

Vendor name	Invoice number	Invoice date	Claim Number	Account number	Description	Amount	Check Number	Check Date	Division
ST LUKES REGIONAL MEDICAL CENTER-CARES PROGRAM	CR14-23-03028	3/15/23	593412	001-08-339-15-521132	M MORALES	\$320.00	619459	4/10/23	Prosecuting Attorney
				001-08-339-15-521132 Total		\$320.00			
ST LUKES REGIONAL MEDICAL CENTER-CARES PROGRAM	CR14-23-03028 MILES	3/15/23	593412	001-08-339-15-521135		\$35.37	619459	4/10/23	Prosecuting Attorney
				001-08-339-15-521135 Total		\$35.37			
DAVID KRAWCZYK	RENTAL CAR	3/15/23	593574	001-08-339-15-521220		\$319.04	619332	4/10/23	Prosecuting Attorney
DAVID KRAWCZYK	PARKING	3/19/23	593574	001-08-339-15-521220	5 DAYS	\$70.00	619332	4/10/23	Prosecuting Attorney
				001-08-339-15-521220 Total		\$389.04			
VERIZON WIRELESS SERVICES LLC	9930750978	3/22/23	593571	001-08-339-15-542203		\$1,922.95	619486	4/10/23	Prosecuting Attorney
				001-08-339-15-542203 Total		\$1,922.95			
US POSTAL SERVICE	MAR POSTAGE	3/30/23	593569	001-08-339-15-543305		\$618.22	619483	4/10/23	Prosecuting Attorney
US POSTAL SERVICE	MAR BRM	3/30/23	593567	001-08-339-15-543305		\$18.12	619484	4/10/23	Prosecuting Attorney
				001-08-339-15-543305 Total		\$636.34			
BRATCHER, KIMBERLEE	2/2-2/3 PARKING	2/3/23	593461	001-08-339-15-545504		\$35.00	619298	4/10/23	Prosecuting Attorney
DYAL, MATT	2/1-2/3 PARKING	2/3/23	593366	001-08-339-15-545504		\$30.00	619337	4/10/23	Prosecuting Attorney
				001-08-339-15-545504 Total		\$65.00			
ELERICK, NATALIA	MILEAGE	3/27/23	593448	001-08-339-15-548019		\$339.42	619341	4/10/23	Prosecuting Attorney
MAUPIN, AMANDA	2/23 MILES	3/28/23	593472	001-08-339-15-548019		\$41.79	619402	4/10/23	Prosecuting Attorney
				001-08-339-15-548019 Total		\$381.21			
ELERICK, NATALIA	4/7-4/14 PER DIEM	3/27/23	593448	001-08-339-15-548020		\$442.50	619341	4/10/23	Prosecuting Attorney
WALKER, ANTHONY	4/7-4/14 PER DIEM	3/27/23	593449	001-08-339-15-548020		\$442.50	619489	4/10/23	Prosecuting Attorney
				001-08-339-15-548020 Total		\$885.00			

Vendor name	Invoice number	Invoice date	Claim Number	Account number	Description	Amount	Check Number	Check Date	Division
MIKE MORRISON SHERIFF	C23-00412	3/29/23	593547	001-08-339-15-548115	CR14-23-03810	\$90.00	619407	4/10/23	Prosecuting Attorney
				001-08-339-15-548115 Total		\$90.00			
ST LUKES REGIONAL MEDICAL CENTER-CARES PROGRAM	CR14-23-00825	3/9/23	593413	001-08-339-15-548501		\$25.00	619459	4/10/23	Prosecuting Attorney
ST LUKES REGIONAL MEDICAL CENTER-CARES PROGRAM	GRAND JURY	3/21/23	593413	001-08-339-15-548501		\$40.00	619459	4/10/23	Prosecuting Attorney
ST LUKES REGIONAL MEDICAL CENTER-CARES PROGRAM	GRAND JURY	3/22/23	593413	001-08-339-15-548501		\$40.00	619459	4/10/23	Prosecuting Attorney
				001-08-339-15-548501 Total		\$105.00			
WESTERN BUILDING SUPPLY, INC	55666	3/28/23	593590	001-08-339-15-554403		\$236.67	619494	4/10/23	Prosecuting Attorney
				001-08-339-15-554403 Total		\$236.67			
						\$5,066.58			Prosecuting Attorney Total



