

**CITY OF AURORA  
E911 FUND REIMBURSEMENT  
SUMMARY OF ELIGIBLE EXPENDITURES  
FOR THE PERIOD 1/1/2026 THROUGH 3/31/2026**

<b>EXPENDITURES:</b>	<b>TOTAL</b>
<b>SALARY &amp; BENEFITS</b>	872,677.52
PHONE MAINTENANCE CONTRACT	
LANGUAGE SERVICES	276.69
TRAINING	
OTHER EQUIPMENT	
COMPUTER SOFTWARE	437,612.40
COMPUTER HARDWARE	
COMPUTER MAINTENANCE CONTRACT	
COMPUTER NETWORK EQUIPMENT	
CONSULTING SERVICES	
<b>OPERATING COSTS</b>	<u>437,889.09</u>
<b>TOTAL</b>	<u><u>1,310,566.61</u></u>

E911 Surcharge Revenues

1/1/2026-3/31/2026

Sum of AMOUNT	Column Labels	
Row Labels	Aurora	Naperville
<b>E911 SURCHARGE</b>		
<b>2026</b>		
1/7/2026	194,044.77	238,718.45
2/11/2026	197,925.45	242,192.93
3/12/2026	192,832.33	237,788.74
<b>Grand Total</b>	<b>584,802.55</b>	<b>718,700.12</b>

026 SALARY RECAP

CITY OF AURORA  
E911 LABOR COSTS

FOR REPORTING PURPOSES  
(AMOUNTS INCLUDED IN THE TOTAL COSTS)

911 MANAGER SALARY

Y PERIOD DATES	PAID DATE		GROSS WAGES	MEDICARE	IMRF	FICA	GROSS WAGES	MEDICARE	IMRF	FICA
2/27/25 TO 1/9/26	1/15/2026	PAY PERIOD 1	129,952.13	1,775.17	11,890.62	7,590.42	5,755.20	80.96	526.60	346.16
/10/26 TO 1/23/26	1/29/2026	PAY PERIOD 2	120,724.29	1,656.19	11,046.28	7,081.67	5,755.20	80.81	526.60	345.54
/24/26 TO 2/6/26	2/12/2026	PAY PERIOD 3	122,861.92	1,707.93	11,241.84	7,302.81	5,755.20	80.96	526.60	346.16
/7/26 TO 2/20/26	2/26/2026	PAY PERIOD 4	125,987.52	1,752.77	11,527.88	7,494.75	5,755.20	80.81	526.60	345.54
/21/26 TO 3/6/26	3/12/2026	PAY PERIOD 5	122,068.25	1,696.42	11,169.26	7,253.64	5,755.20	80.96	526.60	346.16
/7/26 TO 3/20/26	3/26/2026	PAY PERIOD 6	127,813.55	1,779.28	11,694.97	7,607.96	6,255.20	88.06	572.35	376.54
			<u>749,407.66</u>	<u>10,367.76</u>	<u>68,570.85</u>	<u>44,331.25</u>	<u>35,031.20</u>	<u>492.56</u>	<u>3,205.35</u>	<u>2,106.10</u>

Q1 REIMBURSEMENT REQUEST 872,677.52

m PR546L  
F AURORA, ILLINOIS

BIWEEKLY  
Pay Date 1/15/26

Pay Period 1  
12/27/25 to 01/09/26

Act: 35 37 421 POLICE-E911 CENTER

Employee Name	Employee Number		M-T-D		Q-T-D		Y-T-D	
	Current Qty	Amount	Qty	Amount	Qty	Amount	Qty	Amount

ER, JILLIAN D	6378							
X-FEDERAL INCOME		630.58		630.58		630.58		630.58
X-STATE INCOME		258.90		258.90		258.90		258.90
DICARE ADDITIONAL		.00		.00		.00		.00
FE INS-VOL EMPLOYEE		30.00		30.00		30.00		30.00
FE INS-VOL SPOUSE		2.63		2.63		2.63		2.63
FE INS-VOL CHILD		.30		.30		.30		.30
SP INDEMNITY - EMPLOYEE		6.53		6.53		6.53		6.53
&D INS -EMPLOYEE		6.92		6.92		6.92		6.92
&D INS -SPOUSE		.69		.69		.69		.69
&D INS -CHILD		.14		.14		.14		.14
IT ILL INS-EMPLOYEE		16.71		16.71		16.71		16.71
IT ILL INS-SPOUSE		8.35		8.35		8.35		8.35
IT ILL INS-CHILD		1.78		1.78		1.78		1.78
CDNT LIFE E+FAMILY		12.48		12.48		12.48		12.48
U.-POLICE		250.00		250.00		250.00		250.00
ROUP TERM LIFE INSURANCE		.01		.01		.01		.01
PLOYER HEALTH INS. COST		688.77		688.77		688.77		688.77
TY SHARE-MEDICARE 1.45		79.55		79.55		79.55		79.55
TY SHARE- IMRF TIER 1		521.11		521.11		521.11		521.11
TY SHARE-SOC SEC 6.20		340.16		340.16		340.16		340.16
TY SHARE-WORKERS COMP		236.25		236.25		236.25		236.25

\*\*\*\*\* Division Totals \*\*\*\*\*

OSS		129952.13		129952.13		129952.13		129952.13
T		79171.24		79171.24		79171.24		79171.24
ULAR HOURS WORKED	1367.000	55858.58	1367.000	55858.58	1367.000	55858.58	1367.000	55858.58
MIN LEAVE NO PAY	24.000	.00	24.000	.00	24.000	.00	24.000	.00
MP TIME USED CIV.	2.000	110.00	2.000	110.00	2.000	110.00	2.000	110.00
LI-DESIGNATED/TIME	68.000	3935.76	68.000	3935.76	68.000	3935.76	68.000	3935.76
D OF YEAR PTO	152.000	7247.44	152.000	7247.44	152.000	7247.44	152.000	7247.44
OAT HOLI	32.000	1835.08	32.000	1835.08	32.000	1835.08	32.000	1835.08
OAT HOLI-CONT SFT	2.000-	157.08-	2.000-	157.08-	2.000-	157.08-	2.000-	157.08-
LIDAY MONEY 2024	65.000	2230.54	65.000	2230.54	65.000	2230.54	65.000	2230.54
CK ON OVERTIME	15.000	.00	15.000	.00	15.000	.00	15.000	.00
GHT DUTY	56.000	1896.72	56.000	1896.72	56.000	1896.72	56.000	1896.72
RKED-PAY LATER	146.340	.00	146.340	.00	146.340	.00	146.340	.00
T OF JOB CLASS	.000	240.00	.000	240.00	.000	240.00	.000	240.00
O-VA, FH, PD	40.000	1969.28	40.000	1969.28	40.000	1969.28	40.000	1969.28
-NO WORK/TRADE DAY	122.000	5495.88	122.000	5495.88	122.000	5495.88	122.000	5495.88
CK EXCESS UNPAID	80.000	.00	80.000	.00	80.000	.00	80.000	.00
CK FAMILY EXCUSED	16.000	541.92	16.000	541.92	16.000	541.92	16.000	541.92
CK/FAM-LV/PAID	21.000	843.22	21.000	843.22	21.000	843.22	21.000	843.22
CK SELF	32.000	1217.92	32.000	1217.92	32.000	1217.92	32.000	1217.92
AINING EMPLOYEE	30.750	1063.86	30.750	1063.86	30.750	1063.86	30.750	1063.86
C.-HOURS	80.000	3679.20	80.000	3679.20	80.000	3679.20	80.000	3679.20
C.-NON TAX AMOUNT	.000	2506.24	.000	2506.24	.000	2506.24	.000	2506.24
C.-NON TAX (AMOUNT)	.000	2506.24-	.000	2506.24-	.000	2506.24-	.000	2506.24-

