Vendor name ST LUKES REGIONAL	Invoice number	Invoice Claim date Number	r Account number	Description	Amount	Check Number	Check Date	Division
MEDICAL CENTER-CARES PROGRAM	24-1516	5/1/24 607218	001-08-339-15-521132 001-08-339-15-521132 Tot	al	\$220.00 \$220.00		7/10/2	Prosecuting 4 Attorney
ST LUKES REGIONAL MEDICAL CENTER-CARES PROGRAM	24-1516	5/1/24 607218	001-08-339-15-521135 001-08-339-15-521135 To ta	al	\$12.73 \$12.73		7/10/2	Prosecuting 4 Attorney
CHARLES O. GARRISON, M.D. CHARLES O. GARRISON,	PREP/TESTIMONY	6/27/24 60733	001-08-339-15-521220	CR14-20-07840 DALRYMPLE	\$3,250.00	641994	7/10/2	Prosecuting 4 Attorney Prosecuting
M.D. CHARLES O. GARRISON,	MILEAGE	6/27/24 607333	001-08-339-15-521220	CR14-20-07840 DALRYMPLE	\$348.40	641994	7/10/2	4 Attorney Prosecuting
M.D. COLD CASE SOLUTIONS &	PER DIEM	6/27/24 607331	001-08-339-15-521220	CR14-20-07840 DALRYMPLE	\$88.50	641994	7/10/24	4 Attorney Prosecuting
RESOURCES	2021-114	5/29/24 607136	001-08-339-15-521220		\$1,225.00	642006	7/10/24	4 Attorney Prosecuting
GREEN JR, DR. RICHARD	6/23-6/25 PER DIEM	6/28/24 607332	001-08-339-15-521220	CR14-20-07840 DALRYMPLE	\$147.50	642048	7/10/24	4 Attorney Prosecuting
GREEN JR, DR. RICHARD	RENTAL CAR	6/28/24 607332	001-08-339-15-521220	CR14-20-07840 DALRYMPLE	\$286.50	642048	7/10/24	4 Attorney Prosecuting
HIMES, DENISE R	REIMBURSEMENT	6/25/24 607158	001-08-339-15-521220		\$52.96			4 Attorney Prosecuting
HOFKINS, KIMBERLY R	TRANSCRIPT 5/3/24	6/20/24 607274	001-08-339-15-521220	CR14-20-07840 DALRYMPLE	\$93.50	642061	7/10/24	4 Attorney Prosecuting
HOFKINS, KIMBERLY R	TRANSCRIPT 6/18/24	6/21/24 607274	001-08-339-15-521220	CR14-20-07840 DALRYMPLE	\$89.25	642061	7/10/24	4 Attorney Prosecuting
HOFKINS, KIMBERLY R	TRANSCRIPT 5/16/24	6/24/24 607274	001-08-339-15-521220	CR14-20-07840 DALRYMPLE	\$97.75	642061	7/10/24	4 Attorney Prosecuting
PAMELA J. MARCUM	CR14-20-07840	6/22/24 607272	001-08-339-15-521220 001-08-339-15-521220 Tot a	DALRYMPLE al	\$8,600.00 \$14,279.36		7/10/24	4 Attorney
VERIZON WIRELESS SERVICES LLC	9967264283	6/22/24 607391	001-08-339-15-542203 001-08-339-15-542203 Tot a	al	\$1,888.67 \$1,888.67		7/10/24	Prosecuting 4 Attorney

	¥	Invoice	Claim	A	5	A	Check	Check	D
Vendor name	Invoice number	date	Number	Account number	Description	Amount	Number	Date	Division Prosecuting
US POSTAL SERVICE	JUN POSTAGE	6/28/24	4 607390	001-08-339-15-543305		\$450.18	642216	7/10/24	Attorney Prosecuting
US POSTAL SERVICE	JUN BRM	6/28/24	4 607389	001-08-339-15-543305 001-08-339-15-543305 Tota	ı	\$5.60 \$455.78		7/10/24	Attorney
RHODES, CHRISTINE E	CR14-24-06336	6/30/24	4 607328	001-08-339-15-548013 001-08-339-15-548013 Total	M BALDERAS	\$58.50 \$58.50		7/10/24	Prosecuting Attorney
CANYON CO PROSECUTING ATTY	607357	5/6/24	4 607357	001-08-339-15-548023 001-08-339-15-548023 Tota l	I	\$8.00 \$8.00		7/10/24	Prosecuting Attorney
ST LUKES REGIONAL MEDICAL CENTER-CARES PROGRAM	CV14-24-04847	6/25/24	1 607397	001-08-339-15-548501		\$50.00	642187	7/10/24	Prosecuting Attorney
ST LUKES REGIONAL MEDICAL CENTER-CARES PROGRAM	CR14-24-08664	6/25/24	1 607397	001-08-339-15-548501		\$40.00	642187	7/10/24	Prosecuting Attorney
ST LUKES REGIONAL MEDICAL CENTER-CARES PROGRAM	CR14-24-07806	6/26/24	1 607397	001-08-339-15-548501		\$160.00	642187	7/10/24	Prosecuting Attorney
ST LUKES REGIONAL MEDICAL CENTER-CARES PROGRAM	CR14-24-06618	6/26/24	1 607397	001-08-339-15-548501		\$40.00	642187	7/10/24	Prosecuting Attorney
ST LUKES REGIONAL MEDICAL CENTER-CARES PROGRAM	CR14-24-06892	5/10/24	1 607219	001-08-339-15-548501		\$40.00	642187	7/10/24	Prosecuting Attorney
ODP BUSINESS SOLUTIONS				001-08-339-15-548501 Total		\$330.00			Prosecuting
LLC	370665702001	6/13/24	607273	001-08-339-15-551010 001-08-339-15-551010 Total		\$90.58 \$90.58	642132	7/10/24	Attorney
DELL MARKETING LP	10751979250M	6/1/24	607381	001-08-339-15-577100 001-08-339-15-577100 Total		\$11,777.36 \$11,777.36	642015	7/10/24	Prosecuting Attorney

		Invoice	Claim				Check	Check	
Vendor name	Invoice number	date	Number	Account number	Description	Amount	Number	Date	Division
AMAZON CAPITAL SERVICES	3								Prosecuting
INC	1KFQ-RVP4-37QM	6/30/24	607333	001-08-339-15-577120		\$12.99	641945	7/10/24	Attorney
AMAZON CAPITAL SERVICES	}								Prosecuting
INC	1M4D-GQ4X-3HKW	6/20/24	607271	001-08-339-15-577120		\$21.99	641945	7/10/24	Attorney
				001-08-339-15-577120 Tota	I	\$34.98			
									Prosecuting
									Attorney
						\$29,155.96			Total



111 NO. 11th Ave Suite 320 Caldwell, Idaho 83605 Do Not Use This Space NAME Tracy Jungman-St. Luke's Children's Hospital Ε N ADDRESS 417 S. 6th St. D 0 CITY / STATE Boise, ID R **ZIP** 83702 INVOICE NUMBER INVOICE DATE P.O. # **DESCRIPTION AMOUNT \$** 5/1/2024 Expert testimony at Grand Jury PA 24-1516 Prep: .25 hours @ \$240.00 per hour \$60.00 Travel Time: .50 hours at \$80.00 per hour \$40.00 Court Time: .50 hours at \$240.00 per hour \$120.00 Mileage: 19 miles at \$.67 per mile \$12.73 C E **TOTAL** \$232.73 I CERTIFY that the above account is correct; that the services and/or merchandise were furnished as stated, and the 0 same is justly due and unpaid. A T SIGNATURE Aliane House **PRINT NAME** н Diane Hoadley D (I PERTIFY THAT THESE ARE ACTUAL AND NECESSARY EXPENDITURES - IC 31-3101) E T **Print Name** Bryan F. Taylor **Department Name Prosecuting Attorney** A **FUND** DEPT. DIV **BASIC** OBJ **AMOUNT** U 001 08 339 15 521132 \$220.00 D 001 80 339 15 521135 \$12.73 T 0 R **APPROVED DISAPPROVED DATE COMMENTS** В 0 R D



