EXECUTIVE COUNCIL OF IOWA

Teleconference Only
Monday, June 06, 2022 at 10:00 AM

AGENDA

MEMBERS OF COUNCIL

Hon. Kim Reynolds | **Governor**
Hon. Paul D. Pate | **Secretary of State**
Hon. Rob Sand | **Auditor of State**
Hon. Michael L. Fitzgerald | **Treasurer of State**
Hon. Michael L. Naig | **Secretary of Agriculture**

Teleconference Only
Conference Call Phone Number: (877) 304-9269
Conference Code Pin: 364626

1. Approval of Minutes

A. Approval of the minutes from the Executive Council meeting held on May 16, 2022.

2. Iowa Code §7D.10

A. Attorney General's office request Payment for Expenses under Iowa Code §7D.10 in the amount of $15,230.03.

3. Special Counsel

A. The Department of Justice, Attorney General's office requests retention of special counsel pursuant to Iowa Code section 13.7 to provide specialized legal services and representation to the State of Iowa with respect to claims against Centene Corporation and its wholly owned subsidiaries related to pharmacy benefit services provided to Iowa's Medicaid Health Plans.

Firm: Cohen Milstein
Three Logan Square
1717 Arch Street, Suite 3610
Philadelphia, PA 19103
Rate: Contingent fee agreement

4. Emergency Allocations

A. Iowa Communications Network is requesting an emergency allocation in the amount of $18,357.52. On April 13, 2022, an exposed cable caused excessive erosion along Highway 169 in Union County between 230th Street and Oriole Avenue. Request is to cover repair costs.

The State Auditor's Office has reviewed this request and recommends allocation, subject to audit of actual invoices and supporting documentation and demonstration that no costs covered by the maintenance contract have been included.

B. Iowa Communications Network is requesting an emergency allocation in the amount of $18,289.36. On April 20, 2022, an exposed cable caused excessive erosion at the culvert along Highway 148 in Taylor County between 210th Street and 200th Street. Request is to cover repair costs.

The State Auditor's Office has reviewed this request and recommends allocation, subject to audit of actual invoices and supporting documentation and demonstration that no costs covered by the maintenance contract have been included.

C. Iowa Communications Network is requesting an emergency allocation in the amount of $60,585.56. On April 20, 2022, an exposed cable caused excessive erosion along Highway 34 in Monroe County. Request is to cover repair costs.

The State Auditor's Office has reviewed this request and recommends allocation, subject to audit of actual invoices and supporting documentation and demonstration that no costs covered by the maintenance contract have been included.

D. Department of Corrections - Newton Correctional Facility is requesting an emergency allocation and reimbursement in the amount of $7,877.97. On December 15, 2021, a storm with high winds caused a power outage that damaged items. Request is to cover repair costs.

The State Auditor's Office has reviewed this request and recommends allocation and payment. This represents full and final payment and this allocation will be closed.

E. Board of Regents - Iowa School for the Deaf is requesting an emergency allocation in the amount of $83,066.19. On December 15, 2021, a storm caused wind damages to the Administration Building, Parking Garage and Lied Multi-Purpose Center. Request is to cover repair costs.

The State Auditor's Office has reviewed this request and recommends allocation subject to audit of actual invoices.

F. Board of Regents - University of Iowa is requesting an emergency allocation and reimbursement in the amount of $585,992.06. On January 4, 2018, the failure of the hot water heating line at the Medical Research Center caused damages. Request is to cover repair costs.

The State Auditor's Office has reviewed this request and recommends allocation and reimbursement. This represents full and final payment and this allocation will be closed.

G. Department of Public Safety is requesting an emergency allocation and reimbursement in the amount of $5,236.04. On February 18, 2021, damages occurred after a pipe burst in the NW corner of the Post 9 Building. Request is to cover repair costs.

The State Auditor's Office has reviewed this request and recommends allocation and reimbursement. This represents full and final payment and this allocation will be closed.

5. Payment of Cost Items

A. Board of Regents - University of Iowa ……...…….....$6,233.78
On May 29, 2020, a drain backed up causing water damages at the Pomerantz Center. Request is to cover repair costs.

The State Auditor's Office has reviewed this request and recommends payment. This represents full and final payment.

B. Board of Regents - University of Iowa……..…….....$25,081.00
On February 23, 2021, the weight of snow and ice caused damages to the maintenance building at MacBride Nature Recreation Area. Request is to cover repair costs.

The State Auditor's Office has reviewed this request and recommends payment. This represents full and final payment.

C. Gray Miller Persh, LLP…….....$699.20
2233 Wisconsin Avenue NW
Suite 226
Washington, D.C. 20007
Iowa PBS

Jeffrey S. Thompson, Solicitor General, has reviewed this invoice and recommends payment. Payment will be made from Iowa PBS.

D. Denton Davis Brown PC……..….....$841.00
215 10th Street, Suite 1300
Des Moines, IA 50309-3993
Special Counsel Dentons Davis Brown Employee Retirement Income Security Act (ERISA)

Jeffrey S. Thompson, Solicitor General, has reviewed this invoice and recommends payment. Payment will be made from the Unclaimed Property Fund.

E. Michael Marquess……..…….....$5,000.00
2183 Docks Drive
Garwin, IA 50632
Tribal cases when the offenses are committed by non-natives against non-natives (or without a victim) on the Sac and Fox Indian Settlement in Tama County

Jeffrey S. Thompson, Solicitor General, has reviewed this invoice and recommends payment. Payment will be made from the General Fund.

F. Patterson Law Firm
L.L.P…….....$1,872.00
729 Insurance Exchange Building
505 Fifth Avenue
Des Moines, IA 50309-2390
Debra J. Breckenridge v. Iowa Judicial Branch, State of Iowa and Second Injury Fund of Iowa

Jeffrey S. Thompson, Solicitor General, has reviewed this invoice and recommends payment. Payment will be made from the Second Injury Fund.

G. Hall Render Killian Health & Lyman P.C. (Baker) ……..…$351.37
PO BOX 771910
Detroit, MI 48277-1910
University of Iowa Hospitals and Clinics (UIHC)

Jeffrey S. Thompson, Solicitor General, has reviewed these invoices and recommends

payment. Payment will be made from the funds of the University of Iowa Hospitals and Clinics.

H. Hall Render Killian Health & Lyman P.C. (Baker) …….....…$532.00
PO BOX 771910
Detroit, MI 48277-1910
University of Iowa Hospitals and Clinics (UIHC)

Jeffrey S. Thompson, Solicitor General, has reviewed these invoices and recommends payment. Payment will be made from the funds of the University of Iowa Hospitals and Clinics.

6. Iowa Code §7D.16

A. Ms. Barbara L. Stinson, President of The World Food Prize®, requests permission for the World Food Prize Foundation to serve wine at the Laureate Award Ceremony reception to be held at the Iowa State Capitol on October 20, 2022, as part of its annual Laureate Award Ceremony.

7. Information Items

A. The City of Sumner made their fifth Contingency Loan payment of $50,000.00. This loan was approved for $1,000,000.00 on September 25, 2017 and is prorated not to exceed twenty years. Total repayment to date: $250,000.00.

8. Adjourn Meeting

EXECUTIVE COUNCIL OF IOWA

Teleconference Only
Monday, May 16, 2022 at 10:00 AM

MINUTES

The Executive Council met in regular session at 10:00 a.m. via conference call. Governor Kim Reynolds presided over the meeting. Secretary of State Paul Pate, Auditor of State Rob Sand, Treasurer of State Michael Fitzgerald and Secretary of Agriculture Michael Naig were present.

1. Approval of Minutes

Moved by Auditor Sand and seconded by Secretary Naig that the Council approve the minutes of the Executive Council meeting held on May 9, 2022.

The vote:	Ayes:	Governor Reynolds
		Secretary Pate
		Auditor Sand
		Treasurer Fitzgerald
		Secretary Naig
	Nays:	None

2. Iowa Code §7D.10

Moved by Treasurer Fitzgerald and seconded by Auditor Sand that the Council approve the request from the Attorney General's Office for payment of Expenses Under Iowa Code §7D.10 in the amount of $15,522.10 for prosecuting cases under Iowa Code chapter 229A.

The vote:	Ayes:	Governor Reynolds
		Secretary Pate
		Auditor Sand
		Treasurer Fitzgerald
		Secretary Naig
	Nays:	None

3. Outside Counsel

Moved by Secretary Naig seconded by Secretary Pate that the Council approve the request from the Department of Justice, Attorney General's office as follows:

A. The Department of Justice, Attorney General's office requested retention of outside counsel pursuant to Iowa Code section 13.3(1) in Toribo Joseph Estrada *v. ISP; State of Iowa and Second Injury Fund of Iowa*, a workers' compensation case filed by a state employee.

	Firm:	Patterson Law Firm, L.L.P.
	Attorney:	Ryan Clark 505 5th Avenue Suite 729 Des Moines, IA 50309
	Rate:	$160.00 Per Hour
The vote:	Ayes:	Governor Reynolds Secretary Pate Auditor Sand Treasurer Fitzgerald Secretary Naig
	Nays:	None

4. Leases

Moved by Auditor Sand and seconded by Secretary Pate that the Council approve the following lease:

A. Lease between DNR and Fidelity Properties Ltd.
Date of Lease: December 1, 2019 to November 30, 2024

Legal Description: An irregular strip of the bed of East Okoboji Lake adjourning Government Lot 5 in Section 20, Township 99N, Range 36W, Dickinson County, Iowa.
Purpose: Continued presence of a platform deck
Annual Fee: $2,495.00

The vote:	Ayes:	Governor Reynolds Secretary Pate Auditor Sand Treasurer Fitzgerald Secretary Naig
	Nays:	None

5. Emergency Allocations

Moved by Treasurer Fitzgerald and seconded by Auditor Sand that the Council approve the following emergency allocation items:

A. The Department of Administrative Services requested an emergency allocation in the amount of $3,084.50. On October 5, 2020, vehicle 1315 was damaged after striking a deer. Request was to cover repair costs.

B. The Department of Administrative Services requested an emergency allocation in the amount of $3,256.90. On May 19, 2019, vehicle 1601 was damaged after striking a deer. Request was to cover repair costs.

C. The Department of Administrative Services requested an emergency allocation in the amount of $2,562.20. On May 22, 2019, vehicle 2189 was damaged after striking a wild animal. Request was to cover repair costs.

D. The Department of Administrative Services requested an emergency allocation in the amount of $4,160.99. On July 7, 2019, vehicle 2462 was vandalized. Request was to cover repair costs.

E. The Department of Administrative Services requested an emergency allocation in the amount of $9,542.32. On June 2, 2020, vehicle 105537 was damaged after striking a deer. Request was to cover repair costs.

F. The Department of Administrative Services requested an emergency allocation in the amount of $2,113.08. On October 3, 2019, vehicle 105947 was damaged after striking a raccoon. Request was to cover repair costs.

G. The Department of Public Safety requested an emergency allocation in the amount of $2,486.86. On November 28, 2018, vehicle 248 was damaged after striking a deer. Request was to cover repair costs.

H. The Department of Public Safety requested an emergency allocation in the amount of $2,234.59. On December 24, 2020, vehicle 291 was damaged after striking a raccoon. Request was to cover repair costs.

I. The Department of Public Safety requested a supplemental emergency allocation in the amount of $1,031.18. This brings to total allocation to $54,517.72. On September 7, 2021, the tower lighting system on the Waterloo ISICS Communication Tower was damaged by accumulative weather. Request was to cover repair costs.

J. The Iowa Communications Network requested an emergency allocation in the amount of $21,323.29. On March 22, 2022, equipment along US Highway 1 in Jefferson County was damaged due to erosion. Request was to cover repair costs.

The vote:	Ayes:	Governor Reynolds
		Secretary Pate
		Auditor Sand
		Treasurer Fitzgerald
		Secretary Naig
	Nays:	None

6. Payment of Cost Items

Moved by Auditor Sand and seconded by Secretary Pate that the Council approve the following cost items:

A. Department of Transportation ……...…….....$280,290.20
On August 10, 2020, a derecho damaged multiple buildings and facilities. Request was to cover repair costs.

B. Iowa General Assembly ……...…….....$8,760.21
On February 2, 2020, the capitol building was damaged due to vandalism. Request was to cover repair costs.

C. Department of Public Safety ……...…….....$28,050.05
On July 9, 2021, a hailstorm caused damage to multiple vehicles. Request was to cover repair costs.

D. Patterson Law Firm L.L.P…….……..…….....$48.00
729 Insurance Exchange Building
505 Fifth Avenue
Des Moines, IA 50309-2390
Richard Adrian v. University of Iowa, State of Iowa and Second Injury Fund of Iowa

E. Patterson Law Firm L.L.P…….……..…….....$592.00
729 Insurance Exchange Building
505 Fifth Avenue
Des Moines, IA 50309-2390
Debra J. Breckenridge v. Iowa Judicial Branch, State of Iowa and Second Injury Fund of Iowa

F. Patterson Law Firm L.L.P…….……..…….....$48.00
729 Insurance Exchange Building
505 Fifth Avenue
Des Moines, IA 50309-2390
Donald Briggle v. Iowa DOT, State of Iowa and Second Injury Fund of Iowa

G. Patterson Law Firm L.L.P…….……..…….....$272.00
729 Insurance Exchange Building
505 Fifth Avenue
Des Moines, IA 50309-2390
Michelle Franz v. Woodward Resource Center, State of Iowa and Second Injury Fund of Iowa

H. Patterson Law Firm L.L.P…….……..…….....$1,232.00
729 Insurance Exchange Building
505 Fifth Avenue
Des Moines, IA 50309-2390
Cyril Irvine v. Anamosa State Penitentiary; State of Iowa and Second Injury Fund of Iowa

I. Patterson Law Firm L.L.P…….……..…….....$80.00
729 Insurance Exchange Building
505 Fifth Avenue
Des Moines, IA 50309-2390
Cyril Irvine v. Anamosa State Penitentiary; State of Iowa and Second Injury Fund of Iowa

J. Patterson Law Firm L.L.P…….…….…….....$528.00
729 Insurance Exchange Building
505 Fifth Avenue
Des Moines, IA 50309-2390
Leland Mitchell v. Iowa Department of Transportation and State of Iowa and Second Injury Fund of Iowa

K. Patterson Law Firm L.L.P…….…….…….....$160.00
729 Insurance Exchange Building
505 Fifth Avenue
Des Moines, IA 50309-2390
Larry Opal v. Clarinda Correctional Facility, State of Iowa and Second Injury Fund of Iowa

L. Patterson Law Firm L.L.P…….…….…….....$16.00
729 Insurance Exchange Building
505 Fifth Avenue
Des Moines, IA 50309-2390
Debra Oelrich v. University of Iowa Hospitals & Clinics, State of Iowa and Second Injury Fund of Iowa

M. Patterson Law Firm L.L.P…….…….…….....$192.00
729 Insurance Exchange Building
505 Fifth Avenue
Des Moines, IA 50309-2390
Mark Ostring v. Woodward Resource Center, State of Iowa and Second Injury Fund of Iowa

N. Patterson Law Firm L.L.P…….…….…….....$240.00
729 Insurance Exchange Building
505 Fifth Avenue
Des Moines, IA 50309-2390
Bryson Powell v. Glenwood Resource Center, State of Iowa and Second Injury Fund of Iowa

O. Patterson Law Firm L.L.P…….…….…….....$700.00
729 Insurance Exchange Building
505 Fifth Avenue
Des Moines, IA 50309-2390
Geoffrey Ray Wellman v. Iowa State Penitentiary, State of Iowa and Second Injury Fund of Iowa

P. Wandro & Associates, P.C. …….……$2,525.00
2501 Grand Avenue, Suite B
Des Moines, IA 50312
Unclaimed Property Probate Matters

The vote: Ayes: Governor Reynolds
Secretary Pate
Auditor Sand
Treasurer Fitzgerald
Secretary Naig
Nays: None

7. Information Items

A. The City of Nashua made their second Contingency Loan payment of $163,204.00. This loan was approved for $754,933.00 on March 8, 2021, and is prorated not to exceed twenty years. Total repayment to date: $706,394.00.

B. Fremont County made their second Contingency Loan payment of $8,000.00. This loan was approved for $131,250.00 on October 19, 2020, and is prorated not to exceed twenty years. Total repayment to date: $14,562.50.

C. On Monday, February 15, 2021, the Executive Council approved an emergency allocation for the Department of Public Safety in the amount of $10,953.40. On August 10, 2020, State Patrol Vehicle #383 was damaged when a building collapsed on the vehicle while at the repair shop. Request was to cover repair costs.

   The Department of Public Safety was reimbursed for these damages by the repair shop's insurance company; therefore, the allocation should be reverted to the State Treasury and the allocation closed.

8. Adjourn Meeting

Moved by Auditor Sand and seconded by Secretary Pate that the meeting adjourn.

Respectfully submitted,



Victoria Newton
Executive Secretary

MEMBERS OF COUNCIL

HON. KIM REYNOLDS
GOVERNOR

HON. PAUL D. PATE
SECRETARY OF STATE

HON. ROB SAND
AUDITOR OF STATE

HON. MICHAEL L. FITZGERALD
TREASURER OF STATE

HON. MICHAEL L. NAIG
SECRETARY OF AGRICULTURE

Executive Council of Iowa

CAPITOL BUILDING
DES MOINES, IOWA 50319
PHONE: 515 281-5368
FAX: 515 281-7562

June 6, 2022

Mr. Jeffrey S. Thompson, Solicitor General
Iowa Attorney General
Hoover Bldg., 2nd Floor
L O C A L

Re: Approval of Iowa Code § 7D.10 Expenses

Dear Mr. Thompson

The Executive Council, in a meeting held this date, approved your request for payment pursuant to Iowa Code § 7D.10 for payment of expenses incurred in prosecuting civil commitments under Iowa Code chapter 229A for the Sexually Violent Predator (SVP) program, in the amount of $15,230.03.

EXECUTIVE COUNCIL OF IOWA

Victoria Newton

Victoria Newton
Executive Secretary

cc: Kyle Harms, State Treasurer's Office

THOMAS J. MILLER
ATTORNEY GENERAL

JEFFREY S. THOMPSON
SOLICITOR GENERAL



IOWA DEPARTMENT OF JUSTICE
OFFICE OF THE ATTORNEY GENERAL

1305 E. WALNUT ST.
DES MOINES, IA 50319
Main: 515-281-5164 • Direct: 515-281-4419
Email: Jeffrey.Thompson@iowa.gov
www.iowaattorneygeneral.gov

May 17, 2022

Ms. Victoria Newton
Executive Secretary
Executive Council
State Capitol
L-O-C-A-L

Re: Request for Payment of SVP Court Costs

Dear Victoria:

Our Office requests Executive Council approval for payment pursuant to Iowa Code section 7D.10 for court costs and expenses incurred in prosecuting civil commitments under Iowa Code chapter 229A for the Sexually Violent Predator (SVP) program.

In addition to the cost of employee salaries, travel and support devoted to this program, the Office incurs substantial expenses for expert witnesses. These expenses have increased substantially due to the growing number of chapter 229A commitments. Section 7D.10 authorizes payment of court costs and expenses by the Executive Council "[i]f sufficient funds for court costs have not been appropriated to a state department, or if sufficient funds are not otherwise available for such purposes within the budget of a state department." There is no specific appropriation for these expenses and sufficient funds are not otherwise available.

Therefore, pursuant to Iowa Code section 7D.10, the Office requests Executive Council approval of payment of $15,230.03 for record review/report preparation (invoices enclosed).

Sincerely,

Jeffrey Thompson per

JEFFREY S. THOMPSON
Solicitor General

SVP Invoices - SFY 2022 (04/22/22)

Date Received	Vendor	Description	Amount	Paid by Executive Council	Approval Date
4/22/22	Thomas Forensic, LLC	Initial Eval/Preliminary Report - Jesse Taggert	$3,200.00		
4/21/22	Thomas Forensic, LLC	Interview/Final Eval, Trial Testimony and mileage	$6,430.03		
4/16/22	William A Schmitt, PhD., LLC	Initial Eval/Preliminary Report - Adam Sunkle	$3,200.00		
4/18/22	Rachel Kahn	Final Eval - Larry Nicklus Dean Howard	$2,400.00		
			$15,230.03	**$0.00**	

THOMAS FORENSIC, LLC
Tracy A. Thomas, Ph.D., ABPP
Board Certified Forensic Psychologist
Licensed Psychologist (Iowa, Nebraska, Missouri)
Phone (712) 730-8274
Fax (712) 248-8655
Email: TracyThomas@ThomasForensic.com
Web: IowaForensicPsychologist.com

INVOICE

INVOICE #60IA2022
DATE: 4/22/2022

TO:
Iowa Office of the Attorney General
c/o Olivia McAtee
Area Prosecutions Division
Hoover Building
1305 E. Walnut Street
Des Moines, IA 50319

FOR:
Forensic Consultation/Evaluative Services:
Iowa Code 229A Evaluations

CASE	DESCRIPTION OF SERVICE	SERVICE DATES	AMOUNT
Jesse Taggert	Initial Evaluation/Preliminary Report	Engagement Letter: 3/21/2022 Preliminary Report Date: 4/19/2022	$3,200
		TOTAL	$3,200

Make all checks payable to:
Thomas Forensic, LLC
c/o Tracy Thomas
3827 Brickman Avenue
Ames, IA 50010

Claimant EIN: 47-1228282

T. Thomas, Ph.D., ABPP

Tracy A. Thomas, Ph.D., ABPP
Board Certified Forensic Psychologist
Licensed Psychologist (IA, NE, MO)

Approved Jina Palmer
Date 4/22/22 Amt 3,200.00
Agency SVP Expense - Taggert
Class_____ Obj_____ Org_____
0000 30744657

Palmer, Tina

From: McAtee, Olivia
Sent: Friday, April 22, 2022 1:03 PM
To: Palmer, Tina; Brown, ScottAG [AG]
Subject: FW: Jesse Taggert Invoice

Hi Tina, please see the below approval. Thank you!

From: Brown, ScottAG [AG] <Scott.Brown@ag.iowa.gov>
Sent: Friday, April 22, 2022 12:49 PM
To: McAtee, Olivia <Olivia.Mcatee@ag.iowa.gov>
Subject: RE: Jesse Taggert Invoice

Approved

Scott

Sent from my Verizon, Samsung Galaxy smartphone

-------- Original message --------
From: "McAtee, Olivia" <Olivia.Mcatee@ag.iowa.gov>
Date: 4/22/22 10:30 AM (GMT-06:00)
To: "Palmer, Tina" <Tina.Palmer@ag.iowa.gov>, "Brown, ScottAG [AG]" <Scott.Brown@ag.iowa.gov>
Subject: FW: Jesse Taggert Invoice

Please see the attached invoice. Thank you!

From: Jamie Tatarek <jamie@thomasforensic.com>
Sent: Friday, April 22, 2022 8:26 AM
To: McAtee, Olivia <Olivia.Mcatee@ag.iowa.gov>
Subject: Jesse Taggert Invoice

Good morning Olivia,

Attached is the invoice for Jesse Taggert's Preliminary Report.

Thank you,

Jamie Tatarek, MA (Forensic Psychology)
Psychology Assistant
Thomas Forensic, LLC

THOMAS FORENSIC, LLC
Tracy A. Thomas, Ph.D., ABPP
Board Certified Forensic Psychologist
Licensed Psychologist (Iowa, Nebraska, Missouri)
Phone (712) 730-8274
Fax (712) 248-8655
Email: TracyThomas@ThomasForensic.com
Web: IowaForensicPsychologist.com

INVOICE

INVOICE #58IA2022
DATE: 4/21/2022

TO:
Iowa Office of the Attorney General
c/o Olivia McAtee
Area Prosecutions Division
Hoover Building
1305 E. Walnut Street
Des Moines, IA 50319

FOR:
Forensic Consultation/Evaluative Services:
Iowa Code 229A Evaluations

CASE	DESCRIPTION OF SERVICE	SERVICE DATES	AMOUNT
Bobby Lewis	Interview/Final Evaluation	Interview Date: 4/15/2022 Final Evaluation Date: 4/19/2022	$4,000
Bobby Lewis	Trial Testimony	4/21/2022	$2,400
Bobby Lewis	Mileage: Ames to Polk County Courthouse – roundtrip (77 miles x .39)	4/21/2022	$30.03
		TOTAL	$6,430.03

Make all checks payable to:
Thomas Forensic, LLC
c/o Tracy Thomas
517 Grand Avenue
Suite 102
Ames, IA 50010

Claimant EIN: 47-1228282

T. Thomas, Ph.D., ABPP

Tracy A. Thomas, Ph.D., ABPP
Board Certified Forensic Psychologist
Licensed Psychologist (IA, NE, MO)

Approved Jena Palmer
Date 4/22-22 Amt 6430.03
Agency SVP Expense - Lewis
Class_____ Obj_____ Org_____
0000307465'7

Palmer, Tina

From: Brown, ScottAG [AG]
Sent: Thursday, April 21, 2022 3:56 PM
To: McAtee, Olivia; Palmer, Tina
Subject: RE: Bobby Lewis invoice

Approved.

SCOTT

Please note new email address: scott.brown@ag.iowa.gov

Scott D. Brown
Special Assistant Attorney General/Area Prosecutions Division
Office of the Attorney General of Iowa
1305 E. Walnut St.
Des Moines, IA 50319
Main: (515) 281-5164 | Division: (515) 281-3648 | Direct: (515) 281-6691 | Fax: (515) 281-8894
Email: scott.brown@ag.iowa.gov | www.iowaattorneygeneral.gov

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From: McAtee, Olivia <Olivia.Mcatee@ag.iowa.gov>
Sent: Thursday, April 21, 2022 9:52 AM
To: Palmer, Tina <Tina.Palmer@ag.iowa.gov>; Brown, ScottAG [AG] <Scott.Brown@ag.iowa.gov>
Subject: FW: Bobby Lewis invoice

Please see the attached invoice. The trial did end up happening in person so mileage is included on there.

Thank you!

From: Jamie Tatarek <jamie@thomasforensic.com>
Sent: Thursday, April 21, 2022 8:56 AM
To: McAtee, Olivia <Olivia.Mcatee@ag.iowa.gov>
Subject: Bobby Lewis invoice

Good morning Olivia,

Attached is Dr. Thomas's invoice for her services in the Bobby Lewis matter, in which she is testifying today. Please let me know if you have any questions or need any additional information.

William A. Schmitt, Ph.D., LLC
Licensed Psychologist

PO Box 930376
Verona, WI 53593
(608) 698-2713
wschmitt55@gmail.com

INVOICE
Preliminary Evaluation for Iowa §229A

Re: **Adam Sunkle**
DOB: May 19, 1974

Evaluator: William A. Schmitt, PhD
Date: April 15, 2022

- Initial Evaluation/Preliminary Report was completed and submitted April 15, 2022.

Contracted fee for services rendered: $3200.

Thank you for this interesting referral.

William A. Schmitt, Ph.D.
Licensed Psychologist

Approved Tina Palmer
Date 4/22/22 Amt 3200.00
Agency SVP Expense - Sunkle
Class_____ Obj_____ Org_____

0000310313

Palmer, Tina

From: Brown, ScottAG [AG]
Sent: Saturday, April 16, 2022 12:52 PM
To: McAtee, Olivia; Palmer, Tina
Subject: RE: Invoice

Approved

Scott

Sent from my Verizon, Samsung Galaxy smartphone

-------- Original message --------
From: "McAtee, Olivia" <Olivia.Mcatee@ag.iowa.gov>
Date: 4/16/22 9:29 AM (GMT-06:00)
To: "Palmer, Tina" <Tina.Palmer@ag.iowa.gov>, "Brown, ScottAG [AG]" <Scott.Brown@ag.iowa.gov>
Subject: Invoice

Please see the attached invoice. Thank you! Happy Easter!

Olivia McAtee
Investigator II
Office of the Attorney General of Iowa
1305 E. Walnut St.
Des Moines, Iowa 50319
Main: (515) 281-5164 | Division: (515) 281-3648 | Direct: (515) 281-6566
Email: olivia.mcatee@ag.iowa.gov | www.iowaattorneygeneral.gov

Rachel Kahn. Ph.D.

P.O. Box 6491
Monona, WI 53716-0491
USA
Phone: 608-620-3067

INVOICE

DATE: APRIL 14, 2022

To:
Iowa Office of the Attorney General
c/o Olivia McAtee
Area Prosecutions Division
Hoover Building
1305 E. Walnut Street
Des Moines, IA 50319

Description	Amount
Final Evaluation Report on Larry Nicklus Dean Howard Engagement Letter: 10/29/2021 Trial Date: 4/13/2022	$2400
Total	**$2,400**

Payment should made out to Rachel Kahn and mailed to Rachel Kahn, P.O. Box 6491, Monona, WI 53716-0491

Rachel Kahn, Ph.D.
Licensed Psychologist

Approved Jena Palmer
Date 4/22/22 Amt 2,400.00
Agency SVP Expense - Howard
Class_____ Obj_____ Org_____

0003192796

Palmer, Tina

From: Brown, ScottAG [AG]
Sent: Monday, April 18, 2022 7:41 PM
To: McAtee, Olivia; Palmer, Tina
Subject: RE: invoice LH

Approved

Scott

Sent from my Verizon, Samsung Galaxy smartphone

-------- Original message --------
From: "McAtee, Olivia" <Olivia.Mcatee@ag.iowa.gov>
Date: 4/18/22 7:30 PM (GMT-06:00)
To: "Palmer, Tina" <Tina.Palmer@ag.iowa.gov>, "Brown, ScottAG [AG]" <Scott.Brown@ag.iowa.gov>
Subject: FW: invoice LH

Please see the attached invoice. Thank you!

From: Rachel Kahn <rachel.kahn@gmail.com>
Sent: Thursday, April 14, 2022 2:36 PM
To: McAtee, Olivia <Olivia.Mcatee@ag.iowa.gov>
Subject: invoice LH

Hi Olivia,

Here is my final invoice for Mr. Howard. The second part of cross seemed a bit harder - but I suppose I will know what to expect next time. Let me know if you have any thoughts/suggestions based on my testimony. Don't mind hearing critical/constructive feedback.

Take care!

Rache

--
Rachel Kahn, Ph.D.
Licensed Psychologist
217-621-5944

**NOTICE: This E-mail and any attachments may contain confidential information. Use and further disclosure of the information by the recipient must be consistent with applicable laws, regulations, and

THOMAS J. MILLER
ATTORNEY GENERAL

JEFFREY S. THOMPSON
SOLICITOR GENERAL



IOWA DEPARTMENT OF JUSTICE
OFFICE OF THE ATTORNEY GENERAL

1305 E. WALNUT ST.
DES MOINES, IA 50319
Main: 515-281-5164 • Direct: 515-281-4419
Email: Jeffrey.Thompson@iowa.gov
www.iowaattorneygeneral.gov

January 27, 2022

Victoria Newton
Executive Secretary
Executive Council
State Capitol
L O C A L

Re: Retention of Special Counsel

Dear Victoria:

Our office requests authorization pursuant to Iowa Code section 13.7 to retain Special Counsel to provide specialized legal services and representation to the State of Iowa with respect to claims against Centene Corporation and its wholly owned subsidiaries ("Centene") related to pharmacy benefit services provided to Iowa's Medicaid Health Plans. We also recommend pursuant to Iowa Code section 23B that the law firm be retained as on a contingent-fee basis.

The Attorney General has determined that the State of Iowa may have claims, and the constitutional and statutory mandate to pursue such claims, for damages, declaratory relief, injunctive relief and other rights and remedies against Centene for its failure to adhere to the terms of their contractual obligations to provide pharmacy benefit services to Iowa's Medicaid Health Plans. Specifically, the claims would assert that Centene used its corporate structure to misrepresent costs and pricing in a manner that permitted it to receive payments to which it was not entitled under the terms of its contracts. This office believes that these claims may have significant value and that it is in the State's interest to assert these claims.

The Attorney General has identified the law firm Cohen Milstein, Three Logan Square, 1717 Arch Street, Suite 3610, Philadelphia, PA 19103 (Cohen Milstein"), as a firm with specialized knowledge and experience as well as the resources necessary to successfully prosecute these claims. Cohen Milstein previously represented the states of Ohio, Mississippi, Illinois, and Arkansas, in related litigation and has offered to represent Iowa on a contingent fee basis. The proposed contingent fee structure would comply with the provisions of Iowa Code Chapter 23B. In addition, Cohen Milstein will advance the costs of the litigation.

This office has determined that this proposed contingent representation is both cost effective and in the public interest. This office lacks sufficient resources – both in staffing and in funding – to dedicate to this type of representation; the matter is complex and would require a significant commitment of time and labor; the matter would require legal work to be performed outside of the State of Iowa; and Cohen Milstein has significant specialized experience in this

area of the law and with this specific legal dispute. We have also determined that a procurement process is not feasible under these unique circumstances.

We therefore recommend approval of the law firm of Cohen Milstein, as Special Counsel. The engagement will be governed by a separate contingent fee agreement between this office and Cohen Milstein which shall comply with the requirements of Iowa Code section 23B.3.

Sincerely,

JEFFREY S. THOMPSON
Solicitor General

MEMBERS OF COUNCIL

HON. KIM REYNOLDS
GOVERNOR

HON. PAUL D. PATE
SECRETARY OF STATE

HON. ROB SAND
AUDITOR OF STATE

HON. MICHAEL L. FITZGERALD
TREASURER OF STATE

HON. MICHAEL L. NAIG
SECRETARY OF AGRICULTURE

Executive Council of Iowa

CAPITOL BUILDING
DES MOINES, IOWA 50319
PHONE: 515 281-5368
FAX: 515 281-7562

June 6, 2022

Mr. Jeffrey S. Thompson
Solicitor General
Attorney General's Office
Hoover Bldg.
LOCAL

Dear Mr. Thompson:

The Executive Council, in a meeting held this date, approved your request to retain special counsel pursuant to Iowa Code section 13.7 to provide specialized legal services and representation to the State of Iowa with respect to claims against Centene Corporation and its wholly owned subsidiaries related to pharmacy benefit services provided to Iowa's Medicaid Health Plans.

Firm: Cohen Milstein
Three Logan Square
1717 Arch Street, Suite 3610
Philadelphia, PA 19103
Rate: Contingent fee agreement

If you have any questions on the matter, please advise.

Sincerely,

Victoria Newton

Victoria Newton
Executive Secretary

OFFICE OF AUDITOR OF STATE
STATE OF IOWA

Rob Sand
Auditor of State

State Capitol Building
Des Moines, Iowa 50319-0004

Telephone (515) 281-5834 Facsimile (515) 281-6518

May 24, 2022

Victoria Newton
Executive Council
L O C A L

Subject: Exposed Cable at Culvert along Highway 169 in Union County between 230th Street and Oriole Avenue due to Excessive Erosion on April 13, 2022
Iowa Communications Network (ICN)
Claim Dated April 28, 2022
AOS Claim ID: 2295

In accordance with Executive Council policy, we have examined the claim for 29C.20 funds for the above-mentioned damage. It is our conclusion that the above-mentioned damage incurred by the Iowa Communications Network (ICN) is covered by Chapter 29C.20 of the Code of Iowa. The amount requested may include costs that will be covered by a monthly maintenance contract for technician services that are not additional expenses to ICN. The actual claim for reimbursement should only be for expenses that exceed the technician hours per the maintenance agreement.

Therefore, we recommend an Executive Council allocation for the requested amount of $18,357.52, subject to audit of actual invoices and supporting documentation and demonstration that no costs covered by the maintenance contract have been included.

Sincerely,

Ernest H. Ruben, Jr., CPA
Deputy Auditor of State

cc: Randy Goddard, Executive Director, ICN
Kammy McHone, Finance Division, ICN
Dave Augspurger, Operations Division, ICN
Linda Leto, Department of Management

MEMBERS OF COUNCIL

HON. KIM REYNOLDS
GOVERNOR

HON. PAUL D. PATE
SECRETARY OF STATE

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AUDITOR OF STATE

HON. MICHAEL L. FITZGERALD
TREASURER OF STATE

HON. MICHAEL L. NAIG
SECRETARY OF AGRICULTURE

Executive Council of Iowa

CAPITOL BUILDING
DES MOINES, IOWA 50319
PHONE: 515 281-5368

June 6, 2022

Mr. Kyle Harms
Office of the Treasurer
LOCAL

Dear Mr. Harms:

The Executive Council, in a meeting held on this date, approved Iowa Communications Network's request for an emergency allocation in the amount of $18,357.52, subject to the audit of invoices. On April 13, 2022, an exposed cable caused excessive erosion along Highway 169 in Union County between 230th Street and Oriole Avenue. Request was to cover repair costs.

EXECUTIVE COUNCIL OF IOWA

Victoria Newton

Victoria Newton
Executive Secretary

cc: Randy Goddard, Executive Director, ICN
Kammy McHone, Finance Division, ICN
Dave Augspurger, Operations Division, ICN
Linda Leto, Department of Management

AOS Claim # 2295
TOS Job # ____

ICN Iowa Communications Network

Governor Kim Reynolds Lt. Governor Adam Gregg

April 28, 2022

Ms. Victoria Newton
Executive Secretary
Executive Council of Iowa
State Capitol
LOCAL

Re: Emergency Allocations of Funds

Dear Ms. Newton,

On or about April 13, 2022 the Iowa Communications Network (ICN) received physical damage to ICN Communications equipment in Des Moines, Iowa. An email was sent to the Office of the Auditor of State and the Executive Council. This letter represents a claim for $18,357.52 in accordance with Chapter 29C.20 of the Code of Iowa for an emergency allocation of funds to repair damages sustained. Paid invoices will be included upon completion of repairs.

It was determined ICN equipment was exposed due to continued and excessive erosion in a culvert along Highway 169, between 230th Street and Oriole Avenue, in Union County, IA. This will require relocation of the fiber. Enclosed are the damage assessment and cost estimate to restore that damaged equipment to normal operating condition.

If you have any questions regarding this claim, please call my office at 515-725-4666 located in the Grimes State Office Building.

Sincerely,

Randy Goddard
Executive Director

Enclosures
cc: Office of Auditor of State (Tammy Hollingsworth)
ICN Operations Division (Dave Augspurger)
ICN Finance Division (Kammy McHone)

April 25, 2022

Estimate for ICN Fiber Cable Damage: Outside Plant Log #88220607

This estimate is for the relocation of an exposed ICN fiber cable along Highway 169 between 230th & Oriole Ave in Union County. The exposed ICN cable is the result of natural causes and will require relocation back into the ground. The ICN notified the Executive Council of ICN's intent to submit this as a claim for reimbursement on April 20, 2022. Relocation will require approximately 650-ft of new conduit and cable be placed and two maintenance splices introduced.

Estimated costs for this project are listed below:

Construction Labor & material		$15,814.58
Splicing labor		$2,260.00
ICN-provided material		$282.94
Fiber Network Service Hours		$0.00
	Total:	$18,357.52

Please feel free to contact me if you have any questions.

David Augspurger
ICN Outside Plant Lead
515-725-4604
david.augspurger@iowa.gov

ESTIMATE

PROJECT	Cable washout along HWY 169 south of Oriole Ave		COUNTY	Union
OSP LOG #	88220607		INC/PRB	INC0047807
LINK ID(S)	1405		FIBER CT	8F

Contracted Labor and Materials		
Construction Labor		$13,217.50
Construction Materials		$2,597.08
Splicing Labor		$2,260.00
ICN Provided Materials		$282.94
Miscellaneous		$0.00
Engineering Design		$0.00
	TOTAL:	**$18,357.52**

VENDOR CONSTRUCTION

CATEGORY	ITEM	UNIT	RATE	QTY	SUBTOTAL
Horizontal Boring	Rural 1 ea 2" conduit	LF	$9.00	650	$5,850.00
Handhole Placement	Rural Std 24x36x30	EA	$500.00	2	$1,000.00
Fiber Installation	New Duct Rural	LF	$1.25	850	$1,062.50
Expose/Lower Cable	Rural Expose Existing Live Cable	LF	$20.00	100	$2,000.00
Misc	Place Warning Marker-Rural	EA	$25.00	2	$50.00
Misc	Mobilization	LS	$500.00	1	$500.00
Misc	Mobilization mileage adder	MILES	$2.50	202	$505.00
Misc	Material Pick Up	EA	$250.00	1	$250.00
Misc	Bore Logging	LF	$0.00	1	$0.00
Misc	As-Building	EA	$0.00	1	$0.00
Misc	Backhoe/Mini Excavator	HR	$250.00	8	$2,000.00
			VENDOR CONSTRUCTION SUBTOTAL:		*$13,217.50*

SPLICING LABOR

CATEGORY	ITEM	UNIT	UNIT RATE	QTY	SUBTOTAL
Splicing labor	Splicing Mobilization	LS	$500.00	1	$500.00
Splicing labor	Prep Splice Closure	EA	$150.00	2	$300.00
Splicing labor	Fusion Splicing	Splicing 1-	$60.00	8	$480.00
Splicing labor	Fusion Splicing	Splicing 1-	$60.00	8	$480.00
Splicing labor	Off Hours Charge	LS	$500.00	1	$500.00
			SPLICING LABOR SUBTOTAL:		*$2,260.00*

ICN PROVIDED MATERIALS

CATEGORY	ITEM	UNIT	QTY	UNIT RATE	SUBTOTAL	PART #
Splice Closure	*450A Splice Closure (w/lugs)	EA	2	$126.88	$253.76	FOSC450-A4-4-NT-0-A1V
Splice Tray	*A Tray 12-pos	EA	2	$12.01	$24.02	497817-000
Shield Bond Connector	*Shield Bond Connector	EA	4	$1.29	$5.16	4460-D
			ICN PROVIDED MATERIALS SUBTOTAL:		*$282.94*	

VENDOR PROVIDED MATERIALS

CATEGORY	ITEM	UNIT	QTY	UNIT RATE	SUBTOTAL	
Duct	2" Orange HDPE Duct	LFT	650	$1.17	$760.50	13.5
Handholes	24x36x30 Tier 15 HH w/lid	EA	2	$723.29	$1,446.58	0
Fiber Cable	12F Armored SM Cable	LFT	1000	$0.39	$390.00	0
			VENDOR PROVIDED MATERIALS SUBTOTAL:		*$2,597.08*	

ENGINEERING DESIGN

CATEGORY	ITEM	UNIT	QTY	UNIT RATE	SUBTOTAL
		ENGINEERING DESIGN SUBTOTAL:			*$0.00*

MISCELLANEOUS

CATEGORY	ITEM	UNIT	QTY	UNIT RATE	SUBTOTAL	NOTES
		MISCELLANEOUS SUBTOTAL:			*$0.00*	

McHone, Kammy <kammy.mchone@iowa.gov>

ESTIMATE: ICN - Exposed Fiber - Union County - along HWY 169 between 230th St and Oriole Ave (88220607)

1 message

Augspurger, Dave <daugspurger@icn.state.ia.us> Mon, Apr 25, 2022 at 9:47 AM
To: Kammy Mchone <kammy.mchone@iowa.gov>
Cc: "Harris, Chris [ICN]" <chris.harris@iowa.gov>

Kammy,

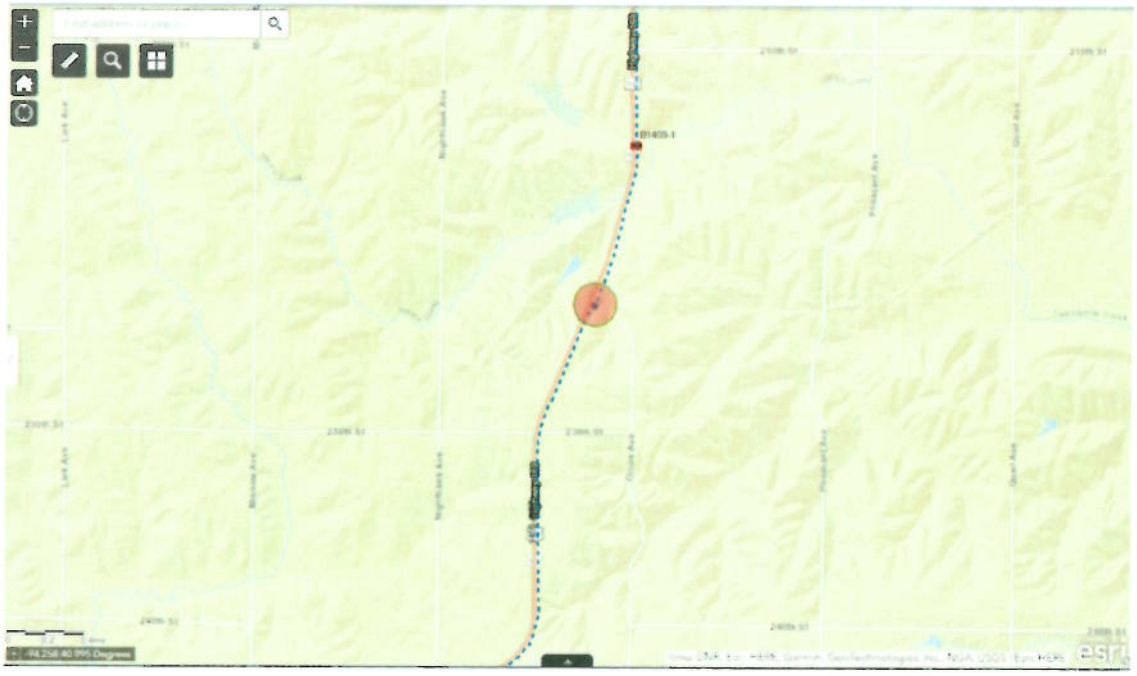
Estimate for Executive Council attached, let me know of any questions.

Thanks.

Dave Augspurger
Iowa Communications Network
Sr. Telecommunications Engineer | Outside Plant Lead
515-725-4604 (office) | 515-229-2013 (cell)

On Wed, Apr 13, 2022 at 8:56 AM Augspurger, Dave <daugspurger@icn.state.ia.us> wrote:

> Good morning,
>
> An ICN field technician discovered exposed ICN cable at a culvert along Highway 169 in Union County between 230th St and Oriole Ave yesterday afternoon. Exposure is the result of continued and excessive erosion of the culvert and will require relocation via directional bore under the flow line and placement of maintenance splices. The ICN would like to submit this as a claim for reimbursement for damages due to natural causes (erosion). Please let me know of any questions.
>
> Respectfully,
>
> Dave Augspurger
> Iowa Communications Network
> Sr. Telecommunications Engineer | Outside Plant Lead
> 515-725-4604 (office) | 515-229-2013 (cell)



2 attachments

88220607 - Union Co - Estimate.pdf
122K

88220607 Union Co Estimate.docx
409K

OFFICE OF AUDITOR OF STATE
STATE OF IOWA

Rob Sand
Auditor of State

State Capitol Building
Des Moines, Iowa 50319-0004

Telephone (515) 281-5834 Facsimile (515) 281-6518

May 24, 2022

Victoria Newton
Executive Council
L O C A L

Subject: Exposed Cable at Culvert along Highway 148 in Taylor County between 210th Street and 200th Street due to Excessive Erosion on April 20, 2022
Iowa Communications Network (ICN)
Claim Dated April 28, 2022
AOS Claim ID: 2298

In accordance with Executive Council policy, we have examined the claim for 29C.20 funds for the above-mentioned damage. It is our conclusion that the above-mentioned damage incurred by the Iowa Communications Network (ICN) is covered by Chapter 29C.20 of the Code of Iowa. The amount requested may include costs that will be covered by a monthly maintenance contract for technician services that are not additional expenses to ICN. The actual claim for reimbursement should only be for expenses that exceed the technician hours per the maintenance agreement.

Therefore, we recommend an Executive Council allocation for the requested amount of $18,289.36, subject to audit of actual invoices and supporting documentation and demonstration that no costs covered by the maintenance contract have been included.

Sincerely,

Ernest H. Ruben, Jr., CPA
Deputy Auditor of State

cc: Randy Goddard, Executive Director, ICN
Kammy McHone, Finance Division, ICN
Dave Augspurger, Operations Division, ICN
Linda Leto, Department of Management

MEMBERS OF COUNCIL

HON. KIM REYNOLDS
GOVERNOR

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HON. ROB SAND
AUDITOR OF STATE

HON. MICHAEL L. FITZGERALD
TREASURER OF STATE

HON. MICHAEL L. NAIG
SECRETARY OF AGRICULTURE

Executive Council of Iowa

CAPITOL BUILDING
DES MOINES, IOWA 50319
PHONE: 515 281-5368

June 6, 2022

Mr. Kyle Harms
Office of the Treasurer
LOCAL

Dear Mr. Harms:

The Executive Council, in a meeting held on this date, approved Iowa Communications Network's request for an emergency allocation in the amount of $18,289.36, subject to the audit of invoices. On April 20, 2022, an exposed cable caused excessive erosion at the culvert along Highway 148 in Taylor County between 210th Street and 200th Street. Request was to cover repair costs.

EXECUTIVE COUNCIL OF IOWA

Victoria Newton

Victoria Newton
Executive Secretary

cc: Randy Goddard, Executive Director, ICN
Kammy McHone, Finance Division, ICN
Dave Augspurger, Operations Division, ICN
Linda Leto, Department of Management

AOS Claim # 2298
TOS Job # ____

ICN Iowa Communications Network

Governor Kim Reynolds Lt. Governor Adam Gregg

April 28, 2022

Ms. Victoria Newton
Executive Secretary
Executive Council of Iowa
State Capitol
LOCAL

Re: Emergency Allocations of Funds

Dear Ms. Newton,

On or about April 20, 2022 the Iowa Communications Network (ICN) received physical damage to ICN Communications equipment in Des Moines, Iowa. An email was sent to the Office of the Auditor of State and the Executive Council. This letter represents a claim for $18,289.36 in accordance with Chapter 29C.20 of the Code of Iowa for an emergency allocation of funds to repair damages sustained. Paid invoices will be included upon completion of repairs.

It was determined ICN equipment was exposed due to continued and excessive erosion in a culvert along Highway 148, between 210th Street and 200th Street, in Taylor County, IA. This will require relocation of the fiber. Enclosed are the damage assessment and cost estimate to restore that damaged equipment to normal operating condition.

If you have any questions regarding this claim, please call my office at 515-725-4666 located in the Grimes State Office Building.

Sincerely,

Randy Goddard
Executive Director

Enclosures
cc: Office of Auditor of State (Tammy Hollingsworth)
ICN Operations Division (Dave Augspurger)
ICN Finance Division (Kammy McHone)

ICN Iowa Communications Network

Governor Kim Reynolds Lt. Governor Adam Gregg

April 25, 2022

Estimate for ICN Fiber Cable Damage: Outside Plant Log #87220207

This estimate is for the relocation of an exposed ICN fiber cable along Highway 148 between 200th & 210th Streets in Taylor County. The exposed ICN cable is the result of natural causes and will require relocation back into the ground. The ICN notified the Executive Council of ICN's intent to submit this as a claim for reimbursement on April 20, 2022. Relocation will require approximately 750-ft of new conduit and cable be placed and two maintenance splices introduced.

Estimated costs for this project are listed below:

Construction Labor & material		$14,075.00
Splicing labor		$1,780.00
ICN-provided material		$2,434.36
Fiber Network Service Hours		$0.00
	Total:	$18,289.36

Please feel free to contact me if you have any questions.

David Augspurger
ICN Outside Plant Lead
515-725-4604
david.augspurger@iowa.gov

ESTIMATE

PROJECT	HWY 148 between 210th St & 200th St		COUNTY	Taylor
OSP LOG #	87220207		INC/PRB	INC0047989
LINK ID(S)	1409		FIBER CT	4F

Contracted Labor and Materials		
	Construction Labor	$13,400.00
	Construction Materials	$675.00
	Splicing Labor	$1,780.00
ICN Provided Materials		$2,434.36
Miscellaneous		$0.00
Engineering Design		$0.00
	TOTAL:	**$18,289.36**

VENDOR CONSTRUCTION

CATEGORY	ITEM	UNIT	RATE	QTY	SUBTOTAL
Horizontal Boring	Rural 1 ea 1.25" conduit	LF	$10.00	750	$7,500.00
Handhole Placement	Rural Std 24x36x30	EA	$450.00	2	$900.00
Fiber Installation	New Duct Rural	LF	$1.00	950	$950.00
Expose/Lower Cable	Rural Expose Existing Live Cable	LF	$5.00	100	$500.00
Misc	Place Warning Marker-Rural	EA	$75.00	2	$150.00
Misc	Mobilization	LS	$500.00	1	$500.00
Misc	Material Pick Up	EA	$500.00	1	$500.00
Misc	Backhoe/Mini Excavator	HR	$300.00	8	$2,400.00
			VENDOR CONSTRUCTION SUBTOTAL:		*$13,400.00*

SPLICING LABOR

CATEGORY	ITEM	UNIT	UNIT RATE	QTY	SUBTOTAL
Splicing labor	Splicing Mobilization	LS	$500.00	1	$500.00
Splicing labor	Prep Splice Closure	EA	$150.00	2	$300.00
Splicing labor	Fusion Splicing	Splicing 1-	$60.00	4	$240.00
Splicing labor	Fusion Splicing	Splicing 1-	$60.00	4	$240.00
Splicing labor	Off Hours Charge	LS	$500.00	1	$500.00
			SPLICING LABOR SUBTOTAL:		*$1,780.00*

ICN PROVIDED MATERIALS

CATEGORY	ITEM	UNIT	QTY	UNIT RATE	SUBTOTAL	PART #
Handholes	24x36x30 Tier 15 HH w/lid	EA	2	$699.00	$1,398.00	PCA243630SN20
Fiber Cable	48F Armored SM Cable	LFT	1200	$0.60	$720.00	SOP48LAA3BBKOFX
Locate Facilities	TriView Warning Marker 78in	EA	2	$16.71	$33.42	TVFL7800
Splice Closure	*450A Splice Closure (w/lugs)	EA	2	$126.88	$253.76	FOSC450-A4-4-NT-0-A1V
Splice Tray	*A Tray 12-pos	EA	2	$12.01	$24.02	497817-000
Shield Bond Connector	*Shield Bond Connector	EA	4	$1.29	$5.16	4460-D
			ICN PROVIDED MATERIALS SUBTOTAL:		*$2,434.36*	

VENDOR PROVIDED MATERIALS

CATEGORY	ITEM	UNIT	QTY	UNIT RATE	SUBTOTAL	
Duct	1.25" Orange HPDE Duct	LFT	750	$0.90	$675.00	13.5
			VENDOR PROVIDED MATERIALS SUBTOTAL:		*$675.00*	

ENGINEERING DESIGN

CATEGORY	ITEM	UNIT	QTY	UNIT RATE	SUBTOTAL
			ENGINEERING DESIGN SUBTOTAL:		*$0.00*

MISCELLANEOUS

CATEGORY	ITEM	UNIT	QTY	UNIT RATE	SUBTOTAL	NOTES
			MISCELLANEOUS SUBTOTAL:		*$0.00*	

McHone, Kammy <kammy.mchone@iowa.gov>

Exposed ICN cable - Taylor County - along HWY 148 between 210th St & 200th St (87220207)

Augspurger, Dave <daugspurger@icn.state.ia.us> Wed, Apr 20, 2022 at 7:49 AM
To: "Dana [AOS] Davis" <Dana.Davis@aos.iowa.gov>, Executive Council group email <ExecutiveCouncil@tos.iowa.gov>, "Harris, Victoria [ICN]" <victoria.harris@iowa.gov>, "Hollingsworth, Tammy [AOS]" <tammy.hollingsworth@aos.iowa.gov>, Kammy Mchone <kammy.mchone@iowa.gov>, Ryan Mulhall <ryan.mulhall@iowa.gov>, Scott Pappan <scott.pappan@iowa.gov>, "Harris, Chris [ICN]" <chris.harris@iowa.gov>

Good morning,

An ICN field technician discovered exposed ICN cable at a culvert along Highway 148 in Taylor County between 210th St and 200th St. Exposure is the result of continued and excessive erosion of the culvert and will require relocation via directional bore under the flow line and placement of maintenance splices. The ICN would like to submit this as a claim for reimbursement for damages due to natural causes (erosion). Please let me know of any questions.

Respectfully,

Dave Augspurger
Iowa Communications Network
Sr. Telecommunications Engineer | Outside Plant Lead
515-725-4604 (office) | 515-229-2013 (cell)



2 attachments



Photo+2.jpg
809K



Photo+1.jpg
790K

OFFICE OF AUDITOR OF STATE
STATE OF IOWA

Rob Sand
Auditor of State

State Capitol Building
Des Moines, Iowa 50319-0004

Telephone (515) 281-5834 Facsimile (515) 281-6518

May 24, 2022

Victoria Newton
Executive Council
L O C A L

Subject: Exposed Cable in Multiple Locations along Highway 34 in Monroe County due to Excessive Erosion on April 20, 2022
Iowa Communications Network (ICN)
Claim Dated May 3, 2022
AOS Claim ID: 2299

In accordance with Executive Council policy, we have examined the claim for 29C.20 funds for the above-mentioned damage. It is our conclusion that the above-mentioned damage incurred by the Iowa Communications Network (ICN) is covered by Chapter 29C.20 of the Code of Iowa. The amount requested may include costs that will be covered by a monthly maintenance contract for technician services that are not additional expenses to ICN. The actual claim for reimbursement should only be for expenses that exceed the technician hours per the maintenance agreement.

Therefore, we recommend an Executive Council allocation for the requested amount of $60,585.56, subject to audit of actual invoices and supporting documentation and demonstration that no costs covered by the maintenance contract have been included.

Sincerely,

Ernest H. Ruben, Jr., CPA
Deputy Auditor of State

cc: Randy Goddard, Executive Director, ICN
Kammy McHone, Finance Division, ICN
Dave Augspurger, Operations Division, ICN
Linda Leto, Department of Management

ICN Iowa Communications Network

Governor Kim Reynolds Lt. Governor Adam Gregg

May 3, 2022

Ms. Victoria Newton
Executive Secretary
Executive Council of Iowa
State Capitol
LOCAL

Re: Emergency Allocations of Funds

Dear Ms. Newton,

On or about April 20, 2022 the Iowa Communications Network (ICN) received physical damage to ICN Communications equipment in Des Moines, Iowa. An email was sent to the Office of the Auditor of State and the Executive Council. This letter represents a claim for $60,585.56 in accordance with Chapter 29C.20 of the Code of Iowa for an emergency allocation of funds to repair damages sustained. Paid invoices will be included upon completion of repairs.

It was determined ICN equipment was exposed due to continued and excessive erosion in multiple locations, within the right-of-way, along US Highway 34, in Monroe County, IA. Enclosed are the damage assessment and cost estimate to restore that damaged equipment to normal operating condition.

If you have any questions regarding this claim, please call my office at 515-725-4666 located in the Grimes State Office Building.

Sincerely,

Randy Goddard
Executive Director

Enclosures
cc: Office of Auditor of State (Tammy Hollingsworth)
ICN Operations Division (Dave Augspurger)
ICN Finance Division (Kammy McHone)

ICN Iowa Communications Network

Governor Kim Reynolds Lt. Governor Adam Gregg

May 2, 2022

Estimates for ICN Fiber Cable Damage: Outside Plant Log #:68220107, 68220207, 68220307, & 68220407

This estimate is for the relocation of exposed ICN cable at 4 locations in Monroe County along US Highway 34. The Executive Council was notified of the ICN's intent to submit these as claims for reimbursement on April 20, 2022.

68220107: US 34 & 684th Ave. Additional field review determined that, although the warning tape is exposed, there is sufficient cover over the cable to warrant leaving this unchanged. *ICN will not be submitting this as a claim for reimbursement.*

68220207: US 34 and 715th Ave. Cable exposed in ditch due to erosion. Relocation will require 1120-ft of new cable be placed via directional bore and two new maintenance splices introduced.

68220307: US 34 between S 13th St and 665th Ave. Cable exposed along ROW due to erosion. Relocation will require 760-ft of new cable be placed via directional bore and two new maintenance splices introduced.

68220407: US 34 east of 527th Ave. Cable exposed in ditch due to erosion. Relocation will require 600-ft of new cable be placed via directional bore and two new maintenance splices introduced.

No FNS Tech hours services have been included in this estimate nor will they be included in final invoice (incident occurred within the monthly contracted 1500 hours of technical labor).

Estimated costs for these projects are listed below:

	68220207	68220307	68220407
Contracted construction labor	$17,260.00	$13,090.00	$10,700.00
Contracted construction material	$3,992.02	$3,293.62	$2,906.22
Contracted splicing labor	$3,060.00	$3,060.00	$2,260.00
ICN provided materials	$340.38	$306.96	$316.36
Subtotals:	$24,652.40	$19,750.58	$16,182.58
		Grand Total:	$60,585.56

Please feel free to contact me if you have any questions.

Dave Augspurger
ICN Outside Plant Lead
david.augspurger@iowa.gov
515-725-4604

ESTIMATE

PROJECT	Exposed cable at HWY 34 and 715th Ave		COUNTY	Monroe
OSP LOG #	68220207		INC/PRB	INC0047964
LINK ID(S)	1514		FIBER CT	16F

Contracted Labor and Materials		
Construction Labor		$17,260.00
Construction Materials		$3,992.02
Splicing Labor		$3,060.00
ICN Provided Materials		$340.38
Miscellaneous		$0.00
Engineering Design		$0.00
	TOTAL:	**$24,652.40**

VENDOR CONSTRUCTION

CATEGORY	ITEM	UNIT	RATE	QTY	SUBTOTAL
Horizontal Boring	Rural 1 ea 2" conduit	LF	$9.00	1,120	$10,080.00
Handhole Placement	Rural Std 24x36x30	EA	$500.00	2	$1,000.00
Fiber Installation	New Duct Rural	LF	$1.25	1,320	$1,650.00
Expose/Lower Cable	Rural Expose Existing Live Cable	LF	$20.00	100	$2,000.00
Misc	Place Warning Marker-Rural	EA	$25.00	2	$50.00
Misc	Mobilization	LS	$500.00	1	$500.00
Misc	Mobilization mileage adder	MILES	$2.50	192	$480.00
Misc	Bore Logging	LF	$0.00	1,120	$0.00
Misc	As-Building	EA	$0.00	1	$0.00
Misc	Backhoe/Mini Excavator	HR	$250.00	6	$1,500.00
			VENDOR CONSTRUCTION SUBTOTAL:		*$17,260.00*

SPLICING LABOR

CATEGORY	ITEM	UNIT	UNIT RATE	QTY	SUBTOTAL
Splicing labor	Splicing Mobilization	LS	$500.00	1	$500.00
Splicing labor	Prep Splice Closure	EA	$150.00	2	$300.00
Splicing labor	Fusion Splicing	Splicing 13	$55.00	16	$880.00
Splicing labor	Fusion Splicing	Splicing 13	$55.00	16	$880.00
Splicing labor	Off Hours Charge	LS	$500.00	1	$500.00
			SPLICING LABOR SUBTOTAL:		*$3,060.00*

ICN PROVIDED MATERIALS

CATEGORY	ITEM	UNIT	QTY	UNIT RATE	SUBTOTAL	PART #
Locate Facilities	TriView Warning Marker 78in	EA	2	$16.71	$33.42	TVFL7800
Splice Closure	*450A Splice Closure (w/lugs)	EA	2	$126.88	$253.76	FOSC450-A4-4-NT-0-A1V
Splice Tray	*A Tray 12-pos	EA	4	$12.01	$48.04	497817-000
Shield Bond Connector	*Shield Bond Connector	EA	4	$1.29	$5.16	4460-D
			ICN PROVIDED MATERIALS SUBTOTAL:		*$340.38*	

VENDOR PROVIDED MATERIALS

CATEGORY	ITEM	UNIT	QTY	UNIT RATE	SUBTOTAL	
Duct	2" Orange HDPE Duct	LFT	1120	$1.24	$1,388.80	13.5
Fiber Cable	48F Armored SM Cable	LFT	1700	$0.63	$1,071.00	0
Handholes	24x36x30 Tier 15 HH w/lid	EA	2	$766.11	$1,532.22	0
			VENDOR PROVIDED MATERIALS SUBTOTAL:		*$3,992.02*	

ENGINEERING DESIGN

CATEGORY	ITEM	UNIT	QTY	UNIT RATE	SUBTOTAL
			ENGINEERING DESIGN SUBTOTAL:		*$0.00*

MISCELLANEOUS

CATEGORY	ITEM	UNIT	QTY	UNIT RATE	SUBTOTAL	NOTES
			MISCELLANEOUS SUBTOTAL:		*$0.00*	

ESTIMATE

PROJECT	osed cable along HWY 34 between S 13th St and 665th A	COUNTY	Monroe
OSP LOG #	68220307	INC/PRB	INC0047968
LINK ID(S)	1514	FIBER CT	16F

Contracted Labor and Materials		
Construction Labor	$13,090.00	
Construction Materials	$3,293.62	
Splicing Labor	$3,060.00	
ICN Provided Materials	$306.96	
Miscellaneous	$0.00	
Engineering Design	$0.00	
TOTAL:	**$19,750.58**	

VENDOR CONSTRUCTION

CATEGORY	ITEM	UNIT	RATE	QTY	SUBTOTAL
Horizontal Boring	Rural 1 ea 2" conduit	LF	$9.00	760	$6,840.00
Handhole Placement	Rural Std 24x36x30	EA	$500.00	2	$1,000.00
Fiber Installation	New Duct Rural	LF	$1.25	960	$1,200.00
Expose/Lower Cable	Rural Expose Existing Live Cable	LF	$20.00	100	$2,000.00
Misc	Place Warning Marker-Rural	EA	$25.00	2	$50.00
Misc	Mobilization	LS	$500.00	1	$500.00
Misc	Bore Logging	LF	$0.00	760	$0.00
Misc	As-Building	EA	$0.00	1	$0.00
Misc	Backhoe/Mini Excavator	HR	$250.00	6	$1,500.00
			VENDOR CONSTRUCTION SUBTOTAL:		*$13,090.00*

SPLICING LABOR

CATEGORY	ITEM	UNIT	UNIT RATE	QTY	SUBTOTAL
Splicing labor	Splicing Mobilization	LS	$500.00	1	$500.00
Splicing labor	Prep Splice Closure	EA	$150.00	2	$300.00
Splicing labor	Fusion Splicing	Splicing 13	$55.00	16	$880.00
Splicing labor	Fusion Splicing	Splicing 13	$55.00	16	$880.00
Splicing labor	Off Hours Charge	LS	$500.00	1	$500.00
			SPLICING LABOR SUBTOTAL:		*$3,060.00*

ICN PROVIDED MATERIALS

CATEGORY	ITEM	UNIT	QTY	UNIT RATE	SUBTOTAL	PART #
Splice Closure	*450A Splice Closure (w/lugs)	EA	2	$126.88	$253.76	FOSC450-A4-4-NT-0-A1V
Splice Tray	*A Tray 12-pos	EA	4	$12.01	$48.04	497817-000
Shield Bond Connector	*Shield Bond Connector	EA	4	$1.29	$5.16	4460-D
			ICN PROVIDED MATERIALS SUBTOTAL:		*$306.96*	

VENDOR PROVIDED MATERIALS

CATEGORY	ITEM	UNIT	QTY	UNIT RATE	SUBTOTAL	
Duct	2" Orange HDPE Duct	LFT	760	$1.24	$942.40	13.5
Handholes	24x36x30 Tier 15 HH w/lid	EA	2	$766.11	$1,532.22	0
Fiber Cable	48F Armored SM Cable	LFT	1300	$0.63	$819.00	0
			VENDOR PROVIDED MATERIALS SUBTOTAL:		*$3,293.62*	

ENGINEERING DESIGN

CATEGORY	ITEM	UNIT	QTY	UNIT RATE	SUBTOTAL
			ENGINEERING DESIGN SUBTOTAL:		*$0.00*

MISCELLANEOUS

CATEGORY	ITEM	UNIT	QTY	UNIT RATE	SUBTOTAL	NOTES
			MISCELLANEOUS SUBTOTAL:		*$0.00*	

ESTIMATE

PROJECT	Exposed cable along HWY 34 just east of 527th Ave		COUNTY	Monroe
OSP LOG #	68220407		INC/PRB	INC0047977
LINK ID(S)	1518		FIBER CT	8F

Contracted Labor and Materials		
Construction Labor		$10,700.00
Construction Materials		$2,906.22
Splicing Labor		$2,260.00
ICN Provided Materials		$316.36
Miscellaneous		$0.00
Engineering Design		$0.00
	TOTAL:	**$16,182.58**

VENDOR CONSTRUCTION

CATEGORY	ITEM	UNIT	RATE	QTY	SUBTOTAL
Horizontal Boring	Rural 1 ea 2" conduit	LF	$9.00	600	$5,400.00
Handhole Placement	Rural Std 24x36x30	EA	$500.00	2	$1,000.00
Fiber Installation	New Duct Rural	LF	$1.25	800	$1,000.00
Expose/Lower Cable	Rural Expose Existing Live Cable	LF	$20.00	100	$2,000.00
Misc	Place Warning Marker-Rural	EA	$25.00	2	$50.00
Misc	Mobilization	LS	$500.00	1	$500.00
Misc	Bore Logging	LF	$0.00	600	$0.00
Misc	As-Building	EA	$0.00	1	$0.00
Misc	Backhoe/Mini Excavator	HR	$250.00	3	$750.00
			VENDOR CONSTRUCTION SUBTOTAL:		*$10,700.00*

SPLICING LABOR

CATEGORY	ITEM	UNIT	UNIT RATE	QTY	SUBTOTAL
Splicing labor	Splicing Mobilization	LS	$500.00	1	$500.00
Splicing labor	Prep Splice Closure	EA	$150.00	2	$300.00
Splicing labor	Fusion Splicing	Splicing 1-	$60.00	8	$480.00
Splicing labor	Fusion Splicing	Splicing 1-	$60.00	8	$480.00
Splicing labor	Off Hours Charge	LS	$500.00	1	$500.00
			SPLICING LABOR SUBTOTAL:		*$2,260.00*

ICN PROVIDED MATERIALS

CATEGORY	ITEM	UNIT	QTY	UNIT RATE	SUBTOTAL	PART #
Locate Facilities	TriView Warning Marker 78in	EA	2	$16.71	$33.42	TVFL7800
Splice Closure	*450A Splice Closure (w/lugs)	EA	2	$126.88	$253.76	FOSC450-A4-4-NT-0-A1V
Splice Tray	*A Tray 12-pos	EA	2	$12.01	$24.02	497817-000
Shield Bond Connector	*Shield Bond Connector	EA	4	$1.29	$5.16	4460-D
			ICN PROVIDED MATERIALS SUBTOTAL:		*$316.36*	

VENDOR PROVIDED MATERIALS

CATEGORY	ITEM	UNIT	QTY	UNIT RATE	SUBTOTAL	
Duct	2" Orange HDPE Duct	LFT	600	$1.24	$744.00	13.5
Handholes	24x36x30 Tier 15 HH w/lid	EA	2	$766.11	$1,532.22	0
Fiber Cable	48F Armored SM Cable	LFT	1000	$0.63	$630.00	0
			VENDOR PROVIDED MATERIALS SUBTOTAL:		*$2,906.22*	

ENGINEERING DESIGN

CATEGORY	ITEM	UNIT	QTY	UNIT RATE	SUBTOTAL
			ENGINEERING DESIGN SUBTOTAL:		*$0.00*

MISCELLANEOUS

CATEGORY	ITEM	UNIT	QTY	UNIT RATE	SUBTOTAL	NOTES
			MISCELLANEOUS SUBTOTAL:		*$0.00*	

McHone, Kammy <kammy.mchone@iowa.gov>

Monroe County - Exposed ICN cable washouts - 4 locations on US 34 (68220107, 68220207, 68220307, 68220407)

1 message

Augspurger, Dave <daugspurger@icn.state.ia.us> Wed, Apr 20, 2022 at 7:08 AM
To: "Dana [AOS] Davis" <Dana.Davis@aos.iowa.gov>, Executive Council group email <ExecutiveCouncil@tos.iowa.gov>, "Harris, Victoria [ICN]" <victoria.harris@iowa.gov>, "Hollingsworth, Tammy [AOS]" <tammy.hollingsworth@aos.iowa.gov>, Kammy Mchone <kammy.mchone@iowa.gov>, Ryan Mulhall <ryan.mulhall@iowa.gov>, Scott Pappan <scott.pappan@iowa.gov>, "Harris, Chris [ICN]" <chris.harris@iowa.gov>

Good morning,

During route surveillance, a field technician identified 4 locations along US Highway 34 in Monroe County where the ICN cable has become exposed due to continued and excessive erosion within the right of way. The ICN would like to submit these as a claim for reimbursement for damages due to natural causes (erosion). Please let me know of any questions.

68220107 Monroe Co - US 34 east of 684th Ave
68220207 Monroe Co - US 34 east of 715th Ave
68220307 Monroe Co - US 34 between S 13th St and 665th Ave
68220407 Monroe Co - US 34 east of 527th Ave

Respectfully,

Dave Augspurger
Iowa Communications Network
Sr. Telecommunications Engineer | Outside Plant Lead
515-725-4604 (office) | 515-229-2013 (cell)

68220107 Monroe Co - US 34 east of 684th Ave
image.png
image.png

68220207 Monroe Co - US 34 east of 715th Ave
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image.png

68220307 Monroe Co - US 34 between S 13th St and 665th Ave
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68220407 Monroe Co - US 34 east of 527th Ave
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MEMBERS OF COUNCIL

HON. KIM REYNOLDS
GOVERNOR

HON. PAUL D. PATE
SECRETARY OF STATE

HON. ROB SAND
AUDITOR OF STATE

HON. MICHAEL L. FITZGERALD
TREASURER OF STATE

HON. MICHAEL L. NAIG
SECRETARY OF AGRICULTURE

Executive Council of Iowa

CAPITOL BUILDING
DES MOINES, IOWA 50319
PHONE: 515 281-5368

June 6, 2022

Mr. Kyle Harms
Office of the Treasurer
LOCAL

Dear Mr. Harms:

The Executive Council, in a meeting held on this date, approved Iowa Communications Network's request for an emergency allocation in the amount of $60,585.56, subject to the audit of invoices. On April 20, 2022, an exposed cable caused excessive erosion along Highway 34 in Monroe County. Request was to cover repair costs.

EXECUTIVE COUNCIL OF IOWA

Victoria Newton
Executive Secretary

cc: Randy Goddard, Executive Director, ICN
Kammy McHone, Finance Division, ICN
Dave Augspurger, Operations Division, ICN
Linda Leto, Department of Management

AOS Claim # 2299
TOS Job # ____

OFFICE OF AUDITOR OF STATE
STATE OF IOWA

Rob Sand
Auditor of State

State Capitol Building
Des Moines, Iowa 50319-0004

Telephone (515) 281-5834 Facsimile (515) 281-6518

May 24, 2022

Victoria Newton
Executive Council
L O C A L

Subject: Damages and Loss of Items Resulting from Storms/High Winds and Power Outage on December 15, 2021
Department of Corrections – Newton Correctional Facility
Claim dated April 27, 2022
AOS Claim ID: 2301

In accordance with Executive Council policy, we have examined the claim for 29C.20 funds for the above-mentioned damage. It is our conclusion that the above damage incurred by the Department of Corrections – Newton Correctional Facility is covered by Chapter 29C.20 of the Code of Iowa. Therefore, we recommend Executive Council approval of the allocation and reimbursement request in the amount of $7,877.97.

Sincerely,

Ernest H. Ruben, Jr., CPA
Deputy Auditor of State

cc: Shawn Howard, Warden, Department of Corrections – Newton Correctional Facility
Brad Hier, Associate Warden of Administration, Department of Corrections – Newton Correctional Facility
Linda Leto, Department of Management

MEMBERS OF COUNCIL

HON. KIM REYNOLDS
GOVERNOR

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TREASURER OF STATE

HON. MICHAEL L. NAIG
SECRETARY OF AGRICULTURE

Executive Council of Iowa

CAPITOL BUILDING
DES MOINES, IOWA 50319
PHONE: 515 281-5368

June 6, 2022

Mr. Kyle Harms
Office of the Treasurer
LOCAL

Dear Mr. Harms:

The Executive Council, in a meeting held on this date, approved the Department of Corrections request for an emergency allocation and reimbursement in the amount of $7,877.97. On December 15, 2021, a storm with high winds caused a power outage that damaged items. Request was to cover repair costs.

This represents full and final payment and this allocation will be closed.

EXECUTIVE COUNCIL OF IOWA

Victoria Newton

Victoria Newton
Executive Secretary

cc: Beth Skinner, Director, Department of Corrections
Shawn Howard, Warden, Department of Corrections – Newton Correctional Facility
Brad Hier, Associate Warden, Department of Corrections – Newton Correctional Facility
Linda Leto, Department of Management

AOS Claim # 2301
TOS Job # ____

Fields of Opportunities

STATE OF IOWA

KIM REYNOLDS, GOVERNOR
ADAM GREGG, LT. GOVERNOR

DEPARTMENT OF CORRECTIONS
BETH A. SKINNER, PhD, DIRECTOR

SHAWN HOWARD, WARDEN
NEWTON CORRECTIONAL FACILITY

DATE: April 27, 2022

TO: Tammy A. Hollingsworth, Office of Auditor of State
Victoria M Newton, Office of Treasurer of State, Executive Council

FROM: Brad Hier, Associate Warden of Administration
Iowa Department of Corrections, Newton Correctional Facility (NCF)

RE: 29C.20; 1. a., (2) Request for Reimbursement for Damages and Loss of Items Resulting from a storm damage and power outage December 15, 2021

The Newton Correctional Facility (NCF) is notifying Iowa Auditor of State, Treasurer of State and Executive Council of the institution's request for reimbursement of expenses totaling **$7,877.97** to address damages and replacement of items lost as a result of storm damage and power outage. This request reflects expenditures paid by NCF and represent the final cost to resolve this claim.

The attached documents include the facility critical incident report, a summary of paid expenditures with corresponding I3 payment document ID's and warrant information and all procurement documents with contractor invoices.

Please contact me at (641) 791-1414 or at Brad.Hier@iowa.gov with additional questions.

Respectfully Submitted,

Brad Hier, Associate Warden of Administration

Incident Summary With Use of Force Data

Iowa Department of Corrections

12/15/2021

No Use of Force

Incident Number - 156031 **Priority Level -** 2

Facility - Newton Correctional Facility

Incident Location - Other

Incident Type(s) - Facility Outages/Failures/Internal Issues;

Incident Summary

On 12/15/2021 at approximately 1900, a cell of straight line winds went through the Newton Correctional Facility and Correctional Release Center. The wind gusts knocked both NCF and CRC's power out, causing both to run on just emergency power. Power plant staff is on site, and has been in contact with Alliant energy. CRC reports no structural damage, however due to power outage, the ILU house is completely blacked out. Due to this, 6 II's from ILU house are being relocated to NCF until power can be restored. CRC also only has 5 cameras operational as a result of the power outage. Until camera function is restored, CRC is restricted to movement inside the dorms only unless escorted by staff. After staff searched NCF grounds for damage, there was a light pole found to be down in sally port by IPI, and some roofing debris that's being cleared from around the units. The light pole has been moved off of the concrete, no longer in the way, and power to it has been shut off by power plant staff. At this time, NCF staff is cleaning up debris on the yard before opening restricted movement. Warden Howard and DO Crawford notified.

Offenders Involved

No Offenders Involved

Staff Involved

Staff	Title
DePenning, Eric	NCF Correctional Trades Leader

Medical Attention

Bloodborne Contamination: No Medical Attention Received: No Taken to Hospital: No

Medical Personnel Contacted:

Date/Time Contacted:

Medical Attention Summary:

Use of Force Offender Injuries

No Injuries

Use of Force Staff Injuries

No Injuries

Conclusion Reached

Debris cleanup is underway. ILU house is being rehoused at NCF until power can be restored. Alliant energy has been notified. CRC is on restricted movement until camera function is back. NCF will move to restricted movement after yard is cleared of potentially dangerous debris.

Action Planned

Attachments

No Attachments

Updates

Update	By	Date
EET Mommer has placed two maintenance vehicles at the R&D driveway to block the down power line to eliminate the risk of anyone driving over or near it. Alliant Energy will be out sometime tomorrow to fix it.	Michelle.Boston	12/15/21 11:54 PM
EET Mommer on grounds to assist CRC in getting cameras and GCC Back up, he reports Alliant energy has said it could be a while before CRC's power is restored. NCF Power seems to have been restored.	brenna.lust	12/15/21 9:11 PM
-Update- The greenhouse has sustained damage to several panels, and the lock on the door is jammed shut. There is a powerline down at CRC, Power Plant, Depenning is evaluating that right now. LUA was having issues with their front door, but the issue appears to have been resolved	brenna.lust	12/15/21 9:06 PM

Report Prepared By - Lust, Brenna (NCF Captain)

Exp #	PO	Vendor	Item	Amount	Paid
893	245DB011222ALLI00	Alliant	Repair downed power line	$ 894.85	3/2/2022
894	245DB010622HPKN00	Hopkins	Repair Roof at CRC dietary due to storm damage	$ 893.00	2/11/2022
921	245DB010422GRAY00	Graybar	Hanwha - Replacement Cameras - CRC Lower Day Room	$ 798.38	2/11/2022
1024	245AC011922HOMD01	Home Depot	K9 training/agility equipment	$ 4,072.03	2/25/2022
1201	245AS022822MENA00	Menards	Plywood Washers Bolts K-9 course	$ 1,219.71	3/25/2022
			Total	**$ 7,877.97**	

Alliant Energy

Account Number	8306398667
Bill Date	Feb 17, 2022
Previous Balance	$2,403.34
Payment Received	$2,367.82 CR
Balance Forward	$35.52
Current Charges	$1,659.33

Amount Due on Mar 9, 2022
$1,694.85

Summary of your current charges

Account Name: NEWTON CORRECTIONAL RELEASE CENTER
Service Address:

THANK YOU FOR YOUR PAYMENT

Payment Received	Feb 14, 2022	$2,367.82 CR
	Total Payments	$2,367.82 CR

Customer System Work NEB Charge SA

Description	Cost
Customer System Work - 2/10/22	
Relocate overhead services to new weatherhead - Minimum Security Building	$800.00
Total Current Charges	$800.00

Customer System Work NEB Charge SA

Description	Cost
Customer System Work	
Storm damage restoration work - 12/16/21	$894.85
Total Current Charges	$894.85

Late Payment Charges	Feb 01	$ 35.52 CR
		$ 1,694.85

Questions? Contact us at:

alliantenergy.com

1.800.ALLIANT
(1.800.255.4268)

P.O. Box 3060
Cedar Rapids IA 52406-3060

Take care of it online
You can pay your bill, view your energy use and sign up for payments options in My Account at alliantenergy.com/myaccount

Message Board

013013 1/1

Amount Due

Please return this portion with your payment.

Alliant Energy

Amount Due Mar 9, 2022	$	**1,694.85**
Amount enclosed If Different From Above	$	
If paid after Mar 9, 2022	$	1,720.27

Account Number 8306398667

AV 01 013013 92618B 47 C**5DGT

NEWTON CORRECTIONAL RELEASE CENTER
PO BOX 218
NEWTON IA 50208-0218

Alliant Energy/IPL
PO Box 3060
Cedar Rapids, IA 52406-3060

8306398667000000000169485000000000172027 10

Business Office Use Only

Newton Correctional Facility
Expenditure Request

Request # _____ 893

PO #245DB0112222 ALLIANT

Vendor _____ Alliant

Date: *20-Dec-21*

Dept: *Power Plant* **Code:** _____

Qty	Unit Meas.	Item Description/Catalog Reference	Item #	Page	Unit Price	Total
						$0.00
		Expenditure for having Alliant repair downed power lines at CRC after 12-15-2021 storm. Work was completed on 12-16-21				$0.00
						$0.00
		29C.20 claim				$0.00
						$0.00
		Thanks!				$0.00
						$0.00
						$0.00
						$0.00
						$0.00
						$0.00
						$0.00
						$0.00
						$0.00
						$0.00
		1231. 2519. 2513.409				$0.00

Grand Total ~~$ 0.00~~ 894.85

How will this be used? *Repairs*

How long will this supply last? *N/A*

Do you have any in stock? Yes ☐ No ☒

How long will your stock last? *N/A*

Vendor references *Alliant Energy*

Delivery site *CRC*

New Item ☐ **Replacement Item** ☐

Requestor Name *Eric DePenning* **Date** *17-Dec-21*

Supervisor Approval _____

AWA Approval _____ 12.20.21

Business Office Use ☒ GF @ _____ ☐ Misc @ _____ ☐ Reimbursed from _____ ☐ Other – _____

122021-1231-Alliant-Repair.doc

Invoice

HOPKINS ROOFING

Date	Invoice #
1/24/2022	8153

Customer Details
Newton Correctional Facility P.O. Box 218 Newton, IA 50208

Project
Repair Newton Correctional Facility; 1/22

P.O. No.	Terms	Due Date	Rep
	Payment Application	1/24/2022	DTH

Item	Project Information	Rate	Total
Low Slope - Materials	9" Cured cover strip EPDM	62.00	62.00
Low Slope - Materials	1 Tube lap sealant	16.00	16.00
Low Slope - Materials	TPO	55.00	55.00
Low Slope - Materials	EPDM Primer	40.00	40.00
Low Slope - Trip Char...	Misc / Fuel	225.00	225.00
Low Slope - Labor	Roofing Labor	495.00	495.00
	Two holes on upper EPDM roof Patched. One 3' strip covered on upper EPDM roof. 5 damages on lower TPO roof patched. CRC Roof area.		

1-29-22

Finance Charges of 1.5% will be assessed after 15 days. Thank you!	**Total:**	$893.00
	Balance Due	$893.00

Business Office Use Only

Newton Correctional Facility
Expenditure Request

Request # ____ 894

PO # ____

Vendor ____ Hopkins Roofing

Date: *20-Dec-21*

29C.20

Dept: *Power Plant* **Code:** ____

Qty	Unit Meas.	Item Description/Catalog Reference	Item #	Page	Unit Price	Total
		Request to have Hopkins Roofing make repairs to CRC old dietary roof.				$0.00
						$0.00
		29C.20 claim after 12-15-2021 storm				$0.00
						$0.00
						$0.00
						$0.00
		1/6 - Scheduled for inspection/possible repair on	1/12/21			$0.00
		phone with Jerry.				$0.00
		jerry@hopkinsroofing.com Jerry Tellis				$0.00
		1/5/22 - Louise - Service Mgr. Jerry 405-590-0220.				$0.00
		12/29 - Left message. Office closed until Jan. 3rd.				$0.00
						$0.00
		641-446-4079				$0.00
						$0.00
						$0.00
		1231.2512.409				$0.00
					Grand Total	**$ 0.00**

How will this be used? *Repairs*

How long will this supply last? *N/A*

Do you have any in stock? Yes ☐ No ☒

How long will your stock last? *N/A*

Vendor references *Hopkins Roofing*

Delivery site *CRC*

New Item ☐ **Replacement Item** ☐

Requestor Name *Eric DePenning* **Date** *17-Dec-21*

Supervisor Approval ____

AWA Approval ____ 12-20-21

Business Office Use ☒ GF @ ____ ☐ Misc @ ____ ☐ Reimbursed from ____ ☐ Other – ____

122021-1231-Vendor-RoofRepair.doc

INVOICE

GraybaR.

600 EAST 4TH ST
DES MOINES IA 50309-1848

Invoice Questions Please Call or Email
515-447-4500 or ARQuestions@graybar.com

Invoice No: **9325315952**
Invoice Date: 01/27/2022
Account Number: 0000111123
Account Name: NEWTON CORRECTIONAL FACILITY

Remit Payments To:
GRAYBAR ELECTRIC COMPANY, INC.
12437 COLLECTIONS CENTER DRIVE
CHICAGO IL 60693-0124

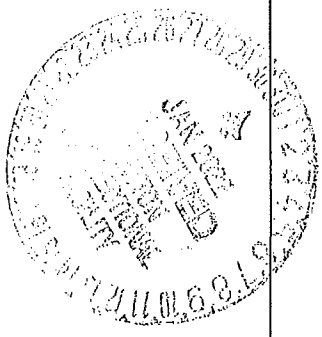
Ship to:
NEWTON CORRECTIONAL FACILITY
comm data
307 S 60TH AVE W
NEWTON IA 50208-8944

NEWTON CORRECTIONAL FACILITY
PO BOX 218
NEWTON IA 50208-0218

PO #: 245DB010422GRAY00						SO#: 377669462
Del. Doc. #:	PRO #	Routing	Date Shipped	Shipped From	F.O.B.	Rt. To
8041180261	1Z5328600369663997	UPS	01/20/2022	DES MOINES, IA	S/P - F/A	

Signed/Ordered by: SMITH/Deb Bleakney

Quantity	Catalog # / Description	Unit Price / Unit	Amount
1	SBP-300WMW1 HANWHA TECHWIN AMERICA WALL MOUNT ACCESSORY (WHITE)	34.51 / 1	34.51





PAY INVOICES QUICKLY and EASILY ONLINE!

Use our customer portal for all your account needs. Make payments, obtain invoice copies, find proof of deliveries and more! Registering is easy. Contact your local branch or visit *billpay.graybar.com* to sign up.

Terms of Payment
Net 30 Days

As a condition of the sales agreement, a monthly service charge of the lesser of 1-1/2% or the maximum permitted by law may be added to all accounts not paid by net due date. Visa, MasterCard, American Express, and Discover credit cards are accepted at point of purchase only.

Sub Total	34.51
Freight	0.00
Handling	0.00
Tax	0.00
Total Due	34.51

SUBJECT TO THE STANDARD TERMS AND CONDITIONS LISTED ON WWW.GRAYBAR.COM.

INVOICE

GraybaR.

600 EAST 4TH ST
DES MOINES IA 50309-1848

Invoice Questions Please Call or Email
515-447-4500 or ARQuestions@graybar.com

Invoice No: **9325377506**
Invoice Date: 02/01/2022
Account Number: 0000111123
Account Name: NEWTON CORRECTIONAL FACILITY

Remit Payments To:
GRAYBAR ELECTRIC COMPANY, INC.
12437 COLLECTIONS CENTER DRIVE
CHICAGO IL 60693-0124

NEWTON CORRECTIONAL FACILITY
PO BOX 218
NEWTON IA 50208-0218

Ship to:
NEWTON CORRECTIONAL FACILITY
comm data
307 S 60TH AVE W
NEWTON IA 50208-8944

PO #: 245DB010422GRAY00						SO#: 377669462
Del. Doc. #:	PRO #	Routing	Date Shipped	Shipped From	F.O.B.	Rt. To
8041309965		GRAYBAR TRUCK	02/01/2022	DES MOINES, IA	S/P - F/A	

Signed/Ordered by: MIKE SMITH/Deb Bleakney

Quantity	Catalog # / Description	Unit Price / Unit	Amount
1	QNP-6250H HANWHA TECHWIN AMERICA WISENET Q NETWORK OUTDOOR PTZ CAMERA 2MP	742.47 / 1	742.47
1	SBP-301HMW3 HANWHA TECHWIN AMERICA CAP ADAPTER	21.40 / 1	21.40

FEB 2022 RECEIVED NEWTON CORRECTIONAL FACILITY

PAY INVOICES QUICKLY and EASILY ONLINE!

Use our customer portal for all your account needs. Make payments, obtain invoice copies, find proof of deliveries and more! Registering is easy. Contact your local branch or visit *billpay.graybar.com* to sign up.

Terms of Payment
Net 30 Days

As a condition of the sales agreement, a monthly service charge of the lesser of 1-1/2% or the maximum permitted by law may be added to all accounts not paid by net due date. Visa, MasterCard, American Express, and Discover credit cards are accepted at point of purchase only.

Sub Total	763.87
Freight	0.00
Handling	0.00
Tax	0.00
Total Due	763.87

SUBJECT TO THE STANDARD TERMS AND CONDITIONS LISTED ON WWW.GRAYBAR.COM.

A:0 1/4/22 DD

Business Office Use Only

Newton Correctional Facility
Expenditure Request

Request # 921

Date: 22-Dec-21 29C.20

PO # 345DB010422GRAYBAR

RECEIVING DOCUMENT

Vendor Graybar

Dept: ____ Code: ____

Qty	Unit Meas.	Item Description/Catalog Reference	Item #	Page	Unit Price	Total
1.00	ea	Hanwha QNP 6250 (2mp, 25x zoom, PTZ)			742.47	742.47 $0.00
1.00	ea	Hanwha SBP-301HMW3 Hanging Mount - Cap Adapter			21.40	21.40 $0.00
1.00	ea	Hanwha SBP-300WMW1 Wall Mount Rec'd 1/24/22 DD			34.51	34.51 $0.00
						$0.00
		~~29C.20~~ replacement camera for CRC Lower Day Rm				$0.00
						$0.00
		Rec'd complete 2/2/22 D				$0.00
						$0.00
						$0.00
		1/4 - P.O. to Zach				$0.00
						$0.00
		12/29 - Zach still waiting 1/4				$0.00
						$0.00
						$0.00
		1474.2250.304				$0.00
						$0.00

Grand Total 198.38 $ 0.00

How will this be used? ____

How long will this supply last? ____

Do you have any in stock? Yes ☐ No ☐

How long will your stock last? ____

Vendor references *Hanwha*

Delivery site *NCF Warehouse*

New Item ☐ **Replacement Item** ☐

Requestor Name *EET Mommer* **Date** *22-Dec-21*

Supervisor Approval ____

AWA Approval ____

Business Office Use ☒ GF @ ____ ☐ Misc @ ____ ☐ Reimbursed from ____ ☐ Other – ____

122721-1474-Graybar-Camera.doc

SPECIAL SERVICES CUSTOMER INVOICE

Store 2103 W DES MOINES
3700 UNIVERSITY AVE
WEST DES MOINES, IA 50266

Phone: (515) 221-2233
Salesperson: MHO285
Reviewer: SV995

 No. H2103-117537

VALIDATION	
Date:	
Transaction:	2103
Order Total:	$4,072.03
Amount Paid:	$0.00

SOLD TO

Name: **NEWTON CORRECTIONAL FACILITY SEGEBARTH** **ALICIA**
Phone 1: **(641) 792-7552 x 613**
Address: 307 S 60TH AVE W
Phone 2:
Company Name:
City: NEWTON
Job Description: 245AS011922HOMD00
State: IA Zip: 50208 County: JASPER

We reserve the right to limit the quantities of merchandise sold to customers

HOME DEPOT DELIVERY #1

MERCHANDISE AND SERVICE SUMMARY

REF # V15

STOCK MERCHANDISE TO BE DELIVERED:

REF #	SKU	QTY	UM	DESCRIPTION	PI	TAX	PRICE EACH	EXTENSION
R03	1000-004-798	4.00	EA	4X4-8FT #2 PT CEDAR-TONE GC /	A	N	$14.38	$57.52
R04	1000-004-826	6.00	EA	1X4-8FT PT CEDAR-TONE WEATHERSHIELD /	A	N	$5.08	$30.48
R05	1001-802-069	60.00	EA	2X4-8FT #2PRIME PT CDR-TN WHRSHLD GC /	A	N	$9.88	$592.80
R06	1001-802-072	14.00	EA	2X4-12FT #2PRIME PT CDR-TN WHRSHL GC /	A	N	$15.48	$216.72
R07	1001-802-076	40.00	EA	2X6-8FT #2PRIME PT CDR-TN WHRSHLD GC /	A	N	$12.48	$499.20
R08	1000-004-838	3.00	EA	1X6-12FT PT CEDAR-TONE WEATHERSHIELD /	A	N	$10.58	$31.74
R09	1004-648-259	1.00	EA	EVERBILT 4 FT EXPAND CHAIN LINK GATE /	A	N	$75.63	$75.63
R10	0000-653-993	60.00	EA	CARR BOLT ZINC 5/16 x 3-1/2 (AVB) /	A	N	$0.58	$34.80
R11	0000-368-811	14.00	BG	5/16 LOCK WASHER ZINC /	A	N	$1.17	$16.38
R12	0000-590-832	60.00	EA	LOCK WASHER ZINC 5/16 (ABF) /	A	N	$0.22	$13.20
R13	1003-274-835	1.00	EA	DECKMATE III, TAN, 2-1/2 IN, 5 LB /	A	N	$26.98	$26.98
R14	1003-274-851	1.00	EA	DECKMATE III, TAN, 2 IN, 5 LB /	A	N	$26.98	$26.98

S/O - MDSE TO BE DELIVERED: S/O SCHUTTE LUMBER CO. REF # S02 ESTIMATED ARRIVAL DATE: 01/30/2022

*** CONTINUED ON NEXT PAGE ***

HOME DEPOT DELIVERY #1 (Continued)

REF #V15

S0202	1000-054-257	20.00	EA	4834MAR / 3/4 (23/32) 4x8 AB Marine Plywood [HDQC2 / 3/4 (23/32) 4x8 AB Marine Plywood [HDQC2:24482023:132455836:002] [QC]	A	N	$118.53	$2,370.60
							MERCHANDISE TOTAL:	**$3,993.03**

DELIVERY INFORMATION: SCHEDULED DELIVERY DATE: Will be scheduled upon arrival of all S/O Merchandise SCHEDULED DELIVERY
TIME: Will be scheduled upon arrival of all S/O Merchandise

V15	0000-515-663	1.00		Outside Delivery		N	$79.00	$79.00
							DELIVERY SERVICE SUBTOTAL:	**$79.00**

WILL DELIVER MDSE TO: NEWTON CORRECTIONAL FACILITY,ALICIA SEGEBARTH

ADDRESS: 307 S 60TH AVE W **CITY:** NEWTON

STATE: IA **ZIP:** 50208 **COUNTY:** JASPER **SALES TAX RATE:** 7.000

PHONE: (641) 841-7114 **ALTERNATE PHONE:** (641) 841-7114

$4,072.03

DRIVER SPECIAL INSTRUCTIONS: call Alicia prior to leave des moines 641-841-7114

END OF HOME DEPOT DELIVERY - REF #V15

TOTAL CHARGES OF ALL MERCHANDISE & SERVICES

Policy Id (PI):
A: 90 DAYS DEFAULT POLICY;

'The Home Depot reserves the right to limit / deny returns. Please see the return policy sign in stores for details.'

ORDER TOTAL	$4,072.03
SALES TAX	$0.00
TOTAL	$4,072.03
BALANCE DUE	$4,072.03

END OF ORDER No. H2103-117537

4/19/22 AD

Business Office Use Only

Newton Correctional Facility
Expenditure Request

Request # 29c.20 ✓ 1024

Date: *11-Jan-22*

PO # 2459A011922HOMDOT

RECEIVING DOCUMENT

4604 12/31/26 -a-

Vendor ~~Menards~~ Home Depot

Dept: *woodshop* **Code:** ____

Qty	Unit Meas.	Item Description/Catalog Reference	Item #	Page	Unit Price	Total
20		4x8 3/4 2/3/2022 RH 12 days to store	1000-054-257		118.53 ~~$128.9900~~	2370.60 ~~$2,579.80~~
4	✓	4x4 6' RH	1000-004-798		14.38 ~~$16.0000~~	57.52 ~~$64.00~~
6.00	✓	1x4 8'	1000-004-826		5.08 ~~$9.0000~~	30.48 ~~$54.00~~
60.00	✓	2x4 8' 2/2/2022	1001-802-069		9.88 ~~$10.0000~~	592.80 ~~$600.00~~
14.00	✓	2x4 12'	1001-802-072		15.48 ~~$15.0000~~	216.72 ~~$210.00~~
40.00	✓	2x6 8'	1001-802-076		12.48 ~~$17.0000~~	499.20 ~~$680.00~~
3.00	✓	1x6 12'	1000-004-838		10.58 ~~$22.0000~~	31.74 ~~$66.00~~
1.00	✓	chain link gate	1004-648-259		75.63 ~~$69.9900~~	75.63 ~~$69.99~~
~~60~~ 12.00	ea ~~60~~	3 1/2" carriage bolts 5/16 RH	653-993		.58 ~~$8.0000~~	34.80 ~~$96.00~~
~~14~~ 10.00	bg ~~60~~	5/16" lock washer (H) ea bag 2/2/2022	368-811		1.17 ~~$2.0000~~	16.38 ~~$20.00~~
~~66~~ 1.00	ea ~~60~~	5/16" flat washer ← NA never got 2/3/2022 recieved	590-832		.22 ~~$6.0000~~	13.20 ~~$6.00~~
1.00	1000	5 pound 2 1/2" T25 deck screw #9 RH 2/2/2022	1003-274-835		26.98 ~~$27.0000~~	26.98 ~~$27.00~~
1.00	1000	5 pound 2" T25 deck screw #9	1003-274-851		26.98 ~~$27.0000~~	26.98 ~~$27.00~~
1		1/14/22 - Menards - #4875.62 + 119.00 - Delivery - Fuel surcharge			49.00	49.00 ~~$0.00~~
		1/19/22 Home Depot - # 3993.03 + 79.00 Delivery Fee				$0.00
		1/19/22 - emailed order - Mike O.				$0.00

Complete 2/3/22 1231. 2221, 302

Grand Total ~~$4,499.39~~ #4072.03

How will this be used? *K9 Agility*

How long will this supply last? ____

Do you have any in stock? Yes ☐ No ☐

How long will your stock last? ____

Vendor references ____

Delivery site ____

New Item ☐ **Replacement Item** ☐

Requestor Name *Bobby Harwell* **Date** *11-Jan-22*

Supervisor Approval ____

AWA Approval ____ 1-13-22

Business Office Use ☒ GF @ ____ ☐ Misc @ ____ ☐ Reimbursed from ____ ☐ Other – ____

****
* GUEST COPY *
****



N30-NEWTON CORRECTIONAL F
PO BOX 218

NEWTON IA 50208
FAX # (641)

MENARDS - ALTOONA
370 36th Avenue SW
Altoona, IA 50009

INVOICE # 55140 ACCOUNT : 31530377

TRANSACTION DATE : 02/28/22
TRANSACTION TIME : 123226
REGISTER NUMBER : 23
SIGNER : Alicia Segebarth

TRANSACTION # : 3346
PURCHASE ORDER # : 245as022822m
TYPE OF SALE : Charge Sale
CLAIM # : 245as022822m

QUANTITY	SKU	DESCRIPTION	AMOUNT
1.00		DELIVERY	20.30
1.00		DELIVERY	119.00
1.00	1555509	BALL BEARING TROLLEY HNGR	63.48
250.00	2681304	TOMATO CAGE 12 X 33	495.00
8.00	1251600	3/4(24/32)-4'X8' AB 7PLY	1,031.92
6.00	2323986	5/16 FLAT WASHER 12PC	7.08
1.00	2325106	5/16 LOCK WASHER 55PC	2.69
4.00	2321762	5/16X 3-1/2 CARR BOLT 2PC	4.36
1.00	2351538	COIL TWIST LINK 1/0X20	13.99
2.00	2324014	5/16-18 HEX NUT 36PC	4.58
4.00	2321130	1/4 FLAT WASHER 18PC	4.72
2.00	2323060	1/4" X 3" LAG SCREW 28PC	7.38
1.00	2323044	1/4" X 2" LAG SCREW 40PC	3.69
1.00	1554717	14' STEEL DOOR LATERAL	63.48

SUB-TOTAL: 1,841.67
TOTAL TAX: 0.00
PAYMENTS : 0.00
==========
TOTAL DUE: 1,841.67

1219.71

NO TENDER SIGNATURE AVAILABLE

Business Office Use Only

Newton Correctional Facility
Expenditure Request

Request # ~~29e.20~~ 1201

PO # 245AS0228MENARDS

Date: *22-Feb-22*

RECEIVING DOCUMENT

Vendor Menards

Dept: *Maintenance* Code: ____

Qty	Unit Meas.	Item Description/Catalog Reference	Item #	Page (H/D)	Unit Price	Total
8.00		4x8x 3/4 marine grade plywood ✓	1251600	135.47	$128.9900	$1,031.92
6.00		5/16" flat washer 12 count ✓	2323986	11.55	$1.1800	$7.08
~~0.00~~		~~2x4x12- Do not need per Bobby~~	~~1116169~~		~~$21.8900~~	~~$0.00~~
1.00		5/16" lock washer 55 count ✓	2325106	12.10	$2.6900	$2.69
4.00		3' 1/2" carriage bolts 5/16" 14 count ✓	2321762	24.65	1.09 ~~$2.2800~~	4.36 ~~$9.12~~
1.00		twisted coil chain ✓	2351538	39.66	$13.9900	$13.99
2.00		5/16" 2 course thread hex nut 36 count ✓	2324014	9.99	$2.2900	$4.58
4.00		1/4" flat washer 18 count ✓	2321130	9.99	$1.1800	$4.72
2.00		1/4" x 3" lag screw 29 count ✓	2323060	30.16	$3.6900	$7.38
1.00		1/4" x 2" lag screw 40 count ✓	2323044	12.40	$3.6900	$3.69
1		Delivery Charges			119.00	119.00 ~~$0.00~~
1		Fuel Charge			20.30	20.30 ~~$0.00~~
						$0.00
		2/28/22 - Emailed order - STEVE Rhodda				$0.00
		Home Depot - 2479 -				$0.00
		1231. 221. 302				$0.00
					Grand Total	$1219.71 ~~$1,085.17~~

Order Complete Ashley Smith 3-8

~~(3) pages = $1841.67~~

How will this be used? *k-9 course*

How long will this supply last? ____

Do you have any in stock? Yes ☐ No ☐

How long will your stock last? ____

Vendor references ____

Delivery site ____

New Item ☐ **Replacement Item** ☐

Requestor Name *Bobby Harwell* **Date** *21-Feb-22*

Supervisor Approval *Mike Philby*

AWA Approval 2-23-22

Business Office Use ☒ GF @ ____ ☐ ~~Misc~~ @ ____ ☐ Reimbursed from ____ ☐ Other – ____

022222-1231-Menards-LumberHdwe.doc

OFFICE OF AUDITOR OF STATE
STATE OF IOWA

Rob Sand
Auditor of State

State Capitol Building
Des Moines, Iowa 50319-0004

Telephone (515) 281-5834 Facsimile (515) 281-6518

May 24, 2022

Victoria Newton
Executive Council
L O C A L

Subject: Wind/Storm Damages to Administration Building, Parking Garage and Lied Multi-Purpose Center on December 15, 2021
Iowa School for the Deaf – Board of Regents
Claim dated April 18, 2022
AOS Claim ID: 2286

In accordance with Executive Council policy, we have examined the claim for 29C.20 funds for the above-mentioned damage. It is our conclusion that the above damage incurred by the Iowa School for the Deaf – Board of Regents is covered by Chapter 29C.20 of the Code of Iowa. Therefore, we recommend an Executive Council allocation in the amount of $83,066.19, subject to an audit of actual invoices.

Sincerely,

Ernest H. Ruben, Jr., CPA
Deputy Auditor of State

cc: Mark Huss, Business Operations Director, Iowa School for the Deaf
John Nash, Director of Facilities, Board of Regents
Linda Leto, Department of Management

MEMBERS OF COUNCIL

HON. KIM REYNOLDS
GOVERNOR

HON. PAUL D. PATE
SECRETARY OF STATE

HON. ROB SAND
AUDITOR OF STATE

HON. MICHAEL L. FITZGERALD
TREASURER OF STATE

HON. MICHAEL L. NAIG
SECRETARY OF AGRICULTURE

Executive Council of Iowa

CAPITOL BUILDING
DES MOINES, IOWA 50319
PHONE: 515 281-5368

June 6, 2022

Mr. Kyle Harms
Office of the Treasurer
LOCAL

Dear Mr. Harms:

The Executive Council, in a meeting held on this date, approved the Board of Regents – Iowa School for the Deaf request for an emergency allocation in the amount of $83,066.19, subject to audit of actual invoices. On December 15, 2021, a storm caused wind damages to the Administration Building, Parking Garage and Lied Multi-Purpose Center. Request was to cover costs.

EXECUTIVE COUNCIL OF IOWA

Victoria Newton

Victoria Newton
Executive Secretary

cc: John Nash, Director of Facilities Board of Regents
Mark Huss, Business Operations, Iowa School for the Deaf
Andrea Anania, Board of Regents
Aimee Claeys, Board of Regents
Linda Leto, Department of Management

AOS Claim # 2286
TOS Job # ____

Iowa School for the Deaf

Address
3501 Harry Langdon Boulevard
Council Bluffs, Iowa 51503

Phone (712) 366-0571
Fax (712) 366-3218
Web iowaschoolforthedeaf.org

Tammy Hollingsworth

April 18, 2022

Dear Tammy,

The Iowa School for the Deaf was notified on 12/16/2021 of storm damage that occurred on 12/15/2021 at the ISD campus located at 3501 Harry Langdon Blvd, Council Bluffs, IA 51503. I would like to formally request an allocation of 29C.20 funds for the repair costs. The damage consisted of tree damage, fence damage, roof damage (Administration Building, parking garage and Lied Multi-Purpose Center) and electrical service being torn from a house on the property. To minimize further damage by subsequent storms, local contractors were called to make both temporary and permanent repairs. Attached are the invoices and quotes we have received.

Tree Damage Clean up	$6,110.00
Fence Repair	$2,510.00
Electrical Service Repair at 2901 Valley View Drive	$2,731.25
Lied Multipurpose Center Roof Repair	$4,586.98
Iowa School for the Deaf Garage Roof Repair	$1,850.00
Iowa School for the Deaf Admin Building Roof Repair	$29,446.15
Iowa School for the Deaf Admin Building Roof Repair	$25,277.17
Iowa School for the Deaf Admin Building Roof Repair	$10,554.64
Estimated total damage repair	~~$83,026.19~~

Please let me know if you have any additional questions.

Sincerely,

Mark Huss,
Business Operations Director

83,026.19 total

Tree Service

Date: 12-29-21

John Drefs
Tree Service
402-731-3672
1803 Platteview Rd.
Bellevue, NE 68123
www.drefstreesvc.com

Name: I.S.D
Address: 3501 Harry Langdon Blvd
City: C.B. IA. 51503
Phone: (Home)
Phone: (Work)
Job Address:

* Cut out damaged trees From wind storm
Grind stumps

RECEIVED
JAN 04 2022

- *Licensed/Insured*
- *Pruning*
- *Shaping*
- *Trimming*
- *Tree Removal*
- *Lot Clearing*
- *Consultation*
- *Cabling & Bracing*
- *Hedge Trimming*
- *Stump Removal*

Total Cost $ #6110.00 Due On Completion

Acceptance _____

PROOF OF INSURANCE
PROVIDED UPON REQUEST

Fence repair:

Empire

Empire Netting & Fence
PO Box 553
Waverly, NE 68462
Phone: 402-682-7658
Email: kc@empire-fence.com

Project: Iowa School for the Deaf	**Date: 1/3/2022**
Location: 3501 Harry Langdon Blvd, Council Bluffs, IA 51503	

SCOPE OF WORK:

Chain Link Temp Fence-
Provide and install:

- Remove and replace 6 temp panels
- Replace 50' of fence fabric
- Replace 2 posts
- Re-tie fabric
- Includes labor hours and mobilization

Total: $2,510.00

*** Safety/Construction Temporary Fence is a rental of material for up to 1 year from date of installation. Additional 10% charge for each 90-day extension after that. Bid includes install and take down. Must give minimum of 2 weeks notice for install or take down. Any damage or missing fence material may result in additional charges.*

Client **Date**

K.C. Rine
Empire Fence Representative

Payment Terms:
- Net 30
- 3% Service charge for credit card payment
- By accepting this proposal as indicated by my signature above, I acknowledge the scope of work to be completed, understand all proposal notes, and guarantee payment according to the terms set forth in this proposal.
-Estimate is valid for 30 days

Exclusions:
- Responsibility for compliance with local zoning or regulations
- Obtaining permits or inspection
- Excludes Bid bond and performance bond, unless otherwise stated
- Excludes Engineers Report and Surveying, unless otherwise stated
- Excludes Removal of spoils, unless otherwise stated
- Excludes prevailing wage
- Excludes Rock Drilling
- Excludes Private Utility Locate

Electrical repairs

Advanced Electric & Mechanical LLC
13002 Overland Trail
Council Bluffs, IA 51503
(402) 960-5666
sparks9@msn.com

INVOICE

BILL TO
Iowa School for the Deaf
3501 Harry Langdon Blvd.
Council Bluffs, IA 51503

INVOICE # 1512
DATE 12/21/2021

TERMS Net 30

P.O. NUMBER
Scott Mauch

SALES REP
Neil Arbogast

Advanced Electric & Mechanical LLC repaired damaged electrical services caused by a storm on 12/15/21 at 2901 Valley View Drive and 2905 Valley View Drive, both located on the Iowa School for the Deaf Campus. Arrived on 12/16/21 to replace the electrical service at 2901 Valley View Drive and had plans of temporarily powering the new service from the residence at 2905 Valley View Drive until it was discovered that residence still did not have power and that service was also damaged. It was then planned to temporarily supply power to 2901 Valley View Drive from the four unit apartment building on the other side. Once the new service was installed power was restored to 2901 Valley View Drive and the service was repaired at 2905 Valley View Drive and power was then restored to it. Returned on 12/18/21 and replaced electrical service to the detatched garage located at 2901 Valley View Drive which included a new rigid mast and overhead conductors.
Total Labor ($1785) --- Total Materials ($946.25)

Thank you for your business.

