

Town of Loxahatchee Groves
Check Register Log

Date	Beg Check No.	Ending Check No.	Amount	Printed By	Verified By
9/11/15	6564	6580	\$59,653.92	B. King	Ronald D. Garriel Tom Goff
9/11/15	6581		0	VOIDED	
9/24/15	6582	6608	0	VOIDED	
9/24/15	6609	6623	\$155,270.17	B. King	Tom Goff Ronald D. Garriel Ronald D. Garriel
9/24/15	6624	-	\$1,475.00	B. King	Tom Goff Ronald D. Garriel
10/15/15	6625	6657	\$116,453.46	B. King	Tom Goff Ronald D. Garriel
10/29/15	6658		\$5,091.60	B. King	Tom Goff Ronald D. Garriel
10/22/15	6659		\$29,780.11	B. King	Ronald D. Garriel Tom Goff
11/5/15	6660	6676	\$25,786.14	B. King	David Browning Tom Goff
11/18	6677	6691	\$104,380.32	Punderwood	Ronald D. Garriel Tom Goff
11/18	6678	6678	VOID -32,887.10	Punderwood	Ronald D. Garriel Tom Goff
11/18	6692*	6698	\$62,227.02	Punderwood	Tom Goff * Except 6692 Ronald D. Garriel
11/18	6692	6692	29,946.91		Tom Goff Ronald D. Garriel
12/9/15	6699	6720	\$124,081.19	B. King	Tom Goff David Browning
12/18/15	6721	6736	\$69,339.33	B. King	Ronald D. Garriel Tom Goff

Bank Account - Check Details

Friday, December 18, 2015

Period: December 18, 2015 to December 18, 2015

Page 1

Town of Loxahatchee Groves

MUNILYTICS

This report also includes bank accounts that only have balances.

Check Date	Check No.	Description	Amount	Printed Amount	Voided Amount	Entry Status	Original Entry S	Bal. Accou	Bal. Account No.	Entry No.
B01		Wells Fargo								
		Phone No. 8002893557								
12/18/15	To 6721	Florida Municipal Ins. Trust	7,732.75	7,732.75	0.00	Posted	Vendo		119	807
12/18/15	To 6722	Land Research Management	1,156.25	1,156.25	0.00	Posted	Vendo		128	808
12/18/15	To 6723	Office Depot	467.97	467.97	0.00	Posted	Vendo		135	809
12/18/15	To 6724	Caldwell Pacetti Edwards SBHDE	345.49	345.49	0.00	Posted	Vendo		14	810
12/18/15	To 6725	PBSO	24,062.17	24,062.17	0.00	Posted	Vendo		146	811
12/18/15	To 6726	TGI Office Automation LOCAL	244.78	244.78	0.00	Posted	Vendo		154	812
12/18/15	To 6727	Ron Jarriel	500.00	500.00	0.00	Posted	Vendo		180	813
12/18/15	To 6728	David Browning	500.00	500.00	0.00	Posted	Vendo		49	814
12/18/15	To 6729	Tom Goltzene	500.00	500.00	0.00	Posted	Vendo		50	815
12/18/15	To 6730	Ryan Liang	500.00	500.00	0.00	Posted	Vendo		52	816
12/18/15	To 6731	Jim Rockett	500.00	500.00	0.00	Posted	Vendo		56	817
12/18/15	To 6732	Underwood Management SERVICES	29,780.11	29,780.11	0.00	Posted	Vendo		6	818
12/18/15	To 6733	Palm Beach Post SUBSCRIPTION	286.00	286.00	0.00	Posted	Vendo		70	819
12/18/15	To 6734	CMG - PB Remittance Address	147.92	147.92	0.00	Posted	Vendo		V010	820
12/18/15	To 6735	FPL	365.89	365.89	0.00	Posted	Vendo		V036	821
12/18/15	To 6736	Firehouse BBQ	2,250.00	2,250.00	0.00	Posted	Vendo		V053	822
		Wells Fargo	69,339.33	69,339.33	0.00					



Florida Municipal Insurance Trust (FMIT) Second Installment Billing - 15/16 Fund Year

FMIT # **1197**

Invoice Date: **12/1/2015**

Due Date: **1/1/2016**

ATTN: Bev Kuipers
Town of Loxahatchee Groves
155 F Road
Loxahatchee, FL 33470-4949

RECEIVED

DEC 11 2015

Please make check payable to:
Florida Municipal Insurance Trust
P.O. Box 1757
Tallahassee, FL 32302-1757

BY: *BK*

Policy Summary

	General Liability	Auto Liability	Auto Physical Damage	Property	Workers Compensation	Total
Gross Premium	\$31,321.00	\$216.00	\$0.00	\$4,092.00	\$0.00	\$35,629.00
Incentive Credit	(\$4,698.00)	\$0.00	\$0.00	\$0.00	\$0.00	(\$4,698.00)
Total Net Premium	\$26,623.00	\$216.00	\$0.00	\$4,092.00	\$0.00	\$30,931.00

Previous Activity

Previous Invoices	\$7,732.75
Payment Received On 10/19/2015	(\$7,732.75)
Total Balance Forward	\$0.00

Current Installment

Coverage	Premium	Incentive Credit	Total Net Premium
General Liability Coverage	\$7,830.25	(\$1,174.50)	\$6,655.75
Auto Liability Coverage	\$54.00	\$0.00	\$54.00
Property Coverage	\$1,023.00	\$0.00	\$1,023.00
Total Installment Amount			\$7,732.75

Total Due by 1/1/2016 **\$7,732.75**

NOTE: Any change in premium from the previous installment is due to endorsement(s) to your policy. These endorsements are available to you on the FMIT website: <http://insurance.flcities.com>

Please see reverse side for a copy of our Premium Installment Plan and Penalty Policy.

001-519-450-000

\$ 7,732.75

Wes
12/14/15



Florida Municipal Insurance Trust (FMIT) Second Installment Billing - 15/16 Fund Year

FMIT # 1197

Invoice Date: 12/1/2015

Due Date: 1/1/2016

ATTN: Bev Kuipers
Town of Loxahatchee Groves
155 F Road
Loxahatchee, FL 33470-4949

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Florida Municipal Insurance Trust
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LAND RESEARCH MANAGEMENT, Inc.

