BENSENVILLE
VILLAGE CLERK'S OFFICE

12 South Center Street
Bensenville, IL 60106

Office: 630.350.3404
Fax: 630.350.3438
www.bensenville.il.us

September 15, 2020

Mr. Paul De Michele
17W275 Rodeck Lane
Bensenville, Illinois 60106

Re: September 2, 2020 FOIA Request

Dear Ms. Mares:

I am pleased to help you with your September 2, 2020 Freedom of Information Act ("FOIA"). The Village of Bensenville received your request on September 8, 2020. You requested copies of the items indicated below:

"I am requesting the following: from the Jan. 1 – Dec. 31 2019 Treasurer's Report copies of invoices and/or supporting documents for the following payments: 1) Vanguard Security $5,400. 2) National Life Ins. $17,406. 3) Old Second National Bank $2,476,071. 4) Edward B. Kirby & Associates $5,315. 5) Calzante Construction LLC $3,995."

Your FOIA request is hereby granted in part and denied in part as follows.

Section 7(1)(b) of FOIA provided that "private information" is exempt from disclose. "Private information" is defined in FOIA as, "unique identifiers, including a person's social security number, driver's license number, employee identification number, biometric identifiers, personal finical information, passwords, or other access codes, medical records, home or personal telephone numbers, and personal email addresses. Private information also includes home address and personal license plates, except as otherwise provided by law or when complied without possibility of attribution to any person." 5ILCS 140/2(c-5). Consequently, certain identifiers have been redacted from the records being provided.

Pursuant to Section 9 of the FOIA, 5 ILCS 140/9, I am required to advise you that I, the undersigned Freedom of Information Officer, reviewed and made the foregoing determination to deny a portion of your FOIA Request as indicated. Should you believe that this Response constitutes an improper denial of your request, you may appeal such by filing a request for review within sixty (60) days of the date of this letter with the Public Access Counselor of the Illinois Attorney General's Office, Public Access Bureau, 500 South Second Street, Springfield, Illinois 62706; telephone 1-887-299-FOIA; e-mail: publicaccess@atg.state.il.us. You may also have a right of judicial review of the denial under Section 11 of the FOIA, 5 ILCS 140/11.

The total amount of pages in your FOIA request is 82. A total amount of $4.80 is due upon receipt of the records.

Do not hesitate to contact me if you have any questions or concerns in connection with this response.

Very truly yours,

Corey Williamsen
Freedom of Information Officer
Village of Bensenville

VANGUARD SECURITY CO.
P.O. BOX 46
BENSENVILLE, IL 60106
630-595-5351

INVOICE

Date	Number
06/13/2019	17873

TERMS	UPON WARRANT PAYOUT
ACCOUNT #	1508

VILLAGE OF BENSENVILLE
ACCT'S PAYABLE
VILLAGE HALL
12 S. CENTER ST.
BENSENVILLE, IL 60106

Service Address
VILLAGE OF BENSENVILLE
ACCT'S PAYABLE
VILLAGE HALL
12 S. CENTER ST.
BENSENVILLE, IL 60106

Quan	Item	Description	Price	Tax %	Amount
1	ELEC	ELECTRICAL SERVICE - 1ST SERVICE LOCATED ON WALL OF 111 W. MAIN ST W/ BREAKER PANEL AND OUTLETS FOR VENDORS. 2ND SERVICE LOCATED ON WALL OF 14 N. CENTER FOR LIGHTING AND SOUND FOR STAGE AND ENTERTAINMENT. BOTH SERVICES ARE BILLED TO VILLAGE OF BENSENVILLE. .BOTH SERVICES ARE COMPLETE AND ENERGIZED. SERVICES LOCATED IN VILLAGE OWNED LOT ON NORTHWEST CORNER OF CENTER AND MAIN STREETS.	$5,400.00		$5,400.00

1 - 29 Days	30 Days	60 Days	90 Days		
$0.00	$0.00	$0.00	$0.00	**SUB-TOTAL**	**$5,400.00**
				SALES TAX	**$0.00**
				INVOICE TOTAL	**$5,400.00**

TOTAL DUE **$5,400.00**

Detach Here

VILLAGE OF BENSENVILLE
ACCT'S PAYABLE
VILLAGE HALL
12 S. CENTER ST.
BENSENVILLE, IL 60106

Account Number	**1508**
Invoice Number	**17873**
Amount Due	**$5,400.00**
Amount Paid	

Electronic funds transfer (EFT) option is available. Please call our office for further details.

VANGUARD SECURITY CO.
P.O. BOX 46
BENSENVILLE, IL 60106

Please detach and return this portion with your payment.

1637/1072

#0AKT2

THE CINCINNATI LIFE INSURANCE CO
P. O. BOX 631205
CINCINNATI, OH 45263-1205
(513) 870-2260

VILLAGE OF BENSENVILLE
CONTROL #0AKT2

PREMIUM DUE APRIL 1, 2019

HOME OFFICE USE	POLICY #	EMPLOYEE NAME	INSURED NAME	AMOUNT OF BIWEEKLY DEDUCTION	EMPLOYEE'S TOTAL MONTHLY DEDUCTION	* CODE	TOTAL DUE
7785	[redacted]			35.93	71.86		
8783				40.54	81.08		
3702				5.56 ~~17.09~~			
4119				6.61 ~~19.01~~	~~72.20~~	24.34	
10395				47.98	95.96		
8658				39.96			
6233				28.77	137.46		
7974				36.80	73.60		
3622				16.72	33.44		
3837				17.71			
722				3.33			
670				3.09			
722				3.33	54.92		
6666				30.77			
1445				6.67	74.88		
5891				27.19			
562				2.59			
1445				6.67	72.90		
12316				56.84			
2033				9.38			
7364				33.99	200.42		

VILLAGE OF BENSENVILLE
ATTN: SHARON GUEST/SHARA DRISCOLL
12 SOUTH CENTER ST
BENSENVILLE IL 60106

*
-- IMPORTANT --
PLEASE INDICATE BY CODE NUMBER,
THE REASON FOR ANY UNPAID ITEM.

(1) LEFT OUR EMPLOYMENT (BILL AT HOME)
(2) LEAVE OF ABSENCE (BILL AT HOME)
(3)CANCEL DEDUCTION(BY EMPLOYEE REQUEST)
(4) DECEASED

PLEASE PROVIDE US WITH ANY AVAILABLE ADDRESS CHANGES.

110-214140

#0AKT2

THE CINCINNATI LIFE INSURANCE CO
P. O. BOX 631205
CINCINNATI, OH 45263-1205
(513) 870-2260

VILLAGE OF BENSENVILLE
CONTROL #0AKT2

PREMIUM DUE APRIL 1, 2019

HOME OFFICE USE	POLICY #	EMPLOYEE NAME	INSURED NAME	AMOUNT OF BIWEEKLY DEDUCTION	EMPLOYEE'S TOTAL MONTHLY DEDUCTION	* CODE	TOTAL DUE
2792	[redacted]			12.89	25.78		
2289				10.56	21.12		
8829				40.75	81.50		
1036				4.78			
891				4.11			
844				3.90			
776				3.58	32.74		
5288				24.41	48.82		
7008				32.34			
6800				31.38	127.44		
5925				27.35	54.70		
4458				20.58			
3700				17.08	75.32		
7316				33.77			
2363				10.91			
691				3.19			
722				3.33	102.40		
8180				37.75			
4090				18.88	113.26		
14808				68.34	136.68		

41

TOTAL DUE - ~~1,788.48~~ 1,740.62

```
**********************
* HOME OFFICE USE    *
*                    *
*                    *
* L70RTY-      0.00*
* L70   -      0.00*
*                    *
* SAHRTY-      0.00*
* SAH   -      0.00*
* 4005628269         *
* LPRRTY-  1,937.50*
* LIFEPR-  1,788.48*
**********************
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VILLAGE OF BENSENVILLE
ATTN: SHARON GUEST/SHARA DRISCOLL
12 SOUTH CENTER ST
BENSENVILLE IL 60106

PLEASE MAKE CHECK PAYABLE TO THE CINCINNATI LIFE INSURANCE CO
& ATTACH COPY OF BILL TO REMITTANCE.

*
-- IMPORTANT --
PLEASE INDICATE BY CODE NUMBER,
THE REASON FOR ANY UNPAID ITEM.

(1) LEFT OUR EMPLOYMENT (BILL AT HOME)
(2) LEAVE OF ABSENCE (BILL AT HOME)
(3)CANCEL DEDUCTION(BY EMPLOYEE REQUEST)
(4) DECEASED

PLEASE PROVIDE US WITH ANY AVAILABLE
ADDRESS CHANGES.

#0AKT2

THE CINCINNATI LIFE INSURANCE CO
P. O. BOX 631205
CINCINNATI, OH 45263-1205
(513) 870-2260

VILLAGE OF BENSENVILLE
CONTROL #0AKT2

PREMIUM DUE MAY 1, 2019

HOME OFFICE USE	POLICY #	EMPLOYEE NAME	INSURED NAME	AMOUNT OF BIWEEKLY DEDUCTION	EMPLOYEE'S TOTAL MONTHLY DEDUCTION	* CODE	TOTAL DUE
7785	[redacted]			35.93	71.86		
8783				40.54	81.08		
1204				5.56			
1433				6.61	24.34		
10395				47.98	95.96		
8658				39.96			
6233				28.77	137.46		
7974				36.80	73.60		
3622				16.72	33.44		
3837				17.71			
722				3.33			
670				3.09			
722				3.33	54.92		
6666				30.77			
1445				6.67	74.88		
5891				27.19			
562				2.59			
1445				6.67	72.90		
12316				56.84			
2033				9.38			
7364				33.99	200.42		

VILLAGE OF BENSENVILLE
ATTN: SHARON GUEST/SHARA DRISCOLL
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BENSENVILLE IL 60106

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(4) DECEASED

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#0AKT2

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(513) 870-2260

VILLAGE OF BENSENVILLE
CONTROL #0AKT2

PREMIUM DUE MAY 1, 2019

HOME OFFICE USE	POLICY #	EMPLOYEE NAME	INSURED NAME	AMOUNT OF BIWEEKLY DEDUCTION	EMPLOYEE'S TOTAL MONTHLY DEDUCTION	* CODE	TOTAL DUE
2792	[redacted]	[redacted]	[redacted]	12.89	25.78		
2289	[redacted]	[redacted]	[redacted]	10.56	21.12		
8829	[redacted]	[redacted]	[redacted]	40.75	81.50		
1036	[redacted]	[redacted]	[redacted]	4.78			
891	[redacted]	[redacted]	[redacted]	4.11			
844	[redacted]	[redacted]	[redacted]	3.90			
776	[redacted]	[redacted]	[redacted]	3.58	32.74		
5288	[redacted]	[redacted]	[redacted]	24.41	48.82		
7008	[redacted]	[redacted]	[redacted]	32.34			
6800	[redacted]	[redacted]	[redacted]	31.38	127.44		
5925	[redacted]	[redacted]	[redacted]	27.35	54.70		
4458	[redacted]	[redacted]	[redacted]	20.58			
3700	[redacted]	[redacted]	[redacted]	17.08	75.32		
7316	[redacted]	[redacted]	[redacted]	33.77			
2363	[redacted]	[redacted]	[redacted]	10.91			
691	[redacted]	[redacted]	[redacted]	3.19			
722	[redacted]	[redacted]	[redacted]	3.33	102.40		
8180	[redacted]	[redacted]	[redacted]	37.75			
4090	[redacted]	[redacted]	[redacted]	18.88	113.26		
14808	[redacted]	[redacted]	[redacted]	68.34	136.68		
	41						

TOTAL DUE - 1,740.62

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**********************
*  HOME OFFICE USE   *
*                    *
*                    *
* L70RTY-       0.00*
* L70   -       0.00*
*                    *
* SAHRTY-       0.00*
* SAH   -       0.00*
* 4005694286         *
* LPRRTY-   1,885.66*
* LIFEPR-   1,740.62*
**********************
```

VILLAGE OF BENSENVILLE
ATTN: SHARON GUEST/SHARA DRISCOLL
12 SOUTH CENTER ST
BENSENVILLE IL 60106

PLEASE MAKE CHECK PAYABLE TO THE CINCINNATI LIFE INSURANCE CO
& ATTACH COPY OF BILL TO REMITTANCE.

*
-- IMPORTANT --
PLEASE INDICATE BY CODE NUMBER,
THE REASON FOR ANY UNPAID ITEM.

(1) LEFT OUR EMPLOYMENT (BILL AT HOME)
(2) LEAVE OF ABSENCE (BILL AT HOME)
(3)CANCEL DEDUCTION(BY EMPLOYEE REQUEST)
(4) DECEASED

PLEASE PROVIDE US WITH ANY AVAILABLE
ADDRESS CHANGES.

#0AKT2

THE CINCINNATI LIFE INSURANCE CO
P. O. BOX 631205
CINCINNATI, OH 45263-1205
(513) 870-2260

VILLAGE OF BENSENVILLE
CONTROL #0AKT2

PREMIUM DUE JUNE 1, 2019

HOME OFFICE USE	POLICY #	EMPLOYEE NAME	INSURED NAME	AMOUNT OF BIWEEKLY DEDUCTION	EMPLOYEE'S TOTAL MONTHLY DEDUCTION	* CODE	TOTAL DUE
2792	[redacted]			12.89	38.67		
2289				10.56	31.68		
8829				40.75	122.25		
1036				4.78			
891				4.11			
844				3.90			
776				3.58	49.11		
5288				24.41	73.23		
7008				32.34			
6800				31.38	191.16		
5925				27.35	82.05		
4458				20.58			
3700				17.08	112.98		
7316				33.77			
2363				10.91			
691				3.19			
722				3.33	153.60		
8180				37.75			
4090				18.88	169.89		
14808				68.34	205.02		
	41				TOTAL DUE -		2,610.93

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**********************
* HOME OFFICE USE    *
*                    *
*                    *
* L70RTY-      0.00*
* L70   -      0.00*
*                    *
* SAHRTY-      0.00*
* SAH   -      0.00*
* 4005756343         *
* LPRRTY-  1,885.66*
* LIFEPR-  2,610.93*
**********************
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VILLAGE OF BENSENVILLE
ATTN: SHARON GUEST/SHARA DRISCOLL
12 SOUTH CENTER ST
BENSENVILLE IL 60106

PLEASE MAKE CHECK PAYABLE TO THE CINCINNATI LIFE INSURANCE CO
& ATTACH COPY OF BILL TO REMITTANCE.

*
-- IMPORTANT --
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(1) LEFT OUR EMPLOYMENT (BILL AT HOME)
(2) LEAVE OF ABSENCE (BILL AT HOME)
(3)CANCEL DEDUCTION(BY EMPLOYEE REQUEST)
(4) DECEASED

PLEASE PROVIDE US WITH ANY AVAILABLE ADDRESS CHANGES.

#0AKT2

THE CINCINNATI LIFE INSURANCE CO
P. O. BOX 631205
CINCINNATI, OH 45263-1205
(513) 870-2260

VILLAGE OF BENSENVILLE
CONTROL #0AKT2

PREMIUM DUE JUNE 1, 2019

HOME OFFICE USE	POLICY # / EMPLOYEE NAME / INSURED NAME	AMOUNT OF BIWEEKLY DEDUCTION	EMPLOYEE'S TOTAL MONTHLY DEDUCTION	* CODE	TOTAL DUE
7785	[redacted]	35.93	107.79		
8783		40.54	121.62		
1204		5.56			
1433		6.61	36.51		
10395		47.98	143.94		
8658		39.96			
6233		28.77	206.19		
7974		36.80	110.40		
3622		16.72	50.16		
3837		17.71			
722		3.33			
670		3.09			
722		3.33	82.38		
6666		30.77			
1445		6.67	112.32		
5891		27.19			
562		2.59			
1445		6.67	109.35		
12316		56.84			
2033		9.38			
7364		33.99	300.63		

VILLAGE OF BENSENVILLE
ATTN: SHARON GUEST/SHARA DRISCOLL
12 SOUTH CENTER ST
BENSENVILLE IL 60106

*
-- IMPORTANT --
PLEASE INDICATE BY CODE NUMBER,
THE REASON FOR ANY UNPAID ITEM.

