

CITY OF HAVERHILL
School Vendor Warrants
LEA/ Cafeteria / Grants/ P-Card

To the City Auditor: The following names, bills and payrolls have been approved by the School Administration. We are requesting them to be placed on a warrant for payment. I hereby certify under penalty of perjury, and to the best of my ability, that the amounts as scheduled are true and correct and the services and/or materials herein represented have been received as required in accordance with contracts, and that all names, contracts and payrolls in the amounts as scheduled are school department charges.

P-Card	\$17,749.28
Total	\$17,749.28

Approved By

I hereby certify under penalty of perjury that the amounts as scheduled are true and correct and the services and/or materials herein represented have been received as required in accordance with contracts.

Date _____

City of Haverhill Massachusetts

Fiscal Year: 2023-2024

SCHOOL JE20240531

Inv. Date	Vendor	Total	Detail Line Description	Account
5/31/2024	BANKCARD	\$280.00	645 21st CCLC Continuation Supplies	4246450.4.3520.6582.36.000.07.10
5/31/2024	BANKCARD	\$80.00	647 21st CCLC SALT School Year Supplies	4246471.4.3520.6582.36.000.07.10
5/31/2024	BANKCARD	\$13,800.00	FY24 FAFSA Completion HHS Supplies	4471022.4.2415.6582.61.000.07.10
5/31/2024	BANKCARD	\$801.57	Health Regional - Supplies. Other	4242551.4.3200.6582.37.000.06.20
5/31/2024	BANKCARD	\$95.92	Office Supplies-Non Instructional	4231190.4.2210.6582.54.725.00.20
5/31/2024	BANKCARD	\$919.98	Tech Infrastructure Contract Services	1010000.4.4450.6450.73.200.00.10
5/31/2024	BANKCARD	\$1,771.81	Whittier General Activity	7001000.4.3520.6665.51.899.99.99
Grand Total:		\$17,749.28		

End of Report

MAY
May 1, 2024 - May 31, 2024

Item GL Combination	Last 4	Post Date	Vendor Name	Credit	Debit		Description
4471022.4.2415.6582.61.000.07.10	4888	5/23/2024	Cumberland Farms		\$525.00		Gift Cards
4471022.4.2415.6582.61.000.07.10	4888	5/23/2024	Walgreens		\$2,500.00		Gift Cards
4471022.4.2415.6582.61.000.07.10	4888	5/23/2024	Walgreens	-\$250.00			Gift Cards
4471022.4.2415.6582.61.000.07.10	4888	5/23/2024	Staples		\$300.00		Gift Cards
4471022.4.2415.6582.61.000.07.10	4888	5/23/2024	CVS		\$1,175.00		Gift Cards
4471022.4.2415.6582.61.000.07.10	4888	5/24/2024	Market Basket		\$9,550.00		Gift Cards
4246471.4.3520.6582.36.000.07.10	4888	5/24/2024	Market Basket		\$80.00		Gift Cards
4246450.4.3520.6582.36.000.7.10	4888	5/24/2024	Market Basket		\$280.00	\$14,160.00	Gift Cards
1010000.4.4450.6450.73.200.00.10	3295	5/3/2024	GoDaddy		\$899.98		Subscription
1010000.4.4450.6450.73.200.00.10	3295	5/11/2024	ChatGPT		\$20.00	\$919.98	Subscription
7001000.4.3520.6665.51.899.99.99	3431	5/22/2024	Honest Medical		\$801.57		Health Supplies
1010000.4.2210.6582.54.725.00.10	3431	5/55/2024	Home Depot		\$95.92		Fans for Classrooms
4252551.4.3200.6582.37.000.06.20	3431	5/30/2024	Cheesecake		\$1,771.81	\$2,669.30	Honor Society - Whittier
TOTAL:				-\$250.00	\$17,999.28	\$17,749.38	



