The following claims have been presented to the Town Board of the Town of Andes, and duly audited and allowed at a meeting thereof held on January 8th, 2019. Certificate thereof having been duly filed in my office as Town Clerk, you are hereby authorized and directed to pay to each of the following claimants the amount upon this claim as stated:

| Claim No. | Name of Claimant | Amount Allowed | Fund or Account | Check # |
|---|---|---|---|---|
| 1 | Excellus | $5,572.59 | DA9060.8 | 19891 |
| 2 | Lifetime Benefit Solutions | $49.50 | DA9060.8 | Auto Draft |

SEAL

TOTAL:

$ 5,622.09

In Witness Whereof, I have hereunto set my hand and the Seal of the Town of Andes

This January 8th, 2019

TOWN CLERK