CANYON COUNTY AUDITOR

111 NO. 11th Ave Suite 320
Caldwell, Idaho 83605

Do Not Use This Space

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NAME David Krawczyk

ADDRESS c/o CCPA

CITY / STATE _____

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INVOICE NUMBER	INVOICE DATE	P.O. #	DESCRIPTION	AMOUNT \$
90147892928	3/15/2023		Reimbursement for rental car for Genealogy	\$319.04
			DNA Conf. in San Diego, CA March 12-15, 2023	
			*DPAs Ted Lagerwall & S. Jorgensen also	
			attended this conference	
	3/19/2023		Reimbursement for airport parking for	\$70.00
			Genealogy DNA Conf.	
			March 12-15, 2023 & March 19, 2023 @ \$14.00	
			per day (employee extended trip for	
			March 16-18, 2023)	
TOTAL				\$389.04

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I CERTIFY that the above account is correct; that the services and/or merchandise were furnished as stated, and the same is justly due and unpaid.

PRINT NAME _____

Diane Hoadley

SIGNATURE _____

Diane Hoadley

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Bryan F. Taylor

(I CERTIFY THAT THESE ARE ACTUAL AND
NECESSARY EXPENDITURES - IC 31-3101)

Print Name _____

Bryan F. Taylor

Department Name _____

Prosecuting Attorney

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FUND	DEPT.	DIV	BASIC	OBJ	AMOUNT
001	08	339	15	521220	\$389.04

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DISAPPROVED _____

DATE _____

COMMENTS _____

**Budget Line Item for Verizon Bill
March 2023**

		TOTAL
Assessor	103-38-280-14-542203	
Building Maint.	001-14-226-19-542203	
Commissioners	001-02-205-13-542203	
Communications	001-26-207-13-542203	
Coroner	001-11-217-19-542203	
County Fleet	001-24-263-19-542203	
Court Clerks	104-07-336-12-542203	
Drug Court	122-46-829-92-542203	
DSD	001-15-231-19-542203	
Elections	001-01-220-14-542203	
Elections	124-12-221-14-542203	
Fair Board	106-49-313-54--542203	
Family Court	104-40-822-92-542203	
HR	001-18-246-19-542203	
IT	001-16-237-14-542203	
Juv Detention	001-25-348-23-542203	
Juv Probation	104-44-804-93-542203	
Landfill	401-72-373-32-542203	
Misd Probation	116-42-294-21-542203	
Nampa PA	001-08-344-15-542203	
PA	001-08-339-15-542203	\$1,922.95
Parks	108-52-312-52-542203	
PD	116-27-342-15-542203	
Recorders	001-01-202-14-542203	
Security Dept.	001-17-222-19-542203	
TCA	104-40-285-12-542203	
TCA - Sue Hill	122-46-823-92-542203	
Weed Control	102-35-275-33-542203	
Weed Control	112-60-322-33-542203	
Total		\$

Grand Total

\$

**Budget Line Items for Department Postage
Month of March 2023**

<u>Office/Department</u>	<u>Account#</u>	<u>Total</u>
Assessor	103-38-280-14-543305	
Assessor DMV	001-06-213-14-543305	
Auditor/Recorder/Indigent	001-01-202-14-543305	
Commissioner	001-02-205-13-543305	
Coroner	001-11-217-19-543305	
District	104-40-285-12-543305	
Drug Court	122-46-825-92-543305	
DSD	001-15-231-19-543305	
DUI Court	122-46-829-92-543305	
Elections	001-01-220-14-543305	
Elections	124-12-221-14-543305	
Family Court Services	104-40-285-12-543305	
HRD	001-18-246-19-543305	
Information Tech.	001-16-237-14-543305	
Jury	104-40-285-12-543305	
Juv Center	001-25-348-23-543305	
Juv Probation	104-44-300-27-543305	
Mag Court	104-40-285-12-543305	
Maintenance	001-14-226-19-543305	
Mental Health	122-46-823-92-543305	
Nampa PA	001-08-344-15-543305	
Park-Rec	108-52-312-52-543305	
Pros Attorney	001-08-339-15-543305	\$618.22
Public Defender	116-27-342-15-543305	
Sheriff	116-03-410-21-543305	
Shop	001-24-263-19-543305	
TCA	104-40-285-12-543305	
Treasurer	001-05-208-14-543305	
Vetrans Court	122-46-830-92-543305	
Weed Control	112-60-322-33-543305	
Weed Control	102-35-275-33-543305	
Fairgrounds	106-49-313-54-543305	
Solid Waste	401-72-373-32-543305	
Treas. Tax Deed Certified	001-05-208-14-521139	
CC Security Dept.	001-17-222-19-543305	
Total		\$

