



LUKE J. KELLER
lkeller@odelsonsterk.com

3318 WEST 95TH STREET
EVERGREEN PARK, IL 60805
(708) 424-5678
FAX (708) 425-1898

OFFICES IN CHICAGO
DuPAGE AND WILL COUNTIES

www.odelsonsterk.com

February 17, 2016

Via electronic mail: bbrewer910@gmail.com

Ms. Bernice Brewer
FOIA Requestor

Re: Freedom of Information Act Request

Dear Ms. Brewer:

Thank you for writing to the Village of Sauk Village ("Village") with your requests for information pursuant to the Illinois Freedom of Information Act (FOIA), 5 ILCS 140/1 et seq. Between January 21, 2016 and January 25, 2016, the Village received ten (10) different FOIA requests for various documents. Please see the attached requests for reference. On January 28, 2016 the Village sent correspondence notifying you that your requests were determined to be a "voluminous request" within the definition of FOIA, as it was a request that is a combination of individual requests that total requests for more than 5 different categories of records in a period of 20 business days. 5 ILCS 140/2(h).

On February 9, 2016 you narrowed your request down to two separate FOIA requests. Your request now seeks the following:

- Copies of all/all documents that show complaints filed against the following individuals:
 1. Mayor David Hanks
 2. Village Clerk Debbie Williams
 3. Trustees: Rosie Williams, Ed Meyers, Lynda Washington, Cecial Tates, Kevin Jones, Derrick Burgess
 4. Village Manager Fairman
- Copies of all credit card statements for the period Nov 2012 to the presents;

Your FOIA request is partially granted and partially denied as follows. With regard to your first request seeking documents related to any complaints filed against the various individuals, the Village is not in possession of said documents. Any documents that were filed have been forwarded to the FBI.

With regard to your second request seeking credit card information, the Village is releasing the attached records to you at no charge. All other information that exists pertaining to your request is attached. The records contain information that is exempt from disclosure under the following exemptions in FOIA:

1. **7(1)(b)**: Village account numbers, personal telephone numbers, Village vehicle information (i.e. VIN and license plate information), FEIN numbers, tax identification numbers. Section 7(1)(b) of FOIA exempts from inspection and copying "[p]rivate information, unless disclosure is required by another provision of [FOIA], a State or federal law or a court order." 5 ILCS 140/7(1)(b).

2. 7(1)(c): Signatures. Section 7(1)(c) of FOIA exempts from inspection and copying “[p]ersonal information contained in public records, the disclosure of which would constitute a clearly unwarranted invasion of personal privacy”. 5 ILCS 140/7(1)(c). The above-referenced information is highly personal, and the subjects’ right to privacy with respect to this information outweighs any legitimate public interest in obtaining it.

This response now concludes your original requests sent between January 21, 2016 and January 25, 2016. You have the right to have the Village’s denial of your FOIA request reviewed by the Public Access Counselor (PAC) at the Office of the Illinois Attorney General:

Public Access Counselor
Office of the Attorney General
500 South Second Street
Springfield, Illinois 62706
Phone: (877) 299-3642

You also have the right to seek judicial review of the denial under Section 11 of the Illinois Freedom of Information Act.

Very truly yours,

ODELSON & STERK, LTD.



Luke J. Keller
for Ms. Sherry Jasinski, FOIA Officer,
Village of Sauk Village

LJK: jr

cc: Sherry Jasinski, FOIA Officer, Village of Sauk Village

FOIA Request (Credit card Statements)

16-2-9 2

Bernice Brewer <bbrewer910@gmail.com>

Tue 2/9/2016 2:09 PM

To: Sherry Jasinski <sjasinski@saukville.org>;

Under the Freedom of Information Act, I am seeking copies of all credit card statements for the period Nov 2012 to the presents.

Please include ay report that show to the line number the item was charged and when money was disburse for payment.

Your prompt attention to this matter is appreciated I can be contacted at 773 983 7137, any response can be sent to bbrewer910@gmail.com

Thank you

Bernice Brewer



Account Summary

Billing Cycle 12/29/2013
 Days In Billing Cycle 31
 Previous Balance \$0.00
 Purchases + \$422.50
 Cash + \$0.00
 Special + \$0.00
 Credits - \$0.00
 Payments - \$0.00
 Other Charges + \$0.00
 Finance Charges + \$0.00

NEW BALANCE \$422.50

Account Inquiries

Call us at: (800) 221-5920
 Lost or Stolen Card: (866) 839-3485

Write us at PO BOX 31535, TAMPA, FL 33631-3535

Payment Summary

NEW BALANCE \$422.50
MINIMUM PAYMENT \$422.50
PAYMENT DUE DATE 01/23/2014

NOTE: Grace period to avoid a finance charge on purchases, pay entire new balance by payment due date. Finance charge accrues on cash advances until paid and will be billed on your next statement.

Credit Summary

Total Credit Line \$3,000.00
 Available Credit Line \$2,577.50
 Available Cash \$0.00
 Amount Over Credit Line \$0.00
 Amount Past Due \$0.00
 Disputed Amount \$0.00

100,010,710.000. Acw

Important Information About Your Account

IT IS NOT NECESSARY TO MAIL YOUR PAYMENT. YOUR ACCOUNT WILL AUTOMATICALLY BE PAID BY A DIRECT DEBIT OF YOUR CHECKING OR SAVINGS ACCOUNT. THE DEBIT THIS MONTH IS \$422.50.

Cardholder Account Summary

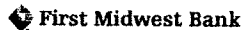
MOHAN RAO #### #### 4947	Payments & Other Credits \$0.00	Purchases & Other Charges \$422.50	Cash Advances \$0.00	Total Activity \$422.50
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Cardholder Account Detail

Trans Date	Post Date	Plan Name	Reference Number	Description	Amount
12/12	12/13	PPLN01	24270743347466900984785	LIGHTHOUSE PRINTING INC 708-4797776 IL	\$422.50

PLEASE DETACH COUPON AND RETURN PAYMENT USING THE ENCLOSED ENVELOPE - ALLOW UP TO 7 DAYS FOR RECEIPT

FIRST MIDWEST BANK
 PO BOX 565
 JOLIET IL 60434-0565



Account Number
 #### #### 4939

Check box to indicate name/address change on back of this coupon

AMOUNT OF PAYMENT ENCLOSED

Closing Date	New Balance	Total Minimum Payment Due	Payment Due Date
12/29/13	\$422.50	\$422.50	01/23/14

\$

BL ACCT 00001230-10000000
 VILLAGE OF SAUK VILLAGE
 21801 TORRENCE AVE
 SAUK VILLAGE IL 60411



MAKE CHECK PAYABLE TO:

BANKCARD PROCESSING CENTER
 PO BOX 31021
 TAMPA FL 33631-3021



BL ACCT 00001230-10000000
VILLAGE OF SAUK VILLAGE
Account Number: #### #### #### 4939
Page 3 of 3

Finance Charge Summary / Plan Level Information									
Plan Name	Plan Description	FCM ¹	Average Daily Balance	Periodic Rate *	Corresponding APR	Finance Charges	Effective APR Fees **	Effective APR	Ending Balance
Purchases									
PPLN01 001	PURCHASE	G	\$0.00	0.77083%(M)	9.2500%(V)	\$0.00	\$0.00	0.0000%	\$422.50
Cash									
CPLN01 001	CASH	A	\$0.00	0.77083%(M)	9.2500%(V)	\$0.00	\$0.00	0.0000%	\$0.00
* Periodic Rate (M)=Monthly (D)=Daily							Days In Billing Cycle: 31		
** includes cash advance and foreign currency fees							APR = Annual Percentage Rate		
¹ FCM = Finance Charge Method									
(V) = Variable Rate If you have a variable rate account the periodic rate and Annual Percentage Rate (APR) may vary.									



Lighthouse Printing Inc.

19027 South Jodi Road
Unit G
Mokena, IL 60448

P: 708 479-7776
F: 708 479-7778
W: www.LighthousePrinting.net

Invoice

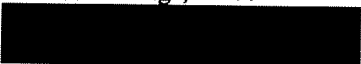
Invoice #:	50459
Invoice Date:	12/6/2013
Due Date	1/5/2014

Bill To:

Village of Sauk Village
21701 Torrence Avenue
Sauk Village, IL 60411

Ship To:

Village of Sauk Village
c/o Mohan Rao
21701 Torrence Avenue
Sauk Village, IL 60411



Swe - coll.

Control No.	Terms	Rep	Date	Ship Via	F.O.B.	Cust. Order No.
20310	Net 30	SUEK	10/30/2013	GROUND	Our Plant	Mohan Rao

Qty Ordered	Qty Shipped	Description	Unit Price	Amount
50	50	Name Badges	6.75	337.50
1	1	Graphics	60.00	60.00
		SHIPPING CHARGE	25.00	25.00
		Subtotal		422.50
<p>100.005.610.000 100.000.724.000 <u>AW</u> paid by visa on 12/11/2013 <u>AW</u></p>				

Thank you! We appreciate your business!

Total \$422.50

Unit Codes: E=Each C=Hundreds M=Thousands PLEASE REFERENCE INVOICE NO. ON CHECK. We accept VISA, MASTERCARD, DISCOVER and AMERICAN EXPRESS
All invoices over 45 days are subject to Finance Charges. Customers will be liable for all collection costs and reasonable attorney's fees.
Discounts taken after the stated Discount Date will be rebilled to the Customer

Disclaimer: Lighthouse Printing, Inc. warrants that the products sold are according to the Purchaser's specifications at the time of sale. Lighthouse Printing's obligation and liability under this warranty is expressly limited to the replacement of any product sold within 60 days after the delivery of any product not meeting specifications. Lighthouse Printing's obligation under this warranty shall not include any liability for direct, indirect or consequential damages or delays. It is the responsibility of the Purchaser to inspect all products received.

Mohan Rao

From: SueK [SueK@lighthouseprinting.net]
Sent: Monday, December 09, 2013 11:30 AM
To: mrao@saukville.org
Subject: Name Badges Invoice 50459 from LIGHTHOUSE PRINTING INC.

Attachments: Inv_50459_from_LIGHTHOUSE_PRINTING_INC._2420.pdf



Inv_50459_from_LI
GHTHOUSE_PRIN...

Hi Mohan - thank you so much for the opportunity to work with you on your printing needs. I am attaching the invoice for the badges, please let me know if you would like me to mail it as well.

I look forward to being able to work with you on future printing projects.

Sue

Sue Kirschner
LIGHTHOUSE PRINTING INC.
708-479-7776



Lighthouse[®] Printing Inc.

19027 South Jodi Road
Unit G
Mokena, IL 60448
Phone # 708 479-7776

Packing Slip

Control Number

20310

Ship To:

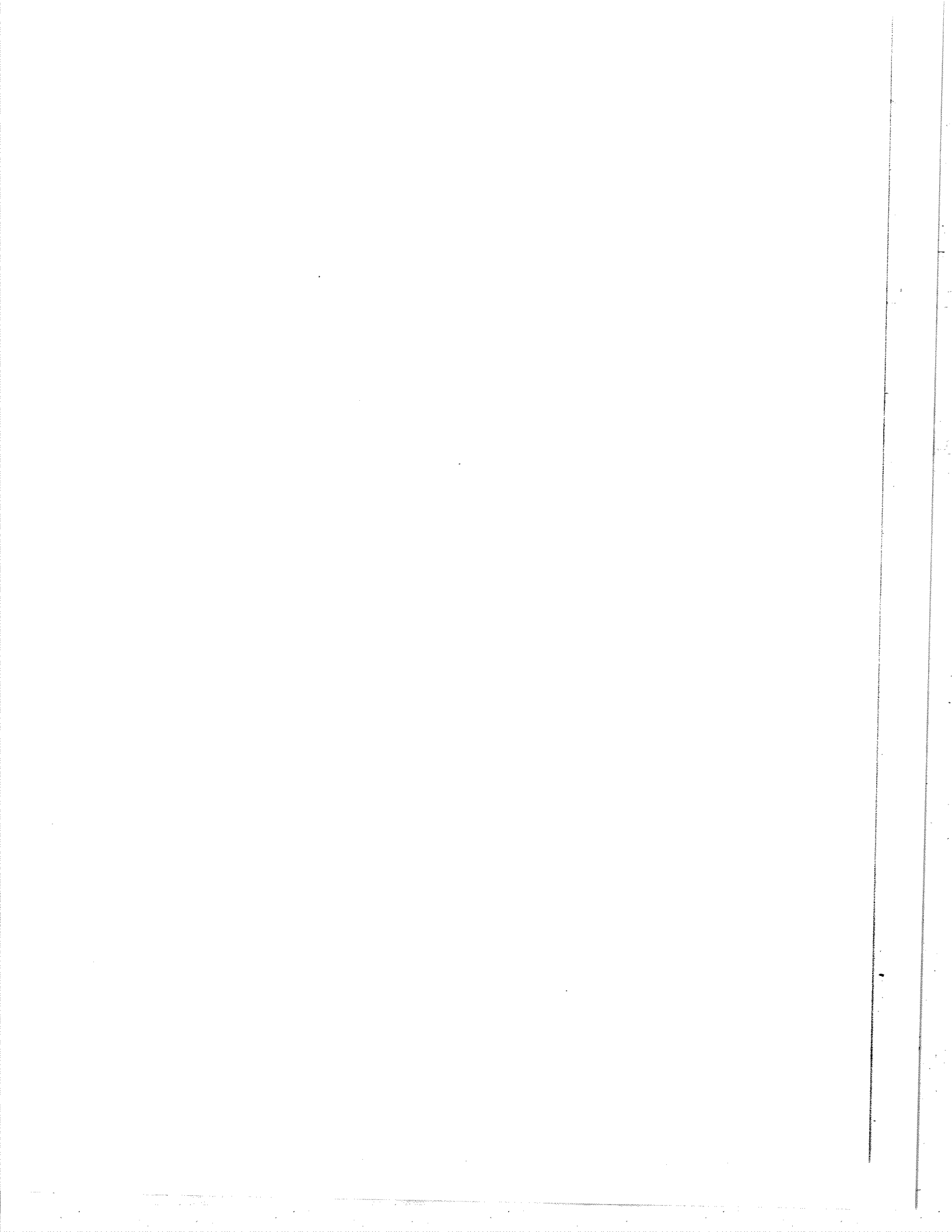
Village of Sauk Village
c/o Mohan Rao
21701 Torrence Avenue
Sauk Village, IL 60411

Your Purchase Order #	Order Date	Ship Via
	10/30/2013	GROUND

Qty Shipped	Order Qty	# of Cartons	Description	Back Orderd
Sue	50	E	Name Badges	

DATE SHIPPED/
DATE RECEIVED/BY

Disclaimer: Lighthouse Printing, Inc. warrants that the products sold are according to the Purchaser's specifications at the time of sale. Lighthouse Printing's obligation and liability under this warranty is expressly limited to the replacement of any product sold within 60 days after date of delivery of any product not meeting specifications. Lighthouse Printing's obligation under this warranty shall not include any liability for direct, indirect or consequential damages or delays. It is the responsibility of the Purchaser to inspect all products received.





Account Summary

Billing Cycle 02/26/2014
 Days In Billing Cycle 28
 Previous Balance \$0.00
 Purchases + \$241.80
 Cash + \$0.00
 Special + \$0.00
 Credits - \$0.00
 Payments - \$0.00
 Other Charges + \$0.00
 Finance Charges + \$0.00

NEW BALANCE \$241.80

Account Inquiries

Call us at: (800) 221-5920
 Lost or Stolen Card: (866) 839-3485

Write us at PO BOX 31535, TAMPA, FL 33631-3535

Payment Summary

NEW BALANCE \$241.80
MINIMUM PAYMENT \$241.80
PAYMENT DUE DATE 03/24/2014

NOTE: Grace period to avoid a finance charge on purchases, pay entire new balance by payment due date. Finance charge accrues on cash advances until paid and will be billed on your next statement.

Credit Summary

Total Credit Line \$3,000.00
 Available Credit Line \$2,758.20
 Available Cash \$0.00
 Amount Over Credit Line \$0.00
 Amount Past Due \$0.00
 Disputed Amount \$0.00

Important Information About Your Account

IT IS NOT NECESSARY TO MAIL YOUR PAYMENT. YOUR ACCOUNT WILL AUTOMATICALLY BE PAID BY A DIRECT DEBIT OF YOUR CHECKING OR SAVINGS ACCOUNT. THE DEBIT THIS MONTH IS \$241.80.

Cardholder Account Summary

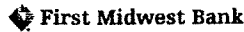
MOHAN RAO #### #### #### 4947	Payments & Other Credits \$0.00	Purchases & Other Charges \$52.50	Cash Advances \$0.00	Total Activity \$52.50
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Cardholder Account Detail

Trans Date	Post Date	Plan Name	Reference Number	Description	Amount
02/10	02/11	PPLN01	24270744042462200842514	LIGHTHOUSE PRINTING INC 708-4797776 IL	\$52.50

PLEASE DETACH COUPON AND RETURN PAYMENT USING THE ENCLOSED ENVELOPE - ALLOW UP TO 7 DAYS FOR RECEIPT

FIRST MIDWEST BANK
 PO BOX 565
 JOLIET IL 60434-0565



Account Number

4939

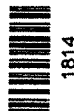
Check box to indicate name/address change on back of this coupon

AMOUNT OF PAYMENT ENCLOSED

Closing Date	New Balance	Total Minimum Payment Due	Payment Due Date
02/26/14	\$241.80	\$241.80	03/24/14

\$

BL ACCT 00001230-10000000
 VILLAGE OF SAUK VILLAGE
 21801 TORRENCE AVE
 SAUK VILLAGE IL 60411



MAKE CHECK PAYABLE TO:

BANKCARD PROCESSING CENTER
 PO BOX 31021
 TAMPA FL 33631-3021

21 4865 2259 4521 4939 00024180 00024180 8



BL ACCT 00001230-10000000
 VILLAGE OF SAUK VILLAGE
 Account Number: #### #### #### 4939
 Page 3 of 3

Cardholder Account Summary					
SHERRY JASINSKI ### ## 4954	Payments & Other Credits \$0.00	Purchases & Other Charges \$189.30	Cash Advances \$0.00	Total Activity \$189.30	
Cardholder Account Detail					
Trans Date	Post Date	Plan Name	Reference Number	Description	Amount
02/19	02/19	PPLN01	24692164050000569624378	COMCAST CHICAGO 800-COMCAST IL	\$189.30

Additional Information About Your Account
 THE TOTAL FINANCE CHARGE PAID ON YOUR ACCOUNT DURING THE PAST YEAR WAS \$0.00.

Finance Charge Summary / Plan Level Information									
Plan Name	Plan Description	FCM ¹	Average Daily Balance	Periodic Rate *	Corresponding APR	Finance Charges	Effective APR Fees **	Effective APR	Ending Balance
Purchases									
PPLN01 001	PURCHASE	G	\$0.00	0.77083%(M)	9.2500%(V)	\$0.00	\$0.00	0.0000%	\$241.80
Cash									
CPLN01 001	CASH	A	\$0.00	0.77083%(M)	9.2500%(V)	\$0.00	\$0.00	0.0000%	\$0.00
* Periodic Rate (M)=Monthly (D)=Daily							Days In Billing Cycle: 28		
** includes cash advance and foreign currency fees							APR = Annual Percentage Rate		
¹ FCM = Finance Charge Method									
(V) = Variable Rate If you have a variable rate account the periodic rate and Annual Percentage Rate (APR) may vary.									



Lighthouse Printing Inc.

19027 South Jodi Road
Unit G
Mokena, IL 60448

P: 708 479-7776
F: 708 479-7778
W: www.LighthousePrinting.net

Invoice

Invoice #: 50605

Invoice Date: 12/31/2013

Due Date 12/31/2013

Bill To:

Village of Sauk Village
21701 Torrence Avenue
Sauk Village, IL 60411

Ship To:

Village of Sauk Village
21701 Torrence Avenue
Sauk Village, IL 60411
Attn: Mohan Rao

Control No.	Terms	Rep	Date	Ship Via	F.O.B.	Cust. Order No.
20555	Credit Card	SUEK	12/11/2013	BEST WAY	Our Plant	Mohan Rao

Qty Ordered/Units	Qty Shipped	Description	Unit Price	Amount
6	6	Name Badges - 2 of each Mike McGrath Matt Byrne Jim Czarnik	6.75	40.50
		SHIPPING CHARGE	12.00	12.00
		Subtotal		52.50
<p>100.010.724.000 <i>Ar</i></p>				

Thank you! We appreciate your business!

Total \$52.50

Unit Codes: E=Each C=Hundreds M=Thousands PLEASE REFERENCE INVOICE NO. ON CHECK. We accept VISA, MASTERCARD, DISCOVER and AMERICAN EXPRESS

All invoices over 45 days are subject to Finance Charges. Customers will be liable for all collection costs and reasonable attorney's fees.

Discounts taken after the stated Discount Date will be rebilled to the Customer

Disclaimer: Lighthouse Printing, Inc. warrants that the products sold are according to the Purchaser's specifications at the time of sale. Lighthouse Printing's obligation and liability under this warranty is expressly limited to the replacement of any product sold within 60 days after the delivery of any product not meeting specifications. Lighthouse Printing's obligation under this warranty shall not include any liability for direct, indirect or consequential damages or delays. It is the responsibility of the Purchaser to inspect all products received.

Packing Slip

From: Lighthouse Printing 19027 South Jodi Road Suite G Mokena, IL 60448	To: Village of Sauk Village 21701 Torrence Avenue Sauk Village, IL 60411 Attn: Mohan Rao

Order Quantity	Quantity Shipped	# of Cartons	Description	Back Ordered
6			Name Badges - 2 of each Mike McGrath-Village Attorney Matt Byrne-Village Attorney Jim Czarnik -Village Engineer	

Shipped Via: _____

Received By: _____

Date Received: _____

Disclaimer: The Company warrants that the products sold are according to the Purchaser's specifications at the time of sale. The Company obligation and liability under this warranty is expressly limited to the replacement of any product sold within 60 days after date of delivery of any product not meeting specifications. The Company obligation under this warranty shall not include any liability for direct, indirect or consequential damages or delays. It is the responsibility of the Purchaser to inspect all products received.



BL ACCT 00001230-10000000
 VILLAGE OF SAUK VILLAGE
 Account Number: #### #### #### 4939
 Page 3 of 3

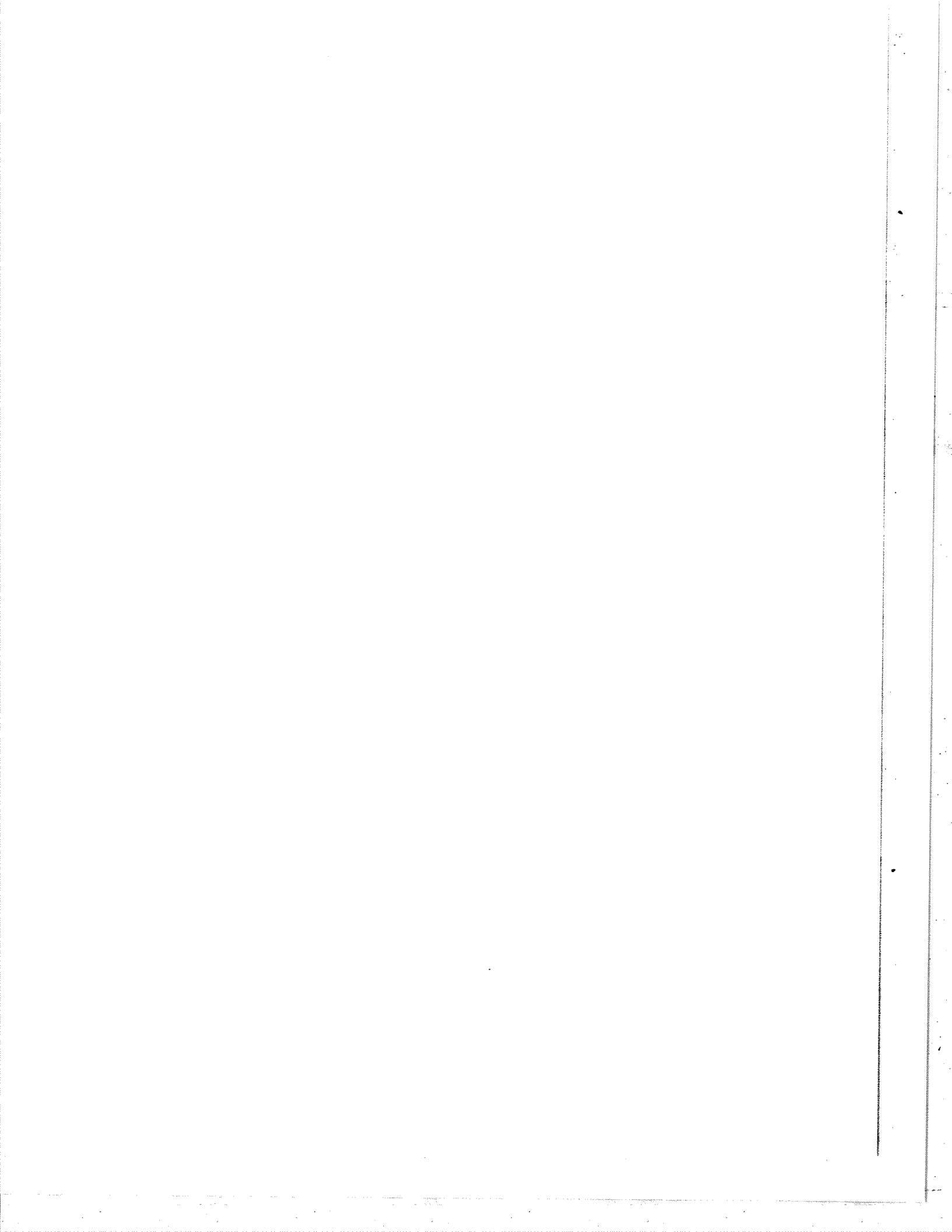
Cardholder Account Summary				
SHERRY JASINSKI #### #### #### 4954	Payments & Other Credits \$0.00	Purchases & Other Charges \$189.30	Cash Advances \$0.00	Total Activity \$189.30

Cardholder Account Detail					
Trans Date	Post Date	Plan Name	Reference Number	Description	Amount
02/19	02/19	PPLN01	24692164050000569624378	COMCAST CHICAGO 800-COMCAST IL	\$189.30

Additional Information About Your Account

THE TOTAL FINANCE CHARGE PAID ON YOUR ACCOUNT DURING THE PAST YEAR WAS \$0.00.

Finance Charge Summary / Plan Level Information									
Plan Name	Plan Description	FCM ¹	Average Daily Balance	Periodic Rate *	Corresponding APR	Finance Charges	Effective APR Fees **	Effective APR	Ending Balance
Purchases									
PPLN01 001	PURCHASE	G	\$0.00	0.77083%(M)	9.2500%(V)	\$0.00	\$0.00	0.0000%	\$241.80
Cash									
CPLN01 001	CASH	A	\$0.00	0.77083%(M)	9.2500%(V)	\$0.00	\$0.00	0.0000%	\$0.00
* Periodic Rate (M)=Monthly (D)=Daily							Days in Billing Cycle: 28		
** includes cash advance and foreign currency fees							APR = Annual Percentage Rate		
¹ FCM = Finance Charge Method									
(V) = Variable Rate If you have a variable rate account the periodic rate and Annual Percentage Rate (APR) may vary.									





Account Summary

Billing Cycle		03/30/2014
Days in Billing Cycle		32
Previous Balance		\$241.80
Purchases	+	\$2,612.78
Cash	+	\$0.00
Special	+	\$0.00
Credits	-	\$0.00
Payments	-	\$241.80-
Other Charges	+	\$0.00
Finance Charges	+	\$0.00
NEW BALANCE		\$2,612.78

Account Inquiries



Call us at: (800) 221-5920
Lost or Stolen Card: (866) 839-3485



Write us at PO BOX 31535, TAMPA, FL 33631-3535

Payment Summary

NEW BALANCE	\$2,612.78
MINIMUM PAYMENT	\$2,612.78
PAYMENT DUE DATE	04/24/2014

Credit Summary

Total Credit Line	\$3,000.00
Available Credit Line	\$387.22
Available Cash	\$0.00
Amount Over Credit Line	\$0.00
Amount Past Due	\$0.00
Disputed Amount	\$0.00

NOTE: Grace period to avoid a finance charge on purchases, pay entire new balance by payment due date. Finance charge accrues on cash advances until paid and will be billed on your next statement.

Corporate Activity

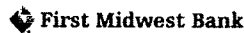
TOTAL CORPORATE ACTIVITY					\$241.80-
Trans Date	Post Date	Reference Number	Transaction Description	Amount	
03/23	03/23	7486522408011111111111	AUTO PMT FROM ACCT	\$241.80-	

Important Information About Your Account

IT IS NOT NECESSARY TO MAIL YOUR PAYMENT. YOUR ACCOUNT WILL AUTOMATICALLY BE PAID BY A DIRECT DEBIT OF YOUR CHECKING OR SAVINGS ACCOUNT. THE DEBIT THIS MONTH IS \$2612.78.

PLEASE DETACH COUPON AND RETURN PAYMENT USING THE ENCLOSED ENVELOPE - ALLOW UP TO 7 DAYS FOR RECEIPT

FIRST MIDWEST BANK
PO BOX 565
JOLIET IL 60434-0565



Account Number

4939

Check box to indicate name/address change on back of this coupon

AMOUNT OF PAYMENT ENCLOSED

Closing Date	New Balance	Total Minimum Payment Due	Payment Due Date
03/30/14	\$2,612.78	\$2,612.78	04/24/14

\$

BL ACCT 00001230-1000000
VILLAGE OF SAUK VILLAGE
21801 TORRENCE AVE
SAUK VILLAGE IL 60411



MAKE CHECK PAYABLE TO:

BANKCARD PROCESSING CENTER
PO BOX 31021
TAMPA FL 33631-3021

21 4865 2259 4521 4939 00261278 00261278 6



BL ACGT 00001230-10000000
 VILLAGE OF SAUK VILLAGE
 Account Number: #### #### #### 4939
 Page 3 of 3

Cardholder Account Summary				
MOHAN RAO #### #### #### 4947	Payments & Other Credits \$0.00	Purchases & Other Charges \$2,612.78	Cash Advances \$0.00	Total Activity \$2,612.78

Cardholder Account Detail					
Trans Date	Post Date	Plan Name	Reference Number	Description	Amount
03/05	03/07	PPLN01	24610434065004103166754	COMED 800-334-7661 IL	\$763.85
03/07	03/09	PPLN01	24224434067101051974712	FRANCOTYP-POSTALIA 003-416-0525 IL	\$1,019.10
03/12	03/12	PPLN01	24692164071000226006246	COMCAST CHICAGO 800-COMCAST IL	\$214.98
03/21	03/23	PPLN01	24164074081200000001300	TRL TIRE SERVI00085027 S CHICAGO HTS IL	\$370.00
03/21	03/23	PPLN01	24164074081200000001334	TRL TIRE SERVI00085027 S CHICAGO HTS IL	\$29.91
03/25	03/27	PPLN01	24388944085670339508615	IL SOS VEHICLE POS SPRINGFIELD IL	\$210.00
03/25	03/27	PPLN01	24388944085670339490822	IL SOS FORTE*SERVICE F SPRINGFIELD IL	\$4.94

Additional Information About Your Account
 THE TOTAL FINANCE CHARGE PAID ON YOUR ACCOUNT DURING THE PAST YEAR WAS \$0.00.

Finance Charge Summary / Plan Level Information									
Plan Name	Plan Description	FCM ¹	Average Daily Balance	Periodic Rate *	Corresponding APR	Finance Charges	Effective APR Fees **	Effective APR	Ending Balance
Purchases									
PPLN01 001	PURCHASE	G	\$0.00	0.77083%(M)	9.2500%(V)	\$0.00	\$0.00	0.0000%	\$2,612.78
Cash									
CPLN01 001	CASH	A	\$0.00	0.77083%(M)	9.2500%(V)	\$0.00	\$0.00	0.0000%	\$0.00
* Periodic Rate (M)=Monthly (D)=Daily							Days In Billing Cycle: 32		
** includes cash advance and foreign currency fees							APR = Annual Percentage Rate		
¹ FCM = Finance Charge Method									
(V) = Variable Rate. If you have a variable rate account the periodic rate and Annual Percentage Rate (APR) may vary.									

Account Number 0489021016
 Name VIL OF SAUK VILLAGE
 Service Location 2050 EVERGREEN SAUK VILLAGE
 Phone Number 708-758-3330

Bill Summary	
Previous Balance	\$374.00
Total Payments	\$0.00
Amount Due on February 4, 2014	\$597.58

www.comed.com
 Customer Service / Power Outage

English
 1-877-4COMED1 (1-877-426-6331)

Español
 1-800-95-LUCES (1-800-955-8237)

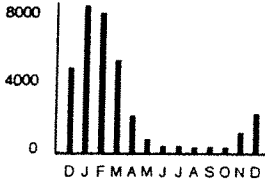
Hearing/Speech Impaired
 1-800-572-5789 (TTY)

For Electric Supply Choices visit
www.pluginillinois.org

Issue Date December 5, 2013

Meter Information								
Read Date	Meter Number	Load Type	Reading Type	Previous	Meter Reading Present	Difference	Multiplier X	Usage
12/5	141419273	General Service	Total kWh	Actual	Actual			2146
12/5	141419273	General Service	On Pk kW	Actual	Actual			5.82

Your Usage Profile
 13-Month Usage (Total kWh)



Month	kWh
Dec-12	4556
Jan-13	7845
Feb-13	7460
Mar-13	4968
Apr-13	2032
May-13	791
Jun-13	434
Jul-13	424
Aug-13	357
Sep-13	393
Oct-13	376
Nov-13	1146
Dec-13	2146

Paid By Credit Card # 3-5-15
761.35
 Service from 1/14/2013 to 12/5/2013 - 31 Days
 Commercial Demand - 0 to 100 kW

Electricity Supply Services				
Electricity Supply Charge	2,146 kWh	X	0.04935	105.91
Transmission Services Charge	2,146 kWh	X	0.00957	20.54
Purchased Electricity Adjustment				10.73

Delivery Services - ComEd				
Customer Charge				15.81
Standard Metering Charge				8.65
Distribution Facilities Charge	5.82 kW	X	4.77000	27.76
IL Electricity Distribution Charge	2,146 kWh	X	0.00120	2.58

Taxes and Other				
Environmental Cost Recovery Adj	2,146 kWh	X	0.00039	0.84
Energy Efficiency Programs	2,146 kWh	X	0.00347	7.45
Franchise Cost	\$49.50	X	4.31800%	2.14
State Tax				7.07
Municipal Tax				12.30

Month Billed	Average Daily	
	kWh	Temp
Last Year	151.9	44
Last Month	37.0	52
Current Month	69.2	39

Total Current Charges

359.57

Ref # 1377613693

761.35

2.50

\$221.78
 + 3.58
225.36

Return only this portion with your check made payable to ComEd. Please write your account number on your check.

ComEd
 An Exelon Company

300.000.704.000 *AW*

To pay by phone call 1-800-588-9477.
 A convenience fee will apply.

1259 1 AV 0.357 1259/001259/001268 007 01 GXFV2 1235 12062013
 VIL OF SAUK VILLAGE
 21801 TORRENCE AVE
 SAUK VILLAGE, IL 60411-4489



Account Number

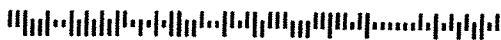
[Redacted Account Number]

Payment Amount

[Redacted Payment Amount]

Please pay this amount by 2/4/2014 **\$597.58**

00000221780000037222



ComEd
 PO Box 6111
 Carol Stream, IL 60197-6111

048902101600005975840350597586

From: donotreply@fp-usa.com
Subject: FP Payment Confirmation Email, FADC500051955
Date: Fri, March 7, 2014 4:43 pm
To: SVPAYROLL@SAUKVILLAGE.ORG

***** PLEASE DO NOT RESPOND TO THIS EMAIL *****

MOHAN RAO,

Thank you for submitting your payment for Invoices. Below are the details for this transaction.

Please note that it can take up to 24-48 hours to show your payment credited towards the invoice

(s). 100,005.712.000 Am

Confirmation Number: 284720164460398890

Confirmation Date: Mar 7, 2014 2:40:10 PM

Payer Name: MOHAN RAO

Payment Amount: \$1,019.10

Convenience Fee: \$0.00

Scheduled Payment Date: Mar 7, 2014

Credit Card Type: Visa

Card Number(last 4 digits): XXXXXXXXXXXX4947

Cardholder Name: MOHAN RAO

Address: 21801 TORRENCE AVE

City: SAUK VILLAGE

State: IL

Zip: 60411-4561

Country: UNITED STATES

Email Address: SVPAYROLL@SAUKVILLAGE.ORG

If you have questions about this payment or need assistance, please call **Customer Service** at **800-341-6052**.



Account Number	[REDACTED]
Billing Date	01/10/14
Unpaid Balance	\$110.94 - Due Now
New Charges	\$102.74 - Due 02/07/14
Total Amount Due	\$213.68

Page 1 of 2

Contact us: @ www.business.comcast.com 1-800-391-3000

Municipal Sauk Village

For service at:
21801 TORRENCE AVE
SAUK VILLAGE IL 60411-4489

News from Comcast

PAST DUE - PLEASE PAY Your account is now past due and will be assessed a late fee. To avoid service interruption, please ensure your payment is received BEFORE 02/09/14. To avoid delays, you may pay in person at one of our payment centers or you may call us at 800-391-3000. Please disregard if payment has been made.

Please have your Business account number available when you contact us about your account. In order to keep your billing information secure, we will require your existing Business account number to discuss account level details or make changes to your account.

Get social with Comcast!
Follow us on Facebook (Comcast of Illinois, NW Indiana and SW Michigan) and Twitter (@ComcastILLINOIS).

Monthly Statement Summary

Previous Balance	313.82
Payment - 12/13/13 - Thank You	-202.88
Unpaid Balance - Due Now	110.94
New Charges - Due by 02/07/14	102.74
<i>See below for more information</i>	
Total Amount Due	\$213.68

New Charges Summary

<input type="checkbox"/> Comcast Cable Television	29.95
<input checked="" type="checkbox"/> Comcast High-Speed Internet	69.90
Other Charges & Credits	1.00
Taxes, Surcharges & Fees	1.89
Total New Charges	\$102.74

Thank you for being a valued Comcast customer!

100.010.766.000 *Aaw*

*214.98K
PAID BY CREDIT CARD
610 714 Confirm #*

Detach and enclose this coupon with your payment. Please write your account number on your check or money order. Do not send cash.



If undeliverable, please return to:
844 169TH STREET HAMMOND IN 46324-2036
8633 0040 NO RP 10 01112014 NNNNNYNN 01 000020 0001

MUNICIPAL SAUK VILLAGE
21801 TORRENCE AVE
SAUK VILLAGE, IL 60411-4489



Account Number	[REDACTED]
Payment Due By	Due Now
Total Amount Due	\$213.68
Amount Enclosed	\$ _____

Make checks payable to Comcast, and remit to address below.

COMCAST CABLE
P.O. BOX 3002
SOUTHEASTERN PA 19398-3002

877140163005774300213686

GOODYEAR

T.R.L. TIRE SERVICE CORP.

3349 EAST END AVE. • SOUTH CHICAGO HEIGHTS, IL 60411 • PH. 708-754-7909
FAX 708-754-8473

NO. 270187

- TIRES • BATTERIES
- FLEET SERVICE
- AUTO REPAIR
- RECAPPING
- ROAD SERVICE

S
O
D
I
O

Village of Sauk Village

CUSTOMER PHONE

DATE	CLUB NO.	SALESMAN	DELIVERED BY	TERMS	TIME IN	TIME OUT	TOTAL
12/3/13	353-612-144						
4	205/60R16	KELLY	NAV TOUR	92T	90 ⁰⁰		360.00
* Delivered to Beckman Veh Ford Fusion (Black) LC# mp 3690							
RAO 3-2-14 VISA \$370.00							
FUEL SURCHARGE ENVIRONMENTAL REFUSE CHARGE (4) ILLINOIS STATE TIRE USER FEE 2.00							10.00
SUB TOTAL SALES TAX							370.00
GRAND TOTAL							370.00

CAUSE OF INCREASED COSTS IN HANDLING AND CARRYING ACCOUNTS RECEIVABLE WHICH BEYOND OUR NORMAL DISCOUNT TERMS WE ARE IT NECESSARY TO INCREASE A FLOOR CHARGE OF 1.5% PER MONTH ON BALANCES WHICH ARE 30 DAYS OR MORE PAST DUE

RECEIVED BY

EXCISE TAXES

FAX# 708 758-1634

TRL TIRE SERVICE
3349 E END AVE
CHICAGO HEIGHTS, IL 60411
(708) 754-7909

3/21/2014

9:36 AM

SALE

TERMINAL ID: 0000651701
 STORE ID: 85026
 COMPANY ID: 0000
 SEQUENCE N: 000130
 BATCH N: 26
 CARD TYPE: HANJIAN -UTSA
 ACCOUNT N: 88888888888888888888
 EXP DATE: M/A/R
 TOTAL SALE: \$ 370.00
 APPROVAL CODE: 6839K

CUSTOMER COPY

I AGREE TO PAY ABOVE AMOUNT INCLUDING 10% CARD ISSUER AGREEMENT (MERCHANT AGREEMENT) IF CREDIT VOUCHER.

Attw:
RAO

COPY of Receipt

3/21/14

Am 100.025.620.000
paid by cr. card.

SECRET
NO FORN DISSEM
DATE 10/1/88

SECRET
NO FORN DISSEM
DATE 10/1/88

Adm.
E&A

100.005 ~~520~~ 000
100 205.620.000.

\$ 107.47

\$ 107.47.

Adm



RUT-50 Private Party Vehicle Use Tax Transaction

Step 1: Complete the purchaser's information

1 Name: VILLAGE OF SAUK VILLAGE
2 Co-owner(s):
3 Street address: 21801 TORRENCE AVE
City, State, ZIP: SAUK VILLAGE IL 60411

4 Daytime phone: (708) 758-3330
5 SSN or FEIN:
6 Driver's license number:

Step 2: Complete the seller's information

1 Name: PEN BRIDGE ENERGY PARTNERS
2 Daytime phone:

3 Address: 1500 W MAIN ST GRIFFITH IN 46319

Step 3: Describe the vehicle - Must complete Line 1 even if no tax is due

1 Purchase price:
2 Odometer reading: 115,267
3 Vehicle identification number (VIN):

4 Year: 2007 Make: CHEVY
5 Model: TRAIL BLAZER

Step 4: Mark the ONE box that best describes your transaction

1 Exemption - Write \$0 on Step 5, Line 1

- 1a Organization with tax-exempt status - Provide exemption number: E
1b Farm implement or ready-mix concrete truck
1c Rolling stock - Provide certificate of authority number:
1d You were an out-of-state resident; item used outside IL at least 3 months. Purchase date:
1e Estate gift for surviving spouse

2 Exception - Write \$15 on Step 5, Line 1

- 2a Estate gift for beneficiary (not surviving spouse)
2b Business reorganization
2c Transferred or purchased from spouse, parent, brother, sister, or child. Circle one.

3 Motorcycle or ATV - Write \$25 on Step 5, Line 1

4 Table A or B - Write the tax determined on Step 5, Line 1

- 4a If Step 3, Line 1 is less than \$15,000 use Table A. See instructions.
4b If Step 3, Line 1 is \$15,000 or more use Table B. See instructions.



Step 5: Figure your tax

1 Tax due from Step 4.
2 Credit for tax previously paid to the state of
3 Tax due. Subtract Line 2 from Line 1. This is your total tax due.

Step 6: Sign here

Under penalties of perjury, I state that I have examined this return and, to the best of my knowledge, it is true, correct, and complete. I understand that the penalty for willfully filing a false return shall be a fine not to exceed \$1,000 or imprisonment in a penal institution, other than the penitentiary not to exceed one year, or both fine

Signature: [Redacted] Date: 3-25-14
Co-owner's signature: Date:

Remittance agent number (if applicable)



Illinois Department of Revenue PV 098777543
RUT-50 Private Party Vehicle Use Tax Transaction

REV 05 FORM 89
 RC CA ED
 (R 9/10)

Step 1: Complete the purchaser's information

1 Name: VILLAGER OF SAUK VILLAGER
 2 Co-owner(s):
 3 Street address: 21801 Wisconsin Ave
 City, State, ZIP: Sauk Village, IL 60411

4 Daytime phone: (708) 758-3330
 5 SSN or FEIN:
 6 Driver's license number:

Step 2: Complete the seller's information

1 Name: ENBRIDGE ENERGY PARTNER
 2 Daytime phone: () - -

3 Address: 1500 W MAIN ST
 GRIFFIN IL 60139

Step 3: Describe the vehicle - Must complete Line 1 even if no tax is due

1 Purchase price:
 2 Odometer reading: 52042
 3 Vehicle identification number (VIN):

4 Year: 2007 Make: CHEVY
 5 Model: TRAIL BLAZER

Step 4: Mark the ONE box that best describes your transaction

1 Exemption - Write \$0 on Step 5, Line 1

- 1a Organization with tax-exempt status - Provide exemption number: 1a
- 1b Farm implement or ready-mix concrete truck 1b
- 1c Rolling stock - Provide certificate of authority number: 1c
- 1d You were an out-of-state resident; item used outside IL at least 3 months. Purchase date: 1d
- 1e Estate gift for surviving spouse 1e

2 Exception - Write \$15 on Step 5, Line 1

- 2a Estate gift for beneficiary (not surviving spouse) 2a
- 2b Business reorganization 2b
- 2c Transferred or purchased from spouse, parent, brother, sister, or child. Circle one. 2c

3 Motorcycle or ATV - Write \$25 on Step 5, Line 1

3

4 Table A or B - Write the tax determined on Step 5, Line 1

- 4a If Step 3, Line 1 is less than \$15,000 use Table A. See instructions. 4a
- 4b If Step 3, Line 1 is \$15,000 or more use Table B. See instructions. 4b

Step 5: Figure your tax

1 Tax due from Step 4. 1

2 Credit for tax previously paid to the state of IL. 2

3 Tax due. Subtract Line 2 from Line 1. This is your total tax due. 3

Step 6: Sign here

Under penalties of perjury, I state that I have examined this return and, to the best of my knowledge, it is true, correct, and complete. I understand that the penalty for failure to file a return is a fine not to exceed \$1,000 or imprisonment in a penal institution, other than the penitentiary not to exceed one year, or both fine and imprisonment.

3/25/14 Date
 [Signature] Co-owner's signature Date

Remittance agent number (if applicable)

This form is authorized by the Illinois Vehicle Code. Disclosure of this information is REQUIRED. Failure to provide information could result in penalties. This form has been approved by the Forms Management Center. IL-492-0010



Account Summary

Billing Cycle 04/28/2014
 Days In Billing Cycle 29
 Previous Balance \$2,612.78
 Purchases + \$250.00
 Cash + \$0.00
 Special + \$0.00
 Credits - \$0.00
 Payments - \$2,612.78-
 Other Charges + \$0.00
 Finance Charges + \$0.00

NEW BALANCE \$250.00

Credit Summary

Total Credit Line \$3,000.00
 Available Credit Line \$2,750.00
 Available Cash \$0.00
 Amount Over Credit Line \$0.00
 Amount Past Due \$0.00
 Disputed Amount \$0.00

Account Inquiries



Call us at: (800) 221-5920
 Lost or Stolen Card: (866) 839-3485



Write us at PO BOX 31535, TAMPA, FL 33631-3535

Payment Summary

NEW BALANCE \$250.00
 MINIMUM PAYMENT \$250.00
 PAYMENT DUE DATE 05/23/2014

NOTE: Grace period to avoid a finance charge on purchases, pay entire new balance by payment due date. Finance charge accrues on cash advances until paid and will be billed on your next statement.

Corporate Activity

			TOTAL CORPORATE ACTIVITY	\$2,612.78-
Trans Date	Post Date	Reference Number	Transaction Description	Amount
04/24	04/24	7486522411311111111111	AUTO PMT FROM ACCT [REDACTED]	\$2,612.78-

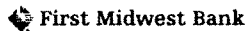
Important Information About Your Account

ATTENTION: DUE TO DATA BREACH EVENTS, WE ADVISE THAT YOU CONTINUE TO CLOSELY MONITOR YOUR CREDIT CARD ACCOUNT. PLEASE REPORT ANY SUSPICIOUS ACTIVITY IMMEDIATELY. TO CHECK RECENT ACCOUNT ACTIVITY, LOG INTO OUR ONLINE BANKING SITE, AND ACCESS OR ENROLL YOUR CREDIT CARD ACCOUNT TODAY.

IT IS NOT NECESSARY TO MAIL YOUR PAYMENT. YOUR ACCOUNT WILL AUTOMATICALLY BE PAID BY A DIRECT DEBIT OF YOUR CHECKING OR SAVINGS ACCOUNT. THE DEBIT THIS MONTH IS \$250.00.

PLEASE DETACH COUPON AND RETURN PAYMENT USING THE ENCLOSED ENVELOPE - ALLOW UP TO 7 DAYS FOR RECEIPT

FIRST MIDWEST BANK
 PO BOX 565
 JOLIET IL 60434-0565



Account Number

4939

Check box to indicate name/address change on back of this coupon

AMOUNT OF PAYMENT ENCLOSED

Closing Date	New Balance	Total Minimum Payment Due	Payment Due Date
04/28/14	\$250.00	\$250.00	05/23/14

\$

BL ACCT 00001230-10000000
 VILLAGE OF SAUK VILLAGE
 21801 TORRENCE AVE
 SAUK VILLAGE IL 60411



MAKE CHECK PAYABLE TO:

BANKCARD PROCESSING CENTER
 PO BOX 31021
 TAMPA FL 33631-3021

21 4865 2259 4521 4939 00025000 00025000 6

BL ACCT 00001230-10000000
 VILLAGE OF SAUK VILLAGE
 Account Number: ##### 4939
 Page 3 of 3



Cardholder Account Summary																			
Trans Date	Post Date	Plan Name	Reference Number	Description															
04/07	04/08	PLN01	24224434098102017441906	FRANCOTYP-POSTALIA 003-416-0525 IL															
<table border="1"> <thead> <tr> <th colspan="5">Cardholder Account Detail</th> </tr> <tr> <th>Payments & Other Credits</th> <th>Purchases & Other Charges</th> <th>Cash Advances</th> <th>Total Activity</th> <th>Amount</th> </tr> </thead> <tbody> <tr> <td>\$0.00</td> <td>\$250.00</td> <td>\$0.00</td> <td>\$250.00</td> <td>\$250.00</td> </tr> </tbody> </table>					Cardholder Account Detail					Payments & Other Credits	Purchases & Other Charges	Cash Advances	Total Activity	Amount	\$0.00	\$250.00	\$0.00	\$250.00	\$250.00
Cardholder Account Detail																			
Payments & Other Credits	Purchases & Other Charges	Cash Advances	Total Activity	Amount															
\$0.00	\$250.00	\$0.00	\$250.00	\$250.00															

100,005.706.000

Finance Charge Summary / Plan Level Information									
Plan Name	Plan Description	FCM ¹	Average Daily Balance	Periodic Rate *	Corresponding APR	Finance Charges	Effective APR	Fees **	Ending Balance
PPLN01	PURCHASE	G	\$0.00	0.77083%(M)	9.2500%(V)	\$0.00	0.0000%	\$0.00	\$250.00
CPLN01	CASH	A	\$0.00	0.77083%(M)	9.2500%(V)	\$0.00	0.0000%	\$0.00	\$0.00

* Periodic Rate (M)=Monthly (D)=Daily
 ** Includes cash advance and foreign currency fees
¹ FCM = Finance Charge Method
 (V) = Variable Rate If you have a variable rate account the periodic rate and Annual Percentage Rate (APR) may vary.
 Days in Billing Cycle: 29
 APR = Annual Percentage Rate



FP MAILING SOLUTIONS
140 N. Mitchell Ct., Suite 200
Addison, IL 60101-5629

POSTAGE ACCOUNT STATEMENT

SAUK VILLAGE
MOHAN RAO
21801 Torrence Ave
Sauk Village, IL 60411-4561

Statement No.: TDC#500051955-15
Statement Date: 04/08/14
Account Number: [REDACTED]
CIN Number: 105000519550
Period: 04/06/14 - 04/07/14

Date	Transaction Description	Amount	Advances	Running Balance
Beginning Statement Balance:				
	<i>cr. card</i>		0.00	15.39
04/07/14	Credit card deposit Last 4 digits 4947	235.00	0.00	250.39
04/07/14	Resetting credit 61811310	-100.00	0.00	150.39
	<i>fee \$ 15.00</i>			
Ending Statement Balance:			0.00	150.39

This is not an invoice.
This is a view of your postage account transactions.

*** PLEASE DO NOT RESPOND TO THIS EMAIL ***

MOHAN RAO,

Thank you for submitting your payment for Postage. This email is to confirm that on Apr 7, 2014, you authorized FP Postage to charge the credit card listed below on the scheduled payment date.