2240 Palm Beach Lakes Blvd., Suite 103, West Palm Beach, FL 33409 Tel: (561)686-2481; Fax: (561) 681-1551

To: William Underwood, Town Manager
Town of Loxahatchee Groves

From: Jim Fleischmann

Date: December 16, 2015

Re: Invoice for services - Cost Recovery: Marteau Vegetation Removal Permit
(VRP): 1140 "A" Road (Receipts # 396881 and 397277)

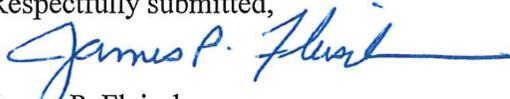
INVOICE #3 (FINAL) – Marteau VRP Application Review

1. Hours to 12/5/2015 to 12/16/ 2015 - 9.25.5 hours* x \$125.00 per hour \$ 1,156.25

Total Amount Due This Invoice \$ **1,156.25**

* - See attached time sheet

Respectfully submitted,



James P. Fleischmann,
Vice President

Total billed to Marteau VRP Application escrow account to date: (\$3,794.75)

Please Mail Check To The Following Address:

*Land Research Management, Inc.
2240 Palm Beach Lakes Blvd., Suite 103
West Palm Beach, FL 33409*

001-233-128-000

\$ 1,156.25

Cost Recovery Marteau

WFL
12/17/15

ORIGINAL INVOICE

10000



Office Depot, Inc
PO BOX 630813
CINCINNATI OH
45263-0813

RECEIVED
DEC 11 2015

THANKS FOR YOUR ORDER

IF YOU HAVE ANY QUESTIONS
OR PROBLEMS. JUST CALL US

FOR CUSTOMER SERVICE ORDER: (888) 263-3423
FOR ACCOUNT: (800) 721-6592

FEDERAL ID:59-2663954

BY: BK

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
810436280001	136.80	Page 2 of 2
INVOICE DATE	TERMS	PAYMENT DUE
04-DEC-15	Net 30	03-JAN-16

BILL TO:

ATTN: ACCTS PAYABLE
TOWN OF LOXAHATCHEE GROVES
155 F ROAD
LOXAHATCHEE GROVES FL 33470

000588-000363

SHIP TO:

TOWN OF LOXAHATCHEE GROVES
155 F ROAD
LOXAHATCHEE GROVES FL 33470



ACCOUNT NUMBER	PURCHASE ORDER	SHIP TO ID	ORDER NUMBER	ORDER DATE	SHIPPED DATE		
46453081		155FROAD	810436280001	03-DEC-15	04-DEC-15		
BILLING ID	ACCOUNT MANAGER	RELEASE	ORDERED BY	DESKTOP	COST CENTER		
23856			BEVERLY KUIPERS				
CATALOG ITEM #/ MANUF CODE	DESCRIPTION/ CUSTOMER ITEM #	U/M TAX	QTY ORD	QTY SHP	QTY B/O	UNIT PRICE	EXTENDED PRICE

001-512-510-000

WFO
12/14/15

000588-000363

SUB-TOTAL	136.80
DELIVERY	0.00
SALES TAX	0.00
TOTAL	136.80

All amounts are based on USD currency

To return supplies, please repack in original box and insert our packing list, or copy of this invoice. Please note problem so we may issue credit or replacement, whichever you prefer. Please do not ship collect. Please do not return furniture or machines until you call us first for instructions. Shortage or damage must be reported within 5 days after delivery.

DETACH HERE

CUSTOMER NAME	BILLING ID	INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT	AMOUNT ENCLOSED
TOWN OF LOXAHATCHEE GROVES	23856	810436280001	04-DEC-15	136.80	136.80

FL0 000238568 8104362800015 00000013680 1 0

Please
Send Your
Check to:

OFFICE DEPOT
PO Box 1413
Charlotte NC 28201-1413

Please return this stub with your payment to
ensure prompt credit to your account.

Please DO NOT staple or fold. Thank You.



Office Depot, Inc
 PO BOX 630813
 CINCINNATI OH
 45263-0813

ORIGINAL INVOICE

10000

THANKS FOR YOUR ORDER

IF YOU HAVE ANY QUESTIONS
 OR PROBLEMS. JUST CALL US
 FOR CUSTOMER SERVICE ORDER: (888) 263-3423
 FOR ACCOUNT: (800) 721-6592

FEDERAL ID:59-2663954

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
810436280001	136.80	Page 1 of 2
INVOICE DATE	TERMS	PAYMENT DUE
04-DEC-15	Net 30	03-JAN-16

BILL TO:

ATTN: ACCTS PAYABLE
 TOWN OF LOXAHATCHEE GROVES
 155 F ROAD
 LOXAHATCHEE GROVES FL 33470

SHIP TO:

TOWN OF LOXAHATCHEE GROVES
 155 F ROAD
 LOXAHATCHEE GROVES FL 33470

000588-000363



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ACCOUNT NUMBER	PURCHASE ORDER	SHIP TO ID	ORDER NUMBER	ORDER DATE	SHIPPED DATE		
46453081		155FROAD	810436280001	03-DEC-15	04-DEC-15		
BILLING ID	ACCOUNT MANAGER	RELEASE	ORDERED BY	DESKTOP	COST CENTER		
23856			BEVERLY KUIPERS				
CATALOG ITEM #/ MANUF CODE	DESCRIPTION/ CUSTOMER ITEM #	U/M	QTY ORD	QTY SHP	QTY B/O	UNIT PRICE	EXTENDED PRICE
620007 12052040	WATER,BTL,NSTL PURE 620007	CA	6	6	0	3.630	21.78
612421 113571601	CALENDAR,GARDEN,WALL,11 612421	EA	1	1	0	9.790	9.79
840003 034209	REFILL INK,SELF-INKING,BLU 840003	EA	1	1	0	2.430	2.43
634819 SCC HB12B	BOWL,HVYWGHT,PAPER,120 634819	PK	2	2	0	14.240	28.48
541482 MAC 6506	NAPKIN,LUNCHEON,400CT 541482	PK	1	1	0	4.190	4.19
987156 559-PK2	3M POST IT EASEL PAD 987156	CT	1	1	0	38.760	38.76
728703 PY2464-FC-8MIX	MARKERS,FLIP 728703	PK	1	1	0	5.380	5.38
342598 FLX04201-001AA	EASEL,INSTANT,FULL HEIGHT, 342598	EA	1	1	0	25.990	25.99

000588-000363

To ensure timely and accurate application of your payment, please include the following on your remittance: account number, invoice number, and the amount you are paying for each invoice.

CONTINUED ON NEXT PAGE...

Beverly G. Kuipers

From: ODOonline@OfficeDepot.com
Sent: Thursday, December 03, 2015 2:27 PM
To: Beverly G. Kuipers
Subject: Order Confirmation - Multiple Orders

RECEIVED
DEC 03 2015

BY: BK



888-263-

Order Confirmation

This order contains multiple shipments. Please be sure to review each individual order listed below

Thank you for shopping with Office Depot.

We are confident you will be pleased and look forward to serving you again soon.

Note that **your order will arrive in multiple shipments** and we have created unique order numbers for each, so you can track status and delivery of each.

Note that due to product availability or size, items ordered together may not be shipped together. Shipping confirmation email will provide details on all shipments.