(1) LEFT OUR EMPLOYMENT (BILL AT HOME)
(2) LEAVE OF ABSENCE (BILL AT HOME)
(3)CANCEL DEDUCTION(BY EMPLOYEE REQUEST)
(4) DECEASED

PLEASE PROVIDE US WITH ANY AVAILABLE
ADDRESS CHANGES.

req20192445

#0AKT2

THE CINCINNATI LIFE INSURANCE CO
P. O. BOX 631205
CINCINNATI, OH 45263-1205
(513) 870-2260

VILLAGE OF BENSENVILLE
CONTROL #0AKT2

PREMIUM DUE JULY 1, 2019

HOME OFFICE USE	POLICY #	EMPLOYEE NAME	INSURED NAME	AMOUNT OF BIWEEKLY DEDUCTION	EMPLOYEE'S TOTAL MONTHLY DEDUCTION	* CODE	TOTAL DUE
7785	[redacted]			35.93	71.86		
8783				40.54	81.08		
1204				5.56			
1433				6.61	24.34		
10395				47.98	95.96		
8658				39.96			
6233				28.77	137.46		
7974				36.80	73.60		
3622				16.72	33.44		
3837				17.71			
722				3.33			
670				3.09			
722				-3.33	54.92		
6666				30.77			
1445				6.67	74.88		
5891				27.19			
562				2.59			
1445				6.67	72.90		
12316				56.84			
2033				9.38			
7364				33.99	200.42		

VILLAGE OF BENSENVILLE
ATTN: SHARON GUEST/SHARA DRISCOLL
12 SOUTH CENTER ST
BENSENVILLE IL 60106

*
-- IMPORTANT --
PLEASE INDICATE BY CODE NUMBER, THE REASON FOR ANY UNPAID ITEM.

(1) LEFT OUR EMPLOYMENT (BILL AT HOME)
(2) LEAVE OF ABSENCE (BILL AT HOME)
(3) CANCEL DEDUCTION(BY EMPLOYEE REQUEST)
(4) DECEASED

PLEASE PROVIDE US WITH ANY AVAILABLE ADDRESS CHANGES.

#0AKT2

THE CINCINNATI LIFE INSURANCE CO
P. O. BOX 631205
CINCINNATI, OH 45263-1205
(513) 870-2260

VILLAGE OF BENSENVILLE
CONTROL #0AKT2

PREMIUM DUE JULY 1, 2019

HOME OFFICE USE	POLICY #	EMPLOYEE NAME	INSURED NAME	AMOUNT OF BIWEEKLY DEDUCTION	EMPLOYEE'S TOTAL MONTHLY DEDUCTION	* CODE	TOTAL DUE
2792	[redacted]			12.89	25.78		
2289				10.56	21.12		
8829				40.75	81.50		
1036				4.78			
891				4.11			
844				3.90			
776				3.58	32.74		
5288				24.41	48.82		
7008				32.34			
6800				31.38	127.44		
5925				27.35	54.70		
4458				20.58			
3700				17.08	75.32		
7316				33.77			
2363				10.91			
691				3.19			
722				3.33	102.40		
8180				37.75			
4090				18.88	113.26		
14808				68.34	136.68		
	41				TOTAL DUE -		1,740.62

```
**********************
*  HOME OFFICE USE   *
*                    *
*                    *
* L70RTY-       0.00*
* L70   -       0.00*
*                    *
* SAHRTY-       0.00*
* SAH   -       0.00*
* 4005820502         *
* LPRRTY-   1,885.66*
* LIFEPR-   1,740.62*
**********************
```

VILLAGE OF BENSENVILLE
ATTN: SHARON GUEST/SHARA DRISCOLL
12 SOUTH CENTER ST
BENSENVILLE IL 60106

PLEASE MAKE CHECK PAYABLE TO THE CINCINNATI LIFE INSURANCE CO
& ATTACH COPY OF BILL TO REMITTANCE.

*
-- IMPORTANT --
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(1) LEFT OUR EMPLOYMENT (BILL AT HOME)
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(4) DECEASED

PLEASE PROVIDE US WITH ANY AVAILABLE
ADDRESS CHANGES.

#0AKT2

VILLAGE OF BENSENVILLE
CONTROL #0AKT2

THE CINCINNATI LIFE INSURANCE CO
P. O. BOX 631205
CINCINNATI, OH 45263-1205
(513) 870-2260

PREMIUM DUE AUGUST 1, 2019

HOME OFFICE USE	POLICY #	EMPLOYEE NAME	INSURED NAME	AMOUNT OF BIWEEKLY DEDUCTION	EMPLOYEE'S TOTAL MONTHLY DEDUCTION	* CODE	TOTAL DUE
7785	[redacted]			35.93	71.86		
8783				40.54	81.08		
1204				5.56			
1433				6.61	24.34		
10395				47.98	95.96		
8658				39.96			
6233				28.77	137.46		
7974				36.80	73.60		
3622				16.72	33.44		
3837				17.71			
722				3.33			
670				3.09			
722				3.33	54.92		
6666				30.77			
1445				6.67	74.88		
5891				27.19			
562				2.59			
1445				6.67	72.90		
12316				56.84			
2033				9.38			
7364				33.99	200.42		

VILLAGE OF BENSENVILLE
ATTN: SHARON GUEST/SHARA DRISCOLL
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#0AKT2

THE CINCINNATI LIFE INSURANCE CO
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VILLAGE OF BENSENVILLE
CONTROL #0AKT2

PREMIUM DUE AUGUST 1, 2019

HOME OFFICE USE	POLICY #	EMPLOYEE NAME	INSURED NAME	AMOUNT OF BIWEEKLY DEDUCTION	EMPLOYEE'S TOTAL MONTHLY DEDUCTION	* CODE	TOTAL DUE
2792	[redacted]			12.89	25.78		
2289	[redacted]			10.56	21.12		
8829	[redacted]			40.75	81.50		
1036	[redacted]			4.78			
891	[redacted]			4.11			
844	[redacted]			3.90			
776	[redacted]			3.58	32.74		
5288	[redacted]			24.41	48.82		
7008	[redacted]			32.34			
6800	[redacted]			31.38	127.44		
5925	[redacted]			27.35	54.70		
4458	[redacted]			20.58			
3700	[redacted]			17.08	75.32		
7316	[redacted]			33.77			
2363	[redacted]			10.91			
691	[redacted]			3.19			
722	[redacted]			3.33	102.40		
8180	[redacted]			37.75			
4090	[redacted]			18.88	113.26		
14808	[redacted]			68.34	136.68		
	41				TOTAL DUE -		1,740.62

****
* HOME OFFICE USE *
* *
* *
* L70RTY- 0.00*
* L70 - 0.00*
* *
* SAHRTY- 0.00*
* SAH - 0.00*
* 4005881386 *
* LPRRTY- 1,885.66*
* LIFEPR- 1,740.62*
****

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(4) DECEASED

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ADDRESS CHANGES.

V# 1637 11000000-214140
req 20193350

#0AKT2

VILLAGE OF BENSENVILLE
CONTROL #0AKT2

THE CINCINNATI LIFE INSURANCE CO
P. O. BOX 631205
CINCINNATI, OH 45263-1205
(513) 870-2260

PREMIUM DUE SEPTEMBER 1, 2019

HOME OFFICE USE	POLICY # EMPLOYEE NAME INSURED NAME	AMOUNT OF BIWEEKLY DEDUCTION	EMPLOYEE'S TOTAL MONTHLY DEDUCTION	* CODE	TOTAL DUE
7785	[redacted]	35.93	71.86		
8783		40.54	81.08		
1204		5.56			
1433		6.61	24.34		
10395		47.98	95.96		
8658		39.96			
6233		28.77	137.46		
7974		36.80	73.60		
3622		16.72	33.44		
3837		17.71			
722		3.33			
670		3.09			
722		3.33	54.92		
6666		30.77			
1445		6.67	74.88		
5891		27.19			
562		2.59			
1445		6.67	72.90		
12316		56.84			
2033		9.38			
7364		33.99	200.42		

THE PREVIOUS BILLING PAYMENT
HAS NOT BEEN RECEIVED.

PREMIUM ACCOUNTING DEPARTMENT

August

VILLAGE OF BENSENVILLE
ATTN: SHARON GUEST/SHARA DRISCOLL
12 SOUTH CENTER ST
BENSENVILLE IL 60106

*
-- IMPORTANT --
PLEASE INDICATE BY CODE NUMBER,
THE REASON FOR ANY UNPAID ITEM.

(1) LEFT OUR EMPLOYMENT (BILL AT HOME)
(2) LEAVE OF ABSENCE (BILL AT HOME)
(3) CANCEL DEDUCTION(BY EMPLOYEE REQUEST)
(4) DECEASED

PLEASE PROVIDE US WITH ANY AVAILABLE
ADDRESS CHANGES.

#0AKT2

THE CINCINNATI LIFE INSURANCE CO
P. O. BOX 631205
CINCINNATI, OH 45263-1205
(513) 870-2260

VILLAGE OF BENSENVILLE
CONTROL #0AKT2

PREMIUM DUE SEPTEMBER 1, 2019

HOME OFFICE USE	POLICY #	EMPLOYEE NAME	INSURED NAME	AMOUNT OF BIWEEKLY DEDUCTION	EMPLOYEE'S TOTAL MONTHLY DEDUCTION	* CODE	TOTAL DUE
2792	[redacted]			12.89	25.78		
2289				10.56	21.12		
8829				40.75	81.50		
1036				4.78			
891				4.11			
844				3.90			
776				3.58	32.74		
5288				24.41	48.82		
7008				32.34			
6800				31.38	127.44		
5925				27.35	54.70		
4458				20.58			
3700				17.08	75.32		
7316				33.77			
2363				10.91			
691				3.19			
722				3.33	102.40		
8180				37.75			
4090				18.88	113.26		
14808				68.34	136.68		
	41				TOTAL DUE -		1,740.62

****
* HOME OFFICE USE *
* *
* *
* L70RTY- 0.00*
* L70 - 0.00*
* *
* SAHRTY- 0.00*
* SAH - 0.00*
* 4005943831 *
* LPRRTY- 1,885.66*
* LIFEPR- 1,740.62*
****

VILLAGE OF BENSENVILLE
ATTN: SHARON GUEST/SHARA DRISCOLL
12 SOUTH CENTER ST
BENSENVILLE IL 60106

PLEASE MAKE CHECK PAYABLE TO THE CINCINNATI LIFE INSURANCE CO
& ATTACH COPY OF BILL TO REMITTANCE.

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(3)CANCEL DEDUCTION(BY EMPLOYEE REQUEST)
(4) DECEASED

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V# 1637
11000000-214140
req 20193543

#0AKT2

THE CINCINNATI LIFE INSURANCE CO
P. O. BOX 631205
CINCINNATI, OH 45263-1205
(513) 870-2260

VILLAGE OF BENSENVILLE
CONTROL #0AKT2

PREMIUM DUE OCTOBER 1, 2019

HOME OFFICE USE	POLICY #	EMPLOYEE NAME	INSURED NAME	AMOUNT OF BIWEEKLY DEDUCTION	EMPLOYEE'S TOTAL MONTHLY DEDUCTION	* CODE	TOTAL DUE
7785	[redacted]			35.93	71.86		
8783				40.54	81.08		
1204				5.56			
1433				6.61	24.34		
10395				47.98	95.96		
8658				39.96			
6233				28.77	137.46		
7974				36.80	73.60		
3622				16.72	33.44		
3837				17.71			
722				3.33			
670				3.09			
722				3.33	54.92		
6666				30.77			
1445				6.67	74.88		
5891				27.19			
562				2.59			
1445				6.67	72.90		
12316				56.84			
2033				9.38			
7364				33.99	200.42		

VILLAGE OF BENSENVILLE
ATTN: SHARON GUEST/SHARA DRISCOLL
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BENSENVILLE IL 60106

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VILLAGE OF BENSENVILLE
CONTROL #0AKT2

PREMIUM DUE OCTOBER 1, 2019

HOME OFFICE USE	POLICY #	EMPLOYEE NAME	INSURED NAME	AMOUNT OF BIWEEKLY DEDUCTION	EMPLOYEE'S TOTAL MONTHLY DEDUCTION	* CODE	TOTAL DUE
2792	[redacted]			12.89	25.78		
2289				10.56	21.12		
8829				40.75	81.50		
1036				4.78			
891				4.11			
844				3.90			
776				3.58	32.74		
5288				24.41	48.82		
7008				32.34			
6800				31.38	127.44		
5925				27.35	54.70		
4458				20.58			
3700				17.08	75.32		
7316				33.77			
2363				10.91			
691				3.19			
722				3.33	102.40		
8180				37.75			
4090				18.88	113.26		
14808				68.34	136.68		
	41				TOTAL DUE -		1,740.62

```
**********************
*  HOME OFFICE USE   *
*                    *
*                    *
* L70RTY-      0.00*
* L70   -      0.00*
*                    *
* SAHRTY-      0.00*
* SAH   -      0.00*
* 4006007489         *
* LPRRTY-   1,885.66*
* LIFEPR-   1,740.62*
**********************
```

VILLAGE OF BENSENVILLE
ATTN: SHARON GUEST/SHARA DRISCOLL
12 SOUTH CENTER ST
BENSENVILLE IL 60106

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3A71

#0AKT2

VILLAGE OF BENSENVILLE
CONTROL #0AKT2

THE CINCINNATI LIFE INSURANCE CO
P. O. BOX 631205
CINCINNATI, OH 45263-1205
(513) 870-2260

PREMIUM DUE NOVEMBER 1, 2019

HOME OFFICE USE	POLICY #	EMPLOYEE NAME	INSURED NAME	AMOUNT OF BIWEEKLY DEDUCTION	EMPLOYEE'S TOTAL MONTHLY DEDUCTION	* CODE	TOTAL DUE
7785	[redacted]			35.93	71.86		
8783				40.54	81.08		
1204				5.56			
1433				6.61	24.34		
10395				47.98	95.96		
8658				39.96			
6233				28.77	137.46		
7974				36.80	73.60		
3622				16.72	33.44		
3837				17.71			
722				3.33			
670				3.09			
722				3.33	54.92		
6666				30.77			
1445				6.67	74.88		
5891				27.19			
562				2.59			
1445				6.67	72.90		
12316				56.84			
2033				9.38			
7364				33.99	208.42		

VILLAGE OF BENSENVILLE
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VILLAGE OF BENSENVILLE
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PREMIUM DUE NOVEMBER 1, 2019

HOME OFFICE USE	POLICY #	EMPLOYEE NAME	INSURED NAME	AMOUNT OF BIWEEKLY DEDUCTION	EMPLOYEE'S TOTAL MONTHLY DEDUCTION	* CODE	TOTAL DUE
2792	[redacted]			12.89	25.78		
2289				10.56	21.12		
8829				40.75	81.50		
1036				4.78			
891				4.11			
844				3.90			
776				3.58	32.74		
5288				24.41	48.82		
7008				32.34			
6800				31.38	127.44		
5925				27.35	54.70		
4458				20.58			
3700				17.08	75.32		
7316				33.77			
2363				10.91			
691				3.19			
722				3.33	102.40		
8180				37.75			
4090				18.88	113.26		
14808				68.34	136.68		
	41				TOTAL DUE -		1,740.62

```
**********************
*  HOME OFFICE USE   *
*                    *
*                    *
* L70RTY-      0.00*
* L70   -      0.00*
*                    *
* SAHRTY-      0.00*
* SAH   -      0.00*
* 4006090063         *
* LPRRTY-  1,885.66*
* LIFEPR-  1,740.62*
**********************
```

VILLAGE OF BENSENVILLE
ATTN: SHARON GUEST/SHARA DRISCOLL
12 SOUTH CENTER ST
BENSENVILLE IL 60106

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(4) DECEASED

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4378

#0AKT2

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P. O. BOX 631205
CINCINNATI, OH 45263-1205
(513) 870-2260

VILLAGE OF BENSENVILLE
CONTROL #0AKT2

PREMIUM DUE DECEMBER 1, 2019

HOME OFFICE USE	POLICY #	EMPLOYEE NAME	INSURED NAME	AMOUNT OF BIWEEKLY DEDUCTION	EMPLOYEE'S TOTAL MONTHLY DEDUCTION	* CODE	TOTAL DUE
7785	[redacted]			35.93	107.79		
8783				40.54	121.62		
1204				5.56			
1433				6.61	36.51		
10395				47.98	143.94		
8658				39.96			
6233				28.77	206.19		
7974				36.80	110.40		
3622				16.72	50.16		
3837				17.71			
722				3.33			
670				3.09			
722				3.33	82.38		
6666				30.77			
1445				6.67	112.32		
5891				27.19			
562				2.59			
1445				6.67	109.35		
12316				56.84			
2033				9.38			
7364				33.99	300.63		

VILLAGE OF BENSENVILLE
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BENSENVILLE IL 60106

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VILLAGE OF BENSENVILLE
CONTROL #0AKT2

PREMIUM DUE DECEMBER 1, 2019

HOME OFFICE USE	POLICY # / EMPLOYEE NAME / INSURED NAME	AMOUNT OF BIWEEKLY DEDUCTION	EMPLOYEE'S TOTAL MONTHLY DEDUCTION	* CODE	TOTAL DUE
2792	[redacted]	12.89	38.67		
2289		10.56	31.68		
8829		40.75	122.25		
1036		4.78			
891		4.11			
844		3.90			
776		3.58	49.11		
5288		24.41	73.23		
7008		32.34			
6800		31.38	191.16		
5925		27.35	82.05		
4458		20.58			
3700		17.08	112.98		
7316		33.77			
2363		10.91			
691		3.19			
722		3.33	153.60		
8180		37.75			
4090		18.88	169.89		
14808		68.34	205.02		
	41		TOTAL DUE -		2,610.93

```
**********************
*  HOME OFFICE USE   *
*                    *
*                    *
* L70RTY-       0.00*
* L70   -       0.00*
*                    *
* SAHRTY-       0.00*
* SAH   -       0.00*
* 4006131309         *
* LPRRTY-   1,885.66*
* LIFEPR-   2,610.93*
**********************
```

VILLAGE OF BENSENVILLE
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BENSENVILLE IL 60106

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VILLAGE OF BENSENVILLE

PAYLOCITY BANK DEBIT

BENSENVILLE
GATEWAY TO OPPORTUNITY

HAND TYPE CHECK?