Confirmation Number: 272358207302363520
Confirmation Date: Apr 7, 2014 4:20:43 PM
Payer Name: MOHAN RAO

Payment Amount: \$235.00

Convenience Fee: \$15.00

Scheduled Payment Date: Apr 7, 2014

Credit Card Type: Visa

Card Number(last 4 digits): XXXXXXXXXXXXX4947

Cardholder Name: MOHAN RAO

Address: 21801 TORRENCE AVE
City: SAUK VILLAGE
State: IL
Zip: 60411-4561
Country: UNITED STATES

Email Address: SVPAYROLL@SAUKVILLAGE.ORG

If you have questions about this payment or need assistance, please call **Customer Service** at **800-341-6052**.


Thank you for using the FP electronic payment system.


Account Summary

Billing Cycle 05/29/2014
 Days In Billing Cycle 31
 Previous Balance \$250.00
 Purchases + \$454.63
 Cash + \$0.00
 Special + \$0.00
 Credits - \$0.00
 Payments - \$250.00-
 Other Charges + \$0.00
 Finance Charges + \$0.00

NEW BALANCE \$454.63

Account Inquiries

 Call us at: (800) 221-5920
 Lost or Stolen Card: (866) 839-3485

 Write us at PO BOX 31535, TAMPA, FL 33631-3535

Payment Summary

NEW BALANCE \$454.63
MINIMUM PAYMENT \$454.63
PAYMENT DUE DATE 06/23/2014

NOTE: Grace period to avoid a finance charge on purchases, pay entire new balance by payment due date. Finance charge accrues on cash advances until paid and will be billed on your next statement.

Credit Summary

Total Credit Line \$3,000.00
 Available Credit Line \$2,545.37
 Available Cash \$0.00
 Amount Over Credit Line \$0.00
 Amount Past Due \$0.00
 Disputed Amount \$0.00

Corporate Activity

TOTAL CORPORATE ACTIVITY			\$250.00-	
Trans Date	Post Date	Reference Number	Transaction Description	Amount
05/23	05/23	748652241421111111111111	AUTO PMT FROM ACCT	\$250.00-

Important Information About Your Account

ATTENTION: DUE TO DATA BREACH EVENTS, WE ADVISE THAT YOU CONTINUE TO CLOSELY MONITOR YOUR CREDIT CARD ACCOUNT. PLEASE REPORT ANY SUSPICIOUS ACTIVITY IMMEDIATELY. TO CHECK RECENT ACCOUNT ACTIVITY, LOG INTO OUR ONLINE BANKING SITE, AND ACCESS OR ENROLL YOUR CREDIT CARD ACCOUNT TODAY.

IT IS NOT NECESSARY TO MAIL YOUR PAYMENT. YOUR ACCOUNT WILL AUTOMATICALLY BE PAID BY A DIRECT DEBIT OF YOUR CHECKING OR SAVINGS ACCOUNT. THE DEBIT THIS MONTH IS \$454.63.

PLEASE DETACH COUPON AND RETURN PAYMENT USING THE ENCLOSED ENVELOPE - ALLOW UP TO 7 DAYS FOR RECEIPT

FIRST MIDWEST BANK
 PO BOX 565
 JOLIET IL 60434-0565



Account Number

4939

Check box to indicate name/address change on back of this coupon

AMOUNT OF PAYMENT ENCLOSED

Closing Date	New Balance	Total Minimum Payment Due	Payment Due Date
05/29/14	\$454.63	\$454.63	06/23/14

\$

BL ACCT 00001230-10000000
 VILLAGE OF SAUK VILLAGE
 21801 TORRENCE AVE
 SAUK VILLAGE IL 60411



MAKE CHECK PAYABLE TO:

BANKCARD PROCESSING CENTER
 PO BOX 31021
 TAMPA FL 33631-3021

21 4865 2259 4521 4939 00045463 00045463 8



BL ACCT 00001230-1000000
 VILLAGE OF SAUK VILLAGE
 Account Number: ##### 4939
 Page 3 of 3

Cardholder Account Summary				
Trans Date	Post Date	Plan Name	Reference Number	Description
04/30	05/01	PPLN01	24492154120849933427846	ABETTERWAYTOBUY 708-672-0250 IL
05/01	05/02	PPLN01	24506014121980236460421	DACA V INDUSTRIES INC. 708-754-4155 IL
05/23	05/25	PPLN01	24164074143418191094365	USPS 16745804729305109 STEGER IL
Total Activity: Payments & Other \$0.00, Credits \$0.00, Purchases & Other \$305.55, Cash Advances \$0.00, Total Activity \$305.55				

Cardholder Account Summary				
Trans Date	Post Date	Plan Name	Reference Number	Description
05/01	05/02	PPLN01	24270744122470701139267	PRAIRIECAPITALCONVCTR SPRINGFIELD IL
05/02	05/04	PPLN01	24755424122171225046243	DOUBLE TREE HOTELS SPRINGFIELD IL
05/01	05/04	PPLN01	24445004122100599349269	CASEYS GEN STORE 2939 SPRINGFIELD IL
Total Activity: Payments & Other \$0.00, Credits \$0.00, Purchases & Other \$149.08, Cash Advances \$0.00, Total Activity \$149.08				

Finance Charge Summary / Plan Level Information									
Plan Name	Plan Description	FCM	Average Daily Balance	Periodic Rate *	Corresponding APR	Finance Charges	Effective APR Fees **	APR Effective	Ending Balance
PPLN01	PURCHASE	G	\$0.00	0.77083%(M)	9.2500%(V)	\$0.00	\$0.00	0.0000%	\$454.63
Cash CPLN01	CASH	A	\$0.00	0.77083%(M)	9.2500%(V)	\$0.00	\$0.00	0.0000%	\$0.00

* Periodic Rate (M)=Monthly (D)=Daily
 ** Includes cash advance and foreign currency fees
 * FCM = Finance Charge Method
 (V) = Variable Rate If you have a variable rate account the periodic rate and Annual Percentage Rate (APR) may vary.
 Days in Billing Cycle: 31
 APR = Annual Percentage Rate

Handwritten notes: 100,010.724,000 A/c

President Abraham Lincoln

SPRINGFIELD

A DOUBLETREE BY HILTON

701 East Adams Street • Springfield, IL 62701
 Phone (217) 544-8800 • Fax (217) 544-8079
 For reservations across the nation
 www.doubletree.com or 1-800-222-TREE

Name & Address

HANKS, DAVID
 1791 E. 223RD PLACE
 SAUK VILLAGE, IL 60411
 US

Room 1020/ND
 Arrival Date 4/30/2014 9:43:00/
 Departure Date 5/1/2014

Adult/Child 1/0
 Room Rate 109.00

RATE PLAN C-SSM
 HH#961457164 BLUE
 AL: UA #03139048899
 CAR:

Folio

CONFIRMATION NUMBER : 84315682



5/1/2014 PAGE 1

DATE	DESCRIPTION	ID	REF. NO	CHARGES	CREDITS	BALANCE
4/30/2014	154257 GUEST ROOM				\$109.00	
4/30/2014	154257 RM - STATE TAX				\$6.54	
4/30/2014	154257 RM - CITY TAX				\$6.54	
5/1/2014	154646 VS *2205				(\$122.08)	
				** BALANCE **		\$0.00
EXPENSE REPORT SUMMARY						
	14 00:00:00 STAY TOTAL					
ROOM & TAX	\$122.08	\$122.08				
DAILY TOTAL	\$122.08	\$122.08				
				100.010.	724.000	<u> </u>



You have earned approximately 1090 Hilton HHonors points and approximately 109 Miles with United Airlines for this stay. Hilton HHonors(R) stays are posted within 72 hours of checkout. To check your earnings or book your next stay at more than 3,900 hotel

Thank you for choosing Doubletree! Come back soon to enjoy our warm chocolate chip cookies and relaxed hospitality. For your next trip visit us at doubletree.com for our best available rates!

ACCOUNT NO. VS *2205	4/30/14	DATE OF CHARGE 68683	FOLIO NO./CHECK NO. A
CARD MEMBER NAME HANKS, DAVID	630661	AUTHORIZATION	INITIAL
ESTABLISHMENT NO. & LOCATION	PURCHASES & SERVICES		
	TAXES		
	TIPS & MISC.		
CARD MEMBER'S SIGNATURE X	TOTAL AMOUNT -122.08		

MERCHANDISE AND/OR SERVICES PURCHASED ON THIS CARD SHALL NOT BE RESOLD OR RETURNED FOR A CASH REFUND

PAYMENT DUE UPON RECEIPT

Casey's General
Store #2939
1001 E Clear Lake Av
Springfield, IL 6270

Date 05/01/2014
Time 08:33

UI
#####2205

Pump Gallons Price
06 5.480 \$ 3.649

Product Amount
UNLEADED \$ 20.00

Total Sale \$ 20.00

Rcpt# 1048
05/01/14 08:12 L# 1 A# 1 Txn# 2849
04/30/14 17:03 In 05/01/14 08:12 Out
IKL# 150870
DAILY \$ 7.00
Total fee \$ 7.00
VISA \$ 7.00
XXXXXXXXXXXX5296
Approval No.: 17016C
Reference No.: 412113003942
Charge Due \$ 0.00

SALE - Card Swiped
Auth # 615119
Merch #
Approved 615119

STARSTRUCK SUMMER!
Text to enter
to win a trip for 2
to Hollywood!
Powerade 3 for \$3!
Details inside.

Thank You !!!
Please Come Again.
217-788-1677

7007 0710 0001 7888 9478

Sent To: COOK COUNTY CLERK, THE DIVISION
Street, Apt. No.: 118 N. CLARK STREET #402
or PO Box No.:
City, State, ZIP+4: CHICAGO, IL 60603

Postage	\$	\$5.80
Certified Fee		\$3.30
Return Receipt Fee (Endorsement Required)		\$2.70
Restricted Delivery Fee (Endorsement Required)		\$0.00
Total Postage & Fees	\$	\$11.80

02
MAY 24 2014
STEGENT IL

U.S. Postal Service
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only. No Insurance Coverage Provided)
For delivery information visit our website at www.usps.com®
OFFICIAL USE

@@ CHICAGO IL 60603 \$5.80
Zone: 1
Priority Mail 1-Day By
Weight:
1 lb. 1.30 oz.
Expected Delivery: Sat 05/24/14
Includes \$50 insurance
Return Rcpt (Green Card) \$2.70
@@ Certified \$3.30
USPS Certified Mail # 7070710000178889478
=====

Issue PVI: \$11.80
@@ JULIET IL 60432-078 \$5.80
Zone: 1
Priority Mail 1-Day By
Weight:
1 lb. 1.30 oz.
Expected Delivery: Sat 05/24/14
Includes \$50 insurance
Return Rcpt (Green Card) \$2.70
@@ Certified \$3.30
USPS Certified Mail # 7070710000178889485
=====

Issue PVI: \$11.80
@@ SPRINGFIELD IL 62734 \$5.15
Zone: 3
Priority Mail 2-Day By
Weight:
1 lb. 1.00 oz.
Expected Delivery: Tue 05/27/14
USPS Tracking #: 91490123080356586927
Includes \$50 insurance
Issue PVI: \$6.15

@@ CHICAGO IL 60601 \$5.80
Zone: 1
Priority Mail 1-Day By
Weight:
1 lb. 1.00 oz.
Expected Delivery: Sat 05/24/14
USPS Tracking #: 91490123080356586929
Includes \$50 insurance
Issue PVI: \$5.80

=====
Total: \$35.55
Paid by: **\$35.55**
VIS: (circled)
Account #: XXX-XXX-XXXX4947
Approval #: 622-53
Transaction #: 436

7007 0710 0001 7888 9485

Sent To: MURPHY SCHWARTZ PRODS. CLERK
Street, Apt. No.: COUNTY OF WILL, 302 N. CHICAGO
or PO Box No.:
City, State, ZIP+4: JOLIET, IL 60432-4059

Postage	\$	\$5.80
Certified Fee		\$3.30
Return Receipt Fee (Endorsement Required)		\$2.70
Restricted Delivery Fee (Endorsement Required)		\$0.00
Total Postage & Fees	\$	\$11.80

02
MAY 23 2014
STEGENT IL

U.S. Postal Service
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only. No Insurance Coverage Provided)
For delivery information visit our website at www.usps.com®
OFFICIAL USE

Remember you can pay ONLINE!

www.dacaygraphics.com

Invoice 1516, 05/01/2014

\$80.00

TOTAL

100,010.759,002. Am
Paid by cr-card on 5/1/2014

Graphic Items:Banner

Graphic Items:Banner

40.00	40.00	1
40.00	40.00	1

ACTIVITY	QUANTITY	RATE	AMOUNT
Customer Pickup	1	40.00	40.00
Lynda Washington	1	40.00	40.00

AMOUNT DUE: ENCLOSED \$80.00

Village of Sauk Village
21801 Torrence Ave.
Sauk Village, IL 60411

(708)754-4155
info@dacaygraphics.com
http://www.dacaygraphics.com

Dacay Industries Inc.
3270 East End Ave
South Chicago Heights, IL
60411



INVOICE NO. DATE
TERMS DUE DATE
Due on receipt 05/01/2014

Invoice from Dacav Industries Inc.

Dacav Industries Inc. <info@dacavgraphics.com>

Thu 5/1/2014 11:00 AM

To: Finance Director Mohan Rao <mrao@saukvillage.org>; jilotawwm@yahoo.com <jilotawwm@yahoo.com>;
From: info@dacavgraphics.com <info@dacavgraphics.com>;

Attachments:

Invoice_1516_from_Dacav_Industries_Inc.pdf;

Dear Village of Sauk Village,

We just wanted to drop you a note and let you know your items are all set ready to be picked up!

Your invoice is included and if you should have any questions, please feel free to contact us!

Thanks for your business!
Dacav Industries Inc.

----- Invoice Summary -----

Invoice No. : 1516
Invoice Date: 05/01/2014
Due Date: 05/01/2014
Terms: Due on receipt
Amount Due: \$80.00

The complete version has been provided as an attachment to this email.

Pay This invoice Online - Quick. Easy. Free

Intuit PaymentNetwork is an online payment service that saves you time. This FREE and easy way to pay online is brought to you by Intuit (maker of TurboTax, Quicken and QuickBooks), a company that millions trust with their financial information.

It's free. No need to create an account. Simply enter your payment information and pay.

Delivered by QuickBooks Online

<https://outlook.office365.com/owa/#viewmodel=ReadMessageItem&ItemID=AAMkAGU5MzRjMWE0LWZlYmQtNDRlNS1hNjc4LTZlYzQ0NzkyZGlyNABGAAAA...> 1/2

Uniden BC75XLT Nascar/Racing Scanner

Price: \$97.95

SKU: BC75XLT

\$190.00 / piece
~~*\$195.95*~~
ordered 2 # =
100.010.7591.0002

Latest from Uniden

per Linda Wainwright
Andrew
4/30/2014

Product Features:

- 300 Channels / 10 Bank
- PC Programmable
- Compact Design - The Uniden BC75XLT is designed to be compact for added flexibility and portability.
- Close Call(TM) RF Capture Technology - Instantly tunes to signals from nearby transmitters
- Frequency Coverage - Includes the most interesting "action" bands where you can hear police, ambulance, fire, amateur radio, public utilities, weather, and more.

- 10 Preprogrammed Service Searches - Frequencies are Preset in Separate Police, Fire/Emergency, Aircraft, Ham, Marine (by channel) and Weather Banks to make it easy to locate specific types of calls.
- Backlit Display - Makes it Easier to Read Display in Low Light Conditions
- 2 AA Battery Operation - Provides flexibility in choice of batteries: Alkaline for long life, rechargeable for economy (batteries can be charged while in the scanner)
- Priority Scan - Frequently scans the channels you have designated as priority channels
- Delay - Helps prevent missed replies during 2-way conversation

This is an Analog Scanner, it will not pick up Trunked or Digital Signals.

Included in the Box:

- BC75XLT Scanner
- USB Programming/Power Cable
- Rubber Duckie Antenna
- Owner's Manual



Abetterwaytobuy Inc.
 Low Prices and Unparalleled Service = Abetterwaytobuy
 www.abetterwaytobuy.net

Nick Mouw
 Owner

tele: 708-672-0250, fax: 708-672-0259
 cell: 708-227-5193
 eBay ID: nomou
 email: nomouv@oil.net

25621 S. Dixie Hwy
 Unit 13D
 Crete IL 60417

Your order: 1966-M

Nick <sales@abetterwaytobuy.net>

Wed 4/30/2014 2:33 PM

To: Finance Director Mohan Rao <mrao@saukville.org>;

Mohan,

Your order #1966-M, Uniden BC75XLTNascar/Police Scanner, has shipped and the tracking information is below. Upon Receiving your purchase, if you have any issues PLEASE let us know. We will do everything that we can to make it right. Thank you for your business!

Shipped on **4/30/2014** using **USPS Priority: 9405510200986243613046**

Sincerely,
Nick Mouw
ABetterWaytoBuy
www.abetterwaytobuy.net
708-672-0250

Invoice

ABetterWaytoBuy
 25621 S Dixie Highway, unit 13D
 Crete, Illinois 60417
 1-888-434-1045
 www.abetterwaytobuy.net

Order: 1966-M
 Placed: 4/30/2014
 Shipping:

Bill To

Mohan Rao
 Village of Sauk Village
 21801 Torrence Ave
 Sauk Village, Illinois 60411
 7087535120
 mrao@saukvillage.org

Ship To

Mohan Rao
 Village of Sauk Village
 21801 Torrence Ave
 Sauk Village, Illinois 60411
 7087535120
 mrao@saukvillage.org

Item #	Name	QTY	Price	Total
BC75XLT	Uniden BC75XLTNascar/Police Scanner	2	95.00	190.00

Subtotal: 190.00
 Order Total: 190.00

Quantity - 2

Order Information

Notes
 None

Thank you!

Thank you for your purchase from ABetterWaytoBuy!

If you have questions about your order please visit us online at www.abetterwaytobuy.net or email us at sales@abetterwaytobuy.net.

Ermedy

Account Summary

Billing Cycle 06/29/2014
Days In Billing Cycle 31
Previous Balance \$454.63
Purchases + \$211.18
Cash + \$0.00
Special + \$0.00
Credits - \$0.00
Payments - \$454.63
Other Charges + \$0.00
Finance Charges + \$0.00

NEW BALANCE \$211.18

Credit Summary

Total Credit Line \$3,000.00
Available Credit Line \$2,788.82
Available Cash \$0.00
Amount Over Credit Line \$0.00
Amount Past Due \$0.00
Disputed Amount \$0.00

Account Inquiries

Call us at: (800) 221-5920
Lost or Stolen Card: (866) 839-3485

Write us at PO BOX 31535, TAMPA, FL 33631-3535

Payment Summary

NEW BALANCE \$211.18
MINIMUM PAYMENT \$211.18
PAYMENT DUE DATE 07/24/2014

NOTE: Grace period to avoid a finance charge on purchases, pay entire new balance by payment due date. Finance charge accrues on cash advances until paid and will be billed on your next statement.

Corporate Activity

Table with 5 columns: Trans Date, Post Date, Reference Number, Transaction Description, Amount. Row 1: 06/23, 06/23, 7486522417311111111111, AUTO PMT FROM ACCT, \$454.63.

Important Information About Your Account

ATTENTION: DUE TO DATA BREACH EVENTS, WE ADVISE THAT YOU CONTINUE TO CLOSELY MONITOR YOUR CREDIT CARD ACCOUNT. PLEASE REPORT ANY SUSPICIOUS ACTIVITY IMMEDIATELY. TO CHECK RECENT ACCOUNT ACTIVITY, LOG INTO OUR ONLINE BANKING SITE, AND ACCESS OR ENROLL YOUR CREDIT CARD ACCOUNT TODAY.

IT IS NOT NECESSARY TO MAIL YOUR PAYMENT. YOUR ACCOUNT WILL AUTOMATICALLY BE PAID BY A DIRECT DEBIT OF YOUR CHECKING OR SAVINGS ACCOUNT. THE DEBIT THIS MONTH IS \$211.18.

PLEASE DETACH COUPON AND RETURN PAYMENT USING THE ENCLOSED ENVELOPE - ALLOW UP TO 7 DAYS FOR RECEIPT

FIRST MIDWEST BANK
PO BOX 565
JOLIET IL 60434-0565



Account Number
4939

Check box to indicate name/address change on back of this coupon

AMOUNT OF PAYMENT ENCLOSED

Closing Date 06/29/14
New Balance \$211.18
Total Minimum Payment Due \$211.18
Payment Due Date 07/24/14

\$

BL ACCT 00001230-10000000
VILLAGE OF SAUK VILLAGE
21801 TORRENCE AVE
SAUK VILLAGE IL 60411



MAKE CHECK PAYABLE TO:

BANKCARD PROCESSING CENTER
PO BOX 31021
TAMPA FL 33631-3021

21 4865 2259 4521 4939 00021118 00021118 4



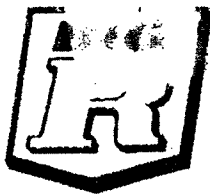
BL ACCT 00001230-10000000
 VILLAGE OF SAUK VILLAGE
 Account Number: ##### 4939

Cardholder Account Summary		Plan Name	Post Date	Trans Date
MOHAN RAO ##### 4947		PPLAN01	06/15	06/13
Payments & Other	Credits	Reference Number	Description	
\$0.00	\$0.00	24445004165600325746124	WALGREENS #5128 SAUK VILLAGE IL	
Purchases & Other	Cash Advances	Amount		
\$5.79	\$0.00	\$5.79		
Total Activity				

Cardholder Account Summary		Plan Name	Post Date	Trans Date
KEVIN J WELER ##### 3906		PPLAN01	06/08	06/08
Payments & Other	Credits	Reference Number	Description	
\$0.00	\$0.00	24055234159286088901205	BIG R OF WATSEKA WATSEKA IL	
Purchases & Other	Cash Advances	Amount		
\$205.39	\$0.00	\$205.39		
Total Activity				

Finance Charge Summary / Plan Level Information									
Plan Name	Plan Description	FCM ¹	Average Daily Balance	Periodic Rate *	Corresponding APR	Finance Charges	Effective APR	Fees **	Ending Balance
PPLAN01	PURCHASE	G	\$0.00	0.77083%(M)	9.2500%(V)	\$0.00	\$0.00	0.0000%	\$211.18
Cash 001	CASH	A	\$0.00	0.77083%(M)	9.2500%(V)	\$0.00	\$0.00	0.0000%	\$0.00
* Periodic Rate (M)=Monthly (D)=Daily									
** includes cash advance and foreign currency fees									
¹ FCM = Finance Charge Method									
(V) = Variable Rate If you have a variable rate account the periodic rate and Annual Percentage Rate (APR) may vary.									

Days in Billing Cycle: 31
 APR = Annual Percentage Rate



THANK YOU FOR SHOPPING AT BIG R
BIG R STORES - WATSEKA
(815) 432-4504

Sales final on red tag merchandise.
Shari Mays - Store Manager
7/14 1:59PM JLUK 230 SALE

217136	1	EA	139.99	EA
AB PRO 18 RI XTRA GREEN SZ9				139.99
999205	4	EA	12.99	EA
ROONIE CAP REALTREE AP				51.96
SUB-TOTAL:		191.95	TAX:	13.44
			TOTAL:	205.39
		BC AMT:		205.39

BK CARD#: XXXXXXXXXXXX3906
 ID: 351166600889293977
 AUTH: 641723 AMT: 205.39
 Host reference #:671022 Bat#000172
 SWIPED
 CARD TYPE:VISA EXPR: XXXX

Bank card 205.39

Total Items: 5



> JRNL#G71022/1 <<==
CUST # *5

THANK YOU KEVIN J WELLER
FOR YOUR PATRONAGE



me : X	
agree to pay a	amount
cutting to card	payment
merchant agreed	(if voucher)
acct CASH-	

CC 3

Credit Card

6/20/11

*#40W
310-000-630*

For contest rules, see store or
WWW.WAGCARES.COM

3140-6130-321

PASSWORD

0512-8215-124

SURVEY#

survey about this Walgreens visit
within 72 hours to take a short

1-800-658-1584

or call toll free

WWW.WAGCARES.COM

visit

\$3,000 cash

How are we doing?
Enter our monthly sweepstakes for

100,005.768,000 Am



RPN# 0512-8215-1243-1406-1303

DID YOU KNOW THAT YOU CAN EARN POINTS
ON HUNDREDS OF ITEMS IN-STORE AND
ONLINE? SEE OUR WEEKLY AD FOR MORE
INFORMATION. RESTRICTIONS APPLY. SEE
PROGRAM RULES FOR DETAILS. PLEASE GO
TO WALGREENS.COM/BALANCE.

THANK YOU FOR SHOPPING AT WALGREENS

TOTAL 5.79
VISA ACCT 4947 5.79
CHANGE .00

E/R ELEC/CALC EATT ECR2032BP 5.79
0393006663
RETURN VALUE 5.79

289 5124 0021 06/13/2014 1:07 PM

#05128 2631 E SAUK TRL
SAUK VILLAGE, IL 60411
708-757-6906

Walgreens



Account Summary

Billing Cycle		07/29/2014
Days In Billing Cycle		30
Previous Balance		\$211.18
Purchases	+	\$677.55
Cash	+	\$0.00
Special	+	\$0.00
Credits	-	\$0.00
Payments	-	\$211.18-
Other Charges	+	\$0.00
Finance Charges	+	\$0.00
NEW BALANCE		\$677.55

Credit Summary

Total Credit Line	\$3,000.00
Available Credit Line	\$2,322.45
Available Cash	\$0.00
Amount Over Credit Line	\$0.00
Amount Past Due	\$0.00
Disputed Amount	\$0.00

Account Inquiries

Call us at: (800) 221-5920
 Lost or Stolen Card: (866) 839-3485

Write us at PO BOX 31535, TAMPA, FL 33631-3535

Payment Summary

NEW BALANCE	\$677.55
MINIMUM PAYMENT	\$677.55
PAYMENT DUE DATE	08/25/2014

NOTE: Grace period to avoid a finance charge on purchases, pay entire new balance by payment due date. Finance charge accrues on cash advances until paid and will be billed on your next statement.

Corporate Activity

				TOTAL CORPORATE ACTIVITY	\$211.18-
Trans Date	Post Date	Reference Number	Transaction Description		Amount
07/24	07/24	748652242041111111111111	AUTO PMT FROM ACCT		\$211.18-

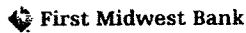
Important Information About Your Account

ATTENTION: DUE TO DATA BREACH EVENTS, WE ADVISE THAT YOU CONTINUE TO CLOSELY MONITOR YOUR CREDIT CARD ACCOUNT. PLEASE REPORT ANY SUSPICIOUS ACTIVITY IMMEDIATELY. TO CHECK RECENT ACCOUNT ACTIVITY, LOG INTO OUR ONLINE BANKING SITE, AND ACCESS OR ENROLL YOUR CREDIT CARD ACCOUNT TODAY.

IT IS NOT NECESSARY TO MAIL YOUR PAYMENT. YOUR ACCOUNT WILL AUTOMATICALLY BE PAID BY A DIRECT DEBIT OF YOUR CHECKING OR SAVINGS ACCOUNT. THE DEBIT THIS MONTH IS \$677.55.

PLEASE DETACH COUPON AND RETURN PAYMENT USING THE ENCLOSED ENVELOPE - ALLOW UP TO 7 DAYS FOR RECEIPT

FIRST MIDWEST BANK
 PO BOX 565
 JOLIET IL 60434-0565



Account Number
 #### #### #### 4939

Check box to indicate name/address change on back of this coupon

AMOUNT OF PAYMENT ENCLOSED

Closing Date	New Balance	Total Minimum Payment Due	Payment Due Date
07/29/14	\$677.55	\$677.55	08/25/14

\$

BL ACCT 00001230-10000000
 VILLAGE OF SAUK VILLAGE
 21801 TORRENCE AVE
 SAUK VILLAGE IL 60411



MAKE CHECK PAYABLE TO:

BANKCARD PROCESSING CENTER
 PO BOX 31021
 TAMPA FL 33631-3021

21 4865 2259 4521 4939 00067755 00067755 2



BL ACCT 00001230-1000000
 VILLAGE OF SAUK VILLAGE
 Account Number: ##### 4939
 Page 3 of 3

Cardholder Account Summary		Cardholder Account Detail	
Trans Date	Post Date	Plan Name	Reference Number
06/30	07/01	PPLN01	24247604181300389361152
07/16	07/18	PPLN01	24639234198900019400289
MOHAN RAO		VILLA DI PIZZA SAUK VILLAGE IL	
##### 4947	##### 3906		
Payments & Other	Payments & Other	Cash Advances	Total Activity
Credits	Credits		
\$0.00	\$0.00	\$0.00	\$280.08
Purchases & Other	Purchases & Other		
Charges	Charges		
\$280.08	\$397.47		
Amount		Amount	
	\$77.37		\$202.71

Cardholder Account Summary		Cardholder Account Detail	
Trans Date	Post Date	Plan Name	Reference Number
07/07	07/09	PPLN01	24445744189100523560859
KEVIN J WELLER		OFFICE DEPOT #491 CALUMET CITY IL	
##### 3906	##### 3906		
Payments & Other	Payments & Other	Cash Advances	Total Activity
Credits	Credits		
\$0.00	\$0.00	\$0.00	\$397.47
Purchases & Other	Purchases & Other		
Charges	Charges		
\$397.47	\$397.47		
Amount		Amount	
	\$397.47		\$397.47

Finance Charge Summary / Plan Level Information									
Plan Name	Plan Description	FCM ¹	Average Daily Balance	Periodic Rate ²	Corresponding APR	Finance Charges	Effective APR ³	Fees ⁴	Ending Balance
PPLN01	PURCHASE	G	\$0.00	0.77083%(M)	9.2500%(V)	\$0.00	0.0000%	\$0.00	\$677.55
Cash	CASH	A	\$0.00	0.77083%(M)	9.2500%(V)	\$0.00	0.0000%	\$0.00	\$0.00
¹ FCM = Finance Charge Method ² Periodic Rate (M)=Monthly (D)=Daily ³ Includes cash advance and foreign currency fees ⁴ APR = Annual Percentage Rate Days in Billing Cycle: 30 (V) = Variable Rate. If you have a variable rate account the periodic rate and Annual Percentage Rate (APR) may vary.									

VILLA DI PIZZA
2420 SAUK TRAIL
SAUK VILLAGE, IL 60411
PHONE #(708) 757-0700

Customer Receipt

Order: 5

Villa Di Pizza
2420 E. Sauk Trail
Sauk Village, IL 60411

Delivery 6/30/2014
5:02 pm

City Hall
(708) 758-3330

- 1 XL CHEESE PIZZA 18.50
- Add SAUSAGE 2.00
- 1 XL CHEESE PIZZA 18.50
- Add SAUSAGE 2.00
- Add GREEN PEPPE 2.00
- Add MUSHROOM 2.00
- 1 MED CHEESE PIZZA 12.75

Order Totals:

Sub Total: 57.75
Tax: 4.62

Delivery Charge: 3.00
Total: 65.37

100.010-768-000
Payments:

Amount Due: 65.3

Budget Meeting
Staff & Mayor &
Server: JCO *Board of*
Cashier: JCO *Meeting*

Register: Register 1

Order Number: 8940

Table:

We value your comments!
(708) 757-0700

SALE

Server #: 000010
MD: 520000033262
TID: 001 REF#: 00000001
Bank ID: 6011
Batch #: 181001
06/30/14 17:23:50
APPR CODE: 624586
VISA Swiped
*****4947 **/**

Debit Amount	Credit Amount	Balance
	7,500.00 -	
	8,500.00 -	
24,367.01 *	24,300.00 - *	10,343.08
24,367.01	24,300.00 -	67.01
24,367.01	24,300.00 -	67.01

AMOUNT \$65.37

TIP \$ 12.00

TOTAL \$ 77.37

APPROVED

THANK YOU
HAVE A NICE DAY

CUSTOMER COPY

Headsets - Finance Director Mohan Rao

7/16/2014

Headsets

Police Chief Timothy Holevis

Wed 7/16/2014 10:34 AM

To: Finance Director Mohan Rao <mrao@saukville.org>

Mohan, here is the information for the headsets we talked about for dispatch.
Headsets Direct model number H141N X 3 @ \$78.00 ea. = \$234.00.
The number is 1-800-914-7996. Thank you.
Chief

\$ 202.71.

ordered on 7/16/2014 @ 12:55PM.
100.280.610.000.
Athena

OFFICE DEPOT STORE #491
1370 HANCOCK AVE
CAROML ILL IL 60909
708-862-4900
708-862-4903

07/07/2014 14:24 2:07 PM
STR 411 100 100 244 100 2 9304

SALE
Product ID Description
283045 LAMIN PAPER, S
405652 PAPER, 100
Use your PPI Card to register
online at
www.officedepot.com
Call 800-849-3133
Fax 708-862-4903
229304
Lamin Paper, 80
Paper, 100
Paper, 100
Subtotal 562.95
Tax 24.52
Total 587.47
Visa 3906 587.47

#km
310-000-660
\$239.97

7/8/14

#km
300-000-610
\$157.50

see online at www.officedepot.com

WE WANT TO HEAR FROM YOU!

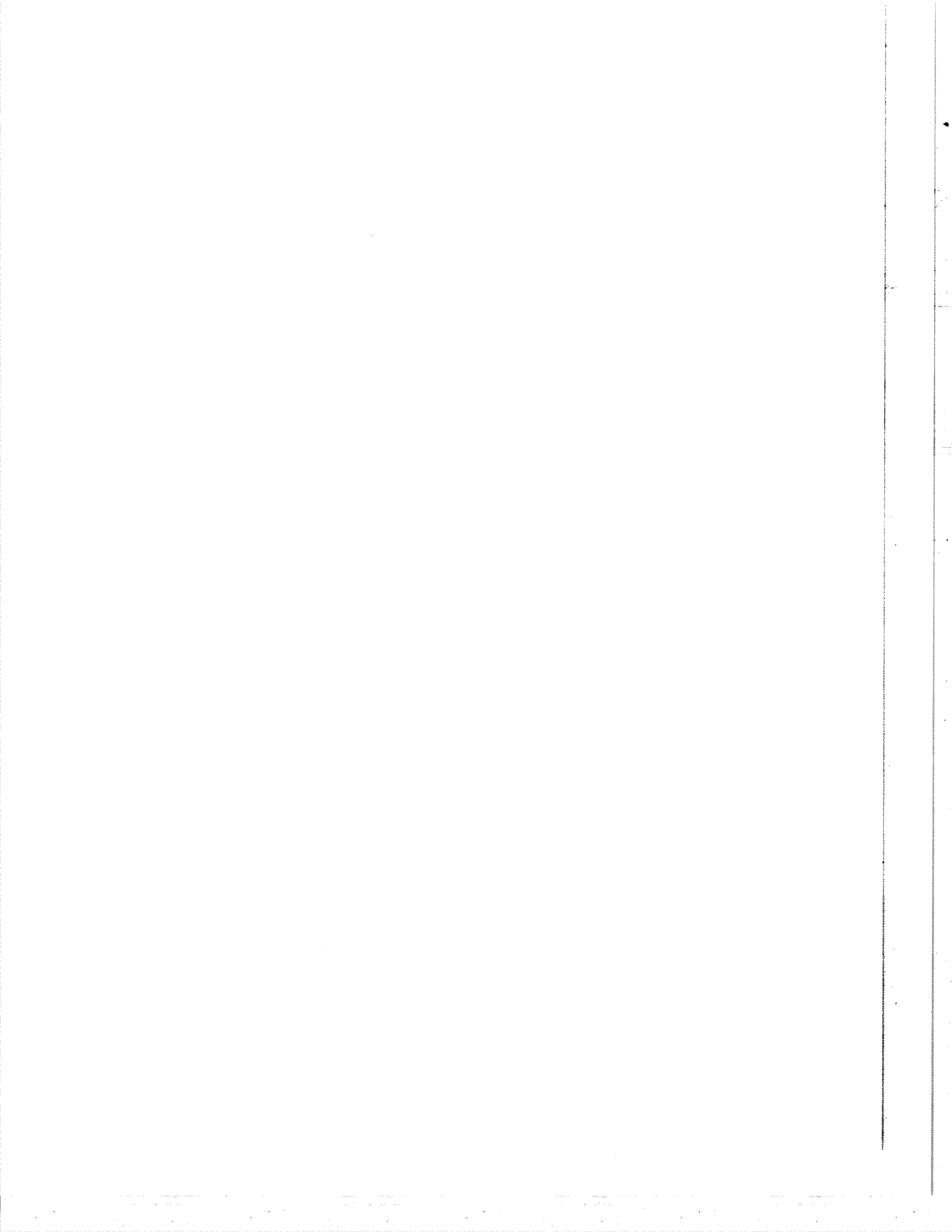
Thank you for your feedback. We've received your response and we'll use it to improve our service. As a reward, we're giving you \$10 off your next qualifying purchase of \$50 or more on office supplies, furniture and more. (Excludes Technology. Limit 1 coupon per household/business.)

Visit www.officedepot.com/feedback and enter the survey code below

Survey Code
T411 8G49 3YMA



224T9HYP3.R07c-8-0





Account Summary

Billing Cycle		08/29/2014
Days in Billing Cycle		31
Previous Balance		\$677.55
Purchases	+	\$975.90
Cash	+	\$0.00
Special	+	\$0.00
Credits	-	\$0.00
Payments	-	\$677.55-
Other Charges	+	\$0.00
Finance Charges	+	\$0.00
NEW BALANCE		\$975.90

Credit Summary

Total Credit Line	\$3,000.00
Available Credit Line	\$2,024.10
Available Cash	\$0.00
Amount Over Credit Line	\$0.00
Amount Past Due	\$0.00
Disputed Amount	\$0.00

Account Inquiries

Call us at: (800) 221-5920
 Lost or Stolen Card: (866) 839-3485

Write us at PO BOX 31535, TAMPA, FL 33631-3535

Payment Summary

NEW BALANCE	\$975.90
MINIMUM PAYMENT	\$975.90
PAYMENT DUE DATE	09/23/2014

NOTE: Grace period to avoid a finance charge on purchases, pay entire new balance by payment due date. Finance charge accrues on cash advances until paid and will be billed on your next statement.

Corporate Activity

TOTAL CORPORATE ACTIVITY				\$677.55-
Trans Date	Post Date	Reference Number	Transaction Description	Amount
08/24	08/24	7486522423411111111111	AUTO PMT FROM ACC [REDACTED]	\$677.55-

Important Information About Your Account

IT IS NOT NECESSARY TO MAIL YOUR PAYMENT. YOUR ACCOUNT WILL AUTOMATICALLY BE PAID BY A DIRECT DEBIT OF YOUR CHECKING OR SAVINGS ACCOUNT. THE DEBIT THIS MONTH IS \$975.90.

PLEASE DETACH COUPON AND RETURN PAYMENT USING THE ENCLOSED ENVELOPE - ALLOW UP TO 7 DAYS FOR RECEIPT

FIRST MIDWEST BANK
 PO BOX 565
 JOLIET IL 60434-0565



Account Number
 #### #### #### 4939

Check box to indicate name/address change on back of this coupon

AMOUNT OF PAYMENT ENCLOSED

Closing Date	New Balance	Total Minimum Payment Due	Payment Due Date
08/29/14	\$975.90	\$975.90	09/23/14



BL ACCT 00001230-10000000
 VILLAGE OF SAUK VILLAGE
 21801 TORRENCE AVE
 SAUK VILLAGE IL 60411



MAKE CHECK PAYABLE TO:

BANKCARD PROCESSING CENTER
 PO BOX 31021
 TAMPA FL 33631-3021

21 4865 2259 4521 4939 00097590 00097590 2



Cardholder Account Summary				
Plan Name	Plan	Description	FCM ¹	Average Daily Balance
MOHAN RAO	##### 4917	Payments & Other		\$0.00
		Credits		\$0.00
		Purchases & Other		\$29.75
		Cash Advances		\$0.00
		Total Activity		\$29.75

Cardholder Account Detail				
Trans Date	Post Date	Plan Name	Reference Number	Description
08/13	08/14	PPLN01	24164074225418167690627	USPS 16154804129363769 SAUK VILLAGE IL
				Amount
				\$29.75

Cardholder Account Summary				
Plan Name	Plan	Description	FCM ¹	Average Daily Balance
KEVIN J WELER	##### 3906	Payments & Other		\$0.00
		Credits		\$0.00
		Purchases & Other		\$946.15
		Cash Advances		\$0.00
		Total Activity		\$946.15

Cardholder Account Detail				
Trans Date	Post Date	Plan Name	Reference Number	Description
08/14	08/15	PPLN01	24072804226286484500070	LYNWOOD FIRESTONE LYNWOOD IL
08/28	08/29	PPLN01	2469216424000066843324	IN B&F FABRICATING, INC. 708-7587878 IL
				Amount
				\$574.28
				\$371.87

Finance Charge Summary / Plan Level Information										
Plan Name	Plan	Description	FCM ¹	Average Daily Balance	Periodic Rate [*]	Corresponding APR	Finance Charges	Effective APR ^{**}	APR	Ending Balance
PPLN01	PURCHASE	G		\$0.00	0.77083%(M)	9.2500%(V)	\$0.00	0.0000%	0.0000%	\$975.90
CPLN01	CASH	A		\$0.00	0.77083%(M)	9.2500%(V)	\$0.00	0.0000%	0.0000%	\$0.00

* Periodic Rate (M)=Monthly (D)=Daily
 ** Includes cash advance and foreign currency fees
¹ FCM = Finance Charge Method
 (V) = Variable Rate If you have a variable rate account the periodic rate and Annual Percentage Rate (APR) may vary.

U.S. Postal Service
CERTIFIED MAIL RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

CHICAGO IL 60602

Postage	\$ 5.80	0413
Certified Fee	\$3.30	05
Return Receipt Fee (Endorsement Required)	\$2.70	Postmark Here
Restricted Delivery Fee (Endorsement Required)	\$0.00	
Total Postage & Fees	\$ 11.80	

Postmark: AUG 13 2014
 CHICAGO HEIGHTS, ILLINOIS 60641

Sent To
 Cook County Clerk
 Street, Apt. No. or PO Box No. 69 W. WASHINGTON # 500
 City, State, ZIP+4 Chicago, IL 60602
 PS Form 3800, August 2006 See Reverse for Instructions

U.S. Postal Service
CERTIFIED MAIL RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

JOLIET IL 60432

Postage	\$ 5.80	0413
Certified Fee	\$3.30	05
Return Receipt Fee (Endorsement Required)	\$2.70	Postmark Here
Restricted Delivery Fee (Endorsement Required)	\$0.00	
Total Postage & Fees	\$ 11.80	

Postmark: AUG 13 2014
 CHICAGO HEIGHTS, ILLINOIS 60641

Sent To
 Will County Clerk
 Street, Apt. No. or PO Box No. 302 N. CHICAGO STREET
 City, State, ZIP+4 JOLIET, IL 60432-4059
 PS Form 3800, August 2006 See Reverse for Instructions

SAUK VILLAGE, ILLINOIS
 604117300
 1615500413-0099
 08/13/2014 (708)757-3876 11:08:20 AM

Sales Receipt

Product Description	Sale Unit Qty	Price	Final Price
---------------------	---------------	-------	-------------

@@ -- SPRINGFIELD IL 62764 \$6.15
 Zone-3
 Priority Mail 2-Day By Weight
 1 lb. 1.30 oz.
 Expected Delivery: Fri 08/15/14
 USPS Tracking #: 9114 9011 8986 6410 1114 74
 Includes \$50 insurance

Issue Postage: \$6.15

@@ -- CHICAGO IL 60602-3134 \$5.80
 Zone-1
 Priority Mail 1-Day By Weight
 1 lb. 1.50 oz.
 Expected Delivery: Thu 08/14/14
 Includes \$50 insurance

Return Rcpt (Green Card) \$2.70
 @@ Certified \$3.30
 USPS Certified Mail #: 70062150000209178167

Issue Postage: \$11.80

@@ -- JOLIET IL 60432-4078 \$5.80
 Zone-1
 Priority Mail 1-Day By Weight
 1 lb. 1.50 oz.
 Expected Delivery: Thu 08/14/14
 Includes \$50 insurance

Return Rcpt (Green Card) \$2.70
 @@ Certified \$3.30
 USPS Certified Mail #: 70062150000209178150

Issue Postage: \$11.80

Total: \$29.75

Paid by: VISA \$29.75

Account #: XXXXXXXXXXXX4947
 Approval #: 681842
 Transaction #: 62
 23902936376
 100.005.70 6000 *Amw*
 @@ For tracking or inquiries go to USPS.com or call 1-800-222-1811.

7006 2150 0002 0917 8167

7006 2150 0002 0917 8150

LYNWOOD FIRESTONE
 21551 LINCOLN HWY
 LYNWOOD IL 60411
 (800) 422-3771

8/14/2014 3:10 PM

page 1

Invoice #102598

Day Phone : 708-757-2420
 Eve Phone : 708-758-3330

PUBLIC WORKS, SAUK VILLAGE
 21801 TORRENCE AVE
 SAUK VILLAGE IL 60410

Vehicle : 2007 Ford Truck F150 1/2 Ton - Pickup 4.2 L 256 CID V6

VIN : 1FTRF122X7NA74677

Created : 8/14/2014 10:39:54 AM

Complete : 8/14/2014 3:09:55 PM

Invoiced : 8/14/2014 3:09:55 PM

Srv Writer : 10

Labor/Notes

Code/Tech Reference

Description

Code/Tech	Reference	Description	Price
EPA		EPA TIRE DISPOSAL FEE	\$10.00
FREE		FREE TIRE ROTATION (EVERY 6,000 MILES)	\$0.00
MDIS		MOUNT & COMPUTER SPIN BALANCE	\$56.00
UTF		USER TIRE FEE	\$10.00
CC		COURTESY CK	\$0.00

NEEDS FRONT BRAKE PADS

Parts

Qty Code/Tech Reference

Description

Qty	Code/Tech	Reference	Description	Unit Price	Price
4	097F776		P235/70R17 FIRESTONE DESTINATION LE2 XL	\$126.69	\$506.76

DOT# VNOCDE12612 (3) 0513 (1)

Labor

Labor	\$76.00
Parts	\$506.76
Sublet/Misc.	\$0.00
SHOP SUPPLIES	\$1.52
Charges	\$0.00
Sales Tax	\$0.00
Tax Exempt # E9998-0861-06	\$0.00
Total Due	\$584.28

LYNWOOD FIRESTONE
 21551 LINCOLN HWY
 LYNWOOD, IL 60411

08/14/2014 15:13:05
 MID: 0000000194907
 TID: 03052484
 218521440998

CREDIT CARD
 VISA SALE

CARD: XXXXXXXXXXXXXXX3906
 INVOICE: 0007
 Batch #: 001045
 App Code: 630514
 Entry Mode: swiped
 Model: online

SALE AMT

\$574.28

CUSTOMER COPY

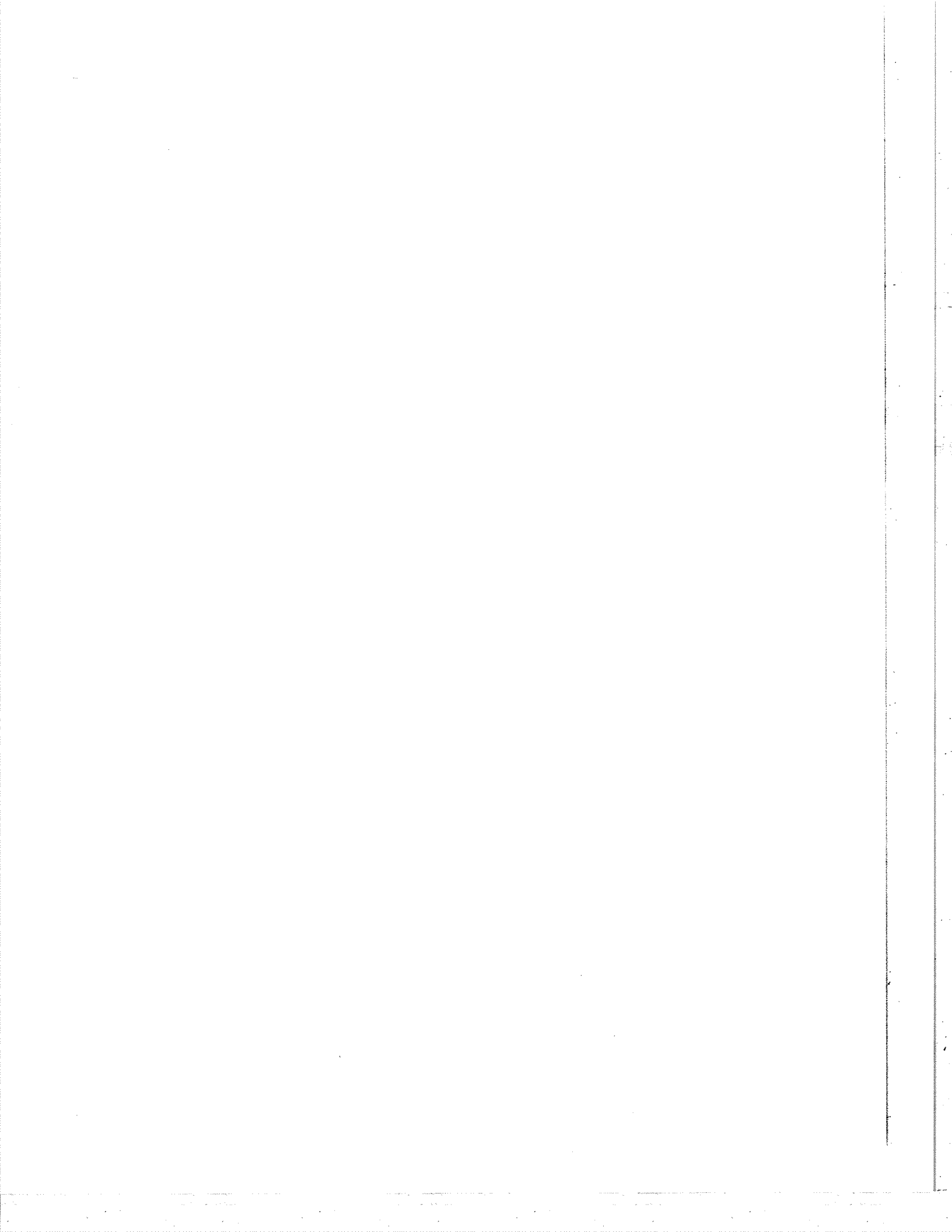
Thank you for choosing Lynwood Firestone
 "Your One-Stop Complete Auto Center"

above stated repairs to be done along with the necessary material and agree that
 not responsible for loss or damage to vehicle or articles left in vehicle in case of
 cause beyond their control. I have granted them and their employees permission
 herein described on streets, highways or elsewhere for the purpose of testing
 offer a 12 month or 12,000 mile warranty on parts and labor unless otherwise
 or warranty information call 1-800-LET-NAPA

ECK NO. VISA M/C DISC AMEX F/S DEBIT

#114
 3/0-000-714
 8/28/14

Credit Card





Account Summary

Billing Cycle		09/28/2014
Days In Billing Cycle		30
Previous Balance		\$975.90
Purchases	+	\$2,193.03
Cash	+	\$0.00
Special	+	\$0.00
Credits	-	\$0.00
Payments	-	\$975.90-
Other Charges	+	\$0.00
Finance Charges	+	\$0.00
NEW BALANCE		\$2,193.03

Credit Summary

Total Credit Line	\$3,000.00
Available Credit Line	\$1,806.97
Available Cash	\$0.00
Amount Over Credit Line	\$0.00
Amount Past Due	\$0.00
Disputed Amount	\$0.00

Account Inquiries

Call us at: (800) 221-5920
 Lost or Stolen Card: (866) 839-3485

Write us at PO BOX 31535, TAMPA, FL 33631-3535

Payment Summary

NEW BALANCE	\$2,193.03
MINIMUM PAYMENT	\$2,193.03
PAYMENT DUE DATE	10/23/2014

NOTE: Grace period to avoid a finance charge on purchases, pay entire new balance by payment due date. Finance charge accrues on cash advances until paid and will be billed on your next statement.

Corporate Activity

TOTAL CORPORATE ACTIVITY				\$975.90-
Trans Date	Post Date	Reference Number	Transaction Description	Amount
09/23	09/23	7486522426511111111111	AUTO PMT FROM ACCT	\$975.90-

Important Information About Your Account

IT IS NOT NECESSARY TO MAIL YOUR PAYMENT. YOUR ACCOUNT WILL AUTOMATICALLY BE PAID BY A DIRECT DEBIT OF YOUR CHECKING OR SAVINGS ACCOUNT. THE DEBIT THIS MONTH IS \$2193.03.

