VOUCHER APPROVALS

Spokane Fire District 5 Time: 21:05:20 Date: 11/10/2026

06/06/2026 To: 06/06/2026 Page: 1

Voucher	Claimant	Trans	Date	Type	Acct #	Amount	Memo	
1925	Employee Paycheck	104	06/15/2026	Payroll	1	1,654.51		MCCABETH
1926	Employee Paycheck	105	06/15/2026	Payroll	1	446.05		ALVADAVE
1927	Employee Paycheck	106	06/15/2026	Payroll	1	21.80		BENNROBE
1928	Employee Paycheck	109	06/15/2026	Payroll	1	21.80		FLINMIKE
1929	Employee Paycheck	110	06/15/2026	Payroll	1	431.53		GROSCLIF
1930	Employee Paycheck	111	06/15/2026	Payroll	1	108.97		GROSGARY
1931	Employee Paycheck	112	06/15/2026	Payroll	1	196.15		GROSJARE
1932	Employee Paycheck	113	06/15/2026	Payroll	1	217.95		GROSMICH
1933	Employee Paycheck	114	06/15/2026	Payroll	1	287.69		GUMMIJOE
1934	Employee Paycheck	115	06/15/2026	Payroll	1	47.95		HENRNICK
1935	Employee Paycheck	116	06/15/2026	Payroll	1	21.80		HOFEADAM
1936	Employee Paycheck	117	06/15/2026	Payroll	1	453.33		HOFEDUST
1937	Employee Paycheck	118	06/15/2026	Payroll	1	383.59		LUCHBRYA
1938	Employee Paycheck	119	06/15/2026	Payroll	1	407.56		LUCHGREG
1939	Employee Paycheck	120	06/15/2026	Payroll	1	719.22		LYNCSCOT
1940	Employee Paycheck	121	06/15/2026	Payroll	1	21.80		MCADMILE
1941	Employee Paycheck	122	06/15/2026	Payroll	1	52.31		MCCABETH
1942	Employee Paycheck	123	06/15/2026	Payroll	1	87.18		MCCAMASO
1943	Employee Paycheck	124	06/15/2026	Payroll	1	239.74		MCLEDAN0
1944	Employee Paycheck	125	06/15/2026	Payroll	1	446.05		SCOTBRIA
1945	Employee Paycheck	126	06/15/2026	Payroll	1	183.08		STILMICH
1946	Employee Paycheck	127	06/15/2026	Payroll	1	108.97		WOHLVAN0
			Total Vouchers:			6,559.03		

CERTIFICATION: I, the undersigned do hereby certify under penalty of perjury, that the materials have been furnished, the services rendered or the labor performed as described and that the claim is a due and unpaid obligation against the Spokane County Fire Protection District 5 and that I am authorized to authenticate and certify to said claim.

Commissioner Chair _____

Commissioner _____

Commissioner _____

Secretary (attest) _____ Date:_____