m PR546L  
F AURORA, ILLINOIS

BIWEEKLY  
Pay Date 1/15/26

Pay Period 1  
12/27/25 to 01/09/26

Act: 35 37 421 POLICE-E911 CENTER

Employee Name	Employee Number		M-T-D		Q-T-D		Y-T-D	
	Current		Qty	Amount	Qty	Amount	Qty	Amount

\*\*\*\*\* Division Totals \*\*\*\*\*

SP INDEMNITY - EMPLOYEE	32.65		32.65		32.65		32.65	
SP INDEMNITY - E+SPOUSE	13.65		13.65		13.65		13.65	
SP INDEMNITY E+FAMILY	37.04		37.04		37.04		37.04	
&D INS -EMPLOYEE	33.93		33.93		33.93		33.93	
&D INS -SPOUSE	3.39		3.39		3.39		3.39	
&D INS -CHILD	.70		.70		.70		.70	
IT ILL INS-EMPLOYEE	106.26		106.26		106.26		106.26	
IT ILL INS-SPOUSE	30.79		30.79		30.79		30.79	
IT ILL INS-CHILD	8.90		8.90		8.90		8.90	
U.-POLICE	2015.50		2015.50		2015.50		2015.50	
CDNT LIFE EMPLOYEE	27.90		27.90		27.90		27.90	
CDNT LIFE E+SPOUSE	8.02		8.02		8.02		8.02	
CDNT LIFE E+CHILD	9.11		9.11		9.11		9.11	
CDNT LIFE E+FAMILY	74.88		74.88		74.88		74.88	
I FT OVERPAY REPAYMENT	25.00		25.00		25.00		25.00	
LUNTARY IMRF TIER 1	3090.57		3090.57		3090.57		3090.57	
LUNTARY IMRF TIER 2	832.56		832.56		832.56		832.56	
POU TERM LIFE INSURANCE	.27		.27		.27		.27	
EMPLOYER HEALTH INS. COST	14013.84		14013.84		14013.84		14013.84	
HEALTH SAVINGS ACCT	1875.00		1875.00		1875.00		1875.00	
TY SHARE-MEDICARE 1.45	1775.17		1775.17		1775.17		1775.17	
TY SHARE- IMRF TIER 1	4858.90		4858.90		4858.90		4858.90	
TY SHARE- IMRF TIER 2	7031.72		7031.72		7031.72		7031.72	
TY SHARE-SOC SEC 6.20	7590.42		7590.42		7590.42		7590.42	
TY SHARE-WORKERS COMP	5313.35		5313.35		5313.35		5313.35	

Current Employees

Terminated Employees

/Act: 35 37 421 POLICE-E911 CENTER

Description	Employee Number		M-T-D		Q-T-D		Y-T-D	
	Qty	Amount	Qty	Amount	Qty	Amount	Qty	Amount
NER, JILLIAN D	6378							
RIT ILL INS-EMPLOYEE		16.71		33.42		33.42		33.42
RIT ILL INS-SPOUSE		8.35		16.70		16.70		16.70
RIT ILL INS-CHILD		1.78		3.56		3.56		3.56
CCDNT LIFE E+FAMILY		12.48		24.96		24.96		24.96
U.-POLICE		250.00		500.00		500.00		500.00
ROUP TERM LIFE INSURANCE		.01		.02		.02		.02
MPLOYER HEALTH INS. COST		688.77		1377.54		1377.54		1377.54
ITY SHARE-MEDICARE 1.45		73.45		153.00		153.00		153.00
ITY SHARE- IMRF TIER 1		483.52		1004.63		1004.63		1004.63
ITY SHARE-SOC SEC 6.20		314.08		654.24		654.24		654.24
ITY SHARE-WORKERS COMP		236.09		472.34		472.34		472.34

\*\*\*\*\* Division Totals \*\*\*\*\*

ROSS		120724.29		286363.70		286363.70		286363.70
ET		72768.46		172609.36		172609.36		172609.36
EGULAR HOURS WORKED	1682.000	70584.18	3021.000	125553.76	3021.000	125553.76	3021.000	125553.76
DMIN LEAVE NO PAY	.000	.00	24.000	.00	24.000	.00	24.000	.00
OMP TIME PAID CIV.	89.120	4593.44	89.120	4593.44	89.120	4593.44	89.120	4593.44
OMP TIME USED CIV.	.000	.00	2.000	110.00	2.000	110.00	2.000	110.00
OMP PD OFF-PRV YR	.000	.00	354.315	14287.99	354.315	14287.99	354.315	14287.99
OLI-DESIGNATED/TIME	40.000	2310.56	108.000	6246.32	108.000	6246.32	108.000	6246.32
ND OF YEAR PTO	.000	.00	152.000	7247.44	152.000	7247.44	152.000	7247.44
LOAT HOLI	.000	.00	32.000	1835.08	32.000	1835.08	32.000	1835.08
LOAT HOLI-CONT SFT	2.000-	153.99-	40.000	2471.49	40.000	2471.49	40.000	2471.49
OLIDAY MONEY 2024	.000	.00	197.330	9071.79	197.330	9071.79	197.330	9071.79
ICK ON OVERTIME	14.000	.00	29.000	.00	29.000	.00	29.000	.00
IGHT DUTY	32.000	1471.68	88.000	3368.40	88.000	3368.40	88.000	3368.40
ORKED-PAY LATER	136.170	.00	282.510	.00	282.510	.00	282.510	.00
UT OF JOB CLASS	.000	128.00	.000	368.00	.000	368.00	.000	368.00
TO-VA, FH, PD	8.000	418.88	48.000	2388.16	48.000	2388.16	48.000	2388.16
D-NO WORK/TRADE DAY	121.000	5286.76	243.000	10782.64	243.000	10782.64	243.000	10782.64
TO PAID OFF-PRV YR	.000	.00	33.000	1633.12	33.000	1633.12	33.000	1633.12
ICK EXCESS UNPAID	80.000	.00	160.000	.00	160.000	.00	160.000	.00
ICK FAMILY EXCUSED	.000	.00	16.000	541.92	16.000	541.92	16.000	541.92
ICK FAMILY	8.000	344.48	8.000	344.48	8.000	344.48	8.000	344.48
ICK/FAM-LV/PAID	26.000	1127.72	47.000	1970.94	47.000	1970.94	47.000	1970.94
ICK SELF	16.000	631.20	48.000	1849.12	48.000	1849.12	48.000	1849.12
ICK SELF-EXEC/FIRE	3.000	215.82	3.000	215.82	3.000	215.82	3.000	215.82
ICK PD PRV YR 100%	.000	.00	203.630	12213.70	203.630	12213.70	203.630	12213.70
RAINING EMPLOYEE	36.000	1201.14	66.750	2265.00	66.750	2265.00	66.750	2265.00
.C.-HOURS	48.000	2207.52	128.000	5886.72	128.000	5886.72	128.000	5886.72
.C.-NON TAX AMOUNT	.000	1503.74	.000	4009.98	.000	4009.98	.000	4009.98
.C.-NON TAX (AMOUNT)	.000	1503.74-	.000	4009.98-	.000	4009.98-	.000	4009.98-
T 1.5-PD	318.120	19275.53	577.090	36246.47	577.090	36246.47	577.090	36246.47
REP TIME 1.5 RATE	16.700	967.19	31.200	1787.13	31.200	1787.13	31.200	1787.13
T DBL-PD	107.630	8468.63	371.930	29258.68	371.930	29258.68	371.930	29258.68
T 1.5-BANK	52.600	.00	83.470	.00	83.470	.00	83.470	.00

