap Public Hea <b>l</b> th District	Kitsap Public Health District	Kitsap Public Health District	Kitsap Public Hea <b>l</b> th District	Kitsap Public Hea <b>l</b> th District	Kitsap Public Health District	Kitsap Public Health District
Supplier Invoice		Supplier Invoice: SINV-2024- 02905	Supplier Invoice: SINV-2024- 02906	Supplier Invoice: SINV-2024- 02908	Supplier Invoice: SINV-2024- 02909	Supplier Invoice: SINV-2024- 02910	Supplier Invoice: SINV-2024-02912	Supplier Invoice: SINV-2024- 02913	Supplier Invoice: SINV-2024- 02914	Supplier Invoice: SINV-2024- 02916



-				_
	Currency	USD	USD	
	Amount to Pay Currency	6,399.52 USD	3,236.08 USD	
	Vithheld Tax Amount	00'0	0.00	
	Discount Taken	00.0	0.00	
	Due Date	02/24/2024	02/24/2024	
	Discount Date			
	Invoice Date	01/25/2024	01/25/2024	
	Document Number Invoice Date Discount	SINV-2024-02917	SINV-2024-02918	
	Payment Terms	Vet 30	let 30	
	Payee	WA State Employment Security - Remit-To: PO Box 84249 Paid Family & Medical	WA State Employment Security - Remit-To: WA Cares Fund PO Box 3537	
	Supplier's Invoice Number	DEC 2023 TAXES WA State Employme Security - I PO Box 84 Family & N	DEC 2023 TAXES	
	Supplier	WA State Employment Security	WA State Employment Security	
	Company	Kitsap Public Health District	Kitsap Public Hea <b>l</b> th District	
	Supplier Invoice	Supplier Invoice: SINV-2024- Kitsap 02917 Public Health District	Supplier Invoice: SINV-2024 Kitsap 02918 Public Health District	

Process History Settlement Run Process History

Process	Step	Status	Completed On	Due Date	Person (Up to 5)	All Persons	Comment
Settlement Run Event	Settlement Run Event	Step Completed	01/25/2024 09:04:26 AM		Junille Schmeling (430378)		
Settlement Run Event	To Do: Settlement Run has Payment Handling Instruction	Not Required				0	
Settlement Run Event	To Do: AP Wire was Settled	Not Required				0	
Settlement Run Event	To Do: Wire Payment Settled	Not Required				0	
Lactoid Possocial appaisant Potaled							

Related Business Processes History

Status							
	Successfully Completed	Successfully Completed	Successfully Completed	Successfully Completed	Successfully Completed	Successfully Completed	Successfully Completed
Business Process	Payment Message: ID 2406 for Kitsap Public Health District on 01/25/2024	Payment Message: ID 2407 for Kitsap Public Health District on 01/25/2024	Print Checks: Kitsap County Claims Fund Warrant Account for Supplier Payment (Check) on 01/25/2024	Remittance File: For Acranet Cbs Branch on 01/25/2024	Remittance File: For United Business Machines Of Wa on 01/25/2024	Remittance File: For Stericycle Inc - Remit-To: Stericycle Inc on 01/25/2024	Remittance File: For WA State Assoc of Local Public Health Officials on 01/25/2024

**Background Processes** 

Created Date and Time	Started Date and Time	Process Type	Process	Request	Status	Total Processing Time	Submitted by	Errors & Warnings
01/25/2024 09:04 AM	01/25/2024 09:04 AM	dob	Settlement Run Complete	Settlement Run Complete for STL-00003083	Completed	00:00:11	Junille Schmeling	

Treasurer's Detail Report For 2024 - Jan Fund: FD00969 Kitsap Public Health General

Fund: FD00969 Kitsap			D (; D )	<b>5</b> 1 3	0 171	Б.
Ledger Account	Revenue or Spend Category	Journal	Posting Date	Debit	Credit	Balance
	5780 - Intergovernmental Loans	JE-00049395 - Kitsap Public	1/3/2024	0.00	16,667.00	-16,667.00
		Health District - 01/03/2024 - 2024				
		Mortgage Payment - January				
5700:Debt Service Prin	ncipa					
	5830 - Interest on Long-Term	JE-00049395 - Kitsap Public	1/3/2024	0.00	8,346.00	-8,346.00
	External Debt	Health District - 01/03/2024 - 2024				
		Mortgage Payment - January				
5800-Deht Service Inte	roet					

5800:Debt Service Interest

Treasurer's Detail Report For 2024 - Jan

Fund: FD00969 Kitsap Public Health General

Revenue or Spend Category
3860 - Agency Deposits Journal JE-00049460 - Kitsap Public Ledger Account Posting Date Debit Credit Balance 1/19/2024 0.00 23,775.00 -23,775.00

Health District - 01/19/2024 -Public Health monthly vital stats

3800:Other Increases in Fu transfer

Treasurer's Detail Report For 2024 - Jan

Fund: FD00969 Kitsap Public Health General

Ledger Account	Revenue or Spend Category	Journal	Posting Date	Debit	Credit	Balance
•		Operational Journal: Kitsap Public	1/12/2024	0.00	127,691.32	-127,691.32
		Health District - 01/12/2024				

