FY 2019-20 Bank Account and Transparency Accountability Report

Pursuant to Proviso 117.82 of the FY2019-20 Appropriations Act

Agency Name/Number: Account Name: Purpose of Account:					OPS / K050 LIC SAFETY N/A		
Exemption Requested: If exemption is requested, re	THIS COMPOSITE AC	CCC	OUNT IS A			_	
Exemption Approved in Pri	or Year:			Yes	X	No	
Authorized Personnel Check Writing/Withdrawal Name: Title	: Shannon Fields Accounts Payable Supervisor						
Name: Title:	Susan Terry Administrative Assistant						
Reconciliation: Name: Title	Jasmine Douglas Revenue Accountant						
Name: Title:	Nate Lloyd Director of Accounting						
Financial Information							
Beginning Balance at July 1	, 2019:	\$	4,500.00				
Total Deposits FY 2020		\$					
Total Expenditures FY 2020		_\$	1,585.00	-			
Ending Balance at June 30,	2020:	\$	2,915.00				

FY 2019-20 Bank Account and Transparency Accountability Report

Pursuant to Proviso 117.82 of the FY2019-20 Appropriations Act

Agency Name/Number: Account Name:		SCDPS / K050 GENERAL COUNSEL			
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Exemption Reque		Yes	No	X	
If exemption is re-	quested, reason:				
Exemption Appro	ved in Prior Year:	Yes	No	X	
Authorized Person	<u>nnel</u>				
Check Writing/W	ithdrawal:				
Name:	Shannon Fields				
Title	Accounts Payable Supervisor				
Name:	Susan Terry				
Title:	Administrative Assistant				
Reconciliation:					
Name:	Jasmine Douglas				
Title	Revenue Accountant				
Name:	Nate Lloyd				
Title:	Director of Accounting				
Financial Informa	<u>ation</u>				
Beginning Balance	e at July 1, 2019:		300.	00	

Detailed Transactions During FY 2019-2020:

Deposits: (Please list each deposit separately. Add lines as needed.)

Date	Amount	Source

Withdrawals: (Please list each withdrawal separately. Add lines as needed)

Date	Amount	Payee	Description of Goods/Services Purchased

Ending Balance at June 30, 2020:	300.00

FY 2019-20 Bank Account and Transparency Accountability Report Pursuant to Proviso 117.82 of the FY2019-20 Appropriations Act

Agency Name/Nu Account Name:	ımber:	RETURN	SCDPS / K050 CHECK ACCOUNT		
Purpose of Accou	int: CAPTURES RETURNED CH	ECKS SO AS TO ENS	URE THE GENERAL DEPOS	SIT ACCOUNT IS NE	T POSITIVE
Exemption Requ	ested:	Yes	No	X	
If exemption is re	equested, reason:			•	
Exemption Appro	oved in Prior Year:	Yes	No	X	
Authorized Perso	<u>onnel</u>				
Check Writing/W	Vithdrawal:				
Name:	Shannon Fields				
Title	Accounts Payable Supervisor				
Name:	Susan Terry				
Title:	Administrative Assistant				
Reconciliation:					
Name:	Jasmine Douglas				
Title	Revenue Accountant				
Name:	Nate Lloyd				
Title:	Director of Accounting				
Financial Inform	ation				
Beginning Balanc	ce at July 1, 2019:	14		0.00	

<u>Detailed Transactions During FY 2019-2020:</u>

Deposits: (Please list each deposit separately. Add lines as needed.)

Date	Amount	Source
8/21/2019	480.00	DEPOSIT
9/26/2019	3,766.84	DEPOSIT
9/26/2019	100.00	DEPOSIT
10/17/2019	200.00	DEPOSIT
11/20/2019	100.00	DEPOSIT
1/15/2020	225.00	DEPOSIT
1/15/2020	400.00	DEPOSIT
3/13/2020	280.78	DEPOSIT
5/1/2020	700.00	DEPOSIT
5/13/2020	520.00	DEPOSIT- DISPUTED & REVERSED

Withdrawals: (Please list each withdrawal separately. Add lines as needed)

Date	Amount	Payee	Description of Goods/Services Purchased
8/14/2019	480.00	MIXED BAG PRODUCTIONS	STOP PAYMENT
9/10/2019	535.23	DAIRYLAND	REFER TO MAKER
9/11/2019	3,231.61	SAFECO INSURANCE	STOP PAYMENT
9/13/2019	100.00	CEP LOGISTICS LLC	INSUFFICIENT FUNDS
10/3/2019	200.00	GEMCAP TRUCKING	INSUFFICIENT FUNDS
10/31/2019	100.00	IMUST FREIGHT LLC	INSUFFICIENT FUNDS
12/23/2019	225.00	KIMEU BROTHERS LOGISTICS	INSUFFICIENT FUNDS
12/26/2019	400.00	PROGRESSIVE	STOP PAYMENT
2/19/2020	100.00	OAK TREE TRANSPORTATION	INSUFFICIENT FUNDS
2/20/2020	80.78	THE STATE	NOT AUTHORIZED
2/24/2020	100.00	FOREMOST TRUCKING	INSUFFICIENT FUNDS
4/3/2020	700.00	USAA	STOP PAYMENT
4/9/2020	520.00	DALTON GASKIN	INSUFFICIENT FUNDS- WRONG ACCT.
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Ending	Balance	at June	30,	2020:
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