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am PR546L  
OF AURORA, ILLINOIS

Cumulative Payroll Register  
BIWEEKLY  
Pay Date 1/29/26

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Pay Period 2  
1/10/26 to 01/23/26

/Act: 35 37 421 POLICE-E911 CENTER

Description	Employee Number		M-T-D		Q-T-D		Y-T-D	
	Qty	Amount	Qty	Amount	Qty	Amount	Qty	Amount

\*\*\*\*\* Division Totals \*\*\*\*\*

D&D INS -EMPLOYEE	33.93		67.86		67.86		67.86
D&D INS -SPOUSE	3.39		6.78		6.78		6.78
D&D INS -CHILD	.70		1.40		1.40		1.40
RIT ILL INS-EMPLOYEE	106.26		212.52		212.52		212.52
RIT ILL INS-SPOUSE	30.79		61.58		61.58		61.58
RIT ILL INS-CHILD	8.90		17.80		17.80		17.80
.U.-POLICE	2015.50		4031.00		4031.00		4031.00
CCDNT LIFE EMPLOYEE	27.90		55.80		55.80		55.80
CCDNT LIFE E+SPOUSE	8.02		16.04		16.04		16.04
CCDNT LIFE E+CHILD	9.11		18.22		18.22		18.22
CCDNT LIFE E+FAMILY	74.88		149.76		149.76		149.76
HIFT OVERPAY REPAYMENT	25.00		50.00		50.00		50.00
OLUNTARY IMRF TIER 1	3022.12		8408.52		8408.52		8408.52
OLUNTARY IMRF TIER 2	636.12		1874.72		1874.72		1874.72
ROUP TERM LIFE INSURANCE	.26		.52		.52		.52
EMPLOYER HEALTH INS. COST	14013.84		28027.68		28027.68		28027.68
HEALTH SAVINGS ACCT	.00		1875.00		1875.00		1875.00
ITY SHARE-MEDICARE 1.45	1656.19		3949.53		3949.53		3949.53
ITY SHARE- IMRF TIER 1	4639.99		12041.91		12041.91		12041.91
ITY SHARE- IMRF TIER 2	6406.29		14160.37		14160.37		14160.37
ITY SHARE-SOC SEC 6.20	7081.67		16887.77		16887.77		16887.77
ITY SHARE-WORKERS COMP	5083.20		11644.33		11644.33		11644.33

Current Employees  
Terminated Employees

/Act: 35 37 421 POLICE-E911 CENTER

Description	Employee Number		M-T-D		Q-T-D		Y-T-D	
	Qty	Amount	Qty	Amount	Qty	Amount	Qty	Amount