Budget Line Items for Department Postage **Month of**

<u>Office/Department</u>	<u>Account#</u>	<u>BRM Total</u>
Assessor	103-38-280-14-543305	█
Assessor DMV	001-06-213-14-543305	
Auditor/Recorder/Indigent	001-01-202-14-543305	
Commissioner	001-02-205-13-543305	
Coroner	001-11-217-19-543305	
District	104-40-285-12-543305	
Drug Court	122-46-825-92-543305	
DSD	001-15-231-19-543305	█
DUI Court	122-46-829-92-543305	
Elections	001-01-220-14-543305	
Elections	124-12-221-14-543305	
Family Court Services	104-40-285-12-543305	
HRD	001-18-246-19-543305	
Information Tech.	001-16-237-14-543305	
Jury	104-40-285-12-543305	
Juv Center	001-25-348-23-543305	
Juv Probation	104-44-300-27-543305	
Mag Court	104-40-285-12-543305	█
Maintenance	001-14-226-19-543305	
Mental Health	122-46-823-92-543305	
Nampa PA	001-08-344-15-543305	
Park-Rec	108-52-312-52-543305	█
Pros Attorney	001-08-339-15-543305	\$18.12
Public Defender	116-27-342-15-543305	█
Sheriff	116-03-410-21-543305	█
Shop	001-24-263-19-543305	
TCA	104-40-285-12-543305	
Treasurer	001-05-208-14-543305	
Vetrans Court	122-46-830-92-543305	
Weed Control	112-60-322-33-543305	
Weed Control	102-35-275-33-543305	
Fairgrounds	106-49-313-54-543305	
Solid Waste	401-72-373-32-543305	
CC Security Dept.	001-17-222-19-543305	
Total		\$ █



CANYON COUNTY AUDITOR

111 NO. 11th Ave Suite 320
Caldwell, Idaho 83605

Do Not Use This Space

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NAME Natalia Elerick

ADDRESS c/o CCPA

CITY / STATE _____

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INVOICE NUMBER	INVOICE DATE	P.O. #	DESCRIPTION	AMOUNT \$
	3/27/2023		CR14-22-12997 - State vs. Trevor Stebbins	
			Per Diem for Jury Trial scheduled for	
			April 10-14, 2023	
			April 7, 2023 - Travel day at \$44.25 per day	\$44.25
			April 8-13, 2023 - 6 days at \$59.00 per day	\$354.00
			April 14, 2023 - Travel day at \$44.25 per day	\$44.25
			Mileage Reimbursement - Roundtrip from	
			Pocatello, ID to Caldwell, ID	
			518.2 miles at \$.655 per mile	\$339.42
TOTAL				\$781.92

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I CERTIFY that the above account is correct; that the services and/or merchandise were furnished as stated, and the same is justly due and unpaid.

PRINT NAME

Diane Hoadley

SIGNATURE

Diane Hoadley

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Bryan F. Taylor

(I CERTIFY THAT THESE ARE ACTUAL AND
NECESSARY EXPENDITURES - IC 31-3101)

Print Name

Bryan F. Taylor

Department Name

Prosecuting Attorney

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FUND	DEPT.	DIV	BASIC	OBJ	AMOUNT
001 -	08 -	339 -	15 -	548020	\$442.50
001 -	08 -	339 -	15 -	548019	\$339.42
-	-	-	-	-	-
-	-	-	-	-	-

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DATE

COMMENTS

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111 NO. 11th Ave Suite 320
Caldwell, Idaho 83605

**CANYON COUNTY
AUDITOR**



CANYON COUNTY AUDITOR

111 NO. 11th Ave Suite 320
Caldwell, Idaho 83605

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VENDOR

NAME CARES Program - St. Luke's Children's Hospital

ADDRESS 417 S. 6th St.