	Cal	dwell, Idaho 8360	5			Do Not Use This Space	
V E	N/	AME Charles Garri	son, M.D.				
N D	ADDR	ESS					
O R	CITY / ST	ATE				ZIP	
	INVOICE NUMBER	INVOICE DATE	P.O. #		DESCRIPTION	ON	AMOUNT \$
		6/27/2024		С	R14-20-07840 - State vs.	David Dalrymple	
,					Expert witness fees, mile	age & per diem	
N				1	or expert witness testim	ony at Jury Trial	
v					June 6-7, 20	24:	
0				Re	view of materials: 5 hrs	at \$350.00 per hr	\$1,750.00
c					Court Time: 2 hrs at \$75	0.00 per hour	\$1,500.00
E				N	Mileage: 520 roundtrip fr	om Pocatello, ID	
	,				to Caldwell, ID \$.67	per mile	\$348.40
				<u> </u>	er Diem: 2 travel days a	t \$44.25 per day	\$88.50
						TOTAL	\$3,686.90
0	I CERTIFY that the same is justly due and u		ct; that the services	and/or m	erchandise were furnished as s	tated, and the	
A	same is justly due and d	прац.				4	
H	PRINT NAME	Diane	Hoadley		SIGNATURE	uane Ho	adle/
DEPT	OK /	NECESSARY EXPE	ESE ARE ACTUAL AND IDITUALS - IC 31-3101)		_		
	Print Name		F. Taylor		Department Name		g Attorney
A : U	<u>FUND</u>	DEPT.	DIV	!	BASIC	<u>OBJ</u>	<u>AMOUNT</u>
D	001 -	08	339)	- 15	521220	\$3,686.90
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В 0	APPROVED	DISAPPR	ROVED	D	ATE	COMMENT	rs
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111 NO. 11th Ave Suite 320

	Cal	idwell, Idaho 83605	5		Do Not Use This Space	
V E N	N.	AME Cold Case Sol	utions & Resources			
D	ADDR	ESS <u>-</u>				
O R	CITY / ST	ATE			ZIP	
	INVOICE NUMBER	INVOICE DATE	P.O. #	DESCRIPTIO	N	AMOUNT \$
	2021-114	5/29/2024	C	R14-20-07840 - State vs. D	avid Dalrymple:	
L			E:	pert testimony of expert v	vitness Francine	\$1,225.00
N				Bardole at Jury Trial on N	/lay 23, 2024	
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0		<u> </u>				
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						<u> </u>
					TOTAL	Ć4 225 00
0	CERTIFY that the	above account is correc	t, that the services and/or m	erchandise were furnished as sta		\$1,225.00
A	same is justly due and u	npaid.			and the	
H	PRINT NAME	Diane	Hoadley	_ SIGNATURE/	ane Ho	ado/
		11/3	(
D	ок	(I CORTIFY THAT THES	Serylon SEASON (CELLA AND	_		\circ
P		NECESSARY EXPEND	TURES - IC 31-3101)			
Т	0.3 . Al		_			
_	Print Name	Bryan F		Department Name	Prosecuting	Attorney
A U	FUND	DEPT.	DIV	BASIC	OBJ	AMOUNT
D		08	339	- 15 -	521220	\$1,225.00
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В	APPROVED	DISAPPRO	OVED D	ATE	COMMENTS	3
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V E	N/	AME Dr. Richard Gr	een. Ir.			
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R	CITY / ST				ZiP	
	INVOICE NUMBER	INVOICE DATE	P.O. #	DESCI	RIPTION	AMOUNT \$
		6/00/000			te vs. David Dalrymple	
1		6/28/2024		_	ng as an expert witness	
N					l (rebuttal case)	
v 0					el day at \$44.25 per day	\$44.25
ī		 			day at \$59.00 per day	\$59.00
С					el day at \$44.25 per day	\$44.25
E				Reimbursemen		
					-18, 2024	\$139.06
		<u> </u>		June 23-	-25, 2024	\$147.44
0	CERTIFY that the	ahove account is correct	· that the equipme and	or merchandise were furnishe	TOTAL	\$434.00
Ā	same is justly due and ur	npaid.	, wat the services and	ror merchandise were turnishe	ed as stated, and the	
T	PRINT NAME	.			1. ~	1 11/
Н	- NATIVAME	Diane I	loadley	SIGNATURE _	Riane) Tr	oadle
D	ок	113	Caulon			
E		(I CERSIFY THAT THES	E ARE ACTUAL AND			\sim
P		NECESSARY EXPENDI	TURES - IC 31-31(1)			
1	Print Name	Bryan F.	Taylor	Damasture of All	_	
A	FUND	DEPT.		Department Na		Attorney
U	001 -	08	DIV	BASIC	OBJ	AMOUNT
P		0	- 339	15	521220	\$434.00
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в	APPROVED	DISAPPRO	VED	DATE	COMMENT	S
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		IO. 11th Ave Suite Idwell, Idaho 8360!				
V	, i	AME Danisa History	_ 		Do Not Use This Space	
E		AME Denise Himes				
D	ADDR	ESS c/o CCPA	<u> </u>			
O R	CITY / ST				ZIP	
	INVOICE NUMBER	INVOICE DATE	P.O. #	DESCRIPTION	ON	AMOUNT \$
		 		CR14-20-07840 - State vs. [
1		 		Reimbursement for lunch		\$52.96
N				8 members of the victin		
0		 		June 25, 2024 (closing	arguments)	
ĭ						
С						
E						
		 				
					TOTAL	\$52.96
0	l CERTIFY that the same is justly due and u	above account is correct	ct, that the services an	nd/or merchandise were furnished as st	ated, and the	
A T	Same is justify due and d	прац.			2 2 1	
Н	PRINT NAME	Diane	Hoadley	SIGNATURE	lano Hor	rsto –
		11/3	7		100	
D	ок	Bujan	Jaylon			
E P			SE ARE ACTUAL AND DITURES - IC 31-3101)			7
т,						
	Print Name	Bryan F	. Taylor	Department Name _	Prosecuting	Attorney
A U	<u>FUND</u>	DEPT.	DIV	BASIC	OBJ	AMOUNT
ם	001 -	08	- 339	15	521220	\$52.96
1	-		<u> - </u>			
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	Ca	ldwell, Idaho 83605 			Oo Not Use This Space	
V E	N/	AME Kimberly R. Ho	ofkins, RPR, CSR			
N D	ADDR	ESS 1115 Albany S	treet			
O R	CITY / ST	ATE Caldwell, ID			ZIP 83605	
	INVOICE NUMBER	INVOICE DATE	P.O. #	DESCRIPTION	v T	AMOUNT \$
				CR14-20-07840 - State vs. D	avid Dalrymple	
1		6/20/2024		Expedited transcript of May 3	, 2024 Hearing	\$93.50
N		6/21/2024		Expedited transcript of June 1	8, 2024 Hearing	\$89.25
V 0		6/24/2024		Expedited transcript of May 1	6, 2024 Hearing	\$97.75
ı		-				
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					TOTAL	£200.50
0	I CERTIFY that the	above account is correct	t that the services and/or	merchandise were furnished as stat		\$280.50
Ā	same is justly due and u	npaid.	, marking dollards all all	morardinase were furnished as stat	ed, and the	
T	BRINTMAN				5.	,
H	PRINT NAME			/	11. 201	1. 11
		Diane I	Hoadley	SIGNATURE	Janes H	vadle
		Diane I	Hoadley	SIGNATURE	lane H	oadle
D E	ок	Bujan	Jaylon	SIGNATURE	lane H	vadle
D E P	ок	Diane I	SE AREACTUAL AND	SIGNATURE	lane H	ondle
E		(I COATIFY THAT THES NECESSARY EXPENDI	SE ARE OCTUAL AND ITURES - IC 31-3101)			3
E P T	Print Name	(I CONTIFY THAT THES NECESSARY EXPENDI	SE ARE OCTUAL AND ITURES - IC 31-3101) Taylor	Department Name	Prosecuting	3
E P T	Print Name	(I CONTIFY THAT THES NECESSARY EXPENDI	E ARE ACTUAL AND ITURES - IC 31-3101) Taylor DIV			3
E P T	Print Name	(I CONTIFY THAT THES NECESSARY EXPENDI	SE ARE OCTUAL AND ITURES - IC 31-3101) Taylor	Department Name	Prosecuting	Attorney
E P T A U D I	Print Name	(I CONTIFY THAT THES NECESSARY EXPENDI	E ARE ACTUAL AND ITURES - IC 31-3101) Taylor DIV	Department Name BASIC	Prosecuting OBJ	Attorney AMOUNT
E P T A U D I T	Print Name	(I CONTIFY THAT THES NECESSARY EXPENDI	E ARE ACTUAL AND ITURES - IC 31-3101) Taylor DIV	Department Name BASIC	Prosecuting OBJ	Attorney AMOUNT
E P T A U D I	Print Name	(I CONTIFY THAT THES NECESSARY EXPENDI	E ARE ACTUAL AND ITURES - IC 31-3101) Taylor DIV	Department Name BASIC	Prosecuting OBJ	Attorney AMOUNT
E P T A U D I T O R	Print Name	(I CONTIFY THAT THES NECESSARY EXPENDI	E ARP ACTUAL AND ITURES - IC 31-3101) Taylor DIV - 339	Department Name BASIC	Prosecuting OBJ	Attorney AMOUNT \$280.50
E P T A U D I T O	Print Name FUND 001 -	(I COTTIFY THAT THES NECESSARY EXPENDI Bryan F. DEPT. 08	E ARP ACTUAL AND ITURES - IC 31-3101) Taylor DIV - 339	Department Name BASIC 15	Prosecuting OBJ 521220	Attorney AMOUNT \$280.50