\*\*\*\*\* Division Totals \*\*\*\*\*

ROSS		122861.92		122861.92		409225.62		409225.62
ET		73854.94		73854.94		246464.30		246464.30
REGULAR HOURS WORKED	1678.000	69177.36	1678.000	69177.36	4699.000	194731.12	4699.000	194731.12
ADMIN LEAVE NO PAY	.000	.00	.000	.00	24.000	.00	24.000	.00
COMP TIME PAID CIV.	80.000	4400.00	80.000	4400.00	169.120	8993.44	169.120	8993.44
COMP TIME USED CIV.	.000	.00	.000	.00	2.000	110.00	2.000	110.00
COMP PD OFF-PRV YR	.000	.00	.000	.00	354.315	14287.99	354.315	14287.99
OLI-DESIGNATED/TIME	.000	.00	.000	.00	108.000	6246.32	108.000	6246.32
END OF YEAR PTO	.000	.00	.000	.00	152.000	7247.44	152.000	7247.44
LOAT HOLI	16.000	880.00	16.000	880.00	48.000	2715.08	48.000	2715.08
LOAT HOLI-CONT SFT	6.000	385.65	6.000	385.65	46.000	2857.14	46.000	2857.14
OLIDAY MONEY 2024	.000	.00	.000	.00	197.330	9071.79	197.330	9071.79
WICK ON OVERTIME	.000	.00	.000	.00	29.000	.00	29.000	.00
NIGHT DUTY	48.000	2207.52	48.000	2207.52	136.000	5575.92	136.000	5575.92
WORKED-PAY LATER	157.670	.00	157.670	.00	440.180	.00	440.180	.00
TYPE OF JOB CLASS	.000	364.00	.000	364.00	.000	732.00	.000	732.00
TO-PREV YR	20.000	1174.80	20.000	1174.80	20.000	1174.80	20.000	1174.80
TO-VA, FH, PD	88.000	4307.60	88.000	4307.60	136.000	6695.76	136.000	6695.76
D-NO WORK/TRADE DAY	182.000	7953.26	182.000	7953.26	425.000	18735.90	425.000	18735.90
TO PAID OFF-PRV YR	.000	.00	.000	.00	33.000	1633.12	33.000	1633.12
WICK EXCESS UNPAID	80.000	.00	80.000	.00	240.000	.00	240.000	.00
WICK FAMILY EXCUSED	.000	.00	.000	.00	16.000	541.92	16.000	541.92
WICK FAMILY	.000	.00	.000	.00	8.000	344.48	8.000	344.48
WICK/FAM-LV/PAID	8.000	352.08	8.000	352.08	55.000	2323.02	55.000	2323.02
WICK SELF	8.000	406.24	8.000	406.24	56.000	2255.36	56.000	2255.36
WICK SELF-EXEC/FIRE	.000	.00	.000	.00	3.000	215.82	3.000	215.82
WICK PD PRV YR 100%	.000	.00	.000	.00	203.630	12213.70	203.630	12213.70
RAINING EMPLOYEE	26.500	974.91	26.500	974.91	93.250	3239.91	93.250	3239.91
GRADE-LAST YEAR HOLIDAY	11.000	.00	11.000	.00	11.000	.00	11.000	.00
.C.-HOURS	2.000	91.98	2.000	91.98	130.000	5978.70	130.000	5978.70
.C.-NON TAX AMOUNT	.000	.00	.000	.00	.000	4009.98	.000	4009.98
.C.-NON TAX (AMOUNT)	.000	.00	.000	.00	.000	4009.98	.000	4009.98
F 1.5-PD	273.140	17191.55	273.140	17191.55	850.230	53438.02	850.230	53438.02
REP TIME 1.5 RATE	17.200	967.35	17.200	967.35	48.400	2754.48	48.400	2754.48
F DBL-PD	122.870	9822.28	122.870	9822.28	494.800	39080.96	494.800	39080.96
F 1.5-BANK	27.300	.00	27.300	.00	110.770	.00	110.770	.00
OLIDAY TIME 2025	30.000	1178.76	30.000	1178.76	54.000	2161.64	54.000	2161.64
F DBL-BANK	22.000	.00	22.000	.00	109.530	.00	109.530	.00
OLIDAY TIME 2026	.000	.00	.000	.00	8.000	352.08	8.000	352.08
LANG TRANS 3298,1514, ASA		180.00		180.00		540.00		540.00
LONGEVITY 1.0%		134.99		134.99		405.95		405.95
LONGEVITY 1.5%		63.47		63.47		174.26		174.26
LONGEVITY 2.0%		419.68		419.68		1411.54		1411.54
LONGEVITY 2.5%		103.44		103.44		610.96		610.96
PENSION-INSURANCE OPT OUT		125.00		125.00		375.00		375.00
MAP PLAN C-EMPLOYEE		602.63		602.63		1635.71		1635.71
MAP PLAN C-E+SPOUSE		430.48		430.48		1291.44		1291.44

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Cumulative Payroll Register

am PR546L  
OF AURORA, ILLINOIS

BIWEEKLY  
Pay Date 2/12/26

Pay Period 3  
1/24/26 to 02/06/26

/Act: 35 37 421 POLICE-E911 CENTER

Description	Employee Number		M-T-D		Q-T-D		Y-T-D	
	Qty	Amount	Qty	Amount	Qty	Amount	Qty	Amount

\*\*\*\*\* Division Totals \*\*\*\*\*

HIFT OVERPAY REPAYMENT	25.00		25.00		75.00		75.00
OLUNTARY IMRF TIER 1	3193.04		3193.04		11601.56		11601.56
OLUNTARY IMRF TIER 2	601.22		601.22		2475.94		2475.94
GROUP TERM LIFE INSURANCE	.27		.27		.79		.79
EMPLOYER HEALTH INS. COST	14358.21		14358.21		42385.89		42385.89
HEALTH SAVINGS ACCT	.00		.00		1875.00		1875.00
CITY SHARE-MEDICARE 1.45	1707.93		1707.93		5657.46		5657.46
CITY SHARE- IMRF TIER 1	5010.13		5010.13		17052.04		17052.04
CITY SHARE- IMRF TIER 2	6231.71		6231.71		20392.08		20392.08
CITY SHARE-SOC SEC 6.20	7302.81		7302.81		24190.58		24190.58
CITY SHARE-WORKERS COMP	5260.42		5260.42		16904.75		16904.75

Current Employees

Terminated Employees

/Act: 35 37 421 POLICE-E911 CENTER

Employee Name Employee Number

Description	--- Current ---		--- M-T-D ---		--- Q-T-D ---		--- Y-T-D ---	
	Qty	Amount	Qty	Amount	Qty	Amount	Qty	Amount
NER, JILLIAN D	6378							
TO-VA, FH, PD	8.000	406.24	8.000	406.24	8.000	406.24	8.000	406.24
D-NO WORK/TRADE DAY	.000	.00	.000	.00	8.000	406.24	8.000	406.24
ICK SELF	.000	.00	8.000	406.24	8.000	406.24	8.000	406.24
T 1.5-PD	21.430	1632.32	29.530	2249.30	57.730	4397.28	57.730	4397.28
T DBL-PD	.000	.00	22.770	2312.53	29.730	3019.39	29.730	3019.39
ENSIION-IMRF TIER 1		256.26		570.90		1064.98		1064.98
ELLNESS CREDIT		.00		10.00-		20.00-		20.00-
ENTAL-E+F		50.24		100.48		200.96		200.96
AP C-E+C(S)-ASA/EXE/NON/		172.19		344.38		688.76		688.76
AX-MEDICARE		79.40		177.76		330.76		330.76
AX-SOCIAL SECURITY		339.51		760.07		1414.31		1414.31
AX-FEDERAL INCOME		628.27		1531.28		2703.93		2703.93
AX-STATE INCOME		258.38		578.57		1076.45		1076.45
EDICARE ADDITIONAL		.00		.00		.00		.00
LFE INS-VOL EMPLOYEE		30.00		60.00		120.00		120.00
LFE INS-VOL SPOUSE		2.63		5.26		10.52		10.52
LFE INS-VOL CHILD		.30		.60		1.20		1.20
OSP INDEMNITY - EMPLOYEE		6.53		13.06		26.12		26.12
D&D INS -EMPLOYEE		6.92		13.84		27.68		27.68
D&D INS -SPOUSE		.69		1.38		2.76		2.76
D&D INS -CHILD		.14		.28		.56		.56
RIT ILL INS-EMPLOYEE		16.71		33.42		66.84		66.84
RIT ILL INS-SPOUSE		8.35		16.70		33.40		33.40
RIT ILL INS-CHILD		1.78		3.56		7.12		7.12
CCDNT LIFE E+FAMILY		12.48		24.96		49.92		49.92
.U.-POLICE		250.00		500.00		1000.00		1000.00
ROUP TERM LIFE INSURANCE		.01		.02		.04		.04
MPLOYER HEALTH INS. COST		688.77		1377.54		2755.08		2755.08
ITY SHARE-MEDICARE 1.45		79.40		177.76		330.76		330.76
ITY SHARE- IMRF TIER 1		521.07		1160.83		2165.46		2165.46
ITY SHARE-SOC SEC 6.20		339.51		760.07		1414.31		1414.31
ITY SHARE-WORKERS COMP		236.25		473.00		945.34		945.34