CITY / STATE Boise, ID **ZIP** 83702

INVOICE	INVOICE NUMBER	INVOICE DATE	P.O. #	DESCRIPTION	AMOUNT \$
		3/9/2023		Medical Records - CR14-23-00825	\$25.00
		3/21/2023		Medical Records - Grand Jury	\$40.00
		3/22/2023		Medical Records - Grand Jury	\$40.00
	TOTAL				\$105.00

OK

I CERTIFY that the above account is correct; that the services and/or merchandise were furnished as stated, and the same is justly due and unpaid.

PRINT NAME Diane Hoadley **SIGNATURE**

DEPT

OK

(I CERTIFY THAT THESE ARE ACTUAL AND NECESSARY EXPENDITURES - IC 31-3101)

Print Name Bryan F. Taylor **Department Name** Prosecuting Attorney

AUDITOR	FUND	DEPT.	DIV	BASIC	OBJ	AMOUNT
	001	08	339	15	548501	\$105.00

BOARD	APPROVED	DISAPPROVED	DATE	COMMENTS

Vendor name	Invoice number	Invoice date	Claim Number	Account number	Description	Amount	Payment number	Payment Date	Division
MASTERCARD	9614	4/3/23	594083	001-08-339-15-521120		\$273.48	620046	4/25/23	Prosecuting Attorney
				001-08-339-15-521120 Total		\$273.48			
ST LUKES REGIONAL MEDICAL CENTER-CARES PROGRAM	CR14-22-12869	4/5/23	593852	001-08-339-15-521132	W BROWN	\$960.00	620112	4/25/23	Prosecuting Attorney
ST LUKES REGIONAL MEDICAL CENTER-CARES PROGRAM	CR14-22-03028	3/15/23	594113	001-08-339-15-521132	M MORALES	\$180.00	620112	4/25/23	Prosecuting Attorney
ST LUKES REGIONAL MEDICAL CENTER-CARES PROGRAM	CR14-22-03028	3/15/23	594113	001-08-339-15-521132	M MORALES	\$35.37	620112	4/25/23	Prosecuting Attorney
				001-08-339-15-521132 Total		\$1,175.37			
FORENSIC ANALYTICAL SCIENCES, INC	74333	4/5/23	594116	001-08-339-15-521220	D DALRYMPLE	\$654.16	619981	4/25/23	Prosecuting Attorney
MASTERCARD	9614	4/3/23	594083	001-08-339-15-521220		\$358.28	620046	4/25/23	Prosecuting Attorney
				001-08-339-15-521220 Total		\$1,012.44			
WESTERN RECORDS DESTRUCTION	0635003	4/1/23	593770	001-08-339-15-522301		\$79.00	620158	4/25/23	Prosecuting Attorney
				001-08-339-15-522301 Total		\$79.00			
BOISE OFFICE EQUIPMENT	IN3377634	4/6/23	593946	001-08-339-15-533310		\$589.81	619919	4/25/23	Prosecuting Attorney
				001-08-339-15-533310 Total		\$589.81			
GARCIA, CHRISTINA	MAR CELL	4/12/23	593910	001-08-339-15-542203		\$55.00	619982	4/25/23	Prosecuting Attorney
HANSON, DEBRA	MAR CELL	4/12/23	593910	001-08-339-15-542203		\$55.00	619996	4/25/23	Prosecuting Attorney
HIMES, DENISE R	MAR CELL	4/12/23	593910	001-08-339-15-542203		\$55.00	620000	4/25/23	Prosecuting Attorney
SWANSON, GREG	MAR CELL	4/12/23	593910	001-08-339-15-542203		\$55.00	620127	4/25/23	Prosecuting Attorney