BALANCE DUE **$2,731.25**

1.833.MCKINNIS
402.426.2644

mckinnisinc.com
mail@mckinnisinc.com

Repair Proposal

Job Name: ISD-Lied Multipurpose Center – Fascia Proposal **Date:** January 3rd, 2022

Location of Job: 6501 Harry Langdon Blvd. Council Bluffs, IA **Phone:** 402.677.4534

Proposal to: Scott Mauch **E-Mail:** smauch@iowaschoolforthedeaf.org

McKinnis Roofing & Sheet Metal, LLC. hereby submits specifications and estimates for roofing at the above location as follows; See Site Map for Repair Area Location

1) Carefully remove approximately 20' of damaged metal fascia on the Northeast corner of building.
2) Carefully fabricate and install 20' of new metal fascia.
3) Clean up and haul away all roof repair debris.

Articulating man lift will be used for fascia repair and full access will be required. McKinnis Roofing excludes any and all repairs to grounds from lift access i.e. driveways, sidewalks, grass, etc. and will be sole responsibility of owner.

CONTRACT PRICE: The net sum payable for the above described work is $ 4,586.98

Please sign one copy of this contract and return it to our office if you would like us to proceed with the above work. Thank you for giving us the opportunity of working with you. If you have any questions please feel free to contact me. Thanks Dave McKinnis

BY: X_____ _____
(Owner or Corporate Officer) (Date)

All Pricing includes lien release & permits. Bid good for 30 days.
All work installed according to Unified Building Code and materials manufacturer's guideline Procedure:

Respectfully submitted,

BY_____, Dave Berg **McKinnis Roofing & Sheet Metal**

McKinnis Roofing & Sheet Metal, LLC carries Worker's Compensation and a $1,000,000 Liability insurance policy. All material is guaranteed to be as specified in this proposal. All work to be completed in a workmanlike manner according to standard practices. Any requested alteration or deviation from above specifications involving extra costs, will be executed only upon a written change order and such extra costs will become an extra charge over and above the estimate. All agreements contingent upon strikes, accidents or delays beyond our control. Owner to carry fire, tornado and other necessary insurance. Additional cost may be incurred if deteriorated decking is discovered. Payment of the contract price is due upon completion. If payment is not made within thirty (30) days of completion, a daily penalty in the amount of .041% of the contract price shall be assessed and shall be paid in addition to the contract price for every day the contract price remains unpaid. Where payment in full is not received within thirty (30) days of completion, owner shall pay and indemnify McKinnis Roofing & Sheet Metal, LLC against all costs of collection, including attorneys' fees. This contract may be withdrawn if not signed within 30 days. Please note; McKinnis Roofing & Sheet Metal, LLC. strives to protect your personal property in every way possible, removing roofing and transferring roofing material from the ground to the roof sometimes may result in damage to shrubs, plants and grass, also vibration from the roof can drop things from the walls in your home or business. For this reason McKinnis Roofing & Sheet Metal, LLC. cannot be held liable for any of these damages, so please protect these items before we arrive to the greatest extent possible.
We also cover your yard with a magnet, after the job is complete to pick up nails and small pieces of metals. Please refrain from driving on the driveway during construction, and please check your property areas again after we have completed the job, We will not pay for damaged tires, Thank you for your cooperation. McKinnis Roofing & Sheet Metal, LLC.

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1.833.MCKINNIS
402.426.2644

mckinnisinc.com
mail@mckinnisinc.com

Repair Proposal

Job Name: ISD, Garage Shingle Repair Proposal **Date:** January 6, 2022

Location of Job: 6501 Harry Langdon Blvd. C.B. IA, 51503 **Phone:** 402-677-4534

Proposal to: Iowa School for the Deaf c/o Scott Mauch **E-Mail:** smauch@iowaschoolforthedeaf.org

McKinnis Roofing & Sheet Metal, LLC. hereby submits specifications and estimates for roofing the above location as follows; At Garage Roof Shingle Repairs, See Repair Map

1) Carefully remove damaged and partially missing shingles on Garage roof approximately 1-2 bundles of shingles throughout roof system.
2) Shingle type is not available or manufactured at this time, will provide an available shingle GAF Autumn Brown to fit into existing system. Color will not match.
3) Manually seal down shingles adjacent to repair areas where tied into existing roof.
4) Clean up and haul away all roof repair debris.

CONTRACT PRICE: The net sum payable for the above described work is $ $1,850.00

Please sign one copy of this contract and return it to our office if you would like us to proceed with the above work. Thank you for giving us the opportunity of working with you. If you have any questions please feel free to contact me. Thanks Dave McKinnis

BY: X_____ _____
(Owner or Corporate Officer) (Date)

All Pricing includes lien release & permits. Bid good for 30 days.
All work installed according to Unified Building Code and materials manufacturer's guideline Procedure:

Respectfully submitted,

BY_____, Dave Berg **McKinnis Roofing & Sheet Metal, LLC**

McKinnis Roofing & Sheet Metal, LLC carries Worker's Compensation and a $1,000,000 Liability insurance policy. All material is guaranteed to be as specified in this proposal. All work to be completed in a workmanlike manner according to standard practices. Any requested alteration or deviation from above specifications involving extra costs, will be executed only upon a written change order and such extra costs will become an extra charge over and above the estimate. All agreements contingent upon strikes, accidents or delays beyond our control. Owner to carry fire, tornado and other necessary insurance. Additional cost may be incurred if deteriorated decking is discovered. Payment of the contract price is due upon completion. If payment is not made within thirty (30) days of completion, a daily penalty in the amount of .041% of the contract price shall be assessed and shall be paid in addition to the contract price for every day the contract price remains unpaid. Where payment in full is not received within thirty (30) days of completion, owner shall pay and indemnify McKinnis Roofing & Sheet Metal, LLC against all costs of collection, including attorneys' fees. This contract may be withdrawn if not signed within 30 days. Please note: McKinnis Roofing & Sheet Metal, LLC. strives to protect your personal property in every way possible, removing roofing and transferring roofing material from the ground to the roof sometimes may result in damage to shrubs, plants and grass, also vibration from the roof can drop things from the walls in your home or business. For this reason McKinnis Roofing & Sheet Metal, LLC. cannot be held liable for any of these damages, so please protect these items before we arrive to the greatest extent possible.
We also cover your yard with a magnet, after the job is complete to pick up nails and small pieces of metals. Please refrain from driving on the driveway during construction, and please check your property areas again after we have completed the job. We will not pay for damaged tires, Thank you for your cooperation. McKinnis Roofing & Sheet Metal, LLC.

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GLE REPAIR AREAS

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1.833.MCKINNIS
402.426.2644

mckinnisinc.com
mail@mckinnisinc.com

Repair Proposal

Job Name: Iowa School for the Deaf – Roof Repair Work #1 **Date:** April 13, 2022

Location of Job: 6501 Harry Langdon Blvd. CB, IA **Phone:** 712.366.0571

Proposal to: Iowa School for the Deaf c/o Scott Mauch **E-Mail:** smauch@iowaschoolforthedeaf.org

McKinnis Roofing & Sheet Metal, LLC. hereby submits specifications and estimates for roofing at the above location as follows; At Roof A & Roof B – Phase #1

Roof A

1) Carefully remove tile & roof to wall flashing adjacent to NW wall connection area approximately 6'x26' and set aside reusable tile and flashing.
2) Install Ice and moisture guard on roof where tile removed for wall flashing repair and up onto wall approximately 6".
3) Reinstall roof to wall flashing and tile (replace tile as needed inside wall flashing repair area) at NW wall connection and seal counterflashing to brick wall with urethane sealant.
4) Install elbow on NW wall above new wall flashing repair work.
5) Clean up and haul away all roof repair debris.

Roof B

6) Carefully removed damage tile from SW wind damaged roof section.
7) Install underlayment where damaged at exposed roof area.
8) Install tile and tie back into existing tile roof.
9) Refasten and seal West Copper counterflashing at parapet wall with urethane sealant.
10) Refasten loose copper wall sheets at 1st tier at cupola base and seal with urethane sealant at exposed seams.
11) Reinstall loose vertical copper corner flashings at cupola wall tile.
Clean up and haul away all roof repair debris.

80' articulating man lift will be used for roof repairs and full access will be required. McKinnis Roofing excludes any and all repairs to grounds from lift access i.e. driveways, sidewalks, grass, etc. and will be sole responsibility of owner. Ground repairs after completion likely.

CONTRACT PRICE: The net sum payable for the above described work is $ 29,446.15

Please sign one copy of this contract and return it to our office if you would like us to proceed with the above work. Thank you for giving us the opportunity of working with you. If you have any questions please feel free to contact me. Thanks Dave McKinnis

BY: X_____ _____
(Owner or Corporate Officer) (Date)

All Pricing includes lien release & permits. Bid good for 30 days.
All work installed according to Unified Building Code and materials manufacturer's guideline Procedure:

Respectfully submitted,

BY_____, Dave Berg **McKinnis Roofing & Sheet Metal, LLC**

McKinnis Roofing & Sheet Metal, LLC carries Worker's Compensation and a $1,000,000 Liability insurance policy. All material is guaranteed to be as specified in this proposal. All work to be completed in a workmanlike manner according to standard practices. Any requested alteration or deviation from above specifications involving extra costs, will be executed only upon a written change order and such extra costs will become an extra charge over and above the estimate. All agreements contingent upon strikes, accidents or delays beyond our control. Owner to carry fire, tornado and other necessary insurance. Additional cost may be incurred if deteriorated decking is discovered. Payment of the contract price is due upon completion. If payment is not made within thirty (30) days of completion, a daily penalty in the amount of .041% of the contract price shall be assessed and shall be paid in addition to the contract price for every day the contract price remains unpaid. Where payment in full is not received within thirty (30) days of completion, owner shall pay and indemnify McKinnis Roofing & Sheet Metal, LLC against all costs of collection, including attorneys' fees. This contract may be withdrawn if not signed within 30 days. Please note; McKinnis Roofing & Sheet Metal, LLC. strives to protect your personal property in every way possible, removing roofing and transferring roofing material from the ground to the roof sometimes may result in damage to shrubs, plants and grass, also vibration from the roof can drop things from the walls in your home or business. For this reason McKinnis Roofing & Sheet Metal, LLC. cannot be held liable for any of these damages, so please protect these items before we arrive to the greatest extent possible.
We also cover your yard with a magnet, after the job is complete to pick up nails and small pieces of metals. Please refrain from driving on the driveway during construction, and please check your property areas again after we have completed the job, We will not pay for damaged tires, Thank you for your cooperation. McKinnis Roofing & Sheet Metal, LLC.

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402.426.2644

mckinnisinc.com
mail@mckinnisinc.com

Repair Proposal

Job Name: Iowa School for the Deaf – Roof Repair Phase #2 **Date:** April 13, 2022

Location of Job: 6501 Harry Langdon Blvd. CB, IA **Phone:** 712.366.0571

Proposal to: Iowa School for the Deaf c/o Scott Mauch **E-Mail:** smauch@iowaschoolforthedeaf.org

McKinnis Roofing & Sheet Metal, LLC. hereby submits specifications and estimates for roofing at the above location as follows; At Roof Sections A, B, & C – Phase #2

Roof A

1) Carefully clean and resolder open flat seams of 1st tier of cupola base on roof A.
2) Clean and seal 2" hole on NE dormer sidewall with urethane sealant.
3) Remove and replace approximately 30 broken tile and seal approximately 40 cracked tile with urethane sealant.
4) Reseal counterflashing on NE counter flashing with urethane sealant.

Roof B

5) Remove and replace approximately 30 broken tile and seal approximately 40 cracked tile with urethane sealant.

Roof C

6) Clean and seal 2" hole on SE dormer sidewall with urethane sealant.
7) Fabricate and install 10' of copper flashing on outside of on SW corner.
8) Remove and replace approximately 35 broken tile and seal approximately 45 cracked tile with urethane sealant.
9) Reseal counterflashing on SW counter flashing with urethane sealant.

80' articulating man lift will be used for roof repairs and full access will be required. McKinnis Roofing excludes any and all repairs to grounds from lift access i.e. driveways, sidewalks, grass, etc. and will be sole responsibility of owner.

CONTRACT PRICE: The net sum payable for the above described work is $ 25,277.17

Please sign one copy of this contract and return it to our office if you would like us to proceed with the above work. Thank you for giving us the opportunity of working with you. If you have any questions please feel free to contact me. Thanks Dave McKinnis

BY: X_____ _____

(Owner or Corporate Officer) (Date)

All Pricing includes lien release & permits. Bid good for 30 days.
All work installed according to Unified Building Code and materials manufacturer's guideline Procedure:

Respectfully submitted,

BY_____, Dave Berg **McKinnis Roofing & Sheet Metal, LLC**

McKinnis Roofing & Sheet Metal, LLC carries Worker's Compensation and a $1,000,000 Liability insurance policy. All material is guaranteed to be as specified in this proposal. All work to be completed in a workmanlike manner according to standard practices. Any requested alteration or deviation from above specifications involving extra costs, will be executed only upon a written change order and such extra costs will become an extra charge over and above the estimate. All agreements contingent upon strikes, accidents or delays beyond our control. Owner to carry fire, tornado and other necessary insurance. Additional cost may be incurred if deteriorated decking is discovered. Payment of the contract price is due upon completion. If payment is not made within thirty (30) days of completion, a daily penalty in the amount of .041% of the contract price shall be assessed and shall be paid in addition to the contract price for every day the contract price remains unpaid. Where payment in full is not received within thirty (30) days of completion, owner shall pay and indemnify McKinnis Roofing & Sheet Metal, LLC against all costs of collection, including attorneys' fees. This contract may be withdrawn if not signed within 30 days. Please note; McKinnis Roofing & Sheet Metal, LLC. strives to protect your personal property in every way possible, removing roofing and transferring roofing material from the ground to the roof sometimes may result in damage to shrubs, plants and grass, also vibration from the roof can drop things from the walls in your home or business. For this reason McKinnis Roofing & Sheet Metal, LLC. cannot be held liable for any of these damages, so please protect these items before we arrive to the greatest extent possible.
We also cover your yard with a magnet, after the job is complete to pick up nails and small pieces of metals. Please refrain from driving on the driveway during construction, and please check your property areas again after we have completed the job, We will not pay for damaged tires, Thank you for your cooperation. McKinnis Roofing & Sheet Metal, LLC.

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402.426.2644

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mail@mckinnisinc.com

Repair Proposal

Job Name: Iowa School for the Deaf – Roof Repair Work #1 **Date:** April 14, 2022

Location of Job: 6501 Harry Langdon Blvd. CB, IA **Phone:** 712.366.0571

Proposal to: Iowa School for the Deaf c/o Scott Mauch **E-Mail:** smauch@iowaschoolforthedeaf.org

McKinnis Roofing & Sheet Metal, LLC. hereby submits specifications and estimates for roofing at the above location as follows; At Roof A & Roof B – Phase #3

Roof D

1) Reseal counter flashing at inside of parapet walls with urethane sealant.
2) Repair damaged ridge tile on North side of roof.
3) Reattach and seal copper cap flashing.
4) Remove debris from roof.

Roof E

5) Reseal counter flashing at inside of parapet walls with urethane sealant.
6) Remove debris from roof.

Roof F

7) Reseal counter flashing at inside of parapet walls with urethane sealant.
8) Replace approximately 5 broken tiles and seal approximately 5 cracked tiles.
9) Remove debris from roof.

80' articulating man lift will be used for roof repairs and full access will be required. McKinnis Roofing excludes any and all repairs to grounds from lift access i.e. driveways, sidewalks, grass, etc. and will be sole responsibility of owner. Ground repairs after completion likely.

CONTRACT PRICE: The net sum payable for the above described work is $ 10,554.64

Please sign one copy of this contract and return it to our office if you would like us to proceed with the above work. Thank you for giving us the opportunity of working with you. If you have any questions please feel free to contact me. Thanks Dave McKinnis

BY: X_____ _____
(Owner or Corporate Officer) (Date)

All Pricing includes lien release & permits. Bid good for 30 days.
All work installed according to Unified Building Code and materials manufacturer's guideline Procedure:

Respectfully submitted,

BY_____, Dave Berg **McKinnis Roofing & Sheet Metal, LLC**

McKinnis Roofing & Sheet Metal, LLC carries Worker's Compensation and a $1,000,000 Liability insurance policy. All material is guaranteed to be as specified in this proposal. All work to be completed in a workmanlike manner according to standard practices. Any requested alteration or deviation from above specifications involving extra costs, will be executed only upon a written change order and such extra costs will become an extra charge over and above the estimate. All agreements contingent upon strikes, accidents or delays beyond our control. Owner to carry fire, tornado and other necessary insurance.

Additional cost may be incurred if deteriorated decking is discovered. Payment of the contract price is due upon completion. If payment is not made within thirty (30) days of completion, a daily penalty in the amount of .041% of the contract price shall be assessed and shall be paid in addition to the contract price for every day the contract price remains unpaid. Where payment in full is not received within thirty (30) days of completion, owner shall pay and indemnify McKinnis Roofing & Sheet Metal, LLC against all costs of collection, including attorneys' fees. This contract may be withdrawn if not signed within 30 days. Please note; McKinnis Roofing & Sheet Metal, LLC. strives to protect your personal property in every way possible, removing roofing and transferring roofing material from the ground to the roof sometimes may result in damage to shrubs, plants and grass, also vibration from the roof can drop things from the walls in your home or business. For this reason McKinnis Roofing & Sheet Metal, LLC. cannot be held liable for any of these damages, so please protect these items before we arrive to the greatest extent possible.
We also cover your yard with a magnet, after the job is complete to pick up nails and small pieces of metals. Please refrain from driving on the driveway during construction, and please check your property areas again after we have completed the job, We will not pay for damaged tires, Thank you for your cooperation. McKinnis Roofing & Sheet Metal, LLC.

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TREASURER OF STATE

HON. MICHAEL L. NAIG
SECRETARY OF AGRICULTURE

Executive Council of Iowa

CAPITOL BUILDING
DES MOINES, IOWA 50319
PHONE: 515 281-5368

June 6, 2022

Mr. Kyle Harms
Office of the Treasurer
LOCAL

Dear Mr. Harms:

The Executive Council, in a meeting held on this date, approved the Board of Regents – University of Iowa request for an emergency allocation and reimbursement in the amount of $585,992.06. On January 4, 2018, the failure of the hot water heating line at the Medical Research Center caused damages. Request was to cover costs.

This represents full and final payment and this allocation will be closed

EXECUTIVE COUNCIL OF IOWA

Victoria Newton

Victoria Newton
Executive Secretary

cc: John Nash, Director of Facilities Board of Regents
Camille Walters, Risk Management Manager, University of Iowa
Andrea Anania, Board of Regents
Aimee Claeys, Board of Regents
Linda Leto, Department of Management

AOS Claim # 1876
TOS Job # ____

OFFICE OF AUDITOR OF STATE
STATE OF IOWA

Rob Sand
Auditor of State

State Capitol Building
Des Moines, Iowa 50319-0004

Telephone (515) 281-5834 Fax (515) 281-6518

May 23, 2022

Victoria Newton
Executive Council
L O C A L

Subject: Water Leak and Damages due to Failure of Hot Water Heating Line at Medical Research Facility on January 4, 2018
University of Iowa – Board of Regents
Claim dated December 18, 2019
AOS Claim ID: 1876

In accordance with Executive Council policy, we have examined the claim for 29C.20 funds for the above-mentioned damage. It is our conclusion that the above-mentioned damage incurred by University of Iowa – Board of Regents is covered by Chapter 29C.20 of the Code of Iowa. The University requested an allocation and reimbursement of $586,014.77; however, one of the vendor invoices included sales tax of $22.71. This amount will be deducted from the University's request. Therefore, we recommend an Executive Council allocation and reimbursement in the amount of $585,992.06. This represents full and final payment of the loss.

Sincerely,

Ernest H. Ruben, Jr., CPA
Deputy Auditor of State

cc: Camille Walters, Risk Management Manager, University of Iowa
John Nash, Director of Facilities, Board of Regents
Linda Leto, Department of Management

Department of Risk Management
Insurance & Loss Prevention
430 Plaza Centre One (PCO)
Iowa City, Iowa 52242-2501
319-335-0010
319-353-1893 *Fax*

December 18, 2019

Executive Council of Iowa
Office of Treasurer of State
State Capitol Building
Des Moines, IA 50319

Re: Formal Loss Report - University of Iowa – Medical Research Facility Mechanical Failure (12/31/2017)

Dear Executive Council,

On December 31, 2017, there was a mechanical failure that caused water damage to the University of Iowa Medical Research Facility (MRF) located at 55 South Grand Avenue, Iowa City, Iowa. The original loss notice was provided to the Executive Council, State Auditors and Board of Regents on January 4, 2018 and a Preliminary Loss Report was submitted on May 7, 2018.

The purpose of this letter is to provide the final expense details for this claim which are:

- **Remediation and Repair/Replace of Damages to the Building and Equipment: $586,014.77**

Please see the attached summary of claim expenses and copies of all invoices and proof of payments. Based on the information provided herein, The University of Iowa respectfully requests an award of **$586,014.77** from the State of Iowa Executive Council, pursuant to Chapter 29C:20, Contingent Fund, Code of Iowa.

We appreciate your review and look forward to your response. Please feel free to contact me with any questions.

Sincerely,

Camille Walters

Camille Walters
Risk Management Administrator

cc: Tammy Hollingsworth
John Nash
Debby Zumbach
Josey Bathke

Walters, Camille

From: Bathke, Josey
Sent: Wednesday, January 24, 2018 3:44 PM
To: John Nash
Cc: Zumbach, Deborah J; Walters, Camille
Subject: REVISED: University of Iowa - Medical Research Facility Mechanical Failure (12/31/17) - 29C:20 Property Loss Notice
Attachments: UI MRF Mechanical Failure photo 1.jpg; UI MRF Mechanical Failure photo 2.jpg

John –

This email serves as the official notification required under Iowa Code Chapter 29C:20. **The only University of Iowa official 29C:20 requests for you to forward to the State of Iowa Auditors will be from Risk Management.**

This is a REVISED notice of property loss due to a mechanical failure in the University of Iowa Medical Research Facility at 55 South Grand Avenue, Iowa City, on 12/31/17. This claim was previously included in the "Cold Weather" claim but that was prior to any root cause investigation. This is clearly now NOT a cold weather claim.

Our investigation determined that the water leak and damage was due to the failure of a cast iron tee on a 2" hot water heating line above an elevator door on the building's 5th floor. The water then damaged the building, departmental equipment and the elevator equipment from the 5th floor down to the 1st floor.

Our current **estimate is $379,000 for construction**. Please note: the estimates for clean-up and damaged department equipment will be forthcoming soon. When we receive that information we will submit a Preliminary Loss Report.

I have also included photos.

Please feel free to contact me with any questions or concerns.

Thank you,
Josey

Josey Bathke
Director, Risk Management
319-384-2580

From: Bathke, Josey
Sent: Thursday, January 4, 2018 11:54 AM
To: John Nash <john.nash@iowaregents.edu>
Cc: Zumbach, Deborah J (deborah-zumbach@uiowa.edu) <deborah-zumbach@uiowa.edu>; Walters, Camille <camille-walters@uiowa.edu>
Subject: University of Iowa - Cold Weather Water Incidents (12/29/17-1/4/18) - Property Loss Notice

John,

Our office has been notified of frozen pipes causing water damage in several University of Iowa buildings due to the recent extreme cold weather from 12/29/17-1/4/18 (today at Noon). Please see the attached spreadsheet for the list of UI Buildings impacted with the corresponding incident date.

We are unsure of the exact value/extent of the damage at this time but I have indicated on the spreadsheet when the damage is estimated over $2,000 and over $50,000. We currently have University staff and external contractors working to clean-up the affected areas and prepare more formal estimates. Once we have better estimates we will submit preliminary loss reports to you.

I have included photos for the buildings that I have available at this time. I have indicated which buildings those are on the spreadsheet. I will provide photos for the other building incidents when they become available.

Please feel free to contact me with any questions or concerns.

Thanks,
Josey

THE UNIVERSITY OF IOWA

Department of Risk Management
Insurance & Loss Prevention
430 Plaza Centre One (PCO)
Iowa City, Iowa 52242-2501
319-335-0010
319-353-1893 *Fax*

May 7, 2018

Executive Council of Iowa
Office of Treasurer of State
State Capitol Building
Des Moines, IA 50319

Re: University of Iowa – Medical Research Facility Mechanical Failure – Preliminary Loss Report (12/31/17)

Dear Executive Council,

On December 31, 2017, there was a mechanical failure that caused water to damage the University of Iowa Medical Research Facility (MRF) located at 55 South Grand Avenue, Iowa City, Iowa. The Board of Regents was initially notified via email on January 4, 2018, and a clarifying email was sent on January 26, 2018.

The mechanical failure at MRF was on the 5th floor of the building; therefore, the lower floors suffered extensive water damage to walls, flooring, ceiling tiles, furniture, and office equipment. The elevator equipment was also significantly damaged. The university immediately engaged internal staff and external contractors to aid in the emergency pipe repair, water mitigation, clean-up and building repairs.

The purpose of this Preliminary Loss Report is to notify you that our current damage estimate for clean-up, repairs and equipment is approximately **$498,000.00** based on the information we have at this time. We will provide a Formal Loss Report and supporting documentation once we have received the final information and payment documentation.

Please feel free to contact me with any questions or concerns.

Sincerely,

Josey Bathke
Chief Risk Officer

cc: Debby Zumbach
John Nash

THE UNIVERSITY OF IOWA

Department of Risk Management
Insurance & Loss Prevention
430 Plaza Centre One (PCO)
Iowa City, IA 52242-2500
319-335-0010 Phone
319-353-1893 Fax

General Fund 29C:20 Property Claim and Costs - University of Iowa Cold Weather

Building: Medical Research Facility
Department: Facilities Management and Carver College of Medicine OBGYN
Date of Loss: 12/31/2017
Completed by: Camille Walters
UI Claim #: PR-20241-SUI

Category	Reference #	Vendor	PO	Voucher	29C:20 Claim Amount
Building	1B	Servpro	1001948540	82920624	$ 30,790.53
Building	2B	ServiceMaster by Rice	1001956835	82918095	$ 28,813.45
Building	2B Refund	ServiceMaster by Rice	1001956835	82918095	$ (2,682.80)
Building	3B	EMSL Analytical	C000568459	82834337	$ 147.00
Building	4B	Menards	N/A	P0358021	$ 139.86
Building	5B	EMSL Analytical	C000568459	82839956	$ 231.00
Building	6B	Midwest Alarm Services	1001900448	82845855	$ 990.00
Building	7B	Simplex Grinnell	1001921006	82928573	$ 53,917.94
Building	8B	Van Meter Industrial	C000568624	82939431	$ 90.48
Building	9B	Van Meter Industrial	C000568624	82939430	$ 252.48
Building	10B	Van Meter Industrial	C000568624	82951437	$ 55.79
Building	11B	Van Meter Industrial	C000568624	82942864	$ 90.48
Building	12B	Van Meter Industrial	C000568624	82945077	$ 210.36
Building	13B	Van Meter Industrial	C000568624	82951433	$ 55.18
Building	14B	Van Meter Industrial	C000568624	82952362	$ 35.25
Building	15B	Van Meter Industrial	C000568624	82952355	$ 15.39
Building	16B	Van Meter Industrial	C000568624	82952432	$ 53.12
Building	17B	Van Meter Industrial	C000568624	82948760	$ 45.49
Building	18B	Van Meter Industrial	C000568624	82966773	$ 53.04
Building	19B	Van Meter Industrial	C000568624	82966945	$ 19.16
Building	20B	Van Meter Industrial	C000568624	82968206	$ 139.02
Building	21B	Johnson Controls Fire Protection	C000574783	82951069	$ 506.22
Building	22B	Johnson Controls Fire Protection	1001921006	83019513	$ 14,938.35
Building	23B	Johnson Controls Fire Protection	1001921006	83084908	$ 3,624.01
Building	24B	Schumacher Elevator	1001926549	82885642	$ 1,116.94
Building	25B	CMBA Architects	CS2472	82900609	$ 1,100.00
Building	26B	Woodruff Construction	CT8279	82861443	$ 37,953.36
Building	27B	Woodruff Construction	CT8279	82880510	$ 79,174.06
Building	28B	Woodruff Construction	CT8279	82892308	$ 29,981.10
Building	29B	Woodruff Construction	CT8279	82923015	$ 151,033.39
Building	30B	Woodruff Construction	CT8279	82947851	$ 57,892.19
Building	31B	Infinite Conferencing	N/A	P0360260	$ 26.51
Building	32B	Pigott	1001902229	82875768	$ 591.54
Building	33B	ITS Materials	N/A	N/A	$ 1,082.37
				Building Total	**$ 492,482.26**

Category	Reference #	Vendor	PO	Voucher	29C:20 Claim Amount
Equipment	34E	USA Scientific	1001905310	82854841	$ 1,753.92
Equipment	35E	ENV Services	1001896085	82926838	$ 1,420.00
Equipment	36E	DAI Scientific Equipment	1001896139	82841184	$ 11,088.00
Equipment	37E	RM Boggs Company	N/A	P0357034	$ 1,212.09
Equipment	38E	RM Boggs Company	N/A	P0361411	$ 2,198.42
Equipment	39E	RM Boggs Company	N/A	P0361411	$ 275.00
Equipment	40E	DAI Scientific Equipment	1001929907	82910568	$ 102.08
Equipment	41E	Fisher Scientific	1001933143	Electronic	$ 133.12
Equipment	42E	Fisher Scientific	1001933150	Electronic	$ 158.08
Equipment	43E	Staples	N/A	P0363839	$ 479.96
Equipment	44E	Fisher Scientific	1001921795	Electronic	$ 701.08
Equipment	45E	Advanced Instruments Inc	1001906719	82852014	$ 12,735.64
Equipment	46E	Beckman Coulter	1001906693	82879640	$ 2,066.00
Equipment	47E	Office Depot	1001920922	Electronic	$ 201.57
Equipment	48E	ENV Services	1001916482	82944421	$ 6,985.25
Equipment	49E	Olympus	1001913591	82869439	$ 41,719.75
Equipment	50E	Olympus	1001913591	82936953	$ 979.20
Equipment	51E	Olympus	1001913591	83023743	$ 6,785.15
Equipment	52E	Olympus	1001954273	82995834	$ 2,538.20
				Equipment Total	**$ 93,532.51**
				GRAND TOTAL	**$ 586,014.77**

W00107 9573

PO # 100194854

SERVPRO OF IOWA
CITY/CORALVILLE/OTTUMWA
/OSKALOOSA/DMEAST/SW
Des Moines East/SW
615 Hwy 1 West
Iowa City, IA 52246

319-338-8550

Invoice

Date	Invoice #
2/13/2018	20171618

Bill To
U of I Facilities Mgt Plaza Centre One 125 S Dubuque Street Iowa City, IA 52240

Job Location
Medical Research Bldg MRF 55 South Grand Ave Incident: 01/01/18 Frozen pipe 5th floor

Job Date	Rep	Terms
2/13/2018		Due Upon Receipt

Item	Description	Amount
Water Commercial	Commercial water damage restoration.....MRF Bldg 01/01/18 SERVPRO invoice	30,790.53
	Sales Tax	0.00

GROUP 229411

82920624

Total	$30,790.53
Payments/Credits	$0.00
Balance Due	$30,790.53

Each SERVPRO® Franchise is Independently Owned and Operated

ServPro Mitigation Summary

Project #: 060-18
Project Name: University of Iowa - MRF
Address:
Claim # 474056

Date of Loss
EMA File #

As Submitted by Servpro			As Reviewed by Newman & Newman		
Line #	Category	ServPro Total	N&N Total	Delta	N&N Comments
1	Labor	$ 10,123.45	$ 9,913.52	$ 209.93	Labor rates are recognized by N&N as $43.82.
2	Equipment	$ 23,824.70	$ 20,127.32	$ 3,697.38	There are differences in rates
3	Consumables	$ 749.69	$ 749.69	$ -	
4	Subcontractor	$ -	$ -	$ -	
5	**Line Item Total**	**$ 34,697.84**	**$ 30,790.53**	**$ 3,907.31**	
6	Material Sales Tax	$ -	$ -	$ -	
7	**Subtotal**	**$ 34,697.84**	**$ 30,790.53**	**$ 3,907.31**	
8	Overhead	$ -	$ -	$ -	
9	Profit	$ -	$ -	$ -	
10	**TOTAL**	**$ 34,697.84**	**$ 30,790.53**	**$ 3,907.31**	

*This is a draft and preliminary number which is subject to change and is for discussion purposes only.

Labor Summary

	Total Cost		
	ServPro's Total Submitted	N&N Review	**Comments**
Description	$ 10,123.45	$ 9,913.52	
Labor - Week 1	$ 10,123.45	$ 9,913.52	

Labor - Week 1

Day of the Week		Monday				Tuesday				Wednesday				Thursday				Friday				Saturday				Sunday				Total Hours				Rates				Total Cost	
Date		1/1/2018				1/2/2018				1/3/2018				1/4/2018				1/5/2018				1/6/2018				1/7/2018													
		ServPro Submitted		N&N Review		ServPro Submitted		N&N Review		ServPro Submitted		N&N Review		ServPro Submitted		N&N Review		ServPro Submitted		N&N Review		ServPro Submitted		N&N Review		ServPro Submitted		N&N Review		ServPro Submitted		N&N Review		ServPro Submitted		N&N Review		ServPro Submitted	N&N Review
Employee Name	Staff Type	ST	OT	ST	OT	ST	OT	ST	OT / DT	ST	OT	ST	OT	ST	OT	ST	OT	ST	OT	ST	OT	ST	OT	ST	OT	ST	OT	ST	OT	ST	OT	ST	OT	ST	OT	ST	OT	ST/OT	ST/OT
	Weekly Totals	0.00	0.00	0.00	0.00	254.91	0.00	254.91	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	254.91	0.00	254.91	0.00					$ 10,123.45	$ 9,913.52
	Restoration Technician					177.91		177.91																						177.91	0.00	177.91	0.00	$ 45.00	$ 90.00	$ 43.82	$ 65.80	$ 8,005.95	$ 7,796.02
	General Labor					77.00		77.00																						77.00	0.00	77.00	0.00	$ 27.50	$ 90.00	$ 27.50	$ 65.80	$ 2,117.50	$ 2,117.50

		Equipment Total		Rates		Total Cost		
Description	Unit	ServPro's Total Submitted	N&N Review	ServPro Submitted	N&N Review	ServPro Submitted	N&N Review	Comments
		512	512			$ 23,824.70	$ 20,127.32	
Air mover (per 24 hour period) - No monitoring	Daily	414	414	$ 32.50	$ 26.31	$ 13,455.00	$ 10,892.34	Difference in rate
Dehumidifier (per 24 hour period) - Large - No monitoring	Daily	69	69	$ 75.50	$ 73.17	$ 5,209.50	$ 5,048.73	Difference in rate
Negative air fan/Air scrubber (24 hr period) - No monitoring	Daily	15	15	$ 140.00	$ 75.07	$ 2,100.00	$ 1,126.05	Difference in rate
extractor (Portable)	Daily	4	4	$ 125.00	$ 125.00	$ 500.00	$ 500.00	
Extractor (Trailer)	Daily	4	4	$ 410.00	$ 410.00	$ 1,640.00	$ 1,640.00	
Vehicle - pick up	Daily	3	3	$ 125.00	$ 125.00	$ 375.00	$ 375.00	
Vacuum - HEPA	Daily	2	2	$ 115.00	$ 115.00	$ 230.00	$ 230.00	
Equipment Rental (Adhesive Removal) - Aero Rental	Each	1	1	$ 315.20	$ 315.20	$ 315.20	$ 315.20	

Day of the Week		Monday		Tuesday		Wednesday		Thursday		Friday		Saturday		Sunday		Equipment Totals		Rates			Total Cost	
Date		1/1/2018		1/2/2018		1/3/2018		1/4/2018		1/5/2018		1/6/2018		1/7/2018								
		ServPro Submitted	N&N Review	ServPro Submitted	N&N Review	ServPro Submitted	N&N Review	ServPro Submitted	N&N Review	ServPro Submitted	N&N Review	ServPro Submitted	N&N Review	ServPro Submitted	N&N Review	ServPro Submitted	N&N Review	ServPro Submitted	N&N	Review	ServPro Submitted	N&N Review
Description	Unit	134	134	134	134	114	114	112	112	6	6	6	6	6	6	512	512				$ 23,824.70	$ 20,127.32
Air mover (per 24 hour period) - No monitoring	Daily	110	110	110	110	91	91	91	91	4	4	4	4	4	4	414	414	$ 32.50	$	26.31	$ 13,455.00	$ 10,892.34
Dehumidifier (per 24 hour period) - Large - No monitoring	Daily	17	17	17	17	17	17	15	15	1	1	1	1	1	1	69	69	$ 75.50	$	73.17	$ 5,209.50	$ 5,048.73
Negative air fan/Air scrubber (24 hr period) - No monitoring	Daily	3	3	3	3	3	3	3	3	1	1	1	1	1	1	15	15	$ 140.00	$	75.07	$ 2,100.00	$ 1,126.05
extractor (Portable)	Daily	1	1	1	1	1	1	1	1							4	4	$ 125.00	$	125.00	$ 500.00	$ 500.00
Extractor (Trailer)	Daily	1	1	1	1	1	1	1	1							4	4	$ 410.00	$	410.00	$ 1,640.00	$ 1,640.00
Vehicle - pick up	Daily	1	1	1	1	1	1									3	3	$ 125.00	$	125.00	$ 375.00	$ 375.00
Vacuum - HEPA	Daily	1	1	1	1											2	2	$ 115.00	$	115.00	$ 230.00	$ 230.00
Equipment Rental (Adhesive Removal) - Aero Rental	Each							1	1							1	1	$ 315.20	$	315.20	$ 315.20	$ 315.20
																0	0	$ -	$	-	$ -	$ -
																0	0	$ -	$	-	$ -	$ -
																0	0	$ -	$	-	$ -	$ -

Consumables

Day of the Week		Monday		Tuesday		Wednesday		Thursday		Friday		Saturday		Sunday		Material Count		Rates		Total Cost	
Date		1/1/2018		1/2/2018		1/3/2018		1/4/2018		1/5/2018		1/6/2018		1/7/2018							
		ServPro Submitted	N&N Review	ServPro Submitted	N&N Review	ServPro Submitted	N&N Review	ServPro Submitted	N&N Review	ServPro Submitted	N&N Review	ServPro Submitted	N&N Review	ServPro Submitted	N&N Review	ServPro Submitted	N&N Review	ServPro Submitted	N&N Review	ServPro Submitted	N&N Review
Description	Unit	63	63	0	0	0.00	0	0	0	0	0	0	0	0	0	63.00	63.00			$ 749.69	$ 749.69
																0	0			$ -	$ -
Bags (6 mil)	Each	50	50													50.00	50.00	$ 1.96	$ 1.96	$ 98.00	$ 98.00
Concrobium	Gallon	3	3													3.00	3.00	$ 43.95	$ 43.95	$ 131.85	$ 131.85
Tape - Blue	Roll	1	1													1.00	1.00	$ 13.16	$ 13.16	$ 13.16	$ 13.16
Plastic Sheeting	Each	1	1													1.00	1.00	$ 196.00	$ 196.00	$ 196.00	$ 196.00
Tyvek Suites	Each	1	1													1.00	1.00	$ 185.73	$ 185.73	$ 185.73	$ 185.73
Dust Mask	Each	1	1													1.00	1.00	$ 39.20	$ 39.20	$ 39.20	$ 39.20
Carpet Cleaner	Gallon	2	2													2.00	2.00	$ 4.02	$ 4.02	$ 8.04	$ 8.04
Furniture Blocks	Each	1	1													1.00	1.00	$ 29.55	$ 29.55	$ 29.55	$ 29.55
Carpet Cleaner (Powder)	Each	2	2													2.00	2.00	$ 8.83	$ 8.83	$ 17.66	$ 17.66
Wall Zippers	Each	1	1													1.00	1.00	$ 30.50	$ 30.50	$ 30.50	$ 30.50
																0.00	0.00	$ -	$ -	$ -	$ -
																0.00	0.00	$ -	$ -	$ -	$ -
																0.00	0.00	$ -	$ -	$ -	$ -
																0.00	0.00	$ -	$ -	$ -	$ -
																0.00	0.00	$ -	$ -	$ -	$ -
																0.00	0.00	$ -	$ -	$ -	$ -
																0.00	0.00	$ -	$ -	$ -	$ -
																0.00	0.00	$ -	$ -	$ -	$ -
																0.00	0.00	$ -	$ -	$ -	$ -
																0.00	0.00	$ -	$ -	$ -	$ -

SERVPRO OF IOWA
CITY/CORALVILLE/OTTUMWA
/OSKALOOSA/DMEAST/SW
Des Moines East/SW
615 Hwy 1 West
Iowa City, IA 52246

319-338-8550

Invoice

Date	Invoice #
2/13/2018	20171618

Bill To
U of I Facilities Mgt Plaza Centre One 125 S Dubuque Street Iowa City, IA 52240

Job Location
Medical Research Bldg MRF 55 South Grand Ave Incident: 01/01/18 Frozen pipe 5th floor

Job Date	Rep	Terms
2/13/2018		Due Upon Receipt

Item	Description	Amount
Water Commercial	Commercial water damage restoration.....MRF Bldg 01/01/18 SERVPRO invoice	34,697.84
	Sales Tax	0.00

Total	$34,697.84
Payments/Credits	$0.00
Balance Due	$34,697.84

Each SERVPRO® Franchise is Independently Owned and Operated

Servpro of Iowa City/Coralville/Ottumwa/Oskaloosa/DesMoines E/SW

Franchise # 9784 /10071/10619/10618
615 HWY 1 West
Iowa City, IA, 52246
319-338-8550/641-682-0782/515-244-5511
Tax ID #27-0863347

Client:	U of I - Medical Research Facility (MRF)
Property:	55 S Grand Avenue Iowa City, IA 52240
Operator:	JANE
Estimator:	Billy Lopez
Position:	General Manager
Company:	Servpro
Business:	615 Highway 1 West Iowa City , IA 52246
Business:	(319) 338-8550
E-mail:	Billy@servpro.me
Type of Estimate:	Freeze
Date Entered:	1/9/2018
Date Assigned:	
Price List:	IACR8X_JAN18
Labor Efficiency:	Restoration/Service/Remodel
Estimate:	UOFI_MRF_BLDG

Dear U of I - Medical Research Facility (MRF),
Attached you will find the total bill associated with the mitigation to your facility. The total of the bill is 34,697.84. Please feel free to contact me with any questions.

Medical Research Building
MRF
55 South Grand Ave
frozen pipe 5th floor
DOL: 1-1-2018

Regards,
Billy Lopez
(319) 338-8550
Billy@servpro.me

Servpro of Iowa City/Coralville/Ottumwa/Oskaloosa/DesMoines E/SW

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Iowa City, IA, 52246
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Tax ID #27-0863347

UOFI_MRF_BLDG

Consumables

DESCRIPTION	QTY	REMOVE	REPLACE	TAX	TOTAL
1. General Laborer - per hour	77.00 HR	0.00	27.50	0.00	2,117.50
2. Haul debris - per pickup truck load - including dump fees	3.00 EA	125.00	0.00	0.00	375.00
3. Extraction truck mounted unit **2 for initial extraction** **2 for carpet cleaning**	4.00 EA	0.00	410.00	0.00	1,640.00
4. Portable extraction unit **2 for initial extraction** **2 for carpet cleaning**	4.00 EA	0.00	125.00	0.00	500.00
5. Hepa Vacuum	2.00 EA	0.00	115.00	0.00	230.00
6. Tyvek Suits (25 per case)	1.00 EA	0.00	185.73	0.00	185.73
7. Wall Zippers per 2 pack	1.00 EA	0.00	30.50	0.00	30.50
8. Anti Microbial	3.00 EA	0.00	43.95	0.00	131.85
9. carpet cleaner (Liquid)	2.00 EA	0.00	4.02	0.00	8.04
10. carpet cleaner (Powder)	2.00 EA	0.00	8.83	0.00	17.66
11. furniture blocks	1.00 EA	0.00	29.55	0.00	29.55
12. Bags, Trash Environmental	50.00 EA	0.00	1.96	0.00	98.00
13. Tape, Blue	1.00 EA	0.00	13.16	0.00	13.16
14. plastic sheeting	1.00 EA	0.00	196.00	0.00	196.00
15. Dust Mask	1.00 EA	0.00	39.20	0.00	39.20
16. Aero Rental Invoice **Machine rented for adhesive removal**	1.00 EA	0.00	315.20	0.00	315.20
17. Restoration Tech	177.91 EA	0.00	45.00	0.00	8,005.95
Totals: Consumables				0.00	13,933.34

Equipment

DESCRIPTION	QTY	REMOVE	REPLACE	TAX	TOTAL
1-1-18					
18. Air mover (per 24 hour period) - No monitoring	110.00 EA	0.00	32.50	0.00	3,575.00
19. Dehumidifier (per 24 hour period) - XLarge - No monitoring	17.00 EA	0.00	75.50	0.00	1,283.50

Servpro of Iowa City/Coralville/Ottumwa/Oskaloosa/DesMoines E/SW

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Tax ID #27-0863347

CONTINUED - Equipment

DESCRIPTION	QTY	REMOVE	REPLACE	TAX	TOTAL
20. Neg. air fan/Air scrub.-XLrg (per 24 hr period)-No monit.	3.00 DA	0.00	140.00	0.00	420.00
1-2-18					
21. Air mover (per 24 hour period) - No monitoring	110.00 EA	0.00	32.50	0.00	3,575.00
22. Dehumidifier (per 24 hour period) - XLarge - No monitoring	17.00 EA	0.00	75.50	0.00	1,283.50
23. Neg. air fan/Air scrub.-XLrg (per 24 hr period)-No monit.	3.00 DA	0.00	140.00	0.00	420.00
1-3-18					
24. Air mover (per 24 hour period) - No monitoring	91.00 EA	0.00	32.50	0.00	2,957.50
25. Dehumidifier (per 24 hour period) - XLarge - No monitoring	17.00 EA	0.00	75.50	0.00	1,283.50
26. Neg. air fan/Air scrub.-XLrg (per 24 hr period)-No monit.	3.00 DA	0.00	140.00	0.00	420.00
1-4-18					
27. Air mover (per 24 hour period) - No monitoring	91.00 EA	0.00	32.50	0.00	2,957.50
28. Dehumidifier (per 24 hour period) - XLarge - No monitoring	15.00 EA	0.00	75.50	0.00	1,132.50
29. Neg. air fan/Air scrub.-XLrg (per 24 hr period)-No monit.	3.00 DA	0.00	140.00	0.00	420.00
1-5-18					
30. Air mover (per 24 hour period) - No monitoring	4.00 EA	0.00	32.50	0.00	130.00
31. Dehumidifier (per 24 hour period) - XLarge - No monitoring	1.00 EA	0.00	75.50	0.00	75.50
32. Neg. air fan/Air scrub.-XLrg (per 24 hr period)-No monit.	1.00 DA	0.00	140.00	0.00	140.00
1-6-18					
33. Air mover (per 24 hour period) - No monitoring	4.00 EA	0.00	32.50	0.00	130.00
34. Negative air fan/Air scrubber (24 hr period) - No monit.	1.00 DA	0.00	140.00	0.00	140.00
35. Dehumidifier (per 24 hour period) - XLarge - No monitoring	1.00 EA	0.00	75.50	0.00	75.50
1-7-18					
36. Air mover (per 24 hour period) - No monitoring	4.00 EA	0.00	32.50	0.00	130.00
37. Dehumidifier (per 24 hour period) - XLarge - No monitoring	1.00 EA	0.00	75.50	0.00	75.50

Servpro of Iowa City/Coralville/Ottumwa/Oskaloosa/DesMoines E/SW

Franchise # 9784 /10071/10619/10618
615 HWY 1 West
Iowa City, IA, 52246
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Tax ID #27-0863347

CONTINUED - Equipment

DESCRIPTION	QTY	REMOVE	REPLACE	TAX	TOTAL
38. Negative air fan/Air scrubber (24 hr period) - No monit.	1.00 DA	0.00	140.00	0.00	140.00
Totals: Equipment				0.00	20,764.50
Line Item Totals: UOFI_MRF_BLDG				**0.00**	**34,697.84**

Grand Total Areas:

22,384.17	SF Walls	8,656.09	SF Ceiling	31,040.26	SF Walls and Ceiling
8,741.59	SF Floor	971.29	SY Flooring	2,695.01	LF Floor Perimeter
0.00	SF Long Wall	0.00	SF Short Wall	2,688.33	LF Ceil. Perimeter
8,741.59	Floor Area	9,261.12	Total Area	19,492.70	Interior Wall Area
7,728.78	Exterior Wall Area	858.75	Exterior Perimeter of Walls		
0.00	Surface Area	0.00	Number of Squares	0.00	Total Perimeter Length
0.00	Total Ridge Length	0.00	Total Hip Length		

Servpro of Iowa City/Coralville/Ottumwa/Oskaloosa/DesMoines E/SW

Franchise # 9784 /10071/10619/10618
615 HWY 1 West
Iowa City, IA, 52246
319-338-8550/641-682-0782/515-244-5511
Tax ID #27-0863347

Summary for Dwelling

Line Item Total	34,697.84
Replacement Cost Value	**$34,697.84**
Net Claim	**$34,697.84**

Billy Lopez
General Manager

Servpro of Iowa City/Coralville/Ottumwa/Oskaloosa/DesMoines E/SW

Franchise # 9784 /10071/10619/10618
615 HWY 1 West
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Tax ID #27-0863347

Recap of Taxes

Servpro of Iowa City/Coralville/Ottumwa/Oskaloosa/DesMoines E/SW

Franchise # 9784 /10071/10619/10618
615 HWY 1 West
Iowa City, IA, 52246
319-338-8550/641-682-0782/515-244-5511
Tax ID #27-0863347

Recap by Room

Estimate: UOFI_MRF_BLDG

Consumables	**13,933.34**	**40.16%**
Equipment	**20,764.50**	**59.84%**
Subtotal of Areas	**34,697.84**	**100.00%**
Total	**34,697.84**	**100.00%**

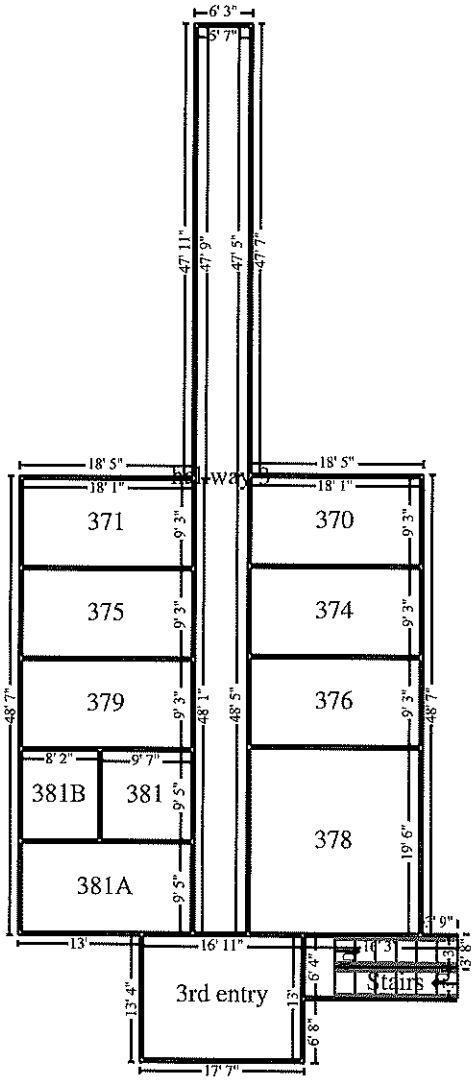
Servpro of Iowa City/Coralville/Ottumwa/Oskaloosa/DesMoines E/SW

Franchise # 9784 /10071/10619/10618
615 HWY 1 West
Iowa City, IA, 52246
319-338-8550/641-682-0782/515-244-5511
Tax ID #27-0863347

Recap by Category

Items	Total	%
GENERAL DEMOLITION	375.00	1.08%
LABOR ONLY	2,117.50	6.10%
WATER EXTRACTION & REMEDIATION	32,205.34	92.82%
Subtotal	34,697.84	100.00%

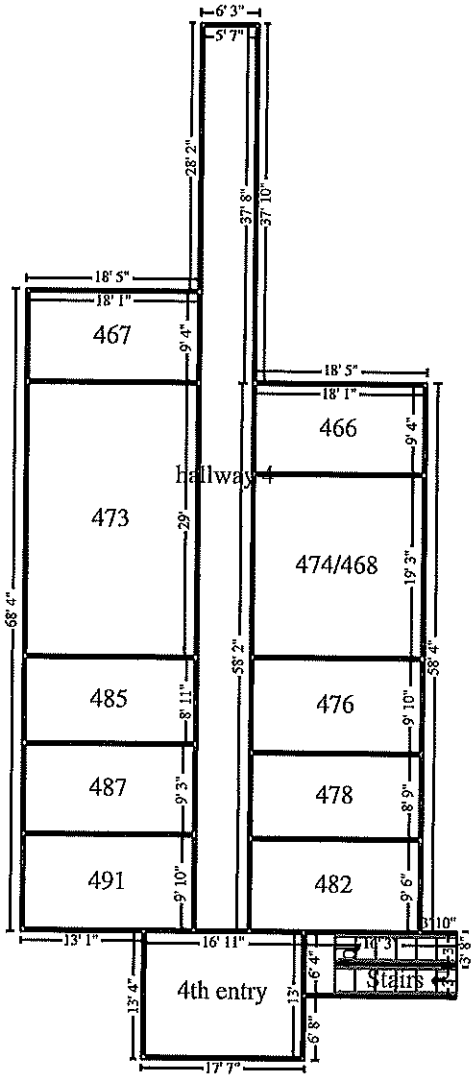
1B Invoice - Page 17 of 19



N

3rd floo

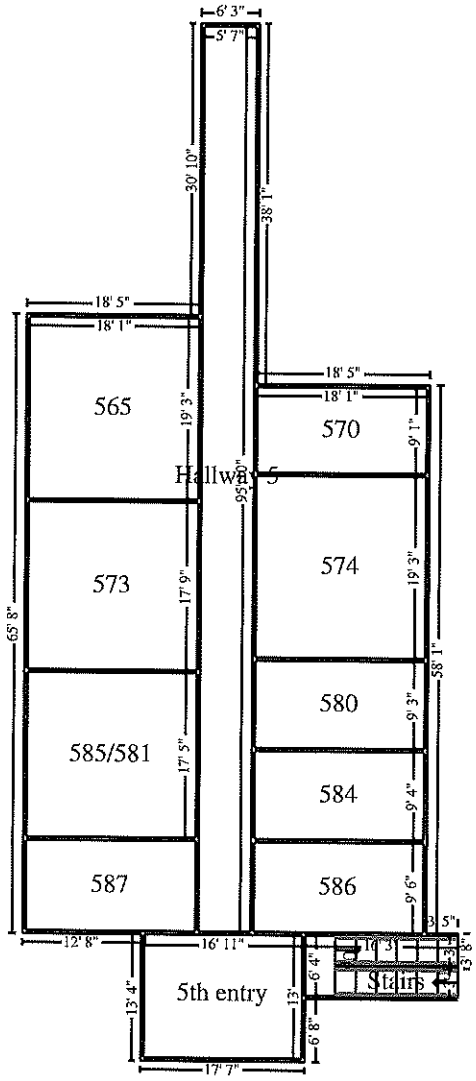
1B Invoice - Page 18 of 19



N

4th floor

1B Invoice - Page 19 of 19



N

5th floo

AP/PO PeopleSoft Web Applications

Payment details for voucher: 82920624

Voucher ID	Vendor ID	Remit LOC	Vendor Name	Gross Voucher Amt.	Payment Handling Code
82920624	0000639859	002	Servpro	$30,790.53	AC

Payment Status	Payment Information	Invoice #	Invoice Date	Remit to	Amt From Voucher
PAID	ACH:576995 Dt: 05/25/2018 Amt: $63,154.77	20171618	02/13/2018	Detail	$30,790.53

New Payment Search
AP-PO Web Applications Home Page
Self-Service

(WALTERSC) Logoff

Accounts Payable / Purchasing is a department in the Finance and Operations organization.
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Please direct inquires regarding using this application to acntpay@uiowa.edu

Invoice

7555 University Ave
Clive, IA 50325

Date	Invoice #
3/16/2018	CR-1790

Bill To
University of Iowa Stephanie Rourke 200 University Services Building Iowa City, IA 52242 USA

Remit Payment To:
ServiceMaster by Rice 7555 University Ave Clive, IA 50325 515-274-9109

REP	Job #
NET 15 DAYS	17-905-WTR

Quantity	Description	Rate	Amount
	WATER RESTORATION	13,522.54	13,522.54
	Haul Debris	253.00	253.00
	Roto Rooter	802.50	802.50
	Furniture Cleaning	550.38	550.38
	FANS/DEHUMIDIFIERS	12,713.56	12,713.56
	CARPET CLEANING	725.20	725.20
	MATERIALS	246.27	246.27
	University of Iowa Receiving 55 Newton Rd. Iowa City, IA 52241		
	Sales Tax -- IA/Polk County	6.00%	0.00
	Thank you for your business!! Pay online at: www.servicemasterbyrice.com		

Total	$28,813.45
Payments/Credits	$0.00
Balance Due	$28,813.45

We can not accept Credit Card payments for Invoices over $5000.

ServiceMaster By Rice

ServiceMaster by Rice
915 Blairs Ferry Rd
Marion, IA 52302
319-365-9265
TAX ID # 42-1229263

Insured:	University of Iowa Receiving MRF	Business:	(319) 310-3588
Property:	55 Newton Rd Iowa City, IA 52241		
Business:	55 Newton Rd Iowa City, IA 52241		
Billing:	200 University Services Building Iowa City, IA 52240		
Claim Rep.:	Unknown		
Estimator:	Christopher A. Johnson	Cellular:	(319) 531-4673
Company:	ServiceMaster by Rice	E-mail:	chrisj@smbyrice.com
Business:	915 Blairsferry Road Marion, IA 52302		

Claim Number: NA **Policy Number:** NA **Type of Loss:** Water Damage

Date Contacted:	1/1/2018 12:35 AM		
Date of Loss:	1/1/2018 12:00 AM	Date Received:	1/1/2018 12:35 AM
Date Inspected:	1/1/2018 1:20 AM	Date Entered:	2/22/2018 9:01 AM
Price List:	IACR8X_JAN18 Restoration/Service/Remodel		
Estimate:	UOFI-RECEIVING-17905		

Dear Tom,

Attached you will find the billing for the water mitigation services that we performed at the property at 55 Newton Rd on New Years Day. Please feel free to call or e-mail me anytime with any questions or concerns in regards to this billing. We thank you for your business.

Christopher A. Johnson
ServiceMaster by Rice
Regional Manager 319 531 4673
915 Blairsferry Road
Marion, Iowa 52302
chrisj@smbyrice.com
Office 319-365-9265
Fax 319-365-2913

ServiceMaster By Rice

ServiceMaster by Rice
915 Blairs Ferry Rd
Marion, IA 52302
319-365-9265
TAX ID # 42-1229263

UOFI-RECEIVING-17905

UOFI-RECEIVING-17905

DESCRIPTION	QTY	REMOVE	REPLACE	TAX	TOTAL
1. Haul debris - per pickup truck load - including dump fees	2.00 EA	126.50	0.00	0.00	253.00
2. Emergency service call - after business hours	1.00 EA	0.00	182.16	0.00	182.16
3. Equipment setup, take down, and monitoring (hourly charge)	3.50 HR	0.00	43.79	0.00	153.27
1/2/18-Set up and monitor equipment					
4. Equipment setup, take down, and monitoring (hourly charge)	3.50 HR	0.00	43.79	0.00	153.27
1/3/18-Monitor and reset drying equipment					
5. Equip. setup, take down & monitoring - after hrs	3.50 HR	0.00	65.75	0.00	230.13
1/4/18- Monitor and reset drying equipment.					
6. Equip. setup, take down & monitoring - after hrs	3.50 HR	0.00	65.75	0.00	230.13
1/5/18- Monitor and reset drying equipment.					
7. Equip. setup, take down & monitoring - after hrs	3.50 HR	0.00	65.75	0.00	230.13
1/6/18- Monitor and reset drying equipment after hours					
8. Equip. setup, take down & monitoring - after hrs	3.50 HR	0.00	65.75	0.00	230.13
1/7/18- Monitor and reset drying equipment after hours .					
9. Equipment setup, take down, and monitoring (hourly charge)	3.50 HR	0.00	43.79	0.00	153.27
1/8/18 Cost to monitor and reset drying equipment.					
10. Equipment setup, take down, and monitoring (hourly charge)	3.50 HR	0.00	43.79	0.00	153.27
1/9/18 Cost to monitor and reset drying equipment.					
11. Equipment setup, take down, and monitoring (hourly charge)	3.50 HR	0.00	43.79	0.00	153.27
1/10/18 Cost to monitor and reset drying equipment.					
12. Equipment setup, take down, and monitoring (hourly charge)	3.50 HR	0.00	43.79	0.00	153.27
1/11/18 Cost to monitor and remove all drying equipment.					
Total: UOFI-RECEIVING-17905				0.00	2,275.30

Elevator

ServiceMaster By Rice

ServiceMaster by Rice
915 Blairs Ferry Rd
Marion, IA 52302
319-365-9265
TAX ID # 42-1229263

CONTINUED - Elevator

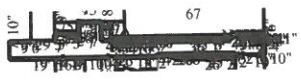
DESCRIPTION	QTY	REMOVE	REPLACE	TAX	TOTAL
13. Elevator water removal and cleaning	1.00 EA	0.00	963.00	0.00	963.00
Cost to remove all of the water and sanitize the elevator shaft.					
Totals: Elevator				0.00	963.00

Basement

Basement

DESCRIPTION	QTY	REMOVE	REPLACE	TAX	TOTAL
14. Peel & seal zipper	1.00 EA	0.00	12.24	0.51	12.75
15. Containment Barrier/Airlock/Decon. Chamber	100.00 SF	0.00	0.82	0.42	82.42
16. Content Manipulation charge - per hour - after hours	4.00 HR	0.00	50.31	0.00	201.24
17. Air mover (per 24 hour period) - No monitoring	60.00 EA	0.00	26.31	0.00	1,578.60
10 Air movers @ 6 days each					
18. Dehumidifier (per 24 hour period) - Large - No monitoring	18.00 EA	0.00	73.17	0.00	1,317.06
3 Evolution dehumidifiers @ 6 days each.					
Total: Basement				0.93	3,192.07

Hallway **Height: 8'**



1,937.18 SF Walls	890.68 SF Ceiling
2,827.86 SF Walls & Ceiling	890.68 SF Floor
98.96 SY Flooring	240.58 LF Floor Perimeter
249.99 LF Ceil. Perimeter	

Missing Wall - Goes to Floor **9' 5" X 6' 8"** **Opens into ROOM4**

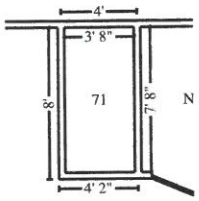
DESCRIPTION	QTY	REMOVE	REPLACE	TAX	TOTAL
19. Water extract from hrd surf flr - Cat 2 wtr - aft bus hrs	890.68 SF	0.00	0.58	0.00	516.59
20. Apply anti-microbial agent to the floor - after hours	890.68 SF	0.00	0.28	1.60	250.99
21. Remove Acoustic ceiling tile	108.00 SF	0.56	0.00	0.00	60.48
22. Clean floor	425.00 SF	0.00	0.31	0.00	131.75

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915 Blairs Ferry Rd
Marion, IA 52302
319-365-9265
TAX ID # 42-1229263

CONTINUED - Hallway

DESCRIPTION	QTY	REMOVE	REPLACE	TAX	TOTAL
23. Clean the walls	1,937.18 SF	0.00	0.26	1.16	504.83
Totals: Hallway				2.76	1,464.64

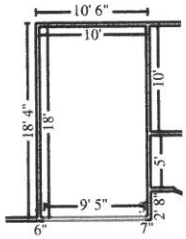


71 — **Height: 8'**

181.01 SF Walls
208.97 SF Walls & Ceiling
3.11 SY Flooring
22.63 LF Ceil. Perimeter

27.96 SF Ceiling
27.96 SF Floor
22.63 LF Floor Perimeter

DESCRIPTION	QTY	REMOVE	REPLACE	TAX	TOTAL
24. Water extract from hard surf flr - Cat 3 wtr - aft bus hrs	27.96 SF	0.00	1.09	0.00	30.48
25. Apply anti-microbial agent to the floor - after hours	27.96 SF	0.00	0.28	0.05	7.88
26. Clean floor	27.96 SF	0.00	0.31	0.00	8.67
Totals: 71				0.05	47.03



Room4 — **Height: 8'**

385.22 SF Walls
565.22 SF Walls & Ceiling
20.00 SY Flooring
56.00 LF Ceil. Perimeter

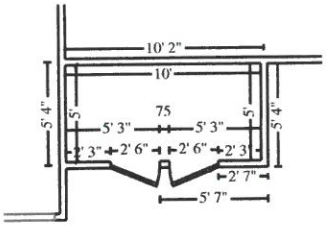
180.00 SF Ceiling
180.00 SF Floor
46.58 LF Floor Perimeter

Missing Wall - Goes to Floor **9' 5" X 6' 8"** **Opens into HALLWAY**

DESCRIPTION	QTY	REMOVE	REPLACE	TAX	TOTAL
27. Water extract from hard surf flr - Cat 3 wtr - aft bus hrs	180.00 SF	0.00	1.09	0.00	196.20
28. Apply anti-microbial agent to the floor - after hours	180.00 SF	0.00	0.28	0.32	50.72
29. Clean floor	180.00 SF	0.00	0.31	0.00	55.80
Totals: Room4				0.32	302.72

ServiceMaster By Rice

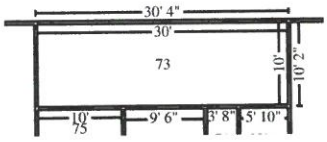
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915 Blairs Ferry Rd
Marion, IA 52302
319-365-9265
TAX ID # 42-1229263



75 — **Height: 8'**

240.04 SF Walls	50.01 SF Ceiling
290.06 SF Walls & Ceiling	50.01 SF Floor
5.56 SY Flooring	30.01 LF Floor Perimeter
30.01 LF Ceil. Perimeter	

DESCRIPTION	QTY	REMOVE	REPLACE	TAX	TOTAL
30. Water extract from carpeted floor - Cat 2 wtr- aft bus hrs	50.01 SF	0.00	1.08	0.00	54.01
31. Apply anti-microbial agent to the floor - after hours	50.01 SF	0.00	0.28	0.09	14.09
32. Peel & seal zipper	1.00 EA	0.00	11.18	0.51	11.69
33. Protect contents - Cover with plastic	200.00 SF	0.00	0.19	0.72	38.72
34. Vacuuming - (PER SF)	50.01 SF	0.00	0.06	0.00	3.00
35. Clean and deodorize carpet	50.01 SF	0.00	0.34	0.03	17.03
Totals: 75				1.35	138.54



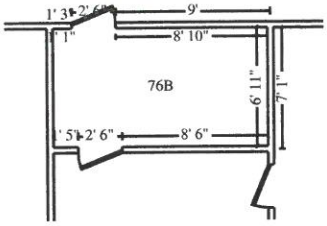
73 — **Height: 8'**

640.00 SF Walls	300.00 SF Ceiling
940.00 SF Walls & Ceiling	300.00 SF Floor
33.33 SY Flooring	80.00 LF Floor Perimeter
80.00 LF Ceil. Perimeter	

DESCRIPTION	QTY	REMOVE	REPLACE	TAX	TOTAL
36. Water extract from hard surf flr - Cat 3 wtr - aft bus hrs	300.00 SF	0.00	1.09	0.00	327.00
37. Apply anti-microbial agent to the floor - after hours	300.00 SF	0.00	0.28	0.54	84.54
38. Clean floor	300.00 SF	0.00	0.31	0.00	93.00
Totals: 73				0.54	504.54

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Marion, IA 52302
319-365-9265
TAX ID # 42-1229263

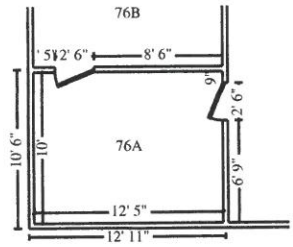


76B **Height: 8'**

309.33 SF Walls
395.22 SF Walls & Ceiling
9.54 SY Flooring
38.67 LF Ceil. Perimeter

85.88 SF Ceiling
85.88 SF Floor
38.67 LF Floor Perimeter

DESCRIPTION	QTY	REMOVE	REPLACE	TAX	TOTAL
39. Water extract from carpeted floor - Cat 2 wtr- aft bus hrs	85.88 SF	0.00	1.08	0.00	92.75
40. Apply anti-microbial agent to the floor - after hours	85.88 SF	0.00	0.28	0.15	24.20
41. Remove Acoustic ceiling tile	8.00 SF	0.56	0.00	0.00	4.48
42. Vacuuming - (PER SF)	85.88 SF	0.00	0.06	0.00	5.15
43. Clean and deodorize carpet	85.88 SF	0.00	0.34	0.05	29.25
Totals: 76B				0.20	155.83



76A **Height: 8'**

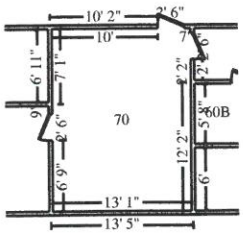
358.63 SF Walls
482.77 SF Walls & Ceiling
13.79 SY Flooring
44.83 LF Ceil. Perimeter

124.14 SF Ceiling
124.14 SF Floor
44.83 LF Floor Perimeter

DESCRIPTION	QTY	REMOVE	REPLACE	TAX	TOTAL
44. Water extract from hrd surf flr - Cat 2 wtr - aft bus hrs	62.00 SF	0.00	0.58	0.00	35.96
45. Apply anti-microbial agent to the floor - after hours	124.14 SF	0.00	0.28	0.22	34.98
46. Clean floor	124.14 SF	0.00	0.31	0.00	38.48
Totals: 76A				0.22	109.42

ServiceMaster By Rice

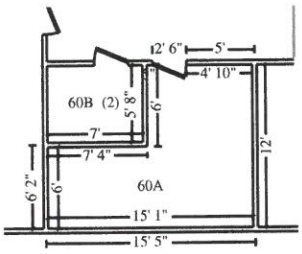
ServiceMaster by Rice
915 Blairs Ferry Rd
Marion, IA 52302
319-365-9265
TAX ID # 42-1229263



70 **Height: 8'**

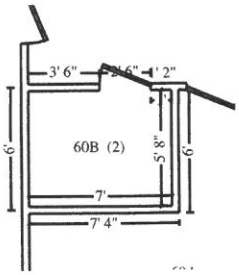
485.33 SF Walls	225.69 SF Ceiling
711.02 SF Walls & Ceiling	225.69 SF Floor
25.08 SY Flooring	60.67 LF Floor Perimeter
60.67 LF Ceil. Perimeter	

DESCRIPTION	QTY	REMOVE	REPLACE	TAX	TOTAL
47. Water extract from hrd surf flr - Cat 2 wtr - aft bus hrs	225.69 SF	0.00	0.58	0.00	130.90
48. Apply anti-microbial agent to the floor - after hours	225.69 SF	0.00	0.28	0.41	63.60
49. Clean floor	225.69 SF	0.00	0.31	0.00	69.96
Totals: 70				0.41	264.46



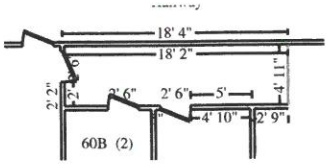
60A **Height: 8'**

432.98 SF Walls	136.88 SF Ceiling
569.87 SF Walls & Ceiling	136.88 SF Floor
15.21 SY Flooring	54.12 LF Floor Perimeter
54.12 LF Ceil. Perimeter	



Subroom: 60B (2) **Height: 8'**

202.28 SF Walls	39.53 SF Ceiling
241.81 SF Walls & Ceiling	39.53 SF Floor
4.39 SY Flooring	25.29 LF Floor Perimeter
25.29 LF Ceil. Perimeter	



Subroom: Room3 (1) **Height: 8'**

329.65 SF Walls	89.21 SF Ceiling
418.86 SF Walls & Ceiling	89.21 SF Floor
9.91 SY Flooring	41.21 LF Floor Perimeter
41.21 LF Ceil. Perimeter	

Missing Wall **4' 11" X 8'** **Opens into ROOM5**

ServiceMaster By Rice

ServiceMaster by Rice
915 Blairs Ferry Rd
Marion, IA 52302
319-365-9265
TAX ID # 42-1229263

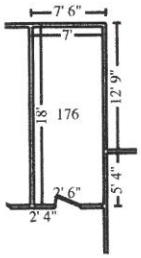
CONTINUED - 60A

DESCRIPTION	QTY	REMOVE	REPLACE	TAX	TOTAL
50. Water extract from hrd surf flr - Cat 2 wtr - aft bus hrs	265.62 SF	0.00	0.58	0.00	154.06
51. Apply anti-microbial agent to the floor - after hours	265.62 SF	0.00	0.28	0.48	74.85
52. Remove Acoustic ceiling tile	28.00 SF	0.56	0.00	0.00	15.68
53. Clean floor	265.62 SF	0.00	0.31	0.00	82.34
Totals: 60A				0.48	326.93
Total: Basement				**7.26**	**6,506.18**

First floor

First floor

DESCRIPTION	QTY	REMOVE	REPLACE	TAX	TOTAL
54. Content Manipulation charge - per hour - after hours	4.00 HR	0.00	50.31	0.00	201.24
55. Air mover (per 24 hour period) - No monitoring	90.00 EA	0.00	26.31	0.00	2,367.90
15 Air movers @ 6 days each.					
56. Dehumidifier (per 24 hour period) - Large - No monitoring	24.00 EA	0.00	73.17	0.00	1,756.08
Four Evolution dehumidifiers @ 6 days each.					
57. Dehumidifier (per 24 hour period) - XLarge - No monitoring	6.00 EA	0.00	101.25	0.00	607.50
1 LGR dehumidifier @ 6 days.					
Total: First floor				0.00	4,932.72



176 **Height: 8'**

399.41 SF Walls	125.74 SF Ceiling
525.16 SF Walls & Ceiling	125.74 SF Floor
13.97 SY Flooring	49.93 LF Floor Perimeter
49.93 LF Ceil. Perimeter	

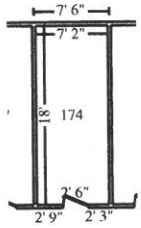
DESCRIPTION	QTY	REMOVE	REPLACE	TAX	TOTAL
58. Water extract from hrd surf flr - Cat 2 wtr - aft bus hrs	125.74 SF	0.00	0.58	0.00	72.93

ServiceMaster By Rice

ServiceMaster by Rice
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Marion, IA 52302
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TAX ID # 42-1229263

CONTINUED - 176

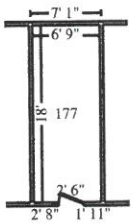
DESCRIPTION	QTY	REMOVE	REPLACE	TAX	TOTAL
59. Apply anti-microbial agent to the floor - after hours	125.74 SF	0.00	0.28	0.23	35.44
60. Remove Acoustic ceiling tile	16.00 SF	0.56	0.00	0.00	8.96
61. Remove Cove base molding - rubber or vinyl, 4" high	25.00 LF	0.27	0.00	0.00	6.75
62. Clean floor	125.74 SF	0.00	0.31	0.00	38.98
Totals: 176				0.23	163.06



174 — **Height: 8'**

402.08 SF Walls	128.74 SF Ceiling
530.82 SF Walls & Ceiling	128.74 SF Floor
14.30 SY Flooring	50.26 LF Floor Perimeter
50.26 LF Ceil. Perimeter	

DESCRIPTION	QTY	REMOVE	REPLACE	TAX	TOTAL
63. Water extract from carpeted floor - Cat 2 wtr- aft bus hrs	128.74 SF	0.00	1.08	0.00	139.04
64. Apply anti-microbial agent to the floor - after hours	128.74 SF	0.00	0.28	0.23	36.28
65. Remove Acoustic ceiling tile	24.00 SF	0.56	0.00	0.00	13.44
66. Remove Cove base molding - rubber or vinyl, 4" high	50.00 LF	0.27	0.00	0.00	13.50
67. Clean floor	128.74 SF	0.00	0.31	0.00	39.91
Totals: 174				0.23	242.17



177 — **Height: 8'**

395.41 SF Walls	121.25 SF Ceiling
516.67 SF Walls & Ceiling	121.25 SF Floor
13.47 SY Flooring	49.43 LF Floor Perimeter
49.43 LF Ceil. Perimeter	

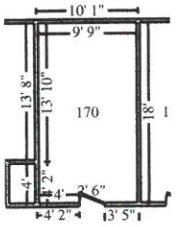
DESCRIPTION	QTY	REMOVE	REPLACE	TAX	TOTAL

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Marion, IA 52302
319-365-9265
TAX ID # 42-1229263

CONTINUED - 177

DESCRIPTION	QTY	REMOVE	REPLACE	TAX	TOTAL
68. Water extract from hrd surf flr - Cat 2 wtr - aft bus hrs	121.25 SF	0.00	0.58	0.00	70.33
69. Apply anti-microbial agent to the floor - after hours	121.25 SF	0.00	0.28	0.22	34.17
70. Clean floor	121.25 SF	0.00	0.31	0.00	37.59
Totals: 177				0.22	142.09

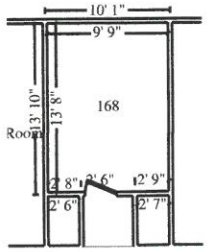


Hallway

170 — **Height: 8'**

443.41 SF Walls	175.14 SF Ceiling
618.56 SF Walls & Ceiling	175.14 SF Floor
19.46 SY Flooring	55.43 LF Floor Perimeter
55.43 LF Ceil. Perimeter	

DESCRIPTION	QTY	REMOVE	REPLACE	TAX	TOTAL
71. Water extract from hrd surf flr - Cat 2 wtr - aft bus hrs	175.14 SF	0.00	0.58	0.00	101.58
72. Apply anti-microbial agent to the floor - after hours	175.14 SF	0.00	0.28	0.32	49.36
73. Remove Acoustic ceiling tile	36.00 SF	0.56	0.00	0.00	20.16
74. Clean floor	175.14 SF	0.00	0.31	0.00	54.29
Totals: 170				0.32	225.39



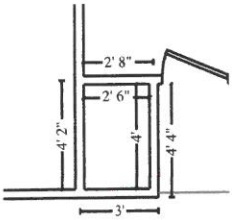
168 — **Height: 8'**

374.67 SF Walls	133.25 SF Ceiling
507.92 SF Walls & Ceiling	133.25 SF Floor
14.81 SY Flooring	46.83 LF Floor Perimeter
46.83 LF Ceil. Perimeter	

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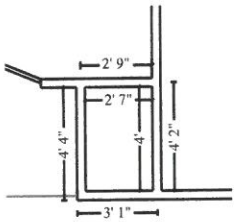
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CONTINUED - 168



Subroom: Room2 (1) **Height: 8'**

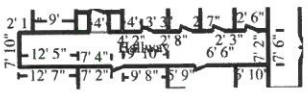
103.41 SF Walls	9.91 SF Ceiling
113.32 SF Walls & Ceiling	9.91 SF Floor
1.10 SY Flooring	12.93 LF Floor Perimeter
12.93 LF Ceil. Perimeter	



Subroom: Room3 (3) **Height: 8'**

104.75 SF Walls	10.24 SF Ceiling
114.99 SF Walls & Ceiling	10.24 SF Floor
1.14 SY Flooring	13.09 LF Floor Perimeter
13.09 LF Ceil. Perimeter	

DESCRIPTION	QTY	REMOVE	REPLACE	TAX	TOTAL
75. Water extract from hrd surf flr - Cat 2 wtr - aft bus hrs	153.40 SF	0.00	0.58	0.00	88.97
76. Apply anti-microbial agent to the floor - after hours	153.40 SF	0.00	0.28	0.28	43.23
77. Clean floor	153.40 SF	0.00	0.31	0.00	47.55
Totals: 168				0.28	179.75



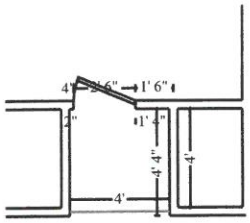
Hallway **Height: 8'**

946.68 SF Walls	387.71 SF Ceiling
1,334.39 SF Walls & Ceiling	387.71 SF Floor
43.08 SY Flooring	118.33 LF Floor Perimeter
118.33 LF Ceil. Perimeter	

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915 Blairs Ferry Rd
Marion, IA 52302
319-365-9265
TAX ID # 42-1229263

CONTINUED - Hallway

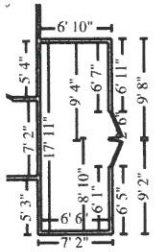


Subroom: Room1 (1) **Height: 8'**

100.75 SF Walls	16.52 SF Ceiling
117.27 SF Walls & Ceiling	16.52 SF Floor
1.84 SY Flooring	12.59 LF Floor Perimeter
12.59 LF Ceil. Perimeter	

Missing Wall **4' X 8'** **Opens into HALLWAY**

DESCRIPTION	QTY	REMOVE	REPLACE	TAX	TOTAL
78. Water extract from hrd surf flr - Cat 2 wtr - aft bus hrs	404.23 SF	0.00	0.58	0.00	234.45
79. Apply anti-microbial agent to the floor - after hours	404.23 SF	0.00	0.28	0.73	113.91
80. Remove Acoustic ceiling tile	80.00 SF	0.56	0.00	0.00	44.80
81. Clean floor	404.23 SF	0.00	0.31	0.00	125.31
82. Clean the walls	1,047.43 SF	0.00	0.26	0.63	272.96
Totals: Hallway				1.36	791.43



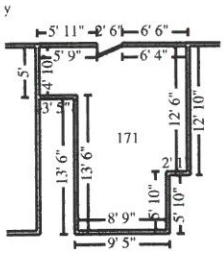
Room4 **Height: 8'**

390.67 SF Walls	116.46 SF Ceiling
507.13 SF Walls & Ceiling	116.46 SF Floor
12.94 SY Flooring	48.83 LF Floor Perimeter
48.83 LF Ceil. Perimeter	

DESCRIPTION	QTY	REMOVE	REPLACE	TAX	TOTAL
83. Water extract from hrd surf flr - Cat 2 wtr - aft bus hrs	116.46 SF	0.00	0.58	0.00	67.55
84. Apply anti-microbial agent to the floor - after hours	116.46 SF	0.00	0.28	0.21	32.82
85. Clean floor	116.46 SF	0.00	0.31	0.00	36.10
Totals: Room4				0.21	136.47

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Marion, IA 52302
319-365-9265
TAX ID # 42-1229263



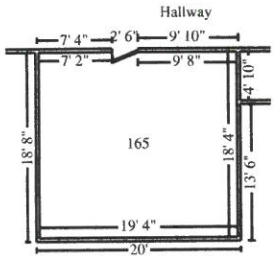
171

Height: 8'

526.68 SF Walls
731.26 SF Walls & Ceiling
22.73 SY Flooring
65.83 LF Ceil. Perimeter

204.59 SF Ceiling
204.59 SF Floor
65.83 LF Floor Perimeter

DESCRIPTION	QTY	REMOVE	REPLACE	TAX	TOTAL
86. Water extract from hrd surf flr - Cat 2 wtr - aft bus hrs	204.59 SF	0.00	0.58	0.00	118.66
87. Apply anti-microbial agent to the floor - after hours	204.59 SF	0.00	0.28	0.37	57.66
88. Clean floor	204.59 SF	0.00	0.31	0.00	63.42
Totals: 171				0.37	239.74



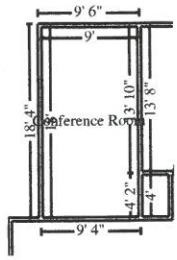
165

Height: 8'

602.49 SF Walls
956.74 SF Walls & Ceiling
39.36 SY Flooring
75.31 LF Ceil. Perimeter

354.24 SF Ceiling
354.24 SF Floor
75.31 LF Floor Perimeter

DESCRIPTION	QTY	REMOVE	REPLACE	TAX	TOTAL
89. Water extract from hrd surf flr - Cat 2 wtr - aft bus hrs	354.24 SF	0.00	0.58	0.00	205.46
90. Apply anti-microbial agent to the floor - after hours	354.24 SF	0.00	0.28	0.64	99.83
91. Clean floor	354.24 SF	0.00	0.31	0.00	109.81
Totals: 165				0.64	415.10



Conference Room

Height: 8'

431.41 SF Walls
593.08 SF Walls & Ceiling
17.96 SY Flooring
53.93 LF Ceil. Perimeter

161.67 SF Ceiling
161.67 SF Floor
53.93 LF Floor Perimeter

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Marion, IA 52302
319-365-9265
TAX ID # 42-1229263

CONTINUED - Conference Room

DESCRIPTION	QTY	REMOVE	REPLACE	TAX	TOTAL
92. Water extract from carpeted floor - Cat 2 wtr- aft bus hrs	161.67 SF	0.00	1.08	0.00	174.60
93. Apply anti-microbial agent to the floor - after hours	161.67 SF	0.00	0.28	0.29	45.56
94. Clean floor	161.67 SF	0.00	0.31	0.00	50.12
Totals: Conference Room				0.29	270.28
Total: First floor				**4.15**	**7,738.20**

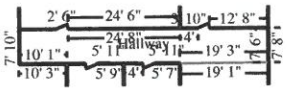
2nd floor

2nd floor

DESCRIPTION	QTY	REMOVE	REPLACE	TAX	TOTAL
95. Content Manipulation charge - per hour - after hours	4.00 HR	0.00	50.31	0.00	201.24
96. Peel & seal zipper	1.00 EA	0.00	11.18	0.51	11.69
97. Containment Barrier/Airlock/Decon. Chamber	61.00 SF	0.00	0.82	0.26	50.28
98. Protect contents - Cover with plastic	200.00 SF	0.00	0.19	0.72	38.72
99. Cleaning Technician - per hour	8.00 HR	0.00	30.86	0.00	246.88
Cleaning of the surfaces and desks in the offices affected.					
100. Air mover (per 24 hour period) - No monitoring	87.00 EA	0.00	26.31	0.00	2,288.97
One air movers at 9 days, two air movers at 8 days and eight air movers at 7 days.					
101. Air mover axial fan (per 24 hour period) - No monitoring	7.00 EA	0.00	29.89	0.00	209.23
One axial air mover at seven days.					
102. Dehumidifier (per 24 hour period) - Large - No monitoring	16.00 EA	0.00	73.17	0.00	1,170.72
One Evolution dehumidifier at 9 days and one Evolution dehumidifier at 7 days.					
103. Dehumidifier (per 24 hour period) - XLarge - No monitoring	14.00 EA	0.00	101.25	0.00	1,417.50
One LGR dehumidifier at 7 days.					
Total: 2nd floor				1.49	5,635.23

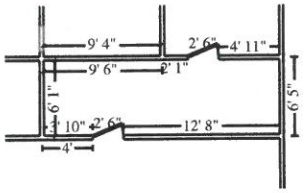
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TAX ID # 42-1229263



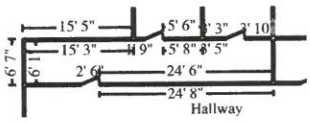
Hallway — **Height: 8'**

834.05 SF Walls	402.95 SF Ceiling
1,236.99 SF Walls & Ceiling	402.95 SF Floor
44.77 SY Flooring	104.26 LF Floor Perimeter
104.26 LF Ceil. Perimeter	



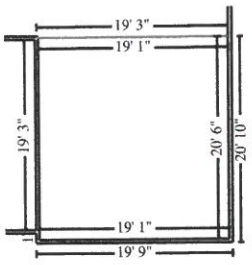
Subroom: Room1 (1) — **Height: 8'**

401.39 SF Walls	115.61 SF Ceiling
517.00 SF Walls & Ceiling	115.61 SF Floor
12.85 SY Flooring	50.17 LF Floor Perimeter
50.17 LF Ceil. Perimeter	



Subroom: Room2 (2) — **Height: 8'**

656.04 SF Walls	212.42 SF Ceiling
868.46 SF Walls & Ceiling	212.42 SF Floor
23.60 SY Flooring	82.00 LF Floor Perimeter
82.00 LF Ceil. Perimeter	



Subroom: Room4 (3) — **Height: 8'**

481.37 SF Walls	390.53 SF Ceiling
871.90 SF Walls & Ceiling	390.53 SF Floor
43.39 SY Flooring	60.17 LF Floor Perimeter
60.17 LF Ceil. Perimeter	

Missing Wall — **19' 1 1/16" X 8'** — **Opens into HALLWAY**

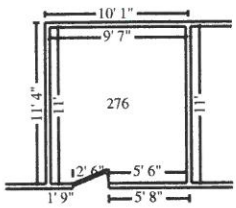
DESCRIPTION	QTY	REMOVE	REPLACE	TAX	TOTAL
104. Water extract carpeted flr - Cat 2 wtr - Hvy- aft bus. hrs	1,121.51 SF	0.00	1.28	0.00	1,435.53
105. Apply anti-microbial agent to the floor - after hours	1,121.51 SF	0.00	0.28	2.02	316.04
106. Drill holes for wall cavity drying	70.00 EA	0.00	0.41	0.00	28.70
107. Remove Cove base molding - rubber or vinyl, 4" high	296.61 LF	0.27	0.00	0.00	80.08

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Marion, IA 52302
319-365-9265
TAX ID # 42-1229263

CONTINUED - Hallway

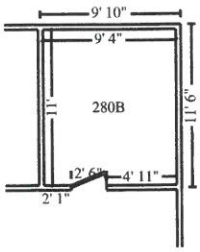
DESCRIPTION	QTY	REMOVE	REPLACE	TAX	TOTAL
108. Remove Acoustic ceiling tile	116.00 SF	0.56	0.00	0.00	64.96
109. Clean the walls	2,372.85 SF	0.00	0.26	1.42	618.36
110. Vacuuming - (PER SF)	1,121.51 SF	0.00	0.06	0.00	67.29
111. Clean and deodorize carpet	1,121.51 SF	0.00	0.34	0.67	381.98
112. Clean office chair	13.00 EA	0.00	30.63	1.04	399.23
113. Clean upholstered cubicle panels - on site	215.00 SF	0.00	0.70	0.65	151.15
Totals: Hallway				5.80	3,543.32



276 **Height: 8'**

328.73 SF Walls	105.00 SF Ceiling
433.73 SF Walls & Ceiling	105.00 SF Floor
11.67 SY Flooring	41.09 LF Floor Perimeter
41.09 LF Ceil. Perimeter	

DESCRIPTION	QTY	REMOVE	REPLACE	TAX	TOTAL
114. Water extract from carpeted floor - Cat 2 wtr- aft bus hrs	105.00 SF	0.00	1.08	0.00	113.40
115. Apply anti-microbial agent to the floor - after hours	105.00 SF	0.00	0.28	0.19	29.59
116. Remove Cove base molding - rubber or vinyl, 4" high	14.00 LF	0.27	0.00	0.00	3.78
117. Vacuuming - (PER SF)	105.00 SF	0.00	0.06	0.00	6.30
118. Clean and deodorize carpet	105.00 SF	0.00	0.34	0.06	35.76
Totals: 276				0.25	188.83



280B **Height: 8'**

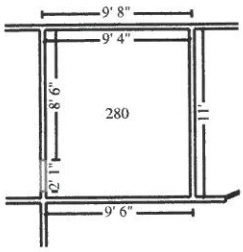
325.39 SF Walls	102.71 SF Ceiling
428.10 SF Walls & Ceiling	102.71 SF Floor
11.41 SY Flooring	40.67 LF Floor Perimeter
40.67 LF Ceil. Perimeter	

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915 Blairs Ferry Rd
Marion, IA 52302
319-365-9265
TAX ID # 42-1229263

CONTINUED - 280B

DESCRIPTION	QTY	REMOVE	REPLACE	TAX	TOTAL
119. Water extract from carpeted floor - Cat 2 wtr- aft bus hrs	102.71 SF	0.00	1.08	0.00	110.93
120. Apply anti-microbial agent to the floor - after hours	102.71 SF	0.00	0.28	0.18	28.94
121. Remove Acoustic ceiling tile	20.00 SF	0.56	0.00	0.00	11.20
122. Remove Cove base molding - rubber or vinyl, 4" high	40.67 LF	0.27	0.00	0.00	10.98
123. Drill holes for wall cavity drying	21.00 EA	0.00	0.41	0.00	8.61
124. Vacuuming - (PER SF)	102.71 SF	0.00	0.06	0.00	6.16
125. Clean and deodorize carpet	102.71 SF	0.00	0.34	0.06	34.98
Totals: 280B				0.24	211.80



280 **Height: 8'**

311.41 SF Walls
414.06 SF Walls & Ceiling
11.41 SY Flooring
40.66 LF Ceil. Perimeter

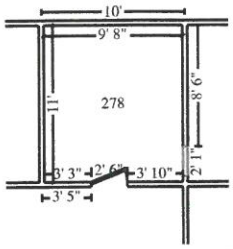
102.65 SF Ceiling
102.65 SF Floor
38.58 LF Floor Perimeter

Missing Wall - Goes to Floor **2' 1" X 6' 8"** **Opens into DEF_278**

DESCRIPTION	QTY	REMOVE	REPLACE	TAX	TOTAL
126. Water extract from carpeted floor - Cat 2 wtr- aft bus hrs	102.65 SF	0.00	1.08	0.00	110.86
127. Apply anti-microbial agent to the floor - after hours	102.65 SF	0.00	0.28	0.18	28.92
128. Remove Cove base molding - rubber or vinyl, 4" high	38.58 LF	0.27	0.00	0.00	10.42
129. Remove Acoustic ceiling tile	16.00 SF	0.56	0.00	0.00	8.96
130. Drill holes for wall cavity drying - after hrs	20.00 EA	0.00	0.57	0.00	11.40
131. Tear out wet plaster, cleanup, bag for disposal	32.00 SF	1.64	0.00	0.35	52.83
132. Vacuuming - (PER SF)	102.65 SF	0.00	0.06	0.00	6.16
133. Clean and deodorize carpet	102.65 SF	0.00	0.34	0.06	34.96
Totals: 280				0.59	264.51

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TAX ID # 42-1229263



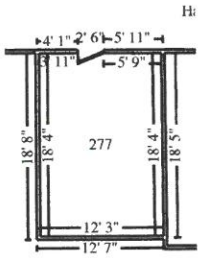
278 **Height: 8'**

316.11 SF Walls
421.99 SF Walls & Ceiling
11.76 SY Flooring
41.25 LF Ceil. Perimeter

105.88 SF Ceiling
105.88 SF Floor
39.17 LF Floor Perimeter

Missing Wall - Goes to Floor **2' 1" X 6' 8"** **Opens into DEF_280**

DESCRIPTION	QTY	REMOVE	REPLACE	TAX	TOTAL
134. Water extract carpeted flr - Cat 2 wtr - Hvy- aft bus. hrs	105.88 SF	0.00	1.28	0.00	135.53
135. Apply anti-microbial agent to the floor - after hours	105.88 SF	0.00	0.28	0.19	29.84
136. Remove Acoustic ceiling tile	8.00 SF	0.56	0.00	0.00	4.48
137. Remove Cove base molding - rubber or vinyl, 4" high	15.00 LF	0.27	0.00	0.00	4.05
138. Vacuuming - (PER SF)	105.88 SF	0.00	0.06	0.00	6.35
139. Clean and deodorize carpet	105.88 SF	0.00	0.34	0.06	36.06
Totals: 278				0.25	216.31



277 **Height: 8'**

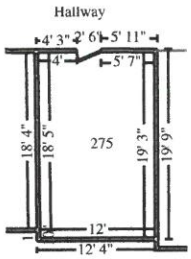
488.00 SF Walls
711.18 SF Walls & Ceiling
24.80 SY Flooring
61.00 LF Ceil. Perimeter

223.18 SF Ceiling
223.18 SF Floor
61.00 LF Floor Perimeter

DESCRIPTION	QTY	REMOVE	REPLACE	TAX	TOTAL
140. Water extract from carpeted floor - Cat 2 wtr- aft bus hrs	223.18 SF	0.00	1.08	0.00	241.03
141. Apply anti-microbial agent to the floor - after hours	223.18 SF	0.00	0.28	0.40	62.89
142. Vacuuming - (PER SF)	223.18 SF	0.00	0.06	0.00	13.39
143. Clean and deodorize carpet	223.18 SF	0.00	0.34	0.13	76.01
Totals: 277				0.53	393.32

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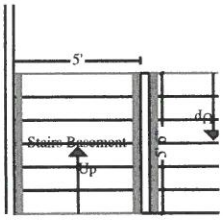


275 — **Height: 8'**

501.31 SF Walls	232.43 SF Ceiling
733.74 SF Walls & Ceiling	232.43 SF Floor
25.83 SY Flooring	62.66 LF Floor Perimeter
62.66 LF Ceil. Perimeter	

DESCRIPTION	QTY	REMOVE	REPLACE	TAX	TOTAL
144. Water extract from carpeted floor - Cat 2 wtr- aft bus hrs	116.00 SF	0.00	1.08	0.00	125.28
145. Apply anti-microbial agent to the floor - after hours	232.43 SF	0.00	0.28	0.42	65.50
146. Remove Acoustic ceiling tile	12.00 SF	0.56	0.00	0.00	6.72
147. Remove Cove base molding - rubber or vinyl, 4" high	20.00 LF	0.27	0.00	0.00	5.40
148. Vacuuming - (PER SF)	232.43 SF	0.00	0.06	0.00	13.95
149. Clean and deodorize carpet	232.43 SF	0.00	0.34	0.14	79.17
Totals: 275				0.56	296.02
Total: 2nd floor				**9.71**	**10,749.34**

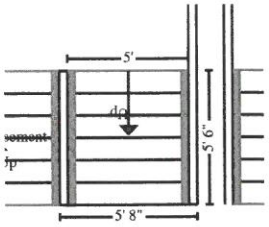
Stairwell



Stairs Basement — **Height: 17'**

162.25 SF Walls	27.50 SF Ceiling
189.75 SF Walls & Ceiling	51.25 SF Floor
5.69 SY Flooring	13.44 LF Floor Perimeter
11.00 LF Ceil. Perimeter	

Missing Wall — **5' X 17'** — **Opens into Exterior**



Subroom: Stairs2 (1) — **Height: 12' 6"**

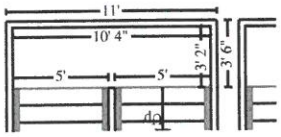
112.75 SF Walls	27.50 SF Ceiling
140.25 SF Walls & Ceiling	51.25 SF Floor
5.69 SY Flooring	13.44 LF Floor Perimeter
11.00 LF Ceil. Perimeter	

Missing Wall — **5' X 12' 6"** — **Opens into LANDING**

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CONTINUED - Stairs Basement



Subroom: Landing (2) **Height: 12' 6"**

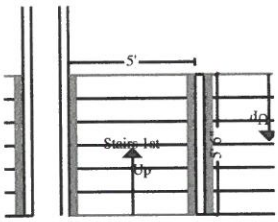
208.33 SF Walls
241.06 SF Walls & Ceiling
3.64 SY Flooring
16.67 LF Ceil. Perimeter

32.72 SF Ceiling
32.72 SF Floor
16.67 LF Floor Perimeter

Missing Wall **5' X 12' 6"** **Opens into STAIRS2**

Missing Wall **5' X 12' 6"** **Opens into STAIRS_BASEM**

DESCRIPTION	QTY	REMOVE	REPLACE	TAX	TOTAL
150. Clean the walls	483.33 SF	0.00	0.26	0.29	125.96
151. Apply anti-microbial agent to the floor	135.22 SF	0.00	0.19	0.24	25.93
152. Clean floor	135.22 SF	0.00	0.31	0.00	41.92
Totals: Stairs Basement				0.53	193.81

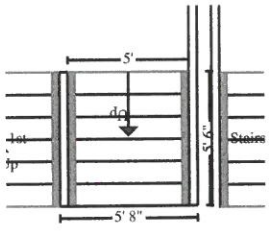


Stairs 1st **Height: 17'**

162.25 SF Walls
189.75 SF Walls & Ceiling
5.69 SY Flooring
11.00 LF Ceil. Perimeter

27.50 SF Ceiling
51.25 SF Floor
13.44 LF Floor Perimeter

Missing Wall **5' X 17'** **Opens into Exterior**



Subroom: Stairs3 (1) **Height: 12' 6"**

112.75 SF Walls
140.25 SF Walls & Ceiling
5.69 SY Flooring
11.00 LF Ceil. Perimeter

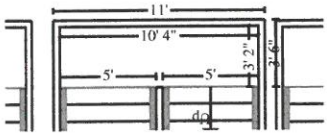
27.50 SF Ceiling
51.25 SF Floor
13.44 LF Floor Perimeter

Missing Wall **5' X 12' 6"** **Opens into LANDING1**

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CONTINUED - Stairs 1st



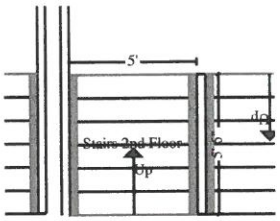
Subroom: Landing1 (2) **Height: 12' 6"**

208.33 SF Walls	32.72 SF Ceiling
241.06 SF Walls & Ceiling	32.72 SF Floor
3.64 SY Flooring	16.67 LF Floor Perimeter
16.67 LF Ceil. Perimeter	

Missing Wall **5' X 12' 6"** **Opens into STAIRS3**

Missing Wall **5' X 12' 6"** **Opens into STAIRS_1ST**

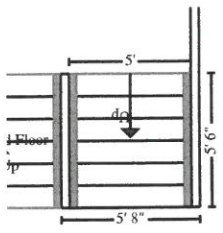
DESCRIPTION	QTY	REMOVE	REPLACE	TAX	TOTAL
153. Clean the walls	483.33 SF	0.00	0.26	0.29	125.96
154. Apply anti-microbial agent to the floor	135.22 SF	0.00	0.19	0.24	25.93
155. Clean floor	135.22 SF	0.00	0.31	0.00	41.92
Totals: Stairs 1st				0.53	193.81



Stairs 2nd Floor **Height: 17'**

162.25 SF Walls	27.50 SF Ceiling
189.75 SF Walls & Ceiling	51.25 SF Floor
5.69 SY Flooring	13.44 LF Floor Perimeter
11.00 LF Ceil. Perimeter	

Missing Wall **5' X 17'** **Opens into Exterior**



Subroom: Stairs5 (1) **Height: 12' 6"**

112.75 SF Walls	27.50 SF Ceiling
140.25 SF Walls & Ceiling	51.25 SF Floor
5.69 SY Flooring	13.44 LF Floor Perimeter
11.00 LF Ceil. Perimeter	

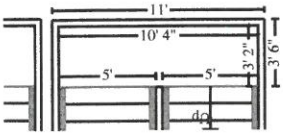
Missing Wall **5' X 12' 6"** **Opens into LANDING2**

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CONTINUED - Stairs 2nd Floor

Subroom: Landing2 (2) **Height: 12' 6"**



208.33 SF Walls	32.72 SF Ceiling
241.06 SF Walls & Ceiling	32.72 SF Floor
3.64 SY Flooring	16.67 LF Floor Perimeter
16.67 LF Ceil. Perimeter	

Missing Wall	**5' X 12' 6"**	**Opens into STAIRS5**
Missing Wall	**5' X 12' 6"**	**Opens into STAIRS_2ND_F**

DESCRIPTION	QTY	REMOVE	REPLACE	TAX	TOTAL
156. Clean the walls	483.33 SF	0.00	0.26	0.29	125.96
157. Apply anti-microbial agent to the floor	135.22 SF	0.00	0.19	0.24	25.93
158. Clean floor	135.22 SF	0.00	0.31	0.00	41.92
Totals: Stairs 2nd Floor				0.53	193.81
Total: Stairwell				**1.59**	**581.43**
Line Item Totals: UOFI-RECEIVING-17905				**22.71**	**28,813.45**

Grand Total Areas:

19,915.62	SF Walls	8,289.86	SF Ceiling	28,205.48	SF Walls and Ceiling
8,432.36	SF Floor	936.93	SY Flooring	2,434.98	LF Floor Perimeter
0.00	SF Long Wall	0.00	SF Short Wall	2,443.37	LF Ceil. Perimeter
8,432.36	Floor Area	8,842.45	Total Area	18,465.62	Interior Wall Area
6,851.13	Exterior Wall Area	761.24	Exterior Perimeter of Walls		
0.00	Surface Area	0.00	Number of Squares	0.00	Total Perimeter Length
0.00	Total Ridge Length	0.00	Total Hip Length		

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Summary for Dwelling

Line Item Total	28,790.74
Material Sales Tax	22.71
Replacement Cost Value	**$28,813.45**
Net Claim	**$28,813.45**

Christopher A. Johnson

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Recap of Taxes

	Material Sales Tax (6%)	Manuf. Home Tax (5%)
Line Items	22.71	0.00
Total	**22.71**	**0.00**

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TAX ID # 42-1229263

Recap by Room

Estimate: UOFI-RECEIVING-17905	**2,275.30**	**7.90%**
Elevator	**963.00**	**3.34%**
Area: Basement	**3,191.14**	**11.08%**
Hallway	**1,461.88**	**5.08%**
71	**46.98**	**0.16%**
Room4	**302.40**	**1.05%**
75	**137.19**	**0.48%**
73	**504.00**	**1.75%**
76B	**155.63**	**0.54%**
76A	**109.20**	**0.38%**
70	**264.05**	**0.92%**
60A	**326.45**	**1.13%**
Area Subtotal: Basement	**6,498.92**	**22.57%**
Area: First floor	**4,932.72**	**17.13%**
176	**162.83**	**0.57%**
174	**241.94**	**0.84%**
177	**141.87**	**0.49%**
170	**225.07**	**0.78%**
168	**179.47**	**0.62%**
Hallway	**790.07**	**2.74%**
Room4	**136.26**	**0.47%**
171	**239.37**	**0.83%**
165	**414.46**	**1.44%**
Conference Room	**269.99**	**0.94%**
Area Subtotal: First floor	**7,734.05**	**26.86%**
Area: 2nd floor	**5,633.74**	**19.57%**
Hallway	**3,537.52**	**12.29%**
276	**188.58**	**0.66%**
280B	**211.56**	**0.73%**
280	**263.92**	**0.92%**
278	**216.06**	**0.75%**
277	**392.79**	**1.36%**
275	**295.46**	**1.03%**
Area Subtotal: 2nd floor	**10,739.63**	**37.30%**
Area: Stairwell		
Stairs Basement	**193.28**	**0.67%**

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TAX ID # 42-1229263

Stairs 1st	**193.28**	**0.67%**
Stairs 2nd Floor	**193.28**	**0.67%**
Area Subtotal: Stairwell	**579.84**	**2.01%**
Subtotal of Areas	**28,790.74**	**100.00%**
Total	**28,790.74**	**100.00%**

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Recap by Category

Items	Total	%
CLEANING	4,077.36	14.15%
CONTENT MANIPULATION	679.72	2.36%
CONT: CLEAN,UPHOLSTRY & SOFT	548.69	1.90%
GENERAL DEMOLITION	704.76	2.45%
HAZARDOUS MATERIAL REMEDIATION	144.26	0.50%
SPECIALTY ITEMS	963.00	3.34%
WATER EXTRACTION & REMEDIATION	21,672.95	75.22%
Subtotal	28,790.74	99.92%
Material Sales Tax	22.71	0.08%
Total	28,813.45	100.00%

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1



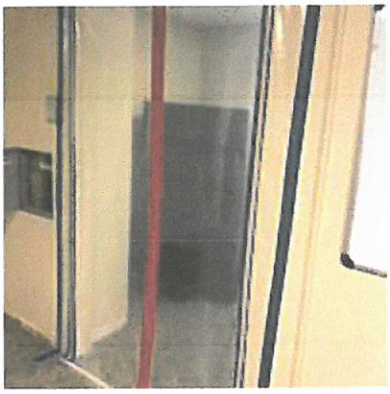
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TAX ID # 42-1229263

9



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TAX ID # 42-1229263

17



18



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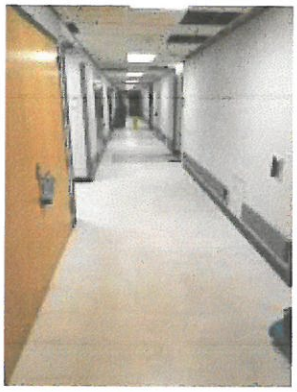
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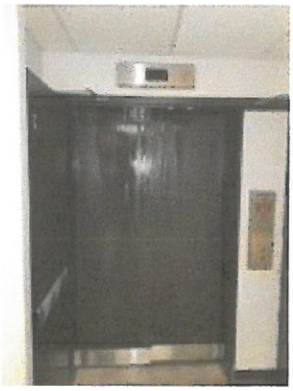
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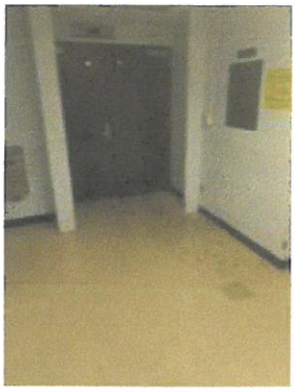
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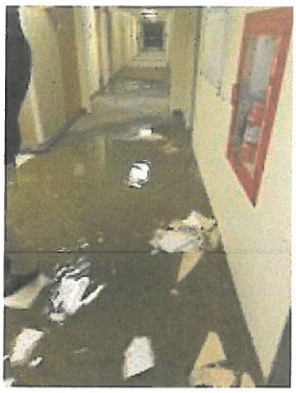
ServiceMaster By Rice

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TAX ID # 42-1229263

33



34



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40



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Image Detail

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3	3-2c23c3af-fec2-48f4-a4ff-f7f00bba8c36		
4	4-2nd floor door containment		
5	5-3a38b3ec-a6b8-4cde-8210-d32046dfc2c4		
6	6-04b0b9e8-47a8-4a93-8c53-e2bfe20d8d12		
7	7-4e68d0b4-3786-46b3-8710-5a02b91d04da		
8	8-4x8 area of plaster removed in 280		
9	9-6cc87d4b-8494-4cc2-a2eb-ef3b927dccd7		
10	10-6ed33ffd-bdee-4b46-bed5-bb761e3d4155		
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16	16-76be794b-5d40-436a-8fc7-74fbabfc75a7		
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TAX ID # 42-1229263

Continued - Image Detail

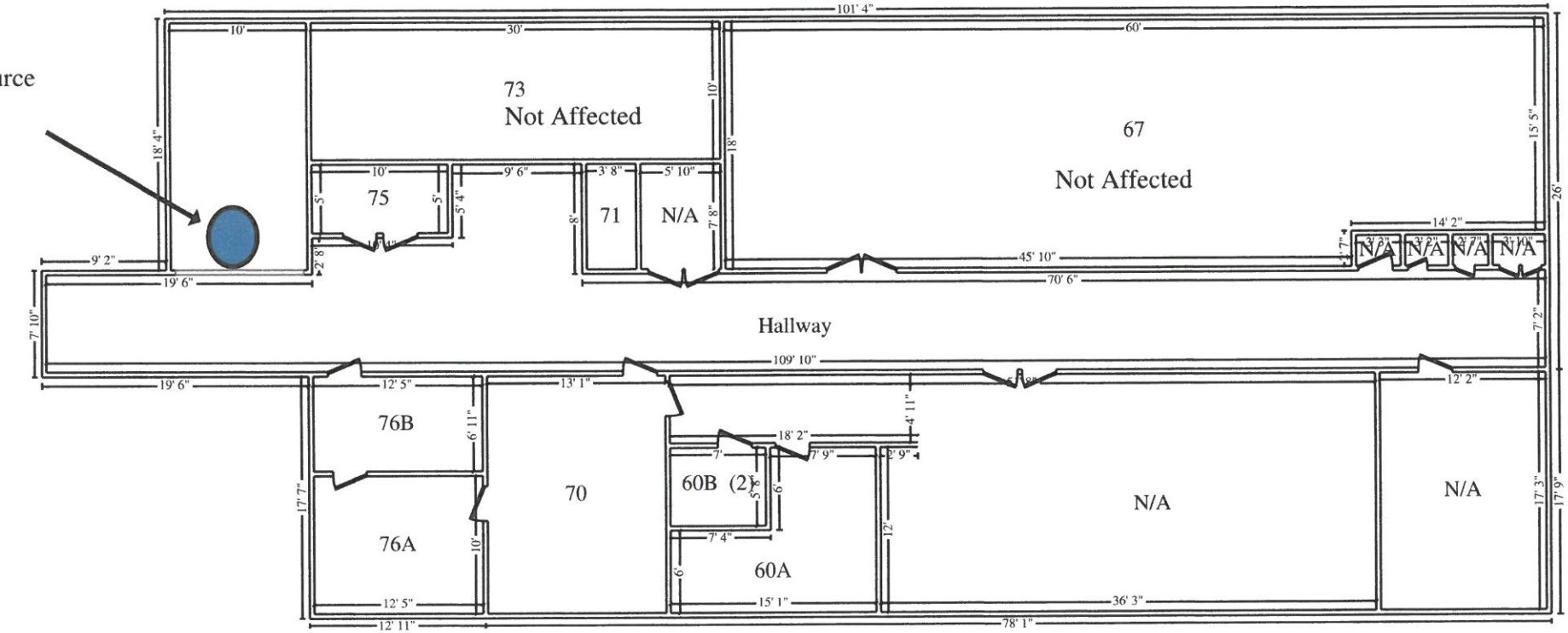
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25	25-887052f4-594a-4d1e-9818-5afb83fbb5ce		
26	26-ba48b23a-cdd8-430e-bc1f-11027ba660b3		
27	27-Basement hallway walls and floors scrubbed &		
28	28-c0bbbf20-569e-4b6e-921d-5d976a0f3d54		
29	29-ccc9523e-5590-4d69-a1c3-680a600c5c29		
30	30-d1fd62c2-5ca1-45d9-ad9e-113de10516fa		
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32	32-e6de8a8a-1ce7-4a7e-b1bf-e811e7b04a10		
33	33-e942d584-82bc-488e-969d-bc642fe76765		
34	34-f803c60d-b60c-49ac-8376-a6b4bb5aeaa5		
35	35-Lower Level all don		

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319-365-9265
TAX ID # 42-1229263

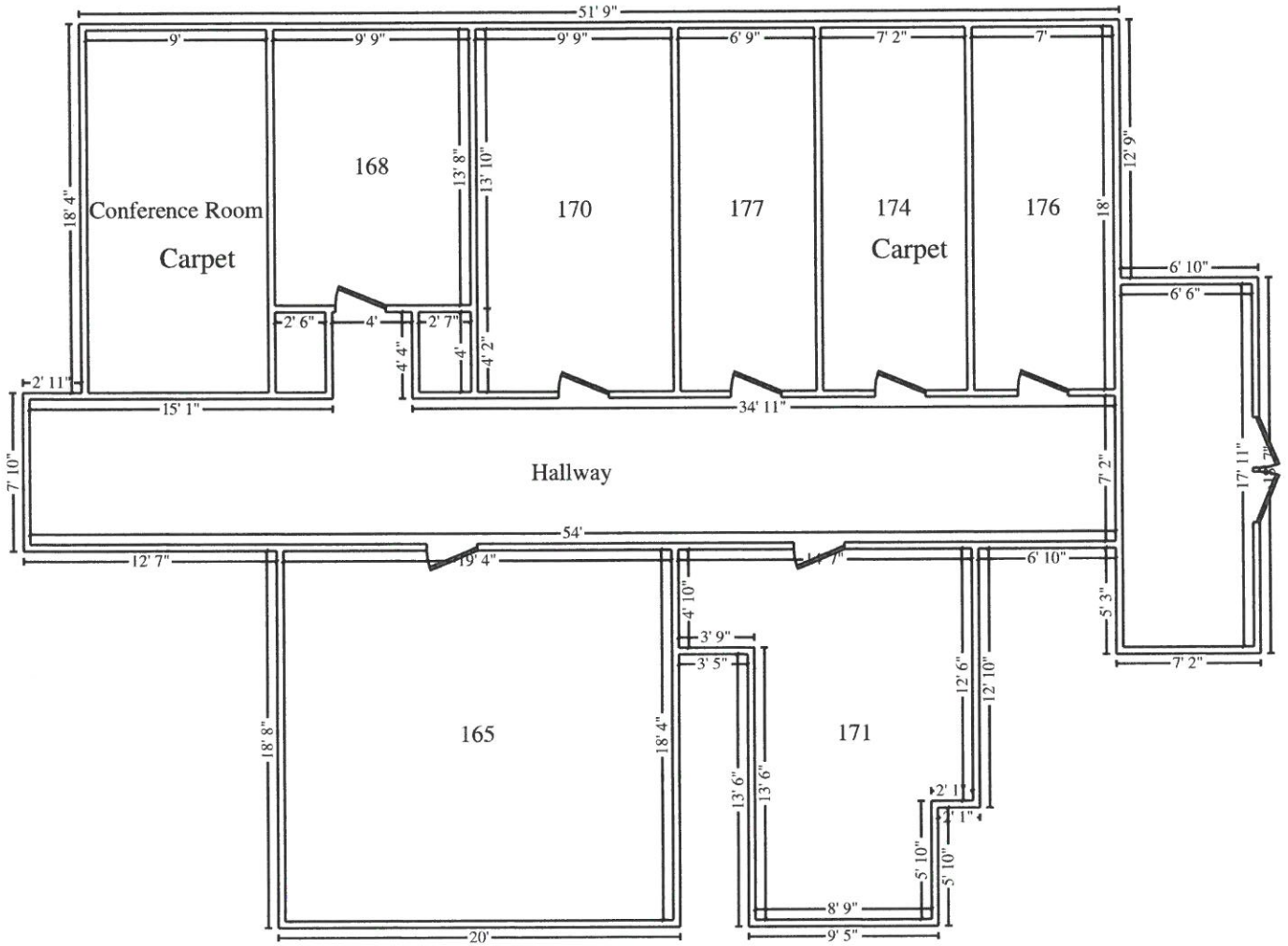
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38	38-Room 76 cleaned		
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40	40-small hallway cleaned		



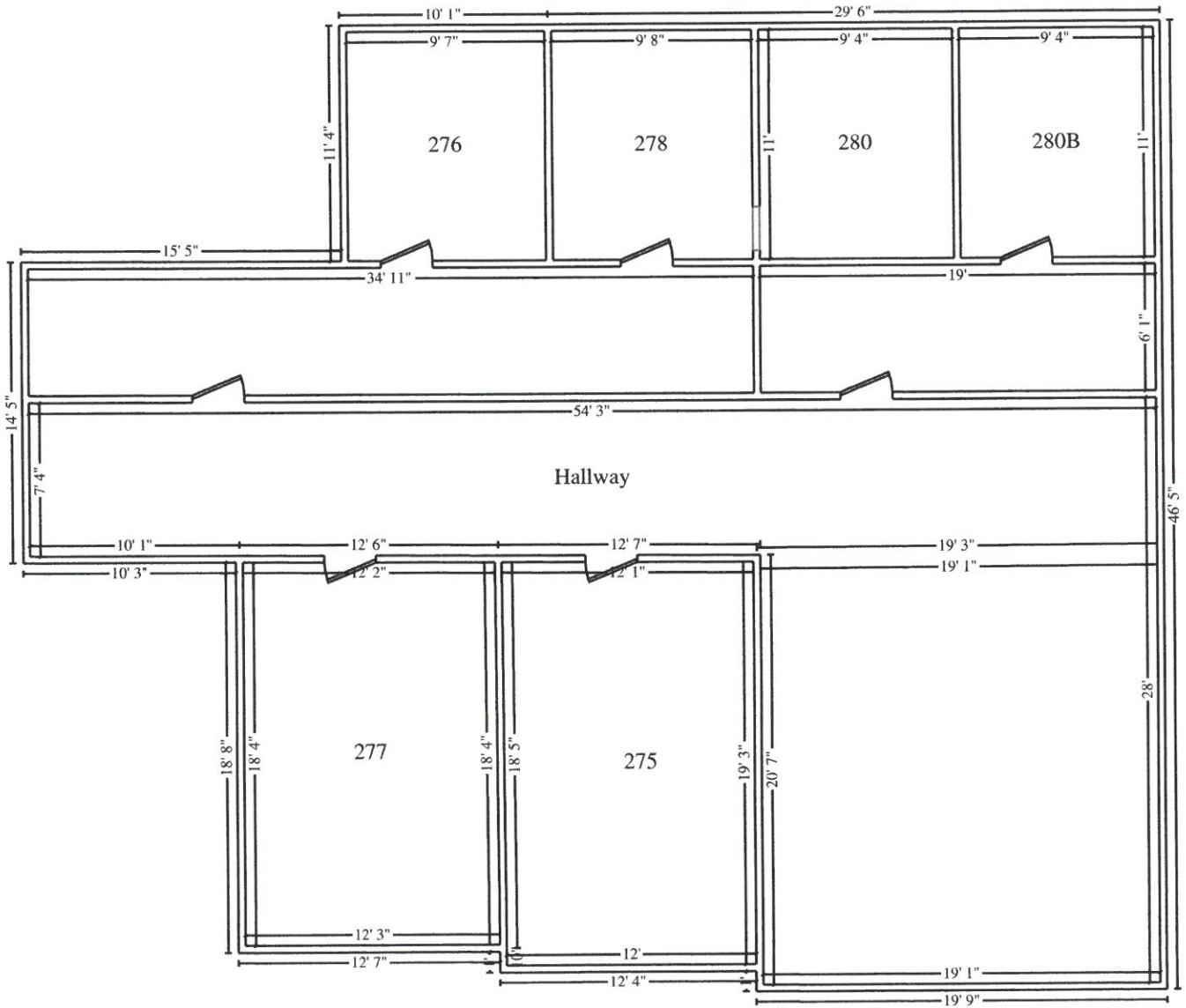
Basement

2B Invoice - Page 37 of 40



2B Invoice - Page 38 of 40

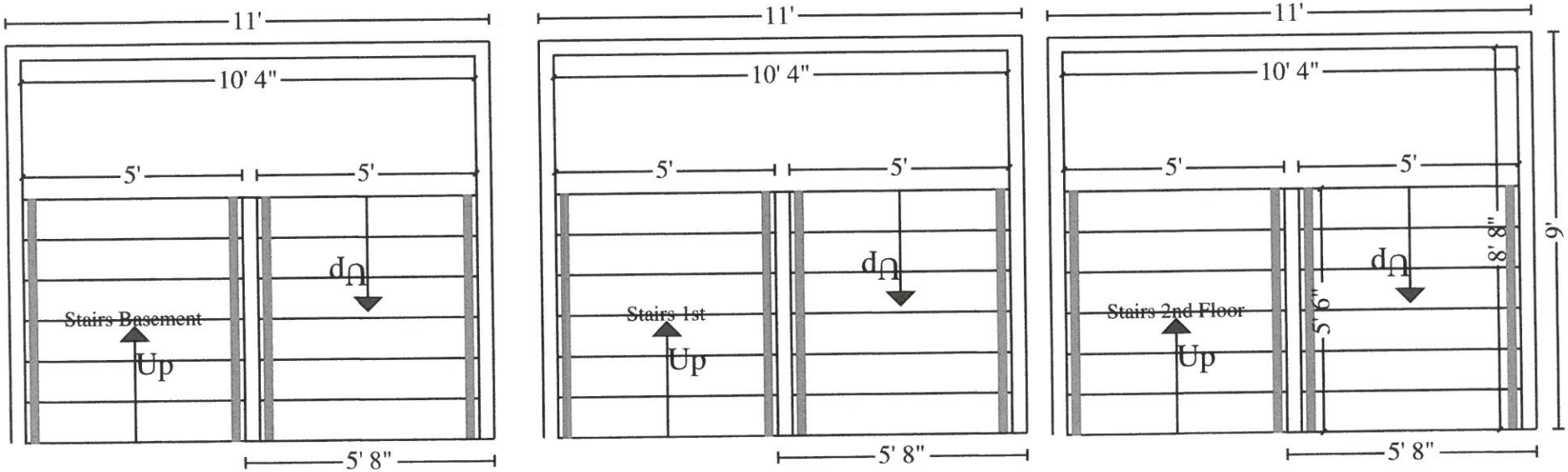
First floor



N

2nd floor

2B Invoice - Page 39 of 40



N

Stairwell

2B Invoice - Page 40 of 40

AP/PO PeopleSoft Web Applications

Your path: Home > Payment

User options | Help

Payment details for voucher: 82918095

Voucher ID	Vendor ID	Remit LOC	Vendor Name	Gross Voucher Amt.	Payment Handling Code
82918095	0000617935	002	ServiceMaster By Rice	$28,813.45	AC

Payment Status	Payment Information	Invoice #	Invoice Date	Remit to	Amt From Voucher
PAID	ACH:577753 Dt: 05/30/2018 Amt: $81,559.48	CR-1790	03/16/2018	Detail	$28,813.45

New Payment Search
AP-PO Web Applications Home Page
Self-Service

(WALTERSC) Logoff

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Mitigation Summary

2B Refund - Page 1 of 3

Project #: 060-18

Project Name: University of Iowa

Address: Multiple

Claim # 474056

As Submitted by Servicemaster			As Reviewed by Newman & Newman		
Line #	Category	SM Total	N&N Total	Delta	N&N Comments
1	Chemistry Building	$ 10,607.57	$ 10,607.57	$ -	
2	Biology Building	$ 8,852.18	$ 8,167.88	$ 684.30	
3	MERF	$ 3,223.15	$ 3,101.66	$ 121.49	
4	Dental Lab	$ 14,534.27	$ 14,213.87	$ 320.40	
5	MRF	$ 28,813.45	$ 26,130.65	$ 2,682.80	
6	Field House	$ 15,528.86	$ 15,346.70	$ 182.16	
7					
8					
9					
10	**TOTAL**	**$ 81,559.48**	**$ 77,568.33**	**$ 3,991.15**	

PO 1001956835 and ServiceMaster Refund Payment = $3,991.15

Biology (claim #PR-20851), Voucher 82918094 paid $8,852.18, refund owed to UI = $684.30

MERF (claim #PR-20856, Voucher 82918098 paid $3,223.15, refund owed to UI = $121.49

DSB (claim #PR-20849), Voucher 82928097 paid $14,534.27, refund owed to UI = $320.40

Field House (claim #PR-20854), Voucher 82918096 paid $15,528.86, refund owed to UI = $182.16

MRF (claim #PR-20241), Voucher 82918095 paid $28,813.45, refund owed to UI = $2,682.80

2B Refund - Page 2 of 3

Summary for Deposit 666460

This deposit has been created, reconciled and posted to GL.