PLEASE DETACH COUPON AND RETURN PAYMENT USING THE ENCLOSED ENVELOPE - ALLOW UP TO 7 DAYS FOR RECEIPT

FIRST MIDWEST BANK
 PO BOX 565
 JOLIET IL 60434-0565



Account Number
 #### #### #### 4939

Check box to indicate name/address change on back of this coupon

AMOUNT OF PAYMENT ENCLOSED

Closing Date	New Balance	Total Minimum Payment Due	Payment Due Date
09/28/14	\$2,193.03	\$2,193.03	10/23/14

\$

BL ACCT 00001230-10000000
 VILLAGE OF SAUK VILLAGE
 21801 TORRENCE AVE
 SAUK VILLAGE IL 60411



MAKE CHECK PAYABLE TO:

BANKCARD PROCESSING CENTER
 PO BOX 31021
 TAMPA FL 33631-3021

21 4865 2259 4521 4939 00219303 00219303 4



Cardholder Account Summary				
Plan Name	Reference Number	Description	Amount	Trans Date
MOHAN RAO ##### 4947				09/02
Payments & Other	\$0.00			
Credits	\$0.00			
Purchases & Other	\$1,249.39			
Cash Advances	\$0.00			
Total Activity			\$1,249.39	
Cardholder Account Detail				
Plan Name	Reference Number	Description	Amount	Trans Date
09/03 PPLN01	24707804245980149055823	David's Wholesale MODA 305-944-4030 FL	\$840.40	09/22
09/23 PPLN01	24270744266472800369262	JG UNIFORMS INC 773-5454644 IL	\$408.99	09/23

Cardholder Account Summary				
Plan Name	Reference Number	Description	Amount	Trans Date
KEVIN J WELLER ##### 3906				09/02
Payments & Other	\$0.00			
Credits	\$0.00			
Purchases & Other	\$943.64			
Cash Advances	\$0.00			
Total Activity			\$943.64	
Cardholder Account Detail				
Plan Name	Reference Number	Description	Amount	Trans Date
09/03 PPLN01	2405523424620600000022	RAY AND WALLYS TOWING 708-758-3500 IL	\$100.00	09/02
09/10 PPLN01	24656544252980007498068	HOOSIER SPORTS OF INDIANA DYER IN	\$97.00	09/09
09/14 PPLN01	24445744255100534731290	OFFICE DEPOT #491 CALUMET CITY IL	\$377.69	09/11
09/19 PPLN01	24707804261980169290663	Griffith Jewelers Griffith IN	\$150.00	09/18
09/21 PPLN01	24692164262000889197638	IN PRO SECURITY ID LLC 480-2961550 AZ	\$218.95	09/19

Finance Charge Summary / Plan Level Information										
Plan Name	Plan Description	FCM ¹	Average Daily Balance	Periodic Rate *	Corresponding APR	Finance Charges	Effective APR	Fees **	APR Effective	Ending Balance
Purchases PPLN01	PURCHASE	G	\$0.00	0.77083%(M)	9.2500%(V)	\$0.00	0.0000%	\$0.00	0.0000%	\$2,193.03
Cash CPLN01	CASH	A	\$0.00	0.77083%(M)	9.2500%(V)	\$0.00	0.0000%	\$0.00	0.0000%	\$0.00

* Periodic Rate (M)=Monthly (D)=Daily
 ** includes cash advance and foreign currency fees
¹ FCM = Finance Charge Method
 Days in Billing Cycle: 30
 APR = Annual Percentage Rate
 (V) = Variable Rate If you have a variable rate account the periodic rate and Annual Percentage Rate (APR) may vary.

Davids Wholesale/Moda

Invoice

7395 West 20th Ave
 Hialeah, Florida 33014
 305-400-9040
 www.2moda.com

Date	Invoice #
9/2/2014	70065

PAID

Bill To VILLAGE OF SAUK VILLAGE ATTN MOHRAN RAO 21801 TORRENCE AVE SAUK VILLAGE, IL 60411	Ship To VILLAGE OF SAUK VILLAGE ATTN MOHRAN RAO 21801 TORRENCE AVE SAUK VILLAGE, IL 60411
--	--

Pick By	P.O. Number	Terms	Rep	Ship	Via	F.O.B.	Entered By
	MOHRAN CALL ...	CARD	USA	9/2/2014	UPS		RA
Quantity	Item Code	Description			Price Each	Amount	
100 148	1706 SS1	17" CLEAR BACKPACK SCHOOL SUPPLY 1 1ZW6936X0347758399 5 BOXES <i>paid by cv. card.</i> <i>100.010.759.002</i> <u>AW</u>			5.00 2.30	500.00 340.40	
Total						\$840.40	

100.025.630.000
Am

Customer Copy
THANK YOU

09/22/19 16:52:08
Inv #: 000027
Appr Code: 620060
Transaction ID: 304265787281237
Apprvd: Online
Batch#: 000090
CVV2 Code: MATCH M

Total: \$ 408.99

VISA XXXXXXXXXXXXXXX9947
Entry Method: Manual

Phone Order

Merchant ID: 30098039789
Ref #: 0272
A. UNILUMS, INC
5949 N IRVING PARK RD
CHICAGO, IL 60634
773-545-4644
353098039789

Merchant Copy
THANK YOU

I agree to pay above total amount
according to card issuer agreement
(Merchant agreement if credit voucher)

09/22/19 16:52:08
Inv #: 000027
Appr Code: 620060
Transaction ID: 304265787281237
Apprvd: Online
Batch#: 000090
CVV2 Code: MATCH M

Total: \$ 408.99

VISA XXXXXXXXXXXXXXX9947
Entry Method: Manual

Phone Order

Merchant ID: 30098039789
Ref #: 0271
A. UNILUMS, INC
5949 N IRVING PARK RD
CHICAGO, IL 60634
773-545-4644
353098039789

J.G. Uniforms, Inc.

5949 W. Irving Park Road
 Chicago, IL 60634
 Ph (773) 545-4644 • Fax (773) 545-3388
 www.jguniforms.com

INVOICE

DATE INVOICE #

9/22/2014 34754

BILL TO:

Sauk Village Police Department
 Attn: Sgt. Rebecca Sailsbery
 21701 Torrence Ave.
 Sauk Village, IL 60411

SHIP TO:

Sauk Village Police Department
 Attn: Sgt. Rebecca Sailsbery
 21701 Torrence Ave.
 Sauk Village, IL 60411

P.O. NUMBER	TERMS	REP	SHIP	VIA	F.O.B.	PROJECT
Holevis	Net 30	AKG	9/19/2014	PICK UP	CHGO	
QUANTITY	ITEM CODE	DESCRIPTION			PRICE EACH	AMOUNT
3	Othr	Alteration - Sew on Service Bars (JG Supplied)			8.00	24.00
3	Othr	Alteration - Sew on Star Patch (Customer Supplied)			2.00	6.00
11	Othr	Alteration - Sew on Department Supplied Shoulder Patches			4.00	44.00
1	Othr	Under Armour Tac T-Shirt			29.99	29.99
1	Alt	Alteration on Dress Blouse - Sew on New Shoulder Patches, Add 1 Row of Gold Sleeve Braid, Sew on Service Bar			37.00	37.00
1	Shirts (S)	"Flying Cross" L.S. Poly/Rayon Dress Shirt w/Service Bars			53.00	53.00
For, Chief Holevis						
Thank you for your business!					TOTAL	\$193.99

PAID

DATE _____

J.G. Uniforms, Inc.
 5949 W. Irving Park Road
 Chicago, IL 60634
 Ph (773) 545-4644 • Fax (773) 545-3388
 www.jguniforms.com

INVOICE

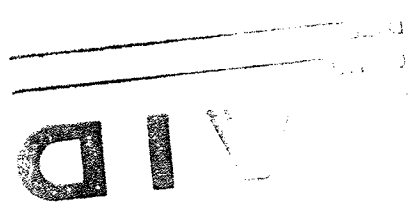
INVOICE # 33004
 DATE 1/31/2014

SAUK VILLAGE POLICE DEPARTMENT
 Attn: Sgt. Rebecca Salsbery
 21701 Torrence Ave.
 Sauk Village, IL 60411

SAUK VILLAGE POLICE DEPARTMENT
 Attn: Sgt. Rebecca Salsbery
 21701 Torrence Ave.
 Sauk Village, IL 60411

BILL TO:

SHIP TO:

P.O. NUMBER	TERMS	REP	SHIP	VIA	F.O.B.	PROJECT	
Ayala, L.	Net 30	AKG	1/31/2014	PICK UP	Chgo		
QUANTITY	ITEM CODE	DESCRIPTION					PRICE EACH
1	Blouse	Custom Sauk Village P.D. Dress Blouse					225.00
1	Pants	Custom Dress Pants					90.00
	Deposit	Deposit					-100.00
		For: Ofc. Luis Ayala					
							
Thank you for your business							
TOTAL						\$215.00	



1514 U.S. Rt. 30
Dyer, IN 46311

(219) 322-6600

12399

Order Date 9-4-14

Due Date 9-9-14

SOLD TO Village of Sand Village

REGISTERED OFFICE OF INDIANA
1514 U.S. RT. 30
DYER, IN 46311
219-322-6600

Merch ID: 1444
Tax ID: 6419

Sale

Qty.	Description	Unit Price	Amount
1	Crystal Clock Q 404 w/engraved & oxidized silver plate - round corners		97.00
<p>Kevin</p> <p>GARY BELL</p> <p>30 YEARS 1984-2014</p> <p>210.200.720.000</p> <p>Aug 1st</p> <p>Card</p> <p>#3</p>			

VISA
 XXXXXX
 Exp. Date
 Approved. Onl. #: 000001
 09/09/14 10:38:29
 Inv #: 00000032 Appr Code: 695496
 Total: \$ 97.00

Customer Copy

THANK YOU
FOR VISITING

ORDERED BY _____ RECEIVED BY _____

9/17/14
 #300-000-714
 * Tom with Tom to
 Tom's shop

CUSTOMER: RETAIN THIS COPY FOR YOUR RECORDS

TOTAL		5133306		TOTAL		100.00	
MISC.				SUB			
TIP				TOTAL			
CLERK				AUTHORIZATION			
REG/DEPT.				DATE		9-22-14	
SERVER				REFERENCE NO.			
TAX				ID-FOLIO/CHECK NO./LIC. NO. STATE REG/DEPT.			
				AMOUNT		100.00	
DESCRIPTION		TOMATO PASTE		PRICE			
		FROM SUPERMARKET					
		TO GIFT					

SALES SLIP
CUSTOMER COPY

The issuer of the card identified on this item is authorized to pay the amount shown as TOTAL upon proper presentation. I promise to pay such TOTAL (together with any other charges due thereon) subject to and in accordance with the agreement governing the use of such card.

X SIGN HERE

928044000112000
 1114003049155
 RAY & MALLY'S TOWING SERV
 CHICAGO HEIGHTS IL
 VILLAGE OF SAGE VILLAGE
 KEVIN J WELLEN
 9/18
 4865 2259 48

OFFICE DEPOT STORE #491
1370 TORRENCE AVE.
CALUMET CITY, IL 60409
(708) 862-4900

Fax (708) 862-4903

09/11/2014 14.35 2:04 PM
STR 491 REG2 TRN 9927 EMP 526391

SALE

Product ID	Description	Total
941072	TIME RECORDER	279.99 SS
687659	2NONPTREPL9	41.99 E

Use your PPP Card to register online at www.officedepotservices.com or call 866-540-0013

PPP Contract# 885018926400

PPP 526391

364364 LABEL.5160 300 27.99 SS

Subtotal 349.97

Sales Tax 27.72

Total 377.69

Visa 3906 377.69

Shop online at www.officedepot.com

WE WANT TO HEAR FROM YOU!

Participate in our online customer survey and receive a coupon for \$10 off your next qualifying purchase of \$50 or more on office supplies, furniture and more. (Excludes Technology. Limit 1 coupon per household/business.)

Visit www.officedepot.com/feedback and enter the survey code below.

Survey Code:
141M F5NA ZD7W



22VTYU4PQR3YBX4FE

Now one company. Now great savings. Office Depot, Inc., including its subsidiary OfficeMax Incorporated

Handwritten: 1.98 ?
Office DEPOT logo

Handwritten: ce

p Computers, e and Electronics



Handwritten: 1733
1733 J Amy
07:32

OFFICE DEPOT STORE #491
1370 TORRENCE AVE.
CALUMET CITY, IL 60409
(708) 862-4900

Fax (708) 862-4903

09/11/2014 14.35 2:04 PM
STR 491 REG2 TRN 9927 EMP 526391

SALE

Product ID	Description	Total
941072	TIME RECORDER	279.99 SS
687659	2NONPTREPL9	41.99 E

Use your PPP Card to register online at

www.officedepotservices.com or call 866-540-0013

PPP Contract# 885018926400

PPP 526391

364364 LABEL.5160 300 27.99 SS

Subtotal 349.97

Sales Tax 27.72

Total 377.69

Visa 3906 377.69

Shop online at www.officedepot.com

WE WANT TO HEAR FROM YOU!

Participate in our online customer survey and receive a coupon for \$10 off your next qualifying purchase of \$50 or more on office supplies, furniture and more. (Excludes Technology. Limit 1 coupon per household/business.)

Visit www.officedepot.com/feedback and enter the survey code below.

Survey Code:
141M F5NA ZD7W



22VTYU4PQR3YBX4FE

Now one company. Now great savings. Office Depot, Inc., including its subsidiary OfficeMax Incorporated

Handwritten: 1-000-650 9/12/14

Handwritten: \$55.71

Handwritten: Credit Card

Monday-Friday
9:00am - 5:00pm
Saturday
9:00am - 2:00pm
(closed Wed)

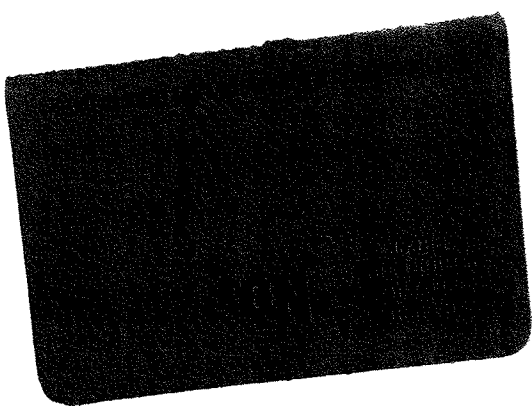
144 North Broad Street
Griffith, Indiana 46319
219 924-4010 Phone
griffithjewelers@gmail.com

JIM GLOVER

GRIFFITH JEWELERS

100,010,768,000 *Am*

km
?



Total: \$ 150.00
Tax: \$ 0.00
Amount: \$ 150.00
Appr Code: 622116
05-26-26

VISA PURCH
XXXXXXXXXXXXXXXX3906
Entry Method: Swiped
Approved Online
Sale

144 N Broad St
Griffith, IN 46319
219 924-4010

Credit card
Charge (3) 2.5yr
watches

Pro Security ID LLC

Pro Security ID LLC
 20343 N HAYDEN RD 105-51
 SCOTTSDALE, AZ 85255

(888)397-1389
 sales@prosecurityid.com
 http://www.prosecurityid.com

~~Estimate~~

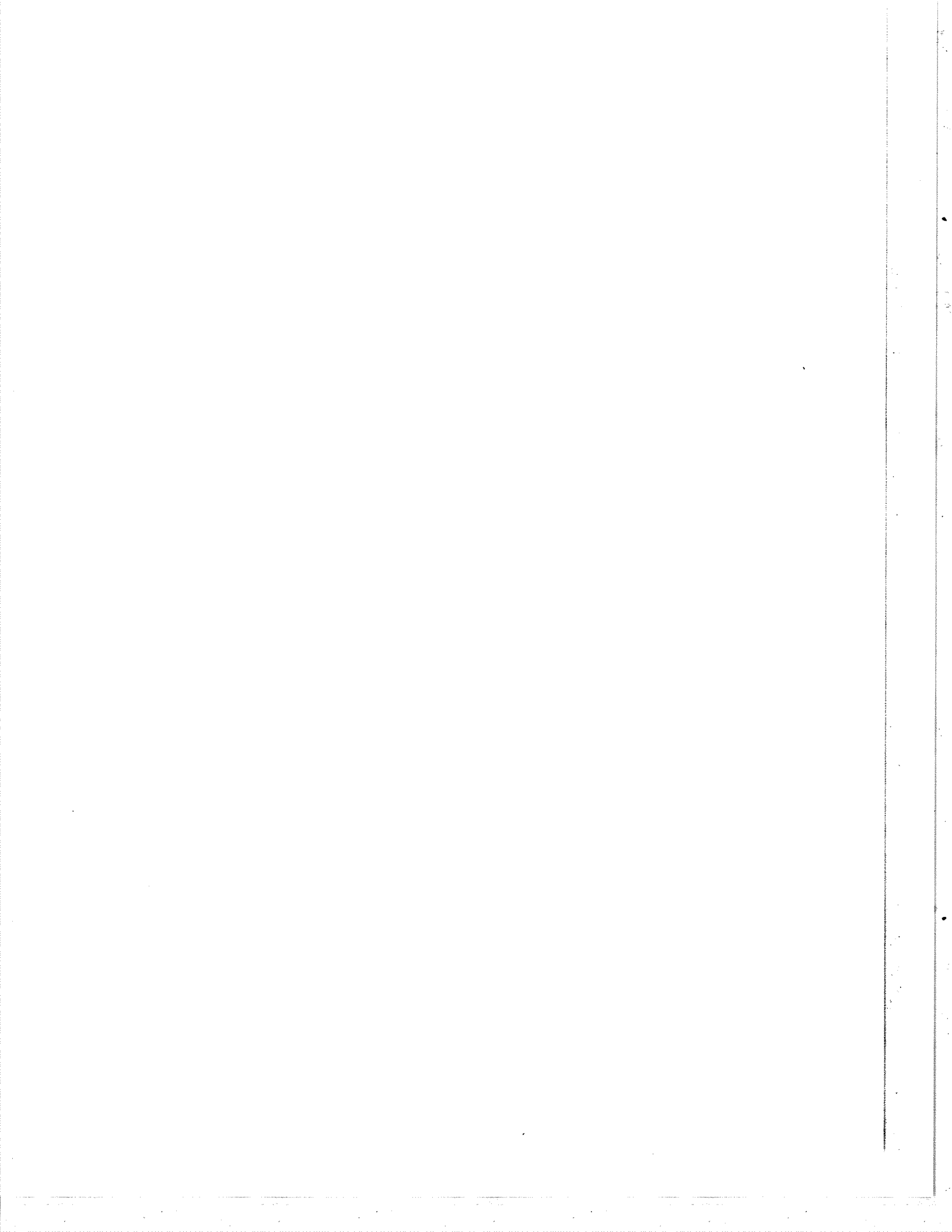
Date	Estimate No.
09/17/2014	1029
Exp. Date	
	10/31/2014

Address
 Kevine Weller
 Sauk Village
 21801 Torrance Ave.
 Sauk Village, IL 60411 USA

Activity	Quantity	Rate	Amount
• #4000 Proximity Clamshell Card Format 26D (H10301), Facility Code 15 and Start #07501	100	1.99	199.00
• Shipping	1	19.95	19.95
<p>## 100-015-640 10/2/14 Credit CARD</p>			\$218.95
Total			\$218.95

Accepted By _____

Accepted Date _____




Account Summary


Billing Cycle		10/29/2014
Days In Billing Cycle		31
Previous Balance		\$2,193.03
Purchases	+	\$881.99
Cash	+	\$0.00
Special	+	\$0.00
Credits	-	\$0.00
Payments	-	\$2,193.03-
Other Charges	+	\$0.00
Finance Charges	+	\$0.00
NEW BALANCE		\$881.99

Credit Summary

Total Credit Line	\$3,000.00
Available Credit Line	\$2,118.01
Available Cash	\$0.00
Amount Over Credit Line	\$0.00
Amount Past Due	\$0.00
Disputed Amount	\$0.00

Account Inquiries

 Call us at: (800) 221-5920
Lost or Stolen Card: (866) 839-3485

 Write us at PO BOX 31535, TAMPA, FL 33631-3535

Payment Summary

NEW BALANCE	\$881.99
MINIMUM PAYMENT	\$881.99
PAYMENT DUE DATE	11/24/2014

NOTE: Grace period to avoid a finance charge on purchases, pay entire new balance by payment due date. Finance charge accrues on cash advances until paid and will be billed on your next statement.

Corporate Activity

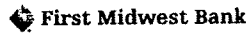
TOTAL CORPORATE ACTIVITY				\$2,193.03-
Trans Date	Post Date	Reference Number	Transaction Description	Amount
10/23	10/23	748652242951111111111111	AUTO PMT FROM ACCT [REDACTED]	\$2,193.03-

Important Information About Your Account

IT IS NOT NECESSARY TO MAIL YOUR PAYMENT. YOUR ACCOUNT WILL AUTOMATICALLY BE PAID BY A DIRECT DEBIT OF YOUR CHECKING OR SAVINGS ACCOUNT. THE DEBIT THIS MONTH IS \$881.99.

PLEASE DETACH COUPON AND RETURN PAYMENT USING THE ENCLOSED ENVELOPE - ALLOW UP TO 7 DAYS FOR RECEIPT

FIRST MIDWEST BANK
PO BOX 565
JOLIET IL 60434-0565



Account Number
4939

Check box to indicate name/address change on back of this coupon

AMOUNT OF PAYMENT ENCLOSED

Closing Date	New Balance	Total Minimum Payment Due	Payment Due Date
10/29/14	\$881.99	\$881.99	11/24/14

\$

BL ACCT 00001230-10000000
VILLAGE OF SAUK VILLAGE
21801 TORRENCE AVE
SAUK VILLAGE IL 60411



MAKE CHECK PAYABLE TO:
BANKCARD PROCESSING CENTER
PO BOX 31021
TAMPA FL 33631-3021

21 4865 2259 4521 4939 00088199 00088199 4



Cardholder Account Summary		Cardholder Account Detail	
MOHAN RAO	##### 4947	Payments & Other	\$0.00
		Purchases & Other	\$131.58
		Cash Advances	\$0.00
Total Activity			\$131.58
Trans Date	10/22	Reference Number	24692164295000173285611
Post Date	10/22	Plan Name	PPLN01
COMCAST CHICAGO 800-COMCAST IL			
Amount	\$131.58		

Fin Dept.

Cardholder Account Summary		Cardholder Account Detail	
DAVID A HANKS	##### 2205	Payments & Other	\$0.00
		Purchases & Other	\$750.41
		Cash Advances	\$0.00
Total Activity			\$750.41
Trans Date	10/10	Reference Number	24692164295000230833340
Post Date	10/12	Plan Name	PPLN01
IN-SOUND WORKS PRODUCTION			
Amount	\$575.00		

10/23	10/24	PPLN01	24224434297101041741876	SPEEDWAY 06681 DRY DYER IN	815-4690000 IL	(Council)
10/25	10/26	PPLN01	24755424298172982883776	DOUBLETREE HOTELS SPRINGFIELD IL	(Council)	
10/26	10/26	PPLN01	24445004298100536970571	CASEYS GEN STORE 2939 SPRINGFIELD IL	(Council)	\$82.40
10/24	10/26	PPLN01	24270744298478300998825	PRAIRIECAPITALCONVCTR SPRINGFIELD IL	(Council)	\$41.00
10/24	10/26	PPLN01	24270744298478300998825	PRAIRIECAPITALCONVCTR SPRINGFIELD IL	(Council)	\$7.00

Finance Charge Summary / Plan Level Information									
Plan Name	Plan Description	FCM ¹	Average Daily Balance	Periodic Rate ²	Corresponding APR	Finance Charges	Effective APR ³	Fees ⁴	Ending Balance
PPLN01	PURCHASE	G	\$0.00	0.77083%(M)	9.2500%(V)	\$0.00	0.0000%	\$0.00	\$881.99
CPLN01	CASH	A	\$0.00	0.77083%(M)	9.2500%(V)	\$0.00	0.0000%	\$0.00	\$0.00

¹ Periodic Rate (M)=Monthly (D)=Daily
² Includes cash advance and foreign currency fees
³ FCM = Finance Charge Method
⁴ Variable Rate: If you have a variable rate account the periodic rate and Annual Percentage Rate (APR) may vary.
 Days in Billing Cycle: 31
 APR = Annual Percentage Rate

Comcast 10/21/14
\$131.58
Conf # 625885

210-200-704-000

1-866-594-1234

00.724 (C)

Account Number	[REDACTED]
Billing Date	08/10/14
Unpaid Balance	\$144.52 - Due Now
New Charges	\$128.58 - Due 09/07/14
Total Amount Due	\$273.10

Page 1 of 4

Monthly Statement Summary

Previous Balance	144.52
Payment	0.00
Unpaid Balance - Due Now	144.52
New Charges - Due by 09/07/14	128.58
<i>See below for more information</i>	
Total Amount Due	\$273.10

New Charges Summary

<input type="checkbox"/> XFINITY TV	3.98
<input checked="" type="checkbox"/> XFINITY Internet	114.85
Other Charges & Credits	9.50
Taxes, Surcharges & Fees	0.25
Total New Charges	\$128.58

Thank you for being a valued Comcast customer!

It is now past due and has been assessed a late fee. To avoid service interruption, please ensure your payment is received BEFORE 09/09/14. To avoid delays, you may pay in person at one of our payment centers or you may call us at 866-594-1234. Please disregard if payment has been made.

ALWAYS CALL BEFORE YOU DIG
One free, easy call gets your utility lines marked AND helps protect you from injury and expense. Safe digging is no accident: Always call 811 Before you dig. Visit call811.com for more information.

Moving? Call 1-855-MOV-EDGE or visit comcast.com/moversedge today! The XFINITY Movers Edge program makes it easy to stay connected to your TV, Internet and Voice service.

Become an XFINITY VIP today! Text XVIP to 47211 and get access to the latest insider info on cool new products and future offers. Plus, get exclusive VIP content including rewards, coupons and partner benefits. (VIPs will receive no more than 5 messages per month. Message and data rates may apply. Text STOP to cancel, HELP for info.)

AW 210.200.704.000

260.16.
Pd BY PHONE = 128.58
CHECK # 4923
Pd By Cr. Cd. = 131.58
Conf. # 625885

Detach and enclose this coupon with your payment. Please write your account number on your check or money order. Do not send cash.



If undeliverable, please return to:
844 169TH STREET HAMMOND IN 46324-2036
8771 4000 NO RP 10 08112014 YYNNYNN 01 007112 0032

SAUK VILLAGE FIRE STATION
1804 222ND ST
SAUK VILLAGE, IL 60411-5046



877140163000610400273102

Account Number	[REDACTED]
Payment Due By	Due Now
Total Amount Due	\$273.10
Amount Enclosed	\$

Make checks payable to Comcast, and remit to address below.

COMCAST CABLE
PO BOX 3002
SOUTHEASTERN PA 19398-3002



P A I D

Event Totals

Tax on Invoice Total \$562.61
 Paid \$575.00
 Amount Due -\$0.00

150.000 - 724.000

Equipment List Subtotal \$562.61
 Transport Sub total \$50.00

Labor Sub total \$160.00

Hardware Sub total \$352.61

Qty	Item name
1	Delivery
Transport	
1	System Tech
Labor	
1	A/C, Edison Quad
1	Furman - Rack Power (15A)
1	A/C Edison 100'
2	A/C, Edison 50' cable
Power	
4	Speaker NL2 50' cable
4	Speaker NL2 25' cable
2	Speaker NL2 10' cable
4	Speaker NL4 Coupler
4	Mic Cable, 50'
2	Mic Cable 25'
Cable	
4	Ultimate TS-90B speaker stand

INVOICE

Invoice #: 5318-1

Event Name: Campaign Press Event - outdoor

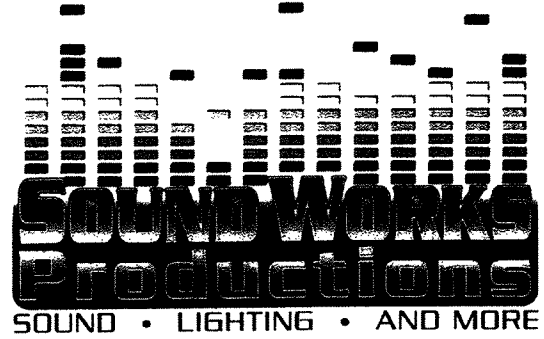
Account Manager: Ben Fassi
 Event Date(s): 10/11/2014

Invoice

Invoice #: 5318-1
Event Name: Campaign Press Event - outdoor

Account Manager: Ben Fassi
Event Date(s): 10/11/2014

Bill to Sauk Village
David Hank
210801 Torrence Ave
Sauk Village, IL 60411



Invoice Date 10/13/2014
Payment Terms PrePay
Invoice Due Date 10/13/2014
P.O. Number

Equipment List ID: 6536 Name: Campaign Press Event - outdoor

Out Delivered by SWP	10/11/2014 1:00 PM	Ship to
Back Picked up by SWP	10/11/2014 7:30 PM	Sauk Village Municipal Center
Setup	10/11/2014 1:30 PM	21801 Torrence Ave
Show	10/11/2014 3:30 PM	Sauk Village, IL 60411
Strike	10/11/2014 5:30 PM	
Usage days	1	

Qty Item name

FOH Console

1 Yamaha MGP16X10x2 stereo mixer

FOH Mains

1 QSC PLX 3602 power amp
4 EV SX300 12" 2-way passive spkr

Audio

1 Ashly MQX-2310 dual 1/3 octave graphic EQ

Press

1 Whirlwind 16ch pressbox passive
1 signal cable - 50' 2ch
1 Sony MDR-V150 headphones
1 Adapter 1' XLR M to 1/4" TRS M
1 Adapter 1' XLR Ground (GREEN)
1 Batteries - 9V
1 Podium Kit
1 Shure FP22 headphone amp

Microphones/DIs/Cables

2 Shure SM57 windscreen
2 Shure SM57 microphone w/clip

Stands

1 Mic Stand, Tall Tripod w/Boom BLK

VISIT US AT
WWW.SPEEDWAY.COM
CUSTOMER SERVICE
1-800-643-1948
M-F 8:30A-5:30P EST

100,010.72400

Speedy Rewards
Points Earned: 147
New Balance: 11742

Cardholder agrees to
pay to issuer total
charges per the
agreement between
cardholder & issuer.

10/23/2014 05:53:12
Card Num: XXXXXXXX2205
TERM: 0050006681001
TRANS TYPE: CAPTURE
APPR#: 630573
BATCH #: 34
SEQ#: 296034013
ENTRY METHOD: ICR

VISA
CARD NUM: XXXXXXXX2205
TERM: 0050006681001
TRANS TYPE: CAPTURE
APPR#: 630573
BATCH #: 34
SEQ#: 296034013
ENTRY METHOD: ICR
GAS TOTAL \$45.01
UNLEADED, SELF SERVE
14.714 @ \$3.059/GAL
PUMP 06
TRAN#: 3657709
(219)865-9652
IN 46311-1720
OVER
0006681
SPEEDWAY

TAX TOTAL \$0.00
TOTAL \$45.01

Casey's General
Store #2989
3001 E Clear Lake Av
Springfield, IL 6270

Date 10/24/2014
Time 10:50

UI
#####2285

Pump Balions Price 05 13.146 \$ 3.119

Product Amount UNLEDED \$ 41.00

Total Sale \$ 41.00

SALE - Card Swiped
Auth # 684935
Merch # 684935
Approved 684935

Fill your treat bag!

Mars Brands
King Size Candy
2 for \$3

Rice Krispies
Big Bar 2/\$2.50

Thank you !!!
Please Come Again.
217-788-1677

100.010.726.000 *Handwritten*

274263 10/24 07:52 F1 02
VISA \$ 7.00

XXXXXXXXXXXX2205



100.010-726.080 Ar

Account Summary


Billing Cycle		11/28/2014
Days In Billing Cycle		30
Previous Balance		\$881.99
Purchases	+	\$1,528.30
Cash	+	\$0.00
Special	+	\$0.00
Credits	-	\$0.00
Payments	-	\$881.99-
Other Charges	+	\$0.00
Finance Charges	+	\$0.00


NEW BALANCE \$1,528.30

Credit Summary

Total Credit Line	\$3,000.00
Available Credit Line	\$1,471.70
Available Cash	\$0.00
Amount Over Credit Line	\$0.00
Amount Past Due	\$0.00
Disputed Amount	\$0.00

Account Inquiries

 Call us at: (800) 221-5920
Lost or Stolen Card: (866) 839-3485

 Write us at PO BOX 31535, TAMPA, FL 33631-3535

Payment Summary

NEW BALANCE	\$1,528.30
MINIMUM PAYMENT	\$1,528.30
PAYMENT DUE DATE	12/23/2014

NOTE: Grace period to avoid a finance charge on purchases, pay entire new balance by payment due date. Finance charge accrues on cash advances until paid and will be billed on your next statement.

Corporate Activity

TOTAL CORPORATE ACTIVITY					\$881.99-
Trans Date	Post Date	Reference Number	Transaction Description	Amount	
11/23	11/23	7486522432511111111111	AUTO PMT FROM ACCT	\$881.99-	

Important Information About Your Account

IT IS NOT NECESSARY TO MAIL YOUR PAYMENT. YOUR ACCOUNT WILL AUTOMATICALLY BE PAID BY A DIRECT DEBIT OF YOUR CHECKING OR SAVINGS ACCOUNT. THE DEBIT THIS MONTH IS \$1528.30.

PLEASE DETACH COUPON AND RETURN PAYMENT USING THE ENCLOSED ENVELOPE - ALLOW UP TO 7 DAYS FOR RECEIPT

FIRST MIDWEST BANK
PO BOX 565
JOLIET IL 60434-0565



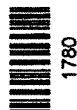
Account Number
4939

Check box to indicate name/address change on back of this coupon

AMOUNT OF PAYMENT ENCLOSED

Closing Date	New Balance	Total Minimum Payment Due	Payment Due Date	
11/28/14	\$1,528.30	\$1,528.30	12/23/14	\$

BL ACCT 00001230-10000000
VILLAGE OF SAUK VILLAGE
21801 TORRENCE AVE
SAUK VILLAGE IL 60411



MAKE CHECK PAYABLE TO:

BANKCARD PROCESSING CENTER
PO BOX 31021
TAMPA FL 33631-3021

21 4865 2259 4521 4939 00152830 00152830 6



BL ACCT 00001230-1000000
VILLAGE OF SAUK VILLAGE
Account Number: ##### 4939
Page 3 of 3

Cardholder Account Summary					
Trans Date	Post Date	Plan Name	Reference Number	Description	Amount
11/21	11/23	PPLN01	24164074325418177694766	USPS 16154804129363769 SAUK VILLAGE IL	\$15.00
Cardholder Account Detail					
Payments & Other	Credits	Purchases & Other	Cash Advances	Total Activity	
\$0.00	\$0.00	\$15.00	\$0.00	\$15.00	

Cardholder Account Summary					
Trans Date	Post Date	Plan Name	Reference Number	Description	Amount
11/13	11/16	PPLN01	24717054318153185087058	TLF THE FLOWER DEPOT 708-7561800 IL	\$285.00
11/13	11/16	PPLN01	24717054318153185087066	TLF THE FLOWER DEPOT 708-7561800 IL	\$60.00
11/14	11/16	PPLN01	24692164318000008516555	WEARGUARD * 81166509 800-388-3300 MA	\$142.52
11/19	11/21	PPLN01	24717054324153242986245	TLF THE FLOWER DEPOT 708-7561800 IL	\$117.00
Cardholder Account Detail					
Payments & Other	Credits	Purchases & Other	Cash Advances	Total Activity	
\$0.00	\$0.00	\$604.52	\$0.00	\$604.52	

Cardholder Account Summary					
Trans Date	Post Date	Plan Name	Reference Number	Description	Amount
11/07	11/09	PPLN01	24445744312100494517342	OFFICE DEPOT #491 CALUMET CITY IL	\$348.78
11/13	11/14	PPLN01	24692164317000533275892	IN B&F FABRICATING, INC. 708-7587878 IL	\$560.00
Cardholder Account Detail					
Payments & Other	Credits	Purchases & Other	Cash Advances	Total Activity	
\$0.00	\$0.00	\$908.78	\$0.00	\$908.78	

Finance Charge Summary / Plan Level Information									
Plan Name	Plan Description	FCM	Daily Balance	Periodic Rate	Corresponding APR	Finance Charges	Effective APR	Fees	Ending Balance
PPLN01	PURCHASE	G	\$0.00	0.77083%(M)	9.2500%(V)	\$0.00	0.0000%	\$1,528.30	
Cash	CASH	A	\$0.00	0.77083%(M)	9.2500%(V)	\$0.00	0.0000%	\$0.00	

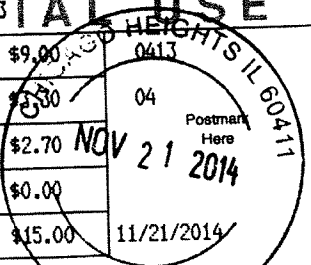
* Periodic Rate (M)=Monthly (D)=Daily
** Includes cash advance and foreign currency fees
† FCM = Finance Charge Method
(V) = Variable Rate If you have a variable rate account the periodic rate and Annual Percentage Rate (APR) may vary.
Days in Billing Cycle: 30
APR = Annual Percentage Rate

U.S. Postal Service
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com.

7006 2150 0002 0917 8211

OFFICIAL USE	
Postage	\$ 9.00
Certified Fee	\$ 3.30
Return Receipt Fee (Endorsement Required)	\$ 2.70
Restricted Delivery Fee (Endorsement Required)	\$ 0.00
Total Postage & Fees	\$ 15.00



Sent To: *Off of State Fire Marshal*
 Street, Apt. No. or PO Box No.: *1035 Stevenson Drive*
 City, State, ZIP+4: *Springfield, IL 62703*

PS Form 3800, August 2006 See Reverse for Instructions

3 lb. 10.80 oz.
 Expected Delivery: Mon 11/24/14
 Return Rcpt (Green Card) Void
 Certified Void
 USPS Certified Mail #: 70062150000209178211

=====
 Issue Postage: \$15.00
 Postage Line Item Void -\$15.00
 @@ -- SPRINGFIELD IL \$9.00
 62703-4259 Zone-3
 Priority Mail 2-Day By Weight
 3 lb. 10.80 oz.
 Expected Delivery: Mon 11/24/14
 Includes \$50 insurance

Return Rcpt (Green Card) \$2.70
 @@ Certified \$3.30
 USPS Certified Mail #: 70062150000209178211

=====
 Issue Postage: \$15.00

2101200706.000
Grant
 Total: *APPLN. Fee* \$15.00
Postage

Paid by: *Postage*
 VISA \$15.00
 Account #: XXXXXXXXXXXX4947
 Approval #: 683673
 Transaction #: 476
 23902936376

@@ For tracking or inquiries go to USPS.com or call 1-800-222-1811.

-- Save this receipt as evidence of

Now one company. Now great savings.
Office Depot, Inc., including its
subsidiary OfficeMax Incorporated



Survey Code: #1925 20ZP SYM7

Visit www.officedepot.com/feedback
and enter the survey code below.

receive a coupon for \$10 off your
next qualifying purchase of \$50 or more on
office supplies, furniture and more.
(Excludes Technology. Limit 1 coupon per
household/business.)

WE WANT TO HEAR FROM YOU!

210-205-660
810-215-610

\$54.00

Total Office Depot Savings:

Visa 3906: 348.78

Total: 348.78

Tax: 28.80

Subtotal: 319.98

You Pay

319.98SS

Amount Savings

-54.00

2 @ 186.99

373.98

606242 FILE/VRTCL,22"

Product ID Description Total

SALE

SIR 491 REG3 TRN 9700 EMP 663847

11/07/2014 14.4.6 12:18 PM

Fax (708) 862-4903

(708) 862-4900

CALUMET CITY, IL 60409

1370 TORRENCE AVE.

OFFICE DEPOT STORE #491

Credit CARD



R R Depot
210-215-610

11/7/14

funeral arrangements for Jason Gondek

SHERRY JASINSKI <jasinski4648@yahoo.com>

Mayor David Hanks <dhanks@saukvillage.org>; Debbie Williams <dlw1633@aol.com>; Trustee Derrick Burgess <dburgess@saukvillage.org>; Finance Director Mohan Rao <mrao@saukvillage.org>; Trustee Rosie Williams <rwilliams@saukvillage.org>; Trustee Lynda Washington-House <lWashington@saukvillage.org>; Trustee Ed Myers <emyers@saukvillage.org>; Trustee Jeffrey Morden <jmorden@saukvillage.org>; Trustee John Poskin <jposkin@saukvillage.org>;

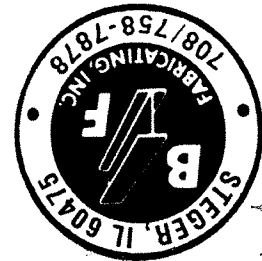
funeral arrangements.pdf

funeral arrangements.pdf

Please note the Police Walk will be at 6:00p.m on Friday 11-14-14. I also ordered an arrangement from the Village and a wreath with red,white and blue flowers for the Police Department.

Sherry

- Structural Fabricating
- Plate Fabricating
- Repair Work
- Ford Q1 Award



B & F FABRICATING, INC.
 610 EAST SAUK TRAIL
 STEGER, IL 60475
 (708) 758-7878 • 758-7899
 FAX (708) 758-9143

Village of Sauk Village-Public Works
 21701 Torrence Ave.
 Sauk Village, IL 60411

INVOICE DATE	12/3/2014
OUR ORDER NO.	0926-14
YOUR ORDER NO.	Verbal/AI
TERMS:	1% - 10 DAYS NET 30
SALESMAN	
SHIPPED VIA	Customer Pickup
PPD. or COLL.	

QUANTITY	DESCRIPTION	PRICE	AMOUNT
1	Dump Truck Repairs- * Repair 4 panels with steel plate * Replace rods and clevises that open rear gate * Patch inside of dump truck where rusted through Paid In Full- Credit Card # ***3906 Trans. # PD0007879432 300,000.76-000 KA 100-228-714 No Tax - Municipality B & F Shipper # 35344		\$560.00
	Total		\$560.00

44844



BL ACCT 00001230-10000000
 VILLAGE OF SAUK VILLAGE
 Account Number: #### #### #### 4939
 Page 1 of 3



Account Summary

Billing Cycle 12/29/2014
 Days In Billing Cycle 31
 Previous Balance \$1,528.30
 Purchases + \$767.61
 Cash + \$0.00
 Special + \$0.00
 Credits - \$0.00
 Payments - \$1,528.30
 Other Charges + \$0.00
 Finance Charges + \$0.00

NEW BALANCE \$767.61

Credit Summary

Total Credit Line \$3,000.00
 Available Credit Line \$2,232.39
 Available Cash \$0.00
 Amount Over Credit Line \$0.00
 Amount Past Due \$0.00
 Disputed Amount \$0.00

Account Inquiries



Call us at: (800) 221-5920
 Lost or Stolen Card: (866) 839-3485



Write us at PO BOX 31535, TAMPA, FL 33631-3535

Payment Summary

NEW BALANCE \$767.61
MINIMUM PAYMENT \$767.61
PAYMENT DUE DATE 01/23/2015

NOTE: Grace period to avoid a finance charge on purchases, pay entire new balance by payment due date. Finance charge accrues on cash advances until paid and will be billed on your next statement.

Corporate Activity

TOTAL CORPORATE ACTIVITY				\$1,528.30-
Trans Date	Post Date	Reference Number	Transaction Description	Amount
12/23	12/23	7486522435611111111111	AUTO PMT FROM ACCT	\$1,528.30-

Important Information About Your Account

IT IS NOT NECESSARY TO MAIL YOUR PAYMENT. YOUR ACCOUNT WILL AUTOMATICALLY BE PAID BY A DIRECT DEBIT OF YOUR CHECKING OR SAVINGS ACCOUNT. THE DEBIT THIS MONTH IS \$767.61.

PLEASE DETACH COUPON AND RETURN PAYMENT USING THE ENCLOSED ENVELOPE - ALLOW UP TO 7 DAYS FOR RECEIPT

FIRST MIDWEST BANK
 PO BOX 565
 JOLIET IL 60434-0565



Account Number

4939

Check box to indicate name/address change on back of this coupon

AMOUNT OF PAYMENT ENCLOSED

Closing Date	New Balance	Total Minimum Payment Due	Payment Due Date
12/29/14	\$767.61	\$767.61	01/23/15

\$

BL ACCT 00001230-10000000
 VILLAGE OF SAUK VILLAGE
 21801 TORRENCE AVE
 SAUK VILLAGE IL 60411



MAKE CHECK PAYABLE TO:

BANKCARD PROCESSING CENTER
 PO BOX 31021
 TAMPA FL 33631-3021

21 4865 2259 4521 4939 00076761 00076761 6



BL ACCT 00001230-10000000
 VILLAGE OF SAUK VILLAGE
 Account Number: ##### 4939
 Page 3 of 3

Cardholder Account Summary					
Trans Date	Post Date	Plan Name	Reference Number	Description	Amount
12/16	12/17	PLN01	2469216435000408803396	WEARGUARD - 81286776 800-388-3300 MA	\$37.78
12/17	12/18	PLN01	24692164351000973843628	WEARGUARD - 81286776 800-388-3300 MA	\$14.36
12/17	12/18	PLN01	24692164351000973843636	WEARGUARD - 81286776 800-388-3300 MA	\$142.13
Cardholder Account Detail					
SHERRY JASINSKI		Payments & Other	Credits	\$0.00	
##### 4954		Purchases & Other	Charges	\$194.27	
Total Activity		Cash Advances		\$0.00	\$194.27

Cardholder Account Summary					
Trans Date	Post Date	Plan Name	Reference Number	Description	Amount
12/08	12/09	PLN01	24270744346400326554	EXTREMETACTICALDYNAM 561-4270975 FL	\$399.88
12/19	12/24	PLN01	24247604357100763876116	WILLIAMSON HEATING COOLIN CEDAR LAKE IN	\$173.46
Cardholder Account Detail					
KEVIN J WELLER		Payments & Other	Credits	\$0.00	
##### 3906		Purchases & Other	Charges	\$573.34	
Total Activity		Cash Advances		\$0.00	\$573.34

Finance Charge Summary / Plan Level Information									
Plan Name	Plan Description	FCM ¹	Average Daily Balance	Periodic Rate *	Corresponding APR	Finance Charges	Effective APR ^{**}	APR	Ending Balance
PPLN01 001	PURCHASE	G	\$0.00	0.77083%(M)	9.2500%(V)	\$0.00	0.0000%	\$0.00	\$767.61
CPLN01 001	CASH	A	\$0.00	0.77083%(M)	9.2500%(V)	\$0.00	0.0000%	\$0.00	\$0.00

* Periodic Rate (M)=Monthly (D)=Daily
 ** Includes cash advance and foreign currency fees
¹ FCM = Finance Charge Method
 (V) = Variable Rate If you have a variable rate account the periodic rate and Annual Percentage Rate (APR) may vary.
 Days in Billing Cycle: 31
 APR = Annual Percentage Rate

S Jasinski



Credit Card Receipt

BILL TO
VILLAGE OF SAUK VILLAGE
ATTN: SHERRY JASINSKI
21801 TORRENCE AVE
SAUK VILLAGE IL 60411

SHIP TO
VILLAGE OF SAUK VILLAGE
ATTN: SHERRY JASINSKI
21801 TORRENCE AVE
SAUK VILLAGE IL 60411
EMPLOYEE NO:

Order Date	Bill Date	Order Number	PO No	Ship Via
11/19/14	12/17/14	81286776-2		RPS

Style	Quantity	Description	Price	Total
4082NAVYL	1	WMNS LS POPLIN SHRT	\$9.99	\$9.99
4082CBLLL	2	WMNS LS POPLIN SHRT	\$9.99	\$19.98
4082DREDL	2	WMNS LS POPLIN SHRT	\$9.99	\$19.98
1227CBLLM	1	PRO WAFFLE POLO	\$8.99	\$8.99
1227NAVYM	1	PRO WAFFLE POLO	\$8.99	\$8.99
1227KHAKM	1	PRO WAFFLE POLO	\$8.99	\$8.99
6011	8	NAME EMBROIDERY	\$4.25	\$34.00
6002	8	COMPANY NAME EMBROIDERY	\$4.25	\$34.00

 SUBTOTAL \$144.92
 SHIPPING \$0.00
 TAX \$11.57
 TOTAL \$156.49

Your Credit card number *****4954 was Charged on 12/17/14
Your Order has now Shipped Complete.

Tax Exempt.

Subj: **Fw: Order Process**
Date: 12/8/2014 12:11:39 P.M. Central Standard Time
From: kweller@saukvillage.org
To: bos68@aol.com

From: AspireSales LLC <etd.customerservice@gmail.com>
Sent: Friday, December 5, 2014 2:05 PM
To: Public Works Director Kevin Weller; Public Works Director Kevin Weller
Subject: Order Process

Extreme Tactical Dynamics

Order Number: 44468
Detailed Invoice: https://www.extremetacticaldynamics.com/catalog/account_history_info.php?order_id=44468
Date Ordered: Friday 05 December, 2014

Products

- 1 x Halo 3 LED Strobe Lights (Strobe Light) = \$39.96
Color Red
Finish Black Finish
- 1 x LED Stealth Commander Visor Light (ext-led-SC) = \$319.96
Color Red/Blue
Takedown No Takedown Light
- 1 x Halo 3 LED Strobe Lights (Strobe Light) = \$39.96
Finish Black Finish
Color White

Sub-Total: \$399.88
Free Shipping: \$0.00
Total: \$399.88

Delivery Address

village of sauk village
Kevin Weller
21801 Torrence Ave
sauk village, IL 60411
United States

Billing Address

village of sauk village
Kevin Weller
21801 Torrence Ave
sauk village, IL 60411
United States

Payment Method

Credit Card

Please Code

210.200.660
(Signature)

*Mottan -
Cr Cd. RECEIPT*

Order #: 81286776
 Pkt control #: 0000350617
 Customer #: 20343032



Customer Comments: [Redacted]

Line	Description	SKU	Qty	Reason Code	Refund	Exchange	Style/Color/Size	Personalization
1.00	WMNS LS POPLIN SHRT	4082NAVYL						
3.00	WMNS LS POPLIN SHRT	4082DREDL						
5.00	PRO WAFFLE POLO	1227NAVYM						

Reason Code

1. Size too big
 2. Size too small
 3. Defective
 4. Personalization incorrect
 5. Wrong item sent
 6. Shade Variance
 7. Sample
 8. My error
 9. Not as expected
 10. Duplicate
 11. Other
 (Pls explain below)

Check One

Please use this section for Exchanges

Aramark
 Guaranteed:
 If you're not completely satisfied with one of our products, return it unworn, unwashed within 45 days. We'll gladly replace the item or refund your money. Logo'd or altered products can only be returned due to incorrect processing or manufacturer's defect.

Thank you for your order!
 To make an exchange or receive a refund, follow the instructions below
 1. Please complete the section below and include with your package. Please give specific details about your return so we can ensure a quick and accurate process.
 2. Affix the pre-addressed label above to the outside of your package.

603
 From: VILLAGE OF SAUK VILLAGE
 21801 TORRENCE AVE
 SAUK VILLAGE IL 60411

ARAMARK
 Aramark - Returns Department
 195 Trademark Dr. Suite #103
 Reno NV 89521

* Note: Total Shipping and Taxes for all cartons appear on the 1st packing list.