CHECK #	
WIRE TRANSFER #	
WARRANT DATE:	

147

DATE REQUESTED:	1/10/2019
REQUESTED BY:	Sharon Guest
DEPT. HEAD APPR.:	

VOUCHER BY:	
ENTERED BY:	
Bank Debit Date	1/11/2019

FINANCE DEPT. APPR.	
VILLAGE MANAGER APPR.	
HR DIRECTOR APPR.	

VENDOR NO.: 1338 **VENDOR NAME:** Austin Bank of Chicago
P.O. NUMBER: **ADDRESS:** Village of Bensenville
INVOICE NO.: Federal Withholding Tax Account

Bank Code:

ORG Code	Object			PROJECT CODE	DESCRIPTION	AMOUNT
11000000	212010				Federal W/H	39,444.33
11000000	212020				Social Security W/H	25,571.84
11000000	212030				Medicare W/H	10,408.61

SUPPORTING DOCUMENTATION OF ALL AMOUNTS IS REQUIRED

TOTAL $ 75,424.78

DESCRIPTION:

EXPLANATION FOR LACK OF P.O. : Federal W/H Tax Payment For P/R Period: 1/11/2019

AP USE ONLY	
BATCH #	

Payroll Totals

Payroll Checks		Check Type	Count	Net Check	Dir Dep Amount	Net Amount	
		Regular	145	0.00	222,062.05	222,062.05	
		Regular	33	22,507.49	3,325.00	25,832.49	
	Totals		**178**	**22,507.49**	**225,387.05**	**247,894.54** →	**247,894.54**

Payroll Checks	Check Type	Agency Type	Count	Net Check	Dir Dep Amount	Net Amount	
	Agency	Regular	4	2,451.11	0.00	2,451.11	
	Totals		**4**	**2,451.11**	**0.00**	**2,451.11** →	**2,451.11**
	Total Net Payroll Liability			**24,958.60**	**225,387.05**	**250,345.65** →	**250,345.65**

Tax Liability

FITW and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount	
Federal Income Tax	36-6005794		Semi-Weekly	327,063.88	327,063.88	39,444.33		
Medicare	36-6005794		Semi-Weekly	358,917.52	358,917.52	5,204.31		
Medicare - Employer	36-6005794		Semi-Weekly	358,917.52	358,917.52		5,204.30	
OASDI	36-6005794		Semi-Weekly	206,224.65	206,224.65	12,785.91		
OASDI - Employer	36-6005794		Semi-Weekly	206,224.65	206,224.65		12,785.93	
Totals						**57,434.55**	**17,990.23** →	**75,424.78**

IL and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount	
Illinois SITW	3660057940008		Semi-Weekly	323,144.42	323,144.42	15,706.75		
Totals						**15,706.75**	**0.00** →	**15,706.75**

ILSUI and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount	
Illinois SUI	0800928		Quarterly	363,390.72	363,390.72			
Totals						**0.00**	**0.00** →	**0.00**

WI and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount	
Wisconsin SITW	036-1026511657-02		Semi-Monthly	4,110.62	4,110.62	245.56		
Totals						**245.56**	**0.00** →	**245.56**

Total Tax Liability	**73,386.86**	**17,990.23** →	**91,377.09**
Total Payroll Liability		**341,722.74** →	**341,722.74**

VILLAGE OF BENSENVILLE

PAYLOCITY BANK DEBIT

BENSENVILLE
GATEWAY TO OPPORTUNITY

HAND TYPE CHECK?

205

CHECK #	
WIRE TRANSFER #	
WARRANT DATE:	

DATE REQUESTED:	1/15/2019
REQUESTED BY:	Sharon Guest
DEPT. HEAD APPR.:	

VOUCHER BY:	
ENTERED BY:	
Bank Debit Date	1/16/2019

FINANCE DEPT. APPR.	
VILLAGE MANAGER APPR.	
HR DIRECTOR APPR.	

VENDOR NO.: 1338 **VENDOR NAME:** Austin Bank of Chicago
P.O. NUMBER: **ADDRESS:** Village of Bensenville
INVOICE NO.: Federal Withholding Tax Account

Bank Code:

ORG Code	Object			PROJECT CODE	DESCRIPTION	AMOUNT
11000000	212010				Federal W/H	227.48
11000000	212020				Social Security W/H	-
11000000	212030				Medicare W/H	121.80

SUPPORTING DOCUMENTATION OF ALL AMOUNTS IS REQUIRED

TOTAL $ **349.28**

DESCRIPTION:

EXPLANATION FOR LACK OF P.O. : Federal W/H Tax Payment For P/R Period: 1/16/2019

AP USE ONLY	
BATCH #	

Payroll Totals

Payroll Checks	Check Type	Count	Net Check	Dir Dep Amount	Net Amount	
	Regular	6	0.00	3,819.83	3,819.83	
	Regular	1	566.20	0.00	566.20	
Totals		**7**	**566.20**	**3,819.83**	**4,386.03** →	**4,386.03**
Total Net Payroll Liability			**566.20**	**3,819.83**	**4,386.03** →	**4,386.03**

Tax Liability

FITW and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount	
Federal Income Tax	36-6005794		Semi-Weekly	4,900.00	4,900.00	227.48		
Medicare	36-6005794		Semi-Weekly	4,200.00	4,200.00	60.90		
Medicare - Employer	36-6005794		Semi-Weekly	4,200.00	4,200.00		60.90	
Totals						**288.38**	**60.90** →	**349.28**

IL and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount	
Illinois SITW	3660057940008		Semi-Weekly	4,900.00	4,900.00	225.59		
Totals						**225.59**	**0.00** →	**225.59**

ILSUI and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount	
Illinois SUI	0800928		Quarterly	4,900.00	4,900.00			
Totals						**0.00**	**0.00** →	**0.00**

Total Tax Liability	**513.97**	**60.90** →	**574.87**
Total Payroll Liability		**4,960.90** →	**4,960.90**

Billing

Invoice	Date	Gross	Discount	Tax	Adjustment	Amount	
104696225	1/16/2019	705.71				705.71	
Totals		**705.71**		**0.00**		**705.71** →	**705.71**

Transfers

Type	Date	Source Account	Amount	
Billing	1/16/2019	300700213*	705.71	
Dir Dep	1/15/2019	300700213*	3,819.83	
Tax	1/15/2019	300700213*	574.87	
Trust	1/15/2019	300700213*	566.20	
Totals Transfers			**5,666.61** →	**5,666.61**

VILLAGE OF BENSENVILLE

PAYLOCITY BANK DEBIT

BENSENVILLE
GATEWAY TO OPPORTUNITY

HAND TYPE CHECK?

205

CHECK #	
WIRE TRANSFER #	
WARRANT DATE:	

DATE REQUESTED:	1/15/2019
REQUESTED BY:	Sharon Guest
DEPT. HEAD APPR.:	

VOUCHER BY:	
ENTERED BY:	
Bank Debit Date	1/16/2019

FINANCE DEPT. APPR.	
VILLAGE MANAGER APPR.	
HR DIRECTOR APPR.	

VENDOR NO.: 1338 **VENDOR NAME:** Austin Bank of Chicago
P.O. NUMBER: **ADDRESS:** Village of Bensenville
INVOICE NO.: Federal Withholding Tax Account

Bank Code:

ORG Code	Object			PROJECT CODE	DESCRIPTION	AMOUNT
11000000	212010				Federal W/H	227.48
11000000	212020				Social Security W/H	-
11000000	212030				Medicare W/H	121.80

SUPPORTING DOCUMENTATION OF ALL AMOUNTS IS REQUIRED

TOTAL $ 349.28

DESCRIPTION:

EXPLANATION FOR LACK OF P.O. : Federal W/H Tax Payment For P/R Period: 1/16/2019

AP USE ONLY	
BATCH #	

Payroll Summary

Village Of Bensenville (B9156)

Check Date: 01/16/2019
Process: 2019011601
Pay Period: 01/16/2019 to 01/16/2019

Payroll Totals

Payroll Checks	Check Type	Count	Net Check	Dir Dep Amount	Net Amount	
	Regular	6	0.00	3,819.83	3,819.83	
	Regular	1	566.20	0.00	566.20	
Totals		**7**	**566.20**	**3,819.83**	**4,386.03** →	**4,386.03**
Total Net Payroll Liability			**566.20**	**3,819.83**	**4,386.03** →	**4,386.03**

Tax Liability

FITW and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount	
Federal Income Tax	36-6005794		Semi-Weekly	4,900.00	4,900.00	227.48		
Medicare	36-6005794		Semi-Weekly	4,200.00	4,200.00	60.90		
Medicare - Employer	36-6005794		Semi-Weekly	4,200.00	4,200.00		60.90	
Totals						**288.38**	**60.90** →	**349.28**

IL and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount	
Illinois SITW	3660057940008		Semi-Weekly	4,900.00	4,900.00	225.59		
Totals						**225.59**	**0.00** →	**225.59**

ILSUI and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount	
Illinois SUI	0800928		Quarterly	4,900.00	4,900.00			
Totals						**0.00**	**0.00** →	**0.00**

	EE Amount	ER Amount	
Total Tax Liability	**513.97**	**60.90** →	**574.87**
Total Payroll Liability		**4,960.90** →	**4,960.90**

Billing

Invoice	Date	Gross	Discount	Tax	Adjustment	Amount	
104696225	1/16/2019	705.71				705.71	
Totals		**705.71**		**0.00**		**705.71** →	**705.71**

Transfers

Type	Date	Source Account	Amount	
Billing	1/16/2019	300700213*	705.71	
Dir Dep	1/15/2019	300700213*	3,819.83	
Tax	1/15/2019	300700213*	574.87	
Trust	1/15/2019	300700213*	566.20	
Totals Transfers			**5,666.61** →	**5,666.61**

VILLAGE OF BENSENVILLE

PAYLOCITY BANK DEBIT

BENSENVILLE
GATEWAY TO OPPORTUNITY

HAND TYPE CHECK?

CHECK #	
WIRE TRANSFER #	
WARRANT DATE:	

433

DATE REQUESTED:	2/7/2019
REQUESTED BY:	Sharon Guest
DEPT. HEAD APPR.:	

VOUCHER BY:	
ENTERED BY:	
Bank Debit Date	2/8/2019

FINANCE DEPT. APPR.	
VILLAGE MANAGER APPR.	
HR DIRECTOR APPR.	

VENDOR NO.: 1338 **VENDOR NAME:** Austin Bank of Chicago
P.O. NUMBER: **ADDRESS:** Village of Bensenville
INVOICE NO.: Federal Withholding Tax Account

Bank Code:

ORG Code	Object			PROJECT CODE	DESCRIPTION	AMOUNT
11000000	212010				Federal W/H	40,491.93
11000000	212020				Social Security W/H	30,076.98
11000000	212030				Medicare W/H	10,557.21

SUPPORTING DOCUMENTATION OF ALL AMOUNTS IS REQUIRED

TOTAL $ 81,126.12

DESCRIPTION:

EXPLANATION FOR LACK OF P.O. : Federal W/H Tax Payment For P/R Period: 2/8/2019

AP USE ONLY	
BATCH #	

Payroll Totals

Payroll Checks		Check Type	Count	Net Check	Dir Dep Amount	Net Amount	
		Regular	148	0.00	225,502.99	225,502.99	
		Regular	40	24,076.32	2,025.00	26,101.32	
	Totals		**188**	**24,076.32**	**227,527.99**	**251,604.31** →	**251,604.31**

Payroll Checks	Check Type	Agency Type	Count	Net Check	Dir Dep Amount	Net Amount	
	Agency	Regular	4	2,451.11	0.00	2,451.11	
	Totals		**4**	**2,451.11**	**0.00**	**2,451.11** →	**2,451.11**
	Total Net Payroll Liability			**26,527.43**	**227,527.99**	**254,055.42** →	**254,055.42**

Tax Liability

FITW and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount	
Federal Income Tax	36-6005794		Semi-Weekly	334,946.14	334,946.14	40,491.93		
Medicare	36-6005794		Semi-Weekly	364,041.17	364,041.17	5,278.61		
Medicare - Employer	36-6005794		Semi-Weekly	364,041.17	364,041.17		5,278.60	
OASDI	36-6005794		Semi-Weekly	242,556.30	242,556.30	15,038.49		
OASDI - Employer	36-6005794		Semi-Weekly	242,556.30	242,556.30		15,038.49	
Totals						**60,809.03**	**20,317.09** →	**81,126.12**

IL and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount	
Illinois SITW	3660057940008		Semi-Weekly	330,904.97	330,904.97	16,054.83		
Totals						**16,054.83**	**0.00** →	**16,054.83**

ILSUI and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount	
Illinois SUI	0800928		Quarterly	368,529.08	338,357.13			
Totals						**0.00**	**0.00** →	**0.00**

WI and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount	
Wisconsin SITW	036-1026511657-02		Semi-Monthly	4,238.06	4,238.06	254.40		
Totals						**254.40**	**0.00** →	**254.40**
			Total Tax Liability			**77,118.26**	**20,317.09** →	**97,435.35**
			Total Payroll Liability				**351,490.77** →	**351,490.77**

VILLAGE OF BENSENVILLE

PAYLOCITY BANK DEBIT

BENSENVILLE
GATEWAY TO OPPORTUNITY

HAND TYPE CHECK?

CHECK #	
WIRE TRANSFER #	
WARRANT DATE:	

669

DATE REQUESTED:	2/21/2019
REQUESTED BY:	Sharon Guest
DEPT. HEAD APPR.:	

VOUCHER BY:	
ENTERED BY:	
Bank Debit Date	2/22/2019

FINANCE DEPT. APPR.	
VILLAGE MANAGER APPR.	
HR DIRECTOR APPR.	

VENDOR NO.: 1338
P.O. NUMBER:
INVOICE NO.:

VENDOR NAME: Austin Bank of Chicago
ADDRESS: Village of Bensenville
Federal Withholding Tax Account

Bank Code:

ORG Code	Object			PROJECT CODE	DESCRIPTION	AMOUNT
11000000	212010				Federal W/H	37,315.71
11000000	212020				Social Security W/H	28,790.33
11000000	212030				Medicare W/H	10,201.90

SUPPORTING DOCUMENTATION OF ALL AMOUNTS IS REQUIRED

TOTAL $ 76,307.94

DESCRIPTION:

EXPLANATION FOR LACK OF P.O. : Federal W/H Tax Payment For P/R Period: 2/22/2019

AP USE ONLY	
BATCH #	

Payroll Summary

Village Of Bensenville (B9156)

Check Date: 02/22/2019
Process: 2019022201
Pay Period: 02/04/2019 to 02/17/2019

Payroll Totals

Payroll Checks		Check Type	Count	Net Check	Dir Dep Amount	Net Amount		
		Regular	159	0.00	216,335.85	216,335.85		
		Regular	44	24,409.54	1,525.00	25,934.54		
	Totals		**203**	**24,409.54**	**217,860.85**	**242,270.39**	→	**242,270.39**

Payroll Checks	Check Type	Agency Type	Count	Net Check	Dir Dep Amount	Net Amount		
	Agency	Regular	5	3,387.11	0.00	3,387.11		
	Totals		**5**	**3,387.11**	**0.00**	**3,387.11**	→	**3,387.11**
	Total Net Payroll Liability			**27,796.65**	**217,860.85**	**245,657.50**	→	**245,657.50**

Tax Liability

FITW and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount		
Federal Income Tax	36-6005794		Semi-Weekly	323,342.66	323,342.66	37,315.71			
Medicare	36-6005794		Semi-Weekly	351,789.48	351,789.48	5,100.95			
Medicare - Employer	36-6005794		Semi-Weekly	351,789.48	351,789.48		5,100.95		
OASDI	36-6005794		Semi-Weekly	232,180.66	232,180.66	14,395.13			
OASDI - Employer	36-6005794		Semi-Weekly	232,180.66	232,180.66		14,395.20		
Totals						**56,811.79**	**19,496.15**	→	**76,307.94**

IL and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount		
Illinois SITW	3660057940008		Semi-Weekly	319,301.49	319,301.49	15,433.88			
Totals						**15,433.88**	**0.00**	→	**15,433.88**

ILSUI and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount		
Illinois SUI	0800928		Quarterly	356,255.33	192,537.07				
Totals						**0.00**	**0.00**	→	**0.00**

WI and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount		
Wisconsin SITW	036-1026511657-02		Semi-Monthly	4,238.06	4,238.06	279.40			
Totals						**279.40**	**0.00**	→	**279.40**

	EE Amount	ER Amount		
Total Tax Liability	**72,525.07**	**19,496.15**	→	**92,021.22**
Total Payroll Liability		**337,678.72**	→	**337,678.72**

VILLAGE OF BENSENVILLE

PAYLOCITY BANK DEBIT

BENSENVILLE
GATEWAY TO OPPORTUNITY

HAND TYPE CHECK?