For your reference, below is a summary of your order:

Shipment 1 Expected delivery date: **12.04.2015 8:30 AM - 5:00 PM**

Order Number: 810436280-001 Status: In Process
Order Date: 12/03/2015 Tracking: N/A
Ordered By: BKUIPERS@LOXAHATCHEEGROVESFL.GOV Delivery Method:
Last Modified By: BKUIPERS@LOXAHATCHEEGROVESFL.GOV Delivery Type: Delivery
Customer Name: TOWN OF LOXAHATCHEE GROVES Shipping to: TOWN OF LOXAHATCHEE GROVES
Customer number: 46453081 155 F ROAD
Payment info: Account Billing LOXAHATCHEE GROVES, FL 33470

PO Number:
Contact: BEVERLY KUIPERS
CC:
Desktop Location:
Release:
ASSET:
LOC: 1165: Third Party
Comments:

ITEM DESCRIPTION	ENTERED ITEM #	QTY	SHIPPING	B/O Qty	UNIT PRICE	UM	EXTENDED PRIC
Nestlé® Pure Life™ Purified Bottled	620007	6	6	0	3.630	case	\$21.7

Water, 16.9 Oz., Case Of 24 (0620007)

BEST VALUE

Day-Timer® Garden Path Wall Calendar, 11" x 8 1/2", January–December 2016 (0612421)	612421	1	1	0	9.790	each	\$9.79
-------------------------------------------------------------------------------------	--------	---	---	---	-------	------	--------

   Contract Items

Office Depot® Brand Self-Inking Refill Ink, 1 Oz., Blue (0840003)	840003	1	1	0	2.430	each	\$2.43
-------------------------------------------------------------------	--------	---	---	---	-------	------	--------

 Contract Items

Solo® Bare™ Bowls, 12 Oz., Pack Of 125 (0634819)	634819	2	2	0	14.240	pack	\$28.48
--------------------------------------------------	--------	---	---	---	--------	------	---------

  Contract Items

Marcal® 100% Recycled Luncheon Napkins, 1-Ply, Pack Of 400 (0541482)	541482	1	1	0	4.190	pack	\$4.19
----------------------------------------------------------------------	--------	---	---	---	-------	------	--------

  **BEST VALUE**

Post-it® Self-Stick Easel Pads, 25" x 30", Plain White Paper, 30 Sheets, Box Of 2 (0987156)	987156	1	1	0	38.760	carton	\$38.76
---------------------------------------------------------------------------------------------	--------	---	---	---	--------	--------	---------

BEST VALUE

FORAY® Desk-Style Overhead/Flip Chart Markers With Soft Grip, Assorted, Pack Of 8 (0728703)	728703	1	1	0	5.380	pack	\$5.38
---------------------------------------------------------------------------------------------	--------	---	---	---	-------	------	--------

  Contract Items

Office Depot® Brand Instant Easel, Full Size, Black (0342598)	342598	1	1	0	25.990	each	\$25.99
---------------------------------------------------------------	--------	---	---	---	--------	------	---------

LEGEND

ENTERED ITEM #: Entered Item Number
 QTY: Original Quantity Ordered
 SHIPPING: Ordered Quantity - Backorder Quantity
 B/O Qty: Backorder Quantity
 UNIT PRICE: Price per Individual Unit

Subtotal: \$136.80
 Tax: 0.00
 Delivery Charge: 0.00
 Misc.: 0.00

Total:\$136.80

ORIGINAL INVOICE

10000



Office Depot, Inc
PO BOX 630813
CINCINNATI OH
45263-0813

THANKS FOR YOUR ORDER

IF YOU HAVE ANY QUESTIONS
OR PROBLEMS, JUST CALL US
(888) 263-3423
(800) 721-6592

FOR CUSTOMER SERVICE ORDER:
FOR ACCOUNT:

FEDERAL ID:59-2663954

RECEIVED
DEC 11 2015

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
810436408001	11.39	Page 1 of 1
INVOICE DATE	TERMS	PAYMENT DUE
04-DEC-15	Net 30	03-JAN-16

BILL TO:

ATTN: ACCTS PAYABLE
TOWN OF LOXAHATCHEE GROVES
155 F ROAD
LOXAHATCHEE GROVES FL 33470

BY: BK

SHIP TO:

TOWN OF LOXAHATCHEE GROVES
155 F ROAD
LOXAHATCHEE GROVES FL 33470

000588-000363



ACCOUNT NUMBER	PURCHASE ORDER	SHIP TO ID	ORDER NUMBER	ORDER DATE	SHIPPED DATE		
46453081		155FROAD	810436408001	03-DEC-15	04-DEC-15		
BILLING ID	ACCOUNT MANAGER	RELEASE	ORDERED BY	DESKTOP	COST CENTER		
23856			BEVERLY KUIPERS				
CATALOG ITEM #/ MANUF CODE	DESCRIPTION/ CUSTOMER ITEM #	U/M	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE	EXTENDED PRICE
546543 SCC OFMP9	PLATE,PPR,MDWGHT,8.5",BAR 546543	PK	1	1	0	11.390	11.39

To ensure timely and accurate application of your payment, please include the following on your remittance: account number, invoice number, and the amount you are paying for each invoice.

001-512-510-000 \$ 11.39

WFL
12/14/15

000588-000363

SUB-TOTAL	11.39
DELIVERY	0.00
SALES TAX	0.00
TOTAL	11.39

All amounts are based on USD currency

To return supplies, please repack in original box and insert our packing list, or copy of this invoice. Please note problem so we may issue credit or replacement, whichever you prefer. Please do not ship collect. Please do not return furniture or machines until you call us first for instructions. Shortage or damage must be reported within 5 days after delivery.

DETACH HERE

CUSTOMER NAME	BILLING ID	INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT	AMOUNT ENCLOSED
TOWN OF LOXAHATCHEE GROVES	23856	810436408001	04-DEC-15	11.39	11.39

FL0 000238568 8104364080012 00000001139 1 6

Please
Send Your
Check to:

OFFICE DEPOT
PO Box 1413
Charlotte NC 28201-1413

Please return this stub with your payment to ensure prompt credit to your account.

Please DO NOT staple or fold. Thank You.



*** PACKING LIST ***

OFFICE DEPOT
1-800-GO-DEPOT
3366 E. WILLOW STREET
SIGNAL HILL CA 90755

Order Number 810436408-001

Order Summary

Shipping Address

00002
TOWN OF LOXAHATCHEE GROVES
155 F ROAD
LOXAHATCHEE GRO FL 33470

Customer Information

Customer#: 46453081
Contact: BEVERLY KUIPERS
Phone#: 561-793-2418

Carton Counts

Repack / Split Case 1
Full Case 0
Bulk 0
Total 1

Additional Information

Route/Stop/Door: 0767/000/035
Order Date: 03-Dec-2015
Delivery Date: 04-Dec-2015

Item Details

Line	Quantity			Item Number Migr Code Customer Code	Description	Units	Unit Price	Total	Carton ID
	Ordered	Shipped	Back Ordered						
1	1	1	0	546543 SCC OFMP9	PLATE,PPR,MDWGHT,8.5",BARE,125	PACK	11.390	11.39	69624601

Thank you for your order. If you have any questions about your order please call us toll free at (888) 263-3423.

Office Depot offers a line of janitorial and sanitation products to keep your office clean and functional. For more information, contact your Customer Service Team or your Account Manager.