Mdse & Pers Subtotal: 144.92
 Shipping & Handling: 17.50
 Tax: 12.97
 Total: 175.39



Order #: 81286776
 Pkt Control #: 0000350617

SKU	Customer SKU	Description	Qty	Name	Personalization	Price
4082NAVYL		WMNS LS POPLIN SHRT	1	Sue	Standard	9.99
4082DREDL		WMNS LS POPLIN SHRT	2	Sue	Standard	9.99
1227NAVYM		PRO WAFFLE POLO	1	Sue	Standard	8.99

www.aramark-uniform.com



Ship To:
 ATTN: SHERRY JASINSKI
 VILLAGE OF SAUK VILLAGE
 21801 TORRENCE AVE
 SAUK VILLAGE IL 60411

Bill To:
 VILLAGE OF SAUK VILLAGE
 ATTN: SHERRY JASINSKI
 21801 TORRENCE AVE
 SAUK VILLAGE IL 60411

CusIP#: [Redacted]
 Order #: 81286776
 Pkt Control #: 0000350617
 Customer #: 20343032
 Carton 1 OF 1



www.aramark-uniform.com

Ship To :

ATTN: SHERRY JASINSKI
VILLAGE OF SAUK VILLAGE
21801 TORRENCE AVE
SAUK VILLAGE IL 60411

Bill To :

VILLAGE OF SAUK VILLAGE
ATTN: SHERRY JASINSKI
21801 TORRENCE AVE
SAUK VILLAGE IL 60411


CustPO# :

Order # : 81166509
Pkt Control # : 0000301880
Customer # : 20343032
Carton 1 OF 1

603 From :
VILLAGE OF SAUK VILLAGE
21801 TORRENCE AVE
SAUK VILLAGE IL 60411

Order # : 81166509
Pkt Control # : 0000301880

ARAMARK
Aramark - Returns Department
1195 Trademark Dr. Suite #103
Reno NV 89521

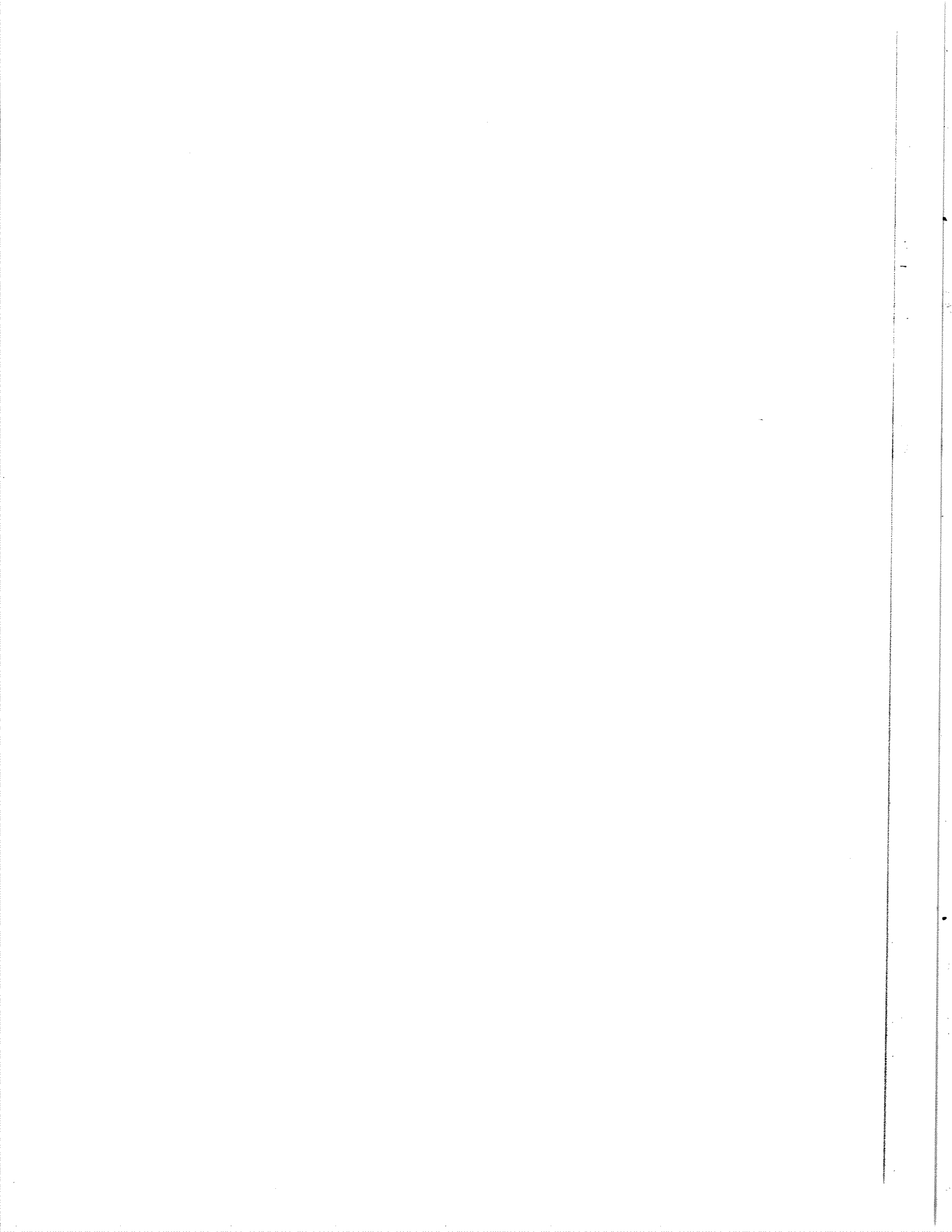


SKU	Customer SKU	Description	Qty	Name	Personalization	Price
4082NAVYM		WMNS LS POPLIN SHRT	1	Sue	Standard	9.99
2174NAVYM		PROWEIGHT 1/4 ZIP WR SWEA	1			39.99

For Customer service please call 1-800-677-6060

Mdse & Pers Subtotal : 126.97
Shipping & Handling : 5.00
Tax: 10.55
Total : 142.52

* Note: Total Shipping and Taxes for all cartons appear on the 1st packing list.





BL ACCT 00001230-10000000
 VILLAGE OF SAUK VILLAGE
 Account Number: #### #### #### 4939
 Page 1 of 3



Account Summary

Billing Cycle 01/29/2015
 Days In Billing Cycle 31
 Previous Balance \$767.61
 Purchases + \$822.34
 Cash + \$0.00
 Special + \$0.00
 Credits - \$0.00
 Payments - \$767.61-
 Other Charges + \$0.00
 Finance Charges + \$0.00

NEW BALANCE \$822.34

Credit Summary

Total Credit Line \$3,000.00
 Available Credit Line \$2,177.66
 Available Cash \$0.00
 Amount Over Credit Line \$0.00
 Amount Past Due \$0.00
 Disputed Amount \$0.00

Account Inquiries

Call us at: (800) 221-5920
 Lost or Stolen Card: (866) 839-3485

Write us at PO BOX 31535, TAMPA, FL 33631-3535

Payment Summary

NEW BALANCE \$822.34
MINIMUM PAYMENT \$822.34
PAYMENT DUE DATE 02/23/2015

NOTE: Grace period to avoid a finance charge on purchases, pay entire new balance by payment due date. Finance charge accrues on cash advances until paid and will be billed on your next statement.

Corporate Activity

				TOTAL CORPORATE ACTIVITY	\$767.61-
Trans Date	Post Date	Reference Number	Transaction Description	Amount	
01/23	01/23	7486522502211111111111	AUTO PMT FROM ACCT	\$767.61-	

Important Information About Your Account

IT IS NOT NECESSARY TO MAIL YOUR PAYMENT. YOUR ACCOUNT WILL AUTOMATICALLY BE PAID BY A DIRECT DEBIT OF YOUR CHECKING OR SAVINGS ACCOUNT. THE DEBIT THIS MONTH IS \$822.34.

PLEASE DETACH COUPON AND RETURN PAYMENT USING THE ENCLOSED ENVELOPE - ALLOW UP TO 7 DAYS FOR RECEIPT

FIRST MIDWEST BANK
 PO BOX 565
 JOLIET IL 60434-0565



Account Number
 #### #### #### 4939

Check box to indicate name/address change on back of this coupon

AMOUNT OF PAYMENT ENCLOSED

Closing Date	New Balance	Total Minimum Payment Due	Payment Due Date
01/29/15	\$822.34	\$822.34	02/23/15

\$

BL ACCT 00001230-10000000
 VILLAGE OF SAUK VILLAGE
 21801 TORRENCE AVE
 SAUK VILLAGE IL 60411



MAKE CHECK PAYABLE TO:
 BANKCARD PROCESSING CENTER
 PO BOX 31021
 TAMPA FL 33631-3021

21 4865 2259 4521 4939 00082234 00082234 6



BL A C T 00001230-10000000
 VILLAGE OF SAUK VILLAGE
 Account Number: ##### 4939
 Page 3 of 3

Cardholder Account Summary				
Plan Name	Plan	Description	FCM ¹	Average Daily Balance
MOHAN RAO	##### 4947			
Payments & Other	Credits	Purchases & Other	Charges	Cash Advances
\$0.00	\$537.65	\$0.00	\$0.00	\$537.65
Total Activity				
\$223.45				

Trans Date	Post Date	Plan Name	Reference Number	Description	Amount
01/09	01/12	PPLN01	24639235011900011300323	HEADSETS DIRECT, INC. 928-779100 AZ	\$306.59
01/14	01/16	PPLN01	24639235015900011600470	HEADSETS DIRECT, INC. 928-779100 AZ	\$7.61
01/27	01/28	PPLN01	24164075027418177697817	USPS 16154804129363769 SAUK VILLAGE IL	

Cardholder Account Summary				
Plan Name	Plan	Description	FCM ¹	Average Daily Balance
DAVID A HANKS	##### 2205			
Payments & Other	Credits	Purchases & Other	Charges	Cash Advances
\$0.00	\$32.70	\$0.00	\$0.00	\$32.70
Total Activity				
\$20.70				

Trans Date	Post Date	Plan Name	Reference Number	Description	Amount
01/14	01/16	PPLN01	24164075015111641566858	LOVE S COUNTRY0002493 WILLIAMSVILLE IL	\$12.00
01/14	01/16	PPLN01	24164075015111003980358	LOVES TRAVEL S00002923 DWIGHT IL	

Cardholder Account Summary				
Plan Name	Plan	Description	FCM ¹	Average Daily Balance
KEVIN J WELLER	##### 3906			
Payments & Other	Credits	Purchases & Other	Charges	Cash Advances
\$0.00	\$251.99	\$0.00	\$0.00	\$251.99
Total Activity				
\$251.99				

Trans Date	Post Date	Plan Name	Reference Number	Description	Amount
01/02	01/04	PPLN01	24246515003708000049433	SEARS ROEBUCK 9202 8004694663 TN	\$251.99

Additional Information About Your Account
 THE TOTAL FINANCE CHARGE PAID ON YOUR ACCOUNT DURING THE PAST YEAR WAS \$.00.

Finance Charge Summary / Plan Level Information										
Plan Name	Plan	Description	FCM ¹	Average Daily Balance	Periodic Rate ²	Corresponding APR	Finance Charges	Effective APR ³	Fees ^{**}	Ending Balance
PPLN01	PURCHASE		G	\$0.00	0.77083%(M)	9.2500%(V)	\$0.00	0.0000%	\$0.00	\$822.34
CPLN01	CASH		A	\$0.00	0.77083%(M)	9.2500%(V)	\$0.00	0.0000%	\$0.00	\$0.00

¹ FCM = Finance Charge Method
² Periodic Rate (M)=Monthly (D)=Daily
³ Includes cash advance and foreign currency fees
 ** APR = Annual Percentage Rate
 Days in Billing Cycle: 31
 (V) = Variable Rate If you have a variable rate account the periodic rate and Annual Percentage Rate (APR) may vary.

SAUK VILLAGE STATION
 SAUK VILLAGE, Illinois
 604117300

1615500413-0099

01/27/2015 (708)757-3876 11:56:36 AM

7006 2150 0002 0918 0375

Sales Receipt		
Product Description	Sale Unit Qty Price	Final Price
SPRINGFIELD IL 62702-1289 Zone-3		\$1.61
First-Class Mail Large Env 3.70 oz.		
Expected Delivery: Thu 01/29/15		
Return Rcpt (Green Card)		\$2.70
@@ Certified		\$3.30
USPS Certified Mail #: 70062150000209180375		
Issue Postage:		\$7.61
Total:		\$7.61

Paid by:

VISA

\$7.61

Account #: XXXXXXXXXXXX4947

Approval #: 663437

Transaction #: 781

23902936376

IDNR Agreement

@@ For tracking or inquiries go to USPS.com or call 1-800-222-1811.

100,005-706,000 *Ar*

Order stamps at usps.com/shop or call 1-800-Stamp24. Go to usps.com/clicknship to print shipping labels with postage. For other information call 1-800-ASK-USPS.

U.S. Postal Service
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com®

SPRINGFIELD ILLINOIS

Postage \$1.61
 Certified Fee \$3.30
 Return Receipt Fee (Endorsement Required) \$2.70
 Restricted Delivery Fee (Endorsement Required) \$0.00
 Total Postage & Fees \$7.61

Postmark Here
 04
 JAN 27 2015
 01/27/2015 Springfield, IL 60411

Sent to: *Sam Nathan, Sr. Grant Administrator*
 Street, Apt. No. or PO Box No.: *L Dept of Natural Resources*
 City, State, Zip+4: *Normal Rockville, IL 62702-1271*

PS Form 3800, August 2006 See Reverse for Instructions

HD Headsets
 Direct, Inc.
 Making Communication Easier
 1454 W. Gurney St., Ste. A, Prescott, AZ 86305
 (800) 914-7996 - Fax (928) 777-9120

INVOICE
 Invoice Number: 17325
 Invoice Date: 1/9/15

Ship To:
 Sauk Village Police Dept
 Chief Tim Hokevis
 21701 Torrence Ave
 Sauk Village, IL 60411

Bill To:
 Sauk Village Police Dept
 21801 Torrence Ave
 Sauk Village, IL 60411

Customer ID	7087581331	Customer PO	VC-4947
Sales Rep	AI	Shipping Method	UPS 2nd Day
Due Date	1/9/15	AM GSAS	1/9/15

Quantity	Item	Description	Unit Price	Amount
1.00	GSA	GSA and OM pricing per Contract #GS-35F-0167L (01/04/01 - 1/3/16) apply to the following:	202.50	202.50
1.00	780323-01	80323-01 - CA12CD Remote		
1.00				

Thank you for your order, and we appreciate your loyalty!
 If you need help or tech support, call us first at 1-800-914-7996.

Credit Card Payment
223.45 1-9-15
Subtotal for
~~*DISPATCH*~~ *for Jim Hokevis.*

Subtotal	202.50
Sales Tax	
Freight	20.95
Total Invoice Amount	223.45
Payment/Credit Applied	223.45
AMOUNT DUE	0.00

Unlimited Talk Time?
 Search 'CS545-XD' at
 www.headsetsdirect.com
 for details.



ALL ACCOUNTS OVER 30 DAYS ARE SUBJECT TO A 2% PER MONTH SERVICE CHARGE
 RETURNS WITHIN 60 DAYS OF PURCHASE DATE REQUIRE AN RMA NUMBER
 SHIPPING/HANDLING IS NOT REFUNDED. NO RETURNS AFTER 60 DAYS.

plantronics

DESCRIPTION: SPARE,REMOTE W/BATTERY,CA12CD,(UPCS)

PART NUMBER: 80323-01

DATE CODE: FEB-14



Made in China



0 17229 13598 7 Qty: 1



\$270.00

~~800-914-7996~~

800-914-7996

HD Headsets

Direct, Inc. Making Communication Easier

1454 W. Gurley St., Ste. A, Prescott, AZ 86305
(800) 914-7996 - Fax (928) 777-9120

INVOICE

Invoice Number: 17563
Invoice Date: 1/14/15

Ship To:

Sauk Village Police Dept
Chief Tim Holevis
21701 Torrence Ave
Sauk Village, IL 60411

Bill To:

Sauk Village Police Dept
21801 Torrence Ave
Sauk Village, IL 60411

Customer ID	7087581331	Customer PO	VC-4947
Sales Rep	AI	Shipping Method	UPS 2nd Day
Due Date	1/14/15	Ship Date	1/14/15
Payment Terms	VC-4947	Due Date	1/14/15

Quantity	Item	Description	Unit Price	Amount
1.00	GSA	GSA and O/M pricing per Contract #GS-35F-0167L (01/04/01 - 1/3/16) apply to the following:		
4.00	1H141N	H141N DuoSet - 45273-01	63.92	255.68
1.00	727019-03	27019-03 - Y-Training Cord	29.96	29.96
1.00				

Thank you for your order, and we appreciate your loyalty!
If you need help or tech support, call us first at 1-800-914-7996.

Handwritten: 1-14-15
Handwritten: Sauk Village Police Dept

Subtotal	285.64
Sales Tax	
Freight	20.95
Total Invoice Amount	306.59
Payment/Credit Applied	306.59
AMOUNT DUE	0.00

Unlimited Talk Time?
Search 'CS545-XD' at
www.headsetsdirect.com
for details.



ALL ACCOUNTS OVER 30 DAYS ARE SUBJECT TO A 2% PER MONTH SERVICE CHARGE
RETURNS WITHIN 60 DAYS OF PURCHASE DATE REQUIRE AN RMA NUMBER
SHIPPING/HANDLING IS NOT REFUNDED, NO RETURNS AFTER 60 DAYS.



1-800-914-7996

Search...

You are here: Home → H141N DuoSet Headset - Refurbished



HeadsetsDirect.com

Double click on above image to view full picture



More Views



We Make Your Life...Easy!

Call now and talk with our Plantronics Certified Headset Experts!

Why Headsets Direct?

Headset Specialists since 1996
60-Day Money Back Guarantee
Discounted Pricing
Authorized Plantronics Distributor

Talk to a Real Person

Call Now 1-800-914-7996

H141N DuoSet Headset - Refurbished

Availability: 2 In-Stock in Arizona

\$55.00

110.00

Qty: 2 OR Add to Compare



Amplifier or Cable Required

Click here for compatibility options and ordering

The convertible style Plantronics H141N DuoSet refurbished headset allows you to make good use of your hands to multi-task. The headset is comfortably secure, and the sound quality is superb.

MIKE,
Need these for
training next
Tuesday. 1/20/15
T.H.V.
[Signature]

Product Description Specifications Accessories Customer Reviews

Plantronics H141N DuoSet Headset - Refurbished

Convertible - Headband and Earloop included
Noise-canceling microphone
Soft ear cushion for all day comfort
Quick Disconnect feature for added freedom

Browse more Plantronics Refurbished Headsets Money Saver Products:



Plantronics H141N DuoSet Convertible Features:
• Over-the-head stability or over-the-ear convenience for the busy office professional.

Whether worn over-the-ear or over-the-head, the convertible style Plantronics H141N DuoSet headset allows you to make good use of your hands to multi-task. The headset is comfortably secure, and the sound quality is superb.

Product Description Specifications Accessories Customer Reviews

Talk to a Real Person
Call Now 1-800-914-7996

Why Headsets Direct?
Headset Specialists since 1996
60-Day Money Back Guarantee
Discounted Pricing
Authorized Plantronics Distributor

We Make Your Life... Easy!
Call now and talk with our
Plantronics Certified Headset Experts!



More Views

Double click on above image to view full picture

HeadsetsDirect.com



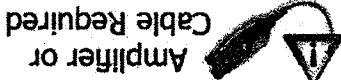
You are here: Home - H141N DuoSet Headset



- Entry level product offering great value for the price
- Convertible headset includes Over-the-Ear & Over-the-Head
- Multiple wearing styles of the H141N ensures finding your perfect fit
- Freeing your hands for typing and writing increases productivity
- Noise-canceling microphone for louder environments
- Headband provides a comfortable, stable fit
- FREE clothing clip included for better cord management
- FREE technical support with purchase
- Need help? Call us and talk to a Real Person!

Plantronics H141N DuoSet Benefits:

Click here for compatibility options and ordering



Qty: 2 OR Add to Compare

Buy 5 or more for \$75.00 each (You save 4%)
Buy 11 or more for \$70.00 each (You save 11%)
Buy 25 or more for \$65.00 each (You save 17%)

\$78.00 *156.00*

Availability: 56 In-Stock in Arizona

H141N DuoSet Headset

Search...

1-800-914-7996

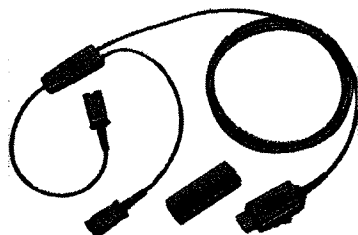




1-800-914-7996

Search...

You are here: Home → 27019-03 - PLX Y-Training Cord



HeadsetsDirect.com

Double click on above image to view full picture



More Views



27019-03 - PLX Y-Training Cord

Availability: 54 In-Stock in Arizona

\$39.95

\$39.95

Qty: 1 OR Add to Compare

The Plantronics Y-Training cord / Y-Splitter cable allows two headsets to operate with one amplifier for training/monitoring purposes. Both headsets can listen, but only one headset will have a live microphone. The other microphone is muted. The red toggle switch allows the supervisor to control which microphone is live and which is muted.



We Make Your Life...Easy!
Call now and talk with our
Plantronics Certified Headset Experts!

Why Headsets Direct?
Headset Specialists since 1996
60-Day Money Back Guarantee
Discounted Pricing
Authorized Plantronics Distributor

Talk to a Real Person
Call Now 1-800-914-7996

Product Description | Specifications | Customer Reviews

Plantronics 27019-03 - PLX Y-Training Cord

Y-Training Cord - Y Cable - Y-Splitter Cord - Y Splitter Cable

TECH NOTE: One side of the Y-cord is 7 feet, the other is 8 1/2 inches in length



Service Smart™ Protection Agreement



0998544745 00024
Kevin Weller
21801 Torrence Ave
SAUK VILLAGE, IL 60411

(Sears Centre)

Don't worry. This isn't a bill.
It's confirmation of your coverage.

CONTRACT NUMBER 099854474500024
MODEL NUMBER GTH21SCXASS
SERVICE LOCATION IN-HOME
EXPIRATION 01/02/16
PURCHASE DATE 02/03/06

(Credit card)

#12
100-015-712
1/30/15

For Sewer Leaker.

Price: \$251.99
Tax Paid: \$0.00
Total Paid: \$251.99

1-800-4-MY-HOME

Unit #: 0009202
Phone: 01/30/15
SSA T5RV01

To schedule a repair, please call
1-800-469-4663 or go online at www.sears.com.
See reverse side for terms and conditions.
* May reflect any warranty and current Service Agreement coverage.

SEARS HOME SERVICES

State Reg #: Not Applicable

CHICAGO DISTRICT
440 W ARMY TRAIL ROAD
BLOOMINGDALE, IL 60108
(800) 4MY-HOME

Sears #: 0008320 Jan 15, 2015

Technician ID: 0922419
Service Order Number: 41792971

KEVIN WELLER
21801 TORRENCE AVE # NONE
SAUK VILLAGE, IL 60411
(708) 259-4991

MOSE: REFRIGERATOR
Brand Name: GE
Model Number: GTH21SCHXSS
Serial Number: RR137145
Service Requested:
REWORK SOR#41781364
DED 80.00 APU 8500.00

Technician Comments:
Notes: replaced shorted I.M.

Labor Performed - Protection Agreement:
I.M. Replace (Minor) \$ 187.00
Total Labor \$ 187.00

Parts Required - Protection Agreement:
ICE MAKER
46 363 WR30X10093R 1 \$ 140.73
Total Parts \$ 140.73

This Repair is valued at: \$ 327.73
This Service Performed at No Charge

SEARS HOME SERVICES

State Reg #: Not Applicable

CHICAGO DISTRICT
440 W ARMY TRAIL ROAD
BLOOMINGDALE, IL 60108
(800) 4MY-HOME

Sears #: 0008320 Jan 12, 2015

Technician ID: 0552315
Service Order Number: 41781364

KEVIN WELLER
21701 TORRENCE AVE # NONE
SAUK VILLAGE, IL 60411
(708) 259-4991

MOSE: REFRIGERATOR
Brand Name: GE
Model Number: GTH21SCHXSS
Serial Number: RR137145
Service Requested:
NOISE-NOT EVEN TURN ON-NOT DOING
ANYTHING DED 80.00 APU 8500.00

Technician Comments:
Notes: UNABLE TO VERIFY THE PROBLEM.
CHKD UN IT OVER, UNIT WORKING OK.

Labor Performed - Protection Agreement:
PM Check (SP Only) \$ 84.99
Total Labor \$ 84.99

This Repair is valued at: \$ 84.99
This Service Performed at No Charge

Section 501(c)(3) Organization

24. MAINTENANCE OF RECORDS: The organization shall maintain accurate records of all contributions and disbursements for each year.

25. FINANCIAL STATEMENTS: The organization shall prepare financial statements for each year in accordance with generally accepted accounting principles.

26. NEW MEMBERS: The organization shall accept new members on the basis of the bylaws and subject to the approval of the board of directors.

27. AMENDMENTS: The organization shall have the power to amend its bylaws and articles of incorporation.

28. GOVERNANCE: The organization shall be governed by a board of directors consisting of a majority of members.

29. CONFIDENTIALITY: The organization shall maintain the confidentiality of all information received from donors.

30. NON-PROFIT STATUS: The organization shall not be organized for the private inurement or private inurement of any individual.

31. TAX STATUS: The organization shall file an annual Form 990 with the IRS.

32. GOVERNANCE: The organization shall have the power to elect and remove officers and directors.

33. GOVERNANCE: The organization shall have the power to elect and remove officers and directors.

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66. GOVERNANCE: The organization shall have the power to elect and remove officers and directors.

67. GOVERNANCE: The organization shall have the power to elect and remove officers and directors.

Section 501(c)(3) PROTECTION AGREEMENT

Between the donor and the organization.

This is not a contract of insurance.

Read this document as proof of insurance.

Section 501(c)(3) PROTECTION AGREEMENT



BL ACCT 00001230-10000000
 VILLAGE OF SAUK VILLAGE
 Account Number: #### #### #### 4939
 Page 1 of 3



Account Summary

Billing Cycle		02/26/2015
Days In Billing Cycle		28
Previous Balance		\$822.34
Purchases	+	\$1,413.20
Cash	+	\$0.00
Special	+	\$0.00
Credits	-	\$14.36-
Payments	-	\$822.34-
Other Charges	+	\$0.00
Finance Charges	+	\$0.00
NEW BALANCE		\$1,398.84

Credit Summary

Total Credit Line	\$3,000.00
Available Credit Line	\$1,601.16
Available Cash	\$0.00
Amount Over Credit Line	\$0.00
Amount Past Due	\$0.00
Disputed Amount	\$0.00

Account Inquiries

Call us at: (800) 221-5920
 Lost or Stolen Card: (866) 839-3485

Write us at PO BOX 31535, TAMPA, FL 33631-3535

Payment Summary

NEW BALANCE	\$1,398.84
MINIMUM PAYMENT	\$1,398.84
PAYMENT DUE DATE	03/23/2015

NOTE: Grace period to avoid a finance charge on purchases, pay entire new balance by payment due date. Finance charge accrues on cash advances until paid and will be billed on your next statement

Corporate Activity

TOTAL CORPORATE ACTIVITY				\$822.34-
Trans Date	Post Date	Reference Number	Transaction Description	Amount
02/23	02/23	7486522505311111111111	AUTO PMT FROM ACCT [REDACTED]	\$822.34-

Important Information About Your Account

IT IS NOT NECESSARY TO MAIL YOUR PAYMENT. YOUR ACCOUNT WILL AUTOMATICALLY BE PAID BY A DIRECT DEBIT OF YOUR CHECKING OR SAVINGS ACCOUNT. THE DEBIT THIS MONTH IS \$1398.84.

PLEASE DETACH COUPON AND RETURN PAYMENT USING THE ENCLOSED ENVELOPE - ALLOW UP TO 7 DAYS FOR RECEIPT

FIRST MIDWEST BANK
 PO BOX 565
 JOLIET IL 60434-0565



Account Number
 #### #### #### 4939

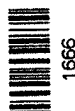
Check box to indicate name/address change on back of this coupon

AMOUNT OF PAYMENT ENCLOSED

Closing Date	New Balance	Total Minimum Payment Due	Payment Due Date
02/26/15	\$1,398.84	\$1,398.84	03/23/15



BL ACCT 00001230-10000000
 VILLAGE OF SAUK VILLAGE
 21801 TORRENCE AVE
 SAUK VILLAGE IL 60411



MAKE CHECK PAYABLE TO:

BANKCARD PROCESSING CENTER
 PO BOX 31021
 TAMPA FL 33631-3021

21 4865 2259 4521 4939 00139884 00139884 6



BL ACCT 00001230-1000000
 VILLAGE OF SAUK VILLAGE
 Account Number: ##### 4939
 Page 3 of 3

Cardholder Account Summary				
Trans Date	Post Date	Plan Name	Reference Number	Description
02/17	02/18	PLLN01	2443106504990000046702	METRA 80TH AVE TINLEY PK TINLEY PARK IL
Amount \$12.00				
Cardholder Account Detail				
Total Activity	Payments & Other	Credits	Purchases & Other	Cash Advances
\$12.00	\$0.00	\$12.00	\$0.00	\$0.00

Cardholder Account Summary				
Trans Date	Post Date	Plan Name	Reference Number	Description
02/17	02/18	PLLN01	74692165048000954897362	CREDIT VOUCHER
02/23	02/24	PLLN01	24493985054014000057804	WEARGUARD *81702120 800-388-3300 MA
02/23	02/24	PLLN01	24493985054014000057879	BAUVILLE INC. 800-728-0888 MI
02/23	02/24	PLLN01	24493985054014000057879	BAUVILLE INC. 800-728-0888 MI
Amount \$14.36				
Cardholder Account Detail				
Total Activity	Payments & Other	Credits	Purchases & Other	Cash Advances
\$266.14	\$14.36	\$280.50	\$0.00	\$0.00

Cardholder Account Summary				
Trans Date	Post Date	Plan Name	Reference Number	Description
02/04	02/05	PLLN01	24247605036600298403720	STONY TIRE LYNNWOOD IL
02/19	02/20	PLLN01	24692165050000867190095	IN B&F FABRICATING, INC. 708-7587878 IL
Amount \$982.70				
Cardholder Account Detail				
Total Activity	Payments & Other	Credits	Purchases & Other	Cash Advances
\$1,120.70	\$0.00	\$1,120.70	\$0.00	\$0.00

Additional Information About Your Account
 THE TOTAL FINANCE CHARGE PAID ON YOUR ACCOUNT DURING THE PAST YEAR WAS \$.00.

Finance Charge Summary / Plan Level Information									
Plan Name	Description	FCM ¹	Average Daily Balance	Periodic Rate ²	Corresponding APR	Finance Charges	Effective APR ³	Fees ⁴	Ending Balance
PPLN01	PURCHASE	G	\$0.00	0.77083%(M)	9.2500%(V)	\$0.00	0.0000%	\$0.00	\$1,398.84
Cash	CASH	A	\$0.00	0.77083%(M)	9.2500%(V)	\$0.00	0.0000%	\$0.00	\$0.00

* Periodic Rate (M)=Monthly (D)=Daily
 ** Includes cash advance and foreign currency fees
¹ FCM = Finance Charge Method
 (V) = Variable Rate If you have a variable rate account the periodic rate and Annual Percentage Rate (APR) may vary
 Days in Billing Cycle: 28
 APR = Annual Percentage Rate

2/9/2015

Re: Cook County's 2015 CDBG and ESG applicatio... - Finance Director Mohan Rao

Re: Cook County's 2015 CDBG and ESG application workshops

Finance Director Mohan Rao

Mon 2/9/2015 4:42 PM

Inbox

To:

Cc:

Hi Mayor,

I'll attend the workshop.

Thanks,
Mohan

From: Mayor David Hanks

Sent: Friday, February 6, 2015 4:47 PM

To: James Czarnik; SHERRY JASINSKI; Finance Director Mohan Rao; Kevin Weller

Subject: Re: Cook County's 2015 CDBG and ESG application workshops

I agree.....Sherry, Mohan or Kevin are you available?

Mayor David A. Hanks
21801 Torrence Ave.
Sauk Village, Illinois 60411
Phone: 708 753-5124
Fax: 708 758-1634
Email: dhanks@saukvillage.org

100.005.768.000 Aw
Train fare from Tinley park/
Chicago/Tinley park.

From: James Czarnik <jczarnik@reltd.com>

Sent: Friday, February 6, 2015 3:41 PM

To: SHERRY JASINSKI; Finance Director Mohan Rao; Kevin Weller

Cc: Mayor David Hanks

Subject: FW: Cook County's 2015 CDBG and ESG application workshops

Someone from the Village should attend as in previous years.

James M. Czarnik

Senior Engineer




10045 West Lincoln Highway
Frankfort, IL 60423
815-412-2716 direct
815-412-2733 fax
219-682-8936 mobile

IMPORTANT: This message is intended only for the use of the individual or entity to which it is addressed, and may contain information which is privileged, confidential, and exempt from disclosure under applicable law. If the reader of the message is not the intended recipient you are hereby notified that any dissemination, distribution, or copying of this communication is strictly prohibited. If you received this communication in error, please notify the sender immediately.

From: Cook County Bureau of Economic Development/Department of Planning and Development
[mailto:barbara.malooof@cookcountyil.gov]
Sent: Tuesday, February 03, 2015 11:12 AM
To: James Czarnik
Subject: Cook County's 2015 CDBG and ESG application workshops

Having trouble viewing this email? [Click here](#)

TONI PRECKWINKLE, PRESIDENT

cookcountyil.gov/economic development
THE ECONOMIC AND SMALL BUSINESS DEVELOPMENT WEBSITE FOR COOK COUNTY

For more information, please contact:
The Bureau of Economic Development
10045 West Lincoln Highway

February 3, 2015



Good Morning,



18001 S. 80th Ave.

2/17/15 7:46 AM
 Trans.: 6988 Store: 10061
 Reg.: 491 Till: 49100
 Agent: 6894 Agent Account: RI-K

SALE



One Way Full, Zone A to E 6.00
00590004711807

One Way Full, Zone A to E 6.00
00590004711808

Total 12.00

Credit 12.00

Card: Visa
Account: 4947
Auth: 661959 (A)
Entry: Swipe

Total Tender 12.00

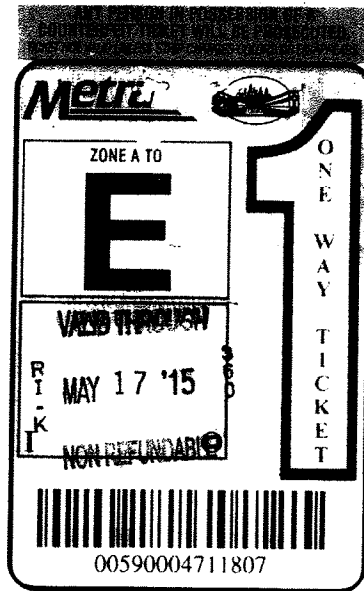
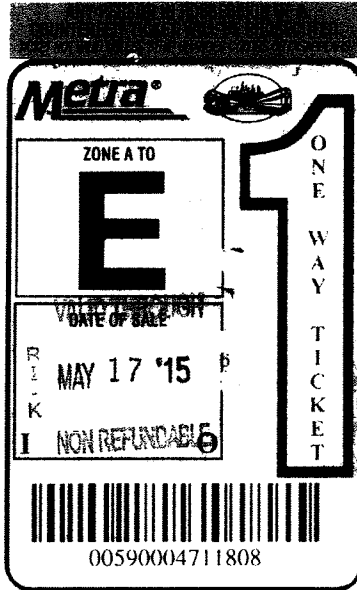
Change Due 0.00

Customer Copy

Thank you for riding

METRA
The Way To Really Fly

www.metraail.com





February 17, 2015

Village Of Sauk Village
Attn Sherry Jasinski
21801 Torrence Ave
Sauk Village IL 60411

re: 81702120-20

Dear Valued Customer:

Your VISA CARD has been credited in the amount of \$14.36 effective today. Due to billing cycles with your credit card processor, this adjustment will statement within the next two months.

If we can be of any further assistance, please contact our Customer Service Department at the toll-free number listed below.

Thank you for choosing Aramark Workwear. We look forward to serving you again near future.

Sincerely,

Aramark Workwear Customer Service
1-800-388-3300

STONY TIRE INCORPORATED

19870 STONY ISLAND AVE

LYNWOOD, IL 60411-8671
708-474-4114

Invoice # 1-106311 Dealer ID# Page 1 of 1

Starting 02/04/2015 Ending 02/04/2015

Emp: 1-14 2 / 1-16 3

In Feb 04, 2015 11:18AM

Out Feb 04, 2015 1:22PM

****INVOICE****

Sold To: Fax Number: 708-758-1634
VILL. OF SAUK VILL. PUB. WORKS
21801 TORRENCE AVE.
SAUK VILLAGE IL 60411

Ship To:

*TRUCK # 4
front
tires*

Unit#: 4
Vehicle: TRUCK
License: 4
Mileage: In: 32,316 Out: 32,316
Vin#:
PO#:

Business Phone: 708-757-2420

Fax Number: 708-758-1634

Salesman	Part #	QTY	Description	Parts	Labor	FET	Total
14	AH243001472	2.00	11R22.5 HANKOOK AH24 G/14 22/32	402.72	0.00	25.23	855.90
14	ITUF	2.00	ILLINOIS TIRE USER FEE	2.50	0.00	0.00	5.00
14	LOOWT	2.00	OFF/ON WHEEL/RIM & TRUCK/TRAILER	0.00	30.00	0.00	60.00
14	VALTR571/573	2.00	VALVE STEM	6.00	0.00	0.00	12.00
14	STPMAGBALTL300	2.00	MAGNUM 10.5 OZ. DROP IN BAG-BALANCE	19.50	0.00	0.00	39.00
14	BWPM45	3.00	NUT DAYTON WHEEL 3/4"X1-1/4"	1.75	0.00	0.00	5.25
14	BWPM39	3.00	STUD DAYTON WHEEL 3/4"	1.85	0.00	0.00	5.55

708-372-0749

AL.
INSTALLED 2 NEW STEERS
HE TOOK OLD TIRES
32316

Card Type: VISA

CC#: *****44

Auth. #

Amount:

\$982.70

Signature: _____

Buyer agrees to pay total amount above, according to cardholder's agreement with issuer.

PAID VISA

106-220-719
300-000-719 2/9/15

STONY TIRE
19870 STONY ISLAND AVE
LYNWOOD, IL 60411
PHONE # (708) 474-4114

**, RE SALE

ER 75-100 MILES OR 2 DAYS AFTER WHEEL/ TIRE SERVICE, AFTER WHICH, STONYTIRE WILL NOT BE

MID: 000014687338
TD: 001 REF#: 00000001
Bank ID: 6001
Batch #: 035001
02/04/15 14:21:15
APPR CODE: 632318
VISA Swiped
*****3906 **/**

Ca: AMOUNT \$982.70

Credit: 982.70 Charge:

Parts: 922.70

Labor: 60.00

Shop Supplies: 0.00

Subtotal: 982.70

Sales Tax:

Total: \$982.70

APPROVED

Si: THANK YOU
HAVE A NICE DAY

CUSTOMER COPY

Receipt Confirmation

donotreply@intuit.com

Thu 2/19/2015 8:56 AM

To: Public Works Director Kevin Weller <kweller@saukville.org>

B&F FABRICATING, INC.

STEGER, IL, 60475

(708) 758-7878

02/19/2015 06:56 AM

Transaction#
PB0014586906

village of sauk village
1 @ \$138.00

Total
\$138.00

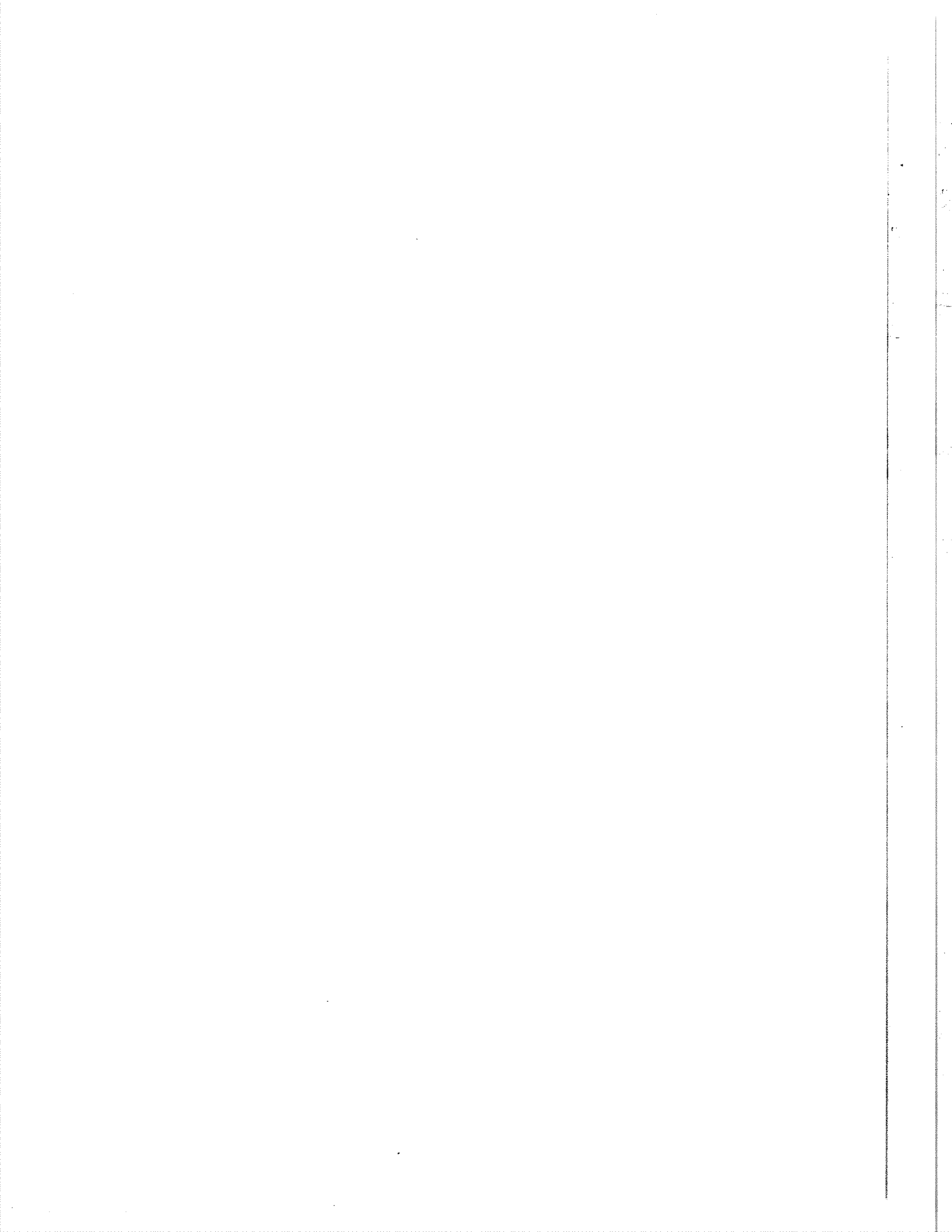
Visa ****3906

Thank you for your business!

Credit CARD

100-220-712

*#27
300-000-712
2/19/15*





BL ACCT 00001230-10000000
 VILLAGE OF SAUK VILLAGE
 Account Number: #### #### #### 4939
 Page 1 of 3



Account Summary

Billing Cycle		03/29/2015
Days In Billing Cycle		31
Previous Balance		\$1,398.84
Purchases	+	\$1,207.09
Cash	+	\$0.00
Special	+	\$0.00
Credits	-	\$129.75
Payments	-	\$1,398.84
Other Charges	+	\$0.00
Finance Charges	+	\$0.00
NEW BALANCE		\$1,077.34

Credit Summary

Total Credit Line	\$3,000.00
Available Credit Line	\$1,922.66
Available Cash	\$0.00
Amount Over Credit Line	\$0.00
Amount Past Due	\$0.00
Disputed Amount	\$0.00

Account Inquiries

Call us at: (800) 221-5920
 Lost or Stolen Card: (866) 839-3485

Write us at PO BOX 31535, TAMPA, FL 33631-3535

Payment Summary

NEW BALANCE	\$1,077.34
MINIMUM PAYMENT	\$1,077.34
PAYMENT DUE DATE	04/23/2015

NOTE: Grace period to avoid a finance charge on purchases, pay entire new balance by payment due date. Finance charge accrues on cash advances until paid and will be billed on your next statement.

Corporate Activity

			TOTAL CORPORATE ACTIVITY	\$1,398.84
Trans Date	Post Date	Reference Number	Transaction Description	Amount
03/23	03/23	748652250811111111111111	AUTO PMT FROM ACCT	\$1,398.84

Important Information About Your Account

IT IS NOT NECESSARY TO MAIL YOUR PAYMENT. YOUR ACCOUNT WILL AUTOMATICALLY BE PAID BY A DIRECT DEBIT OF YOUR CHECKING OR SAVINGS ACCOUNT. THE DEBIT THIS MONTH IS \$1077.34.

PLEASE DETACH COUPON AND RETURN PAYMENT USING THE ENCLOSED ENVELOPE - ALLOW UP TO 7 DAYS FOR RECEIPT

FIRST MIDWEST BANK
 PO BOX 565
 JOLIET IL 60434-0565



Account Number

4939

Check box to indicate name/address change on back of this coupon

AMOUNT OF PAYMENT ENCLOSED

Closing Date	New Balance	Total Minimum Payment Due	Payment Due Date
03/29/15	\$1,077.34	\$1,077.34	04/23/15

\$

BL ACCT 00001230-10000000
 VILLAGE OF SAUK VILLAGE
 21801 TORRENCE AVE
 SAUK VILLAGE IL 60411



4946

MAKE CHECK PAYABLE TO:

BANKCARD PROCESSING CENTER
 PO BOX 31021
 TAMPA FL 33631-3021

21 4865 2259 4521 4939 00107734 00107734 6



BL ACCT 00001230-1000000
 VILLAGE OF SAUK VILLAGE
 Account Number: ##### 4939
 Page 3 of 3

Cardholder Account Summary	
Plan Name	Plan
MOHAN RAO	##### 4947
Payments & Other	\$0.00
Credits	\$0.00
Purchases & Other	\$160.24
Charges	\$160.24
Cash Advances	\$0.00
Total Activity	\$160.24

Trans Date	Post Date	Plan Name	Reference Number	Description	Amount
03/04	03/05	PLN01	24247605063200125857986	R AND R MAINTENANCE GLENWOOD IL	\$110.00
03/12	03/15	PLN01	24164075072200000017700	TRL TIRE SERVICE 085027 S CHICAGO HTS IL	\$28.89
03/17	03/18	PLN01	24164075076418167699609	USPS 16154804129363769 SAUK VILLAGE IL	\$21.35

Cardholder Account Summary	
Plan Name	Plan
SHERRY JASINSKI	##### 4954
Payments & Other	\$129.75
Credits	\$129.75
Purchases & Other	\$0.00
Charges	\$0.00
Cash Advances	\$0.00
Total Activity	\$129.75

Trans Date	Post Date	Plan Name	Reference Number	Description	Amount
03/05	03/06	PLN01	74493985064014000047576	CREDIT VOUCHER	\$129.75
				BAUVILLE INC. GRAND RAPIDS MI	

Cardholder Account Summary	
Plan Name	Plan
DAVID A HANKS	##### 2205
Payments & Other	\$0.00
Credits	\$0.00
Purchases & Other	\$55.00
Charges	\$55.00
Cash Advances	\$0.00
Total Activity	\$55.00

Trans Date	Post Date	Plan Name	Reference Number	Description	Amount
03/09	03/11	PLN01	2429910506900084017661	200 W RANDOLPH SELF PARK CHICAGO IL	\$16.00
03/13	03/15	PLN01	24299105073001269984376	SOUTH LOOP CHICAGO IL	\$39.00

Cardholder Account Summary	
Plan Name	Plan
KEVIN J WELER	##### 3906
Payments & Other	\$0.00
Credits	\$0.00
Purchases & Other	\$991.85
Charges	\$991.85
Cash Advances	\$0.00
Total Activity	\$991.85

Trans Date	Post Date	Plan Name	Reference Number	Description	Amount
03/04	03/06	PLN01	24610435064010177019819	THE HOME DEPOT 1937 SCHERERVILLE IN	\$28.86
03/11	03/13	PLN01	24246515071708000096225	SEARS HHO INC 5291 SCHERERVILLE IN	\$92.99

Additional Information About Your Account
 THE TOTAL FINANCE CHARGE PAID ON YOUR ACCOUNT DURING THE PAST YEAR WAS \$.00.

Finance Charge Summary / Plan Level Information										
Plan Name	Plan	Description	FCM	Average Daily Balance	Periodic Rate *	Corresponding APR	Finance Charges	Effective APR	Fees **	Ending Balance
Purchases	PPLN01	PURCHASE	G	\$0.00	0.77083%(M)	9.2500%(V)	\$0.00	0.0000%	\$0.00	\$1,077.34
Cash	CPLN01	CASH	A	\$0.00	0.77083%(M)	9.2500%(V)	\$0.00	0.0000%	\$0.00	\$0.00

* Periodic Rate (M)=Monthly (D)=Daily
 ** Includes cash advance and foreign currency fees
 * FCM = Finance Charge Method
 (V) = Variable Rate If you have a variable rate account the periodic rate and Annual Percentage Rate (APR) may vary.
 APR = Annual Percentage Rate
 Days in Billing Cycle: 31

R&R MAINTENANCE FIRE & FLEET
 125 N MAIN ST
 GLENWOOD, IL 60425
 PHONE (708) 753-0500

ESDA - SAUK VILLAGE
 1804 EAST 222ND STREET
 SAUK VILLAGE, IL 60411

Qty.	Part Number	Description	Each	Total	Date 02-20-2015	Mileage 40809	Invoice 8027
	FRONT BRAKES BROUGHT OWN PARTS Front Brake Job		110.00	110.00			

Vehicle 1994 Ford F250 5.8
 License [REDACTED] Fleet# UNIT 1150
 Vin [REDACTED]
 Home [REDACTED] Cell 708- -
 Work 708- -

Service History	Miles	Date	Next Service Due
OIL CHANGE	21683	3/15/06	24683 06-13-2006
FR.BRAKES	40809	2/20/15	60809 N/A
AC SERVICE	38934	5/21/14	62934 05-20-2016
AIR FILTER	26877	2/1/08	38877 01-31-2010
FUEL FILTER	21683	3/15/06	45683 03-14-2008

Code Information
 1 - 1 - 3 Month or 3000 mile warranty. (Parts & Labor)

R AND R MAINTENANCE
 125 NORTH MAIN STREET
 GLENWOOD, IL 60425
 PHONE # (704) 756-0500

SALE

NO: 520000282992
 TID: 001 REF#: 00000002
 Bank ID: 6011
 Batch #: 063001
 03/04/15 13:39:07
 AVS: Y
 APPR CODE: 650031
 VISA Manual CP
 *****4947

AMOUNT \$110.00

APPROVED

THANK YOU
 HAVE A NICE DAY

CUSTOMER COPY

Attn: Mohan

100.205.712.000 Atw
3/2/2015

Department	Sale	Payments
Labor	110.00	110.00 - Visa M/C
Sublet Labor	0.00	
Road Service	0.00	
Parts	0.00	
Tires & Batteries	0.00	
EPA Charges	0.00	
Car Wash	0.00	
Shop Supplies	0.00	
Discount	0.00	
Environmental fees	0.00	
SUB TOTAL ==>	110.00	
Sales Tax	0.00	
TOTAL ==>	110.00	

Thank you for your business. We look forward to seeing you in the future.

0.00 Balance Due

TRT TIRE SERVICE CORP
3349 EAST END AVE
S CHICAGO HEIGHTS, IL 60411
Phone: 708-754-7909 Fax: 708-754-8473

11118
Org. Est # 017439

Print Date: 03/12/2015

2014 Ford - Police Interceptor Utility
4.6L V8 281CI VIN(V), In Research
Lic #: MP10515 - IL
Odometer In: 14,567
Odometer Out: 14,567
VIN #: [REDACTED]

UNPAID BALANCE
STREET TRAC
COMPANY ID: 0000
SEQUENCE #: 001778
RATCH #: 04
CREDIT TYPE: PAYMENT - VISA
ACCOUNT #: 00000000000000000000
EXP DATE: 03/12/2015
TOTAL SALES: \$ 28.89
APPROVAL CODE: 603071

Qty	Ext	Sale	Lab	Description	Extended
1.00	9.00			FLAT REPAIR 245/55R18 R/R	18.00
				30 DAY WARRANTY-NO EXCEPTIONS!	
				Proper tire inflation & torquing must be maintained by customer as indicated by the mfr specs. ALL CUSTOM WHEEL LUG NUTS MUST BE RE-TORQUED AFTER 25 MILES & TORQUED PERIODICALLY	
				LOGIN TO TRT TIRE'S WEBSITE	
				TRT.TIRESERVICE.COM	
				YOU CAN FIND COUPONS, CHECK OUT TIRES & WHEELS, APPLY FOR GOODYEAR CREDIT CARD, OR SCHEDULE AN APPOINTMENT	

CUSTOMER COPY
I AGREE TO PAY ABOVE AMOUNT ACCORDING TO
CARD ISSUER AGREEMENT AND PAYMENT AGREEMENT
IF CREDIT VALUE(S)

TECHNICIAN(S): [REDACTED]

paid by credit cards.
for
100-025,714,000 3/12/2015

Org. Estimate	Revisions	Current Estimate	Additional Cost	Revised Estimate
\$ 28.89	\$ 0.00	\$ 28.89		
Labor:				18.00
Parts:				10.89
Sub:				28.89
Tax:				0.00
Total:				\$28.89
Bal Due:				\$28.89

[Payments -]
I hereby authorize the above repair work to be done along with the necessary material and hereby grant you and/or your employees permission to operate the car or truck hereinafter described on street, highways or elsewhere for the purpose of testing and/or inspection. An express merchant's lien is hereby acknowledged on above car or truck to secure the amount of repairs thereto. Parts Warranty: Per manufacturer. Labor: six months/6000 miles whichever comes first and has to be performed in our shop & cannot exceed the original cost of repair.