Vendor name	Invoice number	Invoice date	Claim Number	Account number	Description	Amount	Payment number	Payment Date	Division
WESLEY, ZACHARY	MAR CELL	4/12/23	593910	001-08-339-15-542203		\$55.00	620153	4/25/23	Prosecuting Attorney
				001-08-339-15-542203 Total		\$275.00			
IDAHO PRESS TRIBUNE LLC	355359	4/4/23	593806	001-08-339-15-543301	GRAND JURY LEG/	\$161.40	620008	4/25/23	Prosecuting Attorney
				001-08-339-15-543301 Total		\$161.40			
MASTERCARD	9614	4/3/23	594083	001-08-339-15-545505		\$364.56	620046	4/25/23	Prosecuting Attorney
				001-08-339-15-545505 Total		\$364.56			
GLOBAL/GISELLE'S TRAVEL	215990630	3/6/23	594115	001-08-339-15-545507		\$731.80	619986	4/25/23	Prosecuting Attorney
GLOBAL/GISELLE'S TRAVEL	215990631	3/6/23	594115	001-08-339-15-545507		\$731.80	619986	4/25/23	Prosecuting Attorney
				001-08-339-15-545507 Total		\$1,463.60			
MASTERCARD	9614	4/3/23	594083	001-08-339-15-546610		\$595.00	620046	4/25/23	Prosecuting Attorney
MASTERCARD	9614	4/3/23	594083	001-08-339-15-546610		\$220.00	620046	4/25/23	Prosecuting Attorney
MASTERCARD	9614	4/3/23	594083	001-08-339-15-546610		\$359.00	620046	4/25/23	Prosecuting Attorney
				001-08-339-15-546610 Total		\$1,174.00			
REGAN, LEIGH	CR14-22-10644	4/7/23	593974	001-08-339-15-548013	J HERNANDEZ	\$120.25	620084	4/25/23	Prosecuting Attorney
				001-08-339-15-548013 Total		\$120.25			
GLOBAL/GISELLE'S TRAVEL	215993021	4/30/23	594115	001-08-339-15-548017		\$439.48	619986	4/25/23	Prosecuting Attorney
GLOBAL/GISELLE'S TRAVEL	215993023	3/28/23	594115	001-08-339-15-548017		\$388.90	619986	4/25/23	Prosecuting Attorney
				001-08-339-15-548017 Total		\$828.38			
MASTERCARD	9614	4/3/23	594083	001-08-339-15-548020		\$37.38	620046	4/25/23	Prosecuting Attorney
				001-08-339-15-548020 Total		\$37.38			

Vendor name	Invoice number	Invoice date	Claim Number	Account number	Description	Amount	Payment number	Payment Date	Division
ST LUKES REGIONAL MEDICAL CENTER-CARES PROGRAM	CR14/23-04549	3/29/23	594114	001-08-339-15-548501		\$25.00	620112	4/25/23	Prosecuting Attorney
ST LUKES REGIONAL MEDICAL CENTER-CARES PROGRAM	CR14-23-01007	3/30/23	594114	001-08-339-15-548501		\$40.00	620112	4/25/23	Prosecuting Attorney
ST LUKES REGIONAL MEDICAL CENTER-CARES PROGRAM	GRAND JURY	3/30/23	594114	001-08-339-15-548501		\$40.00	620112	4/25/23	Prosecuting Attorney
				001-08-339-15-548501 Total		\$105.00			
THOMSON REUTERS - WEST	848060782	4/1/23	594106	001-08-339-15-548512		\$3,473.93	620135	4/25/23	Prosecuting Attorney
				001-08-339-15-548512 Total		\$3,473.93			
INTERNATIONAL MINUTE PRESS	14363	4/3/23	594172	001-08-339-15-551010		\$240.74	620017	4/25/23	Prosecuting Attorney
	3049270810								
ODP BUSINESS SOLUTIONS, LLC	01	3/30/23	593805	001-08-339-15-551010		\$9.78	620062	4/25/23	Prosecuting Attorney
	3038908580								
ODP BUSINESS SOLUTIONS, LLC	01	4/7/23	594038	001-08-339-15-551010		\$128.25	620062	4/25/23	Prosecuting Attorney
	3041699270								
ODP BUSINESS SOLUTIONS, LLC	01	4/7/23	594038	001-08-339-15-551010		\$7.37	620062	4/25/23	Prosecuting Attorney
				001-08-339-15-551010 Total		\$386.14			
MASTERCARD	9614	4/3/23	594083	001-08-339-15-554100		\$15.99	620046	4/25/23	Prosecuting Attorney
				001-08-339-15-554100 Total		\$15.99			
MASTERCARD	9614	4/3/23	594083	001-08-339-15-577110		\$11.99	620046	4/25/23	Prosecuting Attorney
				001-08-339-15-577110 Total		\$11.99			
MASTERCARD	9614	4/3/23	594083	001-08-339-15-577121		\$182.34	620046	4/25/23	Prosecuting Attorney
				001-08-339-15-577121 Total		\$182.34			