KATHLEEN SMITH
CITY OF HAVERHILL
XXXX-XXXX-XXXX-4888
May 01, 2024 - May 31, 2024

Purchasing Card

Cardholder Activity

Account Information	Payment Information	Account Summary
Mail Billing Inquiries to: BANKCARD CENTER PO Box 660441 Dallas, TX 75266-0441 TTY Hearing Impaired: Dial "711" Outside the U.S.: 1.509.353.6656 24 Hours For Lost or Stolen Card: 1.888.449.2273 24 Hours	Statement Date 05/31/24 Credit Limit \$20,000 Cash Limit \$0 Days in Billing Cycle 31 Total Activity \$14,160.00 <div>THIS IS NOT A BILL - DO NOT PAY</div>	Credits -\$250.00 Cash \$0.00 Purchases \$14,410.00 Other Debits \$0.00 Cash Fees \$0.00 Other Fees \$0.00 Total Activity \$14,160.00

Important Messages

Global Card Access – your card information whenever, wherever and however you need it. From the dashboard, you can quickly check your credit limit, balance, available credit and recent card activity. Other features like View PIN, Change PIN, Lock Card and Alerts help you keep your card secure. For added convenience, you can easily view or download your current statement up to 12 months of past statements. Visit www.bofa.com/globalcardaccess to register your card and start using Global Card Access today.

Transactions							
Posting Transaction							
Date	Date	Description		Reference Number	MCC	Charge	Credit
05/24	05/23	MARKET BASKET 00000091	HAVERHILL MA	24164074144433520348076	5411	75.00	
05/24	05/23	MARKET BASKET 00000158	HAVERHILL MA	24164074144433520376291	5411	4,725.00	
05/24	05/23	MARKET BASKET 00000257	PLAISTOW NH	24164074144433520445401	5411	350.00	
05/24	05/23	MARKET BASKET 00000489	HAVERHILL MA	24164074144433520580074	5411	1,000.00	
05/24	05/23	CUMBERLAND FARMS 3532	HAVERHILL MA	24692164145100772943107	5541	250.00	
05/24	05/23	CUMBERLAND FARMS 3501	HAVERHILL MA	24692164145100772946258	5541	275.00	
05/24	05/23	WALGREENS #7617	HAVERHILL MA	24445004145001050680197	5912	500.00	
05/24	05/23	WALGREENS #9614	HAVERHILL MA	24445004145001050680353	5912	250.00	
05/24	05/23	WALGREENS #9614	HAVERHILL MA	24445004145001050680502	5912	500.00	
05/24	05/23	WALGREENS #7617	HAVERHILL MA	24445004145001050680270	5912	250.00	
05/24	05/23	WALGREENS #9614	HAVERHILL MA	24445004145001050680437	5912	500.00	

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Account Number: XXXX-XXXX-XXXX-4888
May 01, 2024 - May 31, 2024

BANK OF AMERICA
PO BOX 15731
WILMINGTON, DE 19886-5731

KATHLEEN SMITH
CITY OF HAVERHILL
CITY HALL - ROOM 104
4 SUMMER ST
HAVERHILL, MA 01830-5836

Total Activity \$14,160.00

Cardholder Signature	Date
Manager Signature	Date

5499900 1 1:0005 1 103404888

KATHLEEN SMITH
CITY OF HAVERHILL
XXXX-XXXX-XXXX-4888
May 01, 2024 - May 31, 2024

Transactions

Posting Transaction									
Date	Date	Description		Reference Number		MCC	Charge	Credit	
05/24	05/23	WALGREENS #15464	PLAISTOW NH	24445004145001050680684		5912	500.00		
05/24	05/23	CVS/PHARMACY #00365	HAVERHILL MA	24137464145001669609305		5912	200.00		
05/24	05/23	CVS/PHARMACY #00365	HAVERHILL MA	24137464145001669609552		5912	200.00		
05/24	05/23	CVS/PHARMACY #00365	HAVERHILL MA	24137464145001669609719		5912	150.00		
05/24	05/23	CVS/PHARMACY #00365	HAVERHILL MA	24137464145001669609222		5912	100.00		
05/24	05/23	CVS/PHARMACY #00365	HAVERHILL MA	24137464145001669609487		5912	200.00		
05/24	05/23	CVS/PHARMACY #00365	HAVERHILL MA	24137464145001669609636		5912	200.00		
05/24	05/23	CVS/PHARMACY #00365	HAVERHILL MA	24137464145001669609891		5912	125.00		
05/27	05/23	STAPLES 00109074	PLAISTOW NH	24164074145105442083895		5943	300.00		
05/27	05/24	market basket 00000059	LAWRENCE MA	24164074145433520423985		5411	2,300.00		
05/27	05/24	MARKET BASKET 00000844	SALEM NH	24164074145433521012944		5411	1,460.00		
05/27	05/23	WALGREENS #9614	HAVERHILL MA	74445004145001820073777		5912		250.00	