		O. 11th Ave Suite Idwell, Idaho 8360!	•		Do Not Use This Space	
V	N	AME Pamela J. Ma	rcum		DO NOT USE THIS SPACE	
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O R	CITY / ST	ATE			ZIP	
	INVOICE NUMBER	INVOICE DATE	P.O. #	DESCRIPTI	ON	AMOUNT \$
		6/22/2024		CR14-20-07840 - State vs	David Dalrymple	<u> </u>
1				Expert witness prep and	testimony at Jury	
N				Trial on May 23 & 31, 2024	@ \$200.00 per hour	
V				04/19/2024: Zoom mtg. a	and prep 2.75 hrs	\$550.00
0				05/08/2024: Prep & orga	anize files 1.5 hrs	\$300.00
c				05/10/2024: Travel to Caldy	well for PTC 4.75 hrs	\$950.00
E				05/15/2024: Transcript	review 1.0 hrs	\$200.00
				05/17/2024: Review doc	cuments 1.25 hrs	\$250.00
	<u> </u>		-	5/18/2024: Review doc		\$400.00
_	LOEDTIEVII III				TOTAL	
O A T ::	same is justly due and u	npaid.		and/or merchandise were furnished as	. ,	
Н	PRINT NAME	Diane	Hoadley	SIGNATURE	rane) How	adle
D E	ок	Guyan (I CERRIFY THAT THE	SE ARE SCHUAL AND			8
Р		NECESSARY EXPEN	DITURES - IC 31-3101)			
T	Print Name	Bryan F	. Taylor	Department Name	Prosecuting	Attorney
A U	<u>FUND</u>	<u>DEPT.</u>	DIV	BASIC	OBJ	AMOUNT
D	001	08	339		521220	\$2,650.00
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B O A	APPROVED	DISAPPRO	OVED	DATE	COMMENTS	3
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111 NO. 11th Ave Suite 320

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Caldwell, Idaho 83605 Do Not Use This Space Ε NAME Pamela J. Marcum N **ADDRESS** D 0 CITY / STATE ZIP R INVOICE NUMBER INVOICE DATE P.O. # **DESCRIPTION AMOUNT \$** 6/22/2024 CR14-20-07840 - State vs. David Dalrymple Expert witness prep and testimony at Jury ı Trial on May 23 & 31, 2024 @ \$200.00 per hour N 05/19/2024: Trial Prep 1.5 hrs \$300.00 0 05/20/2024: Trial Prep, phone call from DPA 3.25 hours \$650.00 C 05/21/2024: Travel to Caldwell to testify E 4.0 hours (did not testify this date) \$800.00 **TOTAL** 0 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. Т SIGNATURE Nigne Hoadle H **PRINT NAME** Diane Hoadley D (I CESTIFY THAT THESE ARE ACTUAL AND NECESSARY EXPENDITURES - IC 31-3101) E Ρ T **Print Name** Bryan F. Taylor **Department Name Prosecuting Attorney** A <u>FUND</u> DEPT. DIV **BASIC** <u>OBJ</u> **AMOUNT** 001 08 339 15 521220 \$1,750.00 D T 0 R APPROVED **DISAPPROVED DATE COMMENTS** В 0 A



		ldwell, Idaho 8360			Do Not Use This Space	
V E	N/	AME Pamela J. Ma	raiim		DO NOT USE THIS SPACE	
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O R	CITY / ST	ATE			ZIP	
	INVOICE NUMBER	INVOICE DATE	P.O. #	DESCRI	PTION	AMOUNT \$
		6/22/2024		CR14-20-07840 - State	vs. David Dalrymple	
1				Expert witness prep a		
N				05/22/2024: Travel t		
0				Court, testify		\$1,650.00
ı				05/23/2024: Travel t		
C				8.75 h 05/31/2024: Travel t		\$1,750.00
E				4 hou		\$800.00
				4 1101		\$800.00
					TOTAL	\$8,600,00
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		172 biance	Tioadley	SIGNATURE	NUMBER 1 40	uaro)
D	ок	Busan	Leyfor			
E			SE ARE ACTUAL AND DITURES - IC 31-3101)			
P T		WEGGGGANT EAR EN	31-3101)			
	Print Name	Bryan F	. Taylor	Department Nan	ne Prosecuting	g Attorney
A U	FUND	DEPT.	DIV	BASIC	OBJ	AMOUNT
D	001 -	80	_ 339	- 15	521220	\$4,200.00
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Budget Line Item for Verizon Bill June 2024

		TOTAL
Assessor	103-38-280-14-542203	
Auditor/Indigent	001-01-201-14-542203	
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	106-49-313-54542203	
HR	001-18-246-19-542203	
IT .	001-16-237-14-542203	
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	\$1,888.67
Parks	108-52-312-52-542203	
PD	116-27-342-15-542203	
Recorders	001-01-202-14-542203	
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		



Budget Line Items for Department Postage Month of June 2024

Office/Department	Account#	Total
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 Gourt	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	
Board of Com. Guard	Billed	
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	\$450.18
Public Defender	116-27-342-15-843305	
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	122-46-830-92-843305	
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.	001-17-222-19-843305	
Total		\$
		4

Budget Line Items for Department Postage Month of June 2024

Office/Department	Account#	BRM Total
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	\$5.60
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	
	401-72-373-32-543305	
CC Security Dept.	001-17-222-19-543305	
Total		\$