Merchandise Total 11.39
Small Order Handling Fee 0.00
Subtotal 11.39
Sales Tax(Exempt) 0.00
Order Total 11.39

Balance Due 0.00
Terms: Acct Bill



Office Depot, Inc
PO BOX 630813
CINCINNATI OH
45263-0813

THANKS FOR YOUR ORDER

IF YOU HAVE ANY QUESTIONS
OR PROBLEMS. JUST CALL US

FOR CUSTOMER SERVICE ORDER: (888) 263-3423
FOR ACCOUNT: (800) 721-6592

FEDERAL ID: 59-2663954

RECEIVED
DEC 11 2015

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
810436409001	55.22	Page 1 of 1
INVOICE DATE	TERMS	PAYMENT DUE
04-DEC-15	Net 30	03-JAN-16

BILL TO:

ATTN: ACCTS PAYABLE
TOWN OF LOXAHATCHEE GROVES
155 F ROAD
LOXAHATCHEE GROVES FL 33470

BY: *SK*

SHIP TO:

TOWN OF LOXAHATCHEE GROVES
155 F ROAD
LOXAHATCHEE GROVES FL 33470

000588-000363



ACCOUNT NUMBER	PURCHASE ORDER	SHIP TO ID	ORDER NUMBER	ORDER DATE	SHIPPED DATE		
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BILLING ID	ACCOUNT MANAGER	RELEASE	ORDERED BY	DESKTOP	COST CENTER		
23856			BEVERLY KUIPERS				
CATALOG ITEM #/ MANUF CODE	DESCRIPTION/ CUSTOMER ITEM #	U/M	QTY ORD	QTY SHP	QTY B/O	UNIT PRICE	EXTENDED PRICE
360990 561	PAD,EASEL,POST-IT,25X30.5, 360990	CT	1	1	0	55.220	55.22

To ensure timely and accurate application of your payment, please include the following on your remittance: account number, invoice number, and the amount you are paying for each invoice.

001-512-510-000 \$ 55.22 *WJCD*
12/14/15

000588-000363

SUB-TOTAL	55.22
DELIVERY	0.00
SALES TAX	0.00
TOTAL	55.22

To return supplies, please repack in original box and insert our packing list, or copy of this invoice. Please note problem so we may issue credit or replacement, whichever you prefer. Please do not ship collect. Please do not return furniture or machines until you call us first for instructions. Shortage or damage must be reported within 5 days after delivery.

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CUSTOMER NAME	BILLING ID	INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT	AMOUNT ENCLOSED
TOWN OF LOXAHATCHEE GROVES	23856	810436409001	04-DEC-15	55.22	55.22

FL0 000238568 810436409001 00000005522 1 2

Please
Send Your
Check to:

OFFICE DEPOT
PO Box 1413
Charlotte NC 28201-1413

Please return this stub with your payment to ensure prompt credit to your account.

Please DO NOT staple or fold. Thank You.

Customer number: 46453081
Payment info: Account Billing

155 F ROAD
LOXAHATCHEE GROVES, FL 33470

PO Number:
Contact: BEVERLY KUIPERS
CC:
Desktop Location:
Release:
ASSET:
LOC: 1165: Third Party
Comments:

ITEM DESCRIPTION	ENTERED ITEM #	QTY	SHIPPING	B/O Qty	UNIT PRICE	UM	EXTENDED PRICE
Post-it® Self-Stick Easel Pads, 25" x 30", Yellow Lined Paper, 30 Sheets Box Of 2 (MMM561)	360990	1	1	0	55.220	carton	\$55.22

BEST VALUE

LEGEND

ENTERED ITEM #: Entered Item Number
QTY: Original Quantity Ordered
SHIPPING: Ordered Quantity - Backorder Quantity
B/O Qty: Backorder Quantity
UNIT PRICE: Price per Individual Unit
UM: Unit of Measure
EXTENDED PRICE: Ordered Quantity x Unit Price

Subtotal: \$55.22
Tax: 0.00
Delivery Charge: 0.00
Misc.: 0.00

Total:\$55.22

Grand Total: \$203.41

You can now [track delivery](#) of your order online. Enter the order number shown in this email, or go to [Order Tracking](#) at OfficeDepot.com/BSD and log in to track delivery of your order by entering your order number.

Subscribe to receive email alerts about exclusive offers at Office Depot. [Update](#) your contact information and subscription preferences today!

Questions? We are taking care of business every day, and we are ready to help: Call 888-263-3423 or [email us](#) for prompt answers to all your questions.

For compliance with select California laws and for financial reporting purposes, all sales shipped to California and Texas customers are made by eDepot, LLC, a wholly-owned subsidiary of Office Depot, Inc, and are F.O.B. destination point.

ORIGINAL INVOICE

10000



Office Depot, Inc
PO BOX 630813
CINCINNATI OH
45263-0813

RECEIVED
DEC 11 2015

THANKS FOR YOUR ORDER

IF YOU HAVE ANY QUESTIONS

OR PROBLEMS, JUST CALL US

FOR CUSTOMER SERVICE ORDER: (888) 263-3423
FOR ACCOUNT: (800) 721-6592

FEDERAL ID: 59-2663954

BY: BK

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
809818550001	264.56	Page 2 of 2
INVOICE DATE	TERMS	PAYMENT DUE
02-DEC-15	Net 30	03-JAN-16

BILL TO:

ATTN: ACCTS PAYABLE
TOWN OF LOXAHATCHEE GROVES
155 F ROAD
LOXAHATCHEE GROVES FL 33470

000588-000363

SHIP TO:

TOWN OF LOXAHATCHEE GROVES
155 F ROAD
LOXAHATCHEE GROVES FL 33470



ACCOUNT NUMBER	PURCHASE ORDER	SHIP TO ID	ORDER NUMBER	ORDER DATE	SHIPPED DATE		
46453081		155FROAD	809818550001	01-DEC-15	02-DEC-15		
BILLING ID	ACCOUNT MANAGER	RELEASE	ORDERED BY	DESKTOP	COST CENTER		
23856			BEVERLY KUIPERS				
CATALOG ITEM #/ MANUF CODE	DESCRIPTION/ CUSTOMER ITEM #	U/M TAX	QTY ORD	QTY SHP	QTY B/O	UNIT PRICE	EXTENDED PRICE

001-512-510-000
\$ 264.56
WATU
12/14/15

SUB-TOTAL	264.56
DELIVERY	0.00
SALES TAX	0.00
TOTAL	264.56

All amounts are based on USD currency

To return supplies, please repack in original box and insert our packing list, or copy of this invoice. Please note problem so we may issue credit or replacement, whichever you prefer. Please do not ship collect. Please do not return furniture or machines until you call us first for instructions. Shortage or damage must be reported within 5 days after delivery.