2315:Employee Benefits Payable

Treasurer's Detail Report For 2024 - Jan

Fund: FD00969 Kitsap Public Health General

Ledger Account	Revenue or Spend Category	Journal	Posting Date	Debit	Credit	Balance
		Operational Journal: Kitsap Public	1/31/2024	0.00	208,265.70	-208,265.70
		Health District - 01/31/2024				

2317:Payroll Tax Payable

Name	Hours	Gross Pay	Employer Paid Taxes	Employer Paid Benefits	Net Pay
Abney (4563) Beverly	237.47	7,525.43			5,752.09
Acosta (278956) Nancy	162.04	9,027.24			5,622.09
Ader (413193) Sam	173.33	6,228.00			4,258.65
Ahlin (434420) Zachary	173.33	5,124.00			3,849.46
Alexander (435070)	64.00	2,435.84			2,215.44
Anderson (419470) Amy Archer (434384) James	173.33 173.33	6,964.00 4,617.00			4,561.82
Armstrong (434291) Jami	173.33	6,097.00			3,527.13 4,297.41
Atisme-Bevins (433909)	117.33	5,691.28			3,590.62
Baker (435044) Katie	173.33	5,508.00			4,203.48
Banigan (215189) Leslie	173.33	7,614.00			5,463.99
Baum (434397) Rudy	173.33	6,282.00			4,630.25
Bazzell (328436) Richard	173.33	7,614.00			5,385.23
Bell (419805) Gus	5.54	251.93			33.85
Berger (407902) Angeline	173.33	6,282.00			4,463.99
Bierman (404611) Dana Borja (426250) Windie	173.33 173.33	9,184.00 6,602.00			6,753.07 4,730.68
Boysen-Knapp (2058)	173.33	7,564.00			5,163.02
Bronder (434436) Christine	173.33	5,124.00			3,921.50
Brown (271677) Steven	173.33	9,643.00			5,798.08
Burchett (409212) Brian	173.33	5,931.00			4,324.06
Burke (434463) Lenore	173.33	4,814.00			3,481.38
Burton (434296) Callie	173.33	4,648.00			3,417.21
Byrd (434085) Stephanie	173.33	4,574.00			3,675.54
Cadorna (434932) Jessi	165.33	3,617.40			2,542.94
Calderon (434768) Brenda Camarena (434536) Daniel	173.33 173.33	4,297.00 5,760.00			3,265.32 3,950.82
Chang (411387) Margo	173.33	5,169.00			3,725.93
Chen (434841) Jessica	173.33	6,596.00			5,128.20
Clark (435043) Cheryl	173.33	6,680.00			5,183.41
Collins (434101) Lori	173.33	7,001.00			4,864.15
Davis (433997) Elizabeth	173.33	8,747.00			6,105.57
Deseamus (434593) Dara	165.51	4,442.33			3,344.61
Dowless (340919) Kelly	173.33	7,636.00			5,295.59
Duren (430735) Ashley	174.08	6,442.74			4,741.11
Evans (4565) Eric Fergus (434648) Maria	173.33 173.33	11,163.00 5,116.00			2,820.77 3,297.42
Fine (421693) George	86.67	2,287.00			1,774.51
Fisk (321284) April	173.33	8,840.00			5,221.25
Fong (356883) Yolanda	173.33	12,903.00			8,400.93
Fuchs (435045) Molly	181.33	4,813.56			3,537.16
Fucini (434997) Heather	173.33	6,228.00			4,999.63
Giuntoli (337331) Paul	173.33	7,614.00			4,712.58
Grellner (1264) Keith	470.00	18,891.95			-
Gress (421427) Nicole Griego (410072) Yaneisy	173.33 156.00	5,055.00 5,215.00			3,770.30 3,934.72
Guidry (355732) Jessica	173.33	10,125.00			7,223.53
Hammond (434978) Gabriel	173.33	6,596.00			4,520.21
Hampton (434838)	173.33	7,636.00			5,554.91
Harmon (434977) William	173.33	7,883.00			6,120.47
Hartman (434642) Melissa	173.33	6,072.00			4,578.84
Holdcroft (270783) Jodie	64.25	2,766.61			2,302.25
Holdcroft (4579) Grant	173.33	9,643.00			5,647.13
Holt (2726) Karen	173.33	10,631.00			7,055.39
Howard (434057) Anne Howarth (434500) Rosalie	138.67 116.00	4,687.00 3,800.28			3,560.70 2,965.18
Hughes (434256) Jakob	173.33	5,931.00			4,404.04
Hunter (409213) Kari	173.33	9,643.00			6,232.38
Inga Dominguez (434769)	173.33	4,878.00			3,670.17
Inouye (434255) Wendy	173.33	8,840.00			6,068.52
Jenkins (434053) Andrea	172.24	4,785.73			3,607.43
Johanson (400651) Krista	173.33	5,277.00			3,948.18
Jones (358933) Kimberly	173.33	9,643.00			6,578.76
Jury (434709) Thomas Katula (393427) Dayna	173.33 173.33	5,380.00 9,184.00			4,121.65 5,670.04
Katula (393427) Dayna Kench (245476) Donald	173.33	9,184.00 4,481.00			5,670.04 2,657.12
. Short (E 10410) Dollalu	. , 0.00	1,401.00			2,007.12