Owner: Erik Hoadley (EHOADLEY)

Bank: USBank

Type: Standard Deposit

Date Created: 12/03/2019 3:43 PM

Deposit Slips

Slip Number	Amount
0311001290	4386.11
	Total Deposit Slips: $4,386.11

Accounting Distribution

Description	MFK	Details	Amount
Insurance payment	275-05-0308-20000-50498200-3415-000-00000-00-0000	**From:** ServiceMaster #61171	$3,991.15
Insurance payment	275-05-0308-00000-50498400-3415-000-00000-00-0000	**From:** Hawkeye Electric #60429	$394.96
			Total Amount to MFKs: $4,386.11

Money Distribution

Type	Amount
CASH	
Aggregate distribution	$0.00
CHECKS	
Aggregate distribution	$4,386.11
	Total Media Submitted: $4,386.11

Deposit Comments

Comment	Amount	Date	
There are no comments assigned to this deposit.			

Deposit Attachments

Attachment Comment		Description	Date	Amount	
		666460 - RM			

GL History

GL Jrnl Effect Dt.	MFK Description	Amount
ED10076678 12/04/2019	275-05-0308-20000-50498200-3415-000-00000-00-0000 Insurance payment	$3,991.15 C
ED10076678 12/04/2019	275-05-0308-00000-50498400-3415-000-00000-00-0000 Insurance payment	$394.96 C

EMSL Analytical, Inc.

EMSL Analytical, Inc. Federal Tax ID 22-2357101
6340 CastlePlace Dr., Indianapolis, IN 46250
(317) 803-2997

INVOICE NO.	PAGE
16279743	1 of 1
INVOICE DATE	
1/4/2018	

BILL TO
FSG-Environmental Svcs/Univ. of Iowa
Attn: Jason Lietz
200 University Services Building
The University of Iowa
Iowa City, IA 52242
US

REPORT TO
FSG-Environmental Svcs/Univ. of Iowa
Attn: Jason Lietz
200 University Services Building
The University of Iowa
Iowa City, IA 52242
US

SLSM.	SHIP VIA	TERMS		BILLING FREQ	REPT ID	BILLING ID
epodell	EMSL-FEDEX	PO Required		With Report	UOIF77	UOIF77

DATE	ORDER NO.	QTY	TEST CODE	TEST DESCRIPTION	UNIT	UNIT PRICE	AMOUNT
1/3/2018	161800063 P.O: C000568459	10	PLM	Asbestos Analysis of Bulk Materials via EPA 600/R-93/116 Method using Polarized Light Microscopy 24 Hour Project: MRF - PIPE BREAK 5TH FLOOR	EA	14.70	147.00
						SUB TOTAL	147.00
						INVOICE TOTAL	$147.00

Please review your invoice promptly. We will gladly correct any errors within 30 days of the invoice date. After that, we deem the invoice to be correct and reserve the right not to issue credits, in whole or part. A 1.5% finance charge will be added to invoices over 30 days.

Billing Inquiries - please call 1-800-220-3675

Please detach and return with payment

1/4/2018 CUST # UOIF77 INV # 16279743 $147.00

DEPT: 16

Please Remit to:
EMSL ANALYTICAL, INC.
200 Route 130 North
Cinnaminson, NJ 08077

Billing Inquiries - please call 1-800-220-3675

Payment in US Funds Only

INV7.31.0

AP/PO PeopleSoft Web Applications

Payment details for voucher: 82834337

Voucher ID	Vendor ID	Remit LOC	Vendor Name	Gross Voucher Amt.	Payment Handling Code
82834337	0000329021	002	EMSL Analytical Incorporated	$147.00	AC

Payment Status	Payment Information	Invoice #	Invoice Date	Remit to	Amt From Voucher
PAID	ACH:553265 Dt: 02/02/2018 Amt: $549.25	16279743	01/04/2018	Detail	$147.00

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AP-PO Web Applications Home Page
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4B Invoice - Page 1 of 1

Dustin Ripley P-Card Shop 211

Use Your BIG CARD 2% REBATE
MENARDS®

MENARDS - IOWA CITY
2605 Naples Ave
Iowa City, IA 52240

KEEP YOUR RECEIPT
RETURN POLICY VARIES BY PRODUCT TYPE

Unless noted below allowable returns for items on this receipt will be in the form of an in store credit voucher if the return is done after 04/03/18

If you have questions regarding the charges on your receipt, please email us at:
IOWAfrontend@menards.com

Sale Transaction

Tax Exempt IA0135634
Resale

12'X16' HEAVY DUTY TARP
2356904 7 @19.98 139.86 NT

TOTAL SALE 139.86
VISA CREDIT 5647 139.86
PO # ~~18-558495-003~~ wrong
Should be 18-558488-003
Auth Code:075432
Chip Inserted
a0000000003101001
TC - dc3ba2ad3fe1d813

TOTAL NUMBER OF ITEMS = 7

GUEST COPY

The Cardholder acknowledges receipt of goods/services in the total amount shown hereon and agrees to pay the card issuer according to its current terms.

THIS IS YOUR CREDIT CARD SALES SLIP
PLEASE RETAIN FOR YOUR RECORDS.

NOW HIRING!!

THANK YOU, YOUR CASHIER, Marissa

68140 01 5840 01/03/18 08:26AM 3091

The University of Iowa
Accounts Payable
202 PCO (Plaza Centre One)
Iowa City, IA 52242

4B Proof of Pay - Page 1 of 1

Procurement Card Voucher

Voucher ID: P0358021

Please print in LANDSCAPE mode

Cardholder Name: DUSTIN RIPLEY
Department: VPFO-FM OPER & MAINT
Phone: +1 319 335 5125

Account Number: 012612
Card Billing Period: 12/28/2017 - 01/29/2018
Date Prepared: 10/31/2019

1	260-05-0375-00211-00000000-6650-000-00000-00-0000	SLID:J / SLAC:18-558488-003		
	Descr for GL: MENARDS IOWA CITY IA Cmnts: 18-558488-003 MRF-General Fire alarm, water running down the elevator shaft located on the 5th floor. Found a corroded water pipe fitting that caused the pipe to separate.		DB AMT: 139.86	CR AMT:
2	260-05-0375-00211-00000000-6650-000-00000-00-0000	SLID:J / SLAC:17-519492-001		
	Descr for GL: COMMUNICATIONS ENGINEERI Cmnts: 17-519492-001 MERF---UPGRADE FIRE ALARM SYSTEM(SHOP 211)		DB AMT: 1,716.00	CR AMT:

Procurement Card Total

DEBIT TOTAL	CREDIT TOTAL
1,855.86	**0.00**

STATEMENT TOTAL
1,855.86

EMSL Analytical, Inc.

EMSL Analytical, Inc. Federal Tax ID 22-2357101
6340 CastlePlace Dr., Indianapolis, IN 46250
(317) 803-2997

INVOICE NO	PAGE
16281164	1 of 1
INVOICE DATE	
2/2/2018	

BILL TO
FSG-Environmental Svcs/Univ. of Iowa
Attn: Accounts Payable
200 University Services Building
The University of Iowa
Iowa City, IA 52242
US

REPORT TO
FSG-Environmental Svcs/Univ. of Iowa
Attn: Jason Lietz
200 University Services Building
The University of Iowa
Iowa City, IA 52242
US

SLSM	SHIP VIA	TERMS		BILLING FREQ	REPT ID	BILLING ID
epodell	EMSL-FEDEX	PO Required		With Report	UOIF77	UOIF77

DATE	ORDER NO	QTY	TEST CODE	TEST DESCRIPTION	UNIT	UNIT PRICE	AMOUNT
2/1/2018	161801737 P.O: C000568459	4	M001 Air-O-Cell	Air-O-Cell(™) Analysis of Fungal Spores & Particulates by Optical Microscopy (Methods EMSL 05-TP-003, ASTM D7391) 24 Hour Project: MRF - 18-558488-005	EA	57.75	231.00
						SUB TOTAL	231.00
						INVOICE TOTAL	$231.00

Please review your invoice promptly. We will gladly correct any errors within 30 days of the invoice date. After that, we deem the invoice to be correct and reserve the right not to issue credits, in whole or part. A 1.5% finance charge will be added to invoices over 30 days.

Billing Inquiries - please call 1-800-220-3675

GROUP 227003

82839956

Please detach and return with payment

2/2/2018 CUST # UOIF77 INV # 16281164 $231.00

DEPT: 16

Please Remit to: EMSL ANALYTICAL, INC.
200 Route 130 North
Cinnaminson, NJ 08077

Billing Inquiries - please call 1-800-220-3675

Payment in US Funds Only.

INV7.31.0

AP/PO PeopleSoft Web Applications

Payment details for voucher: 82839956

Voucher ID	Vendor ID	Remit LOC	Vendor Name	Gross Voucher Amt.	Payment Handling Code
82839956	0000329021	002	EMSL Analytical Incorporated	$231.00	AC

Payment Status	Payment Information	Invoice #	Invoice Date	Remit to	Amt From Voucher
PAID	ACH:559213 Dt: 03/02/2018 Amt: $546.65	16281164	02/02/2018	Detail	$231.00

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6B Invoice - Page 1 of 1

PER MAR SECURITY SERVICES
P.O. Box 1101
Davenport, IA 52805-1101

Site Address: The University of Iowa
640 S Madison St
Iowa City, IA 52242

INVOICE

Account Number	161205-44
Invoice Number	284530
Invoice Date	2/12/2018
Terms	**NET 30 DAYS**
Amount Due	**$1,049.40**
Amount Enclosed:	$

To ensure prompt credit, return this remittance and check payable to:

Midwest Alarm Services
PO Box 4511
Davenport, IA 52808

OR
Pay on-line at:
www.permarsecurity.com

The University of Iowa
640 S Madison St
Iowa City, IA 52242

PER MAR SECURITY SERVICES
P.O. Box 1101
Davenport, IA 52805-1101

Account Information

Customer Number	161205-44
Invoice Number	284530
Invoice Date	2/12/2018
P.O.	1001900448

Summary of Charges

Description	*Amount*
Equipment Sale (08031802007)	
The University of Iowa 640 S Madison St Job Items	$990.00
Subtotal	**$990.00**
Sales Tax	**$59.40**
Current Charges:	**$1,049.40**
Credits:	**$0.00**
Payments - Thank You	**$0.00**
Total Amount Due:	**$1,049.40**

Sales tax not paid.



Go Green!

Check out our secure, **PAPERLESS FORMATS** for your invoices and account statements. It's **Easy, Secure and Green!**

GROUP 227239

82845855

100% BILLING

HOW CAN WE HELP?

Call us: (319) 365-4800

Visit us: **www.permarsecurity.com**

AP/PO PeopleSoft Web Applications

Payment details for voucher: 82845855

Voucher ID	Vendor ID	Remit LOC	Vendor Name	Gross Voucher Amt.	Payment Handling Code
82845855	0000116188	002	Midwest Alarm Services	$990.00	AC

Payment Status	Payment Information	Invoice #	Invoice Date	Remit to	Amt From Voucher
PAID	ACH:561392 Dt: 03/14/2018 Amt: $990.00	284530	02/12/2018	Detail	$990.00

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tyco SimplexGrinnell

D-U-N-S 09-4738007
FED. ID 58-2608861

DES MOINES
4170 Nw Urbandale Dr
URBANDALE IA 503222067
Phone: (515) 278-4100

INVOICE NO.	INVOICE DATE	CUSTOME
41154826	04/30/2018	1001921006

TERMS	INVOICE TYPE
NET30	Schedule of Values

BILL TO: 320-057052450
University of Iowa Accounts Pa
202 Plaza Centre One (Pco
Accounts Payable
IOWA CITY IA 52242-2500

PROJECT: 320-605435001
University Of Iowa Medical Res
501 Newton Road
IOWA CITY IA 52244-0000

INVOICE SUMMARY

TOTAL P.O.	-	$72,480.30	INVOICE SUBTOTAL	-	$56,755.73
INVOICED TO DATE	-	$53,917.94	LESS RETAINAGE	-	$2,837.79
DUE THIS INVOICE	-	$53,917.94	SUBTOTAL	-	$53,917.94
REMAINING TO INVOICE	-	$18,562.36	SALES TAX	-	$0.00
			TOTAL INVOICE	-	$53,917.94

Please direct inquiries to our local branch office listed above.

PAY THIS AMOUNT ▷ **$53,917.94**

PROGRESS BILLING FORMS FOLLOW:

GROUP 229735
82928573

Comments acntpay@uiowa.gov

tyco SimplexGrinnell

REMITTANCE COPY

PLEASE TEAR OFF AND RETURN THIS PORTION WITH YOUR PAYMENT - WRITE INVOICE NO. ON YOUR CHECK.

INVOICE AMOUNT
$53,917.94

BILL TO 320-057052450 University of Iowa Accounts Pa

SHIP TO 320-057052450 University Of Iowa Medical Res

INVOICE NUMBER 41154826

INVOICE DATE 04/30/2018

CUSTOMER P.O. 1001921006

REMIT TO SimplexGrinnell
Dept. CH 10320
Palatine, IL 60055-0320

4005391794541154826

281-SOVS

tyco SimplexGrinnell

APPLICATION AND CERTIFICATE FOR PAYMENT

To Owner:
University of Iowa Accounts Pa
202 Plaza Centre One (Pco
Accounts Payable
IOWA CITY IA 52242-2500

From Contractor:
DES MOINES
4170 Nw Urbandale Dr
URBANDALE IA 503222067
Phone: (515) 278-4100

PROJECT NAME	PROJECT NUMBER	APPLICATION NO.	DISTRIBUTION LIST:
UI MRF System replacement	605435001	00001	☐ Owner • ☐ Architect ☐ Contractor ☐ _____

CUSTOMER P.O.	INVOICE NO.	INVOICE DATE	PERIOD TO:
1001921006	41154826	04/30/2018	04/15/2018

7B Invoice - Page 2 of 3

CONTRACTOR'S APPLICATION FOR PAYMENT

Application is made for Payment, as shown above, in connection with the Contract. Continuation Sheet is attached.

1.	Original Contract Sum		$72,480.30
2.	Net Change By Change Orders		$0.00
3.	Contract Sum To Date		$72,480.30
4.	Total Completed & Stored To Date		$56,755.73
5.	RETAINAGE Of Work Complete		$2,837.79
6.	Total Earned Less RETAINAGE		$53,917.94
7.	Less Previous Certificates		$0.00
8.	Current Payment Before Sales Tax	$53,917.94	
	Sales Tax	$0.00	
	Total Current Payment Due Including Sales Tax		$53,917.94
9.	Balance To Finish, Not Including Sales Tax		$18,562.36

CHANGE ORDER SUMMARY	ADDITIONS	DEDUCTIONS
TOTAL CHANGES APPROVED IN PREVIOUS MONTH BY OWNER:	$0.00	$0.00
TOTALS APPROVED THIS MONTH:	$0.00	$0.00
TOTALS:	$0.00	$0.00
NET CHANGES BY CHANGE ORDER:		$0.00

JANELLE R COLLINS
Notary Public
COMMONWEALTH OF MASSACHUSETTS
My Commission Expires
February 22, 2024

The undersigned Contractor certifies that to the best of the Contractor's knowledge, information and belief the work covered by this Application for Payment has been completed in accordance with the Contract Documents, that all amounts have been paid by the Contractor for Work for which previous Certificates For Payment were issued and payments received from the Owner, and that current payment shown herein is now due.

CONTRACTOR: SimplexGrinnell

By: Lise Lebtonen Date: 5-1-18

State of: MA County of: WORCESTER

Subscribed and sworn to before me this 1 Day of MAY 2018,
Notary Public: Janelle R Collins

My Commission expires: 2/22/24

ARCHITECT'S CERTIFICATE FOR PAYMENT

In accordance with the Contract Documents, based on on-site observations and the data comprising the above application, the Architect certifies to the Owner that to the best of the Architect's knowledge, information and belief the Work has progressed as indicated, the quality of the Work is in accordance with the Contract Documents, and the Contractor is entitled to payment of the AMOUNT CERTIFIED.

AMOUNT CERTIFIED
Attach explanation if amount certified differs from the amount applied for.

ARCHITECT:

By: _____ Date: _____

This Certificate is not negotiable. The AMOUNT CERTIFIED is payable only to the Contractor named herein. Issuance, payment and acceptance of payment are without prejudice to any rights of the Owner or Contractor under this Contract.

tyco SimplexGrinnell

APPLICATION AND CERTIFICATE FOR PAYMENT DETAIL PAG

To Owner:
University of Iowa Accounts Pa
202 Plaza Centre One (Pco
Accounts Payable
IOWA CITY IA 52242-2500

From Contractor:
DES MOINES
4170 Nw Urbandale Dr
URBANDALE IA 503222067
Phone: (515) 278-4100

7B Invoice - Page 3 of 3

PROJECT NAME	PROJECT NUMBER	APPLICATION NO.
UI MRF System replacement	605435001	00001

CUSTOMER P.O.	INVOICE NO.	INVOICE DATE
1001921006	41154826	04/30/2018

PERIOD TO:
04/15/2018

A ITEM NO	B DESCRIPTION OF WORK	C SCHEDULED VALUE	D PREVIOUS APPLICATION	E THIS PERIOD	F MATERIAL STORED	G TOTAL COMPLETED AND STORED	H %	I BALANCE TO FINISH	J RETAINAGE TO DATE
00001	Fire Alarm Material	$56,755.73	$0.00	$56,755.73	$0.00	$56,755.73	100.00	$0.00	$2,837.79
00002	Fire Alarm Commissioning Labor	$4,343.60	$0.00	$0.00	$0.00	$0.00	0.00%	$4,343.60	$0.00
00003	Fire Alarm Preparation Labor	$376.46	$0.00	$0.00	$0.00	$0.00	0.00%	$376.46	$0.00
00004	Fire Alarm Project Management	$1,686.86	$0.00	$0.00	$0.00	$0.00	0.00%	$1,686.86	$0.00
00005	Fire Alarm Electrical Contract	$9,317.65	$0.00	$0.00	$0.00	$0.00	0.00%	$9,317.65	$0.00
	SUBTOTAL	$72,480.30	$0.00	$56,755.73	$0.00	$56,755.73	78.31%	$15,724.57	$2,837.79

283-8OV8

AP/PO PeopleSoft Web Applications

Payment details for voucher: 82928573

Voucher ID	Vendor ID	Remit LOC	Vendor Name	Gross Voucher Amt.	Payment Handling Code
82928573	0000284538	002	SimplexGrinnell LP	$53,917.94	AC

Payment Status	Payment Information	Invoice #	Invoice Date	Remit to	Amt From Voucher
PAID	ACH:578414 Dt: 05/31/2018 Amt: $53,917.94	41154826	04/30/2018	Detail	$53,917.94

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šS010253854.002qœ

VAN METER INC.
470 Ruppert Road
IOWA CITY IA 52246
319-339-0000 Fax 319-339-1816

www.vanmeterinc.com

VAN METER
A 100% EMPLOYEE-OWNED COMPANY

INVOICE DATE		OUR INVOICE NUMBER	
05/18/18		S010253854.002	
Bill To#	Ship To#	Price Br	Ship Br
3864	4647	7	10
PLEASE REMIT PAYMENT TO:			DUE DATE
850 32ND AVENUE SW CEDAR RAPIDS IA 52404-3913			06/18/18

BILL TO:
15062 1 SP 0.510 E0154 I0287 D3635455459 S2 P5370537 0004:0005

UNIVERSITY OF IOWA
202 PLAZA CENTRE ONE (PCO)
ACCOUNTS PAYABLE/TRAVEL DEPT.
IOWA CITY IA 52242

ENROLLMENT TOKEN
LRK PFX TRL

SHIP TO:
UNIVERSITY PHYSICAL PLANT
FACILITY SERVICES
C000568624-211-18-566201-001
IOWA CITY IA 52240

YOUR PO/ORDER #	ORDERED BY	JOB/RELEASE #	YOUR ACCOUNT MANAGER	
C000568624-211-	ERIC	18-566201-001	Tracy Klein SERVC 3778	
ORDER WRITER	SHIP VIA	TERMS	ORDER DATE	SHIP DATE
Carter Valentine IC 3727	07MP MIDDAY PKUP	NET 30 DAYS NSC	05/18/18	05/18/18

ORDER QTY	SHIP QTY	DESCRIPTION	Unit Price/UM	Extension
1000	1000	CRL E1502S.41.03 18/2 FIRE ALARM NON-SHIELDED NON-PLENUM 1000FT REEL RED JACKET (FPLR)	90.478/m	90.48

GROUP 230022
82939431

SAVE TIME SAVE A TREE

Would you prefer to have your invoices
Emailed or Faxed ??
If so - please contact me - we can set it up today!
Marie Anderson - manderson@vanmeterinc.com
ph 319-368-2828

Invoice is due by 06/18/18.

Invoice Questions?
Call Carter Valentine at
319-339-0000

05-18-2018 03:23:56 PM
S010253854.002

Eric

ERIC

Subtotal	**$90.48**
Shipping & Handling	
Sales Tax	**$0.00**
Amount Due	**$90.48**

All claims for shortages or errors must be made at once. Past due invoices may be subject to a 1.50% late charge. Our company does not manufacture the goods it sells and makes no express warranties thereon. It also disclaims all implied warranty of merchantability or fitness for a particular use. Except as prohibited by law, you are responsible for payment of all fees, costs, and expenses, including but not limited to, attorney fees, expert witness fees, and deposition expenses incurred to collect all amounts due from you. We accept credit card payments for immediate pay only and our credit terms are NET.

For Return Policy Information and Return Request Forms visit www.vanmeterinc.com and go to Online Ordering and then Return Policy or Returns Form.

For complete terms and conditions as well as EEO Compliance regulations please go to https://www.vanmeterinc.com/terms-conditions.html

Confirmation of Delivery

0004:0005

AP/PO PeopleSoft Web Applications

Your path: Home > Payment

User options | Help

Payment details for voucher: 82939431

Voucher ID	Vendor ID	Remit LOC	Vendor Name	Gross Voucher Amt.	Payment Handling Code
82939431	0000124593	002	Van Meter Industrial Incorporated	$90.48	AC

Payment Status	Payment Information	Invoice #	Invoice Date	Remit to	Amt From Voucher
PAID	ACH:581757 Dt: 06/15/2018 Amt: $3,562.76	S010253854.002	05/18/2018	Detail	$90.48

New Payment Search
AP-PO Web Applications Home Page
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Please direct inquires regarding using this application to acntpay@uiowa.edu

šS010253854.001cœ

VAN METER INC.
470 Ruppert Road
IOWA CITY IA 52246
319-339-0000 Fax 319-339-1816

www.vanmeterinc.com

VAN METER
A 100% EMPLOYEE-OWNED COMPANY

INVOICE DATE		OUR INVOICE NUMBER	
05/18/18.		S010253854.001	
Bill To#	Ship To#	Price Br	Ship Br
3864	4647	7	7
PLEASE REMIT PAYMENT TO:		DUE DATE	
850 32ND AVENUE SW CEDAR RAPIDS IA 52404-3913		06/18/18	

BILL TO:
15062 1 SP 0.510 E0154 I0286 D3635455457 S2 P5370537 0003:0005

UNIVERSITY OF IOWA
202 PLAZA CENTRE ONE (PCO)
ACCOUNTS PAYABLE/TRAVEL DEPT.
IOWA CITY IA 52242

ENROLLMENT TOKEN
LRK PFX TRL

SHIP TO:
UNIVERSITY PHYSICAL PLANT
FACILITY SERVICES
C000568624-211-18-566201-001
IOWA CITY IA 52240

YOUR PO/ORDER #	ORDERED BY	JOB/RELEASE #	YOUR ACCOUNT MANAGER	
C000568624-211-	ERIC	18-566201-001	Tracy Klein SERVC 3778	
ORDER WRITER	SHIP VIA	TERMS	ORDER DATE	SHIP DATE
Carter Valentine IC 3727	IPK IMMEDIATEPK	NET 30 DAYS NSC	05/18/18	05/18/18

ORDER QTY	SHIP QTY	DESCRIPTION	Unit Price/UM	Extension
500	500	CUTHHNSOL 14 BLK 500'	81.003/m	40.50
500	500	CUTHHNSOL 14 RED 500'	81.003/m	40.50
500	500	CUTHHNSOL 14 PUR 500'	81.003/m	40.50
500	500	CUTHHNSOL 14 BLU 500'	81.003/m	40.50
2000	1000	CRL E1502S.41.03 18/2 FIRE ALARM NON-SHIELDED NON-PLENUM 1000FT REEL RED JACKET (FPLR)	90.478/m	90.48

GROUP 230022
82939430

SAVE TIME SAVE A TREE

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Marie Anderson - manderson@vanmeterinc.com
ph 319-368-2828

Invoice is due by 06/18/18.

Invoice Questions?
Call Carter Valentine at
319-339-0000

05-18-2018 07:53:49 AM
S010253854.001

Eric

ERIC

Subtotal	**$252.48**
Shipping & Handling	
Sales Tax	**$0.00**
Amount Due	**$252.48**

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Confirmation of Delivery

0003:0005

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Payment details for voucher: 82939430

Voucher ID	Vendor ID	Remit LOC	Vendor Name	Gross Voucher Amt.	Payment Handling Code
82939430	0000124593	002	Van Meter Industrial Incorporated	$252.48	AC

Payment Status	Payment Information	Invoice #	Invoice Date	Remit to	Amt From Voucher
PAID	ACH:581757 Dt: 06/15/2018 Amt: $3,562.76	S010253854.001	05/18/2018	Detail	$252.48

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IN

VAN METER INC.
470 Ruppert Road
IOWA CITY IA 52246
319-339-0000 Fax 319-339-1816

www.vanmeterinc.com

VAN METER
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INVOICE DATE		OUR INVOICE NUMBER	
05/22/18		S010258073.001	
Bill To#	Ship To#	Price Br	Ship Br
3864	4647	7	7
PLEASE REMIT PAYMENT TO:		DUE DATE	
850 32ND AVENUE SW CEDAR RAPIDS IA 52404-3913		06/22/18	

BILL TO:
55 3 SP 1.420 E0011 I0203 D3642994368 S2 P5376940 0012:0013

UNIVERSITY OF IOWA
202 PLAZA CENTRE ONE (PCO)
ACCOUNTS PAYABLE/TRAVEL DEPT.
IOWA CITY IA 52242

ENROLLMENT TOKEN
LRK PFX TRL

SHIP TO:

UNIVERSITY PHYSICAL PLANT
FACILITY SERVICES
C000568624-211-18-566201-001
IOWA CITY IA 52240

YOUR PO/ORDER #	ORDERED BY	JOB/RELEASE #	YOUR ACCOUNT MANAGER	
C000568624-211-	ERIC	18-566201-001	Tracy Klein SERVC 3778	
ORDER WRITER	SHIP VIA	TERMS	ORDER DATE	SHIP DATE
Eugene Marquart IC 3711	IPK IMMEDIATEPK	NET 30 DAYS NSC	05/22/18	05/22/18

ORDER QTY	SHIP QTY	DESCRIPTION	Unit Price/UM	Extension
1	1	WIEG S6636NK NMA1 SC WIREWAY NO KO	41.736/E	41.74
2	2	WIEG E0606 NEMA1 WIREWAY END	7.027/E	14.05

GROUP 230384
82951437



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ph 319-368-2828



Invoice is due by 06/22/18.

Invoice Questions?
Call Eugene Marquart at
319-339-0000

05-22-2018 12:35:30 PM
S010258073.001

ERIC

Subtotal	**$55.79**
Shipping & Handling	
Sales Tax	**$0.00**
Amount Due	**$55.79**

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Confirmation of Delivery

0012:0013

AP/PO PeopleSoft Web Applications

Payment details for voucher: 82951437

Voucher ID	Vendor ID	Remit LOC	Vendor Name	Gross Voucher Amt.	Payment Handling Code
82951437	0000124593	002	Van Meter Industrial Incorporated	$55.79	AC

Payment Status	Payment Information	Invoice #	Invoice Date	Remit to	Amt From Voucher
PAID	ACH:582531 Dt: 06/20/2018 Amt: $1,536.53	S010258073.001	05/22/2018	Detail	$55.79

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IN

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470 Ruppert Road
IOWA CITY IA 52246
319-339-0000 Fax 319-339-1816

www.vanmeterinc.com

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INVOICE DATE		OUR INVOICE NUMBER	
05/31/18		S010253854.003	
Bill To#	Ship To#	Price Br	Ship Br
3864	4647	7	7
PLEASE REMIT PAYMENT TO:		DUE DATE	
850 32ND AVENUE SW CEDAR RAPIDS IA 52404-3913		06/30/18	

BILL TO:
231 3 SP 0.890 E0049 I0375 D3676139182 S2 P5406330 0006:0011

UNIVERSITY OF IOWA
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SHIP TO:
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IOWA CITY IA 52240

YOUR PO/ORDER #	ORDERED BY	JOB/RELEASE #	YOUR ACCOUNT MANAGER	
C000568624-211-	ERIC	18-566201-001	Tracy Klein SERVC 3778	
ORDER WRITER	SHIP VIA	TERMS	ORDER DATE	SHIP DATE
Carter Valentine IC 3727	**PK PICKUP	NET 30 DAYS NSC	05/31/18	05/31/18

ORDER QTY	SHIP QTY	DESCRIPTION	Unit Price/UM	Extension
1000	1000	CRL E1502S.41.03 18/2 FIRE ALARM NON-SHIELDED NON-PLENUM 1000FT REEL RED JACKET (FPLR)	90.478/m	90.48

GROUP 230083
82942864

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Marie Anderson - manderson@vanmeterinc.com
ph 319-368-2828

Invoice is due by 06/30/18.

Invoice Questions?
Call Carter Valentine at
319-339-0000

05-31-2018 02:27:30 PM
S010253854.003

Eric

ERIC

Subtotal	**$90.48**
Shipping & Handling	
Sales Tax	**$0.00**
Amount Due	**$90.48**

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0006:0011

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Payment details for voucher: 82942864

Voucher ID	Vendor ID	Remit LOC	Vendor Name	Gross Voucher Amt.	Payment Handling Code
82942864	0000124593	002	Van Meter Industrial Incorporated	$90.48	AC

Payment Status	Payment Information	Invoice #	Invoice Date	Remit to	Amt From Voucher
PAID	ACH:584810 Dt: 06/29/2018 Amt: $2,871.51	S010253854.003	05/31/2018	Detail	$90.48

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05/23/18		S010259903.001	
Bill To#	Ship To#	Price Br	Ship Br
3864	4647	7	7
PLEASE REMIT PAYMENT TO:		DUE DATE	
850 32ND AVENUE SW CEDAR RAPIDS IA 52404-3913		06/23/18	

BILL TO:
266 2 FP 0.458 E0083 I0645 D3647099388 S2 P5380214 0006:0006

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UNIVERSITY PHYSICAL PLANT
FACILITY SERVICES
C000568624-211-18-566201-001
IOWA CITY IA 52240

YOUR PO/ORDER #	ORDERED BY	JOB/RELEASE #	YOUR ACCOUNT MANAGER	
C000568624-211-	ERIC	18-566201-001	Tracy Klein SERVC 3778	
ORDER WRITER	SHIP VIA	TERMS	ORDER DATE	SHIP DATE
Carter Valentine IC 3727	IPK IMMEDIATEPK	NET 30 DAYS NSC	05/23/18	05/23/18

ORDER QTY	SHIP QTY	DESCRIPTION	Unit Price/UM	Extension
5	5	P&S PS20AC1-W 20A 120/277VAC WHT SW	2.566/E	12.83
4	4	3M 88-SUPER-3/4X66FT ELECT TAPE	6.415/E	25.66
100	100	3M 312-POUCH (100/BAG) YELL INS WING WIRE CON	9.936/c	9.94
100	100	3M 512-POUCH (100/BAG) RED INS WING WIRE CONN	12.926/c	12.93
5	5	RACO 865 HANDYBOX COVER 1 TOG SWITCH Your # 1004091	38.670/c	1.93
5	5	RACO 695 MASON BOX 1G 3-1/2DP CONCEN KO	288.900/c	14.45
6	6	RACO 2008 SS CONNECT 2 TS TS EMT ST	163.950/c	9.84
8	8	RACO 1408 PLASTIC BUSHING 2 TS	59.174/c	4.73
5	5	RACO 1662 CDT NIPPLE 1/2 TS DIECAST ZINC Your # 1001571	33.974/c	1.70
2	2	L-FSE LEBAAK 0LEB00AAXK 1-POLE COMFORT GRIP WATERTIGHT INLINE FUSEHOLDER W/CRIMP TERM	27.733/E	55.47
4	4	L-FSE KLK020 0KLK020.T FAST-ACTING MIDGET FUSE FOR SUPPLEMENTARY PROTECTION	11.875/E	47.50
1	1	CULLY 39763 8-10-12X1-1/4 WING ANCHOR KIT	13.377/E	13.38

GROUP 230178
82945077

Invoice is due by 06/23/18.

Call Carter Valentine at
319-339-0000

05-23-2016 03:05:08 PM
S010259903.001

Eric
ERIC

Subtotal	**$210.36**
Shipping & Handling	
Sales Tax	**$0.00**
Amount Due	**$210.36**

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Payment details for voucher: 82945077

Voucher ID	Vendor ID	Remit LOC	Vendor Name	Gross Voucher Amt.	Payment Handling Code
82945077	0000124593	002	Van Meter Industrial Incorporated	$210.36	AC

Payment Status	Payment Information	Invoice #	Invoice Date	Remit to	Amt From Voucher
PAID	ACH:583233 Dt: 06/22/2018 Amt: $2,272.33	S010259903.001	05/23/2018	Detail	$210.36

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IN

VAN METER INC.
125 Courier Street
Waterloo IA 50701-1289
319-235-9313 Fax 319-235-0365

www.vanmeterinc.com

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INVOICE DATE		OUR INVOICE NUMBER	
05/22/18		S010257381.001	
Bill To#	Ship To#	Price Br	Ship Br
3864	4647	2	7
PLEASE REMIT PAYMENT TO:		DUE DATE	
850 32ND AVENUE SW CEDAR RAPIDS IA 52404-3913		06/22/18	

BILL TO:
55 3 SP 1.420 E0011 I0199 D3642994360 S2 P5376940 0008:0013

UNIVERSITY OF IOWA
202 PLAZA CENTRE ONE (PCO)
ACCOUNTS PAYABLE/TRAVEL DEPT.
IOWA CITY IA 52242

SHIP TO:

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UNIVERSITY PHYSICAL PLANT
FACILITY SERVICES
C000568624-211-18-566201-001
IOWA CITY IA 52240

YOUR PO/ORDER #	ORDERED BY	JOB/RELEASE #	YOUR ACCOUNT MANAGER	
C000568624-211-	Eric	18-566201-001	Tracy Klein SERVC 3778	
ORDER WRITER	SHIP VIA	TERMS	ORDER DATE	SHIP DATE
Shawn Nutt IC 3704	IPK IMMEDIATEPK	NET 30 DAYS NSC	05/22/18	05/22/18

ORDER QTY	SHIP QTY	DESCRIPTION	Unit Price/UM	Extension
20	20	RACO 2003 SS CONNECT 3/4 TS EMT STL	24.230/c	4.85
15	15	MINRLAC 1B 3/4 STL COND HGR	36.950/c	5.54
2	2	RACO 1403 PLASTIC BUSHING 3/4 TS Your # 1001567	11.956/c	0.24
4	4	RACO 1003 3/4IN LOCKNUT Your # 1001568	12.053/c	0.48
1	1	CONDUIT 3/4X1-3/8 CLOSE GALV NIP	86.427/c	0.86
1	1	CONDUIT 3/4X1-1/2 GALV NIPPLE	105.491/c	1.05
10	10	B-LINE B22SHGALV10 SLOTTED CHANNEL, 1 5/8-I . X 1 5/8-IN., 9/16-IN X 1-1/8-IN. SLOTTED HOLES, 12 GA	225.730/c	22.57
10	10	B-LINE N224ZN(1/4) SPRING NUT, 1/4-IN.-20 THREAD, 1/4-IN. NUT	62.708/c	6.27
4	4	RACO 2008 SS CONNECT 2 TS TS EMT ST	163.950/c	6.56
2	2	RACO 1408 PLASTIC BUSHING 2 TS	59.174/c	1.18
4	4	RACO 232 4 SQUARE BOX 2-1/8 Your # 1001789	110.220/c	4.41
4	4	RACO 752 SQUARE COVER 4" FLAT BLANK Your # 1001545	29.150/c	1.17



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Marie Anderson - manderson@vanmeterinc.com
ph 319-368-2828



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Invoice Questions?
Call Shawn Nutt at
319-235-9313

05-22-2018 08:10:16 AM
S010257381.001

Eric

Confirmation of Delivery

Subtotal	**$55.18**
Shipping & Handling	
Sales Tax	**$0.00**
Amount Due	**$55.18**

All claims for shortages or err
1.50% late charge. Our com
warranties thereon. It also di
particular use. Except as pro
and expenses, including but
expenses incurred to collect
immediate pay only and our

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go to Online Ordering and t
For complete terms and cond
https://www.vanmeterinc.com

GROUP 230383

82951433

0008:0013

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Payment details for voucher: 82951433

Voucher ID	Vendor ID	Remit LOC	Vendor Name	Gross Voucher Amt.	Payment Handling Code
82951433	0000124593	002	Van Meter Industrial Incorporated	$55.18	AC

Payment Status	Payment Information	Invoice #	Invoice Date	Remit to	Amt From Voucher
PAID	ACH:582531 Dt: 06/20/2018 Amt: $1,536.53	S010257381.001	05/22/2018	Detail	$55.18

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IOWA CITY IA 52246
319-339-0000 Fax 319-339-1816

www.vanmeterinc.com

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INVOICE DATE		OUR INVOICE NUMBER	
06/05/18		S010274262.001	
Bill To#	Ship To#	Price Br	Ship Br
3864	4647	7	7
PLEASE REMIT PAYMENT TO:		DUE DATE	
850 32ND AVENUE SW CEDAR RAPIDS IA 52404-3913		07/05/18	

BILL TO:
774 2 SP 0.510 E0005 I0038 D3694304598 S2 P5425590 0008:0009

UNIVERSITY OF IOWA
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ACCOUNTS PAYABLE/TRAVEL DEPT.
IOWA CITY IA 52242

ENROLLMENT TOKEN
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SHIP TO:

UNIVERSITY PHYSICAL PLANT
FACILITY SERVICES
C000568624-211-18-566201-001
IOWA CITY IA 52240

YOUR PO/ORDER #	ORDERED BY	JOB/RELEASE #	YOUR ACCOUNT MANAGER	
C000568624-211-	ERIC	18-566201-001	Tracy Klein SERVC 3778	
ORDER WRITER	SHIP VIA	TERMS	ORDER DATE	SHIP DATE
Eugene Marquart IC 3711	IPK IMMEDIATEPK	NET 30 DAYS NSC	06/05/18	06/05/18

ORDER QTY	SHIP QTY	DESCRIPTION	Unit Price/UM	Extension
1	1	WIEG SC121204NK NEMA1 SC BOX-NO KO	29.684/E	29.68
1	1	CONDUIT 1/2 GALV CPLG	97.159/c	0.97
1	1	CONDUIT 1X2 GALV NIP	149.779/c	1.50
2	2	RACO 1404 PLASTIC BUSHING 1 TS	19.163/c	0.38
		Your # 1001575		
1	1	RACO 2008 SS CONNECT 2 TS TS EMT ST	163.950/c	1.64
1	1	ARL EMT200 2 NM BUSHING	108.498/c	1.08

GROUP 230448
82952362

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ph 319-368-2828

Invoice is due by 07/05/18.

Invoice Questions?
Call Eugene Marquart at
319-339-0000

06-05-2018 10:45:01 AM
S010274262.001

Eric

ERIC

Subtotal	**$35.25**
Shipping & Handling	
Sales Tax	**$0.00**
Amount Due	**$35.25**

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Confirmation of Delivery

0008:0009

AP/PO PeopleSoft Web Applications

Payment details for voucher: 82952362

Voucher ID	Vendor ID	Remit LOC	Vendor Name	Gross Voucher Amt.	Payment Handling Code
82952362	0000124593	002	Van Meter Industrial Incorporated	$35.25	AC

Payment Status	Payment Information	Invoice #	Invoice Date	Remit to	Amt From Voucher
PAID	ACH:585685 Dt: 07/03/2018 Amt: $5,878.49	S010274262.001	06/05/2018	Detail	$35.25

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IN

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470 Ruppert Road
IOWA CITY IA 52246
319-339-0000 Fax 319-339-1816

www.vanmeterinc.com

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INVOICE DATE		OUR INVOICE NUMBER	
06/04/18		S010272138.001	
Bill To#	Ship To#	Price Br	Ship Br
3864	4647	7	7
PLEASE REMIT PAYMENT TO:		DUE DATE	
850 32ND AVENUE SW CEDAR RAPIDS IA 52404-3913		07/04/18	

BILL TO:
774 2 SP 0.510 E0005X I0031 D3689965780 S2 P5425590 0001:0009

UNIVERSITY OF IOWA
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C000568624-211-18-566201-001
IOWA CITY IA 52240

YOUR PO/ORDER #	ORDERED BY	JOB/RELEASE #	YOUR ACCOUNT MANAGER	
C000568624-211-	ERIC	18-566201-001	Tracy Klein SERVC 3778	
ORDER WRITER	SHIP VIA	TERMS	ORDER DATE	SHIP DATE
Eugene Marquart IC 3711	**PK PICKUP	NET 30 DAYS NSC	06/04/18	06/04/18

ORDER QTY	SHIP QTY	DESCRIPTION	Unit Price/UM	Extension
8	8	T&B L70 14-4 CU SCR LUG	192.375/c	15.39

GROUP 230448
82952355

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ph 319-368-2828

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Invoice Questions?
Call Eugene Marquart at
319-339-0000

06-04-2018 09:35:53 AM
S010272138.001
Erick
ERIC

Confirmation of Delivery

Subtotal	**$15.39**
Shipping & Handling	
Sales Tax	**$0.00**
Amount Due	**$15.39**

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0001:0009

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Payment details for voucher: 82952355

Voucher ID	Vendor ID	Remit LOC	Vendor Name	Gross Voucher Amt.	Payment Handling Code
82952355	0000124593	002	Van Meter Industrial Incorporated	$15.39	AC

Payment Status	Payment Information	Invoice #	Invoice Date	Remit to	Amt From Voucher
PAID	ACH:585685 Dt: 07/03/2018 Amt: $5,878.49	S010272138.001	06/04/2018	Detail	$15.39

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Please direct inquires regarding using this application to acntpay@uiowa.edu

INVOICE

VAN METER INC.
470 Ruppert Road
IOWA CITY IA 52246
319-339-0000 Fax 319-339-1816

www.vanmeterinc.com

VAN METER
A 100% EMPLOYEE-OWNED COMPANY

INVOICE DATE		OUR INVOICE NUMBER	
06/11/18		S010281471.001	
Bill To#	Ship To#	Price Br	Ship Br
3864	4647	7	7
PLEASE REMIT PAYMENT TO:		DUE DATE	
850 32ND AVENUE SW CEDAR RAPIDS IA 52404-3913		07/11/18	

BILL TO:
687 3 SP 0.510 E0010 I0077 D3711225536 S2 P5440314 0010:0011

UNIVERSITY OF IOWA
202 PLAZA CENTRE ONE (PCO)
ACCOUNTS PAYABLE/TRAVEL DEPT.
IOWA CITY IA 52242

ENROLLMENT TOKEN
LRK PFX TRL

SHIP TO:
UNIVERSITY PHYSICAL PLANT
FACILITY SERVICES
IOWA CITY IA 52240

YOUR PO/ORDER #	ORDERED BY	JOB/RELEASE #	YOUR ACCOUNT MANAGER	
C000568624-211-	Eric	18-566201-001	Tracy Klein SERVC 3778	
ORDER WRITER	SHIP VIA	TERMS	ORDER DATE	SHIP DATE
Shawn Nutt IC 3704	**PK PICKUP	NET 30 DAYS NSC	06/11/18	06/11/18

ORDER QTY	SHIP QTY	DESCRIPTION	Unit Price/UM	Extension
100	100	CULLY 55420J 3/8-16 X 1-1/4 HEX HEAD BOLT Z	13.892/c	13.89
100	100	CULLY 55424J 3/8-16 X 1-1/2 HEX HEAD BOLT Z	15.874/c	15.87
100	100	CULLY 55416J 3/8-16 X 1 HEX HEAD BOLT ZP	11.210/c	11.21
100	100	CULLY 40741J 3/8 X 1 FENDER WASHER ZP	5.252/c	5.25
100	100	CULLY 40743J 3/8 X 1-1/4 FENDER WASHER ZP	6.898/c	6.90

GROUP 230451
82952432

SAVE TIME SAVE A TREE

Would you prefer to have your invoices
Emailed or Faxed ??
If so - please contact me - we can set it up today!
Marie Anderson - manderson@vanmeterinc.com
ph 319-368-2828

Invoice is due by 07/11/18.

Invoice Questions?
Call Shawn Nutt at
319-339-0000

06-11-2018 09:54:05 AM
S010281471.001
Eric

Subtotal	**$53.12**
Shipping & Handling	
Sales Tax	**$0.00**
Amount Due	**$53.12**

All claims for shortages or errors must be made at once. Past due invoices may be subject to a 1.50% late charge. Our company does not manufacture the goods it sells and makes no express warranties thereon. It also disclaims all implied warranty of merchantability or fitness for a particular use. Except as prohibited by law, you are responsible for payment of all fees, costs, and expenses, including but not limited to, attorney fees, expert witness fees, and deposition expenses incurred to collect all amounts due from you. We accept credit card payments for immediate pay only and our credit terms are NET.

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Confirmation of Delivery

0010:0011

AP/PO PeopleSoft Web Applications

Your path: Home > Payment

User options | Help

Payment details for voucher: 82952432

Voucher ID	Vendor ID	Remit LOC	Vendor Name	Gross Voucher Amt.	Payment Handling Code
82952432	0000124593	002	Van Meter Industrial Incorporated	$53.12	AC

Payment Status	Payment Information	Invoice #	Invoice Date	Remit to	Amt From Voucher
PAID	ACH:587062 Dt: 07/11/2018 Amt: $4,091.43	S010281471.001	06/11/2018	Detail	$53.12

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IOWA CITY IA 52246
319-339-0000 Fax 319-339-1816

www.vanmeterinc.com

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INVOICE DATE		OUR INVOICE NUMBER	
06/14/18		S010287570.001	
Bill To#	Ship To#	Price Br	Ship Br
3864	4647	7	7
PLEASE REMIT PAYMENT TO:		DUE DATE	
850 32ND AVENUE SW CEDAR RAPIDS IA 52404-3913		07/14/18	

BILL TO:
243 2 SP 0.680 E0065 I0504 D3723317866 S2 P5450236 0008:0009

UNIVERSITY OF IOWA
202 PLAZA CENTRE ONE (PCO)
ACCOUNTS PAYABLE/TRAVEL DEPT.
IOWA CITY IA 52242

SHIP TO:

ENROLLMENT TOKEN
LRK PFX TRL

UNIVERSITY PHYSICAL PLANT
FACILITY SERVICES
C000568624-211-18-566201-001
IOWA CITY IA 52240

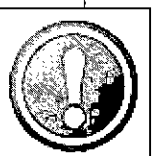
YOUR PO/ORDER #	ORDERED BY	JOB/RELEASE #	YOUR ACCOUNT MANAGER	
C000568624-211-	AARON	18-566201-001	Tracy Klein SERVC 3778	
ORDER WRITER	SHIP VIA	TERMS	ORDER DATE	SHIP DATE
Carter Valentine IC 3727	**PK PICKUP	NET 30 DAYS NSC	06/14/18	06/14/18

ORDER QTY	SHIP QTY	DESCRIPTION	Unit Price/UM	Extension
500	500	3M 312-BAG (500/BAG) YEL CPNS WING NUT WIRE CONN NYLON/INS	80.868/m	40.43
100	100	CULLY 26809J 8X1/2 WAF DRIL TEK PHIL Z	2.530/c	2.53
100	100	CULLY 26809J 8X1/2 WAF DRIL TEK PHIL Z	2.530/c	2.53

GROUP 230246
82948760



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Emailed or Faxed ??
If so - please contact me - we can set it up today!
Marie Anderson - manderson@vanmeterinc.com
ph 319-368-2828



Invoice is due by 07/14/18.

Invoice Questions?
Call Carter Valentine at
319-339-0000

06-14-2018 11:37:52 AM
S010287570.001

AARON

Confirmation of Delivery

Subtotal	**$45.49**
Shipping & Handling	
Sales Tax	**$0.00**
Amount Due	**$45.49**

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0008:0009

AP/PO PeopleSoft Web Applications

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Payment details for voucher: 82948760

Voucher ID	Vendor ID	Remit LOC	Vendor Name	Gross Voucher Amt.	Payment Handling Code
82948760	0000124593	002	Van Meter Industrial Incorporated	$45.49	AC

Payment Status	Payment Information	Invoice #	Invoice Date	Remit to	Amt From Voucher
PAID	ACH:587481 Dt: 07/13/2018 Amt: $11,401.99	S101287570.001	06/14/2018	Detail	$45.49

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INVOICE

VAN METER INC.
470 Ruppert Road
IOWA CITY IA 52246
319-339-0000 Fax 319-339-1816

www.vanmeterinc.com

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INVOICE DATE	OUR INVOICE NUMBER		
06/15/18	S010289131.001		
Bill To#	Ship To#	Price Br	Ship Br
3864	4647	7	7
PLEASE REMIT PAYMENT TO:		DUE DATE	
850 32ND AVENUE SW CEDAR RAPIDS IA 52404-3913		07/15/18	

BILL TO:
983 3 SP 0.510 E0006 I0042 D3728280866 S2 P5454788 0011:0011

UNIVERSITY OF IOWA
202 PLAZA CENTRE ONE (PCO)
ACCOUNTS PAYABLE/TRAVEL DEPT.
IOWA CITY IA 52242

SHIP TO:

ENROLLMENT TOKEN
LRK PFX TRL

UNIVERSITY PHYSICAL PLANT
FACILITY SERVICES
C000568624-211-18-566201-001
IOWA CITY IA 52240

YOUR PO/ORDER #	ORDERED BY	JOB/RELEASE #	YOUR ACCOUNT MANAGER	
C000568624-211-	ANTHONY	18-566201-001	Tracy Klein SERVC 3778	
ORDER WRITER	SHIP VIA	TERMS	ORDER DATE	SHIP DATE
Carter Valentine IC 3727	**PK PICKUP	NET 30 DAYS NSC	06/15/18	06/15/18

ORDER QTY	SHIP QTY	DESCRIPTION	Unit Price/UM	Extension
1	1	BRADY M21-750-595-WT 142797 BMP21 CART .75IN X 21FT BLK/WHT B595	23.892/E	23.89
100	100	RACO 752 SQUARE COVER 4" FLAT BLANK Your # 1001545	29.150/c	29.15

GROUP 230963
82966773

SAVE TIME SAVE A TREE

Would you prefer to have your invoices
Emailed or Faxed ??
If so - please contact me - we can set it up today!
Marie Anderson - manderson@vanmeterinc.com
ph 319-368-2828

Invoice is due by 07/15/18.

Invoice Questions?
Call Carter Valentine at
319-339-0000

06-15-2018 09:23:52 AM
S010289131.001

Anthony
ANTHONY

Confirmation of Delivery

Subtotal	**$53.04**
Shipping & Handling	
Sales Tax	**$0.00**
Amount Due	**$53.04**

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0011:0011

AP/PO PeopleSoft Web Applications

Payment details for voucher: 82966773

Voucher ID	Vendor ID	Remit LOC	Vendor Name	Gross Voucher Amt.	Payment Handling Code
82966773	0000124593	002	Van Meter Industrial Incorporated	$53.04	AC

Payment Status	Payment Information	Invoice #	Invoice Date	Remit to	Amt From Voucher
PAID	ACH:587481 Dt: 07/13/2018 Amt: $11,401.99	S010289131.001	06/15/2018	Detail	$53.04

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319-339-0000 Fax 319-339-1816

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INVOICE DATE		OUR INVOICE NUMBER	
06/18/18		S010291603.001	
Bill To#	Ship To#	Price Br	Ship Br
3864	4647	7	7
PLEASE REMIT PAYMENT TO:		DUE DATE	
850 32ND AVENUE SW CEDAR RAPIDS IA 52404-3913		07/18/18	

BILL TO:
116 3 SP 1.420 E0029 I0570 D3732267444 S2 P5458146 0013:0013

UNIVERSITY OF IOWA
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SHIP TO:
UNIVERSITY PHYSICAL PLANT
FACILITY SERVICES
C000568624-211-18-566201-001
IOWA CITY IA 52240

YOUR PO/ORDER #	ORDERED BY	JOB/RELEASE #	YOUR ACCOUNT MANAGER	
C000568624-211-	ERIC	18-566201-001	Tracy Klein SERVC 3778	
ORDER WRITER	SHIP VIA	TERMS	ORDER DATE	SHIP DATE
Carter Valentine IC 3727	IPK IMMEDIATEPK	NET 30 DAYS NSC	06/18/18	06/18/18

ORDER QTY	SHIP QTY	DESCRIPTION	Unit Price/UM	Extension
4	4	RACO 837 MUD RING 4-11/16SQ RSD1/2 1DVC	247.130/c	9.89
2	2	RACO 843 MUD RING 4-11/16SQ RSD5/8 1DVC	198.960/C	3.98
6	6	RACO 774 MUD RING 4SQ RSD 1	88.120/c	5.29

GROUP 230970
82966945



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Emailed or Faxed ??
If so - please contact me - we can set it up today!
Marie Anderson - manderson@vanmeterinc.com
ph 319-368-2828



Invoice is due by 07/18/18.

Invoice Questions?
Call Carter Valentine at
319-339-0000

06-18-2018 01:38:01 PM
S010291603.001

Eric

ERIC

Subtotal	**$19.16**
Shipping & Handling	
Sales Tax	**$0.00**
Amount Due	**$19.16**

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Confirmation of Delivery

0013:0013

AP/PO PeopleSoft Web Applications

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Payment details for voucher: 82966945

Voucher ID	Vendor ID	Remit LOC	Vendor Name	Gross Voucher Amt.	Payment Handling Code
82966945	0000124593	002	Van Meter Industrial Incorporated	$19.16	AC

Payment Status	Payment Information	Invoice #	Invoice Date	Remit to	Amt From Voucher
PAID	ACH:588247 Dt: 07/18/2018 Amt: $16,052.20	S010291603.001	06/18/2018	Detail	$19.16

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IN

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IOWA CITY IA 52246
319-339-0000 Fax 319-339-1816

www.vanmeterinc.com

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INVOICE DATE		OUR INVOICE NUMBER	
06/27/18		S010287012.001	
Bill To#	Ship To#	Price Br	Ship Br
3864	4647	7	7
PLEASE REMIT PAYMENT TO:		DUE DATE	
850 32ND AVENUE SW CEDAR RAPIDS IA 52404-3913		07/27/18	

BILL TO:
699 3 SP 0.510 E0006 I0042 D3764804716 S2 P5485448 0003:0012

UNIVERSITY OF IOWA
202 PLAZA CENTRE ONE (PCO)
ACCOUNTS PAYABLE/TRAVEL DEPT.
IOWA CITY IA 52242

SHIP TO:

ENROLLMENT TOKEN
SHX WRS DHX

UNIVERSITY PHYSICAL PLANT
FACILITY SERVICES
C000568624-211-18-566201-001
IOWA CITY IA 52240

YOUR PO/ORDER #	ORDERED BY	JOB/RELEASE #	YOUR ACCOUNT MANAGER	
C000568624-211-	ERIC	18-566201-001	Tracy Klein SERVC 3778	
ORDER WRITER	SHIP VIA	TERMS	ORDER DATE	SHIP DATE
Eugene Marquart IC 3711	**PK PICKUP	NET 30 DAYS NSC	06/14/18	06/27/18

ORDER QTY	SHIP QTY	DESCRIPTION	Unit Price/UM	Extension
51	51	RACO 767 1/2IN RND MUD RING W/EARS	79.510/c	40.55
166	166	RACO 756 5/8IN RND MUD RING EARS	59.320/c	98.47

GROUP 231021
82968206



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Marie Anderson - manderson@vanmeterinc.com
ph 319-368-2828



Invoice is due by 07/27/18.

Invoice Questions?
Call Eugene Marquart at
319-339-0000

06-27-2018 11:11:37 AM
S010287012.001

ERIC

Confirmation of Delivery

Subtotal	**$139.02**
Shipping & Handling	
Sales Tax	**$0.00**
Amount Due	**$139.02**

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0003:0012

AP/PO PeopleSoft Web Applications

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Payment details for voucher: 82968206

Voucher ID	Vendor ID	Remit LOC	Vendor Name	Gross Voucher Amt.	Payment Handling Code
82968206	0000124593	002	Van Meter Industrial Incorporated	$139.02	AC

Payment Status	Payment Information	Invoice #	Invoice Date	Remit to	Amt From Voucher
PAID	ACH:590505 Dt: 07/27/2018 Amt: $7,864.23	S010287012.001	06/27/2018	Detail	$139.02

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Johnson Controls

D-U-N-S 09-4738007
FED. ID 52-2608861

INVOICE NO.	INVOICE DATE	CUSTOMER
41179243	07/20/2018	C000574783 Job-18-566201-001

TERMS	INVOICE TYPE
NET30	Standard Invoice

DES MOINES
11318 AURORA AVE
URBANDALE IA 50322
Phone: (515) 278-4100

21B Invoice - Page 1 of 2

BILL TO: 320-057052450
University of Iowa Accounts Pa
202 Plaza Centre One (Pco
Accounts Payable
IOWA CITY IA 52242-2500

PROJECT: 320-607379401
University Of Iowa
640 S MADISON ST
Facilities Fire Safety
IOWA CITY IA 52240-1023

INVOICE SUMMARY

TOTAL P.O.	-	$506.22	INVOICE SUBTOTAL	-	$506.22
INVOICED TO DATE	-	$506.22	LESS RETAINAGE	-	$0.00
DUE THIS INVOICE	-	$506.22	SUBTOTAL	-	$506.22
REMAINING TO INVOICE	-	$0.00	SALES TAX	-	$0.00
			TOTAL INVOICE	-	$506.22

Please direct inquiries to our local branch office listed above. **PAY THIS AMOUNT** ▷ **$506.22**

INVOICE DETAIL

MATERIAL	Fire Alarm	Material	$506.22

TOTAL MATERIAL THIS INVOICE: $506.22

GROUP 230348

82951069

Comments

REMITTANCE COPY

Johnson Controls

PLEASE TEAR OFF AND RETURN THIS PORTION WITH YOUR PAYMENT - WRITE INVOICE NO. ON YOUR CHECK.

INVOICE AMOUNT
$506.22

BILL TO 320-057052450 University of Iowa Accounts P

SHIP TO 320-057052450 University Of Iowa

INVOICE NUMBER 41179243

INVOICE DATE 07/20/2018

CUSTOMER P.O. C000574783 Job-18-566201-001

REMIT TO Johnson Controls Fire Protection LP
Dept. CH 10320
Palatine, IL 60055-0320

1000050622341179243

473-M999

Johnson Controls

D-U-N-S 09-4738007
FED. ID 58-2608861

INVOICE NO.	INVOICE DATE	CUSTOMER
41179243	07/20/2018	C0005747

TERMS	INVOICE TYPE
NET30	Standard Invoice

DES MOINES
11318 AURORA AVE
URBANDALE IA 50322
Phone: (515) 278-4100

BILL TO: 320-057052450
University of Iowa Accounts Pa
202 Plaza Centre One (Pco
Accounts Payable
IOWA CITY IA 52242-2500

PROJECT: 320-607379401
University Of Iowa
640 S MADISON ST
Facilities Fire Safety
IOWA CITY IA 52240-1023

SHIPMENT DETAIL SINCE LAST INVOICE

SHIPPING REFERENCE: DROPSHIP 06/30/2018
16 ea 2975-9178 BACKBOX MANUAL STATION

AP/PO PeopleSoft Web Applications

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Payment details for voucher: 82951069

Voucher ID	Vendor ID	Remit LOC	Vendor Name	Gross Voucher Amt.	Payment Handling Code
82951069	0000284538	002	Johnson Controls Fire Protection LP	$506.22	AC

Payment Status	Payment Information	Invoice #	Invoice Date	Remit to	Amt From Voucher
PAID	ACH:594521 Dt: 08/17/2018 Amt: $22,326.72	41179243	07/20/2018	Detail	$506.22

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Johnson Controls Fire

Johnson Controls

D-U-N-S 09-4738007
FED. ID 58-2608861

DES MOINES
11318 AURORA AVE
URBANDALE IA 50322
Phone: (515) 278-4100

INVOICE NO.	INVOICE DATE	CUSTOMER PO
41194681	08/31/2018	1001921006

TERMS	INVOICE TYPE
NET30	Schedule of Values

BILL TO: 320-057052450
University of Iowa Accounts Pa
202 Plaza Centre One (Pco
Accounts Payable
IOWA CITY IA 52242-2500

PROJECT: 320-605435001
University Of Iowa Medical Res
501 Newton Road
IOWA CITY IA 52244-0000

INVOICE SUMMARY

TOTAL P.O.	-	$72,480.30	INVOICE SUBTOTAL	-	$15,724.57
INVOICED TO DATE	-	$68,856.29	LESS RETAINAGE	-	$786.22
DUE THIS INVOICE	-	$14,938.35	SUBTOTAL	-	$14,938.35
REMAINING TO INVOICE	-	$3,624.01	SALES TAX	-	$0.00
			TOTAL INVOICE	-	$14,938.35

Please direct inquiries to our local branch office listed above.

PAY THIS AMOUNT ▷ **$14,938.35**

PROGRESS BILLING FORMS FOLLOW:

GROUP 232490

83019513

Comments acntpay@uiowa.gov

REMITTANCE COPY

Johnson Controls

PLEASE TEAR OFF AND RETURN THIS PORTION WITH YOUR PAYMENT - WRITE INVOICE NO. ON YOUR CHECK.

INVOICE AMOUNT
$14,938.35

BILL TO 320-057052450 University of Iowa Accounts Pa

SHIP TO 320-057052450 University Of Iowa Medical Res

INVOICE NUMBER 41194681

INVOICE DATE 08/31/2018

CUSTOMER P.O. 1001921006

REMIT TO Johnson Controls Fire Protection LP
Dept. CH 10320
Palatine, IL 60055-0320

1001493835641194681

462-SOVS

Johnson Controls

APPLICATION AND CERTIFICATE FOR PAYMENT

To Owner:
University of Iowa Accounts Pa
202 Plaza Centre One (Pco
Accounts Payable
IOWA CITY IA 52242-2500

From Contractor:
DES MOINES
11318 AURORA AVE
URBANDALE IA 50322
Phone: (515) 278-4100

PROJECT NAME	PROJECT NUMBER	APPLICATION NO.
UI MRF System replacement	605435001	00002

CUSTOMER P.O.	INVOICE NO.	INVOICE DATE
1001921006	41194681	08/31/2018

PERIOD TO: 08/15/2018

DISTRIBUTION LIST:
- ☐ Owner
- ☐ Architect
- ☐ Contractor
- ☐ _____

CONTRACTOR'S APPLICATION FOR PAYMENT

Application is made for Payment, as shown above, in connection with the Contract.
Continuation Sheet is attached.

1.	Original Contract Sum		$72,480.30
2.	Net Change By Change Orders		$0.00
3.	Contract Sum To Date		$72,480.30
4.	Total Completed & Stored To Date		$72,480.30
5.	RETAINAGE Of Work Complete		$3,624.01
6.	Total Earned Less RETAINAGE		$68,856.29
7.	Less Previous Certificates		$53,917.94
8.	Current Payment Before Sales Tax	$14,938.35	
	Sales Tax	$0.00	
	Total Current Payment Due Including Sales Tax		$14,938.35
9.	Balance To Finish, Not Including Sales Tax		$3,624.01

CHANGE ORDER SUMMARY	ADDITIONS	DEDUCTIONS
TOTAL CHANGES APPROVED IN PREVIOUS MONTH BY OWNER:	$0.00	$0.00
TOTALS APPROVED THIS MONTH:	$0.00	$0.00
TOTALS:	$0.00	$0.00
NET CHANGES BY CHANGE ORDER:		**$0.00**

JANELLE R COLLINS
Notary Public
COMMONWEALTH OF MASSACHUSETTS
My Commission Expires
February 22, 2024

The undersigned Contractor certifies that to the best of the Contractor's knowledge, information and belief the work covered by this Application for Payment has been completed in accordance with the Contract Documents, that all amounts have been paid by the Contractor for Work for which previous Certificates For Payment were issued and payments received from the Owner, and that current payment shown herein is now due.

CONTRACTOR: Johnson Controls Fire Protection LP

By: Jeff Bancher Date: 9/5/18
State of: Massachusetts County of: Worcester
Subscribed and sworn to before me this 5 Day of Sept,
Notary Public: Janelle R Collins
My Commission expires: 2/22/24

ARCHITECT'S CERTIFICATE FOR PAYMENT

In accordance with the Contract Documents, based on on-site observations and the data comprising the above application, the Architect certifies to the Owner that to the best of the Architect's knowledge, information and belief the Work has progressed as indicated, the quality of the Work is in accordance with the Contract Documents, and the Contractor is entitled to payment of the AMOUNT CERTIFIED.

AMOUNT CERTIFIED
Attach explanation if amount certified differs from the amount applied for.

ARCHITECT:

By: _____ Date: _____
This Certificate is not negotiable. The AMOUNT CERTIFIED is payable only to the Contractor named herein. Issuance, payment and acceptance of payment are without prejudice to any rights of the Owner or Contractor under this Contract.

463-SOVS

Johnson Controls

APPLICATION AND CERTIFICATE FOR PAYMENT DETAIL PAGE

To Owner:
University of Iowa Accounts Pa
202 Plaza Centre One (Pco
Accounts Payable
IOWA CITY IA 52242-2500

From Contractor:
DES MOINES
11318 AURORA AVE
URBANDALE IA 50322
Phone: (515) 278-4100

PROJECT NAME	PROJECT NUMBER	APPLICATION NO.
UI MRF System replacement	605435001	00002

CUSTOMER P.O.	INVOICE NO.	INVOICE DATE
1001921006	41194681	08/31/2018

PERIOD TO:
08/15/2018

A ITEM NO	B DESCRIPTION OF WORK	C SCHEDULED VALUE	D PREVIOUS APPLICATION	E THIS PERIOD	F MATERIAL STORED	G TOTAL COMPLETED AND STORED	H %	I BALANCE TO FINISH	J RETAINAGE TO DATE
00001	Fire Alarm Material	$56,755.73	$56,755.73	$0.00	$0.00	$56,755.73	100.00	$0.00	$2,837.79
00002	Fire Alarm Commissioning Labor	$4,343.60	$0.00	$4,343.60	$0.00	$4,343.60	100.00	$0.00	$217.18
00003	Fire Alarm Preparation Labor	$376.46	$0.00	$376.46	$0.00	$376.46	100.00	$0.00	$18.82
00004	Fire Alarm Project Management	$1,686.86	$0.00	$1,686.86	$0.00	$1,686.86	100.00	$0.00	$84.34
00005	Fire Alarm Electrical Contract	$9,317.65	$0.00	$9,317.65	$0.00	$9,317.65	100.00	$0.00	$465.88
	SUBTOTAL	$72,480.30	$56,755.73	$15,724.57	$0.00	$72,480.30	100.00%	$0.00	$3,624.01

464-SOVS

AP/PO PeopleSoft Web Applications

Payment details for voucher: 83019513

Voucher ID	Vendor ID	Remit LOC	Vendor Name	Gross Voucher Amt.	Payment Handling Code
83019513	0000284538	002	Johnson Controls Fire Protection LP	$14,938.35	AC

Payment Status	Payment Information	Invoice #	Invoice Date	Remit to	Amt From Voucher
PAID	ACH:603193 Dt: 09/28/2018 Amt: $22,924.55	41194681	08/31/2018	Detail	$14,938.35

New Payment Search
AP-PO Web Applications Home Page
Self-Service

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Johnson Controls

D-U-N-S 09-4738007
FED. ID 58-2608861

Johnson Controls Fire Protection LP

INVOICE NO.	INVOICE DATE	CUSTOMER PO
41218972	11/19/2018	1001921006

TERMS	INVOICE TYPE
NET30	Schedule of Values

DES MOINES
11318 AURORA AVE
URBANDALE IA 50322
Phone: (515) 278-4100

BILL TO: 320-057052450
University of Iowa Accounts Pa
202 Plaza Centre One (Pco
Accounts Payable
IOWA CITY IA 52242-2500

PROJECT: 320-605435001
University Of Iowa Medical Res
501 Newton Road
IOWA CITY IA 52244-0000

INVOICE SUMMARY

TOTAL P.O.	-	$72,480.30	INVOICE SUBTOTAL	-	$3,624.01
INVOICED TO DATE	-	$72,480.30	LESS RETAINAGE	-	$0.00
DUE THIS INVOICE	-	$3,624.01	SUBTOTAL	-	$3,624.01
REMAINING TO INVOICE	-	$0.00	SALES TAX	-	$0.00
			TOTAL INVOICE	-	$3,624.01

Please direct inquiries to our local branch office listed above.

PAY THIS AMOUNT ▷ **$3,624.01**

PROGRESS BILLING FORMS FOLLOW:

GROUP 234427
83084908

Comments acntpay@uiowa.edu

REMITTANCE COPY

Johnson Controls

PLEASE TEAR OFF AND RETURN THIS PORTION WITH YOUR PAYMENT - WRITE INVOICE NO. ON YOUR CHECK.

INVOICE AMOUNT
$3,624.01

BILL TO 320-057052450 University of Iowa Accounts Pa

SHIP TO 320-057052450 University Of Iowa Medical Res

INVOICE NUMBER 41218972

INVOICE DATE 11/19/2018

CUSTOMER P.O. 1001921006

REMIT TO Johnson Controls Fire Protection LP
Dept. CH 10320
Palatine, IL 60055-0320

4000362401241218972

125-8OV8

Johnson Controls

APPLICATION AND CERTIFICATE FOR PAYMENT

To Owner:
University of Iowa Accounts Pa
202 Plaza Centre One (Pco
Accounts Payable
IOWA CITY IA 52242-2500

From Contractor:
DES MOINES
11318 AURORA AVE
URBANDALE IA 50322
Phone: (515) 278-4100

PROJECT NAME	PROJECT NUMBER	APPLICATION NO.	DISTRIBUTION LIST:
UI MRF System replacement	605435001	00003	☐ Owner ☐ Architect ☐ Contractor ☐

CUSTOMER P.O.	INVOICE NO.	INVOICE DATE	PERIOD TO:
1001921006	41218972	11/19/2018	11/15/2018

CONTRACTOR'S APPLICATION FOR PAYMENT

Application is made for Payment, as shown above, in connection with the Contract.
Continuation Sheet is attached.

1.	Original Contract Sum		$72,480.30
2.	Net Change By Change Orders		$0.00
3.	Contract Sum To Date		$72,480.30
4.	Total Completed & Stored To Date		$72,480.30
5.	RETAINAGE Of Work Complete		$0.00
6.	Total Earned Less RETAINAGE		$72,480.30
7.	Less Previous Certificates		$68,856.29
8.	Current Payment Before Sales Tax	$3,624.01	
	Sales Tax	$0.00	
	Total Current Payment Due Including Sales Tax		$3,624.01
9.	Balance To Finish, Not Including Sales Tax		$0.00

CHANGE ORDER SUMMARY	ADDITIONS	DEDUCTIONS
TOTAL CHANGES APPROVED IN PREVIOUS MONTH BY OWNER:	$0.00	$0.00
TOTALS APPROVED THIS MONTH:	$0.00	$0.00
TOTALS:	$0.00	$0.00
NET CHANGES BY CHANGE ORDER:		**$0.00**

JOSHUA SCHONBORG
Notary Public
COMMONWEALTH OF MASSACHUSETTS
My Commission Expires
October 17, 2025

The undersigned Contractor certifies that to the best of the Contractor's knowledge, information and belief the work covered by this Application for Payment has been completed in accordance with the Contract Documents, that all amounts have been paid by the Contractor for Work for which previous Certificates For Payment were issued and payments received from the Owner, and that current payment shown herein is now due.

CONTRACTOR: Johnson Controls Fire Protection LP

By: [signature] Date: 11/20/18

State of: MA County of: Worcester

Subscribed and sworn to before me this 20 Day of Nov, 2018,

Notary Public: [signature]

My Commission expires: 10-17-25

ARCHITECT'S CERTIFICATE FOR PAYMENT

In accordance with the Contract Documents, based on on-site observations and the data comprising the above application, the Architect certifies to the Owner that to the best of the Architect's knowledge, information and belief the Work has progressed as indicated, the quality of the Work is in accordance with the Contract Documents, and the Contractor is entitled to payment of the AMOUNT CERTIFIED.

AMOUNT CERTIFIED

Attach explanation if amount certified differs from the amount applied for.

ARCHITECT:

By: _____ Date: _____

This Certificate is not negotiable. The AMOUNT CERTIFIED is payable only to the Contractor named herein. Issuance, payment and acceptance of payment are without prejudice to any rights of the Owner or Contractor under this Contract.

126-SOV8

Johnson Controls

APPLICATION AND CERTIFICATE FOR PAYMENT DETAIL PAGE

To Owner:
University of Iowa Accounts Pa
202 Plaza Centre One (Pco
Accounts Payable
IOWA CITY IA 52242-2500

From Contractor:
DES MOINES
11318 AURORA AVE
URBANDALE IA 50322
Phone: (515) 278-4100

PROJECT NAME	PROJECT NUMBER	APPLICATION NO.
UI MRF System replacement	605435001	00003

CUSTOMER P.O.	INVOICE NO.	INVOICE DATE	PERIOD TO:
1001921006	41218972	11/19/2018	11/15/2018

A ITEM NO	B DESCRIPTION OF WORK	C SCHEDULED VALUE	D PREVIOUS APPLICATION	E THIS PERIOD	F MATERIAL STORED	G TOTAL COMPLETED AND STORED	H %	I BALANCE TO FINISH	J RETAINAGE TO DATE
00001	Fire Alarm Material	$56,755.73	$56,755.73	$0.00	$0.00	$56,755.73	100.00	$0.00	$0.00
00002	Fire Alarm Commissioning Labor	$4,343.60	$4,343.60	$0.00	$0.00	$4,343.60	100.00	$0.00	$0.00
00003	Fire Alarm Preparation Labor	$376.46	$376.46	$0.00	$0.00	$376.46	100.00	$0.00	$0.00
00004	Fire Alarm Project Management	$1,686.86	$1,686.86	$0.00	$0.00	$1,686.86	100.00	$0.00	$0.00
00005	Fire Alarm Electrical Contract	$9,317.65	$9,317.65	$0.00	$0.00	$9,317.65	100.00	$0.00	$0.00
	SUBTOTAL	$72,480.30	$72,480.30	$0.00	$0.00	$72,480.30	100.00%	$0.00	$0.00

127-6OV3

AP/PO PeopleSoft Web Applications

Your path: Home > Payment

User options | Help

Payment details for voucher: 83084908

Voucher ID	Vendor ID	Remit LOC	Vendor Name	Gross Voucher Amt.	Payment Handling Code
83084908	0000284538	002	Johnson Controls Fire Protection LP	$3,624.01	AC

Payment Status	Payment Information	Invoice #	Invoice Date	Remit to	Amt From Voucher
PAID	ACH:624600 Dt: 01/07/2019 Amt: $3,624.01	41218972	11/19/2018	Detail	$3,624.01

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AP-PO Web Applications Home Page
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PO 1001926

SCHUMACHER ELEVATOR COMPANY
PO Box 393
One Schumacher Way
Denver, Iowa 50622

Phone: (319) 984-5676
Fax: (319) 406-1270
Internet: www.schumacherelevator.com
E-mail: accounting@schumacherelevator.com

Invoice

Billing Address

SOLD TO ACCT NO 1001532

UNIVERSITY OF IOWA
ACCOUNTS PAYABLE & TRAVEL
202 PCO
IOWA CITY IA 52242-2500

Shipping Address

SHIP TO ACCT NO 1001936

U OF IA - MEDICAL RESEARCH CENTER
501 NEWTON RD
IOWA CITY IA 52242

Information

Document Number	90429780
Document Date	01/17/2018
Purchase Order No.	
Purchase Order Date	00/00/0000
Payment Terms	Net 30 Days
Billing Date	01/17/2018
Currency	USD

1 of 1

Item	Material Description	Quantity	Unit Price	Amount
	Invoice for service call on 1/2/2018. Technicians worked on the elevators after a steam pipe broke over the weekend. Copy of work slip is enclosed.			
0010	MS1 MECHANIC (SPECIAL REGULAR TIME)	5.50 H	203.08	1,116.94
			Items Tot	1,116.94
			State Tax	0.00
			County Tax	0.00
			City Tax	0.00
			Total Amount	$ 1,116.94

zsec_invoice1sld 01/2004

Date: 1/2/18 Notification #: N3198436

Repair Job #: _____ Elevator ID#: #5

Customer: MRF

Location: IC

FM 4-3930

800-779-5438
Established in 1936
Schumacher Elevator Company
One Schumacher Way
P.O. Box 393 – Denver, IA 50622

Cedar Rapids 319-362-1017
Davenport 800-779-5438
Denver 319-984-5676
Des Moines 515-243-5487
Dubuque 563-588-4863
Fort Dodge 515-576-7266
Iowa City 800-779-5438
Marshalltown 800-779-5438
Mason City 641-424-1307
Ottumwa 800-779-5438
Sioux City 712-258-3535
Waterloo 319-984-5676
Quincy, IL 800-779-5438
Rockford, IL 815-963-8340
Minneapolis, MN 612-333-3066
Rochester, MN 507-285-0251
Kirksville, MO 800-779-5438
Sioux Falls, SD 800-779-5438
LaCrosse, WI 608-788-8410
Madison, WI 608-222-3766

HOURS	ST	1.5	1.7	DT	Driving Time
Mech. Hours	3				
Helper Hours					
Team Hours					
Travel Time					
Total Time	3				

MISC. EXPENSES	AMOUNT
Expense Report	
Miles	
Parking	

WORK DONE: TC #5 WATER DAMAGE OVER WEEKEND
- CLNLD UP ALL BOXES, CAR STATION PANEL DOOR OPERATOR
- CHECKED ALL FUSES IN CONTROLLER
- PIT STILL HAS 3" WATER IN IT
- PUT LOCKS ON BOTH DISCONNECTS

MATERIAL	AMOUNT

JOB COMPLETED: ☐ YES ☑ NO

WORK DONE BY: B. HAMPEL

CUSTOMER: X

Date: 1-2-2018

Contract Type: FM

Customer: U of I

Location: IMU

Customer No.: 4-3930

800-779-5438
Established in 1936
Schumacher Elevator Company
One Schumacher Way
P.O. Box 393 – Denver, IA 50622

Cedar Rapids 319-362-1017
Davenport 800-779-5438
Denver 319-984-5676
Des Moines 515-243-5487
Dubuque 563-588-4863
Fort Dodge 515-576-7266
Iowa City 800-779-5438
Marshalltown 800-779-5438
Mason City 641-424-1307
Ottumwa 800-779-5438
Sioux City 712-258-3535
Waterloo 319-984-5676
Quincy, IL 800-779-5438
Rockford, IL 815-963-8340
Minneapolis, MN 612-333-3066
Rochester, MN 507-285-0251
Kirksville, MO 800-779-5438
Sioux Falls, SD 800-779-5438
LaCrosse, WI 608-788-8410
Madison, WI 608-222-3766

HOURS	ST	1.5	1.7	DT
Mech. Hours	2 1/2			
Helper Hours				
Team Hours				
Travel Time				
Total Time	2 1/2			

MISC. EXPENSES	AMOUNT
Expense Report	
Miles	
Parking	

☐ Reorder Parts

WORK DONE: STEAM PIPE BROKEN - ELEVATOR WATER SUNKEN - TROUBLE SHOOT EXTENT OF DAMAGE

MATERIAL	AMOUNT

WORK DONE BY: RON COFFEY

CUSTOMER:

SAFETY CHECKLIST

- ☐ 1 Check with building personnel
- ☐ 2. Check elevator door operation and door protection
- ☐ 3. Check floor level accuracy
- ☐ 4. Visual inspection of elevator equipment in equipment room
- ☐ 5 Verify that jumpers used are removed from equipment
- ☐ 6 Complete machine room logs
- ☐ 7 _____
- ☐ 8 _____

JOB COMPLETED
☐ YES ☐ NO

OFFICE COPY – WHITE
CUSTOMER COPY – PINK

AP/PO PeopleSoft Web Applications

Payment details for voucher: 82885642

Voucher ID	Vendor ID	Remit LOC	Vendor Name	Gross Voucher Amt.	Payment Handling Code
82885642	0000121248	002	Schumacher Elevator Company	$1,116.94	AC

Payment Status	Payment Information	Invoice #	Invoice Date	Remit to	Amt From Voucher
PAID	ACH:564274 Dt: 03/28/2018 Amt: $1,116.94	90429780	01/17/2018	Detail	$1,116.94

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25B Invoice - Page 1 of 2

THE UNIVERSITY OF IOWA

DESIGN PROFESSIONAL PAY APPLICATION REQUEST

Application/Invoice Date: 04/26/2018

Net 0
Contract #: CS2472
Invoice No.: CS2472-01-FINAL
Line 1 = $ 1,100.00
Line 2 = $ 0.00 WHITEP

00

VB

To: University of Iowa
FM-Business & Financial Services
Attn: Capital Accounting
200 USB
Iowa City, IA 52242

From: CMBA Architects
211 Grand Ave Ste 200
Des Moines, IA 50312

Project Title: Medical Research Facility - Emergency Pipe Repair and Remediation, Project #0744901

PAY APPLICATION PERIOD FROM: 01/31/2018 **TO:** 03/31/2018

Basic Services Fee:	$ 1,100.00
Amendments #:	$ 0.00
Total Fee:	$ 1,100.00

Phase of Service	% of Fee	Total Fee	% Requested	Total Earned
SUBMITTAL REVIEW	100.00 %	$ 1,100.00	100.00 %	$ 1,100.00
Basic Fee Subtotal:	100.00 %	$ 1,100.00		$ 1,100.00
Less Previous Requests				$ 0.00
Total Basic Fees Due				$ 1,100.00

Reimbursable Expense Limit:		$ 0.00
Amendments #: 1 through		$ 0.00
Total Reimbursable Expense Limit:		$ 0.00
Reimbursable Previous Requests:		$ 0.00
Current Reimbursable Requested		**$ 0.00**
Reimbursable Previous Requests:		$ 0.00

Amount Due this Invoice $ 1,100.00

Tasks/Deliverables During this Pay Application Period (see attached back-up)

The undersigned Design Professional certifies that to the best of the Design Professional's knowledge, information and belief the Work covered by this application for payment has been completed in accordance with the Agreement, that all amounts have been paid by the Design Professional for Services for which previous Payment were issued and payments received from the Owner, and that current payment shown herein is now due.

Respectfully submitted,

Kent Lutz
Associate Principal



CMBA ARCHITECTS

2111 GRAND AVENUE, SUITE 200
DES MOINES, IA 50312
(P) 515.244.2111

PROJECT PROGRESS SUMMARY

Medical Research Facility – Emergency Pipe Repair and Remediation
UI# 0744901 / CS2472 (CMBA #DM18105)
DATE: April 9, 2018

WORK COMPLETED 01/31/18 to 03/30/18:

1. 01/31 Discussed elevator submittal requirements with Woodruff and Schumacher
   Completion 10%
2. 03/01 Received elevator shop drawings, returned on 03/06.
   Completion 100%
3. 03/27 Received and reviewed final shop submittal.

UPCOMING TASKS:

A. N/A

OUTSTANDING CRITICAL ISSUES:

A. N/A

AP/PO PeopleSoft Web Applications

Payment details for voucher: 82900609

Voucher ID	Vendor ID	Remit LOC	Vendor Name	Gross Voucher Amt.	Payment Handling Code
82900609	0000536920	002	CMBA Architects PC	$1,100.00	AC

Payment Status	Payment Information	Invoice #	Invoice Date	Remit to	Amt From Voucher
PAID	ACH:571448 Dt: 04/30/2018 Amt: $3,590.90	CS2472-01-FINAL	04/26/2018	Detail	$1,100.00

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AP-PO Web Applications Home Page
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THE UNIVERSITY OF IOWA

UO
UPP

CONTRACTOR PAY APPLICATION REQUEST

Application/Invoice Date: 02/27/2018
Application No.: 001-R002
Invoice No.: 0744901-001
Contract #: CT8279
Payment terms: Net Zero

Line 1 = $ 37,165.56
Line 2 = $ 787.80

To:
University of Iowa
Design & Construction
200 USB
Iowa City, IA 52242

From Contractor:
Woodruff Construction, LLC
1890 Kountry Lane
Fort Dodge, IA 50501

Project Title and Number:
Medical Research Facility - Emergency Pipe Repair and Remediation
Project # 0744901

PAY APPLICATION PERIOD FROM: 01/11/2018 **TO:** 02/02/2018

1. ORIGINAL CONTRACT SUM:			$ 379,000.00	
Change Orders Summary	ADDITIONS	DEDUCTIONS		
Total changes approved in previous months by Owner	0.00	0.00		
Total approved this month	0.00	0.00		
TOTALS	0.00	0.00		
2. NET CHANGE BY CHANGE ORDERS:			$ 0.00	
3. CONTRACT SUM TO DATE: (Line 1 + 2)			$ 379,000.00	
4. TOTAL COMPLETED & STORED TO DATE:			$ 37,953.36	(10%)
5. RETAINAGE: (Completed Word & Stored Material)			$ 0.00	
6. TOTAL EARNED LESS RETAINANGE: (Line 4 less Line 5 Total)			$ 37,953.36	
7. LESS PREVIOUS CERTIFICATES FOR PAYMENT: (Line 6 from prior Certificate)			$ 0.00	
8. CURRENT PAYMENT DUE:			**$ 37,953.36**	
9. BALANCE TO FINISH, INCLUDING RETAINAGE: (Line 3 less Line 6)			$ 341,046.64	

GROUP 227645



82861443

Line 1 = $ 37,165.56
Line 2 = $ 787.80

UPP
3/5/18

FACILITIES MANAGEMENT
Design & Construction

WOODRUFF CONSTRUCTION, LLC

1890 Kountry Lane
Fort Dodge, Iowa 50501
Phone (515) 576-1118 Fax (515) 955-2170

501 Greenfield Drive
Tiffin, Iowa 52340
Phone (319) 545-2410 Fax (319) 545-2411

2/9/2018

Danial Cassidy
UI-FM – D&C.

RE: MRF Water Damage – Pay Application Summary

SUBJ: **Pay App - 001**

Dan,

For all the work from period 1/9/2018 to 2/2/2018The total amount is $37,953.36. Labor and material cost documents are enclosed for review.

If you require additional clarification, please contact me. Thank you for your prompt response.

Sincerely,
WOODRUFF CONSTRUCTION, LLC

Leon Zhang
Assistant Project Manager

COST ANALYSIS **MRF Water Damage T&M**

Period: 1/9/2018 to 2/2/2018
Pay App - 01

TOTAL WOODRUFF LABOR COST		= $	24,666.38
TOTAL WOODRUFF MATERIAL COST		= $	1,842.09
	SUBTOTAL	= $	26,508.47
plus OH&P @	15% = $ 3,976	= $	30,484.74

TOTAL SUBCONTRACT COST		= $	7,112.97
plus OH&P @	5% = $ 355.65	= $	7,468.62

TOTAL PRICE FOR THE PERIOD $ 37,953.36

COST ANALYSIS **MRF Water Damage T&M**

Pay App - 01 Period: 9-Jan-18 to 2-Feb-18

	LABOR CLASSIFICATION/ MATERIAL	QUANTITY	UNIT	UNIT LABOR	UNIT MAT'L	UNIT SUBCON	LABOR	MATERIAL	SUBCON	TOTAL
	WOODRUFF WORK									
	LABOR									
10-Jan	Mark Toth-Superintendent	8	mh	$ 76.69			$ 613.52	$ -	$ -	$ 613.52
11-Jan	Mark Toth-Superintendent	8	mh	$ 76.69			$ 613.52	$ -	$ -	$ 613.52
12-Jan	Mark Toth-Superintendent	6	mh	$ 76.69			$ 460.14	$ -	$ -	$ 460.14
15-Jan	Mark Toth-Superintendent	8	mh	$ 76.69			$ 613.52	$ -	$ -	$ 613.52
16-Jan	Mark Toth-Superintendent	8	mh	$ 76.69			$ 613.52	$ -	$ -	$ 613.52
17-Jan	Mark Toth-Superintendent	8	mh	$ 76.69			$ 613.52	$ -	$ -	$ 613.52

18-Jan	Mark Toth-Superintendent	8	mh	$ 76.69			$ 613.52	$ -	$ -	$ 613.52
	Lorenzo-Labor	8	mh	$ 55.55			$ 444.40	$ -	$ -	$ 444.40
	Troy-Labor	8	mh	$ 55.55			$ 444.40	$ -	$ -	$ 444.40
19-Jan	Mark Toth-Superintendent	8	mh	$ 76.69			$ 613.52	$ -	$ -	$ 613.52
	Lorenzo-Labor	8	mh	$ 55.55			$ 444.40	$ -	$ -	$ 444.40
	Troy-Labor	8	mh	$ 55.55			$ 444.40	$ -	$ -	$ 444.40
22-Jan	Mark Toth-Superintendent	8	mh	$ 76.69			$ 613.52	$ -	$ -	$ 613.52
	Lorenzo-Labor	8	mh	$ 55.55			$ 444.40	$ -	$ -	$ 444.40
	Troy-Labor	8	mh	$ 55.55			$ 444.40	$ -	$ -	$ 444.40
23-Jan	Mark Toth-Superintendent	8	mh	$ 76.69			$ 613.52	$ -	$ -	$ 613.52
	Lorenzo-Labor	8	mh	$ 55.55			$ 444.40	$ -	$ -	$ 444.40
	Troy-Labor	8	mh	$ 55.55			$ 444.40	$ -	$ -	$ 444.40
24-Jan	Mark Toth-Superintendent	8	mh	$ 76.69			$ 613.52	$ -	$ -	$ 613.52
	Lorenzo-Labor	8	mh	$ 55.55			$ 444.40	$ -	$ -	$ 444.40
	Troy-Labor	8	mh	$ 55.55			$ 444.40	$ -	$ -	$ 444.40
	Kevin-Labor	8	mh	$ 55.55			$ 444.40	$ -	$ -	$ 444.40
25-Jan	Mark Toth-Superintendent	8	mh	$ 76.69			$ 613.52	$ -	$ -	$ 613.52
	Lorenzo-Labor	8	mh	$ 55.55			$ 444.40	$ -	$ -	$ 444.40
	Troy-Labor	8	mh	$ 55.55			$ 444.40	$ -	$ -	$ 444.40
	Cesar-Labor	8	mh	$ 55.55			$ 444.40	$ -	$ -	$ 444.40
26-Jan	Mark Toth-Superintendent	8	mh	$ 76.69			$ 613.52	$ -	$ -	$ 613.52
	Lorenzo-Labor	8	mh	$ 55.55			$ 444.40	$ -	$ -	$ 444.40
	Troy-Labor	8	mh	$ 55.55			$ 444.40	$ -	$ -	$ 444.40
	Cesar-Labor	8	mh	$ 55.55			$ 444.40	$ -	$ -	$ 444.40
	Kevin-Labor	8	mh	$ 55.55			$ 444.40	$ -	$ -	$ 444.40
29-Jan	Mark Toth-Superintendent	8	mh	$ 76.69			$ 613.52	$ -	$ -	$ 613.52
	Lorenzo-Labor	8	mh	$ 55.55			$ 444.40	$ -	$ -	$ 444.40
	Troy-Labor	8	mh	$ 55.55			$ 444.40	$ -	$ -	$ 444.40
	Cesar-Labor	8	mh	$ 55.55			$ 444.40	$ -	$ -	$ 444.40
	Kevin-Labor	8	mh	$ 55.55			$ 444.40	$ -	$ -	$ 444.40
30-Jan	Mark Toth-Superintendent	8	mh	$ 76.69			$ 613.52	$ -	$ -	$ 613.52
	Troy-Labor	8	mh	$ 55.55			$ 444.40	$ -	$ -	$ 444.40
	Cesar-Labor	8	mh	$ 55.55			$ 444.40	$ -	$ -	$ 444.40
	Kevin-Labor	8	mh	$ 55.55			$ 444.40	$ -	$ -	$ 444.40
31-Jan	Mark Toth-Superintendent	8	mh	$ 76.69			$ 613.52	$ -	$ -	$ 613.52
	Troy-Labor	8	mh	$ 55.55			$ 444.40	$ -	$ -	$ 444.40
	Cesar-Labor	8	mh	$ 55.55			$ 444.40	$ -	$ -	$ 444.40
1-Feb	Mark Toth-Superintendent	8	mh	$ 76.69			$ 613.52	$ -	$ -	$ 613.52
	Cesar-Labor	8	mh	$ 55.55			$ 444.40	$ -	$ -	$ 444.40

2-Feb	Mark Toth-Superintendent	8	mh	$ 76.69			$ 613.52	$ -	$ -	$ 613.52
	Troy-Labor	8	mh	$ 55.55			$ 444.40	$ -	$ -	$ 444.40
	Cesar-Labor	8	mh	$ 55.55			$ 444.40	$ -	$ -	$ 444.40
	Kevin-Labor	8	mh	$ 55.55			$ 444.40	$ -	$ -	$ 444.40
	MATERIAL									
16-Jan	ACT							$ 1,179.12		$ 1,179.12
17-Jan	Gypsum Board Work							$ 471.04		$ 471.04
	Gypsum Board Work							$ 7.27		$ 7.27
18-Jan	Resilient Flooring/Base							$ 21.81		$ 21.81
	Protection Material							$ 217.13		$ 217.13
19-Jan	Gypsum Board Work							$ 5.64		$ 5.64
	Gypsum Board Work							$ 45.16		$ 45.16
	Protection Material							$ 143.07		$ 143.07
	Gypsum Board Work							$ 54.73		$ 54.73
22-Jan	Cleaning							$ 14.82		$ 14.82
24-Jan	Cleaning							$ 8.47		$ 8.47
25-Jan	Cleaning							$ 13.63		$ 13.63
29-Jan	Ceiling tile at Lv0							$ 62.46		$ 62.46
31-Jan	Glue for vinyl base							$ 39.52		$ 39.52
2-Feb	Ceiling tile, flooring							$ 40.18		$ 40.18
	Ceiling tile, laminate repair							$ 35.22		$ 35.22
1/25-2/1	Parking							$ 92.60		$ 92.60
2-Feb	Vacuum for cleaning							$ 100.70		$ 100.70
										$ -
	Material Credit									$ -
17-Jan	Cleaning material							$ (7.27)		$ (7.27)
18-Jan	Small tools							$ (7.76)		$ (7.76)
	Small tools							$ (6.44)		$ (6.44)
	Small tools							$ (15.99)		$ (15.99)
	Small tools							$ (1.59)		$ (1.59)
	Proction material							$ (217.13)		$ (217.13)
19-Jan	Small tools							$ (19.40)		$ (19.40)
	Small tools							$ (11.86)		$ (11.86)
	Protection material							$ (143.07)		$ (143.07)
	Small tools							$ (4.20)		$ (4.20)
24-Jan	Cleaning material							$ (7.99)		$ (7.99)
25-Jan	Unlock car							$ (60.00)		$ (60.00)

26B Invoice - Page 6 of 83

30-Jan	Small tools							$ (14.99)		$ (14.99)
	Misc material							$ (11.19)		$ (11.19)
31-Jan	Small tools							$ (39.52)		$ (39.52)
2-Feb	Small tools							$ (40.18)		$ (40.18)
	Small tools							$ (100.70)		$ (100.70)
	AE material sale tax credit									$ -
19-Jan	Invoice #S010098503.001							$ (0.32)		$ (0.32)
	Invoice #S010099270.001							$ (0.09)		$ (0.09)
	Order # 5312228							$ (0.19)		$ (0.19)
2-Feb	Vinyl patcher							$ (0.60)		$ (0.60)
	SUBCONTRACTORS						$ -	$ -	$ -	$ -
	Advanced Electrical Service						$ -	$ -	$ 4,160.91	$ 4,160.91
	AAA Mechanical Contractor-Water damage						$ -	$ -	$ 2,164.26	$ 2,164.26
	AAA Mechanical Contractor-Pipe repair						$ -	$ -	$ 787.80	$ 787.80
							$ -	$ -	$ -	$ -
							$ -	$ -	$ -	$ -
							$ -	$ -	$ -	$ -
							$ -	$ -	$ -	$ -
	SUBTOTAL						$ 24,666.38	$ 1,842.09	$ 7,112.97	$ 33,621.44
	PERIOD TOTAL						$ 24,666.38	$ 1,842.09	$ 7,112.97	$ 33,621.44

WCC Labor Hour Tickets

THE UNIVERSITY OF IOWA

FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 1/10/18

Subcontractor _____ Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number 0744901

Description of Work STAGING EQUIPMENT & OFFICE

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
MARK TOTH	SUPT.		8	0					

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W27323/4-17

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722

THE UNIVERSITY OF IOWA

FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 1/11/18

Subcontractor _____ Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number 0744901

Description of Work SETTING UP OFFICE / ORDERING MATERIALS (FLOORING & BASE) INITIAL WALKTHROUGH

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
MALK TOTH	SUPT.		8	⊘					

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
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April, 2007

W27323/4-17

200 University Services Building
Iowa City, Iowa 52242
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THE UNIVERSITY OF IOWA

FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 1/12/18

Subcontractor _____ Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number 0744901

Description of Work WORKED 6 HRS. ONSITE DUE TO TRAINING IN MORNING. WENT ROOM TO ROOM RECORDING DAMAGE & ORDERING MATERIALS

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
MARK TOTH	SUPT.		6	0					

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) _____

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April, 2007

WZ7323/4-17

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Iowa City, Iowa 52242
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FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 1/15/18

Subcontractor _____ Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number #0744901

Description of Work PREPPING FOR JOB / ORDERING MATERIAL / STAGING MATERIAL & EQUIP.

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
MARK TOTH	SUPT.		8	0					

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) _____

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April, 2007

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Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 1/16/18

Subcontractor _____ Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number #0744901

Description of Work PREPPING FOR JOB / ORDERING MATERIAL / STAGING EQUIP & MATERIAL

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
MARK TOTH	SUPT.		8	0					

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) _____

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April, 2007

W27323/4-17

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THE UNIVERSITY OF IOWA

FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 1/17/18

Subcontractor _____ Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number 0744901

Description of Work PREPPING FOR JOB / ORDERING MATERIAL STAGING EQUIPMENT & MATERIAL

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
MARK TOTH	SUPT.		8	0					

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) _____

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April, 2007

W27323/4-17

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THE UNIVERSITY OF IOWA

FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 1/18/18

Subcontractor _____ Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number 0744901

Description of Work MARK TOTH - SUPERVISON. / LORENZO MENDOZA & TROY McMURRAY - VINYL BASE & DRYWALL

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
TOTH	SUPT.		8	0	MENDOZA	L	8	0	
					McMURRAY	L	8	0	

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W27323/4-17

200 University Services Building
Iowa City, Iowa 52242
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THE UNIVERSITY OF IOWA

FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 1/19/18

Subcontractor _____ Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number 0744901

Description of Work MALK TOTH - SUPERVISON / LORENZO MENDOZA + TROY McMURRAY - VINYL BASE & DRYWALL

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
TOTH	SUPT.		8	~~0~~	MENDOZA	L	8	~~0~~	
					McMURRAY	L	8	~~0~~	

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
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April, 2007

W27323/4-17

200 University Services Building
Iowa City, Iowa 52242
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THE UNIVERSITY OF IOWA

FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO.