DETACH HERE

CUSTOMER NAME	BILLING ID	INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT	AMOUNT ENCLOSED
TOWN OF LOXAHATCHEE GROVES	23856	809818550001	02-DEC-15	264.56	264.56

FL0 000238568 8098185500010 00000026456 1 1

Please
Send Your
Check to:

OFFICE DEPOT
PO Box 1413
Charlotte NC 28201-1413

Please return this stub with your payment to
ensure prompt credit to your account.

Please DO NOT staple or fold. Thank You.

ORIGINAL INVOICE

10000



Office Depot, Inc
PO BOX 630813
CINCINNATI OH
45263-0813

THANKS FOR YOUR ORDER

IF YOU HAVE ANY QUESTIONS
OR PROBLEMS. JUST CALL US
FOR CUSTOMER SERVICE ORDER: (888) 263-3423
FOR ACCOUNT: (800) 721-6592

FEDERAL ID:59-2663954

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
809818550001	264.56	Page 1 of 2
INVOICE DATE	TERMS	PAYMENT DUE
02-DEC-15	Net 30	03-JAN-16

BILL TO:

ATTN: ACCTS PAYABLE
TOWN OF LOXAHATCHEE GROVES
155 F ROAD
LOXAHATCHEE GROVES FL 33470

SHIP TO:

TOWN OF LOXAHATCHEE GROVES
155 F ROAD
LOXAHATCHEE GROVES FL 33470

000588-000363



0000000000003630000000363

ACCOUNT NUMBER	PURCHASE ORDER	SHIP TO ID	ORDER NUMBER	ORDER DATE	SHIPPED DATE		
46453081		155 F ROAD	809818550001	01-DEC-15	02-DEC-15		
BILLING ID	ACCOUNT MANAGER	RELEASE	ORDERED BY	DESKTOP	COST CENTER		
23856			BEVERLY KUIPERS				
CATALOG ITEM #/ MANUF CODE	DESCRIPTION/ CUSTOMER ITEM #	U/M	QTY ORD	QTY SHP	QTY B/O	UNIT PRICE	EXTENDED PRICE
825190 RTP-001948-HD-087-07	CLIP,BINDER,MED,1.25IN,144 825190	PK	1	1	0	7.040	7.04
592570 20887	TOWELS,BIGFOLD,WE 592570	CT	2	2	0	28.300	56.60
348037 ODRT-8511-CTN	PAPER,COPY,OD,CASE,10-RE 348037	CA	2	2	0	37.490	74.98
909309 99010	CLIP,BINDER,MINI,1/4IN,12B 909309	BX	6	6	0	0.260	1.56
620007 12052040	WATER,BTL,NSTL PURE 620007	CA	4	4	0	3.630	14.52
618405 KCC 21271CT	TISSUE,KLEENEX,BOUTIQUE,6 618405	PK	1	1	0	9.950	9.95
251849 5342CDEA	CUP,PERFECTOUCH12OZ,50C 251849	PK	4	4	0	4.440	17.76
251600 KCC 17713	TISSUE,TOILET,2PLY,60RL 251600	CT	1	1	0	41.050	41.05
435155 PGC 45535	FEBREEZE,MEADOWS & 435155	EA	3	3	0	3.280	9.84
400354 PGC 88187	TOWEL,PAPER,BOUNTY,SAS,8 400354	PK	1	1	0	13.990	13.99
326921 NES 35110	CREAMER,COFFEEMATE,50CT 326921	BX	2	2	0	3.640	7.28
765737 FOL20421CT	COFFEE,GR,CL RS 30.5oz 765737	EA	1	1	0	9.990	9.99

000588-000363

To ensure timely and accurate application of your payment, please include the following on your remittance: account number, invoice number, and the amount you are paying for each invoice.

CONTINUED ON NEXT PAGE...



*** PACKING LIST ***

OFFICE DEPOT
1-800-GO-DEPOT
2925 W CORPORATE LAKES BLVD.
WESTON FL 33331

Order Number 809818550-001

Order Summary

Shipping Address

00002
TOWN OF LOXAHATCHEE GROVES
155 F ROAD
LOXAHATCHEE GRO FL 33470

Customer Information

Customer#: 46453081
Contact: BEVERLY KUIPERS
Phone#: 561-793-2418

Carton Counts

Repack / Split Case	2
Full Case	10
Bulk	0
Total	12

Additional Information

Route/Stop/Door: 0217/000/001
Order Date: 01-Dec-2015
Delivery Date: 02-Dec-2015

Item Details

Line	Quantity			Item Number Mfg Code Customer Code	Description	Units	Unit Price	Total	Carton ID
	Ordered	Shipped	Back Ordered						
1	1	1	0	825190 RTP-001948-HD	CLIP,BINDER,MED,1.25IN,144/PK	PACK	7.040	7.04	44382001
2	2	2	0	592570 20887	TOWELS,BIGFOLD,WE	CT	28.300	56.60	44398601 44398701
3	2	2	0	348037 ODRT-8511-CTN	PAPER,COPY,OD,CASE,10-REAM	CASE	37.490	74.98	44398001 44398101
4	6	6	0	909309 99010	CLIP,BINDER,MINI,1/4IN,12BOX	BOX	0.260	1.56	44373201
5	4	4	0	620007 12052040	WATER,BTL,NSTL PURE LIFE,24/CS	CASE	3.630	14.52	44398201 44398301 44398401 44398501
6	1	1	0	618405 KCC 21271CT	TISSUE,KLEENEX,BOUTIQUE,6PK	PACK	9.950	9.95	44382001
7	4	4	0	251849 5342CDEA	CUP,PERFECTOUCH12OZ,50CT	PACK	4.440	17.76	44382001
8	1	1	0	251600 KCC 17713	TISSUE,TOILET,2PLY,60RL	CT	41.050	41.05	44398901
9	3	3	0	435155 PGC 45535	FEBREEZE,MEADOWS & RAIN,9.7OZ	EACH	3.280	9.84	44382001
10	1	1	0	400354 PGC 88187	TOWEL,PAPER,BOUNTY,SAS,8ROLLS	PACK	13.990	13.99	44398801
11	2	2	0	326921 NES 35110	CREAMER,COFFEEMATE,50CT,REG	BOX	3.640	7.28	44373201
12	1	1	0	765737 FOL20421CT	COFFEE,GR,CL RS 30.5OZ	EACH	9.990	9.99	44373201



*** PACKING LIST ***

OFFICE DEPOT
 1-800-GO-DEPOT
 2925 W. CORPORATE LAKES BLVD.
 WESTON FL 33331

Order Number 809818550-001

Item Details									
Line	Quantity			Item Number Mfgr Code Customer Code	Description	Units	Unit Price	Total	Carton ID
	Ordered	Shipped	Back Ordered						

Thank you for your order. If you have any questions about your order please call us toll free at (888) 263-3423.

Cost Saving Solutions from Office Depot. Did you know consolidating your orders saves your organization time and money.