CUM - 525.00
Walgreens - 2500.00
Staples - 300
CVS - 1175.00
MB - 9910.00
360-Disc



Haverhill Public Schools

Purchasing Card Pre-Authorization Form

The Haverhill Public Schools requires pre-authorization for all Bank of America P-Card Purchases. This Pre-Authorization requires the signature of the Assistant Superintendent of Finance and Operations (regardless of amount) and the Superintendent of Schools if above \$10,000. Please complete the fields below and submit for signatures prior to making any purchasing commitments.

Date 5/23-5/31 2024

Department Name _____

Employee Name Kathy Smith

Vendor Name multiple

Amount of Purchase 13800.00 - 360.00 \$14160.00

Funding Source (LEA/Grant/Etc) _____

Expense Account Number 4471022.4.2415.6582.61.000.07.10

Explanation of expense Amazon Gift Cards

Employee Signature Kathy Smith (M.D.)

Assistant Superintendent Approval Kathy Smith

Superintendent Approval (\$10,000+)

4246471.4.3520.6582.36.000.07.10. \$80.00
4246450.4.3520.6582.36.000.07.10. 280.00
360.00

DOUGLAS RUSSELL
CITY OF HAVERHILL
XXXX-XXXX-XXXX-3295
May 01, 2024 - May 31, 2024

Purchasing Card

Cardholder Activity

Account Information	Payment Information	Account Summary
Mail Billing Inquiries to: BANKCARD CENTER PO Box 660441 Dallas, TX 75266-0441 TTY Hearing Impaired: Dial "711" Outside the U.S.: 1.509.353.6656 24 Hours For Lost or Stolen Card: 1.888.449.2273 24 Hours	Statement Date 05/31/24 Credit Limit \$19,012 Cash Limit \$0 Days in Billing Cycle 31 Total Activity \$919.98 <div>THIS IS NOT A BILL - DO NOT PAY</div>	Credits \$0.00 Cash \$0.00 Purchases \$919.98 Other Debits \$0.00 Cash Fees \$0.00 Other Fees \$0.00 Total Activity \$919.98

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Transactions						
Posting Transaction						
Date	Date	Description		Reference Number	MCC	Charge
05/06	05/03	DNH*GODADDY.COM	480-5058855 AZ	24906414124199375273561	4816	899.98
05/13	05/11	CHATGPT SUBSCRIPTION	HTTPSOPENAI.CCA	24492164132000028838613	5734	20.00

00000000 00000000 00000000 4715291100343295

Account Number: XXXX-XXXX-XXXX-3295
May 01, 2024 - May 31, 2024

|||||
BANK OF AMERICA
PO BOX 15731
WILMINGTON, DE 19886-5731

|||||
DOUGLAS RUSSELL
CITY OF HAVERHILL
SCHOOL DEPT ROOM 104
4 SUMMER ST
HAVERHILL, MA 01830-5836
***N0004064

Total Activity \$919.98

Cardholder Signature _____ Date _____


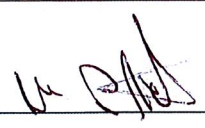
Manager Signature _____ Date _____



Haverhill Public Schools

Purchasing Card Pre-Authorization Form

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Date	<u>5-3-24</u>
Department Name	<u>Technology</u>
Employee Name	<u>Douglas Russell</u>
Vendor Name	<u>Go Daddy</u>
Amount of Purchase	<u>899.98</u>
Funding Source (LEA/Grant/Etc)	<u>LEA</u>
Expense Account Number	<u>1010000.4.4450.6450.73.200.00.10</u>
Explanation of expense	<u></u>
Employee Signature	<u></u>
Assistant Superintendent Approval	<u></u>
Superintendent Approval (\$10,000+)	<u></u>



Haverhill Public Schools

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Date 5.11.2024

Department Name Technology

Employee Name Doug Russell

Vendor Name Chat GPT

Amount of Purchase 20.00

Funding Source (LEA/Grant/Etc) _____

Expense Account Number 1010000.4.4450.6450.73.200.00.10

Explanation of expense _____

Employee Signature Kathy Smith (D.R.)