					Do Not Use This Space	
V E	NA.	AME Christine Rho	des, CSR,			
N D	ADDRI	ESS c/o Canyon C	ounty Courthouse,	1115 Albany Street		
O R	CITY / ST	ATE Caldwell, ID			ZIP 83605	
	INVOICE NUMBER	INVOICE DATE	P.O. #	DESCRIPTIO	N	AMOUNT \$
		6/30/2024		CR14-24-06336 - State vs. N	latthew Balderas	
				Transcript of Pre Trial Cor	nference held	\$58.50
N				June 12, 202		
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E				. <u>.</u>		
				······································		
					TOTAL	\$58.50
0	I CERTIFY that the same is justly due and u		ct, that the services and	d/or merchandise were furnished as st	ated, and the	
A	Same is justify due and a	npara.				
H	PRINT NAME	Diane	Hoadley	SIGNATURE	liane 1 H	rade
Н	_	Diane	Hoadley	SIGNATURE	liane H	rade/
H DE	PRINT NAME OK	Buyan (I) PRTIFY THAT THI	Larylon ESE ARCACTUAL AND	SIGNATURE	liane) H	vadle/
H DEP	_	Buyan (I) PRTIFY THAT THI	Laylon	SIGNATURE	liane) H	rade/
H DE	_	(I PERTIFY THAT THE NECESSARY EXPEN	Larylon ESE ARCACTUAL AND	SIGNATURE Department Name	Prosecuting	
H DEPT	ок	(I PERTIFY THAT THE NECESSARY EXPEN	ESE ARE ACTUAL AND IDITURES - IC 31-3101)			
HDEPT	OK 6	(I PERTIFY THAT THE NECESSARY EXPEN	ESE APE ACTUAL AND IDITURES - IC 31-3101) F. Taylor	Department Name	Prosecuting	g Attorney
H DEPT AUDI	OK Print Name	Bryan DEPT.	ESE APE ACTUAL AND IDITURES - IC 31-3101) F. Taylor DIV	Department Name	Prosecuting OBJ	g Attorney AMOUNT
H DEPT AUD-T	OK Print Name	Bryan DEPT.	ESE APE ACTUAL AND IDITURES - IC 31-3101) F. Taylor DIV	Department Name	Prosecuting OBJ	g Attorney AMOUNT
H DEPT AUDI	OK Print Name	OLYANTIFY THAT THI NECESSARY EXPEN Bryan I	ESE APE ACTUAL AND IDITURES - IC 31-3101) F. Taylor DIV	Department Name	Prosecuting OBJ	g Attorney AMOUNT
H DEPT AUDITO	OK Print Name	OLYANTIFY THAT THI NECESSARY EXPEN Bryan I	ESE AREACTUAL AND IDITURES - IC 31-3101) F. Taylor DIV - 339	Department Name	Prosecuting OBJ	Attorney AMOUNT \$58.50
H DEPT AUDITOR BO	Print Name FUND 001 -	Bryan DEPT.	ESE AREACTUAL AND IDITURES - IC 31-3101) F. Taylor DIV - 339	Department Name BASIC - 15	Prosecuting OBJ 548013	Attorney AMOUNT \$58.50
H DEPT AUDITOR BOA	Print Name FUND 001 -	Bryan DEPT.	ESE AREACTUAL AND IDITURES - IC 31-3101) F. Taylor DIV - 339	Department Name BASIC - 15	Prosecuting OBJ 548013	Attorney AMOUNT \$58.50
H DEPT AUDITOR BO	Print Name FUND 001 -	Bryan DEPT.	ESE AREACTUAL AND IDITURES - IC 31-3101) F. Taylor DIV - 339	Department Name BASIC - 15	Prosecuting OBJ 548013	Attorney AMOUNT \$58.50



	Cal	dwell, Idaho 8360	5		Do Not Use This Space				
V E	N.A	ME Bryan	Taylor						
N D	ADDRI	ESS CCPA	Petty Cash						
O R	CITY / ST/	ATE		ZIP					
	INVOICE NUMBER	INVOICE DATE	P.O. #		DESCRI	AMOUNT \$			
		5/6/2024			Reimbursement for c	check #143 written			
					to DMV Recor	rd Services			
N				RE: S	tate vs Cody Ernest/				
٧					Check written for nir				
0		charged CCPA \$8.00 ed to petty cash account							
c		\$8.00							
E									
							40.55		
0	LOEDTEN	· · · · · · · · · · · · · · · · · · ·		41.		TOTAL	\$8.00		
A	I CERTIFY that the a same is justly due and u		ct; that the services a	ario/or m	erchandise were furnished	as stated, and the			
T	PRINT NAME	Malia	1	.)	SIGNATURE	MM. 1. 1	~ {\}		
Н	FRINI NAME	rieugga	Longuria		SIGNATURE	vvector (Jongon		
D	ок	These	> laylon			\bigcup			
E		,	ESE ARE ACTUAL AND		_				
P		NECESSARY EXPER	NDITURES - IC 31-3101)						
•	Print Name				Department Nan	ne			
A	FUND	DEPT.	DIV		BASIC	<u>OBJ</u>	AMOUNT		
U	001 8	08	#339		15	548023	\$8.00		
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R	APPROVED	DISAPPE	ROVED	D	ATE	COMMENT	rs		
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					Do Not Use This Space	
V E	N/	AME CARES Program	n - St. Luke's Children'	s Hospital		
N D	ADDR	ESS 417 S. 6th St.				
O R	CITY / ST.	ATE Boise, ID			ZIP 83702	
	INVOICE NUMBER	INVOICE DATE	P.O. #	DESCRIPTION	V	AMOUNT \$
		6/25/2024		Medical Records - CV14	-24-04847	\$50.00
1		6/25/2024		Medical Records - CR14	-24-08664	\$40.00
N		6/26/2024		Medical Records - CR14	-24-07806	\$160.00
V		6/26/2024		Medical Records - CR14	-24-06618	\$40.00
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					TOTAL	\$290.00
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A T	same is justly due and u	npaio.			1 ~	
н	PRINT NAME	Diane I	Hoadley	SIGNATURE	lane H	vadle
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D	ок	Buyan	Caylor			
E P		(I CENTIFY THAT THES				
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	Print Name	Bryan F.	Taylor	Department Name	Prosecuting	<u>Attorney</u>
A	<u>FUND</u>	DEPT.	DIV	BASIC	<u>OBJ</u>	AMOUNT
U	001 -			. 45	E 40504	
ī		08	- 339	15	548501	\$290.00
Т	-	08	- 339		548501	\$290.00
	-	08	- 339	15	548501	\$290.00
0	-	08	- 339	15	548501	\$290.00
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O R B	APPROVED	DISAPPRO	-	ATE	COMMENT	
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		o. 11th Ave Suite 3 dwell, Idaho 83605	20							
V	Т				Do Not Use This Space					
E	N/	AME CARES Program	n - St. Luke's Children's	Hospital						
N D	ADDR	ESS 417 S. 6th St.								
O R	CITY / ST.	ATE Boise, ID		ZIP 83702						
	INVOICE NUMBER	INVOICE DATE	P.O. #	DESCRIPTION	N	AMOUNT \$				
		5/10/2024		Medical Records - CR14	-24-06892	\$40.00				
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					TOTAL	\$49.00				
0	CERTIFY that the same is justly due and ur	above account is correct;	that the services and/or me	erchandise were furnished as stat						
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Н	PRINT NAME	Diane H	loadley	SIGNATURE	iane) X	vadle				
D	ок	115	Caulon							
E		(I CENTIFY THAT THESE	ARE ACTUAL AND	_						
P T		NECESSARY EXPENDIT	'URES - IC 31-3101)							
	Print Name	Bryan F.	Taylor	Department Name	Prosecuting	Attorney				
A U	FUND	DEPT.	DIV	BASIC	OBJ	AMOUNT				
D	001 -	08	339		548501	\$40.00				
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	Car	aweii, idano 83605	•	Do Not Use This Space					
V E	N.	AME ODP Business	Solutions, LLC		·				
N D	ADDRI	ESS P.O. Box 2924	.8						
O R	CITY / ST.	ATE Phoenix, AZ			ZIP 85038-	9248			
Ë	INVOICE NUMBER	INVOICE DATE	P.O. #	DESCRIPTIO	v 1	AMOUNT \$			
	370665702001	6/13/2024		Office supplie		\$90.58			
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_					TOTAL	\$90.58			
O A	I CERTIFY that the same is justly due and u		ct; that the services and/or m	erchandise were furnished as sta	ted, and the	_			
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Н	PRINT NAME	Diane	Hoadley	SIGNATURE	(ane) IT	onale/			
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E	OK		SE ARE ACTUAL AND)			
P		NĚCESSARY EXPEN	DITURES - IC 31-3101)						
T	Print Name	Bryan F	. Taylor	Department Name	Prosecuting	g Attorney			
A	FUND	DEPT.	DIV	BASIC	OBJ	AMOUNT			
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	Cald	lwell, Idaho 83605	225035		Do Not Use This Space			
V E	NA	ME Dell 620	70222		The second secon			
N D	ADDRE	SS P.O. Box 8028	16					
O R	ACCRECATE VALUE OF THE PARTY OF	TE Chicago, IL			ZIP 60680			
	INVOICE NUMBER		P.O. #	DESCRIPTIO	N I	AMOUNT \$		
	10751979250M	6/1/2024	166007	Dell 3460 SFF PC	's (8)	\$11,777.36		
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Ă	same is justly due and ung	paid.	that the services and/o	or merchandise were furnished as at	eted, and the			
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н	PRINT NAME	Caltlin f	Pendell	SIGNATURE	Key or	-lell		
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F		NECESSARY EXPENDI						
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_	Print Name	Steven H	iggins	Department Name	Information [*]	Technology		
â	FUND	DEPT.	DIV	BASIC	OBJ	AMOUNT		
5	001	08	339	- 15 -	577100	\$11,777.36		
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	Cal	ldwell, Idaho 83605			Do Not Hea This Contin			
V E	N/	AME Amazon Capita	al Services		Do Not Use This Space			
N D	ADDR	ESS P.O. Box 03518	34					
O R		ATE Seattle, WA			ZIP 98124-	5184		
	INVOICE NUMBER	INVOICE DATE	P.O. #	DESCRIPTION	N	AMOUNT \$		
	1KFQ-RVP4-37QM	6/30/2024		1 Tapestry Hanging Tele	scopic Rod	\$12.99		
				(new rod for trial ba	anner)			
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	1.0501571	<u> </u>			TOTAL	\$12.99		
OA	I CERTIFY that the a same is justly due and ur	above account is correct. npaid.	that the services and/or me	erchandise were furnished as stat	ed, and the			
7				1	/			
Н	PRINT NAME	Diane H	loadley	_ SIGNATURE	ane) HO	radle		
D	ок	1115	land.					
E		(I CERTIFY THAT THESE	SALY TON)		
Р		NECESSARY EXPENDIT						
Т	Dalah Manag	D						
1	Print Name	Bryan F. Taylor		Department Name	Proceduting	secuting Attorney		
A					Frosecuting	Accorney		
	FUND	DEPT.	DIV	BASIC	OBJ	AMOUNT		
U	FUND 001							
U D I		DEPT.	DIV	BASIC	OBJ	AMOUNT		
U D I		DEPT.	DIV	BASIC	OBJ	AMOUNT		
UDITO		DEPT.	DIV	BASIC	OBJ	AMOUNT		
U D T O R	001 -	DEPT. 08	DIV - 339 -	BASIC 15	OBJ 577120	\$12.99		
U I T O R		DEPT.	DIV - 339 -	BASIC	OBJ	\$12.99		
U D T O R	001 -	DEPT. 08	DIV - 339 -	BASIC 15	OBJ 577120	\$12.99		
U D I T O R B O	001 -	DEPT. 08	DIV - 339 -	BASIC 15	OBJ 577120	\$12.99		