Merchandise Total	264.56
Delivery Charge	0.00
Subtotal	264.56
Sales Tax(Exempt)	0.00
Order Total	264.56

Balance Due	0.00
Terms: Acct Bill	

**CALDWELL PACETTI
EDWARDS SCHOECH & VIATOR LLP**
One Clearlake Centre
250 S. Australian Avenue, Suite 600
West Palm Beach, FL 33401
(561) 655-0620

R E C E I V E D
DEC 11 2015

December 09, 2015

BY: BY

Town of Loxahatchee Groves
155 F Road
Loxahatchee Groves, FL 33470

INVOICE

WPD
12/14/15

Matter ID: L122000
TLG - Code Enforcement

001-519-315-000 *\$ 345.49*

Invoice # 124153

For Professional Services Rendered:

08/18/2015	WPD	Telephone call to T. Bonyak.	0.10 hr
10/28/2015	WPD	E-mail T. Bonyak; review proposed Stipulation & Agreed Final Order & related paperwork for Case No 2014-410.	0.80 hr
10/29/2015	WPD	E-mail T. Bonyak; review Correction Notice.	0.40 hr
10/29/2015	WPD	Telephone call to T. Bonyak.	0.20 hr
11/04/2015	WPD	Telephone call to J. Fleischman re: Tufano proposal.	0.20 hr
11/10/2015	WPD	Telephone calls to M. Cirullo & T. Bonyak.	0.20 hr
11/12/2015	WPD	Conference with T. Bonyak.	0.40 hr
Total Professional Services:			\$345.00

INVOICE SUMMARY

<u>Producer</u>	<u>Rate</u>	<u>Hours</u>	<u>Amount</u>
William Doney	\$150.00	2.30	\$345.00

For Professional Services:	2.30 Hours	\$345.00
New Charges this Invoice:		\$345.00

Previous Balance:		\$1,185.49
Less Payment and Credits Received:		\$1,185.00
Outstanding Balance:		\$0.49
Plus New Charges this Invoice:		\$345.00
Total Due:		\$345.49

Previous Trust Balance:		\$0.00
Less Trust Applied:		\$0.00
Current Trust Balance:		\$0.00
Balance in Retainer:		\$0.00

PALM BEACH COUNTY
SHERIFF'S OFFICE
 RIC L. BRADSHAW, SHERIFF



RECEIVED
 DEC 08 2015

Bill To:
 Town of Loxahatchee Groves
 155 F Road

Laxahatchee Groves, FL, 33470

Invoice No: 49883
Invoice Date: 03-DEC-15
Due Date: 25-DEC-15
Customer No: 4935

BY: BK

Term: CONTRACT

Customer Contact:

Line No.	Description	Quantity	Unit Price	Amount
1	Law Enforcement Service Contract for the month of January 2016	1	\$24062.17	\$24,062.17
Special Instructions:				Total
				\$24,062.17

001-521-341-000 \$ 24,062.17

WFL
 12/14/15

Remit to:
 Palm Beach County Sheriff's Office
 PO Box 24681
 West Palm Beach, FL 33416-4681

Please Detach and Return Remittance Stub With Your Payment or log on to <http://www.pbso.org/index.cfm?fa=accountirec> to make your payment online

Bill to:
 Town of Loxahatchee Groves
 155 F Road
 Laxahatchee Groves, FL, 33470

Customer No:	4935
Invoice No:	49883
Invoice Amount:	\$24,062.17
Amount Paid:	24,062.17
Check No:	



OFFICE AUTOMATION

2077 Powerline Road Ste. #2
Pompano Beach, FL 33069
tel: 954.974.7410
fax: 954.974.2737
email: tgi@tgioa.com
website: www.tgioa.com



Sign up for Paperless Billing on our
website: <http://www.tgioa.com/paperless>

RECEIVED
DEC 08 2015

BY: BK

ALL CLAIMS MUST BE IN WRITING WITHIN TEN DAYS OF INVOICE DATE. NO MERCHANDISE MAY BE RETURNED FOR CREDIT WITHOUT AUTHORITY IN WRITING FROM OUR HOME OFFICE. UNTIL ALL PAYMENTS REQUIRED HAVE BEEN DULY MADE BY BUYER HEREUNDER TITLE TO ALL GOODS DELIVERED TO THE BUYER HEREUNDER SHALL REMAIN THE PROPERTY OF SELLER. YOUR ACCEPTANCE OF THIS INVOICE SHALL CONSTITUTE ACCEPTANCE OF THESE TERMS. OVERDUE ACCOUNTS WILL BE CHARGED A LATE PAYMENT FEE OF 1 1/2 % PER MONTH (18% ANNUALLY).

LOCATION

BEV
TOWN CLERK LOXAHATCHEE
155 F ROAD
LOXAHATCHEE GROVES FL
33470

PO # SERV AGREEMENT

INVOICE NO
088723 1

INVOICE DATE
12/02/15

TERMS: NET 10 DAYS
FROM INVOICE DATE

CUSTOMER NO.	MODEL AND SERIAL NO.	LEASE ID	REPRESENTATIVE	PROGRAM TYPE
WP6074		MM	PBSE55	KEM RR
DATE	PREVIOUS METER	DATE	CURRENT METER	
INVOICE PERIOD 11/01/15 TO 12/01/15				
QUANTITY	CODE NO.	DESCRIPTION	AMOUNT	
MODEL:	E304C			
SERIAL:	SCNE110712			
EQUIP ID:	10991			
BLACK METER				
Meters: Previous	252348	11/10/15 Current	254862	12/02/15
		Excess at .00600		
2514	4XMCBK	MA, CPC, BLK MAINTENANCE, X # 4XMCBK		15.08
COLOR METER				
Meters: Previous	249761	11/10/15 Current	253234	12/02/15
		Excess at .06500		
3473	4XMCCL	MA, CPC, COL MAINTENANCE, X # 4XMCCL		225.75
1	4AD000	ADMINISTRATIVE FEE # 4AD000		3.95
FINAL METER READING 12/02/15				
ALL INCLSV SERVC & SUPP EXP PPR &ST MONTHLY CONTRACT FOR COLOR MACHINES				
001-512-510-000				
\$ 244.78				
			SUBTOTAL 244.78	
			TOTAL DUE 244.78	

***** Please Note *****

Our Postage Division is Separate from Our Copier/Fax Division.
Please Make Your Check Payable to The Name On the Invoice.
As Always, We Appreciate Your Business !