CHECK #	
WIRE TRANSFER #	
WARRANT DATE:	

818

DATE REQUESTED:	3/7/2019
REQUESTED BY:	Sharon Guest
DEPT. HEAD APPR.:	

VOUCHER BY:	
ENTERED BY:	
Bank Debit Date	3/8/2019

FINANCE DEPT. APPR.	
VILLAGE MANAGER APPR.	
HR DIRECTOR APPR.	

VENDOR NO.: 1338 **VENDOR NAME:** Austin Bank of Chicago

P.O. NUMBER: **ADDRESS:** Village of Bensenville

INVOICE NO.: Federal Withholding Tax Account

Bank Code:

ORG Code	Object			PROJECT CODE	DESCRIPTION	AMOUNT
11000000	212010				Federal W/H	35,969.70
11000000	212020				Social Security W/H	27,445.95
11000000	212030				Medicare W/H	9,901.72

SUPPORTING DOCUMENTATION OF ALL AMOUNTS IS REQUIRED

TOTAL $ 73,317.37

DESCRIPTION:

EXPLANATION FOR LACK OF P.O. : Federal W/H Tax Payment For P/R Period: 3/8/2019

AP USE ONLY	
BATCH #	

Payroll Summary

Village Of Bensenville (B9156)

Check Date: 03/08/2019
Process: 2019030801
Pay Period: 02/18/2019 to 03/03/2019

Payroll Totals

Payroll Checks		Check Type	Count	Net Check	Dir Dep Amount	Net Amount	
		Regular	148	0.00	212,010.79	212,010.79	
		Regular	35	22,026.67	2,300.14	24,326.81	
	Totals		**183**	**22,026.67**	**214,310.93**	**236,337.60** →	**236,337.60**

Payroll Checks	Check Type	Agency Type	Count	Net Check	Dir Dep Amount	Net Amount	
	Agency	Regular	4	2,451.11	0.00	2,451.11	
	Totals		**4**	**2,451.11**	**0.00**	**2,451.11** →	**2,451.11**
	Total Net Payroll Liability			**24,477.78**	**214,310.93**	**238,788.71** →	**238,788.71**

Tax Liability

FITW and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount	
Federal Income Tax	36-6005794		Semi-Weekly	313,314.61	313,314.61	35,969.70		
Medicare	36-6005794		Semi-Weekly	341,437.27	341,437.27	4,950.88		
Medicare - Employer	36-6005794		Semi-Weekly	341,437.27	341,437.27		4,950.84	
OASDI	36-6005794		Semi-Weekly	221,337.62	221,337.62	13,723.02		
OASDI - Employer	36-6005794		Semi-Weekly	221,337.62	221,337.62		13,722.93	
Totals						**54,643.60**	**18,673.77** →	**73,317.37**

IL and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount	
Illinois SITW	3660057940008		Semi-Weekly	309,273.44	309,273.44	15,024.38		
Totals						**15,024.38**	**0.00** →	**15,024.38**

ILSUI and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount	
Illinois SUI	0800928		Quarterly	345,895.77	119,802.03			
Totals						**0.00**	**0.00** →	**0.00**

WI and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount	
Wisconsin SITW	036-1026511657-02		Semi-Monthly	4,238.06	4,238.06	279.40		
Totals						**279.40**	**0.00** →	**279.40**
				Total Tax Liability		**69,947.38**	**18,673.77** →	**88,621.15**

Total Payroll Liability	**327,409.86** →	**327,409.86**

VILLAGE OF BENSENVILLE

PAYLOCITY BANK DEBIT

BENSENVILLE
GATEWAY TO OPPORTUNITY

HAND TYPE CHECK?

CHECK #	
WIRE TRANSFER #	
WARRANT DATE:	

1017

DATE REQUESTED:	3/21/2019
REQUESTED BY:	Sharon Guest
DEPT. HEAD APPR.:	

VOUCHER BY:	
ENTERED BY:	
Bank Debit Date	3/22/2019

FINANCE DEPT. APPR.	
VILLAGE MANAGER APPR.	
HR DIRECTOR APPR.	

VENDOR NO.: 1338
VENDOR NAME: Austin Bank of Chicago
P.O. NUMBER:
ADDRESS: Village of Bensenville
Federal Withholding Tax Account
INVOICE NO.:

Bank Code:

ORG Code	Object			PROJECT CODE	DESCRIPTION	AMOUNT
11000000	212010				Federal W/H	37,427.90
11000000	212020				Social Security W/H	28,681.79
11000000	212030				Medicare W/H	10,268.80

SUPPORTING DOCUMENTATION OF ALL AMOUNTS IS REQUIRED

TOTAL $ 76,378.49

DESCRIPTION:

EXPLANATION FOR LACK OF P.O. : Federal W/H Tax Payment For P/R Period: 3/22/2019

AP USE ONLY	
BATCH #	

Payroll Summary

Village Of Bensenville (B9156)

Check Date: 03/22/2019

Process: 2019032201

Pay Period: 03/04/2019 to 03/17/2019

Payroll Totals

Payroll Checks		Check Type	Count	Net Check	Dir Dep Amount	Net Amount	
		Manual	1	207.98	0.00	207.98	
		Regular	156	0.00	217,802.41	217,802.41	
		Regular	41	23,184.79	2,025.00	25,209.79	
	Totals		**198**	**23,392.77**	**219,827.41**	**243,220.18** →	**243,220.18**

Payroll Checks	Check Type	Agency Type	Count	Net Check	Dir Dep Amount	Net Amount	
	Agency	Regular	5	3,603.11	0.00	3,603.11	
	Totals		**5**	**3,603.11**	**0.00**	**3,603.11** →	**3,603.11**
	Total Net Payroll Liability			**26,995.88**	**219,827.41**	**246,823.29** →	**246,823.29**

Tax Liability

FITW and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount	
Federal Income Tax	36-6005794		Semi-Weekly	325,610.39	325,610.39	37,427.90		
Medicare	36-6005794		Semi-Weekly	354,097.97	354,097.97	5,134.38		
Medicare - Employer	36-6005794		Semi-Weekly	354,097.97	354,097.97		5,134.42	
OASDI	36-6005794		Semi-Weekly	231,304.92	231,304.92	14,340.88		
OASDI - Employer	36-6005794		Semi-Weekly	231,304.92	231,304.92		14,340.91	
Totals						**56,903.16**	**19,475.33** →	**76,378.49**

IL and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount	
Illinois SITW	3660057940008		Semi-Weekly	321,569.22	321,569.22	15,553.84		
Totals						**15,553.84**	**0.00** →	**15,553.84**

ILSUI and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount	
Illinois SUI	0800928		Quarterly	358,571.17	87,050.52			
Totals						**0.00**	**0.00** →	**0.00**

WI and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount	
Wisconsin SITW	036-1026511657-02		Semi-Monthly	4,238.06	4,238.06	279.40		
Totals						**279.40**	**0.00** →	**279.40**

	EE Amount	ER Amount	
Total Tax Liability	**72,736.40**	**19,475.33** →	**92,211.73**
Total Payroll Liability		**339,035.02** →	**339,035.02**

VILLAGE OF BENSENVILLE

PAYLOCITY BANK DEBIT

BENSENVILLE
GATEWAY TO OPPORTUNITY

HAND TYPE CHECK?

CHECK #	
WIRE TRANSFER #	
WARRANT DATE:	

1017

DATE REQUESTED:	3/21/2019
REQUESTED BY:	Sharon Guest
DEPT. HEAD APPR.:	

VOUCHER BY:	
ENTERED BY:	
Bank Debit Date	3/22/2019

FINANCE DEPT. APPR.	
VILLAGE MANAGER APPR.	
HR DIRECTOR APPR.	

VENDOR NO.: 1338
P.O. NUMBER:
INVOICE NO.:

VENDOR NAME: Austin Bank of Chicago
ADDRESS: Village of Bensenville
Federal Withholding Tax Account

Bank Code:

ORG Code	Object			PROJECT CODE	DESCRIPTION	AMOUNT
11000000	212010				Federal W/H	37,427.90
11000000	212020				Social Security W/H	28,681.79
11000000	212030				Medicare W/H	10,268.80

SUPPORTING DOCUMENTATION OF ALL AMOUNTS IS REQUIRED

TOTAL $ 76,378.49

DESCRIPTION:

EXPLANATION FOR LACK OF P.O. : Federal W/H Tax Payment For P/R Period: 3/22/2019

AP USE ONLY	
BATCH #	

Payroll Summary

Village Of Bensenville (B9156)

Check Date: 03/22/2019
Process: 2019032201
Pay Period: 03/04/2019 to 03/17/2019

Payroll Totals

Payroll Checks		Check Type	Count	Net Check	Dir Dep Amount	Net Amount	
		Manual	1	207.98	0.00	207.98	
		Regular	156	0.00	217,802.41	217,802.41	
		Regular	41	23,184.79	2,025.00	25,209.79	
	Totals		**198**	**23,392.77**	**219,827.41**	**243,220.18** →	**243,220.18**

Payroll Checks	Check Type	Agency Type	Count	Net Check	Dir Dep Amount	Net Amount	
	Agency	Regular	5	3,603.11	0.00	3,603.11	
	Totals		**5**	**3,603.11**	**0.00**	**3,603.11** →	**3,603.11**
	Total Net Payroll Liability			**26,995.88**	**219,827.41**	**246,823.29** →	**246,823.29**

Tax Liability

FITW and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount	
Federal Income Tax	36-6005794		Semi-Weekly	325,610.39	325,610.39	37,427.90		
Medicare	36-6005794		Semi-Weekly	354,097.97	354,097.97	5,134.38		
Medicare - Employer	36-6005794		Semi-Weekly	354,097.97	354,097.97		5,134.42	
OASDI	36-6005794		Semi-Weekly	231,304.92	231,304.92	14,340.88		
OASDI - Employer	36-6005794		Semi-Weekly	231,304.92	231,304.92		14,340.91	
Totals						**56,903.16**	**19,475.33** →	**76,378.49**

IL and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount	
Illinois SITW	3660057940008		Semi-Weekly	321,569.22	321,569.22	15,553.84		
Totals						**15,553.84**	**0.00** →	**15,553.84**

ILSUI and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount	
Illinois SUI	0800928		Quarterly	358,571.17	87,050.52			
Totals						**0.00**	**0.00** →	**0.00**

WI and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount	
Wisconsin SITW	036-1026511657-02		Semi-Monthly	4,238.06	4,238.06	279.40		
Totals						**279.40**	**0.00** →	**279.40**

Total Tax Liability	**72,736.40**	**19,475.33** →	**92,211.73**
Total Payroll Liability		**339,035.02** →	**339,035.02**

VILLAGE OF BENSENVILLE

PAYLOCITY BANK DEBIT

BENSENVILLE
GATEWAY TO OPPORTUNITY

HAND TYPE CHECK?

CHECK #	
WIRE TRANSFER #	
WARRANT DATE:	

1414

DATE REQUESTED:	4/17/2019
REQUESTED BY:	Sharon Guest
DEPT. HEAD APPR.:	

VOUCHER BY:	
ENTERED BY:	
Bank Debit Date	4/19/2019

FINANCE DEPT. APPR.	
VILLAGE MANAGER APPR.	
HR DIRECTOR APPR.	

VENDOR NO.: 1338
VENDOR NAME: Austin Bank of Chicago
P.O. NUMBER:
ADDRESS: Village of Bensenville
Federal Withholding Tax Account
INVOICE NO.:

Bank Code:

ORG Code	Object			PROJECT CODE	DESCRIPTION	AMOUNT
11000000	212010				Federal W/H	41,043.11
11000000	212020				Social Security W/H	27,842.28
11000000	212030				Medicare W/H	11,518.15

SUPPORTING DOCUMENTATION OF ALL AMOUNTS IS REQUIRED

TOTAL $ 80,403.54

DESCRIPTION:

EXPLANATION FOR LACK OF P.O. : Federal W/H Tax Payment For P/R Period: 4/19/2019

AP USE ONLY	
BATCH #	

Payroll Summary	Check Date: 04/19/2019	Page 1 of 2
Village Of Bensenville (B9156)	Process: 2019041901	
	Pay Period: 04/01/2019 to 04/14/2019	

Payroll Totals

Payroll Checks		Check Type	Count	Net Check	Dir Dep Amount	Net Amount	
		Regular	190	0.00	251,051.59	251,051.59	
		Regular	39	24,508.00	1,075.57	25,583.57	
	Totals		**229**	**24,508.00**	**252,127.16**	**276,635.16** →	**276,635.16**

Payroll Checks	Check Type	Agency Type	Count	Net Check	Dir Dep Amount	Net Amount	
	Agency	Regular	5	3,453.11	0.00	3,453.11	
	Totals		**5**	**3,453.11**	**0.00**	**3,453.11** →	**3,453.11**
	Total Net Payroll Liability			**27,961.11**	**252,127.16**	**280,088.27** →	**280,088.27**

Tax Liability

FITW and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount	
Federal Income Tax	36-6005794		Semi-Weekly	364,641.87	364,641.87	41,043.11		
Medicare	36-6005794		Semi-Weekly	397,179.17	397,179.17	5,759.05		
Medicare - Employer	36-6005794		Semi-Weekly	397,179.17	397,179.17		5,759.10	
OASDI	36-6005794		Semi-Weekly	224,534.23	224,534.23	13,921.16		
OASDI - Employer	36-6005794		Semi-Weekly	224,534.23	224,534.23		13,921.12	
Totals						**60,723.32**	**19,680.22** →	**80,403.54**

IL and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount	
Illinois SITW	3660057940008		Semi-Weekly	360,600.70	360,600.70	17,436.66		
Totals						**17,436.66**	**0.00** →	**17,436.66**

ILSUI and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount	
Illinois SUI	0800928		Quarterly	401,922.97	47,780.63			
Totals						**0.00**	**0.00** →	**0.00**

WI and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount	
Wisconsin SITW	036-1026511657-02		Semi-Monthly	4,238.06	4,238.06	279.40		
Totals						**279.40**	**0.00** →	**279.40**
			Total Tax Liability			**78,439.38**	**19,680.22** →	**98,119.60**
			Total Payroll Liability				**378,207.87** →	**378,207.87**

VILLAGE OF BENSENVILLE

PAYLOCITY BANK DEBIT

BENSENVILLE
GATEWAY TO OPPORTUNITY

HAND TYPE CHECK?

CHECK #	
WIRE TRANSFER #	
WARRANT DATE:	

1641

DATE REQUESTED:	5/1/2019
REQUESTED BY:	Sharon Guest
DEPT. HEAD APPR.:	

VOUCHER BY:	
ENTERED BY:	
Bank Debit Date	5/3/2019

FINANCE DEPT. APPR.	
VILLAGE MANAGER APPR.	
HR DIRECTOR APPR.	