\*\*\*\*\* Division Totals \*\*\*\*\*

ROSS		125987.52		248849.44		535213.14		535213.14
ET		75418.40		149273.34		321882.70		321882.70
EGULAR HOURS WORKED	1636.000	67610.30	3314.000	136787.66	6335.000	262341.42	6335.000	262341.42
DMIN LEAVE NO PAY	.000	.00	.000	.00	24.000	.00	24.000	.00
OMP TIME PAID CIV.	69.080	3894.76	149.080	8294.76	238.200	12888.20	238.200	12888.20
OMP TIME USED CIV.	.000	.00	.000	.00	2.000	110.00	2.000	110.00
OMP PD OFF-PRV YR	.000	.00	.000	.00	354.315	14287.99	354.315	14287.99
OLI-DESIGNATED/TIME	.000	.00	.000	.00	108.000	6246.32	108.000	6246.32
EATH LEAVE	24.000	812.88	24.000	812.88	24.000	812.88	24.000	812.88
ND OF YEAR PTO	.000	.00	.000	.00	152.000	7247.44	152.000	7247.44
LOAT HOLI	22.000	1150.00	38.000	2030.00	70.000	3865.08	70.000	3865.08
LOAT HOLI-CONT SFT	2.000-	153.99-	4.000	231.66	44.000	2703.15	44.000	2703.15
OLIDAY MONEY 2024	.000	.00	.000	.00	197.330	9071.79	197.330	9071.79

am PR546L  
OF AURORA, ILLINOIS

BIWEEKLY  
Pay Date 2/26/26

Pay Period 4  
2/07/26 to 02/20/26

/Act: 35 37 421 POLICE-E911 CENTER

Description	Employee Number		M-T-D		Q-T-D		Y-T-D	
	Current		Qty	Amount	Qty	Amount	Qty	Amount

\*\*\*\*\* Division Totals \*\*\*\*\*

C-I.P.P.F.A.	200.00		400.00		800.00		800.00
C-NATIONWIDE	70.00		140.00		280.00		280.00
125-CHILD CARE	288.46		576.92		1153.84		1153.84
125-MEDICAL	245.76		491.52		983.04		983.04
MENTAL-E	223.68		447.36		857.44		857.44
MENTAL-E+1	75.80		151.60		303.20		303.20
MENTAL-E+F	552.64		1105.28		2210.56		2210.56
VISION E+C	16.39		32.78		65.56		65.56
VISION E	24.60		49.20		98.40		98.40
VISION E+F	114.76		229.52		459.04		459.04
AP C-E ASA/EXEC/NON/IT	86.09		172.18		344.36		344.36
AP C-E+C(S)-ASA/EXE/NON/	172.19		344.38		688.76		688.76
DHP-E+C(S)-ASA/EXEC/NON/	108.68		217.36		434.72		434.72
MO C-E+F-ASA/EXEC/NON/IT	418.94		837.88		1675.76		1675.76
AX-FEDERAL INCOME	16873.73		32758.64		71381.12		71381.12
AX-STATE INCOME	5666.45		11186.60		23992.74		23992.74
AX-MEDICARE	1752.77		3460.70		7410.23		7410.23
EDICARE ADDITIONAL	.00		.00		.00		.00
AX-SOCIAL SECURITY	7494.75		14797.56		31685.33		31685.33
IFE INS-VOL EMPLOYEE	269.17		538.34		1076.68		1076.68
IFE INS-NCPERS	8.00		16.00		32.00		32.00
IFE INS-VOL SPOUSE	9.91		19.82		39.64		39.64
IFE INS-VOL CHILD	2.10		4.20		8.40		8.40
UES-3298/F.T.	544.92		1089.84		2151.00		2151.00
OSP INDEMNITY - EMPLOYEE	32.65		65.30		130.60		130.60
OSP INDEMNITY - E+SPOUSE	13.65		27.30		54.60		54.60
OSP INDEMNITY E+FAMILY	37.04		74.08		148.16		148.16
D&D INS -EMPLOYEE	33.93		67.86		135.72		135.72
D&D INS -SPOUSE	3.39		6.78		13.56		13.56
D&D INS -CHILD	.70		1.40		2.80		2.80
RIT ILL INS-EMPLOYEE	106.26		212.52		425.04		425.04
RIT ILL INS-SPOUSE	30.79		61.58		123.16		123.16
RIT ILL INS-CHILD	8.90		17.80		35.60		35.60
.U.-POLICE	2015.50		4031.00		8062.00		8062.00
CCDNT LIFE EMPLOYEE	32.55		65.10		120.90		120.90
CCDNT LIFE E+SPOUSE	8.02		16.04		32.08		32.08
CCDNT LIFE E+CHILD	9.11		18.22		36.44		36.44
CCDNT LIFE E+FAMILY	74.88		149.76		299.52		299.52
HIFT OVERPAY REPAYMENT	25.00		50.00		100.00		100.00
OLUNTARY IMRF TIER 1	3226.76		6419.80		14828.32		14828.32
OLUNTARY IMRF TIER 2	587.10		1188.32		3063.04		3063.04
ROUP TERM LIFE INSURANCE	.27		.54		1.06		1.06
MPLOYER HEALTH INS. COST	14358.21		28716.42		56744.10		56744.10
EAALTH SAVINGS ACCT	.00		.00		1875.00		1875.00
ITY SHARE-MEDICARE 1.45	1752.77		3460.70		7410.23		7410.23
ITY SHARE- IMRF TIER 1	4982.69		9992.82		22034.73		22034.73
ITY SHARE- IMRF TIER 2	6545.19		12776.90		26937.27		26937.27

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OF AURORA, ILLINOIS

Cumulative Payroll Register  
BIWEEKLY  
Pay Date 2/26/26

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Pay Period 4  
2/07/26 to 02/20/26

/Act: 35 37 421 POLICE-E911 CENTER

Employee Name	Employee Number	Current	M-T-D	Q-T-D	Y-T-D	
Description	Qty	Amount	Qty	Amount	Qty	Amount

\*\*\*\*\* Division Totals \*\*\*\*\*

ITY SHARE-SOC SEC 6.20	7494.75	14797.56	31685.33	31685.33
ITY SHARE-WORKERS COMP	5465.67	10726.09	22370.42	22370.42
Current Employees				
Terminated Employees				