111 NO. 11th Ave Suite 320

	Cal	dwell, Idaho 83605	5			
V E	N/	AME Amazon Capit	tal Services		Do Not Use This Space	
N D O	ADDR	ESS P.O. Box 0351	184			
R	CITY / ST.	ATE Seattle, WA			ZIP 98124-	5184
	INVOICE NUMBER		P.O. #	DESCRIPTION	N	AMOUNT \$
	1M4D-GQ4X-3HKW	6/20/2024		1 Anker 2.4G Wireless Verti	cal Ergonomic	\$21.99
ı				Optical Mouse	2	
N						
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					TOTAL	\$21.99
0	I CERTIFY that the same is justly due and up	above account is correct	at; that the services and/or r	merchandise were furnished as sta	ted, and the	
A T		ipuid.			1' -	1 11
Н	PRINT NAME	Diane	Hoadley	SIGNATURE	Juane H	oadle
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E	ок	(ICEROFY THAT THE	SE ARE ACTUAL AND			0
E P	OK	(I CERTIFY THAT THE NECESSARY EXPENI	SE ARE ACTUAL AND DITURES - IC 31-3101)			
		NECESSARY EXPEN	SE ARE ACTUAL AND DITURES - IC 31-3101)	- Donord Nove Allows		
P T	Print Name	NECESSARY EXPENI	SE ARE AC UAL AND DITURES - IC 31-3101) Taylor	Department Name	Prosecuting	Attorney
P	Print Name	NECËSSARY EXPENI Bryan F DEPT.	SE ARE AC UAL AND DITURES - IC 31-3101) Taylor DIV	BASIC	OBJ	Attorney AMOUNT
P T A U D	Print Name	NECESSARY EXPENI	SE ARE AC UAL AND DITURES - IC 31-3101) Taylor			Attorney
P T A U D	Print Name	NECËSSARY EXPENI Bryan F DEPT.	SE ARE AC UAL AND DITURES - IC 31-3101) Taylor DIV	BASIC	OBJ	Attorney AMOUNT
P T A U D I T O	Print Name	NECËSSARY EXPENI Bryan F DEPT.	SE ARE AC UAL AND DITURES - IC 31-3101) Taylor DIV	BASIC	OBJ	Attorney AMOUNT
P T A U D I T	Print Name FUND 001	Bryan F DEPT. 08	SE ARE ACTUAL AND DITURES - IC 31-3101) Taylor DIV - 339 -	BASIC - 15	<u>OBJ</u> 577120	Attorney AMOUNT \$21.99
PT AUDITOR B	Print Name	NECËSSARY EXPENI Bryan F DEPT.	SE ARE ACTUAL AND DITURES - IC 31-3101) Taylor DIV - 339 -	BASIC	OBJ	Attorney AMOUNT \$21.99
PTAUDITOR	Print Name FUND 001	Bryan F DEPT. 08	SE ARE ACTUAL AND DITURES - IC 31-3101) Taylor DIV - 339 -	BASIC - 15	<u>OBJ</u> 577120	Attorney AMOUNT \$21.99

Vendor name SOUTHWEST DISTRICT	Invoice number	Invoice date	Claim Number	Account number	Description	Amount	Check Number	Check Date	Division Prosecuting
HEALTH	953-24-PPD07	6/27/24	607762	001-08-339-15-521175 001-08-339-15-521175 Total		\$16,756.25 \$16,756.25	643334	7/25/24	Attorney
BEST WESTERN PLUS CALDWELL INN & SUITES	10374	7/3/24	607868	001-08-339-15-521220		\$127.00	643143	7/25/24	Prosecuting Attorney
BEST WESTERN PLUS CALDWELL INN & SUITES	10380	7/3/24	607868	001-08-339-15-521220		\$115.00	643143	7/25/24	Prosecuting Attorney
BEST WESTERN PLUS CALDWELL INN & SUITES	10386	7/18/24	607868	001-08-339-15-521220		\$115.00	643143	7/25/24	Prosecuting Attorney
BEST WESTERN PLUS CALDWELL INN & SUITES	10392	7/3/24	607868	001-08-339-15-521220		\$127.00	643143	7/25/24	Prosecuting Attorney
BEST WESTERN PLUS CALDWELL INN & SUITES	10430	7/3/24	607868	001-08-339-15-521220		\$230.00	643143	7/25/24	Prosecuting Attorney Prosecuting
GLOBAL/GISELLE'S TRAVEL	216026682	6/7/24	607859	001-08-339-15-521220		\$30.00	643216	7/25/24	Attorney
GLOBAL/GISELLE'S TRAVEL	216026824	6/10/24	607859	001-08-339-15-521220		\$274.47	643216	7/25/24	
GLOBAL/GISELLE'S TRAVEL	216026950	6/20/24	607859	001-08-339-15-521220		\$30.00	643216	7/25/24	_
GLOBAL/GISELLE'S TRAVEL	. 216027569	6/20/24	607859	001-08-339-15-521220		\$608.98	643216	7/25/24	=
GLOBAL/GISELLE'S TRAVEL	. 216027570	6/20/24	607859	001-08-339-15-521220		\$403.98	643216	7/25/24	Prosecuting Attorney
GLOBAL/GISELLE'S TRAVEL	216027995	6/20/24	607859	001-08-339-15-521220		\$966.96	643216	7/25/24	Prosecuting Attorney
GLOBAL/GISELLE'S TRAVEL HOLIDAY INN BOISE	216026682	6/11/24	607859	001-08-339-15-521220		(\$332.60)	643216	7/25/24	Prosecuting Attorney
AIRPORT HOLIDAY INN BOISE	32607	6/19/24	607588	001-08-339-15-521220		\$165.00	643238	7/25/24	Prosecuting Attorney
AIRPORT	32651	7/5/24	607657	001-08-339-15-521220		\$330.00	643238	7/25/24	Prosecuting Attorney