VENDOR NO.: 1338 **VENDOR NAME:** Austin Bank of Chicago

P.O. NUMBER: **ADDRESS:** Village of Bensenville

INVOICE NO.: Federal Withholding Tax Account

Bank Code:

ORG Code	Object			PROJECT CODE	DESCRIPTION	AMOUNT
11000000	212010				Federal W/H	37,923.67
11000000	212020				Social Security W/H	27,347.33
11000000	212030				Medicare W/H	10,151.26

SUPPORTING DOCUMENTATION OF ALL AMOUNTS IS REQUIRED

TOTAL	$	75,422.26

DESCRIPTION:

EXPLANATION FOR LACK OF P.O. : Federal W/H Tax Payment For P/R Period: 5/3/2019

AP USE ONLY	
BATCH #	

Payroll Summary

Village Of Bensenville (B9156)

Check Date: 05/03/2019

Process: 2019050301

Pay Period: 04/15/2019 to 04/28/2019

Payroll Totals

Payroll Checks		Check Type	Count	Net Check	Dir Dep Amount	Net Amount	
		Regular	148	0.00	217,854.63	217,854.63	
		Regular	35	22,659.10	1,083.04	23,742.14	
	Totals		**183**	**22,659.10**	**218,937.67**	**241,596.77** →	**241,596.77**

Payroll Checks	Check Type	Agency Type	Count	Net Check	Dir Dep Amount	Net Amount	
	Agency	Regular	4	2,301.11	0.00	2,301.11	
	Totals		**4**	**2,301.11**	**0.00**	**2,301.11** →	**2,301.11**
	Total Net Payroll Liability			**24,960.21**	**218,937.67**	**243,897.88** →	**243,897.88**

Tax Liability

FITW and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount	
Federal Income Tax	36-6005794		Semi-Weekly	320,924.14	320,924.14	37,923.67		
Medicare	36-6005794		Semi-Weekly	350,044.16	350,044.16	5,075.62		
Medicare - Employer	36-6005794		Semi-Weekly	350,044.16	350,044.16		5,075.64	
OASDI	36-6005794		Semi-Weekly	220,542.94	220,542.94	13,673.67		
OASDI - Employer	36-6005794		Semi-Weekly	220,542.94	220,542.94		13,673.66	
Totals						**56,672.96**	**18,749.30** →	**75,422.26**

IL and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount	
Illinois SITW	3660057940008		Semi-Weekly	316,882.97	316,882.97	15,418.00		
Totals						**15,418.00**	**0.00** →	**15,418.00**

ILSUI and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount	
Illinois SUI	0800928		Quarterly	354,517.36	34,775.97			
Totals						**0.00**	**0.00** →	**0.00**

WI and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount	
Wisconsin SITW	036-1026511657-02		Semi-Monthly	4,238.06	4,238.06	279.40		
Totals						**279.40**	**0.00** →	**279.40**

	EE Amount	ER Amount	
Total Tax Liability	**72,370.36**	**18,749.30** →	**91,119.66**

Total Payroll Liability	**335,017.54** →	**335,017.54**

VILLAGE OF BENSENVILLE

PAYLOCITY BANK DEBIT

BENSENVILLE
GATEWAY TO OPPORTUNITY

HAND TYPE CHECK?

CHECK #	
WIRE TRANSFER #	
WARRANT DATE:	

1836

DATE REQUESTED:	5/16/2019
REQUESTED BY:	Sharon Guest
DEPT. HEAD APPR.:	

VOUCHER BY:	
ENTERED BY:	
Bank Debit Date	5/17/2019

FINANCE DEPT. APPR.	
VILLAGE MANAGER APPR.	
HR DIRECTOR APPR.	

VENDOR NO.: 1338
P.O. NUMBER:
INVOICE NO.:

Bank Code:

VENDOR NAME: Austin Bank of Chicago
ADDRESS: Village of Bensenville
Federal Withholding Tax Account

ORG Code	Object			PROJECT CODE	DESCRIPTION	AMOUNT
11000000	212010				Federal W/H	37,261.34
11000000	212020				Social Security W/H	27,867.30
11000000	212030				Medicare W/H	10,156.34

SUPPORTING DOCUMENTATION OF ALL AMOUNTS IS REQUIRED

TOTAL $ 75,284.98

DESCRIPTION:

EXPLANATION FOR LACK OF P.O. : Federal W/H Tax Payment For P/R Period: 5/17/2019

AP USE ONLY	
BATCH #	

Payroll Totals

Payroll Checks		Check Type	Count	Net Check	Dir Dep Amount	Net Amount	
		Regular	158	0.00	216,274.45	216,274.45	
		Regular	39	24,701.04	1,094.47	25,795.51	
	Totals		**197**	**24,701.04**	**217,368.92**	**242,069.96** →	**242,069.96**

Payroll Checks	Check Type	Agency Type	Count	Net Check	Dir Dep Amount	Net Amount	
	Agency	Regular	4	2,301.11	0.00	2,301.11	
	Totals		**4**	**2,301.11**	**0.00**	**2,301.11** →	**2,301.11**
	Total Net Payroll Liability			**27,002.15**	**217,368.92**	**244,371.07** →	**244,371.07**

Tax Liability

FITW and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount	
Federal Income Tax	36-6005794		Semi-Weekly	320,944.56	320,944.56	37,261.34		
Medicare	36-6005794		Semi-Weekly	350,220.54	350,220.54	5,078.14		
Medicare - Employer	36-6005794		Semi-Weekly	350,220.54	350,220.54		5,078.20	
OASDI	36-6005794		Semi-Weekly	224,736.13	224,736.13	13,933.66		
OASDI - Employer	36-6005794		Semi-Weekly	224,736.13	224,736.13		13,933.64	
Totals						**56,273.14**	**19,011.84** →	**75,284.98**

IL and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount	
Illinois SITW	3660057940008		Semi-Weekly	316,903.39	316,903.39	15,363.67		
Totals						**15,363.67**	**0.00** →	**15,363.67**

ILSUI and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount	
Illinois SUI	0800928		Quarterly	354,664.34	30,619.96			
Totals						**0.00**	**0.00** →	**0.00**

WI and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount	
Wisconsin SITW	036-1026511657-02		Semi-Monthly	4,238.06	4,238.06	279.40		
Totals						**279.40**	**0.00** →	**279.40**

Total Tax Liability	**71,916.21**	**19,011.84** →	**90,928.05**
Total Payroll Liability		**335,299.12** →	**335,299.12**

req 20191998

VILLAGE OF BENSENVILLE

PAYLOCITY BANK DEBIT

BENSENVILLE
GATEWAY TO OPPORTUNITY

RECEIVED MAY 3 0 2019

HAND TYPE CHECK?

CHECK #			DATE REQUESTED:	5/30/2019
WIRE TRANSFER #			REQUESTED BY:	Sharon Guest
WARRANT DATE:			DEPT. HEAD APPR.:	
VOUCHER BY:			FINANCE DEPT. APPR.	
ENTERED BY:			VILLAGE MANAGER APPR.	
Bank Debit Date	5/31/2019		HR DIRECTOR APPR.	

VENDOR NO.: 1338 **VENDOR NAME:** Austin Bank of Chicago

P.O. NUMBER: **ADDRESS:** Village of Bensenville

INVOICE NO.: Federal Withholding Tax Account

Bank Code:

ORG Code	Object			PROJECT CODE	DESCRIPTION	AMOUNT
11000000	212010				Federal W/H	41,325.01
11000000	212020				Social Security W/H	30,014.74
11000000	212030				Medicare W/H	10,744.37
					5/31/18	

SUPPORTING DOCUMENTATION OF ALL AMOUNTS IS REQUIRED

TOTAL $ 82,084.12

DESCRIPTION:

EXPLANATION FOR LACK OF P.O. : Federal W/H Tax Payment For P/R Period: 5/31/2019

AP USE ONLY	
BATCH #	

Payroll Totals

Payroll Checks		Check Type	Count	Net Check	Dir Dep Amount	Net Amount	
		Regular	149	0.00	225,206.84	225,206.84	
		Regular	37	26,880.18	1,096.49	27,976.67	
	Totals		**186**	**26,880.18**	**226,303.33**	**253,183.51** →	**253,183.51**

Payroll Checks	Check Type	Agency Type	Count	Net Check	Dir Dep Amount	Net Amount	
	Agency	Regular	4	3,404.51	0.00	3,404.51	
	Totals		**4**	**3,404.51**	**0.00**	**3,404.51** →	**3,404.51**
	Total Net Payroll Liability			**30,284.69**	**226,303.33**	**256,588.02** →	**256,588.02**

Tax Liability

FITW and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount	
Federal Income Tax	36-6005794		Semi-Weekly	341,117.14	341,117.14	41,325.01		
Medicare	36-6005794		Semi-Weekly	370,493.23	370,493.23	5,372.22		
Medicare - Employer	36-6005794		Semi-Weekly	370,493.23	370,493.23		5,372.15	
OASDI	36-6005794		Semi-Weekly	242,054.48	242,054.48	15,007.36		
OASDI - Employer	36-6005794		Semi-Weekly	242,054.48	242,054.48		15,007.38	
Totals						**61,704.59**	**20,379.53** →	**82,084.12**

IL and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount	
Illinois SITW	3660057940008		Semi-Weekly	336,938.59	336,938.59	16,393.94		
Totals						**16,393.94**	**0.00** →	**16,393.94**

ILSUI and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount	
Illinois SUI	0800928		Quarterly	375,277.54	29,330.82			
Totals						**0.00**	**0.00** →	**0.00**

WI and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount	
Wisconsin SITW	036-1026511657-02		Semi-Monthly	4,375.44	4,375.44	288.01		
Totals						**288.01**	**0.00** →	**288.01**

Total Tax Liability	**78,386.54**	**20,379.53** →	**98,766.07**
Total Payroll Liability		**355,354.09** →	**355,354.09**

req 20192187

VILLAGE OF BENSENVILLE

PAYLOCITY BANK DEBIT

BENSENVILLE
GATEWAY TO OPPORTUNITY

HAND TYPE CHECK?

CHECK #	
WIRE TRANSFER #	
WARRANT DATE:	

DATE REQUESTED:	6/13/2019
REQUESTED BY:	Sharon Guest
DEPT. HEAD APPR.:	

VOUCHER BY:	
ENTERED BY:	
Bank Debit Date	6/14/2019

FINANCE DEPT. APPR.	
VILLAGE MANAGER APPR.	
HR DIRECTOR APPR.	

VENDOR NO.: 1338
VENDOR NAME: Austin Bank of Chicago
P.O. NUMBER:
ADDRESS: Village of Bensenville
Federal Withholding Tax Account
INVOICE NO.:

Bank Code:

ORG Code	Object			PROJECT CODE	DESCRIPTION	AMOUNT
11000000	212010				Federal W/H	39,600.93
11000000	212020				Social Security W/H	28,140.20
11000000	212030				Medicare W/H	10,466.66

SUPPORTING DOCUMENTATION OF ALL AMOUNTS IS REQUIRED

TOTAL $ 78,207.79

DESCRIPTION:

EXPLANATION FOR LACK OF P.O. : Federal W/H Tax Payment For P/R Period: 6/14/2019

AP USE ONLY	
BATCH #	

Payroll Summary

Village Of Bensenville (B9156)

Check Date: 06/14/2019

Process: 2019061401

Pay Period: 05/27/2019 to 06/09/2019

Payroll Totals

Payroll Checks		Check Type	Count	Net Check	Dir Dep Amount	Net Amount	
		Regular	149	0.00	219,167.09	219,167.09	
		Regular	43	28,713.14	1,083.05	29,796.19	
	Totals		**192**	**28,713.14**	**220,250.14**	**248,963.28** →	**248,963.28**

Payroll Checks	Check Type	Agency Type	Count	Net Check	Dir Dep Amount	Net Amount	
	Agency	Regular	4	2,226.11	0.00	2,226.11	
	Totals		**4**	**2,226.11**	**0.00**	**2,226.11** →	**2,226.11**
	Total Net Payroll Liability			**30,939.25**	**220,250.14**	**251,189.39** →	**251,189.39**

Tax Liability

FITW and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount	
Federal Income Tax	36-6005794		Semi-Weekly	330,844.61	330,844.61	39,600.93		
Medicare	36-6005794		Semi-Weekly	360,919.58	360,919.58	5,233.33		
Medicare - Employer	36-6005794		Semi-Weekly	360,919.58	360,919.58		5,233.33	
OASDI	36-6005794		Semi-Weekly	226,937.95	226,937.95	14,070.05		
OASDI - Employer	36-6005794		Semi-Weekly	226,937.95	226,937.95		14,070.15	
Totals						**58,904.31**	**19,303.48** →	**78,207.79**

IL and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount	
Illinois SITW	3660057940008		Semi-Weekly	326,803.44	326,803.44	15,917.66		
Totals						**15,917.66**	**0.00** →	**15,917.66**

ILSUI and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount	
Illinois SUI	0800928		Quarterly	365,762.70	34,164.63			
Totals						**0.00**	**0.00** →	**0.00**

WI and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount	
Wisconsin SITW	036-1026511657-02		Semi-Monthly	4,238.06	4,238.06	279.40		
Totals						**279.40**	**0.00** →	**279.40**

Total Tax Liability	**75,101.37**	**19,303.48** →	**94,404.85**
Total Payroll Liability		**345,594.24** →	**345,594.24**

req 20192388

VILLAGE OF BENSENVILLE

PAYLOCITY BANK DEBIT

BENSENVILLE
GATEWAY TO OPPORTUNITY

HAND TYPE CHECK?

CHECK #	
WIRE TRANSFER #	
WARRANT DATE:	

DATE REQUESTED:	6/27/2019
REQUESTED BY:	Sharon Guest
DEPT. HEAD APPR.:	

VOUCHER BY:	
ENTERED BY:	
Bank Debit Date	6/28/2019

FINANCE DEPT. APPR.	
VILLAGE MANAGER APPR.	
HR DIRECTOR APPR.	

VENDOR NO.: 1338 **VENDOR NAME:** Austin Bank of Chicago
P.O. NUMBER: **ADDRESS:** Village of Bensenville
INVOICE NO.: Federal Withholding Tax Account

Bank Code:

ORG Code	Object			PROJECT CODE	DESCRIPTION	AMOUNT
11000000	212010				Federal W/H	38,344.23
11000000	212020				Social Security W/H	28,801.67
11000000	212030				Medicare W/H	10,343.67

SUPPORTING DOCUMENTATION OF ALL AMOUNTS IS REQUIRED

TOTAL $ 77,489.47

DESCRIPTION:

EXPLANATION FOR LACK OF P.O. : Federal W/H Tax Payment For P/R Period: 6/28/2019

AP USE ONLY	
BATCH #	

Payroll Summary

Village Of Bensenville (B9156)

Check Date: 06/28/2019

Process: 2019062801

Pay Period: 06/10/2019 to 06/23/2019

Payroll Totals

Payroll Checks		Check Type	Count	Net Check	Dir Dep Amount	Net Amount	
		Regular	159	0.00	215,524.11	215,524.11	
		Regular	45	29,330.40	1,089.23	30,419.63	
	Totals		**204**	**29,330.40**	**216,613.34**	**245,943.74** →	**245,943.74**

Payroll Checks	Check Type	Agency Type	Count	Net Check	Dir Dep Amount	Net Amount	
	Agency	Regular	5	3,342.11	0.00	3,342.11	
	Totals		**5**	**3,342.11**	**0.00**	**3,342.11** →	**3,342.11**
	Total Net Payroll Liability			**32,672.51**	**216,613.34**	**249,285.85** →	**249,285.85**

Tax Liability

FITW and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount	
Federal Income Tax	36-6005794		Semi-Weekly	329,608.68	329,608.68	38,344.23		
Medicare	36-6005794		Semi-Weekly	356,679.21	356,679.21	5,171.82		
Medicare - Employer	36-6005794		Semi-Weekly	356,679.21	356,679.21		5,171.85	
OASDI	36-6005794		Semi-Weekly	232,270.14	232,270.14	14,400.82		
OASDI - Employer	36-6005794		Semi-Weekly	232,270.14	232,270.14		14,400.75	
Totals						**57,916.87**	**19,572.60** →	**77,489.47**

IL and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount	
Illinois SITW	3660057940008		Semi-Weekly	325,567.51	325,567.51	15,797.17		
Totals						**15,797.17**	**0.00** →	**15,797.17**

ILSUI and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount	
Illinois SUI	0800928		Quarterly	361,559.09	34,856.64			
Totals						**0.00**	**0.00** →	**0.00**

WI and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount	
Wisconsin SITW	036-1026511657-02		Semi-Monthly	4,238.06	4,238.06	279.40		
Totals						**279.40**	**0.00** →	**279.40**

Total Tax Liability	**73,993.44**	**19,572.60** →	**93,566.04**
Total Payroll Liability		**342,851.89** →	**342,851.89**

2644

Old Second National Bank

June 24, 2019

Village of Bensenville
Attn: Julie McManus, Finance
12 S. Center St.
Bensenville, IL 60106

Re: Series 2019 GO Bonds

Dear Ms. Mcmanus:

The payment due on 6-15-19 for the above mentioned bond is past due. Please remit payment as soon as possible to my attention at the address below.

Principal due		$190,300.00
Interest due		$ 26,000.00
	Total	$216,300.00

If you have any questions, please contact me at 630-906-2303.

Sincerely,

Shirley Cantrell

Shirley Cantrell
Shareholder Relations Manager

VILLAGE OF BENSENVILLE
12 S. CENTER STREET
BENSENVILLE, ILLINOIS 60106

Ordinance No. 1-2019

An Ordinance Authorizing and Providing for the Issuance in an Aggregate Amount of $1,200,000 General Obligation Bonds, Series 2019 of the Village of Bensenville, DuPage and Cook Counties, Illinois and for the Levy of a Direct Annual Tax to Pay the Principle and Interest on Said Bonds

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ADOPTED BY THE
VILLAGE BOARD OF TRUSTEES
OF THE
VILLAGE OF BENSENVILLE
THIS 8th DAY OF JANUARY 2019

Published in pamphlet form by authority of the President and Board of Trustees of the Village of Bensenville, DuPage and Cook Counties, Illinois this 9th day of January, 2019

STATE OF ILLINOIS)
COUNTIES OF COOK)
SS AND DUPAGE)

I, Corey Williamsen, do hereby certify that I am the duly appointed Deputy Village Clerk of the Village of Bensenville, DuPage and Cook Counties, Illinois, and as such officer, I am the keeper of the records and files of said Village; I do further certify that the foregoing constitutes a full, true and correct copy of Ordinance No. 1-2019 entitled an Ordinance Authorizing and Providing for the Issuance in an Aggregate Amount of $1,200,000 General Obligation Bonds, Series 2019 of the Village of Bensenville, DuPage and Cook Counties, Illinois, and for the Levy of a Direct Annual Tax to Pay the Principle and Interest on Said Bonds.