Signature: _____
Date: _____
Time: _____
Copyright (c) 2015 Mitchell Report Information Company, LLC. InvisiPaper 08.22.14 JD Page 1 of 1 Written By: TOOPERMAN, MARCO

CUSTOMER USE ONLY
FROM: (PLEASE PRINT) **PHONE:** 708-753-5120
 Village of Sauk Village
 21801 TORRENTE AVENUE
 SAUK VILLAGE, IL 60411.



UNITED STATES POSTAL SERVICE | **PRIORITY MAIL EXPRESS™**

PAYMENT BY ACCOUNT (if applicable)
 USPS® Corporate Acct. No. Federal Agency Acct. No. or Postal Service™ Acct. No.

DELIVERY OPTIONS (Customer Use Only)
 SIGNATURE REQUIRED Note: The mailer must check the "Signature Required" box if the mailer: 1) requires the addressee's signature; OR 2) purchases additional insurance; OR 3) purchases COO service; OR 4) purchases Return Receipt service. If the box is not checked, the Postal Service will leave the item in the addressee's mail receptacle or other secure location without attempting to obtain the addressee's signature on delivery.
Delivery Options
 No Saturday Delivery (delivered next business day)
 Sunday/Holiday Delivery Required (additional fee, where available)
 10:30 AM Delivery Required (additional fee, where available)
 *Refer to USPS.com® or local Post Office™ for availability.
TO: (PLEASE PRINT) **PHONE:**
 Cook County Dept. Planning & Development
 Attn: Sonia Brown
 59 West Washington St. Ste 2900
 Chicago IL 60602
 ZIP + 4® (U.S. ADDRESS ONLY)

ORIGIN (POSTAL SERVICE USE ONLY)

1-Day 2-Day Military DPO

PO ZIP Code	Scheduled Delivery Date (MM/DD/YY)	Postage	
	03/18/15	\$ 21.35	
Date Accepted (MM/DD/YY)	Scheduled Delivery Time	Insurance Fee	COO Fee
03/17/15	<input type="checkbox"/> 10:30 AM <input type="checkbox"/> 3:00 PM <input checked="" type="checkbox"/> 12 NOON	\$	\$
Time Accepted	10:30 AM Delivery Fee	Return Receipt Fee	Live Animal Transportation Fee
11:21 AM	\$	\$	\$
Weight	Sunday/Holiday Premium Fee	Total Postage & Fees	
3 lbs. 6 oz.	\$	\$ 21.35	

DELIVERY (POSTAL SERVICE USE ONLY)

Delivery Attempt (MM/DD/YY)	Time	Employee Signature
	<input type="checkbox"/> AM <input type="checkbox"/> PM	
Delivery Attempt (MM/DD/YY)	Time	Employee Signature
	<input type="checkbox"/> AM <input type="checkbox"/> PM	

For pickup or USPS Tracking™, visit USPS.com or call 800-222-1811.
 \$100.00 Insurance Included.

LABEL 11-B, JANUARY 2014 PSN 7690-02-000-9996 2-CUSTOMER COPY

CUSTOMER USE ONLY
FROM: (PLEASE PRINT) **PHONE:** 708-753-5120
 Village of Sauk Village
 21801 TORRENTE AVENUE
 SAUK VILLAGE, IL 60411.
PAYMENT BY ACCOUNT (if applicable)
 USPS® Corporate Acct. No. Federal Agency Acct. No. or Postal Service™ Acct. No.



UNITED STATES POSTAL SERVICE | **PRIORITY MAIL EXPRESS™**

SAUK VILLAGE STATION
 SAUK VILLAGE, Illinois
 604117300
 1615500413-0089
 03/17/2015 (708)757-3876 11:23:09 AM

Product Description	Sale Unit	Qty	Price	Final Price
Priority Mail Express 1-Day				\$21.35

3 lb. 5.90 oz.
 USPS Tracking #: EK598554036US
 Scheduled Delivery Day: Wed
 03/18/15 12:00PM - Money Back Guarantee
 Includes up to \$100 insurance

Signature Requested \$21.35
 Issue Postage: \$21.35
 Total: \$21.35
 Paid by: VISA \$21.35
 Account #: XXXXXXXXXXXX4947
 Approval #: 630073
 Transaction #: 960
 23902936376

Save this receipt as evidence of insurance. For information on filing an insurance claim go to usps.com/ship/file-domestic-claims.htm
 100.00 \$ 706.000
 Order stamps at usps.com/shop or call 1-800-Stamp24. Go to usps.com/clicknship to print

SAKU VILLAGE STATION
 SAKU VILLAGE, I111no1s
 604117300
 1615500413-0099
 03/17/2015 (708)757-3876 11:23:09 AM

Sales Receipt
 Product Sale Unit Final
 Description Qty Price Price

~ CHICAGO IL 60602-3171
 Zone-1
 Priority Mail Express 1-Day
 3 lb. 5.90 oz.
 USPS Tracking #: EK598554036US
 Scheduled Delivery Day: Wed
 03/18/15 12:00PM - Money Back
 Guarantee
 Includes up to \$100 insurance
 Signature Requested
 Issue Postage: \$21.35
 =====
 Total: \$21.35

Paid by: VISA
 Account #: XXXXXXXXXXXXXXX4947
 Approval #: 630073
 Transaction #: 960
 23902936376

~ Save this receipt as evidence of
 insurance. For information on filing
 an insurance claim go to
 usps.com/ship/file-domestic-claims.htm
 Order stamps at usps.com/shop or
 call 1-800-Stamp24. Go to
 usps.com/clicknship to print
 shipping labels with postage. For

100.005:706.000 *Alw*

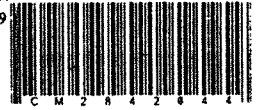
BAUDVILLE
THE PLACE FOR DAILY RECOGNITION

1.800.728.0888 Fax: 616.698.0554 Fed. ID: 38-2549249

BAUDVILLE
THE PLACE FOR DAILY RECOGNITION

1.800.728.0888 Fax: 616.698.0554 Fed. ID: 38-2549249

PLEASE USE THIS LABEL TO
RETURN MERCHANDISE



PO# 43138 (708) 758-3330
INV# CM2842044 /BCS1842306
SHERRY JASINSKI
VILLAGE OF SAUK VILLAGE
21701 TORRENCE AVE
SAUK VILLAGE, IL 60411-4561

PO# 43138 (708) 758-3330
INV# CM2842044 /BCS1842306
SHERRY JASINSKI
VILLAGE OF SAUK VILLAGE
21701 TORRENCE AVE
SAUK VILLAGE, IL 60411-4561

SHIP TO:
Merchandise Return
5380 52nd St. SE
Grand Rapids, MI 49512



Sherry used my credit card

BAUDVILLE
THE PLACE FOR DAILY RECOGNITION

5380 52nd Street SE, Grand Rapids, Michigan 49512
1.800.728.0888 Fax: 616.698.0554 Fed. ID: 38-2549249

CREDIT MEMO

CREDIT MEMO DATE: 3/5/2015
CREDIT MEMO NUMBER: CM2842044
CUSTOMER NUMBER: 660492



BILL SHERRY JASINSKI
TO: VILLAGE OF SAUK VILLAGE
21701 TORRENCE AVE
SAUK VILLAGE, IL 60411-4561

SHIP SHERRY JASINSKI
TO: VILLAGE OF SAUK VILLAGE
21701 TORRENCE AVE
SAUK VILLAGE, IL 60411-4561

100.005.610.000 Am

SALES PERSON		ORDER DATE	TERMS	SHIP VIA	CUSTOMER P.O. NO.	
Amber Scales		3/4/2015			43138	
SHIPPED	UOM	ITEM NO.	DESCRIPTION	UNIT PRICE	EXT. PRICE	
-5	100/BX	2RB111	Certificate Paper - Ivy - Royal Blue	25.95	-129.75	
NET SALES		SHIPPING/HANDLING	INT'L SURCHARGE	DISCOUNT	INVOICE AMOUNT	TOTAL DUE
-129.75		0.00	0.00	0.00	-129.75 USD	0.00

BCS1842306

Credit amount will be applied to original credit card account

Entries must be entered by 01/31/2015

15154 151169
Password:
User ID: 151226
2PX3 153106 151226

COMPARTIA SU OPINION EN UNA BREVE
ENCUESTA PARA LA OPORTUNIDAD DE GANAR.
www.homedepot.com/opinion

Share Your Opinion With Us! Complete
the brief survey about your store visit
and enter for a chance to win at:

ENTER FOR A CHANCE
TO WIN A \$5,000
HOME DEPOT GIFT
CARD!

BUY ONLINE PICK-UP IN STORE
AVAILABLE NOW ON HOMEDEPOT.COM.
CONVENIENT, EASY AND MOST ORDERS
READY IN LESS THAN 2 HOURS!

RETURN POLICY DEFINITIONS
POLICY ID DAVIS POLICY EXPIRES
06/02/2015
1
SO
THE HOME DEPOT RESERVES THE RIGHT TO
LIMIT / DENY RETURNS. PLEASE SEE THE
RETURN POLICY SIGN IN STORES FOR
DETAILS.

1937 57 75440 03/04/2015 6188



P.O.#/JOB NAME: 0

678885051129 INT PAINT <A>
26.97 BEHR PPI EGGSHELL 2000 DEEP 1160Z
SUBTOTAL
1.89 SALES TAX
28.36 TOTAL
28.36 AUTH CODE 669571/1570742
TA

950 US HIGHWAY 41
SCHERERVILLE, IN 46375 (219) 322-1651
1937 00057 75440 03/04/15 01:15 PM
CASHIER SELF CHECK OUT - SC0157
26.97



Handwritten:
CASH CARD
3/4/15
100-015-640
#1226

to get full details on this program

sears®

Sears
SCHERERVILLE HINWP 05291
1150 US HIGHWAY 41
SCHERERVILLE, IN 46375-0000
219-322-1296



sears®

SALSCHECK # 052919029622

sears®

HOME:
VILLAGE OF SAUK VILLAGE

sears®

TRAN# PG/STORE REG# ASSOC#
9622 10 05291 902 1677
RINGING ASSOC # 1677
SALE
71 33183 7000 WATT, MDS 899.99
SUBTOTAL 899.99
TAX 07.000% 63.00

sears®

sears®

TYPE: VISA
#: W3906/0
TH CODE: 671797/E
1/15 VISA TOTAL 962.99
5939-7809-6138-0919-0619

sears®

I AGREE TO THE TERMS OF
MY CARDHOLDER AGREEMENT.

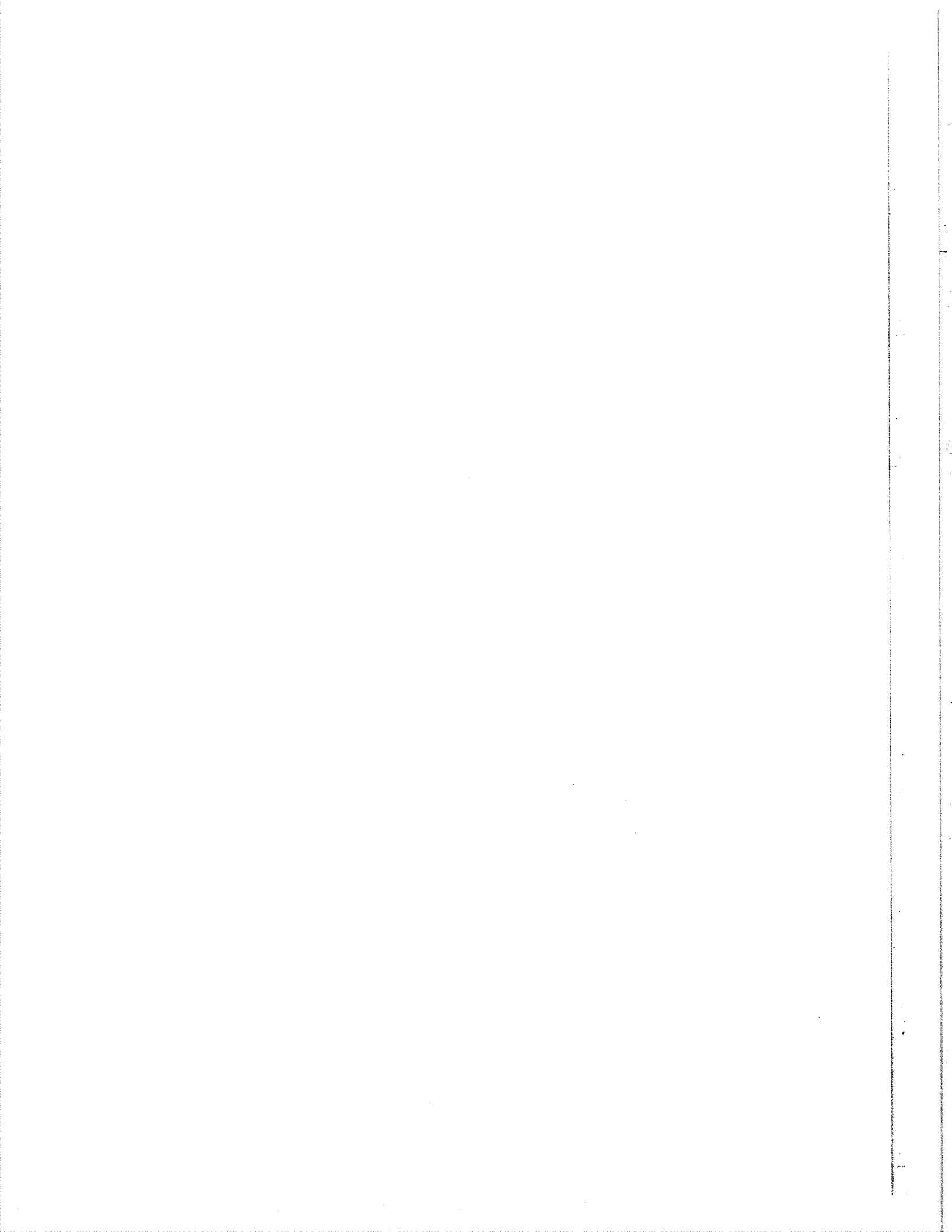
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SEARS
HARDWARE STORES
VALUE YOUR FEEDBACK

TELL US ABOUT YOUR EXPERIENCE AND YOU

sears®

Craftsman Portable Generator
3/11/15
500-000-660





BL ACCT 00001230-10000000
 VILLAGE OF SAUK VILLAGE
 Account Number: #### #### #### 4939
 Page 1 of 3



Account Summary

Billing Cycle		04/28/2015
Days In Billing Cycle		30
Previous Balance		\$1,077.34
Purchases	+	\$1,605.82
Cash	+	\$0.00
Special	+	\$0.00
Credits	-	\$0.00
Payments	-	\$1,077.34-
Other Charges	+	\$0.00
Finance Charges	+	\$0.00
NEW BALANCE		\$1,605.82

Credit Summary

Total Credit Line	\$3,000.00
Available Credit Line	\$1,394.18
Available Cash	\$0.00
Amount Over Credit Line	\$0.00
Amount Past Due	\$0.00
Disputed Amount	\$0.00

Account Inquiries

Call us at: (800) 221-5920
 Lost or Stolen Card: (866) 839-3485

Write us at PO BOX 31535, TAMPA, FL 33631-3535

Payment Summary

NEW BALANCE	\$1,605.82
MINIMUM PAYMENT	\$1,605.82
PAYMENT DUE DATE	05/26/2015

NOTE: Grace period to avoid a finance charge on purchases, pay entire new balance by payment due date. Finance charge accrues on cash advances until paid and will be billed on your next statement.

Corporate Activity

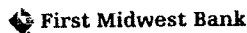
TOTAL CORPORATE ACTIVITY				\$1,077.34-
Trans Date	Post Date	Reference Number	Transaction Description	Amount
04/23	04/23	7486522511211111111111	AUTO PMT FROM ACCT	\$1,077.34-

Important Information About Your Account

IT IS NOT NECESSARY TO MAIL YOUR PAYMENT. YOUR ACCOUNT WILL AUTOMATICALLY BE PAID BY A DIRECT DEBIT OF YOUR CHECKING OR SAVINGS ACCOUNT. THE DEBIT THIS MONTH IS \$1605.82.

PLEASE DETACH COUPON AND RETURN PAYMENT USING THE ENCLOSED ENVELOPE - ALLOW UP TO 7 DAYS FOR RECEIPT

FIRST MIDWEST BANK
 PO BOX 565
 JOLIET IL 60434-0565



Account Number

4939

Check box to indicate name/address change on back of this coupon

AMOUNT OF PAYMENT ENCLOSED

Closing Date	New Balance	Total Minimum Payment Due	Payment Due Date
04/28/15	\$1,605.82	\$1,605.82	05/26/15

\$

BL ACCT 00001230-10000000
 VILLAGE OF SAUK VILLAGE
 21801 TORRENCE AVE
 SAUK VILLAGE IL 60411



1683

MAKE CHECK PAYABLE TO:

BANKCARD PROCESSING CENTER
 PO BOX 31021
 TAMPA FL 33631-3021

21 4865 2259 4521 4939 00160582 00160582 0



Cardholder Account Summary					
Trans Date	Post Date	Plan Name	Reference Number	Description	Amount
04/02	04/03	PPLN01	24492155092740250054530	SQ SPARTAN MEDICAL 877-417-4551 VA	\$1,249.56
04/10	04/12	PPLN01	24164075100418167690400	USPS 16154804129363769 SAUK VILLAGE IL	\$15.37
MOHAN RAO ##### 4947					
Payments & Other		Credits		Total Activity	
\$0.00		\$0.00		\$1,264.93	
Purchases & Other		Cash Advances			
\$1,264.93		\$0.00			

Cardholder Account Summary					
Trans Date	Post Date	Plan Name	Reference Number	Description	Amount
04/21	04/23	PPLN01	24445745112100426874828	OFFICEMAX/OFFICE DEPOT668	\$313.12
04/21	04/23	PPLN01	24445745112100426874901	HOMEWOOD IL OFFICE DEPOT #491 CALUMET CITY IL	\$27.77
KEVIN J WELLER ##### 3906					
Payments & Other		Credits		Total Activity	
\$0.00		\$0.00		\$340.89	
Purchases & Other		Cash Advances			
\$340.89		\$0.00			

Finance Charge Summary / Plan Level Information									
Plan Name	Plan Description	FCM ¹	Average Daily Balance	Periodic Rate *	Corresponding APR	Finance Charges	Effective APR Fees **	Effective APR	Ending Balance
PPLN01	PURCHASE	G	\$0.00	0.77083%(M)	9.2500%(V)	\$0.00	\$0.00	0.0000%	\$1,605.82
CPLN01	CASH	A	\$0.00	0.77083%(M)	9.2500%(V)	\$0.00	\$0.00	0.0000%	\$0.00

* Periodic Rate (M)=Monthly (D)=Daily
 ** Includes cash advance and foreign currency fees
¹ FCM = Finance Charge Method
 (V) = Variable Rate If you have a variable rate account the periodic rate and Annual Percentage Rate (APR) may vary.
 Days in Billing Cycle: 30
 APR = Annual Percentage Rate

SAUK VILLAGE STATION
 SAUK VILLAGE, Illinois
 604117300
 1615500413-0099
 04/10/2015 (708)757-3876 11:53:42 AM

===== Sales Receipt =====

Product Description	Sale Unit Qty	Final Price
DEERFIELD IL 60015-5615		\$12.47
Zone-1		
Media Mail		
21 lb. 7.6 oz.		
Expected Delivery: Mon 04/13/15		
@@ Signature Confirmation		\$2.90
USPS Signature Tracking #:		
23010370000027102479		

Issue Postage: \$15.37
Return old 2013/2014
 Total: *financial* \$15.37
 Paid by: *back to Auditors.*
 VISA \$15.37
 Account #: XXXXXXXXXXXX4947
 Approval #: 633986
 Transaction #: 40
 23902936376
 100-005-706.000 *Am*
 @@ For tracking or inquiries go to
 USPS.com or call 1-800-222-1811.

Order stamps: usps.com/shop or
 call 1-800-222-1811. Go to
 usps.com/ship to print
 shipping labels with postage. For
 other information call
 1-800-ASK-USPS.

SIGNATURE CONFIRMATION NUMBER:
 2301 0370 0000 2710 2479

CHICAGO HEIGHTS IL 60411
 APR 10 2015
 Postmark

Postage and Signature Confirmation fees must be paid before mailing.

POSTAL CUSTOMER:
 Keep this receipt. For inquiries:
 Access Internet web site at
 www.usps.com
 or call 1-800-222-1811

Package Services
 Priority Mail

N.A. BURNHAM, MARY, COPPERSON



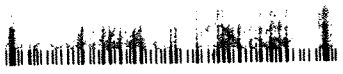
6687-02-1379-7

Survey Code:

Visit www.officemaxfeedback.com and enter the survey code below.

Participate in our online customer survey and receive a coupon for \$10 off your next qualifying purchase of \$50 or more on office supplies, furniture and more. (Excludes Technology. Limit 1 coupon per household/business.)

WE WANT TO HEAR FROM YOU!



149D WKJ7 N85D

Survey Code:

Visit www.officedepot.com/feedback and enter the survey code below.

Participate in our online customer survey and receive a coupon for \$10 off your next qualifying purchase of \$50 or more on office supplies, furniture and more. (Excludes Technology. Limit 1 coupon per household/business.)

WE WANT TO HEAR FROM YOU!

Shop online at www.officedepot.com

OfficeMax

Total: 313.12
Subtotal: 283.93
Tax: 23.19
You Pay: 87.99

2 INK,LC103BKS,B 26.99
9 INK,HP 96/97,B 87.99
You Pay: 53.985

3 INK,LC101,BLAC 15.99
159 INK,LC103BKS,B 31.985
You Pay: 115.98

Product ID Description Total

04/21/2015 15.1.8
STR 6687 REG2 TRN 1379 EMP 745738
1:09 PM
Homewood, IL 60430

OfficeMax

OfficeMax

Office DEPOT

Shop online at www.officedepot.com

Total: 27.77
Subtotal: 25.48
Tax: 2.29
You Pay: 16.79

335 Folders File L 8.69
03 FLDR,LGL,100BX 16.79
Total: 27.77

Product ID Description Total

04/21/2015 15.1.8
STR 6687 REG2 TRN 1379 EMP 745738
1:09 PM
Homewood, IL 60430

Office DEPOT

OfficeMax

Handwritten notes:
340.89 total
300-000-610
4/24/15
Credit CARD

4/2/2015

Square - Invoice #551V2KN0EMYQ6

4/2015

PAID ON APRIL 2, 2015

✔ Thank you, invoice paid

Want to send your own invoices?

Try Square Invoices today and process your first \$1000 in sales for free.

100,000, 376.006 Aw



Spartan Medical and Consulting LLC
SAUK VILLAGE POLICE DEPARTMENT

To: Sauk Village PD ATTN: Mohan Rao
rsailsbery@saukville.org

April 2, 2015

Invoice #14MAR2015-001

We appreciate your business. If you are tax exempt, please provide your tax exempt certificate.

IFAK Bag OD Green x 12	\$123.00
MET Tourniquet x 12	\$294.96
H Bandage Pressure Dressing x 12	\$80.88
4" Ace Bandage x 12	\$18.72
Fox Chest Seal x 12	\$252.00
Celox Z fold x 12	\$480.00

Subtotal

\$1,249.56

Aw

\$1,249.56

Total

SPARTAN MEDICAL AND CONSULTING LLC
14912 Grassy Knoll Ct, Woodbridge, VA 22193
frank@spartanmac.com
571-480-0006

To: Mohan Rao
From: Deputy Chief Rebecca Sailsbery
Subject: Enbridge Grant Update
Date: April 1, 2015

Dear Mohan Rao,

On today's date I reached out to Blake Iselin, CEO of Spartan Medical & Consulting. He advised the trauma kits have not been paid for. He advised no charges were placed on the credit card.

I explained the \$1,250.00 limit to him and he is going to reduce the number to suit the allocated amount. He will email you and me an invoice tonight. You then can place the charge through on the credit card. Blake anticipates the trauma kit supplies to arrive at his location approximately thirty days after payment is made. He will then ship them to the Sauk Village Police Department. I will then contact Enbridge to send out their employee to photograph the kits to complete all of the 2014 grant requirements. After the 2014 grant requirements are completed I will apply for the 2015 grant.

Sincerely,

Deputy Chief Rebecca Sailsbery

4/1/2015

2014 Enbridge Grant & 2015 Illinois Liquor Control Commission - Finance Director Mohan Rao

2014 Enbridge Grant & 2015 Illinois Liquor Control Commission Grant

Sergeant Rebecca Salsbery

Wed 4/1/2015 4:52 PM

Inbox

to: Mayor David Hanks <dthanks@saukville.org>; Trustee Derrick Burgess <dburgess@saukville.org>; Trustee Ed Myers <emyers@saukville.org>; Trustee Lynda Washington-House <lwsashington@saukville.org>; Trustee John Poskin <jposkin@saukville.org>; Village Clerk Debbie Williams <dwilliams@saukville.org>; Finance Director Mohan Rao <mrao@saukville.org>; Public Works Director Kevin Weller <kweller@saukville.org>; Trustee Jeffrey Morden <jmorden@saukville.org>; Fire Chief Al Stoffregen <astoffregen@saukville.org>; Sherry Jasinski <sjasinski@saukville.org>; SVSEMA Director Art Johnson <ajohnson@saukville.org>;

1 Attachment

2014_Enbridge Grant Follow up Mohan Rao.docx

Mr. Mohan Rao,
Dear Mr. Mohan Rao,

Please review the following information:

2015 Illinois Liquor Control Commission Grant

As I mentioned to you a couple of weeks ago our insurance certificate was expired for Workers compensation and our property insurance was going to expire on March 27, 2015. I made a request to Valary Lewis, from Owens Insurance, to send me a new certificate of insurance so I could send it in with the 2015 Illinois Liquor Control Commission Grant. This did not happen before the grant deadline. I was forced to send in the grant with the expired insurance certificate as I mentioned to you before. Both Chief Holevis and I received a grant denial notification email due to the expired certificate of insurance. Since then, I have obtained the new certificate of insurance from Owens Insurance and have already re-submitted the document to the Illinois Liquor Control Commission. This grant application is now back in good standing.

2014 Enbridge Grant

On today's date I reached out to Blake Iselin, CEO of Spartan Medical & Consulting. He advised the trauma kits have not been paid for. He advised no charges were placed on the credit card. I explained the \$1,250.00 limit to him and he is going to reduce the number to suit the allocated amount. He will email you and me an invoice tonight. You then can place the charge through on the credit card. Blake anticipates the trauma kit supplies to arrive at his location approximately thirty days after payment is made. He will then ship them to the Sauk Village Police Department. I will then contact Enbridge to send out their employee to photograph the kits to complete all of the 2014 grant requirements. After the 2014 grant requirements are completed I will apply for the 2015 grant

Thank you in advance,

Deputy Chief Rebecca Salsbery

IFAK order

Finance Director Mohan Rao <mrao@saukvillage.org>; Sergeant Rebecca Sailsbery <rsailsbery@saukvillage.org>;

Director Rao,

I sent you an invoice for the IFAK items for the Police department and it still has not been paid. I am just following up, there is no rush to make the order. Thanks.

Respectfully,

Blake Iselin
Chief Operating Officer
Spartan Medical & Consulting LLC
14912 Grassy Knoll Ct.
Woodbridge, VA 22193

Office: +1-571-480-0006
Email: Blake@Spartanmac.com

This e-mail is confidential and is legally privileged. If you have received it in error, you are on notice of its status. Please notify us immediately by reply e-mail and then delete this message from your system. Please do not copy it or use it for any purposes, or disclose its contents to any other person. To do so could violate state and Federal privacy laws. Thank you for your cooperation. Please contact Spartan Medical & Consulting LLC I at +1-571-480-0006 if you need assistance.

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Re: Police Dept IFAK grant order.

Re: Police Dept IFAK grant order. - Finance Director Mohan Rao

2/20/2015

Blake Iselin <blake@spartanmac.com>

Thu 2/19/2015 4:58 PM

Inbox

To: Blake Iselin <blake@spartanmac.com>;

Cc: Finance Director Mohan Rao <mrao@saukvilleage.org>; Sergeant Rebecca Salisbury <rsalisbery@saukvilleage.org>;

I am following up to see if a check was sent for the IFAKs you wish to order. Thanks.

Respectfully,

Blake Iselin
Chief Operating Officer
Spartan Medical & Consulting LLC
14912 Grassy Knoll Ct.
Woodbridge, VA 22193
Mobile: [REDACTED]
Office: +1-571-480-0006
Email: Blake@spartanmac.com

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On Jan 26, 2015, at 8:11 PM, Blake Iselin <blake@spartanmac.com> wrote:

Director Rao,

I spoke with Deputy Chief Salisbury about the order she wishes to place using the grant funding. Attached is an invoice for the kits. If you would like to pay by check please send it to the address on the invoice and make it out to Spartan Medical and Consulting LLC. If you would like to pay with a credit card let me know and I will send you a request to pay with your card. If you need anything else please let me know. Thank you.

Respectfully,

Blake Iselin
Chief Operating Officer
Spartan Medical & Consulting LLC
14912 Grassy Knoll Ct.
Woodbridge, VA 22193
Office: +1-571-480-0006
Email: Blake@spartanmac.com

<https://outlook.office365.comowa/projection.aspx>

1/23/2015

FW: Enbridge Grant-\$1,250.00 - Finance Director Mohan Rao

FW: Enbridge Grant-\$1,250.00

Sergeant Rebecca Sailsbery


WED 12/23/2015 5:55 PM

Hi Blake,

blake@spartanmac.com <blake@spartanmac.com>; Finance Director Mohan Rao <mrao@saukvillage.org>;

Dear Blake Iselin
Spartan Medical & Consulting
blake@spartanmac.com

I am sending the email you requested during our phone conversation today, January 21, 2015. Again the Sauk Village Police Department is interested in purchasing black in color Trauma First Aid Kits. The members of the Sauk Village Police Department are not paramedics so syringes are not necessary. We discussed an average price of \$170.00 per unit and the cost of shipping. I would like to purchase as many as I can for the \$1,250.00 mentioned earlier. After you review this email please respond with the number per unit and shipping cost. We are Tax exempt. Our Illinois Department of Revenue tax exemption identification number is:

-  Tax exempt number (Village of Sauk Village, IL)

Please send your email response to the Village Finance Director Mohan Rao at:

- mrao@saukvillage.org

This will ensure payment is made in a timely manner. Please see the forwarded email for verification. If there is anything further you require please let me know.

Sincerely,

Deputy Chief Rebecca Sailsbery
rsailsbery@saukvillage.org
Sauk Village Police Department
21701 Torrence Ave
Sauk Village, IL 60411

From: Finance Director Mohan Rao
Sent: Friday, November 14, 2014 1:04 PM
To: Sergeant Rebecca Sailsbery
Cc: Police Chief Timothy Holevis
Subject: Enbridge Grant-\$1,250.00

Hi Becky,

If you want to spend the Enbridge Grant the Police Dept. received, please do the following.

1/23/2015

FW: Enbridge Grant-\$1,250,00 - Finance Director Mohan Rao

Call in the order and give me the name of the vendor and the amount of order amount. Have the vendor e-mail me the bill to my e-mail address, so that I can make the payment.

Let me know if you have any questions.

Thanks,

Mohan



BL ACCT 00001230-10000000
 VILLAGE OF SAUK VILLAGE
 Account Number: #### #### #### 4939
 Page 1 of 3



Account Summary

Billing Cycle		05/29/2015
Days In Billing Cycle		31
Previous Balance		\$1,605.82
Purchases	+	\$770.41
Cash	+	\$0.00
Special	+	\$0.00
Credits	-	\$0.00
Payments	-	\$1,605.82
Other Charges	+	\$0.00
Finance Charges	+	\$0.00
NEW BALANCE		\$770.41

Credit Summary

Total Credit Line	\$3,000.00
Available Credit Line	\$2,229.59
Available Cash	\$0.00
Amount Over Credit Line	\$0.00
Amount Past Due	\$0.00
Disputed Amount	\$0.00

Account Inquiries

Call us at: (800) 221-5920
 Lost or Stolen Card: (866) 839-3485

Write us at PO BOX 31535, TAMPA, FL 33631-3535

Payment Summary

NEW BALANCE	\$770.41
MINIMUM PAYMENT	\$770.41
PAYMENT DUE DATE	06/23/2015

NOTE: Grace period to avoid a finance charge on purchases, pay entire new balance by payment due date. Finance charge accrues on cash advances until paid and will be billed on your next statement.

Corporate Activity

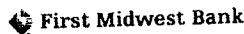
Trans Date	Post Date	Reference Number	Transaction Description	TOTAL CORPORATE ACTIVITY
05/24	05/24	748652251421111111111111	AUTO PMT FROM ACCT	\$1,605.82- Amount \$1,605.82-

Important Information About Your Account

IT IS NOT NECESSARY TO MAIL YOUR PAYMENT. YOUR ACCOUNT WILL AUTOMATICALLY BE PAID BY A DIRECT DEBIT OF YOUR CHECKING OR SAVINGS ACCOUNT. THE DEBIT THIS MONTH IS \$770.41.

PLEASE DETACH COUPON AND RETURN PAYMENT USING THE ENCLOSED ENVELOPE - ALLOW UP TO 7 DAYS FOR RECEIPT

FIRST MIDWEST BANK
 PO BOX 565
 JOLIET IL 60434-0565



Account Number
 #### #### #### 4939

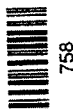
Check box to indicate name/address change on back of this coupon

AMOUNT OF PAYMENT ENCLOSED

Closing Date	New Balance	Total Minimum Payment Due	Payment Due Date
05/29/15	\$770.41	\$770.41	06/23/15



BL ACCT 00001230-10000000
 VILLAGE OF SAUK VILLAGE
 21801 TORRENCE AVE
 SAUK VILLAGE IL 60411



758

MAKE CHECK PAYABLE TO:

BANKCARD PROCESSING CENTER
 PO BOX 31021
 TAMPA FL 33631-3021

21 4865 2259 4521 4939 00077041 00077041 8



BL ACCT 00001230-1000000
 VILLAGE OF SAUK VILLAGE
 Account Number: ##### 4939
 Page 3 of 3

Cardholder Account Summary		Cardholder Account Detail	
Trans Date	Post Date	Plan Name	Reference Number
05/08	05/10	PPLN01	2444746512898000745410
05/19	05/20	PPLN01	24332395140006932491294
Amount		Description	
\$142.11		CHICAGO BADGE COMPANY CHICAGO IL	
\$75.00		IL AS. OF CHIEFS POLICE 217-5233765 IL	
Total Activity			
\$217.11			

Cardholder Account Summary		Cardholder Account Detail	
Trans Date	Post Date	Plan Name	Reference Number
04/29	04/30	PPLN01	24071055119985335165187
04/30	04/30	PPLN01	24270745120465300940601
04/30	05/01	PPLN01	24628015120000136871113
04/30	05/03	PPLN01	24323005121254542010190
Amount		Description	
\$8.00		CMCO - STRATTON SPRINGFIELD IL	
\$5.25		PRAIRIECAPITALCONVCTR SPRINGFIELD IL	
\$36.00		PILOT Bloomington IL	
\$80.14		SOUTH ENTERPRISES, LLC SPRINGFIELD IL	
Total Activity			
\$129.39			

Cardholder Account Summary		Cardholder Account Detail	
Trans Date	Post Date	Plan Name	Reference Number
04/30	05/03	PPLN01	24445745121100618828995
05/12	05/13	PPLN01	24275395133399200714754
05/14	05/15	PPLN01	24692165134000779371320
05/21	05/22	PPLN01	24692165141000023615184
Amount		Description	
\$156.19		OFFICE DEPOT #504 HIGHLAND IN	
\$83.98		RUSSO HARDWARE - SCHILLER	
\$35.00		IN. B&F FABRICATING, INC. 708-7587878 IL	
\$148.74		Norton - NP1150134970 NORTON.COM/NS CA	
Total Activity			
\$423.91			

Finance Charge Summary / Plan Level Information									
Plan Name	Plan Description	FCM	Average Daily Balance	Periodic Rate	Corresponding APR	Finance Charges	Effective APR	Fees	Ending Balance
PPLN01	PURCHASE	G	\$0.00	0.77083%(M)	9.2500%(V)	\$0.00	0.0000%	\$0.00	\$770.41
CPLN01	CASH	A	\$0.00	0.77083%(M)	9.2500%(V)	\$0.00	0.0000%	\$0.00	\$0.00
Days in Billing Cycle: 31 APR = Annual Percentage Rate * Periodic Rate (M)=Monthly (D)=Daily ** Includes cash advance and foreign currency fees † FCM = Finance Charge Method (V) = Variable Rate If you have a variable rate account the periodic rate and Annual Percentage Rate (APR) may vary.									

CHICAGO BADGE & INSIGNIA CO.
 9851 S. WINCHESTER AVE.
 CHICAGO, IL 60643
 TEL: 1-773-445-1876
 FAX: 1-773-445-1816

Invoice

DATE	Invoice
5/8/15	13564

BILL TO
VILLAGE OF SAUK VILLAGE ATTN: MOHAN RAO 21801 S. TORRENCE SAUK VILLAGE, IL 60411

SHIP TO
VILLAGE OF SAUK VILLAGE ATTN: MOHAN RAO 21801 S. TORRENCE SAUK VILLAGE, IL 60411

P.O. NO.	TERMS	SHIP DATE	SHIP VIA
	Net 30	5/8/15	FEDEX GRD

ITEM	DESCRIPTION	QTY	RATE	AMOUNT
080	BADGE, B953, GOLD PLATE, VILLAGE ADMINISTRATOR, W/SAFETY CATCH	1	67.60	67.60
080	BADGE, B953, GOLD PLATE, DIRECTOR OF PUBLIC SAFETY, W/SAFETY CATCH	1	67.60	67.60
001	SHIPPING & HANDLING		6.91	6.91

PAID: VISA:
 XXXX-XXXX-XXXX-4947
 (5/8/15)
 100,025.610.000 Au

CHICAGO BADGE COMPANY
 9851 S. WINCHESTER AVE
 CHICAGO, IL 60643
 TEL: 445-1876

Item ID: 444746110361961
 Term ID: 2101

Sale

VISA
 XXXXXXXXXXXXX4947
 Entry Method: Manual
 Apprvd: Online Batch#: 000001
 05/08/15 13:58:57
 Inv#: 00000001 Appr Code: 685191
 Total: \$ 142.11

Customer Copy

THANK YOU FOR VISITING

THANK YOU FOR YOUR BUSINESS

\$142.11

CHICAGO BADGE & INSIGNIA CO.
 9851 S. WINCHESTER AVE.
 CHICAGO, IL 60643
 TEL: 1-773-445-1876
 FAX: 1-773-445-1816

Invoice	13564
DATE	5/8/15

SHIP TO	VILLAGE OF SAUK VILLAGE ATTN: MOHAN RAO 21801 S. TORRENCE SAUK VILLAGE, IL 60411
---------	---

BILL TO	VILLAGE OF SAUK VILLAGE ATTN: MOHAN RAO 21801 S. TORRENCE SAUK VILLAGE, IL 60411
---------	---

ITEM	DESCRIPTION	QTY	RATE	AMOUNT
080	BADGE, B953, GOLD PLATE, VILLAGE ADMINISTRATOR, W/SAFETY CATCH	1	67.60	67.60
080	BADGE, B953, GOLD PLATE, DIRECTOR OF PUBLIC SAFETY, W/SAFETY CATCH	1	67.60	67.60
001	SHIPPING & HANDLING		6.91	6.91
Total				\$142.11

THANK YOU FOR YOUR BUSINESS

P.O. NO. _____
 TERMS Net 30
 SHIP DATE 5/8/15
 SHIP VIA FEDEX GRD

(5/8/15)
 XXXX-XXXX-XXXX-4947
 ID: U15A

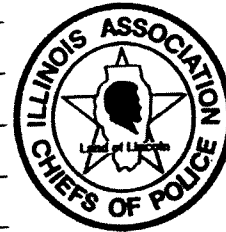
Invoice

ONLINE JOB POSITIONS AD SUBMISSION FORM (WWW.ILCHIEFS.ORG)

Department/Agency: Sauk Village, Illinois

Position Title: Chief of Police

Description: On Line. I have attached a copy
there of with this document.



Starting Salary: \$90,000 Top Salary: _____

Your IL statewide location (please check one of the following): Northern Greater Chicago Central Southern

Educational Requirement(s): _____

Other Requirement(s): 100.025, 720,000 Ann \$75.00

Agency Contact: JW Fairman, Jr., Village Manager/Director of Public Safety

Address: 21801 Torrence Avenue

City/State/Zip: Sauk Village, IL

Telephone (with area code): 708-753-5122 Fax (w/area): 708-758-1634

E-Mail Address: JWFairman@saukvillage.org

Website Address if available: WWW.SAUKVILLAGE.ORG

Closing Date for Application to Agency: 06/15/2015

AD POSTING RATES:

- ❖ ILACP Members: Cost of an ad is \$50 per month (minimum length) or \$500 standing-ad per year.
 - ❖ Non-Member Law Enforcement Agencies (Illinois and OUT-OF-STATE): Cost of ad is \$75 per month or \$750 standing-ad annually.
 - ❖ Other Non-Members, Private Consultants, etc.: \$100 per month or \$1000 standing-ad annually.
 - ❖ Multiple vacancies or ads are 15% off if running 2 or more concurrently.
- Length of Time for Ad: _____

PAYMENT INFORMATION:

Payment Type: My Check in the Amount of \$ _____ is Enclosed.

Please Charge My Credit Card in the amount of \$ 75.00/yr

Credit Card Type (MasterCard or VISA or Discover only): Expiration Date: (10/2015) 10/15

Credit Card Number: [REDACTED] 3-digit code on card back: [REDACTED]

Name on Credit Card: Mohan Rao Village of Sauk Village Signature: [REDACTED]

Zip Code: _____

Contact Linda Kunz, Executive Assistant, at 217-523-3765 if you have any questions or would like a discount rate for multiple vacancies, extended or standing ads. All Ads must be paid or pre-arranged in advance of placement on website. You may Email to lkunz@ilchiefs.org or FAX this form to 217-523-8352. (FPP/UBIT-2:REV 3/14)

05/18 15:31
912175238352
00:01:10
02
OK
STANDARD

DATE, TIME
FAX NO./NAME
DURATION
PAGE(S)
RESULT
MODE

TIME : 05/18/2015 15:32

TRANSMISSION VERIFICATION REPORT

The Village of Sauk Village is accepting applications for the position of Chief of Police. Interested candidates must have a minimum of a Bachelor's degree and 5 years supervisory experience in law enforcement at the level of sergeant or above; or equivalent combination of education and experience. Salary range: \$90,000.00. The job description and qualifications can be found on www.saukvillage.org. Submit a resume and a minimum of three references by the deadline of June 15, 2015 to:

Village of Sauk Village
21801 S. Torrence Avenue
Sauk Village, IL 60411
Attn: JW Fairman
Village Administrator and Director of Public
Safety

Office DEPOT OfficeMax

OFFICE DEPOT STORE 504
10332 Indianapolis Blvd
Highland, IN 46322
(219) 934-9034
0/2015 15.18
504 REG1 TRN 9419 EMP 743193

Item ID	Description	Total
25	STRP, PSTR, 48PK	9.99 S
334	FUSIONTM 1100L	107.99 S
789	POUCH, LAMINATI	27.99 S
Subtotal:		145.97
Tax:		10.22
Total:		156.19
Visa 3906:		156.19

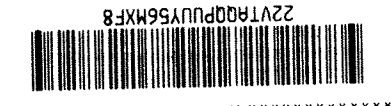
Shop online at www.officedepot.com

***** WE WANT TO HEAR FROM YOU! *****

Participate in our online customer survey and receive a coupon for \$10 off your next qualifying purchase of \$50 or more. Includes technology, furniture and more. (household/business.)

www.officedepot.com/feedback and enter the survey code below.

Survey Code:
P496 GE59 YEPN



Now one company. Now great savings. Office Depot, Inc., including its subsidiary OfficeMax Incorporated

Handwritten notes:
 4/30/15
 310-000-610
 #1234

Handwritten note:
 Credit CARD

Receipt Confirmation



donotreply@intuit.com

Thu 5/14/2015 8:25 AM

To: Public Works Director Kevin Weller,

*Shut off
lay Heads LEPAIR*

B&F FABRICATIN

STEGER, IL 604

(708) 758-7878

05/14/2015 08:24
AM

Village of Sauk Village
1 @ \$35.00

Total

Visa **** 3906

*#KFW
300-000-712 5/27/15*

Credit CARD

Thank you for your business

Subject: Your Norton Order Confirmation For Order #NP1150134970
Date: 5/21/2015 10:35:05 A.M. Central Daylight Time
From: orders@mail.norton.com
Reply-to: noreply@mail.norton.com
To: bos68@aol.com



Thank you for buying Norton.

Hi Kevin Weller.

We have received your payment of \$ 148.74 for your Norton subscription. Order Number NP1150134970. Here is what you must do next to get protected.

download your Norton product by clicking on the "Get Started" button or go to norton.com/setup

allow the instructions to install your Norton product on your PC
You will find your order details below, as well as in your Norton Account.

If you have any questions about your purchase, please visit Norton Support.

— Your Norton Team

Order Number: NP1150134970

Name: Kevin Weller

Payment Method: VISA ending in 3906

Billing ZIP: 60411

Product Information

Norton 360

Product Key: TCFK3HJD6H64FHWWK6TY24K4P

Serial Number: VGJX6FV2B3YD

2 Year Subscription for up to 3 PCs

Subscription Service Renewal - Qty: 1

Note: Any days left on your current subscription will carry over to your new upgrade product based on activation date (not purchase date). To get the most time from your upgraded product, we recommend activating immediately.

Supports Windows 7 / XP / XP Pro / Vista

Includes Norton Virus Protection Promise

Price: \$ 139.99

100% Guarantee - Virus Removal Service

Call 800-683-0854 in the next 30 days to redeem Norton Services - Qty: 1

Price: \$ 0.00

Subtotal: \$ 139.99

Tax (6.25%): \$ 8.75

Total: \$ 148.74

Norton Automatic Renewal Service

Norton Subscription includes an automatic renewal feature. At the end of your initial subscription term, your subscription will be renewed and you authorized Symantec to charge the then-current renewal price (plus applicable taxes) to Credit Card for your Norton Subscription automatically each year pri

Thursday, May 21, 2015 AOL: Bos68

Credit CARD

#17W
300-000-726
5/22/15

when it expires.

You will receive an email notification, detailing the renewal fee, each year before your subscription expires and before any charges occur to Credit Card we have on record.

At any time you may change your subscription settings, including cancelling your automatic renewal at manage.norton.com or by contacting Norton Customer Service.

If you opt-out of automatic renewal, you will not be charged anymore, and your Norton Subscription will still be active for the remaining term of the subscription you have already paid for.

*To be eligible, you must purchase, renew, or upgrade your Norton subscription directly from Symantec, or subscribe to the Norton Automatic Renewal Service online. If a Symantec service representative is unable to remove a virus from your device, then you may receive a full refund on the actual price paid for the Norton subscription, or if a Norton bundle, the total Norton bundle price paid (net of any discounts or refunds received and less any shipping, handling and applicable taxes, except in certain states and countries where shipping, handling and taxes are refundable) and only for the current paid subscription service period for that subscription or subscription bundle. The Norton subscription must be installed and activated on your device prior to the time it is infected by a virus. The refund DOES NOT apply to any damages incurred as a result of viruses. Terms and Conditions apply. See Norton.com/guarantee for details.

[Privacy](#) | [Download Help](#) | [Support](#) | [Terms of Sale](#)

You have received this email as a service message from Symantec regarding the status of your Norton product subscription

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Symantec Corporation, 350 Ellis Street, Mountain View, CA 94043, United States

I N V O I C E

DATE: 5/12/2015 3:34:44 PM

INVOICE #: 2439083
 CUSTOMER#: 1226988
 CP: Ismael L
 LOCATION: 1

PHONE #: (708)757-2420
 CELL #:
 FAX #:
 P.O.#: al
 TERMS: Cash
 SALES ORDER#: 2613249
 SALES TYPE#: Sales

RUSSO'S POWER EQUIPMENT INC
 9525 W. Irving Park Rd
 Schiller Park, IL 60176
 Phone #: (847)678-9525
 Fax #: (847)678-0705

SHP TO
 VILLAGE OF SAUK VILLAGE
 21801 TORRENSE
 SAUK VILLAGE, IL 60411

*For more
 blades
 SHAMPAIN*

BILL TO 1226988
 VILLAGE OF SAUK VILLAGE
 21801 TORRENSE
 SAUK VILLAGE, IL 60411

MFR	PRODUCT NUMBER	DESCRIPTION	SOLD	B/O	PRICE	NET	TOTAL
****	08	8" Ruby Grnd Wheel	2	0	\$54.99	\$41.99	\$83.98
RBG	1208	UPS SHIPPING	1	0	\$0.00	\$0.00	\$0.00

Husqvarna professional products, global leader in outdoor power equipment. From zero turn's to chainsaws, Husqvarna offers a complete line of outdoor power equipment. Husqvarna, Ready When you are!

credit card

*#1226988
 /06-015-660-8/15
 6/8/15*

SUBTOTAL: \$83.98
 TAX: \$0.00
 INVOICE TOTAL: \$83.98
 AMOUNT DUE: \$0.00
 Pmt Ideal Credit Car AUTH #: 642889
 XXXXXX3906
 Credit
 VS

SIGN X
 BUYER AGREES TO PAY TOTAL AMOUNT ABOVE ACCORDING TO CARDHOLDERS AGREEMENT WITH ISSUER

Picked Up By: _____



BL ACCT 00001230-10000000
 VILLAGE OF SAUK VILLAGE
 Account Number: #### #### 4939
 Page 1 of 3



Account Summary

Billing Cycle		06/28/2015
Days In Billing Cycle		30
Previous Balance		\$770.41
Purchases	+	\$618.80
Cash	+	\$0.00
Special	+	\$0.00
Credits	-	\$0.00
Payments	-	\$770.41-
Other Charges	+	\$0.00
Finance Charges	+	\$0.00
NEW BALANCE		\$618.80

Credit Summary

Total Credit Line	\$3,000.00
Available Credit Line	\$2,381.20
Available Cash	\$0.00
Amount Over Credit Line	\$0.00
Amount Past Due	\$0.00
Disputed Amount	\$0.00

Account Inquiries

Call us at: (800) 221-5920
 Lost or Stolen Card: (866) 839-3485

Write us at PO BOX 31535, TAMPA, FL 33631-3535

Payment Summary

NEW BALANCE	\$618.80
MINIMUM PAYMENT	\$618.80
PAYMENT DUE DATE	07/23/2015

NOTE: Grace period to avoid a finance charge on purchases, pay entire new balance by payment due date. Finance charge accrues on cash advances until paid and will be billed on your next statement.

Corporate Activity			TOTAL CORPORATE ACTIVITY	\$770.41-
Trans Date	Post Date	Reference Number	Transaction Description	Amount
06/23	06/23	748652251731111111111111	AUTO PMT FROM ACCT [REDACTED]	\$770.41-

Important Information About Your Account

IT IS NOT NECESSARY TO MAIL YOUR PAYMENT. YOUR ACCOUNT WILL AUTOMATICALLY BE PAID BY A DIRECT DEBIT OF YOUR CHECKING OR SAVINGS ACCOUNT. THE DEBIT THIS MONTH IS \$618.80.

