

City of South Bend Department of Administration & Finance Claims Allowance Request

To: South Bend Redevelopment Commission

From: Daniel Parker, City Controller

Date: Tuesday, August 10, 2021

Pursuant to Indiana Code 36-4-8-7, I have audited and certified the attached claims and submit them for allowance in the following amounts:

GBLN-0021011 GBLN-0000000 \$5,345.95 \$0.00

Total: \$5,345.95

Daniel Parker, City Controller

The attached claims described above were allowed in the following total amount at a public meeting on the date stated below:

\$ 5,345.95

By:

South Bend Redevelopment Commission Name:

Date:

Name:

Name:

Name:

Name:

Name:

Payment method: Voucher: Payment date:	ACH-Total RDCP-00000356 8/10/2021						
Vendor #	Name ABONMARCHE	Invoice #	Line description	Due date	Invoice amount	Financial dimensions	Purchase order
V-00000019	CONSULTANTS OF IN	136257	Amendment #1	8/5/2021	\$1,920.50	324-10-102-121-442001 PROJ00000046	PO-0006600
Payment method: Voucher: Payment date:	CHK-Total RDCP-0000035 8/10/2021	7					
Vendor #	Name ALLIANCE	Invoice #	Line description	Due date	Invoice amount	Financial dimensions	Purchase order
V-0000074	ARCHITECTS INC ALLIANCE	6	PSA - Salvation Army Roof Repairs	8/15/2021	\$49.05	324-10-102-121-443001 PROJ00000073	PO-0004341
V-0000074	ARCHITECTS INC	6	Amendment #1	8/15/2021	\$576.40	324-10-102-121-443001 PROJ00000073	PO-0004341
Payment method: Voucher: Payment date:	ACH-Total RDCP-0000035 8/10/2021	8					
Vendor #	Name	Invoice #	Line description	Due date	Invoice amount	Financial dimensions	Purchase order
	Electric Housing						