INWITNESS WHEREOF, I have hereunto affixed my official hand and seal on this 9th day of January, 2019.

VILLAGE OF BENSENVILLE
SEAL
SEAL
ILLINOIS

Corey Williamsen
Deputy Village Clerk

VILLAGE OF BENSENVILLE

PAYLOCITY BANK DEBIT

BENSENVILLE
GATEWAY TO OPPORTUNITY

HAND TYPE CHECK?

CHECK #	
WIRE TRANSFER #	
WARRANT DATE:	

280

DATE REQUESTED:	7/11/2019
REQUESTED BY:	Sharon Guest
DEPT. HEAD APPR.:	

VOUCHER BY:	
ENTERED BY:	
Bank Debit Date	7/12/2019

FINANCE DEPT. APPR.	
VILLAGE MANAGER APPR.	
HR DIRECTOR APPR.	

VENDOR NO.: 1338
VENDOR NAME: Austin Bank of Chicago
P.O. NUMBER:
ADDRESS: Village of Bensenville
Federal Withholding Tax Account
INVOICE NO.:

Bank Code:

ORG Code	Object			PROJECT CODE	DESCRIPTION	AMOUNT
11000000	212010				Federal W/H	46,322.05
11000000	212020				Social Security W/H	31,875.54
11000000	212030				Medicare W/H	11,575.80

SUPPORTING DOCUMENTATION OF ALL AMOUNTS IS REQUIRED

TOTAL $ 89,773.39

DESCRIPTION:

EXPLANATION FOR LACK OF P.O. : Federal W/H Tax Payment For P/R Period: 7/12/2019

AP USE ONLY	
BATCH #	

Payroll Totals

Payroll Checks		Check Type	Count	Net Check	Dir Dep Amount	Net Amount	
		Regular	155	0.00	243,314.72	243,314.72	
		Regular	41	32,793.55	1,119.91	33,913.46	
	Totals		196	32,793.55	244,434.63	277,228.18 →	277,228.18

Payroll Checks	Check Type	Agency Type	Count	Net Check	Dir Dep Amount	Net Amount	
	Agency	Regular	4	2,226.11	0.00	2,226.11	
	Totals		4	2,226.11	0.00	2,226.11 →	2,226.11
	Total Net Payroll Liability			35,019.66	244,434.63	279,454.29 →	279,454.29

Tax Liability

FITW and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount	
Federal Income Tax	36-6005794		Semi-Weekly	370,409.89	370,409.89	46,322.05		
Medicare	36-6005794		Semi-Weekly	399,165.71	399,165.71	5,787.90		
Medicare - Employer	36-6005794		Semi-Weekly	399,165.71	399,165.71		5,787.90	
OASDI	36-6005794		Semi-Weekly	257,060.56	257,060.56	15,937.79		
OASDI - Employer	36-6005794		Semi-Weekly	257,060.56	257,060.56		15,937.75	
Totals						68,047.74	21,725.65 →	89,773.39

IL and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount	
Illinois SITW	3660057940008		Semi-Weekly	366,372.03	366,372.03	17,830.59		
Totals						17,830.59	0.00 →	17,830.59

ILSUI and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount	
Illinois SUI	0800928		Quarterly	403,986.78	36,827.47			
Totals						0.00	0.00 →	0.00

WI and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount	
Wisconsin SITW	036-1026511657-02		Semi-Monthly	4,234.75	4,234.75	279.19		
Totals						279.19	0.00 →	279.19

Total Tax Liability	86,157.52	21,725.65 →	107,883.17
Total Payroll Liability		387,337.46 →	387,337.46

VILLAGE OF BENSENVILLE

PAYLOCITY BANK DEBIT

BENSENVILLE
GATEWAY TO OPPORTUNITY

HAND TYPE CHECK?

CHECK #	
WIRE TRANSFER #	
WARRANT DATE:	

2731

DATE REQUESTED:	7/25/2019
REQUESTED BY:	Sharon Guest
DEPT. HEAD APPR.:	

VOUCHER BY:	
ENTERED BY:	
Bank Debit Date	7/26/2019

FINANCE DEPT. APPR.	Jan
VILLAGE MANAGER APPR.	
HR DIRECTOR APPR.	

VENDOR NO.: 1338 **VENDOR NAME:** Austin Bank of Chicago

P.O. NUMBER: **ADDRESS:** Village of Bensenville

INVOICE NO.: Federal Withholding Tax Account

Bank Code:

ORG Code	Object			PROJECT CODE	DESCRIPTION	AMOUNT
11000000	212010				Federal W/H	46,624.34
11000000	212020				Social Security W/H	29,428.89
11000000	212030				Medicare W/H	11,277.08

SUPPORTING DOCUMENTATION OF ALL AMOUNTS IS REQUIRED

TOTAL $ 87,330.31

DESCRIPTION:

EXPLANATION FOR LACK OF P.O. : Federal W/H Tax Payment For P/R Period: 7/26/2019

AP USE ONLY	
BATCH #	

Payroll Totals

Payroll Checks		Check Type	Count	Net Check	Dir Dep Amount	Net Amount	
		Regular	162	0.00	235,895.60	235,895.60	
		Regular	44	30,927.09	1,076.90	32,003.99	
	Totals		**206**	**30,927.09**	**236,972.50**	**267,899.59**	**267,899.59**

Payroll Checks	Check Type	Agency Type	Count	Net Check	Dir Dep Amount	Net Amount	
	Agency	Regular	5	3,342.11	0.00	3,342.11	
	Totals		**5**	**3,342.11**	**0.00**	**3,342.11**	**3,342.11**
	Total Net Payroll Liability			**34,269.20**	**236,972.50**	**271,241.70**	**271,241.70**

Tax Liability

FITW and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount	
Federal Income Tax	36-6005794		Semi-Weekly	362,196.46	362,196.46	46,624.34		
Medicare	36-6005794		Semi-Weekly	388,866.81	388,866.81	5,638.51		
Medicare - Employer	36-6005794		Semi-Weekly	388,866.81	388,866.81		5,638.57	
OASDI	36-6005794		Semi-Weekly	237,329.27	237,329.27	14,714.48		
OASDI - Employer	36-6005794		Semi-Weekly	237,329.27	237,329.27		14,714.41	
Totals						**66,977.33**	**20,352.98**	**87,330.31**

IL and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount	
Illinois SITW	3660057940008		Semi-Weekly	358,158.60	358,158.60	17,395.57		
Totals						**17,395.57**	**0.00**	**17,395.57**

ILSUI and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount	
Illinois SUI	0800928		Quarterly	393,651.12	42,361.91			
Totals						**0.00**	**0.00**	**0.00**

WI and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount	
Wisconsin SITW	036-1026511657-02		Semi-Monthly	4,234.75	4,234.75	279.19		
Totals						**279.19**	**0.00**	**279.19**

Total Tax Liability	**84,652.09**	**20,352.98**	**105,005.07**
Total Payroll Liability		**376,246.77**	**376,246.77**

VILLAGE OF BENSENVILLE

PAYLOCITY BANK DEBIT

BENSENVILLE
GATEWAY TO OPPORTUNITY

HAND TYPE CHECK?

2963

CHECK #	
WIRE TRANSFER #	
WARRANT DATE:	

DATE REQUESTED:	8/8/2019
REQUESTED BY:	Sharon Guest
DEPT. HEAD APPR.:	

VOUCHER BY:	
ENTERED BY:	
Bank Debit Date	8/9/2019

FINANCE DEPT. APPR.	
VILLAGE MANAGER APPR.	
HR DIRECTOR APPR.	

VENDOR NO.: 1338 **VENDOR NAME:** Austin Bank of Chicago
P.O. NUMBER: **ADDRESS:** Village of Bensenville
INVOICE NO.: Federal Withholding Tax Account

Bank Code:

ORG Code	Object			PROJECT CODE	DESCRIPTION	AMOUNT
11000000	212010				Federal W/H	37,803.51
11000000	212020				Social Security W/H	29,145.71
11000000	212030				Medicare W/H	10,162.03

SUPPORTING DOCUMENTATION OF ALL AMOUNTS IS REQUIRED

TOTAL $ 77,111.25

DESCRIPTION:

EXPLANATION FOR LACK OF P.O. : Federal W/H Tax Payment For P/R Period: 8/9/2019

AP USE ONLY	
BATCH #	

Payroll Summary

Village Of Bensenville (B9156)

Check Date: 08/09/2019
Process: 2019080901
Pay Period: 07/22/2019 to 08/04/2019

Payroll Totals

Payroll Checks		Check Type	Count	Net Check	Dir Dep Amount	Net Amount	
		Regular	150	0.00	215,992.04	215,992.04	
		Regular	40	29,702.14	1,086.80	30,788.94	
		Rev	1	0.00	-2,295.73	-2,295.73	
	Totals		**191**	**29,702.14**	**214,783.11**	**244,485.25** →	**244,485.25**

Payroll Checks	Check Type	Agency Type	Count	Net Check	Dir Dep Amount	Net Amount	
	Agency	Regular	4	2,226.11	0.00	2,226.11	
	Totals		**4**	**2,226.11**	**0.00**	**2,226.11** →	**2,226.11**
	Total Net Payroll Liability			**31,928.25**	**214,783.11**	**246,711.36** →	**246,711.36**

Tax Liability

FITW and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount	
Federal Income Tax	36-6005794		Semi-Weekly	324,862.41	324,862.41	37,803.51		
Medicare	36-6005794		Semi-Weekly	350,415.58	350,415.58	5,081.00		
Medicare - Employer	36-6005794		Semi-Weekly	350,415.58	350,415.58		5,081.03	
OASDI	36-6005794		Semi-Weekly	235,045.96	235,045.96	14,572.86		
OASDI - Employer	36-6005794		Semi-Weekly	235,045.96	235,045.96		14,572.85	
Totals						**57,457.37**	**19,653.88** →	**77,111.25**

IL and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount	
Illinois SITW	3660057940008		Semi-Weekly	320,824.55	320,824.55	15,619.58		
Totals						**15,619.58**	**0.00** →	**15,619.58**

ILSUI and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount	
Illinois SUI	0800928		Quarterly	355,199.89	36,680.95			
Totals						**0.00**	**0.00** →	**0.00**

WI and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount	
Wisconsin SITW	036-1026511657-02		Semi-Monthly	4,234.75	4,234.75	279.19		
Totals						**279.19**	**0.00** →	**279.19**

Total Tax Liability	**73,356.14**	**19,653.88** →	**93,010.02**
Total Payroll Liability		**339,721.38** →	**339,721.38**

VILLAGE OF BENSENVILLE

PAYLOCITY BANK DEBIT

BENSENVILLE
GATEWAY TO OPPORTUNITY

3169

HAND TYPE CHECK?

CHECK #	
WIRE TRANSFER #	
WARRANT DATE:	

DATE REQUESTED:	8/22/2019
REQUESTED BY:	Sharon Guest
DEPT. HEAD APPR.:	

VOUCHER BY:	
ENTERED BY:	
Bank Debit Date	8/23/2019

FINANCE DEPT. APPR.	
VILLAGE MANAGER APPR.	
HR DIRECTOR APPR.	

VENDOR NO.: 1338 **VENDOR NAME:** ~~Austin Bank of Chicago~~ OLD 2nd

P.O. NUMBER: **ADDRESS:** Village of Bensenville

INVOICE NO.: Federal Withholding Tax Account

Bank Code:

ORG Code	Object			PROJECT CODE	DESCRIPTION	AMOUNT
11000000	212010				Federal W/H	39,449.64
11000000	212020				Social Security W/H	28,643.26
11000000	212030				Medicare W/H	10,416.38

SUPPORTING DOCUMENTATION OF ALL AMOUNTS IS REQUIRED

TOTAL $ 78,509.28

DESCRIPTION:

EXPLANATION FOR LACK OF P.O. : Federal W/H Tax Payment For P/R Period: 8/23/2019

AP USE ONLY	
BATCH #	

Payroll Summary

Village Of Bensenville (B9156)

Check Date: 08/23/2019
Process: 2019082301
Pay Period: 08/05/2019 to 08/18/2019

Payroll Totals

Payroll Checks	Check Type	Count	Net Check	Dir Dep Amount	Net Amount	
	Regular	159	0.00	219,983.22	219,983.22	
	Regular	39	27,048.09	1,124.55	28,172.64	
Totals		**198**	**27,048.09**	**221,107.77**	**248,155.86** →	**248,155.86**

Payroll Checks	Check Type	Agency Type	Count	Net Check	Dir Dep Amount	Net Amount	
	Agency	Regular	5	3,234.11	0.00	3,234.11	
	Totals		**5**	**3,234.11**	**0.00**	**3,234.11** →	**3,234.11**
	Total Net Payroll Liability			**30,282.20**	**221,107.77**	**251,389.97** →	**251,389.97**

Tax Liability

FITW and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount	
Federal Income Tax	36-6005794		Semi-Weekly	332,945.34	332,945.34	39,449.64		
Medicare	36-6005794		Semi-Weekly	359,186.07	359,186.07	5,208.18		
Medicare - Employer	36-6005794		Semi-Weekly	359,186.07	359,186.07		5,208.20	
OASDI	36-6005794		Semi-Weekly	230,994.36	230,994.36	14,321.61		
OASDI - Employer	36-6005794		Semi-Weekly	230,994.36	230,994.36		14,321.65	
Totals						**58,979.43**	**19,529.85** →	**78,509.28**

IL and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount	
Illinois SITW	3660057940008		Semi-Weekly	328,907.48	328,907.48	15,972.54		
Totals						**15,972.54**	**0.00** →	**15,972.54**

ILSUI and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount	
Illinois SUI	0800928		Quarterly	363,970.38	29,920.59			
Totals						**0.00**	**0.00** →	**0.00**

WI and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount	
Wisconsin SITW	036-1026511657-02		Semi-Monthly	4,234.75	4,234.75	279.19		
Totals						**279.19**	**0.00** →	**279.19**

	EE Amount	ER Amount	
Total Tax Liability	**75,231.16**	**19,529.85** →	**94,761.01**
Total Payroll Liability		**346,150.98** →	**346,150.98**

VILLAGE OF BENSENVILLE

req 20193349

PAYLOCITY BANK DEBIT

BENSENVILLE
GATEWAY TO OPPORTUNITY

HAND TYPE CHECK?

CHECK #	
WIRE TRANSFER #	
WARRANT DATE:	

DATE REQUESTED:	9/5/2019
REQUESTED BY:	Sharon Guest
DEPT. HEAD APPR.:	

VOUCHER BY:	
ENTERED BY:	
Bank Debit Date	9/6/2019

FINANCE DEPT. APPR.	
VILLAGE MANAGER APPR.	
HR DIRECTOR APPR.	

VENDOR NO.: 1338 **VENDOR NAME:** Old Second Bank

P.O. NUMBER: **ADDRESS:** Village of Bensenville

INVOICE NO.: Federal Withholding Tax Account

Bank Code:

ORG Code	Object			PROJECT CODE	DESCRIPTION	AMOUNT
11000000	212010				Federal W/H	38,650.33
11000000	212020				Social Security W/H	27,771.04
11000000	212030				Medicare W/H	10,220.91

SUPPORTING DOCUMENTATION OF ALL AMOUNTS IS REQUIRED

TOTAL $ 76,642.28

DESCRIPTION:

EXPLANATION FOR LACK OF P.O. : Federal W/H Tax Payment For P/R Period: 9/6/2019

AP USE ONLY	
BATCH #	

Payroll Summary

Village Of Bensenville (B9156)

Check Date: 09/06/2019
Process: 2019090601
Pay Period: 08/19/2019 to 09/01/2019

Payroll Totals

Payroll Checks	Check Type	Count	Net Check	Dir Dep Amount	Net Amount	
	Regular	146	0.00	219,875.84	219,875.84	
	Regular	34	24,348.45	1,059.38	25,407.83	
Totals		**180**	**24,348.45**	**220,935.22**	**245,283.67**	**245,283.67**

Payroll Checks	Check Type	Agency Type	Count	Net Check	Dir Dep Amount	Net Amount	
	Agency	Regular	4	2,226.11	0.00	2,226.11	
	Totals		**4**	**2,226.11**	**0.00**	**2,226.11**	**2,226.11**
	Total Net Payroll Liability			**26,574.56**	**220,935.22**	**247,509.78**	**247,509.78**

Tax Liability

FITW and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount	
Federal Income Tax	36-6005794		Semi-Weekly	325,298.84	325,298.84	38,650.33		
Medicare	36-6005794		Semi-Weekly	352,445.70	352,445.70	5,110.45		
Medicare - Employer	36-6005794		Semi-Weekly	352,445.70	352,445.70		5,110.46	
OASDI	36-6005794		Semi-Weekly	223,960.49	223,960.49	13,885.49		
OASDI - Employer	36-6005794		Semi-Weekly	223,960.49	223,960.49		13,885.55	
Totals						**57,646.27**	**18,996.01**	**76,642.28**

IL and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount	
Illinois SITW	3660057940008		Semi-Weekly	321,260.98	321,260.98	15,639.50		
Totals						**15,639.50**	**0.00**	**15,639.50**

ILSUI and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount	
Illinois SUI	0800928		Quarterly	357,230.01	23,399.79			
Totals						**0.00**	**0.00**	**0.00**

WI and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount	
Wisconsin SITW	036-1026511657-02		Semi-Monthly	4,234.75	4,234.75	279.19		
Totals						**279.19**	**0.00**	**279.19**

	EE Amount	ER Amount	
Total Tax Liability	**73,564.96**	**18,996.01**	**92,560.97**
Total Payroll Liability		**340,070.75**	**340,070.75**

req. 20193529

VILLAGE OF BENSENVILLE

PAYLOCITY BANK DEBIT

BENSENVILLE
GATEWAY TO OPPORTUNITY

HAND TYPE CHECK?