Vendor name	Invoice number	Invoice date	Claim Number	Account number	Description	Amount	Payment number	Payment Date	Division Prosecuting Attorney Total
						\$11,730.06			



CANYON COUNTY AUDITOR

111 NO. 11th Ave Suite 320
Caldwell, Idaho 83605

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NAME MasterCard

ADDRESS P.O. Box 35138

CITY / STATE Seattle WA

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INVOICE NUMBER	INVOICE DATE	P.O. #	DESCRIPTION	AMOUNT \$
	3/6/2023		PODS - Delivery/First monthly rental	\$273.48
			CR14-20-07840 State Vs Dalrymple/Evidence	
			Storage	
	3/6/2023		Crimes Against Women Conference - Dallas TX	
			Attendee: V. Bond/Deputy PA	\$595.00
	3/7/2023		Sheraton Dallas/Conference Hotel - V. Bond	\$182.28
			1st night plus tax	
	3/7/2023		sHERaton Dallas/Conference Hotel - M. Allen	
			1st night plus tax	\$182.28
TOTAL				

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I CERTIFY that the above account is correct; that the services and/or merchandise were furnished as stated, and the same is justly due and unpaid.

PRINT NAME Melinda Longoria

SIGNATURE

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(I CERTIFY THAT THESE ARE ACTUAL AND
NECESSARY EXPENDITURES - IC 31-3101)

Print Name Bryan Taylor

Department Name Canyon County Prosecuting Attorney

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FUND	DEPT.	DIV	BASIC	OBJ	AMOUNT
001 -	08 -	339 -	15 -	521220	\$273.48
001 -	08 -	339 -	15 -	546610	\$595.00
001 -	08 -	339 -	15 -	545505	\$364.56
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COMMENTS



CANYON COUNTY AUDITOR

111 NO. 11th Ave Suite 320
Caldwell, Idaho 83605

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NAME MasterCard

ADDRESS P.O. Box 35138

CITY / STATE Seattle WA

ZIP 98124-5138

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INVOICE NUMBER	INVOICE DATE	P.O. #	DESCRIPTION	AMOUNT \$
	3/7/2023		PODS - 179.14 per month for Feb. and March x2 =	\$358.28
	3/10/2023		CR14-20-07840 State Vs Dalrymple/Evidence	
			Storage	
	3/14/2023		Idaho State Bar - MCLE/Bryan Taylor	\$40.00
	3/15/2023		DropBox - Shared Folder	\$11.99
	3/16/2023		Walmart - Supplies for Victim Witness	\$37.38
	3/21/2023		Idaho State Bar - MCLE/Ancel Shoberg - DPA	\$180.00
TOTAL				

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I CERTIFY that the above account is correct; that the services and/or merchandise were furnished as stated, and the same is justly due and unpaid.

PRINT NAME Melinda Longoria

SIGNATURE

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OK

(I CERTIFY THAT THESE ARE ACTUAL AND
NECESSARY EXPENDITURES - IC 31-3101)

Print Name Bryan Taylor

Department Name Canyon County Prosecuting Attorney

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FUND	DEPT.	DIV	BASIC	OBJ	AMOUNT
001 -	08 -	339 -	15 -	521220	\$358.28
001 -	08 -	339 -	15 -	546610	\$220.00
001 -	08 -	339 -	15 -	577100	\$11.99
001 -	08 -	339 -	15 -	548020	\$37.38

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APPROVED _____ DISAPPROVED _____ DATE _____ COMMENTS _____

**CANYON COUNTY
AUDITOR**

APPROVED	DISAPPROVED	DATE	COMMENTS
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**CANYON COUNTY
AUDITOR**



CANYON COUNTY AUDITOR

111 NO. 11th Ave Suite 320
Caldwell, Idaho 83605

Do Not Use This Space

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NAME Tracy Jungman, CARES Program - St. Luke's Children's Hospital

ADDRESS 417 S. 6th St.