BILL TO
BEV
TOWN CLERK LOXAHATCHEE
155 F ROAD
LOXAHATCHEE GROVES FL 33470

REMIT TO
TGI OFFICE AUTOMATION,LLC
SUITE# 2
2077 N POWERLINE ROAD
POMPAHO BEACH FL 33069



INVOICE

Town of Loxahatchee Groves

INVOICE: 2015-12
DATE: DECEMBER 17, 2015

14579 Southern Boulevard, Suite 2
Loxahatchee Groves, FL 33470-9226
561.793.2418

SALESPERSON	JOB	PAYMENT TERMS	DUE DATE
		Due on receipt	

QTY	DESCRIPTION	UNIT PRICE	LINE TOTAL
	001-511-499-000		
	Town Council Compensation - January 2015		
12/17/2015	David Browning	\$500.00	
	Ron Jarriel	\$500.00	
	Ryan Liang	\$500.00	
	Tom Goltzene	\$500.00	
	Jim Rockett	\$500.00	
			
	Please remit payment to Town Council Members		
		SUBTOTAL	\$2,500.00

The Palm Beach Post

REAL NEWS STARTS HERE

TOWN OF LOXAHATCHEE GROVE
 JANET WHIPLE
 155 F RD
 LOXAHATCHEE GROVES FL 33470-4949

Thank you for your loyalty

Customer Account Information

Date: 11/18/2015
 Account Number: **352767748**
 Subscription Type: **Monday - Sunday + Total Digital Access**
 Delivery Address: 155 F RD
 Please Pay: **\$28.61**
Pays 12/19/2015 - 01/18/2016 (1 month)
 Please Pay By: **12/19/2015**

Service Credit Applied Since Last Invoice

Yearly \$ 346.20
\$ 286.00

*Newspaper service will continue unless
 The Palm Beach Post is notified otherwise.*

**Your Palm Beach Post,
 Delivered More Ways.**



PalmBeachPost.com/AddDigital

KEEP YOUR POST COMING

Dawn Forman
 Subscriber Relations Manager



THANK YOU For Subscribing

<u>Subscription Length</u>	<u>Total Cost (Includes Total Digital Access)</u>	<u>Pays Through</u>
26 weeks	\$173.10	06/17/2016
13 weeks	\$86.55	03/18/2016
1 month	\$28.61	01/18/2016

-\$60.00
\$ 286.00

Your newspaper term includes the following transportation costs and sales tax: 26 weeks (\$56.94 Trans & \$6.58 Tax); 13 weeks (\$28.47 Trans & \$3.29 Tax); 1 month (\$9.97 Trans & \$1.06 Tax) You have the option to pick up your newspaper to avoid transportation costs. Transportation costs may vary and are subject to change at renewal. To arrange pick up of your newspaper, please call our Customer Service department at 561-820-4663. Sales tax is calculated on the newspaper price only. Sales tax is different by county.

001-511-540-600 \$286.00

▼ TO PAY, PLEASE VISIT PalmBeachPost.com/service OR DETACH THIS PORTION AND RETURN WITH PAYMENT ▼

The Palm Beach Post
 REAL NEWS STARTS HERE

417 BRIDGE ST #O2COXMG1
 DANVILLE, VA 24541

Return Service Requested

For changes or corrections to your subscription,
 please call Customer Service at (800) 926-POST (7678)

METHOD OF PAYMENT:

- Check or money order
 (Payable to The Palm Beach Post - please include account #).
- EZip - Automatically charge at each payment period
 (Complete form on the back).
- One-time payment (Complete form on the back).

Email Address (to receive updates and offers):

PAY BY **12/19/2015**

ACCOUNT NO..... **352767748**

SUBSCRIPTION AMOUNT:

- 26 weeks \$173.10
- 13 weeks \$86.55
- 1 month \$28.61

Carrier Tip (optional): \$ _____

TOTAL AMOUNT ENCLOSED: \$ *286.00*

520 AT 0.283



*****AUTO**SCH 3-DIGIT 334 059400 522 2 50000520

TOWN OF LOXAHATCHEE GROVE
 JANET WHIPLE
 155 F RD
 LOXAHATCHEE GROVES FL 33470-4949

The Palm Beach Post
 PO Box 742626
 Cincinnati, OH 45274-2626



005000286100086550017310003462003527677488

The Palm Beach Post
REAL NEWS STARTS HERE
 Palm Beach Daily News
THE PALM BEACH POST

ADVERTISING INVOICE

BILLED ACCOUNT NUMBER G792	BILLING DATE 11/24/2015	TOTAL AMOUNT DUE \$147.92	DOCUMENT 314371
BILLING PERIOD 11/24/2015 - 11/24/2015	TERMS OF PAYMENT Upon Receipt	PAYMENT DUE 11/24/2015	PAGE # 1 / 1
ADVERTISER CLIENT # G792	ADVERTISER CLIENT NAME TOWN OF LOXAHATCHEE GROVES		

TOWN OF LOXAHATCHEE GROVES
 155 F RD
 LOXAHATCHEE GROVES FL 33470-4949

For questions concerning this bill call 855-333-2676
 If paid, please disregard - Thank you.

DATE	NEWSPAPER REFERENCE	DESCRIPTION	DIMENSIONS BILLED UNITS	TIMES RUN RATE	GROSS AMOUNT	NET AMOUNT
11/24/2015	517277	RFP Proposal Data RFP Number: 2015-0			147.92	147.92
11/24/2015		PB Post, PB Post Web				
11/24/2015		Total Amount Due				\$147.92

001-515-490-000
 \$ 147.92

Wfy
 12/14/15

.....
 PLEASE DETACH AND INCLUDE WITH YOUR PAYMENT

PAYMENT COUPON

DOCUMENT 314371	BILLING DATE 11/24/2015	TERMS OF PAYMENT Upon Receipt	PAYMENT DUE 11/24/2015	ADVERTISER CLIENT # G792	ADVERTISER CLIENT NAME TOWN OF LOXAHATCHEE GROVES
--------------------	----------------------------	----------------------------------	---------------------------	-----------------------------	------------------------------------------------------

Please send your payment to:

CMG - PB Remittance Address
 PO Box 645098
 Cincinnati, OH 45264-5098

G792
 TOWN OF LOXAHATCHEE GROVES
 155 F RD
 LOXAHATCHEE GROVES FL 33470-4949

TOTAL AMOUNT	AMOUNT ENCLOSED
\$147.92	

0050031437100000147929

RFP Proposal Data

RFP Number: 2015-003
RFP Title:
Town Code Enforcement Services.
RFP Opening Date: 2:00 P.M.,
December 21, 2015
CONTACT PERSON:
Cheryl Miller, Financial Services
Phone: 561-793-2418
E-Mail Address:
cmiller@loxahatcheegrovesfl.gov

RFP Submission Deadline

DATE: 2:00 P.M., December 21, 2015
Location/Mail Address:
Town of Loxahatchee Groves
Office of the Town Clerk
155 F Road
Loxahatchee Groves, Florida 33470

Sealed written Proposals must be received by the Town of Loxahatchee Groves; Town Clerk's Office, no later than the date, time and at the location indicated above for the Request for Proposals Submission. Submittal of Response by fax is not acceptable. One (1) electronic (DVD) copy and Seven (7) copies of your Proposal and response forms must be returned to the Town or your Proposal may be disqualified.

NOTE: This Proposal does not constitute an order for the goods or services specified. The number of copies requested in this Proposal together with completed Response Forms must be returned.

PUB: The Palm Beach Post
11-24/ 2015 #517277

Signed  NADIA VAGEDES, Notary Public
In and for the State of Ohio
My Commission Expires Sept. 2, 2016

Sworn to and subscribed before 11/30/2015.
Who is personally known to me.