CHECK #			DATE REQUESTED:	9/20/2019
WIRE TRANSFER #			REQUESTED BY:	Sharon Guest
WARRANT DATE:			DEPT. HEAD APPR.:	

VOUCHER BY:			FINANCE DEPT. APPR.	
ENTERED BY:			VILLAGE MANAGER APPR.	
Bank Debit Date	9/20/2019		HR DIRECTOR APPR.	

VENDOR NO.: 1338 **VENDOR NAME:** Old Second Bank

P.O. NUMBER: **ADDRESS:** Village of Bensenville

INVOICE NO.: Federal Withholding Tax Account

Bank Code:

ORG Code	Object			PROJECT CODE	DESCRIPTION	AMOUNT
11000000	212010				Federal W/H	40,885.35
11000000	212020				Social Security W/H	27,417.90
11000000	212030				Medicare W/H	10,651.34

SUPPORTING DOCUMENTATION OF ALL AMOUNTS IS REQUIRED

TOTAL $ 78,954.59

DESCRIPTION:

EXPLANATION FOR LACK OF P.O. : Federal W/H Tax Payment For P/R Period: 9/20/2019

AP USE ONLY	
BATCH #	

Payroll Totals

Payroll Checks	Check Type	Count	Net Check	Dir Dep Amount	Net Amount	
	Regular	159	0.00	226,979.72	226,979.72	
	Regular	38	25,165.73	1,051.90	26,217.63	
Totals		**197**	**25,165.73**	**228,031.62**	**253,197.35** →	**253,197.35**

Payroll Checks	Check Type	Agency Type	Count	Net Check	Dir Dep Amount	Net Amount	
	Agency	Regular	5	3,306.11	0.00	3,306.11	
	Totals		**5**	**3,306.11**	**0.00**	**3,306.11** →	**3,306.11**
	Total Net Payroll Liability			**28,471.84**	**228,031.62**	**256,503.46** →	**256,503.46**

Tax Liability

FITW and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount	
Federal Income Tax	36-6005794		Semi-Weekly	338,683.47	338,683.47	40,885.35		
Medicare	36-6005794		Semi-Weekly	367,287.28	367,287.28	5,325.67		
Medicare - Employer	36-6005794		Semi-Weekly	367,287.28	367,287.28		5,325.67	
OASDI	36-6005794		Semi-Weekly	225,086.09	221,111.40	13,708.99		
OASDI - Employer	36-6005794		Semi-Weekly	225,086.09	221,111.40		13,708.91	
Totals						**59,920.01**	**19,034.58** →	**78,954.59**

IL and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount	
Illinois SITW	3660057940008		Semi-Weekly	334,645.61	334,645.61	16,255.39		
Totals						**16,255.39**	**0.00** →	**16,255.39**

ILSUI and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount	
Illinois SUI	0800928		Quarterly	372,071.59	25,352.28			
Totals						**0.00**	**0.00** →	**0.00**

WI and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount	
Wisconsin SITW	036-1026511657-02		Semi-Monthly	4,234.75	4,234.75	279.19		
Totals						**279.19**	**0.00** →	**279.19**
			Total Tax Liability			**76,454.59**	**19,034.58** →	**95,489.17**
			Total Payroll Liability				**351,992.63** →	**351,992.63**

VILLAGE OF BENSENVILLE

PAYLOCITY BANK DEBIT

BENSENVILLE
GATEWAY TO OPPORTUNITY

3895

HAND TYPE CHECK?

CHECK #	
WIRE TRANSFER #	
WARRANT DATE:	

DATE REQUESTED:	10/3/2019
REQUESTED BY:	Sharon Guest
DEPT. HEAD APPR.:	

VOUCHER BY:	
ENTERED BY:	
Bank Debit Date	10/4/2019

FINANCE DEPT. APPR.	
VILLAGE MANAGER APPR.	
HR DIRECTOR APPR.	

VENDOR NO.: 1338
VENDOR NAME: Old Second Bank
P.O. NUMBER:
ADDRESS: Village of Bensenville
Federal Withholding Tax Account
INVOICE NO.:

Bank Code:

ORG Code	Object			PROJECT CODE	DESCRIPTION	AMOUNT
11000000	212010				Federal W/H	39,903.23
11000000	212020				Social Security W/H	27,088.21
11000000	212030				Medicare W/H	10,428.53

SUPPORTING DOCUMENTATION OF ALL AMOUNTS IS REQUIRED

TOTAL $ 77,419.97

DESCRIPTION:

EXPLANATION FOR LACK OF P.O. : Federal W/H Tax Payment For P/R Period: 10/4/2019

AP USE ONLY	
BATCH #	

Payroll Summary

Village Of Bensenville (B9156)

Check Date: 10/04/2019

Process: 2019100401

Pay Period: 09/16/2019 to 09/29/2019

Payroll Totals

Payroll Checks	Check Type	Count	Net Check	Dir Dep Amount	Net Amount	
	Regular	149	0.00	224,782.53	224,782.53	
	Regular	35	25,221.80	1,083.59	26,305.39	
Totals		184	25,221.80	225,866.12	251,087.92	251,087.92

Payroll Checks	Check Type	Agency Type	Count	Net Check	Dir Dep Amount	Net Amount	
	Agency	Regular	4	2,226.11	0.00	2,226.11	
	Totals		4	2,226.11	0.00	2,226.11	2,226.11

	Net Check	Dir Dep Amount	Net Amount	
Total Net Payroll Liability	27,447.91	225,866.12	253,314.03	253,314.03

Tax Liability

FITW and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount	
Federal Income Tax	36-6005794		Semi-Weekly	332,529.37	332,529.37	39,903.23		
Medicare	36-6005794		Semi-Weekly	359,607.74	359,607.74	5,214.22		
Medicare - Employer	36-6005794		Semi-Weekly	359,607.74	359,607.74		5,214.31	
OASDI	36-6005794		Semi-Weekly	225,864.45	218,454.64	13,544.02		
OASDI - Employer	36-6005794		Semi-Weekly	225,864.45	218,454.64		13,544.19	
Totals						58,661.47	18,758.50	77,419.97

IL and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount	
Illinois SITW	3660057940008		Semi-Weekly	328,491.51	328,491.51	15,991.33		
Totals						15,991.33	0.00	15,991.33

ILSUI and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount	
Illinois SUI	0800928		Quarterly	364,392.05	23,338.18			
Totals						0.00	0.00	0.00

WI and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount	
Wisconsin SITW	036-1026511657-02		Semi-Monthly	4,234.75	4,234.75	279.19		
Totals						279.19	0.00	279.19

	EE Amount	ER Amount	
Total Tax Liability	74,931.99	18,758.50	93,690.49
Total Payroll Liability		347,004.52	347,004.52

VILLAGE OF BENSENVILLE

PAYLOCITY BANK DEBIT

BENSENVILLE
GATEWAY TO OPPORTUNITY

HAND TYPE CHECK?

CHECK #	
WIRE TRANSFER #	
WARRANT DATE:	

3110

DATE REQUESTED:	10/16/2019
REQUESTED BY:	Sharon Guest
DEPT. HEAD APPR.:	

VOUCHER BY:	
ENTERED BY:	
Bank Debit Date	10/18/2019

FINANCE DEPT. APPR.	
VILLAGE MANAGER APPR.	
HR DIRECTOR APPR.	

VENDOR NO.: 1338 **VENDOR NAME:** Old Second Bank

P.O. NUMBER: **ADDRESS:** Village of Bensenville

INVOICE NO.: Federal Withholding Tax Account

Bank Code:

ORG Code	Object			PROJECT CODE	DESCRIPTION	AMOUNT
11000000	212010				Federal W/H	39,014.37
11000000	212020				Social Security W/H	26,473.50
11000000	212030				Medicare W/H	10,204.83

SUPPORTING DOCUMENTATION OF ALL AMOUNTS IS REQUIRED

TOTAL $ 75,692.70

DESCRIPTION:

EXPLANATION FOR LACK OF P.O. : Federal W/H Tax Payment For P/R Period: 10/18/2019

AP USE ONLY	
BATCH #	

Payroll Totals

Payroll Checks		Check Type	Count	Net Check	Dir Dep Amount	Net Amount	
		Regular	153	0.00	218,506.06	218,506.06	
		Regular	37	23,618.67	1,087.44	24,706.11	
	Totals		**190**	**23,618.67**	**219,593.50**	**243,212.17** →	**243,212.17**

Payroll Checks	Check Type	Agency Type	Count	Net Check	Dir Dep Amount	Net Amount	
	Agency	Regular	5	3,270.11	0.00	3,270.11	
	Totals		**5**	**3,270.11**	**0.00**	**3,270.11** →	**3,270.11**
	Total Net Payroll Liability			**26,888.78**	**219,593.50**	**246,482.28** →	**246,482.28**

Tax Liability

FITW and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount	
Federal Income Tax	36-6005794		Semi-Weekly	325,520.63	325,520.63	39,014.37		
Medicare	36-6005794		Semi-Weekly	351,885.51	351,885.51	5,102.49		
Medicare - Employer	36-6005794		Semi-Weekly	351,885.51	351,885.51		5,102.34	
OASDI	36-6005794		Semi-Weekly	220,505.12	213,495.31	13,236.79		
OASDI - Employer	36-6005794		Semi-Weekly	220,505.12	213,495.31		13,236.71	
Totals						**57,353.65**	**18,339.05** →	**75,692.70**

IL and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount	
Illinois SITW	3660057940008		Semi-Weekly	321,482.77	321,482.77	15,604.27		
Totals						**15,604.27**	**0.00** →	**15,604.27**

ILSUI and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount	
Illinois SUI	0800928		Quarterly	356,669.82	23,492.71			
Totals						**0.00**	**0.00** →	**0.00**

WI and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount	
Wisconsin SITW	036-1026511657-02		Semi-Monthly	4,234.75	4,234.75	279.19		
Totals						**279.19**	**0.00** →	**279.19**

Total Tax Liability		**73,237.11**	**18,339.05** →	**91,576.16**
Total Payroll Liability			**338,058.44** →	**338,058.44**

VILLAGE OF BENSENVILLE

PAYLOCITY BANK DEBIT

BENSENVILLE
GATEWAY TO OPPORTUNITY

HAND TYPE CHECK?

CHECK #	
WIRE TRANSFER #	
WARRANT DATE:	

4087

DATE REQUESTED:	10/30/2019
REQUESTED BY:	Sharon Guest
DEPT. HEAD APPR.:	

VOUCHER BY:	
ENTERED BY:	
Bank Debit Date	10/31/2019

FINANCE DEPT. APPR.	
VILLAGE MANAGER APPR.	
HR DIRECTOR APPR.	

VENDOR NO.: 1338 **VENDOR NAME:** Old Second Bank

P.O. NUMBER: **ADDRESS:** Village of Bensenville

INVOICE NO.: Federal Withholding Tax Account

Bank Code:

ORG Code	Object			PROJECT CODE	DESCRIPTION	AMOUNT
11000000	212010				Federal W/H	39,424.09
11000000	212020				Social Security W/H	27,415.27
11000000	212030				Medicare W/H	10,279.15

SUPPORTING DOCUMENTATION OF ALL AMOUNTS IS REQUIRED

TOTAL	$	77,118.51

DESCRIPTION:

EXPLANATION FOR LACK OF P.O. : Federal W/H Tax Payment For P/R Period: 10/31/2019

AP USE ONLY	
BATCH #	

Payroll Summary

Village Of Bensenville (B9156)

Check Date: 11/01/2019

Process: 201911010l

Pay Period: 10/14/2019 to 10/27/2019

Payroll Totals

Payroll Checks		Check Type	Count	Net Check	Dir Dep Amount	Net Amount	
		Regular	146	0.00	218,560.89	218,560.89	
		Regular	38	27,605.44	1,069.06	28,674.50	
	Totals		**184**	**27,605.44**	**219,629.95**	**247,235.39** →	**247,235.39**

Payroll Checks	Check Type	Agency Type	Count	Net Check	Dir Dep Amount	Net Amount	
	Agency	Regular	4	2,226.11	0.00	2,226.11	
	Totals		**4**	**2,226.11**	**0.00**	**2,226.11** →	**2,226.11**
	Total Net Payroll Liability			**29,831.55**	**219,629.95**	**249,461.50** →	**249,461.50**

Tax Liability

FITW and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount	
Federal Income Tax	36-6005794		Semi-Weekly	328,169.28	328,169.28	39,424.09		
Medicare	36-6005794		Semi-Weekly	354,453.79	354,453.79	5,139.57		
Medicare - Employer	36-6005794		Semi-Weekly	354,453.79	354,453.79		5,139.58	
OASDI	36-6005794		Semi-Weekly	228,500.69	221,090.88	13,707.64		
OASDI - Employer	36-6005794		Semi-Weekly	228,500.69	221,090.88		13,707.63	
Totals						**58,271.30**	**18,847.21** →	**77,118.51**

IL and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount	
Illinois SITW	3660057940008		Semi-Weekly	324,131.42	324,131.42	15,798.03		
Totals						**15,798.03**	**0.00** →	**15,798.03**

ILSUI and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount	
Illinois SUI	0800928		Quarterly	359,238.10	20,903.04			
Totals						**0.00**	**0.00** →	**0.00**

WI and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount	
Wisconsin SITW	036-1026511657-02		Semi-Monthly	4,234.75	4,234.75	279.19		
Totals						**279.19**	**0.00** →	**279.19**
			Total Tax Liability			**74,348.52**	**18,847.21** →	**93,195.73**
			Total Payroll Liability				**342,657.23** →	**342,657.23**

1338
4118

Old Second
National Bank

October 1, 2019

Village of Bensenville
Attn: Julie McManus, Finance
12 S. Center St.
Bensenville, IL 60106

Re: Series 2019 GO Bonds

Dear Ms. Mcmanus:

The payment due on 12-15-19 for the above mentioned bond is As follows. Please remit payment to my attention at the address below.

Principal due		$195,200.00	41090920 715100
Interest due		$ 25,242.50	716100
	Total	$220,442.50	

If you have any questions, please contact me at 630-906-2303.

Sincerely,

Shirley Cantrell

Shirley Cantrell
Shareholder Relations Manager

req 20194318

VILLAGE OF BENSENVILLE

PAYLOCITY BANK DEBIT

BENSENVILLE
GATEWAY TO OPPORTUNITY

HAND TYPE CHECK?

CHECK #	
WIRE TRANSFER #	
WARRANT DATE:	

DATE REQUESTED:	11/14/2019
REQUESTED BY:	Sharon Guest
DEPT. HEAD APPR.:	

VOUCHER BY:	
ENTERED BY:	
Bank Debit Date	11/15/2019

FINANCE DEPT. APPR.	
VILLAGE MANAGER APPR.	
HR DIRECTOR APPR.	