CITY / STATE Boise, ID

ZIP 83702

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INVOICE NUMBER	INVOICE DATE	P.O. #	DESCRIPTION	AMOUNT \$
	3/15/2023		CR14-22-03028 -State vs. Marcus Morales	
			Expert testimony prep time:	
			.50 hours at \$240.00 per hour	\$120.00
			Expert testimony at Grand Jury proceedings	
			.25 hours at \$240.00 per hour	\$60.00
			Mileage for Court appearance - 54	
			roundtrip miles at \$.655 per mile	\$35.37
			TOTAL	\$215.37

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PRINT NAME

Diane Hoadley

SIGNATURE

Diane Hoadley

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OK

Bryan F. Taylor

(I CERTIFY THAT THESE ARE ACTUAL AND
NECESSARY EXPENDITURES - IC 31-3101)

Print Name

Bryan F. Taylor

Department Name

Prosecuting Attorney

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FUND	DEPT.	DIV	BASIC	OBJ	AMOUNT
001	08	339	15	521132	\$215.37

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COMMENTS

Invoice # 0626254						Invoice Date 02/01/2023
Western Records Destruction						Services 03/01/2023-03/31/2023
DEPARTMENT NAME	FUND	DEPT	DIV	BASIC	OBJ	TOTAL AMOUNT DUE
Assessor	103	38	280	14	522301	\$
Assessor DMV	001	06	213	14	522301	\$
Commissioners	001	02	205	13	522301	\$
Consolidated Elections	124	12	221	14	522301	
Court Clerks	104	07	336	12	522301	\$
Development Services	001	15	231	19	522301	
Elections	001	01	220	14	522301	\$
Extension Office	106	20	253	55	522301	
Fairgrounds	106	49	313	54	522301	
Human Resources	001	18	246	19	522301	\$
Indigent Services	001	01	201	14	522301	
Information Technology	001	16	237	14	522301	\$
Juvenile Detention	001	25	348	23	522301	\$
Juvenile Probation	104	44	300	27	522301	\$
Misdemeanor Probation	116	42	294	21	522301	\$
Prosecuting Attorney	001	08	339	15	522301	\$ 79.00
Public Defender	116	27	342	15	522301	\$
Recorders/Indigent Services	001	01	202	14	522301	\$
Sheriff	116	03	410	21	522301	\$
Treasurers	001	05	208	14	522301	\$
Trial Courts	104	40	285	12	522301	\$
TOTAL						\$

Budget line items for BOE		
<u>Dept.</u>		Total \$
Auditor/Indigent	001-01-201-14-533310	
Recorder	001-01-202-14-533310	
Election	001-01-220-14-533310	
Election	124-12-221-14-533310	
Commissioner	001-02-205-13-533310	
Treasurer	001-05-208-14-533310	
P.A.	001-08-339-15-533310	\$589.81
Coroner	001-11-217-19-533310	
Maintenance	001-14-226-19-533310	
DSD	001-15-231-19-533310	
I.T.	001-16-237-14-533310	
H.R.	001-18-246-19-533310	
Fleet	001-24-263-19-533310	
Juv. Detention	001-25-348-23-533310	
Weed	102-35-275-33-533310	
Assessor	103-38-280-14-533310	
Courts	104-40-285-12-533310	
Juv. Probation	104-44-300-27-533310	
County Extention	106-20-253-55-534408	
Fair	106-49-313-54-533310	
Parks & Recs	108-52-312-52-533310	
Sheriffs	116-03-410-21-533310	
Public Defender	116-27-342-15-533310	
CCNU	116-28-354-21-533310	
Misd. Probation	116-42-294-21-533310	
Landfill	401-72-373-32-533310	
	Total	\$