Date Work Performed 1/22/18

Subcontractor _____

Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR

Project Number #6744901

Description of Work MARK TOTH /SUPERVISON

TROY MCMURRY & LORENZO MENDOZA DRYWALL

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
TOTH	SUPT.		8	0	MENDOZA			8	0
					MCMURRAY			8	0

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) Robert Young

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W27323/4-17

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722

THE UNIVERSITY OF IOWA

FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO.

Date Work Performed 1/23/18

Subcontractor _____

Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR

Project Number #0744901

Description of Work MARK TOTH / SUPERVISON

TROY MCMURRAY / VINYL BASE LORENZO MENDOZA / DRYWALL

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
TOTH	SUPT.		8	0	MCMURRAY			8	0
					MENDOZA			8	0

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) Robert Young

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April, 2007

W27323/4-17

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Iowa City, Iowa 52242
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THE UNIVERSITY OF IOWA

FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO

Date Work Performed 1/24/18

Subcontractor _____

Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR

Project Number #0744901

Description of Work MARK TOTH / SUPERVISON

TROY McMURRAY / VINYL BASE KEVIN FARMER / VINYL BASE

LORENZO MENDOZA / DRYWALL

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
TOTH	SUPT.		8	0

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
MENDOZA			8	0
McMURRAY			8	0
FARMER			8	0

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) Robert Young

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Yellow=Owner Copy
April, 2007

W27323/4-17

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THE UNIVERSITY OF IOWA

FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO.

Date Work Performed 1/25/18

Subcontractor _____

Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR

Project Number #0744901

Description of Work MARK TOTH / SUPERVISON
LORENZO MENDOZA / DRYWALL CESAR GALLEGOS / CEILING TILE + VINYL BASE
TROY McMURRAY / CEILING TILE / VINYL BASE

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
TOTH	SUPT.		8	0

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
MENDOZA			8	0
McMURRAY			8	0
GALLEGOS			8	0

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
Yellow=Owner Copy
April, 2007

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THE UNIVERSITY OF IOWA

FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO.

Subcontractor

Project Name MRF WATER DAMAGE REPAIR

Description of Work MARK TOTH / SUPERVISON LORENZO MENDOZA / DRYWALL
KEVIN FARMER, CESAR GALLEGOS, TROY McMURRAY / VINYL BASE CEILINGTILE

Date Work Performed 1/26/18

Change Order Request No

Project Number #0744901

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
MARK TOTH	SUPT.		8	0

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
GALLEGOS			8	0
McMURRAY			8	0
FARMER			8	0
MENDOZA			8	0

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable)

General Contractor's Representative

Owner's Representative (Required) Robert Young

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April, 2007

W27323/4-17

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Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722

THE UNIVERSITY OF IOWA

FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 1/29/18

Subcontractor _____ Change Order Request No _____

Project Name M.R.F. WATER DAMAGE REPAIR Project Number #074490

Description of Work MARK TOTH / SUPERVISON LORENZO MENDOZA / DRYWALL
TROY McMURRAY, KEVIN FARMER / VINYL BASE
CESAR GALLEGOS / CEILING TILE

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
TOTH	SUPT.		8	Ø	MENDOZA			8	Ø
					McMURRAY			8	Ø
					FARMER			8	Ø
					GALLEGOS			8	Ø

Equipment and Material (attach invoices)

Quantity	Description
16 PCS. (2 CARTONS)	ACOUSTICAL CEILING TILE (GLACIER 707)

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W27323/4-17

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 *Fax* 319-335-2722

THE UNIVERSITY OF IOWA

FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 1/30/18

Subcontractor _____ Change Order Request No _____

Project Name M.R.F. WATER DAMAGE REPAIR Project Number #0744901

Description of Work MALK TOTH / SUPERVISON KEVIN FARMER / DRYWALL
TROY McMURRAY / VINYL BASE CESAR GALLEGOS / CEILING TILE

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
TOTH	SUPT.		8	0	FARMER			8	0
					McMURRAY			8	0
					GALLEGOS			8	0

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W27323/4-17

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722

THE UNIVERSITY OF IOWA

FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 1/31/18

Subcontractor _____ Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number #0744901

Description of Work MARK TOTH / SUPERVISON CESAR GALLEGOS / CEILING TILE

TROY McMURRAY / VINYL BASE

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
TOTH	SUPT.		8	0	GALLEGOS			8	0
					McMURRAY			8	0

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
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April, 2007

W27323/4-17

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722

THE UNIVERSITY OF IOWA

FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 2/1

Subcontractor _____ Change Order Request No _____

Project Name MLF WATER DAMAGE REPAIR Project Number # 0744901

Description of Work MALK TOTH / SUPERVISON CESAR GALLEGOS / CEILING TILE

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
TOTH			8	0	GALLEGOS			8	0

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
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April, 2007

W27323/4-17

200 University Services Building
Iowa City, Iowa 52242
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THE UNIVERSITY OF IOWA

FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 2/2/18

Subcontractor _____ Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number #0744901

Description of Work MARK TOTH / SUPERVISON CESAR GALLEGOS / CEILING TILE
KEVIN FARMER / DRYWALL TROY McMURRAY / VINYL BASE

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
TOTH			8	0	GALLEGOS			8	0
					McMURRAY			8	0
					FARMER			8	0

Equipment and Material (attach invoices)

Quantity	Description
16	CEILING TILES.
1	5 GAL PROFORM DRYWALL MUD
8	CORNER BEADS

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W27323/4-17

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 *Fax* 319-335-2722

WCC Material Cost



University of Iowa Parking and Transportation
Hospital Ramp 1
(319) 335-8312

F/C #52
T/D #01
Cashier
Entry Time
Paid Time
Parking Time
Parking Fee

A Payment No.00232960
Ticket No.085893
ID #312
1/31/2018 (Wed) 6:51
1/31/2018 (Wed) 15:28
8:37
Rate B $20.00

Cash Amount $20.00

Total $20.00

Thank You

University of Iowa Parking and Transportation
Hospital Ramp 1
(319) 335-8312

F/C #02
T/D #01
Cashier
Entry Time
Paid Time
Parking Time
Parking Fee

A Payment No.00075530
Ticket No.084143
ID #313
1/26/2018 (Fri) 12:47
1/26/2018 (Fri) 15:37
2:50
Rate B $3.00

VISA
Account # **********3663
Slip # 21407
Auth Code 499298
CREDIT CARD AMOUNT $3.00
Cash Amount $0.00

Total $3.00

Thank You

niversity of Iowa Parking and Transportation
Hospital Ramp 1
(319) 335-8312

F/C #52
T/D #01
Cashier
Entry Time
Paid Time
Parking Time
Parking Fee

A Payment No.00233308
Ticket No.086417
ID #117
2/1/2018 (Thu) 6:48
2/1/2018 (Thu) 15:50
9:02
Rate B $20.00

Cash Amount $20.00

Total $20.00

Thank You

CESAR GALLEGOS $72.60

University of Iowa Parking and Transportation
Hospital Ramp 1
(319) 335-8312

F/C #02
T/D #03
Cashier
Entry Time
Paid Time
Parking Time
Parking Fee

A Payment No.00075334
Ticket No.083280
ID #301
1/25/2018 (Thu) 6:33
1/25/2018 (Thu) 15:32
8:59
Rate B $20.00

Cash Amount $20.00

Total $20.00

Thank You

KEVIN FARMER

University of Iowa Parking and Transportation
Hospital Ramp 2
(319) 335-8312

F/C #52
T/D #11
Cashier
Entry Time
Paid Time
Parking Time
Parking Fee

A Payment No.00061164
Ticket No.076132
ID #281
1/30/2018 (Tue) 6:55
1/30/2018 (Tue) 15:28
8:33
Rate B $20.00

VISA
Account # **********5032
Slip # 14287
Auth Code 045076
CREDIT CARD AMOUNT $20.00
Cash Amount $0.00

Total $20.00

Thank You

University of Iowa Parking and Transportation
Hospital Ramp 1
(319) 335-8312

F/C #02
T/D #01
Cashier
Entry Time
Paid Time
Parking Time
Parking Fee

A Payment No.00075432
Ticket No.083806
ID #69
1/26/2018 (Fri) 6:51
1/26/2018 (Fri) 11:38
4:47
Rate B $9.60

VISA
Account # **********3663
Slip # 21368
Auth Code 426648
CREDIT CARD AMOUNT $9.60
Cash Amount $0.00

Total $9.60

Thank You

TAMARACK
MATERIALS, INC.

Tamarack Materials, Inc.
9300 James Avenue South
Bloomington, MN 55431
Tel: (952) 888-5556
Fax: (952) 888-4030

Invoice

CUSTOMER NO.	INVOICE DATE
10421	01/18/18
P.O. #	ORDER #
55 SOUTH GRAND	6527569-00
CUSTOMER JOB NO.	PAGE #:
DELIVER TO WOOD	1 of 1

Remit To:
Tamarack Materials, Inc.
SDS 12-1200
P.O. Box 86
Minneapolis, MN 55486-1200

SOLD TO:
4194 1 MB 0.423 E0252X I0569 03237435483 S2 P5016985 0001:0002

WOODRUFF CONSTRUCTION
1890 KOUNTRY LN
FORT DODGE IA 50501-8722

SHIP TO:

DELIVER TO WOODRUFF
55 GRNAD AVE
MARK 319-383-1616
IOWA CITY, IA

SPECIAL INSTRUCTIONS	DELIVERED BY	RECEIVED BY
CALL MARK WHEN YOU ARE LEAVING	IOWA CITY YA	

ORDERED BY	SALES REP	DATE SHIPPED	NET DUE DATE
MARK	ICHS	01/17/18	

PRODUCT NO.	QUANTITY	UNITS	DESCRIPTION	U/M	EXTENSION	UNIT PRICE	AMOUNT
USG707	3.00	CTN	3/4x2x2ACOUSTONE GLACIERSHADOWLINE	MSF	96.00	1952.00	187.39
58FC08	15.00	PCS	5/8" 4X8 FIRECODE TYPE "X" DRYWALL	MSF	480.00	410.00	196.80
NSCL5	3.00	BAG	QUICKSET LITE 5 MIN18# BAG	BAG	3.00	10.50	31.50
SSDMTY2300C	1.00	ROL	PATCH PRO 2" X 300' MESHYELLOW FIBE	ROL	1.00	6.95	6.95
UP3-5P	1.00	PAI	USG PLUS 3 READY MIX4.5 GAL PAIL	PAI	1.00	19.20	19.20
~~TT885~~	~~4.00~~	~~EA~~	~~SANDSPONGE DUAL ANGLEPINE-MED TRIM~~	~~EA~~	~~4.00~~	~~1.94~~	~~7.76~~
~~KRAST135~~	~~2.00~~	~~EAC~~	~~HYDRA GROUT SPONGE7-5/8"X 5-1/2" YE~~	~~EAC~~	~~2.00~~	~~3.22~~	~~6.44~~
16SZ	5.00	LBS	GRBR 6X1-7/8" TEKDRILLER SCAV ZINC	LBS	5.00	3.00	15.00
			PAST THE ENTRANCE OF NEW PHARMACY BUILDING. TAKE LEFT AT THE END OF ROAD BY DOCK DOORS				
			Total Wallboard = 480 Square Ft				

TAX DETAILS		TOTALS	
TAXABLE: No STATE : Iowa CITY : Iowa City COUNTY : Johnson - County	THANK YOU FOR YOUR BUSINESS!	SUBTOTAL	471.04
		TAX	0.00
		ADD'L CHARGES	
		TOTAL	471.04

TERMS: NET 20TH, OR AS OTHERWISE ARRANGED. INTEREST RATE OF 1 ½% PER MONTH (WHICH IS A RATE OF 18% PER YEAR) COMPUTED MONTHLY WILL BE CHARGED ON THE UNPAID BALANCE. CUSTOMER AGREES TO PAY BY CASH, CHECK, OR ACH. CUSTOMERS PAYING THEIR ACCOUNT WITH A CREDIT CARD WILL INCUR A SURCHARGE OF 2.0% ON THE TRANSACTION AMOUNT, WHICH IS NOT GREATER THAN TAMARACK MATERIALS COST OF ACCEPTANCE.

25% RETURN CHARGE ON STOCK MERCHANDISE. SPECIAL ORDERS ARE NOT RETURNABLE.

PAYMENTS

GYPSUM WALLBOARD, PLASTER, STUCCO, STO/EIFS, JOINT COMPOUND, INSULATION, METAL STUDS, METAL LATH, METAL ACCESS DOORS, DRYWALL SCREWS, DRYWALL TOOLS, CEILING TILE AND GRID, FRY REGLET TRIMS, FRP, SCAFFOLDING, SAFETY EQUIPMENT AND MORE

0001:0002

TAMARACK
MATERIALS, INC.

Tamarack Materials, Inc.
9300 James Avenue South
Bloomington, MN 55431
Tel: (952) 888-5556
Fax: (952) 888-4030

Invoice

CUSTOMER NO.	INVOICE DATE
10421	01/19/18
P.O. #	ORDER #
18-011	6527623-00
CUSTOMER JOB NO.	PAGE #:
WOODRUFF CONSTR	1 of 1

Remit To:
Tamarack Materials, Inc.
SDS 12-1200
P.O. Box 86
Minneapolis, MN 55486-1200

SOLD TO:
6828 1 MB 0.424 E0020X I0038 D3254839595 S2 P5024069 0001:0001

WOODRUFF CONSTRUCTION
1690 KOUNTRY LN
FORT DODGE IA 50501-8722

SHIP TO:

WOODRUFF CONSTRUCTION
U OF I VARIOUS JOBS
IOWA CITY, IA

SPECIAL INSTRUCTIONS	DELIVERED BY	RECEIVED BY
	IOWA CITY YA	

ORDERED BY	SALES REP	DATE SHIPPED	NET DUE DATE
Mark	ICHS	01/18/18	

PRODUCT NO.	QUANTITY	UNITS	DESCRIPTION	U/M	EXTENSION	UNIT PRICE	AMOUNT
b1s8	12.00	PCS	USG B1 SUPERWIDE BEAD8' 50/CTN 400	MLF	96.00	368.00	35.33
tt883	10.00	EA	SANDSPONGE DUAL ANGLEFINE MED TRIM	EA	10.00	1.84	18.40

TAX DETAILS	TOTALS	
XABLE: No	SUBTOTAL	54.73
ATE : Iowa	TAX	0.00
TY : Iowa City	ADD'L CHARGES	
UNTY : Johnson - County	TOTAL	54.73

THANK YOU FOR YOUR BUSINESS!

PAYMENTS

RMS: NET 20TH, OR AS OTHERWISE ARRANGED. INTEREST RATE OF 1 ½% PER MONTH (WHICH IS A RATE OF % PER YEAR) COMPUTED MONTHLY WILL BE CHARGED ON THE UNPAID BALANCE. CUSTOMER AGREES TO PAY CASH, CHECK, OR ACH. CUSTOMERS PAYING THEIR ACCOUNT WITH A CREDIT CARD WILL INCUR A RCHARGE OF 2.5% ON THE TRANSACTION AMOUNT, WHICH IS NOT GREATER THAN TAMARACK MATERIALS ST OF ACCEPTANCE.

RETURN CHARGE ON STOCK MERCHANDISE. SPECIAL ORDERS ARE NOT RETURNABLE.

UM WALLBOARD, PLASTER, STUCCO, STO/EIFS, JOINT COMPOUND, INSULATION, METAL STUDS, METAL LATH, METAL ACCESS DOORS, DRYWALL SCREWS, DRYWALL TOOLS, CEILING TILE AND GRID, FRY REGLET TRIMS, FRP, SCAFFOLDING, SAFETY EQUIPMENT AND MORE.

0001

ALEXANDER
EST. 1891
LUMBER

Pickup Now Order

Order No 7262680
Order Date 01/18/2018
Invoice No 1466595

Branch: Iowa City
PO BOX 230
1201 South Gilbert St.
Iowa City, Iowa 52240

Phone 319-338-1113 **Fax** 319-338-8309

Invoice Address
Woodruff
Woodruff Const.
1890 Kountry Lane
Fort Dodge, Iowa, 50501-

Delivery Address
Woodruff Const.
16-098 - EMRB
431 NEWTON ROAD
IOWA CITY, Iowa, 52240

Customer Code 000252
Your Ref mark
Delivery On 01/18/2018
Taken By Mike Peters
Sales Rep Unassigned Account

Special Instructions	Notes

Line	Product Code	Description	Qty/Footage	Price	UOM	Total
1	6907315	FLOORING J-ROLLER, 1-1/2"X3"-13" HANDLE	1 ea	15.99	ea	15.99
2	6979090	ADHESIVE SPREADER, 11 BEAD LID COVE BASE	1 ea	4.59	ea	4.59

Customer Copy

Total Amount	$20.58
Sales Tax	$1.23
Order Total	$21.81

Subject to our terms and conditions of sale. Further copies available on request.

Use Your BIG CARD 2% REBATE

MENARDS®

MENARDS - IOWA CITY
2605 Naples Ave
Iowa City, IA 52240

KEEP YOUR RECEIPT
RETURN POLICY VARIES BY PRODUCT TYPE

Unless noted below allowable returns for items on this receipt will be in the form of an in store credit voucher if the return is done after 04/18/18

If you have questions regarding the charges on your receipt, please email us at:
IOWAfrontend@menards.com

Sale Transaction

ZW HD ADHESIVE ZIPPER	
5625068	18.97
1.88"X30YD PKG TP CLEAR	
5643038	2.94
4MIL 10'X100' POLY CLEAR	
5680050	29.95
BULLS EYE 123 PLUS PRIME	
5504875	23.98
ZW 10'STEEL POLES 4/PK *	
5625086	129.00
TOTAL	204.84
TAX STATE OF IA 6%	12.29
TOTAL SALE	217.13
Menard Commercial Card 8697	217.13

002602
Swiped
PO # 18 011

TOTAL SAVINGS 11.65

TOTAL NUMBER OF ITEMS = 5

GUEST COPY

The Cardholder acknowledges receipt of goods/services in the total amount shown hereon and agrees to pay the card issuer according to its current terms.

THIS IS YOUR CREDIT CARD SALES SLIP
PLEASE RETAIN FOR YOUR RECORDS.

NOW HIRING!!

THANK YOU, YOUR CASHIER, Beth

38638 03 9782 01/18/18 04:20PM 3091

LOWE'S®

LOWE'S HOME CENTERS, LLC
2701 2ND STREET
CORALVILLE, IA 52241 (319) 545-8300

- SALE -

SALES#: S1688JH1 2274240 TRANS#: 10390257 01-19-18

~~509267 PROLINE 4 LB WIPING CLOTH 11.86~~
12.48 DISCOUNT EACH -0.62
12322 2-CT 10-14 GAL DRYWALL FI 30.74
17.98 DISCOUNT EACH -2.61
2 @ 15.37

SUBTOTAL:	42.60
TAX:	2.56
INVOICE 10176 TOTAL:	45.16
LAR:	45.16
TOTAL DISCOUNT:	5.84

LAR:XXXXXXXXXXX7939 AMOUNT:45.16 AUTHCD:000857
KEYED REFID:435776 01/19/18 13:31:20
LAR PO: 18-011
ACCOUNT NAME:
WOODRUFF CONSTRUCTION CORP
AUTH BUYER: TOTH MARK

ACCOUNT WILL BE BILLED UPON MERCHANDISE TRANSACTION DATE FOR STOCK MERCHANDISE AND NO LATER THAN 90 DAYS FROM TRANSACTION DATE FOR SDS OR DIRECT DELIVERY MERCHANDISE.

STORE: 1688 TERMINAL: 10 01/19/18 13:31:29
OF ITEMS PURCHASED: 3
EXCLUDES FEES, SERVICES AND SPECIAL ORDER ITEMS

THANK YOU FOR SHOPPING LOWE'S.
SEE REVERSE SIDE FOR RETURN POLICY.
STORE MANAGER: AMANDA SERNULKA-GEORGE

LOWE'S PRICE MATCH GUARANTEE
FOR MORE DETAILS, VISIT LOWES.COM/PRICEMATCH

Use Your BIG CARD 2% REBATE
MENARDS®

MENARDS - IOWA CITY
2605 Naples Ave
Iowa City, IA 52240

KEEP YOUR RECEIPT
RETURN POLICY VARIES BY PRODUCT TYPE

Unless noted below allowable returns for items on this receipt will be in the form of an in store credit voucher if the return is done after 04/17/18

If you have questions regarding the charges on your receipt, please email us at:
IOWAfrontend@menards.com

Sale Transaction

32OZ 409 ALL PURPOSE CLN		
6472111		2.88
2 GAL MENARD PAIL		
6482815	2 @1.99	3.98
TOTAL		6.86
TAX STATE OF IA 6%		0.41
TOTAL SALE		7.27
Menard Commercial Card 6897		7.27

050087
Swiped
PO # 18011

TOTAL NUMBER OF ITEMS = 3

GUEST COPY

The Cardholder acknowledges receipt of goods/services in the total amount shown hereon and agrees to pay the card issuer according to its current terms.

THIS IS YOUR CREDIT CARD SALES SLIP
PLEASE RETAIN FOR YOUR RECORDS.

NOW HIRING!!

THANK YOU, YOUR CASHIER, Breanna

38595 02 5536 01/17/18 04:03PM 3091

Use Your BIG CARD 2% REBATE
MENARDS®

MENARDS - IOWA CITY
2605 Naples Ave
Iowa City, IA 52240

KEEP YOUR RECEIPT
RETURN POLICY VARIES BY PRODUCT TYPE

Unless noted below allowable returns for items on this receipt will be in the form of an in store credit voucher if the return is done after 04/19/18

If you have questions regarding the charges on your receipt, please email us at:
IOWAfrontend@menards.com

Sale Transaction

ZW 10'STEEL POLES 4/PK *		
5625086		128.00
SUPER GLUE BRUSH ON 12 0		
2511084		5.97
TOTAL		134.97
TAX STATE OF IA 6%		8.10
TOTAL SALE		143.07
Menard Commercial Card 6697		143.07

018770
Swiped
PO # 18 011

TOTAL SAVINGS 11.65

TOTAL NUMBER OF ITEMS = 2

GUEST COPY

The Cardholder acknowledges receipt of goods/services in the total amount shown hereon and agrees to pay the card issuer according to its current terms.

THIS IS YOUR CREDIT CARD SALES SLIP
PLEASE RETAIN FOR YOUR RECORDS.

NOW HIRING!!

THANK YOU, YOUR CASHIER, Laura

38613 07 3015 01/19/18 08:31AM 3091

Acknowle

TAMARACK
MATERIALS, INC.
www.tamarackmaterials.com

9300 James Ave. S.
Bloomington, MN 55431
(952) 888-5556
(952) 888-4030

Bloomington Acoustical
(952) 888-5556

MINNESOTA
Cedar, MN (763) 784-6665
Duluth, MN (218) 729-8075
Rochester, MN (507) 280-8800
St Joseph, MN (320) 363-4442

NORTH DAKOTA
Bismarck, ND (701) 258-0756
Minot, ND (701) 838-0756
West Fargo, ND (701) 282-0470

SOUTH DAKOTA
Sioux Falls, SD (605) 335-7800

WISCONSIN
New Richmond, WI (715) 246-4040

IOWA
Iowa City, IA (319) 337-3033

REMIT TO

Tamarack Materials, Inc.
SDS 12-1200
P.O. Box 86
Minneapolis, MN 55486-1200

Customer No.	Date	Order Number
10421		6527644-00

Order Date	Customer P.O. Number	Customer Job No.	Ordered By	Entered By	Reqd Ship Date	Date Shipped	Sales Rep	Page No.
01/19/18	55 south grand ave	WOODRUFF CONSTRUCTION	mark	atl	01/19/18		ICHS	1 of 1

[3]

Special Instructions

MRF Building?

SOLD TO
WOODRUFF CONSTRUCTION
1890 KOUNTRY LANE

FT. DODGE, IA 50501

SHIP TO
WOODRUFF CONSTRUCTION
55 grand ave
Mark 319 383 1616
iowa city, IA

Product No.	Quantity	Units	Description	UM	Extension	Unit price	Amount
~~2DITR~~	~~12~~	~~EA~~	~~DIT TIP #2 REDUCED~~	~~EA~~	~~12~~		
TT1210	1	pcs	5/8" PLASTIC J TRIM 10' 50 PCS/CTN	MLF	10.00		
			Weight 0				

Job # 18-011
Cost Code 9020-0

Tax Details	Received By	Delivered By	Totals
Taxable: Yes Iowa Johnson - Iowa City		IOWA CITY YARD	SUBTOTAL TAX ADD'L CHARGES **TOTAL**

Thank You

Payments

TERMS: NET 20TH, OR AS OTHERWISE ARRANGED. INTEREST RATE OF 1.5% PER MONTH (WHICH IS A RATE OF 18% PER YEAR) COMPUTED MONTHLY WILL BE CHARGED ON THE UNPAID BALANCE. CUSTOMER AGREES TO PAY BY CASH, CHECK, OR ACH. CUSTOMERS PAYING THEIR ACCOUNT WITH A CREDIT CARD WILL INCUR A SURCHARGE OF 2.0% ON THE TRANSACTION AMOUNT, WHICH IS NOT GREATER THAN TAMARACK MATERIALS COST OF ACCEPTANCE.

25% RETURN CHARGE ON STOCK MERCHANDISE. SPECIAL ORDERS ARE NOT RETURNABLE.

TAMARACK MATERIALS INC. HEREBY REQUESTS PURSUANT TO MINNESOTA STATUTES SECTION 514.011 (3) THAT YOU SUPPLY TO IT, WITHIN TEN (10) DAYS OF THE DATE OF THIS INNVOICE, THE NAME AND ADDRESS OF THE OWNER WHOSE PROPERTY IS BEING IMPROVED BY THE MATERIALS YOU HAVE ORDERED.

GYPSUM WALLBOARD, PLASTER, STUCCO, STO/EIFS, JOINT COMPOUND, INSULATION, METAL STUDS, METAL LATH, METAL ACCESS DOORS, DRYWALL SCREWS, DRYWALL TOOLS, CEILING TILE AND GRID, FRY REGLET TRIMS, FRP, SCAFFOLDING, SAFTEY EQUIPMENT AND MORE

TAMARACK MATERIALS, INC.

Tamarack Materials, Inc.
9300 James Avenue South
Bloomington, MN 55431
Tel: (952) 888-5556
Fax: (952) 888-4030

Invoice

CUSTOMER NO.	INVOICE DATE
10421	01/23/18
P.O. #	ORDER #
55 south grand	6527644-00
CUSTOMER JOB NO.	PAGE #:
WOODRUFF CONSTR	1 of 1

Remit To:
Tamarack Materials, Inc.
SDS 12-1200
P.O. Box 86
Minneapolis, MN 55486-1200

SOLD TO:
9964 1 MB 0.424 E0188X 10398 D3268401876 S2 P5035823 0001:0002

WOODRUFF CONSTRUCTION
1890 KOUNTRY LN
FORT DODGE IA 50501-8722

SHIP TO:

WOODRUFF CONSTRUCTION
55 grand ave
Mark 319 383 1616
Iowa city, IA

SPECIAL INSTRUCTIONS	DELIVERED BY	RECEIVED BY
MRF Building?	IOWA CITY YA	
ORDERED BY	**SALES REP**	**DATE SHIPPED**	**NET DUE DATE**
mark	ICHS	01/22/18	

PRODUCT NO.	QUANTITY	UNITS	DESCRIPTION	U/M	EXTENSION	UNIT PRICE	AMOUNT
~~2BITR~~	~~12.00~~	~~EA~~	~~BIT TIP #2 REDUCED~~	~~EA~~	~~12.00~~	~~0.35~~	~~4.20~~
TT1210	1.00	PCS	5/8" PLASTIC J TRIM 10'50 PCS/CTN	MLF	10.00	144.00	1.44

TAX DETAILS		TOTALS	
TAXABLE: Yes		SUBTOTAL	5.64
STATE : Iowa		TAX	0.34
CITY : Iowa City		ADD'L CHARGES	
COUNTY : Johnson - County	THANK YOU FOR YOUR BUSINESS!	TOTAL	5.98

TERMS: NET 20TH, OR AS OTHERWISE ARRANGED. INTEREST RATE OF 1 ½% PER MONTH (WHICH IS A RATE OF 18% PER YEAR) COMPUTED MONTHLY WILL BE CHARGED ON THE UNPAID BALANCE. CUSTOMER AGREES TO PAY BY CASH, CHECK, OR ACH. CUSTOMERS PAYING THEIR ACCOUNT WITH A CREDIT CARD WILL INCUR A SURCHARGE OF 2.0% ON THE TRANSACTION AMOUNT, WHICH IS NOT GREATER THAN TAMARACK MATERIALS COST OF ACCEPTANCE.

25% RETURN CHARGE ON STOCK MERCHANDISE. SPECIAL ORDERS ARE NOT RETURNABLE.

PAYMENTS

GYPSUM WALLBOARD, PLASTER, STUCCO, STO/EIFS, JOINT COMPOUND, INSULATION, METAL STUDS, METAL LATH, METAL ACCESS DOORS, DRYWALL SCREWS, DRYWALL TOOLS, CEILING TILE AND GRID, FRY REGLET TRIMS, FRP, SCAFFOLDING, SAFETY EQUIPMENT AND MORE

0001:0002

Use Your BIG CARD 2% REBATE MENARDS®

MENARDS - IOWA CITY
2605 Naples Ave
Iowa City, IA 52240

KEEP YOUR RECEIPT
RETURN POLICY VARIES BY PRODUCT TYPE

Unless noted below allowable returns for items on this receipt will be in the form of an in store credit voucher if the return is done after 04/22/18

If you have questions regarding the charges on your receipt, please email us at:
IOWAfrontend@menards.com

Sale Transaction

ALL-PURPOSE-PAIL-BLACK L
1312726 13.98

TOTAL 13.98
TAX STATE OF IA 6% 0.84
TOTAL SALE 14.82
Menard Commercial Card 6697 14.82
016856
Swiped
PO # 18 011

TOTAL NUMBER OF ITEMS = 1

THE FOLLOWING REBATE RECEIPTS WERE PRINTED FOR THIS TRANSACTION:
2448

GUEST COPY

The Cardholder acknowledges receipt of goods/services in the total amount shown hereon and agrees to pay the card issuer according to its current terms.

THIS IS YOUR CREDIT CARD SALES SLIP
PLEASE RETAIN FOR YOUR RECORDS.

NOW HIRING!!

THANK YOU, YOUR CASHIER, KAREN

4592 05 2968 01/22/18 03:47PM 3091

Use Your BIG CARD 2% REBATE MENARDS®

MENARDS - IOWA CITY
2605 Naples Ave
Iowa City, IA 52240

KEEP YOUR RECEIPT
RETURN POLICY VARIES BY PRODUCT TYPE

Unless noted below allowable returns for items on this receipt will be in the form of an in store credit voucher if the return is done after 04/24/18

If you have questions regarding the charges on your receipt, please email us at:
IOWAfrontend@menards.com

Sale Transaction

16OZ COTTON DECK MOP
6489795 7.99

TOTAL 7.99
TAX STATE OF IA 6% 0.48
TOTAL SALE 8.47
Menard Commercial Card 6697 8.47
002085
Swiped
PO # 18 011

TOTAL NUMBER OF ITEMS = 1

THE FOLLOWING REBATE RECEIPTS WERE PRINTED FOR THIS TRANSACTION:
2448

GUEST COPY

The Cardholder acknowledges receipt of goods/services in the total amount shown hereon and agrees to pay the card issuer according to its current terms.

THIS IS YOUR CREDIT CARD SALES SLIP
PLEASE RETAIN FOR YOUR RECORDS.

NOW HIRING!!

THANK YOU, YOUR CASHIER, Beth

38638 03 1074 01/24/18 04:15PM 3091

Use Your BIG CARD 2% REBATE
MENARDS

ENARDS - IOWA CITY
2605 Naples Ave
Iowa City, IA 52240

KEEP YOUR RECEIPT
RETURN POLICY VARIES BY PRODUCT TYPE

Unless noted below allowable returns for items on this receipt will be in the form of an in store credit voucher if the return is done after 04/25/18

If you have questions regarding the charges on your receipt, please email us at:
IOWAfrontend@menards.com

Sale Transaction

BACKER ROD 3/8" X 20'		
4366402	3 @2.99	8.97
WL 3006 ULTRA WHITE		
5634308		3.89
TOTAL		12.86
STATE OF IA 6%		0.77
L SALE		13.63
Menard Commercial Card 6697		13.63
028906		
Swiped		
PO #	18 011	

TOTAL NUMBER OF ITEMS = 4

THE FOLLOWING REBATE RECEIPTS WERE PRINTED FOR THIS TRANSACTION:
2448

GUEST COPY

The Cardholder acknowledges receipt of goods/services in the total amount shown hereon and agrees to pay the card issuer according to its current terms.

THIS IS YOUR CREDIT CARD SALES SLIP
PLEASE RETAIN FOR YOUR RECORDS.

NOW HIRING!!

THANK YOU, YOUR CASHIER, Beth

38638 12 4241 01/25/18 12:30PM 3091

PACKING SLIP

FBM
Foundation Building Materials
RETURN SERVICE REQUESTED

BRANCH 0043
5543 RD AVE SW
CEDAR RAPIDS IA 52404-4908
(319) 362-4033 PH
(319) 247-2599 FX

Founded on Principle • Built with Purpose

ORDER #	CUSTOMER PO #	PAGE
43125048-00	18-011	1
ORDER DATE	JOB # / NAME	
01/16/18		
PICKED DATE	SHIP VIA	ORDER TAKEN BY
01/26/18	Cust Pick Up	Albers, Doug
PROMISED DATE	ORDERED BY	SALES REP
01/31/18	MARK	Des Moines, I

* CUSTOMER COPY *

SHIP TO: WATER DAMAGE REPAIR
MARK 319-383-1616
, IA
(515)576-1118

CUST #:
94357

BILL TO: WOODRUFF CONSTRUCTION CO.
1890 KOUNTRY LN
FORT DODGE, IA 50501-8722
(515)576-1118

Line No.	QTY Ord	QTY Alloc.	QTY Ship	Sell Unit	Product Code / Product Description	QTY BO	UOM Qty	UOM	Weight
1	17.00	17.00		CTN	CTA815A ARM FISSURED 2X2 TEG 15/16" (48'/CTN) WHITE	0.00	0.816	MSF	884.00

☐ No one on site for signature

Delivered by		Date	Received by		Date
PICKED BY	CHECKED BY	LOADED BY	TRUCK #	CUBE	WEIGHT
				0.00000	884.00000

Last Page

A finance charge of 1-1/2% per month (18% per year) will be charged on all past due accounts. ALL claims and returned goods MUST be accompanied by appropriate paperwork. Job access is the contractor's responsibility, including ingress and egress.
California Customers: Title passes F.O.B. warehouse on pick-ups. Title passes F.O.B. curbside stocking and spreading when delivered.

FBM
Foundation Building Materials
RETURN SERVICE REQUESTED

BRANCH 0043
55 43RD AVE SW
CEDAR RAPIDS IA 52404-4908
(319) 362-4013 PH
(319) 247-2599 FX

Founded on Principle • Built with Purpose

INVOICE

INVOICE NUMBER	INVOICE DATE
43125048-00	01/26/18
CUSTOMER PO NUMBER	ORDERED BY
18-011	MARK
TERMS	DUE DATE
2% 10TH NEOM	02/28/18

PLEASE REMIT ALL PAYMENTS TO:
FOUNDATION BUILDING MATERIALS
1125 HARRISON AVE
ROCKFORD IL 61104-7239

BILL TO CUSTOMER NUMBER: 94357 PH: 5155761118

WOODRUFF CONSTRUCTION CO.
1890 KOUNTRY LN
FORT DODGE, IA 50501-8722
UNITED STATES

SHIP TO: 18-011 PH: 5155761118

WATER DAMAGE REPAIR
MARK 319-383-1616
, IA

ORDER DATE	SHIP DATE	ORDER TAKEN BY	SALES REP	SHIP VIA	JOB NUMBER / NAME
01/16/18	01/26/18	Albers, Doug	Des Moines, IA	Cust Pick Up	

QTY ORDERED	QTY SHIPPED	SELL UNIT	ITEM NUMBER / ITEM DESCRIPTION	UNIT QTY	UNIT PRICE	PRICE UOM	AMOUNT DUE
17.00	17.00	CTN	CTA815A ARM FISSURED 2X2 TEG 15/16" (48'/CTN) WHITE	0.816	$1,445.000	MSF	$1,179.12

Email & Fax Invoicing Now Available !!
Get your invoices quickly with FBM's email and fax invoicing system. Invoices are emailed in a PDF format and both emailed and faxed invoices look identical to printed bills. Email invoicing can include a data file for importing into your accounting system. Email us at ar-support@FBMsales.com to get set up today!

SUB-TOTAL	$1,179.12
TAXES	$82.54
INVOICE TOTAL	**$1,261.66**

Please reference the invoice number with your payment.
If Payment Is Received By 02/10/18 You May Deduct $23.58
A finance charge of 1-1/2% per month (18% per year) will be charged on past due accounts.
ALL claims and returned goods MUST be accompanied by appropriate paperwork.
Job access is the contractor's responsibility, including ingress and egress.
Subject to FBM terms and conditions http://www.FBMsales.com/FBM-CREDIT/.

California Customers: Title passes F.O.B. warehouse on pick-ups. Title passes F.O.B. curbside before stocking and spreading when delivered.

To sign up to view invoices on-line go to http://FBMsales.billtrust.com. Use Enrollment Token: HML PVK FSS

Thank You For Your Business

Page 1 of 1

Use Your BIG CARD 2% REBATE
MENARDS®

MENARDS - IOWA CITY
2605 Naples Ave
Iowa City, IA 52240

KEEP YOUR RECEIPT
RETURN POLICY VARIES BY PRODUCT TYPE

Unless noted below allowable returns for items on this receipt will be in the form of an in store credit voucher if the return is done after 04/30/18

If you have questions regarding the charges on your receipt, please email us at:
IOWAfrontend@menards.com

Sale Transaction

LOC PWR GRAB EXP AP PRES	
5202642	7.68
FATMAX POCKET KNIFE	
2373236	14.99
TOTAL	22.67
TAX STATE OF IA 6%	1.36
TC SALE	24.03
Menard Commercial Card 6697	24.03

010156
Swiped
PO # 18011

TOTAL NUMBER OF ITEMS = 2

GUEST COPY

The Cardholder acknowledges receipt of goods/services in the total amount shown hereon and agrees to pay the card issuer according to its current terms.

THIS IS YOUR CREDIT CARD SALES SLIP
PLEASE RETAIN FOR YOUR RECORDS.

NOW HIRING!!

THANK YOU, YOUR CASHIER, Nick

38610 03 2023 01/30/18 04:29PM 3091

SHERWIN-WILLIAMS.

IOWA CITY Store 3783

841 HIGHWAY 6 E
IOWA CITY IA 52240 4404
(319)338-3604
Fax (319) 338-4752
www.sherwin-williams.com

CHARGE 4:04pm
Tran # 8091-4 01/30/18
E73/13746 11
JACK PO# 18-011

WOODRUFF CONSTRUCTION CO
Account XXXX-0599-0
Job 1 WOODRUFF CONSTRUCTION CO

Bill To:
WOODRUFF CONSTRUCTION CO
1890 KOUNTRY LN
FORT DODGE, IA 50501 8722
(515)232-4535

172-2297 137202 EACH			
CP66SW-48WW MASKTAPE			
*Sale Price	1.00 @	2.75	2.75
482-8133 PG29..24R 2 INCH			
PG29 PREMIUM-48WW			
	1.00 @	9.19	9.19
Discount (%15.00)			-1.38
SUBTOTAL BEFORE TAX			10.56
6.000% SALES TAX;1-165224000			0.63
CHARGE			$11.19

Merchandise Received in Good Order by:

Job # 18-011
Cost Code 1052-0

MARK Date

NET PAYMENT DUE ON FEB. 20th
(Centralized Invoice)

STORE HOURS

SUNDAY	10:00 AM - 6:00 PM
MONDAY - FRIDAY	7:00 AM - 7:00 PM
SATURDAY	8:00 AM - 6:00 PM

Thank You
receipt required for refund

13746/80914-01-30-2018

Customer Copy

TAMARACK
MATERIALS, INC.

Tamarack Materials, Inc.
9300 James Avenue South
Bloomington, MN 55431
Tel: (952) 888-5556
Fax: (952) 888-4030

Invoice

CUSTOMER NO.	INVOICE DATE
10421	01/30/18
P.O. #	ORDER #
18-011	6527909-00
CUSTOMER JOB NO.	PAGE #:
WOODRUFF CONSTR	1 of 1

Remit To:
Tamarack Materials, Inc.
SDS 12-1200
P.O. Box 86
Minneapolis, MN 55486-1200

SOLD TO:
14501 1 AB 0.409 ED226 I0332 03304102839 S2 P5063881 0002:0004

WOODRUFF CONSTRUCTION
1890 KOUNTRY LN
FORT DODGE IA 50501-8722

SHIP TO:

WOODRUFF CONSTRUCTION
U OF I VARIOUS JOBS
IOWA CITY, IA

SPECIAL INSTRUCTIONS	DELIVERED BY	RECEIVED BY
	IOWA CITY YA	
ORDERED BY	**SALES REP**	**DATE SHIPPED**	**NET DUE DATE**
Mark	ICHS	01/29/18	

PRODUCT NO.	QUANTITY	UNITS	DESCRIPTION	U/M	EXTENSION	UNIT PRICE	AMOUNT
usg707	1.00	CTN	3/4x2x2ACOUSTONE GLACIERSHADOWLINE	MSF	32.00	1952.00	62.46

TAX DETAILS

TAXABLE: No
STATE : Iowa
CITY : Iowa City
COUNTY : Johnson - County

THANK YOU FOR YOUR BUSINESS!

TOTALS

SUBTOTAL	62.46
TAX	0.00
ADD'L CHARGES	
TOTAL	62.46

PAYMENTS

TERMS: NET 20TH, OR AS OTHERWISE ARRANGED. INTEREST RATE OF 1 ½% PER MONTH (WHICH IS A RATE OF 18% PER YEAR) COMPUTED MONTHLY WILL BE CHARGED ON THE UNPAID BALANCE. CUSTOMER AGREES TO PAY BY CASH, CHECK, OR ACH. CUSTOMERS PAYING THEIR ACCOUNT WITH A CREDIT CARD WILL INCUR A SURCHARGE OF 2.0% ON THE TRANSACTION AMOUNT, WHICH IS NOT GREATER THAN TAMARACK MATERIALS COST OF ACCEPTANCE.

25% RETURN CHARGE ON STOCK MERCHANDISE. SPECIAL ORDERS ARE NOT RETURNABLE.

GYPSUM WALLBOARD, PLASTER, STUCCO, STO/EIFS, JOINT COMPOUND, INSULATION, METAL STUDS, METAL LATH, METAL ACCESS DOORS, DRYWALL SCREWS, DRYWALL TOOLS, CEILING TILE AND GRID, FRY REGLET TRIMS, FRP, SCAFFOLDING, SAFETY EQUIPMENT AND MORE

0002:0004

Use Your BIG CARD 2% REBATE
MENARDS®

MENARDS - IOWA CITY
2605 Naples Ave
Iowa City, IA 52240

KEEP YOUR RECEIPT
RETURN POLICY VARIES BY PRODUCT TYPE

Unless noted below allowable returns for items on this receipt will be in the form of an in store credit voucher if the return is done after 05/03/18

If you have questions regarding the charges on your receipt, please email us at:
IOWAfrontend@menards.com

Sale Transaction

HOWARD RESTOR-A-SHINE		
5551312		8.98
FATMAX POCKET KNIFE		
2373236		14.99
12PK 2IN1 PAINT TOWELS		
5813575	2 @6.97	13.94
AL		37.91
TAX STATE OF IA 6%		2.27
TOTAL SALE		40.18
Menard Commercial Card 6697		40.18
010474		
Swiped		
PO #	18 011	

TOTAL NUMBER OF ITEMS = 4

GUEST COPY

The Cardholder acknowledges receipt of goods/services in the total amount shown hereon and agrees to pay the card issuer according to its current terms.

THIS IS YOUR CREDIT CARD SALES SLIP
PLEASE RETAIN FOR YOUR RECORDS.

NOW HIRING!!

THANK YOU, YOUR CASHIER, Kathleen

38611 07 6735 02/02/18 11:54AM 3091

HOWARD RESTORE A SHINE
(TO CLEANUP DOOR DAMAGED IN FLOOD)

KNIFE (CEILING TILE)

TOWELS (CLEANUP)

LOWE'S

LOWE'S HOME CENTERS, LLC
2701 2ND STREET
CORALVILLE, IA 52241 (319) 545-8300

- SALE -

SALES#: S1688JM1 2274240 TRANS#: 9610269 02-02-18

549713 SHOP-VAC 12-GAL 6-PEAK HP 95.00
99.99 DISCOUNT EACH -4.99

SUBTOTAL: 95.00
TAX: 5.70
INVOICE 09889 TOTAL: 100.70
LAR: 100.70

TOTAL DISCOUNT: 4.99

LAR:XXXXXXXXXXX7939 AMOUNT:100.70 AUTHCD:000927
KEYED REFID:427894 02/02/18 16:24:52
LAR PO: 18-011
ACCOUNT NAME:
WOODRUFF CONSTRUCTION CORP
AUTH BUYER: TOTH MARK

ACCOUNT WILL BE BILLED UPON MERCHANDISE TRANSACTION DATE FOR STOCK MERCHANDISE AND NO LATER THAN 90 DAYS FROM TRANSACTION DATE FOR SDS OR DIRECT DELIVERY MERCHANDISE.

STORE: 1688 TERMINAL: 09 02/02/18 16:25:00

 # OF ITEMS PURCHASED: 1

EXCLUDES FEES, SERVICES AND SPECIAL ORDER ITEMS

THANK YOU FOR SHOPPING LOWE'S.
SEE REVERSE SIDE FOR RETURN POLICY.
STORE MANAGER: AMANDA SERWULKA-GEORGE

LOWE'S PRICE MATCH GUARANTEE
FOR MORE DETAILS, VISIT LOWES.COM/PRICEMATCH

YOUR OPINIONS COUNT!
REGISTER FOR A CHANCE TO BE
ONE OF FIVE $300 WINNERS DRAWN MONTHLY!
¡REGISTRESE EN EL SORTEO MENSUAL
PARA SER UNO DE LOS CINCO GANADORES DE $300!

REGISTER BY COMPLETING A GUEST SATISFACTION SURVEY
WITHIN ONE WEEK AT: www.lowes.com/survey
Y O U [illegible] 1688 033

NO PURCH
VOID WHERE PROH
OFFICIAL RULES

Your feedback means so much to us! We are aiming for a "Perfect 7" and to recognize any outstanding associates. Please share through our [illegible]

Use Your BIG CARD 2% REBATE
MENARDS®

MENARDS - IOWA CITY
2605 Naples Ave
Iowa City, IA 52240

KEEP YOUR RECEIPT
RETURN POLICY VARIES BY PRODUCT TYPE

Unless noted below allowable returns for items on this receipt will be in the form of an in store credit voucher if the return is done after 05/01/18

If you have questions regarding the charges on your receipt, please email us at:
IOWAfrontend@menards.com

Sale Transaction

SB INDUS. GLUE GUN
2317044 29.99
SB 10" ALL PURPOSE STICK
2317056 7.29

TOTAL 37.28
TAX STATE OF IA 6% 2.24
TOTAL SALE 39.52
Menard Commercial Card 6697 39.52
043111
Swiped
PO # 18 011

TOTAL NUMBER OF ITEMS = 2

GUEST COPY

The Cardholder acknowledges receipt of goods/services in the total amount shown hereon and agrees to pay the card issuer according to its current terms.

THIS IS YOUR CREDIT CARD SALES SLIP
PLEASE RETAIN FOR YOUR RECORDS.

NOW HIRING!!

THANK YOU, YOUR CASHIER, Breanna

38595 01 3638 01/31/18 04:02PM 3091

LOWES

NEW VACUUM.
(OLD ONE AIED)

MENARDS

GLUE GUN
GLUE
(TO ATTACH VINYL BASE)

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ADVANCED ELECTRICAL SERVICES, INC.
Electrical Contracting & Service Company

Advanced BoreTek – A Division of Advanced Electrical Services

(319) 351-6452 • (319) 351-3080 FAX •office@advancedelectrical.com • 1233 Gilbert Court • Iowa City, IA 52240

Monday, February 12, 2018

Woodruff Construction
Attn: Leon

RE: MRF Water Damage-Pay Application #1 Summary

Subject: Pay App #1

For all the work from 01/09-02/02. The total amount for Advanced Electric work is **$4160.91**. Labor and material cost documents are enclosed for review.

If you require additional clarification please contact me. Thank you for your prompt response.

Thank You,

ADVANCED ELECTRICAL SERVICES

Kim Sexton

ADVANCED ELECTRICAL SERVICES INC.
and ADVANCED BORETEK
1233 GILBERT COURT
IOWA CITY, IA 52240
PH: 319-351-6452

INVOICE

55623
INVOICE NUMBER

CUSTOMER
WOODRUFF CONSTRUCTION
1890 KOUNTY LANE
FORT DODGE, IA 50501

DATE	02/12/2018
REFERENCE	AS PER NICK
TELEPHONE	

29306 UA 106997 WOODRU Soldby:

JOB LOCATION	JOB DETAILS
UI - MRF	REPAIR FLOOD DAMAGE AS DIRECTED

Monthly finance charge of 1.5%, if not paid within 30 days of invoice date. Customer will be responsible for all costs, including court & attorney's fees, incurred by Advanced Electrical Services, Inc. in the collection of customer's past due account.

Material / Work Description	Charge
01/09-02/02: CHECKED WATER DAMAGE. PICKED UP PARKING HOOD. CHANGED OUT THE OUTLET BY THE ELEVATOR. REMOUNTED OUTLET IN HALLWAY. LOCATED PANELS AND CIRCUITS FOR LIGHTS AND OUTLETS. CHANGED OUT LIGHT BY ELEVATOR. FINISHED 5TH FLOOR. STARTED AND FINISHED 4TH FLOOR. INSTALLED LIGHTS IN CEILING. BLANKED OFF BOXES AND PLUGGED PIPE HOLES IN BOXES. LOCATED PERSONEL FOR FIRE ALARM, SPRINKLER SYSTEM, CAMERAS, ANTENNAS, AND ELECTRICAL. CHANGEDOUTLET FOR EXIT, ANTENNA, 5TH, 4TH, 3RD. MET WITH ELEVATOR PERSONEL AND WENT OVER REPLACEMENTS AND SAFETY WITH RYAN AND MIKE.	
Material Used	470.91
Material Total	470.91

Labor / Work Description	Charge
Labor Provided	3,690.00
Labor Total	3,690.00

PAY THIS AMOUNT ▶ $ 4,160.91

PLEASE DETACH THIS PORTION & RETURN WITH YOUR REMITTANCE TO:

Advanced Electrical Services, Inc.
1233 Gilbert Court
Iowa City, IA 52240

CUSTOMER: WOODRUFF CONSTRUCTION
CUST. NO. 106997 Inv #: 55623
DATE: 02/12/2018 PAY THIS AMOUNT ▶ $ 4,160.91

TERMS: DUE UPON RECEIPT

ADVANCED ELECTRICAL SERVICES INC.
and ADVANCED BORETEK
1233 GILBERT COURT
IOWA CITY, IA 52240
PH: 319-351-6452

INVOICE

55623
INVOICE NUMBER

CUSTOMER
WOODRUFF CONSTRUCTION
1890 KOUNTY LANE
FORT DODGE, IA 50501

DATE	02/12/2018
REFERENCE	AS PER NICK
TELEPHONE	

29306 UA 106997 WOODRU Soldby:

JOB LOCATION	JOB DETAILS
UI - MRF	REPAIR FLOOD DAMAGE AS DIRECTED

Monthly finance charge of 1.5%, if not paid within 30 days of invoice date. Customer will be responsible for all costs, including court & attorney's fees, incurred by Advanced Electrical Services, Inc. in the collection of customer's past due account.

Material / Work Description **Charge**

01/09-02/02: CHECKED WATER DAMAGE. PICKED UP PARKING HOOD. CHANGED OUT THE OUTLET BY THE ELEVATOR. REMOUNTED OUTLET IN HALLWAY. LOCATED PANELS AND CIRCUITS FOR LIGHTS AND OUTLETS. CHANGED OUT LIGHT BY ELEVATOR. FINISHED 5TH FLOOR. STARTED AND FINISHED 4TH FLOOR. INSTALLED LIGHTS IN CEILING. BLANKED OFF BOXES AND PLUGGED PIPE HOLES IN BOXES. LOCATED PERSONEL FOR FIRE ALARM, SPRINKLER SYSTEM, CAMERAS, ANTENNAS, AND ELECTRICAL. CHANGEDOUTLET FOR EXIT, ANTENNA, 5TH, 4TH, 3RD. MET WITH ELEVATOR PERSONEL AND WENT OVER REPLACEMENTS AND SAFETY WITH RYAN AND MIKE.

Material Used	470.91
Material Total	470.91

Labor / Work Description **Charge**

Labor Provided	3,690.00
Labor Total	3,690.00

PAY THIS AMOUNT ▶ $ 4,160.91

PLEASE DETACH THIS PORTION & RETURN WITH YOUR REMITTANCE TO:

Advanced Electrical Services, Inc.
1233 Gilbert Court
Iowa City, IA 52240

CUSTOMER: WOODRUFF CONSTRUCTION
CUST. NO. 106997 Inv #: 55623
DATE: 02/12/2018 PAY THIS AMOUNT ▶ $ 4,160.91

TERMS: DUE UPON RECEIPT

INVOICE

VAN METER INC.
470 Ruppert Road
IOWA CITY IA 52246
319-339-0000 Fax 319-339-1816

www.vanmeterinc.com

VAN METER
A 100% EMPLOYEE-OWNED COMPANY

INVOICE DATE	OUR INVOICE NUMBER
01/12/18	S010086389.001

Bill To#	Ship To#	Price Br	Ship Br
1711	90926	7	10

PLEASE REMIT PAYMENT TO:	DUE DATE
850 32ND AVENUE SW CEDAR RAPIDS IA 52404-3913	03/12/18

BILL TO:

ADVANCED ELECTRICAL SERVICES
1233 GILBERT CT
IOWA CITY IA 52240-4510

SHIP TO:

ENROLLMENT TOKEN
SPZ LMS QFF

AES - #27446- UI STEAM UTILITY SYS
1233 GILBERT COURT
ATTN: JAKE MOORE
IOWA CITY IA 52240-4510

YOUR PO/ORDER #	ORDERED BY	JOB/RELEASE #	YOUR ACCOUNT MANAGER
29306 TIME& MATERIAL	JAKE	TAX EXEMPT EXTRA	Brad Meyers IC

ORDER WRITER	SHIP VIA	TERMS	ORDER DATE	SHIP DATE
Dan Kruser IC 3701	07W5 IC WEST M-F	NET 60	01/11/18	01/12/18

ORDER QTY	SHIP QTY	DESCRIPTION	Unit Price/UM	Extension
4	4	PHIL-DB 2TG8332-01-UNV-1/3-EB 2X4 3LAMP 32W/T8 TROFFER (120/277V)	44.118/E	176.47
12	12	453753 PHIL F32T8/HL741/ALTO 30PK	1.535/E	18.42

WANT TO SAVE TIME?
Our goal is to make it easy for you to manage the invoices you receive from us. For the ultimate in convenience, try our **Invoice Gateway** site. You can view, print, and even download your invoices right to your system. You can also sign up for E-billing and you will be notified of new invoices via email. Go paperless!
Contact Marie Anderson at manderson@vanmeterinc.com or 319-368-2828 for enrollment information.

If you are already on **Invoice Gateway** and/or want to pay your bills on-line and manage multiple vendors??
Visit the **Invoice Central** site - www.invoicecentral.com

Invoice is due by 03/12/18.

Invoice Questions?
Call Dan Kruser at
319-339-0000

Subtotal	$194.89
Shipping & Handling	
Sales Tax	$0.00
Amount Due	$194.89

All claims for shortages or errors must be made at once. Past due invoices may be subject to a 1.50% late charge. Our company does not manufacture the goods it sells and makes no express warranties thereon. It also disclaims all implied warranty of merchantability or fitness for a particular use. Except as prohibited by law, you are responsible for payment of all fees, costs, and expenses, including but not limited to, attorney fees, expert witness fees, and deposition expenses incurred to collect all amounts due from you. We accept credit card payments for immediate pay only and our credit terms are NET.

For Return Policy information and Return Request Forms visit www.vanmeterinc.com and go to Online Ordering and then Return Policy or Returns Form.

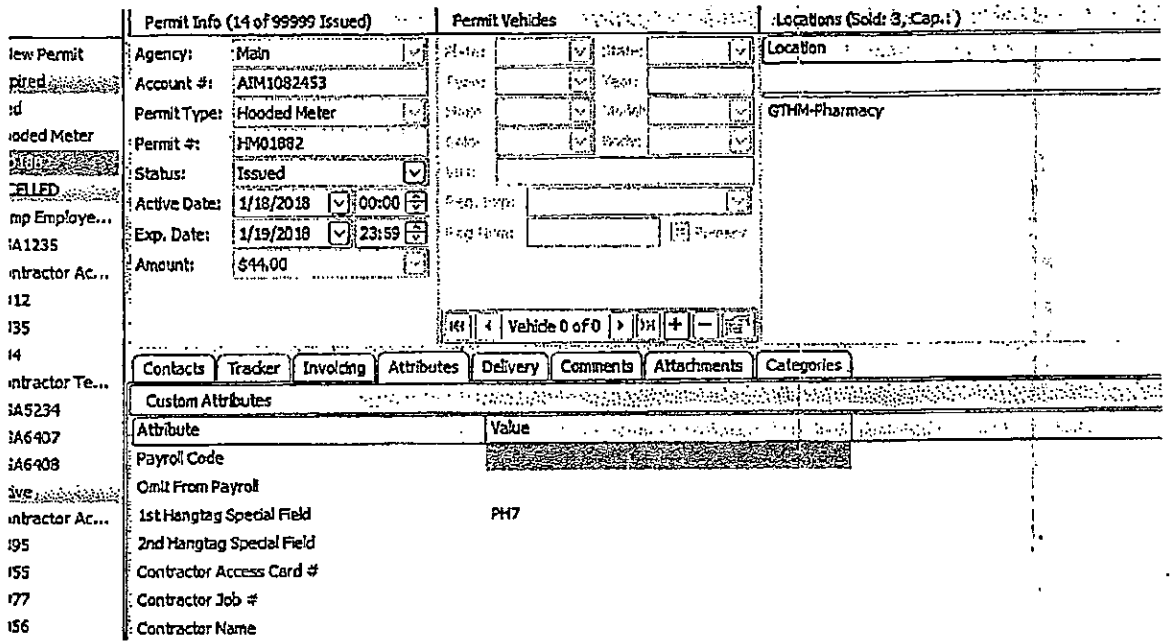
For complete terms and conditions as well as EEO Compliance regulations please go to https://www.vanmeterinc.com/terms-conditions.html

Jan 12, 2018 6:49:54 AM M000299599

Ste Multiple Orders

Confirmation of Delivery

26B Invoice - Page 48 of 83



MRS
#29306

INVOICE

VAN METER INC.
470 Ruppert Road
IOWA CITY IA 52246
319-339-0000 Fax 319-339-1816

www.vanmeterinc.com

VAN METER
A 100% EMPLOYEE OWNED COMPANY

INVOICE DATE		OUR INVOICE NUMBER	
01/19/18		S010098503.001	
Bill To#	Ship To#	Price Br	Ship Br
1711	1711	7	7
PLEASE REMIT PAYMENT TO:		DUE DATE	
850 32ND AVENUE SW CEDAR RAPIDS IA 52404-3913		03/19/18	

BILL TO:

ADVANCED ELECTRICAL SERVICES
1233 GILBERT CT
IOWA CITY IA 52240-4510

SHIP TO:

ENROLLMENT TOKEN
SPZ LMS QFF

ADVANCED ELECTRICAL SERVICES
1233 GILBERT CT
IOWA CITY IA 52240-4510

YOUR PO/ORDER #	ORDERED BY	JOB/RELEASE #	YOUR ACCOUNT MANAGER	
29306	TREVOR		Brad Meyers IC	
ORDER WRITER	SHIP VIA	TERMS	ORDER DATE	SHIP DATE
Dan Kruser IC 3701	IPK IMMEDIATEPK	NET 60	01/19/18	01/19/18

ORDER QTY	SHIP QTY	DESCRIPTION	Unit Price/UM	Extension
6	6	CRS-H 335 1/2 KO SNAP IN BLNK	31.942/c	1.92
6	6	CRS-H 336 3/4 KO SNAP LN BLNK	37.543/c	2.25
4	4	RACO 752 SQUARE COVER 4" FLAT BLANK	26.990/c	1.08

WANT TO SAVE TIME?
Our goal is to make it easy for you to manage the invoices you receive from us. For the ultimate in convenience, try our **Invoice Gateway** site. You can view, print, and even download your invoices right to your system. You can also sign up for E-billing and you will be notified of new invoices via email. Go paperless!
Contact Marie Anderson at manderson@vanmeterinc.com or 319-368-2828 for enrollment information.

If you are already on **Invoice Gateway** and/or want to pay your bills on-line and manage multiple vendors??
Visit the **Invoice Central** site - www.invoicecentral.com

Invoice is due by 03/19/18.

Invoice Questions?
Call Dan Kruser at
319-339-0000

01-19-2018 09:56:32 AM
S010098503.001

Trevor

TREVOR

Confirmation of Delivery

Subtotal	**$5.25**
Shipping & Handling	
Sales Tax	**$0.32**
Amount Due	**$5.57**

All claims for shortages or errors must be made at once. Past due invoices may be subject to a 1.50% late charge. Our company does not manufacture the goods it sells and makes no express warranties thereon. It also disclaims all implied warranty of merchantability or fitness for a particular use. Except as prohibited by law, you are responsible for payment of all fees, costs, and expenses, including but not limited to, attorney fees, expert witness fees, and deposition expenses incurred to collect all amounts due from you. We accept credit card payments for immediate pay only and our credit terms are NET.

For Return Policy information and Return Request Forms visit www.vanmeterinc.com and go to Online Ordering and then Return Policy or Returns Form.

For complete terms and conditions as well as EEO Compliance regulations please go to https://www.vanmeterinc.com/terms-conditions.html

CREDIT MEMO

VAN METER INC.
470 Ruppert Road
IOWA CITY IA 52246
319-339-0000 Fax 319-339-1816

www.vanmeterinc.com

VAN METER
A 100% EMPLOYEE OWNED COMPANY

INVOICE DATE	OUR INVOICE NUMBER
01/19/18	S010097067.002

Bill To#	Ship To#	Price Br	Ship Br
1711	93038	7	7

PLEASE REMIT PAYMENT TO:	DUE DATE
850 32ND AVENUE SW CEDAR RAPIDS IA 52404-3913	03/19/18

BILL TO:

ADVANCED ELECTRICAL SERVICES
1233 GILBERT CT
IOWA CITY IA 52240-4510

SHIP TO:

ENROLLMENT TOKEN
SPZ LMS QFF

AES - #29306- UI MRF
1233 GILBERT CT
IOWA CITY IA 52240-4510

YOUR PO/ORDER #	ORDERED BY	JOB/RELEASE #	YOUR ACCOUNT MANAGER
29306	TREVOR		Brad Meyers IC

ORDER WRITER	SHIP VIA	TERMS	ORDER DATE	SHIP DATE
Carter Valentine IC 3727	CREDIT	NET 60	01/19/18	01/19/18

ORDER QTY	SHIP QTY	DESCRIPTION	Unit Price/UM	Extension
-2	-2	P&S 8300-I 20A/125V HOSP GR DPLX ** Original Sale : S010097067.001 ** ** Original Ship Date: 01/18/2018 ** Cus PO: 29306 ** 1 Customer Surplus Return I	10.545/E	-21.09

WANT TO SAVE TIME?
Our goal is to make it easy for you to manage the invoices you receive from us. For the ultimate in convenience, try our **Invoice Gateway** site. You can view, print, and even download your invoices right to your system. You can also sign up for E-billing and you will be notified of new invoices via email. Go paperless!
Contact Marie Anderson at manderson@vanmeterinc.com or 319-368-2828 for enrollment information.

If you are already on **Invoice Gateway** and/or want to pay your bills on-line and manage multiple vendors??
Visit the **Invoice Central** site - www.invoicecentral.com

Invoice Questions?
Call Carter Valentine at
319-339-0000

Subtotal	**-$21.09**
Shipping & Handling	
Sales Tax	**$0.00**
Amount Due	**-$21.09**

All claims for shortages or errors must be made at once. Past due invoices may be subject to a 1.50% late charge. Our company does not manufacture the goods it sells and makes no express warranties thereon. It also disclaims all implied warranty of merchantability or fitness for a particular use. Except as prohibited by law, you are responsible for payment of all fees, costs, and expenses, including but not limited to, attorney fees, expert witness fees, and deposition expenses incurred to collect all amounts due from you. We accept credit card payments for immediate pay only and our credit terms are NET.

For Return Policy Information and Return Request Forms visit www.vanmeterinc.com and go to Online Ordering and then Return Policy or Returns Form.

For complete terms and conditions as well as EEO Compliance regulations please go to https://www.vanmeterinc.com/terms-conditions.html

INVOICE

VAN METER INC.
470 Ruppert Road
IOWA CITY IA 52246
319-339-0000 Fax 319-339-1816

www.vanmeterinc.com

VAN METER
A 100% EMPLOYEE OWNED COMPANY

INVOICE DATE	OUR INVOICE NUMBER		
01/19/18	S010099270.001		
Bill To#	Ship To#	Price Br.	Ship Br
1711	1711	7	7
PLEASE REMIT PAYMENT TO:		DUE DATE	
850 32ND AVENUE SW CEDAR RAPIDS IA 52404-3913		03/19/18	

BILL TO:

ADVANCED ELECTRICAL SERVICES
1233 GILBERT CT
IOWA CITY IA 52240-4510

SHIP TO:

ENROLLMENT TOKEN
SPZ LMS QFF

ADVANCED ELECTRICAL SERVICES
1233 GILBERT CT
IOWA CITY IA 52240-4510

YOUR PO/ORDER #	ORDERED BY	JOB/RELEASE #	YOUR ACCOUNT MANAGER	
29306	TREVOR		Brad Meyers IC	
ORDER WRITER	SHIP VIA	TERMS	ORDER DATE	SHIP DATE
Carter Valentine IC 3727	**PK PICKUP	NET 60	01/19/18	01/19/18

ORDER QTY	SHIP QTY	DESCRIPTION	Unit Price/UM	Extension
1	1	453753 PHIL F32T8/HL741/ALTO 30PK	1.535/E	1.54

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Visit the **Invoice Central** site - www.invoicecentral.com

Invoice is due by 03/19/18.

Invoice Questions?
Call Carter Valentine at
319-339-0000

01-19-2018 02:04:39 PM
S010099270.001

Trevor

TREVOR

Subtotal	**$1.54**
Shipping & Handling	
Sales Tax	**$0.09**
Amount Due	**$1.63**

Confirmation of Delivery

All claims for shortages or errors must be made at once. Past due invoices may be subject to a 1.50% late charge. Our company does not manufacture the goods it sells and makes no express warranties thereon. It also disclaims all implied warranty of merchantability or fitness for a particular use. Except as prohibited by law, you are responsible for payment of all fees, costs, and expenses, including but not limited to, attorney fees, expert witness fees, and deposition expenses incurred to collect all amounts due from you. We accept credit card payments for immediate pay only and our credit terms are NET.

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953 73RD ST
WINDSOR HEIGHTS, IA 50324
(319)338-7561 FAX (319)338-8620

ELECTRICAL ENGINEERING & EQUIPMENT COMPANY

INVOICE

INVOICE DATE	ORDER NO.
01/19/18	5312228-00
P.O. NO.	PAGE#
29306	1

CUST.#: 5461

SHIP TO: ADVANCED ELECTRICAL SERVICE
1233 GILBERT CT.

IOWA CITY, IA 52240

BILL TO: ADVANCED ELECTRICAL SERVICE
1233 GILBERT CT.

IOWA CITY, IA 52240

CORRESPONDENCE TO:
Electrical Engineering & Equipment Co.
P.O. Box 310365
Des Moines, IA 50331-0365

INSTRUCTIONS	REFERENCE		CASH DISCOUNT:
			0.06
SHIP POINT	SHIP VIA	SHIPPED	IF PAID BY:
3E - IOWA CITY	WAIT COUNTER	01/19/18	02/10/18

LINE NO.	PRODUCT AND DESCRIPTION	QUANTITY ORDERED	QUANTITY B.O.	QTY. SHIPPED	QTY. U/M	NET PRICE	AMOUNT (NET)
1	TNB LD2-D 2P LUMINAIRE DISCONNECT	4	0	4	C	77.75	3.11
1	Lines Total	Qty Shipped Total		4	Total		3.11
					Taxes		0.19
					Invoice Total		3.30

Cash Discount 0.06 If Paid By 02/10/18

Last Page

THE UNIVERSITY OF IOWA
PARKING NOTICE

TRANSACTION #: 182000874
LIC: K1NICK IA
VIN:
Permit: #29306

EXPLANATION:
B6_25
Loading Zone
FEE: $25.00
LOCATION: LZ123

COMMENTS:

Badge Number: 805
DATE: 01/29/2018
TIME: Monday 11:00:21
PLEASE READ REVERSE

University of Iowa,
Parking Services Office
100 WCTC
Iowa City, IA 52242
(319) 335-1475

INVOICE

VAN METER INC.
470 Ruppert Road
IOWA CITY IA 52246
319-339-0000 Fax 319-339-1816

www.vanmeterinc.com

VAN METER
A 100% EMPLOYEE OWNED COMPANY

INVOICE DATE	OUR INVOICE NUMBER		
01/18/18	S010096552.001		
Bill To#	Ship To#	Price Br.	Ship Br.
1711	93038	7	7
PLEASE REMIT PAYMENT TO:		DUE DATE	
850 32ND AVENUE SW CEDAR RAPIDS IA 52404-3913		03/18/18	

BILL TO:

ADVANCED ELECTRICAL SERVICES
1233 GILBERT CT
IOWA CITY IA 52240-4510

SHIP TO:

ENROLLMENT TOKEN
SPZ LMS QFF

AES - #29306- UI MRF
1233 GILBERT CT
IOWA CITY IA 52240-4510

YOUR PO/ORDER #	ORDERED BY	JOB/RELEASE #	YOUR ACCOUNT MANAGER	
29306	TREVOR		Brad Meyers IC	
ORDER WRITER	SHIP VIA	TERMS	ORDER DATE	SHIP DATE
Carter Valentine IC 3727	**PK PICKUP	NET 60	01/18/18	01/18/18

ORDER QTY.	SHIP QTY.	DESCRIPTION	Unit Price/UM	Extension
1	1	COLEMAN 14880023-6 2FT 12/3 GFCI SJEOW YEL	22.052/E	22.05
1	1	P&S SS13 1G STN-STL BLNK PLT	1.040/E	1.04

WANT TO SAVE TIME?
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Contact Marie Anderson at manderson@vanmeterinc.com or 319-368-2828 for enrollment information.

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Visit the **Invoice Central** site - www.invoicecentral.com

Invoice is due by 03/18/18.

Invoice Questions?
Call Carter Valentine at
319-339-0000

01-18-2018 08:41:53 AM
S010096552.001

TREVOR

Confirmation of Delivery

Subtotal	**$23.09**
Shipping & Handling	
Sales Tax	**$0.00**
Amount Due	**$23.09**

All claims for shortages or errors must be made at once. Past due invoices may be subject to a 1.50% late charge. Our company does not manufacture the goods it sells and makes no express warranties thereon. It also disclaims all implied warranty of merchantability or fitness for a particular use. Except as prohibited by law, you are responsible for payment of all fees, costs, and expenses, including but not limited to, attorney fees, expert witness fees, and deposition expenses incurred to collect all amounts due from you. We accept credit card payments for immediate pay only and our credit terms are NET.

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INVOICE

VAN METER INC.
470 Ruppert Road
IOWA CITY IA 52246
319-339-0000 Fax 319-339-1816

www.vanmeterinc.com

VAN METER
A 100% EMPLOYEE-OWNED COMPANY

INVOICE DATE	OUR INVOICE NUMBER
01/18/18	S010097067.001

Bill To#	Ship To#	Price Br.	Ship Br.
1711	93038	7	7

PLEASE REMIT PAYMENT TO:	DUE DATE
850 32ND AVENUE SW CEDAR RAPIDS IA 52404-3913	03/18/18

BILL TO:

ADVANCED ELECTRICAL SERVICES
1233 GILBERT CT
IOWA CITY IA 52240-4510

SHIP TO:

ENROLLMENT TOKEN
SPZ LMS QFF

AES - #29306- UI MRF
1233 GILBERT CT
IOWA CITY IA 52240-4510

YOUR PO/ORDER #	ORDERED BY	JOB/RELEASE #	YOUR ACCOUNT MANAGER
29306	TREVOR		Brad Meyers IC

ORDER WRITER	SHIP VIA	TERMS	ORDER DATE	SHIP DATE
Carter Valentine IC 3727	**PK PICKUP	NET 60	01/18/18	01/18/18

ORDER QTY.	SHIP QTY.	DESCRIPTION	Unit Price/UM	Extension
3	3	P&S 8300-I 20A/125V HOSP GR DPLX	10.545/E	31.64
2	2	ADV ICN2P32N35I ELE BALLAST (2) F32T8 120-277V	10.444/E	20.89

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Visit the **Invoice Central** site - www.invoicecentral.com

Invoice is due by 03/18/18.

Invoice Questions?
Call Carter Valentine at
319-339-0000

01-18-2018 10:44:35 AM
S010097067.001

Trevor

TREVOR

Subtotal	**$52.53**
Shipping & Handling	
Sales Tax	**$0.00**
Amount Due	**$52.53**

All claims for shortages or errors must be made at once. Past due invoices may be subject to a 1.50% late charge. Our company does not manufacture the goods it sells and makes no express warranties thereon. It also disclaims all implied warranty of merchantability or fitness for a particular use. Except as prohibited by law, you are responsible for payment of all fees, costs, and expenses, including but not limited to, attorney fees, expert witness fees, and deposition expenses incurred to collect all amounts due from you. We accept credit card payments for immediate pay only and our credit terms are NET.

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For complete terms and conditions as well as EEO Compliance regulations please go to https://www.vanmeterinc.com/terms-conditions.html

Confirmation of Delivery

29306

Orscheln Farm and Home
655 Hollywood Blvd
Iowa City,I52240
319-351-1121

ORSCHELN FARM & HOME CAREERS
Training-Advancement-Opportunity
Family Values
Visit us at www.orschelnfarmhome.com

QTY	ITEM	PRICE	TOTAL
1	101359177	$9.99	$9.99T
	CONCRETE VINYL PATCHER		

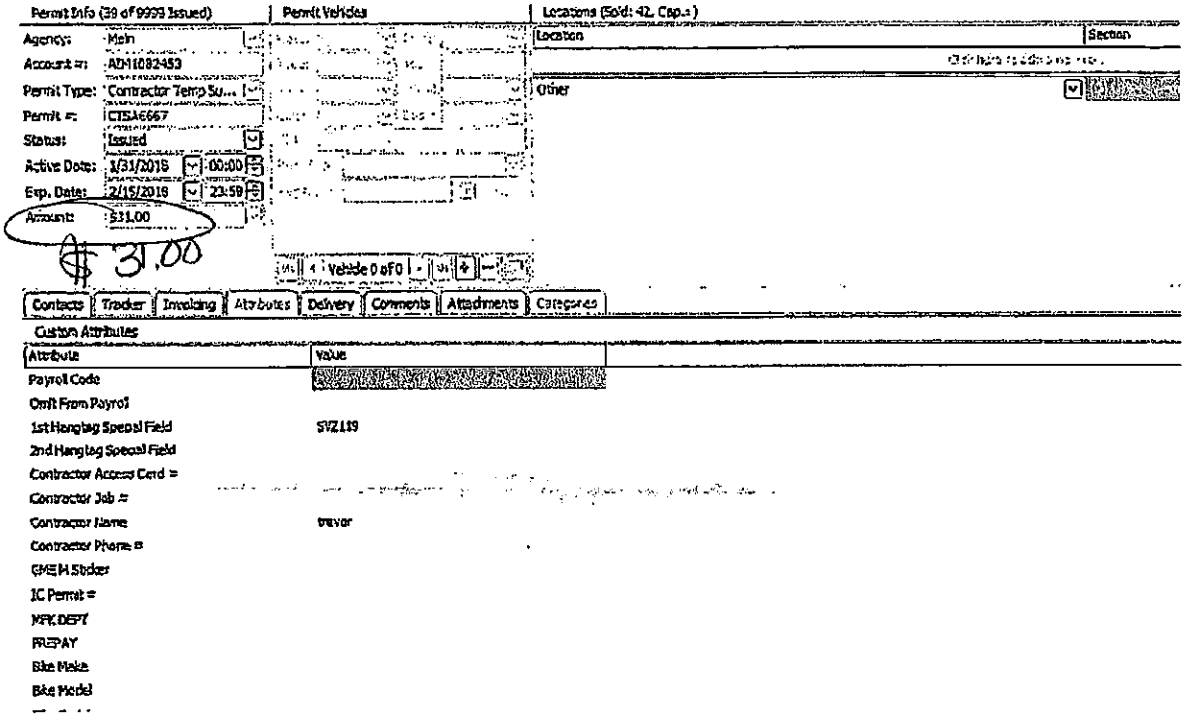
Sub Total	$9.99
Tax @ 6.0000%	$0.60
Total	$10.59
Visa	$10.59
Acct# **********0	
Auth# 498131	

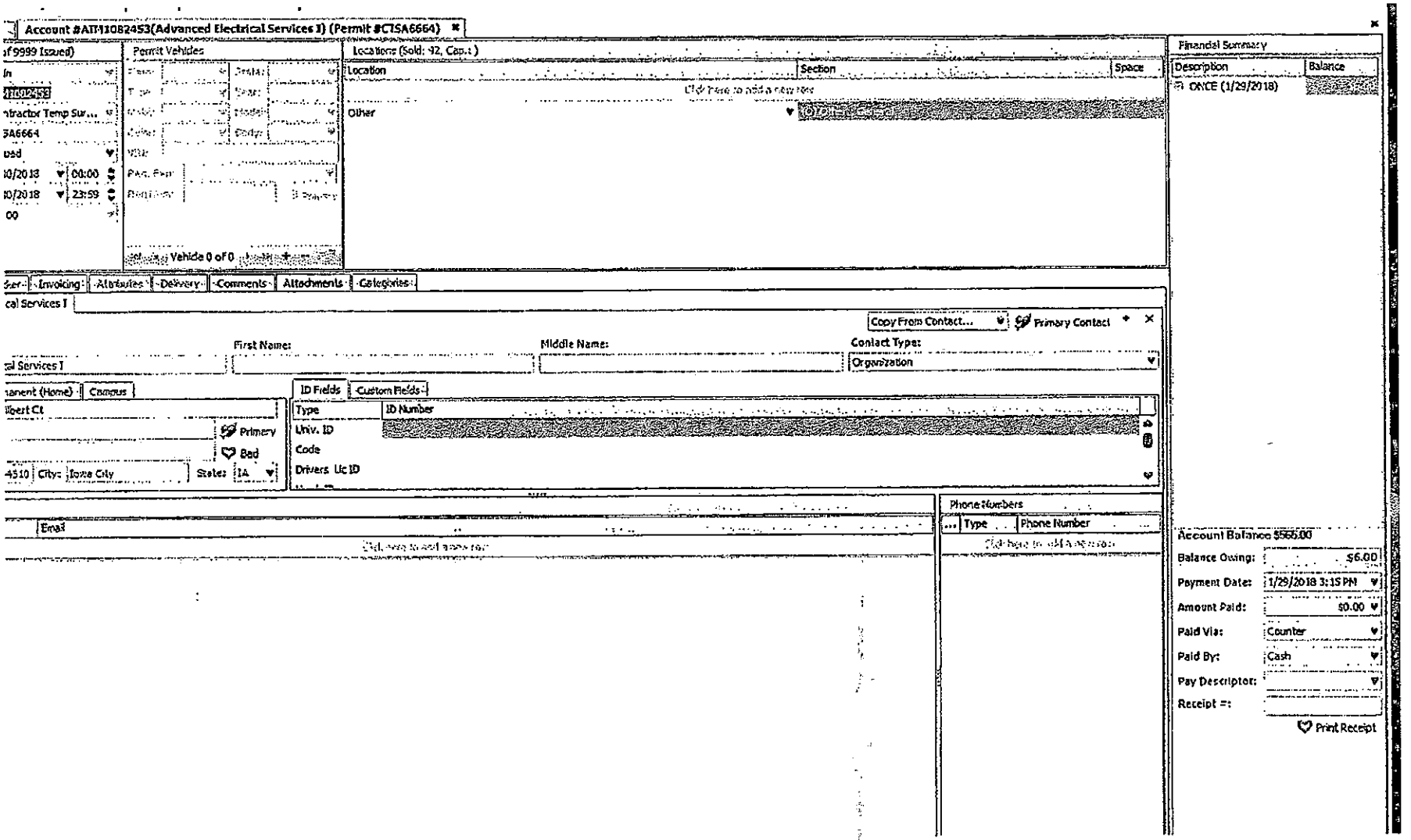
Thank You for Shopping ORSCHELN!
Sales Associate: Clayton

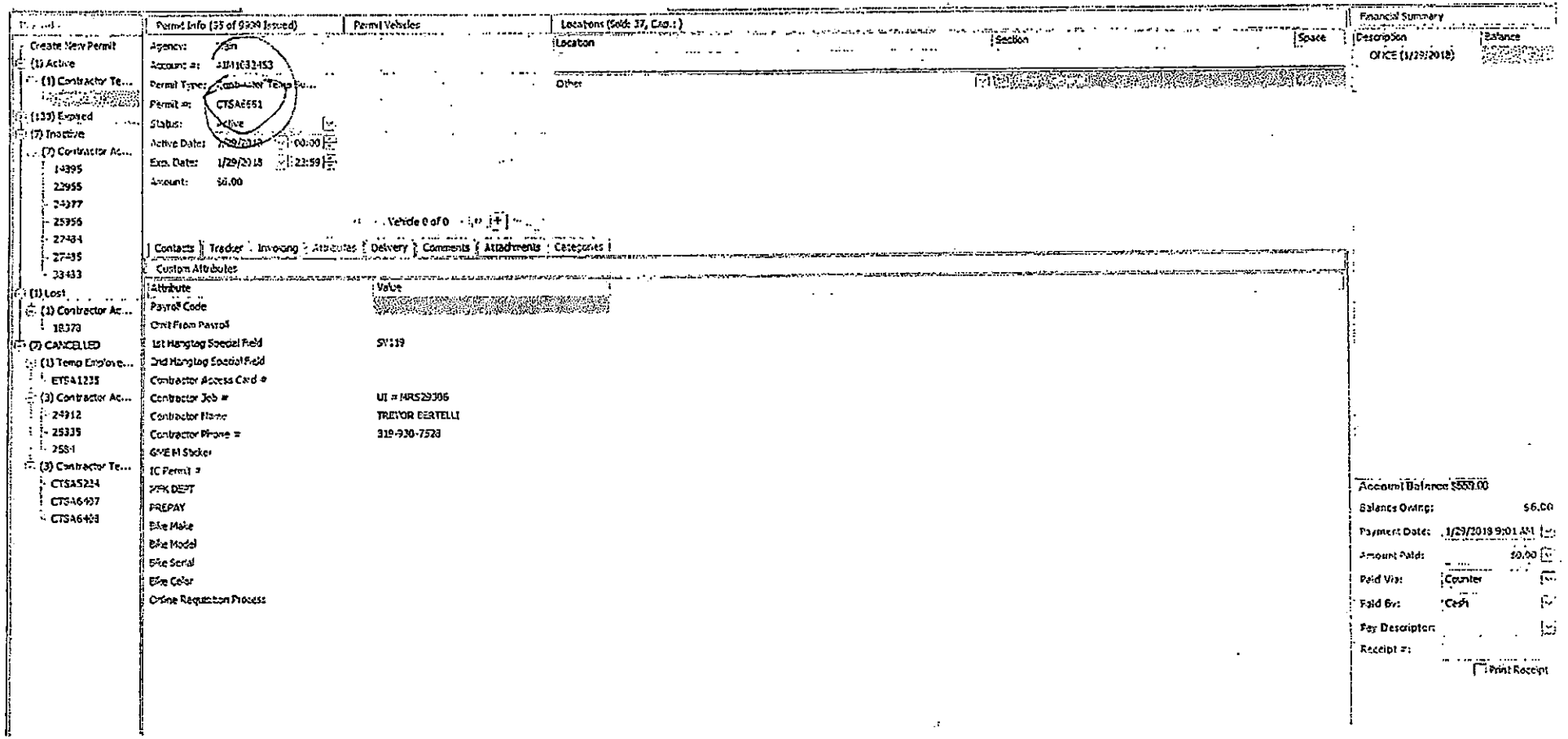
Trx 8175 Str 90 02 Reg 2/02/18 13:23

ENJOY $5 OFF
your next purchase of $25 or greater!
Visit tellofh.sms.com
in the next 3 days & tell us about
your experience.
Bring back this receipt with
validation code to redeem offer
in the next 30 days.
Validation code: _____

26B Invoice - Page 57 of 83




Account #AIT1082453(Advanced Electrical Services I) (Permit #CTSA6664)
Permit Vehicles
Vehicle 0 of 0
Location
Section
Space
Other
Financial Summary
Description
Balance
ONCE (1/29/2018)
Invoicing
Attributes
Delivery
Comments
Attachments
Categories
Copy From Contact...
Primary Contact
First Name:
Middle Name:
Contact Type:
Organization
ID Fields
Custom Fields
Type
ID Number
Univ. ID
Code
Drivers Lic ID
Primary
Bad
City:
State:
Email
Phone Numbers
Type
Phone Number
Account Balance $566.00
Balance Owing:
$6.00
Payment Date:
1/29/2018 3:15 PM
Amount Paid:
$0.00
Paid Via:
Counter
Paid By:
Cash
Pay Descriptor:
Receipt #:
Print Receipt


Create New Permit
(1) Active
(1) Contractor Te...
(133) Expired
(7) Inactive
(7) Contractor Ac...
14395
22955
24377
25956
27484
27485
33433
(1) Lost
(1) Contractor Ac...
18378
(7) CANCELLED
(1) Temp Employe...
ETSA1235
(3) Contractor Ac...
24912
25335
2551
(3) Contractor Te...
CTSA5224
CTSA6407
CTSA6408
Permit Info (55 of 9309 Issued)
Permit Vehicles
Locations (Sold: 37, Cap.:)
Agency:
Account #:
Permit Type:
Permit #:
CTSAE551
Status:
Active
Active Date:
Exp. Date:
1/29/2018
23:59
Amount:
$6.00
Location
Section
Space
Other
Vehicle 0 of 0
Contacts
Tracker
Invoicing
Attributes
Delivery
Comments
Attachments
Categories
Custom Attributes
Attribute
Value
Payroll Code
Omit From Payroll
1st Hangtag Special Field
SV119
2nd Hangtag Special Field
Contractor Access Card #
Contractor Job #
UI # MRS29306
Contractor Name
TREVOR BERTELLI
Contractor Phone #
319-930-7523
GVEM Sticker
IC Permit #
PPK DEPT
PREPAY
Bike Make
Bike Model
Bike Serial
Bike Color
Online Requisition Process
Financial Summary
Description
Balance
OFFICE (1/29/2018)
Account Balance $559.00
Balance Owing:
$6.00
Payment Date:
1/29/2018 9:01 AM
Amount Paid:
$0.00
Paid Via:
Counter
Paid By:
Cash
Pay Description
Receipt #:
Print Receipt

Posted Items Report

Job Number: 29306 Desc: REPAIR FLOOD DAMAGE AS DIRECTED Customer: WOODRUFF CONSTRUCTION
Material Items Sorted by Page Number

Page	Date	Invoice	Item #	Desc	Qty	UCost	ECost	Markup	UPrice	Charge	MC	Inv	PO
1	2018 01/16	55623		AP S010086389.001 THE VAN METER COMPANY	1.00	194.89	194.89	.150000	224.12	224.12			
1	2018 01/18	55623		HMO1882 PARKING & TRANSPORTATION	1.00	44.00	44.00	.150000	50.60	50.60			
1	2018 01/22	55623		AP S010098503.001 THE VAN METER COMPANY	1.00	5.57	5.57	.150000	6.41	6.41			
1	2018 01/22	55623		AP S010097067.002 THE VAN METER COMPANY	1.00	-21.09	-21.09	.150000	-24.25	-24.25			
1	2018 01/22	55623		AP S010099270.001 THE VAN METER COMPANY	1.00	1.63	1.63	.150000	1.87	1.87			
1	2018 01/22	55623		AP 5312228-00 3E-CITY ELECTRIC SUPPLY INC	1.00	3.30	3.30	.150000	3.80	3.80			
1	2018 01/22	55623	900972	LAMP DISPOSAL	12.00	.75	9.00	.150000	.86	10.32			
1	2018 01/22	55623	900971	BALLAST DISPOSAL	6.00	3.00	18.00	.150000	3.45	20.70			
1	2018 01/31	55623		AP 182000874 PARKING & TRANSPORTATION	1.00	25.00	25.00	.150000	28.75	28.75			
1	2018 01/31	55623		AP S010098552.001 THE VAN METER COMPANY	1.00	23.09	23.09	.150000	26.55	26.55			
1	2018 01/31	55623		AP S010097067.001 THE VAN METER COMPANY	1.00	52.53	52.53	.150000	60.41	60.41			
1	2018 01/31	55623		ORSCHELN'S 02/02/18	1.00	10.59	10.59	.150000	12.18	12.18			
1	2018 01/31	55623		AP CTSA6667 PARKING & TRANSPORTATION	1.00	31.00	31.00	.150000	35.65	35.65			
1	2018 01/31	55623		CTSA6661 PARKING & TRANSPORTATION	1.00	6.00	6.00	.150000	6.90	6.90			
1	2018 01/31	55623		CTSA6664 PARKING & TRANSPORTATION	1.00	6.00	6.00	.150000	6.90	6.90			
				Totals:	**31.00**	**386.26**	**409.51**		**444.20**	**470.91**			

Posted Items Report

AE labor cost summary

02/12/2018
Page: 1

Job Number: 29306 Desc: REPAIR FLOOD DAMAGE AS DIRECTED Customer: WOODRUFF CONSTRUCTION

Labor Items Sorted by Page Number

Page	Date	Invoice	WorkerId	Name	StHrs	OtHrs	DtHrs	TotHrs	UCost	ExtCost	Price	Charge	WT
1	01/09/2018		TREVOR	TREVOR BERTELLI	.50	.00	.00	.50	.00	.00	.00	30.00	10
1	01/09/2018		JAKE	JAKE MOORE	1.50	.00	.00	1.50	.00	.00	.00	90.00	8
1	01/17/2018		TREVOR	TREVOR BERTELLI	3.00	.00	.00	3.00	.00	.00	.00	180.00	10
1	01/18/2018		TREVOR	TREVOR BERTELLI	8.00	.00	.00	8.00	.00	.00	.00	480.00	10
1	01/19/2018		TREVOR	TREVOR BERTELLI	8.00	.00	.00	8.00	.00	.00	.00	480.00	10
1	01/19/2018		TREVOR	TREVOR BERTELLI	.00	1.00	.00	1.00	.00	.00	.00	90.00	10
1	01/29/2018		TREVOR	TREVOR BERTELLI	8.00	.00	.00	8.00	.00	.00	.00	480.00	10
1	01/30/2018		TREVOR	TREVOR BERTELLI	8.00	.00	.00	8.00	.00	.00	.00	480.00	10
1	01/31/2018		TREVOR	TREVOR BERTELLI	7.00	.00	.00	7.00	.00	.00	.00	420.00	10
1	02/01/2018		TREVOR	TREVOR BERTELLI	8.00	.00	.00	8.00	.00	.00	.00	480.00	10
1	02/02/2018		TREVOR	TREVOR BERTELLI	8.00	.00	.00	8.00	.00	.00	.00	480.00	10
				Totals:	60.00	1.00	.00	61.00	.00	.00	.00	3690.00	

AE Labor Hour Tickets

THE UNIVERSITY OF IOWA

FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 1/9/18

Subcontractor ADVANCED ELECTRICAL Change Order Request No _____

Project Name M.R.F. WATER DAMAGE REPAIR Project Number #0744901

Description of Work INITIAL TRIP TO LOOK OVER REPLACEMENT ISSUES & MATERIALS

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
BERTELLI	ELEC.		1.5	~~0~~					
MOORE	ELEC.		1.5	~~0~~					

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W27023/4-17

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 *Fax* 319-335-2722

THE UNIVERSITY OF IOWA

FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 1/17/18

Subcontractor ADVANCED ELECTRICAL SERVICES Change Order Request No _____

Project Name NRF WATER DAMAGE REPAIR Project Number 0744901

Description of Work STAGING, PREPPING FOR JOB

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
TREVOR BERTELL	ELEC.		3	Ø					

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W27323/4-17

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 *Fax* 319-335-2722

THE UNIVERSITY OF IOWA

FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 1/18/18

Subcontractor ADVANCED ELECTRICAL SERVICES Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number 0744901

Description of Work REPAIR & CHANGE OUT OUTLETS. CHANGED OUT 1 LIGHT FIXTURE

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
BERTELL	ELEC.		8	0					

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W27323/4-17

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722

THE UNIVERSITY OF IOWA

FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO.

Subcontractor ADVANCED ELECTRICAL

Project Name MRF WATER DAMAGE REPAIR

Description of Work FIXTURES ON 4TH & 5TH. BLANKED OFF BOXES ABOVE CEILING. CHECKED ABOVE CEILING FOR OTHER DAMAGE

Date Work Performed 1/19/18

Change Order Request No _____

Project Number #0744901

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
BERTELL	ELEC.		8	0					

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W27323/4-17

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722

THE UNIVERSITY OF IOWA

FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 1/29/18

Subcontractor ADVANCED ELECTRICAL Change Order Request No _____

Project Name MEF WATER DAMAGE REPAIR Project Number #0744901

Description of Work WORKED ON DISCONNECTS OF CEILING DEVICES TO REPLACE TILE IN ALL ELEVATOR CORRIDORS

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
BERTELL	ELEC		8	8					

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W27323/4-17

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Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722

THE UNIVERSITY OF IOWA

FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 1/30/18

Subcontractor ADVANCED ELECTRICAL Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number #0744901

Description of Work TREVOR WORKED ALONG SIDE WOODRUFF TO DISCONNECT CEILING FIXTURES SO WE COULD REPLACE CEILING TILES.

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
BERTELL	ELEC		8	⊘					

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W27323/4-17

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 *Fax* 319-335-2722

THE UNIVERSITY OF IOWA

FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 1/31/18

Subcontractor ADVANCED ELECTRICAL Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number #0744901

Description of Work BERTELLI / WORK W/ WOODROOF ON CEILING FIXTURES TO REPLACE CEILING TILES. ALSO WORKING IN ELEVATOR PIT, PREPPING FOR TOMORROW.

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
BERTELLI			7	0					

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W27323/4-17

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722

THE UNIVERSITY OF IOWA

FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 2/1/18

Subcontractor ADVANCED ELECTRICAL Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number #0744901

Description of Work BERTELLI / Pick up Material, Start LL Elevator Pathway, Drilled thru thru Shaft, lay out brackets =

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
BERTELLI	ELEC.		8	⊘					

Equipment and Material (attach invoices)

Quantity	Description
10'	Strut
100'	EMT
	Misc Strut Brackets
	Bolts
	Nuts
	Washers
	Electrical Boxes

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W27323/4-17

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722

THE UNIVERSITY OF IOWA

FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 2/2/18

Subcontractor ADVANCED ELECTRICAL Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number #0744901

Description of Work Install Wall Brackets & Start running Pipe From Panel

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
BERTELL	ELEC		8	0					

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W27323/4-17

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722

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AAA MECHANICAL CONTRACTORS INC.
PLUMBING | HEATING | AIR CONDITIONING | REFRIGERATION
P.O. Box 805 | Iowa City, IA 52244
ph. 319-351-1843 | fax 319-351-0747
www.aaamech.com

February 13, 2018

Woodruff Construction, LLC
Attn: Leon Zhang
1890 Kountry Lane
Fort Dodge, Iowa 50501

RE: MRF Water Damage – Pay Application Summary

SUBJ: Pay App

Leon,

For all the work from period 1/10 – 2/9, 2018. The total amount is $2,952.06. Labor and cost documents are enclosed for review.

If you require additional clarification, please contact me.

Sincerely,

Jeff Koeppel
President

AAA Mechanical Contractors, Inc.

P O Box 805
Iowa City, IA 52244
Phone: 319-351-1843 Fax: 319-351-0747

Invoice #: TM11263
Invoice Date: 02/13/18

Bill To:

Woodruff Construction, LLC
1890 Kountry Lane
Fort Dodge, Iowa 50501

Work Location:

The University of Iowa
MRF

Date	Your Order #	Your P. O. #	Call In By:	Terms
02/13/2018				Net 30

Product: MRF Water Damage

7 hrs. @ $76.89 Foreman Greg Murphy = $538.23
Material Cost $1,083.60 x 15% OHP = $1,246.14 + $75.00 freight
Subcontractor QCI Thermal Cost $290.37 x 5% OHP = $304.89

*QCI performed work for both projects. Cost is split 50/50 for the two projects

Alternate #1-Repair Piping on 5th Floor and Re-insulate

4.5 hrs. @ $76.89 Foreman Greg Murphy = $346.01
Material Cost $119.04 x 15% OHP = $136.90
Subcontractor QCI Thermal Cost $290.37 x 5% OHP = $304.89

Quantity	Description	Unit Price	Total

LABOR	$884.24
MATERIAL	$1,383.04
FREIGHT	$75.00
SUBCONTRACTOR	$609.78
Balance Due	**$2,952.06**

includes 15% mark-up of $580.74

THE UNIVERSITY OF IOWA

FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 8-26-18

Subcontractor TRIPLE AAA MECHANICAL Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number #0744901

Description of Work REPLACE DRINKING FOUNTAINS 4TH & 5TH FLOORS

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
Greg Murphy	Plumber		7						

Equipment and Material (attach invoices)

Quantity	Description
	PLEASE PROVIDE DRINKING FOUNTAIN INVOICES AS BACK UP.

Subcontractor's Representative (if applicable) Greg D Murphy

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W27323/4-17

200 University Services Building
Iowa City, Iowa 52242
319-335-6500 Fax 319-335-2722

THE UNIVERSITY OF IOWA

FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 1/30/18

Subcontractor TRIPLE AAA MECHANICAL Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number #0744901

Description of Work FIXED HOT WATER HEATING PIPE WHERE IT ORIGINALLY FAILED & CAUSED ALL WATER DAMAGE, REQUIRED HEATING HOT WATER SHUTDOWN

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
GREG MURPHY	FITTER		4.5	8					

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (If applicable) Greg D Murphy

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W27323/4-17

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722

AAA MECHANICAL CONTRACTORS, INC.
COMMERCIAL • INDUSTRIAL • INSTITUTIONAL

EMPLOYEE NAME Greg Murphy TM JOB NO. 1,1,2,6,3

EMPLOYEE I.D. (OFFICE USE) 3440 JOB NAME MRS

THURSDAY		FRIDAY		SATURDAY		SUNDAY		MONDAY		TUESDAY		WEDNESDAY		WEEK ENDING 1-31-18	CLASS TOTAL		
REGULAR	O.T.	REGULAR	O.T.	O.T.	D.T.	O.T.	D.T.	REGULAR	O.T.	REGULAR	O.T.	REGULAR	O.T.		REGULAR	O.T.	D.T.
														101 WATERMAIN			
														102 UTILITIES			
														103 UNDERGROUND SANITARY			
														104 UNDERGROUND STORM			
														105 ABOVE WASTE & VENT			
														106 ABOVE STORM			
														107 ACID WASTE			
														108 DOMESTIC WATER			
														109 STEAM & CONDENSATE			
										4.5				110 HOT WATER	4.5		
														111 CHILLED WATER			
														112 GAS			
														113 REFRIGERATION			
		7												114 PLUMBING FIXTURES	7		
														115 HVAC EQUIPMENT			
														116 DEMOLITION			
														117 CORE DRILLING			
														118 MEDICAL GAS			
														119 AIR PIPING			
														120			
														121			
														122			
														123			
														124			
														125			
														126			
														127			
														128			
														129			
														130 SHOP LABOR			
														131 UTILITY LABOR			
														TOTAL HOURS WORKED	11.5		

15 4.5

Notes:

Material receipt for water damage project

FERGUSON ENTERPRISES, INC.

4625 6TH ST SW
CEDAR RAPIDS, IA 52404-0000

Please contact with Questions: 319-393-5660

RECEIVED JAN 2 5 2018

INVOICE NUMBER	TOTAL DUE	CUSTOMER	PAGE
5420319	$1,223.62	120344	1 of 1

PLEASE REFER TO INVOICE NUMBER WHEN MAKING PAYMENT AND REMIT TO:

FERGUSON ENTERPRISES INC #1657
PO BOX 802817
CHICAGO, IL 60680-2817

AAA MECHANICAL CONTRACTORS INC
PO BOX 805
CORALVILLE, IA 52241

SHIP TO

AAA MECHANICAL CONTRACTORS INC
832 QUARRY ROAD
—SHOP—
CORALVILLE, IA 52241

SHIP WHSE.	SELL WHSE.	TAX CODE	CUSTOMER ORDER NUMBER	SALESMAN	JOB NAME	INVOICE DATE	BATCH ID
520	520	IA52CO	TM11263	520	Uofi ERF BUILDING	01/18/18	187513

ORDERED	SHIPPED	ITEM NUMBER	DESCRIPTION	UNIT PRICE	UOM	AMOUNT
2	2	HHAC8SSNF	LF 8G CHILD ADA WTR COLR	541.800	EA	1083.60
		Serial #	170745640			
		Serial #	171126466			

INVOICE SUB-TOTAL 1083.60

This is what is charged

FREIGHT 75.00

TAX Coralville 65.02

LEAD LAW WARNING: IT IS ILLEGAL TO INSTALL PRODUCTS THAT ARE NOT "LEAD FREE" IN ACCORDANCE WITH US FEDERAL OR OTHER APPLICABLE LAW IN POTABLE WATER SYSTEMS ANTICIPATED FOR HUMAN CONSUMPTION. PRODUCTS WITH "NP" IN THE DESCRIPTION ARE NOT LEAD FREE AND CAN ONLY BE INSTALLED IN NON-POTABLE APPLICATIONS. BUYER IS SOLELY RESPONSIBLE FOR PRODUCT SELECTION.

ENTERED JAN 2 9 2018

JOB NO. TM11263
COST NO. OK

Looking for a more convenient way to pay your bill?

Log in to **Ferguson.com** and request access to Online Bill Pay.

TERMS: NET 10TH PROX ORIGINAL INVOICE TOTAL DUE $1,223.62

All past due amounts are subject to a service charge of 1.5% per month, or the maximum allowed by law, if lower. If Buyer fails to pay within terms, then in addition to other remedies, Buyer agrees to pay Seller all costs of collection, including reasonable attorney fees. Complete terms and conditions are available upon request or at http://wolseleyna.com/terms_conditionsSale.html and are incorporated by reference. Seller may convert checks to ACH.

Material receipt for
Alt #1

RECEIVED JAN 2 4 2018

INVOICE

SCHIMBERG CO.
1106 Shaver Road NE
Cedar Rapids, IA 52402
Ph: 319-365-9421 Toll Free: 800-728-9421
www.schimberg.com

Remit To: 1106 Shaver Road NE
Cedar Rapids, IA 52402
Ph: 319-365-9421 Toll Free: 800-728-9421
Omaha, NE 68127
Ph: 402-881-4300 Toll Free: 888-486-0010
Decatur, IL 62526
Ph: 217-877-2177 Toll Free: 866-977-2177
N Sioux City, SD 57049
Ph: 605-217-3835 Toll Free: 866-951-9907
Wichita, KS 67226
Ph: 316-630-0353 Toll Free: 844-487-5503

Order Date	Invoice Date	Invoice #
01/19/18	01/23/18	7695863-00
Cust Req #		PO #
118		TM11263
Sold By		Taken By
GREG M		Russ Blood

Bill To	Ship To
AAA MECHANICAL CONTRACTORS INC PO BOX 805 IOWA CITY, IA 52240	AAA MECHANICAL CONTRACTORS 832 QUARRY RD ATTN GREG MURPHY CORALVILLE, IA 52241

EMAIL: khutchins@aaamech.com

Terms	Ship From	Ship Via	Shipped	FL Jurisdiction
2%10THPR N30	SCHIMBERG CEDAR RAPIDS	S CO TRUCK	01/22/18	US,IA,JOHNSON

Line #	Product And Description	Quantity Ordered	Quantity Shipped	Quantity B/O	Qty U/M	Unit Price	Ext. Price
1	13160000294 IBMI CPLG 2-1/2X2	1	1	0	EACH	9.67	9.67
2	31100001001 NIP S80 BLK 2-1/2XCLOSE	1	1	0	EACH	9.26	9.26
3	31100000901 NIP S80 BLK 2XCLOSE	2	2	0	EACH	3.03	6.06
4	31100000904 NIP S80 BLK 2X2-1/2"	2	2	0	EACH	3.41	6.82
5	40804750200 MIL 475B BR FP TXT BL VL 2 BALL VALVE THREADED BRASS BODY, CHROME PLATED BALL, TEFLON SEATS,300# FULL PORT LEVER HANDLE	1	1	0	EACH	42.78	42.78
6	61063300200 RB UNION 2	1	1	0	EACH	33.31	33.31

6 Lines Total

Total 107.90
Taxes 6.47
Invoice Total 114.37

This amount is charged

PO NO TM11263
CODE NO OK

ENTERED JAN 2 9 2018

SALESPERSON CONTACT INFORMATION
Russ Blood
rblood@schimberg.com

Terms Discount 2.16 If Paid By 02/10/18

Product Warranty: Published warranty of manufacturer only, no other warranty or liability assumed by this supplier.

ALL ACCOUNTS ARE SUBJECT TO A FINANCE CHARGE OF 1 1/2% PER MONTH, OR 18% PER ANNUM, WHEN 30 DAYS OR MORE PAST DUE. MINIMUM FINANCE CHARGE OR $.50 PER MONTH

YOU MUST OBTAIN PERMISSION BEFORE RETURNING MERCHANDISE
RETURNED MERCHANDISE IS SUBJECT TO A HANDLING CHARGE

Customer Copy

Material receipt for
Alt #1

Plumb Supply Company — Riback Supply Company
Two Great Traditions Combined

RECEIVED JAN 3 0 2018

PAGE NO.	1
INVOICE NO.	5045053
INVOICE DATE	1/30/18
PACKING SLIP NO.	5045053
CUSTOMER NO.	204094
WAREHOUSE	017

REMIT TO:
PLUMB SUPPLY COMPANY - IC
PO Box 310578
DES MOINES, IA 50331-0578

SHIP FROM:
PLUMB SUPPLY COMPANY - IC
1925 BOYRUM STREET
IOWA CITY, IA 52240
Telephone: 319-351-1004

SOLD TO:
AAA MECHANICAL CONTRACTORS INC
P O BOX 805
IOWA CITY, IA 52244

SHIP TO:
Customer Pickup

CUSTOMER P.O. NUMBER	JOB NAME	JOB NO.	SLS	DUE DATE	SHIP DATE	SHIPPING METHOD
TM11263	MURPH		PTY	2/20/18	1/26/18	Pickup

LINE	PRODUCT NO./DESCRIPTION	U/M	QTY	UNIT PRICE	EXTENDED AMOUNT
1	DB791BD1 791BD-1 1-1/4X16 22GA DBL SJ EXT DEARBORN(791BD-1) WATTS(759253)	EA	1	11.1413	11.14
	Payment of Due On If Paid By You Owe				
	5045053 11.81 2/20/18 2/15/18 11.59	Your	Discount	Amount is	.22

INVOICE

ENTERED FEB 0 2 2018

JOB NO. TM11263
CODE NO. OK

This amount is charged

When you provide a check as payment, you authorize Plumb Supply Company to use information from your check to make a one-time electronic fund transfer from your account or to process the payment as a check transaction. When we use information from your check to make an electronic fund transfer, funds may be withdrawn from your account as soon as the same day we receive your payment, and you will not receive your check back from your financial institution.

Amount	11.14
Tax Amt	.67
Freight	.00
Other Chg	.00
TOTAL DUE	11.81

THE UNIVERSITY OF IOWA

FACILITIES MANAGEMENT
Planning, Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor Woodruff

Date Work Performed 2/16/18

Subcontractor QCI Thermal Systems Inc.

Change Order Request No _____

Project Name _____

Project Number #0744901

Description of Work Duct insulation on 2nd Flr & Pipe insulation on 5th Flr

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
Gabe Meyers	Insul	F	4						

Equipment and Material (attach invoices)

Quantity	Description
3'	2"x1 ASJ/SSL Fiberglass
3'	3x1 " "
3'	4x1 " "
1	#10 90'
1	Foil Tape
1	1½" 1# Ductwrap

Subcontractor's Representative (if applicable) Jon J Graves

General Contractor's Representative _____

Owner's Representative (Required) daniel cady

White=Contractor Copy
Yellow=Owner Copy
April, 2007

66330/7-14

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722

Stock material used by QCI

Project: MRF Flood Repairs

ITC #1 Chilled Water

Quantity	Description	UM	Cost	Extension
3	2-1/8 X 1 fiberglass	LF	$ 3.15	$ 9.45
3	3 X 1 fiberglass	LF	$ 3.93	$ 11.79
3	4 X 1 fiberglass	LF	$ 5.19	$ 15.57
1	#10 zeston 90	EA	$ 2.85	$ 2.85
1	foil tape	RL	$ 21.25	$ 21.25
1	1-1/2 1# duct wrap	RL	$ 236.00	$ 236.00
				$ -
				$ -
				$ -
				$ -
				$ -
				$ -
				$ -
				$ -
				$ -
				$ -
				$ -
				$ -
				$ 296.91

26B Invoice - Page 83 of 83

3539 Dolphin Drive SE
Iowa City, Iowa 52240

Phone: 319-354-2938
Fax: 319-354-0560

C. O. #

JOB # 1825005

CHANGE ORDER BREAKDOWN

PROJECT: MRF Flood Repairs

DATE: 2/12/2018

DESCRIPTION OF WORK: Duct on 2nd floor - Pipe on 5th floor
Work performed on 2/6/18
AAA # TM 11263

COST SUMMARY:

TOTAL MATERIAL			=	$ 296.91
LABOR:	4 HRS @	51.44	=	$ 205.76
EQUIPMENT RENTAL			=	
FINANCE COST			=	
CLEAN-UP DEBRIS/REMOVAL			=	
BLUE PRINTING, REPRODUCTION			=	
EXTENDED SITE OVERHEAD COSTS			=	
ADMINISTRATIVE COSTS ATTRIBUTED TO CHANGE			=	
SMALL TOOLS			=	
DELIVERY, SHIPPING			=	
	SUB-TOTAL		=	$ 502.67
+6% SALES TAX	non-taxable →		=	$ ~~17.81~~
	SUB-TOTAL		=	$ 520.48
+15 % OVERHEAD			=	$ 78.07
	SUB-TOTAL		=	$ 598.55
10 % PROFIT			=	$ -
	SUB-TOTAL		=	
+_____% PERFORMANCE BOND			=	
	SUB-TOTAL		=	
	TOTAL CHANGE ORDER		=	$ 598.55

- 17.81

$ 580.74

AP/PO PeopleSoft Web Applications

Your path: Home > Payment

User options | Help

Payment details for voucher: 82861443

Voucher ID	Vendor ID	Remit LOC	Vendor Name	Gross Voucher Amt.	Payment Handling Code
82861443	0000515030	002	Woodruff Constuction LLC	$37,953.36	AC

Payment Status	Payment Information	Invoice #	Invoice Date	Remit to	Amt From Voucher
PAID	ACH:559727 Dt: 03/06/2018 Amt: $37,953.36	0744901-001	02/27/2018	Detail	$37,953.36

New Payment Search
AP-PO Web Applications Home Page
Self-Service

(WALTERSC) Logoff

Accounts Payable / Purchasing is a department in the Finance and Operations organization.
Copyright © The University of Iowa. All rights reserved.