TOWN OF LOXAHATCHEE GROVES PROOF OF PUBLICATION STATE OF FLORIDA COUNTY OF PALM BEACH Before the undersigned authority personally appeared Tiffani Everett, who on oath says that she is Call Center Legal Advertising Representative of The Palm Beach Post, a daily and Sunday newspaper, published at West Palm Beach in Palm Beach County, Florida; that the attached copy of advertising for a Notice was published in said newspaper on First date of Publication 11/24/2015 and last date of Publication 11/24/2015 Affiant further says that the said The Post is a newspaper published at West Palm Beach, in said Palm Beach County, Florida, and that the said newspaper has heretofore been continuously published in said Palm Beach County, Florida, daily and Sunday and has been entered as second class mail matter at the post office in West Palm Beach, in said Palm Beach County, Florida, for a period of one year next preceding the first publication of the attached copy of advertisement; and affiant further says that she/he has neither paid nor promised any person, firm or corporation any discount rebate, commission or refund for the purpose of securing this advertisement for publication in the said newspaper. Also published in Martin and St. Lucie Counties. Request for Proposal Ad ID: 981311 Ad Cost: 147.92

RECEIPT

Account: G792
Name: TOWN OF LOXAHATCHEE GROVES
Address: 155 F RD
LOXAHATCHEE GROVES FL 33470-4949

Phone: 561-793-2418
E-mail:

Order Name: Request for Proposal
Order Id: 517277
Original Order Id:
Copy Line: RFP Proposal Data RFP Number: 2015-0
Sales Rep: PB116 R Hindmarch (P)
Purchase Order:
Pay Type: Billed
Account Group:
Caller: Virginia Walton

Section: 6205 Legal Notices
Reply Request:
Tear Sheets: 0

Order Summary

Base:	\$147.92
Other Charges:	\$0.00
Discounts:	\$0.00
Agency Commission:	\$0.00
Sales Tax:	\$0.00
Total Order	\$147.92

Payment Summary
No payment information available.

RECEIPT

Ad Name: 981311A

Ad Id: 981311

Original Ad Id:

Start: 11/24/2015
Stop: 11/24/2015
Issues: 1
Words: 164
Dimensions: 1 X 43
Color:

Editions

PB Post
PB Post Web

RECEIPT

RFP Proposal Data

RFP Number: 2015-003
RFP Title:
Town Code Enforcement Services.
RFP Opening Date: 2:00 P.M.,
December 21, 2015
CONTACT PERSON:
Cheryl Miller, Financial Services
Phone: 561-793-2418
E-Mail Address:
cmiller@loxahatcheegrovesfl.gov

RFP Submission Deadline

DATE: 2:00 P.M., December 21, 2015
Location/Mail Address:
Town of Loxahatchee Groves
Office of the Town Clerk
155 F Road
Loxahatchee Groves, Florida 33470

Sealed written Proposals must be received by the Town of Loxahatchee Groves; Town Clerk's Office, no later than the date, time and at the location indicated above for the Request for Proposals Submission. Submittal of Response by fax is not acceptable. One (1) electronic (DVD) copy and Seven (7) copies of your Proposal and response forms must be returned to the Town or your Proposal may be disqualified.

NOTE: This Proposal does not constitute an order for the goods or services specified. The number of copies requested in this Proposal together with completed Response Forms must be returned.

PUB: The Palm Beach Post
11-24/2015 #517277

RECEIPT

Ad shown is not actual print size.



/ 27

4206287619636729856300000

Please request changes on the back.
Notes on the front will not be detected.

B 5,8 4206 2



AUTO **RO 7003
020391

TOWN OF LOXAHATCHEE GROVES
155 F RD
LOXAHATCHEE FL 33470-4949

Make check payable to FPL in U.S. funds
and mail along with this coupon to:

FPL
GENERAL MAIL FACILITY
MIAMI FL 33188-0001



Account number	Total amount you owe	New charges due by	Amount enclosed
28761-96367	\$365.89	Dec 29 2015	\$ 365.89

Your electric statement

Account number: 28761-96367

For: Nov 07 2015 to Dec 08 2015 (31 days)
Customer name: TOWN OF LOXAHATCHEE GROVES
Service address: 155 F RD

Statement date: Dec 08 2015
Next meter reading: Jan 09 2016

Amount of your last bill	Payments (-)	Additional activity (+ or -)	Balance before new charges (=)	New charges (+)	Total amount you owe (=)	New charges due by
349.13	349.13 CR	0.00	0.00	365.89	\$365.89	Dec 29 2015

Meter reading - Meter KEL2899

Current reading 54253
Previous reading - 50734
kWh used 3519

Amount of your last bill 349.13
Payment received - Thank you 349.13 CR
Balance before new charges \$0.00

Energy usage

kWh this month 3519
Service days 31
kWh per day 113

New charges (Rate: GS-1 GENERAL SVC NON-DEMAND / BUSINESS)

Electric service amount 333.17**
Storm charge 3.20
Gross receipts tax 8.62
Franchise charge 20.90
Total new charges \$365.89

**The electric service amount includes the following charges:

Customer charge: \$7.46
Fuel: \$110.14
(\$0.031300 per kWh)
Non-fuel: \$215.57
(\$0.061260 per kWh)

Total amount you owe \$365.89

- Payment received after **February 29, 2016** is considered **LATE**; a late payment charge of 1% will apply.
- The Florida Public Service Commission approved changes that result in a net decrease to FPL's rates, which will apply to your bill beginning Jan. 2016. Learn more about the changes to your bill: FPL.com/rates.

WFL
12/14/15

RECEIVED
DEC 11 2015

BY: BK

001-519-420-000



Please have your account number ready when contacting FPL.
Customer service: 1-800-375-2434
Outside Florida: 1-800-226-3545
To report power outages: 1-800-4OUTAGE (468-8243)
Hearing/speech impaired: 711 (Relay Service)
Online at: www.FPL.com

Firehouse *BBQ*

(561) 718-9627

PROPOSAL

Catering for: Town of Loxahatchee Grove

Date: Saturday, December 5, 2015

Location: Town Hall

Time: 11:30 am – 2:30 pm

MENU

- | | |
|-------------------------------------------|--------------------------------|
| *BBQ Pulled Pork (sandwich bun available) | *Sweet Cole Slaw |
| *Boneless, skinless Chicken Breast | *BBQ Baked Beans |
| *Roasted Sweet Corn | *Country Style Potato Salad |
| *Hot Dogs | *Roasted Sweet Corn |
| *Assorted Chips | *Soda, Sweet/Un-sweet Iced Tea |

To include: plates, plastic ware, napkins, cups, condiments, BBQ sauce, coolers and ice.

001-511-820-000

Service for: 150 Guest

\$ 2,250.00

Cost per Guest: \$15

Total Event Cost: \$2250.00

WJW
12/14/15

Food and service guaranteed to your BBQ satisfaction!