		Invoice	Claim				Check	Check	
Vendor name HOLIDAY INN BOISE	Invoice number	date	Number	Account number	Description	Amount	Number	Date	Division
AIRPORT	32506	6/19/24	607587	001-08-339-15-521220		\$147.00	643238	7/25/24	Prosecuting Attorney
HOLIDAY INN BOISE		-,				Q1 71.00	0 10200	,, 20, 2	Prosecuting
AIRPORT	32515	6/19/24	607587	001-08-339-15-521220		\$147.00	643238	7/25/24	Attorney
HOLIDAY INN BOISE AIRPORT	20524	5/20/04							Prosecuting
HOLIDAY INN BOISE	32534	6/19/24	607587	001-08-339-15-521220		\$165.00	643238	7/25/24	Attorney Prosecuting
AIRPORT	32541	6/19/24	607587	001-08-339-15-521220		\$165.00	643238	7/25/24	Attorney
HOLIDAY INN BOISE						4200.00	0.0200	,, _,,	Prosecuting
AIRPORT	32568	6/19/24	607588	001-08-339-15-521220		\$165.00	643238	7/25/24	Attorney
MASTERCARD	0014	7 /2 /04	607707	004 00 000 45 504000					Prosecuting
WASTERCARD	9614	1/3/24	607707	001-08-339-15-521220		\$224.20	643283	7/25/24	Attorney Prosecuting
MASTERCARD	5483	7/3/24	607706	001-08-339-15-521220		\$355.35	643283	7/25/24	Attorney
				001-08-339-15-521220 Total		\$4,559.34			,
WESTERN RECORDS									Prosecuting
DESTRUCTION	0706341	7/1/24	607580	001-08-339-15-522301		\$86.00	643372	7/25/24	Attorney
				001-08-339-15-522301 Total		\$86.00			Proposition
MASTERCARD	5483	7/3/24	607706	001-08-339-15-542201		\$88,92	643283	7/25/24	Prosecuting Attorney
				001-08-339-15-542201 Total		\$88.92			,
									Prosecuting
HANSON, DEBRA	JUN CELL	7/8/24	607814	001-08-339-15-542203		\$55.00	643226	7/25/24	Attorney
HIMES, DENISE R	JUN CELL	7/8/24	607814	001-08-339-15-542203		\$55.00	642224	7/25/24	Prosecuting Attorney
		170721	001014	001 00 000 10 042200		\$35.00	043234	1/23/24	Prosecuting
SWANSON, GREG	JUN CELL	7/8/24	607814	001-08-339-15-542203		\$55.00	643347	7/25/24	Attorney
		121122							Prosecuting
WESLEY, ZACHARY	JUN CELL	7/8/24	607814	001-08-339-15-542203		\$55.00	643368	7/25/24	Attorney
				001-08-339-15-542203 Total		\$220.00			Danasautina
MASTERCARD	9614	7/3/24	607707	001-08-339-15-545501		\$75.94	643283	7/25/24	Prosecuting Attorney
				001-08-339-15-545501 Total		\$75.94	0.0200	,, 20, 2	,
									Prosecuting
MASTERCARD	5483	7/3/24	607706	001-08-339-15-545503		\$68.95	643283	7/25/24	Attorney
				001-08-339-15-545503 Total		\$68.95			

		Invoice	Claim				Check	Check	
Vendor name	Invoice number	date	Number	Account number	Description	Amount	Number	Date	Division
									Prosecuting
MASTERCARD	5483	7/3/24	1 607706	001-08-339-15-545505		\$592.71	643283	7/25/24	Attorney
				001-08-339-15-545505 Total		\$592.71			
									Prosecuting
MASTERCARD	9614	7/3/24	607707	001-08-339-15-546610		\$595.00	643283	7/25/24	Attorney
1101 TD 112 IN IN INCIDE				001-08-339-15-546610 Total		\$595.00			
HOLIDAY INN BOISE		19 - 27		9				95 38	Prosecuting
AIRPORT	32703	7/5/24	607657	001-08-339-15-548018		\$149.00	643238	7/25/24	Attorney
ST LUKES REGIONAL				001-08-339-15-548018 Total		\$149.00			
MEDICAL CENTER-CARES									B
PROGRAM	GRAND JURY	7/2/2/	607745	001 00 220 15 540501		0.40.00	640006	7 (05 (04	Prosecuting
ST LUKES REGIONAL	GRAND JORT	1/2/24	007743	001-08-339-15-548501		\$40.00	643336	1/25/24	Attorney
MEDICAL CENTER-CARES									Prosecuting
PROGRAM	GRAND JURY	7/5/2/	607745	001-08-339-15-548501		\$25.00	6/3336	7/25/24	Attorney
		1/3/27	7 007143	001-08-339-15-548501 Total		\$65.00	043330	1/25/24	Attorney
THOMSON REUTERS -				001 00 000 10 0 10001 10001		\$05.00			Prosecuting
WEST	850384227	7/1/24	607614	001-08-339-15-548512		\$3,578.15	643352	7/25/24	Attorney
				001-08-339-15-548512 Total		\$3,578.15		.,	,
						, -,			Prosecuting
MASTERCARD	9614	7/3/24	607707	001-08-339-15-577100		\$11.99	643283	7/25/24	Attorney
				001-08-339-15-577100 Total		\$11.99			
									Prosecuting
MASTERCARD	5483	7/3/24	607706	001-08-339-15-577121		\$1,214.92	643283	7/25/24	Attorney
				001-08-339-15-577121 Total		\$1,214.92			
									Describing
						#00 0C0 43			Prosecuting
						\$28,062.17			Attorney Total



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

Caldwell, Idaho 83605 Do Not Use This Space NAME SOUTHWEST DISTRICT HEALTH 62132342 **ADDRESS 13307 MIAMI LN** 0 CITY / STATE CALDWELL, ID ZIP 83607 INVOICE NUMBER INVOICE DATE P.O. # **DESCRIPTION AMOUNT \$** 953-24-PPD07 🗸 6/27/2024 V PPD GRANT PAYMENT \$16,756.25 1 C E **TOTAL** \$16,756.25 I CERTIFY that the above account is correct; that the services and/or merchandise were furnished as stated, and the A same is justly due and unpaid. **PRINT NAME** D Ε ERTIFY THAT THESE ARE ACTUAL AND NECESSARY EXPENDITURES - IC 31-3101) Р T **Print Name PROSECUTOR Department Name FUND** DEPT. DIV BASIC OBJ **AMOUNT** U 001 80 339 15 521175 \$16,756.25 D ı 0 R **APPROVED** DISAPPROVED DATE COMMENTS В Α R