Team PR546L  
OF AURORA, ILLINOIS

BIWEEKLY  
Pay Date 3/12/26

Pay Period 5  
2/21/26 to 03/06/26

Act: 35 37 421 POLICE-E911 CENTER

Description	Employee Number		M-T-D		Q-T-D		Y-T-D	
	Qty	Amount	Qty	Amount	Qty	Amount	Qty	Amount
OWNER, JILLIAN D	6378							
LIFE INS-VOL EMPLOYEE		30.00		30.00		150.00		150.00
LIFE INS-VOL SPOUSE		2.63		2.63		13.15		13.15
LIFE INS-VOL CHILD		.30		.30		1.50		1.50
WOSP INDEMNITY - EMPLOYEE		6.53		6.53		32.65		32.65
AD&D INS -EMPLOYEE		6.92		6.92		34.60		34.60
AD&D INS -SPOUSE		.69		.69		3.45		3.45
AD&D INS -CHILD		.14		.14		.70		.70
CRIT ILL INS-EMPLOYEE		16.71		16.71		83.55		83.55
CRIT ILL INS-SPOUSE		8.35		8.35		41.75		41.75
CRIT ILL INS-CHILD		1.78		1.78		8.90		8.90
ACCNT LIFE E+FAMILY		12.48		12.48		62.40		62.40
P.U.-POLICE		250.00		250.00		1250.00		1250.00
GROUP TERM LIFE INSURANCE		.01		.01		.05		.05
EMPLOYER HEALTH INS. COST		688.77		688.77		3443.85		3443.85
CITY SHARE-MEDICARE 1.45		73.03		73.03		403.79		403.79
CITY SHARE- IMRF TIER 1		479.95		479.95		2645.41		2645.41
CITY SHARE-SOC SEC 6.20		312.27		312.27		1726.58		1726.58
CITY SHARE-WORKERS COMP		236.08		236.08		1181.42		1181.42

\*\*\*\*\* Division Totals \*\*\*\*\*

ROSS		122068.25		122068.25		657281.39		657281.39
REGULAR HOURS WORKED	1869.500	77282.24	1869.500	77282.24	8204.500	339623.66	8204.500	339623.66
ADMIN LEAVE NO PAY	.000	.00	.000	.00	24.000	.00	24.000	.00
COMP TIME PAID CIV.	75.000	4125.00	75.000	4125.00	313.200	17013.20	313.200	17013.20
COMP TIME USED CIV.	.000	.00	.000	.00	2.000	110.00	2.000	110.00
COMP PD OFF-PRV YR	.000	.00	.000	.00	354.315	14287.99	354.315	14287.99
COLI-DESIGNATED/TIME	.000	.00	.000	.00	108.000	6246.32	108.000	6246.32
HEALTH LEAVE	.000	.00	.000	.00	24.000	812.88	24.000	812.88
END OF YEAR PTO	.000	.00	.000	.00	152.000	7247.44	152.000	7247.44
LOAT HOLI	8.000	359.76	8.000	359.76	78.000	4224.84	78.000	4224.84
LOAT HOLI-CONT SFT	2.000-	153.99-	2.000-	153.99-	42.000	2549.16	42.000	2549.16
OLIDAY MONEY 2024	.000	.00	.000	.00	197.330	9071.79	197.330	9071.79
OLIDAY MONEY 2025	16.000	541.92	16.000	541.92	40.000	1530.96	40.000	1530.96
CHECK ON OVERTIME	5.330	.00	5.330	.00	34.330	.00	34.330	.00
NIGHT DUTY	56.000	2575.44	56.000	2575.44	299.670	13103.10	299.670	13103.10
WORKED-PAY LATER	104.330	.00	104.330	.00	695.850	.00	695.850	.00
OUT OF JOB CLASS	.000	136.00	.000	136.00	.000	1214.00	.000	1214.00
TO-PREV YR	.000	.00	.000	.00	28.000	1644.72	28.000	1644.72
TO-VA, FH, PD	42.000	2094.92	42.000	2094.92	218.000	10811.96	218.000	10811.96
PD-NO WORK/TRADE DAY	96.000	3814.32	96.000	3814.32	685.500	29829.07	685.500	29829.07
TO PAID OFF-PRV YR	.000	.00	.000	.00	33.000	1633.12	33.000	1633.12
CHECK EXCESS UNPAID	.000	.00	.000	.00	320.000	.00	320.000	.00
CHECK FAMILY EXCUSED	.000	.00	.000	.00	16.000	541.92	16.000	541.92
CHECK FAMILY	.000	.00	.000	.00	12.000	553.92	12.000	553.92
CHECK/FAM-LV/PAID	8.000	269.36	8.000	269.36	63.000	2592.38	63.000	2592.38
CHECK/FAM-LV/UNPAID	80.000	.00	80.000	.00	80.000	.00	80.000	.00

am PR546L  
OF AURORA, ILLINOIS

BIWEEKLY  
Pay Date 3/12/26

Pay Period 5  
2/21/26 to 03/06/26

/Act: 35 37 421 POLICE-E911 CENTER

Description	Employee Number		M-T-D		Q-T-D		Y-T-D	
	Qty	Amount	Qty	Amount	Qty	Amount	Qty	Amount

\*\*\*\*\* Division Totals \*\*\*\*\*

MO C-E+F-ASA/EXEC/NON/IT	418.94		418.94		2094.70		2094.70	
AX-FEDERAL INCOME	15530.23		15530.23		86911.35		86911.35	
AX-STATE INCOME	5477.12		5477.12		29469.86		29469.86	
AX-MEDICARE	1696.42		1696.42		9106.65		9106.65	
EDICARE ADDITIONAL	.00		.00		.00		.00	
AX-SOCIAL SECURITY	7253.64		7253.64		38938.97		38938.97	
LIFE INS-VOL EMPLOYEE	269.17		269.17		1345.85		1345.85	
LIFE INS-NCPERS	8.00		8.00		40.00		40.00	
LIFE INS-VOL SPOUSE	9.91		9.91		49.55		49.55	
LIFE INS-VOL CHILD	2.10		2.10		10.50		10.50	
UES-3298/F.T.	573.60		573.60		2724.60		2724.60	
OSP INDEMNITY - EMPLOYEE	32.65		32.65		163.25		163.25	
OSP INDEMNITY - E+SPOUSE	13.65		13.65		68.25		68.25	
OSP INDEMNITY E+FAMILY	37.04		37.04		185.20		185.20	
D&D INS -EMPLOYEE	33.93		33.93		169.65		169.65	
D&D INS -SPOUSE	3.39		3.39		16.95		16.95	
D&D INS -CHILD	.70		.70		3.50		3.50	
RIT ILL INS-EMPLOYEE	106.26		106.26		531.30		531.30	
RIT ILL INS-SPOUSE	30.79		30.79		153.95		153.95	
RIT ILL INS-CHILD	8.90		8.90		44.50		44.50	
.U.-POLICE	2015.50		2015.50		10077.50		10077.50	
CCDNT LIFE EMPLOYEE	32.55		32.55		153.45		153.45	
CCDNT LIFE E+SPOUSE	8.02		8.02		40.10		40.10	
CCDNT LIFE E+CHILD	9.11		9.11		45.55		45.55	
CCDNT LIFE E+FAMILY	74.88		74.88		374.40		374.40	
HIFT OVERPAY REPAYMENT	25.00		25.00		125.00		125.00	
OLUNTARY IMRF TIER 1	3024.15		3024.15		17852.47		17852.47	
OLUNTARY IMRF TIER 2	656.51		656.51		3719.55		3719.55	
ROUP TERM LIFE INSURANCE	.28		.28		1.34		1.34	
EMPLOYER HEALTH INS. COST	14358.21		14358.21		71102.31		71102.31	
HEALTH SAVINGS ACCT	.00		.00		1875.00		1875.00	
ITY SHARE-MEDICARE 1.45	1696.42		1696.42		9106.65		9106.65	
ITY SHARE- IMRF TIER 1	4575.70		4575.70		26610.43		26610.43	
ITY SHARE- IMRF TIER 2	6593.56		6593.56		33530.83		33530.83	
ITY SHARE-SOC SEC 6.20	7253.64		7253.64		38938.97		38938.97	
ITY SHARE-WORKERS COMP	5458.36		5458.36		27828.78		27828.78	