VENDOR NO.: 1338 **VENDOR NAME:** Old Second Bank

P.O. NUMBER: **ADDRESS:** Village of Bensenville

INVOICE NO.: Federal Withholding Tax Account

Bank Code:

ORG Code	Object			PROJECT CODE	DESCRIPTION	AMOUNT
11000000	212010				Federal W/H	38,298.86
11000000	212020				Social Security W/H	26,930.02
11000000	212030				Medicare W/H	10,180.44

SUPPORTING DOCUMENTATION OF ALL AMOUNTS IS REQUIRED

TOTAL $ 75,409.32

DESCRIPTION:

EXPLANATION FOR LACK OF P.O. : Federal W/H Tax Payment For P/R Period: 11/15/2019

AP USE ONLY	
BATCH #	

Payroll Summary

Village Of Bensenville (B9156)

Check Date: 11/15/2019
Process: 2019111501
Pay Period: 10/28/2019 to 11/10/2019

Payroll Totals

Payroll Checks		Check Type	Count	Net Check	Dir Dep Amount	Net Amount	
		Regular	154	0.00	218,090.41	218,090.41	
		Regular	39	27,121.53	1,059.38	28,180.91	
	Totals		**193**	**27,121.53**	**219,149.79**	**246,271.32** →	**246,271.32**

Payroll Checks	Check Type	Agency Type	Count	Net Check	Dir Dep Amount	Net Amount	
	Agency	Regular	4	1,976.11	0.00	1,976.11	
	Totals		**4**	**1,976.11**	**0.00**	**1,976.11** →	**1,976.11**
	Total Net Payroll Liability			**29,097.64**	**219,149.79**	**248,247.43** →	**248,247.43**

Tax Liability

FITW and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount	
Federal Income Tax	36-6005794		Semi-Weekly	325,237.79	325,237.79	38,298.86		
Medicare	36-6005794		Semi-Weekly	351,046.02	351,046.02	5,090.27		
Medicare - Employer	36-6005794		Semi-Weekly	351,046.02	351,046.02		5,090.17	
OASDI	36-6005794		Semi-Weekly	225,705.80	217,177.69	13,465.00		
OASDI - Employer	36-6005794		Semi-Weekly	225,705.80	217,177.69		13,465.02	
Totals						**56,854.13**	**18,555.19** →	**75,409.32**

IL and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount	
Illinois SITW	3660057940008		Semi-Weekly	321,199.93	321,199.93	15,593.04		
Totals						**15,593.04**	**0.00** →	**15,593.04**

ILSUI and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount	
Illinois SUI	0800928		Quarterly	355,830.33	21,438.71			
Totals						**0.00**	**0.00** →	**0.00**

WI and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount	
Wisconsin SITW	036-1026511657-02		Semi-Monthly	4,234.75	4,234.75	279.19		
Totals						**279.19**	**0.00** →	**279.19**
			Total Tax Liability			**72,726.36**	**18,555.19** →	**91,281.55**

Total Payroll Liability	**339,528.98** →	**339,528.98**

VILLAGE OF BENSENVILLE

PAYLOCITY BANK DEBIT

BENSENVILLE
GATEWAY TO OPPORTUNITY

4537

HAND TYPE CHECK? [ ]

CHECK #	
WIRE TRANSFER #	
WARRANT DATE:	

DATE REQUESTED:	11/27/2019
REQUESTED BY:	Sharon Guest
DEPT. HEAD APPR.:	

VOUCHER BY:	
ENTERED BY:	
Bank Debit Date	11/29/2019

FINANCE DEPT. APPR.	
VILLAGE MANAGER APPR.	
HR DIRECTOR APPR.	

VENDOR NO.: 1338 **VENDOR NAME:** Old Second Bank

P.O. NUMBER: **ADDRESS:** Village of Bensenville

INVOICE NO.: Federal Withholding Tax Account

Bank Code:

ORG Code	Object			PROJECT CODE	DESCRIPTION	AMOUNT
11000000	212010				Federal W/H	39,279.02
11000000	212020				Social Security W/H	26,721.38
11000000	212030				Medicare W/H	10,312.28

SUPPORTING DOCUMENTATION OF ALL AMOUNTS IS REQUIRED

TOTAL $ 76,312.68

DESCRIPTION:

EXPLANATION FOR LACK OF P.O. : Federal W/H Tax Payment For P/R Period: 11/29/2019

AP USE ONLY	
BATCH #	

Payroll Totals

Payroll Checks		Check Type	Count	Net Check	Dir Dep Amount	Net Amount	
		Regular	147	0.00	220,602.23	220,602.23	
		Regular	35	25,360.75	1,077.18	26,437.93	
	Totals		**182**	**25,360.75**	**221,679.41**	**247,040.16** →	**247,040.16**

Payroll Checks	Check Type	Agency Type	Count	Net Check	Dir Dep Amount	Net Amount	
	Agency	Regular	4	3,257.51	0.00	3,257.51	
	Totals		**4**	**3,257.51**	**0.00**	**3,257.51** →	**3,257.51**
	Total Net Payroll Liability			**28,618.26**	**221,679.41**	**250,297.67** →	**250,297.67**

Tax Liability

FITW and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount	
Federal Income Tax	36-6005794		Semi-Weekly	330,000.20	330,000.20	39,279.02		
Medicare	36-6005794		Semi-Weekly	355,599.76	355,599.76	5,156.08		
Medicare - Employer	36-6005794		Semi-Weekly	355,599.76	355,599.76		5,156.20	
OASDI	36-6005794		Semi-Weekly	228,554.13	215,495.29	13,360.67		
OASDI - Employer	36-6005794		Semi-Weekly	228,554.13	215,495.29		13,360.71	
Totals						**57,795.77**	**18,516.91** →	**76,312.68**

IL and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount	
Illinois SITW	3660057940008		Semi-Weekly	325,821.65	325,821.65	15,873.35		
Totals						**15,873.35**	**0.00** →	**15,873.35**

ILSUI and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount	
Illinois SUI	0800928		Quarterly	360,384.07	20,186.81			
Totals						**0.00**	**0.00** →	**0.00**

WI and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount	
Wisconsin SITW	036-1026511657-02		Semi-Monthly	4,375.44	4,375.44	288.01		
Totals						**288.01**	**0.00** →	**288.01**
			Total Tax Liability			**73,957.13**	**18,516.91** →	**92,474.04**
			Total Payroll Liability				**342,771.71** →	**342,771.71**

VILLAGE OF BENSENVILLE

PAYLOCITY BANK DEBIT

BENSENVILLE
GATEWAY TO OPPORTUNITY

HAND TYPE CHECK?

CHECK #	
WIRE TRANSFER #	
WARRANT DATE:	

4677

DATE REQUESTED:	12/12/2019
REQUESTED BY:	Sharon Guest
DEPT. HEAD APPR.:	

VOUCHER BY:	
ENTERED BY:	
Bank Debit Date	12/13/2019

FINANCE DEPT. APPR.	
VILLAGE MANAGER APPR.	
HR DIRECTOR APPR.	

VENDOR NO.: 1338
VENDOR NAME: Old Second Bank
P.O. NUMBER:
ADDRESS: Village of Bensenville
Federal Withholding Tax Account
INVOICE NO.:

Bank Code:

ORG Code	Object			PROJECT CODE	DESCRIPTION	AMOUNT
11000000	212010				Federal W/H	47,636.08
11000000	212020				Social Security W/H	28,560.86
11000000	212030				Medicare W/H	12,407.37

SUPPORTING DOCUMENTATION OF ALL AMOUNTS IS REQUIRED

TOTAL $ 88,604.31

DESCRIPTION:

EXPLANATION FOR LACK OF P.O. : Federal W/H Tax Payment For P/R Period: 12/13/2019

AP USE ONLY	
BATCH #	

Payroll Summary	Check Date: 12/13/2019	
Village Of Bensenville (B9156)	Process: 2019121301	
	Pay Period: 11/25/2019 to 12/08/2019	

Payroll Totals

Payroll Checks		Check Type	Count	Net Check	Dir Dep Amount	Net Amount	
		Regular	184	0.00	269,653.27	269,653.27	
		Regular	33	24,526.67	2,318.37	26,845.04	
	Totals		**217**	**24,526.67**	**271,971.64**	**296,498.31** →	**296,498.31**

Payroll Checks	Check Type	Agency Type	Count	Net Check	Dir Dep Amount	Net Amount	
	Agency	Regular	4	2,226.11	0.00	2,226.11	
	Totals		**4**	**2,226.11**	**0.00**	**2,226.11** →	**2,226.11**
	Total Net Payroll Liability			**26,752.78**	**271,971.64**	**298,724.42** →	**298,724.42**

Tax Liability

FITW and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount	
Federal Income Tax	36-6005794		Semi-Weekly	398,479.56	398,479.56	47,636.08		
Medicare	36-6005794		Semi-Weekly	427,963.62	427,963.62	6,201.90		
Medicare - Employer	36-6005794		Semi-Weekly	427,963.62	427,963.62		6,205.47	
OASDI	36-6005794		Semi-Weekly	246,523.06	230,360.41	14,278.51		
OASDI - Employer	36-6005794		Semi-Weekly	246,523.06	230,360.41		14,282.35	
Totals						**68,116.49**	**20,487.82** →	**88,604.31**

IL and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount	
Illinois SITW	3660057940008		Semi-Weekly	391,866.60	391,866.60	18,760.72		
Totals						**18,760.72**	**0.00** →	**18,760.72**

ILSUI and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount	
Illinois SUI	0800928		Quarterly	425,222.62	15,578.64			
Totals						**0.00**	**0.00** →	**0.00**

WI and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount	
Wisconsin SITW	036-1026511657-02		Semi-Monthly	6,928.00	6,928.00	461.73		
Totals						**461.73**	**0.00** →	**461.73**
			Total Tax Liability			**87,338.94**	**20,487.82** →	**107,826.76**
			Total Payroll Liability				**406,551.18** →	**406,551.18**

req 20194856

VILLAGE OF BENSENVILLE

PAYLOCITY BANK DEBIT

BENSENVILLE
GATEWAY TO OPPORTUNITY

HAND TYPE CHECK?

CHECK #	
WIRE TRANSFER #	
WARRANT DATE:	

DATE REQUESTED:	12/23/2019
REQUESTED BY:	Sharon Guest
DEPT. HEAD APPR.:	

VOUCHER BY:	
ENTERED BY:	
Bank Debit Date	12/27/2019

FINANCE DEPT. APPR.	
VILLAGE MANAGER APPR.	
HR DIRECTOR APPR.	

VENDOR NO.: 1338
VENDOR NAME: Old Second Bank
P.O. NUMBER:
ADDRESS: Village of Bensenville
Federal Withholding Tax Account
INVOICE NO.:

Bank Code:

ORG Code	Object			PROJECT CODE	DESCRIPTION	AMOUNT
11000000	212010				Federal W/H	38,582.18
11000000	212020				Social Security W/H	25,929.17
11000000	212030				Medicare W/H	10,185.71

SUPPORTING DOCUMENTATION OF ALL AMOUNTS IS REQUIRED

TOTAL $ 74,697.06

DESCRIPTION:

EXPLANATION FOR LACK OF P.O. : Federal W/H Tax Payment For P/R Period: 12/27/2019

AP USE ONLY	
BATCH #	

Payroll Summary

Village Of Bensenville (B9156)

Check Dates: 12/27/2019 to 12/27/2019

Processes: 2019122701 - 2019122702

Pay Periods: 12/09/2019 to 12/22/2019

Payroll Totals

Payroll Checks		Check Type	Count	Net Check	Dir Dep Amount	Net Amount	
		Manual	1	0.00	0.00	0.00	
		Regular	161	0.00	222,964.03	222,964.03	
		Regular	31	20,418.25	2,195.14	22,613.39	
	Totals		**193**	**20,418.25**	**225,159.17**	**245,577.42** →	**245,577.42**

Payroll Checks	Check Type	Agency Type	Count	Net Check	Dir Dep Amount	Net Amount	
	Agency	Regular	6	2,997.34	0.00	2,997.34	
	Totals		**6**	**2,997.34**	**0.00**	**2,997.34** →	**2,997.34**
	Total Net Payroll Liability			**23,415.59**	**225,159.17**	**248,574.76** →	**248,574.76**

Tax Liability

FITW and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount	
Federal Income Tax	36-6005794		Semi-Weekly	326,734.87	326,734.87	38,582.18		
Medicare	36-6005794		Semi-Weekly	351,439.15	351,439.15	5,089.84		
Medicare - Employer	36-6005794		Semi-Weekly	351,439.15	351,439.15		5,095.87	
OASDI	36-6005794		Semi-Weekly	221,966.37	209,105.72	12,964.62		
OASDI - Employer	36-6005794		Semi-Weekly	221,966.37	209,105.72		12,964.55	
Totals						**56,636.64**	**18,060.42** →	**74,697.06**

IL and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount	
Illinois SITW	3660057940008		Semi-Weekly	322,697.01	322,697.01	15,649.38		
Totals						**15,649.38**	**0.00** →	**15,649.38**

ILSUI and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount	
Illinois SUI	0800928		Quarterly	356,458.70	19,950.79			
Totals						**0.00**	**0.00** →	**0.00**

WI and Related Taxes	Tax Id	Rate	Frequency	Wage	Cap Wages	EE Amount	ER Amount	
Wisconsin SITW	036-1026511657-02		Semi-Monthly	4,234.75	4,234.75	279.19		
Totals						**279.19**	**0.00** →	**279.19**
			Total Tax Liability			**72,565.21**	**18,060.42** →	**90,625.63**
			Total Payroll Liability				**339,200.39** →	**339,200.39**

Edward R. Kirby & Associates, Inc.

Elmhurst, IL 60126-1313
909 S. Illinois Route 83

Phone: 630-941-1700
Fax: 630-941-1750

Ms. Mary Ribando
Village of Bensenville
Police Fire Commission
12 S. Center Street
Bensenville, IL 60106

Date	4/19/2019
Invoice #	42404
Our File No.	BG-002-19

DUE WHEN RECEIVED

FOR PROFESSIONAL SERVICES RENDERED

RICARDO CHAPARRO

Conducted a background investigation of Ricardo Chaparro.	1,500.00
Expenses:	
Mileage	55.00
Credit Report	19.00
Drivers Abstract	12.00
Student Clearinghouse	59.80

Balance Due $1,645.80

TAX I.D. 36-2681979

Edward R. Kirby & Associates, Inc.

Elmhurst, IL 60126-1313
909 S. Illinois Route 83

Phone: 630-941-1700
Fax: 630-941-1750

Ms. Mary Ribando
Village of Bensenville
Police Fire Commission
12 S. Center Street
Bensenville, IL 60106

Date	4/19/2019
Invoice #	42405
Our File No.	BG-003-19

DUE WHEN RECEIVED

FOR PROFESSIONAL SERVICES RENDERED

ADAM J. KADLEC

Conducted a background investigation of Adam J. Kadlec.	1,500.00
Expenses:	
Mileage	38.50
Credit Report	19.00
Drivers Abstract	12.00
Student Clearinghouse	14.95

Balance Due $1,584.45

TAX I.D. 36-2681979

Edward R. Kirby & Associates, Inc.

Elmhurst, IL 60126-1313
909 S. Illinois Route 83

Phone: 630-941-1700
Fax: 630-941-1750

Ms. Mary Ribando
Village of Bensenville
Police Fire Commission
12 S. Center Street
Bensenville, IL 60106

Date	4/19/2019
Invoice #	42406
Our File No.	BG-004-19

DUE WHEN RECEIVED

FOR PROFESSIONAL SERVICES RENDERED

BTYAN J. MADDEN

Conducted a background investigation of Bryan J. Madden.	1,500.00
Expenses:	
Mileage	27.50
Credit Report	19.00
Drivers Abstract	12.00
Student Clearinghouse	16.95
Employment Verification Fees	122.85

Balance Due $1,698.30

TAX I.D. 36-2681979

Edward R. Kirby & Associates, Inc.

Elmhurst, IL 60126-1313
909 S. Illinois Route 83

Phone: 630-941-1700
Fax: 630-941-1750

Ms. Mary Ribando
Village of Bensenville
Police Fire Commission
12 S. Center Street
Bensenville, IL 60106

Date	8/8/2019
Invoice #	42579
Our File No.	BG-012-19

DUE WHEN RECEIVED

FOR PROFESSIONAL SERVICES RENDERED

ANTHONY CARRION

Conducted a limited background investigation of Anthony Carrion.

3.5 Hours @ $100.00	350.00
Expenses:	
Credit Report	25.00
Drivers Abstract	12.00

Balance Due $387.00

TAX I.D. 36-2681979

Calzante Construction
236 S Lalonde Unit B
Addison, IL 60101
(630) 890-3800
jimcalzante@gmail.com
calzanteconstruction.com

Invoice

BILL TO
Vince English
Village of Bensenville
717 East Jefferson St
Bensenville, IL 60106

INVOICE # 1489
DATE 04/23/2019
DUE DATE 04/23/2019
TERMS Due on receipt

ACTIVITY	AMOUNT
Address 9 S Center St, Bensenville	0.00
Tuckpoint Grind and spot Tuckpoint front of building only that have missing mortar or cracks with gray type N mortar. Mortar to finished with a U joint.	3,190.00
Machinery Machinery	575.00
Acid wash Acid wash brick	230.00
Note Estimate includes labor and material. Permits, permit fees, registration fees and bonds are not included estimate. Brick and Mortar will not be an exact match due to age and type. Calzante construction is not responsible for any damage to landscaping or grass. Payment will be due upon completion. Please call with any questions.	0.00

BALANCE DUE **$3,995.00**

count #'s ____________

4-23-2019

rvisors Signature Date

4-24

ectors Signature Date