Please direct inquires regarding using this application to acntpay@uiowa.edu

THE UNIVERSITY OF IOWA

CONTRACTOR PAY APPLICATION REQUEST

Application/Invoice Date: 03/26/2018
Application No.: 002-R003
Invoice No.: 0744901-002
Contract #: CT8279
Payment terms: Net Zero

Line 1 = $ 79,174.06
Line 2 = $ 0

To:
University of Iowa
Design & Construction
200 USB
Iowa City, IA 52242

From Contractor:
Woodruff Construction, LLC
1890 Kountry Lane
Fort Dodge, IA 50501

Project Title and Number:
Medical Research Facility - Emergency Pipe Repair and Remediation
Project # 0744901

PAY APPLICATION PERIOD FROM: 02/03/2018 **TO:** 03/02/2018

1. ORIGINAL CONTRACT SUM:			$ 379,000.00	
Change Orders Summary	ADDITIONS	DEDUCTIONS		
Total changes approved in previous months by Owner	0.00	0.00		
Total approved this month	0.00	0.00		
TOTALS	0.00	0.00		
2. NET CHANGE BY CHANGE ORDERS:			$ 0.00	
3. CONTRACT SUM TO DATE: (Line 1 + 2)			$ 379,000.00	
4. TOTAL COMPLETED & STORED TO DATE:			$ 117,127.42	(31%)
5. RETAINAGE: (Completed Word & Stored Material)			$ 0.00	
6. TOTAL EARNED LESS RETAINANGE: (Line 4 less Line 5 Total)			$ 117,127.42	
7. LESS PREVIOUS CERTIFICATES FOR PAYMENT: (Line 6 from prior Certificate)			$ 37,953.36	
8. CURRENT PAYMENT DUE:			**$ 79,174.06**	
9. BALANCE TO FINISH, INCLUDING RETAINAGE: (Line 3 less Line 6)			$ 261,872.58	

GROUP 228155
82880510

Line 1 = $ 79,174.06
Line 2 = $ 0

3/29/18

FACILITIES MANAGEMENT
Design & Construction

WOODRUFF CONSTRUCTION, LLC

1890 Kountry Lane
Fort Dodge, Iowa 50501
Phone (515) 576-1118 Fax (515) 955-2170

501 Greenfield Drive
Tiffin, Iowa 52340
Phone (319) 545-2410 Fax (319) 545-2411

3/5/2018

Danial Cassidy
UI-FM – D&C.

RE: MRF Water Damage – Pay Application Summary

SUBJ: **Pay App - 002**

Dan,

For all the work from period 2/5/2018 to 3/2/2018The total amount is $79,174.06 . Labor and material cost documents are enclosed for review.

If you require additional clarification, please contact me. Thank you for your prompt response.

Sincerely,
WOODRUFF CONSTRUCTION, LLC

Leon Zhang
Assistant Project Manager

27B Invoice - Page 3 of 100

WCC LABOR COST

COST ANALYSIS **MRF Water Damage T&M**

Period: 2/5/2018 to 3/2/2018
Pay App - 02

TOTAL WOODRUFF LABOR COST		= $	40,156.50
TOTAL WOODRUFF MATERIAL COST		= $	1,586.77
	SUBTOTAL	= $	41,743.27
plus OH&P @	15% = $ 6,261	= $	48,004.76

TOTAL SUBCONTRACT COST		= $	29,685.05
plus OH&P @	5% = $ 1,484.25	= $	31,169.30

TOTAL PRICE FOR THE PERIOD $ 79,174.06

COST ANALYSIS **MRF Water Damage T&M**

Pay App - 02 Period: 5-Feb-18 to 2-Mar-18

	LABOR CLASSIFICATION/ MATERIAL	QUANTITY	UNIT	UNIT LABOR	UNIT MAT'L	UNIT SUBCON	LABOR	MATERIAL	SUBCON	TOTAL
	WOODRUFF WORK									
	LABOR									
5-Feb	Mark Toth-Super	8	mh	$ 76.69			$ 613.52	$ -	$ -	$ 613.52
	Farmer	8	mh	$ 55.55			$ 444.40	$ -	$ -	$ 444.40
	Memurray	8	mh	$ 55.55			$ 444.40	$ -	$ -	$ 444.40
	Butterbaugh	8	mh	$ 55.55			$ 444.40	$ -	$ -	$ 444.40
	Gallegos	8	mh	$ 55.55			$ 444.40	$ -	$ -	$ 444.40

6-Feb	Mark Toth-Super	8	mh	$ 76.69			$ 613.52	$ -	$ -	$ 613.52
	Farmer	8	mh	$ 55.55			$ 444.40	$ -	$ -	$ 444.40
	Memurray	8	mh	$ 55.55			$ 444.40	$ -	$ -	$ 444.40
	Butterbaugh	8	mh	$ 55.55			$ 444.40	$ -	$ -	$ 444.40
	Gallegos	8	mh	$ 55.55			$ 444.40	$ -	$ -	$ 444.40
7-Feb	Mark Toth-Super	8	mh	$ 76.69			$ 613.52	$ -	$ -	$ 613.52
	Farmer	8	mh	$ 55.55			$ 444.40	$ -	$ -	$ 444.40
	Memurray	8	mh	$ 55.55			$ 444.40	$ -	$ -	$ 444.40
	Butterbaugh	8	mh	$ 55.55			$ 444.40	$ -	$ -	$ 444.40
	Gallegos	8	mh	$ 55.55			$ 444.40	$ -	$ -	$ 444.40
8-Feb	Mark Toth-Super	8	mh	$ 76.69			$ 613.52	$ -	$ -	$ 613.52
	Farmer	8	mh	$ 55.55			$ 444.40	$ -	$ -	$ 444.40
	Memurray	8	mh	$ 55.55			$ 444.40	$ -	$ -	$ 444.40
	Butterbaugh	8	mh	$ 55.55			$ 444.40	$ -	$ -	$ 444.40
	Gallegos	8	mh	$ 55.55			$ 444.40	$ -	$ -	$ 444.40
9-Feb	Mark Toth-Super	8	mh	$ 76.69			$ 613.52	$ -	$ -	$ 613.52
	Farmer	8	mh	$ 55.55			$ 444.40	$ -	$ -	$ 444.40
	Memurray	8	mh	$ 55.55			$ 444.40	$ -	$ -	$ 444.40
12-Feb	Mark Toth-Super	8	mh	$ 76.69			$ 613.52	$ -	$ -	$ 613.52
	Farmer	8	mh	$ 55.55			$ 444.40	$ -	$ -	$ 444.40
	Memurray	8	mh	$ 55.55			$ 444.40	$ -	$ -	$ 444.40
	Butterbaugh	8	mh	$ 55.55			$ 444.40	$ -	$ -	$ 444.40
	Gallegos	8	mh	$ 55.55			$ 444.40	$ -	$ -	$ 444.40
	Mendoza	8	mh	$ 55.55			$ 444.40	$ -	$ -	$ 444.40
13-Feb	Mark Toth-Super	8	mh	$ 76.69			$ 613.52	$ -	$ -	$ 613.52
	Farmer	8	mh	$ 55.55			$ 444.40	$ -	$ -	$ 444.40
	Memurray	8	mh	$ 55.55			$ 444.40	$ -	$ -	$ 444.40
	Butterbaugh	8	mh	$ 55.55			$ 444.40	$ -	$ -	$ 444.40
	Gallegos	8	mh	$ 55.55			$ 444.40	$ -	$ -	$ 444.40
	Mendoza	8	mh	$ 55.55			$ 444.40	$ -	$ -	$ 444.40
14-Feb	Mark Toth-Super	8	mh	$ 76.69			$ 613.52	$ -	$ -	$ 613.52
	Farmer	8	mh	$ 55.55			$ 444.40	$ -	$ -	$ 444.40
	Memurray	8	mh	$ 55.55			$ 444.40	$ -	$ -	$ 444.40
	Butterbaugh	8	mh	$ 55.55			$ 444.40	$ -	$ -	$ 444.40
	Gallegos	8	mh	$ 55.55			$ 444.40	$ -	$ -	$ 444.40
	Mendoza	8	mh	$ 55.55			$ 444.40	$ -	$ -	$ 444.40

15-Feb	Mark Toth-Super	8	mh	$ 76.69			$ 613.52	$ -	$ -	$ 613.52
	Farmer	8	mh	$ 55.55			$ 444.40	$ -	$ -	$ 444.40
	Memurray	8	mh	$ 55.55			$ 444.40	$ -	$ -	$ 444.40
	Butterbaugh	8	mh	$ 55.55			$ 444.40	$ -	$ -	$ 444.40
	Gallegos	8	mh	$ 55.55			$ 444.40	$ -	$ -	$ 444.40
	Mendoza	8	mh	$ 55.55			$ 444.40	$ -	$ -	$ 444.40
16-Feb	Mark Toth-Super	8	mh	$ 76.69			$ 613.52	$ -	$ -	$ 613.52
19-Feb	Mark Toth-Super	8	mh	$ 76.69			$ 613.52	$ -	$ -	$ 613.52
	Farmer	8	mh	$ 55.55			$ 444.40	$ -	$ -	$ 444.40
	Memurray	8	mh	$ 55.55			$ 444.40	$ -	$ -	$ 444.40
	Mendoza	5	mh	$ 55.55			$ 277.75	$ -	$ -	$ 277.75
20-Feb	Mark Toth-Super	8	mh	$ 76.69			$ 613.52	$ -	$ -	$ 613.52
	Farmer	8	mh	$ 55.55			$ 444.40	$ -	$ -	$ 444.40
	Memurray	8	mh	$ 55.55			$ 444.40	$ -	$ -	$ 444.40
	Mendoza	4.5	mh	$ 55.55			$ 249.98	$ -	$ -	$ 249.98
	Gallegos	4.5	mh	$ 55.55			$ 249.98	$ -	$ -	$ 249.98
21-Feb	Mark Toth-Super	8	mh	$ 76.69			$ 613.52	$ -	$ -	$ 613.52
	Farmer	8	mh	$ 55.55			$ 444.40	$ -	$ -	$ 444.40
	Memurray	8	mh	$ 55.55			$ 444.40	$ -	$ -	$ 444.40
22-Feb	Mark Toth-Super	8	mh	$ 76.69			$ 613.52	$ -	$ -	$ 613.52
	Farmer	8	mh	$ 55.55			$ 444.40	$ -	$ -	$ 444.40
	Memurray	8	mh	$ 55.55			$ 444.40	$ -	$ -	$ 444.40
23-Feb	Mark Toth-Super	8	mh	$ 76.69			$ 613.52	$ -	$ -	$ 613.52
	Farmer	8	mh	$ 55.55			$ 444.40	$ -	$ -	$ 444.40
	Memurray	8	mh	$ 55.55			$ 444.40	$ -	$ -	$ 444.40
26-Feb	Mark Toth-Super	8	mh	$ 76.69			$ 613.52	$ -	$ -	$ 613.52
	Farmer	8	mh	$ 55.55			$ 444.40	$ -	$ -	$ 444.40
	Memurray	8	mh	$ 55.55			$ 444.40	$ -	$ -	$ 444.40
	Mendoza	8	mh	$ 55.55			$ 444.40	$ -	$ -	$ 444.40
27-Feb	Mark Toth-Super	8	mh	$ 76.69			$ 613.52	$ -	$ -	$ 613.52
	Farmer	8	mh	$ 55.55			$ 444.40	$ -	$ -	$ 444.40
	Memurray	8	mh	$ 55.55			$ 444.40	$ -	$ -	$ 444.40
28-Feb	Mark Toth-Super	8	mh	$ 76.69			$ 613.52	$ -	$ -	$ 613.52
	Farmer	8	mh	$ 55.55			$ 444.40	$ -	$ -	$ 444.40
	Memurray	8	mh	$ 55.55			$ 444.40	$ -	$ -	$ 444.40
1-Mar	Mark Toth-Super	8	mh	$ 76.69			$ 613.52	$ -	$ -	$ 613.52
	Farmer	8	mh	$ 55.55			$ 444.40	$ -	$ -	$ 444.40
	Memurray	8	mh	$ 55.55			$ 444.40	$ -	$ -	$ 444.40
	Mendoza	8	mh	$ 55.55			$ 444.40	$ -	$ -	$ 444.40

2-Mar	Mark Toth-Super	8	mh	$ 76.69			$ 613.52	$ -	$ -	$ 613.52
	Farmer	8	mh	$ 55.55			$ 444.40	$ -	$ -	$ 444.40
	Memurray	8	mh	$ 55.55			$ 444.40	$ -	$ -	$ 444.40
	Mendoza	8	mh	$ 55.55			$ 444.40	$ -	$ -	$ 444.40
	MATERIAL									
2-Feb	Drwywall, ACT							$ 165.58		
6-Feb	Misc. for Window Blinds							$ 45.45		
7-Feb	Misc. for Window Blinds							$ 4.99		
9-Feb	Misc. for Window Blinds							$ 2.49		
12-Feb	Cleaning and paint supplies							$ 33.56		
13-Feb	ACT							$ 277.44		
15-Feb	Misc for Laminate							$ 68.94		
19-Feb	Trashbag							$ 13.29		
	Vacuum bags and finishing nails							$ 55.60		
20-Feb	ACT							$ 246.43		
21-Feb	ACT							$ 69.36		
	ACT							$ 48.13		
	Base Adhesive, Touchup Paint							$ 30.06		
	Cleaning							$ 33.86		
26-Feb	Paint							$ 40.21		
28-Feb	Drywall supply							$ 16.99		
1-Mar	Drywall supply							$ 27.96		
2-Mar	Wall repair							$ 9.00		
2-Mar	Laminate							$ 410.69		
	WCC tax adjustment									
								$ (9.04)		
								$ (4.19)		
	SUBCONTRACTORS						$ -	$ -	$ -	$ -
	Schumacher Elevator						$ -	$ -	$ 26,772.79	$ 26,772.79
	Advanced Electric						$ -	$ -	$ 2,912.26	$ 2,912.26
							$ -	$ -		
							$ -	$ -	$ -	$ -
							$ -	$ -	$ -	$ -
							$ -	$ -	$ -	$ -
							$ -	$ -	$ -	$ -
SUBTOTAL							$ 40,156.50	$ 1,586.77	$ 29,685.05	$ 69,841.55

PERIOD TOTAL			$ 40,156.50	$ 1,586.77	$ 29,685.05	$ 71,428.32

THE UNIVERSITY OF IOWA

FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 3/2/18

Subcontractor _____ Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number #0744901

Description of Work TOTH / SUPERVISON MENDOZA / PAINT WALLS 2ND FL. MCMURRAY + FARMER / SCRAP + MUD IN STAIRWELL

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
TOTH			8	0	MCMURRAY			8	0
					MENDOZA			8	0
					FARMER			8	0

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) _____ 3/2/18

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W27323/4-17

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722

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FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 3/1/18

Subcontractor _____ Change Order Request No _____

Project Name M.R.F. WATER DAMAGE REPAIR Project Number #0744901

Description of Work TOTH / SUPERVISON FARMER & McMURRAY / SCRAPPING & MUDDING - SANDING IN STAIRWELL MENDOZA / WORKING ON LAMINATE, DRYWALL FIXES & PAINT 2ND FL.

Name	Hours Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
TOTH			8	~~0~~	McMURRAY			8	~~0~~
					FARMER			8	~~0~~
					MENDOZA			8	~~0~~

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
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FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 2/28/18

Subcontractor _____ Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number #0744901

Description of Work TOTH / SUPERVISON FARMER + MCMURRAY / FINISHED REST OF CEILING TILE L.L. ALSO WORKED SCRAPPING & PAINTING IN STAIRWELL

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
TOTH			8	0	MCMURRAY			8	0
					FARMER			8	0

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) _____ 2/28/18

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April, 2007

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Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 2/27/18

Subcontractor _____ Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number #0744901

Description of Work TOTH / SUPERVISON McMURRAY + FARMER

SCRAP + MUD STAIRWELL

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
TOTH	SUPT.		8	Ø	McMURRAY			8	Ø
					FARMER			8	Ø

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) _____

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April, 2007

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FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 2/26/18

Subcontractor _____ Change Order Request No _____

Project Name M.R.F. WATER DAMAGE REPAIR Project Number _____

Description of Work FARMER & McMURRAY / LAMINATE 2ND FL.

TOTH / SUPERVISON

MENDOZA / DRYWALL & PAINTING 2ND FL.

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
TOTH	SUPT		8	0	MENDOZA			8	0
					McMURRAY			8	0
					FARMER			8	0

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) _____ 2/26/18

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Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 2/23/18

Subcontractor _____ Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number #07H4901

Description of Work TOTH / SUPERVISON

FARMER & McMURRAY / CEILING TILE & VINYL BASE 1ST. FL. INDIVIDUAL ROOMS

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
TOTH			8	0	FARMER			8	0
					McMURRAY			8	0

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) _____ 2/23

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FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 2/22/18

Subcontractor _____ Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number #0744901

Description of Work TOTH / SUPERVISON McMURRAY / VINYL BASE

FARMER / VINYL BASE

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
TOTH			8	Ø

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
McMURRAY			8	Ø
FARMER			8	Ø

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) _____ 2/22

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April, 2007

W27323/4-17

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FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 2/21/18

Subcontractor _____ Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number #0744901

Description of Work TOTH / SUPERVISON FARMER / LAMINATE REPAIR

McMURRAY / VINYL BASE

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
TOTH			8	0

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
McMURRAY			8	Ø
FARMER			8	Ø

Equipment and Material (attach invoices)

Quantity	Description
1 CARTON	2x2x 5/8" SHL RADAR CEILING TILE (TAMARACK)
1 CARTON	2x2x 15/16 CTA 815 A CEILING TILE (GYPSUM SUPPLY)
16'-0	BLACK VINYL BASE (BACHMEIR CARPET 1)
1 QUART	OF PAINT (SHERWIN WILLIAMS) EMERALD

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) _____ 2/21

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April, 2007

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Iowa City, Iowa 52242
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FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 2/20/18

Subcontractor _____ Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number # 0T44901

Description of Work TOTH / SUPERVISON FALMER & GALLEGOS / CEILING TILE IST FLR & LL MCMURRAY / CEILING TILE IST FL. & LL & VINYL BASE 2ND FL. MENDOZA / DRYWALL & PAINTING

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
TOTH			8	0	FALMER			8	0
					GALLEGOS			4.5	0
					MCMURRAY			8	0
					MENDOZA			4.5	0

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) _____ 2/20

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April, 2007

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Iowa City, Iowa 52242
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FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 2/19/18

Subcontractor _____ Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number #0744901

Description of Work TOTH / SUPERVISON MENDOZA / DRYWALL

FARMER / CEILING TILE McMURRAY / BASE, CEILINGTILE

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
TOTH	SUPT.		8	Ø	MENDOZA			5	Ø
					FARMER			8	Ø
					McMURRAY			8	Ø

Equipment and Material (attach invoices)

Quantity	Description
24 PCS.	(2 CARTONS) CERAMIC HERITAGE ACT
	FOR USE IN INDIVIDUAL OFFICES 1ST FL.

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) _____ 2/19

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FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE EACH DAY

General Contractor WOODRUFF CONST. CO. Date Work Performed 2/16/18

Subcontractor _____ Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number #0744901

Description of Work TOTH / SUPERVISON

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
TOTH	SUPT.		8	0					

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) _____

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FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 2/15/18

Subcontractor _____ Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number #07H4901

Description of Work TOTH / SUPERVISON MENDOZA / DRYWALL, CEILING TILE GALLEGOS / CEILING TILE FARMER + McMURRAY / VINYL BASE & CLEANUP BUTTERBAUGH / SCRAPPING STAIRWELL

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
TOTH	SUPT.		8	Ø	MENDOZA			8	Ø
					GALLEGOS			8	Ø
					FARMER			8	Ø
					McMURRAY			8	Ø
					BUTTERBAUGH			8	Ø

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W27323/4-17

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THE UNIVERSITY OF IOWA

FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 2/14/18

Subcontractor _____ Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number #0744901

Description of Work TOTH / SUPERVISON CESAR GALLEGOS / CEILING TILE 2ND FL.
LORENZO MENDOZA / DRYWALL, CEILING TILE, CLEANING 2ND & 3RD FLRS
KEVIN FARMER & TROY MCMURRAY / VINYL BASE 3RD FL. KALVIN BUTTELBAUGH / SCRAPPING HALLWAY

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
TOTH	SUPT.		8	Ø	GALLEGOS			8	Ø
					MENDOZA			8	Ø
					FARMER			8	Ø
					MCMURRAY			8	Ø
					BUTTELBAUGH			8	Ø

Equipment and Material (attach invoices)

Quantity	Description
4 CARTONS (48) PCS.	CEILING TILE FOR ELEVATOR LOBBIES 2ND & 1ST FLOORS. (GYPSUM SUPPLY) F.B.M.

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
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April, 2007

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THE UNIVERSITY OF IOWA

FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 2/13/18

Subcontractor _____ Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number #0744901

Description of Work TOTH / SUPERVISON BUTTERBAUGH / SCRAPPING STAIRWELL MENDOZA + FARMER / FINAL CLEANING 4TH + 5TH FLRS. GALLEGOS / LAMINATE, DEMO + CEILING TILE 2ND FL. MCMURRAY / VINYL BASE 3RD FL.

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
TOTH	SUPT.		8	Ø	MENDOZA			8	Ø
					MCMURRAY			8	Ø
					GALLEGOS			8	Ø
					FARMER			8	Ø
					BUTTERBAUGH			8	Ø

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W27323/4-17

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722

THE UNIVERSITY OF IOWA

FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 2/12/18

Subcontractor _____ Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number #0744901

Description of Work TOTH / SUPERVISON MENDOZA & FARMER / 5TH+4TH FL. FINAL CLEANING. GALLEGOS / CEILING TILE 2ND FL. McMURRAY / 3RD FL. VINYL BASE KALVIN BUTTERBAUGH / SCRAPPING STAIRWELL

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
TOTH	SUPT.		8	Ø

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
MENDOZA			8	Ø
FARMER			8	Ø
GALLEGOS			8	Ø
BUTTERBAUGH			8	Ø
McMURRAY			8	Ø

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W27323/4-17

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722

THE UNIVERSITY OF IOWA

FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO.

Date Work Performed 2/9/18

Subcontractor _____

Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR

Project Number #0744901

Description of Work TOTH / SUPERVISON FARMER / DRYWALL & CLEANUP
MCMURRAY / CEILING TILE & CLEANUP

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
TOTH			8	Ø	FARMER			8	Ø
					MCMURRAY			8	Ø

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W27323/4-17

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 *Fax* 319-335-2722

THE UNIVERSITY OF IOWA

FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 2/8/18

Subcontractor _____ Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number #0744901

Description of Work TOTH / SUPERVISON FARMER / DRYWALL

GALLEGOS / CEILING TILE MCMURRAY / VINYL BASE

BUTTERBAUGH / SCRAPPING STAIRWELL

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
TOTH	SUPT.		8	0	FARMER			8	0
					GALLEGOS			8	0
					BUTTERBAUGH			8	0
					MCMURRAY			8	0

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W27323/4-17

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 *Fax* 319-335-2722

THE UNIVERSITY OF IOWA

FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 2/7/18

Subcontractor _____ Change Order Request No _____

Project Name M.R.F. WATER DAMAGE REPAIR Project Number #0744901

Description of Work GALLEGOS / CEILING TILE & SOME DEMO FARMER / DRYWALL McMURRAY / VINYL BASE BUTTERBAUGH / SCRAPPING PAINT IN STAIRWELL TOTH / SUPERVISON

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
TOTH	SUPT.		8	Ø	GALLEGOS		8	Ø	
					FARMER		8	Ø	
					McMURRAY		8	Ø	
					BUTTERBAUGH		8	Ø	

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W27323/4-17

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722

THE UNIVERSITY OF IOWA

FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 2/6/18

Subcontractor _____ Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number #0744901

Description of Work TOTH / SUPERVISON FARMER / DRYWALL
GALLEGOS / CEILING TILE McMURRAY / VINYL BASE
BUTTERBAUGH / SCRAPPING PAINT IN STAIRWELL

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
TOTH	SUPT.		8	0	GALLEGOS			8	0
					McMURRAY			8	0
					BUTTERBAUGH			8	0
					FARMER			8	0

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W27323/4-17

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722

THE UNIVERSITY OF IOWA

FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 2/5/18

Subcontractor _____ Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number #0744901

Description of Work TOTH / SUPERVISION GALLEGOS / CEILING TILE

BUTTERBAUGH / SCRAPPING STAIRWELL FARMER & MCMURRAY / VINYL BASE

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
TOTH			8	Ø	FARMER			8	Ø
					MCMURRAY			8	Ø
					BUTTERBAUGH			8	Ø
					GALLEGOS			8	Ø

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W27323/4-17

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722

27B Invoice - Page 29 of 100

WCC MATERIAL COST

27B Invoice - Page 30 of 100

TAMARACK MATERIALS, INC.

Tamarack Materials, Inc.
9300 James Avenue South
Bloomington, MN 55431
Tel: (952) 888-5556
Fax: (952) 888-4030

Invoice

CUSTOMER NO.	INVOICE DATE
10421	02/02/18
P.O. #	ORDER #
18-011	6528083-00
CUSTOMER JOB NO.	PAGE #:
WOODRUFF CONSTR	1 of 1

Remit To:
Tamarack Materials, Inc.
SDS 12-1200
P.O. Box 86
Minneapolis, MN 55486-1200

SOLD TO:
490 2 MB 0.424 E0131 11057 03313182729 S2 P5074657 0006:0006

WOODRUFF CONSTRUCTION
1890 KOUNTRY LN
FORT DODGE IA 50501-8722

SHIP TO:

WOODRUFF CONSTRUCTION
U OF I VARIOUS JOBS
IOWA CITY, IA

SPECIAL INSTRUCTIONS	DELIVERED BY	RECEIVED BY
	IOWA CITY YA	

ORDERED BY	SALES REP	DATE SHIPPED	NET DUE DATE
marl	ICHS	02/02/18	

PRODUCT NO.	QUANTITY	UNITS	DESCRIPTION	U/M	EXTENSION	UNIT PRICE	AMOUNT
usg707	2.00	CTN	3/4x2x2ACOUSTONE GLACIERSHADOWLINE	MSF	64.00	1952.00	124.93
NAP-5P	1.00	PAI	GB PROFORM ALL PURPOSE4.5 GAL PAIL	PAI	1.00	17.10	17.10
b1s8	8.00	PCS	USG B1 SUPERWIDE BEAD8' 50/CTN 400	MLF	64.00	368.00	23.55

TAX DETAILS

TAXABLE: No
STATE : Iowa
COUNTY : Johnson - County

THANK YOU FOR YOUR BUSINESS!

TOTALS

SUBTOTAL	165.58
TAX	0.00
ADD'L CHARGES	
TOTAL	165.58

PAYMENTS

TERMS: NET 20TH, OR AS OTHERWISE ARRANGED. INTEREST RATE OF 1 ½% PER MONTH (WHICH IS A RATE OF 18% PER YEAR) COMPUTED MONTHLY WILL BE CHARGED ON THE UNPAID BALANCE. CUSTOMER AGREES TO PAY BY CASH, CHECK, OR ACH. CUSTOMERS PAYING THEIR ACCOUNT WITH A CREDIT CARD WILL INCUR A SURCHARGE OF 2.0% ON THE TRANSACTION AMOUNT, WHICH IS NOT GREATER THAN TAMARACK MATERIALS COST OF ACCEPTANCE.

25% RETURN CHARGE ON STOCK MERCHANDISE. SPECIAL ORDERS ARE NOT RETURNABLE.

GYPSUM WALLBOARD, PLASTER, STUCCO, STO/EIFS, JOINT COMPOUND, INSULATION, METAL STUDS, METAL LATH, METAL ACCESS DOORS, DRYWALL SCREWS, DRYWALL TOOLS, CEILING TILE AND GRID, FRY REGLET TRIMS, FRP, SCAFFOLDING, SAFETY EQUIPMENT AND MORE

0006:0006

MENARDS - IOWA CITY
2605 Naples Ave
Iowa City, IA 52240

KEEP YOUR RECEIPT
RETURN POLICY VARIES BY PRODUCT TYPE

Unless noted below allowable returns for items on this receipt will be in the form of an in store credit voucher if the return is done after 05/07/18

If you have questions regarding the charges on your receipt, please email us at:
IOWAfrontend@menards.com

Sale Transaction

~~BIG DUST PAN~~		~~4.99~~
6489823		
PLTD SLTD ANG 1-1/4"-5FT		
2279143	3 @11.19	33.57
STOPS RUST SATIN ALMOND		
5576502	3 @3.96	11.88
~~LARGE ANGLE BROOM~~	*	~~15.99~~
6489829	2 @7.99	
		66.42
TOTAL		3.99
TAX STATE OF IA 6%		70.41
TOTAL SALE		70.41

Menard Commercial Card 6697
033550
Swiped
PO # 18 011

TOTAL SAVINGS 4.00

TOTAL NUMBER OF ITEMS = 9

THE FOLLOWING REBATE RECEIPTS WERE PRINTED FOR THIS TRANSACTION:
2628

GUEST COPY

The Cardholder acknowledges receipt of goods/services in the total amount shown hereon and agrees to pay the card issuer according to its current terms.

THIS IS YOUR CREDIT CARD SALES SLIP
PLEASE RETAIN FOR YOUR RECORDS.

NOW HIRING!!

THANK YOU, YOUR CASHIER, Marissa

68140 04 2614 02/06/18 04:42PM 3091

DUST PAN & BROOMS FOR CLEANUP

1 1/4" ANGLE (UNISTRUT) TO HANG MINI BLINDS

PAINT FOR UNISTRUT (TO MATCH BLINDS)

ALEXANDER
EST. 1891
LUMBER

Pickup Now Order

Order No 7300210
Order Date 02/07/2018
Invoice No 1474226

Branch: Iowa City
PO BOX 230
1201 South Gilbert St.
Iowa City, Iowa 52240

Phone 319-338-1113 Fax 319-338-8309

Invoice Address
Woodruff
Woodruff Const.
1890 Kountry Lane
Fort Dodge, Iowa, 50501-

Delivery Address
Woodruff Const.
16-098 - EMRB
431 NEWTON ROAD
IOWA CITY, Iowa, 52240

Customer Code	000252
Your Ref	18-011
Delivery	On 02/07/2018
Taken By	Lou Garringer
Sales Rep	Unassigned Account

Special Instructions	Notes

Line	Product Code	Description	Qty/Footage		Price	Per	Total
1	40232	V121 1.5 Dw Cor Brace Zn Dbl Wid N285544 V121 1.5 Dw Cor Brace Zn Dbl Wid	1	ea	4.99	ea	4.99

Customer Copy

BRACKETS TO HANG MINI BLINDS

[redacted] Amount	$4.99
[redacted]	$0.30
[redacted]	$5.29

Subject to our terms and conditions of sale. Further copies available on request.

Use Your BIG CARD 2% REBATE
MENARDS®

MENARDS - IOWA CITY
2605 Naples Ave
Iowa City, IA 52240

KEEP YOUR RECEIPT
RETURN POLICY VARIES BY PRODUCT TYPE

Unless noted below allowable returns for items on this receipt will be in the form of an in store credit voucher if the return is done after 05/10/18

If you have questions regarding the charges on your receipt, please email us at:
IOWAfrontend@menards.com

Sale Transaction

ORDER	94799	
2X4-6' SPF	-PICK	
1021075		2.49
END OF ORDER		
TOTAL		2.49
TAX STATE OF IA 6%		0.15
TOTAL SALE		2.64
Menard Commercial Card 6697		2.64
032114		
Swiped		
PO # 18 011		

TOTAL NUMBER OF ITEMS = 1

THE FOLLOWING REBATE RECEIPTS WERE PRINTED FOR THIS TRANSACTION:
2528

GUEST COPY

The Cardholder acknowledges receipt of goods/services in the total amount shown hereon and agrees to pay the card issuer according to its current terms.

THIS IS YOUR CREDIT CARD SALES SLIP
PLEASE RETAIN FOR YOUR RECORDS.

NOW HIRING!!

THANK YOU, YOUR CASHIER, Laura

38613 07 8482 02/09/18 07:11AM 3091

2x4 6'-0"
TO HANG BLINDS ON
5TH FLOOR

27B Invoice - Page 34 of 100

Use Your BIG CARD 2% REBATE

MENARDS®

MENARDS - IOWA CITY
2605 Naples Ave
Iowa City, IA 52240

KEEP YOUR RECEIPT
RETURN POLICY VARIES BY PRODUCT TYPE

Unless noted below allowable returns for items on this receipt will be in the form of an in store credit voucher if the return is done after 05/13/18

If you have questions regarding the charges on your receipt, please email us at:
IOWAfrontend@menards.com

CLEANING + PAINT SUPPLIES

Sale Transaction

PC 2" ANGLE SASH BRUSH		
5610165	2 @5.29	10.58
PURDY 4"X3/8" WD 3PK COV		
5610796	2 @7.99	15.98
12PK 2IN1 PAINT TOWELS		
5613575		6.97
TOTAL		33.53
TAX STATE OF IA 6%		2.01
TOTAL SALE		35.54
Menard Commercial Card 6697		35.54

029652
Swiped
PO # 18 011

TOTAL NUMBER OF ITEMS = 5

THE FOLLOWING REBATE RECEIPTS WERE PRINTED FOR THIS TRANSACTION:
2551

GUEST COPY

The Cardholder acknowledges receipt of goods/services in the total amount shown hereon and agrees to pay the card issuer according to its current terms.

THIS IS YOUR CREDIT CARD SALES SLIP
PLEASE RETAIN FOR YOUR RECORDS.

NOW HIRING!!

THANK YOU, YOUR CASHIER, Ellen

7351 08 8125 02/12/18 01:59PM 3091

27B Invoice - Page 35 of 100

FBM
Foundation Building Materials
RETURN SERVICE REQUESTED

BRANCH 0043
55 43RD AVE SW
CEDAR RAPIDS IA 52404-4908
(319) 362-4013 PH
(319) 247-2595 FX

Founded on Principle • Built with Purpose

INVOICE

INVOICE NUMBER	INVOICE DATE
43126109-00	02/19/18
CUSTOMER PO NUMBER	ORDERED BY
WATER DAMAGE	MARK
TERMS	DUE DATE
2% 10TH NEOM	03/31/18

PLEASE REMIT ALL PAYMENTS TO:
FOUNDATION BUILDING MATERIALS
1125 HARRISON AVE
ROCKFORD IL 61104-7239

BILL TO CUSTOMER NUMBER: 94357 PH: 5155761118

WOODRUFF CONSTRUCTION CO.
1890 KOUNTRY LN
FORT DODGE, IA 50501-8722
UNITED STATES

SHIP TO: MISC PH: 5155761118

WOODRUFF CONSTRUCTION CO.
1890 KOUNTRY LN
FORT DODGE, IA 50501-8722

ORDER DATE	SHIP DATE	ORDER TAKEN BY	SALES REP	SHIP VIA	JOB NUMBER / NAME
02/13/18	02/19/18	Albers, Doug	Des Moines, IA	Cust Pick Up	

QTY ORDERED	QTY SHIPPED	SELL UNIT	ITEM NUMBER / ITEM DESCRIPTION	UNIT QTY	UNIT PRICE	PRICE UOM	AMOUNT DUE
4.00	4.00	CTN	CTA815A ARM FISSURED 2X2 TEG 15/16" (48'/CTN) WHITE	0.192	$1,445.000	MSF	$277.44

Email & Fax Invoicing Now Available !!
Get your invoices quickly with FBM's email and fax invoicing system. Invoices are emailed in a PDF format and both emailed and faxed invoices look identical to printed bills. Email invoicing can include a data file for importing into your accounting system. Email us at ar-support@FBMsales.com to get set up today!

SUB-TOTAL	$277.44
TAXES	$19.42
INVOICE TOTAL	**$296.86**

Please reference the invoice number with your payment.
If Payment Is Received By 03/10/18 You May Deduct $5.55
A finance charge of 1-1/2% per month (18% per year) will be charged on past due accounts.
ALL claims and returned goods MUST be accompanied by appropriate paperwork.
Job access is the contractor's responsibility, including ingress and egress.
Subject to FBM terms and conditions http://www.FBMsales.com/FBM-CREDIT/.

California Customers: Title passes F.O.B. warehouse on pick-ups. Title passes F.O.B. curbside before stocking and spreading when delivered.

To sign up to view invoices on-line go to http://FBMsales.bilitrust.com. Use Enrollment Token: HML PVK FSS

Thank You For Your Business

Page 1 of 1

27B Invoice - Page 36 of 100

Use Your BIG CARD 2% REBATE
MENARDS®

MENARDS - IOWA CITY
2605 Naples Ave
Iowa City, IA 52240

KEEP YOUR RECEIPT
RETURN POLICY VARIES BY PRODUCT TYPE

Unless noted below allowable returns for items on this receipt will be in the form of an in store credit voucher if the return is done after 05/16/18

If you have questions regarding the charges on your receipt, please email us at:
IOWAfrontend@menards.com

Sale Transaction

1/4(1/4CAT)4X8 ACX PLY			
1251060	3	@22.98	68.94
TOTAL			68.94
TAX STATE OF IA 6%			4.14
TOTAL SALE			73.08
Menard Commercial Card 6697			73.08

046629
Swiped
PO # 18011

TOTAL NUMBER OF ITEMS = 3

GUEST COPY

The Cardholder acknowledges receipt of goods/services in the total amount shown hereon and agrees to pay the card issuer according to its current terms.

THIS IS YOUR CREDIT CARD SALES SLIP
PLEASE RETAIN FOR YOUR RECORDS.

NOW HIRING!!

THANK YOU, YOUR CASHIER, Sydney

38612 10 1839 02/15/18 04:41PM 3091

1/4" PLYWOOD BACKING UNDER LAMINATE

27B Invoice - Page 37 of 100

TAMARACK MATERIALS, INC.

Tamarack Materials, Inc.
9100 James Avenue South
Bloomington, MN 55431
Tel: (952) 888-5556
Fax: (952) 888-4030

Invoice

CUSTOMER NO.	INVOICE DATE
10421	02/20/18
P.O. #	ORDER #
18-011	6528491-00
CUSTOMER JOB NO.	PAGE #:
WOODRUFF CONSTR	1 of 1

Remit To:
Tamarack Materials, Inc.
SDS 12-1200
P.O. Box 86
Minneapolis, MN 55486-1200

SOLD TO:
2488 1 AB 0.408 E0082X 10142 D3365741477 S2 P5115871 0001:0004

WOODRUFF CONSTRUCTION
1890 KOUNTRY LN
FORT DODGE IA 50501-8722

SHIP TO:

WOODRUFF CONSTRUCTION
Will Call
Mark 319-383-1616
Iowa city, IA 52241

SPECIAL INSTRUCTIONS	DELIVERED BY	RECEIVED BY
University of Iowa	IOWA CITY YA	

ORDERED BY	SALES REP	DATE SHIPPED	NET DUE DATE
Mark	ICHS	02/19/18	

PRODUCT NO.	QUANTITY	UNITS	DESCRIPTION	U/M	EXTENSION	UNIT PRICE	AMOUNT
usg56644	2.00	CTN	2X2 CERAMIC HERITAGE48FT/CTN	MSF	96.00	2567.00	246.43

ACT tile

TAX DETAILS		TOTALS	
TAXABLE: No STATE : Iowa CITY : Iowa City COUNTY : Johnson - County	THANK YOU FOR YOUR BUSINESS!	SUBTOTAL	246.43
		TAX	0.00
		ADD'L CHARGES	
		TOTAL	246.43

TERMS: NET 20TH, OR AS OTHERWISE ARRANGED. INTEREST RATE OF 1 ½% PER MONTH (WHICH IS A RATE OF 18% PER YEAR) COMPUTED MONTHLY WILL BE CHARGED ON THE UNPAID BALANCE. CUSTOMER AGREES TO PAY BY CASH, CHECK, OR ACH. CUSTOMERS PAYING THEIR ACCOUNT WITH A CREDIT CARD WILL INCUR A SURCHARGE OF 2.0% ON THE TRANSACTION AMOUNT, WHICH IS NOT GREATER THAN TAMARACK MATERIALS COST OF ACCEPTANCE.

25% RETURN CHARGE ON STOCK MERCHANDISE. SPECIAL ORDERS ARE NOT RETURNABLE.

PAYMENTS

GYPSUM WALLBOARD, PLASTER, STUCCO, STO/EIFS, JOINT COMPOUND, INSULATION, METAL STUDS, METAL LATH, METAL ACCESS DOORS, DRYWALL SCREWS, DRYWALL TOOLS, CEILING TILE AND GRID, FRY REGLET TRIMS, FRP, SCAFFOLDING, SAFETY EQUIPMENT AND MORE

0001:0004

LOWE'S

LOWE'S HOME CENTERS, LLC
2701 2ND STREET
CORALVILLE, IA 52241 (319) 545-8300

- SALE -

SALES#: S1688JS1 2295322 TRANS#: 10059631 02-19-18

802916 13-GAL 100-CT GLAD OS FRE 13.29
13.98 DISCOUNT EACH -0.69

SUBTOTAL:	13.29
TAX:	0.80
INVOICE 10458 TOTAL:	14.09
LAR:	14.09
TOTAL DISCOUNT:	0.69

LAR:XXXXXXXXXXX7939 AMOUNT:14.09 AUTHCD:000857
KEYED REFID:624862 02/19/18 11:00:49
LAR PO: 18-1099
ACCOUNT NAME:
WOODRUFF CONSTRUCTION COMP
AUTH BUYER: TOTH MARK

ACCOUNT WILL BE BILLED UPON MERCHANDISE TRANSACTION DATE FOR STOCK MERCHANDISE AND NO LATER THAN 90 DAYS FROM TRANSACTION DATE FOR SOS OR DIRECT DELIVERY MERCHANDISE.

STORE: 1688 TERMINAL: 10 02/19/18 11:00:57
OF ITEMS PURCHASED: 1
EXCLUDES FEES, SERVICES AND SPECIAL ORDER ITEMS

THANK YOU FOR SHOPPING LOWE'S.
SEE REVERSE SIDE FOR RETURN POLICY.
STORE MANAGER: AMANDA SERNULKA-GEORGE

LOWE'S PRICE MATCH GUARANTEE
FOR MORE DETAILS, VISIT LOWES.COM/PRICEMATCH

YOUR OPINIONS COUNT!
REGISTER FOR A CHANCE TO BE
ONE OF FIVE $300 WINNERS DRAWN MONTHLY!
¡REGISTRESE EN EL SORTEO MENSUAL
PARA SER UNO DE LOS CINCO GANADORES DE $300!

REGISTER BY COMPLETING A GUEST SATISFACTION SURVEY
WITHIN ONE WEEK AT: www.lowes.com/survey
YOUR ID# 10458 1688 050

NO PURCHASE NECESSARY TO ENTER OR WIN.
VOID WHERE PROHIBITED. MUST BE 18 OR OLDER TO ENTER.
OFFICIAL RULES & WINNERS AT: www.lowes.com/survey

#2

LOWE'S

LOWE'S HOME CENTERS, LLC
2701 2ND STREET
CORALVILLE, IA 52241 (319) 545-8300

- SALE -

SALES#: S1688JS1 2295322 TRANS#: 10059250 02-19-18

12322 2-CT 10-14 GAL DRYWALL FL 46.11
17.98 DISCOUNT EACH -2.61
3 @ 15.37
476944 16-GA 1-1/4-IN STR FIN EG 9.49
9.98 DISCOUNT EACH -0.49

SUBTOTAL:	55.60
TAX:	3.34
INVOICE 10454 TOTAL:	58.94
LAR:	58.94
TOTAL DISCOUNT:	8.32

LAR:XXXXXXXXXXX7939 AMOUNT:58.94 AUTHCD:000902
KEYED REFID:624031 02/19/18 10:54:25
LAR PO: 18-019
ACCOUNT NAME:
WOODRUFF CONSTRUCTION COMP
AUTH BUYER: TOTH MARK

ACCOUNT WILL BE BILLED UPON MERCHANDISE TRANSACTION DATE FOR STOCK MERCHANDISE AND NO LATER THAN 90 DAYS FROM TRANSACTION DATE FOR SOS OR DIRECT DELIVERY MERCHANDISE.

STORE: 1688 TERMINAL: 10 02/19/18 10:54:35
OF ITEMS PURCHASED: 4
EXCLUDES FEES, SERVICES AND SPECIAL ORDER ITEMS

THANK YOU FOR SHOPPING LOWE'S.
SEE REVERSE SIDE FOR RETURN POLICY.
STORE MANAGER: AMANDA SERNULKA-GEORGE

LOWE'S PRICE MATCH GUARANTEE
FOR MORE DETAILS, VISIT LOWES.COM/PRICEMATCH

YOUR OPINIONS COUNT!
REGISTER FOR A CHANCE TO BE
ONE OF FIVE $300 WINNERS DRAWN MONTHLY!
¡REGISTRESE EN EL SORTEO MENSUAL
PARA SER UNO DE LOS CINCO GANADORES DE $300!

REGISTER BY COMPLETING A GUEST SATISFACTION SURVEY
WITHIN ONE WEEK AT: www.lowes.com/survey
YOUR ID# 10454 1688 050

NO PURCHASE NECESSARY TO ENTER OR WIN.

RECEIPT #1
BAGS FOR OFFICE GARBAGE

#2
VACUUM BAGS + (1/4" FINISHING NAILS TO ATTACH PLYWOOD FOR LAMINATE

27B Invoice - Page 39 of 100

(2)

LOWE'S

LOWE'S HOME CENTERS, LLC
2701 2ND STREET
CORALVILLE, IA 52241 (319) 545-8300

- SALE -

SALES#: S1688T81 2380684 TRANS#: 10147197 02-20-18

114511 90CT TUB-O-TOWEL MULT PUR		12.33
12.98	DISCOUNT EACH	-0.65
607434 4-IN ELBOW 90-DEG 26-GA		4.45
4.68	DISCOUNT EACH	-0.23
503439 PROLINE 48-PACK TERRY TOW		17.08
17.98	DISCOUNT EACH	-0.90
	SUBTOTAL:	33.86
	TAX:	2.03
INVOICE 10779 TOTAL:		35.89
	LAR:	35.89
TOTAL DISCOUNT:		1.78

LAR:XXXXXXXXXXX7939 AMOUNT:35.89 AUTHCD:000880
KEYED REFID:487411 02/20/18 11:20:22
LAR PO: 18-011
ACCOUNT NAME:
WOODRUFF CONSTRUCTION COMP
AUTH BUYER: TOTH MARK

ACCOUNT WILL BE BILLED UPON MERCHANDISE TRANSACTION DATE FOR STOCK MERCHANDISE AND NO LATER THAN 90 DAYS FROM TRANSACTION DATE FOR SOS OR DIRECT DELIVERY MERCHANDISE.

STORE: 1688 TERMINAL: 10 02/20/18 11:20:32

OF ITEMS PURCHASED: 3

EXCLUDES FEES, SERVICES AND SPECIAL ORDER ITEMS

THANK YOU FOR SHOPPING LOWE'S.
SEE REVERSE SIDE FOR RETURN POLICY.
STORE MANAGER: AMANDA SERNULKA-GEORGE

LOWE'S PRICE MATCH GUARANTEE
FOR MORE DETAILS, VISIT LOWES.COM/PRICEMATCH

YOUR OPINIONS COUNT!
REGISTER FOR A CHANCE TO BE
ONE OF FIVE $300 WINNERS DRAWN MONTHLY!
¡REGISTRESE EN EL SORTEO MENSUAL
PARA SER UNO DE LOS CINCO GANADORES DE $300!

REGISTER BY COMPLETING A GUEST SATISFACTION SURVEY
WITHIN ONE WEEK AT: www.lowes.com/survey
YOUR ID # 10779 1688 051

NO PURCHASE NECESSARY TO ENTER OR WIN.

27B Invoice - Page 40 of 100

FBM
Foundation Building Materials
RETURN SERVICE REQUESTED

BRANCH 0043
55 43RD AVE SW
CEDAR RAPIDS IA 52404-4908
(319) 362-4033 PH
(319) 247-2599 FX

Founded on Principle • Built with Purpose

INVOICE

INVOICE NUMBER	INVOICE DATE
43126380-00	02/21/18
CUSTOMER PO NUMBER	ORDERED BY
18-011	MARK
TERMS	DUE DATE
2% 10TH NEOM	03/31/18

PLEASE REMIT ALL PAYMENTS TO:
FOUNDATION BUILDING MATERIALS
1125 HARRISON AVE
ROCKFORD IL 61104-7239

BILL TO CUSTOMER NUMBER: 94357 PH: 5155761118

WOODRUFF CONSTRUCTION CO.
1890 KOUNTRY LN
FORT DODGE, IA 50501-8722
UNITED STATES

SHIP TO: MISC PH: 5155761118

WOODRUFF CONSTRUCTION CO.
1890 KOUNTRY LN
FORT DODGE, IA 50501-8722

ORDER DATE	SHIP DATE	ORDER TAKEN BY	SALES REP	SHIP VIA	JOB NUMBER / NAME
02/21/18	02/21/18	Albers, Doug	Des Moines, IA	Cust Pick Up	

QTY ORDERED	QTY SHIPPED	SELL UNIT	ITEM NUMBER / ITEM DESCRIPTION	UNIT QTY	UNIT PRICE	PRICE UOM	AMOUNT DUE
1.00	1.00	CTN	CTA815A ARM FISSURED 2X2 TEG 15/16" (48'/CTN) WHITE	0.048	$1,445.000	MSF	$69.36

ACT

Email & Fax Invoicing Now Available !!
Get your invoices quickly with FBM's email and fax invoicing system. Invoices are emailed in a PDF format and both emailed and faxed invoices look identical to printed bills. Email invoicing can include a data file for importing into your accounting system. Email us at ar-support@FBMsales.com to get set up today!

SUB-TOTAL	$69.36
TAXES	$4.86
INVOICE TOTAL	$74.22

Please reference the invoice number with your payment.
If Payment Is Received By 03/10/18 You May Deduct $1.39
A finance charge of 1-1/2% per month (18% per year) will be charged on past due accounts.
ALL claims and returned goods MUST be accompanied by appropriate paperwork.
Job access is the contractor's responsibility, including ingress and egress.
Subject to FBM terms and conditions http://www.FBMsales.com/FBM-CREDIT/.

California Customers: Title passes F.O.B. warehouse on pick-ups. Title passes F.O.B. curbside before stocking and spreading when delivered.

To sign up to view invoices on-line go to http://FBMsales.billtrust.com. Use Enrollment Token: HML PVK FSS

Thank You For Your Business

Page 1 of 1

27B Invoice - Page 41 of 100

TAMARACK
MATERIALS, INC.

Tamarack Materials, Inc.
9300 James Avenue South
Bloomington, MN 55431
Tel: (952) 888-5556
Fax: (952) 888-4030

Invoice

CUSTOMER NO.	INVOICE DATE
10421	02/22/18
P.O. #	ORDER #
18-011	6528501-00
CUSTOMER JOB NO.	PAGE #:
WOODRUFF CONSTR	1 of 1

Remit To:
Tamarack Materials, Inc.
SDS 12-1200
P.O. Box 86
Minneapolis, MN 55486-1200

SOLD TO:
2448 1 AB 0.409 E0082 I0145 03365741511 S2 P5115871 0004:0004

WOODRUFF CONSTRUCTION
1890 KOUNTRY LN
FORT DODGE IA 50501-8722

SHIP TO:

WOODRUFF CONSTRUCTION
U OF I VARIOUS JOBS
IOWA CITY, IA

SPECIAL INSTRUCTIONS	DELIVERED BY	RECEIVED BY
	IOWA CITY YA	
ORDERED BY	SALES REP / DATE SHIPPED	NET DUE DATE
	ICHS 02/21/18	

PRODUCT NO.	QUANTITY	UNITS	DESCRIPTION	U/M	EXTENSION	UNIT PRICE	AMOUNT
usg2220	1.00	CTN	2X2 5/8 SHL RADAR64 SQ FT/CTN	MSF	64.00	752.00	48.13

TAX DETAILS		TOTALS	
TAXABLE: No STATE : Iowa CITY : Iowa City COUNTY : Johnson - County	THANK YOU FOR YOUR BUSINESS!	SUBTOTAL	48.13
		TAX	0.00
		ADD'L CHARGES	
		TOTAL	48.13

TERMS: NET 20TH, OR AS OTHERWISE ARRANGED. INTEREST RATE OF 1 ½% PER MONTH (WHICH IS A RATE OF 18% PER YEAR) COMPUTED MONTHLY WILL BE CHARGED ON THE UNPAID BALANCE. CUSTOMER AGREES TO PAY BY CASH, CHECK, OR ACH. CUSTOMERS PAYING THEIR ACCOUNT WITH A CREDIT CARD WILL INCUR A SURCHARGE OF 2.0% ON THE TRANSACTION AMOUNT, WHICH IS NOT GREATER THAN TAMARACK MATERIALS COST OF ACCEPTANCE.
25% RETURN CHARGE ON STOCK MERCHANDISE. SPECIAL ORDERS ARE NOT RETURNABLE.

PAYMENTS

GYPSUM WALLBOARD, PLASTER, STUCCO, STO/EIFS, JOINT COMPOUND, INSULATION, METAL STUDS, METAL LATH, METAL ACCESS DOORS, DRYWALL SCREWS, DRYWALL TOOLS, CEILING TILE AND GRID, FRY REGLET TRIMS, FRP, SCAFFOLDING, SAFETY EQUIPMENT AND MORE

0004:0004

#1

LOWE'S

LOWE'S HOME CENTERS, LLC
2701 2ND STREET
CORALVILLE, IA 52241 (319) 545-8300

- SALE -

SALES#: S1688SS1 2146621 TRANS#: 9237781 02-21-18

~~410710 LOWES JUMBO FINISH PENCIL~~ ~~2.36~~
0.39 DISCOUNT EACH -0.02
6 @ 0.37

141353 FLEXCO ACRYLIC ADHESIVES 9.06
3.18 DISCOUNT EACH -0.16
3 @ 3.02

~~90784 LVL KORALY CARB PENCIL SH~~ ~~3.77~~
3.96 DISCOUNT EACH -0.19

~~050660 SHARPIE 5PC FINE BLACK~~ ~~5.48~~
4.98 DISCOUNT EACH -0.25
2 @ 4.73

SUBTOTAL:	25.25
TAX:	1.52
INVOICE 09585 TOTAL:	26.77
LAR:	26.77
TOTAL DISCOUNT:	1.33

LAR:XXXXXXXXXXX7939 AMOUNT:26.77 AUTHCD:000872
KEYED REFID:585906 02/21/18 12:29:54
LAR PO: 18 011
ACCOUNT NAME:
WOODRUFF CONSTRUCTION COMP
AUTH BUYER: TOTH MARK

ACCOUNT WILL BE BILLED UPON MERCHANDISE TRANSACTION DATE FOR STOCK MERCHANDISE AND NO LATER THAN 90 DAYS FROM TRANSACTION DATE FOR SOS OR DIRECT DELIVERY MERCHANDISE.

STORE: 1688 TERMINAL: 09 02/21/18 12:30:04
OF ITEMS PURCHASED: 14
EXCLUDES FEES, SERVICES AND SPECIAL ORDER ITEMS

THANK YOU FOR SHOPPING LOWE'S.
SEE REVERSE SIDE FOR RETURN POLICY.
STORE MANAGER: AMANDA SERNULKA-GEORGE

LOWE'S PRICE MATCH GUARANTEE
FOR MORE DETAILS, VISIT LOWES.COM/PRICEMATCH

***



SHERWIN-WILLIAMS.

IOWA CITY Store 3783

841 HIGHWAY 6 E
IOWA CITY, IA 52240 4404
(319)338-9604
Fax (319) 338-4752
www.sherwin-williams.com

CHARGE 1:28pm
Tran # 9062-4 02/26/18
E13/13746 11
JASON PO# 18-011

Order # OE027551203783
WOODRUFF CONSTRUCTION CO
Account XXXX-0599-0
Job 1 WOODRUFF CONSTRUCTION CO

Bill To:
WOODRUFF CONSTRUCTION CO
1890 KOUNTRY LN
FORT DODGE, IA 50501 8722
(515)232-4535

6509-46635 GALLON B30W12651
PM 200 O/T EXTRA
1.00 @ 40.21 40.21
Color: Custom MANUAL

CCE*Color Cast	OZ	32	64	128
B1 Black	-	4	-	-
Y3 Deep Gold	-	17	-	1

Custom Manual Formula Match

Comments: MANUAL

SUBTOTAL BEFORE TAX 40.21

6.000% SALES TAX T 165224000 2.41
CHARGE $42.62

Merchandise Received In Good Order by:

MARK Date

NET PAYMENT DUE ON MAR 20th

(Centralized Invoice)

STORE HOURS
SUNDAY 10:00 AM - 6:00 PM
MONDAY - FRIDAY 7:00 AM - 7:00 PM
SATURDAY 8:00 AM - 6:00 PM

Thank You
receipt required for refund

PAINT TO MATCH
AREA ON 2ND FL



SHERWIN-WILLIAMS.

IOWA CITY Store 3783

841 HIGHWAY 6 E
IOWA CITY, IA 52240 4404
(319)338-3604
Fax (319) 338-4752
www.sherwin-williams.com

CHARGE 1:28pm
Tran # 9062-4 02/26/18
E13/13746 11
JASON PO# 18-011

Order # 0E027551203783
WOODRUFF CONSTRUCTION CO
Account-XXXX-0599-0
Job 1 WOODRUFF CONSTRUCTION CO

Bill To:
WOODRUFF CONSTRUCTION CO
1890 KOUNTRY LN
FORT DODGE, IA 50501 8722
(515)232-4535

6509-46835 GALLON B30W12651
PM 200 O FL EXTRA
1.00 @ 40.21 40.21
Color: Custom MANUAL

CCE*Color Cast	OZ	32	64	128
B1 Black				
Y3 Deep Gold	-	17	-	1

Custom Manual Formula Match

Comments: MANUAL

SUBTOTAL BEFORE TAX 40.21

6.000% SALES TAX:7-165224000 2.41
CHARGE $42.62

Merchandise Received In Good Order by:

MARK Date

NET PAYMENT DUE ON MAY 20th

(Centralized Invoice)

STORE HOURS

SUNDAY	10:00 AM - 6:00 PM
MONDAY - FRIDAY	7:00 AM - 7:00 PM
SATURDAY	8:00 AM - 6:00 PM

Thank You

receipt required for refund

PAINT TO MATCH
AREA ON 2ND FL.

#1

Use Your BIG CARD 2% REBATE MENARDS®

MENARDS - CEDR SOUTH
2800 Wiley Blvd. SW
Cedar Rapids, IA 52404

KEEP YOUR RECEIPT
RETURN POLICY VARIES BY PRODUCT TYPE

Unless noted below allowable returns for items on this receipt will be in the form of an in store credit voucher if the return is done after 05/29/18

If you have questions regarding the charges on your receipt, please email us at:
CERSfrontend@menards.com

Sale Transaction

9" DRYWALL DISC SANDER	
2444780	16.99
TOTAL	16.99
TAX LINN-IA 7%	1.19
TOTAL SALE	18.18
Menard Commercial Card 6697	18.18
055936	
Swiped	
PO # 18 011	

TOTAL NUMBER OF ITEMS = 1

GUEST COPY

The Cardholder acknowledges receipt of goods/services in the total amount shown hereon and agrees to pay the card issuer according to its current terms.

THIS IS YOUR CREDIT CARD SALES SLIP
PLEASE RETAIN FOR YOUR RECORDS.

Spring Hiring - Apply Today

THANK YOU, YOUR CASHIER, Tami

01365 08 1504 02/28/18 08:03AM 3105

#2

Use Your BIG CARD 2% REBATE MENARDS®

MENARDS - IOWA CITY
2605 Naples Ave
Iowa City, IA 52240

KEEP YOUR RECEIPT
RETURN POLICY VARIES BY PRODUCT TYPE

Unless noted below allowable returns for items on this receipt will be in the form of an in store credit voucher if the return is done after 05/29/18

If you have questions regarding the charges on your receipt, please email us at:
IOWAfrontend@menards.com

Sale Transaction

PURDY 2" STIFF PUTY KNIF	
5627143	6.89
PURDY 3" STIFF SCRAPER	
5627146	7.79
FATMAX POCKET KNIFE	
2373236	14.99
SB 10" ALL PURPOSE STICK	
2317055	7.29
TOTAL	37.06
TAX STATE OF IA 6%	2.22
TOTAL SALE	39.28
Menard Commercial Card 6697	39.28
054878	
Swiped	
PO # 18 01	

TOTAL NUMBER OF ITEMS = 4

GUEST COPY

The Cardholder acknowledges receipt of goods/services in the total amount shown hereon and agrees to pay the card issuer according to its current terms.

THIS IS YOUR CREDIT CARD SALES SLIP
PLEASE RETAIN FOR YOUR RECORDS.

Spring Hiring - Apply Today

THANK YOU, YOUR CASHIER, Kathleen

38611 06 8509 02/28/18 07:21AM 3091

#1 DISC SANDER TO WORK IN STAIRWELL

#2 2" & 3" PUTTY KNIVES FOR SCRAPPING STAIRWELL.

FATMAX KNIFE TO REPLACE 1 MISSING

10" GLUE GUN STICKS FOR VINYL BASE INSTALL

Use Your BIG CARD 2% REBATE
MENARDS®

MENARDS - IOWA CITY
2605 Naples Ave
Iowa City, IA 52240

KEEP YOUR RECEIPT
RETURN POLICY VARIES BY PRODUCT TYPE

Unless noted below allowable returns for items on this receipt will be in the form of an in store credit voucher if the return is done after 05/30/18

If you have questions regarding the charges on your receipt, please email us at;
IOWAfrontend@menards.com

Sale Transaction

5" 8-H PREM 40 GRIT 10PK		
2360686		15.98
POLE HANDLE ATTACHMENT		
2444781	2 @5.99	11.98
TOTAL		27.96
TAX STATE OF IA 6%		1.68
TOTAL SALE		29.64
Menard Commercial Card 6697		29.64

004821
Swiped
PO # 18 011

TOTAL NUMBER OF ITEMS = 3

GUEST COPY

The Cardholder acknowledges receipt of goods/services in the total amount shown hereon and agrees to pay the card issuer according to its current terms.

THIS IS YOUR CREDIT CARD SALES SLIP
PLEASE RETAIN FOR YOUR RECORDS.

Spring Hiring - Apply Today

THANK YOU, YOUR CASHIER, Kathleen

38611 10 4936 03/01/18 09:08AM 3091

5" DISC SAND PAPER FOR REMOVING DRYWALL MUD FROM 1/4" PLYWOOD USED AS BACKING FOR LAMINATE CORRIDOR KITCHEN SAID IT WOULD INTERFERE W/ADHESIVE

POLE HANDLE ATTACHMENT CAN ALSO MANUEL SANDING DISCS TO BE ATTACHED TO A POLE FOR HARD TO REACH OR HIGHER AREAS.

Use Your BIG CARD 2% REBATE
MENARDS®

MENARDS - IOWA CITY
2605 Naples Ave
Iowa City, IA 52240

MUD FOR
STAIRWELL

KEEP YOUR RECEIPT
RETURN POLICY VARIES BY PRODUCT TYPE

Unless noted below allowable returns for items on this receipt will be in the form of an in store credit voucher if the return is done after 05/31/18

If you have questions regarding the charges on your receipt, please email us at:
IOWAfrontend@menards.com

Sale Transaction

PROFORM LITE-BOX *	
1312713	9.00
TOTAL	9.00
TAX STATE OF IA 6%	0.54
TOTAL SALE	9.54
Menard Commercial Card 6697	9.54

046809
Swiped
PO # 18 011

TOTAL SAVINGS 0.98

TOTAL NUMBER OF ITEMS = 1

GUEST COPY

The Cardholder acknowledges receipt of goods/services in the total amount shown hereon and agrees to pay the card issuer according to its current terms.

THIS IS YOUR CREDIT CARD SALES SLIP
PLEASE RETAIN FOR YOUR RECORDS.

Spring Hiring - Apply Today

THANK YOU, YOUR CASHIER, Ellen

7351 06 9348 03/02/18 02:06PM 3091

CORRIDOR KITCHENS

650 Pacha Pkwy #6
North Liberty, IA 52317
P 319.665.8300
www.CorridorKitchens.com

Invoice

Date	Invoice #
3/2/2018	3640

Bill To	Ship To
Woodruff Construction LLC Nick Ford 501 Greenfield Drive P.O. Box 350 Tiffin IA 52340	University Hospital Iowa City Job # 18-011

P.O. Number	Terms	Rep	Ship
2876SP	NET 15 DAYS	SP	3/2/2018

Quantity	Item Code	Description	Price Each	Amount
2	Laminate Counte...	4' x 8' 7806-60 Bannister Oak sheet laminate		
1	Laminate Counte...	3' x 8' 7806-60 Bannister Oak sheet laminate	366.00	366.00
	Laminate Counte...	WA 500C1gal	44.69	44.69
		TX EXEMPT # 42-6004813		

We would appreciate your feedback. Go to our website at www.CorridorKitchens.com and leave us a Review!

Subtotal	$410.69
Sales Tax (6.0%)	$0.00
Payments/Credits	$0.00
Balance Due	$410.69

*Please pay your invoice within the Terms listed. There will be a 1.5% interest charge per month on late invoices.
*There will be a 3.5% surcharge on payments made with a credit card. Thank you!

SCHUMACHER COST SUMMARY

PAYMENT APPLICATION

TO:	Medical Research Facility 55 Grand Ave S Iowa City, IA 52242 Attn:	PROJECT NAME AND LOCATION:	39070 Medical Research Facility 55 Grand Ave S Iowa City, IA 52242	APPLICATION # PERIOD THRU: PROJECT #s:	1 02/21/2018 39070
FROM:	Schumacher Elevator Company One Schumacher Way PO Box 393 Denver, IA 50622	ARCHITECT:		DATE OF CONTRACT:	02/15/2018
FOR:					

Distribution to:
- ☐ OWNER
- ☐ ARCHITECT
- ☐ CONTRACTOR
- ☐
- ☐

CONTRACTOR'S SUMMARY OF WORK

Application is made for payment as shown below.
Continuation Page is attached.

1. CONTRACT AMOUNT			$194,666.00
2. SUM OF ALL CHANGE ORDERS			$0.00
3. CURRENT CONTRACT AMOUNT	(Line 1 +/- 2)		$194,666.00
4. TOTAL COMPLETED AND STORED (Column G on Continuation Page)			$28,181.79
5. RETAINAGE:			
a. 5.00% of Completed Work (Columns D + E on Continuation Page)		$1,409.00	
b. 5.00% of Material Stored (Column F on Continuation Page)		$0.00	
Total Retainage (Line 5a + 5b or Column I on Continuation Page)			$1,409.00
6. TOTAL COMPLETED AND STORED LESS RETAINAGE (Line 4 minus Line 5 Total)			$26,772.79
7. LESS PREVIOUS PAYMENT APPLICATIONS			$0.00
8. PAYMENT DUE			$26,772.79
9. BALANCE TO COMPLETION (Line 3 minus Line 6)		$167,893.21	

SUMMARY OF CHANGE ORDERS	ADDITIONS	DEDUCTIONS
Total changes approved in previous months	$0.00	$0.00
Total approved this month	$0.00	$0.00
TOTALS	$0.00	$0.00
NET CHANGES	$0.00	

Contractor's signature below is his assurance to Owner, concerning the payment herein applied for, that: (1) the Work has been performed as required in the Contract Documents, (2) all sums previously paid to Contractor under the Contract have been used to pay Contractor's costs for labor, materials and other obligations under the Contract for Work previously paid for, and (3) Contractor is legally entitled to this payment.

CONTRACTOR: Schumacher Elevator Company

By: Mark Tractor Date: 3-1-18

State of: Iowa

County of: Bremer

Subscribed and sworn to before me this 1st day of March 2018

Notary Public: Melodie Despard

My Commission Expires: March 9, 2020

MELODIE DESPARD
Notarial Seal - Iowa
Commission # 733350
My Commission Expires March 9, 2020

ARCHITECT'S CERTIFICATION

Architect's signature below is his assurance to Owner, concerning the payment herein applied for, that: (1) Architect has inspected the Work represented by this Application, (2) such Work has been completed to the extent indicated in this Application, and the quality of workmanship and materials conforms with the Contract Documents, (3) this Application for Payment accurately states the amount of Work completed and payment due therefor, and (4) Architect knows of no reason why payment should not be made.

CERTIFIED AMOUNT.....

(If the certified amount is different from the payment due, you should attach an explanation. Initial all the figures that are changed to match the certified amount.)

ARCHITECT:

By: Date:

Neither this Application nor payment applied for herein is assignable or negotiable. Payment shall be made only to Contractor, and is without prejudice to any rights of Owner or Contractor under the Contract Documents or otherwise.

APPLICATION FOR PAYMENT - CONTINUATION SHEET

PROJECT: 39070
Medical Research Facility

Schumacher Elevator Company One Schumacher Way Denver, IA 50622

APPLICATION #: 1
DATE OF APPLICATION: 03/01/2018
PERIOD THRU: 02/21/2018
PROJECT #s: 39070

A	B	C	D	E	F	G		H	I
ITEM #	WORK DESCRIPTION	SCHEDULED AMOUNT	COMPLETED WORK		STORED MATERIALS (NOT IN D OR E)	TOTAL COMPLETED AND STORED (D + E + F)	% COMP. (G / C)	BALANCE TO COMPLETION (C-G)	RETAINAGE (If Variable)
			AMOUNT PREVIOUS PERIODS	AMOUNT THIS PERIOD					
0010	SO# 39070 - Time & Materials	$166,484.21	$0.00	$0.00	$0.00	$0.00	0%	$166,484.21	$0.00
0020	Work Completed through February 2018	$28,181.79	$0.00	$28,181.79	$0.00	$28,181.79	100%	$0.00	$1,409.00
0030	Work Completed through March 2018	$0.00	$0.00	$0.00	$0.00	$0.00		$0.00	$0.00
0040	Work Completed through April 2018	$0.00	$0.00	$0.00	$0.00	$0.00		$0.00	$0.00
	TOTALS	$194,666.00	$0.00	$28,181.79	$0.00	$28,181.79	14%	$166,484.21	$1,409.00

SCHUMACHER LABOR COST

Labor	Mechanic Regular	1.7 Helper Regular	Mileage	Parking	Perdiem	Hotels	
1/23/2018	1						Ryan Hagarty
1/25/2018	1						Ryan Hagarty
2/5/2018	1						Ryan Hagarty
2/5/2018	8		100		$ 43.44	$ 89.67	Jeremy Munson
2/5/2018		8	100	$ 6.40	$ 43.44	$ 89.67	Nate Traetow
2/5/2018	1.5						Bryan Harper
2/5/2018		1.5	113		$ 43.44		Levi Hanken
2/8/2018	2						Ryan Hagarty
2/8/2018	5			$ 20.00	$ 43.44	$ 89.67	Jeremy Munson
2/8/2018		5			$ 43.44	$ 89.67	Nate Traetow
2/9/2018	7		100	$ 7.80	$ 43.44		Jeremy Munson
2/9/2018		7			$ 43.44		Nate Traetow
2/14/2018	8		71		$ 43.44		Scott Even
2/14/2018	8		83		$ 43.44		Steve Meyers
2/14/2018	1						Ryan Hagarty
2/15/2018	8		83		$ 43.44		Scott Even
2/15/2018		5.5	113		$ 43.44		Levi Hanken
2/16/2018	6		83		$ 43.44		Scott Even
2/16/2018		6	113		$ 43.44		Levi Hanken
2/19/2018	8		83		$ 43.44		Scott Even
2/19/2018		8	112		$ 43.44		Cody Richeal
2/20/2018	8		83		$ 43.44		Scott Even
2/20/2018		8	112		$ 43.44		Cody Richeal
2/21/2018	8		83		$ 43.44		Scott Even
2/21/2018		8	112		$ 43.44		Cody Richeal
	81.5	57	1544	$ 34.20	$ 825.36		
	$ 196.31	$ 172.04	0.75				
Total	$ 15,999.27	$ 9,806.28	$ 1,158.00	$ 34.20	$ 825.36	$ 358.68	$ 28,181.79

THE UNIVERSITY OF IOWA

27B Invoice - Page 54 of 100

FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 2/21/18

Subcontractor SCHUMAKER ELEVATOR Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number #0744901

Description of Work Remove tenant material from Building to Scrapyard, Load job Boxes.

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
Scott Fee	Elevator		8						
Cody Richard	Elevator		8						

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) _____ 2/21

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W27323/4-17

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 *Fax* 319-335-2722

THE UNIVERSITY OF IOWA

FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 2/20/18

Subcontractor SCHUMACHER ELEVATOR Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number #0744901

Description of Work Tearout of Sling + Platform, Hoist all pieces out.

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
Scott Even	Elevator		8						
Cody Richael	" "		8						

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) _____ 2/20

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TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY. - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 2/19/18

Subcontractor SCHUMAKER ELEVATOR Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number #0744901

Description of Work Lower Elevator by Hoist, Tearout & load all tearout material on trailor.

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
Scott Even	Elevator		8						
Cody Richeal	Elevator		8						

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) _____ 2/19

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Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 2/16/18

Subcontractor SCHUMAKER ELEVATOR Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number #0744901

Description of Work Cab Tearout + Remove hoist ropes. Ready to run car down.

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
Scott Even	Elevator		6						
Levi Hanken	Elevator		6						

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) _____

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TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 2/15/18

Subcontractor SCHUMACHER ELEVATOR Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number #0744901

Description of Work Tearout of Machine Room wiring, hoistway equipment and Elevator Cab, Field Survey with Mark Widdel.

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
Scott Even	Elevator		8						
Levi Hanken	Elevator		5.5						

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) _____

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TIME AND MATERIAL FORM

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General Contractor WOODRUFF CONST. CO. Date Work Performed 2/14/18

Subcontractor SCHUMAKER ELEVATOR Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number #0744901

Description of Work Field Survey & engineer. Hoistway & Machine Room Tenant; Unload Truck

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
Scott Even	Elevator		8	0					
Steve Myers	Elevator		8	0					
Ryan Haygood	Elevator		1	0					

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) Scott Even Ryan Haygood

General Contractor's Representative _____

Owner's Representative (Required) _____

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TIME AND MATERIAL FORM

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General Contractor WOODRUFF CONST. CO. Date Work Performed 2/9/18

Subcontractor SCHUMAKER ELEVATOR Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number #0744901

Description of Work Tear out Elevator interior & Cartop fixtures & tear hoistway wiring.

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
Jeremy Munn	Elev. Mech		8						
Nate Tractow	Elev		7						

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) Jeremy Munn

General Contractor's Representative _____

Owner's Representative (Required) _____

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TIME AND MATERIAL FORM

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General Contractor WOODRUFF CONST. CO. Date Work Performed 2/8/18

Subcontractor SCHUMAKER ELEVATOR Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number #0744901

Description of Work Dump out controller & Tear out hoistway & Car wires. Get car running on Construction

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
Jeremy Munson	Elev. Mech		5						
Nate Tractor	Elev.		5						

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) Jeremy Munson

General Contractor's Representative _____

Owner's Representative (Required) _____

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General Contractor WOODRUFF CONST. CO. Date Work Performed 2-8-18

Subcontractor SCHUMAKER ELEVATOR Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number #0744901

Description of Work Worked on existing controller.

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
Ryan Haygarty	Elevator		2	0					

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) Ryan Haygarty

General Contractor's Representative _____

Owner's Representative (Required) _____

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General Contractor ~~Schum.~~ WOODRUFF CONST. COMPANY — Date Work Performed 2/5/18

Subcontractor Schumacher Elect. — Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR — Project Number #0744901

Description of Work Tear out Electrical & Put Jumpers in

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
Jeremy Munson			8						
Nate Traetow			8						

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) Jeremy Munson

General Contractor's Representative _____

Owner's Representative (Required) _____

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FACILITIES MANAGEMENT
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General Contractor WOODRUFF CONST. CO. Date Work Performed 2-5-18

Subcontractor SCHUMAKER ELEVATOR Change Order Request No

Project Name MRF WATER DAMAGE REPAIR Project Number #0744901

Description of Work UNLOAD 4000 lbs OF WEIGHT ON TO JOB SITE

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
BRYAN HARPER	ELEVATOR		1.5	0					
LEVI HANKEN	ELEVATOR		1.5	0					

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) B. HARPER

General Contractor's Representative

Owner's Representative (Required)

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Design & Construction

TIME AND MATERIAL FORM

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General Contractor WOODRUFF CONST. CO. Date Work Performed 2-5-18

Subcontractor SCHUMAKER ELEVATOR Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number #0744901

Description of Work Unload Test Weights

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
Ryan Hagert			1	Ø					
			1						

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) Ryan Hagert

General Contractor's Representative _____

Owner's Representative (Required) _____

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General Contractor WOODRUFF CONST. CO.

Date Work Performed 1-25-18

Subcontractor SCHUMAKER ELEVATOR

Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR

Project Number #0744901

Description of Work Survey

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
Ryan Hayart			1	Ø					
			1						

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) Ryan Hayart

General Contractor's Representative _____

Owner's Representative (Required) _____

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THE UNIVERSITY OF IOWA

FACILITIES MANAGEMENT
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TIME AND MATERIAL FORM

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General Contractor WOODRUFF CONST. CO.

Date Work Performed 1-23-18

Subcontractor SCHUMAKER ELEVATOR

Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR

Project Number #0744901

Description of Work Survey Project

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
Ryan Hagerty	Elevator		1	0					
			1						

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) Ryan Hagerty

General Contractor's Representative _____

Owner's Representative (Required) _____

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200 University Services Building
Iowa City, Iowa 52242
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SCHUMACHER NON-LABOR COST

HOME2 SUITES BY HILTON

HOME2 SUITES BY HILTON IOWA CITY CORALVILLE
740 Coral Ridge Avenue
Coralville, IA 52241
Phone (319) 337-5011 - Fax (319) 337-5012
iowacitycoralville.home2suitesbyhilton.com

Name
Address

MUNSON, JEREMY
2439 LARRABEE AVE
WAVERLY IA 50677
UNITED STATES OF AMERICA

Room	305/NKJ
Arrival Date	2/5/2018 9:16:00 AM
Departure Date	2/9/2018 6:43:00 AM
Adult/Child	1/0
Room Rate	79.00
Rate Plan:	LV5
HH #	
AL:	
Car:	

Confirmation Number: 92648264

2/9/2018

DATE	REFERENCE	DESCRIPTION	AMOUNT
2/5/2018	54626	GUEST ROOM	$79.00
2/5/2018	54626	STATE EXCISE TAX	$3.95
2/5/2018	54626	HOTEL/MOTEL TAX	$5.53
2/5/2018	54626	DESTINATION MARKETING FEE	$1.19
2/6/2018	54756	GUEST ROOM	$79.00
2/6/2018	54756	STATE EXCISE TAX	$3.95
2/6/2018	54756	HOTEL/MOTEL TAX	$5.53
2/6/2018	54756	DESTINATION MARKETING FEE	$1.19
2/7/2018	54892	GUEST ROOM	$79.00
2/7/2018	54892	STATE EXCISE TAX	$3.95
2/7/2018	54892	HOTEL/MOTEL TAX	$5.53
2/7/2018	54892	DESTINATION MARKETING FEE	$1.19
2/8/2018	54991	TELEPHONE-LD (INTRASTATE)	$30.25
2/8/2018	55020	GUEST ROOM	$79.00
2/8/2018	55020	STATE EXCISE TAX	$3.95
2/8/2018	55020	HOTEL/MOTEL TAX	$5.53
2/8/2018	55020	DESTINATION MARKETING FEE	$1.19
2/9/2018	55049	MC *6912	($388.93)
		BALANCE	$0.00

358.68

ACCOUNT NO. MC *6912	DATE OF CHARGE 2/9/2018	FOLIO NO. / CHECK NO. 40844 A
CARD MEMBER NAME MUNSON, JEREMY	AUTHORIZATION 07084B	INITIAL
ESTABLISHMENT NO. LOCATION	PURCHASES SERVICES	
	TAXES	
	TIPS MISC.	
CARD MEMBERS SIGNATURE X MERCHANDISE AND/OR SERVICES PURCHASED ON THIS CARD SHALL NOT BE RESOLD OR RETURNED FOR A CASH REFUND	TOTAL AMOUNT	-388.93 PAYMENT DUE UPON RECEIPT



HOME2 SUITES BY HILTON IOWA CITY
740 Coral Ridge Avenue
Coralville, IA 52241
Phone (319) 337-5011 - Fax (319) 337-5012
Iowacitycoralville.home2suitesbyhilton.com

Name
Address

TRAETOW, NATHAN

16 ARROWHEAD RIDGE RD

DENVER IA 50622
UNITED STATES OF AMERICA

Room	401/NKJ
Arrival Date	2/5/2018 4:35:00 PM
Departure Date	2/9/2018 6:44:00 AM
Adult/Child	1/0
Room Rate	79.00
Rate Plan:	LV5
HH #	
AL:	
Car:	

Confirmation Number: 95801448

2/9/2018

DATE	REFERENCE	DESCRIPTION	AMOUNT
2/5/2018	54631	GUEST ROOM	$79.00
2/5/2018	54631	STATE EXCISE TAX	$3.95
2/5/2018	54631	HOTEL/MOTEL TAX	$5.53
2/5/2018	54631	DESTINATION MARKETING FEE	$1.19
~~2/6/2018~~	~~54697~~	~~THE MARKET~~	~~$5.00~~
2/6/2018	54764	GUEST ROOM	$79.00
2/6/2018	54764	STATE EXCISE TAX	$3.95
2/6/2018	54764	HOTEL/MOTEL TAX	$5.53
2/6/2018	54764	DESTINATION MARKETING FEE	$1.19
2/7/2018	54899	GUEST ROOM	$79.00
2/7/2018	54899	STATE EXCISE TAX	$3.95
2/7/2018	54899	HOTEL/MOTEL TAX	$5.53
2/7/2018	54899	DESTINATION MARKETING FEE	$1.19
2/8/2018	55026	GUEST ROOM	$79.00
2/8/2018	55026	STATE EXCISE TAX	$3.95
2/8/2018	55026	HOTEL/MOTEL TAX	$5.53
2/8/2018	55026	DESTINATION MARKETING FEE	$1.19
2/9/2018	55050	DS *0771	($363.68)
		BALANCE	$0.00

358.68

ACCOUNT NO. DS *0771	DATE OF CHARGE 2/9/2018	FOLIO NO. / CHECK NO. 40846 A
CARD MEMBER NAME TRAETOW, NATHAN	AUTHORIZATION 00982R	INITIAL
ESTABLISHMENT NO. LOCATION	PURCHASES SERVICES	
	TAXES	
	TIPS MISC.	
CARD MEMBERS SIGNATURE X MERCHANDISE AND/OR SERVICES PURCHASED ON THIS CARD SHALL NOT BE RESOLD OR RETURNED FOR A CASH REFUND	TOTAL AMOUNT	-363.68 PAYMENT DUE UPON RECEIPT

From: Melodie Despard <melodie.despard@schumacherelevator.com>
Sent: Friday, March 2, 2018 3:38 PM
To: Leon Zhang
Subject: RE: Pay App #1 Hotel Reciepts

Per Union Contract they have the option of traveling back home or getting lodging paid.

Melodie Despard | Accounts Receivable Manager
Schumacher Elevator Company | One Schumacher Way | Denver, Iowa 50622
D: 319-406-1234 **F:** 319-406-1270 **E:** melodie.despard@schumacherelevator.com

ELEVATORS | COMPONENTS | MODERNIZATION | SERVICE

From: Leon Zhang <leonz@woodruffcompanies.com>
Sent: Friday, March 2, 2018 12:00 PM
To: Melodie Despard <melodie.despard@schumacherelevator.com>
Subject: RE: Pay App #1 Hotel Reciepts

Can you explain the purpose of the stay? That would help. Thanks.

From: Melodie Despard [mailto:melodie.despard@schumacherelevator.com]
Sent: Friday, March 2, 2018 9:07 AM
To: Leon Zhang <leonz@woodruffcompanies.com>
Subject: Pay App #1 Hotel Reciepts

Here are the hotel receipts.

Melodie Despard | Accounts Receivable Manager
Schumacher Elevator Company | One Schumacher Way | Denver, Iowa 50622
D: 319-406-1234 **F:** 319-406-1270 **E:** melodie.despard@schumacherelevator.com

ELEVATORS | COMPONENTS | MODERNIZATION | SERVICE

ADVANCED ELECTRIC COST INFORMATION

ADVANCED ELECTRICAL SERVICES, INC.
Electrical Contracting & Service Company

Advanced BoreTek – A Division of Advanced Electrical Services

(319) 351-6452 • (319) 351-3080 FAX • office@advancedelectrical.com • 1233 Gilbert Court • Iowa City, IA 52240

March 7, 2018

Woodruff Construction
Attn: Leon

RE: MRF Water Damage-Pay Application #2 Summary

Subject: Pay App #2

For all the work from 02/05-02/13. The total amount for Advanced Electric work is **$2912.26.** Labor and material cost documents are enclosed for review.

If you require additional clarification please contact me. Thank you for your prompt response.

Thank You,

ADVANCED ELECTRICAL SERVICES

Kim Sexton

ADVANCED ELECTRICAL SERVICES INC.
dba ADVANCED BORETEK
1233 GILBERT COURT
IOWA CITY, IA 52240
PH: 319-351-6452

INVOICE

55755
INVOICE NUMBER

CUSTOMER
WOODRUFF CONSTRUCTION
1890 KOUNTY LANE
FORT DODGE, IA 50501

DATE	03/07/2018
REFERENCE	AS PER NICK
TELEPHONE	

29306 UA 106997 WOODRU Soldby:

JOB LOCATION	JOB DETAILS
UI - MRF	REPAIR FLOOD DAMAGE AS DIRECTED

Monthly finance charge of 1.5%, if not paid within 30 days of invoice date. Customer will be responsible for all costs, including court & attorney's fees, incurred by Advanced Electrical Services, Inc. in the collection of customer's past due account.

Material / Work Description	Charge
PAY REQUEST #2: MET WITH ELEVATOR GUYS. TALKED WITH DREW ABOUT ANTENNAS, THEY ARE ALL OK. PIPED TO ELEVATOR SHAFT. STARTED DEMO OF ELEVATOR SHAFT. GOT LOCATIONS FOR OUTLETS AND SWITCH FROM JEREMY. PICKED UP LIGHTS, PUT TOGETHER, AND HUNG THEM. WIRED LIGHTS IN ELEVATOR SHAFT. REMOVED SMOKE DETECTORS AND REINSTALLED FOR CEILING TILE. FINISHED UP ELEVATOR LIGHTS. PIPED THE PIT FOR OUTLETS. PULLED WIRE AND INSTALLED DEVICES. LABELED PANEL. CLEANED UP WORK AREA.	
Material Used	392.26
Material Total	392.26

Labor / Work Description	Charge
Labor Provided	2,520.00
Labor Total	2,520.00

Page 1

PAY THIS AMOUNT ▶ $ 2,912.26

PLEASE DETACH THIS PORTION & RETURN WITH YOUR REMITTANCE TO:

Advanced Electrical Services, Inc.
1233 Gilbert Court
Iowa City, IA 52240

CUSTOMER: WOODRUFF CONSTRUCTION
CUST. NO. 106997 Inv #: 55755
DATE: 03/07/2018

PAY THIS AMOUNT ▶ $ 2,912.26

TERMS: DUE UPON RECEIPT

ADVANCED ELECTRIC LABOR COST

Posted Items Report

Job Number: 29306 Desc: REPAIR FLOOD DAMAGE AS DIRECTED Customer: WOODRUFF CONSTRUCTION

Labor Items Sorted by Page Number

Page	Date	Invoice	WorkerId	Name	StHrs	OtHrs	DtHrs	TotHrs	UCost	ExtCost	Price	Charge	WT
2	02/05/2018		TREVOR	TREVOR BERTELLI	6.00	.00	.00	6.00	.00	.00	.00	360.00	10
2	02/07/2018		TREVOR	TREVOR BERTELLI	8.00	.00	.00	8.00	.00	.00	.00	480.00	10
2	02/08/2018		TREVOR	TREVOR BERTELLI	5.50	.00	.00	5.50	.00	.00	.00	330.00	10
2	02/09/2018		TREVOR	TREVOR BERTELLI	6.50	.00	.00	6.50	.00	.00	.00	390.00	10
2	02/12/2018		TREVOR	TREVOR BERTELLI	8.00	.00	.00	8.00	.00	.00	.00	480.00	10
2	02/13/2018		TREVOR	TREVOR BERTELLI	8.00	.00	.00	8.00	.00	.00	.00	480.00	10
				Totals:	**42.00**	**.00**	**.00**	**42.00**	**.00**	**.00**	**.00**	**2520.00**	

THE UNIVERSITY OF IOWA

FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

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General Contractor WOODRUFF CONST. CO. Date Work Performed 2/5

Subcontractor ADVANCED ELECTRICAL Change Order Request No _____

Project Name M.R.F. WATER DAMAGE REPAIR Project Number #0744901

Description of Work WORKED ON RUNNING ELECTRICAL PIPING THRU ELEVATOR SHAFT TO ELECTRICAL RM.

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
BERTELL	ELEC		8	⊘					

Equipment and Material (attach Invoices)

Quantity	Description

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) _____

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April, 2007

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Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722

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Design & Construction

TIME AND MATERIAL FORM

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General Contractor WOODRUFF CONST. CO. Date Work Performed 2/7/2018

Subcontractor ADVANCED ELECTRICAL Change Order Request No _____

Project Name MLF WATER DAMAGE REPAIR Project Number # 0744901

Description of Work BELTELLI / Started work on Shaft/Pit

Called Jeremy from Schumacher and went over placement of Outlets & lights. He said they need to be up to Code + upstairs maybe

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
BELTELLI			8	2					

Equipment and Material (attach invoices)

Quantity	Description
~2	light fixtures (Returned)
2	light fixtures (4' strip flourescent)
1	Switch 20A
1	Cover
1	4" Box

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W27323/4-17

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722

THE UNIVERSITY OF IOWA

FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor Woodruff Const. Co. Date Work Performed 2/8/18

Subcontractor Advanced Electrical Change Order Request No _____

Project Name MRF Water Damage Repair Project Number #0744901

Description of Work Work on Elevator shaft. Jeremy from Schumacher wanted to start the elevator. (Unlocked my padlock)

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
T Bertelli			6	Ø					

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) X _____

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W27323/4-17

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 *Fax* 319-335-2722

THE UNIVERSITY OF IOWA

FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 2/9/18

Subcontractor ADVANCED ELECTRICAL Change Order Request No _____

Project Name M.R.F. WATER DAMAGE REPAIR Project Number #0744901

Description of Work BERTELLI / DISCONNECT FIRE SAFETY FIXTURES TO REPLACE CEILING TILES IN ELEVATOR LOBBIES (FLRS 1-5+LL) - finish lighting in elevator shaft.

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
BERTELLI			6 1/2						

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W27323/4-17

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722

THE UNIVERSITY OF IOWA

FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 2/12/18

Subcontractor ADVANCED ELECTRICAL Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number #0744901

Description of Work BERTELLI / Worked on Elevator Pit Patched Holes & Conduits. Traced Pit Circuit

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
BERTELLI	ELEC.		8						

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (If applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W27323/4-17

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722

THE UNIVERSITY OF IOWA

FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 2/13/18

Subcontractor ADVANCED ELECTRICAL Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number #0744901

Description of Work BERTELLI / Worked on Elevator Pit Finish Pulling Wire, Installing devices, & label

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
BERTELLI	ELEC.		8						

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W27323/4-17

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 *Fax* 319-335-2722

ADVANCED ELECTRIC
NON-LABOR COST

Posted Items Report

Job Number: 29306 Desc: REPAIR FLOOD DAMAGE AS DIRECTED Customer: WOODRUFF CONSTRUCTION

Material Items Sorted by Page Number

Page	Date	Invoice	Item #	Desc	Qty	UCost	ECost	Markup	UPrice	Charge	MC	Inv	PO
2	2018 02/05			AP S010114568.001 THE VAN METER COMPANY	1.00	188.03	188.03	.150000	216.23	216.23			
2	2018 02/05			AP S010115230.001 THE VAN METER COMPANY	1.00	109.65	109.65	.150000	126.10	126.10			
2	2018 02/06			AP S010117070.001 THE VAN METER COMPANY	1.00	3.39	3.39	.150000	3.90	3.90			
2	2018 02/09			AP S010114568.002 THE VAN METER COMPANY	1.00	72.50	72.50	.150000	83.38	83.38			
2	2018 02/09			AP S010114568.004 THE VAN METER COMPANY	1.00	-64.80	-64.80	.150000	-74.52	-74.52			
2	2018 02/09			AP S010114568.003 THE VAN METER COMPANY	1.00	25.43	25.43	.150000	29.24	29.24			
2	2018 02/09			AP S010126022.001 THE VAN METER COMPANY	1.00	10.81	10.81	.150000	12.43	12.43			
2	2018 02/14			AP S010127861.001 THE VAN METER COMPANY	1.00	16.03	16.03	.150000	18.43	18.43			
2	2018 02/14			AP S010117070.002 THE VAN METER COMPANY	1.00	-1.14	-1.14	.150000	-1.31	-1.31			
2	2018 02/14			AP S010115230.003 THE VAN METER COMPANY	1.00	-29.80	-29.80	.150000	-34.27	-34.27			
2	2018 02/14			AP S010115230.002 THE VAN METER COMPANY	1.00	-11.24	-11.24	.150000	-12.93	-12.93			
2	2018 02/14			AP S010114568.005 THE VAN METER COMPANY	1.00	-36.01	-36.01	.150000	-41.41	-41.41			
2	2018 02/15			AP S010127861.002 THE VAN METER COMPANY	1.00	-5.81	-5.81	.150000	-6.68	-6.68			
2	2018 02/16			AP S010129218.001 THE VAN METER COMPANY	1.00	59.53	59.53	.150000	68.46	68.46			
2	2018 02/21			AP S010099270.001 TAX ADJ THE VAN METER COMPANY	1.00	-.09	-.09	.000000	-.09	-.09			
2	2018 02/21			AP S010123025.001 THE VAN METER COMPANY	1.00	5.81	5.81	.000000	5.81	5.81			
2	2018 02/21			AP S010098503.001 TAX ADJ THE VAN METER COMPANY	1.00	-.32	-.32	.000000	-.32	-.32			
2	2018 02/22			AP 5312228-00 SALES TAX CRED 3E-CITY ELECTRIC SUP	1.00	-.19	-.19	.000000	-.19	-.19			
				Totals:	**18.00**	**341.78**	**341.78**		**392.26**	**392.26**			

see pg 87

INVOICE

VAN METER INC.
470 Ruppert Road
IOWA CITY IA 52246
319-339-0000 Fax 319-339-1816

www.vanmeterinc.com

INVOICE DATE	OUR INVOICE NUMBER
02/01/18	S010114568.001

Bill To#	Ship To#	Price Br	Ship Br
1711	93038	7	7

PLEASE REMIT PAYMENT TO	DUE DATE
850 32ND AVENUE SW CEDAR RAPIDS IA 52404-3913	04/01/18

BILL TO:

ADVANCED ELECTRICAL SERVICES
1233 GILBERT CT
IOWA CITY IA 52240-4510

SHIP TO:

ENROLLMENT TOKEN
SPZ LMS QFF

AES - #29306- UI MRF
1233 GILBERT COURT
IOWA CITY IA 52240-4510

YOUR PO/ORDER #	ORDERED BY	JOB/RELEASE #	YOUR ACCOUNT MANAGER
29306	TREVOR		Brad Meyers IC

ORDER WRITER	SHIP VIA	TERMS	ORDER DATE	SHIP DATE
Carter Valentine IC 3727	IPK IMMEDIATEPK	NET 60	02/01/18	02/01/18

ORDER QTY	SHIP QTY	DESCRIPTION	Unit Price/UM	Extension
8	8	RACO 2903 COMP CONNECT 3/4 TS EMT STL	38.320/c	3.07
8	8	RACO 2923 COMP COUPLING 3/4 TS EMT STL	41.550/c	3.32
2	2	P&S 2097-TRWRW SELF-TEST GFCI RECEP	21.228/E	42.46
1	1	P&S SS26 1G STN-STL BLOCK RCPT PLT	1.110/E	1.11
1	1	P&S SS7 1G STN-STL SGL RCPT PLT	1.150/E	1.15
1	1	P&S 5351-W WHT SGL RCPT-NEMA5-20R	5.800/E	5.80
6	6	B-LINE B2002ZN(3/4) PIPE AND CONDUIT CLAMP, THINWALL (EMT), 3/4-IN., ZINC PLATED	87.060/c	5.22
6	6	MINRLAC 1B 3/4 STL COND HGR W/BOLT	33.841/c	2.03
2	2	COOPER APS-NS232 STRIP ALL PRO 4FT/2-LAMP T8(2YR BALLAST WARRANTY) * Sub for : METALUX SSF-232-UNV-EB81-	32.400/E	64.80
4	4	453753 PHIL F32T8/HL741/ALTO 30PK	1.535/E	6.14
100	100	CONDUIT 3/4 EMT	43.379/c	43.38
1	1	RACO 5386-0 WP 8X 1G (3)3/4 OTLETS GRY	672.175/c	6.72
10	10	RACO 2902 COMP CONNECT 1/2 TS EMT STL	28.300/c	2.83

Subtotal	$188.03
Shipping & Handling	
Sales Tax	$0.00
Amount Due	$188.03

Invoice is due by 04/01/18.

Invoice Questions?
Call Carter Valentine at
319-339-0000

02-01-2018 09:07:34 AM
S010114568.001

TREVOR

Confirmation of Delivery

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For Return Policy information and Return Request Forms visit www.vanmeterinc.com and go to Online Ordering and then Return Policy or Returns Form.

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VAN METER INC.
470 Ruppert Road
IOWA CITY IA 52246
319-339-0000 Fax 319-339-1816

www.vanmeterinc.com

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INVOICE DATE	OUR INVOICE NUMBER
02/01/18	S010115230.001

Bill To#	Ship To#	Price Br.	Ship Br.
1711	93038	7	7

PLEASE REMIT PAYMENT TO:	DUE DATE
350 3[illegible]ENUE SW CEDAR RAPIDS IA 52404-3913	04/01/18

BILL TO:

ADVANCED ELECTRICAL SERVICES
1233 GILBERT CT
IOWA CITY IA 52240-4510

ENROLLMENT TOKEN
SPZ LMS QFF

SHIP TO:

AES - #29306- UI MRF
1233 GILBERT COURT
IOWA CITY IA 52240-4510

YOUR PO/ORDER #	ORDERED BY	JOB/RELEASE #	YOUR ACCOUNT MANAGER
29306	TREVOR		Brad Meyers IC

ORDER WRITER	SHIP VIA	TERMS	ORDER DATE	SHIP DATE
Carter Valentine IC 3727	IPK IMMEDIATEPK	NET-60	02/01/18	02/01/18

ORDER QTY	SHIP QTY	DESCRIPTION	Unit Price/UM	Extension
10	10	B-LINE B22SHGALV10 SLOTTED CHANNEL, 1 5/8-I . X 1 5/8-IN., 9/16-IN X 1-1/8-IN. SLOTTED HOLES, 12 GA	149.350/c	14.94
6	6	B-LINE B104ZN FOUR HOLE CORNER ANGLE, ZINC PLATED	295.880/c	17.75
4	4	B-LINE B101ZN TWO HOLE CORNER ANGLE, ZINC PLATED	145.570/c	5.82
20	20	B-LINE TN228ZN(38) TWIRL-NUT, 3/8-IN.-16 THREAD, 3/8-IN. NUT	188.700/c	37.74
100	100	CULLY 40743J 3/8 X 1-1/4 FENDER WASHER ZP	6.132/c	6.13
100	100	CULLY 55416J 3/8-16 X 1 HEX HEAD BOLT ZP	9.988/c	9.97
100	100	CULLY 55408J 3/8-16 X 1/2 HEX HEAD BOLT ZP	11.239/c	11.24
100	100	CULLY 40135J 3/8-16 HEX NUT ZP	3.328/c	3.33
100	100	CULLY 40535J 3/8 MED SPLIT LOCKWASHER ZP	2.733/c	2.73

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Contact Marie Anderson at manderson@vanmeterinc.com or 319-368-2828 for enrollment information.

If you are already on Invoice Gateway and/or want to pay your bills on-line and manage multiple vendors??
Visit the Invoice Central site - www.invoicecentral.com

Invoice is due by 04/01/18.

Invoice Questions?
Call Carter Valentine at
319-339-0000

Subtotal	$109.65
Shipping & Handling	
Sales Tax	$0.00
Amount Due	$109.65

All claims for shortages or errors must be made at once. Past due invoices may be subject to a 1.50% late charge. Our company does not manufacture the goods it sells and makes no express warranties thereon. It also disclaims all implied warranty of merchantability or fitness for a particular use. Except as prohibited by law, you are responsible for payment of all fees, costs, and expenses, including but not limited to, attorney fees, expert witness fees, and deposition expenses incurred to collect all amounts due from you. We accept credit card payments for immediate pay only and our credit terms are NET.

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02-01-2018 11:48:39 AM
S010115230.001

TREVOR

TREVOR

Confirmation of Delivery

INVOICE

VAN METER INC.
470 Ruppert Road
IOWA CITY IA 52246
319-339-0000 Fax 319-339-1816

www.vanmeterinc.com

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INVOICE DATE	OUR INVOICE NUMBER
02/02/18	S010117070.001

Bill To#	Ship To#	Price Br.	Ship Br.
1711	93038	7	7

PLEASE REMIT PAYMENT TO	DUE DATE
850 32ND AVENUE SW CEDAR RAPIDS IA 52404-3913	04/02/18

32ND AVE

BILL TO:

ADVANCED ELECTRICAL SERVICES
1233 GILBERT CT
IOWA CITY IA 52240-4510

SHIP TO:

AES - #29306- UI MRF
1233 GILBERT COURT
IOWA CITY IA 52240-4510

ENROLLMENT TOKEN
SPZ LMS QFF

YOUR PO/ORDER #	ORDERED BY	JOB/RELEASE #	YOUR ACCOUNT MANAGER
29306	TREVOR		Brad Meyers IC

ORDER WRITER	SHIP VIA	TERMS	ORDER DATE	SHIP DATE
Carter Valentine 15512	IPK IMMEDIATEPK	NET 60	02/02/18	02/02/18

ORDER QTY.	SHIP QTY.	DESCRIPTION	Unit Price/UM	Extension
1	1	RACO 232 4 SQUARE BOX 2-1/8	104.880/c	1.05
1	1	RACO 808C CC COVER 4SQ RSD1/2 GFCI RECP	119.760/c	1.20
1	1	RACO 801C CC COVER 4SQ RSD1 1-13/32DP	114.420/c	1.14

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Contact Marie Anderson at manderson@vanmeterinc.com or 319-368-2828 for enrollment information.

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Invoice is due by 04/02/18.

Invoice Questions?
Call Carter Valentine at
319-339-0000

Subtotal	$3.39
Shipping & Handling	
Sales Tax	$0.00
Amount Due	$3.39

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02-02-2018 09:11:06 AM
S010117070.001

Trevor

TREVOR

Confirmation of Delivery

PICK TICKET

VAN METER
A 100% EMPLOYEE-OWNED COMPANY
470 Ruppert Road
IOWA CITY, IA 52246
Phone 319-339-0000 Fax 319-339-1816

ORDER DATE	ORDER NUMBER
02/07/18	S010114568.002
PO NUMBER	PAGE NO.
29306	1 of 1

11:20:00 07 FEB 2018

SOLD TO:
ADVANCED ELECTRICAL SERVICES
1233 GILBERT CT
IOWA CITY, IA 52240-4510
Phone 319-351-6452

SHIP TO:
AES - #29306- UI MRF
1233 GILBERT COURT
IOWA CITY, IA 52240-4510

ORDERED BY	ORDER DATE	SHIP DATE	SHIP VIA	FRT IN	FRT OUT
TREVOR	02/07/18	02/07/18	P07 PPPU IC	1	0

WRITER	JOB NAME	ACCOUNT NUMBER	PRC BR	SHP BR	
Carter Valen		93038	7	7	

LOCATION	ORDER QTY	SHIP QTY	DESCRIPTION	UNIT PRICE	EXT. PRICE
H180601D	2ea	2ea	METALUX SSF-232-UNV-EB81-U STRIP	36.250	72.50
Tote: 1			Picker: QUANDAHS Loc: IC-A1		
Packages:	PCS:		PAL: BNDL: WIRE:		
			Order Total		72.50
			Invoice Amount		72.50
			Amount Due		72.50

Picker/Checker:_____ Ship by:_____ No. Pkg:_____ Charges:_____

Customer Signature: _____ Date: ___/___/___

Your signature accepts receipt of this product.
Please see your inside salesperson for return policy.

Printed By: QUANDAHS
** Reprint ** Reprint ** Reprint **

CREDIT MEMO

VAN METER INC.
470 Ruppert Road
IOWA CITY IA 52246
319-339-0000 Fax 319-339-1816

www.vanmeterinc.com

VAN METER
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INVOICE DATE	OUR INVOICE NUMBER
02/07/18	S010114568.004

Bill To#	Ship To#	Price Br	Ship Br
1711	93038	7	7

PLEASE REMIT PAYMENT TO	DUE DATE
850 32ND AVENUE SW CEDAR RAPIDS IA 52404-3913	04/07/18

BILL TO:

ADVANCED ELECTRICAL SERVICES
1233 GILBERT CT
IOWA CITY IA 52240-4510

ENROLLMENT TOKEN
SPZ LMS QFF

SHIP TO:

AES - #29306- UI MRF
1233 GILBERT COURT
IOWA CITY IA 52240-4510

YOUR PO/ORDER #	ORDERED BY	JOB/RELEASE #	YOUR ACCOUNT MANAGER
29306	TREVOR		Brad Meyers IC

ORDER WRITER	SHIP VIA	TERMS	ORDER DATE	SHIP DATE
Carter Valentine IC 3727	CREDIT	NET 60	02/07/18	02/07/18

ORDER QTY	SHIP QTY	DESCRIPTION	Unit Price/UM	Extension
-2	-2	COOPER APS-NS232 STRIP ALL PRO 4FT/2-LAMP T8(2YR BALLAST WARRANTY) ** Original Sale : S010114568.001 ** ** Original Ship Date: 02/01/2018 ** Cus PO: 29306 ** 1 Customer Surplus Return I	32.400/E	-64.80

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Invoice Questions?
Call Carter Valentine at
319-339-0000

Subtotal	-$64.80
Shipping & Handling	
Sales Tax	$0.00
Amount Due	-$64.80

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INVOICE

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470 Ruppert Road
IOWA CITY IA 52246
319-339-0000 Fax 319-339-1816

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INVOICE DATE	OUR INVOICE NUMBER		
02/07/18	S010123025.001		
Bill To#	Ship To#	Price Br	Ship Br
1711	1711	7	7
PLEASE REMIT PAYMENT TO		DUE DATE	
850 32ND AVENUE SW CEDAR RAPIDS IA 52404-3913		04/07/18	

BILL TO:

ADVANCED ELECTRICAL SERVICES
1233 GILBERT CT
IOWA CITY IA 52240-4510

SHIP TO:

ENROLLMENT TOKEN
SPZ LMS QFF

ADVANCED ELECTRICAL SERVICES
1233 GILBERT CT
IOWA CITY IA 52240-4510

YOUR PO/ORDER #	ORDERED BY	JOB/RELEASE #	YOUR ACCOUNT MANAGER	
29306	TREVOR		Brad Meyers IC	
ORDER WRITER	SHIP VIA	TERMS	ORDER DATE	SHIP DATE
Carter Valentine IC 3727	IPK IMMEDIATEPK	NET 60	02/07/18	02/07/18

ORDER QTY	SHIP QTY	DESCRIPTION	Unit Price/UM	Extension
1	1	RACO 187 4 SQUARE EXTENSION 1-1/2D 1/2-3/4 KO	276.720/c	2.77
1	1	RACO 800C CC COVER 4SQ RSD1 1TOG SW	103.450/c	1.03
1	1	P&S CS20AC1-W 20A 120/277 VAC SW	2.010/E	2.01

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Invoice is due by 04/07/18.

Invoice Questions?
Call Carter Valentine at
319-339-0000

02-07-2018 03:13:32 PM
S010123025.001

Trevor

TREVOR

Subtotal	$5.81
Shipping & Handling	
Sales Tax	$0.35
Amount Due	$6.16

Confirmation of Delivery

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INVOICE

VAN METER INC.
470 Ruppert Road
IOWA CITY IA 52246
319-339-0000 Fax 319-339-1816

www.vanmeterinc.com

VAN METER
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INVOICE DATE	OUR INVOICE NUMBER
02/09/18	S010114568.003

Bill To#	Ship To#	Price Br.	Ship Br.
1711	93038	7	10

PLEASE REMIT PAYMENT TO:	DUE DATE
850 32ND AVENUE SW CEDAR RAPIDS IA 52404-3913	04/09/18

BILL TO:

ADVANCED ELECTRICAL SERVICES
1233 GILBERT CT
IOWA CITY IA 52240-4510

SHIP TO:

AES - #29306- UI MRF
1233 GILBERT COURT
IOWA CITY IA 52240-4510

ENROLLMENT TOKEN
SPZ LMS QFF

YOUR PO/ORDER #	ORDERED BY	JOB/RELEASE #	YOUR ACCOUNT MANAGER
29306	TREVOR		Brad Meyers IC

ORDER WRITER	SHIP VIA	TERMS	ORDER DATE	SHIP DATE
Carter Valentine IC 3727	P07 PPPU IC	NET 60	02/07/18	02/09/18

ORDER QTY	SHIP QTY	DESCRIPTION	Unit Price/UM	Extension
2	2	METALUX WG/SSF-4FT-B	12.714/E	25.43

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Invoice is due by 04/09/18.