Current Employees  
Terminated Employees

PR546L  
OF AURORA, ILLINOIS

BIWEEKLY  
Pay Date 3/26/26

Pay Period 6  
3/07/26 to 03/20/26

Act: 35 37 421 POLICE-E911 CENTER

Description	Employee Number		M-T-D		Q-T-D		Y-T-D	
	Current Qty	Amount	Qty	Amount	Qty	Amount	Qty	Amount
NER, JILLIAN D	6378							
SICK SELF	.000	.00	.000	.00	8.000	406.24	8.000	406.24
OT 1.5-PD	25.630	1952.23	41.160	3135.15	98.890	7532.43	98.890	7532.43
OT DBL-PD	1.430	145.23	1.430	145.23	31.160	3164.62	31.160	3164.62
PENSION-IMRF TIER 1		277.19		513.23		1578.21		1578.21
WELLNESS CREDIT		.00		10.00-		30.00-		30.00-
MENTAL-E+F		50.24		100.48		301.44		301.44
MAP C-E+C(S)-ASA/EXE/NON/		172.19		344.38		1033.14		1033.14
TAX-MEDICARE		86.15		159.18		489.94		489.94
TAX-SOCIAL SECURITY		368.35		680.62		2094.93		2094.93
TAX-FEDERAL INCOME		726.00		1262.05		3965.98		3965.98
TAX-STATE INCOME		280.37		518.00		1594.45		1594.45
MEDICARE ADDITIONAL		.00		.00		.00		.00
LIFE INS-VOL EMPLOYEE		30.00		60.00		180.00		180.00
LIFE INS-VOL SPOUSE		2.63		5.26		15.78		15.78
LIFE INS-VOL CHILD		.30		.60		1.80		1.80
OSP INDEMNITY - EMPLOYEE		6.53		13.06		39.18		39.18
D&D INS -EMPLOYEE		6.92		13.84		41.52		41.52
D&D INS -SPOUSE		.69		1.38		4.14		4.14
D&D INS -CHILD		.14		.28		.84		.84
RIT ILL INS-EMPLOYEE		16.71		33.42		100.26		100.26
RIT ILL INS-SPOUSE		8.35		16.70		50.10		50.10
RIT ILL INS-CHILD		1.78		3.56		10.68		10.68
CCDNT LIFE E+FAMILY		12.48		24.96		74.88		74.88
.U.-POLICE		250.00		500.00		1500.00		1500.00
GROUP TERM LIFE INSURANCE		.01		.02		.06		.06
EMPLOYER HEALTH INS. COST		688.77		1377.54		4132.62		4132.62
ITY SHARE-MEDICARE 1.45		86.15		159.18		489.94		489.94
ITY SHARE- IMRF TIER 1		563.63		1043.58		3209.04		3209.04
ITY SHARE-SOC SEC 6.20		368.35		680.62		2094.93		2094.93
ITY SHARE-WORKERS COMP		236.43		472.51		1417.85		1417.85

\*\*\*\*\* Division Totals \*\*\*\*\*

ROSS		127813.55		249881.80		785094.94		785094.94
ET		76684.23		150324.54		472207.24		472207.24
REGULAR HOURS WORKED	1805.000	75544.02	3674.500	152826.26	10009.500	415167.68	10009.500	415167.68
ADMIN LEAVE NO PAY	.000	.00	.000	.00	24.000	.00	24.000	.00
BONUS/STIPEND	.000	500.00	.000	500.00	.000	500.00	.000	500.00
COMP TIME PAID CIV.	46.900	2388.46	121.900	6513.46	360.100	19401.66	360.100	19401.66
COMP TIME USED CIV.	.000	.00	.000	.00	2.000	110.00	2.000	110.00
COMP PD OFF-PRV YR	.000	.00	.000	.00	354.315	14287.99	354.315	14287.99
COLI-DESIGNATED/TIME	.000	.00	.000	.00	108.000	6246.32	108.000	6246.32
HEALTH LEAVE	.000	.00	.000	.00	24.000	812.88	24.000	812.88
END OF YEAR PTO	.000	.00	.000	.00	152.000	7247.44	152.000	7247.44
LOAT HOLI	8.000	248.48	16.000	608.24	86.000	4473.32	86.000	4473.32
LOAT HOLI-CONT SFT	58.000	3160.71	56.000	3006.72	100.000	5709.87	100.000	5709.87
OLIDAY MONEY 2024	.000	.00	.000	.00	197.330	9071.79	197.330	9071.79
OLIDAY MONEY 2025	.000	.00	16.000	541.92	40.000	1530.96	40.000	1530.96

/Act: 35 37 421 POLICE-E911 CENTER

Description	Employee Number		M-T-D		Q-T-D		Y-T-D	
	Current Qty	Current Amount	Qty	Amount	Qty	Amount	Qty	Amount

