# Baldwin County Commission

## Legislation Details (With Text)

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|---|---|---|---|
| **File #:** | 19-0211 **Version:** 1 | | |
| **Type:** | Committee Report - Finance/Administration Division | **Status:** | Agenda Ready |
| **File created:** | 11/7/2018 | **In control:** | Baldwin County Commission Regular |
| **On agenda:** | 11/20/2018 | **Final action:** | |
| **Title:** | Payment of Bills | | |
| **Indexes:** | | | |
| **Attachments:** | 1. Vendors Exceeding $20,000, 2. Accounts Payable Payments, 3. Summary Reports | | |

| Date | Ver. | Action By | Action | Result |
|---|---|---|---|---|
| 11/20/2018 | 1 | Baldwin County Commission Regular | Approved | Pass |

**Meeting Type:** BCC Regular Meeting
**Meeting Date:** 11/20/2018
**Item Status:** New
**From:** Kimberly Creech, Clerk/Treasurer
　　　　 Eva Cutsinger, Senior Accountant
**Submitted by:** Sharon Grant, Accounts Payable Supervisor

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## ITEM TITLE

Payment of Bills

## STAFF RECOMMENDATION

Pay bills totaling $2,626,637.13 (two million, six hundred twenty-six thousand, six hundred thirty-seven dollars and thirteen cents) with the exception of those vendors Commissioners request to be pulled, which are listed in the Baldwin County Accounts Payable Payments.

Of this amount, $177,497.33 (one hundred seventy-seven thousand, four hundred ninety-seven dollars and thirty-three cents) is payable to the Baldwin County Board of Education for its portion of the County Sales and Use Tax.

## BACKGROUND INFORMATION

**Previous Commission action/date:** N/A

**Background:** N/A

## FINANCIAL IMPACT

**Total cost of recommendation:**  N/A

**Budget line item(s) to be used:**  N/A

**If this is not a budgeted expenditure, does the recommendation create a need for funding?**
N/A

## LEGAL IMPACT

**Is legal review necessary for this staff recommendation and related documents?**
N/A

**Reviewed/approved by:** N/A

**Additional comments:** N/A

## ADVERTISING REQUIREMENTS

**Is advertising required for this recommendation?**  N/A

**If the proof of publication affidavit is not attached, list the reason:** N/A

## FOLLOW UP IMPLEMENTATION

**For time-sensitive follow up, select deadline date for follow up:** N/A

**Individual(s) responsible for follow up:** N/A

**Action required (list contact persons/addresses if documents are to be mailed or emailed):**
N/A

**Additional instructions/notes:** N/A