PLEASE DETACH COUPON AND RETURN PAYMENT USING THE ENCLOSED ENVELOPE - ALLOW UP TO 7 DAYS FOR RECEIPT

FIRST MIDWEST BANK
 PO BOX 565
 JOLIET IL 60434-0565



Account Number
 #### #### 4939

Check box to indicate name/address change on back of this coupon

AMOUNT OF PAYMENT ENCLOSED

Closing Date	New Balance	Total Minimum Payment Due	Payment Due Date
06/28/15	\$618.80	\$618.80	07/23/15

\$

BL ACCT 00001230-10000000
 VILLAGE OF SAUK VILLAGE
 21801 TORRENCE AVE
 SAUK VILLAGE IL 60411



MAKE CHECK PAYABLE TO:

BANKCARD PROCESSING CENTER
 PO BOX 31021
 TAMPA FL 33631-3021

21 4865 2259 4521 4939 00061880 00061880 6



Cardholder Account Summary		Payments & Other		Purchases & Other		Cash Advances		Total Activity
MOHAN RAO ##### 4947		\$0.00 Credits		\$282.62 Charges		\$0.00		\$282.62
Trans Date	Post Date	Plan Name	Reference Number	Description	Amount			
06/03	06/05	PLN01	2416407515520000022825	TRL TIRE SERV100085027 S CHICAGO HTS IL	\$155.23			
06/09	06/11	PLN01	24447465161980000745442	CHICAGO BADGE COMPANY CHICAGO IL	\$41.00			
06/10	06/12	PLN01	24447465162980000745409	CHICAGO BADGE COMPANY CHICAGO IL	\$86.39			

Cardholder Account Summary		Payments & Other		Purchases & Other		Cash Advances		Total Activity
SHERRY JASINSKI ##### 4954		\$0.00 Credits		\$100.00 Charges		\$0.00		\$100.00
Trans Date	Post Date	Plan Name	Reference Number	Description	Amount			
06/02	06/04	PLN01	24717055154151547862485	TLF THE FLOWER DEPOT 708-7561800 IL	\$100.00			

Cardholder Account Summary		Payments & Other		Purchases & Other		Cash Advances		Total Activity
KEVIN J WELLER ##### 3906		\$0.00 Credits		\$236.18 Charges		\$0.00		\$236.18
Trans Date	Post Date	Plan Name	Reference Number	Description	Amount			
05/28	05/31	PLN01	24445005149100439622566	KOHL'S #1267 CRETE IL	\$193.18			
06/11	06/12	PLN01	24707805162980169290694	Griffith Jewelers Griffith IN	\$43.00			

Finance Charge Summary / Plan Level Information									
Plan Name	Plan Description	FCM	Average Daily Balance	Periodic Rate *	Corresponding APR	Finance Charges	Effective APR	Fees **	Ending Balance
PPLN01	PURCHASE	G	\$0.00	0.77083%(M)	9.2500%(V)	\$0.00	0.0000%	\$0.00	\$618.80
CPLN01	CASH	A	\$0.00	0.77083%(M)	9.2500%(V)	\$0.00	0.0000%	\$0.00	\$0.00

Days in Billing Cycle: 30
 APR = Annual Percentage Rate
 * Periodic Rate (M)=Monthly (D)=Daily
 ** Includes cash advance and foreign currency fees
 † FCM = Finance Charge Method
 ‡ (V) = Variable Rate If you have a variable rate account the periodic rate and Annual Percentage Rate (APR) may vary.

10 6/30/15

UNITED FIRE SERVICES
144 BROADWAY ST
UNITED FIRE SERVICES
212 564 4010

Invoice # 2402225
Date 06/10/15

Sale

VISA PURCH

CLASSIC 0396

Method Swiped

Acct: Online

06/11/15

Inv#: 00000003

Appr Code: 61

Amount: \$	45.00
Tax: \$	0.00
Total: \$	45.00

Fire Dept

1 Water Risk 6-30-15

#

210.200.720-000 ?

Acw

Thank You for your order!

Your Satisfaction is our major concern! If there is a problem, call us immediately.

Special instructions: *Chin de Anjo # 11543*

City, State, ZIP: _____

DELIVER TO FULL NAME: *Stephanie*

DELIVERY ADDRESS (NO APN): *Blount County*

DELIVERY PHONE: _____

TELEPHONE: *756-1800*

The Flower Depot • (708) 756-1800

SALE PRICE: _____

SALES TAX: _____

TOTAL: *100.00*

PMT: _____

DATE: _____

1. If you are to pay about your order, please call us to get the correct amount.

2. If you are to pay about your order, please call us to get the correct amount.

Phone Order

Entry Method: Manual

98-02-15

Report: Online

ANS Code: 22P MATCH 2

ANS Code: MATCH 11

Ref Loc: 623621

16-32-36

188.00

7.58

92.32

SALE PRICE

SALES TAX

TOTAL

PMT

DATE

75-10

1805

708 756 3350

75

The Flower Depot

55 E. South Blvd • S. Chgo. Hts., IL 60411

(708) 756-1800 • Fax (708) 756-1814

100.010.768.000 An

VILLAGE OF SAUK VILLAGE
DEPARTMENTAL CORRESPONDENCE

DATE: June 01, 2015

To: D.C. Salsberry
From: SGT LANGAN # 57
Subject: NEW TIRE

I PRICED AROUND FOR NEW TIRES, AND FOR A P265/70R17, A CHEAP TIRE WOULD BE \$139 AND THE TOP OF THE LINE TIRE WOULD COST ABOUT \$170. PLUS MAYBE ADDITIONAL TWENTY DOLLAR FEE TO PUT SAID TIRE ON.

100.025.714.000 Aw

paid via Aw cr. card
6/1/2015

1). \$155.00 TRL
2). 3M TOWING \$50.00
a). Public Works, TAKE RIM WITH FIAT TIRE TO TRL AND BRING BACK

Invoice

Invoice #	12219
Date	6/3/2015

www.trltireservice.com

TRT TIRE SERVICE CORP
 3349 EAST END AVE
 SO CHICAGO HEIGHTS, IL
 60411

708-754-7909

SHIP TO
 VILLAGE OF SAUK VILLAGE
 21801 TORRENCE AVE
 SAUK VILLAGE, IL 60411
 (708) 758-1331

BILL TO
 VILLAGE OF SAUK VILLAGE
 21801 TORRENCE AVE
 SAUK VILLAGE IL 60411



P.O. Number	
Terms	Net 30

Amount	Price Each	Description	Item Code	Quantity
119.73	119.73	26570R17 WRANGLER SRA (LF)	183-106-436	1
30.00	30.00	DISMOUNT/MOUNT/BALANCE (LF)		1
2.50	2.50	STATE TIRE FEE	1 STATE	1
3.00	3.00	TIRE DISPOSAL	1 TDISP	1

PA
 VISA
 Ford Expedition
 VEH # M100
 Lic # [REDACTED]
 Mileage: 42,346
 Serial # [REDACTED]

Sales Tax 50.00

Total \$155.23

RETORQUE AFTER 100 MILES NO WARRANTY ON USED TIRES

0010015 10:44P

TRT TIRE SERVICE CORP

Invoice

TRT TIRE SERVICE CORP

3349 EAST END AVE
SO CHICAGO HEIGHTS, IL
60411

Date	Invoice #
6/3/2015	12219

708-754-7909

www.trltireservice.com



BILL TO
VILLAGE OF SAUK VILLAGE 21801 TORRENCE AVE SAUK VILLAGE IL 60411

SHIP TO
VILLAGE OF SAUK VILLAGE 21801 TORRENCE AVE SAUK VILLAGE, IL 60411
(708) 758-1331

P.O. Number	Terms
	Net 30



Quantity	Item Code	Description	Price Each	Amount
1	183-106-436	26570R17 WRANGLER SRA	119.73	119.73
1	DM	DISMOUNT/MOUNT/BALANCE (LF)	30.00	30.00
1	STATE	STATE TIRE FEE	2.50	2.50
1	TDISP	TIRE DISPOSAL	3.00	3.00

TRT TIRE SERVICE
3349 E END AVE
SO CHICAGO HEIGHTS IL 60411
708-754-7909

6/3/2015 10:13 AM

CARDINAL ID: 0140651701
 CURF ID: 85826
 COMPANY ID: 0000
 SEQUENCE #: 002252
 BATCH #: 90
 CARD TYPE: MANUAL - VISA
 ACCOUNT #: *****4347
 EXP DATE: 02-13
 TOTAL SALES: 155.23
 APPROVAL CODE: 664627

Ford Expedition
 Veh # m100
 Lic # [REDACTED]
 Mileage = 42,341
 Serial # [REDACTED]

ATTN: MOHAN

CUSTOMER COPY

I AGREE TO PAY ABOVE AMOUNT ACCORDING TO CARD ISSUER AGREEMENT (MERCHANT AGREEMENT IF CREDIT VOUCHER)

	Sales Tax	\$0.00
--	------------------	--------

0 WARRANTY ON USED TIRES

Total	\$155.23
--------------	----------

THANK YOU FOR YOUR BUSINESS

Customer: Copy
THANK YOU
FOR VISITING

VISA
XXXXXXXXXXXXXXXXXXXX947
Entry Method: Manual
Apprvd: Online Batch#: 000008
06/09/15
Invt: 00000001 Appr Code: 680074
Total: \$ 41.00

CHICAGO BADGE COMPANY
9851 S WINCHESTER AVE
CHICAGO, IL 60643
773 445-1876
Merchant ID: 449746119361961
Term ID: 2101

PAID: VISA: XXXX-XXXX-XXXX-4947 (06/09/15)

Handwritten signature

100.010724.000

RECESSED BADGE CASE FOR B953 BADGE

080 01

ITEM

DESCRIPTION

SHIP VIA	SHIP DATE	TERMS	P.O. NO.
JC DEL.	6/9/15	Net 30	
AMOUNT	RATE	QTY	DESCRIPTION
41.00	20.50	2	

Total

\$41.00

BILL TO
VILLAGE OF SAUK VILLAGE
MOHAN RAO
21701 S. TORRENCE
SAUK VILLAGE, IL 60411

SHIP TO
VILLAGE OF SAUK VILLAGE
MOHAN RAO
21801 S. TORRENCE
SAUK VILLAGE, IL 60411

CHICAGO BADGE & INSIGNIA CO.
9851 S. WINCHESTER AVE.
CHICAGO, IL 60643
TEL: 1-773-445-1876
FAX: 1-773-445-1816

Invoice	13625
DATE	6/9/15

Invoice

CHICAGO BADGE & INSIGNIA CO.
 9851 S. WINCHESTER AVE.
 CHICAGO, IL 60643
 TEL: 1-773-445-1876
 FAX: 1-773-445-1816

Invoice

DATE	Invoice
6/9/15	13625

BILL TO
VILLAGE OF SAUK VILLAGE MOHAN RAO 21701 S. TORRENCE SAUK VILLAGE, IL 60411

SHIP TO
VILLAGE OF SAUK VILLAGE MOHAN RAO 21801 S. TORRENCE SAUK VILLAGE, IL 60411

P.O. NO.	TERMS	SHIP DATE	SHIP VIA
	Net 30	6/9/15	JC DEL.
	QTY	RATE	AMOUNT

ITEM	DESCRIPTION	QTY	RATE	AMOUNT
080 01	RECESSED BADGE CASE FOR B953 BADGE PAID: VISA: XXXX-XXXX-XXXX-4947 (06/09/15)	2	20.50	41.00
Total				\$41.00

THANK YOU FOR YOUR BUSINESS

V.H. BLACKINGTON & CO. INC. 221 JOHN DIETSCH BLVD. PO BOX 1300 ATTLEBORO FALLS, MA 02763-0300
 Bill to: BADGE CO OF CHICAGO
 9851 S WINCHESTER
 CHICAGO, IL
 60643

Ship to: VILLAGE OF SAUK VILLAGE
 ATTN: MOHAN RAO
 21801 S. TORRENCE AVE.
 SAUK VILLAGE, IL 60411

Order# 3866320 Scheduled 6/18/15 Customer# 60453BC Customer-Po 5056716001 Printed 6/17/15
 Quantity Badge Case 953 C Material BRASS Gauge Const. 5 PT. LARGE STAR BADGE Sample
 1 B Foreground Fin. Background Fin. Back Fin. E Attachment WALLET CLIP F 116 Attach No. Dep FLAT Color Enam.

How Let. #/Ratio B/R Color Enam.
 WIZZ 6.5V BL BLACK REGU
 WIZZ 7.0V BL BLACK REGU
 IN D 11.0V BL FULL HARD
 WIZZ BL BLACK REGU

IL 8 HG (STATE OF ILLINOIS)
 SAUK VILLAGE

BLACK LINES

PACKING LIST

CHICAGO BADGE & INSIGNIA CO.
 9851 S. WINCHESTER AVE.
 CHICAGO, IL 60643
 TEL: 1-773-445-1876
 FAX: 1-773-445-1816

Invoice

DATE	Invoice
6/10/15	13625

BILL TO
VILLAGE OF SAUK VILLAGE ATTN: MOHAN RAO 21801 S. TORRENCE SAUK VILLAGE, IL 60411

SHIP TO
VILLAGE OF SAUK VILLAGE ATTN: MOHAN RAO 21801 S. TORRENCE SAUK VILLAGE, IL 60411

ITEM	DESCRIPTION	P.O. NO.	TERMS	SHIP DATE	SHIP VIA	
			PAID	6/10/15	US Mail	
		QTY	RATE	AMOUNT		
080	BADGE, B953, GOLD PLATE, VILLAGE TRUSTEE, W/WALLET CLIP			63.60	63.60	
001	SHIPPING & HANDLING			2.29	2.29	
080 01	RECESSED BADGE CASE FOR B953 BADGE <i>100.010.724000 AC</i>			20.50	20.50	
CHICAGO BADGE COMPANY 9851 S WINCHESTER AVE CHICAGO, IL 60643 773-445-1876 Merchant ID: 444746110361961 Term ID: 2101 Sale VISA XXXXXXXXXXXX4947 Entry Method: Manual Apprvd: Online Batch#: 000009 06/10/15 16:07:33 Inv#: 00000001 Appr Code: 681730 Total: \$ 86.39						
ALL WORK IS COMPLETE					Total	\$86.39

Customer Copy
 THANK YOU
 FOR VISITING

his has been recognized by the EPA
with the 2015 ENERGY STAR Sustained
cellence Award. More than 940 ENERGY
STAR labeled stores have contributed
to our outstanding performance in
energy efficiency!
THIS PURCHASE IS SUBJECT TO THE
TERMS/CONDITIONS FOUND IN REVERSE



THANK YOU FOR SHOPPING AT KOHL'S

TOTAL SAVED: \$114.46

APPROVED
ISA
XXXXXXXXXXXX3906 641196
193.18
TOTAL \$193.18
SUBTOTAL 212.40
TAX 12.64
15% SPECIAL OFFER 180.54 @ 7.0%
TI = 31.86

28-15 3:03P 1267/0060/8582/5 1928XX
999-9471-8484-9684-8732-3914-1753
IZEN WATCHES 013205101359 * 212.40
3LE PRICE 236.00
10% JEWELRY 15% 23.60
Item Price 295.00 YouSave 82.60



Crete, IL 60417
(708) 672-4211

200.210.720.000
Retired
Russell F. Stalley

Fire Dept

#

Credit card



1/2

KOHL'S

Crete
Crete, IL 60417
(708) 672-4211

05-28-15 3:03P 1267/0060/8582/5 1928XX
ID# 999-9471-8484-9684-8732-3914-1753

CITIZEN WATCHES 013205101359 * 212.40 11
SALE PRICE 236.00
10% JEWELRY 15% 23.60-
ItemPrice 295.00 YouSave 82.60

15% SPECIAL OFFER
T1= 180.54 @ 7.0%
SUBTOTAL 212.40
TAX 31.86-
TOTAL \$193.18

ATM
VISA
APPROVED

XXXXXXXXXXXX3906 193.18
641196

TOTAL SAVED: \$114.46

THANK YOU FOR SHOPPING AT KOHL'S



Kohl's has been recognized by the EPA with the 2015 ENERGY STAR Sustained Excellence Award. More than 940 ENERGY STAR labeled stores have contributed to our outstanding performance in energy efficiency!

THIS PURCHASE IS SUBJECT TO THE TERMS/CONDITIONS FOUND IN LEGAL NOTICES AT KOHL'S.COM



#

RUSSELL E. STA

Retired

210-200,720,000

Amw



100,010.768.000

Can you give me on monday, the back up paper or bill for the flower depot for \$100 charged to your account on June 2,

From: Finance Director Mohan Rao
Sent: Saturday, July 25, 2015 1:22 PM
To: Sherry Jasinski
Cc: Finance Director Mohan Rao
Subject: Your credit card bill-TLF The Flower Depot-708-756-1800 IL

Mohan
2015

I turned that into you already, I gave you my copy. It was a plant the Village asked me to order for Sue's Mother wake.

Finance Director Mohan Rao <mrao@saukvillage.org>

July 27, 2015 4:19 PM

Sherry Jasinski

Fw: Your credit card bill-TLF The Flower Depot-708-756-1800 IL
7/28/2015



BL ACCT 00001230-10000000
 VILLAGE OF SAUK VILLAGE
 Account Number: #### #### #### 4939
 Page 1 of 3



Account Summary

Billing Cycle		07/29/2015
Days In Billing Cycle		31
Previous Balance		\$618.80
Purchases	+	\$491.86
Cash	+	\$0.00
Special	+	\$0.00
Credits	-	\$0.00
Payments	-	\$618.80-
Other Charges	+	\$0.00
Finance Charges	+	\$0.00
NEW BALANCE		\$491.86

Credit Summary

Total Credit Line	\$3,000.00
Available Credit Line	\$2,508.14
Available Cash	\$0.00
Amount Over Credit Line	\$0.00
Amount Past Due	\$0.00
Disputed Amount	\$0.00

Account Inquiries

Call us at: (800) 221-5920
 Lost or Stolen Card: (866) 839-3485

Write us at PO BOX 31535, TAMPA, FL 33631-3535

Payment Summary

NEW BALANCE	\$491.86
MINIMUM PAYMENT	\$491.86
PAYMENT DUE DATE	08/24/2015

NOTE: Grace period to avoid a finance charge on purchases. pay entire new balance by payment due date. Finance charge accrues on cash advances until paid and will be billed on your next statement.

Corporate Activity			TOTAL CORPORATE ACTIVITY	\$618.80-
Trans Date	Post Date	Reference Number	Transaction Description	Amount
07/23	07/23	7486522520311111111111	AUTO PMT FROM ACCT [REDACTED]	\$618.80-

Important Information About Your Account

IT IS NOT NECESSARY TO MAIL YOUR PAYMENT. YOUR ACCOUNT WILL AUTOMATICALLY BE PAID BY A DIRECT DEBIT OF YOUR CHECKING OR SAVINGS ACCOUNT. THE DEBIT THIS MONTH IS \$491.86.

PLEASE DETACH COUPON AND RETURN PAYMENT USING THE ENCLOSED ENVELOPE - ALLOW UP TO 7 DAYS FOR RECEIPT

FIRST MIDWEST BANK
 PO BOX 565
 JOLIET IL 60434-0565



Account Number
 #### #### #### 4939

Check box to indicate name/address change on back of this coupon

AMOUNT OF PAYMENT ENCLOSED

Closing Date	New Balance	Total Minimum Payment Due	Payment Due Date
07/29/15	\$491.86	\$491.86	08/24/15



BL ACCT 00001230-10000000
 VILLAGE OF SAUK VILLAGE
 21801 TORRENCE AVE
 SAUK VILLAGE IL 60411



MAKE CHECK PAYABLE TO:

BANKCARD PROCESSING CENTER
 PO BOX 31021
 TAMPA FL 33631-3021

21 4865 2259 4521 4939 00049186 00049186 4



BL ACCT 0001230-1000000
 VILLAGE OF SAUK VILLAGE
 Account Number: ##### 4939
 Page 3 of 3

Cardholder Account Summary														
Trans Date	Post Date	Plan Name	Reference Number	Description										
07/16	07/17	PPLN01	24492155197894111746265	BUYCRASH 866-277-7477 KY										
07/23	07/26	PPLN01	24717055205152058598178	TLF THE FLOWER DEPOT 708-7561800 IL										
<table border="1"> <tr> <td>MOHAN RAO</td> <td>##### 1947</td> <td>Payments & Other Credits</td> <td>\$0.00</td> <td>Purchases & Other Charges</td> <td>\$77.85</td> <td>Cash Advances</td> <td>\$0.00</td> <td>Total Activity</td> <td>\$77.85</td> </tr> </table>					MOHAN RAO	##### 1947	Payments & Other Credits	\$0.00	Purchases & Other Charges	\$77.85	Cash Advances	\$0.00	Total Activity	\$77.85
MOHAN RAO	##### 1947	Payments & Other Credits	\$0.00	Purchases & Other Charges	\$77.85	Cash Advances	\$0.00	Total Activity	\$77.85					
<table border="1"> <tr> <th colspan="2">Cardholder Account Detail</th> <th>Reference Number</th> <th>Description</th> <th>Amount</th> </tr> <tr> <td>Trans Date</td> <td>Post Date</td> <td>Plan Name</td> <td>Reference Number</td> <td>Description</td> </tr> </table>					Cardholder Account Detail		Reference Number	Description	Amount	Trans Date	Post Date	Plan Name	Reference Number	Description
Cardholder Account Detail		Reference Number	Description	Amount										
Trans Date	Post Date	Plan Name	Reference Number	Description										

Cardholder Account Summary														
Trans Date	Post Date	Plan Name	Reference Number	Description										
06/30	07/01	PPLN01	24755425182731827967916	CELLULAR CONNECTION 796 HOMewood										
06/30	07/02	PPLN01	24445745182100548735589	OFFICEMAX/OFFICE DEPOT688 IL										
07/09	07/12	PPLN01	24445745191100507505865	OFFICE DEPOT #504 HIGHLAND IN										
07/20	07/21	PPLN01	24055235201819222960698	ROCK AUTO 608-661-1376 WI										
07/23	07/26	PPLN01	24445745205100503385316	OFFICE DEPOT #504 HIGHLAND IN										
<table border="1"> <tr> <td>KEVIN J WELLER</td> <td>##### 3906</td> <td>Payments & Other Credits</td> <td>\$0.00</td> <td>Purchases & Other Charges</td> <td>\$414.01</td> <td>Cash Advances</td> <td>\$0.00</td> <td>Total Activity</td> <td>\$414.01</td> </tr> </table>					KEVIN J WELLER	##### 3906	Payments & Other Credits	\$0.00	Purchases & Other Charges	\$414.01	Cash Advances	\$0.00	Total Activity	\$414.01
KEVIN J WELLER	##### 3906	Payments & Other Credits	\$0.00	Purchases & Other Charges	\$414.01	Cash Advances	\$0.00	Total Activity	\$414.01					
<table border="1"> <tr> <th colspan="2">Cardholder Account Detail</th> <th>Reference Number</th> <th>Description</th> <th>Amount</th> </tr> <tr> <td>Trans Date</td> <td>Post Date</td> <td>Plan Name</td> <td>Reference Number</td> <td>Description</td> </tr> </table>					Cardholder Account Detail		Reference Number	Description	Amount	Trans Date	Post Date	Plan Name	Reference Number	Description
Cardholder Account Detail		Reference Number	Description	Amount										
Trans Date	Post Date	Plan Name	Reference Number	Description										

Finance Charge Summary / Plan Level Information										
Plan Name	Plan Description	FCM ¹	Average Daily Balance	Periodic Rate ²	Corresponding APR	Finance Charges	Effective APR ³	Fees ⁴	Effective APR	Ending Balance
Purchases PPLN01	PURCHASE	G	\$0.00	0.770833%(M)	9.2500%(V)	\$0.00	0.0000%	\$0.00	0.0000%	\$491.86
Cash CPLN01	CASH	A	\$0.00	0.770833%(M)	9.2500%(V)	\$0.00	0.0000%	\$0.00	0.0000%	\$0.00

Days in Billing Cycle: 31
 APR = Annual Percentage Rate
 * Periodic Rate (M)=Monthly (D)=Daily
 ** Includes cash advance and foreign currency fees
¹ FCM = Finance Charge Method
² Variable Rate: If you have a variable rate account the periodic rate and Annual Percentage Rate (APR) may vary.
³ APR = Annual Percentage Rate



[\(/en\)](#)



[\(/en/checkout/new\)](#)



Illinois: 1 report found

[Modify Search \(/en/il_searches/search_criteria\)](#)

Accident Date July 09, 2015

DRIVER L ESTRADA

DRIVER M RAO

County WILL

Agency Crete PD

Street Name --

1001005.768.000 *Amey*

15000505

More Info

Add to Cart

\$13.00

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[Contact Us \(/en/contacts/new\)](#)



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Checkout

\$0 00

Confidential

Neil Barnish <nbarnish@millercooper.com>

Wed 7/22/2015 9:56 AM

From: Finance Director Mohan Rao <mrao@saukville.org>;

Hi Mohan,

The address is below. If you wish to send something to our office instead, we will pass it along.

Marsha Lyons
3057 Springdale Ave
Glenview, IL 60025



\$ 47.95

\$ Total
64.85

Neil

Auditors of Miller, Cooper LLC.

Neil Barnish | Miller, Cooper & Co., Ltd
1751 Lake Cook Road, Suite 400 | Deerfield, IL 60015
Two North Riverside Plaza, Suite 900 | Chicago, IL 60606
☎: 312-344-2837 (Direct) | ☎: 847-205-1400
☎: 847-205-5000 (Main)
✉: nbarnish@millercooper.com

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Comments:

All prepaid and special order sales are final.

Devices may be returned within 14 days of purchase, in original packaging and accompanied by original receipt. All phone returns are subject to a \$35 restocking fee. All Tablets/Netbook returns are subject to a \$75 restocking fee.

By providing us with your email address, you agree to receive email communication from Moorehead Communications dba The Cellular Connection ("TCC"). You can unsubscribe at any time by clicking on the link at the bottom of any email communication from TCC or contacting TCC's Customer Support Center at 1-844-822-7625.

LC + WDR

I agree to pay the above total according to the card holders agreement.

Device ID: 4

Entry Type: Swiped

WELLER KEVIN J

*****3906

Visa

Approval #: 692836 \$53.99

Payment:

Subtotal: \$49.99

IL Cook County, Homewood City, Sales Tax: \$4.00

Payment Balance: \$53.99

Balance: \$0.00

Product SKU Inventory Location Qty Invoiced Remaining Availability Your Price Your Total

ASPROF001560 0796 Homewood IL 1 0 1 None \$49.99 \$49.99

MOTO Droid Mini Otterbox Defender Case Black

Subtotal: \$49.99

IL Cook County, Homewood City, Sales Tax: \$4.00

Payment Balance: \$53.99

Balance: \$0.00

Split Shipping: No

Order ETA: 07-Jul-2015 12:00 AM

Date Created: 30-Jun-2015 10:09 AM

Tendered By: Patrick C

Sales Person: Patrick C

Order Entry #: 0796AOE9



Sales Order

Sauk Village IL USA 60411

21801 Torrence

Bill To: Kevin Weller

Merchant ID: 8028538422

Homewood IL USA 60430

17575 S Halsted Street

0796 Homewood IL



*310-000-660 #102
6/30/15*

Credit Card

(Credit Card)

300-000-6

OfficeMax
Office DEPOT
OfficeMax

OFFICE DEPOT STORE 6687
17825 S. Halsted Ave
Homewood, IL 60430
015 15.2.4 9:54 AM
17 REG- TRN 2200 EMP 745738

OfficeMax

ID	Description	Total
6	Time Card Wkly	17.98
8.99		
You Pay		17.98SS

Subtotal: 17.98
 Sales Tax: 1.44
 Total: 19.42
 Visa 3906: 19.42

NIVIN WELLEN 188127141

Please create your online rewards account at officedepot.com/rewards. You must complete your account to claim your rewards and view your status.

Shop online at www.officedepot.com

300,000 610,000

WE WANT TO HEAR FROM YOU!
OfficeMax

Participate in our online customer survey and receive a coupon for \$10 off your next qualifying purchase of \$50 or more on office supplies, furniture and more. (Excludes Technology. Limit 1 coupon per household/business.) Visit www.officemaxfeedback.com and enter the survey code below.

Survey Code:

6687-01-2200-1
OfficeMax



Now one company. Now great savings. Office Depot, Inc., including its subsidiary OfficeMax Incorporated

OfficeMax

Now one company. Now great savings.
 Office Depot, including its
 subsidiary OfficeMax Incorporated



Survey Code:
 1444 WBSA RSQ7

Visit www.officedepot.com/feedback
 and enter the survey code below.

Participate in our online customer su
 and receive a coupon for \$10 off your
 qualifying purchase of \$50 or more
 office supplies, furniture and more.
 (Excludes Technology. Limit 1 coupon
 per household/business.)

WE WANT TO HEAR FROM YOU!

Shop online at www.officedepot.com

SALE	Product ID	Description	Total
	880363	PPR, COMPUTER, B	41.99 S
	Subtotal:		41.99
	Sales Tax:		2.94
	Total:		44.93
	Visa 3906:		44.93

OFFICE DEPOT STORE 504
 10332 Indianapolis Blvd.
 Highland, IN 46322
 (219) 934-9034
 07/09/2015 15.2.4
 1:43 PM
 STR 504 REG2 TRN 3863 EMP 743193

Office DEPOT
OfficeMax

Credit CARD

100-025 610-000 Ac
#?
all paper 7/10/15
Pat's Dept

**RockAuto Order Confirmation
Order 34500561**



Monday, July 20, 2015 11:24 AM Central Time

Ship To:

village of sauk village
21801 Torrence Ave
Sauk Village, il 60411
United States
708-757-2420
algreenst@gmail.com

Bill To:

village of sauk village
21801 Torrence Ave
Sauk Village, il 60411
United States
708-757-2420
algreenst@gmail.com

	Part Number	Part Type	Price EA	Core EA	Quantity	Total
2007 FORD F-150 4.6L V8						
VARIOUS MFR	FO1200414	Grille	\$ 36.79	\$ 0.00	1	\$ 36.79
VARIOUS MFR	FO2503201 (FO2503201N)	Headlamp Assembly	\$ 148.89	\$ 0.00	1	\$ 148.89
Shipping	Ground					\$ 15.85
Order Total						\$ 201.53
Visa						-\$ 201.53
Balance Due						\$ 0.00

When the last item on your order ships, we will send an email listing tracking numbers for all the items on the order.

Order Status & Returns

To **CHECK ORDER STATUS, MAKE CHANGES, ARRANGE A RETURN** or **REPORT A PROBLEM** visit <http://www.rockauto.com/orderstatus>

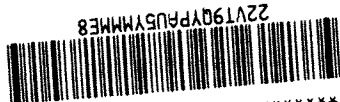
Please print this page as your receipt.

Thanks again for buying your auto parts at RockAuto!

www.RockAuto.com
service@rockauto.com
1-608-661-1376

Handwritten note:
2005 FORD F150
#120
300-000-620 7/23/15
Credit CARD

Now one company. Now great savings.
Office Depot, Inc., including its
subsidiary OfficeMax Incorporated.



Survey Code:
1498 YRSD R3M9

Visit www.officedepot.com/feedback
and enter the survey code below.

Participate in our online customer survey.
Receive a coupon for \$10 off your
next qualifying purchase of \$50 or more on
office supplies, furniture and more.
(Excludes Technology. Limit 1 coupon per
household/business.)

WE WANT TO HEAR FROM YOU!

Shop online at www.officedepot.com

You Pay	87.98
Subtotal:	87.98
as Tax:	6.16
Total:	94.14
Visa 3906:	94.14

Product ID	Description
08	INK, LC103, 3PK,
Total	87.98

OFFICE DEPOT STORE 504
10332 Indianapolis Blvd.
Highland, IN 46322
(219) 934-9034
11:33 AM
STR 504 REG2 TRN 5205 EMP 757694

Office DEPOT
OfficeMax

Credit CARD

7/23/15
300-000-610
300-000-610



BL ACCT 00001230-10000000
 VILLAGE OF SAUK VILLAGE
 Account Number: #### #### #### 4939
 Page 1 of 3



Account Summary

Billing Cycle		08/30/2015
Days In Billing Cycle		32
Previous Balance		\$491.86
Purchases	+	\$2,737.21
Cash	+	\$0.00
Special	+	\$0.00
Credits	-	\$0.00
Payments	-	\$491.86
Other Charges	+	\$0.00
Finance Charges	+	\$0.00
NEW BALANCE		\$2,737.21

Credit Summary

Total Credit Line	\$3,000.00
Available Credit Line	\$262.79
Available Cash	\$0.00
Amount Over Credit Line	\$0.00
Amount Past Due	\$0.00
Disputed Amount	\$0.00

Account Inquiries

Call us at: (800) 221-5920
 Lost or Stolen Card: (866) 839-3485

Write us at PO BOX 31535, TAMPA, FL 33631-3535

Payment Summary

NEW BALANCE	\$2,737.21
MINIMUM PAYMENT	\$2,737.21
PAYMENT DUE DATE	09/24/2015

NOTE: Grace period to avoid a finance charge on purchases, pay entire new balance by payment due date. Finance charge accrues on cash advances until paid and will be billed on your next statement

Corporate Activity				TOTAL CORPORATE ACTIVITY	\$491.86-
Trans Date	Post Date	Reference Number	Transaction Description	Amount	
08/23	08/23	7486522523311111111111	AUTO PMT FROM ACCT	\$491.86-	

Important Information About Your Account

IT IS NOT NECESSARY TO MAIL YOUR PAYMENT. YOUR ACCOUNT WILL AUTOMATICALLY BE PAID BY A DIRECT DEBIT OF YOUR CHECKING OR SAVINGS ACCOUNT. THE DEBIT THIS MONTH IS \$2737.21.

PLEASE DETACH COUPON AND RETURN PAYMENT USING THE ENCLOSED ENVELOPE - ALLOW UP TO 7 DAYS FOR RECEIPT

FIRST MIDWEST BANK
 PO BOX 565
 JOLIET IL 60434-0565



Account Number

4939

Check box to indicate name/address change on back of this coupon

AMOUNT OF PAYMENT ENCLOSED

Closing Date	New Balance	Total Minimum Payment Due	Payment Due Date
08/30/15	\$2,737.21	\$2,737.21	09/24/15



BL ACCT 00001230-10000000
 VILLAGE OF SAUK VILLAGE
 21801 TORRENCE AVE
 SAUK VILLAGE IL 60411



8663

MAKE CHECK PAYABLE TO:

BANKCARD PROCESSING CENTER
 PO BOX 31021
 TAMPA FL 33631-3021

21 4865 2259 4521 4939 00273721 00273721 6



BL ACT 00001230-1000000
 VILLAGE OF SAUK VILLAGE
 Account Number: ##### 4939

Page 3 of 3

Cardholder Account Summary					
Trans Date	Post Date	Plan Name	Reference Number	Description	Amount
08/19	08/20	PPLN01	24639235231900012200302	ILLINOIS MUNICIPAL LEAGUE 217-5251220 IL	\$2,170.00
Cardholder Account Detail					
MOHAN RAO		Payments & Other		Credits	\$0.00
##### 4947		Purchases & Other		Charges	\$2,170.00
Total Activity		Cash Advances			\$0.00
Total Activity					\$2,170.00

Cardholder Account Summary					
Trans Date	Post Date	Plan Name	Reference Number	Description	Amount
08/14	08/16	PPLN01	24445005227600325771695	WALGREENS #5128 SAUK VILLAGE IL	\$7.14
08/27	08/28	PPLN01	24692165239000789718621	SPRINT WIRELESS 800-639-6111 KS	\$518.07
08/27	08/28	PPLN01	24692165239000036943436	IN B&F FABRICATING, INC. 708-7587878 IL	\$42.00
Cardholder Account Detail					
KEVIN J WELLER		Payments & Other		Credits	\$0.00
##### 3906		Purchases & Other		Charges	\$567.21
Total Activity		Cash Advances			\$0.00
Total Activity					\$567.21

Finance Charge Summary / Plan Level Information										
Plan Name	Plan Description	FCM ¹	Average Daily Balance	Periodic Rate ²	Corresponding APR	Finance Charges	Effective APR ³	Fees ⁴	Effective APR	Ending Balance
PPLN01	PURCHASE	G	\$0.00	0.77083%(M)	9.2500%(V)	\$0.00	0.0000%	\$0.00	0.0000%	\$2,737.21
CPLN01	CASH	A	\$0.00	0.77083%(M)	9.2500%(V)	\$0.00	0.0000%	\$0.00	0.0000%	\$0.00

* Periodic Rate (M)=Monthly (D)=Daily
 ** Includes cash advance and foreign currency fees
¹ FCM = Finance Charge Method
 (V) = Variable Rate If you have a variable rate account the periodic rate and Annual Percentage Rate (APR) may vary.
 Days in Billing Cycle: 32
 APR = Annual Percentage Rate

From: conferences <conferences@iml.org>
To: dlw1633 <dlw1633@aol.com>
Subject: 2015 Annual Conference Confirmation
Date: Fri, Aug 7, 2015 3:19 pm

Tera Antonacci
Illinois Municipal League



100,010.724,000 *Am*
#7 @ 310.00

Friday, August 7, 2015

David Hanks
Village of Sauk Village
21801 Torrence Ave
Sauk Village, IL 60411

Dear Attendee,

This letter is to confirm your attendance at the below listed conference. Please print a copy for your records.

A processing fee will be charged regardless of the reason for cancellation (including medical emergencies). Registrants who are unable to attend the conference may appoint a substitute. All cancellations must be in writing and mailed, faxed (217-525-7438) or emailed (cancellation@iml.org) to the IML office. Cancellations will not be accepted by telephone.

- \$50.00 processing fee, per attendee on all cancellations before Septmeber 3rd.
- No refunds after 4:30pm on September 3rd.
- Extra Lunch & Banquet tickets - \$25 processing fee before September 3rd, no refunds after September 3rd.

2015 Annual Conference, Hilton Chicago Hotel - 720 S Michigan Ave, Chicago, IL 60605 - Phone 312-922-4400, September 17-19, 2015

Hanks, David Total Conference Package - Best Value \$310.00

Total Amount:	\$310.00
Amount Paid:	\$310.00
Balance Due:	\$0.00

I-8583

1-35304

Total Amount:	\$310.00
Amount Paid:	\$310.00
Balance Due:	\$0.00

Williams, Debra L. Total Conference Package - Best Value \$310.00

2015 Annual Conference, Hilton Chicago Hotel - 720 S Michigan Ave, Chicago, IL 60605 - Phone 312-922-4400, September 17-19, 2015

- \$50.00 processing fee, per attendee on all cancellations before September 3rd.
- No refunds after 4:30pm on September 3rd.
- Extra Lunch & Banquet tickets - \$25 processing fee before September 3rd, no refunds after September 3rd.

A processing fee will be charged regardless of the reason for cancellation (including medical emergencies). Registrants who are unable to attend the conference may appoint a substitute. All cancellations must be in writing and mailed, faxed (217-525-7438) or emailed (conf@ml.org) to the IML office. Cancellations will not be accepted by telephone.

This letter is to confirm your attendance at the below listed conference. Please print a copy for your records.

Dear Attendee,

Debra L Williams
Village of Sauk Village
21801 Torrence Ave
Sauk Village, IL 60411

Friday, August 7, 2015



Tera Antonacci
Illinois Municipal League

-----Original Message-----
 From: conferences <conferences@iml.org>
 To: dmw1633 <dmw1633@aol.com>
 Sent: Fri, Aug 7, 2015 3:19 pm
 Subject: 2015 Annual Conference Confirmation

From: dlw1633 <dlw1633@aol.com>
To: conferences <conferences@iml.org>
Subject: Re: 2015 Annual Conference Confirmation
Date: Tue, Aug 11, 2015 3:30 pm

Teri
Could you please contact me regarding our reservations.
Thanks
Village Clerk Debbie Williams

-----Original Message-----
From: conferences <conferences@iml.org>
To: dlw1633 <dlw1633@aol.com>
Sent: Fri, Aug 7, 2015 3:19 pm
Subject: 2015 Annual Conference Confirmation

Tera Antonacci
Illinois Municipal League



Friday, August 7, 2015

J W Fairman
Village of Sauk Village
21801 Torrence Ave
Sauk Village, IL 60411

Dear Attendee,

This letter is to confirm your attendance at the below listed conference. Please print a copy for your records.

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Re: 2015 Annual Conference Confirmation

Page 2 of 2

2015 Annual Conference, Hilton Chicago Hotel - 720 S Michigan Ave, Chicago, IL 60605 - Phone 312-922-4400, September 17-19, 2015

Fairman, J W Total Conference Package - Best Value \$310.00

Total Amount: \$310.00
Amount Paid: \$310.00
Balance Due: \$0.00

1-48419

<https://mail.aol.com/webmail-std/en-us/PrintMessage>

8/27/2015

From: conferences <conferences@iml.org>
To: dlw1633 <dlw1633@aol.com>
Subject: 2015 Annual Conference Confirmation
Date: Fri, Aug 7, 2015 3:19 pm

Tera Antonacci
Illinois Municipal League



Friday, August 7, 2015

Lynda Washington
Village of Sauk Village
21801 Torrence Ave
Sauk Village, IL 60411

Dear Attendee,

This letter is to confirm your attendance at the below listed conference. Please print a copy for your records.

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- No refunds after 4:30pm on September 3rd.
- Extra Lunch & Banquet tickets - \$25 processing fee before September 3rd, no refunds after September 3rd.

2015 Annual Conference, Hilton Chicago Hotel - 720 S Michigan Ave, Chicago, IL 60605 - Phone 312-922-4400, September 17-19, 2015

Washington, Lynda Total Conference Package - Best Value \$310.00

Total Amount:	\$310.00
Amount Paid:	\$310.00
Balance Due:	\$0.00

I-46128

Tera Antonacci
Illinois Municipal League



Friday, August 7, 2015

Kevin Jones

Village of Sauk Village
21801 Torrence Ave
Sauk Village, IL 60411

Dear Attendee,

This letter is to confirm your attendance at the below listed conference. Please print a copy for your records.

A processing fee will be charged regardless of the reason for cancellation (including medical emergencies). Registrants who are unable to attend the conference may appoint a substitute. All cancellations must be in writing and mailed, faxed (217-525-7438) or emailed (cancel@iml.org) to the IML office. Cancellations will not be accepted by telephone.

- \$50.00 processing fee, per attendee on all cancellations before September 3rd.
- No refunds after 4:30pm on September 3rd.
- Extra Lunch & Banquet tickets - \$25 processing fee before September 3rd, no refunds after September 3rd.

2015 Annual Conference, Hilton Chicago Hotel - 720 S Michigan Ave, Chicago, IL 60605 - Phone 312-922-4400, September 17-19, 2015

Jones, Kevin Total Conference Package - Best Value \$310.00

Total Amount	\$310.00
Amount Paid	\$310.00
Balance Due	\$0.00

1.50455

Tera Antonacci
Illinois Municipal League



Friday, August 7, 2015

Rosie Williams
Village of Sauk Village
21801 Torrence Ave
Sauk Village, IL 60411

Dear Attendee,

This letter is to confirm your attendance at the below listed conference. Please print a copy for your records.

A processing fee will be charged regardless of the reason for cancellation (including medical emergencies). Registrants who are unable to attend the conference may appoint a substitute. All cancellations must be in writing and mailed, faxed (217-525-7438) or emailed (cancellations@iml.org) to the IML office. Cancellations will not be accepted by telephone.

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- No refunds after 4:30pm on September 3rd.
- Extra Lunch & Banquet tickets - \$25 processing fee before September 3rd, no refunds after September 3rd.

2015 Annual Conference, Hilton Chicago Hotel - 720 S Michigan Ave, Chicago, IL 60605 - Phone 312-922-4400, September 17-19, 2015

Williams, Rosie Total Conference Package - Best Value \$310.00

Total Amount:	\$310.00
Amount Paid:	\$310.00
Balance Due:	\$0.00

I-26909

Tara Antonacci
Illinois Municipal League



Friday, August 7, 2015

Derrick Burgess
Village of Sauk Village
21801 Torrence Ave
Sauk Village, IL 60411

Dear Attendee,

This letter is to confirm your attendance at the below listed conference. Please print a copy for your records.

A processing fee will be charged regardless of the reason for cancellation (including medical emergencies). Registrants who are unable to attend the conference may appoint a substitute. All cancellations must be in writing and mailed, faxed (217-525-7438) or emailed (cancellations@iml.org) to the IML office. Cancellations will not be accepted by telephone.

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- No refunds after 4:30pm on September 3rd.
- Extra Lunch & Banquet tickets - \$25 processing fee before September 3rd, no refunds after September 3rd.

2015 Annual Conference, Hilton Chicago Hotel - 720 S Michigan Ave, Chicago, IL 60605 - Phone 312-922-4400, September 17-19, 2015

Burgess, Derrick Total Conference Package - Best Value \$310.00

Total Amount \$310.00

Amount Paid \$310.00

Balance Due \$0.00

I-30293

Walgreens

#05128 2601 E SAUK TRL
SAUK VILLAGE, IL 60411
708-757-6906

7451 0021 08/14/2015 9:49

BASANI 16.90Z 24PK
04900003165 B 3.99 SALE

REGULAR PRICE 5.99
REWARDS SAVINGS 2.00
RETURN VALUE 3.99

NICE PURIFIED WATER 16.90Z 24S
04902279077 B 2.99
RETURN VALUE 2.99

SUBTOTAL 6.98
SALES TAX B=2.25% 0.16

TOTAL 7.14
VISA ACCT 3906 7.14
CHANGE .00

BALANCE REWARDS SAVINGS 2.00

THANK YOU FOR SHOPPING AT WALGREENS

GET MORE WITH BALANCE REWARDS,
REDEEM POINTS FOR SOMETHING EXTRA
IN A FUTURE PURCHASE. RESTRICTIONS
APPLY. FOR TERMS AND CONDITIONS,
VISIT WALGREENS.COM/BALANCE.

RFN# 0512-8217-4518-1503-1403





REWARDS SAVINGS \$2.00
SAVINGS VALUE 22%
POINT BALANCE 1330
POINTS TO \$5 REWARD 3670

BALANCE REWARDS ACCT # *****4117

OPENING BALANCE 1270
EVERYDAY POINTS - RETAIL 60
CLOSING BALANCE 1330

How are we doing?
Enter our monthly sweepstakes for
\$3,000 cash

Visit
WWW.WAGCARES.COM

or call toll free

1-800-658-1584

within 72 hours to take a short
survey about this Walgreens visit

SURVEY#

0512-8217-451

PASSWORD

8150-8140-321

For contest rules, see store or
WWW.WAGCARES.COM

Credit Card
with An
Swap Group
8-14, 15-2015
? 100,005.610.00
Ann

YOUR SPRINT INVOICE

> ACCOUNT INFORMATION

Account Name
 VILLAGE OF SAUK VILLAGE
Account Number
 310051519
Invoice Number
 310051519-164
Previous P.O. Number
 34897
Current P.O. Number
 423AD
Upgrade Program
 Upgrade Program

Invoice Date
 September 27, 2015

TIN Number
 47-0882463
ABA Number
 111-000-012
Previous P.O. Date
 May 07, 2003

Total Amount Due
\$468.64

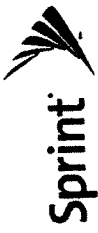
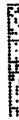
> MONTHLY INVOICE SUMMARY

August 24 - September 23, 2015	
Previous Balance	790.38
Payments as of 09/27/15 - Thank you	-518.07
Outstanding Balance - Due Upon Receipt	\$272.31
0001-Access and Related Items	183.98
0008-Government Fees and Taxes	12.35
*Total Current Charges for 310051519-164 Due 10/17/15	\$196.33
Total Amount Due	\$468.64

~~300-000-702~~ 10/17/15
 #1111

*Any unpaid balance after the due date may be subject to a late payment charge per your contract.

003714 1/4



> PAYMENT OPTIONS

To Pay Your Bill Online Go To
www.sprint.com/mysprint
 Sign up for Recurring Direct Debit!

To Pay Your Bill By Phone Call
 1-800-784-2608 or
 *3 from your Sprint phone

To Pay Your Bill By Mail
 See reverse side for details. >

> CUSTOMER CARE

Register and Logon
www.sprint.com
Call Sprint
 1-800-927-2199

> SPRINT NEWS AND NOTICES

This section contains important updates about your Sprint Services, including Service or Rate Changes, Promotions and Offers.

Correspondence

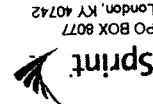
Please send all correspondence including billing inquiries to:

Sprint Customer Service
 PO Box 8077
 London, KY 40742

Do not enclose your payment with the correspondence.

You may also contact Sprint Customer Care at the number listed on your invoice or by going to sprint.com.

paid by K. WELBY
 credit card
 A



PO BOX 8077
 London, KY 40742

MB 01 003714 47621 H 15 A
 VILLAGE OF SAUK VILLAGE
 21801 TORRENCE AVE
 SAUK VILLAGE, IL 60411-4489





powered by

B&F Fabricating Inc.
STEGER, IL 60475
(708) 758-7878

Thanks again, Joe Piazza

*Per K. Weller, BMD
800.000.712.000 AC*

Visa 3906
SIGNED

08/27/2015 12:56 PM

Credit CARD

Village of Sauk Village	42.00
1 X \$42.00 Ea Taxable	
Total	\$42.00
Payment: Credit Card	\$42.00

\$42.00

Receipt
08/27/2015, 12:56 PM
Ref # P100058886303
Visa 3906

B&F Fabricating Inc.
(708) 758-7878

To: Public Works Director Kevin Weller

DO
donoreply@intuit.com
Thu 8/27/2015 12:57 PM

Receipt Confirmation

Receipt Confirmation

Mark as unread

Delete Reply all Reply Forward



Account Summary

Billing Cycle		09/28/2015
Days In Billing Cycle		29
Previous Balance		\$2,737.21
Purchases	+	\$182.05
Cash	+	\$0.00
Special	+	\$0.00
Credits	-	\$0.00
Payments	-	\$2,737.21-
Other Charges	+	\$0.00
Finance Charges	+	\$0.00
NEW BALANCE		\$182.05

Credit Summary

Total Credit Line	\$3,000.00
Available Credit Line	\$2,817.95
Available Cash	\$0.00
Amount Over Credit Line	\$0.00
Amount Past Due	\$0.00
Disputed Amount	\$0.00

Account Inquiries

Call us at: (800) 221-5920
 Lost or Stolen Card: (866) 839-3485

Write us at PO BOX 31535, TAMPA, FL 33631-3535

Payment Summary

NEW BALANCE	\$182.05
MINIMUM PAYMENT	\$182.05
PAYMENT DUE DATE	10/23/2015

NOTE: Grace period to avoid a finance charge on purchases, pay entire new balance by payment due date. Finance charge accrues on cash advances until paid and will be billed on your next statement.

Corporate Activity

				TOTAL CORPORATE ACTIVITY	\$2,737.21-
Trans Date	Post Date	Reference Number	Transaction Description	Amount	
09/24	09/24	7486522526611111111111	AUTO PMT FROM ACCT [REDACTED]	\$2,737.21-	

Important Information About Your Account

IT IS NOT NECESSARY TO MAIL YOUR PAYMENT. YOUR ACCOUNT WILL AUTOMATICALLY BE PAID BY A DIRECT DEBIT OF YOUR CHECKING OR SAVINGS ACCOUNT. THE DEBIT THIS MONTH IS \$182.05.

PLEASE DETACH COUPON AND RETURN PAYMENT USING THE ENCLOSED ENVELOPE - ALLOW UP TO 7 DAYS FOR RECEIPT

FIRST MIDWEST BANK
 PO BOX 565
 JOLIET IL 60434-0565



Account Number
 #### #### #### 4939

Check box to indicate name/address change on back of this coupon

AMOUNT OF PAYMENT ENCLOSED

Closing Date	New Balance	Total Minimum Payment Due	Payment Due Date
09/28/15	\$182.05	\$182.05	10/23/15

\$

BL ACCT 00001230-10000000
 VILLAGE OF SAUK VILLAGE
 21801 TORRENCE AVE
 SAUK VILLAGE IL 60411



MAKE CHECK PAYABLE TO:

BANKCARD PROCESSING CENTER
 PO BOX 31021
 TAMPA FL 33631-3021



BL ACCT 00001230-10000000
 VILLAGE OF SAUK VILLAGE
 Account Number: ##### 4939
 Page 3 of 3

Cardholder Account Summary				
DAVID A HANKS ##### 2205	Payments & Other Credits	Purchases & Other Charges	Cash Advances	Total Activity
\$0.00	\$182.05	\$0.00	\$182.05	

Trans Date	Post Date	Plan Name	Reference Number	Description	Amount
09/20	09/22	PPLN01	24906045264040200003058	HILTON HOTELS CHICAGO CHICAGO IL	\$182.05

penning fee D HANKS & FAIRMOR

Finance Charge Summary / Plan Level Information									
Plan Name	Plan Description	FCM ¹	Average Daily Balance	Periodic Rate *	Corresponding APR	Finance Charges	Effective APR	Fees **	Ending Balance
PPLN01	PURCHASE	G	\$0.00	0.77083%(M)	9.2500%(V)	\$0.00	0.0000%	\$0.00	\$182.05
Cash	CASH	A	\$0.00	0.77083%(M)	9.2500%(V)	\$0.00	0.0000%	\$0.00	\$0.00

* Periodic Rate (M)=Monthly (D)=Daily
 ** includes cash advance and foreign currency fees
¹ FCM = Finance Charge Method
 (V) = Variable Rate If you have a variable rate account the periodic rate and Annual Percentage Rate (APR) may vary.
 Days in Billing Cycle: 29
 APR = Annual Percentage Rate



Hilton
HOTELS & RESORTS
HILTON CHICAGO

Name and Address

HANKS, DAVID
1633 216TH PL
SAUK VILLAGE, IL 60411

Hotel Address

720 SOUTH MICHIGAN AVENUE
CHICAGO, IL 60605

Room 2328/D2T
Arrival Date 09/17/15
Departure Date 09/20/15
Adult/Child 1/0
Room Rate \$310.00
Rate Plan C-ILM
HHonors # 785926744
Airline:

Reservations
www.hilton.com or
1-800-HILTONS

Confirmation # 3190279399

09/20/15 PAGE 1

DATE	REFERENCE	DESCRIPTION	AMOUNT
09/17/15	16591643	GROUP SPECIAL VALET PARKING	\$48.00
09/18/15	16593922	*KITTY O'SHEAS	\$38.05
09/18/15	16595206	GROUP SPECIAL VALET PARKING	\$48.00
09/19/15	16598563	GROUP SPECIAL VALET PARKING	\$48.00
09/20/15	16599652	*****2205	(\$182.05)
		** BALANCE **	\$0.00

The on-line eFolio is a courtesy informational service, subject to [Privacy Policy](#) and [Site Usage](#); actual folio kept in hotel records.