\*\*\*\*\* Division Totals \*\*\*\*\*

C-I.P.P.F.A.	200.00		400.00		1200.00		1200.00	
C-NATIONWIDE	70.00		140.00		420.00		420.00	
125-CHILD CARE	288.46		576.92		1730.76		1730.76	
125-MEDICAL	245.76		491.52		1474.56		1474.56	
ENTAL-E	223.68		447.36		1304.80		1304.80	
ENTAL-E+1	75.80		151.60		454.80		454.80	
ENTAL-E+F	552.64		1105.28		3315.84		3315.84	
ISION E+C	16.39		32.78		98.34		98.34	
ISION E	24.60		49.20		147.60		147.60	
ISION E+F	114.76		229.52		688.56		688.56	
AP C-E ASA/EXEC/NON/IT	86.09		172.18		516.54		516.54	
AP C-E+C(S)-ASA/EXE/NON/	172.19		344.38		1033.14		1033.14	
DHP-E+C(S)-ASA/EXEC/NON/	108.68		217.36		652.08		652.08	
MO C-E+F-ASA/EXEC/NON/IT	418.94		837.88		2513.64		2513.64	
AX-FEDERAL INCOME	16918.86		32449.09		103830.21		103830.21	
AX-STATE INCOME	5747.20		11224.32		35217.06		35217.06	
AX-MEDICARE	1779.28		3475.70		10885.93		10885.93	
EDICARE ADDITIONAL	.00		.00		.00		.00	
AX-SOCIAL SECURITY	7607.96		14861.60		46546.93		46546.93	
LIFE INS-VOL EMPLOYEE	269.17		538.34		1615.02		1615.02	
LIFE INS-NCPERS	8.00		16.00		48.00		48.00	
LIFE INS-VOL SPOUSE	9.91		19.82		59.46		59.46	
LIFE INS-VOL CHILD	2.10		4.20		12.60		12.60	
UES-3298/F.T.	544.92		1118.52		3269.52		3269.52	
OSP INDEMNITY - EMPLOYEE	32.65		65.30		195.90		195.90	
OSP INDEMNITY - E+SPOUSE	13.65		27.30		81.90		81.90	
OSP INDEMNITY E+FAMILY	37.04		74.08		222.24		222.24	
D&D INS -EMPLOYEE	33.93		67.86		203.58		203.58	
D&D INS -SPOUSE	3.39		6.78		20.34		20.34	
D&D INS -CHILD	.70		1.40		4.20		4.20	
RIT ILL INS-EMPLOYEE	106.26		212.52		637.56		637.56	
RIT ILL INS-SPOUSE	30.79		61.58		184.74		184.74	
RIT ILL INS-CHILD	8.90		17.80		53.40		53.40	
.U.-POLICE	2015.50		4031.00		12093.00		12093.00	
CCDNT LIFE EMPLOYEE	32.55		65.10		186.00		186.00	
CCDNT LIFE E+SPOUSE	8.02		16.04		48.12		48.12	
CCDNT LIFE E+CHILD	9.11		18.22		54.66		54.66	
CCDNT LIFE E+FAMILY	74.88		149.76		449.28		449.28	
HIFT OVERPAY REPAYMENT	25.00		50.00		150.00		150.00	
OLUNTARY IMRF TIER 1	3364.51		6388.66		21216.98		21216.98	
OLUNTARY IMRF TIER 2	661.80		1318.31		4381.35		4381.35	
ROUP TERM LIFE INSURANCE	.27		.55		1.61		1.61	
MPLOYER HEALTH INS. COST	14358.21		28716.42		85460.52		85460.52	
EALTH SAVINGS ACCT	.00		.00		1875.00		1875.00	
ITY SHARE-MEDICARE 1.45	1779.28		3475.70		10885.93		10885.93	
ITY SHARE- IMRF TIER 1	5036.99		9612.69		31647.42		31647.42	
ITY SHARE- IMRF TIER 2	6657.98		13251.54		40188.81		40188.81	



PROGRAM GM360L

FISCAL YEAR: 2026

ACCOUNT NUMBER SELECTION

FROM: 211-0000-400.00-00 TO: 211-9999-999.99-99

TYPE: S (O-ONLY, R-RANGE, S-SELECTIVE)

Q1-2026

TRANSACTION SELECTION

TYPES... AJ X CR X BA X TF X EN AP X

DATE RANGE...FROM: 0/00/0000 TO: 99/99/9999

PERIOD...FROM: 01 TO: 03

POSTING DATE RANGE...FROM: 0/00/0000 TO: 99/99/9999

SUPPRESS PRINTING OF ACCOUNTS WITHOUT TRANSACTIONS (N/Y): Y

PRINT DEBIT/CREDIT COLUMNS, SUPPRESS BUDGET . . . (N/Y): Y

PRINT ENCUMBRANCE . . . . . (N/Y): N

PAGE BREAK BY FUND: N

PAGE BREAK BY ACCOUNT: N

PAGE BREAK BY DPT/DIV: N

JSE CURRENT BUDGET FOR ESTIM/APPROP TOTAL: N

GROUP NBR	PO NBR	ACCTG PER.	CD	DATE	TRANSACTION NUMBER	DESCRIPTION	DEBITS	CREDITS	CURRENT BALANCE
FUND 211 WIRELESS 911 SURCHARGE									
211-0000-819.01-01 TRANSFER TO OTHER FUNDS / GENERAL FUND									
151		01/26	AJ	01/07/26	127	MISC INTERFUND TRANSFERS QUARTER 1	312,500.00		
ACCOUNT TOTAL							312,500.00	.00	312,500.00 (A)
211-1280-419.38-05 REPAIRS & MTCE. SERVICES / BUILDING & GROUNDS									
1198	310987	03/26	AP	12/02/25	0036706	L3HARRIS TECHNOLOGIES INC KM CONTRACT GOODS & SERV	120,291.62		
ACCOUNT TOTAL							120,291.62	.00	120,291.62 (B)
211-1280-419.38-12 REPAIRS & MTCE. SERVICES / C.A.D.S.									
858	311896	02/26	AP	02/06/26	0036519	INTERGRAPH CORPORATION COMPUTERS, DP & WORD PROC.	7,181.76		
858	311896	02/26	AP	02/06/26	0036519	INTERGRAPH CORPORATION COMPUTERS, DP & WORD PROC.	430,430.64		
ACCOUNT TOTAL							437,612.40	.00	437,612.40
211-1280-419.50-50 OTHER SC-SPECIAL PROGRAMS / GRANT/OTHER									
1350	312233	03/26	AP	02/28/26	0036911	VOIANCE LANGUAGE SERVICES LLC PROFESSIONAL CONSULTING	81.42		
1196	312233	03/26	AP	01/31/26	0036756	VOIANCE LANGUAGE SERVICES LLC PROFESSIONAL CONSULTING	195.27		
217		01/26	AP	01/15/26	0035727	CYRACOM INTERNATIONAL, INC. PROFESSIONAL CONSULTING		1,204.74 (C)	
ACCOUNT TOTAL							276.69	1,204.74	928.05-
FUND TOTAL							870,680.71	1,204.74	869,475.97
GRAND TOTAL							870,680.71	1,204.74	869,475.97

*computer software*

*} 276.69 language services*

*void check group period B 2025. do not include in total*

*Less: IFT (A) < 312,500.00 >  
 (C) 1,204.74  
 (B) < 120,291.62 >  
 \$ 437,889.09*