Assistant Superintendent Approval Kathy Smith

Superintendent Approval (\$10,000+) _____



MICHAEL J PFIFFERLING
CITY OF HAVERHILL
XXXX-XXXX-XXXX-3431
May 01, 2024 - May 31, 2024

Purchasing Card

Cardholder Activity

Account Information	Payment Information	Account Summary
Mail Billing Inquiries to: BANKCARD CENTER PO Box 660441 Dallas, TX 75266-0441 TTY Hearing Impaired: Dial "711" Outside the U.S.: 1.509.353.6656 24 Hours For Lost or Stolen Card: 1.888.449.2273 24 Hours	Statement Date 05/31/24 Credit Limit \$20,898 Cash Limit \$0 Days in Billing Cycle 31 Total Activity \$2,669.30 <div>THIS IS NOT A BILL - DO NOT PAY</div>	Credits \$0.00 Cash \$0.00 Purchases \$2,669.30 Other Debits \$0.00 Cash Fees \$0.00 Other Fees \$0.00 Total Activity \$2,669.30

Important Messages

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Transactions

Posting Transaction				Reference Number	MCC	Charge	Credit
Date	Date	Description					
05/22	05/22	HONEST MEDICAL	833-933-2323 CA	24692164143102057772245	5047	801.57	
05/24	05/22	THE HOME DEPOT #3487	PLAISTOW NH	24943014144010181425718	5200	95.92	
05/31	05/30	CHEESECAKE CAMBRIDGE	CAMBRIDGE MA	24943004152091508000178	5812	1,771.81	

00000000 00000000 00000000 4715292431943431

Account Number: XXXX-XXXX-XXXX-3431
May 01, 2024 - May 31, 2024



BANK OF AMERICA
PO BOX 15731
WILMINGTON, DE 19886-5731



MICHAEL J PFIFFERLING
CITY OF HAVERHILL
HAVERHILL PUBLIC SCHOOLS A/P
4 SUMMER ST STE 104
HAVERHILL, MA 01830-5843

**N0004286

Total Activity \$2,669.30

Cardholder Signature _____ Date _____

Manager Signature _____ Date _____

15499900 11:00052431943431



Haverhill Public Schools

Purchasing Card Pre-Authorization Form

The Haverhill Public Schools requires pre-authorization for all Bank of America P-Card Purchases. This Pre-Authorization requires the signature of the Assistant Superintendent of Finance and Operations (regardless of amount) and the Superintendent of Schools if above \$10,000. Please complete the fields below and submit for signatures prior to making any purchasing commitments.

Date 5.30.2024

Department Name Whittier

Employee Name Lauren MacKinnon

Vendor Name Cheesecake Cambridge

Amount of Purchase 1771.81

Funding Source (LEA/Grant/Etc) _____

Expense Account Number _____

Explanation of expense 7001070-4-3520-6665-51-899-99-99

Employee Signature Kathy Smith (M.P.)

Assistant Superintendent Approval Kathy Smith

Superintendent Approval (\$10,000+) _____



Haverhill Public Schools

Purchasing Card Pre-Authorization Form

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Date 5/22/24

Department Name Consentino

Employee Name Michael P. Sifferting

Vendor Name Home Depot

Amount of Purchase \$ 95.92

Funding Source (LEA/Grant/Etc) LEA

Expense Account Number 1010000.4, 2210.6582.54.725.00.20

Explanation of expense Fans for classrooms (4)

Employee Signature Michael P. Sifferting

Assistant Superintendent Approval Michael P. Sifferting

Superintendent Approval (\$10,000+) _____



Haverhill Public Schools

Purchasing Card Pre-Authorization Form

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Date

May 20, 2024

Department Name

Business - Nursing / Health

Employee Name

FRB : Eileen Spero by Delfi Almonte

Vendor Name

Honestmed

Amount of Purchase

\$ 748.77 + (6.00 shipping) + (46.80 tax)

Funding Source (LEA/Grant/Etc)

Expense Account Number

4252551.4.3200.6582.37.000.06.20

Explanation of expense

PO's not accepted - Nurse

Employee Signature

Assistant Superintendent Approval

Superintendent Approval (\$10,000+)