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

D

Do Not Use This Space Ε NAME Best Western Plus Caldwell Inn & Suites Ν ADDRESS 908 Specht Ave. D 0 CITY / STATE Caldwell, ID R **ZIP** 83605 INVOICE NUMBER INVOICE DATE P.O. # DESCRIPTION **AMOUNT \$** CR14-20-07840 - State vs. David Dalrymple: 10374 7/3/2024 PA#2469 Lodging for expert witness Beth Nelson for \$127.00 ı Jury Trial Testimony on June 4-5, 2024 10380 7/3/2024 PA#2473 Lodging for M.C. for transporting expert \$115.00 O witness Dr. Charles Garrison for testimony at Jury Trial June 6-7, 2024 (witness does not C drive) Ε 10386 7/3/2024 PA#2473 Lodging for expert witness Dr. Charles Garrison \$115.00 for Jury Trial testimony June 6-7,2024 0 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. A T Nime Hoadle н PRINT NAME Diane Hoadley SIGNATURE D OK Ε NECESSARY EXPENDITURES - IC 31-3101) P T Print Name Bryan F. Taylor **Department Name Prosecuting Attorney** Α **FUND** DEPT. <u>DIV</u> **BASIC** OBJ **AMOUNT** 001 80 339 D 15 521220 \$357.00 T 0 R **APPROVED DISAPPROVED** DATE В **COMMENTS** 0 A R



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	INVOICE NUMBER	INVOICE DATE	P.O. #		DESCRIPTION	ON	AMOUNT \$
				CR	14-20-07840 - State vs.	David Dalrymple:	
ı	10392	7/3/2024	PA#2441	Loc	lging for expert witness	\$127.00	
N					for Jury Trial testimony.	June 3-4,2024	
٧	10430	7/3/2024	PA#2461	Loc	lging for expert witness I	Dr. Richard Green	\$230.00
0				f	or Jury Trial testimony Ju	ine 16-19,2024	
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0	LCEDTIEV that the					TOTAL	\$714,00
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Н	PRINT NAME Diane Hoadley			_ SIGNATURE	lane H	oaall.	
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	Print Name	Bryan F	. Taylor		_ Department Name _	Prosecuting	Attorney
A	FUND	DEPT.	DIV		BASIC	OBJ	AMOUNT
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	INVOICE NUMBER	INVOICE DATE	P.O. #	DESCRIPTIO	N	AMOUNT \$	
				CR14-20-07840 - State vs. D	avid Dalrymple:		
	216026682	6/7/2024		Service fee for rebooking of	leparting flight	\$30.00	
N				for Dr. Joshua Kapp for testin	nony at Jury Trial		
V	216026682	6/11/2024		Refunded departing fligh	nt fee for Dr.	-\$332.60	
0				Joshua Kapp for testimon	y at Jury Trial		
C	216026824	6/10/2024		Rebooking of departing fligh	nt for Dr. Joshua	\$274.47	
E				Kapp for testimony at	Jury Trial		
_	LOEDTIEV 45 at 45 a				TOTAL		
O A	same is justly due and u		x; that the services and	/or merchandise were furnished as sta	ated, and the		
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	Print Name		. Taylor	Department Name _	Prosecutin	g Attorney	
A U	<u>FUND</u>	DEPT.	DIV	BASIC	<u>OBJ</u>	<u>AMOUNT</u>	
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111 NO. 11th Ave Suite 320 Caldwell, Idaho 83605

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NAME Global/Giselle's Travel E N ADDRESS 900 W. Jefferson D 0 CITY / STATE Boise, ID **ZIP** 83702 R INVOICE NUMBER | INVOICE DATE P.O. # **DESCRIPTION AMOUNT \$** CR14-24-00390 - State vs. Dennis Flora 216026950 6/20/2024 Service fee for cancelled airfare for witness \$30.00 C.C.Q. for Jury Trial N 216027569 6/20/2024 Departing airfare for DPA A. Haws for Conf. in \$608.98 0 Washington D.C. August 11-16, 2024 216027570 6/20/2024 Return airfare for DPA A. Haws for Conf. in \$403.98 C Washington D.C. August 11-16, 2024 E 216027995 6/27/2024 CR14-24-04712-State vs. Gerald Donoso-Riveros \$966.96 Airfare for witness A.C. for Preliminary Hrg \$2,009.92 0 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. A T SIGNATURE Mane Hoads **PRINT NAME** Diane Hoadley D E NECESSARY EXPENDITURES - 10 P T **Print Name** Bryan F. Taylor **Department Name Prosecuting Attorney** A **FUND** DEPT. DIV **BASIC OBJ AMOUNT** 001 80 339 15 548017 \$996.96 D 001 80 339 15 545507 \$1,012.96 T 0 R **APPROVED DISAPPROVED** DATE **COMMENTS** В O A R



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

Do Not Use This Space NAME Holiday Inn Boise Airport Ε N ADDRESS 2970 Elder Street D 0 CITY / STATE Boise, ID **ZIP** 83705 R INVOICE NUMBER INVOICE DATE P.O. # **DESCRIPTION AMOUNT \$** CR14-20-07840 - State vs. David Dalrymple 32506 6/19/2024 PA#2470 Hotel for expert witness Danielle Reed for \$147.00 testimony at Jury Trial May 29-30, 2024 N 32515 6/19/2024 Hotel for expert witness Tracey Johnson for \$147.00 0 testimony at Jury Trial May 31-June 1, 2024 32534 6/19/2024 PA#2466 Hotel for expert witness Beth Nelson for \$165.00 C testimony at Jury Trial June 3-4, 2024 E 32541 6/19/2024 PA#2466 Hotel for expert witness Beth Nelson for \$165.00 testimony at Jury Trial June 5-6, 2024 0 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. SIGNATURE ALANE HORALLE T **PRINT NAME** Diane Hoadley Н D E P T Print Name Bryan F. Taylor **Department Name Prosecuting Attorney** Α FUND DEPT. DIV **BASIC OBJ AMOUNT** U 001 80 15 521220 \$624.00 D T 0 R APPROVED **DISAPPROVED** DATE **COMMENTS** В 0 A R D



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O R	CITY / STATE Boise, ID					ZIP 83705	<u> </u>	
	INVOICE NUMBER	INVOICE DATE	P.O.#		DESCRIPTIO)N	AMOUNT \$	
				CR:	14-20-07840 - State vs. [David Dalrymple		
ı	32568	6/19/2024	PA#2468	Н	otel for expert witness D	\$165.00		
N				fo	r testimony at Jury Trial .			
٧	32607	6/19/2024	PA#2471	Hote	el for expert witness Dr.	Richard Green, Jr.	\$165.00	
0				for	testimony at Jury Trial J	une 16-17, 2024		
C								
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						TOTAL	\$954.00	
0 A	I CERTIFY that the same is justly due and u		ct; that the services a	ind/or mei	chandise were furnished as st	ated, and the		
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Н	PRINT NAME	Diane Hoadley			_ SIGNATURE	ane Ho	able)	
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D	ок	Cheran	Caylon		_			
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T								
	Print Name	Bryan F. Taylor		Department Name		Prosecutin	Prosecuting Attorney	
A	<u>FUND</u>	DEPT.	DIV		BASIC	OBJ	AMOUNT	
U	001 -	08	339		15 -	521220	\$330.00	
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111 NO. 11th Ave Suite 320 Caldwell, Idaho 83605

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Do Not Use This Space E NAME Holiday Inn Boise Airport Ν ADDRESS 2970 Elder Street D 0 CITY / STATE Boise, ID **ZIP** 83705 R INVOICE NUMBER | INVOICE DATE P.O. # **DESCRIPTION AMOUNT \$** CR14-20-07840 - State vs. David Dalrymple Hotel for expert witness Dr. Richard Green for 32651 7/5/2024 \$330.00 June 23-25, 2024 N CR14-24-04712-State vs. Gerald Donoso Riveros 0 32703 7/5/2024 Hotel for witness A.C-D. for testimony at \$149.00 Preliminary Hearing on July 2, 2024 C E **TOTAL** \$479.00 0 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. T SIGNATURE Name) Hoads **PRINT NAME** Diane Hoadley D OK (I CERTIFY THAT THESE ARE ACTUAL AND NECESSARY EXPENDITURES (C 31-3101) E Р T Print Name Bryan F. Taylor **Department Name Prosecuting Attorney** A **FUND** DEPT. DIV **BASIC OBJ AMOUNT** 001 80 339 15 521220 \$330.00 D 001 80 339 15 548018 \$149.00 T 0 R **APPROVED** DISAPPROVED DATE **COMMENTS** В 0 A