Hilton

HOTELS & RESORTS
HILTON CHICAGO

Name and Address

HANKS, DAVID
1633 216TH PL
SAUK VILLAGE, IL 60411

Hotel Address

720 SOUTH MICHIGAN AVENUE
CHICAGO, IL 60605

Room 2328/D2T
Arrival Date 09/17/15
Departure Date 09/20/15
Adult/Child 1/0
Room Rate \$310.00
Rate Plan C-ILM
HHonors # 785926744
Airline:

Reservations
www.hilton.com or
1-800-HILTONS

Confirmation # 3190279399

09/20/15 PAGE 2

DATE	REFERENCE	DESCRIPTION	AMOUNT
09/04/15	16547634	CHECK	(\$820.62)
09/17/15	16591644	GUEST ROOM	\$235.00
09/17/15	16591644	HOTEL CITY TAX	\$10.58
09/17/15	16591644	HOTEL STATE TAX	\$27.97
09/18/15	16595207	GUEST ROOM	\$235.00
09/18/15	16595207	HOTEL CITY TAX	\$10.58
09/18/15	16595207	HOTEL STATE TAX	\$27.97
09/19/15	16598564	GUEST ROOM	\$234.97
09/19/15	16598564	HOTEL CITY TAX	\$10.58
09/19/15	16598564	HOTEL STATE TAX	\$27.97
		** BALANCE **	\$0.00

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Hilton

HOTELS & RESORTS
HILTON CHICAGO

Name and Address

HANKS, DAVID
1633 216TH PL
SAUK VILLAGE, IL 60411

Hotel Address

720 SOUTH MICHIGAN AVENUE
CHICAGO, IL 60605

Room 2328//D2T
Arrival Date 09/17/15
Departure Date 09/20/15
Adult/Child 1/0
Room Rate \$310.00
Rate Plan C-ILM
HHonors # 785926744
Airline:

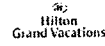
Reservations
www.hilton.com or
1-800-HILTONS

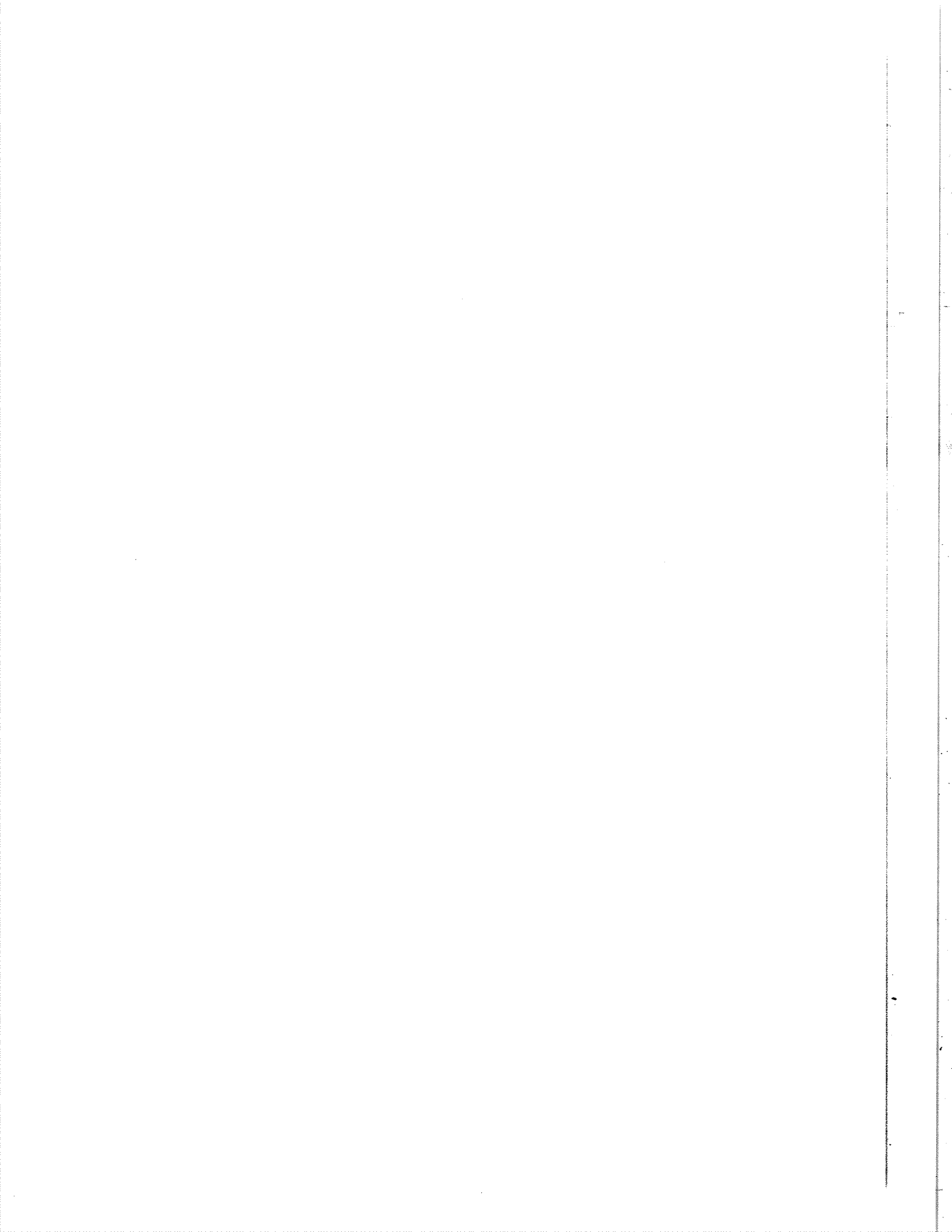
Confirmation # 3190279399

09/20/15 PAGE 3

DATE	REFERENCE	DESCRIPTION	AMOUNT
09/20/15	16599641	GUEST ROOM [XFR FR RM 2328 HANKS, DAVID:RCPT B]	\$75.00
09/20/15	16599641	HOTEL CITY TAX [XFR FR RM 2328 HANKS, DAVID:RCPT B]	\$3.38
09/20/15	16599641	HOTEL STATE TAX [XFR FR RM 2328 HANKS, DAVID:RCPT B]	\$8.93
09/20/15	16599645	GUEST ROOM [XFR FR RM 2328 HANKS, DAVID:RCPT B]	\$75.00
09/20/15	16599645	HOTEL CITY TAX [XFR FR RM 2328 HANKS, DAVID:RCPT B]	\$3.38
09/20/15	16599645	HOTEL STATE TAX [XFR FR RM 2328 HANKS, DAVID:RCPT B]	\$8.93
09/20/15	16599646	GUEST ROOM [XFR FR RM 2328 HANKS, DAVID:RCPT B]	\$75.00
09/20/15	16599646	HOTEL CITY TAX [XFR FR RM 2328 HANKS, DAVID:RCPT B]	\$3.38
09/20/15	16599646	HOTEL STATE TAX [XFR FR RM 2328 HANKS, DAVID:RCPT B]	\$8.93
09/20/15	16599651	*****7473	(\$261.93)
		** BALANCE **	\$0.00

The on-line eFolio is a courtesy informational service, subject to [Privacy Policy](#) and [Site Usage](#); actual folio kept in hotel records.





**Account Summary**

Billing Cycle		10/29/2015
Days In Billing Cycle		31
Previous Balance		\$182.05
Purchases	+	\$3,427.13
Cash	+	\$0.00
Special	+	\$0.00
Credits	-	\$0.00
Payments	-	\$182.05-
Other Charges	+	\$0.00
Finance Charges	+	\$0.00
NEW BALANCE		\$3,427.13

Account Inquiries

Call us at: (800) 221-5920
 Lost or Stolen Card: (866) 839-3485

Write us at PO BOX 31535, TAMPA, FL 33631-3535

Payment Summary

NEW BALANCE	<input type="text" value="\$3,427.13"/>
MINIMUM PAYMENT	<input type="text" value="\$3,427.13"/>
PAYMENT DUE DATE	<input type="text" value="11/23/2015"/>

Credit Summary

Total Credit Line	\$6,000.00
Available Credit Line	\$2,572.87
Available Cash	\$0.00
Amount Over Credit Line	\$0.00
Amount Past Due	\$0.00
Disputed Amount	\$0.00

NOTE: Grace period to avoid a finance charge on purchases, pay entire new balance by payment due date. Finance charge accrues on cash advances until paid and will be billed on your next statement.

Corporate Activity

TOTAL CORPORATE ACTIVITY				\$182.05-
Trans Date	Post Date	Reference Number	Transaction Description	Amount
10/23	10/23	748652252951111111111111	AUTO PMT FROM ACCT [REDACTED]	\$182.05-

Important Information About Your Account

IT IS NOT NECESSARY TO MAIL YOUR PAYMENT. YOUR ACCOUNT WILL AUTOMATICALLY BE PAID BY A DIRECT DEBIT OF YOUR CHECKING OR SAVINGS ACCOUNT. THE DEBIT THIS MONTH IS \$3427.13.

PLEASE DETACH COUPON AND RETURN PAYMENT USING THE ENCLOSED ENVELOPE - ALLOW UP TO 7 DAYS FOR RECEIPT

FIRST MIDWEST BANK
 PO BOX 565
 JOLIET IL 60434-0565



Account Number
 #### #### #### 4939

Check box to indicate name/address change on back of this coupon

AMOUNT OF PAYMENT ENCLOSED

Closing Date	New Balance	Total Minimum Payment Due	Payment Due Date
10/29/15	\$3,427.13	\$3,427.13	11/23/15

\$

BL ACCT 00001230-10000000
 VILLAGE OF SAUK VILLAGE
 21801 TORRENCE AVE
 SAUK VILLAGE IL 60411



MAKE CHECK PAYABLE TO:

BANKCARD PROCESSING CENTER
 PO BOX 31021
 TAMPA FL 33631-3021

21 4865 2259 4521 4939 00342713 00342713 4



Cardholder Account Summary						
Plan Name	Plan	Description	FCM ¹	Average Daily Balance	Periodic Rate *	Corresponding APR
MOHAN RAO				\$0.00		
##### 4947				\$0.00		
Payments & Other		Purchases & Other		\$3,222.19		
Credits		Cash Advances		\$0.00		
Total Activity				\$3,222.19		
Cardholder Account Detail						
Trans Date	Post Date	Plan Name	Reference Number	Description	Amount	
10/01	10/02	PPLN01	24639235274900014500020	ILLINOIS MUNICIPAL LEAGUE 217-5251220 IL	\$35.00	
10/01	10/04	PPLN01	24247605275100587624508	RAY O HERRON CO INC 217-442-0860 IL	\$2,559.60	
10/06	10/07	PPLN01	24639235279900014900043	ILLINOIS MUNICIPAL LEAGUE 217-5251220 IL	\$75.00	
10/12	10/14	PPLN01	24447465286980000745434	CHICAGO BADGE COMPANY CHICAGO IL	\$182.59	
10/20	10/22	PPLN01	24258025294701290717564	IACP 800-843-4227 VA	\$370.00	

Cardholder Account Summary						
Plan Name	Plan	Description	FCM ¹	Average Daily Balance	Periodic Rate *	Corresponding APR
SHERRY JASINSKI				\$0.00		
##### 4954				\$0.00		
Payments & Other		Purchases & Other		\$49.97		
Credits		Cash Advances		\$0.00		
Total Activity				\$49.97		
Cardholder Account Detail						
Trans Date	Post Date	Plan Name	Reference Number	Description	Amount	
10/08	10/09	PPLN01	24492155281894059196678	SUPPLIESOUTLET.COM 877-822-8659 NV	\$49.97	

Cardholder Account Summary						
Plan Name	Plan	Description	FCM ¹	Average Daily Balance	Periodic Rate *	Corresponding APR
KEVIN J WELER				\$0.00		
##### 3906				\$0.00		
Payments & Other		Purchases & Other		\$154.97		
Credits		Cash Advances		\$0.00		
Total Activity				\$154.97		
Cardholder Account Detail						
Trans Date	Post Date	Plan Name	Reference Number	Description	Amount	
09/30	10/02	PPLN01	24445745274100536100431	OFFICE DEPOT #504 HIGHLAND IN	\$125.34	
10/06	10/07	PPLN01	2469215528000983694295	THE UPS STORE 5158 DYER IN	\$29.63	

Finance Charge Summary / Plan Level Information										
Plan Name	Plan	Description	FCM ¹	Average Daily Balance	Periodic Rate *	Corresponding APR	Finance Charges	Effective APR **	Effective APR	Ending Balance
PPLN01	PURCHASE	G		\$0.00	0.77083%(M)	9.2500%(V)	\$0.00	0.0000%	\$0.00	\$3,427.13
CPLN01	CASH	A		\$0.00	0.77083%(M)	9.2500%(V)	\$0.00	0.0000%	\$0.00	\$0.00

* Periodic Rate (M)=Monthly (D)=Daily
 ** Includes cash advance and foreign currency fees
¹ FCM = Finance Charge Method
 (V) = Variable Rate If you have a variable rate account the periodic rate and Annual Percentage Rate (APR) may vary.
 Days in Billing Cycle: 31
 APR = Annual Percentage Rate

INVOICE

Illinois Municipal League
500 E. Capitol Ave.
P.O. Box 5180
Springfield, IL 62705-5180
(217)525-1220
FEIN # 37-6005622



Attn: Accounts Payable

Village of Sauk Village
21801 Torrence Ave
Sauk Village, IL 60411-4561

Invoice Number: 0027395-IN

Invoice Date: 10/1/2015

Customer Number:

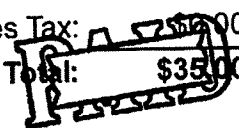
0000532

WEBSER	Web Services	1	\$ 35.00	\$ 35.00
	30 day web employment ad			
	Field Worker			
	Submitted on 9/28/15 by Mohan Rao			
	Paid with VISA ending in 4947			

Aw 300,000.726.000 \$17.50
310,000.726.000 \$17.50

Due Date: 10/31/2015

Net Invoice: \$35.00
S&H: \$0.00
Sales Tax: \$0.00
Invoice Total: \$35.00



JOB ANNOUNCEMENT:

FIELD WORKER

Applications are being accepted for the position of Field Worker. This is a full time position.

General Description of Duties: Field Workers are employed in the Public Works Department, and are assigned to a wide variety of duties required for the construction, maintenance and operation of streets, parks, buildings and grounds, sewers, and water pumping and distribution. Specific duties of this position include street repair, snow plowing, cleaning, painting, and repairing facilities and equipment, sewer maintenance, grass cutting, tree limb chipping, and a variety of other manual labor tasks. Field Workers are "on call" for emergencies which may arise during evenings and weekends, and work is performed in all weather conditions.

Minimum Qualifications: Minimum 18 years of age, with valid driver's license. CDL license with air brake endorsement is preferred, and must be obtained within the first 6 months of employment. Ability to learn to operate a variety of equipment and perform skilled tasks. Ability to perform heavy manual labor.

Selection Process: Selection will be based on an evaluation of qualifications as stated in the employment application, and an oral interview of those applicants judged best qualified. A pre-employment physical examination, which includes drug screening, will be required.

Rate of Pay: The pay range for this position is \$20.43 - \$27.23 per hour, plus full benefits. Initial appointment will be made at \$20.43 per hour.

To Apply: Apply at Village Hall, 21801 Torrence Avenue, Sauk Village, Illinois 60411, phone 708-758-3330. Application for this position must be made using standard forms provided by the Village of Sauk Village. Applications must be received no later than 5:00 p.m. Friday, October 9, 2015.

10/1/2015

Transaction Receipt from Ray OHerron Co Inc fo... - Finance Director Mohan Rao

Transaction Receipt from Ray OHerron Co Inc for 2559.60 (USD)

Auto-Receipt <noreply@mail.authorize.net>

Finance Director Mohan Rao <mr Rao@saukville.org>

Thank you for your business.

Description: Goods or Services
Invoice Number: 1549891
Customer ID: 0160411PS

100.025.630.000 Am

Billing Information
Mohan Rao
21701 Tompore
Sauk Village, IL 60411
mr Rao@saukville.org

Shipping Information
for chief kawabski.

Total: 2559.60 (USD)

Date/Time: 1-Oct-2015 12:38:26 CDT
Transaction ID: 7575403039
Payment Method: Visa xxx4947
Transaction Type: Purchase
Auth Code: 682642

Ray OHerron Co Inc
Danville, IL 61834
US
rayoherron@oherron.com
We appreciate your business.



3549 North Vermillion Street
 PO Box 1070
 Danville, IL 61834-1070

1-800-223-2097
 www.oherron.com
 rayoherron@oherron.com

Suppliers of public safety equipment since 1964

Sold To:
 SAUK VILLAGE POLICE DEPT
 21701 TORRENCE AVE
 SAUK VILLAGE, IL 60411

Ship To:
 SAUK VILLAGE POLICE DEPT
 21701 TORRENCE AVE
 SAUK VILLAGE, IL 60411

Confirm To: BOB KOWALSKI 630-802-7786

Customer P.O. Ship VIA CUSTOMER
 Terms NET 30 DAYS

Item Number	Ordered	Shipped	Back Ordered	Price	Amount
MONI 05W8410-17037	5.00	5.00	0.00	69.99	349.95
WL BLND SHRT-BLACK-17X37					
POLYWOOL - BLACK ; DOUBLE PATCH SAUK VILLAGE ; ADD NAME HOLES	5.00	5.00	0.00	63.99	319.95
55R8410-170	5.00	5.00	0.00	63.99	319.95
POLYWOOL SHIRT-BLACK-17					
47281-40	5.00	5.00	0.00	77.99	389.95
DOUBLE PATCH SAUK VILLAGE ; ADD NAME HOLES					
PANTS,POLYWOOL,BLACK,40					
INSEAM 34					
210BL-BLK-48L	1.00	1.00	0.00	264.99	264.99
DRESS BLOUSE POLYWOOL BLK 48L					
NEEDS TO TRY BLOUSE ON!!! MIGHT NEED TO LENGTHEN SLEEVES ; DOUBLE PATCH					
SAUK VILLAGE PD ; ADD NAME					
55WBK-74#19	1.00	1.00	0.00	89.99	89.99
HAT 5-STAR BLACK W/#19 7 1/2					
90063BK	2.00	2.00	0.00	8.99	17.98
TIE,3.5"x22",CLIP-ON,BLACK					
50BGPFC	1.00	1.00	0.00	9.95	9.95
NAMEPLATE GOLD POLISHED CLUTCH					
KOWALSKI					
50BGPLS	1.00	1.00	0.00	9.95	9.95
NAMEPLATE GOLD POLISHED SCREW					
KOWALSKI					
P8000	1.00	1.00	0.00	14.99	14.99
HAT BAND METALLIC MESH GOLD					
17708	1.00	1.00	0.00	25.99	25.99
7205 BELT PANTS NYLON LG 40-46					
17382	1.00	1.00	0.00	46.99	46.99
7200 BELT DUTY NYLON LRG 40-46					
P1704	1.00	1.00	0.00	9.99	9.99
STARS 5/8 TRIPLE GOLD SMOOTH					

Continued

Invoice



Invoice

RECEIVED Page: 2

3549 North Vermilion Street
PO Box 1070
Danville, IL 61834-1070

1-800-223-2097
www.oherron.com
rayoherron@oherron.com

Invoice Number: 1549894-IN
Invoice Date: 9/11/2015

Order Number: 1528808
Order Date: 9/10/2015
Salesperson: DY

Customer Number: 01-60411PS

Suppliers of public safety equipment since 1964

Sold To:
SAUK VILLAGE POLICE DEPT
21701 TORRENCE AVE
SAUK VILLAGE, IL 60411

Ship To:
SAUK VILLAGE POLICE DEPT
21701 TORRENCE AVE
SAUK VILLAGE, IL 60411

Confirm To: BOB KOWALSKI 630-802-7786

Customer P.O. CHIEF KOWALSKI Ship VIA CUSTOMER Terms NET 30 DAYS

Table with 7 columns: Item Number, Ordered, Shipped, Back Ordered, Price, Amount. Rows include items like STARS 1 TRIPLE GOLD SMTH 3/8, HOLSTER, ALS, BK STX RH, GK22/23, RADIO HOLDER NYLON SWVEL, etc.

DOUBLE PATCH SAUK VILLAGE PD ; ADD NAME HOLES
CUSTOM ALTERED CLOTHING MERCHANDISE MAY NOT BE
RETURNED.

Net Invoice: 1,859.60
Less Discount: 0.00
Freight: 0.00
Sales Tax: 0.00
Invoice Total: 1,859.60



3549 North Vermillion Street
 PO Box 1070
 Danville, IL 61834-1070

1-800-223-2097
 www.oherron.com
 rayoherron@oherron.com

Suppliers of public safety equipment since 1964

Sold To:
 SAUK VILLAGE POLICE DEPT
 21701 TORRENCE AVE
 SAUK VILLAGE, IL 60411

Ship To:
 SAUK VILLAGE POLICE DEPT
 21701 TORRENCE AVE
 SAUK VILLAGE, IL 60411
 Invoice Number: 1549891-IN
 Invoice Date: 10/7/2015
 Order Number: 1528822
 Order Date: 9/10/2015
 Salesperson: DY
 Customer Number: 01-60411PS

Confirm To: BOB KOWALSKI

Item Number	Ordered	Shipped	Back Ordered	Price	Amount
MONI HALOII06ARA	1.00	1.00	0.00	700.00	700.00
Customer P.O. CHIEF KOWALSKI Ship VIA BEST WAY Terms NET 30 DAYS					

FOR BOB KOWALSKI : SEE ATTACHED SIZING SHEET ; HEIGHTS:64 ; WEIGHT:240 ;
 INSEAM:34 ; CHEST:43.1/2 ;
 *** QUOTED PRICES ***

Net Invoice: 700.00
 Less Discount: 0.00
 Freight: 0.00
 Sales Tax: 0.00
 Invoice Total: 700.00

Invoice

INVOICE

Illinois Municipal League
500 E. Capitol Ave.
P.O. Box 5180
Springfield, IL 62705-5180
(217)525-1220
FEIN # 37-6005622



Attn: JW Fairman

Invoice Number: 0027414-IN

Invoice Date: 10/6/2015

Village of Sauk Village
21801 Torrence Ave
Sauk Village, IL 60411-4561

Customer Number:

0000532

SD15	Spiral IML Directory 2015-2016	2	\$ 35.00	\$ 70.00
------	--------------------------------	---	----------	----------

Paid with VISA ending in 4947

Questions? Please contact Tera.

100.010.768.000 AW

Due Date: 11/5/2015

Net Invoice:	\$70.00
S&H:	\$5.00
Sales Tax:	\$0.00
Invoice Total:	\$75.00

Newly updated 2015-2016 Municipal Directory

Now available

Download an order form at
www.iml.org

IML Members: \$30

(\$35 spiral binding)

Non-Members: \$50

(\$60 spiral binding)

Or call 217-525-1220
to place your order.



ILLINOIS MUNICIPAL LEAGUE PUBLICATIONS

(Number of books)

<u>2</u> ✓	CONFLICT OF INTERESTS	Manual on Conflict of Interests and Liability of Illinois Elected Municipal Officials (2010).....	\$12.00
	DIRECTORY	2015-2016 Illinois Municipal Directory	Members:..... \$30 / \$50 Spiral Bound Non-members..... \$50 / \$60 Spiral Bound
	FINANCING IMPROVEMENTS	Financing Municipal Improvements (2005).....	\$7.00
	HANDBOOK	Illinois Municipal Handbook (2014).....	\$40.00
	HOME RULE	Home Rule vs. Non-Home Rule (2014).....	\$15.00
	LEVYING TAXES	Levying Taxes In Illinois Municipalities (2002).....	\$9.00
	IML HISTORY	Celebrating a Century of Service (2013).....	Shipping & Handling
	LIQUOR	Liquor Licensing & Regulation (2011).....	\$12.00
	MUNICIPAL FORMS OF GOVERNMENT	Manual on Municipal Forms of Government (2014).....	\$12.00
	POLICE	Handbook on Practice and Procedure In Police and Fire Disciplinary Matters (2010).....	\$12.00
	SUNSHINE	Manual on Illinois Sunshine Laws (2010).....	\$12.00
	YOU'VE BEEN ELECTED	Now What Do You Do? 3rd Edition (2015).....	\$18.00
	ZONING	Zoning Handbook for Municipal Officials w/Forms (2012).....	\$22.00

Revised 9/1/2015

TAX, SHIPPING, HANDLING, & PAYMENT

Order Total: \$ _____
 Sales Tax (8.5%): \$ _____
 Tax Exempt - please include your tax-exemption letter
 Sub Total: \$ _____
 Shipping and Handling on Order Total: \$ _____
 (\$0.00 - \$100.00 - \$5 | \$100.01 - \$300.00 - \$10 | over \$300.00 - \$15)
TOTAL AMOUNT DUE: \$ _____

SHIP TO ADDRESS:

Name: JW FAIRMAN, VIL. ADMINISTRATOR
 Municipality/Company name: VILLAGE OF SAUK VIL.
 Email: JWFAIRMAN@SAUKVILLAGE.ORG
 Address: 21801, TORRENE AVE.
 City: SAUK VILLAGE, State: IL Zip: 60441
 Daytime Phone: 708-253-5122

Check - Please send payment along with order form to:
 Illinois Municipal League | PO Box 5180 | Springfield, IL 62705-5180

Visa / MasterCard ONLY (FAX TO: 217-525-7436)

BILLING ADDRESS: (as it appears on the credit card)
 Name: VILLAGE of SAUKVILLAGE - AUBURN RD
 Address: 21801, TORRENE AVE
 City: SAUK VILLAGE State: IL Zip: 60441
 Daytime Phone: 708-753-5120

Credit Card #: _____

Verification #: _____

(3 digits on back)

Expiration Date: (mm/yy) _____

Signature: _____

CHICAGO BADGE & INSIGNIA CO.
 9851 S. WINCHESTER AVE.
 CHICAGO, IL 60643
 TEL: 1-773-445-1876
 FAX: 1-773-445-1816

DATE	10/7/15
Invoice	13850

SHIP TO	SAMW

BILL TO	VILLAGE OF SAUK VILLAGE MOHAN KAO 21801 TORRENCE AVE. SAUK VILLAGE, IL 60411

ITEM	DESCRIPTION	QTY	RATE	AMOUNT
080	BADGE, B1916, GOLD PLATE, CHIEF #1, ROBERT J. KOWALSKI, W/SAFETY & WAFFLET CLIP	2	79.20	158.40
001	SHIPPING & HANDLING		3.69	3.69
080 01	RECEIVED BADGE CASE FOR B1916 BADGE	1	20.50	20.50
PAID: VISA XXXX-XXXX-XXXX-45947 (10/12/2015) <i>100,025,630.00</i> <i>AK</i>				
Total \$182.59				

P.O. NO.	TERMS	SHIP DATE	SHIP VIA
	PAID	10/8/15	US Mail

VISA
 Sale
 Entry Method: Manual
 Batch: 00004
 Date: 10/12/15
 Invoice: 00000001 App Code: 694033
 Total: \$ 182.59

CHICAGO BADGE & INSIGNIA CO.
 9851 S. WINCHESTER AVE.
 CHICAGO, IL 60643
 TEL: 1-773-445-1876
 FAX: 1-773-445-1816

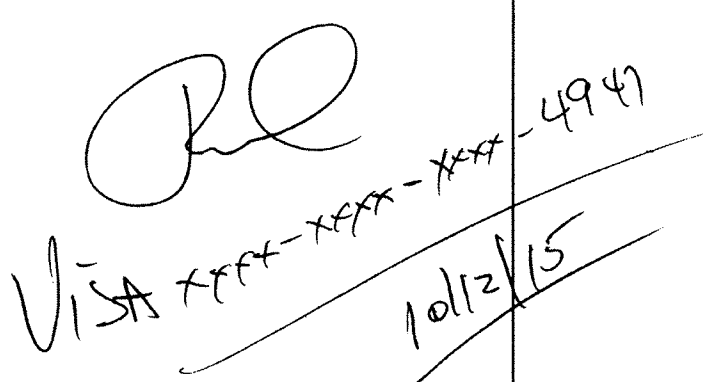
Invoice

DATE	Invoice
10/7/15	13850

BILL TO
VILLAGE OF SAUK VILLAGE MOHAN RAO 21801 TORRENCE AVE SAUK VILLAGE, IL 60411

SHIP TO
SAME

P.O. NO.	TERMS	SHIP DATE	SHIP VIA
	Due on receipt	10/7/15	US Mail

ITEM	DESCRIPTION	QTY	RATE	AMOUNT
080	BADGE, B1916, GOLD PLATE, CHIEF #1, ROBERT J. KOWALSKI, W/SAFETY CATCH & WALLET CLIP	2	79.20	158.40
001	SHIPPING & HANDLING		3.69	3.69
080 01	RECESSED BADGE CASE FOR B1916 BADGE	1	20.50	20.50
				
ALL WORK IS COMPLETE			Total	\$182.59

10/22/2015

FW: IACP 2015 Annual Conference Confirmation - Finance Director Mohan Rao

City: Sauk Village

State: IL

Postal Code: 60411

E-Mail: rkowalski@saukville.org

Telephone: (708) 7535151

Fax:

100,025,722.000
Mohan

REGISTRATION SUMMARY INFORMATION

QTY	DESCRIPTION	PRICE	TOTAL
1	FIRST TIMER [Robert Kowalski]	\$370.00	\$370.00
1	IACP's Chiefs Night	\$0.00	\$370.00
	Total Amount:		\$370.00
	Total Paid:		\$370.00
	Balance Due:		\$0.00

REGISTRATION POLICIES

Registration Cancellation Policy:

All cancellations must be in writing and mailed, faxed (Fax 703.836.4543) or emailed. No telephone cancellations will be accepted. A cancellation fee is in effect through October 20, 2015. No refunds issued on or after October 21, 2015. Visit the website www.theIACPconference.org for full details.

There are no refunds for Banquet or Foundation Gala Tickets.

EVENT POLICIES

For up to date conference information, including workshop details, exhibitor information, and special events, visit the IACP 2015 web page below

www.theIACPconference.org

IACP 2015 APP & SOCIAL MEDIA

The IACP 2015 App will be released in September 2015 - you will receive further information about the App at that time.

CLICK HERE to access your ConnectME dashboard where you can download the IACP App, view "my exhibitors", link to the conference Facebook event and update your profile.

10/22/2015

FW: IACP 2015 Annual Conference Confirmation - Finance Director Mohan Rao

FW: IACP 2015 Annual Conference Confirmation

Police Chief Robert J Kowalski

Thu 10/22/2015 9:40 AM

Inbox

To: Finance Director Mohan Rao <mrao@saukvillage.org>;

Robert J. Kowalski
Chief of Police
Sauk Village Police Department
21701 Torrence Ave.
Sauk Village, IL. 60411
Tel. no. (708) 753-5151
Cell no. (708) 475-3987

CONFIDENTIALITY NOTICE: This message and any attachments may contain confidential information which is legally privileged. The information is intended only for the use of the individual or entity named above. If you are not the intended recipient, you are hereby notified that any disclosure, copying, distribution, or action taken in reliance on the contents of this information is strictly prohibited. If you have received this message in error, please immediately notify me by email or telephone (708-753-5151) and delete all copies of this message and any attachments.

From: IACP 2015 [mailto:iacp@compusystems.com]
Sent: Tuesday, October 20, 2015 2:26 PM
To: Police Chief Robert J Kowalski <rjkowalski@saukvillage.org>
Cc: Police Chief Robert J Kowalski <rjkowalski@saukvillage.org>
Subject: IACP 2015 Annual Conference Confirmation

IACP 2015
www.theIACPconference.org



OCTOBER 24-27
EXHIBITS: OCTOBER 25-27

McCORMICK PLACE WEST
CONVENTION CENTER
CHICAGO, ILLINOIS

www.suppliesoutlet.com Order Confirmation

customer-service@suppliesoutlet.com

Thu 10/8/2015 9:56 AM

Inbox

To: Sherry Jasinski <sjasinski@saukvillage.org>

*Mark
Here is a copy of
the invoice for the
rate of used ink
charge card. Sorry*

Thank you for your order. Your order number is 1104168, placed 10/08/2015 at 07:56AM.

Your order is in processing and changes cannot be made.
You will receive an email with your tracking information shortly.

Bill To:

Village of Sauk Village

Sherry Jasinski

21801 Torrence Ave

Sauk Village, IL 60411

United States

708-758-3330

sjasinski@saukvillage.org

Ship To:

Village of Sauk Village

Sherry Jasinski

21801 Torrence Ave

Sauk Village, IL 60411

United States

708-758-3330

Shipping Method:

Economy Ground Delivery By USPS (2 to 4 Days)

Payment Info:

Credit Card: Visa

village of sauk village
*****4954

Order Details:

Code	Item	Qty	Price	Grand Total
PTQ2613X	HP Q2613X (HP 13X) Compatible High Yield Black Laser Toner Cartridge	1	\$20.99	\$20.99
PTCF280AND	Compatible HP 80A Toner Cartridge CF280A	1	\$22.99	\$22.99
				\$43.98
				Subtotal: \$43.98
				Tax: \$0.00
				Shipping Cost: \$5.99
				Grand Total: \$49.97

*M Rao
G. K01/am*

Thank you for shopping at www.suppliesoutlet.com!
Visit us again at <http://www.suppliesoutlet.com/>

CustomerID# 633365

Office DEPOT OfficeMax

OFFICE DEPOT STORE 504
10332 Indianapolis Blvd.
Highland, IN 46322
(219) 934-9034

09/30/2015 15.2.5 2:46 PM
STR 504 REG2 TRN 3257 EMP 546150

#FW
300-000-610 *10/2/15*

Product ID	Description	Total
823213	HGHLTR, 10PK, AS	13.99 S
100613	PAD, DSK, 20x36,	34.99 S
304026	PNS, PSH, 150P, A	4.69 S
452377	FILM, LAMINATIN	22.99 S
787305	MAGNFR, SR-GRIP	16.49 S
535712	PCH, LAMIN, LGL,	23.99 S

Subtotal: 117.14
Sales Tax: 8.20
Total: 125.34
Visa 3906: 125.34

Shop online at www.officedepot.com *10/2/15*
#FW
300-000-610

WE WANT TO HEAR FROM YOU!

Participate in our online customer survey
and receive a coupon for **\$10 off your**
next qualifying purchase of \$50 or more on
office supplies, furniture and more.
(Excludes Technology. Limit 1 coupon per
household/business.)

Visit www.officedepot.com/feedback
and enter the survey code below.

Survey Code:

S4AX 1BQQ K6S9



22VT9Q4PYUYBMR8

Now one company. Now great savings.
Office Depot, Inc., including its
subsidiary OfficeMax Incorporated

The UPS Store - #5158

905 Joliet Street

Dyer, IN 46311

(219) 322-9004

10/06/15 01:06 PM

We are the one stop for all your shipping, postal and business needs.

Track your packages at

www.theupsstorelocal.com/5158



001 001040 (001) 10 \$ 29.63

Ground Commercial

Tracking# 1Z296YX60390/149/2

Subtotal \$ 29.63

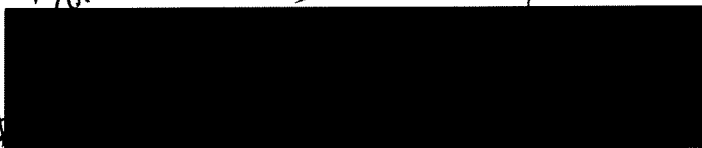
Total \$ 29.63

VISA \$ 29.63

*****3900

ACCOUNT NUMBER *

Appr Code: (S) Sale



Handwritten: 270-000-768 10/6/15

Receipt ID 837476/245394688980 001 Items
CSH: KELSEY Trans: 1378 Key: 001

Thank you for visiting our store.

Please come back again soon.

Always your business and personal

needs, we are here to serve you.

We're here to help.

our FREE email program to receive great offers and resources.

www.theupsstore.com/signup

Handwritten: #5158 270-000-768 10/6/15



BL ACCT 00001230-10000000
 VILLAGE OF SAUK VILLAGE
 Account Number: #### #### #### 4939
 Page 1 of 3



Account Summary

Billing Cycle 11/29/2015
 Days In Billing Cycle 31
 Previous Balance \$3,427.13
 Purchases + \$351.53
 Cash + \$0.00
 Special + \$0.00
 Credits - \$0.00
 Payments - \$3,427.13
 Other Charges + \$0.00
 Finance Charges + \$0.00

NEW BALANCE \$351.53

Account Inquiries



Call us at: (800) 221-5920
 Lost or Stolen Card: (866) 839-3485



Write us at PO BOX 31535, TAMPA, FL 33631-3535

Payment Summary

NEW BALANCE \$351.53
MINIMUM PAYMENT \$351.53
PAYMENT DUE DATE 12/24/2015

NOTE: Grace period to avoid a finance charge on purchases, pay entire new balance by payment due date. Finance charge accrues on cash advances until paid and will be billed on your next statement.

Credit Summary

Total Credit Line \$6,000.00
 Available Credit Line \$5,648.47
 Available Cash \$0.00
 Amount Over Credit Line \$0.00
 Amount Past Due \$0.00
 Disputed Amount \$0.00

Corporate Activity

TOTAL CORPORATE ACTIVITY				\$3,427.13-
Trans Date	Post Date	Reference Number	Transaction Description	Amount
11/23	11/23	7486522532611111111111	AUTO PMT FROM ACCT [REDACTED]	\$3,427.13-

Important Information About Your Account

IT IS NOT NECESSARY TO MAIL YOUR PAYMENT. YOUR ACCOUNT WILL AUTOMATICALLY BE PAID BY A DIRECT DEBIT OF YOUR CHECKING OR SAVINGS ACCOUNT. THE DEBIT THIS MONTH IS \$351.53.

PLEASE DETACH COUPON AND RETURN PAYMENT USING THE ENCLOSED ENVELOPE - ALLOW UP TO 7 DAYS FOR RECEIPT

FIRST MIDWEST BANK
 PO BOX 565
 JOLIET IL 60434-0565



Account Number

4939

Check box to indicate name/address change on back of this coupon

AMOUNT OF PAYMENT ENCLOSED

Closing Date	New Balance	Total Minimum Payment Due	Payment Due Date
11/29/15	\$351.53	\$351.53	12/24/15

\$

BL ACCT 00001230-10000000
 VILLAGE OF SAUK VILLAGE
 21801 TORRENCE AVE
 SAUK VILLAGE IL 60411



MAKE CHECK PAYABLE TO:

BANKCARD PROCESSING CENTER
 PO BOX 31021
 TAMPA FL 33631-3021

21 4865 2259 4521 4939 00035153 00035153 6



BL ACCT 00001230-1000000
 VILLAGE OF SAUK VILLAGE
 Account Number: ##### 4939
 Page 3 of 3

Cardholder Account Summary						
Plan Name	Plan	FCM ¹	Average Daily Balance	Periodic Rate ²	Corresponding APR	
MOHAN RAO	##### 4947		\$0.00	\$154.02	\$0.00	
Cardholder Account Detail						
Trans Date	Post Date	Plan Name	Reference Number	Description	Amount	
10/29	11/01	PPLN01	24247605303100582261187	RAY O HERRON CO INC 217-442-0860 IL	\$94.40	
10/30	11/01	PPLN01	24445005304600260093101	WALGREENS #5128 SAUK VILLAGE IL	\$37.15	
11/03	11/04	PPLN01	24427335307720014081176	MCDONALD'S F3420 SAUK VILLAGE IL	\$14.20	
11/03	11/04	PPLN01	24427335307720014081184	MCDONALD'S F3420 SAUK VILLAGE IL	\$1.00	
11/16	11/17	PPLN01	24231685321837009429016	FAMILY DOLLAR #7823 SAUK VILLAGE IL	\$7.27	
Total Activity						\$154.02

Cardholder Account Summary						
Plan Name	Plan	FCM ¹	Average Daily Balance	Periodic Rate ²	Corresponding APR	
DAVID A HANKS	##### 2205		\$0.00	\$52.31	\$0.00	
Cardholder Account Detail						
Trans Date	Post Date	Plan Name	Reference Number	Description	Amount	
11/10	11/11	PPLN01	24122545314740314480145	1330 RIVERBOAT JOLETT IL	\$22.50	
11/10	11/11	PPLN01	24427335314720045975561	MCDONALD'S F26960 JOLETT IL	\$4.49	
11/10	11/12	PPLN01	2405235315837003346591	FREEDOM OIL # 39 BLOOMINGTON IL	\$18.21	
11/10	11/12	PPLN01	24210735315207600700031	ARBY'S # 1660 BLOOMINGTON IL	\$7.11	
Total Activity						\$52.31

Cardholder Account Summary						
Plan Name	Plan	FCM ¹	Average Daily Balance	Periodic Rate ²	Corresponding APR	
KEVIN J WELLER	##### 3906		\$0.00	\$145.20	\$0.00	
Cardholder Account Detail						
Trans Date	Post Date	Plan Name	Reference Number	Description	Amount	
11/04	11/06	PPLN01	24326885309042000002155	ADVANCE AUTO PARTS #7628 FORD HEIGHTS IL	\$113.69	
11/25	11/27	PPLN01	243268853300420000005508	ADVANCE AUTO PARTS #7628 FORD HEIGHTS IL	\$31.51	
Total Activity						\$145.20

Finance Charge Summary / Plan Level Information										
Plan Name	Plan	FCM ¹	Average Daily Balance	Periodic Rate ²	Corresponding APR	Finance Charges	Fees ³	Effective APR	Effective APR	Ending Balance
PPLN01	PURCHASE	G	\$0.00	0.77083%(M)	9.2500%(V)	\$0.00	\$0.00	0.0000%	0.0000%	\$351.53
CPLN01	CASH	A	\$0.00	0.77083%(M)	9.2500%(V)	\$0.00	\$0.00	0.0000%	0.0000%	\$0.00

¹ FCM = Finance Charge Method
² Periodic Rate (M)=Monthly (D)=Daily
³ Includes cash advance and foreign currency fees
 Days in Billing Cycle: 31
 APR = Annual Percentage Rate
 (V) = Variable Rate If you have a variable rate account the periodic rate and Annual Percentage Rate (APR) may vary.



Service is our best part!
 Store 7628 19 Sauk Plaza Sauk Village, IL 60411 Phone: (708) 675-7131
 Questions or feedback? Contact the Commercial Customer Support Team
 at 1-877-280-5965 or email us at service@advanceautoparts.com

Village of Sauk Village
 21801 Torrence Ave
 Sauk Village, IL 60411
 Phone: (708) 758-3330
 Account ID: 1872642373

P.O. #: _____
 Date: 11/04/15
 Register: 3
 Store/Unit#: _____
 Internet Order #: _____

Invoice/Trans: 7628530830432
 Time: 9:11:27AM
 Delivery: No
 Salesperson: Joseph

Product Line	Part #	Description	SKU	Warranty	Qty	List	Cost	Extended
<input type="checkbox"/> CARQUEST or ToughOne SA	6470S	STARTER-RMFD 1 EA COSN 5221331		LIMITED LIFETIME REPLACEMENT	1	162.75	105.00	105.00
<input type="checkbox"/> CARQUEST or ToughOne SA	6470S	CORE STARTER-RMFD 1 EA 95221331			1		22.00	22.00
<input type="checkbox"/> CRC	05110	MAF SENSOR CLEANER 11 (7070079		REPLACE OR REFUND AT MGR DISCRETION	1	15.21	8.69	8.69
Returns								
CARQUEST or ToughOne SA	6470S	CORE STARTER-RMFD 1 EA 95221331			-1		22.00	-22.00

MERCHANDISE SUBTOTAL 113.69
 TOTAL INVOICE 113.69



D2MGE1DPFOQ1LHK18JB

CHANGE

Visa 3906 612838-

0.00

Handwritten: #476, 310-000-620, 12/11/15, Credit CARD

Handwritten signature: [Signature]

Customer's signature below certifies that the tax free purchase items qualify for resale or other permitted tax or fee exemption. Customer will pay all taxes and government fees on taxable purchases, including interest and penalties if applicable. All cores need to be in the original box and in rebuildable condition to receive full core credit. Invoice required as proof of purchase for all returns.

Received By _____ 1 of 1 Store Copy _____ Date _____

Cardholder acknowledges receipt of goods and/or services in the amount of total shown hereon and agrees to pay from the attached card.

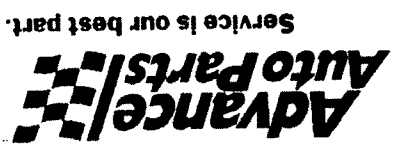
CARD TYPE: Visa
 ACCOUNT #: *****3906
 AUTH CODE: 653058 AMOUNT: \$31.51

Transaction #9633

GET UP TO \$20 OFF YOUR NEXT PURCHASE!
 Fall customers, join Speed Perks Rewards today. Spend \$100 get \$20 off your next purchase of \$40 or more. Spend \$30 get \$5 off your next purchase of \$10 or more. Sign up to join. Text SPEED to 78260 or go to www.speedperks.com/terms for details.

ITEM	QTY	PRICE	TOTAL
V-BELT-UTILITY 1 EA COD 5063566	1	\$15.09	\$15.09
1 YR REPLACEMENT IF DEFECTIVE			
V-BELT-UTILITY 1 EA COD 5063434	1	\$14.09	\$14.09
2 REPLACEMENT IF DEFECTIVE			
Sub Total			\$29.18
TI Tax @ 8.0000%			\$2.37
Total			\$31.55

Store # 07628
 (708) 675-7129
 19 Sauk Plaza
 Sauk Village IL 60411
 11/25/2015 11:04:59 REG 02
 Cashier: Matthew P.



Handwritten notes:
 11/25/15
 #170
 168-015-640
 ault card

TRANSMISSION VERIFICATION REPORT

TRANSMISSION V...

TIME : 09/21/2015 14:18

09/21 14:17
98771054
00:01:06
02
OK
STANDARD

FAMILY DOLLAR

STORE #07823 2561 E Sauk Trail
Sauk Village IL, 708-757-3980

PLASTIC CUTLERY WHITE FORKS 48CT 1.00 T
002251041488
PLASTIC CUTLERY WHITE FORKS 48CT 1.00 T
002251041488
AQUAFINA WATER 16.9FL OZ 24 PK 5.00 F
012000504044

SUBTOTAL \$7.00
TAX1 \$0.16
TAX2 \$0.11
TOTAL \$7.27
VISA \$7.27

*****947
PURCHASE
SWIFED
APPROVED
AUTH# 564512
INVOICE #: 9429
11-16-2015 12:56:44
SEQUENCE NO: 942901

100.010.768.000 Acw



99078230294290167553

TEAR HERE



AUTHORIZED RETAILER

\$19.99/a Month
for 1st 12 Months

\$50 VISA GIFT CARD
OFFER CODE: GIFT50

HIGH-SPEED INTERNET
STARTING AT \$14.95*
(Where available)

CALL: 1-844-215-9218
For next day installation*

www.InfinityDish.com

*Terms and conditions apply. Indiana C.P.D. Reg. No. T.S. R1903.
* \$50 Gift Card with DISH Activation. 24 Month Agreement Required.

TEAR HERE

How are we doing?

Take a brief survey within the next
7 days for a chance to win a

\$500 gift card

www.ratefd.com

Encuesta tambien disponible en Espanol

*EER

ITEMS 3

11-16-2015 12:56:47 07823 02 1071186 9429

Cash Check Debit Credit & EBT Accepted.

THANK YOU

100.010.768.000 Acct New 10/30/2015.
 Machine supplies under, 5 unit cts
 For O.P. banners, cones & napkins
 & straws

Your satisfaction is very important to us. If you are unhappy with your purchase, you may return it to any of our nationwide stores for an exchange or refund within 30 days. With original receipt, items will be exchanged or refunded for the full purchase price. Refunds will be issued in the original method of payment. Without original receipt, items will be exchanged or refunded at the lowest advertised price within the 30 days prior to the date of return. Refunds will be issued as store credit. For any return, you may be required to provide valid government-issued photo identification. We reserve the right to limit or refuse a return. For exclusions and return policies for online purchases, visit Walgreens.com.

10,000 points | 18,000 points | 30,000 points | 40,000 points

Restrictions apply. For terms and conditions, visit Walgreens.com/Balance.

Walgreens



Upload your photos to **Walgreens.com**, then pick up at any Walgreens nationwide.

Your satisfaction is very important to us. If you are unhappy with your purchase, you may return it to any of our nationwide stores for an exchange or refund within 30 days. With original receipt, items will be exchanged or refunded for the full purchase price. Refunds will be issued in the original method of payment. Without original receipt, items will be exchanged or refunded at the lowest advertised price within the 30 days prior to the date of return. Refunds will be issued as store credit. For any return, you may be required to provide valid government-issued photo identification. We reserve the right to limit or refuse a return. For exclusions and return policies for online purchases, visit Walgreens.com.

91 6701 0071 10/30/2015 10:20
 ICEI PURIFIED WATER 16.90Z 24S 2.99
 04902279077
 RETURN VALUE 2.99
 /S VAN SNOWMCH CREM COOKIE 14ZPPR 2.00
 04902277331
 RETURN VALUE 2.00
 /S SNCKRDDLE SFT BKD CKIE 7.1ZPPR 1.00
 04902286378
 RETURN VALUE 1.00
 /S OTML RSN SFT BKD COKIE7.10ZPPR 1.00
 04902283626
 RETURN VALUE 1.00
 /S SUGAR SOFT BKE COOKIE 7.1Z PPR 1.00
 04902283630
 RETURN VALUE 1.00
 IN MAID CRANAPPLE RSPBRY 15.20Z 17.91
 02500005602
 9 @ 1.99
 RETURN VALUE 1.99 ea
 IN MAID APPLE JUICE 15.20Z 7.96
 02500005601
 4 @ 1.99
 RETURN VALUE 1.99 ea
 IMPLY CRNBRY JUICE COCKTL 11.50Z 1.65
 02500000030
 1 @ 1.79 or 2/3.29
 RETURN VALUE 1.64
 IMPLY FRUIT PUNCH 11.5 OZ 1.64
 02500000069
 1 @ 1.79 or 2/3.29
 RETURN VALUE 1.65
 TOTAL VISA ACCT 4947 37.15
 CHANGE 1.00

37.15

Walgreens
 #05128 2601 E SAUK TRL
 SAUK VILLAGE, IL 60411
 708-757-6906

230

BUY ONE GET ONE FREE QUARTER POUNDER
W/CHEESE OR EGG MCMUFFIN

Go to www.mcdvoice.com within 7 days
and tell us about your visit.

Validation Code: _____

Expires 30 days after receipt date.
Valid at participating US McDonald's.

2707 SAUK TRL
SAUK VILLAGE
IL
60411

!!! THANK YOU !!!

TEL# 708 757 7645 Store# 3420

232

BUY ONE GET ONE FREE QUARTER POUNDER
W/CHEESE OR EGG MCMUFFIN

Go to www.mcdvoice.com within 7 days
and tell us about your visit.

Validation Code: _____

Expires 30 days after receipt date.
Valid at participating US McDonald's.

2707 SAUK TRL
SAUK VILLAGE
IL
60411

!!! THANK YOU !!!

TEL# 708 757 7645 Store# 3420

ed with the Act.

*** TAX EXEMPT SALE ***

KS# 2 Nov.03'15 (Tue) 12:28

MFY SIDE 1 KVS Order 30

QTY ITEM	TOTAL
1 Filet-O-Fish Meal	5.59
1 M Coffee	0.29
<Drink Upcharge>	
ADD Cream	
1 Filet-O-Fish Meal	5.59
1 M Coffee	0.29
<Drink Upcharge>	
1 L Coffee	1.39
ADD 2 Cream	
ADD 5 Sugar	

Subtotal 13.15
Tax 1.05

Eat-In Total 14.20

Cashless 14.20
Change 0.00

MER# 87857802
CARD ISSUER ACCOUNT#
Visa SALE *****4947
AUTHORIZATION CODE - 685327
SEQ# 461378

McDonald's Restaurant

KS# 2 Nov.03'15 (Tue) 12:33

KVS Order 32

ITEM	TOTAL
Coffee	1.00
ADD 2 Sugar	
ADD Cream	
Total	1.00
<>	0.00
Out Total	1.00
Cashless	1.00
Change	0.00

MER# 87857802
CARD ISSUER ACCOUNT#
Visa SALE *****4947
AUTHORIZATION CODE - 634582
SEQ# 461384

McDonald's Restaurant

E-zone - expansion
Meeting with
Ford Heights Mayor
Mr. Griffin, Village
Adm. JW, Reid
Parker & Mohan R
11/3/2015
100,010,768.000
Amount \$15.20

YEAR BEGINNING

10/29/2015

FW: Updated Invoice - Finance Director Mohan Rao

FW: Updated Invoice

Jackie Tripylas <jackie@oherron.com>

Finance Director Mohan Rao <mrao@saukvillage.org>

doc00233220151028152913.pdf

Here is a copy of the updated invoice that shows the new total of \$1954.00. Since you have previously paid, you owe us the difference of \$94.40. Let me know if you have any questions.