Name	Hours	Gross Pay	Employer Paid Taxes	Employer Paid Benefits	Net Pay
Kiess (250913) John	173.33	12,321.00			9,204.00
Kindschy (421430) Brandon	173.33	6,539.00			4,583.97
Kinnear (434099) Sarah	173.33	6,015.00			4,627.00
Knoop (16125) Melina	173.33	7,614.00			5,023.51
Krafft (435003) Kaisa	13.00	417.04			380.50
Kruse (243184) Charles	173.33	7,719.00			5,070.67
Kushner (327580) Siri	173.33	11,721.00			7,165.84
Laird (416539) Melissa	173.33	10,631.00			6,678.28
Lawver (434888) Albert	173.33	5,931.00			4,459.39
Lytle (285038) Ross	173.33	7,614.00			5,178.49
Madden (434318) Shannon	173.33	4,814.00			3,520.66
Main (434982) Emily	169.83	7,484.83			5,190.92
May (434674) Martha Mazur (388104) Karina	173.33 173.33	4,694.00 8,995.00			3,257.81 5,950.99
McMillan (434052) Michelle	173.33	5,983.00			4,332.52
Miller (435008) Christopher	173.33	8,510.00			5,621.36
Moen (279971) Anne	173.33	7,614.00			5,254.37
Moontree (406607) Kaela	173.33	6,072.00			4,273.39
Moore (434254) Alexandra	173.33	5,380.00			4,024.51
Morris (312378) Dawn	173.33	7,555.00			5,305.26
Morris (434567) Amanda	173.33	4,814.00			3,781.82
Morrow (433895) Nathan	173.33	17,214.00			8,848.05
Nguyen (295033) Loan	173.33	5,598.00			4,034.68
Nickerson (434837)		436.59			398.35
Nielson (434638) Brian	173.33	6,852.00			5,107.87
North (22459) Edwin	173.33	10,631.00			240.35
O'Brien (433907) Melissa	173.33	5,124.00			4,043.65
Onarheim (426938) Carin	173.33	5,983.00			4,408.83
Outlaw-Spencer (434984)	171.58	6,011.88			4,601.29
Pandino (419118) Linda	173.33	5,077.00			3,838.87
Perales (434396) Sydney	173.33	6,015.00			4,593.20
Perry (306605) Rachel	173.33	4,605.00			3,336.70
Petersen (434695) Kayla Phelps (434295) Tameka	159.58 173.33	4,303.56 6,830.00			3,123.50
Plemmons (433994)	29.00	1,595.32			4,861.12 1,065.47
Rork (404613) <b>I</b> an	173.33	6,906.00			5,043.43
Sample (434976) Brittany	168.58	5,359.57			4,051.09
Shelby (434658) Emmy	156.00	7,068.00			5,458.30
Sherman (434949) Linnea	173.33	4,585.00			3,298.71
Shoriz (434893) Justin	173.33	5,019.00			3,844.56
Shuhler (425553) Yana	173.33	4,553.00			3,319.27
Simmons (434365) Nolan	173.33	5,649.00			4,274.90
Smith (361388) Terri	173.33	8,910.00			6,209.46
Snow (435021) Kelly	125.33	3,934.60			2,876.92
Sooter (427776) Thaddeus	173.33	9,643.00			6,894.99
Stedman (347366) Kelsey	173.33	9,643.00			6,226.09
Stewart (423168) Tobbi	173.33	6,228.00			4,368.49
Tiemeyer (433908)	173.33	8,120.00			5,657.91
Turner (1682) Denise	173.33	5,598.00			3,458.40
Van Ort (392243) Susan	173.33	7,614.00			5,255.61
Wagner (426251) Mary Warren (434273) Lisa	121.34 114.99	3,364.00 5,181.79			2,420.88 2,954.52
Wellborn (14545) Brian	192.58	5,086.00			3,406.29
Wendt (397255) Jan	173.33	7,733.00			5,719.76
Westervelt (434382) Laura	173.33	6,539.00			4,707.74
White (434641) Erica	173.33	6,316.00			4,924.39
Whitford (434292) Tiffany	173.33	4,574.00			3,371.62
Wickhamshire (434070)	86.67	2,287.00			1,820.11
Wimpenny (434923) Jacob	125.33	5,000.72			3,818.81
Winchester (431493)	173.33	5,380.00			3,922.84
Wyatt (434415) Janet	161.75	7,226.60			4,531.70
	20,441.70	829,975.82	66,428.83	=	557,447.84