Invoice Questions?
Call Carter Valentine at
319-339-0000

02-09-2018 01:18:52 PM

Trevor

TREVOR

Subtotal	**$25.43**
Shipping & Handling	
Sales Tax	**$0.00**
Amount Due	**$25.43**

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Confirmation of Delivery

INVOICE

VAN METER INC.
470 Ruppert Road
IOWA CITY IA 52246
319-339-0000 Fax 319-339-1816

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INVOICE DATE		OUR INVOICE NUMBER	
02/09/18		S010126022.001	
Bill To#	Ship To#	Price Br.	Ship Br
1711	93038	7	7
PLEASE REMIT PAYMENT TO:		DUE DATE	
850 32ND AVENUE SW CEDAR RAPIDS IA 52404-3913		04/09/18	

BILL TO:

ADVANCED ELECTRICAL SERVICES
1233 GILBERT CT
IOWA CITY IA 52240-4510

SHIP TO:

ENROLLMENT TOKEN
SPZ LMS QFF

AES - #29306- UI MRF
1233 GILBERT COURT
IOWA CITY IA 52240-4510

YOUR P.O./ORDER #	ORDERED BY	JOB/RELEASE #	YOUR ACCOUNT MANAGER	
29306	TREVOR		Brad Meyers IC	
ORDER WRITER	SHIP VIA	TERMS	ORDER DATE	SHIP DATE
Eugene Marquart IC 3711	P07 PPPLI IC	NET 60	02/09/18	02/09/18

ORDER QTY	SHIP QTY	DESCRIPTION	Unit Price/UM	Extension
4	4	MCGILL 2295 SLEEVE FOR FO32T-8 LAMP WITH 2 END CAPS PER SLEEVE	2.703/E	10.81

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Invoice Questions?
Call Eugene Marquart at
319-339-0000

02-09-2018 01:10:52 PM

Trevor

TREVOR

Subtotal	**$10.81**
Shipping & Handling	
Sales Tax	**$0.00**
Amount Due	**$10.81**

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INVOICE DATE		OUR INVOICE NUMBER	
02/12/18		S010127861.001	
Bill To#	Ship To#	Price Br	Ship Br
1711	93038	7	7
PLEASE REMIT PAYMENT TO:		DUE DATE	
850 32ND AVENUE SW CEDAR RAPIDS IA 52404-3913		04/12/18	

BILL TO:

ADVANCED ELECTRICAL SERVICES
1233 GILBERT CT
IOWA CITY IA 52240-4510

SHIP TO:

ENROLLMENT TOKEN
SPZ LMS QFF

AES - #29306- UI MRF
1233 GILBERT COURT
IOWA CITY IA 52240-4510

YOUR PO/ORDER #	ORDERED BY	JOB/RELEASE #	YOUR ACCOUNT MANAGER	
29306	TREVOR		Brad Meyers IC	
ORDER WRITER	SHIP VIA	TERMS	ORDER DATE	SHIP DATE
Carter Valentine IC 3727	IPK IMMEDIATEPK	NET 60	02/12/18	02/12/18

ORDER QTY	SHIP QTY	DESCRIPTION	Unit Price/UM	Extension
1	1	RACO 187 4 SQUARE EXTENSION 1-1/2D 1/2-3/4 KO	276.720/c	2.77
1	1	RACO 800C CC COVER 4SQ RSD1 1TOG SW	103.450/c	1.03
2	2	RACO 2903 COMP CONNECT 3/4 TS EMT STL	38.320/c	0.77
3	3	RACO 752 SQUARE COVER 4" FLAT BLANK	26.990/c	0.81
2	2	3M MPP+7INx7IN MOLDABLE PUTTY 7IN X 7IN X 1/8IN PAD	3.717/E	7.43
1	1	P&S CS20AC1-W 20A 120/277 VAC SW	2.010/E	2.01
1	1	RACO 5173-0 WP CVR 1G VRT DEVMT BLANK GRY	120.506/c	1.21

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02-12-2018 03:29:35 PM
S010127861.001

Trevor

TREVOR

Confirmation of Delivery

Subtotal	**$16.03**
Shipping & Handling	
Sales Tax	**$0.00**
Amount Due	**$16.03**

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INVOICE DATE		OUR INVOICE NUMBER	
02/13/18		S010117070.002	
Bill To#	Ship To#	Price Br	Ship Br
1711	93038	7	7
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850 32ND AVENUE SW CEDAR RAPIDS IA 52404-3913		04/13/18	

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SPZ LMS QFF

AES - #29306- UI MRF
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IOWA CITY IA 52240-4510

YOUR PO/ORDER #	ORDERED BY	JOB/RELEASE #	YOUR ACCOUNT MANAGER	
29306	TREVOR		Brad Meyers IC	
ORDER WRITER	SHIP VIA	TERMS	ORDER DATE	SHIP DATE
Carter Valentine IC 3727	CREDIT	NET 60	02/13/18	02/13/18

ORDER QTY	SHIP QTY	DESCRIPTION	Unit Price/UM	Extension
-1	-1	RACO 801C CC COVER 4SQ RSD1 1-13/32DP ** Original Sale : S010117070.001 ** ** Original Ship Date: 02/02/2018 ** Cus PO: 29306 ** 1 Customer Surplus Return I	114.420/c	-1.14

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Subtotal	**-$1.14**
Shipping & Handling	
Sales Tax	**$0.00**
Amount Due	**-$1.14**

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INVOICE DATE		OUR INVOICE NUMBER	
02/13/18		S010115230.003	
Bill To#	Ship To#	Price Br	Ship Br
1711	93038	7	7
PLEASE REMIT PAYMENT TO:		DUE DATE	
850 32ND AVENUE SW CEDAR RAPIDS IA 52404-3913		04/13/18	

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YOUR PO/ORDER #	ORDERED BY	JOB/RELEASE #	YOUR ACCOUNT MANAGER	
29306	TREVOR		Brad Meyers IC	
ORDER WRITER	SHIP VIA	TERMS	ORDER DATE	SHIP DATE
Carter Valentine IC 3727	CREDIT	NET 60	02/13/18	02/13/18

ORDER QTY	SHIP QTY	DESCRIPTION	Unit Price/UM	Extension
-4	-4	B-LINE B101ZN TWO HOLE CORNER ANGLE, ZINC PLATED ** Original Sale : S010115230.001 ** ** Original Ship Date: 02/01/2018 ** Cus PO: 29306 ** 1 Customer Surplus Return I	145.570/c	-5.82
-3	-3	B-LINE B104ZN FOUR HOLE CORNER ANGLE, ZINC PLATED ** Original Sale : S010115230.001 ** ** Original Ship Date: 02/01/2018 ** Cus PO: 29306 ** 1 Customer Surplus Return I	295.880/c	-8.88
-8	-8	B-LINE TN228ZN(38) TWIRL-NUT, 3/8-IN.-16 THREAD, 3/8-IN. NUT ** Original Sale : S010115230.001 ** ** Original Ship Date: 02/01/2018 ** Cus PO: 29306 ** 1 Customer Surplus Return I	188.700/c	-15.10

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Subtotal	-$29.80
Shipping & Handling	
Sales Tax	$0.00
Amount Due	-$29.80

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INVOICE DATE	OUR INVOICE NUMBER
02/13/18	S010115230.002

Bill To#	Ship To#	Price Br	Ship Br
1711	93038	7	7

PLEASE REMIT PAYMENT TO:	DUE DATE
850 32ND AVENUE SW CEDAR RAPIDS IA 52404-3913	04/13/18

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IOWA CITY IA 52240-4510

ENROLLMENT TOKEN
SPZ LMS QFF

SHIP TO:

AES - #29306- UI MRF
1233 GILBERT COURT
IOWA CITY IA 52240-4510

YOUR PO/ORDER #	ORDERED BY	JOB/RELEASE #	YOUR ACCOUNT MANAGER	
29306	TREVOR		Brad Meyers IC	
ORDER WRITER	**SHIP VIA**	**TERMS**	**ORDER DATE**	**SHIP DATE**
Carter Valentine IC 3727	CREDIT	NET 60	02/13/18	02/13/18

ORDER QTY	SHIP QTY	DESCRIPTION	Unit Price/UM	Extension
-100	-100	CULLY 55408J 3/8-16 X 1/2 HEX HEAD BOLT ZP ** Original Sale : S010115230.001 ** ** Original Ship Date: 02/01/2018 ** Cus PO: 29306 ** 1 Customer Surplus Return !	11.239/c	-11.24

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Subtotal	**-$11.24**
Shipping & Handling	
Sales Tax	**$0.00**
Amount Due	**-$11.24**

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INVOICE DATE	OUR INVOICE NUMBER		
02/13/18	S010114568.005		
Bill To#	Ship To#	Price Br	Ship Br
1711	93038	7	7
PLEASE REMIT PAYMENT TO:		DUE DATE	
850 32ND AVENUE SW CEDAR RAPIDS IA 52404-3913		04/13/18	

BILL TO:

ADVANCED ELECTRICAL SERVICES
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IOWA CITY IA 52240-4510

SHIP TO:

ENROLLMENT TOKEN
SPZ LMS QFF

AES - #29306- UI MRF
1233 GILBERT COURT
IOWA CITY IA 52240-4510

YOUR PO/ORDER #	ORDERED BY	JOB/RELEASE #	YOUR ACCOUNT MANAGER	
29306	TREVOR		Brad Meyers IC	
ORDER WRITER	SHIP VIA	TERMS	ORDER DATE	SHIP DATE
Carter Valentine IC 3727	CREDIT	NET 60	02/13/18	02/13/18

ORDER QTY	SHIP QTY	DESCRIPTION	Unit Price/UM	Extension
-1	-1	P&S 2097-TRWRW SELF-TEST GFCI RECEP ** Original Sale : S010114568.001 ** ** Original Ship Date: 02/01/2018 ** Cus PO: 29306 ** 1 Customer Surplus Return I	21.228/E	-21.23
-1	-1	RACO 5386-0 WP BX 1G (3)3/4 OTLETS GRY ** Original Sale : S010114568.001 ** ** Original Ship Date: 02/01/2018 ** Cus PO: 29306 ** 1 Customer Surplus Return I	672.175/c	-6.72
-1	-1	P&S SS26 1G STN-STL BLOCK RCPT PLT ** Original Sale : S010114568.001 ** ** Original Ship Date: 02/01/2018 ** Cus PO: 29306 ** 1 Customer Surplus Return I	1.110/E	-1.11
-1	-1	P&S SS7 1G STN-STL SGL RCPT PLT ** Original Sale : S010114568.001 ** ** Original Ship Date: 02/01/2018 ** Cus PO: 29306 ** 1 Customer Surplus Return I	1.150/E	-1.15
-1	-1	P&S 5351-W WHT SGL RCPT-NEMA5-20R ** Original Sale : S010114568.001 ** ** Original Ship Date: 02/01/2018 ** Cus PO: 29306 ** 1 Customer Surplus Return I	5.800/E	-5.80

Invoice Questions?
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319-339-0000

Subtotal	**-$36.01**
Shipping & Handling	
Sales Tax	**$0.00**
Amount Due	**-$36.01**

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INVOICE DATE		OUR INVOICE NUMBER	
02/13/18		S010127861.002	
Bill To#	Ship To#	Price Br.	Ship Br.
1711	93038	7	7
PLEASE REMIT PAYMENT TO:		DUE DATE	
850 32ND AVENUE SW CEDAR RAPIDS IA 52404-3913		04/13/18	

BILL TO:

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1233 GILBERT CT
IOWA CITY IA 52240-4510

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SPZ LMS QFF

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1233 GILBERT COURT
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YOUR PO/ORDER #	ORDERED BY	JOB/RELEASE #	YOUR ACCOUNT MANAGER	
29306	TREVOR		Brad Meyers IC	
ORDER WRITER	SHIP VIA	TERMS	ORDER DATE	SHIP DATE
Carter Valentine IC 3727	CREDIT	NET 60	02/13/18	02/13/18

ORDER QTY	SHIP QTY	DESCRIPTION	Unit Price/UM	Extension
-1	-1	RACO 800C CC COVER 4SQ RSD1 1TOG SW ** Original Sale : S010127861.001 ** ** Original Ship Date: 02/12/2018 ** Cus PO: 29306 ** 1 Customer Surplus Return I	103.450/c	-1.03
-1	-1	RACO 187 4 SQUARE EXTENSION 1-1/2D 1/2-3/4 KO ** Original Sale : S010127861.001 ** ** Original Ship Date: 02/12/2018 ** Cus PO: 29306 ** 1 Customer Surplus Return I	276.720/c	-2.77
-1	-1	P&S CS20AC1-W 20A 120/277 VAC SW ** Original Sale : S010127861.001 ** ** Original Ship Date: 02/12/2018 ** Cus PO: 29306 ** 1 Customer Surplus Return I	2.010/E	-2.01

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Subtotal	**-$5.81**
Shipping & Handling	
Sales Tax	**$0.00**
Amount Due	**-$5.81**

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INVOICE DATE		OUR INVOICE NUMBER	
02/14/18		S010129218.001	
Bill To#	Ship To#	Price Br	Ship Br
1711	93038	7	7
PLEASE REMIT PAYMENT TO:		DUE DATE	
850 32ND AVENUE SW CEDAR RAPIDS IA 52404-3913		04/14/18	

BILL TO:

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IOWA CITY IA 52240-4510

ENROLLMENT TOKEN
SPZ LMS QFF

SHIP TO:

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IOWA CITY IA 52240-4510

YOUR PO/ORDER #	ORDERED BY	JOB/RELEASE #	YOUR ACCOUNT MANAGER	
29306	TREVOR		Brad Meyers IC	
ORDER WRITER	SHIP VIA	TERMS	ORDER DATE	SHIP DATE
Carter Valentine IC 3727	IPK IMMEDIATEPK	NET 60	02/13/18	02/14/18

ORDER QTY	SHIP QTY	DESCRIPTION	Unit Price/UM	Extension
500	500	CUTHHNSTR 12 WHT 500'	119.052/m	59.53

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02-14-2018 08:35:28 AM
S010129218.001

Trevor

TREVOR

Confirmation of Delivery

Subtotal	$59.53
Shipping & Handling	
Sales Tax	$0.00
Amount Due	$59.53

** Credit Memo **

(7) VAN METER INC.
470 Ruppert Road
IOWA CITY, IA 52246
319-339-0000 Fax 319-339-1816

INVOICE DATE	INVOICE NUMBER
02/13/18	S010127861.002

REMIT TO:
850 32ND AVE SW
CEDAR RAPIDS, IA 52404-3913

PAGE NO: 1

BILL TO:
ADVANCED ELECTRICAL SERVICES
1233 GILBERT CT
IOWA CITY, IA 52240-4510

SHIP TO: **Prc Br: 7 Ship Br: 7**
AES - #29306- UI MRF
1233 GILBERT COURT
IOWA CITY, IA 52240-4510

SALESPERSON	CUSTOMER ORDER NUMBER	RELEASE NUMBER	ORDERED BY	CUSTOMER NUMBER
Brad Meyers IC	29306		TREVOR	93038

WRITER	SHIP VIA	TERMS	SHIP DATE	ORDER DATE
Carter Valentine IC	CREDIT	NET 60	02/13/18	02/13/18

DESCRIPTION	PACK QTY	SHIP QTY	UNIT PRICE	EXTENSION
Invoice Questions? Call 319-339-0000				
RACO 800C CC COVER 4SQ RSD1 1TOG SW ** Original Sale : S010127861.001 ** ** Original Ship Date: 02/12/2018 ** Cus PO: 29306 ** 1 Customer Surplus Return I	-1	-1	103.45c	-1.03
RACO 187 4 SQUARE EXTENSION 1-1/2D 1/2-3/4 KO ** Original Sale : S010127861.001 ** ** Original Ship Date: 02/12/2018 ** Cus PO: 29306 ** 1 Customer Surplus Return I	-1	-1	276.72c	-2.77
P&S CS20AC1-W 20A 120/277 VAC SW ** Original Sale : S010127861.001 ** ** Original Ship Date: 02/12/2018 ** Cus PO: 29306 ** 1 Customer Surplus Return I	-1	-1	2.01e	-2.01
** Reprint ** Reprint ** Reprint **		CUSTOMER	CREDIT	

All claims for shortage or errors must be made at once, returns require written authorization and are subject to handling charges. Special orders are non-returnable. Past due invoices may be subject to 1.50% late charge. No credit will be allowed for goods returned without prior consent. 15% restocking on stock material. Factory acceptance and terms will govern amount of credit on non-stock material. Our company does not manufacture the goods it sells and makes no express warranties thereon. It also disclaims all implied warranty of merchantability or fitness for a particular use. Except as prohibited by law, you are responsible for payment of all fees, cost, and expenses, including but not limited to, attorney fees, expert witness fees, and deposition expenses incurred to collect all amounts due from you.

For complete terms and conditions and SDS Compliance regulations please go to https://www.vanmeterinc.com/terms-conditions.html

Subtotal	-5.81
S&H CHGS	0.00
Sales Tax	0.00
Amount Due	-5.81

AP/PO PeopleSoft Web Applications

Your path: Home > Payment

User options | Help

Payment details for voucher: 82880510

Voucher ID	Vendor ID	Remit LOC	Vendor Name	Gross Voucher Amt.	Payment Handling Code
82880510	0000515030	002	Woodruff Constuction LLC	$79,174.06	AC

Payment Status	Payment Information	Invoice #	Invoice Date	Remit to	Amt From Voucher
PAID	ACH:564805 Dt: 03/30/2018 Amt: $79,174.06	0744901-002	03/26/2018	Detail	$79,174.06

New Payment Search
AP-PO Web Applications Home Page
Self-Service

(WALTERSC) Logoff

Accounts Payable / Purchasing is a department in the Finance and Operations organization.
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Please direct inquires regarding using this application to acntpay@uiowa.edu

THE UNIVERSITY OF IOWA

CONTRACTOR PAY APPLICATION REQUEST

Application/Invoice Date: 04/10/2018
Application No.: 003-R001
Invoice No.: 0744901-003
Contract #: CT8279
Payment terms: Net Zero

To:
University of Iowa
Design & Construction
200 USB
Iowa City, IA 52242

From Contractor:
Woodruff Construction, LLC
1890 Kountry Lane
Fort Dodge, IA 50501

Project Title and Number:
Medical Research Facility - Emergency Pipe Repair and Remediation
Project # 0744901

PAY APPLICATION PERIOD FROM: 03/03/2018 **TO:** 04/06/2018

1. ORIGINAL CONTRACT SUM:			$ 379,000.00	
Change Orders Summary	ADDITIONS	DEDUCTIONS		
Total changes approved in previous months by Owner	0.00	0.00		
Total approved this month	0.00	0.00		
TOTALS	0.00	0.00		
2. NET CHANGE BY CHANGE ORDERS:			$ 0.00	
3. CONTRACT SUM TO DATE: (Line 1 + 2)			$ 379,000.00	
4. TOTAL COMPLETED & STORED TO DATE:			$ 147,108.52	(39%)
5. RETAINAGE: (Completed Word & Stored Material)			$ 0.00	
6. TOTAL EARNED LESS RETAINANGE: (Line 4 less Line 5 Total)			$ 147,108.52	
7. LESS PREVIOUS CERTIFICATES FOR PAYMENT: (Line 6 from prior Certificate)			$ 117,127.42	
8. CURRENT PAYMENT DUE:			**$ 29,981.10**	
9. BALANCE TO FINISH, INCLUDING RETAINAGE: (Line 3 less Line 6)			$ 231,891.48	

4/13/18

GROUP 228486
82892308

FACILITIES MANAGEMENT
Design & Construction

WOODRUFF CONSTRUCTION, LLC

1890 Kountry Lane
Fort Dodge, Iowa 50501
Phone (515) 576-1118 Fax (515) 955-2170

501 Greenfield Drive
Tiffin, Iowa 52340
Phone (319) 545-2410 Fax (319) 545-2411

4/6/2018

Danial Cassidy
UI-FM – D&C.

RE: MRF Water Damage – Pay Application Summary

SUBJ: **Pay App - 003**

Dan,

For all the work from period 3/5/2018 to 4/6/2018The total amount is $29,981.10 . Labor and material cost documents are enclosed for review.

If you require additional clarification, please contact me. Thank you for your prompt response.

Sincerely,
WOODRUFF CONSTRUCTION, LLC

Leon Zhang
Assistant Project Manager

COST ANALYSIS **MRF Water Damage T&M**

Period: 3/5/2018 to 4/6/2018
Pay App - 03

TOTAL WOODRUFF LABOR COST			= $	25,291.02
TOTAL WOODRUFF MATERIAL COST			= $	384.87
	SUBTOTAL		= $	25,675.89
plus OH&P @	15% = $	3,851	= $	29,527.27
TOTAL SUBCONTRACT COST			= $	432.22
plus OH&P @	5% = $	21.61	= $	453.83

TOTAL PRICE FOR THE PERIOD $ 29,981.10

COST ANALYSIS **MRF Water Damage T&M**

Pay App - 03 Period: 5-Mar-18 to 6-Apr-18

	LABOR CLASSIFICATION/ MATERIAL	QUANTITY	UNIT	UNIT LABOR	UNIT MAT'L	UNIT SUBCON	LABOR	MATERIAL	SUBCON	TOTAL
	WOODRUFF WORK									
	LABOR									
	Mark Toth - Super	8	mh	$ 76.69			$ 613.52			$ 613.52
	Memuray	8	mh	$ 55.55			$ 444.40			$ 444.40
	Farmer	8	mh	$ 55.55			$ 444.40			$ 444.40
5-Mar	Mendoza	8	mh	$ 55.55			$ 444.40			$ 444.40
	Mark Toth - Super	8	mh	$ 55.55			$ 444.40			$ 444.40
	Mendoza	8	mh	$ 55.55			$ 444.40			$ 444.40
	Memuray	8	mh	$ 55.55			$ 444.40			$ 444.40

	Farmer	8	mh	$ 55.55			$ 444.40			$ 444.40
	Gallegoes	8	mh	$ 55.55			$ 444.40			$ 444.40
6-Mar	Botherbaugh	8	mh	$ 55.55			$ 444.40			$ 444.40
	Mark Toth - Super	8	mh	$ 76.69			$ 613.52			$ 613.52
	Memuray	8	mh	$ 55.55			$ 444.40			$ 444.40
7-Mar	Mendoza	8	mh	$ 55.55			$ 444.40			$ 444.40
	Gallegoes	8	mh	$ 55.55			$ 444.40			$ 444.40
	Botherbaugh	8	mh	$ 55.55			$ 444.40			$ 444.40
	Mendoza	8	mh	$ 55.55			$ 444.40			$ 444.40
	Memuray	8	mh	$ 55.55			$ 444.40			$ 444.40
8-Mar	Farmer	8	mh	$ 55.55			$ 444.40			$ 444.40
	Gallegoes	1	mh	$ 55.55			$ 55.55			$ 55.55
	Botherbaugh	1	mh	$ 55.55			$ 55.55			$ 55.55
	Mark Toth - Super	8	mh	$ 76.69			$ 613.52			$ 613.52
9-Mar	Mendoza	8	mh	$ 55.55			$ 444.40			$ 444.40
	Memuray	8	mh	$ 55.55			$ 444.40			$ 444.40
	Farmer	8	mh	$ 55.55			$ 444.40			$ 444.40
	Mark Toth - Super	8	mh	$ 76.69			$ 613.52			$ 613.52
12-Mar	Mendoza	8	mh	$ 55.55			$ 444.40			$ 444.40
	Farmer	8	mh	$ 55.55			$ 444.40			$ 444.40
	Mark Toth - Super	8	mh	$ 76.69			$ 613.52			$ 613.52
13-Mar	Mendoza	8	mh	$ 55.55			$ 444.40			$ 444.40
	Farmer	8	mh	$ 55.55			$ 444.40			$ 444.40
	Memuray	8	mh	$ 55.55			$ 444.40			$ 444.40
	Mark Toth - Super	8	mh	$ 76.69			$ 613.52			$ 613.52
14-Mar	Mendoza	8	mh	$ 55.55			$ 444.40			$ 444.40
	Memuray	8	mh	$ 55.55			$ 444.40			$ 444.40
	Mark Toth - Super	8	mh	$ 76.69			$ 613.52			$ 613.52
15-Mar	Mendoza	8	mh	$ 55.55			$ 444.40			$ 444.40
	Memuray	8	mh	$ 55.55			$ 444.40			$ 444.40
	Mark Toth - Super	8	mh	$ 76.69			$ 613.52			$ 613.52
	Mendoza	8	mh	$ 55.55			$ 444.40			$ 444.40
	Memuray	8	mh	$ 55.55			$ 444.40			$ 444.40
16-Mar	Leon - PM	2	mh	$ 95.52			$ 191.04			$ 191.04
19-Mar	Mark Toth - Super	8	mh	$ 76.69			$ 613.52			$ 613.52
20-Mar	Mark Toth - Super	8	mh	$ 76.69			$ 613.52			$ 613.52
21-Mar	Mark Toth - Super	8	mh	$ 76.69			$ 613.52			$ 613.52
26-Mar	Mark Toth - Super	8	mh	$ 76.69			$ 613.52			$ 613.52
27-Mar	Mark Toth - Super	8	mh	$ 76.69			$ 613.52			$ 613.52
28-Mar	Mark Toth - Super	8	mh	$ 76.69			$ 613.52			$ 613.52

29-Mar	Mark Toth - Super	8	mh	$ 76.69			$ 613.52			$ 613.52
30-Mar	Mark Toth - Super	8	mh	$ 76.69			$ 613.52			$ 613.52
2-Apr	Mark Toth - Super	8	mh	$ 76.69			$ 613.52			$ 613.52
3-Apr	Mark Toth - Super	8	mh	$ 76.69			$ 613.52			$ 613.52
4-Apr	Mark Toth - Super	8	mh	$ 76.69			$ 613.52			$ 613.52
										$ -
	MATERIAL									$ -
	sanding discs and corner beads							$ 46.52		$ 46.52
26-Feb	ACT							$ 62.46		$ 62.46
7-Mar	Parking							$ 20.00		$ 20.00
	Protective plastic							$ 29.95		$ 29.95
	Plywood for laminate							$ 75.00		$ 75.00
	Glue for laminate							$ 20.00		$ 20.00
9-Mar	Sanding sponge							$ 11.64		$ 11.64
	Primer							$ 36.24		$ 36.24
12-Mar	Stain block primer							$ 36.24		$ 36.24
14-Mar	Stain block primer							$ 36.24		$ 36.24
15-Mar	Drywall mud and pain tray							$ 10.58		$ 10.58
										$ -
										$ -
										$ -
										$ -
										$ -
										$ -
										$ -
										$ -
										$ -
										$ -
										$ -
	SUBCONTRACTORS						$ -	$ -	$ -	$ -
	Advanced Electric						$ -	$ -	$ 432.22	$ 432.22
							$ -	$ -		
							$ -	$ -	$ -	$ -
							$ -	$ -	$ -	$ -
							$ -	$ -	$ -	$ -
							$ -	$ -	$ -	$ -

SUBTOTAL			$ 25,291.02	$ 384.87	$ 432.22	$ 26,108.11
PERIOD TOTAL			$ 25,291.02	$ 384.87	$ 432.22	$ 26,108.11

28B Invoice - Page 7 of 39

WCC LABOR TICKETS

THE UNIVERSITY OF IOWA

FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 4/4/18

Subcontractor _____ Change Order Request No _____

Project Name MLF WATER DAMAGE REPAIR Project Number #0744901

Description of Work SUPERVISON / TOTH

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
TOTH	SUPT		8	Ø					

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W27323/4-17

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 *Fax* 319-335-2722

THE UNIVERSITY OF IOWA

FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 4/3/18

Subcontractor _____ Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number # 0744901

Description of Work TOTH / SUPERVISOR

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
TOTH	SUPT.		8	0					

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W27323/4-17

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 *Fax* 319-335-2722

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FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 4/2/18

Subcontractor _____ Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number #0744901

Description of Work TOTH / SUPERVISON

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
TOTH	SUPT.		8	8					

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
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April, 2007

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Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 3/30/18

Subcontractor _____ Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number #0744901

Description of Work TOTH / SUPERVISON

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
TOTH	SUPT.		8	0					

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) _____

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April, 2007

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TIME AND MATERIAL FORM

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General Contractor WOODRUFF CONST. CO. Date Work Performed 3/29/18

Subcontractor _____ Change Order Request No _____

Project Name MLF WATER DAMAGE REPAIR Project Number #0744901

Description of Work TOTH / SUPERVISON

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
TOTH	SUPT.		8	0					

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) _____

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Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 3/28/18

Subcontractor _____ Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number #0744901

Description of Work TOTH / SUPERVISON

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
TOTH	SUPT.		8	0					

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
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April, 2007

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Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 3/27/18

Subcontractor _____ Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number # 0744901

Description of Work TOTH / SUPERVISON

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
TOTH			8	0					

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W27323/4-17

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Iowa City, Iowa 52242
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FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 3/26/18

Subcontractor _____ Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number #0744901

Description of Work TOTH / SUPERVISON

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
TOTH			8	0					

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) _____

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FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 3/21/18

Subcontractor _____ Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number #0744901

Description of Work TOTH / SUPERVISON

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
TOTH	SUPT.		8	0					

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W27323/4-17

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FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 3/20/18

Subcontractor _____ Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number #0744901

Description of Work TOTH / SUPERVISON

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
TOTH			8	0					

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
Yellow=Owner Copy
April, 2007

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 *Fax* 319-335-2722

W27323/4-17

THE UNIVERSITY OF IOWA

FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 3/19/18

Subcontractor _____ Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number # 0744901

Description of Work TOTH / SUPERVISON EXPECTING PAINTERS — NO SHOW

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
TOTH	SUPT.		8	0					

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) _____

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April, 2007

W27323/4-17

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 *Fax* 319-335-2722

THE UNIVERSITY OF IOWA

FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 3/16/18

Subcontractor _____ Change Order Request No _____

Project Name M.R.F. WATER DAMAGE REPAIR Project Number #0744901

Description of Work TOTH / SUPERVISON ZHANG / PAY APPS

FALMER / BROUGHT EQUIPMENT TO WAREHOUSE FINAL CLEANING

McMULLAN & MENDOZA / FINAL CLEANING

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
TOTH	SUPT.		8	0	McMULLAN			8	0
ZHANG	P.M.		2	0	MENDOZA			8	0
					FALMER			8	0

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
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April, 2007

W27323/4-17

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THE UNIVERSITY OF IOWA

FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 3/15/18

Subcontractor _____ Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number #0744901

Description of Work TOTH / SUPERVISON McMURRAY, MENDOZA / SCRAPPING, PRIMING, MUDDING + SANDING IN STAIRWELL

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
TOTH			8	Ø	McMURRAY			8	Ø
					MENDOZA			8	Ø

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
Yellow=Owner Copy
April. 2007

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THE UNIVERSITY OF IOWA

FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 3/14/18

Subcontractor _____ Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number #0744901

Description of Work TOTH / SUPERVISON MCMURRAY, MENDOZA / SCRAPPING, PRIMING, MUDDING & SANDING IN STAIRWELL

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
TOTH			8	0	MCMURRAY			8	0
					MENDOZA			8	0

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W27323/4-17

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722

THE UNIVERSITY OF IOWA

FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 3/13/18

Subcontractor _____ Change Order Request No _____

Project Name MLF WATER DAMAGE REPAIR Project Number #0744901

Description of Work TOTH / SUPERVISON FARMER, MCMURRAY, MENDOZA / SCRAPPING, PRIMING, MUDDING & SANDING IN STAIRWELL

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
TOTH			8	~~8~~	FARMER			8	~~8~~
					MENDOZA			8	~~8~~
					MCMURRAY			8	~~8~~

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W27323/4-17

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 *Fax* 319-335-2722

THE UNIVERSITY OF IOWA

FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 3/12/18

Subcontractor _____ Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number #0744901

Description of Work TOTH / SUPERVISON FARMER + MENDOZA / SCRAPPING, PRIMING, MUDDING + SANDING IN STAIRWELL

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
TOTH			8	Ø	~~DEMURRAY~~				
					MENDOZA			8	Ø
					FARMER			8	Ø

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W27323/4-17

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722

THE UNIVERSITY OF IOWA

FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 3/9/18

Subcontractor _____ Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number #0744901

Description of Work TOTH / SUPERVISON McMURRAY, MENDOZA + FARMER / SCRAPPING, MUDDING + SANDING IN STAIRWELL

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
TOTH			8	0	MENDOZA			8	0
					McMURRAY			8	0
					FARMER			8	0

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W27323/4-17

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722

THE UNIVERSITY OF IOWA

FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 3/8/18

Subcontractor _____ Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number #0744901

Description of Work TOTH / SUPERVISOR MCMURRAY + MENDOZA / FINAL CLEANING ON 2ND. SCRAPPING + MUDDING IN STAIRWELL. FARMER / MUDDING SANDING IN STAIRWELL. GALLEGOES + BUTTERBAUGH / FINISH LAMINATE 2ND FL.

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
					MCMURRAY			8	Ø
					MENDOZA			8	Ø
					FARMER			8	Ø
					GALLEGOES			1	Ø
					BUTTERBAUGH			1	Ø

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W27323/4-17

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 *Fax* 319-335-2722

THE UNIVERSITY OF IOWA

FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 3/7/18

Subcontractor _____ Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number #0744901

Description of Work TOTH / SUPERVISON MCMURRAY & MENDOZA / FINAL CLEANUP 2ND FL, 1ST FL., L.L. & SCRAPPING, MUDDING SANDING IN STAIRWELL GALLEGOES & BUTTERBAUGH / REPLACE LAMINATE 2ND FL.

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
TOTH	SUPT.		8	~~0~~	MCMURRAY			8	~~0~~
					MENDOZA			8	~~0~~
					GALLEGOES			8	~~0~~
					BUTTERBAUGH			8	~~0~~

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W27323/4-17

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 *Fax* 319-335-2722

THE UNIVERSITY OF IOWA

FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 3/6/18

Subcontractor _____ Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number #0744901

Description of Work TOTH / SUPERVISOR MCMURRAY + FARMER / SCRAPPING, MUDDING + SANDING IN STAIRWELL MENDOZA / PAINTING + FINAL CLEANUP 2ND FL. GALLEGOES, BUTTERBAUGH / REPLACE LAMINATE 2ND FL.

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
TOTH	SUPT.		8	Ø	MENDOZA			8	Ø
					MCMURRAY			8	Ø
					FARMER			8	Ø
					GALLEGOES			8	Ø
					BUTTERBAUGH			8	Ø

Equipment and Material (attach invoices)

Quantity	Description
2	4x8 OAK SHT. LAMINATE
1	3x8 OAK SHT. LAMINATE
2	GALLONS OF ADHESIVE

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W27323/4-17

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722

THE UNIVERSITY OF IOWA

FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 3/5/18

Subcontractor _____ Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number #0744901

Description of Work TOTH / SUPERVISON FARMER & MCMURRAY / SCRAPPING & MUDDING IN STAIRWELL MENDOZA / PAINTING & FINAL CLEANUP OF 2ND FL.

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
TOTH	SUPT.		8	Ø	MENDOZA			8	Ø
					FARMER			8	Ø
					McMURRAY			8	Ø

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W27323/4-17

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 *Fax* 319-335-2722

WCC RECEIPTS/INVOICES

TAMARACK
MATERIALS, INC.

Tamarack Materials, Inc.
9300 James Avenue South
Bloomington, MN 55431
Tel: (952) 888-5556
Fax: (952) 888-4030

Invoice

CUSTOMER NO.	INVOICE DATE
10421	02/27/18
P.O. #	ORDER #
18-011	6528729-00
CUSTOMER JOB NO.	PAGE #:
WOODRUFF CONSTR	1 of 1

Remit To:
Tamarack Materials, Inc.
SDS 12-1200
P.O. Box 86
Minneapolis, MN 55486-1200

SOLD TO:
B354 1 AB 0.408 E0210 J0307 D3394096925 S2 P5147231 0002:0005
WOODRUFF CONSTRUCTION
1890 KOUNTRY LN
FORT DODGE IA 50501-8722

SHIP TO:
WOODRUFF CONSTRUCTION
U OF I VARIOUS JOBS
IOWA CITY, IA

SPECIAL INSTRUCTIONS	DELIVERED BY	RECEIVED BY:
	IOWA CITY YA	
ORDERED BY	SALES REP / DATE SHIPPED	NET DUE DATE
	ICHS / 02/26/18	

PRODUCT NO.	QUANTITY	UNITS	DESCRIPTION	U/M	EXTENSION	UNIT PRICE	AMOUNT
NOR56659	15.00	EA	220G NORTON SANDING DISC15/CTN #566	EA	15.00	1.33	19.95
NOR02464	15.00	EA	120G NORTON SANDING DISC15/CTN #024	EA	15.00	1.33	19.95
b1s9	2.00	PCS	USG B1 SUPERWIDE BEAD9' 50/CTN 450	MLF	18.00	368.00	6.62

TAX DETAILS
TAXABLE: No
STATE : Iowa
CITY : Iowa City
COUNTY : Johnson - County

THANK YOU FOR YOUR BUSINESS!

TOTALS	
SUBTOTAL	46.52
TAX	0.00
ADD'L CHARGES	
TOTAL	46.52

PAYMENTS

TERMS: NET 20TH, OR AS OTHERWISE ARRANGED. INTEREST RATE OF 1 ½% PER MONTH (WHICH IS A RATE OF 18% PER YEAR) COMPUTED MONTHLY WILL BE CHARGED ON THE UNPAID BALANCE. CUSTOMER AGREES TO PAY BY CASH, CHECK, OR ACH. CUSTOMERS PAYING THEIR ACCOUNT WITH A CREDIT CARD WILL INCUR A SURCHARGE OF 2.0% ON THE TRANSACTION AMOUNT, WHICH IS NOT GREATER THAN TAMARACK MATERIALS COST OF ACCEPTANCE.
25% RETURN CHARGE ON STOCK MERCHANDISE. SPECIAL ORDERS ARE NOT RETURNABLE.

GYPSUM WALLBOARD, PLASTER, STUCCO, STO/EIFS, JOINT COMPOUND, INSULATION, METAL STUDS, METAL LATH, METAL ACCESS DOORS, DRYWALL SCREWS, DRYWALL TOOLS, CEILING TILE AND GRID, FRY REGLET TRIMS, FRP, SCAFFOLDING, SAFETY EQUIPMENT AND MORE

0002:0005

TAMARACK MATERIALS, INC.

Tamarack Materials, Inc.
9300 James Avenue South
Bloomington, MN 55431
Tel: (952) 888-5556
Fax: (952) 888-4030

Invoice

CUSTOMER NO.	INVOICE DATE
10421	02/27/18
P.O. #	ORDER #
18-011	6528739-00
CUSTOMER JOB NO.	PAGE #:
WOODRUFF CONSTR	1 of 1

Remit To:
Tamarack Materials, Inc.
SDS 12-1200
P.O. Box 86
Minneapolis, MN 55486-1200

SOLD TO:
6354 1 AB 0.408 E0210 10309 D3394096947 S2 P5147231 0004:0005

WOODRUFF CONSTRUCTION
1890 KOUNTRY LN
FORT DODGE IA 50501-8722

SHIP TO:

WOODRUFF CONSTRUCTION
U OF I VARIOUS JOBS
IOWA CITY, IA

SPECIAL INSTRUCTIONS	DELIVERED BY	RECEIVED BY
	IOWA CITY YA	
ORDERED BY	SALES REP	DATE SHIPPED	NET DUE DATE
	ICHS	02/26/18	

PRODUCT NO.	QUANTITY	UNITS	DESCRIPTION	U/M	EXTENSION	UNIT PRICE	AMOUNT
usg707	1.00	CTN	3/4x2x2ACOUSTONE GLACIERSHADOWLINE	MSF	32.00	1952.00	62.46

TAX DETAILS		TOTALS	
TAXABLE: No		SUBTOTAL	62.46
STATE : Iowa		TAX	0.00
CITY : Iowa City		ADD'L CHARGES	
COUNTY : Johnson - County	THANK YOU FOR YOUR BUSINESS!	TOTAL	62.46

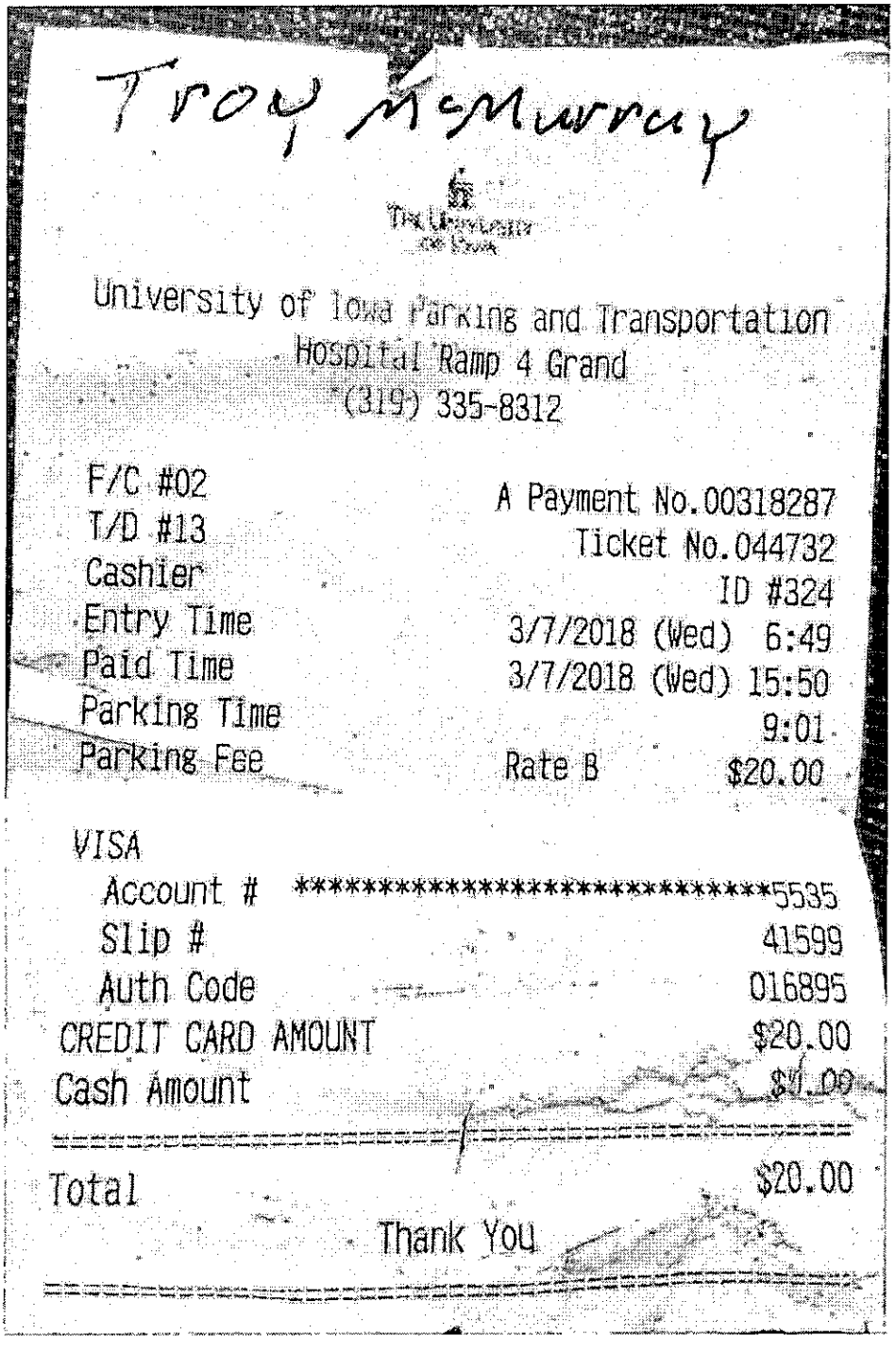
TERMS: NET 20TH, OR AS OTHERWISE ARRANGED. INTEREST RATE OF 1 ½% PER MONTH (WHICH IS A RATE OF 18% PER YEAR) COMPUTED MONTHLY WILL BE CHARGED ON THE UNPAID BALANCE. CUSTOMER AGREES TO PAY BY CASH, CHECK, OR ACH. CUSTOMERS PAYING THEIR ACCOUNT WITH A CREDIT CARD WILL INCUR A SURCHARGE OF 2.0% ON THE TRANSACTION AMOUNT, WHICH IS NOT GREATER THAN TAMARACK MATERIALS COST OF ACCEPTANCE.

25% RETURN CHARGE ON STOCK MERCHANDISE. SPECIAL ORDERS ARE NOT RETURNABLE.

PAYMENTS

GYPSUM WALLBOARD, PLASTER, STUCCO, STO/EIFS, JOINT COMPOUND, INSULATION, METAL STUDS, METAL LATH, METAL ACCESS DOORS, DRYWALL SCREWS, DRYWALL TOOLS, CEILING TILE AND GRID, FRY REGLET TRIMS, FRP, SCAFFOLDING, SAFETY EQUIPMENT AND MORE.

0004:0005



Troy McMurray

The University of Iowa

University of Iowa Parking and Transportation
Hospital Ramp 4 Grand
(319) 335-8312

F/C #02	A Payment No.00318287	
T/D #13	Ticket No.044732	
Cashier	ID #324	
Entry Time	3/7/2018 (Wed)	6:49
Paid Time	3/7/2018 (Wed)	15:50
Parking Time		9:01
Parking Fee	Rate B	$20.00

VISA

Account #	**********5535
Slip #	41599
Auth Code	016895
CREDIT CARD AMOUNT	$20.00
Cash Amount	$0.00
Total	$20.00

Thank You

Use Your BIG CARD 2% REBATE
MENARDS®

MENARDS - IOWA CITY
2605 Naples Ave
Iowa City, IA 52240

KEEP YOUR RECEIPT
RETURN POLICY VARIES BY PRODUCT TYPE

Unless noted below allowable returns for items on this receipt will be in the form of an in store credit voucher if the return is done after 06/05/18

If you have questions regarding the charges on your receipt, please email us at:
IOWAfrontend@menards.com

Sale Transaction

4MIL 10'X100' POLY CLEAR	
5880050	29.95
TOTAL	29.95
TAX STATE OF IA 6%	1.80
TOTAL SALE	31.75
Menard Commercial Card 6597	31.75

005308
Swiped
PO # 18 011

TOTAL NUMBER OF ITEMS = 1

THE FOLLOWING REBATE RECEIPTS WERE PRINTED FOR THIS TRANSACTION:
2678

GUEST COPY

The Cardholder acknowledges receipt of goods/services in the total amount shown hereon and agrees to pay the card issuer according to its current terms.

THIS IS YOUR CREDIT CARD SALES SLIP
PLEASE RETAIN FOR YOUR RECORDS.

Spring Hiring - Apply Today

THANK YOU, YOUR CASHIER, Carole

68211 10 6962 03/07/18 09:17AM 3091

NEW POLY
(PLASTIC)

TO REPLACE OLD.
USED TO KEEP
SMELL FROM LAMINATE
GLUE FROM GOING
DOWN THE HALL

Damian Cummins

Damian Cummins
804 15th St SE
Cedar Rapids, IA 52403

Cell 319-533-4498
e-mail Nailbendr77@gmail.com

Jobsite:

Corridor Kitchens
Woodruff
Uofl job
Add'l Material Only

Invoice 928

Date 03/07/18

Item or Service	Quantity		Price	Subtotals
plywood purchased	3	sheets	$25.00	$75.00
extra glue needed	1	quart	$20.00	$20.00
				$0.00
				$0.00
				$0

TAMARACK
MATERIALS, INC.

Tamarack Materials, Inc.
9300 James Avenue South
Bloomington, MN 55431
Tel: (952) 888-5556
Fax: (952) 888-4030

Invoice

CUSTOMER NO.	INVOICE DATE
10421	03/09/18
P.O.#	ORDER #
18-011	6529063-00
CUSTOMER JOB NO.	PAGE #:
WOODRUFF CONSTR	1 of 1

Remit To:
Tamarack Materials, Inc.
SDS 12-1200
P.O. Box 88
Minneapolis, MN 55486-1200

SOLD TO:
6088 1 AB 0.408 E0131 10238 D3425070543 SZ PS175105 0002:0002
WOODRUFF CONSTRUCTION
1890 KOUNTRY LN
FORT DODGE IA 50501-8722

SHIP TO:
WOODRUFF CONSTRUCTION
U OF I VARIOUS JOBS
IOWA CITY, IA

SPECIAL INSTRUCTIONS	DELIVERED BY	RECEIVED BY
	IOWA CITY YA	
ORDERED BY	SALES REP	DATE SHIPPED	NET DUE DATE
	ICHS	03/08/18	

PRODUCT NO.	QUANTITY	UNITS	DESCRIPTION	U/M	EXTENSION	UNIT PRICE	AMOUNT
tt885	6.00	EA	SANDSPONGE DUAL ANGLEFINE-MED TRIM	EA	6.00	1.94	11.64

TAX DETAILS		TOTALS	
TAXABLE: No STATE : Iowa CITY : Iowa City COUNTY : Johnson - County	THANK YOU FOR YOUR BUSINESS!	SUBTOTAL	11.64
		TAX	0.00
		ADD'L CHARGES	
		TOTAL	11.64

TERMS: NET 20TH, OR AS OTHERWISE ARRANGED. INTEREST RATE OF 1 ½% PER MONTH (WHICH IS A RATE OF 18% PER YEAR) COMPUTED MONTHLY WILL BE CHARGED ON THE UNPAID BALANCE. CUSTOMER AGREES TO PAY BY CASH, CHECK, OR ACH. CUSTOMERS PAYING THEIR ACCOUNT WITH A CREDIT CARD WILL INCUR A SURCHARGE OF 2.0% ON THE TRANSACTION AMOUNT, WHICH IS NOT GREATER THAN TAMARACK MATERIALS' COST OF ACCEPTANCE.
25% RETURN CHARGE ON STOCK MERCHANDISE. SPECIAL ORDERS ARE NOT RETURNABLE.

PAYMENTS

GYPSUM WALLBOARD, PLASTER, STUCCO, STO/EIFS, JOINT COMPOUND, INSULATION, METAL STUDS, METAL LATH, METAL ACCESS DOORS, DRYWALL SCREWS, DRYWALL TOOLS, CEILING TILE AND GRID, FRY REGLET TRIMS, FRP, SCAFFOLDING, SAFETY EQUIPMENT AND MORE

0002:0002

SHERWIN-WILLIAMS.

IOWA CITY Store 3783

841 HIGHWAY 6 E
IOWA CITY IA 52240-4404
(319)338-3604
Fax (319) 338-4752
www.sherwin-williams.com

CHARGE 1:33pm
Tran # 9560-7 03/09/18
E88/13746 11
ALEXANDRA PO# 18-011MRF

Comments: WATER DAMAGE REPAIR

WOODRUFF CONSTRUCTION CO
Account:XXXX-0599-0
Job 1 WOODRUFF CONSTRUCTION CO

Bill To:
WOODRUFF CONSTRUCTION CO
1890 KOUNTRY LN
FORT DODGE, IA 50501 8722
(515)232-4535

6510-29696 GALLON B49W600
EXTRM BLK ALK PR W
1.00 @ 36.24 36.24

SUBTOTAL BEFORE TAX 36.24

6.000% SALES TAX:T-165224000 2.17
CHARGE $38.41

Merchandise Received in Good Order by:

MARK Date

NET PAYMENT DUE ON APR. 20th
(Centralized Invoice)

STORE HOURS

SUNDAY	10:00 AM - 6:00 PM
MONDAY - FRIDAY	7:00 AM - 7:00 PM
SATURDAY	8:00 AM - 6:00 PM

****
Don't miss our Pro Show!
Thursday, March 22nd 11:00am-3:00pm
Sherwin-Williams
3501 J St SW
Cedar Rapids, IA 52404
****

Thank You

SWITCHED FROM WATER BASED PRIMER TO ALKYD BASED PRIMER (OIL BASED)

SHERWIN-WILLIAMS.

IOWA CITY Store 3783
841 HIGHWAY 6 E
IOWA CITY IA 52240/4404
(319)338-3604
Fax (319) 338-4752
www.sherwin-williams.com

CHARGE 1:50pm
Tran # 1023-9 03/12/18
E31/10260 11
DAVID PO# 18-011MRF

WOODRUFF CONSTRUCTION CO
Account XXXX-0599-0
Job 1 WOODRUFF CONSTRUCTION CO

Bill To:
WOODRUFF CONSTRUCTION CO
1890 KOUNTRY LN
FORT DODGE, IA 50501 8722
(515)232-4535

6510-29696	GALLON B49W600 EXTRA BLK ALK PR W		
	1.00 0	36.24	36.24
SUBTOTAL BEFORE TAX			36.24
6.000% SALES TAX:1-165224000			2.17
CHARGE			$38.41

Merchandise Received In Good Order by:

MARK Date

NET PAYMENT DUE ON APR. 20th
(Centralized Invoice)

STORE HOURS
SUNDAY 10:00 AM - 6:00 PM
MONDAY - FRIDAY 7:00 AM - 7:00 PM
SATURDAY 8:00 AM - 6:00 PM

****
Don't miss our Pro Show!
Thursday, March 22nd 11:00am-3:00pm
Sherwin-Williams
3501 J St SW
Cedar Rapids, IA 52404
****

Thank You
receipt required for refund

10260/10239-03-12-2018

STAIN BLOCK PRIMER (OIL BASED) FOR STAIRWELL



SHERWIN-WILLIAMS.

IOWA CITY Store 3783
841 HIGHWAY 6 E
IOWA CITY IA 52240 4404
(319)338-3604
Fax (319) 338-4752
www.sherwin-williams.com

CHARGE 9:45am
Tran # 9755-3 03/14/18
E44/13746 11
JOEL PO# 18-011

WOODRUFF CONSTRUCTION CO
Account XXXX-0589-0
Job 1 WOODRUFF CONSTRUCTION CO

Bill To:
WOODRUFF CONSTRUCTION CO
1890 KOUNTRY LN
FORT DODGE, IA 50501 8722
(515)232-4535

6510-29696 GALLON B49W600
EXTRM BLK ALK PR W
1.00 @ 36.24 36.24

SUBTOTAL BEFORE TAX 36.24

6.000% SALES TAX 1 165224000 2.17
CHARGE $38.41

Merchandise Received in Good Order by:

MARK Date

NET PAYMENT DUE ON APR. 20th
(Centralized Invoice)

STORE HOURS
SUNDAY 10:00 AM - 6:00 PM
MONDAY - FRIDAY 7:00 AM - 7:00 PM
SATURDAY 8:00 AM - 6:00 PM

****
Don't miss our Pro Show!
Thursday, March 22nd - 11:00am-3:00pm
Sherwin-Williams
3501 J St SW
Cedar Rapids, IA 52404
****

Thank You
receipt required for refund

STAIN BLOCK
FOR
STAIRWELL

28B Invoice - Page 39 of 39

Use Your BIG CARD 2% REBATE
MENARDS®

MENARDS - IOWA CITY
2605 Naples Ave
Iowa City, IA 52240

KEEP YOUR RECEIPT
RETURN POLICY VARIES BY PRODUCT TYPE

Unless noted below allowable returns for items on this receipt will be in the form of an in store credit voucher if the return is done after 06/13/18

If you have questions regarding the charges on your receipt, please email us at:
IOWAfrontend@menards.com

Sale Transaction

DUST TECH LITE-PAIL	
1312876	5.59
9" PAINT TRAY LINER 10CT	
5611673	4.99
TOTAL	10.58
TAX STATE OF IA 6%	0.63
TOTAL SALE	11.21
Menard Commercial Card 6697	11.21

074728
Swiped
PO # 18 011

TOTAL NUMBER OF ITEMS = 2

GUEST COPY

The Cardholder acknowledges receipt of goods/services in the total amount shown hereon and agrees to pay the card issuer according to its current terms.

THIS IS YOUR CREDIT CARD SALES SLIP
PLEASE RETAIN FOR YOUR RECORDS.

Spring Hiring - Apply Today

THANK YOU, YOUR CASHIER, Breanna

38595 10 8085 03/15/18 11:16AM 3091

1.) NEEDED MORE DRYWALL MUD

2.) PAINT TRAY LINERS FOR APPLYING PRIMER

AP/PO PeopleSoft Web Applications

Your path: Home > Payment

User options | Help

Payment details for voucher: 82892308

Voucher ID	Vendor ID	Remit LOC	Vendor Name	Gross Voucher Amt.	Payment Handling Code
82892308	0000515030	002	Woodruff Constuction LLC	$29,981.10	AC

Payment Status	Payment Information	Invoice #	Invoice Date	Remit to	Amt From Voucher
PAID	ACH:568406 Dt: 04/17/2018 Amt: $29,981.10	0744901-003	04/10/2018	Detail	$29,981.10

New Payment Search
AP-PO Web Applications Home Page
Self-Service

(WALTERSC) Logoff

Accounts Payable / Purchasing is a department in the Finance and Operations organization.
Copyright © The University of Iowa. All rights reserved.

Please direct inquires regarding using this application to acntpay@uiowa.edu

THE UNIVERSITY OF IOWA

FACILITIES MANAGEMENT
Design & Construction

CONTRACTOR PAY APPLICATION REQUEST

Application/Invoice Date: 05/10/2018
Application No.: 004
Invoice No.: 0744901-004
Contract #: CT8279
Payment terms: Net Zero

GROUP 229512
82923015

To:
University of Iowa
Planning, Design & Construction
200 USB
Iowa City, IA 52242

From Contractor:
Woodruff Constuction LLC
1890 Kountry Lane,
Fort Dodge, IA 50501

Project Title and Number:
Medical Research Facility - Emergency Pipe Repair and Remediation
Project # 0744901

PAY APPLICATION PERIOD FROM: 04/07/2018 **TO:** 05/04/2018

1. ORIGINAL CONTRACT SUM:			$379,000.00	
Change Order Summary	ADDITIONS	DEDUCTIONS		
Total changes approved in previous months by owner	$0.00	$0.00		
Total approved this month	$0.00	$0.00		
TOTALS	$0.00	$0.00		
2. NET CHANGE BY CHANGE ORDERS:			$0.00	
3. CONTRACT SUM TO DATE: (Line 1 + 2)			$379,000.00	
4. TOTAL COMPLETED & SORTED TO DATE:			$298,141.91	(79%)
5. RETAINAGE: (Completed Word & Stored Material)			$0.00	
6. TOTAL EARNED LESS RETAINANGE: (Line 4 less Line 5 Total)			$298,141.91	
7. LESS PREVIOUS CERTIFICATES FOR PAYMENT: (Line 6 from prior Certificate)			$147,108.52	
8. CURRENT PAYMENT DUE:			**$151,033.39**	UAP
9. BALANCE TO FINISH, INCLUDING RETAINAGE: (Line 3 less Line 6)			$80,858.09	

5/17/18

May 16, 2018, 1:16 PM

WOODRUFF CONSTRUCTION, LLC

1890 Kountry Lane
Fort Dodge, Iowa 50501
Phone (515) 576-1118 Fax (515) 955-2170

501 Greenfield Drive
Tiffin, Iowa 52340
Phone (319) 545-2410 Fax (319) 545-2411

5/9/2018

Danial Cassidy
UI-FM – D&C.

RE: MRF Water Damage – Pay Application Summary

SUBJ: **Pay App - 004**

Dan,

For all the work from period 4/9/2018 to 5/4/2018The total amount is $151,033.39 .
Labor and material cost documents are enclosed for review.

If you require additional clarification, please contact me. Thank you for your prompt response.

Sincerely,
WOODRUFF CONSTRUCTION, LLC

Leon Zhang
Assistant Project Manager

COST ANALYSIS **MRF Water Damage T&M**

Period: 4/9/2018 to 5/4/2018
Pay App - 04

TOTAL WOODRUFF LABOR COST			= $	12,270.40
TOTAL WOODRUFF MATERIAL COST			= $	-
	SUBTOTAL		= $	12,270.40
plus OH&P @	15%	= $ 1,841	= $	14,110.96

TOTAL SUBCONTRACT COST			= $	130,402.31
plus OH&P @	5%	= $ 6,520.12	= $	136,922.43

TOTAL PRICE FOR THE PERIOD $ 151,033.39

COST ANALYSIS **MRF Water Damage T&M**

Pay App - 04 Period: 9-Apr-18 to 4-May-18

	LABOR CLASSIFICATION/ MATERIAL	QUANTITY	UNIT	UNIT LABOR	UNIT MAT'L	UNIT SUBCON	LABOR	MATERIAL	SUBCON	TOTAL
	WOODRUFF WORK									
	LABOR									
4/9-4/13	Mart Toth - Superintendent	40	hr	$ 76.69			$ 3,067.60			$ 3,067.60
4/16-4/20	Mart Toth - Superintendent	40	hr	$ 76.69			$ 3,067.60			$ 3,067.60
4/23-4/27	Mart Toth - Superintendent	40	hr	$ 76.69			$ 3,067.60			$ 3,067.60
4/29-5/4	Mart Toth - Superintendent	40	hr	$ 76.69			$ 3,067.60			$ 3,067.60

29B Invoice - Page 4 of 74

										$ -
										$ -
	SUBCONTRACTORS						$ -	$ -	$ -	$ -
	Schumacher Elevator						$ -	$ -	$ 119,096.32	$ 119,096.32
	Bachmeier Carpet One						$ -	$ -	$ 11,305.99	$ 11,305.99
							$ -	$ -	$ -	$ -
							$ -	$ -	$ -	$ -
							$ -	$ -	$ -	$ -
							$ -	$ -	$ -	$ -
	SUBTOTAL						$ 12,270.40	$ -	$ 130,402.31	$ 142,672.71
	PERIOD TOTAL						$ 12,270.40	$ -	$ 130,402.31	$ 142,672.71

Labor Cost - WCC

THE UNIVERSITY OF IOWA

FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 4/9 - 4/13/18

Subcontractor _____ Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number #0744901

Description of Work TOTH / SUPERVISON

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
TOTH	SUPT.		40	0					

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W27323/4-17

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 *Fax* 319-335-2722

THE UNIVERSITY OF IOWA

FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 4/16-4/20/18

Subcontractor _____ Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number #0744901

Description of Work SUPERVISON FOR ELEVATOR INSTALL

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
TOTH			40	0					

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W27323/4-17

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 *Fax* 319-335-2722

THE UNIVERSITY OF IOWA

Facilities Management
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 4/23-4/27/18

Subcontractor _____ Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number #0744901

Description of Work SUPERVISON OF ELEVATOR INSTALL

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
TOTH			40	0					

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W31818/3-18

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722

THE UNIVERSITY OF IOWA

Facilities Management
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 4/29 - 5/4

Subcontractor _____ Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number #0744901

Description of Work SUPERVISON OF ELEVATOR REPAIR

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
TOTH	SUPT.		40	0					

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W31818/3-18

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722

Material Cost - Schumacher

PAYMENT APPLICATION

TO:	Medical Research Facility 55 Grand Ave S Iowa City, IA 52242 Attn:	PROJECT NAME AND LOCATION:	39070 Medical Research Facility 55 Grand Ave S Iowa City, IA 52242	APPLICATION # PERIOD THRU: PROJECT #s: DATE OF CONTRACT:	2 05/09/2018 39070 02/15/2018
FROM:	Schumacher Elevator Company One Schumacher Way PO Box 393 Denver, IA 50622	ARCHITECT:		Distribution to:	☐ OWNER ☐ ARCHITECT ☐ CONTRACTOR ☐ ☐
FOR:					

CONTRACTOR'S SUMMARY OF WORK

Application is made for payment as shown below.
Continuation Page is attached.

1.	**CONTRACT AMOUNT**		$182,666.00
2.	**SUM OF ALL CHANGE ORDERS**		$0.00
3.	**CURRENT CONTRACT AMOUNT**	(Line 1 +/- 2)	$182,666.00
4.	**TOTAL COMPLETED AND STORED** (Column G on Continuation Page)		$153,546.11
5.	**RETAINAGE:**		
	a. 5.00% of Completed Work (Columns D + E on Continuation Page)	$7,677.00	
	b. 5.00% of Material Stored (Column F on Continuation Page)	$0.00	
	Total Retainage (Line 5a + 5b or Column I on Continuation Page)		$7,677.00
6.	**TOTAL COMPLETED AND STORED LESS RETAINAGE** (Line 4 minus Line 5 Total)		$145,869.11
7.	**LESS PREVIOUS PAYMENT APPLICATIONS**		$26,772.79
8.	**PAYMENT DUE**		**$119,096.32**
9.	**BALANCE TO COMPLETION** (Line 3 minus Line 6)	$36,796.89	

SUMMARY OF CHANGE ORDERS	ADDITIONS	DEDUCTIONS
Total changes approved in previous months	$0.00	$0.00
Total approved this month	$0.00	$0.00
TOTALS	$0.00	$0.00
NET CHANGES	$0.00	

Contractor's signature below is his assurance to Owner, concerning the payment herein applied for, that: (1) the Work has been performed as required in the Contract Documents, (2) all sums previously paid to Contractor under the Contract have been used to pay Contractor's costs for labor, materials and other obligations under the Contract for Work previously paid for, and (3) Contractor is legally entitled to this payment.

CONTRACTOR: Schumacher Elevator Company

By: Chris Lauck, Controller Date: 5-9-2018

State of: Iowa

County of: Bremer

Subscribed and sworn to before me this 9th day of May 2018

Notary Public: Melodie Despard

My Commission Expires: March 9, 2020

MELODIE DESPARD
Notarial Seal - Iowa
Commission # 733350
My Commission Expires March 9, 2020

ARCHITECT'S CERTIFICATION

Architect's signature below is his assurance to Owner, concerning the payment herein applied for, that: (1) Architect has inspected the Work represented by this Application, (2) such Work has been completed to the extent indicated in this Application, and the quality of workmanship and materials conforms with the Contract Documents, (3) this Application for Payment accurately states the amount of Work completed and payment due therefor, and (4) Architect knows of no reason why payment should not be made.

CERTIFIED AMOUNT.....

(If the certified amount is different from the payment due, you should attach an explanation. Initial all the figures that are changed to match the certified amount.)

ARCHITECT:

By: Date:

Neither this Application nor payment applied for herein is assignable or negotiable. Payment shall be made only to Contractor, and is without prejudice to any rights of Owner or Contractor under the Contract Documents or otherwise.

APPLICATION FOR PAYMENT - CONTINUATION SHEET

PROJECT: 39070
Medical Research Facility

Schumacher Elevator Company One Schumacher Way Denver, IA 50622

APPLICATION #: 2
DATE OF APPLICATION: 05/09/2018
PERIOD THRU: 05/09/2018
PROJECT #s: 39070

A	B	C	D	E	F	G		H	I
ITEM #	WORK DESCRIPTION	SCHEDULED AMOUNT	COMPLETED WORK		STORED MATERIALS (NOT IN D OR E)	TOTAL COMPLETED AND STORED (D + E + F)	% COMP. (G / C)	BALANCE TO COMPLETION (C-G)	RETAINAGE (If Variable)
			AMOUNT PREVIOUS PERIODS	AMOUNT THIS PERIOD					
0010	Work Completed through February 2018	$28,181.79	$28,181.79	$0.00	$0.00	$28,181.79	100%	$0.00	$1,409.00
0020	Work Completed through March 2018	$0.00	$0.00	$0.00	$0.00	$0.00		$0.00	$0.00
0030	Labor Completed through April 2018	$57,756.83	$0.00	$57,756.83	$0.00	$57,756.83	100%	$0.00	$2,888.00
0040	Materials Completed through April 2018	$67,607.49	$0.00	$67,607.49	$0.00	$67,607.49	100%	$0.00	$3,380.00
0050	Labor Completed through May 2018	$29,061.38	$0.00	$0.00	$0.00	$0.00	0%	$29,061.38	$0.00
0060	Materials Completed through May 2018	$58.51	$0.00	$0.00	$0.00	$0.00	0%	$58.51	$0.00
	TOTALS	$182,666.00	$28,181.79	$125,364.32	$0.00	$153,546.11	84%	$29,119.89	$7,677.00

Vendor	*Date*	*Amount*
Draka	4/16/2018	$ 3,147.32
Holdahl	3/30/2018	$ 322.00
Van Meter	4/26/2018	$ 19.79
Parts Specialist	3/21/2018	$ 6,214.95
Columbia Elevator	4/10/2018	$ 3,006.00
GAL Manufacturing	3/22/2018	$ 7,217.00
GAL Manufacturing	3/29/2018	$ 27,809.06
GAL Manufacturing	4/19/2018	$ 2,458.00
Hollister Whitney	4/10/2018	$ 1,930.00
Hollister Whitney	4/19/2018	$ 3,785.00
Parts Specialist	4/19/2018	$ 2,880.00
		$ 58,789.12
		$ 8,818.37 15% Mark up
Total		**$ 67,607.49**

Draka
Industry & Specialty | Elevator Products

2151 N. Church Street Rocky Mount NC 27804 US
Telephone: 252-446-8113

PAY TO :
Draka Elevator Products Inc
PO Box 3487
Carol Stream
CAROL STREAM IL 60132-3487

INVOICE

SCHUMACHER ELEVATOR COMPANY
DO NOT MAIL
ONE SCHUMACHER WAY
DENVER IA 50622

SCHUMACHER ELEVATOR COMPANY
DO NOT MAIL
ONE SCHUMACHER WAY
DENVER IA 50622

VAT#
Draka EIN: 04-3477998

DRAKA ORDER #	DELIVERY #	CARRIER	FREIGHT TERMS / INCO TERMS	INVOICE #
31163935	80921816	BEST WAY	Collect - 3rd Party / EXW	90887874

P.O. DATE	BOL #	CUSTOMER #	CUSTOMER ORDER NUMBER #	INVOICE DATE
04/13/2018	332918	100964	114897	04/16/2018

SALES MGR: KEVIN ROBINSON	TERMS OF PAYMENT: NET 30 DAYS	GROSS WT: 1439.46

Booking Number#	Container ID#	License	Total Pieces	Freight Forwarder
	DB32265181	NLR	1	

LINE	MATERIAL DESCRIPTION	QUANTITY	UNIT PRICE	VALUE
10	18-X77-13 CSX77S-6 4-14+60-18+6X20+1 RG6/U CX	140.000 FT	8.23	1,152.20 (1)
20	JCC-20 INST KIT WF 2.0LB	2.000 EA	48.56	97.12 (2)
30	18-020-97 WF 20 WHISPER-FLEX 2.0LB	520.000 FT	3.65	1,898.00 (3)

Total Before Tax	3,147.32
Total Amount	3,147.32 USD

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AMOUNT DUE
3,147.32 USD

We appreciate your business.

Terms and Conditions are located on the back

HOLDAHL COMPANY

INVOICE

DS01020136-001

Holdahl Company
1925 Annapolis Lane
Plymouth, MN 55441- USA
Phone: (763)-231-3130

Invoice Date: 03/30/18
Account: 95350 0001
Branch: 05DESM
Phone: (319)-984-5676
Fax: (319)-406-1270
Delivery: DS01020136-001

BILL TO:
Schumacher Elevator Company
One Schumacher Way
Denver IA 50622

SHIP TO:
Schumacher Elevator Company
One Schumacher Way
Denver IA 50622

PO: 114446 **REF:** **JOB:**

ORDER DATE: 03/22/18 **SALES** ScottJ **ORDER TYPE:** Parcel **SHIP VIA:** Spee-Dee **FRT TERM:**
SHIP DATE: 03/29/18 **AGENTS** SandraH **ORDERED BY:** JR Miller
ENTERED BY: Rcannon **AUTH CHG:**

QTY ORDERED	QTY SHIPPED	UOM	ITEM/DESCRIPTION	CONVERTED QTY	PRICE/UOM	AMOUNT
			Receive invoices and statements via email! Send email address to ar@holdahl.net to sign up today! Now accepting American Express, Visa, Mastercard, Discover and ECheck. A Fuel Surcharge of .02/sq ft will be included in all Formica laminate pricing			
2	2	SH	1258-00961 48" X 96" Fog	64.0000/SF	1.75/SF	112.00 (1)
5	5	SH	1258-00927 36" X 96" Folkstone	120.0000/SF	1.75/SF	210.00 (2)
			SUBTOTAL			322.00

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PAYMENT TERMS:
1% 10TH

Balance **$322.00**

INVOICE

VAN METER INC.
125 Courier Street
Waterloo IA 50701-1289
319-235-9313 Fax 319-235-0365

www.vanmeterinc.com

VAN METER
A 100% EMPLOYEE OWNED COMPANY

INVOICE DATE		OUR INVOICE NUMBER	
04/26/18		S010224643.001	
Bill To#	Ship To#	Price Br	Ship Br
2738	2738	2	7

PLEASE REMIT PAYMENT TO:	DUE DATE
850 32ND AVENUE SW CEDAR RAPIDS IA 52404-3913	06/10/18

BILL TO:

SCHUMACHER ELEVATOR CO.
ONE SCHUMACHER WAY
P.O. BOX 393
DENVER IA 50622-0393

SHIP TO:

ENROLLMENT TOKEN
DPS TKS FQS

SCHUMACHER ELEVATOR CO.
ONE SCHUMACHER WAY
P.O. BOX 393
DENVER IA 50622-0393

YOUR PO/ORDER #	ORDERED BY	JOB/RELEASE #	YOUR ACCOUNT MANAGER	
39070	MARK		Scott Reiter WAT 3510	
ORDER WRITER	SHIP VIA	TERMS	ORDER DATE	SHIP DATE
Carter Valentine IC 3727	IPK IMMEDIATEPK	NET 45	04/26/18	04/26/18

ORDER QTY	SHIP QTY	DESCRIPTION	Unit Price/UM	Extension
40	40	CONDUIT 1/2 EMT Your # 105214	44.431/c	17.77
6	6	MINRLAC 0B 3/8-1/2 COND HGR W/BOLT Your # 105387	33.600/c	2.02

RECEIVED MAY 0 1 2018

WANT TO SAVE TIME?
Our goal is to make it easy for you to manage the invoices you receive from us. For the ultimate in convenience, try our **Invoice Gateway** site. You can view, print, and even download your invoices right to your system. You can also sign up for E-billing and you will be notified of new invoices via email. Go paperless!
Contact Marie Anderson at manderson@vanmeterinc.com or 319-368-2828 for enrollment information.

If you are already on **Invoice Gateway** and/or want to pay your bills on-line and manage multiple vendors??
Visit the **Invoice Central** site - www.invoicecentral.com

Invoice is due by 06/10/18.

Invoice Questions?
Call Carter Valentine at
319-235-9313

04-27-2018 09:19:06 AM
S010224643.001

MARK

MARK

Confirmation of Delivery

Subtotal	**$19.79**
Shipping & Handling	
Sales Tax	**$0.00**
Amount Due	**$19.79**

All claims for shortages or errors must be made at once. Past due invoices may be subject to a 1.50% late charge. Our company does not manufacture the goods it sells and makes no express warranties thereon. It also disclaims all implied warranty of merchantability or fitness for a particular use. Except as prohibited by law, you are responsible for payment of all fees, costs, and expenses, including but not limited to, attorney fees, expert witness fees, and deposition expenses incurred to collect all amounts due from you. We accept credit card payments for immediate pay only and our credit terms are NET.

For Return Policy Information and Return Request Forms visit www.vanmeterinc.com and go to Online Ordering and then Return Policy or Returns Form.

For complete terms and conditions as well as EEO Compliance regulations please go to https://www.vanmeterinc.com/terms-conditions.html

Parts Specialists, Inc.
14639 Short Street
Posen, IL 60469
Phone: (708) 371-2444
Fax: (708) 371-2477

Invoice: 193014
Invoice Date: 03/21/18

Sold To SCHUMACHER ELEVATOR CO.
P.O. BOX 393
DENVER, IA 50622
ATTENTION: ACCOUNTS PAYABLE

Ship To SCHUMACHER ELEVATOR CO.
ONE SCHUMACHER WAY
DENVER, IA 50622
ATTENTION: RECEIVING DEPT.

Ship Via	Ship Date	Sales Rep	P.O. Number	P.O. Date	Buyer
EXP LOGISTIC	3/21/2018	MC	114353	3/20/2018	JR MILLER

Part# Description	Ordered	Shipped	B/O	UOM	Price	Net
TCJC79SPL TRAVELLER, JUTE, 7 #14, 64 #18, 4 SP	1000	1000	0	FOOT	$5.35	$5,350.00
63982 5/8" 8X19 RRL	125	125	0	FEET	$1.15	$143.75
63982 5/8" 8X19 RRL	125	125	0	FEET	$1.15	$143.75
63982 5/8" 8X19 RRL	125	125	0	FEET	$1.15	$143.75
63982 5/8" 8X19 RRL	125	125	0	FEET	$1.15	$143.75
63982 5/8" 8X19 RRL	125	125	0	FEET	$1.15	$143.75
63980 3/8" 8X19 RRL	215	215	0	FEET	$.68	$146.20

THIS ORDER IS COMPLETE!

RECEIVED MAR 2 6 2018

THANKS FOR THE ORDER & PLEASE CALL AGAIN

Subtotal:	$6,214.95
Tax:	$0.00
Shipping & Handling:	$0.00
Total:	$6,214.95

Customer Ship# 866-470-2776
Status/Terms NET 30 **Credit Card#**

Remit payment to:
Columbia Elevator Products Co., Inc.
7702 W. Fifth Avenue
Winfield, KS 67156
Phone: 888-858-1558
Fax: 620-442-7041

COLUMBIA ELEVATOR
CABS ENTRANCES DOOR SYSTEMS

INVOICE

Original

Schumacher Elevator Company
Attn: Kim
One Schumacher Way
PO Box 393
Denver, IA 50622

Customer SCHIA Invoice : 210/ 52038629 Date 04/10/2018

Quantity	Unit	Item	Price	Unit	Tax	Discount	Amount
		Sales Order : 228383 **Order Date : 02/06/2018** **Customer PO : 113591 SO:39070** **Ref. : 52968** **Job Name : UI MEDICAL RESEARCH FACI** **Branch Code : SCHIA/HT**					**Delivery Address** **Schumacher Elevator Company** **One Schumacher Way** **Denver, IA 50622**
6.0000	ea	D-22,MOD	501.00	ea			3006.00 (1)
		Door, Mod PrDr 2/Sp				(DR2/SP	
1.0000	ea	FREIGHT	0.00	ea			0.00
		Shipping & Handling shipped 4/10/18 od 3rd party 28102877207 exp5802737				(ECOS20 (ECOS20	

Goods	Costs	Total USD
	3006.00	3006.00

Payment: Net 30 Days
Please state with your payment : 210/ 52038629

RECEIVED APR 16 2018

INVOICE

G.A.L. MANUFACTURING COMPANY LLC
50 EAST 153RD STREET
BRONX, NEW YORK 10451-2104
PHONE: (718) 292-9000 EMAIL: info@gal.com
FAX: (718) 585-2040 WEB: www.gal.com

Page Number: 1

Invoice Number: **597832**
Packlist ID: 614238-P
Date: **3/22/2018**
Order Number: **540774-18**
Order Type: RO
Job Name: UI MEDICAL RESEARCH
F.O.B: BRONX, NY

Bill To
SCHUMACHER ELEVATOR CO., INC.
P.O. BOX 393
DENVER,IA,50622
USA

Ship To
SCHUMACHER ELEVATOR CO., INC.
ONE SCHUMACHER WAY
DENVER,IA,50622
USA

CUSTOMER ID	CUSTOMER PO	PAYMENT TERMS	FREIGHT TERMS
SCIA01	113590	1 10 NET 30	Freight: Billed

SALES REP ID	SHIPPING METHOD	SHIP DATE	INVOICE DUE DATE
	YELLOW FRT ST.	3/22/2018	4/21/2018

QUANTITY ORD	QUANTITY SHIPPED	PART	DESCRIPTION	TX	UNIT PRICE	EXTENDED PRICE
1	1	OP99-0006R	OPER,SS-2S 45"-48" D.O. MOVFR II		2,370.00	$2,370.00
1	1	SW1-0044N	SWITCH ASSY,"G" GATE		87.00	$87.00
1	1	CDH2-0010R	HANGER,A-2S 47"-48" D.O. CAR GEARE		377.00	$377.00
1	1	DPFS-0002N	EDGE KIT,FORMULA SYSTEMS, MOVF W/ FULLY INTEGRATED POWER SUPPLY		488.00	$488.00
1	1	CLU9-0004R	CLUTCH,LWZ-2 12" LINK W/24" ROD SS 45-48 DO/2SP 45-52 DO/2SCP 90-106 DO		615.00	$615.00
6	6	HH2-0165R	HANGER,A-2SP 47"-48" D.O. UNGEARE		289.00	$1,734.00
6	6	CL5-0014R	CLOSER,2S 45-48 DO & 2CP 91-98 DO		111.00	$666.00
6	6	INT1H-0004R	INTERLOCK,MOH D LINK SS 45"-48" D.O. 2SP 45"-52" D.O. 3SP 30"-54" D.O. CP-2SCP 60"-79" D.O. 3SPCP 84"-111" D.O.		144.00	$864.00
1	1	INT1H-0034N	KEY,MO INTERLOCK EMERGENCY		16.00	$16.00
			FREIGHT		(0.00)	$106.00

SUB TOTAL: **$7,323.00**

TOTAL AMOUNT DUE: **$7,323.00**

CREDIT SPECIFICATIONS

1) PAYABLE IN US FUNDS
2) IF YOU HAVE QUESTIONS ON HOW THIS INVOICE WAS CALCULATED, OR QUESTIONS ABOUT ANY OF OUR OTHER PRODUCTS,PLEASE CONTACT OUR SALES OFFICE.

INVOICE

G.A.L. MANUFACTURING COMPANY LLC
50 EAST 153RD STREET
BRONX, NEW YORK 10451-2104
PHONE: (718) 292-9000 EMAIL: info@gal.com
FAX: (718) 585-2040 WEB: www.gal.com

Page Number: 1

Invoice Number: **598970**
Packlist ID: 615449-P
Date: **3/29/2018**
Order Number: **540758-18**
Order Type: CC
Job Name: MRF #5 University of Iow
F.O.B: BRONX, NY

Bill To
SCHUMACHER ELEVATOR CO., INC.
P.O. BOX 393
DENVER,IA,50622
USA

Ship To
SCHUMACHER ELEVATOR CO., INC.
ONE SCHUMACHER WAY
DENVER,IA,50622
USA

CUSTOMER ID	CUSTOMER PO	PAYMENT TERMS	FREIGHT TERMS
SCIA01	113586	1 10 NET 30	Freight: Billed

SALES REP ID	SHIPPING METHOD	SHIP DATE	INVOICE DUE DATE
	YELLOW FRT ST.	3/29/2018	4/28/2018

QUANTITY ORD	QUANTITY SHIPPED	PART	DESCRIPTION	T X	UNIT PRICE	EXTENDED PRICE
1	1	GALX-9999N	CONTROLLER CAR #1 VVVF 30HP Car 1: Traction Controller Base, A Cabinet (67"x45.5"x16"), Serial Link to TOC and COP, Front Hall Calls, Car Call Lockouts, Distance		27,809.06	$27,809.06
1	1	GALX-0142N	External Resistor Cabinet External Resistor Cabinet		0.00	$0.00
			FREIGHT		(0.00)	$211.00

SUB TOTAL: **$28,020.06**

TOTAL AMOUNT DUE: **$28,020.06**

CREDIT SPECIFICATIONS

1) PAYABLE IN US FUNDS
2) IF YOU HAVE QUESTIONS ON HOW THIS INVOICE WAS CALCULATED, OR QUESTIONS ABOUT ANY OF OUR OTHER PRODUCTS,PLEASE CONTACT OUR SALES OFFICE.

INVOICE

G.A.L. MANUFACTURING COMPANY LLC
50 EAST 153RD STREET
BRONX, NEW YORK 10451-2104
PHONE: (718) 292-9000 EMAIL: info@gal.com
FAX: (718) 585-2040 WEB: www.gal.com

Page Number: 1

Invoice Number: **601660**
Packlist ID: 618258-P
Date: **4/19/2018**
Order Number: **549601-18**
Order Type: R
Job Name: MRF $5 UNIV OF IOWA
F.O.B: BRONX, NY

Bill To	Ship To
SCHUMACHER ELEVATOR CO., INC. P.O. BOX 393 DENVER,IA,50622 USA	SCHUMACHER ELEVATOR CO., INC. ONE SCHUMACHER WAY DENVER,IA,50622 USA

CUSTOMER ID	CUSTOMER PO	PAYMENT TERMS	FREIGHT TERMS
SCIA01	114949	1 10 NET 30	Freight: Billed

SALES REP ID	SHIPPING METHOD	SHIP DATE	INVOICE DUE DATE
	FEDEX GROUND	4/19/2018	5/19/2018

QUANTITY ORD	QUANTITY SHIPPED	PART	DESCRIPTION	TX	UNIT PRICE	EXTENDED PRICE
1	1	DOC-0025N	CONTROLLER GALAXY DIAGRAM CTR		318.00	$318.00
1	1	SW24-0004N	KIT, TYPE "MLS-2"-10 SWITCH ASSEMB		2,140.00	$2,140.00
			FREIGHT		(0.00)	$57.36

SUB TOTAL: **$2,515.36**

TOTAL AMOUNT DUE: **$2,515.36**

CREDIT SPECIFICATIONS

1) PAYABLE IN US FUNDS
2) IF YOU HAVE QUESTIONS ON HOW THIS INVOICE WAS CALCULATED, OR QUESTIONS ABOUT ANY OF OUR OTHER PRODUCTS,PLEASE CONTACT OUR SALES OFFICE.

HOLLISTER-WHITNEY ELEVATOR CO. LLC

Invoice

816574

4/10/2018

Remit To HOLLISTER-WHITNEY ELEVATOR CO. LLC
#1 HOLLISTER-WHITNEY PKWY
PO BOX 4025
QUINCY IL 62305

p) 217.222.0466
f) 217.222.0493

Order ID: 411721
Packlist ID: 119526
Job Name: UI MEDICAL RESEARCH FACILITY # 5

Sold To

SCHUMACHER ELEVATOR CO
PO BOX 393
DENVER IA 50622

Ship To

SCHUMACHER ELEVATOR CO
ONE SCHUMACHER WAY
DENVER IA 50622

Cust. ID	Customer PO	Date Shipped	Shipping Method	Tax ID	Tax Code	Tax Basis
5160	114329	04/10/2018	STAND FORW-COL			

Quantity Ordered	Quantity Shipped	Description	Tax	Unit Price	Amount
1	1	480 - TYPE "B" FLEXIBLE GUIDE CLAMP SAFETY		1,810.0000	1,810.00
2	2	378-033 - PLATE - RETAINER, 480 SAFETY & 15# RAIL		60.0000	120.00

3

RECEIVED APR 16 2018

Check, ACH/EFT and wire transfer are the preferred methods of payment. Credit card payments are also accepted, but are subject to a 4% processing fee.

Terms Summary
1% 10 DAYS, NET 30

Sub Total	$1,930.00
Tax	0.00
Freight	0.00
Payments	0.00
Prior Billing	0.00
Grand Total	$1,930.00

USD

HOLLISTER-WHITNEY ELEVATOR CO. LLC

Remit To HOLLISTER-WHITNEY ELEVATOR CO. LLC
#1 HOLLISTER-WHITNEY PKWY
PO BOX 4025
QUINCY IL 62305

p) 217.222.0466
f) 217.222.0493

Invoice

817027
4/19/2018

Order ID : 411721
Packlist ID : 119983
Job Name: UI MEDICAL RESEARCH FACILITY # 5

Sold To

SCHUMACHER ELEVATOR CO
PO BOX 393
DENVER IA 50622

Ship To

SCHUMACHER ELEVATOR CO
ONE SCHUMACHER WAY
DENVER IA 50622

Cust. ID	Customer PO	Date Shipped	Shipping Method	Tax ID	Tax Code	Tax Basis
5160	114329	04/19/2018	STAND FORW-COL			

Quantity Ordered	Quantity Shipped	Description		Tax	Unit Price	Amount
1	1	207 - 12" GOVERNOR ASSEMBLY	3000-410		750.0000	750.00
1	1	191 - TENSION WEIGHT ASSY (12" P.D.) W/GUARD	3000-485		350.0000	350.00
1	1	622 - ROPE GRIPPER ASSEMBLY W/PUMPING UNIT	3000-460		1,825.0000	1,825.00
1	1	500 - OIL BUFFER ASSEMBLY - W/O SWITCH	3000-440		430.0000	430.00
1	1	500 - OIL BUFFER ASSEMBLY - W/O SWITCH	3000-440		430.0000	430.00

RECEIVED APR 25 2018

Check, ACH/EFT and wire transfer are the preferred methods of payment. Credit card payments are also accepted, but are subject to a 4% processing fee.

Terms Summary
1% 10 DAYS, NET 30

Sub Total	$3,785.00
Tax	0.00
Freight	0.00
Payments	0.00
Prior Billing	0.00
Grand Total	$3,785.00

USD

Parts Specialists, Inc.
14639 Short Street
Posen, IL 60469
Phone: (708) 371-2444
Fax: (708) 371-2477

Invoice: 193412
Invoice Date: 04/19/18

Sold To SCHUMACHER ELEVATOR CO.
P.O. BOX 393
DENVER, IA 50622
ATTENTION: ACCOUNTS PAYABLE

Ship To SCHUMACHER ELEVATOR CO.
ONE SCHUMACHER WAY
DENVER, IA 50622
ATTENTION: RECEIVING DEPT.

Ship Via	Ship Date	Sales Rep	P.O. Number	P.O. Date	Buyer
EXP LOGIST	4/19/2018	TPD	114898	4/16/2018	JR MILLER

Part#	Description	Ordered	Shipped	B/O	UOM	Price	Net
CONTRACT NUMBER: 40006075							
5168X19STR	5/16" 8X19 SISSAL TRACTION ROPE	80	0	0	FOOT	$.67	$.00
JOB NUMBER: 39070							
HC6118	HOISTWAY CABLE, 61 #18, 600V	140	0	0	FOOT	$3.25	$.00
JOB NUMBER: 38453							
58819IWRC	5/8 STEEL CABLE 8X19 IWRC	300	300	0	FT	$1.60	$480.00
58819IWRC	5/8 STEEL CABLE 8X19 IWRC	300	300	0	FT	$1.60	$480.00
58819IWRC	5/8 STEEL CABLE 8X19 IWRC	300	300	0	FT	$1.60	$480.00
58819IWRC	5/8 STEEL CABLE 8X19 IWRC	300	300	0	FT	$1.60	$480.00
58819IWRC	5/8 STEEL CABLE 8X19 IWRC	300	300	0	FT	$1.60	$480.00
58819IWRC	5/8 STEEL CABLE 8X19 IWRC	300	300	0	FT	$1.60	$480.00

RECEIVED APR 2 4 2018

Description	Ordered	Shipped	B/O	UOM	Price	Net

THIS ORDER IS COMPLETE!

THANKS FOR THE ORDER & PLEASE CALL AGAIN

Subtotal:	$2,880.00
Tax:	$0.00
Shipping & Handling:	$0.00
Total:	$2,880.00

Customer Ship# 866-470-2776

Status/Terms NET 30 **Credit Card#**

Labor Cost - Schumacher

Labor	Mechanic Regula	1.7 Helper Regular	Mileage	Parking	Peridium	Hotels	
4/5/2018	4		212		43.44		Dale Bright
4/6/2018	2		83		43.44		Scott Even
4/6/2018		2	112		43.44		Cody Richael
4/9/2018	8		83		43.44		Scott Even
4/9/2018		8	112		43.44		Cody Richael
4/10/2018	8		83		43.44		Scott Even
4/10/2018		8	112		43.44		Cody Richael
4/11/2018	8		83		43.44		Scott Even
4/11/2018		8			43.44		Cody Richael
4/11/2018	1				43.44		Ryan Hagarty
4/11/2018	1						Bryan Harper
4/12/2018	5.5		83		43.44		Scott Even
4/12/2018		5.5	112		43.44		Cody Richael
4/13/2018	8		83		43.44		Scott Even
4/13/2018		8	112		43.44		Cody Richael
4/16/2018	8		83		43.44		Scott Even
4/16/2018		8	112		43.44		Cody Richael
4/17/2018	8		83		43.44		Scott Even
4/17/2018		8	112		43.44		Cody Richael
4/18/2018	5		83		43.44		Scott Even
4/18/2018		4	112		43.44		Cody Richael
4/19/2018	8		83		43.44		Scott Even
4/19/2018		8	112		43.44		Cody Richael
4/20/2018	8		57		43.44		Mark Dahlstrom
4/20/2018		8	112		43.44		Cody Richael
4/23/2018	4		57		43.44		Mark Dahlstrom
4/23/2018		4	112		43.44		Cody Richael
4/24/2018	8		57		43.44		Mark Dahlstrom
4/24/2018		8	112		43.44		Cody Richael
4/25/2018	8		57		43.44		Mark Dahlstrom
4/25/2018		8	112		43.44		Cody Richael
4/26/2018	8		57		43.44		Mark Dahlstrom
4/26/2018		8	112		43.44		Cody Richael
4/27/2018	8		57		43.44		Mark Dahlstrom
4/27/2018		8	112		43.44		Cody Richael
5/1/2018	8		57		43.44		Mark Dahlstrom
5/1/2018		8	112		43.44		Cody Richael
5/2/2018	5		57		43.44		Mark Dahlstrom
5/2/2018		5	112		43.44		Cody Richael
5/3/2018	8		57		43.44		Mark Dahlstrom
5/3/2018		8	112		43.44		Cody Richael
5/4/2018	8		57		43.44		Mark Dahlstrom
5/4/2018		8	112		43.44		Cody Richael
	147.5	140.5	3740				
	196.31	172.04	0.75				
	$ 28,955.73	$ 24,171.62	$ 2,805.00		$ 1,824.48		***$ 57,756.83***

THE UNIVERSITY OF IOWA

FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 4/5/18

Subcontractor SCHUMACHER ELEVATOR Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number #0744901

Description of Work Survey Hoistway + travel

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
Dale Bright	Elev		4						

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) Dale Bright

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W27323/4-17

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 *Fax* 319-335-2722

Date: 4-5-18

Job #: 39070 Elevator ID#:

Project Name:

City & State:

800-779-5438
Established in 1936

Schumacher
Elevator Company

One Schumacher Way
P.O. Box 393 – Denver, IA 50622

Cedar Rapids	319-362-1017
Davenport	800-779-5438
Denver	319-984-5676
Des Moines	515-243-5487
Dubuque	563-588-4863
Fort Dodge	515-576-7266
Iowa City	800-779-5438
Marshalltown	800-779-5438
Mason City	641-424-1307
Ottumwa	800-779-5438
Sioux City	712-258-3535
Waterloo	319-984-5676
Quincy, IL	800-779-5438
Rockford, IL	815-963-8340
Minneapolis, MN	612-333-3066
Rochester, MN	507-285-0251
Kirksville, MO	800-779-5438
Sioux Falls, SD	800-779-5438
LaCrosse, WI	608-788-8410
Madison, WI	608-222-3766

HOURS	ST	1.5	1.7	DT
Mech. Hours	4			
Helper Hours				
Team Hours				
Travel Time				
Total Time				

MISC. EXPENSES	AMOUNT
Expense Report	
Miles	
Parking	

WORK DONE: survey hoistway

MATERIAL	AMOUNT

JOB COMPLETED: ☐ YES ☐ NO

FOR OFFICE USE ONLY
☐ BILLABLE ☐ ALLOWANCE ☐ CHANGE ORDER

WORK DONE BY: Caleb Smith

WORK AUTHORIZED BY:

PRINTED NAME:

COMPANY REQUESTING WORK:

THE UNIVERSITY OF IOWA

FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 4-6-18

Subcontractor SCHUMACHER ELEVATOR Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number #0744901

Description of Work Traveled time to Iowa City from job in Dubuque
TO START WEEK OF 4/9

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
Scott Evan	Elev		2						
Cody Richeal	Elev		2						

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W27323/4-17

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722

Date: 4-6-18

Job #: 39070 Elevator ID#:

Project Name: U of IA MRF

City & State: Iowa City, IA

800-779-5438
Established in 1936

Schumacher
Elevator Company

One Schumacher Way
P.O. Box 393 – Denver, IA 50622

Cedar Rapids 319-362-1017
Davenport 800-779-5438
Denver 319-984-5676
Des Moines 515-243-5487
Dubuque 563-588-4863
Fort Dodge 515-576-7266
Iowa City 800-779-5438
Marshalltown 800-779-5438
Mason City 641-424-1307
Ottumwa 800-779-5438
Sioux City 712-258-3535
Waterloo 319-984-5676
Quincy, IL 800-779-5438
Rockford, IL 815-963-8340
Minneapolis, MN 612-333-3066
Rochester, MN 507-285-0251
Kirksville, MO 800-779-5438
Sioux Falls, SD 800-779-5438
LaCrosse, WI 608-788-8410
Madison, WI 608-222-3766

HOURS	ST	1.5	1.7	DT
Mech. Hours	2 T.T.			
Helper Hours	2 T.T.			
Team Hours				
Travel Time				
Total Time	4 T.T.			

MISC. EXPENSES	AMOUNT
Expense Report	
Miles	87 per Cody
Parking	

WORK DONE: Traveled time to Iowa City from job in Dubuque.

MATERIAL	AMOUNT

JOB COMPLETED: ☐ YES ☐ NO

FOR OFFICE USE ONLY
☐ BILLABLE ☐ ALLOWANCE ☐ CHANGE ORDER

WORK AUTHORIZED BY:

PRINTED NAME: Mark TOTH

WORK DONE BY: Scott Even / Cody Richeal

COMPANY REQUESTING WORK:

THE UNIVERSITY OF IOWA

FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 4/9/18

Subcontractor SCHUMACHER ELEVATOR Change Order Request No _____

Project Name MEF WATER DAMAGE REPAIR Project Number #0744901

Description of Work Unload job boxes, carts, etc. Unload Elevator equipment and store in Basement. Unload tools from van. Start assembling sling & platform.

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
Scott Evon	Elev.		8						
Cody Richeal	Elev.		8						

Equipment and Material (attach invoices)

Quantity	Description
1	Sling + Platform + guides
5/1	Hoist cables / Gov Cable
7	Door tracks + guides
10	Shackles for cables
	Sling hardware
4	Hoistway switches

Subcontractor's Representative (if applicable) Scott Evon

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W27323/4 17

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722

Date: 4-9-18

Job #: 39070 Elevator ID#:

Project Name: U of IA MRF

City & State: Iowa City, IA

800-779-5438
Established in 1936

Schumacher Elevator Company

One Schumacher Way
P.O. Box 393 – Denver, IA 50622

Cedar Rapids 319-362-1017
Davenport 800-779-5438
Denver 319-984-5676
Des Moines 515-243-5487
Dubuque 563-588-4863
Fort Dodge 515-576-7266
Iowa City 800-779-5438
Marshalltown 800-779-5438
Mason City 641-424-1307
Ottumwa 800-779-5438
Sioux City 712-258-3535
Waterloo 319-984-5676
Quincy, IL 800-779-5438
Rockford, IL 815-963-8340
Minneapolis, MN 612-333-3066
Rochester, MN 507-285-0251
Kirksville, MO 800-779-5438
Sioux Falls, SD 800-779-5438
LaCrosse, WI 608-788-8410
Madison, WI 608-222-3766

HOURS	ST	1.5	1.7	DT
Mech. Hours				
Helper Hours				
Team Hours	8			
Travel Time				
Total Time	8			

MISC. EXPENSES	AMOUNT
Expense Report	
Miles	
Parking	

WORK DONE: Unload job boxes, carts, etc, Unload Elevator equipment and store in Basement. Unload tools from van. Start assembling sling & platform.

Delivered today

MATERIAL	AMOUNT
Sling & platform & guides	
Hoist cables & gov. cable	
Door tracks & guides	
Shackles for cables	
Sling hardware	
Hoistway switches	

JOB COMPLETED: ☐ YES ☐ NO

FOR OFFICE USE ONLY
☐ BILLABLE ☐ ALLOWANCE ☐ CHANGE ORDER

WORK AUTHORIZED BY:

PRINTED NAME: Mark Toth

COMPANY REQUESTING WORK:

WORK DONE BY: Scott Even Cody Richeal

THE UNIVERSITY OF IOWA

FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 4/10/18

Subcontractor SCHUMACHER ELEV Change Order Request No _____

Project Name MLF WATER DAMAGE REPAIR Project Number #0744901

Description of Work ELEVATOR INSTALL, Assembled Sling. Tore out old governor, gov. cable, gov. tail sheave + rope gripper.

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
SCOTT EVEN	ELEV.		8	0					
CODY RICHEAL	ELEV.		8	0					

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) Scott Even

General Contractor's Representative _____

Owner's Representative (Required) David Cassel

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W27323/4-17

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722

Date: 4-10-18

Job #: 39070 Elevator ID#:

Project Name: U of IA MRF

City & State: Iowa City, IA

800-779-5438
Established in 1936

Schumacher
Elevator Company

One Schumacher Way
P.O. Box 393 – Denver, IA 50622

Cedar Rapids	319-362-1017
Davenport	800-779-5438
Denver	319-984-5676
Des Moines	515-243-5487
Dubuque	563-588-4863
Fort Dodge	515-576-7266
Iowa City	800-779-5438
Marshalltown	800-779-5438
Mason City	641-424-1307
Ottumwa	800-779-5438
Sioux City	712-258-3535
Waterloo	319-984-5676
Quincy, IL	800-779-5438
Rockford, IL	815-963-8340
Minneapolis, MN	612-333-3066
Rochester, MN	507-285-0251
Kirksville, MO	800-779-5438
Sioux Falls, SD	800-779-5438
LaCrosse, WI	608-788-8410
Madison, WI	608-222-3766

HOURS	ST	1.5	1.7	DT
Mech. Hours				
Helper Hours				
Team Hours	8			
Travel Time				
Total Time	8			

MISC. EXPENSES	AMOUNT
Expense Report	
Miles	
Parking	

WORK DONE: Assembled Sling, Tore out old gov., gov. cable, gov tail Sheave, and rope gripper.

MATERIAL	AMOUNT

JOB COMPLETED: ☐ YES ☐ NO

FOR OFFICE USE ONLY
☐ BILLABLE ☐ ALLOWANCE ☐ CHANGE ORDER

WORK AUTHORIZED BY:

PRINTED NAME: MARK TOTH

WORK DONE BY: Scott Evan / Cody Rothead

COMPANY REQUESTING WORK: WOODRUFF CONST. CO.

THE UNIVERSITY OF IOWA

FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 4/11/18

Subcontractor SCHUMACHER ELEVATOR Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number #0744901

Description of Work ELEVATOR INSTALL. Demo old controller, piping, wiring, Install New Controller, pipe, + wire. Had 2 more guys help carry new controller upstairs.

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
SCOTT EVEN	ELEV.		8	Ø					
CODY RICHEAL	ELEV.		8	Ø					
Ryan Hagarty	ELEV.		1	Ø					
Brian Harper	ELEV.		1	Ø					

Equipment and Material (attach invoices)

Quantity	Description
1	GAL Controller

Subcontractor's Representative (if applicable) Scott Even

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W27323/4-17

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 *Fax* 319-335-2722

Date: 4-11-18

Job #: 39070 Elevator ID#:

Project Name: MRF

City & State: Iowa City

800-779-5438
Established in 1936
Schumacher Elevator Company
One Schumacher Way
P.O. Box 393 – Denver, IA 50622

Cedar Rapids 319-362-1017
Davenport 800-779-5438
Denver 319-984-5676
Des Moines 515-243-5487
Dubuque 563-588-4863
Fort Dodge 515-576-7266
Iowa City 800-779-5438
Marshalltown 800-779-5438
Mason City 641-424-1307
Ottumwa 800-779-5438
Sioux City 712-258-3535
Waterloo 319-984-5676
Quincy, IL 800-779-5438
Rockford, IL 815-963-8340
Minneapolis, MN 612-333-3066
Rochester, MN 507-285-0251
Kirksville, MO 800-779-5438
Sioux Falls, SD 800-779-5438
LaCrosse, WI 608-788-8410
Madison, WI 608-222-3766

HOURS	ST	1.5	1.7	DT
Mech. Hours	1			
Helper Hours				
Team Hours	1			
Travel Time				
Total Time	1			

MISC. EXPENSES	AMOUNT
Expense Report	
Miles	
Parking	

WORK DONE: Helped lift controller to machine room.

MATERIAL	AMOUNT

JOB COMPLETED: ☐ YES ☐ NO

FOR OFFICE USE ONLY
☐ BILLABLE ☐ ALLOWANCE ☐ CHANGE ORDER

WORK AUTHORIZED BY:

PRINTED NAME:

WORK DONE BY: Ryan Hagert B. HARPER

COMPANY REQUESTING WORK:

Date: 4-11-18

Job #: 39070 Elevator ID#:

Project Name: U of IA MRF

City & State: Iowa City, IA

800-779-5438
Established in 1936
Schumacher Elevator Company
One Schumacher Way
P.O. Box 393 – Denver, IA 50622

Cedar Rapids 319-362-1017
Davenport 800-779-5438
Denver 319-984-5676
Des Moines 515-243-5487
Dubuque 563-588-4863
Fort Dodge 515-576-7266
Iowa City 800-779-5438
Marshalltown 800-779-5438
Mason City 641-424-1307
Ottumwa 800-779-5438
Sioux City 712-258-3535
Waterloo 319-984-5676
Quincy, IL 800-779-5438
Rockford, IL 815-963-8340
Minneapolis, MN 612-333-3066
Rochester, MN 507-285-0251
Kirksville, MO 800-779-5438
Sioux Falls, SD 800-779-5438
LaCrosse, WI 608-788-8410
Madison, WI 608-222-3766

HOURS	ST	1.5	1.7	DT
Mech. Hours				
Helper Hours				
Team Hours	8			
Travel Time				
Total Time	8			

MISC. EXPENSES	AMOUNT
Expense Report	
Miles	
Parking	

WORK DONE: Demo old controller, piping, + wiring. Install New controller, pipe, + wire.

MATERIAL	AMOUNT
1 GAL Controller	

JOB COMPLETED: ☐ YES ☐ NO

FOR OFFICE USE ONLY
☐ BILLABLE ☐ ALLOWANCE ☐ CHANGE ORDER

WORK AUTHORIZED BY:

PRINTED NAME: MARK TOTH

WORK DONE BY: Scott Even / Cody Richeal

COMPANY REQUESTING WORK: W.C.C.

THE UNIVERSITY OF IOWA

FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 4/12/18

Subcontractor SCHUMACHER ELEVATOR Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number #0744901

Description of Work Machine Room piping + wiring

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
SCOTT EVAN	ELEV.		5½						
CODY RICHEAL	ELEV.		5½						

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) Scott Evan

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W27323/4-17

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 *Fax* 319-335-2722

Date: 4-12-18

Job #: 39070 Elevator ID#:

Project Name: U of IA MRF

City & State: Iowa City, IA

800-779-5438
Established in 1936

Schumacher
Elevator Company

One Schumacher Way
P.O. Box 393 – Denver, IA 50622

Cedar Rapids 319-362-1017
Davenport 800-779-5438
Denver 319-984-5676
Des Moines 515-243-5487
Dubuque 563-588-4863
Fort Dodge 515-576-7266
Iowa City 800-779-5438
Marshalltown 800-779-5438
Mason City 641-424-1307
Ottumwa 800-779-5438
Sioux City 712-258-3535
Waterloo 319-984-5676
Quincy, IL 800-779-5438
Rockford, IL 815-963-8340
Minneapolis, MN 612-333-3066
Rochester, MN 507-285-0251
Kirksville, MO 800-779-5438
Sioux Falls, SD 800-779-5438
LaCrosse, WI 608-788-8410
Madison, WI 608-222-3766

HOURS	ST	1.5	1.7	DT
Mech. Hours				
Helper Hours				
Team Hours	5 1/2			
Travel Time				
Total Time	5 1/2			

MISC. EXPENSES	AMOUNT
Expense Report	
Miles	
Parking	

WORK DONE: Machine Room piping + wiring.

MATERIAL	AMOUNT

JOB COMPLETED: ☐ YES ☐ NO

FOR OFFICE USE ONLY
☐ BILLABLE ☐ ALLOWANCE ☐ CHANGE ORDER

WORK AUTHORIZED BY:

PRINTED NAME: MARK TOTH

COMPANY REQUESTING WORK: W.C.C.

WORK DONE BY: Scott Ben / Cody Richard

THE UNIVERSITY OF IOWA

FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 4/13/18

Subcontractor SCHUMAKER ELEVATOR Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number #0744901

Description of Work Install saffies, guide shoes, + platform.
Unload truck, put jumpers in controller.

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
Scott Tinen	Elev		8						
Carl Richard	Elev		8						

Equipment and Material (attach invoices)

Quantity	Description
1	Set of Saffies
12	Hatch Doors

Subcontractor's Representative (if applicable) Scott Tinen

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W27323/4-17

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722

Date: 4-13-18

Job #: 39070 Elevator ID#:

Project Name: U of IA MRF

City & State: Iowa City, IA

800-779-5438
Established in 1936

Schumacher
Elevator Company

One Schumacher Way
P.O. Box 393 – Denver, IA 50622

HOURS	ST	1.5	1.7	DT
Mech. Hours				
Helper Hours				
Team Hours	8			
Travel Time				
Total Time	8			

MISC. EXPENSES	AMOUNT
Expense Report	
Miles	
Parking	

Cedar Rapids 319-362-1017
Davenport 800-779-5438
Denver 319-984-5676
Des Moines 515-243-5487
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Rochester, MN 507-285-0251
Kirksville, MO 800-779-5438
Sioux Falls, SD 800-779-5438
LaCrosse, WI 608-788-8410
Madison, WI 608-222-3766

WORK DONE: Install jumpers in controller, Unload Doors + Softies, Install softies, guide shoes, + platform.

MATERIAL	AMOUNT
Softies	
Hatch Doors	

FOR OFFICE USE ONLY
☐ BILLABLE ☐ ALLOWANCE ☐ CHANGE ORDER

JOB COMPLETED: ☐ YES ☐ NO

WORK AUTHORIZED BY:

PRINTED NAME: MARC TOTH

COMPANY REQUESTING WORK: W.C.C.

WORK DONE BY: Scott Green / Cody Richeal

THE UNIVERSITY OF IOWA

FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 4/16/18

Subcontractor SCHUMACHER ELEVATOR Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number #0744901

Description of Work Finish installing platform. Hang 2 ton hoist in machine room for hoisting car to top floor. Hoist car. Set up for cabling.

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
Scott Even	Elev		8						
Cody Richeal	Elev		8						

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) Scott Even

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W27323/4-17

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722

Date: 4-16-18

Job #: 39070 Elevator ID#:

Project Name: U of IA MRF

City & State: Iowa City, IA

800–779–5438
Established in 1936

Schumacher Elevator Company

One Schumacher Way
P.O. Box 393 – Denver, IA 50622

Cedar Rapids	319–362–1017
Davenport	800–779–5438
Denver	319–984–5676
Des Moines	515–243–5487
Dubuque	563–588–4863
Fort Dodge	515–576–7266
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Marshalltown	800–779–5438
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Ottumwa	800–779–5438
Sioux City	712–258–3535
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Quincy, IL	800–779–5438
Rockford, IL	815–963–8340
Minneapolis, MN	612–333–3066
Rochester, MN	507–285–0251
Kirksville, MO	800–779–5438
Sioux Falls, SD	800–779–5438
LaCrosse, WI	608–788–8410
Madison, WI	608–222–3766

HOURS	ST	1.5	1.7	DT
Mech. Hours				
Helper Hours				
Team Hours	8			
Travel Time				
Total Time	8			

MISC. EXPENSES	AMOUNT
Expense Report	
Miles	
Parking	

WORK DONE: Finish bolting up platform for 1¼ gap spacing, Hang 2 ton hoist in M.R. for hoisting car to the floor, Hoist car, Set up for cabling.

MATERIAL	AMOUNT

JOB COMPLETED: ☐ YES ☐ NO

FOR OFFICE USE ONLY
☐ BILLABLE ☐ ALLOWANCE ☐ CHANGE ORDER

WORK AUTHORIZED BY:

PRINTED NAME: MACK TOTH

WORK DONE BY: Scott Evers Cody Richeal

COMPANY REQUESTING WORK: W.C.C

THE UNIVERSITY OF IOWA

FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 4/17/18

Subcontractor SCHUMACHER ELEV. Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number #0744901

Description of Work Cable Elevator, Tear Down Hoisting Equipment, Level Platform, Mount handrail on platform for safety, Mount new Brake switch and wire.

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
Scott Even	Elev		8						
Cody Richard	Elev		8						

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W27323/4-17

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722

Date: 4-17-18

Job #: 39070 Elevator ID#:

Project Name: U of IA MRF

City & State: Iowa City, IA

800-779-5438
Established in 1936

Schumacher
Elevator Company

One Schumacher Way
P.O. Box 393 – Denver, IA 50622

Cedar Rapids	319-362-1017
Davenport	800-779-5438
Denver	319-984-5676
Des Moines	515-243-5487
Dubuque	563-588-4863
Fort Dodge	515-576-7266
Iowa City	800-779-5438
Marshalltown	800-779-5438
Mason City	641-424-1307
Ottumwa	800-779-5438
Sioux City	712-258-3535
Waterloo	319-984-5676
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Rockford, IL	815-963-8340
Minneapolis, MN	612-333-3066
Rochester, MN	507-285-0251
Kirksville, MO	800-779-5438
Sioux Falls, SD	800-779-5438
LaCrosse, WI	608-788-8410
Madison, WI	608-222-3766

HOURS	ST	1.5	1.7	DT
Mech. Hours				
Helper Hours				
Team Hours	8			
Travel Time				
Total Time	8			

MISC. EXPENSES	AMOUNT
Expense Report	
Miles	
Parking	

WORK DONE: Cable Elevator, Tear Down hoisting equipment, Level Platform, Put up handrail on platform, Mount new Brake switch and wire.

MATERIAL	AMOUNT

JOB COMPLETED: ☐ YES ☐ NO

FOR OFFICE USE ONLY
☐ BILLABLE ☐ ALLOWANCE ☐ CHANGE ORDER

WORK AUTHORIZED BY:

PRINTED NAME: Mark Todd

WORK DONE BY: Scott Elsen / Cody Richard

COMPANY REQUESTING WORK: W.C.C.

THE UNIVERSITY OF IOWA

FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 4/18/18

Subcontractor SCHUMACHER ELEV. Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number #0744901

Description of Work Counter balance car & cwt. Fire up controller and go through parameters & drive, Start on 5th floor doors.

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
Scott Even	Elev		5						
Cody Richard	Elev		4						

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) Scott E.

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W27323/4-17

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722

Date: 4-18-18

Job #: 39070 Elevator ID#:

Project Name: U of IA MRF

City & State: Iowa City, IA

800-779-5438
Established in 1936

Schumacher
Elevator Company

One Schumacher Way
P.O. Box 393 – Denver, IA 50622

Cedar Rapids 319-362-1017
Davenport 800-779-5438
Denver 319-984-5676
Des Moines 515-243-5487
Dubuque 563-588-4863
Fort Dodge 515-576-7266
Iowa City 800-779-5438
Marshalltown 800-779-5438
Mason City 641-424-1307
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Waterloo 319-984-5676
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Rockford, IL 815-963-8340
Minneapolis, MN 612-333-3066
Rochester, MN 507-285-0251
Kirksville, MO 800-779-5438
Sioux Falls, SD 800-779-5438
LaCrosse, WI 608-788-8410
Madison, WI 608-222-3766

HOURS	ST	1.5	1.7	DT
Mech. Hours	5			
Helper Hours	4			
Team Hours				
Travel Time				
Total Time	9			

MISC. EXPENSES	AMOUNT
Expense Report	
Miles	
Parking	

WORK DONE: Carry down cwt weights to put on car to counter balance. Fired up controller, went through parameters & drive. Started on 5th floor doors.

MATERIAL	AMOUNT

JOB COMPLETED: ☐ YES ☐ NO

FOR OFFICE USE ONLY
☐ BILLABLE ☐ ALLOWANCE ☐ CHANGE ORDER

WORK AUTHORIZED BY: MARK TOTH

PRINTED NAME:

COMPANY REQUESTING WORK: W.C.C.

WORK DONE BY: Scott [illegible] / Cody Richard

THE UNIVERSITY OF IOWA

FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 4/19/18

Subcontractor SCHUMACHER ELEV. Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number #0744901

Description of Work Adjusted controller + Drive to run on construction mode.
Finished 5th floor Doors. Prepped for 4th floor Doors.

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
Scott Even	Elev		8						
Cody Kichel	Elev		8						

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) Scott Even

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W27323/4-17

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722

Date: 4-18-18

Job #: 39070 Elevator ID#:

Project Name: U of IA MRF

City & State: Iowa City, IA

800–779–5438
Established in 1936

Schumacher Elevator Company

One Schumacher Way
P.O. Box 393 – Denver, IA 50622

Cedar Rapids 319–362–1017
Davenport 800–779–5438
Denver 319–984–5676
Des Moines 515–243–5487
Dubuque 563–588–4863
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Rochester, MN 507–285–0251
Kirksville, MO 800–779–5438
Sioux Falls, SD 800–779–5438
LaCrosse, WI 608–788–8410
Madison, WI 608–222–3766

HOURS	ST	1.5	1.7	DT
Mech. Hours				
Helper Hours				
Team Hours	8			
Travel Time				
Total Time	8			

MISC. EXPENSES	AMOUNT
Expense Report	
Miles	
Parking	

WORK DONE: Adjusted Controller + Drive to run on construction mode. Finished 5th floor doors. Prepped for 4th floor doors.

