

COSHOCTON CITY SCHOOLS

Financial Detail Report

Date	Check #	Receipt #	PO #	Description	Account Code	Received Amount	Expended Amount	Remaining Encumbrance
Forecast Line Number:								
Cash Account: 024-9003 Self Funded - Medical Ins \$741,298.73								
04/05/2023			2301111	Supplies for picnic tables	024-2944-519-9003-0000000-000-00-000			\$ 367.48
04/08/2023	49102		2300246	FY23 Medical Insurance Admin Fees	024-2944-413-9003-0000000-000-00-000		38,149.76	
04/08/2023	49098		2301034	Yoga classes for CCS employees	024-2944-419-9003-0000000-000-00-000		100.00	
04/11/2023	49114		2300441	Employee Assistance Program FY23	024-2944-419-9003-0000000-000-00-000		937.20	
04/21/2023	49197		2300261	FY23 Medical/Drug Insurance Claims	024-2944-413-9003-0000000-000-00-000		194,772.22	
04/21/2023	49198		2300261	FY23 Medical/Drug Insurance Claims	024-2944-413-9003-0000000-000-00-000		24,338.34	
04/21/2023	49193		2300670	Oct. Lifeguard @ CHS-ADDITIONAL FUNDS THROUGH END OF YEAR	024-2944-419-9003-0000000-000-00-000		41.85	
04/26/2023		231160		Board Share Medical/Certified	024-1870-9003-0000000-000	207,898.62		
04/26/2023		231161		Board Share Medical/Classified	024-1870-9003-0000000-000	114,570.69		
04/26/2023		231163		Cert/Clas Health Ins Emp Deduc	024-1870-9003-0000000-000	47,952.09		
04/26/2023	49209		2301034	Yoga classes for CCS employees	024-2944-419-9003-0000000-000-00-000		100.00	
04/28/2023		231180		STAR Ohio Int. - Acct# 76764	024-1410-9003-0000000-000	2,597.04		
04/28/2023	49249		2300261	FY23 Medical/Drug Insurance Claims	024-2944-413-9003-0000000-000-00-000		32,074.72	
04/28/2023	49274		2300261	FY23 Medical/Drug Insurance Claims	024-2944-413-9003-0000000-000-00-000		147,786.16	
04/28/2023	49280		2300261	FY23 Medical/Drug Insurance Claims	024-2944-413-9003-0000000-000-00-000		44,613.81	
Cash Account: 024-9003 Self Funded - Medical Ins \$631,403.11						\$ 373,018.44	\$ 482,914.06	\$ 367.48
Grand Total								
						\$ 373,018.44	\$ 482,914.06	\$ 367.48
						\$ 373,018.44	\$ 482,914.06	\$ 367.48