Thanks,

Jackie Tripylas

Ray O'Herron

1600 75th St

Dowers Grove Il 60516

Phone: 630-629-2677

-----Original Message-----

From: dtiscan@dtios.com [mailto:dtiscan@dtios.com]

Sent: Wednesday, October 28, 2015 3:29 PM

To: Jackie Tripylas

Subject:

ECOSYS M6535cidn

[00:17 c8:00:06:11]

100,025,630,000 *AR*



Invoice

3549 North Vermilion Street
PO Box 1070
Danville, IL 61834-1070

1-800-223-2097
www.oherron.com
rayoherron@oherron.com

Invoice Number: 1549894-IN
Invoice Date: 10/28/2015

Order Number: 1528808
Order Date: 9/10/2015
Salesperson: DY

Customer Number: 01-60411PS

Suppliers of public safety equipment since 1964

Sold To:
SAUK VILLAGE POLICE DEPT
21701 TORRENCE AVE
SAUK VILLAGE, IL 60411

Ship To:
SAUK VILLAGE POLICE DEPT
21701 TORRENCE AVE
SAUK VILLAGE, IL 60411

Confirm To: BOB KOWALSKI 630-802-7786

Customer P.O.	Ship VIA	Terms
CHIEF KOWALSKI	CUSTOMER	NET 30 DAYS

Item Number	Ordered	Shipped	Back Ordered	Price	Amount
P1704 STARS 5/8 TRIPLE GOLD SMOOTH	1.00	1.00	0.00	9.99	9.99 ✓
P1904 STARS 1 TRIPLE GOLD SMTH 3/8	1.00	1.00	0.00	9.99	9.99 ✓
6360-83-131 HOLSTER, ALS, BK STX RH, GK22/23	1.00	1.00	0.00	146.99	146.99 ✓
18521 7314S RADIO HOLDER NYLON SWVEL	1.00	1.00	0.00	32.99	32.99 ✓
15635 7406 KPRS-BLK NYLON SNP-4/PKG	1.00	1.00	0.00	10.99	10.99 ✓
18190 7300 CUFF CASE SZ-1 NYLON	1.00	1.00	0.00	20.99	20.99 ✓
18472 7302 POUCH MAG DBL G17 NYLON	1.00	1.00	0.00	29.99	29.99 ✓
580-17037 SHIRT, LS DUTYMAXX, WHT, 17X37	1.00	1.00	0.00	56.99	56.99 ✓
AH7603PAN-C HAT BADGE GOLD CHIEF DOUBLE PATCH SAUK VILLAGE PD ; ADD NAME HOLES TOOK HOME CUSTOM ALTERED CLOTHING MERCHANDISE MAY NOT BE RETURNED.	1.00	1.00	0.00	68.50	68.50

Not paid before

68.50

Net Invoice: 1,954.00
Less Discount: 0.00
Freight: 0.00
Sales Tax: 0.00
Invoice Total: 1,954.00



3549 North Vermillion Street
 PO Box 1070
 Danville, IL 61834-1070

1-800-223-2097
 www.oherron.com
 rayoherron@oherron.com

Suppliers of public safety equipment since 1964

Sold To:
 SAUK VILLAGE POLICE DEPT
 21701 TORRENCE AVE
 SAUK VILLAGE, IL 60411

Ship To:
 SAUK VILLAGE POLICE DEPT
 21701 TORRENCE AVE
 SAUK VILLAGE, IL 60411

Confirm To: BOB KOWALSKI 630-802-7786

Customer P.O. Ship VIA CUSTOMER

Terms
 NET 30 DAYS

Item Number	Ordered	Shipped	Back Ordered	Price	Amount
-------------	---------	---------	--------------	-------	--------

MONI					
05W8410-17037	5.00	5.00	0.00	69.99	349.95
WL BLND SHRT-BLACK-17X37					
POLYWOOL - BLACK ; DOUBLE PATCH SAUK VILLAGE ; ADD NAME HOLES					
55R8410-170	5.00	5.00	0.00	63.99	319.95
POLYWOOL SHIRT-BLACK-17					
DOUBLE PATCH SAUK VILLAGE ; ADD NAME HOLES					
47281-40	5.00	5.00	0.00	77.99	389.95
PANTS,POLYWOOL,BLACK,40					
INSEAM 34					
210BL-BLK-48L	1.00	1.00	0.00	264.99	264.99
DRESS BLOUSE POLYWOOL BLK 48L					
DOUBLE PATCH SAUK VILLAGE PD ; ADD NAME HOLES - PIPING 3/8" HALF WAY AROUND,					
ONLY 1 STRIPE ON EACH					
BNFV961209174CL	2.00	2.00	0.00	12.95	25.90
BRAID 3/8" GOLD (96) 3YD					
55WBLK-74#19	1.00	1.00	0.00	89.99	89.99
HAT 5-STAR BLACK W/#19 7 1/2					
90063BK	2.00	2.00	0.00	8.99	17.98
TIE,3.5"x22",CLIP-ON,BLACK					
508GPRC	1.00	1.00	0.00	9.95	9.95
NAMEPLATE GOLD POLISHED CLUTCH					
KOWALSKI					
508GPLS	1.00	1.00	0.00	9.95	9.95
NAMEPLATE GOLD POLISHED SCREW					
KOWALSKI					
P8000	1.00	1.00	0.00	14.99	14.99
HAT BAND METALLIC MESH GOLD					
17708	1.00	1.00	0.00	25.99	25.99
7205 BELT PANTS NYLON LG 40-46					
17382	1.00	1.00	0.00	46.99	46.99
7200 BELT DUTY NYLON LRG 40-46					

Continued

Invoice

10/29/2015

Transaction Receipt from Ray OHerron Co Inc fo... - Finance Director Mohan Rao

Transaction Receipt from Ray OHerron Co Inc for 94.40 (USD)

Auto-Receipt <noreply@mail.authorize.net>

Thu, 29 Oct 2015 11:32:08 CDT

From:

Finance Director Mohan Rao <mrao@saukvillage.org>

Thank you for your business.

Description: Goods or Services
Invoice Number: 1549894
Customer ID: 01-60411PS

Billing Information

Mohan Rao
21701 Torrence Ave
Sauk Village, IL 60411
mrao@saukvillage.org

Shipping Information

Total: 94.40 (USD)

Date/Time: 29-Oct-2015 11:32:08 CDT
Transaction ID: 7661970524
Payment Method: Visa xxx4947
Transaction Type: Purchase
Auth Code: 621015

Ray OHerron Co Inc
Danville, IL 61834
US
rayoherron@oherron.com
We appreciate your business.

Merchant: Ray O'Herron Co Inc	
3549 N. Vermillion Street Danville, IL 61834 US (217) 442-0860	
Order Information	
Description:	
Order Number:	
Customer ID:	01-60411PS
Billing Information	
Mohan Rao 21701 Torrence Ave Sauk Village, IL 60411 mrao@saukvillage.org	
Shipping Information	
P.O. Number:	
Invoice Number:	1549894
Date/Time: 29-Oct-2015 11:32:08 CDT	
Transaction ID:	7661970524
Transaction Type:	Authorization w/ Auto Capture
Transaction Status:	Captured/Pending Settlement
Authorization Code:	621015
Payment Method:	Visa XXXXX4947
Shipping: 0.00	
Tax: 0.00	
Total: USD 94.40	

FW: Receipt Request

Jackie Tripylas <jackie@oherron.com>

Finance Director Mohan Rao <mrao@saukvillage.org>

doc00236620151009174557.pdf

Hello,

Here is a copy of the receipt that shows that you paid for the difference on invoice# 1549894. Thank you again.

Thanks,

Jackie Tripylas

Ray O'Herron

1600 75th St

Downers Grove, IL 60515

Phone: 630-629-2677

-----Original Message-----

From: dtiscan@dtios.com [mailto:dtiscan@dtios.com]

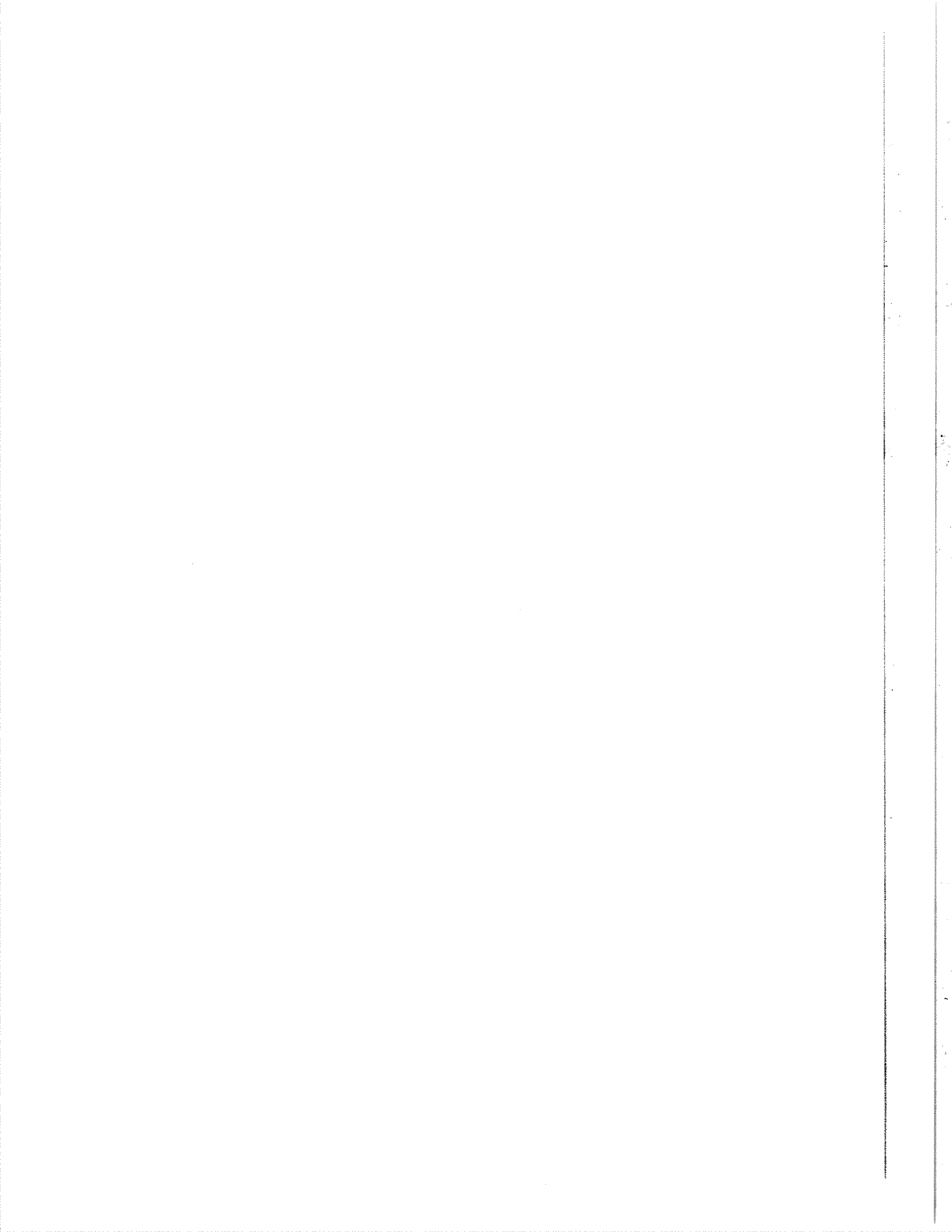
Sent: Thursday, October 29, 2015 11:46 AM

To: Jackie Tripylas

Subject:

ECOSYS M653@cidn

[00:17:c8:00:06:f1]





Account Summary

Billing Cycle		12/29/2015
Days In Billing Cycle		30
Previous Balance		\$351.53
Purchases	+	\$2,027.10
Cash	+	\$0.00
Special	+	\$0.00
Credits	-	\$0.00
Payments	-	\$351.53-
Other Charges	+	\$0.00
Finance Charges	+	\$0.00
NEW BALANCE		\$2,027.10

Credit Summary

Total Credit Line	\$6,000.00
Available Credit Line	\$3,972.90
Available Cash	\$0.00
Amount Over Credit Line	\$0.00
Amount Past Due	\$0.00
Disputed Amount	\$0.00

Account Inquiries

Call us at: (800) 221-5920
 Lost or Stolen Card: (866) 839-3485

Write us at PO BOX 31535, TAMPA, FL 33631-3535

Payment Summary

NEW BALANCE	\$2,027.10
MINIMUM PAYMENT	\$2,027.10
PAYMENT DUE DATE	01/25/2016

NOTE: Grace period to avoid a finance charge on purchases, pay entire new balance by payment due date. Finance charge accrues on cash advances until paid and will be billed on your next statement.

Corporate Activity

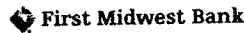
TOTAL CORPORATE ACTIVITY				\$351.53-
Trans Date	Post Date	Reference Number	Transaction Description	Amount
12/24	12/24	748652253571111111111111	AUTO PMT FROM ACCT [REDACTED]	\$351.53-

Important Information About Your Account

IT IS NOT NECESSARY TO MAIL YOUR PAYMENT. YOUR ACCOUNT WILL AUTOMATICALLY BE PAID BY A DIRECT DEBIT OF YOUR CHECKING OR SAVINGS ACCOUNT. THE DEBIT THIS MONTH IS \$2027.10.

PLEASE DETACH COUPON AND RETURN PAYMENT USING THE ENCLOSED ENVELOPE - ALLOW UP TO 7 DAYS FOR RECEIPT

FIRST MIDWEST BANK
 PO BOX 565
 JOLIET IL 60434-0565



Account Number
 #### #### #### 4939

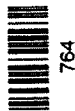
Check box to indicate name/address change on back of this coupon

AMOUNT OF PAYMENT ENCLOSED

Closing Date	New Balance	Total Minimum Payment Due	Payment Due Date
12/29/15	\$2,027.10	\$2,027.10	01/25/16

\$

BL ACCT 00001230-10000000
 VILLAGE OF SAUK VILLAGE
 21801 TORRENCE AVE
 SAUK VILLAGE IL 60411



764

MAKE CHECK PAYABLE TO:

BANKCARD PROCESSING CENTER
 PO BOX 31021
 TAMPA FL 33631-3021

21 4865 2259 4521 4939 00202710 00202710 4



BL ACCT 00001230-1000000
 VILLAGE OF SAUK VILLAGE
 Account Number: ##### 4939
 Page 3 of 3

Cardholder Account Summary				
Trans Date	Post Date	Plan Name	Reference Number	Description
12/08	12/09	PPLN01	24326845342207691900289	NIU OUTREACH 815-753-5927 IL
Cardholder Account Detail				
MOHAN RAO				
Payments & Other	Credits	Purchases & Other	Cash Advances	Total Activity
\$0.00	\$0.00	\$99.00	\$0.00	\$99.00
Amount				

Cardholder Account Summary				
Trans Date	Post Date	Plan Name	Reference Number	Description
12/11	12/13	PPLN01	24138295346708000021842	SEARS HHO INC 5291 SCHERERVILLE IN
12/11	12/13	PPLN01	24072805345286800900049	LYNWOOD FIRESTONE LYNWOOD IL
12/21	12/13	PPLN01	24138295356708000037290	SEARS HHO INC 5291 SCHERERVILLE IN
12/21	12/23	PPLN01	24072805356708000037290	LYNWOOD FIRESTONE LYNWOOD IL
12/22	12/23	PPLN01	24072805356708000037290	LYNWOOD FIRESTONE LYNWOOD IL
12/29	12/29	PPLN01	24692165363000599473449	SPRINT WIRELESS 800-639-6111 KS
Cardholder Account Detail				
KEVIN J WELER				
Payments & Other	Credits	Purchases & Other	Cash Advances	Total Activity
\$0.00	\$0.00	\$1,928.10	\$0.00	\$1,928.10
Amount				

\$85.58
 \$416.00
 \$42.78
 \$522.44
 \$861.30

Finance Charge Summary / Plan Level Information									
Plan Name	Plan Description	FCM ¹	Average Daily Balance	Periodic Rate ²	Corresponding APR	Finance Charges	Effective APR ³	Fees ⁴	Effective APR
PPLN01	PURCHASE	G	\$0.00	0.77083%(M)	9.2500%(V)	\$0.00	0.0000%	\$0.00	0.0000%
Cash	CASH	A	\$0.00	0.77083%(M)	9.2500%(V)	\$0.00	0.0000%	\$0.00	0.0000%
Days in Billing Cycle: 30 APR = Annual Percentage Rate ¹ FCM = Finance Charge Method ² Periodic Rate (M)=Monthly (D)=Daily ³ Includes cash advance and foreign currency fees ⁴ Variable Rate If you have a variable rate account the periodic rate and Annual Percentage Rate (APR) may vary.									

LYNWOOD FIRESTONE
 21551 LINCOLN HWY
 LYNWOOD IL 60411
 (800) 422-3771

12/22/2015 2:41 PM

page 1

Invoice #110836

PUBLIC WORKS, SAUK VILLAGE
 21801 TORRENCE AVE
 SAUK VILLAGE IL 60410

Day Phone : 708-757-2420
 Eve Phone : 708-758-3330 MIKE BARNICKI

Vehicle : 1999 Chevrolet Truck Silverado 1500 1/2 Ton 2WD -

VIN : 1GCEC14WXXE245127

Created : 12/22/2015 8:23:03 AM

Odometer In : 0

Complete : 12/22/2015 2:26:01 PM

Odometer Out : 73263

Invoiced : 12/22/2015 2:41:42 PM

Srv Writer : 10

Labor/Notes

Qty	Code/Tech*	Reference	Description	Unit Price	Price
4	02*	EPA	EPA TIRE DISPOSAL FEE	\$0.00	\$0.00
VILLAGE TAKING OLD TIRES					
4	02*	FREE	FREE TIRE ROTATION (EVERY 6,000 MILES)	\$0.00	\$0.00
4	02*	MDIS	MOUNT & COMPUTER SPIN BALANCE	\$18.00	\$72.00
4	02*	UTF	USER TIRE FEE	\$2.50	\$10.00

Parts

Qty	Code/Tech*	Reference	Description	Condition	Unit Price	Price
4	-	001-TIRE	P235/75R16 DESTINATION LE2		\$107.55	\$430.20
DOT # VN3DDE14415 (1), 4015 (1)						

Labor	\$82.00
Parts	\$430.20
Sublet/Misc.	\$0.00
SHOP SUPPLIES	\$10.24
Charges	\$0.00
Sales Tax	\$0.00
Tax Exempt # E9998-0861-06	
Total Due	\$522.44

Tech Certification #
 02

Handwritten:
 #KAW
 300-000-714 12/23/15
 Credit Card

LYNWOOD FIRESTONE

21551 LINCOLN HWY
LYNWOOD IL 60411

(800) 422-3771

12/22/2015 2:41 PM

page 2

Invoice #110836

PUBLIC WORKS, SAUK VILLAGE

Vehicle : 1999 Chevrolet Truck Silverado 1500 1/2 TON 2WD -

PAID BY: CASH CHECK NO. VIS. M/C DISC AMEX F/S DEBIT

ATTENTION: LUG NUTS NEED TO BE RE-TORQUED AFTER 50-100 MILES

I have authorized the above stated repairs to be done along with the necessary material and agree that Lynwood Firestone is not responsible for loss or damage to vehicle or articles left in vehicle in case of fire, theft or any other cause beyond their control. I have granted them and their employees permission to operate the vehicle herein described on streets, highways or elsewhere for the purpose of testing and/or inspection. We offer a 12 month or 12,000 mile warranty on parts and labor unless otherwise noted on the invoice. For warranty information call 1-800-LET-NAPA

Customer Signature

Thank you for choosing Lynwood Firestone
"Your One-Stop Complete Auto Center"

LYNWOOD FIRESTONE
21551 LINCOLN
LYNWOOD, IL
12/22/2015
14:42:30
CRF

Card # XXXXXXXXXXXXXXX3906
SEQ # 10
Batch # 168
INVOICE 10
Approval Code: 622998
Entry Method: Swiped
Mode: Online
Tax Amount: \$0.00
Cust Code:

SALE AMOUNT

\$522.44

CUSTOMER COPY

LYNWOOD FIRESTONE
 21551 LINCOLN HWY
 LYNWOOD IL 60411
 (800) 422-3771

12/11/2015 2:48 PM

page 1

Invoice #110696

PUBLIC WORKS, SAUK VILLAGE
 21801 TORRENCE AVE
 SAUK VILLAGE IL 60410

Day Phone : 708-757-2420
 Eve Phone : 708-758-3330 MIKE BARNICKI

Vehicle : 2004 Mercury Sable 3.0 L 183 CID V6 OHV (Pushrod)

VIN : [REDACTED]

Created : 12/11/2015 8:04:18 AM

Odometer In : 0

Complete : 12/11/2015 2:48:43 PM

Odometer Out : 68541

Invoiced : 12/11/2015 2:48:43 PM

Srv Writer : 09

Labor/Notes

Qty	Code/Tech*	Reference	Description	Unit Price	Price
4	02*	EPA	EPA TIRE DISPOSAL FEE	\$0.00	\$0.00
TAKING OLD TIRES					
4	02*	FREE	FREE TIRE ROTATION (EVERY 6,000 MILES)	\$0.00	\$0.00
4	02*	MDIS	MOUNT & COMPUTER SPIN BALANCE	\$18.00	\$72.00
4	02*	UTF	USER TIRE FEE	\$2.50	\$10.00
--		NOTES	Notes		
WASHERS DONT SPRAY					

Parts

Qty	Code/Tech*	Reference	Description	Condition	Unit Price	Price
4	--	001-TIRE	P215/60R16 FR710 #085F961		\$81.46	\$325.84
DOT#S W2X87124715 (X4)						

Labor	\$82.00
Parts	\$325.84
Sublet/Misc.	\$0.00
SHOP SUPPLIES	\$8.16
Charges	\$0.00
Sales Tax	\$0.00
Tax Exempt # E9998-0861-06	
Total Due	\$416.00

Tech : 02
 Certification #

100-220-714

#TW
 300-000-714 12/14/15
 Credit CARD

LYNWOOD FIRESTONE

21551 LINCOLN HWY
LYNWOOD IL 60411

(800) 422-3771

12/11/2015 2:48 PM

page 2

Invoice #110696

PUBLIC WORKS, SAUK VILLAGE

Vehicle : 2004 Mercury Sable 3.0 L 183 CID V6 OHV (Pushrod)

PAID BY: CASH CHECK NO. VISA M/C DISC AMEX F/S DEBIT

ATTENTION: LUG NUTS NEED TO BE RE-TORQUED AFTER 50-100 MILES

I have authorized the above stated repairs to be done along with the necessary material and agree that Lynwood Firestone is not responsible for loss or damage to vehicle or articles left in vehicle in case of fire, theft or any other cause beyond their control. I have granted them and their employees permission to operate the vehicle herein described on streets, highways or elsewhere for the purpose of testing and/or inspection. We offer a 12 month or 12,000 mile warranty on parts and labor unless otherwise noted on the invoice. For warranty information call 1-800-LET-NAPA

Customer Signature

Thank you for choosing Lynwood Firestone
"Your One-Stop Complete Auto Center"

LYNWOOD FIRESTONE
21551 LINCOLN HWY
LYNWOOD, IL 60411
12/11/2015
14:49:30

VISA SALE
CREDIT CARD

Card # XXXXXXXXXXXXXXX3906

SEQ #: 4

Batch #: 159

INVOICE 4

Approval Code: 693000

Entry Method: Swiped

Mode: Online

Tax Amount: \$0.00

Cust Code:

SALE AMOUNT

\$416.00

CUSTOMER COPY

02/1 01/14 11:50 AM

12/11/15

sears®

Sears

SCHERERVILLE - HDWR 05291
115C JS HIGHWAY 41
SCHERERVILLE, IN 46375-0000
219-322-1296



sears®

SALES CHECK # 052919012184

sears®

#1234
300-000-660
credit CARD

sears®

TRAN# PG/STORE REG# ASSOC#
2184 11 05291 901 1131
RINGING ASSOC # 1131

SALE

9 35706 QTY:2
19.2V COMPACT SALE 79.98T
UPC: 033287156436
SUBTOTAL 79.98
TAX 07.000% 5.60

sears®

CARD TYPE: VISA
ACCT #: W390670
AUTH CODE: 621578/E
12/11/15 VISA TOTAL 85.58

sears®

sears®

sears®

5229-4004-8159-3919-0619

I AGREE TO THE TERMS OF
MY CARDHOLDER AGREEMENT.

sears®

12/07/15 02:27 PM

Thank you for your registration. The following information has been received by our system. To print this page, select print from your browser's file menu on the top toolbar.

General Information

Account: Mohan Rao
Village of Sauk Village
Registrant: Mohan Rao

Credit Card Payment

Card Number: xxx-xxx-xxx-4947

Order Information

Order Number: 54688
Order Account: Mohan Rao
Village of Sauk Village
Address: 21801 TOTTENCE AVENUE
SAUK VLLAGE, IL
60411
E-Mail: mrao@saukvillage.org

Order Details

Registration Details

Mohan Rao
Item
First Attendee

Charge	Price	Quantity	Total Charge:	Amount Paid:	Amount Due:
\$99.00	\$99.00	1	\$99.00	\$99.00	\$0.00

Note To Attendees

Thank you for your registration!

1001005:768.0000
Mh

For registration questions, please e-mail outreachregistration@niu.edu for assistance.



NORTHERN ILLINOIS UNIVERSITY
**Center for
Governmental Studies**
Outreach, Engagement, and Regional Development



**Illinois Financial Forecast Forum: Private Sector Views
that will Impact the Public Sector
January 15, 2016**

- 8:00 – 8:45 a.m. **Registration/Continental Breakfast**
- 8:45 – 9:00 a.m. **Welcome and Introductions**
- 9:00 – 10:00 a.m. **Economic & Industry Perspectives**
Rick Mattoon, Senior Economist, Chicago Federal Reserve
- 10:00 – 10:15 a.m. **Break**
Showcased Research: presented at all breaks
"Doing a 180 from the 180 Reporting Rule" Authored by *Dr. Shannon Sohl* and
Dr. Tammy Waymire (Presenter), Northern Illinois University
- 10:15 – 11:15 a.m. **The Future of Retail**
C. Kelly Cofer, CCIM, President & CEO, The Retail Coach
- 11:15 – 11:30 a.m. **Break**
- 11:30 – 12:30 p.m. **Concurrent Breakouts:**
- 1) **Whither Industry?**
 - a. **Automotive/Manufacturing Outlook**
Jason Horwitz, Consultant, Anderson Consulting Group
 - b. **Industrial Markets and Preferred Locations**
Brian Tader, Managing Director, Lee & Associates
 - 2) **Hot Topics of the Day including Regulation of Municipal Advisors/Bond Ratings**
Kelly Kost, Partner, Chapman & Cutler
Stephan Roberts, Director, Robert W. Baird & Co.
- 12:30 – 1:15 p.m. **Lunch**
- 1:30 – 2:45 p.m. **Creating Lasting Value: Development Concepts for the Next Real Estate Cycle**
- 1) **Real Estate Development Outlook for the Next Five to Ten Years**
Stephen B. Friedman, AICP, CRE, President, SB Friedman Development Advisors
 - 2) **Seizing the Potential: Creating Walkable Sub-Urbanism Where There are no Traditional Downtowns**
Ferhat Zerín, Principal, Gingko Planning and Design
 - 3) **What are the Impacts and Benefits of New Sub-Urban Districts?**
Paul Grimes, Village Manager, Orland Park
- 2:45 – 3:00 p.m. **Break**
- 3:00 – 4:00 p.m. **Employment Outlook**
Rick Cobb, Challenger Gray & Christmas

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TELL US ABOUT YOUR EXPERIENCE AND YOU
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MY CARDHOLDER AGREEMENT.

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RC: 5929-5504-4139 3919-0619

sears®
2/21/15
AUTH CODE: 58573/E
VISA TOTAL 42.78
CARD TYPE: VISA
NET # W3906/D
TAX 07.000% 2.80

sears®
9 31794 QTY:2
17PCLM S/D SALE 39.98T
SUBTOTAL 39.98
OFF: 648738100021

sears®
TRAN# PLS/STORE REG# ASSDC#
3729 11 01291 901 6635
RINGING ASSDC # 6635

sears®
SALES CHECK # 052919013729

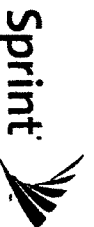


sears®
Sears
SCHERERVILLE - HDWR 05291
115C IS HIGHWAY 41
SCHERERVILLE, IN 46375-0000
219-322-1296

sears®

Handwritten notes in a circle:
2/21/15
300-000-660
mfw

YOUR SPRINT INVOICE



> ACCOUNT INFORMATION

Account Name VILLAGE OF SAUK VILLAGE	Invoice Date January 27, 2016
Account Number [REDACTED]	TIN Number 47-0882463
Invoice Number 310051519-168	ABA Number 111-000-012
Previous P.O. 34897	Previous P.O. Date May 07, 2003
Current P.O. 423AD	Total Amount Due \$392.66
Upgrade Program	

> MONTHLY INVOICE SUMMARY

December 24 - January 23, 2016	
Previous Balance	1,057.63
Payments as of 01/25/16 - Thank you	- 861.30
Outstanding Balance - Due Upon Receipt	\$196.33
Full 0001-Access and Related Items	183.98
0008-Government Fees and Taxes	12.35
Total Current Charges for 310051519-168 Due 02/16/16	\$196.33
Total Amount Due	\$392.66

#KRW
308-000-702
Credit CARD Payment
old

> CUSTOMER CARE

Register and Logon
www.sprint.com
Call Sprint
1-800-927-2199

> SPRINT NEWS AND NOTICES

This section contains important updates about your Sprint Services, including Service or Rate Changes, Promotions and Offers.

Correspondence

Please send all correspondence including billing inquiries to:
Sprint Customer Service
PO Box 8077
London, KY 40742
Do not enclose your payment with the correspondence.
You may also contact Sprint Customer Care at the number listed on your invoice or by going to sprint.com.

> PAYMENT OPTIONS

To Pay Your Bill Online Go To
www.sprint.com/mysprint
Sign up for Recurring Direct Debit!

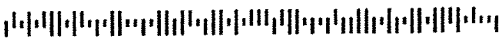
To Pay Your Bill By Phone Call
1-800-784-2608 or
*3 from your Sprint phone

To Pay Your Bill By Mail
See reverse side for details. >



PO BOX 8077
London, KY 40742

MB 01 002302 66820 H 10 A
VILLAGE OF SAUK VILLAGE
21801 TORRENCE AVE
SAUK VILLAGE, IL 60411-4489



*Any unpaid balance after the due date may be subject to a late payment charge per your contract.



YOUR SPRINT INVOICE



Billing Period
12/24/15 - 01/23/16 3 of 6
Page

Account Number
[REDACTED]
Account Name
VILLAGE OF SAUK VILLAGE

Invoice Number
310051519-168

> ACCOUNT SUMMARY

Monthly Recurring Access Charges	Service Discount/Adjustments	Cellular Minutes/Charges	LD and Other Minutes/Charges	Directory Assistance Charges	Direct Connect Svcs. Minutes/Charges	Messaging Number of Messages/Charges	Data and Third Party Services/Charges	Equipment and Retail Purchases	Sprint Surcharges	Government Fees and Taxes	Totals
----------------------------------	------------------------------	--------------------------	------------------------------	------------------------------	--------------------------------------	--------------------------------------	---------------------------------------	--------------------------------	-------------------	---------------------------	--------

Account Charges and Adjustments

310051519 VILLAGE OF SAUK VILLAGE

Subscriber Charges and Adjustments

Number/Name	Plan	Page	Monthly Recurring Access Charges	Service Discount/Adjustments	Cellular Minutes/Charges	LD and Other Minutes/Charges	Directory Assistance Charges	Direct Connect Svcs. Minutes/Charges	Messaging Number of Messages/Charges	Data and Third Party Services/Charges	Equipment and Retail Purchases	Sprint Surcharges	Government Fees and Taxes	Totals
708-200-4445	Sprint Bus Fusion 6GB M2M 3			-0.75						0.0003GB			6.50	58.75
SKATA WATER SYSTEM		4	53.00											
708-288-8460	New Sprint Bus Fusion M2M 6GB			-0.75						0.0074GB			5.85	53.10
VILLAGE OF SAUK VILLAGE		5	48.00							0.0003GB				42.24
708-759-5203	Connection Card Data Plan			-0.75						0.0003GB				42.24
WEST WATER TOWER DO NOT U		5	42.98							0.0003GB				42.24
708-759-5204	Connection Card Data Plan			-0.75						0.0003GB				42.24
NORTH WATER TOWER DO NOT		6	42.98							0.0003GB				42.24
Usage for All Subscribers														
Discounts for All Subscribers				-53.00										
Charges for All Subscribers														\$186.98
Total Current Usage														
Total Current Charges														\$186.98
Total Subscribers on Account		4												\$186.98

If you prefer to receive a Summary Invoice, please visit sprint.com, log into My Sprint, and select the "Change how detailed your bill is" option or contact Customer Care. The Summary Invoice is designed for your convenience, and will not display full billing details.

YOUR SPRINT INVOICE

708-200-4445, SKATA WATER SYSTEM CONT.

> SUBSCRIBER INFORMATIONAL REPORTS

Subscriber Usage Summary

Data Shared Plan - Sprint Blue Fusion 6GB M2M 3

Usage ID	Usage Type	Included	Used	Billed	Additional Charges
	Data Roaming(MB)	300	0	0	..
Total Additional Charges					\$0.00

To view total charges and usage, please go to the Account Level Usage Summary. To view your phone additional charges, please go to the Subscriber Activity Summary for this phone.
Dates next to a Usage Type indicates a price plan change.

> SUBSCRIBER ACTIVITY SUMMARY

708-688-6260, VILLAGE OF SAUK VILLAGE

Billed Usage	Rate/Date	Amount
Mail Monthly Recurring Access Charges		
Public IP Address for 01/24 - 02/23		3.00
Sprint Bus Fusion Data 6GB for 01/24 - 02/23		45.00
Total Monthly Recurring Access Charges		\$48.00
Mail Service Discounts		
Business Discount Sprint 25%		-0.75
Total Service Discounts		-\$0.75
Government Fees and Taxes		
City - If Appl & State Excise Tax	13.000%	5.85
Total Government Fees and Taxes		\$5.85
Total Charges for VILLAGE OF SAUK VILLAGE		\$59.10

> SUBSCRIBER INFORMATIONAL REPORTS

The following reports are compiled as a courtesy to help you analyze usage trends and manage your subscriber activity.

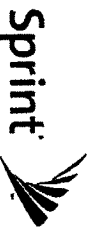
Your Rate Plans

Plan	Services
Cellular Call Detail	Cellular Call Detail

002302 3/3

Account Number
 Account Name
 VILLAGE OF SAUK VILLAGE

Billing Period
 12/24/15 - 01/23/16 5 of 6
 Invoice Date
 January 27, 2016
 Invoice Number
 310051519-168



Your Rate Plans

Plan
 New Sprint Bus Fusion M2M 6GB

Services
 \$ 01010/MB OnNetOvg \$ 00000864/K
 \$ 25/MB RoamOvg \$ 00024414/K/B

- Incoming Call Restriction
- Outgoing Call Restriction
- Anytime Minutes
- Sprint 4G Data Services
- Sprint 4G Data Services
- Sprint eHRPD Data
- Sprint Data Services
- Dom Roaming Packet Data Kb
- Shared 3G/4G/PAM Data Kbs
- Domestic Data Roaming

Subscriber Usage Summary

Data Shared Plan - New Sprint Blue Fusion M2M 6GB

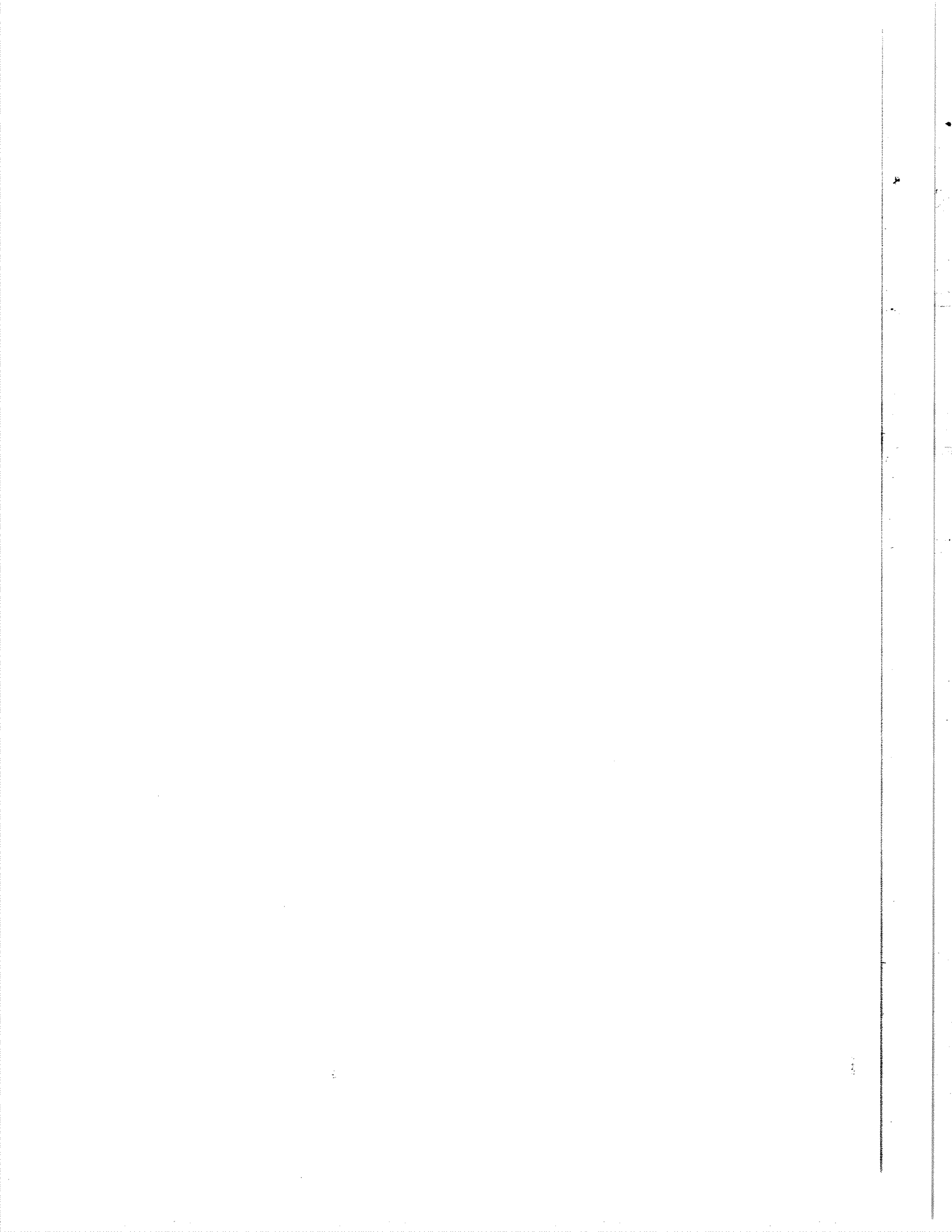
Usage ID	Usage Type	Included	Used	Billed	Additional Charges
	Data with Mobile Hotspot(GB)	Shared	00074	0	..
	Data Roaming(MB)	300	0	0	..
Total Additional Charges					\$0.00

To view total charges and usage, please go to the Account Level Usage Summary. To view your phone additional charges, please go to the Subscriber Activity Summary for this phone.
Dates next to a Usage Type indicates a price plan change.

708-769-5203, WEST WATER TOWER DO NOT U

> SUBSCRIBER ACTIVITY SUMMARY

Billed Usage	Rate/Date	Amount
Mail Monthly Recurring Access Charges		
Connection Card Plan for 01/24 - 02/23		39.99
Public IP Address for 01/24 - 02/23		3.00
Total Monthly Recurring Access Charges		\$42.99
Mail Service Discounts		
Business Discount Sprint 25%		-0.75
Total Service Discounts		-\$0.75
Total Charges for WEST WATER TOWER DO NOT UPGRADE		\$42.24





BL ACCT 00001230-10000000
 VILLAGE OF SAUK VILLAGE
 Account Number: #### #### #### 4939
 Page 1 of 3



Account Summary

Billing Cycle		01/29/2016
Days In Billing Cycle		31
Previous Balance		\$2,027.10
Purchases	+	\$897.54
Cash	+	\$0.00
Special	+	\$0.00
Credits	-	\$0.00
Payments	-	\$2,027.10
Other Charges	+	\$0.00
Finance Charges	+	\$0.00
NEW BALANCE		\$897.54

Account Inquiries



Call us at: (800) 221-5920
 Lost or Stolen Card: (866) 839-3485



Write us at PO BOX 31535, TAMPA, FL 33631-3535

Payment Summary

NEW BALANCE	\$897.54
MINIMUM PAYMENT	\$897.54
PAYMENT DUE DATE	02/23/2016

Credit Summary

Total Credit Line	\$6,000.00
Available Credit Line	\$5,102.46
Available Cash	\$0.00
Amount Over Credit Line	\$0.00
Amount Past Due	\$0.00
Disputed Amount	\$0.00

NOTE: Grace period to avoid a finance charge on purchases, pay entire new balance by payment due date. Finance charge accrues on cash advances until paid and will be billed on your next statement.

Corporate Activity

TOTAL CORPORATE ACTIVITY				\$2,027.10-
Trans Date	Post Date	Reference Number	Transaction Description	Amount
01/24	01/24	748652260221111111111111	AUTO PMT FROM ACCT	\$2,027.10-

Important Information About Your Account

IT IS NOT NECESSARY TO MAIL YOUR PAYMENT. YOUR ACCOUNT WILL AUTOMATICALLY BE PAID BY A DIRECT DEBIT OF YOUR CHECKING OR SAVINGS ACCOUNT. THE DEBIT THIS MONTH IS \$897.54.

PLEASE DETACH COUPON AND RETURN PAYMENT USING THE ENCLOSED ENVELOPE - ALLOW UP TO 7 DAYS FOR RECEIPT

FIRST MIDWEST BANK
 PO BOX 565
 JOLIET IL 60434-0565



Account Number

4939

Check box to indicate name/address change on back of this coupon

AMOUNT OF PAYMENT ENCLOSED

Closing Date	New Balance	Total Minimum Payment Due	Payment Due Date
01/29/16	\$897.54	\$897.54	02/23/16

\$

BL ACCT 00001230-10000000
 VILLAGE OF SAUK VILLAGE
 21801 TORRENCE AVE
 SAUK VILLAGE IL 60411



MAKE CHECK PAYABLE TO:

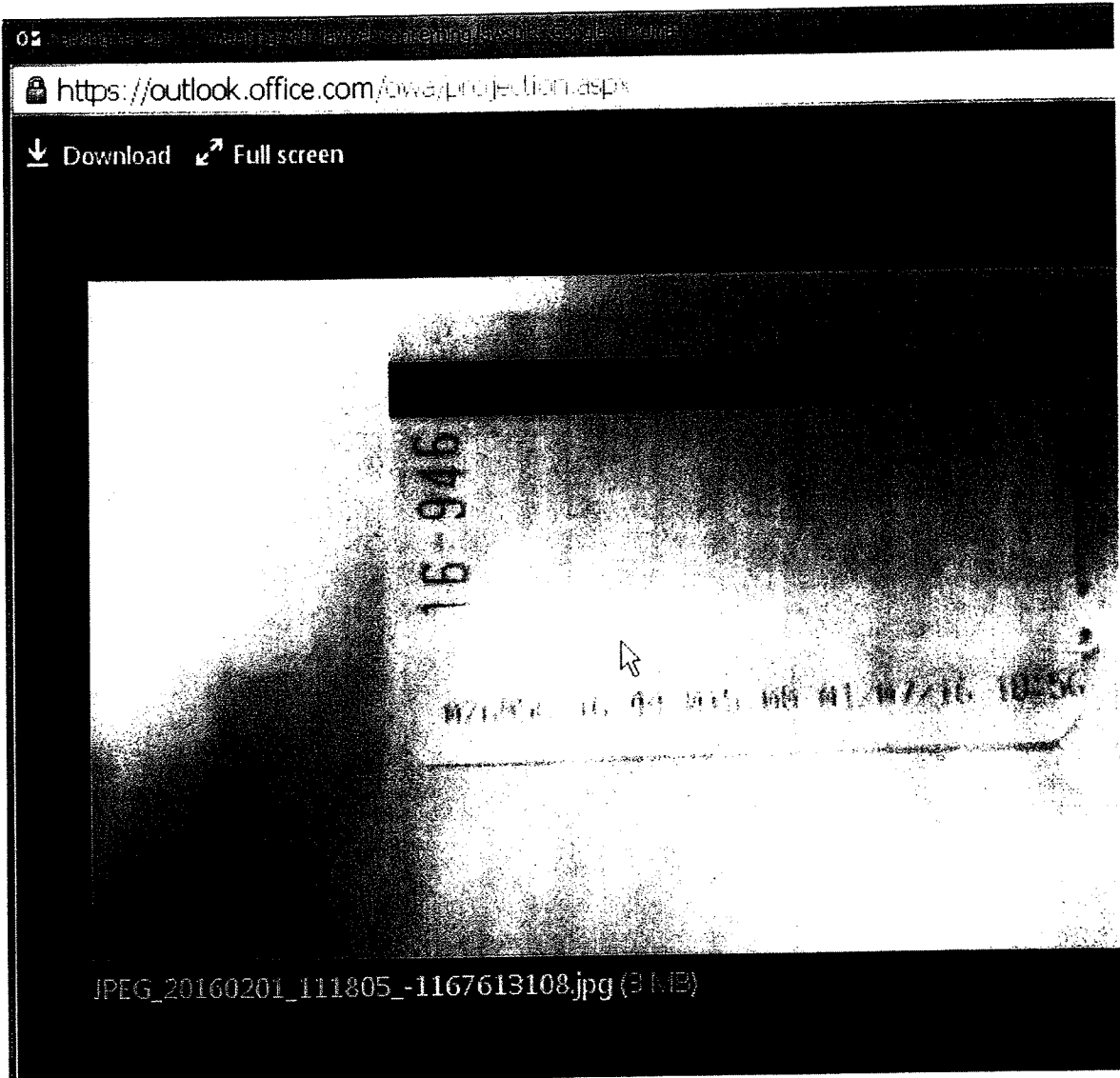
BANKCARD PROCESSING CENTER
 PO BOX 31021
 TAMPA FL 33631-3021

21 4865 2259 4521 4939 00089754 00089754 6



BL ACCT 00001230-1000000
 VILLAGE OF SAUK VILLAGE
 Account Number: #####
 Page 3 of 3

Cardholder Account Summary					
Trans Date	Post Date	Plan Name	Reference Number	Description	Amount
01/07	01/10	PPLN01	24789306008394600611617	ONE PARKING MONROE INC CHICAGO IL	\$15.00
Cardholder Account Detail					
DAVID A HANKS		Payments & Other		Cash Advances	Total Activity
##### 2205		\$0.00		\$0.00	\$15.00
		Credits		Purchases & Other	
		\$0.00		\$15.00	
		Charges			
		\$15.00			
		Charges & Other			
		\$0.00			
		Credits			
		\$0.00			
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100.005.768 100
Pending @ Drummond Chicago
Law & Co.

TRL TIRE SERVICE CORP

3349 EAST END AVE

S CHICAGO HEIGHTS, IL 60411

Phone: 708-754-7909 Fax: 708-754-8473

13408

Org. Est. # 019803

INVOICE

VILLAGE OF SAUK VILLAGE

21801 TORRENCE AVE

SAUK VILLAGE, IL 60411

Home 708-758-2225

Cust ID : 2014

Print Date : 01/15/2016

2014 Ford - Police Interceptor Utility

3.7L V6 (227CI) VIN(M), 4-Wheel ABS

Lic # [REDACTED] Odometer In :

Unit # : 123 Odometer Out : 26,223

VIN # : [REDACTED]

Part Description / Number	Qty	Sale	Ext	Labor Description	Extended
---------------------------	-----	------	-----	-------------------	----------

2455R18 FIRESTONE FIREHK GTZ
PURSUIT 103W
F000177

4.00 123.43 493.72

NET STATE BILLING

DISMOUNT/MOUNT/OFF & ON WHEEL BALANCE

120.00
10.00
12.00

TIRE DISPOSAL
STATE TIRE FEE
SER#W2DXFH5015

1/20/16
Great CARD
for P.D. Tires
kw #

[Technicians : Please Select, Technician]

Org. Estimate \$ 635.72 Revisions \$ 0.00 Current Estimate \$ 635.72 Additional Cost Revised Estimate

Labor: 142.00

Parts: 493.72

Sub: 635.72

Tax: 0.00

Total: \$635.72

Bal Due: \$635.72

[Payments -]

I hereby authorize the above repair work to be done along with the necessary material and hereby grant you and/or your employees permission to operate the car or truck herein

described on street, highways or elsewhere for the purpose of testing and/or inspection. An express mechanic's lien is hereby acknowledged on above car or truck to secure the

amount of repairs thereto. Parts Warranty: per manufacturer, labor: six months 6000 miles whichever comes first and has to be performed in our shop & cannot exceed the original cost

of repair.

Signature

Written By: RUIKE, TAMARA

Page 1 of 1

Date

Time



Service is our best part!

Store 7628 19 Sauk Plaza Sauk Village, IL 60411 Phone: (708) 675-7131
Questions or feedback? Contact the Commercial Customer Support Team
at 1-877-280-5965 or email us at service@advanceautoparts.com

Village of Sauk Village
21801 Torrence Ave
Sauk Village, IL 60411
Phone: (708) 758-3330
Account ID: 1872642373

P.O. #: 1/1/16
Date: 1/1/16
Register: 3
Store/Unit#: 3
Internet Order #:

Invoice/Trans: 7628601133739
Time: 10:54:45AM
Delivery: No
Salesperson: Rufus

Product Line	Part #	Description	SKU	Warranty	REPLACE OR REFUND AT MGR DISCRETION	Qty	List	Cost	Extended
Prestone	AF2000	ANTIFREEZE EXT/D F/S 1 GL	7020012			18	23.61	13.49	242.82

Handwritten circled text: "All"



MERCHANDISE SUBTOTAL 242.82
TOTAL INVOICE 242.82
Tender Type Visa 3906 644343 242.82
CHANGE 0.00

Handwritten note: "Credit CARD 300-000-620 1/15/16" with a large circle around it.

Customer's signature below certifies that the tax free purchase items qualify for resale or other permitted tax at fee exemption. Customer will pay all taxes and government fees on taxable purchases, including interest and penalties if applicable. All cores need to be in the original box and in rebuildable condition to receive full core credit. Invoice required as proof of purchase for all returns.



TECHNOLOGY TOOLS

Service is our best part:

Store 7628 19 Sauk Plaza Sauk Village, IL 60411 Phone: (708) 675-7131
 Questions or feedback? Contact the Commercial Customer Support Team
 at 1-877-280-5965 or email us at service@advanceautoparts.com

Village of Sauk Village
 21801 Torrence Ave
 Sauk Village, IL 60411
 Phone: (708) 758-3330
 Account ID: 1872642373

P.O. #: 1/11/16
 Date: 1/11/16
 Register: 3
 Store/Unit#: 3
 Internet Order #: 3

Invoice/Trans: 7628601133733
 Time: 9:00:34AM
 Delivery: No
 Salesperson: Joseph

Product Line	Part #	Description	SKU	Warranty	Qty	List	Cost	Extended
<input type="checkbox"/> CARQUEST	13849	THERMOSTAT 195F 1 EA CC	5653339	1 YR REPLACEMENT IF DEFECTIVE	1	10.66	3.00	3.00
<input type="checkbox"/> Felpro	35666	WATER OUTLET GASKET 1 I	5180355	1 YR REPLACEMENT IF DEFECTIVE	1	6.28	1.00	1.00

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MERCHANDISE SUBTOTAL
 TOTAL INVOICE
 Tender Type
 CHANGE

4.00
 4.00
 4.00
 0.00

Visa 3906 603251



D2M2V1DFNP1LHK1B3Q

Handwritten: Credit CARD
 #123
 310-000-620 1/15/16

Customer's signature below certifies that the tax free purchase items qualify for resale or other permitted tax or fee exemption. Customer will pay all taxes and government fees on taxable purchases, including interest and penalties if applicable. All cores need to be in the original box and in rebuildable condition to receive full core credit. Invoice required as proof of purchase for all returns.

1 of 1
 Customer Copy