MATERIAL	AMOUNT

FOR OFFICE USE ONLY
☐ BILLABLE ☐ ALLOWANCE ☐ CHANGE ORDER

JOB COMPLETED: ☐ YES ☐ NO

WORK AUTHORIZED BY:

PRINTED NAME: MARK TOTH

COMPANY REQUESTING WORK: W.C.C.

WORK DONE BY: Scott Ewin / Cody Richeal

THE UNIVERSITY OF IOWA

FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 4/20/18

Subcontractor SCHUMACHER ELEV. Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number #0744901

Description of Work Replace door equipment on 3rd + 4th. floor.
- unload equipment

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
Mark Dahlstrom	Elevator		8						
Cody Richeal	Elevator		8						

Equipment and Material (attach invoices)

Quantity	Description
2	air Buffers
1	Rope Gripper — Solve order 39070
1	Governor
1	Governor tension weight
1	Electrical package

Subcontractor's Representative (if applicable) Mark Dahlstrom

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W27323/4-17

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722

Date: 4-20-18

Job #: 39070 Elevator ID#:

Project Name: Medical Research Facility

City & State: Iowa City, IA

800-779-5438
Established in 1936

Schumacher
Elevator Company

One Schumacher Way
P.O. Box 393 – Denver, IA 50622

HOURS	ST	1.5	1.7	DT
Mech. Hours				
Helper Hours				
Team Hours	8			
Travel Time				
Total Time	8			

MISC. EXPENSES	AMOUNT
Expense Report	
Miles	
Parking	

Cedar Rapids 319-362-1017
Davenport 800-779-5438
Denver 319-984-5676
Des Moines 515-243-5487
Dubuque 563-588-4863
Fort Dodge 515-576-7266
Iowa City 800-779-5438
Marshalltown 800-779-5438
Mason City 641-424-1307
Ottumwa 800-779-5438
Sioux City 712-258-3535
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Quincy, IL 800-779-5438
Rockford, IL 815-963-8340
Minneapolis, MN 612-333-3066
Rochester, MN 507-285-0251
Kirksville, MO 800-779-5438
Sioux Falls, SD 800-779-5438
LaCrosse, WI 608-788-8410
Madison, WI 608-222-3766

WORK DONE:

- Replaced and adjusted hoistway door equipment on 3rd and 4th floors
- unloaded truck and stored material.

MATERIAL	AMOUNT
Oil Buffers 2.	
Rope Gripper	
Governor	
Tension weight	
Electrical package	

JOB COMPLETED: ☐ YES ☒ NO

FOR OFFICE USE ONLY
☐ BILLABLE ☐ ALLOWANCE ☐ CHANGE ORDER

WORK AUTHORIZED BY:

PRINTED NAME: MARK TOTH

WORK DONE BY: Mark Dahlstrom, Cody Richeal

COMPANY REQUESTING WORK: W.C.C.

THE UNIVERSITY OF IOWA

Facilities Management
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 4/23/18

Subcontractor SCHUMACHER ELEVATOR Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number #0744901

Description of Work _____

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
DAHLSTROM	ELEV.		4						
RICHEAL	ELEV.		4						

Equipment and Material (attach invoices)

Quantity	Description
	Installed the speed governor and tail sheave.

Subcontractor's Representative (if applicable) Mike Ducketter

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W31818/3-18

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722

Date: 4-23-18

Job #: 39070 Elevator ID#:

Project Name: Medical Research Facility

City & State: Iowa City, IA

800-779-5438
Established in 1936

Schumacher
Elevator Company

One Schumacher Way
P.O. Box 393 – Denver, IA 50622

Cedar Rapids	319-362-1017
Davenport	800-779-5438
Denver	319-984-5676
Des Moines	515-243-5487
Dubuque	563-588-4863
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Kirksville, MO	800-779-5438
Sioux Falls, SD	800-779-5438
LaCrosse, WI	608-788-8410
Madison, WI	608-222-3766

HOURS	ST	1.5	1.7	DT
Mech. Hours				
Helper Hours				
Team Hours	4			
Travel Time				
Total Time	4			

MISC. EXPENSES	AMOUNT
Expense Report	
Miles	
Parking	

WORK DONE:

Installed the speed governor and tail sheave.

MATERIAL	AMOUNT

JOB COMPLETED: ☐ YES ☒ NO

FOR OFFICE USE ONLY
☐ BILLABLE ☐ ALLOWANCE ☐ CHANGE ORDER

WORK AUTHORIZED BY: X

PRINTED NAME: MARK TOTH

COMPANY REQUESTING WORK: WCC

WORK DONE BY: Mark Dahlstrom, Cody Richeal

THE UNIVERSITY OF IOWA

Facilities Management
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 4/24/18

Subcontractor SCHUMACHER ELEVATOR Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number # 0744 901

Description of Work _____

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
DAHLSTROM	ELEV.		8						
RICHEAL	ELEV.		8						

Equipment and Material (attach invoices)

Quantity	Description
	- Installed safety rod bracket
	- Installed the governor cable
	- Replaced the door equipment on 1st and 2nd

Subcontractor's Representative (if applicable) Mark Dahlstrom

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W31815/3-18

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722

Date: 4-24-18

Job #: 39070 Elevator ID#:

Project Name: Medical Research Facility

City & State: Iowa City, IA

800–779–5438
Established in 1936

Schumacher Elevator Company

One Schumacher Way
P.O. Box 393 – Denver, IA 50622

Cedar Rapids 319–362–1017
Davenport 800–779–5438
Denver 319–984–5676
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Fort Dodge 515–576–7266
Iowa City 800–779–5438
Marshalltown 800–779–5438
Mason City 641–424–1307
Ottumwa 800–779–5438
Sioux City 712–258–3535
Waterloo 319–984–5676
Quincy, IL 800–779–5438
Rockford, IL 815–963–8340
Minneapolis, MN 612–333–3066
Rochester, MN 507–285–0251
Kirksville, MO 800–779–5438
Sioux Falls, SD 800–779–5438
LaCrosse, WI 608–788–8410
Madison, WI 608–222–3766

HOURS	ST	1.5	1.7	DT
Mech. Hours				
Helper Hours				
Team Hours	8			
Travel Time				
Total Time	8			

MISC. EXPENSES	AMOUNT
Expense Report	
Miles	
Parking	

WORK DONE:

- Installed safety rod bracket
- Installed governor cable
- Replaced the door equipment at 1st and 2nd floors

MATERIAL	AMOUNT

FOR OFFICE USE ONLY
☐ BILLABLE ☐ ALLOWANCE ☐ CHANGE ORDER

JOB COMPLETED: ☐ YES ☒ NO

WORK AUTHORIZED BY: [signature]

PRINTED NAME: MARK HOLT

WORK DONE BY: Mark Dahlstrom, Cody Richey

COMPANY REQUESTING WORK: W.C.C.

THE UNIVERSITY OF IOWA

Facilities Management
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 4/25/18

Subcontractor SCHUMACHER ELEVATOR Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number #0744901

Description of Work _____

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
DAHLSTROM	ELEV.		8						
EICHEAL	ELEV.		8						

Equipment and Material (attach invoices)

Quantity	Description
	- Replaced the door equipment on basement floor
	- Installed car and counterweight buffers
	- Installed hatch wiring duct

Subcontractor's Representative (if applicable) Mark Dudden

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W31815/3-18

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722

Date: 4-25-18

Job #: 39070 Elevator ID#:

Project Name: Medical Research Facility

City & State: Iowa City, IA

800-779-5438
Established in 1936

Schumacher
Elevator Company

One Schumacher Way
P.O. Box 393 – Denver, IA 50622

Cedar Rapids 319-362-1017
Davenport 800-779-5438
Denver 319-984-5676
Des Moines 515-243-5487
Dubuque 563-588-4863
Fort Dodge 515-576-7266
Iowa City 800-779-5438
Marshalltown 800-779-5438
Mason City 641-424-1307
Ottumwa 800-779-5438
Sioux City 712-258-3535
Waterloo 319-984-5676
Quincy, IL 800-779-5438
Rockford, IL 815-963-8340
Minneapolis, MN 612-333-3066
Rochester, MN 507-285-0251
Kirksville, MO 800-779-5438
Sioux Falls, SD 800-779-5438
LaCrosse, WI 608-788-8410
Madison, WI 608-222-3766

HOURS	ST	1.5	1.7	DT
Mech. Hours				
Helper Hours				
Team Hours	8			
Travel Time				
Total Time	8			

MISC. EXPENSES	AMOUNT
Expense Report	
Miles	
Parking	

WORK DONE:

- Replaced door equipment - Basement
- Installed car and counter weight buffers
- Installed hatch wiring duct

MATERIAL	AMOUNT

FOR OFFICE USE ONLY
☐ BILLABLE ☐ ALLOWANCE ☐ CHANGE ORDER

JOB COMPLETED: ☐ YES ☒ NO

WORK AUTHORIZED BY: [signature]

PRINTED NAME: MARK TOTH

COMPANY REQUESTING WORK: W.C.C.

WORK DONE BY: Mark Dahlstrom, Cody Richeal

THE UNIVERSITY OF IOWA

Facilities Management
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 4/26/18

Subcontractor SCHUMACHER ELEVATOR Change Order Request No _____

Project Name MLF WATER DAMAGE REPAIR Project Number #0744901

Description of Work _____

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
DAHLSTROM	ELEV.		8						
RICHEAL	ELEV.		8						

Equipment and Material (attach invoices)

Quantity	Description
	- Moisture piping and wiring

Subcontractor's Representative (if applicable) Mark Dahlstrom

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W31818/3-18

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722

Date: 4-26-18

Job #: 39070 Elevator ID#:

Project Name: Medical Research Facility

City & State: Iowa City, IA

800-779-5438
Established in 1936

Schumacher
Elevator Company

One Schumacher Way
P.O. Box 393 – Denver, IA 50622

Cedar Rapids 319-362-1017
Davenport 800-779-5438
Denver 319-984-5676
Des Moines 515-243-5487
Dubuque 563-588-4863
Fort Dodge 515-576-7266
Iowa City 800-779-5438
Marshalltown 800-779-5438
Mason City 641-424-1307
Ottumwa 800-779-5438
Sioux City 712-258-3535
Waterloo 319-984-5676
Quincy, IL 800-779-5438
Rockford, IL 815-963-8340
Minneapolis, MN 612-333-3066
Rochester, MN 507-285-0251
Kirksville, MO 800-779-5438
Sioux Falls, SD 800-779-5438
LaCrosse, WI 608-788-8410
Madison, WI 608-222-3766

HOURS	ST	1.5	1.7	DT
Mech. Hours				
Helper Hours				
Team Hours	8			
Travel Time				
Total Time	8			

MISC. EXPENSES	AMOUNT
Expense Report	
Miles	
Parking	

WORK DONE:

- Hoistway piping and wiring

MATERIAL	AMOUNT

JOB COMPLETED: ☐ YES ☒ NO

FOR OFFICE USE ONLY
☐ BILLABLE ☐ ALLOWANCE ☐ CHANGE ORDER

WORK AUTHORIZED BY:

PRINTED NAME: MARK TOTH

WORK DONE BY: Mark Dahlstrom, Cody Richval

COMPANY REQUESTING WORK: W.C.C.

THE UNIVERSITY OF IOWA

Facilities Management
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 4/27/18

Subcontractor SCHUMACHER ELEVATOR Change Order Request No _____

Project Name MLF WATER DAMAGE REPAIR Project Number #0744901

Description of Work Hoistway wiring

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
DAHLSTROM	ELEV.		8						
RICHEAL	ELEV.		8						

Equipment and Material (attach invoices)

Quantity	Description
	Hoistway wiring

Subcontractor's Representative (if applicable) Mark Dudleston

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W31818/3-18

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722

Date: 4-27-18

Job #: [redacted]-39070 Elevator ID#:

Project Name: Medical Research Facility

City & State: Iowa City, IA

800-779-5438
Established in 1936

Schumacher
Elevator Company

One Schumacher Way
P.O. Box 393 – Denver, IA 50622

Cedar Rapids	319-362-1017
Davenport	800-779-5438
Denver	319-984-5676
Des Moines	515-243-5487
Dubuque	563-588-4863
Fort Dodge	515-576-7266
Iowa City	800-779-5438
Marshalltown	800-779-5438
Mason City	641-424-1307
Ottumwa	800-779-5438
Sioux City	712-258-3535
Waterloo	319-984-5676
Quincy, IL	800-779-5438
Rockford, IL	815-963-8340
Minneapolis, MN	612-333-3066
Rochester, MN	507-285-0251
Kirksville, MO	800-779-5438
Sioux Falls, SD	800-779-5438
LaCrosse, WI	608-788-8410
Madison, WI	608-222-3766

HOURS	ST	1.5	1.7	DT
Mech. Hours				
Helper Hours				
Team Hours	8			
Travel Time				
Total Time	8			

MISC. EXPENSES	AMOUNT
Expense Report	
Miles	
Parking	

WORK DONE:

Hoistway Wiring

MATERIAL	AMOUNT

FOR OFFICE USE ONLY

☐ BILLABLE ☐ ALLOWANCE ☐ CHANGE ORDER

JOB COMPLETED: ☐ YES ☒ NO

WORK AUTHORIZED BY:

PRINTED NAME: MARK TOTH

COMPANY REQUESTING WORK: W.C.C.

WORK DONE BY: Mark Dahlstrom, Cody Richeal

THE UNIVERSITY OF IOWA

Facilities Management
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 5/1/18

Subcontractor SCHUMACHER ELEVATOR Change Order Request No _____

Project Name MEF WATER DAMAGE REPAIR Project Number #0744901

Description of Work - Hoistway wiring, Assembled cab.

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
DAHLSTROM	ELEV.		8						
RICHEAL	ELEV.		8						

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) Mark Dahlstrom

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W31818/3-18

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722

Date: 5-1-18

Job #: 39070 Elevator ID#:

Project Name: Medical Research Facility

City & State: Iowa City, IA

800-779-5438
Established in 1936

Schumacher
Elevator Company

One Schumacher Way
P.O. Box 393 – Denver, IA 50622

Cedar Rapids 319-362-1017
Davenport 800-779-5438
Denver 319-984-5676
Des Moines 515-243-5487
Dubuque 563-588-4863
Fort Dodge 515-576-7266
Iowa City 800-779-5438
Marshalltown 800-779-5438
Mason City 641-424-1307
Ottumwa 800-779-5438
Sioux City 712-258-3535
Waterloo 319-984-5676
Quincy, IL 800-779-5438
Rockford, IL 815-963-8340
Minneapolis, MN 612-333-3066
Rochester, MN 507-285-0251
Kirksville, MO 800-779-5438
Sioux Falls, SD 800-779-5438
LaCrosse, WI 608-788-8410
Madison, WI 608-222-3766

HOURS	ST	1.5	1.7	DT
Mech. Hours				
Helper Hours				
Team Hours	8			
Travel Time				
Total Time	8			

MISC. EXPENSES	AMOUNT
Expense Report	
Miles	
Parking	

WORK DONE:

- Hoistway wirings
- Assembled Hoist cab

MATERIAL	AMOUNT

JOB COMPLETED: ☐ YES ☐ NO

FOR OFFICE USE ONLY
☐ BILLABLE ☐ ALLOWANCE ☐ CHANGE ORDER

WORK AUTHORIZED BY:

PRINTED NAME: MARK TOTH

COMPANY REQUESTING WORK: W.C.C.

WORK DONE BY: Mark Dahlstrom, Cody Richter

THE UNIVERSITY OF IOWA

Facilities Management
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 5/2/18

Subcontractor SCHUMACHER ELEVATOR Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number #0744901

Description of Work - Installed cab panels, handrails, ceiling grid and cab stabilizers

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
DAHLSTROM	ELEV.		5						
RICHEAL	ELEV.		5						

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W31818/3-18

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722

Date: 5-2-18 Notification #:

Repair Job #: 39070 Elevator ID#:

Customer: Medical Research Facility

Location: Iowa City, IA

800-779-5438
Established in 1936

Schumacher
Elevator Company

One Schumacher Way
P.O. Box 393 – Denver, IA 50622

Cedar Rapids 319-362-1017
Davenport 800-779-5438
Denver 319-984-5676
Des Moines 515-243-5487
Dubuque 563-588-4863
Fort Dodge 515-576-7266
Iowa City 800-779-5438
Marshalltown 800-779-5438
Mason City 641-424-1307
Ottumwa 800-779-5438
Sioux City 712-258-3535
Waterloo 319-984-5676
Quincy, IL 800-779-5438
Rockford, IL 815-963-8340
Minneapolis, MN 612-333-3066
Rochester, MN 507-285-0251
Kirksville, MO 800-779-5438
Sioux Falls, SD 800-779-5438
LaCrosse, WI 608-788-8410
Madison, WI 608-222-3766

HOURS	ST	1.5	1.7	DT
Mech. Hours				
Helper Hours				
Team Hours	5			
Travel Time				
Total Time	5			

MISC. EXPENSES	AMOUNT
Expense Report	
Miles	
Parking	

☐ Reorder Parts

WORK DONE:

- Installed cab panels, handrails, ceiling grid and cab stabilizers.

MATERIAL	AMOUNT

JOB COMPLETED: ☐ YES ☒ NO

WORK DONE BY: Mark Dahlstrom, Cody Richard

CUSTOMER:

THE UNIVERSITY OF IOWA

Facilities Management
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 5/3/18

Subcontractor SCHUMACHER ELEVATOR Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number #0744901

Description of Work car electrical piping and wiring

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
DAHLSTROM	ELEV.		8						
RICHEAL	ELEV.		8						

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) Mark Dorlan

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W31818/3-18

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722

Date: 5-3-18 Notification #:

Repair Job #: 39070 Elevator ID#:

Customer: Medical Research Facility

Location: Iowa City, IA

800-779-5438
Established in 1936

Schumacher
Elevator Company

One Schumacher Way
P.O. Box 393 – Denver, IA 50622

Cedar Rapids 319-362-1017
Davenport 800-779-5438
Denver 319-984-5676
Des Moines 515-243-5487
Dubuque 563-588-4863
Fort Dodge 515-576-7266
Iowa City 800-779-5438
Marshalltown 800-779-5438
Mason City 641-424-1307
Ottumwa 800-779-5438
Sioux City 712-258-3535
Waterloo 319-984-5676
Quincy, IL 800-779-5438
Rockford, IL 815-963-8340
Minneapolis, MN 612-333-3066
Rochester, MN 507-285-0251
Kirksville, MO 800-779-5438
Sioux Falls, SD 800-779-5438
LaCrosse, WI 608-788-8410
Madison, WI 608-222-3766

HOURS	ST	1.5	1.7	DT
Mech. Hours				
Helper Hours				
Team Hours	8			
Travel Time				
Total Time	8			

MISC. EXPENSES	AMOUNT
Expense Report	
Miles	
Parking	

☐ Reorder Parts

WORK DONE:

- Car wiring + Piping

MATERIAL	AMOUNT

JOB COMPLETED: ☐ YES ☐ NO

WORK DONE BY: Mark Dahlstrom, Cody Richard

CUSTOMER:

THE UNIVERSITY OF IOWA

Facilities Management
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 5/4/18

Subcontractor SCHUMACHER ELEVATOR Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number #0744901

Description of Work Hang travel cable, install car doors, cab electrical piping + wiring

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
DAHLSTROM	ELEV.		8						
RICHEAL	ELEV.		8						

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W31818/3-18

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722

Date: 5-4-18 Notification #:

Repair Job #: 39070 Elevator ID#:

Customer: Medical Research Facility

Location: Iowa City, IA

800–779–5438
Established in 1936

Schumacher Elevator Company

One Schumacher Way
P.O. Box 393 – Denver, IA 50622

HOURS	ST	1.5	1.7	DT
Mech. Hours				
Helper Hours				
Team Hours	8			
Travel Time				
Total Time	8			

MISC. EXPENSES	AMOUNT
Expense Report	
Miles	
Parking	

☐ Reorder Parts

Cedar Rapids 319–362–1017
Davenport 800–779–5438
Denver 319–984–5676
Des Moines 515–243–5487
Dubuque 563–588–4863
Fort Dodge 515–576–7266
Iowa City 800–779–5438
Marshalltown 800–779–5438
Mason City 641–424–1307
Ottumwa 800–779–5438
Sioux City 712–258–3535
Waterloo 319–984–5676
Quincy, IL 800–779–5438
Rockford, IL 815–963–8340
Minneapolis, MN 612–333–3066
Rochester, MN 507–285–0251
Kirksville, MO 800–779–5438
Sioux Falls, SD 800–779–5438
LaCrosse, WI 608–788–8410
Madison, WI 608–222–3766

WORK DONE:

- Hang travel cable, Install car doors, cab electrical piping & wiring.

MATERIAL	AMOUNT

JOB COMPLETED: ☐ YES ☒ NO

WORK DONE BY: Mark Dahlstrom, Rody Richeal

CUSTOMER:

Labor Cost - Bachmeier

THE UNIVERSITY OF IOWA

LABOR RATE BREAKDOWN

THE UNIVERSITY OF IOWA

LABOR RATE BREAKDOWN FOR UIHC MRF 2ND-5TH FLOORS

	FOREMAN	JOURNEYMAN	
BASE WAGE	**48.5 HOURS X $50.00**	**55.5 HOURS X $35.00**	
LABOR	**$2,425.00**	**$1,942.50**	**TOTAL=$4376.50**

CONTRACTOR---BACHMEIER CARPET ONE
TRADE---FLOOR COVERING

PREPARED BY---MATT LANGENBERG
MATT@BACHMEIERCARPETONE.COM

Material Cost - Bachmeier

BACHMEIER CARPET ONE
3402 MERCHANT ST
CORALVILLE, IA 52241
319-545-5678

Page 1

ACKNOWLEDGMENT

CG800061

Sold To	Ship To
WOODRUFF CONSTRUCTION CO 1890 KOUNTRY LANE FORT DODGE, IA 50501	UIHC MRF BLDG FLOORS 2-5 IOWA CITY, IA 52240

Order Date	Tele #1	PO Number	Order number
01/16/18	515-576-1118	MRF 2ND-5TH	CG800061

	Style/Item	Color/Description	Quantity	Units	Price	Extension
381	STANDARD EXCELON IMPERIAL TEXTURE	51873 BRUSHED SAND	8.00	CT	60.35	482.80
	add. info: 4TH FLOOR					
381	STANDARD EXCELON IMPERIAL TEXTURE	51899 COOL WHITE	14.00	CT	60.35	844.90
	add. info: 5TH FLOOR					
CTSFA4G	S-515 CLEAR THIN SPREAD FLOOR TILE ADHESIVE - 4 GAL	N\A	2.00	EA	65.00	130.00
CB	VINYL BASE 4" COVED-4' LENGTHS	FUDGE	2,640.00	LF	1.04	2,745.60
	Carton Qty: 22.00					
CVBC18	COLOR INTEGRATED VINYL WALL BASE-COVE 1/8" - 2-1/2"X4'	V8106 OLIVINE	840.00	LF	1.04	873.60
TRANSITIONS	VCT REDUCER	SSR-167-B	1.00	EA	52.05	52.05
JOHNSONITE BASE	4" VINYL	FUDGE	240.00	EA	1.04	249.60
ADHESIVE	COVE BASE	HENRY 440	12.00	EA	7.12	85.44
ADHESIVE	COVE BASE	TUBE	24.00	EA	7.12	170.88
381	STANDARD EXCELON IMPERIAL TEXTURE	51899 COOL WHITE	2.00	CT	60.35	120.70
ROPPE BASE	4" VINYL	BLACK	16.00	EA	0.92	14.72
381	STANDARD EXCELON IMPERIAL TEXTURE	51873 BRUSHED SAND	4.00	CT	60.35	241.40
381	STANDARD EXCELON IMPERIAL TEXTURE	51899 COOL WHITE	8.00	CT	60.35	482.80

04/28/18 5:40AM

Sales Representative(s):
MATT LANGENBERG

Material: 6,929.49

Thank you for your business!

Store Hours:
Monday, Thursday 8am-7pm
Tuesday, Wednesday, Friday 8am-6pm
Saturday 10am-4pm

BACHMEIER CARPET ONE
3402 MERCHANT ST
CORALVILLE, IA 52241
319-545-5678

ACKNOWLEDGMENT

CG800061

Sold To	Ship To
WOODRUFF CONSTRUCTION CO 1890 KOUNTRY LANE FORT DODGE, IA 50501	UIHC MRF BLDG FLOORS 2-5 IOWA CITY, IA 52240

Order Date	Tele #1	PO Number	Order number
01/16/18	515-576-1118	MRF 2ND-5TH	CG800061

	Style/Item	Color/Description	Quantity	Units	Price	Extension
CTSFA4G	S-515 CLEAR THIN SPREAD FLOOR TILE ADHESIVE - 4 GAL	N\A	1.00	EA	65.00	65.00

Terms: Payment due upon receipt of invoice. Invoices unpaid after 30 days will incur a finance charge of 1.5% monthly.
Any unforseen floor prep not included in bid.

04/28/18 5:40AM

Sales Representative(s):
MATT LANGENBERG

Material:	6,929.49
Misc. Charges:	0.00
Sales Tax:	0.00
Misc. Tax:	0.00

Thank you for your business!

Store Hours:
Monday, Thursday 8am-7pm
Tuesday, Wednesday, Friday 8am-6pm
Saturday 10am-4pm

AP/PO PeopleSoft Web Applications

Your path: Home > Payment

User options | Help

Payment details for voucher: 82923015

Voucher ID	Vendor ID	Remit LOC	Vendor Name	Gross Voucher Amt.	Payment Handling Code
82923015	0000515030	002	Woodruff Constuction LLC	$151,033.39	AC

Payment Status	Payment Information	Invoice #	Invoice Date	Remit to	Amt From Voucher
PAID	ACH:575449 Dt: 05/18/2018 Amt: $151,033.39	0744901-004	05/10/2018	Detail	$151,033.39

New Payment Search
AP-PO Web Applications Home Page
Self-Service

(WALTERSC) Logoff

Accounts Payable / Purchasing is a department in the Finance and Operations organization.
Copyright © The University of Iowa. All rights reserved.

Please direct inquires regarding using this application to acntpay@uiowa.edu

THE UNIVERSITY OF IOWA

FACILITIES MANAGEMENT
Design & Construction

CONTRACTOR PAY APPLICATION REQUEST

Application/Invoice Date: 06/14/2018
Application No.: 005-R003
Invoice No.: 0744901-005
Contract #: CT8279
Payment terms: Net Zero

To:
University of Iowa
Planning, Design & Construction
200 USB
Iowa City, IA 52242

From Contractor:
Woodruff Construction LLC
1890 Kountry Lane,
Fort Dodge, IA 50501

Project Title and Number:
Medical Research Facility - Emergency Pipe Repair and Remediation
Project # 0744901

PAY APPLICATION PERIOD FROM: 05/05/2018 **TO:** 05/25/2018

1. ORIGINAL CONTRACT SUM:			$379,000.00	
Change Order Summary	ADDITIONS	DEDUCTIONS		
Total changes approved in previous months by owner	$0.00	$0.00		
Total approved this month	$0.00	$0.00		
TOTALS	$0.00	$0.00		
2. NET CHANGE BY CHANGE ORDERS:			$0.00	
3. CONTRACT SUM TO DATE: (Line 1 + 2)			$379,000.00	
4. TOTAL COMPLETED & SORTED TO DATE:			$356,034.10	(94%)
5. RETAINAGE: (Completed Word & Stored Material)			$0.00	
6. TOTAL EARNED LESS RETAINANGE: (Line 4 less Line 5 Total)			$356,034.10	
7. LESS PREVIOUS CERTIFICATES FOR PAYMENT: (Line 6 from prior Certificate)			$298,141.91	
8. CURRENT PAYMENT DUE:			**$57,892.19**	
9. BALANCE TO FINISH, INCLUDING RETAINAGE: (Line 3 less Line 6)			$22,965.90	

GROUP 230210
82947851

Jun 21, 2018, 11:20 AM

WOODRUFF CONSTRUCTION, LLC

1890 Kountry Lane
Fort Dodge, Iowa 50501
Phone (515) 576-1118 Fax (515) 955-2170

501 Greenfield Drive
Tiffin, Iowa 52340
Phone (319) 545-2410 Fax (319) 545-2411

5/29/2018

Danial Cassidy
UI-FM – D&C.

RE: MRF Water Damage – Pay Application Summary

SUBJ: **Pay App - 005**

Dan,

For all the work from period 5/7/2018 to 5/25/2018The total amount is $57,892.19. Labor and material cost documents are enclosed for review.

If you require additional clarification, please contact me. Thank you for your prompt response.

Sincerely,
WOODRUFF CONSTRUCTION, LLC

Leon Zhang
Assistant Project Manager

COST ANALYSIS **MRF Water Damage T&M**

Period: 5/7/2018 to 5/25/2018
Pay App - 05

TOTAL WOODRUFF LABOR COST		= $	6,135.20
TOTAL WOODRUFF MATERIAL COST		= $	-
	SUBTOTAL	= $	6,135.20
plus OH&P @	15% = $ 920	= $	7,055.48
TOTAL SUBCONTRACT COST		= $	48,415.91
plus OH&P @	5% = $ 2,420.80	= $	50,836.71
TOTAL PRICE FOR THE PERIOD		$	57,892.19

COST ANALYSIS **MRF Water Damage T&M**

Pay App - 05 Period: 7-May-18 to 25-May-18

	LABOR CLASSIFICATION/ MATERIAL	QUANTITY	UNIT	UNIT LABOR	UNIT MAT'L	UNIT SUBCON	LABOR	MATERIAL	SUBCON	TOTAL
	WOODRUFF WORK									
	LABOR									
5/7-5/11	Mart Toth - Superintendent	40	hr	$ 76.69			$ 3,067.60			$ 3,067.60
5/14-5/18	Mart Toth - Superintendent	40	hr	$ 76.69			$ 3,067.60			$ 3,067.60
	SUBCONTRACTORS						$ -	$ -	$ -	$ -
	Schumacher Elevator						$ -	$ -	$ 41,918.49	$ 41,918.49

	Bachmeier Carpet One						$ -	$ -	$ 727.31	$ 727.31
	Corridor Paint						$ -	$ -	$ 5,633.22	$ 5,633.22
	AAA						$ -	$ -	$ 76.89	$ 76.89
	Advanced Electric						$ -	$ -	$ 60.00	$ 60.00
							$ -	$ -	$ -	$ -
	SUBTOTAL						$ 6,135.20	$ -	$ 48,415.91	$ 54,551.11
	PERIOD TOTAL						$ 6,135.20	$ -	$ 48,415.91	$ 54,551.11

WCC Labor Cost

THE UNIVERSITY OF IOWA

Facilities Management
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 5/7-5/11

Subcontractor _____ Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number # 0744901

Description of Work SUPERVISON

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
TOTH	SUPT.		40	8					

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W31818/3-18

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722

THE UNIVERSITY OF IOWA

Facilities Management
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 5/14 - 5/18

Subcontractor _____ Change Order Request No _____

Project Name MLF WATER DAMAGE REPAIR Project Number H0744901

Description of Work SUPERVISON

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
TOTH	SUPT.		40	8					

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W31818/3-18

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722

PAYMENT APPLICATION

TO:	Medical Research Facility 55 Grand Ave S Iowa City, IA 52242 Attn:	PROJECT NAME AND LOCATION:	39070 Medical Research Facility 55 Grand Ave S Iowa City, IA 52242	APPLICATION # PERIOD THRU: PROJECT #s: DATE OF CONTRACT:	3 06/06/2018 39070 02/15/2018
FROM:	Schumacher Elevator Company One Schumacher Way PO Box 393 Denver, IA 50622	ARCHITECT:		Distribution to:	☐ OWNER ☐ ARCHITECT ☐ CONTRACTOR ☐ ☐
FOR:					

CONTRACTOR'S SUMMARY OF WORK

Application is made for payment as shown below.
Continuation Page is attached.

1.	CONTRACT AMOUNT		$187,787.60
2.	SUM OF ALL CHANGE ORDERS		$0.00
3.	CURRENT CONTRACT AMOUNT	(Line 1 +/- 2)	$187,787.60
4.	TOTAL COMPLETED AND STORED (Column G on Continuation Page)		$187,787.60
5.	RETAINAGE:		
a.	5.00% of Completed Work (Columns D + E on Continuation Page)	$9,389.00	
b.	5.00% of Material Stored (Column F on Continuation Page)	$0.00	
	Total Retainage (Line 5a + 5b or Column I on Continuation Page)		$9,389.00
6.	TOTAL COMPLETED AND STORED LESS RETAINAGE (Line 4 minus Line 5 Total)		$178,398.60
7.	LESS PREVIOUS PAYMENT APPLICATIONS		$145,869.11
8.	PAYMENT DUE		$32,529.49
9.	BALANCE TO COMPLETION (Line 3 minus Line 6)	$9,389.00	

SUMMARY OF CHANGE ORDERS	ADDITIONS	DEDUCTIONS
Total changes approved in previous months	$0.00	$0.00
Total approved this month	$0.00	$0.00
TOTALS	$0.00	$0.00
NET CHANGES	$0.00	

Contractor's signature below is his assurance to Owner, concerning the payment herein applied for, that: (1) the Work has been performed as required in the Contract Documents, (2) all sums previously paid to Contractor under the Contract have been used to pay Contractor's costs for labor, materials and other obligations under the Contract for Work previously paid for, and (3) Contractor is legally entitled to this payment.

CONTRACTOR: Schumacher Elevator Company

By: _____ Date: 6/6/2018

State of: Iowa

County of: Bremer

Subscribed and sworn to before me this 6th day of June 2018

Notary Public: Melodie Despard

My Commission Expires: March 9, 2020

MELODIE DESPARD
Notarial Seal - Iowa
Commission # 733350
My Commission Expires March 9, 2020

ARCHITECT'S CERTIFICATION

Architect's signature below is his assurance to Owner, concerning the payment herein applied for, that: (1) Architect has inspected the Work represented by this Application, (2) such Work has been completed to the extent indicated in this Application, and the quality of workmanship and materials conforms with the Contract Documents, (3) this Application for Payment accurately states the amount of Work completed and payment due therefor, and (4) Architect knows of no reason why payment should not be made.

95% of material + labor for this pay app period

CERTIFIED AMOUNT: _____

(If the certified amount is different from the payment due, you should attach an explanation. Initial all the figures that are changed to match the certified amount.)

ARCHITECT:

By: _____ Date: _____

Neither this Application nor payment applied for herein is assignable or negotiable. Payment shall be made only to Contractor, and is without prejudice to any rights of Owner or Contractor under the Contract Documents or otherwise.

APPLICATION FOR PAYMENT - CONTINUATION SHEET

PROJECT: 39070
Medical Research Facility

Schumacher Elevator Company One Schumacher Way Denver, IA 50622

APPLICATION #: 3
DATE OF APPLICATION: 06/06/2018
PERIOD THRU: 06/06/2018
PROJECT #s: 39070

A	B	C	D	E	F	G		H	I
ITEM #	WORK DESCRIPTION	SCHEDULED AMOUNT	COMPLETED WORK		STORED MATERIALS (NOT IN D OR E)	TOTAL COMPLETED AND STORED (D + E + F)	% COMP. (G / C)	BALANCE TO COMPLETION (C-G)	RETAINAGE (If Variable)
			AMOUNT PREVIOUS PERIODS	AMOUNT THIS PERIOD					
0010	Work Completed through February 2018	$28,181.79	$28,181.79	$0.00	$0.00	$28,181.79	100%	$0.00	$1,409.00
0020	Work Completed through March 2018	$0.00	$0.00	$0.00	$0.00	$0.00		$0.00	$0.00
0030	Labor Completed through April 2018	$57,756.83	$57,756.83	$0.00	$0.00	$57,756.83	100%	$0.00	$2,888.00
0040	Materials Completed through April 2018	$67,607.49	$67,607.49	$0.00	$0.00	$67,607.49	100%	$0.00	$3,380.00
0050	Labor Completed through May 2018	$33,741.49	$0.00	$33,741.49	$0.00	$33,741.49	100%	$0.00	$1,687.00
0060	Materials Completed through May 2018	$500.00	$0.00	$500.00	$0.00	$500.00	100%	$0.00	$25.00
	TOTALS	$187,787.60	$153,546.11	$34,241.49	$0.00	$187,787.60	100%	$0.00	$9,389.00

Retainage pay app

PAYMENT APPLICATION

TO: Medical Research Facility
55 Grand Ave S
Iowa City, IA 52242
Attn:

FROM: Schumacher Elevator Company
One Schumacher Way PO Box 393
Denver, IA 50622

FOR:

PROJECT NAME AND LOCATION: 39070
Medical Research Facility
55 Grand Ave S
Iowa City, IA 52242

ARCHITECT:

APPLICATION # Retainage
PERIOD THRU: 06/06/2018
PROJECT #s: 39070
DATE OF CONTRACT: 02/15/2018

Distribution to:
- ☐ OWNER
- ☐ ARCHITECT
- ☐ CONTRACTOR
- ☐
- ☐

CONTRACTOR'S SUMMARY OF WORK

Application is made for payment as shown below.
Continuation Page is attached.

1.	CONTRACT AMOUNT		$187,787.60
2.	SUM OF ALL CHANGE ORDERS		$0.00
3.	CURRENT CONTRACT AMOUNT	(Line 1 +/- 2)	$187,787.60
4.	TOTAL COMPLETED AND STORED (Column G on Continuation Page)		$187,787.60
5.	RETAINAGE:		
a.	0.00% of Completed Work (Columns D + E on Continuation Page)	$0.00	
b.	0.00% of Material Stored (Column F on Continuation Page)	$0.00	
	Total Retainage (Line 5a + 5b or Column I on Continuation Page)		$0.00
6.	TOTAL COMPLETED AND STORED LESS RETAINAGE (Line 4 minus Line 5 Total)		$187,787.60
7.	LESS PREVIOUS PAYMENT APPLICATIONS		$178,398.60
8.	PAYMENT DUE		**$9,389.00**
9.	BALANCE TO COMPLETION (Line 3 minus Line 6)	$0.00	

SUMMARY OF CHANGE ORDERS	ADDITIONS	DEDUCTIONS
Total changes approved in previous months	$0.00	$0.00
Total approved this month	$0.00	$0.00
TOTALS	$0.00	$0.00
NET CHANGES	$0.00	

Contractor's signature below is his assurance to Owner, concerning the payment herein applied for, that: (1) the Work has been performed as required in the Contract Documents, (2) all sums previously paid to Contractor under the Contract have been used to pay Contractor's costs for labor, materials and other obligations under the Contract for Work previously paid for, and (3) Contractor is legally entitled to this payment.

CONTRACTOR: Schumacher Elevator Company

By: _____ Date: 6/6/2018

State of: Iowa

County of: Bremer

Subscribed and sworn to before me this 6th day of June 2018

Notary Public: Melodie Despard

My Commission Expires: March 9, 2020

MELODIE DESPARD
Notarial Seal - Iowa
Commission # 733350
My Commission Expires March 9, 2020

ARCHITECT'S CERTIFICATION

Architect's signature below is his assurance to Owner, concerning the payment herein applied for, that: (1) Architect has inspected the Work represented by this Application, (2) such Work has been completed to the extent indicated in this Application, and the quality of workmanship and materials conforms with the Contract Documents, (3) this Application for Payment accurately states the amount of Work completed and payment due therefor, and (4) Architect knows of no reason why payment should not be made.

CERTIFIED AMOUNT..... _____

(If the certified amount is different from the payment due, you should attach an explanation. Initial all the figures that are changed to match the certified amount.)

ARCHITECT:

By: _____ Date: _____

Neither this Application nor payment applied for herein is assignable or negotiable. Payment shall be made only to Contractor, and is without prejudice to any rights of Owner or Contractor under the Contract Documents or otherwise.

APPLICATION FOR PAYMENT - CONTINUATION SHEET

PROJECT: 39070
Medical Research Facility

APPLICATION #: Retainage
DATE OF APPLICATION: 06/06/2018
PERIOD THRU: 06/06/2018
PROJECT #s: 39070

Schumacher Elevator Company One Schumacher Way Denver, IA 50622

A	B	C	D	E	F	G		H	I
ITEM #	WORK DESCRIPTION	SCHEDULED AMOUNT	COMPLETED WORK		STORED MATERIALS (NOT IN D OR E)	TOTAL COMPLETED AND STORED (D + E + F)	% COMP. (G / C)	BALANCE TO COMPLETION (C-G)	RETAINAGE (If Variable)
			AMOUNT PREVIOUS PERIODS	AMOUNT THIS PERIOD					
0010	Work Completed through February 2018	$28,181.79	$28,181.79	$0.00	$0.00	$28,181.79	100%	$0.00	$0.00
0020	Work Completed through March 2018	$0.00	$0.00	$0.00	$0.00	$0.00		$0.00	$0.00
0030	Labor Completed through April 2018	$57,756.83	$57,756.83	$0.00	$0.00	$57,756.83	100%	$0.00	$0.00
0040	Materials Completed through April 2018	$67,607.49	$67,607.49	$0.00	$0.00	$67,607.49	100%	$0.00	$0.00
0050	Labor Completed through May 2018	$33,741.49	$33,741.49	$0.00	$0.00	$33,741.49	100%	$0.00	$0.00
0060	Materials Completed through May 2018	$500.00	$500.00	$0.00	$0.00	$500.00	100%	$0.00	$0.00
	TOTALS	$187,787.60	$187,787.60	$0.00	$0.00	$187,787.60	100%	$0.00	$0.00

Schumacher Labor Cost

Labor	Mechanic Regula	1.7 Helper Regular	Mileage	Parking	Peridium	Hotels	
5/7/2018	8		57		43.44		Mark Dahlstrom
5/7/2018		8	112		43.44		Cody Richeal
5/8/2018	8		57		43.44		Mark Dahlstrom
5/8/2018		8	112		43.44		Cody Richeal
5/9/2018	8		57		43.44		Mark Dahlstrom
5/9/2018		8	112		43.44		Cody Richeal
5/10/2018	8		83		43.44		Scott Even
5/10/2018		8	113		43.44		Levi Haskin
5/11/2018	8		57		43.44		Mark Dahlstrom
5/11/2018		8	112		43.44		Cody Richeal
5/11/2018	8		83		43.44		Scott Even
5/11/2018		8	113		43.44		Levi Haskin
5/14/2014	8		57		43.44		Mark Dahlstrom
5/14/2018		8	113		43.44		Levi Haskin
5/15/2018	8		57		43.44		Mark Dahlstrom
5/15/2018		8	113		43.44		Levi Haskin
5/16/2018	8		57		43.44		Mark Dahlstrom
5/16/2018	4						Ryan Hagarty
5/17/2018	8		95		43.44		Jason Anderson
5/17/2018		8	95		43.44		Jeremy Engle
5/18/2018	8		95		43.44		Jason Anderson
5/18/2018		8	95		43.44		Jeremy Engle
	92	80	1845				
	196.31	172.04	0.545				
	$ 18,060.52	$ 13,763.20	$ 1,005.53		$ 912.24		

Changed per request

$ 33,741.49

THE UNIVERSITY OF IOWA

Facilities Management
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 5/7

Subcontractor SCHUMACHER ELEVATOR Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number #0744901

Description of Work Finish car doors, install car top equipment.

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
DAHLSTROM	ELEV.		8	0					
RICHEAL	ELEV.		8	0					

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) Mark Dahlstrom

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W31818/3-18

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722

Date: 5-7-18 Notification #:

Repair Job #: 39070 Elevator ID#:

Customer: Medical Research Facility

Location: Iowa City, IA

800–779–5438
Established in 1936

Schumacher
Elevator Company

One Schumacher Way
P.O. Box 393 – Denver, IA 50622

Cedar Rapids 319–362–1017
Davenport 800–779–5438
Denver 319–984–5676
Des Moines 515–243–5487
Dubuque 563–588–4863
Fort Dodge 515–576–7266
Iowa City 800–779–5438
Marshalltown 800–779–5438
Mason City 641–424–1307
Ottumwa 800–779–5438
Sioux City 712–258–3535
Waterloo 319–984–5676
Quincy, IL 800–779–5438
Rockford, IL 815–963–8340
Minneapolis, MN 612–333–3066
Rochester, MN 507–285–0251
Kirksville, MO 800–779–5438
Sioux Falls, SD 800–779–5438
LaCrosse, WI 608–788–8410
Madison, WI 608–222–3766

HOURS	ST	1.5	1.7	DT
Mech. Hours				
Helper Hours				
Team Hours	8			
Travel Time				
Total Time	8			

MISC. EXPENSES	AMOUNT
Expense Report	
Miles	
Parking	

☐ Reorder Parts

WORK DONE:

- Install car top equipment
- Finish car doors.

MATERIAL	AMOUNT

JOB COMPLETED: ☐ YES ☐ NO

WORK DONE BY: Mark Dahlstrom, Cody Richeal

CUSTOMER:

THE UNIVERSITY OF IOWA

Facilities Management
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 5/8/18

Subcontractor SCHUMACHER ELEVATOR Change Order Request No _____

Project Name MLF WATER DAMAGE REPAIR Project Number #0744901

Description of Work C.A.R. Wiring

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
DAHLSTROM	ELEV.		8	0					
RICHEAL	ELEV.		8	0					

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W31818/3-18

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722

Date: 5-8-18 Notification #: ** Gold Ticket **

Repair Job #: 39070 Elevator ID#:

Customer: Medical Research Facility

Location: Iowa city, IA

800–779–5438
Established in 1936

Schumacher Elevator Company

One Schumacher Way
P.O. Box 393 – Denver, IA 50622

Cedar Rapids 319–362–1017
Davenport 800–779–5438
Denver 319–984–5676
Des Moines 515–243–5487
Dubuque 563–588–4863
Fort Dodge 515–576–7266
Iowa City 800–779–5438
Marshalltown 800–779–5438
Mason City 641–424–1307
Ottumwa 800–779–5438
Sioux City 712–258–3535
Waterloo 319–984–5676
Quincy, IL 800–779–5438
Rockford, IL 815–963–8340
Minneapolis, MN 612–333–3066
Rochester, MN 507–285–0251
Kirksville, MO 800–779–5438
Sioux Falls, SD 800–779–5438
LaCrosse, WI 608–788–8410
Madison, WI 608–222–3766

HOURS	ST	1.5	1.7	DT
Mech. Hours				
Helper Hours				
Team Hours	8			
Travel Time				
Total Time	8			

MISC. EXPENSES	AMOUNT
Expense Report	
Miles	
Parking	

☐ Reorder Parts

WORK DONE:

- car wiring

MATERIAL	AMOUNT

JOB COMPLETED: ☐ YES ☐ NO

WORK DONE BY: Mark Dahlstrom, Cody Richard

CUSTOMER:

THE UNIVERSITY OF IOWA

Facilities Management
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 5/9/18

Subcontractor SCHUMACHER ELEVATOR Change Order Request No _____

Project Name MLF WATER DAMAGE REPAIR Project Number #0744901

Description of Work Car Wiring

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
DAHLSTROM	ELEV.		8	0					
RICHEAL	ELEV.		8	0					

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) Scott Ehn

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W31818/3 18

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722

Date: 5-9-18 Notification # ☆Gold Ticket☆

Repair Job #: 39070 Elevator ID#:

Customer: Medical Research Facility

Location: Iowa City, IA

800-779-5438
Established in 1936

Schumacher Elevator Company

One Schumacher Way
P.O. Box 393 – Denver, IA 50622

Cedar Rapids	319-362-1017
Davenport	800-779-5438
Denver	319-984-5676
Des Moines	515-243-5487
Dubuque	563-588-4863
Fort Dodge	515-576-7266
Iowa City	800-779-5438
Marshalltown	800-779-5438
Mason City	641-424-1307
Ottumwa	800-779-5438
Sioux City	712-258-3535
Waterloo	319-984-5676
Quincy, IL	800-779-5438
Rockford, IL	815-963-8340
Minneapolis, MN	612-333-3066
Rochester, MN	507-285-0251
Kirksville, MO	800-779-5438
Sioux Falls, SD	800-779-5438
LaCrosse, WI	608-788-8410
Madison, WI	608-222-3766

HOURS	ST	1.5	1.7	DT
Mech. Hours				
Helper Hours				
Team Hours	8			
Travel Time				
Total Time	8			

MISC. EXPENSES	AMOUNT
Expense Report	
Miles	
Parking	

☐ Reorder Parts

WORK DONE:

- Car wiring

MATERIAL	AMOUNT

JOB COMPLETED: ☐ YES ☐ NO

WORK DONE BY: Mark Dahlstrom, Cody Richard

CUSTOMER:

THE UNIVERSITY OF IOWA

Facilities Management
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONSTRUCTION

Date Work Performed 5/10/18

Subcontractor Schumacher Elevator

Change Order Request No _____

Project Name MLF WATER DAMAGE REPAIR

Project Number *0744901

Description of Work Mount + install F.I's + Buttons at all Floors

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
Scott Eisen			8						
Levi Hankins			8						

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) Scott Eisen

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W31818/3-18

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722

Date: 5-10-18 Notification #: ★GOLD TICKET★

Repair Job #: 39070 Elevator ID#:

Customer: U of IA MRF

Location: Iowa City, IA

800-779-5438
Established in 1936

Schumacher
Elevator Company

One Schumacher Way
P.O. Box 393 – Denver, IA 50622

Cedar Rapids	319-362-1017
Davenport	800-779-5438
Denver	319-984-5676
Des Moines	515-243-5487
Dubuque	563-588-4863
Fort Dodge	515-576-7266
Iowa City	800-779-5438
Marshalltown	800-779-5438
Mason City	641-424-1307
Ottumwa	800-779-5438
Sioux City	712-258-3535
Waterloo	319-984-5676
Quincy, IL	800-779-5438
Rockford, IL	815-963-8340
Minneapolis, MN	612-333-3066
Rochester, MN	507-285-0251
Kirksville, MO	800-779-5438
Sioux Falls, SD	800-779-5438
LaCrosse, WI	608-788-8410
Madison, WI	608-222-3766

HOURS	ST	1.5	1.7	DT
Mech. Hours				
Helper Hours				
Team Hours	8			
Travel Time				
Total Time	8			

MISC. EXPENSES	AMOUNT
Expense Report	
Miles	
Parking	

☐ Reorder Parts

WORK DONE: Mount + install P.I.'s + Push Buttons at all floors.

MATERIAL	AMOUNT

JOB COMPLETED: ☐ YES ☐ NO

WORK DONE BY: Scott Even / Levi Hankin

CUSTOMER:

THE UNIVERSITY OF IOWA

Facilities Management
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 5/11/18

Subcontractor SCHUMACHER ELEVATOR Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number #07H4901

Description of Work Wiring, Machine Room work, Get rid of junk

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
Scott Even			8						
Levi Hankin			8						
Cody Richard			8						
Mark Dahlstrom			5						

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W31818/3-18

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722

Date: 5-11-18 Notification #: TICKET

Repair Job #: 39070 Elevator ID#:

Customer: U of IA MRF

Location: Iowa City, IA

800-779-5438
Established in 1936
Schumacher Elevator Company
One Schumacher Way
P.O. Box 393 – Denver, IA 50622

Cedar Rapids 319-362-1017
Davenport 800-779-5438
Denver 319-984-5676
Des Moines 515-243-5487
Dubuque 563-588-4863
Fort Dodge 515-576-7266
Iowa City 800-779-5438
Marshalltown 800-779-5438
Mason City 641-424-1307
Ottumwa 800-779-5438
Sioux City 712-258-3535
Waterloo 319-984-5676
Quincy, IL 800-779-5438
Rockford, IL 815-963-8340
Minneapolis, MN 612-333-3066
Rochester, MN 507-285-0251
Kirksville, MO 800-779-5438
Sioux Falls, SD 800-779-5438
LaCrosse, WI 608-788-8410
Madison, WI 608-222-3766

HOURS	ST	1.5	1.7	DT
Mech. Hours				
Helper Hours				
Team Hours	8			
Travel Time				
Total Time	8			

MISC. EXPENSES	AMOUNT
Expense Report	
Miles	
Parking	

☐ Reorder Parts

WORK DONE: Wiring, Machine room work, Get rid of junk,

MATERIAL	AMOUNT

JOB COMPLETED: ☐ YES ☐ NO

WORK DONE BY: Scott Blue / Levi Hankin

CUSTOMER:

Date: 5-11-18 Notification #: Gold Ticket

Repair Job #: 39070 Elevator ID#:

Customer: U of IA MRF

Location: Iowa City, IA

800-779-5438
Established in 1936
Schumacher Elevator Company
One Schumacher Way
P.O. Box 393 – Denver, IA 50622

Cedar Rapids 319-362-1017
Davenport 800-779-5438
Denver 319-984-5676
Des Moines 515-243-5487
Dubuque 563-588-4863
Fort Dodge 515-576-7266
Iowa City 800-779-5438
Marshalltown 800-779-5438
Mason City 641-424-1307
Ottumwa 800-779-5438
Sioux City 712-258-3535
Waterloo 319-984-5676
Quincy, IL 800-779-5438
Rockford, IL 815-963-8340
Minneapolis, MN 612-333-3066
Rochester, MN 507-285-0251
Kirksville, MO 800-779-5438
Sioux Falls, SD 800-779-5438
LaCrosse, WI 608-788-8410
Madison, WI 608-222-3766

HOURS	ST	1.5	1.7	DT
Mech. Hours	5			
Helper Hours	8			
Team Hours				
Travel Time				
Total Time	13			

MISC. EXPENSES	AMOUNT
Expense Report	
Miles	
Parking	

☐ Reorder Parts

WORK DONE: Wiring, Machine Room work Get rid of junk

MATERIAL	AMOUNT

JOB COMPLETED: ☐ YES ☐ NO

WORK DONE BY: Mark Ohlstrom / Colby Richeal

CUSTOMER:

THE UNIVERSITY OF IOWA

Facilities Management
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 5/14/18

Subcontractor SCHUMACHER ELEVATOR Change Order Request No _____

Project Name MLF WATER DAMAGE REPAIR Project Number #0744901

Description of Work Hall + Control wiring

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
Mark Dahlstrom			8						
Levi Hankins			8						

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) Mark Dahlstrom

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W31818/3-18

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722

Date: 5-14-18 Notification #:

Repair Job #: 39070 Elevator ID#:

Customer: Medical Research Facility

Location: Iowa City, IA

800–779–5438
Established in 1936

Schumacher
Elevator Company

One Schumacher Way
P.O. Box 393 – Denver, IA 50622

HOURS	ST	1.5	1.7	DT
Mech. Hours				
Helper Hours				
Team Hours	8			
Travel Time				
Total Time	8			

MISC. EXPENSES	AMOUNT
Expense Report	
Miles	
Parking	

☐ Reorder Parts

Cedar Rapids 319–362–1017
Davenport 800–779–5438
Denver 319–984–5676
Des Moines 515–243–5487
Dubuque 563–588–4863
Fort Dodge 515–576–7266
Iowa City 800–779–5438
Marshalltown 800–779–5438
Mason City 641–424–1307
Ottumwa 800–779–5438
Sioux City 712–258–3535
Waterloo 319–984–5676
Quincy, IL 800–779–5438
Rockford, IL 815–963–8340
Minneapolis, MN 612–333–3066
Rochester, MN 507–285–0251
Kirksville, MO 800–779–5438
Sioux Falls, SD 800–779–5438
LaCrosse, WI 608–788–8410
Madison, WI 608–222–3766

WORK DONE:

Hall + control wiring.

MATERIAL	AMOUNT

JOB COMPLETED: ☐ YES ☒ NO

WORK DONE BY: Mark Dahlstrom, Levi Hankern

CUSTOMER:

THE UNIVERSITY OF IOWA

Facilities Management
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 5/15/18

Subcontractor SCHUMACHER ELEVATOR Change Order Request No _____

Project Name MEF WATER DAMAGE REPAIR Project Number #0744901

Description of Work Starting + Adjusting

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
Mark Dahlstrom			8						
Levi Hawken			8						

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) Mark Dahlstrom

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W31818/3-18

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722

Date: 5-15-18 Notification #:

Repair Job #: 39620 Elevator ID#:

Customer: Medical Research Facility

Location: Down City IA

800-779-5438
Established in 1936

Schumacher
Elevator Company

One Schumacher Way
P O. Box 393 – Denver, IA 50622

Cedar Rapids 319-362-1017
Davenport 800-779-5438
Denver 319-984-5676
Des Moines 515-243-5487
Dubuque 563-588-4863
Fort Dodge 515-576-7266
Iowa City 800-779-5438
Marshalltown 800-779-5438
Mason City 641-424-1307
Ottumwa 800-779-5438
Sioux City 712-258-3535
Waterloo 319-984-5676
Quincy, IL 800-779-5438
Rockford, IL 815-963-8340
Minneapolis, MN 612-333-3066
Rochester, MN 507-285-0251
Kirksville, MO 800-779-5438
Sioux Falls, SD 800-779-5438
LaCrosse, WI 608-788-8410
Madison, WI 608-222-3766

HOURS	ST	1.5	1.7	DT
Mech. Hours				
Helper Hours				
Team Hours	8			
Travel Time				
Total Time	8			

MISC. EXPENSES	AMOUNT
Expense Report	
Miles	
Parking	

☐ Reorder Parts

MATERIAL	AMOUNT

WORK DONE:

Starting + Adjusting.

JOB COMPLETED: ☐ YES ☒ NO

WORK DONE BY: Mark Dahlstrom, Levi Hankern

CUSTOMER:

THE UNIVERSITY OF IOWA

Facilities Management
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 5/16/18

Subcontractor SCHUMACHER ELEVATOR Change Order Request No _____

Project Name MLF WATER DAMAGE REPAIR Project Number # 0744901

Description of Work adjusting + counterweighting.

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
Mark Dahlstrom			8	-					
Logan Hegarty			4	-					

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W31818/3-18

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722

Date: 5-16-18

Repair Job #: 39070 Elevator ID#:

Customer: MRF

Location: Iowa City

800–779–5438
Established in 1936
Schumacher Elevator Company
One Schumacher Way
P.O. Box 393 – Denver, IA 50622

Cedar Rapids 319–362–1017
Davenport 800–779–5438
Denver 319–984–5676
Des Moines 515–243–5487
Dubuque 563–588–4863
Fort Dodge 515–576–7266
Iowa City 800–779–5438
Marshalltown 800–779–5438
Mason City 641–424–1307
Ottumwa 800–779–5438
Sioux City 712–258–3535
Waterloo 319–984–5676
Quincy, IL 800–779–5438
Rockford, IL 815–963–8340
Minneapolis, MN 612–333–3066
Rochester, MN 507–285–0251
Kirksville, MO 800–779–5438
Sioux Falls, SD 800–779–5438
LaCrosse, WI 608–788–8410
Madison, WI 608–222–3766

HOURS	ST	1.5	1.7	DT
Mech. Hours	4			
Helper Hours				
Team Hours				
Travel Time				
Total Time	4			

MISC. EXPENSES	AMOUNT
Expense Report	
Miles	
Parking	

☐ Reorder Parts

WORK DONE: Remodel, Starting and Adjusting.

MATERIAL	AMOUNT

JOB COMPLETED: ☐ YES ☒ NO

WORK DONE BY: Ryan Haydock

CUSTOMER:

Date: 5-16-18 Notification #:

Repair Job #: 39070 Elevator ID#:

Customer: Medical Research Facility

Location: Iowa City, IA

800–779–5438
Established in 1936
Schumacher Elevator Company
One Schumacher Way
P.O. Box 393 – Denver, IA 50622

Cedar Rapids 319–362–1017
Davenport 800–779–5438
Denver 319–984–5676
Des Moines 515–243–5487
Dubuque 563–588–4863
Fort Dodge 515–576–7266
Iowa City 800–779–5438
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Mason City 641–424–1307
Ottumwa 800–779–5438
Sioux City 712–258–3535
Waterloo 319–984–5676
Quincy, IL 800–779–5438
Rockford, IL 815–963–8340
Minneapolis, MN 612–333–3066
Rochester, MN 507–285–0251
Kirksville, MO 800–779–5438
Sioux Falls, SD 800–779–5438
LaCrosse, WI 608–788–8410
Madison, WI 608–222–3766

HOURS	ST	1.5	1.7	DT
Mech. Hours	8			
Helper Hours				
Team Hours				
Travel Time				
Total Time	8			

MISC. EXPENSES	AMOUNT
Expense Report	
Miles	
Parking	

☐ Reorder Parts

WORK DONE: Starting and adjusting

MATERIAL	AMOUNT

JOB COMPLETED: ☐ YES ☒ NO

WORK DONE BY: Mark Dahlstrom

CUSTOMER:

THE UNIVERSITY OF IOWA

Facilities Management
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 5/17

Subcontractor SCHUMACHER ELEVATOR Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number #0744901

Description of Work adjusting setting ready for Inspection

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
Jason Anderson			8	—					
Jeremy Ensle			8	—					

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W31818/3-18

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722

Date: 5-17-2018

Job #: 39070 Elevator ID#:

Project Name: 4 of I MRF

City & State: Iowa City

800–779–5438
Established in 1936

Schumacher Elevator Company

One Schumacher Way
P.O. Box 393 – Denver, IA 50622

Cedar Rapids 319–362–1017
Davenport 800–779–5438
Denver 319–984–5676
Des Moines 515–243–5487
Dubuque 563–588–4863
Fort Dodge 515–576–7266
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Ottumwa 800–779–5438
Sioux City 712–258–3535
Waterloo 319–984–5676
Quincy, IL 800–779–5438
Rockford, IL 815–963–8340
Minneapolis, MN 612–333–3066
Rochester, MN 507–285–0251
Kirksville, MO 800–779–5438
Sioux Falls, SD 800–779–5438
LaCrosse, WI 608–788–8410
Madison, WI 608–222–3766

HOURS	ST	1.5	1.7	DT
Mech. Hours	8			
Helper Hours	8			
Team Hours				
Travel Time	1			
Total Time				

MISC. EXPENSES	AMOUNT
Expense Report	
Miles	
Parking	

WORK DONE: adjusted elevator

MATERIAL	AMOUNT

JOB COMPLETED: ☐ YES ☐ NO

FOR OFFICE USE ONLY
☐ BILLABLE ☐ ALLOWANCE ☐ CHANGE ORDER

WORK AUTHORIZED BY:

PRINTED NAME:

WORK DONE BY: J Anderson J Ensel

COMPANY REQUESTING WORK:

THE UNIVERSITY OF IOWA

FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 5/18

Subcontractor SCHUMACHER ELEVATOR Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number #0744901

Description of Work Performed elevator inspection & hauled test weight

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
Jason Anders			8	—					
Jeremy Engel			8	—					

Equipment and Material (attach invoices)

Quantity	Description
	Performed elevator inspection & hauled test weight

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W27323/4-17

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722

Date: 5-18-2018

Job #: 39020 Elevator ID#:

Project Name: 4 of I MRF

City & State: Iowa City

800-779-5438
Established in 1936

Schumacher
Elevator Company

One Schumacher Way
P.O. Box 393 – Denver, IA 50622

Cedar Rapids	319-362-1017
Davenport	800-779-5438
Denver	319-984-5676
Des Moines	515-243-5487
Dubuque	563-588-4863
Fort Dodge	515-576-7266
Iowa City	800-779-5438
Marshalltown	800-779-5438
Mason City	641-424-1307
Ottumwa	800-779-5438
Sioux City	712-258-3535
Waterloo	319-984-5676
Quincy, IL	800-779-5438
Rockford, IL	815-963-8340
Minneapolis, MN	612-333-3066
Rochester, MN	507-285-0251
Kirksville, MO	800-779-5438
Sioux Falls, SD	800-779-5438
LaCrosse, WI	608-788-8410
Madison, WI	608-222-3766

HOURS	ST	1.5	1.7	DT
Mech. Hours	8			
Helper Hours	8			
Team Hours				
Travel Time	1			
Total Time				

MISC. EXPENSES	AMOUNT
Expense Report	
Miles	
Parking	

WORK DONE: Performed Elevator Inspection + marked weights.

MATERIAL	AMOUNT

JOB COMPLETED: ☐ YES ☐ NO

FOR OFFICE USE ONLY
☐ BILLABLE ☐ ALLOWANCE ☐ CHANGE ORDER

WORK AUTHORIZED BY:

PRINTED NAME:

WORK DONE BY: J Anders J Engel

COMPANY REQUESTING WORK:

Schumacher Non-Labor Cost

#34070

Iowa Division of Labor
Elevator Safety
1000 East Grand Avenue
Des Moines, IA 50319-0209
Phone: 515-281-5415
Fax: 515-242-5076
elevators@iwd.iowa.gov
iowaelevators.gov

APPLICATION FOR INSTALLATION OR ALTERATION PERMIT

MAR 16 2018

FOR OFFICE USE

Date Received: _____

☐ Approved ☐ Denied

Date: _____ By: _____

Permit #: _____

Comments: _____

INSTRUCTIONS

Please type or print clearly. No installation or alteration shall begin until a permit has been issued. Submit a separate form for each conveyance. Submit a complete application package in order to prevent delays. Alterations require drawings and specifications for all planned changes. New installations require three copies of the project details set forth in 875 IAC 71.5.

Fee Schedule:

- ☐ Traction Elevator Installation: $1,000.00
- ☐ Escalator Installation: $1,000.00
- ☐ Wheelchair Lift Installation: $500.00
- ☐ Dumbwaiter Installation: $500.00
- ☐ Hydraulic Elevator Installation: $750.00
- ☐ Escalator Skirt Brush Alteration: $500.00
- ☐ Wheelchair Lift Alteration: $500.00
- ☐ Print Revision: $100.00
- ☑ Elevator Alteration: $500
- ☐ Other Escalator Alteration: $1,000.00
- ☐ Dumbwaiter Alteration: $500.00
- ☐ Permit Extension: $100.00

Application Type: ☐ New Installation ☑ Alteration

☐ Complete Replacement of Existing Equipment ☐ Skirt Brush Alteration

Owner's Name: UNIVERSITY OF IOWA			Owner's Address: 202 PCO	
City: IOWA CITY	State: IA	Zip: 52242-250	Phone: 319-335-0115	
Building Name: MEDICAL RESEARCH FACILITY	Conveyance Address: 55 GRAND AVE SOUTH	City: IOWA CITY	County: JOHNSON	Zip: 52242
Conveyance Contractor: Schumacher Elevator Co	Contact: Mark Traetow	Email:	Phone: 316-406-1205	
Address: One Schumacher Way	City: Denver	State: IA	Zip: 50622	
General Contractor: Woodruff Construction, LLC	Contact: Nick Ford	Email: nickf@woodruffcompanies.com	Phone: 515-232-4535	
Address: 1890 Kountry Lane	City: Fort Dodge	State: IA	Zip: 50501	
Date Conveyance Contract Signed: 1/29/2018	Owner ID (Example: North Car #1): Car #5			

General

State Tag Number: 206	Installation Code Year:	Alteration Code Year:	Number of Landings: 6	Number of Front Openings: 6	Number of Rear Openings: 0
Rated Load: 4,000 Pounds	Rated Speed: 300 Feet per Minute		Contractor Job Number: RJ# 39070	MRL: ☐ Yes ☑ No	

Type of Equipment: ☑ Passenger ☐ Freight A ☐ Freight B ☐ Freight C1 ☐ Freight C2 ☐ Freight C3 ☐ Sidewalk ☐ Limited Use (LULA) ☐ Special Purpose ☐ Moving Walk ☐ Dumbwaiter ☐ Material Lift ☐ Escalator ☐ Vertical Platform Lift ☐ Inclined Platform Lift ☐ Restricted (alteration only)

Type of Drive Unit: ☐ Cable Ball and Socket ☐ Chain (Electric) ☐ Chained Hydraulic ☐ Rack and Pinion ☐ Roped Hydraulic ☐ Direct Hydro ☐ Screw ☑ Traction ☐ Winding Drum ☐ Other: _____

Type of Hoistway Doors: EXISTING	Type of Car Doors:	Number of Ropes:	Size of Ropes:
Manufacturer: DOVER/O'KEEFE	Manufacturer Serial #:	Manufacturer Model # and Model Name:	

Equal Opportunity Employer/Program
Auxiliary aids and services are available upon request to individuals with disabilities.
For deaf and hard of hearing, use Relay 711.

AAA Labor Cost

AAA MECHANICAL CONTRACTORS INC.
PLUMBING | HEATING | AIR CONDITIONING | REFRIGERATION
P.O. Box 805 | Iowa City, IA 52244
ph. 319-351-1843 | fax 319-351-0747
www.aaamech.com

May 24, 2018

Woodruff Construction, LLC
Attn: Leon Zhang
1890 Kountry Lane
Fort Dodge, Iowa 50501

RE: MRF Water Damage – Pay Application Summary

SUBJ: Pay App#2

Leon,

For Labor not billed on original Pay Application #1 from period 01/10 – 02/09, 2018. Employee time sheet is included for review.

Sincerely,

Jeff Koeppel
President

AAA MECHANICAL CONTRACTORS, INC.

COMMERCIAL • INDUSTRIAL • INSTITUTIONAL

EMPLOYEE NAME Greg Murphy JOB NO. JM 1 [illegible]

EMPLOYEE I.D. (OFFICE USE) 3440 JOB NAME MRF Walk-thru

THURSDAY		FRIDAY		SATURDAY		SUNDAY		MONDAY		TUESDAY		WEDNESDAY		WEEK ENDING	CLASS TOTAL		
1-18 REGULAR	O.T.	1-19 REGULAR	O.T.	1-20 O.T.	D.T.	1-21 O.T.	D.T.	1-22 REGULAR	O.T.	1-23 REGULAR	O.T.	1-24 REGULAR	O.T.	1-24-18	REGULAR	O.T.	D.T.
														101 WATERMAIN			
														102 UTILITIES			
														103 UNDERGROUND SANITARY			
														104 UNDERGROUND STORM			
														105 ABOVE WASTE & VENT			
														106 ABOVE STORM			
														107 ACID WASTE			
														108 DOMESTIC WATER			
														109 STEAM & CONDENSATE			
1														110 HOT WATER	1		
														111 CHILLED WATER			
														112 GAS			
														113 REFRIGERATION			
														114 PLUMBING FIXTURES			
														115 HVAC EQUIPMENT			
														116 DEMOLITION			
														117 CORE DRILLING			
														118 MEDICAL GAS			
														119 AIR PIPING			
														120			
														121			
														122			
														123			
														124			
														125			
														126			
														127			
														128			
														129			
														130 SHOP LABOR			
														131 UTILITY LABOR			
														TOTAL HOURS WORKED	1		

Notes:

REORDER # 0300460

AAA Mechanical Contractors, Inc.

P O Box 805
Iowa City, IA 52244
Phone: 319-351-1843 Fax: 319-351-0747

Invoice #: TM11263#2
Invoice Date: 05/24/18

Bill To:

Woodruff Construction, LLC
1890 Kountry Lane
Fort Dodge, Iowa 50501

Work Location:

The University of Iowa
MRF

Date	Your Order #	Your P. O. #	Call In By:	Terms
05/24/2018				Net 30

Project: MRF Water Damage
Initial Walk-through to Determine what Repairs Needed to be Made

1 hr. @ $76.89 Foreman Greg Murphy

Quantity	Description	Unit Price	Total
		LABOR	$76.89
		MATERIAL	
		FREIGHT	
		SUBCONTRACTOR	
		Balance Due	**$76.89**

AE Labor Cost

ADVANCED ELECTRICAL SERVICES INC.
dba ADVANCED BORETEK
1233 GILBERT COURT
IOWA CITY, IA 52240
PH: 319-351-6452

INVO

56237
INVOICE NUMBER

CUSTOMER

WOODRUFF CONSTRUCTION
1890 KOUNTY LANE
FORT DODGE, IA 50501

DATE	05/24/2018
REFERENCE	AS PER NICK
TELEPHONE	

29306 UA 106997 WOODRU Soldby:

JOB LOCATION	JOB DETAILS
UI - MRF	REPAIR FLOOD DAMAGE AS DIRECTED

Monthly finance charge of 1.5%, if not paid within 30 days of invoice date. Customer will be responsible for all costs, including court & attorney's fees, incurred by Advanced Electrical Services, Inc. in the collection of customer's past due account.

Material / Work Description **Charge**

AS PER MARK'S REQUEST WE WENT TO THE SITE TO REVIEW ELEVATOR PHONE LIGHTS.

04/13: TREVOR BERTELLI 1 HOUR $60.00

Material Total .00

Labor / Work Description **Charge**

Labor Provided 60.00

Labor Total 60.00

Page 1

PAY THIS AMOUNT ▶ **$ 60.00**

PLEASE DETACH THIS PORTION & RETURN WITH YOUR REMITTANCE TO:

Advanced Electrical Services, Inc.
1233 Gilbert Court
Iowa City, IA 52240

CUSTOMER: WOODRUFF CONSTRUCTION
CUST. NO. 106997 Inv #: 56237
DATE: 05/24/2018

PAY THIS AMOUNT ▶ **$ 60.00**

TERMS: DUE UPON RECEIPT

Bachmeier Labor Cost

THE UNIVERSITY OF IOWA

Facilities Management
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 5/16/18

Subcontractor BACHMEIR CARPET 1 Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number #0744901

Description of Work INSTALL FLOORING IN ELEVATOR

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
Rick Klemesrud			3.5						
Trevor Gast			3.5						

Equipment and Material (attach invoices)

Quantity	Description
1/2 GAL	Vinyl Glue
	MRF COMPRESSOR
12'	METAL TRANSITION PC.

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W31818/3-18

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722

THE UNIVERSITY OF IOWA

LABOR RATE BREAKDOWN FOR UIHC MRF ELEVATOR FLOOR INSTALL

	FOREMAN	JOURNEYMAN	
BASE WAGE	3.5 X $50.00	3.5 X $35.00	
LABOR	$175.00	$122.50	TOTAL=$297.50

CONTRACTOR---BACHMEIER CARPET ONE
TRADE---FLOOR COVERING

PREPARED BY---MATT LANGENBERG
MATT@BACHMEIERCARPETONE.COM

Bachmeier Non Labor Cost

BACHMEIER CARPET ONE
3402 MERCHANT ST
CORALVILLE, IA 52241
319-545-5678

CG800604

ACKNOWLEDGMENT

Sold To	Ship To
WOODRUFF CONSTRUCTION CO 1890 KOUNTRY LANE FORT DODGE, IA 50501	UIHC MRF BUUILDING IOWA CITY, IA 52240

Order Date	Tele #1	PO Number	Order Number
05/07/18	515-576-1118	MRF 2-5	CG800604

Inventory	Style/Item	Color/Description	Quantity Units	Price	Extension
CG8006040001	MARMOLEUM REAL	3048 GRAPHITE	55.76 SF	4.93	274.90
ADHESIVE	L885	GALLON	1.00 EA	59.37	59.37
CTU-2532	BIRCH 1/4" UNDERLAYMENT	N/A	64.00 SF	1.11	71.04
Carton Qty: 2.00					
12-1642	1 1/2" SILVER CARPET BAR	SILVER FLAT METAL	1.00 FT	24.50	24.50

Terms: Payment due upon receipt of invoice. Invoices unpaid after 30 days will incur a finance charge of 1.5% monthly.

Any unforseen floor prep not included in bid.

05/24/18 — 12:04PM

Sales Representative(s):
MATT LANGENBERG

Material:	429.81
Service:	0.00
Misc. Charges:	0.00
Sales Tax:	0.00
Misc. Tax:	0.00
INVOICE TOTAL:	**$429.81**
Less Payment(s):	0.00
BALANCE DUE:	**$429.81**

Thank you for your business!

Store Hours:
Monday, Thursday 8am-7pm
Tuesday, Wednesday, Friday 8am-6pm
Saturday 10am-4pm

G702 APPLICATION and CERTIFICATE for PAYMENT

To: Woodruff Construction LLC
1890 Country Lane
Fort Dodge Ia 50501

From: Corridor Paint & Drywall INC
1639 Edgewood RD SW
Cedar Rapids IA 52404

Contract For: Painting

Project: MRF Water Damage Repair

Via Architect:

Application No: 1
App. Date: May 30, 2018
Period to: May 30, 2018
Project No:
Contract Date:

Distribution to:
- ☐ OWNER
- ☐ CONSTRUCTION MGR.
- ☐ ARCHITECT
- ☐ CONTRACTOR
- ☐ OTHER

CONTRACTOR'S APPLICATION FOR PAYMENT

Application is made for payment, as shown below, in connection with the Contract.
Continuation Sheet, G703, is attached.

1. ORIGINAL CONTRACT SUM			5,633.22
2. Net Change By Change Orders			
3. CONTRACT SUM TO DATE			5,633.22
4. TOTAL COMPLETED AND STORED TO DATE			5,633.22
5. RETAINAGE:			
a.	of Completed Work	0.00	
b.	of Stored Material	0.00	
TOTAL RETAINAGE			0.00
6. TOTAL EARNED LESS RETAINAGE			5,633.22
7. LESS PREVIOUS CERTIFICATES FOR PAYMENT			0.00
8. CURRENT PAYMENT DUE			5,633.22
9. BALANCE TO FINISH, INCLUDING RETAINAGE			0.00

The undersigned Contractor certifies that to the best of the Contractor's knowledge, information and belief the Work covered by this Application for Payment has been completed in accordance with the Contract Documents, that all amounts have been paid by the Contractor for Work for which previous Certificates for Payment were issued and payments received from the Owner, and that current payment shown herein is now due.

CONTRACTOR:

By: _____ Date: May 30, 2018

CHANGE ORDER SUMMARY	ADDITIONS	DEDUCTIONS
Total changes approved in previous months by Owner		
Total approval this Month		
TOTALS		
NET CHANGES by Change Order		

ARCHITECT'S CERTIFICATE FOR PAYMENT

In accordance with the Contract Documents, based on on-site observations and the data comprising this application, the Architect certifies to the Owner that to the best of the Architect's knowledge, information and belief the Work has progressed as indicated, the quality of the Work is in accordance with the Contract Documents, and the Contractor is entitled to payment of the AMOUNT CERTIFIED.

AMOUNT CERTIFIED _____

(Attach explanation if amount certified differs from the amount applied for. Initial all figures on this Application and on the Continuation Sheet that are changed to conform to the amount certified.)

ARCHITECT:

By: _____ Date: _____

This Certificate is not negotiable. The AMOUNT CERTIFIED is payable only to the Contractor named herein. Issuance, payment and acceptance of payment are without prejudice to any rights of the Owner or Contractor under this Contract.

CAUTION: You should use an original document which has this caution printed in red. An original assures that changes will not be obscured as may occur when documents are reproduced.

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CONTINUATION SHEET G703

PROJECT: MRF Water Damage Repair

Corridor Paint & Drywall INC

Document G702, APPLICATION AND CERTIFICATE FOR PAYMENT, containing Contractor's signed Certification is attached.

Application No: 1

App. Date: May 30, 2018

Period to: May 30, 2018

Project No:

Use Column I on Contracts where variable retainage for line items may apply.

A	B	C	D	E	F	G		H	I
Item #	Description of Work	Schedule of Values	Work Completed		Materials Stored & Used Prior + Current	Total Completed and Stored To Date	%	Balance to Finish	Retainage
			From Previous Application(s)	This Period					
1	Labor estimate	4,582.00		4,582.00		4,582.00	100.00	0.00	0.00
2	Material estimate	1,051.22		1,051.22		1,051.22	100.00	0.00	0.00
3									
4									
5									
6									
7									
8									
9									
10									
GRAND TOTAL:		5,633.22		5,633.22		5,633.22	100.00	0.00	0.00

A=Line Item Number B=Brief Item Description C=Total Value of Item D=Total of D and E From Previous Application(s) (If Any) E=Total Work Completed For This Application
F=Materials Purchased and Stored for Project G=Total of All Work Completed and Materials Stored for Project H=Remaining Balance of Amount to Finish I=Amount Withheld from G

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Corridor Non Labor Cost

CORRIDOR PAINT & DRYWALL

COMMERCIAL ~ INDUSTRIAL ~ PAINTING ~ DRYWALL

May 25, 2018

Woodruff Construction
Attn: Leon

RE: MRF Water Damage – Pay Application #2 Summary

Subject: Pay App #2

For all work from 1/16 – 5/18. The total amount for Corridor Paint & Drywall work is **$5633.22.** Labor and material cost documents are enclosed for review.

If you require additional clarification please contact me or Ryan. Thank you for your prompt response.

Thank you,

Corridor Paint & Drywall

639 Edgewood Rd SW, Cedar Rapids, IA 5240-
Ph: (319) 362-2368 Fax: (319) 362-2369

Corridor Paint & Drywall Inc
1639 Edgewood Rd SW
Cedar Rapids, IA 52404
USA

Voice: 319-362-2368
Fax: 319-362-2369

INVOICE

Invoice Number: 1699
Invoice Date: May 24, 2018
Page: 1
Duplicate

Bill To:	Ship to:
Woodruff Construction 1890 Kountry Lane Fort Dodge, IA 50501	Woodruff Construction 1890 Kountry Lane Fort Dodge, IA 50501

Customer ID	Customer PO	Payment Terms	
WOODRUFF		Net 30 Days	
Sales Rep ID	**Shipping Method**	**Ship Date**	**Due Date**
	Airborne		6/23/18

Quantity	Item	Description	Unit Price	Amount
		MRF Water Damage - Materials		
1.00		1/19/18 FBM #43125221-00	3.10	3.10
1.00		1/19/18 Sherwin Williams #7831-7	63.13	63.13
1.00		1/19/18 Tamarack #6527642-00	36.00	36.00
1.00		1/30/18 Sherwin Williams #8058-6	171.15	171.15
1.00		1/31/18 Sherwin Williams #8091-7	17.41	17.41
1.00		2/1/18 Sherwin Williams #8151-9	18.46	18.46
1.00		2/05/18 Sherwin Williams #8256-6	89.73	89.73
1.00		2/08/18 Sherwin Williams #8327-5	131.04	131.04
1.00		3/27/18 Sherwin Williams #9458-6	129.97	129.97
1.00		3/28/18 Sherwin Williams #0429-4	39.24	39.24
1.00		3/28/18 Sherwin Williams #0434-4	86.25	86.25
1.00		3/30/18 Sherwin Williams #9606-0	109.78	109.78
1.00		5/14/18 Sherwin Williams #1291-0	116.36	116.36
1.00		5/18/18 Sherwin Williams #2919-2	39.60	39.60

Tax no included

Subtotal	1,051.22
Sales Tax	
Total Invoice Amount	1,051.22
Payment/Credit Applied	
TOTAL	**1,051.22**

Check/Credit Memo No:

FBM
Foundation Building Materials
Founded on Principle • Built with Purpose
RETURN SERVICE REQUESTED

BRANCH 0043
55 43RD AVE SW
CEDAR RAPIDS IA 52404-4908
(319) 362-4033 PH
(319) 247-2599 FX

INV

INVOICE NUMBER	INVOICE DATE
43125221-00	
CUSTOMER PO#	ORDERED BY
.	.
TERMS	DUE DATE	CUSTOMER #
DUE ON RCPT		243

PLEASE REMIT ALL PAYMENTS TO:
PLEASE REMIT ALL PAYMENTS T
FOUNDATION BUILDING MATERIAL
1125 HARRISON AVE
ROCKFORD IL 61104-7239

BILL TO:
CASH CUSTOMER-CEDAR RAPIDS IA

SHIP TO:
CASH CUSTOMER-CEDAR RAPIDS IA

ORDER DATE	ORDER TAKEN BY	SHIP VIA	SHIP DATE	JOB NUMBER / NAME
01/19/18	Albers, Doug	Cust Pick Up	01/19/18	

QUANTITY ORDERED	QUANTITY SHIPPED	SELL UNIT	ITEM NUMBER / ITEM DESCRIPTION	PRICE UNIT QUANTITY	UNIT PRICE	PRICE UOM	NET AMOUNT DUE
1	1	PC	1A10-PC #1A 10' STANDARD EXP (30/CTN)	1.000	3.10	PC	3.10

ease reference the invoice number with your payment.

Sub-Total	3.10
Taxes	0.22
Downpayment	3.32
Invoice Total	$0.00

nce charge of 1-1/2% per month (18% per year) will be charged on all past due accounts.
aims and returned goods MUST be accompanied by appropriate paperwork.
ess is the contractor's responsibility, including ingress and egress.

Thank You

ıe

THE SHERWIN WILLIAMS CO.
3501 J ST SW
CEDAR RAPIDS IA 52404

SHERWIN-WILLIAMS

Visit www.sherwin-williams.com
Store 3527
(319) 364-5036

CHARGE INVOICE
No. 7831-7

ACCOUNT: **6752-2375-4**

JOB 01 CORRIDOR PAINT & DRYWALL

PAGE 1 OF 1
PO# MRF
ORDER: OE0124931Q3527
DATE: 01/19/2018
TIME: 07:29 AM
2-6536
E01/14688

SHIPPED TO:

CORRIDOR PAINT & DRYWALL
1639 EDGEWOOD RD SW
CEDAR RAPIDS IA 52404 2318

RYAN HAJEK
(319) 362-2368

(319) 362-2368

* INDICATES SALE PRICE

TERMS: NET PAYMENT DUE ON FEB. 20th

SALES NUMBER	SIZE	PRODUCT	DESCRIPTION	QTY	PRICE	VALUE
6501-87206	GALLON	B31W2651	PM 200 0 SG EXTRA **Custom: MATCH** **CCE*Color Cast** OZ 32 64 128 B1 Black - 1 1 - N1 Raw Umber - 3 - - Y3 Deep Gold - - - 1 Custom Sher-Color Match MATCH	1	18.25	18.25
6501-87206	GALLON	B31W2651	PM 200 0 SG EXTRA **Custom: MATCH** **CCE*Color Cast** OZ 32 64 128 B1 Black - 4 - - Y3 Deep Gold - 17 - 1 Custom Sher-Color Match MATCH	1	18.25	18.25
172-2297 482-8133 161-9337	EACH 2 INCH EACH	137202 PG29..24R	CP66SW-48MM MASKTAPE PG29 PREMIUM 48MM 9X400' 31MLHD PLAS DISCOUNT (% 15.00) MFG NBR:HSSW09-400	1 1 1	2.75* 4.68 22.59	2.75 4.68 22.59 -3.39

Thank You
receipt required for refund

SUBTOTAL BEFORE TAX 63.13
7.000% SALES TAX:1-165240500 4.42
CHARGE $67.55

L-2 plaster patch

SIGNED PACKING SLIP # 78317 VERIFIES MERCHANDISE WAS RECEIVED IN GOOD ORDER BY:
MIKE

IT'S OUR POLICY
-Customer satisfaction guaranteed on every product we sell.
-Merchandise (other than tinted paint) may be returned in good condition with proof of purchase within 30 days.
-Small deposit required on all special orders.
-75% refund on returns of special ordered wallcovering. Sorry, cut rolls not returnable.
-Freight extra on blinds & wallpaper book orders.
-A service fee will be charged for all returned checks. See Store Manager for details.

Order

AMARACK
MATERIALS, INC.
w.tamarackmaterials.com
00 James Ave. S.
oomington, MN 55431
l: (952) 888-5556
x: (952) 888-4030
oomington Acoustical
52) 888-5556

MINNESOTA
Cedar, MN (763) 784-6665
Duluth, MN (218) 729-8075
Rochester, MN (507) 280-8800
St Joseph, MN (320) 363-4442

NORTH DAKOTA
Bismarck, ND (701) 258-0756
Minot, ND (701) 838-0756
West Fargo, ND (701) 282-0470

SOUTH DAKOTA
Sioux Falls, SD (605) 335-7800

WISCONSIN
New Richmond, WI (715) 246-4040

IOWA
Iowa City, IA (319) 337-3033

REMIT TO

Tamarack Materials, Inc.
SDS 12-1200
P.O. Box 86
Minneapolis, MN 55486-1200

Customer No.	Date	Order Number
10074		6527642-00

Order Date	Customer P.O. Number	Customer Job No.	Ordered By	Entered By	Reqd Ship Date	Date Shipped	Sales Rep	Page No.
1/19/18	CASH CUSTOMER IOWA CITY			jap	01/19/18	01/19/18	ICHS	1 of 1

Special Instructions [1]

SOLD TO
CASH CUSTOMER IOWA CITY
,

SHIP TO
CASH CUSTOMER IOWA CITY
,

Product No.	Quantity	Units	Description	U/M	Extension	Unit price	Amount
RLITE50	2	BAG	STRUCTOLITE PLASTER 50#40 BAGS/PALLET	BAG	2	18.00	36.00

Tax Details	Received By	Delivered By	Totals	
xable: Yes wa hnson - wa City		IOWA CITY YARD	SUBTOTAL	36.00
			TAX	2.16
			ADD'L CHARGES	0.00
			TOTAL	38.16
			Payments	
			Visa/MC/DISC	38.16-

Thank You

S: NET 20TH, OR AS OTHERWISE ARRANGED. INTEREST RATE OF 1.5% PER MONTH (WHICH IS A RATE OF 18% PER YEAR) COMPUTED MONTHLY WILL BE GED ON THE UNPAID BALANCE. CUSTOMER AGREES TO PAY BY CASH, CHECK, OR ACH. CUSTOMERS PAYING THEIR ACCOUNT WITH A CREDIT CARD NCUR A SURCHARGE OF 2.0% ON THE TRANSACTION AMOUNT, WHICH IS NOT GREATER THAN TAMARACK MATERIALS COST OF ACCEPTANCE.

ETURN CHARGE ON STOCK MERCHANDISE. SPECIAL ORDERS ARE NOT RETURNABLE.

RACK MATERIALS INC. HEREBY REQUESTS PURSUANT TO MINNESOTA STATUTES SECTION 514.011 (3) THAT YOU SUPPLY TO IT, WITHIN TEN (10) DAYS E DATE OF THIS INNVOICE, THE NAME AND ADDRESS OF THE OWNER WHOSE PROPERTY IS BEING IMPROVED BY THE MATERIALS YOU HAVE ORDERED.

GYPSUM WALLBOARD, PLASTER, STUCCO, STO/EIFS, JOINT COMPOUND, INSULATION, METAL STUDS, METAL LATH, METAL ACCESS DOORS, DRYWALL SCREWS, DRYWALL TOOLS, CEILING TILE AND GRID, FRY REGLET TRIMS, FRP, SCAFFOLDING, SAFTEY EQUIPMENT AND MORE

THE SHERWIN WILLIAMS CO.
3501 J ST SW
CEDAR RAPIDS IA 52404

SHERWIN-WILLIAMS

Visit www.sherwin-williams.com
Store 3527
(319) 364-5036

CHARGE INVOICE No. 8058-6

JOB 01 CORRIDOR PAINT & DRYWALL

PAGE 1 OF 1
PO# MRF
ORDER: OE0125303A3527
DATE: 01/30/2018
TIME: 06:35 AM
2-6536
E02/14688

ACCOUNT: **6752-2375-4**

CORRIDOR PAINT & DRYWALL
1639 EDGEWOOD RD SW
CEDAR RAPIDS IA 52404 2318

(319) 362-2368

TERMS: NET PAYMENT DUE ON FEB. 20th

SALES NUMBER	SIZE	PRODUCT	DESCRIPTION	QTY	PRICE	VALUE
6501-87206	GALLON	B31W2651	PM 200 0 SG EXTRA **Custom: MATCH** **CCE*Color Cast** OZ 32 64 128 B1 Black - 4 - - Y3 Deep Gold - 17 - 1 Custom Sher-Color Match MATCH	2	18.25	36.50
6501-87214	5 GAL	B31W2651	PM 200 0 SG EXTRA **Custom: MATCH** **CCE*Color Cast** OZ 32 64 128 B1 Black - 7 1 - N1 Raw Umber - 15 - - Y3 Deep Gold - 1 - 1 Custom Manual Match MATCH	5	17.25	86.25
598-7821	EACH	9003048	5GAL PAIL LINER	4	4.49	17.96
			DISCOUNT (% 15.00)			-2.69
6503-60225	9 INCH	140678093	9 ULTRA FINISH 1/2 C	2	7.09	14.18
			DISCOUNT (% 15.00)			-2.13
180-1281	EACH	99074299	4-SIDED HD 5GL GRID	2	2.96	5.92
161-4585	EACH	99999	5GPL GRAY W/LID/TINT	1	7.84	7.84
461-3667	EACH	PG29..23R	PG29 PREMIUM 36MM	2	3.66	7.32

Thank You
receipt required for refund

SUBTOTAL BEFORE TAX	171.15
7.000% SALES TAX:1-165240500	11.98
CHARGE	$183.13

183.

SIGNED PACKING SLIP # 80586 VERIFIES MERCHANDISE WAS RECEIVED IN GOOD ORDER BY:
TIM

IT'S OUR POLICY
-Customer satisfaction guaranteed on every product we sell.
-Merchandise (other than tinted paint) may be returned in good condition with proof of purchase within 30 days.
-Small deposit required on all special orders.
-75% refund on returns of special ordered wallcovering. Sorry, cut rolls not returnable.
-Freight extra on blinds & wallpaper book orders.
-A service fee will be charged for all returned checks. See Store Manager for details.

THE SHERWIN WILLIAMS CO.
3501 J ST SW
CEDAR RAPIDS IA 52404

SHERWIN-WILLIAMS

Visit www.sherwin-williams.com
Store 3527
(319) 364-5036

CHARGE INVOICE No. 8091-7

JOB 01 CORRIDOR PAINT & DRYWALL

PAGE 1 OF 1
PO# MRF

ACCOUNT: **6752-2375-4**

SHIPPED TO:

DATE: 01/31/2018
TIME: 06:11 AM
2-6536
E02/14688

CORRIDOR PAINT & DRYWALL
1639 EDGEWOOD RD SW
CEDAR RAPIDS IA 52404 2318

RYAN HAJEK
(319) 362-2368

(319) 362-2368

TERMS: NET PAYMENT DUE ON FEB. 20th

SALES NUMBER	SIZE	PRODUCT	DESCRIPTION	QTY	PRICE	VALUE
155-8899	QUART	31901-4	SPACKLING PASTE	1	10.09	10.09
461-3667	EACH	PG29..23R	PG29 PREMIUM 36MM	2	3.66	7.32

Thank You
receipt required for refund

SUBTOTAL BEFORE TAX	17.41
7.000% SALES TAX:1-165240500	1.22
CHARGE	$18.63

30.47

SIGNED PACKING SLIP # 80917 VERIFIES MERCHANDISE WAS RECEIVED IN GOOD ORDER BY:
TIM

IT'S OUR POLICY
-Customer satisfaction guaranteed on every product we sell.
-Merchandise (other than tinted paint) may be returned in good condition with proof of purchase within 30 days.
-Small deposit required on all special orders.
-75% refund on returns of special ordered wallcovering. Sorry, cut rolls not returnable.
-Freight extra on blinds & wallpaper book orders.
-A service fee will be charged for all returned checks. See Store Manager for details.

THE SHERWIN WILLIAMS CO.
3501 J ST SW
CEDAR RAPIDS IA 52404

SHERWIN-WILLIAMS

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Store 3527
(319) 364-5036

CHARGE INVOICE No. 8151-9

JOB 01 CORRIDOR PAINT & DRYWALL

ACCOUNT: **6752-2375-4**

PAGE 1 OF 1
PO# MRF
ORDER: OE0125398A3527
DATE: 02/01/2018
TIME: 06:17 AM
2-6536
E02/14688

CORRIDOR PAINT & DRYWALL
1639 EDGEWOOD RD SW
CEDAR RAPIDS IA 52404 2318

(319) 362-2368

TERMS: NET PAYMENT DUE ON MAR. 20th

SALES NUMBER	SIZE	PRODUCT	DESCRIPTION	QTY	PRICE	VALUE
6502-68683	QUART	B31W1151	PROCL LTX SG EXTRA	1	18.46	18.46

Custom: MATCH

CCE*Color Cast	OZ	32	64	128
B1 Black	-	1	-	1
Y3 Deep Gold	-	7	1	-

Custom Sher-Color Match
MATCH

Thank You
receipt required for refund

SUBTOTAL BEFORE TAX	18.46
7.000% SALES TAX:1-165240500	1.29
CHARGE	$19.75

RECEIVED

SIGNED PACKING SLIP # 81519 VERIFIES MERCHANDISE WAS RECEIVED IN GOOD ORDER BY:
TIM

IT'S OUR POLICY
-Customer satisfaction guaranteed on every product we sell.
-Merchandise (other than tinted paint) may be returned in good condition with proof of purchase within 30 days.
-Small deposit required on all special orders.
-75% refund on returns of special ordered wallcovering. Sorry, cut rolls not returnable.
-Freight extra on blinds & wallpaper book orders.
-A service fee will be charged for all returned checks. See Store Manager for details.

THE SHERWIN WILLIAMS CO.
3501 J ST SW
CEDAR RAPIDS IA 52404

SHERWIN-WILLIAMS

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Store 3527
(319) 364-5036

CHARGE INVOICE
No. 8256-6
TRC# 638964
PAGE 1 OF 1
PO# MRF

ACCOUNT: **6752-2375-4**

JOB 72 MRF

SHIPPED TO:

DATE: 02/05/2018
TIME: 03:40 PM
2-6536
E01/14688

CORRIDOR PAINT & DRYWALL
1639 EDGEWOOD RD SW
CEDAR RAPIDS IA 52404 2318

RYAN HAJEK
(319) 362-2368

(319) 362-2368

* INDICATES SALE PRICE

TERMS: NET PAYMENT DUE ON MAR. 20th

SALES NUMBER	SIZE	PRODUCT	DESCRIPTION	QTY	PRICE	VALUE
594-4731	EACH		BRICK WHITE RAGS MED	1	15.29	15.29
			DISCOUNT (% 15.00)			-2.29
959-8632	EACH		MFG NBR:6416-BR05-SW PROGRADE 5" DISC 220	1	12.49	12.49N
			DISCOUNT (% 15.00)			-1.87
959-8665	EACH		MFG NBR:88525NA-9-B PROGRADE 5" DISCS	1	12.49	12.49N
			DISCOUNT (% 15.00)			-1.87
6509-51924	EACH		MFG NBR:88523NA-9-B PREM 10IN1 FOLDING T	1	10.75*	10.75
6508-65330	EACH	13040	GLASS SCRAPER 5BLDS	1	3.99	3.99
			DISCOUNT (% 15.00)			-0.60
6509-34581	EACH	7008-26	CUT RESISTANT GLOVE	1	9.99	9.99
			DISCOUNT (% 15.00)			-1.50
6509-90427	EACH	88252-26	SW NITRILE GLOVE 1PK	4	2.50*	10.00
154-8775	GALLON	R6K9	ACETONE-GAL-SW	1	26.89	26.89N
			DISCOUNT (% 15.00)			-4.03

Thank You
receipt required for refund

SUBTOTAL BEFORE TAX	**89.73**
7.000% SALES TAX:1-165240500	**3.19**
CHARGE	**$92.92**

SIGNED PACKING SLIP # 82566 VERIFIES MERCHANDISE WAS RECEIVED IN GOOD ORDER BY:
RYAN

IT'S OUR POLICY
-Customer satisfaction guaranteed on every product we sell.
-Merchandise (other than tinted paint) may be returned in good condition with proof of purchase within 30 days.
-Small deposit required on all special orders.
-75% refund on returns of special ordered wallcovering. Sorry, cut rolls not returnable.
-Freight extra on blinds & wallpaper book orders.
-A service fee will be charged for all returned checks. See Store Manager for details.

THE SHERWIN WILLIAMS CO.
3501 J ST SW
CEDAR RAPIDS IA 52404

SHERWIN-WILLIAMS.

Visit www.sherwin-williams.com
Store 3527
(319) 364-5036

CHARGE INVOICE No. 8327-5

TRC# 638964
PAGE 1 OF 2
PO# MRF
ORDER: OE0125613Q3527
DATE: 02/08/2018
TIME: 06:18 AM
2-6536
E01/14688

ACCOUNT: **6752-2375-4**

JOB 72 MRF

SHIPPED TO:

CORRIDOR PAINT & DRYWALL
1639 EDGEWOOD RD SW
CEDAR RAPIDS IA 52404 2318

RYAN HAJEK
(319) 362-2368

(319) 362-2368

TERMS: NET PAYMENT DUE ON MAR. 20th

SALES NUMBER	SIZE	PRODUCT	DESCRIPTION	QTY	PRICE	VALUE
6508-76220	GALLON	B41W2651	PM 200 0 LG EG EW **Custom: MATCH 491** **CCE*Color Cast** OZ 32 64 128 B1 Black - 4 - 1 R2 Maroon - - 1 - Y3 Deep Gold - 5 - 1 Custom Sher-Color Match 491	1	14.11	14.11N
6508-76220	GALLON	B41W2651	PM 200 0 LG EG EW **Custom: MATCH 476,485,482** **CCE*Color Cast** OZ 32 64 128 B1 Black - 7 - 1 R2 Maroon - 2 - - Y3 Deep Gold - 14 1 - Custom Sher-Color Match 476,485,482	2	14.11	28.22N
6508-76220	GALLON	B41W2651	PM 200 0 LG EG EW **Custom: MATCH 473** **CCE*Color Cast** OZ 32 64 128 B1 Black - 2 1 1 Y3 Deep Gold - 5 1 1 Custom Sher-Color Match 473	1	14.11	14.11N
6508-76220	GALLON	B41W2651	PM 200 0 LG EG EW **Custom: MATCH 474,468** **CCE*Color Cast** OZ 32 64 128 Y1 Yellow - 3 1 1 Y3 Deep Gold - 5 - 1 Custom Sher-Color Match 474,468	1	14.11	14.11N
165-0563	EACH	05GLSWB	5 GL BLUE PAIL SW	1	4.75	4.75
			DISCOUNT (% 15.00)			-0.71
598-7821	EACH	9003048	5GAL PAIL LINER	6	4.60	27.60
			DISCOUNT (% 15.00)			-4.14
180-1281	EACH	99074299	4-SIDED HD 5GL GRID	3	2.96	8.88
6503-60225	9 INCH	140678093	9 ULTRA FINISH 1/2 C	4	7.09	28.36
			DISCOUNT (% 15.00)			-4.25

Thank You
receipt required for refund

SUBTOTAL BEFORE TAX 131.04
7.000% SALES TAX:1-165240500 4.23
CHARGE $135.27

13.32
148.59

L - 4 of 5 Room Settings

THE SHERWIN WILLIAMS CO.
3501 J ST SW
CEDAR RAPIDS IA 52404

ACCOUNT: **6752-2375-4**

CORRIDOR PAINT & DRYWALL
1639 EDGEWOOD RD SW
CEDAR RAPIDS IA 52404 2318

(319) 362-2368

Visit www.sherwin-williams.com
Store 3527
(319) 364-5036

JOB 72 MRF

SHIPPED TO:

RYAN HAJEK
(319) 362-2368

CHARGE INVOICE No. 9458-6

TRC# 638964
PAGE 1 OF 1
PO# MRF
ORDER: OE012727603527
DATE: 03/27/2018
TIME: 06:36 AM
2-6536
E01/14721

ENTERED

TERMS: NET PAYMENT DUE ON APR. 20th

SALES NUMBER	SIZE	PRODUCT	DESCRIPTION	QTY	PRICE	VALUE
6501-87214	5 GAL	B31W2651	PM 200 0 SG EXTRA	5	17.25	86.25N
			Custom: MATCH			
			CCE*Color Cast **OZ 32 64 128**			
			B1 Black - 7 1 -			
			N1 Raw Umber - 15 - -			
			Y3 Deep Gold - 1 - 1			
			Custom Manual Match			
			MATCH			
165-0563	EACH	05GLSWB	5 GL BLUE PAIL SW	1	4.75	4.75
			DISCOUNT (% 15.00)			-0.71
598-7821	EACH	9003048	5GAL PAIL LINER	1	4.60	4.60
			DISCOUNT (% 15.00)			-0.69
198-0879	EACH	58405SW	5X5 8OZ CANVAS DROP	1	10.19	10.19
			DISCOUNT (% 15.00)			-1.53
6504-31794	9 INCH	140878200	9 ULTRA FINISH 1/2 2	1	11.19	11.19
			DISCOUNT (% 15.00)			-1.68
105-5490	EACH	01GLSWB	1 GAL SW PLASTIC BUC	1	3.24	3.24
180-1281	EACH	99074299	4-SIDED HD 5GL GRID	1	2.96	2.96
482-8133	2 INCH	PG29..24R	PG29 PREMIUM 48MM	1	4.68	4.68N
180-2628	EACH	10262800	SW 12" FRAME ONLY	1	2.13	2.13
155-3494	EACH	99382800	1GL MINI RLR GRID	1	1.11	1.11
6504-90352	4 INCH		4X3/8"STRIPE MINIRLR	1	4.09	4.09
			DISCOUNT (% 15.00)			-0.61

Thank You
receipt required for refund

SUBTOTAL BEFORE TAX	**129.97**
7.000% SALES TAX:1-165240500	**2.73**
CHARGE	**$132.70**

SIGNED PACKING SLIP # 94586 VERIFIES MERCHANDISE WAS RECEIVED IN GOOD ORDER BY:
MIKE

THE SHERWIN WILLIAMS CO.
841 HIGHWAY 6 E
IOWA CITY IA 52240 4404

SHERWIN-W

Visit www.sherwin-williams.com
Store 3783
(319) 338-3604

CHARGE INVOICE No. 0429-4

TRC# 638964
PAGE 1 OF 1
PO# MRF

ACCOUNT: **6752-2375-4**

JOB 72 MRF

SHIPPED TO:

DATE: 03/28/2018
TIME: 09:27 AM
2-6536
E31/13746

CORRIDOR PAINT & DRYWALL
1639 EDGEWOOD RD SW
CEDAR RAPIDS IA 52404 2318

RYAN HAJEK
(319) 362-2368

(319) 362-2368

* INDICATES SALE PRICE

TERMS: NET PAYMENT DUE ON APR. 20th

SALES NUMBER	SIZE	PRODUCT	DESCRIPTION	QTY	PRICE	VALUE
117-8888	EACH	80328SW	4X15BUTYL ELIMINATOR	1	16.79*	16.79
151-6442	1QT EA	WL05014	SPACKLING PASTE QUAR	1	7.29	7.29N
			DISCOUNT (% 15.00)			-1.09
160-0212	QUART	QTS	LAC THIN 12X1 CSA16	1	8.40	8.40N
160-0238	QUART	QTS	STXDEN ALCOH 12X1 QT	1	7.85	7.85N

Thank You
receipt required for refund

SUBTOTAL BEFORE TAX	**39.24**
6.000% SALES TAX:1-165224000	**1.01**
CHARGE	**$40.25**

SIGNED PACKING SLIP # 4294 VERIFIES MERCHANDISE WAS RECEIVED IN GOOD ORDER BY:
MIKE

THE SHERWIN WILLIAMS CO.
841 HIGHWAY 6 E
IOWA CITY IA 52240 4404

SHERWIN-W

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Store 3783
(319) 338-3604

JOB 72 MRF

CHARGE INVOICE
No. 0434-4
TRC# 638964
PAGE 1 OF 1
PO# MRF
ORDER: OE027713503783
DATE: 03/28/2018
TIME: 10:02 AM
2-6536
E31/13746

ACCOUNT: **6752-2375-4**

CORRIDOR PAINT & DRYWALL
1639 EDGEWOOD RD SW
CEDAR RAPIDS IA 52404 2318

(319) 362-2368

TERMS: NET PAYMENT DUE ON APR. 20th

SALES NUMBER	SIZE	PRODUCT	DESCRIPTION	QTY	PRICE	VALUE
6501-87214	5 GAL	B31W2651	PM 200 0 SG EXTRA	5	17.25	86.25N

Custom: MRF OFF WHITE

CCE*Color Cast	OZ	32	64	128
B1 Black	-	7	1	-
N1 Raw Umber	-	15	-	-
Y3 Deep Gold	-	1	-	1

Custom Manual Match
OFF WHITE

Thank You
receipt required for refund

SUBTOTAL BEFORE TAX	**86.25**
6.000% SALES TAX:1-165224000	**0.00**
CHARGE	**$86.25**

SIGNED PACKING SLIP # 4344 VERIFIES MERCHANDISE WAS RECEIVED IN GOOD ORDER BY:
MIKE

THE SHERWIN WILLIAMS CO.
3501 J ST SW
CEDAR RAPIDS IA 52404

SHERWIN-WILLIAMS.

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(319) 364-5036

JOB 72 MRF

CHARGE INVOICE
No. 9606-0
TRC# 638964
PAGE 1 OF 1
PO# MRF
ORDER: OE0127402A3527
DATE: 03/30/2018
TIME: 06:20 AM
2-6536
E02/14721

ACCOUNT: **6752-2375-4**

CORRIDOR PAINT & DRYWALL
1639 EDGEWOOD RD SW
CEDAR RAPIDS IA 52404 2318

RETURNED

(319) 362-2368

TERMS: NET PAYMENT DUE ON APR. 20th

SALES NUMBER	SIZE	PRODUCT	DESCRIPTION	QTY	PRICE	VALUE
6501-87214	5 GAL	B31W2651	PM 200 0 SG EXTRA **Custom: MATCH** **CCE*Color Cast** OZ 32 64 128 B1 Black - 7 1 - N1 Raw Umber - 15 - - Y3 Deep Gold - 1 - 1 Custom Manual Match MATCH	5	17.25	86.25N
452-3908	EACH		13 POINT SNAP KNIFE DISCOUNT (% 15.00) MFG NBR:66-0455-BULK	2	1.49	2.98 -0.45
155-1456	9 INCH	10145690	CS SHPSKIN 9X1/2"	2	10.50	21.00

Thank You
receipt required for refund

SUBTOTAL BEFORE TAX 109.78
7.000% SALES TAX:1-165240500 1.65
CHARGE $111.43

SIGNED PACKING SLIP # 96060 VERIFIES MERCHANDISE WAS RECEIVED IN GOOD ORDER BY:
JAMES

THE SHERWIN WILLIAMS CO.
3501 J ST SW
CEDAR RAPIDS IA 52404

SHERWIN-WILLIAMS.