Boise Office Equipment
330 N. Ancestor Place, Suite 100
Boise, ID 83704



CANYON COUNTY AUDITOR

1115 Albany Street
Caldwell, Idaho 83605

Do Not Use This Space

V E N D O R	NAME <u>Prosecutors Office</u>					
	ADDRESS _____					
	CITY / STATE _____			ZIP _____		
I N V O I C E	INVOICE NUMBER	INVOICE DATE	P.O. #	DESCRIPTION	AMOUNT \$	
		4/12/2023		PA's Office Cell phone stipend		
				Please see attached list of Employees to receive \$55.00		
				Stipend for the month of March		
				Seven (7)		
				Two (2) for Nampa Office	\$110.00	
				Five (5) for Caldwell	\$275.00	
TOTAL					\$385.00	
O A T H	I CERTIFY that the above account is correct; that the services and/or merchandise were furnished as stated, and the same is justly due and unpaid.					
	PRINT NAME <u>Melinda Longoria</u>		SIGNATURE <u><i>Melinda Longoria</i></u>			
D E P T	OK _____ (I CERTIFY THAT THESE ARE ACTUAL AND NECESSARY EXPENDITURES - IC 31-3101)					
	<u>Bryan Taylor</u> Print Name		Department Name <u>CCPA</u>			
A U D I T O R	FUND	DEPT.	DIV	BASIC	OBJ	AMOUNT
	001 - 08 - 344 - 15 - 542203					\$110.00
	001 - 08 - 339 - 15 - 542203					\$275.00
	- - - - -					
	- - - - -					
B O A R D	APPROVED	DISAPPROVED	DATE	COMMENTS		
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	_____	_____	_____	_____		
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**CANYON COUNTY
AUDITOR**



CANYON COUNTY AUDITOR

111 NO. 11th Ave Suite 320
Caldwell, Idaho 83605

Do Not Use This Space

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NAME Global/Giselle's Travel

ADDRESS 900 W. Jefferson

CITY / STATE Boise, ID

ZIP 83702

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INVOICE NUMBER	INVOICE DATE	P.O. #	DESCRIPTION	AMOUNT \$
215990630	3/6/2023		Airfare for Deputy PA V. Bond for Crimes Against Women Conf. in Dallas, TX from May 21-25, 2023	\$731.80
215990631	3/6/2023		Airfare for Deputy PA M. Allen for Crimes Against Women Conf. in Dallas, TX from May 21-25, 2023	\$731.80
215993021	4/30/2023	PA#2368	CR14-22-10645 - State vs. Jose Rodriguez Arrival airfare for witness for Jury Trial	\$439.48
			Departing airfare for witness for Jury Trial	\$388.90
TOTAL				\$2,291.98

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PRINT NAME

Diane Hoadley

SIGNATURE

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(I CERTIFY THAT THESE ARE ACTUAL AND
NECESSARY EXPENDITURES - 10-31-3101)

Print Name

Bryan F. Taylor

Department Name

Prosecuting Attorney

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FUND	DEPT.	DIV	BASIC	OBJ	AMOUNT
001	08	339	15	545507	\$1,463.60
001	08	339	15	548017	\$828.38

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DATE

COMMENTS



CANYON COUNTY AUDITOR

111 NO. 11th Ave Suite 320
Caldwell, Idaho 83605

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NAME CARES Program - St. Luke's Children's Hospital

ADDRESS 417 S. 6th St.

CITY / STATE Boise, ID

ZIP 83702

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INVOICE NUMBER	INVOICE DATE	P.O. #	DESCRIPTION	AMOUNT \$
	3/29/2023		Medical Records - CR14-23-04549	\$25.00
	3/30/2023		Medical Records - CR14-23-01007	\$40.00
	3/30/2023		Medical Records - Grand Jury	\$40.00
TOTAL				\$105.00

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PRINT NAME

Diane Hoadley

SIGNATURE

Diane Hoadley

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Bryan F. Taylor

(I CERTIFY THAT THESE ARE ACTUAL AND
NECESSARY EXPENDITURES - IC 31-3101)

Print Name

Bryan F. Taylor

Department Name

Prosecuting Attorney

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FUND	DEPT.	DIV	BASIC	OBJ	AMOUNT
001	08	339	15	548501	\$105.00

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DATE

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