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

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Do Not Use This Space **NAME** Mastercard Ε N ADDRESS P.O. Box 35138 D O CITY / STATE Seattle WA **ZIP** 98124-5138 R INVOICE NUMBER | INVOICE DATE P.O. # **DESCRIPTION AMOUNT \$** CR14-20-07840- State vs. David Dalrymple INV259554840 6/4/2024 **Zoom Communications** \$15.99 PODSCS02550128 6/11/2024 PODS Storage - Evidence Storage \$179.14 N 6/10/2024 Walmart - Water or victims & witnesses \$29.07 0 6/11/2024 Domino's - Lunch for Victim Witness Training \$75.94 SSP8XZMX4JJD 6/15/2024 Dropbox Inc. - Shared folder \$11.99 C 6/18/2024 International Homicide Investigators Assn. \$595.00 Ε Registration for DPA A. Haws for Conf. 9614 - Page 1 of 1 **TOTAL** \$907.13 I CERTIFY that the above account is correct; that the services and/or merchandise were furnished as stated, and the 0 same is justly due and unpaid. A Т **PRINT NAME** SIGNATURE н Diane Hoadley D LERGENTHAT THESE ARE ACTUAL AND E NECESSARY EXPENDITURES (C. 21-3101) P Ŧ **Print Name Bryan Taylor** Department Name **Canyon County Prosecuting Attorney FUND** DEPT. DIV **BASIC OBJ AMOUNT** U 001 80 339 15 521220 \$224.20 D 001 08 339 15 \$75.94 545501 T 001 80 339 15 577100 \$11.99 0 001 08 339 15 546610 \$595.00 R **APPROVED** DISAPPROVED DATE **COMMENTS** В O A



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Ε **NAME** Mastercard N ADDRESS P.O. Box 35138 D 0 CITY / STATE Seattle WA **ZIP** 98124-5138 R INVOICE NUMBER | INVOICE DATE P.O. # **DESCRIPTION AMOUNT \$** 112731690 6/6/2024 Sparklight - Business Modem Lease \$88.92 6/12/2024 Conoco - Fuel for rental car for DPA S. \$61.63 1 Vermeer for conf. in Frisco, CO N 6/12/2024 Corner Store - Fuel for rental care for DPA S. \$7.32 0 Vermeer for conf. in Frisco, CO CR14-20-07840 - State vs. David Dalrymple: C 6/13/2024 35410 Caldwell Transportation Co. - Bus for \$355.35 E jurors to be bused from Canyon County Courthouse to Nampa, ID and back **TOTAL** I CERTIFY that the above account is correct; that the services and/or merchandise were furnished as stated, and the 0 same is justly due and unpaid. A T SIGNATURE Н **PRINT NAME** Diane Hoadley D THESE ARE ACTUAL AND Ε XRENDITURES P T **Print Name Bryan Taylor Department Name** Canyon County Prosecuting Attorney DEPT. **FUND** DIV **BASIC** OBJ **AMOUNT** 001 08 339 15 542201 \$88.92 D 001 08 339 15 545503 \$68.95 T 001 80 15 339 521220 \$355.35 O R **APPROVED DISAPPROVED** COMMENTS DATE В O A R D



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

Do Not Use This Space **NAME** Mastercard N ADDRESS P.O. Box 35138 D 0 CITY / STATE Seattle WA **ZIP** 98124-5138 R INVOICE NUMBER | INVOICE DATE P.O. # **DESCRIPTION AMOUNT \$** 6/12/2024 Cambria Hotel - Hotel for DPA S. Vermeer \$592.71 for conf. in Frisco, CO June 9-12, 2024 ı 6/9/2024 Cambria Hotel - Credit card hold for DPA \$50.00 N S. Vermeer for conf. in Frisco, CO 0 6/12/2024 Cambria Hotel - Credit for credit card hold -\$50.00 9922804624 6/26/2024 Staples - 3 Office Chairs \$515.22 C 9922940949 7/1/2024 Staples - 5 Office Chairs \$699.70 Ε 9614 Page 2 of 2 **TOTAL** O 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. A T Н **PRINT NAME** SIGNATURE Diane Hoadley D E IAT THESE ARE ACTUAL AND EXPENDITURES (C 31-3101) P T **Print Name Bryan Taylor Department Name Canyon County Prosecuting Attorney** A **FUND** DEPT. <u>DIV</u> **BASIC OBJ AMOUNT** U 001 80 339 15 545505 \$592.71 D 001 80 339 15 577121 \$1,214.92 T 0 R **APPROVED** DISAPPROVED DATE **COMMENTS** В 0 Α R D

Invoice #0706341						Invoice Date 07/0	1/2024
Western Records Destruction					目	Services 06/01/2024-00	6/30/2024
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	202	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	\$	86.00
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						\$	



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V E	N/	AME Prosecutor's	Office		Do Not Use This Space		
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	INVOICE NUMBER	INVOICE DATE	P.O. #	DESCRIPT	ION	AMOUNT \$	
		7/8/2024		PA's Office cell pho	one stipend		
				Please see attached list of	ease see attached list of five (5) employees		
N				to receive \$55.00 stipend	receive \$55.00 stipend for the month of		
٧				June, 202	24		
0				(1) for Nan	npa	\$55.00	
C				(4) for Cald	well	\$220.00	
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0	LOSDIEVALA			700	TOTAL	\$275.00	
A T H	same is justly due and u	npaid.	Hoadley	d/or merchandise were furnished as	A ·	rable)	
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<u> </u>	Print Name	Bryan F	. Taylor	Department Name	Prosecuting	Attorney	
A	FUND	DEPT.	DIV	BASIC	OBJ	AMOUNT	
U	001 -	08	344	- 15 -	542203	\$55.00	
1	001 -	08	- 339	15	542203	\$220.00	
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Ē	N/	AME CARES Progra	m - St. Luke's Children	's Hospital			
N D	ADDR	ESS 417 S. 6th St.					
O R	CITY / ST	ATE Boise, ID			ZIP 83702		
	INVOICE NUMBER	INVOICE DATE	P.O. #	DESCRIPTIO	N [AMOUNT \$	
		7/2/2024		Medical Records - Gr	and Jury	\$40.00	
ı		7/5/2024		Medical Records - Gr	and Jury	\$25.00	
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	Print Name	Bryan F	. Taylor	Department Name	Prosecuting	Attorney	
A	<u>FUND</u>	DEPT.	DIV	BASIC	OBJ	AMOUNT	
D		08	- 339	15	548501	\$65.00	
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111 NO. 11th Ave Suite 320 Caldwell, Idaho 83605

Do Not Use This Space **NAME** Thomson Reuters - West E N ADDRESS P.O. Box 6292 D Q CITY / STATE Carol Stream, IL ZIP 60197-6292 R INVOICE NUMBER INVOICE DATE P.O. # **DESCRIPTION AMOUNT \$** 850384227 7/1/2024 West Information Charges (June 1-30, 2024) ı Caldwell Office \$2,997.91 Nampa Office \$580.24 0 ı C Ε **TOTAL** \$3,578.15 0 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. A T **PRINT NAME SIGNATURE** H D **OK** (I CERTIFY THAT THESE ARE ACTUAL AND NECESSARY EXPENDITURES - IC 31-3101) E P T **Print Name Bryan Taylor** Department Name **Canyon County Prosecuting Attorney FUND** DEPT. DIV **BASIC** OBJ **AMOUNT** 001 80 339 15 548512 \$3,578.15 D T 0 R **APPROVED DISAPPROVED DATE** COMMENTS В 0 A R D