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Store 3527
(319) 364-5036

CHARGE INVOICE
No. 1291-0

JOB 01 CORRIDOR PAINT & DRYWALL

PAGE 1 OF 1
PO# MFR
ORDER: OE0129030A3527
DATE: 05/14/2018
TIME: 06:38 AM
2-6536
E01/14688

ACCOUNT: **6752-2375-4**

CORRIDOR PAINT & DRYWALL
1639 EDGEWOOD RD SW
CEDAR RAPIDS IA 52404 2318

(319) 362-2368

* INDICATES SALE PRICE

TERMS: NET PAYMENT DUE ON JUNE 20th

SALES NUMBER	SIZE	PRODUCT	DESCRIPTION	QTY	PRICE	VALUE
6500-23625	GALLON	B66T654	PI HP AC SG ULTRA	2	32.60	65.20
			Color: SWBRZ6 MEDIUM BRONZE			
			CCE*Color Cast OZ 32 64 128			
			W1 White - 30 1 1			
			B1 Black 2 46 1 -			
			N1 Raw Umber 4 43 1 1			
			R2 Maroon - 6 1 -			
			Sher-Color Formula			
			MEDIUM BRONZE			
155-8899	QUART	31901-4	SPACKLING PASTE	1	11.11	11.11
482-8133	2 INCH	PG29..24R	PG29 PREMIUM 48MM	2	4.68	9.36
6509-21802	9 INCH		CS SOFT WOVEN 9X3/16	2	4.39*	8.78
171-5135	9 INCH	105160900	FRAME 9" HD PRO	1	4.99*	4.99
180-1281	EACH	99074299	4-SIDED HD 5GL GRID	1	2.96	2.96
153-5400	EACH	CP-002	CP002 M SNDNG SPNG	1	1.59*	1.59
180-2628	EACH	10262800	SW 12" FRAME ONLY	1	2.13	2.13
6501-66242	4 INCH	994000950	CS VELOUR 4" X 3/16	1	5.09	5.09
155-3494	EACH	99382800	1GL MINI RLR GRID	1	1.11	1.11
165-0563	EACH	05GLSWB	5 GL BLUE PAIL SW	1	4.75	4.75
			DISCOUNT (% 15.00)			-0.71

Thank You
receipt required for refund

SUBTOTAL BEFORE TAX	**116.36**
7.000% SALES TAX:1-165240500	**8.15**
CHARGE	**$124.51**

SIGNED PACKING SLIP # 12910 VERIFIES MERCHANDISE WAS RECEIVED IN GOOD ORDER BY:
SHANNON

THE SHERWIN WILLIAMS CO.
841 HIGHWAY 6 E
IOWA CITY IA 52240 4404

Visit www.sherwin-williams.com
Store 3783
(319) 338-3604

CHARGE INVOICE
No. 2919-2

ACCOUNT: **6752-2375-4**

JOB 01 CORRIDOR PAINT & DRYWALL

PAGE 1 OF 1
PO# MRF
ORDER: OE0280229A3783
DATE: 05/18/2018
TIME: 01:20 PM
2-6536
E84/13746

CORRIDOR PAINT & DRYWALL
1639 EDGEWOOD RD SW
CEDAR RAPIDS IA 52404 2318

(319) 362-2368

TERMS: NET PAYMENT DUE ON JUNE 20th

SALES NUMBER	SIZE	PRODUCT	DESCRIPTION	QTY	PRICE	VALUE
6500-23625	GALLON	B66T654	PI HP AC SG ULTRA	1	32.60	32.60
			Color: SWBRZ6 MEDIUM BRONZE			
			CCE*Color Cast OZ 32 64 128			
			W1 White - 30 1 1			
			B1 Black 2 46 1 -			
			N1 Raw Umber 4 43 1 1			
			R2 Maroon - 6 1 -			
			Sher-Color Formula			
			MEDIUM BRONZE			
165-0563	EACH	05GLSWB	5 GL BLUE PAIL SW	1	4.75	4.75
			DISCOUNT (% 15.00)			-0.71
180-1281	EACH	99074299	4-SIDED HD 5GL GRID	1	2.96	2.96

Thank You
receipt required for refund

SUBTOTAL BEFORE TAX	**39.60**
6.000% SALES TAX:1-165224000	**2.38**
CHARGE	**$41.98**

SIGNED PACKING SLIP # 29192 VERIFIES MERCHANDISE WAS RECEIVED IN GOOD ORDER BY:
SHANNON

Corridor Labor Cost

Corridor Paint & Drywall Inc
1639 Edgewood Rd SW
Cedar Rapids, IA 52404
USA

Voice: 319-362-2368
Fax: 319-362-2369

INVOICE

Invoice Number: 1698
Invoice Date: May 24, 2018
Page: 1
Duplicate

Bill To:	Ship to:
Woodruff Construction 1890 Kountry Lane Fort Dodge, IA 50501	Woodruff Construction 1890 Kountry Lane Fort Dodge, IA 50501

Customer ID	Customer PO	Payment Terms	
WOODRUFF		Net 30 Days	
Sales Rep ID	**Shipping Method**	**Ship Date**	**Due Date**
	Airborne		6/23/18

Quantity	Item	Description	Unit Price	Amount
		MRF Water Damage		
1.00	Hours	1/16/18 Mike Dahm	29.00	29.00
1.50	Hours	1/18/18 Mike Dahm	29.00	43.50
5.00	Hours	1/22/18 Mike Dahm	29.00	145.00
2.50	Hours	1/23/18 Alfredo Rodriguez	29.00	72.50
3.00	Hours	1/24/18 Alfredo Rodriguez	29.00	87.00
2.00	Hours	1/25/18 Alfredo Rodriguez	29.00	58.00
1.50	Hours	1/30/18 Mike Dahm	29.00	43.50
8.00	Hours	1/30/18 Tim Harms	29.00	232.00
8.00	Hours	1/31/18 Tim Harms	29.00	232.00
8.00	Hours	2/1/18 Tim Harms	29.00	232.00
7.00	Hours	2/7/18 Tim Harms	29.00	203.00
8.00	Hours	2/8/18 Tim Harms	29.00	232.00
7.00	Hours	2/9/18 Tim Harms	29.00	203.00
8.00	Hours	3/27/18 James Norton	29.00	232.00
1.00	Hours	3/27/18 Mike Dahm	29.00	29.00
8.00	Hours	3/28/18 James Norton	29.00	232.00
8.00	Hours	3/28/18 Mike Dahm	29.00	232.00
8.00	Hours	3/29/18 Todd Skersick	29.00	232.00
8.00	Hours	3/29/18 James Norton	29.00	232.00
8.00	Hours	3/30/18 James Norton	29.00	232.00

Subtotal	Continued
Sales Tax	Continued
Total Invoice Amount	Continued
Payment/Credit Applied	
TOTAL	**Continued**

Check/Credit Memo No:

Corridor Paint & Drywall Inc
1639 Edgewood Rd SW
Cedar Rapids, IA 52404
USA

Voice: 319-362-2368
Fax: 319-362-2369

INVOICE

Invoice Number: 1698
Invoice Date: May 24, 2018
Page: 2
Duplicate

Bill To:	Ship to:
Woodruff Construction 1890 Kountry Lane Fort Dodge, IA 50501	Woodruff Construction 1890 Kountry Lane Fort Dodge, IA 50501

Customer ID	Customer PO	Payment Terms	
WOODRUFF		Net 30 Days	
Sales Rep ID	**Shipping Method**	**Ship Date**	**Due Date**
	Airborne		6/23/18

Quantity	Item	Description	Unit Price	Amount
8.00	Hours	3/30/18 Todd Skersick	29.00	232.00
2.00	Hours	4/3/18 James Norton	29.00	58.00
3.00	Hours	4/4/18 James Norton	29.00	87.00
8.00	Hours	5/14/18 Shannon Kelchner	29.00	232.00
8.00	Hours	5/15/18 Shannon Kelchner	29.00	232.00
8.00	Hours	5/16/18 Shannon Kelchner	29.00	232.00
8.00	Hours	5/17/18 Shannon Kelchner	29.00	232.00
1.50	Hours	5/18/18 Shannon Kelchner	29.00	43.50

Subtotal	4,582.00
Sales Tax	
Total Invoice Amount	4,582.00
Payment/Credit Applied	
TOTAL	**4,582.00**

Check/Credit Memo No:

THE UNIVERSITY OF IOWA

FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 1/16/18

Subcontractor CORRIDOR PAINT & DRYWALL Change Order Request No _____

Project Name MLF WATER DAMAGE REPAIR Project Number #0744901

Description of Work Walk job with Nick Ford

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
Mike Dahm	Paint		1						

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) Mike Dahm

General Contractor's Representative _____

Owner's Representative (Required) _____ 1/16/18

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W27323/4-17

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 *Fax* 319-335-2722

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General Contractor WOODRUFF CONST. CO. Date Work Performed 1/18/18

Subcontractor CORRIDOR PAINT + DRYWALL Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number #0744901

Description of Work Walk Plaster Repair and Get material

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
Mike Dahm	Painter		1.5						

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) Mike Dahm

General Contractor's Representative _____

Owner's Representative (Required) _____ 1/18/18

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General Contractor WOODRUFF CONST. CO. Date Work Performed 1/22/18

Subcontractor CORRIDOR PAINT & DRYWALL Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number #0744901

Description of Work review patchwork and work on Pricing.

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
Mike Dahm	Paint		5						

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) Mike Dahm

General Contractor's Representative _____

Owner's Representative (Required) _____ 1/22/18

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General Contractor WOODRUFF CONST. CO. Date Work Performed 1/23/18

Subcontractor CORRIDOR PAINT & DRYWALL Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number # 0744901

Description of Work REPLASTER WALL ON 2ND FLR.

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
RODRIQUEZ	DRYWALL		2.5	X					

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) [signature]

General Contractor's Representative [signature]

Owner's Representative (Required) [signature]

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April, 2007

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General Contractor WOODRUFF CONST. CO.

Subcontractor CORRIDOR PAINT & DRYWALL

Project Name MRF WATER DAMAGE REPAIR

Description of Work REPLASTER WALL ON 2ND FL.

Date Work Performed 1/24/18

Change Order Request No _____

Project Number # 0744901

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
RODRIQUEZ	DRYWALL		3	0					

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) _____

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April, 2007

W27323/4-17

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Iowa City, Iowa 52242
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TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO.

Subcontractor CORRIDOR PAINT & DRYWALL

Project Name MLF WATER DAMAGE REPAIR

Description of Work REPLASTER WALL ON 2ND FL.

Date Work Performed 1/25/18

Change Order Request No _____

Project Number # 0744901

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
RODRIQUEZ	DRYWALL		2	0					

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) Rodriguez

General Contractor's Representative _____

Owner's Representative (Required) Robert Young

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April, 2007

W27323/4-17

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722

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FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 1/30/18

Subcontractor CORRIDOR PAINT & DRYWALL Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number #0744901

Description of Work pickup and delv materials, mtrl Glass

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
Mike Dahm	Pntr		1.5						

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) Mike Dahm

General Contractor's Representative _____

Owner's Representative (Required) _____ 1/30/18

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April, 2007

W27323/4-17

200 University Services Building
Iowa City, Iowa 52242
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FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 1/30/18

Subcontractor CORRIDOR PAINT & DRYWALL Change Order Request No _____

Project Name MLP WATER DAMAGE REPAIR Project Number # 0744901

Description of Work PAINTING 2ND FL AROUND REPLASTERED AREA & 5TH FLR. PATCHES

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
HARMS	PAINT		8	~~8~~					

Equipment and Material (attach invoices)

Quantity	Description
2	Gallons Pro Mar 200 Eg Shel
2	PG 29 1 1/2" tape

Subcontractor's Representative (if applicable) Z. Harms

General Contractor's Representative _____

Owner's Representative (Required) _____

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April, 2007

W27323/4-17

200 University Services Building
Iowa City, Iowa 52242
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FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 1/31/18

Subcontractor CORRIDOR PAINT & DRYWALL Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number #0744901

Description of Work TIM HARMS / PAINT DRYWALL FIXES ON 5TH FL. AND LOBBY ON ~~5TH~~ 3RD

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
HARMS	PAINT		8	0					

Equipment and Material (attach invoices)

Quantity	Description
5	Gallons ProMar 200 Eg Shel
2	PG-29 1½" tape

Subcontractor's Representative (if applicable) Tim Harms

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W27323/4-17

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 *Fax* 319-335-2722

THE UNIVERSITY OF IOWA

FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 2/1/18

Subcontractor CORRIDOR PAINT & DRYWALL Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number #0744901

Description of Work TIM HARMS / PAINT DOORFRAME ON 2ND & ELEVATOR LOBBY ON 2ND

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
					HARMS			8	Ø

Equipment and Material (attach invoices)

Quantity	Description
1	Quart ProClassic Semi-Gloss

Subcontractor's Representative (if applicable) Tim Harms

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W27323/4-17

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 *Fax* 319-335-2722

THE UNIVERSITY OF IOWA

FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 2/7/18

Subcontractor CORRIDOR PAINT + DRYWALL Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number #0744901

Description of Work HARMS / PAINT CORRIDOR ON 5TH FL.

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
HARMS	PAINT		7	8					

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W27323/4-17

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 *Fax* 319-335-2722

THE UNIVERSITY OF IOWA

FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 2/8/18

Subcontractor CORRIDOR PAINT + DRYWALL Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number #0744901

Description of Work HARMS / PAINT DRYWALL FIXES ON 4TH & CORRIDOR ON 4TH FL.

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
HARMS	PAINT		8	0					

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W27323/4-17

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722

THE UNIVERSITY OF IOWA

FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 2/9/18

Subcontractor CORRIDOR P&W Change Order Request No _____

Project Name M.R.F. WATER DAMAGE REPAIR Project Number #0744901

Description of Work HARMS / DRYWALL FIXES 4TH & 3RD

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
HARMS	PAINT		7						

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W27323/4-17

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722

THE UNIVERSITY OF IOWA

FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 3/27/18

Subcontractor CORRIDOR PAINT & DRYWALL Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number #0744901

Description of Work JAMES Norton / PAINTING IN STAIRWELL

Mike Dahm / Delivered & set up

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
					Norton			8	Ø
					Dahm			1	Ø

Equipment and Material (attach invoices)

Quantity	Description
	SHERWIN WILLIAMS RECIEPT (PAINT & SUPPLIES)
	RECIEPT # 9458-6

Subcontractor's Representative (if applicable) James Norton

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W27323/4-17

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722

THE UNIVERSITY OF IOWA

FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 3/28/18

Subcontractor CORRIDOR PAINT & DRYWALL Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number #0744901

Description of Work PAINTING STAIRWELL

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
					Norbom			8	2
					Skerick			8	2

Equipment and Material (attach invoices)

Quantity	Description
	2 SHERWIN WILLIAMS RECIEPTS (PAINT & SUPPLIES)
	# 0429-4
	0434-4

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
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April, 2007

W27323/4-17

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 *Fax* 319-335-2722

THE UNIVERSITY OF IOWA

FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 3/29/18

Subcontractor CORRIDOR P&D Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number #0744901

Description of Work PAINTING STAIRWELL / NORTON, SKEESICK

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
					SKEESICK			8	⊘
					NORTON			8	⊘

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) [signature]

General Contractor's Representative [signature]

Owner's Representative (Required) [signature]

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W27323/4-17

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 *Fax* 319-335-2722

THE UNIVERSITY OF IOWA

FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 3/30/18

Subcontractor CORRIDOR P&D Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number #0744901

Description of Work PAINTING STAIRWELL / SKERSICK, NORTON

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
					NOLTON			8	~~0~~
					SKERSICK			8	~~0~~

Equipment and Material (attach invoices)

Quantity	Description
	SHERWIN WILLIAMS RECIEPT # 9606-0

Subcontractor's Representative (if applicable) James Norton

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W27323/4-17

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722

THE UNIVERSITY OF IOWA

FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 4/3/18

Subcontractor CORRIDOR P+W Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number #0744901

Description of Work FINISH UP STAIRWELL

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
					Norton			2	Ø

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) James Norton

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W27323/4-17

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722

THE UNIVERSITY OF IOWA

FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 4/4

Subcontractor COLLIDOR PAINT + DRYWALL Change Order Request No _____

Project Name MLF WATER DAMAGE REPAIR Project Number #0744901

Description of Work FINISH UP STAIRWELL / NOLTON

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
NOLTON			3						

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) _____

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April, 2007

W27323/4-17

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 *Fax* 319-335-2722

THE UNIVERSITY OF IOWA

Facilities Management
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 5/14/18

Subcontractor CORRIDOR P+W Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number #0744901

Description of Work finish painting doors & frams & prep

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
Shannon Ketchum	painter	21.00	8	0					

Equipment and Material (attach invoices)

Quantity	Description
men	prep first - third Floor & painted First Coat
men	Bought Tape 2 Rolls 2 Roller covers 2 Sanding blocks 1 Roller from Gabriel

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W31818/3-18

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722

THE UNIVERSITY OF IOWA

Facilities Management
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 5/15/18

Subcontractor CORRIDOR P+W Change Order Request No _____

Project Name MLF WATER DAMAGE REPAIR Project Number #0744901

Description of Work Finish painting 1st - 5th Floor elevator Doors + Frame

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
Shawn Peters	painter	21.00	4	2					

Equipment and Material (attach invoices)

Quantity	Description
Trc	Finishes painting 3, 5 and prep 3, 5 Floor

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W31818/3-18

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722

THE UNIVERSITY OF IOWA

Facilities Management
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 5/16/18

Subcontractor CORRIDOR P&D Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number #0744901

Description of Work finish paint DOORS & frms 4th - 5th

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
Shannon Nelson	painter	21.00	8	0					

Equipment and Material (attach invoices)

Quantity	Description
	prep 5th floor & finished coated 4th & unmasked 3,4

Subcontractor's Representative (if applicable) Shannon Nelson

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
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April, 2007

W31818/3-18

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722

THE UNIVERSITY OF IOWA

FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 5/17

Subcontractor CORRIDOR PAINT+DRYWALL Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number #0744901

Description of Work finish painting 4th + 5th elevator doors + frams

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
Shawn Kelchen	painter	31.00	8	4					

Equipment and Material (attach invoices)

Quantity	Description
	finished 5 elevator doors + frams + prep and unmasked and cleaned up area

Subcontractor's Representative (if applicable) Steven Kelchen

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W27323/4-17

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722

THE UNIVERSITY OF IOWA

FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 5/18/18

Subcontractor CORRIDOR P&W Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number #0744901

Description of Work FINISHED UP PAINTING ELEVATOR DOORS & FRAMES

Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.	Name	Trade	Hourly Rate	Hours Reg.	Hours O.T.
KELCHNER	painter	[illegible]	1.5 Hrs	X					

Equipment and Material (attach invoices)

Quantity	Description
	First Lower level one elevator door & frams prep Sanded, masked & Unmasked

Subcontractor's Representative (if applicable) [signature]

General Contractor's Representative [signature]

Owner's Representative (Required) [signature]

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W27323/4-17

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722

AP/PO PeopleSoft Web Applications

Payment details for voucher: 82947851

Voucher ID	Vendor ID	Remit LOC	Vendor Name	Gross Voucher Amt.	Payment Handling Code
82947851	0000515030	002	Woodruff Construction LLC	$57,892.19	AC

Payment Status	Payment Information	Invoice #	Invoice Date	Remit to	Amt From Voucher
PAID	ACH:583679 Dt: 06/25/2018 Amt: $57,892.19	0744901-005	06/14/2018	Detail	$57,892.19

New Payment Search
AP-PO Web Applications Home Page
Self-Service

(WALTERSC) Logoff

Accounts Payable / Purchasing is a department in the Finance and Operations organization.
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Please direct inquires regarding using this application to acntpay@uiowa.edu

31B Invoice - Page 1 of 15

UI Procurement Card
Issued to Kari White

Dates of Service: 2/9/18

Charges: $381.72

Purpose: Infinite Phone Bill

Participant:

Account: See Attached

Notes:

Infinite Conferencing: Date: 1/1/18 - 1/31/18

Total Invoice Amount: $381.72 Billing Code: # of Minutes: **8350.00**
net $292.73
add'l fees $88.99

260-05-0375-00400-00000000-6650-000-00000-00-0000	J	303801-434	303801	-434	492	**17.26**	**5.25**	**22.51**	0.0351
260-05-0375-00400-00000000-6650-000-00000-00-0000	J	329501-434	329501	-434	1571	**55.11**	**16.75**	**71.86**	0.0351
260-05-0375-00400-00000000-6650-000-00000-00-0000	J	329502-434	329502	-434	91	**3.19**	**0.97**	**4.16**	0.0351
260-05-0375-00400-00000000-6650-000-00000-00-0000	J	415801-434	415801	-434	197	**6.90**	**2.10**	**9.00**	0.0350
260-05-0375-00400-00000000-6650-000-00000-00-0000	J	544401-434	544401	-434	1197	**41.92**	**12.74**	**54.66**	0.0350
260-05-0375-00400-00000000-6650-000-00000-00-0000	J	633501-434	633501	-434	168	**5.90**	**1.79**	**7.69**	0.0351
260-05-0375-00400-00000000-6650-000-00000-00-0000	J	634801-434	634801	-434	190	**6.65**	**2.02**	**8.67**	0.0350
260-05-0375-00400-00000000-6650-000-00000-00-0000	J	647201-434	647201	-434	1007	**35.31**	**10.73**	**46.04**	0.0351
260-05-0375-00400-00000000-6650-000-00000-00-0000	J	657201-434	657201	-434	581	**20.36**	**6.19**	**26.55**	0.0350
260-05-0375-00400-00000000-6650-000-00000-00-0000	J	678301-434	678301	-434	224	**7.86**	**2.39**	**10.25**	0.0351
260-05-0375-00400-00000000-6650-000-00000-00-0000	J	691701-434	691701	-434	153	**5.36**	**1.63**	**6.99**	0.0350
260-05-0375-00400-00000000-6650-000-00000-00-0000	J	691801-434	691801	-434	393	**13.77**	**4.19**	**17.96**	0.0350
260-05-0375-00400-00000000-6650-000-00000-00-0000	J	698301-434	698301	-434	171	**5.99**	**1.82**	**7.81**	0.0350
260-05-0375-00400-00000000-6650-000-00000-00-0000	J	739501-434	739501	-434	431	**15.12**	**4.60**	**19.72**	0.0351
260-05-0375-00400-00000000-6650-000-00000-00-0000	J	744101-434	744101	-434	229	**8.04**	**2.44**	**10.48**	0.0351
260-05-0375-00400-00000000-6650-000-00000-00-0000	J	744901-434	744901	-434	580	**20.33**	**6.18**	**26.51**	0.0351
260-05-0375-00400-00000000-6650-000-00000-00-0000	J	586901-434	586901	-434	4	**0.14**	**0.04**	**0.18**	0.0350
260-05-0375-00400-00000000-6650-000-00000-00-0000	J	-434		-434		**0.00**	**0.00**	**0.00**	######
260-05-0375-00400-00000000-6650-000-00000-00-0000	J	-434		-434		**0.00**	**0.00**	**0.00**	######
260-05-0375-00400-00000000-6650-000-00000-00-0000	J	-434		-434		**0.00**	**0.00**	**0.00**	######
260-05-0375-00400-00000000-6650-000-00000-00-0000	J	-434		-434		**0.00**	**0.00**	**0.00**	######
260-05-0375-00400-00000000-6650-000-00000-00-0000	J	-434		-434		**0.00**	**0.00**	**0.00**	######
260-05-0375-00400-00000000-6650-000-00000-00-0000	J	-434		-434		**0.00**	**0.00**	**0.00**	######
260-05-0375-00400-00000000-6650-000-00000-00-0000	J	-434		-434		**0.00**	**0.00**	**0.00**	######
260-05-0375-00400-00000000-6650-000-00000-00-0000	J	'-434		'-434		**0.00**	**0.00**	**0.00**	#DIV/0!
260-05-0375-00250-00000000-6275-000-66001-00-0000			Sawyer - ITS		671	**23.52**	**7.15**	**30.67**	
260-05-0375-00250-00000000-6275-000-00086-00-0000			Galante - BLS			**0.00**	**0.00**	**0.00**	

Control Numbers:	8,350.0	292.73	88.99	381.72
				381.72
				0.00

Welcome **John Rutherford**

Sign Out (/logout)

Home (/home) » Payment Summary » IC21823 – U-Iowa - Facilities Management.

Payment Summary

Payment approved, thank you.

Payment Date:	02/08/18
Account:	IC21823 — U-Iowa - Facilities Management.
Credit Card:	Visa — XXXX-XXXX-XXXX-8507
Amount:	$381.72
Description:	Infinite Conferencing One-Time Payment
Tracking Number:	InfinitePayment-1e7cd2c

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Infinite Conferencing Partners, LLC
PO Box 836
Short Hills, NJ 07078

Account Information

Account Number:	IC21823
Invoice Number:	IC21823-0118
Invoice Date:	1/31/2018
Billing Period:	1/1/2018 - 1/31/2018
Terms:	Net 30
Total Due:	$381.72

John Rutherford
U-Iowa - Facilities Management.
230 USB
Iowa City, IA 52242

Account Summary

Amount of Last Bill:	$197.13
Payments:	($197.13)
Adjustments:	$0.00
Balance Forward:	**$0.00**

Summary of Current Charges

Usage:	$292.73
Taxes and Fees:	$88.99
Total Current:	**$381.72**

Invoice Total

Grand Total:	**$381.72**

Customer Service & Billing:
Phone: 1-888-203-7900
Email: . . . . . accounting@infiniteconferencing.com
Visit Us: . . . . . http://www.infiniteconferencing.com/billing

Please detach and return bottom portion with your payment

Remittance Section

Account Number:	**IC21823**
Invoice Number:	IC21823-0118
Invoice Date:	1/31/2018
Payment Due Date:	2/28/2018
Amount Due:	$381.72
Amount Enclosed:	$_____

Infinite Conferencing Partners, LLC

John Rutherford
U-Iowa - Facilities Management.
230 USB
Iowa City, IA 52242

Make Payable To:
Infinite Conferencing
PO Box 836
Short Hills, NJ 07078

Page Number: 1

Infinite Conferencing Partners, LLC

Account Information

Account Number:	1
Invoice Number:	1-0610
Invoice Date:	6/30/2010
Billing Period:	6/1/2010 - 6/30/2010
Terms:	Net 30, 1.5% per month thereafter
Total Due:	$27.00

3 Important Messages

1 Account Summary

Amount of Last Bill:	$0.00
Payments:	$0.00
Adjustments:	$0.00
Balance Forward:	**$0.00**

2 Summary of Current Charges

Miscellaneous Charges:	$25.00
Usage:	$0.00
Taxes and Fees:	$2.00
Total Current:	**$27.00**

Invoice Total

Grand Total:	**$27.00**

SAMPLE

Customer Service & Billing:
Phone:
Email:
Visit Us:

Please detach and return bottom portion with your payment

4 Remittance Section

Account Number:	1
Invoice Number:	1-0610
Invoice Date:	6/30/2010
Payment Due Date:	07/30/2010
Amount Due:	$27.00
Amount Enclosed:	$_____

How to read your invoice

1. ACCOUNT INFORMATION
Information about your billing statement date, billing period and your account number are covered in this section.

2. SUMMARY OF CHARGES
An overview of your account starting with the Amount of Last Bill, Payments and Adjustments applied since your last billing, a Summary of Current Charges including Finance Charges and Taxes and Fees resulting in a Grand Total. Your current month's activity is a combination of Usage and Miscellaneous Charges, Finance Charges plus Taxes and Fees.

3. CUSTOMER MESSAGE
Watch this area for important Customer Messages.

4. REMITTANCE SECTION
The Remittance portion should be removed and included with your payment. Write in the amount enclosed in the space provided and indicate any address changes on the back of this coupon.

Payment Information

Infinite Conferencing provides the opportunity for you to conveniently pay your bills. Payment can be submitted via the telephone by contacting Customer Service at:

1-888-203-7900

Payments can also be submitted online by visiting:

http://www.infiniteconferencing.com/billing

Address or Phone Number Changed?

Contact Name

New Mailing Address

City

State and ZipCode

New Contact Phone

E-mail Address

Infinite Conferencing

Transactions Report

Date	Description	Amount
1/22/2018	Payment Received, Thank you.	-197.13
	Total:	($197.13)

Taxes and Fees Summary Report

Level	Description	Amount
Federal	Fed Universal Service Fund	57.08
	Administration and Recovery Fee	31.91
	Total Taxes and Fees:	$88.99

Conference Calling Summary

	Calls	Minutes	Cost
Conference Calling			
Reservationless			
	65	8350.0	292.73
	Reservationless Sub Total:		$292.73
Conference Calling Sub Total:			$292.73
	Summary Total:		$292.73

Account Information

U-Iowa - Facilities Management.

Account Number:	IC21823
Invoice Number:	IC21823-0118
Invoice Date:	1/31/2018
Billing Period:	1/1/2018 - 1/31/2018
Terms:	Net 30
Total Due:	$381.72

0586901 4 .14
IT 671 23.52

Conference Billing Code Summary Report

BillingCode	Minutes	Amount
0303801	492.0	17.26
0329501	1571 ~~1546.0~~	55.11 ~~54.21~~
0329502	91.0	3.19
0415801	197.0	6.90
0544401	1197.0	41.92
0633501**	168.0	5.90
0634801	190.0	6.65
0647201	1007 ~~984.0~~	35.31 ~~34.49~~
0657201	581.0	20.36
0678301	224 ~~208.0~~	7.86 ~~7.29~~
0691701	153.0	5.36
0691801	393.0	13.77
0698301	171.0	5.99
0739501	431.0	15.12
0744101	229.0	8.04
07904101 0744901	580.0	20.33
ConfCalling BillingCode Summary Total:	7611.0	$266.78

Conference Summary Report

Date	Time	Type	Billing Code	Lines Used	Minutes	Amount
RoomID: MR1134701				Owner/User: Kirsta Scranton		
			0329501			
01/04/18	09:25 EST	ConfCall - Reservationless		1	3.0	0.11
01/04/18	09:28 EST	ConfCall - Reservationless		2	8.0	0.28
01/04/18	10:55 EST	ConfCall - Reservationless	0329501	7	402.0	14.09
01/04/18	09:32 EST	ConfCall - Reservationless		1	1.0	0.04
01/04/18	09:59 EST	ConfCall - Reservationless		1	1.0	0.04
01/04/18	12:10 EST	ConfCall - Reservationless		1	10.0	0.35
01/04/18	14:07 EST	ConfCall - Reservationless		1	1.0	0.04
01/08/18	15:29 EST	ConfCall - Reservationless	0329502	2	52.0	1.82
01/08/18	14:27 EST	ConfCall - Reservationless	0329501	5	178.0	6.24
01/10/18	15:58 EST	ConfCall - Reservationless	0329501	3	84.0	2.95
01/17/18	09:21 EST	ConfCall - Reservationless	0329501	6	375.0	13.15
01/17/18	10:37 EST	ConfCall - Reservationless		1	1.0	0.04
01/22/18	14:28 EST	ConfCall - Reservationless	0329501	5	222.0	7.78
01/29/18	14:25 EST	ConfCall - Reservationless	0329501	4	106.0	3.73
01/29/18	15:27 EST	ConfCall - Reservationless	0329501	6	179.0	6.27
ConfCalling Sub Total:					1623.0	$56.93
RoomID: MR2541293				Owner/User: Todd McNall		

Infinite Conferencing

31B Invoice - Page 8 of 15

Account Information

U-Iowa - Facilities Management.

Account Number:	IC21823
Invoice Number:	IC21823-0118
Invoice Date:	1/31/2018
Billing Period:	1/1/2018 - 1/31/2018
Terms:	Net 30
Total Due:	$381.72

Conference Summary Report

Date	Time	Type	Billing Code	Lines Used	Minutes	Amount
01/08/18	10:01 EST	ConfCall - Reservationless	0633501**	4	168.0	5.90
01/08/18	15:31 EST	ConfCall - Reservationless	0586901	1	4.0	0.14
01/31/18	11:40 EST	ConfCall - Reservationless	0691701	4	153.0	5.36
ConfCalling Sub Total:					325.0	$11.40
RoomID: MR2559960			Owner/User: Suzanne Burnham			
01/03/18	14:29 EST	ConfCall - Reservationless	0544401	3	169.0	5.92
01/04/18	10:58 EST	ConfCall - Reservationless	0415801	4	197.0	6.90
01/04/18	13:58 EST	ConfCall - Reservationless	0634801	3	96.0	3.36
01/17/18	14:29 EST	ConfCall - Reservationless	0544401	3	328.0	11.49
01/18/18	13:59 EST	ConfCall - Reservationless	0634801	3	94.0	3.29
01/24/18	10:29 EST	ConfCall - Reservationless	0544401	4	322.0	11.28
01/31/18	14:25 EST	ConfCall - Reservationless	0544401	2	378.0	13.23
ConfCalling Sub Total:					1584.0	$55.47
RoomID: MR2743996			Owner/User: Adam Cannon			
01/03/18	10:58 EST	ConfCall - Reservationless	0691801	3	100.0	3.51
01/03/18	11:58 EST	ConfCall - Reservationless	0744101	5	162.0	5.69
01/03/18	15:30 EST	ConfCall - Reservationless	0744101	3	67.0	2.35
01/16/18	11:46 EST	ConfCall - Reservationless	0691801	2	293.0	10.26
01/19/18	09:23 EST	ConfCall - Reservationless	0698301	3	171.0	5.99
ConfCalling Sub Total:					793.0	$27.80
RoomID: MR3194489			Owner/User: Jan Harvey			
01/04/18	16:27 EST	ConfCall - Reservationless	0657201	2	76.0	2.66
01/04/18	14:56 EST	ConfCall - Reservationless	0657201	3	110.0	3.86
01/05/18	10:58 EST	ConfCall - Reservationless	0657201	2	72.0	2.52
01/05/18	11:57 EST	ConfCall - Reservationless	0657201	3	113.0	3.96
01/11/18	12:00 EST	ConfCall - Reservationless	0657201	2	210.0	7.36
ConfCalling Sub Total:					581.0	$20.36
RoomID: MR7478167			Owner/User: Ulowa'John Rutherford			
01/25/18	15:10 EST	ConfCall - Reservationless		1	4.0	0.14
01/25/18	15:56 EST	ConfCall - Reservationless	0678301	5	208.0	7.29
01/25/18	14:59 EST	ConfCall - Reservationless		2	12.0	0.43
ConfCalling Sub Total:					224.0	$7.86
RoomID: MR8374701			Owner/User: Eric Evenson			
01/10/18	09:14 EST	ConfCall - Reservationless	07904101	2	116.0	4.06
01/10/18	16:56 EST	ConfCall - Reservationless	07904101	2	90.0	3.16
01/11/18	09:10 EST	ConfCall - Reservationless	07904101	1	39.0	1.37
01/11/18	15:28 EST	ConfCall - Reservationless	07904101	2	52.0	1.82
01/12/18	09:25 EST	ConfCall - Reservationless	07904101	2	65.0	2.28
01/12/18	15:28 EST	ConfCall - Reservationless	07904101	1	52.0	1.82
01/16/18	11:01 EST	ConfCall - Reservationless	07904101	2	88.0	3.08
01/17/18	09:13 EST	ConfCall - Reservationless	07904101	2	46.0	1.61
01/18/18	09:00 EST	ConfCall - Reservationless	07904101	2	32.0	1.13
ConfCalling Sub Total:					580.0	$20.33
RoomID: MR8783929			Owner/User: Jennifer Hoffman			
01/16/18	09:58 EST	ConfCall - Reservationless	0329502	3	39.0	1.37

Infinite Conferencing

31B Invoice - Page 9 of 15

Account Information

U-Iowa - Facilities Management.

Account Number:	IC21823
Invoice Number:	IC21823-0118
Invoice Date:	1/31/2018
Billing Period:	1/1/2018 - 1/31/2018
Terms:	Net 30
Total Due:	$381.72

Conference Summary Report

Date	Time	Type	Billing Code	Lines Used	Minutes	Amount
ConfCalling Sub Total:					39.0	$1.37
RoomID: MR8890320				Owner/User: Stephen Sawyer		
01/11/18	14:58 EST	ConfCall - Reservationless		5	292.0	10.24
01/24/18	09:13 EST	ConfCall - Reservationless		3	55.0	1.93
01/29/18	14:00 EST	ConfCall - Reservationless		1	1.0	0.04
01/29/18	14:28 EST	ConfCall - Reservationless		4	323.0	11.31
ConfCalling Sub Total:					671.0	$23.52
RoomID: MR9187773				Owner/User: Robert Young		
01/05/18	13:58 EST	ConfCall - Reservationless	0303801	5	227.0	7.97
01/25/18	15:13 EST	ConfCall - Reservationless	0303801	6	265.0	9.29
ConfCalling Sub Total:					492.0	$17.26
RoomID: MR9882934				Owner/User: Ed Scherrer		
01/03/18	08:59 EST	ConfCall - Reservationless	0647201	3	175.0	6.13
01/10/18	08:57 EST	ConfCall - Reservationless	0647201	3	158.0	5.54
01/11/18	14:27 EST	ConfCall - Reservationless	0647201	6	194.0	6.80
01/11/18	14:01 EST	ConfCall - Reservationless		1	15.0	0.53
01/17/18	09:01 EST	ConfCall - Reservationless		1	7.0	0.25
01/18/18	15:28 EST	ConfCall - Reservationless		1	1.0	0.04
01/19/18	15:21 EST	ConfCall - Reservationless	0739501	5	181.0	6.34
01/19/18	13:51 EST	ConfCall - Reservationless	0739501	3	98.0	3.44
01/19/18	14:41 EST	ConfCall - Reservationless	0739501	5	152.0	5.34
01/24/18	08:53 EST	ConfCall - Reservationless	0647201	3	291.0	10.19
01/31/18	08:58 EST	ConfCall - Reservationless	0647201	6	166.0	5.83
ConfCalling Sub Total:					1438.0	$50.43
ConfCalling Summary Total:					8350.0	$292.73

Conference Detail Report

Date	Time	Type	Caller	Participant Type	BillingCode	Minutes	Amount
RoomID: MR1134701				Owner/User: Kirsta Scranton			
01/04/18	09:25 EST	Res'less TollFree Dial-in	5153347920	PARTICIPANT		3.0	0.11
01/04/18	09:28 EST	(m)Res'less TollFree Dial-in	8607948069	PARTICIPANT		4.0	0.14
01/04/18	09:28 EST	Res'less TollFree Dial-in	5153347920	PARTICIPANT		4.0	0.14
		Conference Sub Total:				8.0	$0.28
01/04/18	10:55 EST	(m)Res'less TollFree Dial-in	3194009022	CHAIR	0329501	72.0	2.52
01/04/18	10:57 EST	Res'less TollFree Dial-in	5153347920	PARTICIPANT	0329501	70.0	2.45
01/04/18	10:58 EST	(m)Res'less TollFree Dial-in	8607948069	PARTICIPANT	0329501	65.0	2.28
01/04/18	10:59 EST	Res'less TollFree Dial-in	3097880673	PARTICIPANT	0329501	63.0	2.21
01/04/18	11:00 EST	Res'less TollFree Dial-in	3193543040	PARTICIPANT	0329501	63.0	2.21
01/04/18	11:00 EST	Res'less TollFree Dial-in	3097933369	PARTICIPANT	0329501	67.0	2.35
01/04/18	12:05 EST	Res'less TollFree Dial-in	5153344338	PARTICIPANT	0329501	2.0	0.07
		Conference Sub Total:				402.0	$14.09
01/04/18	09:32 EST	Res'less TollFree Dial-in	5153347920	PARTICIPANT		1.0	0.04
01/04/18	09:59 EST	(m)Res'less TollFree Dial-in	8607948069	PARTICIPANT		1.0	0.04
01/04/18	12:10 EST	Res'less TollFree Dial-in	3097933369	PARTICIPANT		10.0	0.35
01/04/18	14:07 EST	Res'less TollFree Dial-in	5153347920	PARTICIPANT		1.0	0.04

Infinite Conferencing

31B Invoice - Page 10 of 15

Account Information

U-Iowa - Facilities Management.

Account Number:	IC21823
Invoice Number:	IC21823-0118
Invoice Date:	1/31/2018
Billing Period:	1/1/2018 - 1/31/2018
Terms:	Net 30
Total Due:	$381.72

Conference Detail Report

Date	Time	Type	Caller	Participant Type	BillingCode	Minutes	Amount
01/08/18	15:29 EST	Res'less TollFree Dial-in	3193358678	PARTICIPANT	0329502	26.0	0.91
01/08/18	15:30 EST	Res'less TollFree Dial-in	3193840817	CHAIR	0329502	26.0	0.91
		Conference Sub Total:				52.0	$1.82
01/08/18	14:27 EST	Res'less TollFree Dial-in	3197302951	PARTICIPANT	0329501	39.0	1.37
01/08/18	14:29 EST	Res'less TollFree Dial-in	3198482250	PARTICIPANT	0329501	38.0	1.33
01/08/18	14:29 EST	Res'less TollFree Dial-in	8606591010	PARTICIPANT	0329501	37.0	1.30
01/08/18	14:30 EST	Res'less TollFree Dial-in	3193840821	CHAIR	0329501	36.0	1.26
01/08/18	14:38 EST	Res'less TollFree Dial-in	5153347920	PARTICIPANT	0329501	28.0	0.98
		Conference Sub Total:				178.0	$6.24
01/10/18	15:58 EST	Res'less TollFree Dial-in	3197302951	PARTICIPANT	0329501	29.0	1.02
01/10/18	15:58 EST	Res'less TollFree Dial-in	3193840817	CHAIR	0329501	28.0	0.98
01/10/18	15:59 EST	Res'less TollFree Dial-in	3193939100	PARTICIPANT	0329501	27.0	0.95
		Conference Sub Total:				84.0	$2.95
01/17/18	09:21 EST	Res'less TollFree Dial-in	3097933369	PARTICIPANT	0329501	70.0	2.45
01/17/18	09:28 EST	Res'less TollFree Dial-in	3097880673	PARTICIPANT	0329501	63.0	2.21
01/17/18	09:28 EST	Res'less TollFree Dial-in	3194671163	PARTICIPANT	0329501	63.0	2.21
01/17/18	09:30 EST	Res'less TollFree Dial-in	3193543040	PARTICIPANT	0329501	61.0	2.14
01/17/18	09:31 EST	(m)Res'less TollFree Dial-in	3194009022	CHAIR	0329501	59.0	2.07
01/17/18	09:32 EST	Res'less TollFree Dial-in	8606591010	PARTICIPANT	0329501	59.0	2.07
		Conference Sub Total:				375.0	$13.15
01/17/18	10:37 EST	Res'less TollFree Dial-in	5153344313	PARTICIPANT		1.0	0.04
01/22/18	14:28 EST	Res'less TollFree Dial-in	5153347920	PARTICIPANT	0329501	45.0	1.58
01/22/18	14:28 EST	Res'less TollFree Dial-in	3197302951	PARTICIPANT	0329501	45.0	1.58
01/22/18	14:29 EST	Res'less TollFree Dial-in	3198482250	PARTICIPANT	0329501	44.0	1.54
01/22/18	14:29 EST	Res'less TollFree Dial-in	8606591010	PARTICIPANT	0329501	44.0	1.54
01/22/18	14:29 EST	Res'less TollFree Dial-in	3193840821	CHAIR	0329501	44.0	1.54
		Conference Sub Total:				222.0	$7.78
01/29/18	14:25 EST	Res'less TollFree Dial-in	3193840821	CHAIR	0329501	29.0	1.02
01/29/18	14:25 EST	Res'less TollFree Dial-in	5153347920	PARTICIPANT	0329501	29.0	1.02
01/29/18	14:29 EST	Res'less TollFree Dial-in	3197302951	PARTICIPANT	0329501	25.0	0.88
01/29/18	14:31 EST	Res'less TollFree Dial-in	3198482250	PARTICIPANT	0329501	23.0	0.81
		Conference Sub Total:				106.0	$3.73
01/29/18	15:27 EST	Res'less TollFree Dial-in	3193636018	PARTICIPANT	0329501	32.0	1.12
01/29/18	15:28 EST	(m)Res'less TollFree Dial-in	3195943532	PARTICIPANT	0329501	32.0	1.12
01/29/18	15:28 EST	Res'less TollFree Dial-in	3198482250	PARTICIPANT	0329501	28.0	0.98
01/29/18	15:29 EST	(m)Res'less TollFree Dial-in	3195338319	PARTICIPANT	0329501	27.0	0.95
01/29/18	15:29 EST	Res'less TollFree Dial-in	3193840821	CHAIR	0329501	30.0	1.05
01/29/18	15:30 EST	Res'less TollFree Dial-in	5153347920	PARTICIPANT	0329501	30.0	1.05
		Conference Sub Total:				179.0	$6.27
		Conference Calling RoomID Sub Total:				1623.0	$56.93

RoomID: MR2541293 **Owner/User: Todd McNall**

01/08/18	10:01 EST	(m)Res'less TollFree Dial-in	3193602131	CHAIR	0633501**	51.0	1.79
01/08/18	10:02 EST	Res'less TollFree Dial-in	5152442153	PARTICIPANT	0633501**	49.0	1.72
01/08/18	10:03 EST	Res'less TollFree Dial-in	7122742933	PARTICIPANT	0633501**	31.0	1.09
01/08/18	10:12 EST	Res'less TollFree Dial-in	3193843440	PARTICIPANT	0633501**	37.0	1.30
		Conference Sub Total:				168.0	$5.90
01/08/18	15:31 EST	Res'less TollFree Dial-in	5152440564	PARTICIPANT		4.0	0.14
01/31/18	11:40 EST	Res'less TollFree Dial-in	7122742933	PARTICIPANT	0691701	42.0	1.47
01/31/18	11:45 EST	Res'less TollFree Dial-in	3193843205	CHAIR	0691701	38.0	1.33
01/31/18	11:45 EST	Res'less TollFree Dial-in	3193843440	PARTICIPANT	0691701	38.0	1.33
01/31/18	11:47 EST	Res'less TollFree Dial-in	5152440319	PARTICIPANT	0691701	35.0	1.23

Infinite Conferencing

31B Invoice - Page 11 of 15

Account Information

U-Iowa - Facilities Management.

Account Number:	IC21823
Invoice Number:	IC21823-0118
Invoice Date:	1/31/2018
Billing Period:	1/1/2018 - 1/31/2018
Terms:	Net 30
Total Due:	$381.72

Conference Detail Report

Date	Time	Type	Caller	Participant Type	BillingCode	Minutes	Amount
		Conference Sub Total:				153.0	$5.36
		Conference Calling RoomID Sub Total:				325.0	$11.40
RoomID: MR2559960				**Owner/User: Suzanne Burnham**			
01/03/18	14:29 EST	Res'less TollFree Dial-in	7605981452	PARTICIPANT	0544401	58.0	2.03
01/03/18	14:31 EST	Res'less TollFree Dial-in	5152782913	PARTICIPANT	0544401	56.0	1.96
01/03/18	14:32 EST	Res'less TollFree Dial-in	3193840817	CHAIR	0544401	55.0	1.93
		Conference Sub Total:				169.0	$5.92
01/04/18	10:58 EST	Res'less TollFree Dial-in	4023305900	PARTICIPANT	0415801	4.0	0.14
01/04/18	10:59 EST	(m)Res'less TollFree Dial-in	3194886824	PARTICIPANT	0415801	69.0	2.42
01/04/18	11:02 EST	Res'less TollFree Dial-in	4023305900	PARTICIPANT	0415801	66.0	2.31
01/04/18	11:10 EST	(m)Res'less TollFree Dial-in	3195418650	CHAIR	0415801	58.0	2.03
		Conference Sub Total:				197.0	$6.90
01/04/18	13:58 EST	Res'less TollFree Dial-in	7634750010	PARTICIPANT	0634801	34.0	1.19
01/04/18	14:00 EST	(m)Res'less TollFree Dial-in	6083939743	PARTICIPANT	0634801	32.0	1.12
01/04/18	14:02 EST	Res'less TollFree Dial-in	3193840813	CHAIR	0634801	30.0	1.05
		Conference Sub Total:				96.0	$3.36
01/17/18	14:29 EST	Res'less TollFree Dial-in	3193356480	CHAIR	0544401	179.0	6.27
01/17/18	14:30 EST	Res'less TollFree Dial-in	7605981452	PARTICIPANT	0544401	92.0	3.22
01/17/18	14:34 EST	(m)Res'less TollFree Dial-in	5635432919	PARTICIPANT	0544401	57.0	2.00
		Conference Sub Total:				328.0	$11.49
01/18/18	13:59 EST	(m)Res'less TollFree Dial-in	6084344713	PARTICIPANT	0634801	32.0	1.12
01/18/18	13:59 EST	Res'less TollFree Dial-in	7634750010	PARTICIPANT	0634801	32.0	1.12
01/18/18	14:04 EST	Res'less TollFree Dial-in	3193840813	CHAIR	0634801	30.0	1.05
		Conference Sub Total:				94.0	$3.29
01/24/18	10:29 EST	Res'less TollFree Dial-in	7605981452	PARTICIPANT	0544401	85.0	2.98
01/24/18	10:31 EST	Res'less TollFree Dial-in	3193356480	CHAIR	0544401	82.0	2.87
01/24/18	10:32 EST	Res'less TollFree Dial-in	4025485123	PARTICIPANT	0544401	82.0	2.87
01/24/18	10:40 EST	Res'less TollFree Dial-in	5636900081	PARTICIPANT	0544401	73.0	2.56
		Conference Sub Total:				322.0	$11.28
01/31/18	14:25 EST	Res'less TollFree Dial-in	3193356480	CHAIR	0544401	190.0	6.65
01/31/18	14:27 EST	Res'less TollFree Dial-in	7605982238	PARTICIPANT	0544401	188.0	6.58
		Conference Sub Total:				378.0	$13.23
		Conference Calling RoomID Sub Total:				1584.0	$55.47
RoomID: MR2743996				**Owner/User: Adam Cannon**			
01/03/18	10:58 EST	Res'less TollFree Dial-in	3193840818	CHAIR	0691801	51.0	1.79
01/03/18	11:01 EST	(m)Res'less TollFree Dial-in	3193214417	PARTICIPANT	0691801	3.0	0.11
01/03/18	11:04 EST	(m)Res'less TollFree Dial-in	3193214417	PARTICIPANT	0691801	46.0	1.61
		Conference Sub Total:				100.0	$3.51
01/03/18	11:58 EST	Res'less TollFree Dial-in	3193840828	PARTICIPANT	0744101	33.0	1.16
01/03/18	11:59 EST	Res'less TollFree Dial-in	3193351286	CHAIR	0744101	33.0	1.16
01/03/18	11:59 EST	Res'less TollFree Dial-in	7634750010	PARTICIPANT	0744101	33.0	1.16
01/03/18	11:59 EST	(m)Res'less TollFree Dial-in	6083939743	PARTICIPANT	0744101	32.0	1.12
01/03/18	12:01 EST	Res'less TollFree Dial-in	6085462311	PARTICIPANT	0744101	31.0	1.09
		Conference Sub Total:				162.0	$5.69
01/03/18	15:30 EST	Res'less TollFree Dial-in	7634750010	PARTICIPANT	0744101	23.0	0.81
01/03/18	15:30 EST	Res'less TollFree Dial-in	3193351291	CHAIR	0744101	22.0	0.77
01/03/18	15:31 EST	(m)Res'less TollFree Dial-in	6084344713	PARTICIPANT	0744101	22.0	0.77
		Conference Sub Total:				67.0	$2.35
01/16/18	11:46 EST	Res'less TollFree Dial-in	3193840818	CHAIR	0691801	284.0	9.9[illegible]

Infinite Conferencing

31B Invoice - Page 12 of 15

Account Information

U-Iowa - Facilities Management.

Account Number:	IC21823
Invoice Number:	IC21823-0118
Invoice Date:	1/31/2018
Billing Period:	1/1/2018 - 1/31/2018
Terms:	Net 30
Total Due:	$381.72

Conference Detail Report

Date	Time	Type	Caller	Participant Type	BillingCode	Minutes	Amount
01/16/18	14:52 EST	Res'less TollFree Dial-in	8177314114	PARTICIPANT	0691801	9.0	0.32
		Conference Sub Total:				293.0	$10.26
01/19/18	09:23 EST	Res'less TollFree Dial-in	3193351286	CHAIR	0698301	76.0	2.66
01/19/18	09:29 EST	Res'less TollFree Dial-in	6516347345	PARTICIPANT	0698301	69.0	2.42
01/19/18	09:32 EST	(m)Res'less TollFree Dial-in	3195589299	PARTICIPANT	0698301	26.0	0.91
		Conference Sub Total:				171.0	$5.99
		Conference Calling RoomID Sub Total:				793.0	$27.80
RoomID: MR3194489				**Owner/User: Jan Harvey**			
01/04/18	16:27 EST	(m)Res'less TollFree Dial-in	6037278582	PARTICIPANT	0657201	40.0	1.40
01/04/18	16:31 EST	Res'less TollFree Dial-in	3193351286	CHAIR	0657201	36.0	1.26
		Conference Sub Total:				76.0	$2.66
01/04/18	14:56 EST	Res'less TollFree Dial-in	6517710880	PARTICIPANT	0657201	39.0	1.37
01/04/18	14:59 EST	(m)Res'less TollFree Dial-in	6122701011	PARTICIPANT	0657201	36.0	1.26
01/04/18	15:00 EST	Res'less TollFree Dial-in	3193351286	CHAIR	0657201	35.0	1.23
		Conference Sub Total:				110.0	$3.86
01/05/18	10:58 EST	(m)Res'less TollFree Dial-in	4174894996	PARTICIPANT	0657201	36.0	1.26
01/05/18	10:58 EST	Res'less TollFree Dial-in	3193840813	CHAIR	0657201	36.0	1.26
		Conference Sub Total:				72.0	$2.52
01/05/18	11:57 EST	Res'less TollFree Dial-in	7635441170	PARTICIPANT	0657201	39.0	1.37
01/05/18	11:57 EST	Res'less TollFree Dial-in	3123720555	PARTICIPANT	0657201	38.0	1.33
01/05/18	12:00 EST	Res'less TollFree Dial-in	3193840813	CHAIR	0657201	36.0	1.26
		Conference Sub Total:				113.0	$3.96
01/11/18	12:00 EST	(m)Res'less TollFree Dial-in	5157701877	PARTICIPANT	0657201	105.0	3.68
01/11/18	12:00 EST	Res'less TollFree Dial-in	3193840821	CHAIR	0657201	105.0	3.68
		Conference Sub Total:				210.0	$7.36
		Conference Calling RoomID Sub Total:				581.0	$20.36
RoomID: MR7478167				**Owner/User: Uiowa'John Rutherford**			
01/25/18	15:10 EST	Res'less TollFree Dial-in	3193358503	PARTICIPANT		4.0	0.14
01/25/18	15:56 EST	Res'less TollFree Dial-in	3193355010	PARTICIPANT	0678301	1.0	0.04
01/25/18	15:57 EST	(m)Res'less TollFree Dial-in	3193509585	PARTICIPANT	0678301	56.0	1.96
01/25/18	15:58 EST	Res'less TollFree Dial-in	3193355010	CHAIR	0678301	54.0	1.89
01/25/18	15:59 EST	Res'less TollFree Dial-in	5595158539	PARTICIPANT	0678301	53.0	1.86
01/25/18	16:08 EST	Res'less TollFree Dial-in	3198411944	PARTICIPANT	0678301	44.0	1.54
		Conference Sub Total:				208.0	$7.29
01/25/18	14:59 EST	Res'less TollFree Dial-in	3193358503	PARTICIPANT		11.0	0.39
01/25/18	15:02 EST	Res'less TollFree Dial-in	3193840821	PARTICIPANT		1.0	0.04
		Conference Sub Total:				12.0	$0.43
		Conference Calling RoomID Sub Total:				224.0	$7.86
RoomID: MR8374701				**Owner/User: Eric Evenson**			
01/10/18	09:14 EST	Res'less TollFree Dial-in	3193353601	CHAIR	07904101	60.0	2.10
01/10/18	09:18 EST	Res'less TollFree Dial-in	3193534360	PARTICIPANT	07904101	56.0	1.96
		Conference Sub Total:				116.0	$4.06
01/10/18	16:56 EST	Res'less TollFree Dial-in	3193353601	CHAIR	07904101	49.0	1.72
01/10/18	17:00 EST	(m)Res'less TollFree Dial-in	3194304401	PARTICIPANT	07904101	41.0	1.44
		Conference Sub Total:				90.0	$3.16
01/11/18	09:10 EST	Res'less TollFree Dial-in	3193353601	CHAIR	07904101	39.0	1.37

Infinite Conferencing

31B Invoice - Page 13 of 15

Account Information

U-Iowa - Facilities Management.

Account Number:	IC21823
Invoice Number:	IC21823-0118
Invoice Date:	1/31/2018
Billing Period:	1/1/2018 - 1/31/2018
Terms:	Net 30
Total Due:	$381.72

Conference Detail Report

Date	Time	Type	Caller	Participant Type	BillingCode	Minutes	Amount
01/11/18	15:28 EST	Res'less TollFree Dial-in	3193353601	CHAIR	07904101	36.0	1.26
01/11/18	15:48 EST	Res'less TollFree Dial-in	3193534360	PARTICIPANT	07904101	16.0	0.56
		Conference Sub Total:				52.0	$1.82
01/12/18	09:25 EST	Res'less TollFree Dial-in	3193353601	CHAIR	07904101	36.0	1.26
01/12/18	09:32 EST	Res'less TollFree Dial-in	3193534360	PARTICIPANT	07904101	29.0	1.02
		Conference Sub Total:				65.0	$2.28
01/12/18	15:28 EST	Res'less TollFree Dial-in	3193353601	CHAIR	07904101	52.0	1.82
01/16/18	11:01 EST	Res'less TollFree Dial-in	3193353601	CHAIR	07904101	44.0	1.54
01/16/18	11:01 EST	Res'less TollFree Dial-in	3193355357	PARTICIPANT	07904101	44.0	1.54
		Conference Sub Total:				88.0	$3.08
01/17/18	09:13 EST	Res'less TollFree Dial-in	3193353601	CHAIR	07904101	24.0	0.84
01/17/18	09:16 EST	Res'less TollFree Dial-in	3193355357	PARTICIPANT	07904101	22.0	0.77
		Conference Sub Total:				46.0	$1.61
01/18/18	09:00 EST	Res'less TollFree Dial-in	3193353601	CHAIR	07904101	17.0	0.60
01/18/18	09:01 EST	Res'less TollFree Dial-in	3193534360	PARTICIPANT	07904101	15.0	0.53
		Conference Sub Total:				32.0	$1.13
		Conference Calling RoomID Sub Total:				580.0	$20.33
RoomID: MR8783929				**Owner/User: Jennifer Hoffman**			
01/16/18	09:58 EST	Res'less TollFree Dial-in	3193358779	PARTICIPANT	0329502	21.0	0.74
01/16/18	10:00 EST	Res'less TollFree Dial-in	3193842178	PARTICIPANT	0329502	2.0	0.07
01/16/18	10:03 EST	Res'less TollFree Dial-in	3193351286	CHAIR	0329502	16.0	0.56
		Conference Sub Total:				39.0	$1.37
		Conference Calling RoomID Sub Total:				39.0	$1.37
RoomID: MR8890320				**Owner/User: Stephen Sawyer**			
01/11/18	14:58 EST	Res'less TollFree Dial-in	3193842782	PARTICIPANT		62.0	2.17
01/11/18	15:00 EST	Res'less TollFree Dial-in	3193350012	CHAIR		59.0	2.07
01/11/18	15:01 EST	Res'less TollFree Dial-in	3193356496	PARTICIPANT		59.0	2.07
01/11/18	15:02 EST	Res'less TollFree Dial-in	3193355115	PARTICIPANT		57.0	2.00
01/11/18	15:04 EST	Res'less TollFree Dial-in	3193843714	PARTICIPANT		55.0	1.93
		Conference Sub Total:				292.0	$10.24
01/24/18	09:13 EST	Res'less TollFree Dial-in	3193355078	CHAIR		19.0	0.67
01/24/18	09:14 EST	Res'less TollFree Dial-in	3193352373	PARTICIPANT		18.0	0.63
01/24/18	09:15 EST	Res'less TollFree Dial-in	3193352382	PARTICIPANT		18.0	0.63
		Conference Sub Total:				55.0	$1.93
01/29/18	14:00 EST	Res'less TollFree Dial-in	3193352373	PARTICIPANT		1.0	0.04
01/29/18	14:28 EST	Res'less TollFree Dial-in	3193351624	PARTICIPANT		20.0	0.70
01/29/18	14:30 EST	Res'less TollFree Dial-in	3193352373	PARTICIPANT		180.0	6.30
01/29/18	14:31 EST	Res'less TollFree Dial-in	3193350012	PARTICIPANT		62.0	2.17
01/29/18	14:32 EST	Res'less TollFree Dial-in	3193355642	CHAIR		61.0	2.14
		Conference Sub Total:				323.0	$11.31
		Conference Calling RoomID Sub Total:				671.0	$23.52
RoomID: MR9187773				**Owner/User: Robert Young**			
01/05/18	13:58 EST	Res'less TollFree Dial-in	5153344303	PARTICIPANT	0303801	59.0	2.07
01/05/18	13:58 EST	Res'less TollFree Dial-in	3193842173	CHAIR	0303801	59.0	2.07
01/05/18	13:59 EST	Res'less TollFree Dial-in	3097880673	PARTICIPANT	0303801	1.0	0.04
01/05/18	14:00 EST	Res'less TollFree Dial-in	3097880673	PARTICIPANT	0303801	57.0	2.00

31B Invoice - Page 14 of 15

Account Information

U-Iowa - Facilities Management.

Account Number:	IC21823
Invoice Number:	IC21823-0118
Invoice Date:	1/31/2018
Billing Period:	1/1/2018 - 1/31/2018
Terms:	Net 30
Total Due:	$381.72

Conference Detail Report

Date	Time	Type	Caller	Participant Type	BillingCode	Minutes	Amount
01/05/18	14:06 EST	(m)Res'less TollFree Dial-in	5157706343	PARTICIPANT	0303801	51.0	1.79
		Conference Sub Total:				227.0	$7.97
01/25/18	15:13 EST	Res'less TollFree Dial-in	5153344303	PARTICIPANT	0303801	70.0	2.45
01/25/18	15:14 EST	Res'less TollFree Dial-in	6124657598	PARTICIPANT	0303801	70.0	2.45
01/25/18	15:16 EST	Res'less TollFree Dial-in	5159872825	PARTICIPANT	0303801	67.0	2.35
01/25/18	15:24 EST	Res'less TollFree Dial-in	3193840817	CHAIR	0303801	5.0	0.18
01/25/18	15:30 EST	Res'less TollFree Dial-in	3193840817	CHAIR	0303801	1.0	0.04
01/25/18	15:32 EST	Res'less TollFree Dial-in	3193840817	CHAIR	0303801	52.0	1.82
		Conference Sub Total:				265.0	$9.29
		Conference Calling RoomID Sub Total:				492.0	$17.26
RoomID: MR9882934				**Owner/User: Ed Scherrer**			
01/03/18	08:59 EST	Res'less TollFree Dial-in	3193840818	CHAIR	0647201	60.0	2.10
01/03/18	09:01 EST	Res'less TollFree Dial-in	6516347313	PARTICIPANT	0647201	58.0	2.03
01/03/18	09:02 EST	Res'less TollFree Dial-in	5072894460	PARTICIPANT	0647201	57.0	2.00
		Conference Sub Total:				175.0	$6.13
01/10/18	08:57 EST	Res'less TollFree Dial-in	3193840818	CHAIR	0647201	56.0	1.96
01/10/18	08:59 EST	Res'less TollFree Dial-in	6516347313	PARTICIPANT	0647201	53.0	1.86
01/10/18	09:04 EST	Res'less TollFree Dial-in	5072894460	PARTICIPANT	0647201	49.0	1.72
		Conference Sub Total:				158.0	$5.54
01/11/18	14:27 EST	Res'less TollFree Dial-in	3193597808	PARTICIPANT	0647201	42.0	1.47
01/11/18	14:27 EST	Res'less TollFree Dial-in	3193350274	CHAIR	0647201	41.0	1.44
01/11/18	14:28 EST	Res'less TollFree Dial-in	3193597809	PARTICIPANT	0647201	41.0	1.44
01/11/18	14:29 EST	Res'less TollFree Dial-in	3193356185	PARTICIPANT	0647201	32.0	1.12
01/11/18	14:30 EST	Res'less TollFree Dial-in	3193355152	PARTICIPANT	0647201	10.0	0.35
01/11/18	14:41 EST	(m)Res'less TollFree Dial-in	3195510827	PARTICIPANT	0647201	28.0	0.98
		Conference Sub Total:				194.0	$6.80
01/11/18	14:01 EST	Res'less TollFree Dial-in	3193597809	PARTICIPANT		15.0	0.53
01/17/18	09:01 EST	Res'less TollFree Dial-in	5072894460	PARTICIPANT		7.0	0.25
01/18/18	15:28 EST	Res'less TollFree Dial-in	7342720850	PARTICIPANT		1.0	0.04
01/19/18	15:21 EST	Res'less TollFree Dial-in	3196263990	PARTICIPANT	0739501	39.0	1.37
01/19/18	15:24 EST	Res'less TollFree Dial-in	7343321200	PARTICIPANT	0739501	36.0	1.26
01/19/18	15:24 EST	Res'less TollFree Dial-in	3193840821	CHAIR	0739501	36.0	1.26
01/19/18	15:24 EST	(m)Res'less TollFree Dial-in	3199361349	PARTICIPANT	0739501	36.0	1.26
01/19/18	15:26 EST	Res'less TollFree Dial-in	6513306038	PARTICIPANT	0739501	34.0	1.19
		Conference Sub Total:				181.0	$6.34
01/19/18	13:51 EST	(m)Res'less TollFree Dial-in	6308808459	PARTICIPANT	0739501	37.0	1.30
01/19/18	13:57 EST	Res'less TollFree Dial-in	3193543040	PARTICIPANT	0739501	31.0	1.09
01/19/18	13:57 EST	Res'less TollFree Dial-in	3193840821	CHAIR	0739501	30.0	1.05
		Conference Sub Total:				98.0	$3.44
01/19/18	14:41 EST	Res'less TollFree Dial-in	3193840821	CHAIR	0739501	33.0	1.16
01/19/18	14:43 EST	(m)Res'less TollFree Dial-in	3147405491	PARTICIPANT	0739501	28.0	0.98
01/19/18	14:43 EST	(m)Res'less TollFree Dial-in	6103487439	PARTICIPANT	0739501	31.0	1.09
01/19/18	14:43 EST	(m)Res'less TollFree Dial-in	8163515885	PARTICIPANT	0739501	31.0	1.09
01/19/18	14:45 EST	Res'less TollFree Dial-in	8163339400	PARTICIPANT	0739501	29.0	1.02
		Conference Sub Total:				152.0	$5.34
01/24/18	08:53 EST	Res'less TollFree Dial-in	3193840818	CHAIR	0647201	103.0	3.61
01/24/18	09:00 EST	Res'less TollFree Dial-in	6516347313	PARTICIPANT	0647201	96.0	3.36
01/24/18	09:04 EST	Res'less TollFree Dial-in	5072894460	PARTICIPANT	0647201	92.0	3.22
		Conference Sub Total:				291.0	$10.19
01/31/18	08:58 EST	Res'less TollFree Dial-in	3193840818	CHAIR	0647201	29.0	1.02

Infinite Conferencing

31B Invoice - Page 15 of 15

Account Information

U-Iowa - Facilities Management.

Account Number:	IC21823
Invoice Number:	IC21823-0118
Invoice Date:	1/31/2018
Billing Period:	1/1/2018 - 1/31/2018
Terms:	Net 30
Total Due:	$381.72

Conference Detail Report

Date	Time	Type	Caller	Participant Type	BillingCode	Minutes	Amount
01/31/18	08:59 EST	Res'less TollFree Dial-in	3193597808	PARTICIPANT	0647201	29.0	1.02
01/31/18	08:59 EST	Res'less TollFree Dial-in	9199675558	PARTICIPANT	0647201	28.0	0.98
01/31/18	08:59 EST	Res'less TollFree Dial-in	3193350811	PARTICIPANT	0647201	28.0	0.98
01/31/18	09:00 EST	(m)Res'less TollFree Dial-in	5635540129	PARTICIPANT	0647201	27.0	0.95
01/31/18	09:02 EST	Res'less TollFree Dial-in	5072894460	PARTICIPANT	0647201	25.0	0.88
		Conference Sub Total:				166.0	$5.83
		Conference Calling RoomID Sub Total:				1438.0	$50.43
		Conference Calling Detail Summary Total:				8350.0	$292.73

The University of Iowa
Accounts Payable
202 PCO (Plaza Centre One)
Iowa City, IA 52242

31B Proof of Pay - Page 1 of 3

Procurement Card Voucher

Voucher ID: P0360260

Please print in LANDSCAPE mode

Cardholder Name: KARI WHITE
Department: VPFO-FM BUSINESS & FIN SVCS
Phone: +1 319 335 3619

Account Number: 010728
Card Billing Period: 01/30/2018 - 02/27/2018
Date Prepared: 10/30/2019

1	260-05-0375-00360-00000000-6026-000-00000-00-0000	SLID: / SLAC:		
	Descr for GL: APPA VCB Cmnts: APPA conference - Registration Refund - Gary Hintermesiter		DB AMT:	CR AMT: -1,455.00
2	260-05-0375-00360-00000000-6420-000-00000-00-0000	SLID: / SLAC:		
	Descr for GL: NCARB RENEWAL Cmnts: 2018 National Council of Architects Registration board, annual certification renewal / membership - Gary Hintermeister		DB AMT: 245.00	CR AMT:
3	260-05-0375-00400-00000000-6650-000-00000-00-0000	SLID:J / SLAC:0303801-434		
	Descr for GL: INFINITE CONFERENCING INC Cmnts: 0303801-434 Infinite Calling		DB AMT: 22.51	CR AMT:
4	260-05-0375-00400-00000000-6650-000-00000-00-0000	SLID:J / SLAC:0329501-434		
	Descr for GL: INFINITE CONFERENCING INC Cmnts: 0329501-434 Infinite Calling		DB AMT: 71.87	CR AMT:
5	260-05-0375-00400-00000000-6650-000-00000-00-0000	SLID:J / SLAC:0329502-434		
	Descr for GL: INFINITE CONFERENCING INC Cmnts: 0329502-434 Infinite Calling		DB AMT: 4.16	CR AMT:
6	260-05-0375-00400-00000000-6650-000-00000-00-0000	SLID:J / SLAC:0415801-434		
	Descr for GL: INFINITE CONFERENCING INC Cmnts: 0415801-434 Infinite Calling		DB AMT: 9.00	CR AMT:
7	260-05-0375-00400-00000000-6650-000-00000-00-0000	SLID:J / SLAC:0544401-434		
	Descr for GL: INFINITE CONFERENCING INC Cmnts: 0544401-434 Infinite Calling		DB AMT: 54.66	CR AMT:
8	260-05-0375-00400-00000000-6650-000-00000-00-0000	SLID:J / SLAC:0633501-434		
	Descr for GL: INFINITE CONFERENCING INC Cmnts: 0633501-434 Infinite Calling		DB AMT: 7.69	CR AMT:
9	260-05-0375-00400-00000000-6650-000-00000-00-0000	SLID:J / SLAC:0634801-434		
	Descr for GL: INFINITE CONFERENCING INC Cmnts: 0634801-434 Infinite Calling		DB AMT: 8.67	CR AMT:
10	260-05-0375-00400-00000000-6650-000-00000-00-0000	SLID:J / SLAC:647201-434		
	Descr for GL: INFINITE CONFERENCING INC Cmnts: 647201-434 Infinite Calling		DB AMT: 46.04	CR AMT:
11	260-05-0375-00400-00000000-6650-000-00000-00-0000	SLID:J / SLAC:0657201-434		
	Descr for GL: INFINITE CONFERENCING INC Cmnts: 0657201-434 Infinite Calling		DB AMT: 26.55	CR AMT:
12	260-05-0375-00400-00000000-6650-000-00000-00-0000	SLID:J /		

		SLAC:0678301-434		
	Descr for GL: INFINITE CONFERENCING INC Cmnts: 0678301-434 Infinite Calling		DB AMT: 10.25	CR AMT:
13	260-05-0375-00400-00000000-6650-000-00000-00-0000	SLID:J / SLAC:0691701-434		
	Descr for GL: INFINITE CONFERENCING INC Cmnts: 0691701-434 Infinite Calling		DB AMT: 6.99	CR AMT:
14	260-05-0375-00400-00000000-6650-000-00000-00-0000	SLID:J / SLAC:0691801-434		
	Descr for GL: INFINITE CONFERENCING INC Cmnts: 0691801-434 Infinite Calling		DB AMT: 17.96	CR AMT:
15	260-05-0375-00400-00000000-6650-000-00000-00-0000	SLID:J / SLAC:0698301-434		
	Descr for GL: INFINITE CONFERENCING INC Cmnts: 0698301-434 Infinite Calling		DB AMT: 7.81	CR AMT:
16	260-05-0375-00400-00000000-6650-000-00000-00-0000	SLID:J / SLAC:0739501-434		
	Descr for GL: INFINITE CONFERENCING INC Cmnts: 0739501-434 Infinite Calling		DB AMT: 19.72	CR AMT:
17	260-05-0375-00400-00000000-6650-000-00000-00-0000	SLID:J / SLAC:0744101-434		
	Descr for GL: INFINITE CONFERENCING INC Cmnts: 0744101-434 Infinite Calling		DB AMT: 10.48	CR AMT:
18	260-05-0375-00400-00000000-6650-000-00000-00-0000	SLID:J / SLAC:0744901-434		
	Descr for GL: INFINITE CONFERENCING INC Cmnts: 0744901-434 Infinite Calling		DB AMT: 26.51	CR AMT:
19	260-05-0375-00400-00000000-6650-000-00000-00-0000	SLID:J / SLAC:0586901-434		
	Descr for GL: INFINITE CONFERENCING INC Cmnts: 0586901-434 Infinite Calling		DB AMT: 0.18	CR AMT:
20	260-05-0375-00250-00000000-6275-000-66001-00-0000	SLID: / SLAC:		
	Descr for GL: INFINITE CONFERENCING INC Cmnts: Sawyer - ITS Infinite Calling		DB AMT: 30.67	CR AMT:
21	260-05-0375-00360-00000000-6080-000-00000-00-0000	SLID: / SLAC:		
	Descr for GL: BLUEBEAM INC Cmnts: Bluebeam Revu 2017 extreme{US/Canada) Annual Maintenance -Renewal SN 1227964 Maintenance is valid for one year starting from the purchase date, and is $129.00 @ 5 = $645.00 renewable annually. It includes free product upgrades and premium phone and email support. If adding Maintenance to current seats, all seats must be included. 7 Jan 2018 - 6 Jan 2019 {US/Canada)		DB AMT: 645.00	CR AMT:
22	260-05-0375-00360-00000000-6080-000-00000-00-0000	SLID: / SLAC:		
	Descr for GL: BLUEBEAM INC Cmnts: Bluebeam Revu 2017 Standard US/Canada) Annual Maintenance Renewal SN 1227965 Maintenance Is valid for one year starting from the purchase date, and is $59.00 @35 = $2,065.00 renewable annually. It Includes free product upgrades and premium phone and email support. If adding Maintenance to current seats, all seats must be included. 7 Jan 2018 - 6 Jan 2019 (US/Canada)		DB AMT: 2,065.00	CR AMT:
23	260-05-0375-00360-00000000-6137-000-00000-00-0000	SLID: / SLAC:		
	Descr for GL: SQ *HEYN'S ICE CREA Cmnts: Service Celebration for Design and Construction staff. Celebrated from time to time the commitment and teamwork of its staff 50 attending $2.00/P		DB AMT: 100.00	CR AMT:
24	260-05-0375-00250-00000000-6050-000-00086-00-0000	SLID: / SLAC:		
	Descr for GL: AMERICAN AIR0017012176827 Cmnts: Airfare - Samuel Robertson Due to the Candidate Interview date scheduled and being 14 days or less for advance purchase of air flight the cost is above $700.		DB AMT: 897.00	CR AMT:
25	260-05-0375-00250-00000000-6075-000-00086-00-0000	SLID: / SLAC:		

	Descr for GL: APPA VCB Cmnts: Book - Operational Guidelines for Educational Facilities		DB A 92.10	
26	260-05-0375-00250-00000000-6050-000-00086-00-0000	SLID: / SLAC:		
	Descr for GL: MEACHAM TRAVEL SERVICE Cmnts: Travel Agency Fee - Samuel Robertson - Interview Candidate for Building Landscape Services		DB AMT: 35.00	CR AMT:
27	260-05-0375-00250-00000000-6026-000-00086-00-0000	SLID: / SLAC:		
	Descr for GL: PURDUE CONF CVENT Cmnts: Big 10 and Friends Facilities Director Conference - Registration - Julie Sychra		DB AMT: 250.00	CR AMT:

Procurement Card Total

DEBIT TOTAL	CREDIT TOTAL
4,710.82	**-1,455.00**

STATEMENT TOTAL

3,255.82

Pigott, Inc.
3815 Ingersoll Avenue
Des Moines, IA 50312
Phone: 515-279-8879
Fax: 515-279-7338
www.pigottnet.com
Federal Id: 42-0813711

Invoice

Invoice Date:
Date Due: 04/11/2018
Invoice Number: 105342
Apply To: 105342
Project: 30388
Order: 30388.008

Sold To: 1702-00
UNIVERSITY OF IOWA
ACCOUNTS PAYABLE/TRAVEL
202 PLAZA CENTRE ONE
IOWA CITY, IA 52242

Bill To: 1702-00
UNIVERSITY OF IOWA
ACCOUNTS PAYABLE/TRAVEL
202 PLAZA CENTRE ONE
IOWA CITY, IA 52242
Attention: ACCOUNTS PAYABLE

Ship To/Install Loc: 1702-118
UNIVERSITY OF IOWA
55 S GRAND AVE
IOWA CITY, IA 52242
Attention: ACCOUNTS PAYABLE

Date Shipped	Customer PO	Shipped Via	FOB	Terms	Sales Person
03/08/2018	1001902229	Best Way	DEST	NET 30	BRETT HULME

Project: 30388 **Order: 30388.008** **Customer PO: 1001902229**

Line No	Loc	Item Number	Description	Invoice Qty	Unit Price	Extended
1	118	INSTALL	INSTALLATION SERVICES TO REPLACE DAMAGED TACKBOARDS AND POWER ONLY.	1	246.42	246.42
2	118	A1322.06E	BASE PWR ENTRY,DIR CON 4-CIRC,6FT L	1	48.16	48.16
3	118	A8355.42E	BASE PWR ADAPTER,THIN BASE NO SIDE COVERS 4-CIRC 42W	2	50.40	100.80
4	118	K1311.A	15 AMP RECEPTACLE 4 CIRCUIT, DUPLEX, CIRCUIT A 6/PKG WN-WARM GREY NEUTRAL	1	50.00	50.00
5	118	A3410.2042	TACKBOARD,B-STYLE 20H 42W 8R05-TWIST WICKER	2	73.08	146.16

Install Subtotal	246.42
Product Subtotal	345.12
Subtotal	591.54

Remit To:
PIGOTT, INC.
ATTN: ACCOUNTS RECEIVABLE
3815 INGERSOLL AVE
DES MOINES IA 50312

Please Pay This Amount - USD - - - 591.54

AP/PO PeopleSoft Web Applications

Payment details for voucher: 82875768

Voucher ID	Vendor ID	Remit LOC	Vendor Name	Gross Voucher Amt.	Payment Handling Code
82875768	0000119315	002	Pigott Inc	$591.54	AC

Payment Status	Payment Information	Invoice #	Invoice Date	Remit to	Amt From Voucher
PAID	ACH:567214 Dt: 04/11/2018 Amt: $3,094.15	105342	03/12/2018	Detail	$591.54

New Payment Search
AP-PO Web Applications Home Page
Self-Service

(WALTERSC) Logoff

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Service Desk Order - Total Charges with BOM

33B Invoice - Page 1 of 1

Action #	Status	SDC	Service ID	Service Catalog	Description
1	Billed	Fiber Work - Labor & Materi		Fiber Work - Labor & Materia	Fiber Work - Labor & Materials

Default	660.05.0308.00000.65003740.6270.000.00000.00.0182
Usage	660.05.0308.00000.65003740.6275.000.00000.00.0182
One-Time	660.05.0308.00000.65003740.6275.000.00000.00.0182

EQUIPMENT

BOM Item Nbr	Description	BOM Serial Nbr	Bin	Picked Up By	Quantity	Amount	Cost	Billable	Charge
347928	CORNING-C 95-200-41-Z SC 8.3/125 SM UPC UNICAM CONN PRETIUM CERAMIC FERRULE ORGANIZER PACK 25/PK			toyne	1	365.45	365.45	Y	365.45
370-COR8.3-TBAIRL-06	CORNING 006E88-31131-A3 6-F 8.3/125 OS2 TB PLEN MIC 0.65/0.65/0.50 DB/KM INTERLOCKING ARMOR			toyne	500	1.10	550.00	Y	550.00
CCH-CP06-59	CCH Panel w/3 568SC Duplex SC			toyne	1	38.00	38.00	Y	38.00
CLEARFIELD# 6PAK-SC	CLEARFIELD XPAK 6 PORT SC/UPC			toyne	1	86.25	86.25	Y	86.25
DSMSC-ST-3MUI	ZERO CONNECT DUPLEX SINGLE MODE SC-ST 3 METER BLUE BOOT			toyne	1	27.72	27.72	Y	27.72
QUIKTRON 820-331-000	1ft Loop-Back SM Jumper			toyne	1	14.95	14.95	Y	14.95
									1,082.37

Materials	1,082.37

33B Proof of Pay - Page 1 of 2

University of Iowa
Transaction Detail Report
Accounting Period 12, Fiscal Year 2018
JUNE 2018
Report ID: 4368740

TDR User Manual | SA3 Report | Balance Sheet | Back to Search Form | Download in Excel Format | Subscribe | WhoKey Admin

Quick Jump acctg prd 12, FY 2018 / JUNE 2018 Change

Fund: 660 Casualty Losses
Org: 05 VP Finance and Operations
Dept: 0308 Risk Management Office
Sdept: 00000 Risk Management Office

Grant: 65003740 MRF Water Incident 1/1/18
Function: 00 Not Assigned
BRF:

WhoKey: 660-05-0308-00000-65003740-00-
WhoKey Descr: MRF Water Incident 1/1/18
WhoKey Status: Open
Owner/PI: JOSEY BATHKE (BATHKE)
Reviewer: CAMILLE WALTERS (WALTERSC)
Secondary Reviewers: YOKO TSOI (TSOI)
WhoKey Purpose:

This report has been marked as reconciled.
BATHKE @ 07/03/2018 13:18:12

Reconciliation buttons are located at the bottom of the report.

6275	000	00000	0182	ITSCHARGES (?)	$1,082.37	06/30/2018

INFRASTRUCTURE MATERIALS
No Comments.

WebCV

Entry Detail

JRNL ID	DESCRIPTION	EFF DT
ITSCHARGES	INFRASTRUCTURE MATERIALS	06/30/2018

D/C	FND	ORG	DPT	SDPT	GRANT/PRGM	IACT	OACT	DACT	FN	CCTR	BRF	SLID/SLAC	AMT
DEBIT	660	05	0308	00000	65003740	6275	000	00000	00	0182		/	$1082.37

PO	VOUCHER	CHECK NBR	UNIVID
none	none	none	none

General Ledger Master File Key Validation - Enter MFK

Please enter the MFK that you wish to validate in the form below, and press "Submit". You can also (optionally) provide a specific date to check the MFK against.

* All chartfields are required, including all zeros.

Fund	Org	Dept	Sdept	Grant/Program	Iacct	Oacct	Dacct	Fn	Cctr
660	05	0308	00000	65003740	6275	000	00000	00	0182

Submit Reset

Date (optional): (mm/dd/yyyy)

Result: **Valid** - Valid MFK

Chartfield Descriptions:

Fund:	Casualty Losses
Org:	VP Finance and Operations
Dept/Sdept:	Risk Management Office
Grant/Program:	MRF Water Incident 1/1/18
Iacct:	Telecommunication Variable Chg
Fn:	Not Assigned
Cctr:	Med Research Fac Metabolic Lab

USA Scientific
P.O. Box 3565
Ocala, FL 34478, U.S.A
TEL 1-800-LAB-TIPS FAX 352-351-2057
Int'l: 352-237-6288

Bill to account # 9490701000
Bill to address
UNIVERSITY OF IOWA
ACCOUNTS PAYABLE
202 PLAZA CENTRE ONE (PCO)
IOWA CITY IA 52242

Ship to account # 9490701002
Ship to address
UNIV IA/DONNA SANTILLAN
MRF 463/PO 1001905310
OB-GYN LAB
200 HAWKINS DR.
IOWA CITY IA 52242

GROUP 227454
82854841

INVOICE

Invoice No. / Date
4801268364 / 02/09/2018
Order No. / Date
3389570 / 02/07/2018
Your Ref. No. / Date
1001905310 / 02/07/2018
Delivery Note No. / Date
800008954 / 02/07/2018
Sales Rep and Name
480013 - NICK GRILLO

Terms of payment
Within 30 days Due net
Terms of delivery
FH Ocala Shipping Point
Shipping condition
PPD ground
Forwarder & BOL / Tracking number
UNITED PARCEL SERVICE
1ZW1065A0306049339

F.E.I. # 59-224457-9
D-U-N-S # 10-6947237

Currency: USD

Item	Material / Description	Quantity	Price	Price Unit	Amount
000010	7300-0125 TRADE IN*ERGO ONE 0.1-2.5UL SINGLE CHANN	1 UNT	194.88	1 UNT	194.88
	TRADE IN*ERGO ONE 0.1-2.5UL SINGLE CHANNEL ADJUSTABLE VOLUME PIPET				
000020	7300-0221 TRADE IN* ERGO ONE 2-20 UL MICRO SINGLE	1 UNT	194.88	1 UNT	194.88
	TRADE IN* ERGO ONE 2-20UL MICRO SINGLE CHANNEL ADJUSTABLE VOLUME PIPET				
000030	7300-0510 TRADE IN*ERGO ONE .5-10 UL SINGLE CHANNE	1 UNT	194.88	1 UNT	194.88
	TRADE IN*ERGO ONE 0.5-10 UL SINGLE CHANNEL ADJUSTABLE VOLUME PIPET				

Remittance by Check:
USA Scientific
Accounts Receivable
P.O. Box 30000
Orlando, FL 32891-8210
Please return remittance copy with payment.

Remittance by ACH/EFT:
Suntrust Bank of North Central Florida
P.O. Box 310
Ocala, FL 34478
Acct. #:0072000163023
ABA#: 061-000-104

USA Scientific
P.O. Box 3565
Ocala, FL 34478, U.S.A
TEL 1-800-LAB-TIPS FAX 352-351-2057
Int'l: 352-237-6288

4801268364 / 02/09/2018

Item	Material Quantity	Description Price	Price Unit	Amount
000040	7300-2200	TRADE IN*ERGO ONE 20-200 UL SINGLE CHANN		
	3 UNT	194.88	1 UNT	584.64
	TRADE IN* ERGO ONE 20-200UL SINGLE CHANNEL ADJUSTABLE VOLUME PIPET			
000050	7310-1000	TRADE IN*ERGO ONE 100-1000UL SINGLE CHAN		
	3 UNT	194.88	1 UNT	584.64
	TRADE IN*ERGO ONE 100-1000 UL SINGLE CHANNEL ADJUSTABLE VOLUME PIPET			

Items Total	1,753.92
Total	1,753.92

AP/PO PeopleSoft Web Applications

Payment details for voucher: 82854841

Voucher ID	Vendor ID	Remit LOC	Vendor Name	Gross Voucher Amt.	Payment Handling Code
82854841	0000124033	002	USA Scientific Plastics	$1,753.92	AC

Payment Status	Payment Information	Invoice #	Invoice Date	Remit to	Amt From Voucher
PAID	ACH:560673 Dt: 03/09/2018 Amt: $2,744.10	4801268364	02/09/2018	Detail	$1,753.92

New Payment Search
AP-PO Web Applications Home Page
Self-Service

(WALTERSC) Logoff

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PLEASE REMIT TO:
ENV SERVICES, INC.
c/o MUNICIPAL AUTHORITY OF SOUTH HEIDELBERG
P.O. BOX 37836
BALTIMORE, MD 21297-7836

INVOICE

dba ENV Services Testing & Certification, Inc.
2880 Bergey Road, Suite K, Hatfield, PA 19440-1764
FEIN #23-3006268 1-800-345-6094

INVOICE NO.	PAGE
375656	1

INVOICE DATE
04/30/18

CUSTOMER NUMBER
IA0066-001

DUNS 02-1240171

WE ACCEPT
VISA
MASTERCARD
AMERICAN EXPRESS

BILL TO
UNIVERSITY OF IOWA
ATTN: ACCOUNTS PAYABLE

acntpay@uiowa.edu
IOWA CITY, IA 52242

WORK SITE
UNIVERSITY OF IOWA
100 GRAND AVENUE

IOWA CITY, IA 52242

ISO 17025 Accredited!
For Controlled Environment Testing & Calibration

PURCHASE ORDER NUMBER	TECH#	WORK DATE(S)		JOB #
1001896085	326	02/14/18	02/16/18	6004-162768

QUANTITY	DESCRIPTION	U/M	UNIT PRICE	AMOUNT
	Per Quote: 6004-162768-2			

4.00	Decontamination-Vapor Phase Hydrogen Peroxide SN: 25874XW Rm 491 SN: SL43127V; SL43126V SL43128V Rm 587	EA	350.00	1,400.00
1.00	On Site Service Fee	EA	20.00	20.00

Customer will be assessed a finance charge of 1.5% per month (18% APR) for any purchase which remains unpaid 25 days after due date.

TAXES AS APPLICABLE SHOULD BE PAID DIRECTLY TO THE APPROPRIATE TAXING AGENCY

FORM 101

WWW.ENVSERVICES.COM

EQUAL OPPORTUNITY EMPLOYER

SUBTOTAL	1,420.00
S & H	.00
TAX	.00
TOTAL	1,420.00

PAYMENT TERMS NET 30 DAYS

PLEASE DETACH THIS PORTION AND RETURN WITH YOUR PAYMENT

BILL TO UNIVERSITY OF IOWA

WORK SITE UNIVERSITY OF IOWA

GROUP 229665

82926838

REMIT TO:

ENV SERVICES, INC.
c/o MUNICIPAL AUTHORITY OF SOUTH HEIDELBERG
P.O. BOX 37836
BALTIMORE, MD 21297-7836

INVOICE #:	375656
INVOICE AMT:	1,420.00
INVOICE DATE:	04/30/18
CUSTOMER #:	IA0066

Customer will be assessed a finance charge of 1.5% per month (18% APR) for any purchase which remains unpaid 25 days after due date.

AP/PO PeopleSoft Web Applications

Payment details for voucher: 82926838

Voucher ID	Vendor ID	Remit LOC	Vendor Name	Gross Voucher Amt.	Payment Handling Code
82926838	0000239278	002	ENV Services Incorporated	$1,420.00	AC

Payment Status	Payment Information	Invoice #	Invoice Date	Remit to	Amt From Voucher
PAID	ACH:578002 Dt: 05/30/2018 Amt: $4,960.00	375656	04/30/2018	Detail	$1,420.00

New Payment Search
AP-PO Web Applications Home Page
Self-Service

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Invoice

DAI Scientific Equipment

1-800-816-8388
25677 Hillview Ct
Mundelein, IL 60060
Phone: 800-816-8388

Date	Invoice #
2/1/2018	4805

Bill To	Ship To
University of Iowa Accounts Payable & Travel 202 PCO Iowa City, IA 52242-2500	University of Iowa Hospitals 482 MRF 200 Hawkins Drive Iowa City, IA 52242

P.O. Number	Terms	Rep	Ship		F.O.B.	Project
1001896139	Net 30 Days	BTL	2/1/2018	TRUCK	Fac, PP & ADD	

Quantity	Item Code	Description	Price Each	Amount
1	MDF-U76VC-PA	Upright Freezer, VIP Series	11,088.00	11,088.00

GROUP 227052

82841184

Thank you for your business!

Total $11,088.00

AP/PO PeopleSoft Web Applications

Payment details for voucher: 82841184

Voucher ID	Vendor ID	Remit LOC	Vendor Name	Gross Voucher Amt.	Payment Handling Code
82841184	0000106805	002	DAI Scientific Equipment	$11,088.00	AC

Payment Status	Payment Information	Invoice #	Invoice Date	Remit to	Amt From Voucher
PAID	ACH:561071 Dt: 03/12/2018 Amt: $11,088.00	4805	02/01/2018	Detail	$11,088.00

New Payment Search
AP-PO Web Applications Home Page
Self-Service

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INVOICE NO 147

R.M.BOGGS CO. INC.
R.M.BOGGS CO.
PO Box 1487
2804 Industrial Park Road
Iowa City, IA 52244-1487
Phone: (319) 665-3500
Fax: (319) 665-3515

SOLD TO
UNIVERSITY OF IOWA
ACCOUNTS PAYABLE/TRAVEL
202 PLAZA CENTER ONE
IOWA CITY, IA 52242-2500

SHIP TO
464 MRF
464 MRF
IOWA CITY, IA 52242

ACCOUNT NO	PO NUMBER	SHIP VIA	DATE SHIPPED	TERMS	INVOICE DATE	PAGE
UNI005				Net 30	1/24/2018	1

WORK ORDER #: SS17

WATER PIPE BROKE AND FLOODED ROOM. CHECK OVER 3 UNITS (-80, -20 AND 4°). GIVE ESTIMATE FOR REPAIRS IF NEEDED. CONTACT DONNA SANTILLION 353-8140:

REPLACED EVAPORATOR FAN MOTOR IN 4° LAB FREEZER. UNIT IS TAKING A WHILE TO RECOVER FROM ROOM TEMPERATURE. I LET DONNA KNOW TO CHECK ON UNIT TO MAKE SURE IT RECOVERS. -80°C UNIT NEEDS NEW SWITCHING POWER SUPPLY BOARD, TEMPERATURE CONTROL BOARD, ALL NEW START COMPONENTS AND BATTERY. ALL BEFORE I CAN RUN COMPRESSORS. ALSO WITHOUT POWER GOING TO THE DISPLAY, I CANNOT TELL IF THE DISPLAY/CONTROLLER IS WORKING PROPERLY.ESTIMATE FOR PREPAIR SENT TO DONNA. 4°C THERMO FISHER HAS BAD EVAPORATOR FAN MOTOR. DONNA WOULD LIKE TO GET PART COMING. -20°C FORMA (THERMO) HAD TRIPPED BREAKER. I STARTED UNIT UP AND CHECKED ALL COMPONENTS OF FREEZER. UNIT SEEMS TO BE DOING FINE AND DROPPING TEMPERATURE AT A GOOD RATE.

ITEM NO	QUANTITY	DESCRIPTION	UNIT PRICE	EXTENDED
LABOR	9.0HR	LABOR	115.00	1,035.00*
MATERIAL	1EA	PARKING	15.00	15.00*
MATERIAL	1EA	EVAP FAN MOTOR	117.09	117.09*
MATERIAL	1EA	MISC TRUCK CHARGE	45.00	45.00*

* means item is non-taxable

TOTAL AMOUNT 1,212.09

Phone Order
Entry Method: Manual
Amount: $ 1,212.09
Tax: $ 0.00
Total: $ 1,212.09
01/25/18 14:57:33
Appr Code: 063685
Batch#: 025001
AVS Code: ZIP MATCH Z
CVV2 Code: MATCH M

'S PAST INVOICE DATE
SINESS!

The University of Iowa
Accounts Payable
202 PCO (Plaza Centre One)
Iowa City, IA 52242

37E Proof of Pay - Page 1 of 1

Procurement Card Voucher

Voucher ID: P0357034

Please print in LANDSCAPE mode

Cardholder Name:	DONNA SANTILLAN	Account Number:	010758
Department:	Cmed-Obstetrics/Gynecology	Card Billing Period:	12/28/2017 - 01/29/2018
Phone:	+1 319 384 8667	Date Prepared:	10/29/2019

1	240-17-3225-50000-53540116-6420-000-00000-21-8395	SLID: / SLAC:		
	Descr for GL: AMER PHYSIO SOC Cmnts: Donna Santillan, Ph.D. - MEMBERSHIP APS		DB AMT: 200.00	CR AMT:
2	660-05-0308-00000-65003740-6265-210-00000-00-6353	SLID: / SLAC:		
	Descr for GL: RM BOGGS CO INC Cmnts: Santillan Research Lab - Flood Evaluation of the fridge, - 20 freezer, and - 80 freezer that failed during the flood. They fixed the fridge since it was low dollar amount.		DB AMT: 1,212.09	CR AMT:

Procurement Card Total

DEBIT TOTAL	CREDIT TOTAL
1,412.09	**0.00**

STATEMENT TOTAL

1,412.09

INVOICE NO 386

R.M.BOGGS CO. INC.
R.M.BOGGS CO.
PO Box 1487
2804 Industrial Park Road
Iowa City, IA 52244-1487
Phone: (319) 665-3500
Fax: (319) 665-3515

SOLD TO
UNIVERSITY OF IOWA
ACCOUNTS PAYABLE/TRAVEL
202 PLAZA CENTER ONE
IOWA CITY, IA 52242-2500

SHIP TO
481/587 MRF
464 MRF
IOWA CITY, IA 52242

ACCOUNT NO	PO NUMBER	SHIP VIA	DATE SHIPPED	TERMS	INVOICE DATE	PAGE
UNI005				Net 30	2/28/2018	1

WORK ORDER #: SS42

CHECK OVER INCUBATORS IN 481 AND 587 MRF THAT HAD WATER COME DOWN ON THEM. CONTACTED BY DONNA SANTILLAN 319-353-8140:

CALIBRATED TEMPERATURE AND CO2 ON 3 OUT OF 4 INCUBATORS. INSTALLED NEW BOARD ON LOWER INCUBATOR IN ROOM 48. WILL HAVE TO GO BACK TO CALIBRATE INCUBATOR WITH NEW BOARD. CALIBRATED INCUBATOR WITH NEW BOARD. ALL INCUBATORS ARE WORKING PROPERLY.

ITEM NO	QUANTITY	DESCRIPTION	UNIT PRICE	EXTENDED
LABOR	2.5HR	DIAGNOSTIC LABOR	115.00	287.50*
LABOR	1.5HR	INSTALL NEW CONTROL BOARD LABOR	115.00	172.50*
LABOR	1.0HR	CALIBRATE REPAIRED INCUBATOR LABOR	115.00	115.00*
LABOR	1.5HR	RE-CALIBRATE 3 INCUBATORS LABOR	115.00	172.50*
MATERIAL	1EA	CONTROL BOARD	1346.54	1,346.54*
MATERIAL	1EA	MISC TRUCK CHARGE	45.00	45.00*
MATERIAL	1EA	CERTIFIED METER	35.00	35.00*
MATERIAL	1EA	FREIGHT	24.38	24.38*

* means item is non-taxable

TOTAL AMOUNT 2,198.42

1.5% INTEREST ON ALL ACCOUNTS 30 DAYS PAST INVOICE DATE
THANK YOU FOR YOUR BUSINESS!

38E Invoice - Page 2 of 2

RM BOGGS CO INC
2804 INDUSTRIAL PARK ROAD #1487
IOWA CITY, IA 522402462
PHONE#(319) 665-3500

Bank ID: 6099
Merchant ID: 000014462016
Term ID: 001

Sale

XXXXXXXXXXXX3309
VISA Entry Method: Manual

Amount: $	275.00
Tax: $	0.00
Total: $	275.00

03/05/18 14:45:12
Inv #: 000398 Appr Code: 059882
Apprvd: Online Batch#: 064001
AVS Code: ZIP MATCH Z
Retrieval Ref.#: 00100004

Customer Copy

THANK YOU
HAVE A NICE DAY!

RM BOGGS CO INC
2804 INDUSTRIAL PARK ROAD #1487
IOWA CITY, IA 522402462
PHONE#(319) 665-3500

Bank ID: 6099
Merchant ID: 000014462016
Term ID: 001

Phone Order

XXXXXXXXXXXX3309
VISA Entry Method: Manual

Amount: $	2,198.42
Tax: $	0.00
Total: $	2,198.42

03/05/18 14:46:31
Inv #: 000396 Appr Code: 051897
Apprvd: Online Batch#: 064001
AVS Code: ZIP MATCH Z
CVV2 Code: MATCH M
Retrieval Ref.#: 00100005

Customer Copy

THANK YOU
HAVE A NICE DAY!

The University of Iowa
Accounts Payable
202 PCO (Plaza Centre One)
Iowa City, IA 52242

38E Prof of Pay - Page 1 of 1

Procurement Card Voucher

Voucher ID: P0361411

Please print in LANDSCAPE mode

Cardholder Name: DONNA SANTILLAN
Department: Cmed-Obstetrics/Gynecology
Phone: +1 319 384 8667

Account Number: 010758
Card Billing Period: 02/28/2018 - 03/27/2018
Date Prepared: 10/29/2019

1	500-17-3225-00000-18679001-6115-999-00000-20-6353	SLID: / SLAC:		
	Descr for GL: STEMCELL TECH INC Cmnts: Santillan Lab Research Supplies (AHA)		DB AMT: 390.00	CR AMT:
2	660-05-0308-00000-65003740-6265-210-00000-00-6353	SLID: / SLAC:		
	Descr for GL: RM BOGGS CO INC Cmnts: Flood Recovery - Check Oven for Water Damage		DB AMT: 275.00	CR AMT:
3	660-05-0308-00000-65003740-6265-210-00000-00-6353	SLID: / SLAC:		
	Descr for GL: RM BOGGS CO INC Cmnts: Flood Recovery - Santillan lab - Check and Service Incubators in MRF 481 and 587		DB AMT: 2,198.42	CR AMT:

Procurement Card Total

DEBIT TOTAL	CREDIT TOTAL
2,863.42	**0.00**

STATEMENT TOTAL
2,863.42

R.M.BOGGS CO. INC.
R.M.BOGGS CO.

39E Invoice - Page 1 of 2

INVOICE NO 398

PO Box 1487
2804 Industrial Park Road
Iowa City, IA 52244-1487
Phone: (319) 665-3500
Fax: (319) 665-3515

SOLD TO
UNIVERSITY OF IOWA
ACCOUNTS PAYABLE/TRAVEL
202 PLAZA CENTER ONE
IOWA CITY, IA 52242-2500

SHIP TO
464 MRF
464 MRF
IOWA CITY, IA 52242

ACCOUNT NO	PO NUMBER	SHIP VIA	DATE SHIPPED	TERMS	INVOICE DATE	PAGE
UNI005	P-CARD			Net 30	2/28/2018	1

WORK ORDER #: SS70

CHECK OVEN FOR WATER DAMAGE. CONTACTED BY DONNA SANTILLAN:

STARTED OVEN AND IT DOES HEAT UP AND I WATCHED UNIT REACH SET POINT. CHECKED ELECTRICAL FOR DAMAGE BUT DID NOT SEE ANY.

ITEM NO	QUANTITY	DESCRIPTION	UNIT PRICE	EXTENDED
LABOR	2.0HR	LABOR	115.00	230.00*
MATERIAL	1EA	MISC TRUCK CHARGE	45.00	45.00*

* means item is non-taxable

TOTAL AMOUNT **275.00**

1.5% INTEREST ON ALL ACCOUNTS 30 DAYS PAST INVOICE DATE
THANK YOU FOR YOUR BUSINESS!

39E Invoice - Page 2 of 2

RM BOGGS CO INC
2804 INDUSTRIAL PARK ROAD #1487
IOWA CITY, IA 522402462
PHONE#(319) 665-3500

Bank ID: 6099
Merchant ID: 000014462016
Term ID: 001

Sale

XXXXXXXXXXXX3309
VISA Entry Method: Manual

Amount: $	275.00
Tax: $	0.00
Total: $	275.00

03/05/18 14:45:12
Inv #: 000398 Appr Code: 059882
Apprvd: Online Batch#: 064001
AVS Code: ZIP MATCH Z
Retrieval Ref.#: 00100004

Customer Copy

THANK YOU
- HAVE A NICE DAY!

RM BOGGS CO INC
2804 INDUSTRIAL PARK ROAD #1487
IOWA CITY, IA 522402462
PHONE#(319) 665-3500

Bank ID: 6099
Merchant ID: 000014462016
Term ID: 001

Phone Order

XXXXXXXXXXXX3309
VISA Entry Method: Manual

Amount: $	2,198.42
Tax: $	0.00
Total: $	2,198.42

03/05/18 14:46:31
Inv #: 000396 Appr Code: 051897
Apprvd: Online Batch#: 064001
AVS Code: ZIP MATCH Z
CVV2 Code: MATCH M
Retrieval Ref.#: 00100005

Customer Copy

THANK YOU
HAVE A NICE DAY!

The University of Iowa
Accounts Payable
202 PCO (Plaza Centre One)
Iowa City, IA 52242

39E Proof of Pay - Page 1 of 1

Procurement Card Voucher

Voucher ID: P0361411

Please print in LANDSCAPE mode

Cardholder Name: DONNA SANTILLAN
Department: Cmed-Obstetrics/Gynecology
Phone: +1 319 384 8667

Account Number: 010758
Card Billing Period: 02/28/2018 - 03/27/2018
Date Prepared: 10/29/2019

1	500-17-3225-00000-18679001-6115-999-00000-20-6353	SLID: / SLAC:		
	Descr for GL: STEMCELL TECH INC Cmnts: Santillan Lab Research Supplies (AHA)		DB AMT: 390.00	CR AMT:
2	660-05-0308-00000-65003740-6265-210-00000-00-6353	SLID: / SLAC:		
	Descr for GL: RM BOGGS CO INC Cmnts: Flood Recovery - Check Oven for Water Damage		DB AMT: 275.00	CR AMT:
3	660-05-0308-00000-65003740-6265-210-00000-00-6353	SLID: / SLAC:		
	Descr for GL: RM BOGGS CO INC Cmnts: Flood Recovery - Santillan lab - Check and Service Incubators in MRF 481 and 587		DB AMT: 2,198.42	CR AMT:

Procurement Card Total

DEBIT TOTAL	CREDIT TOTAL
2,863.42	**0.00**

STATEMENT TOTAL
2,863.42

Invoice

DAI Scientific Equipment

1-800-816-8388
25677 Hillview Ct
Mundelein, IL 60060
Phone: 800-816-8388

Date	Invoice #
4/17/2018	4946

Bill To	Ship To
University of Iowa Accounts Payable & Travel 202 PCO Iowa City, IA 52242-2500	University of Iowa Hospitals Obstertrics & Gynecology MRF-463 200 Hawkins Drive Iowa City, IA 52242

P.O. Number	Terms	Rep	Ship		F.O.B.	Project
1001929907	Net 30 Days	BTL	4/17/2018	TRUCK	Fac, PP & ADD	

Quantity	Item Code	Description	Price Each	Amount
1	300420A	T-Wrench Baker Tool. (Tool to unlock cabinet to change the HEPA filter in Baker hood Model EG-4320	71.07	71.07
1	Shipping	Shipping & Handling	31.01	31.01

GROUP 229122

82910568

Thank you for your business!

Total $102.08

AP/PO PeopleSoft Web Applications

Your path: Home > Payment

User options | Help

Payment details for voucher: 82910568

Voucher ID	Vendor ID	Remit LOC	Vendor Name	Gross Voucher Amt.	Payment Handling Code
82910568	0000106805	002	DAI Scientific Equipment	$102.08	AC

Payment Status	Payment Information	Invoice #	Invoice Date	Remit to	Amt From Voucher
PAID	ACH:574812 Dt: 05/16/2018 Amt: $102.08	4946	04/17/2018	Detail	$102.08

New Payment Search
AP-PO Web Applications Home Page
Self-Service

(WALTERSC) Logoff

Accounts Payable / Purchasing is a department in the Finance and Operations organization.
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Please direct inquires regarding using this application to acntpay@uiowa.edu

The University of Iowa
Accounts Payable, 202 Plaza Centre One

Web

Electronic Invoice Purchase Under $10,000

10/29/2019

Special Instructions: Payment has been made for the items listed below. If you have questions or issues with the shipment, please contact 319-335-2076 or e-mail acntpay@uiowa.edu.

FISHER SCI
6722 Bickmore Avenue
Chino, CA, 91710 USA

Requestor
BIXLERD (Bixler,Dixie) (Phonebook)
PFP-31144
AMBUL CARE Obstetrics Gynecolo

Remit Vendor ID	Address
0000109029	1

Invoice Number	Inv Date	Loaded to GL	Purchase Order
Electronic	04/06/2018	04/10/2018	1001933143

PO Line #	Qty	Unit Meas	Vndr Item ID	Description	Unit Cost	Ext Cost
	1.00	CS	CNL	VI-DRY BNCH PROT 20X	$133.1200	$133.12

Line/Dist	MFK	PO Amount	Split Amount
/	660-05-0308-00000-65003740-6115-999-00000-00-6353	$0.00	133.12
		Balance to allocate:	$0.00

Electronic Invoice Comments:

Gross Amount:
$133.12

Attachments

- No attachments for this PO

The University of Iowa
Accounts Payable, 202 Plaza Centre One

Web

Electronic Invoice Purchase Under $10,000

10/29/2019

Special Instructions: Payment has been made for the items listed below. If you have questions or issues with the shipment, please contact 319-335-2076 or e-mail acntpay@uiowa.edu.

FISHER SCI
6722 Bickmore Avenue
Chino, CA, 91710 USA

Requestor
BIXLERD (Bixler,Dixie) (Phonebook)
PFP-31144
AMBUL CARE Obstetrics Gynecolo

Remit Vendor ID	Address
0000109029	1

Invoice Number	Inv Date	Loaded to GL	Purchase Order
Electronic	04/10/2018	04/12/2018	1001933150

PO Line #	Qty	Unit Meas	Vndr Item ID	Description	Unit Cost	Ext Cost
3	1.00	EA	CNL	GLUTARALDEHYDE 2% IN	$158.0800	$158.08

Line/Dist	MFK	PO Amount	Split Amount
3/1	660-05-0308-00000-65003740-6115-999-00000-00-6353	$158.08	158.08
		Balance to allocate:	$0.00

Electronic Invoice Comments:

Gross Amount:
$158.08

Attachments

- No attachments for this PO

Order Details | Order Number: 9786145947

Print Page

ITEMS FOR DELIVERY

Deliver to: U OF I HOSPITALS & CLINICS, 200 Hawkins Drive, 464 Mrf, Iowa City, IA 52242

Processing — Expected Delivery: April 24, 2018



Staples Corvair Luxura Mesh Back Task Chair, Black
Item: 934100 Model: 23097

4 at $161.99 EACH	$647.96
Coupon	-$168.00
	$479.96

ORDER SUMMARY

Order Date: 04/20/2018 at 02:39 PM

REORDER ITEMS

RETURN AN ITEM

Merchandise Total:	$647.96
Coupons & Rewards:	-$168.00
Shipping:	Free
Tax:	$0.00
Total:	$479.96

Payment Method

ending in 4632 $479.96

Billing Address
DIXIE BIXLER
200 Hawkins Drive
31144 Pfp
Iowa City , IA 52242

Sign in to see billing and shipping information

The University of Iowa
Accounts Payable
202 PCO (Plaza Centre One)
Iowa City, IA 52242

43E Proof of Pay - Page 1 of 4

Procurement Card Voucher

Voucher ID: P0363839

Please print in LANDSCAPE mode

Cardholder Name: DIXIE BIXLER
Department: Cmed-Obstetrics/Gynecology
Phone: +1 319 356 3605

Account Number: 011135
Card Billing Period: 03/28/2018 - 04/27/2018
Date Prepared: 10/29/2019

1	990-17-3225-60000-54001000-6235-999-73800-00-0000	SLID: / SLAC:		
	Descr for GL: THE BASKET CASES Cmnts: Retirement basket presented to Dr. Jennifer Niebyl (former Chair of OBGYN) at retirement event held on 3/27/18.		DB AMT: 93.50	CR AMT:
2	510-17-3225-00000-12326600-6245-999-00000-20-7736	SLID: / SLAC:		
	Descr for GL: FEDEX 27942801 Cmnts: Karen Summers - FAZST Study		DB AMT: 52.04	CR AMT:
3	990-17-3225-60000-54001000-6135-100-73800-00-0000	SLID: / SLAC:		
	Descr for GL: HY VEE 1281 Cmnts: Cake for Gloria Herdlicka's Retirement Event on 3/30/18		DB AMT: 49.99	CR AMT:
4	990-17-3225-68000-54001000-6070-999-00000-00-0000	SLID: / SLAC:		
	Descr for GL: RAPIDS REPRODUCTION INC Cmnts: Cartridge & Paper for the Poster Printer (TICKET 165711-0) 3/30/18		DB AMT: 200.95	CR AMT:
5	990-17-3225-60000-54001000-6135-110-70000-00-0000	SLID: / SLAC:		
	Descr for GL: CRYSTAL CLEAR WATER OF IO Cmnts: Bottled Water for Executive Area OBGYN Invoice 727789 dated 3/29/18		DB AMT: 28.00	CR AMT:
6	520-17-3225-00000-82066092-6085-000-00000-30-0000	SLID: / SLAC:		
	Descr for GL: AMAZON MKTPLACE PMTS Cmnts: Canon PowerShot SX530 Digital Camera for the Touching Hearts Program. Approved by Dale Geerdes on 3/28/18 in meeting with Rachel Regennitter and Dixie Bixler, to be stored in the Procedure Clinic		DB AMT: 267.00	CR AMT:
7	510-17-3408-00000-21505867-6245-999-00000-20-7506	SLID: / SLAC:		
	Descr for GL: FEDEX 28024546 Cmnts: Dr. Meng Fed Ex - Pilot Study - Cancer Center		DB AMT: 48.93	CR AMT:
8	990-17-3225-60000-54001000-6212-000-77800-00-0000	SLID: / SLAC:		
	Descr for GL: MARCO INC Cmnts: Administrative Copier Service Contract for the period 1/20/18 to 3/19/18, INVOICE 5088923 dated 3/19/18		DB AMT: 27.55	CR AMT:
9	990-17-3225-10000-54001000-6212-000-77800-00-0000	SLID: / SLAC:		
	Descr for GL: MARCO INC Cmnts: Fifth Floor Copier Service Contract for the period 3/2/18 to 4/1/18, INVOICE 5123400 dated 4/2/18		DB AMT: 24.46	CR AMT:
10	990-17-3225-40000-54001000-6431-000-77800-00-0000	SLID:		

		/ SLAC:		
	Descr for GL: LEASE DIRECT Cmnts: Copier Lease Gyn Oncology for the period 3/22/18 to 4/21/18 INVOICE 58345040 dated 3/8/18		DB AMT: 221.27	CR AMT:
11	170-70-7280-12000-00000000-6431-000-00000-31-9003	SLID: / SLAC:		
	Descr for GL: LEASE DIRECT Cmnts: Copier Lease for Chart Control for the period 3/5/18 to 4/4/18 INVOICE 58200685 dated 2/19/18		DB AMT: 221.27	CR AMT:
12	990-17-3225-11000-54001000-6431-000-77800-00-0000	SLID: / SLAC:		
	Descr for GL: LEASE DIRECT Cmnts: MFM PORTION: Copier lease for the period 3/22/18 to 4/21/18 - INVOICE 58345043 dated 3/8/18		DB AMT: 64.77	CR AMT:
13	990-17-3225-30000-54001000-6431-000-77800-00-0000	SLID: / SLAC:		
	Descr for GL: LEASE DIRECT Cmnts: REI PORTION: Copier lease for the period 3/22/18 to 4/21/18 - INVOICE 58345043 dated 3/8/18		DB AMT: 64.78	CR AMT:
14	990-17-3225-31000-54001000-6431-000-77800-00-0000	SLID: / SLAC:		
	Descr for GL: LEASE DIRECT Cmnts: REI - QUAD CITIES PORTION: Copier lease for the period 3/22/18 to 4/21/18 - INVOICE 58345043 dated 3/8/18		DB AMT: 64.77	CR AMT:
15	170-70-7280-12100-00000000-6431-000-00000-31-9001	SLID: / SLAC:		
	Descr for GL: LEASE DIRECT Cmnts: IVF CLINIC PORTION: Copier lease for the period 3/22/18 to 4/21/18 - INVOICE 58345043 dated 3/8/18		DB AMT: 64.78	CR AMT:
16	990-17-3225-82000-54001000-6431-000-77800-00-0000	SLID: / SLAC:		
	Descr for GL: LEASE DIRECT Cmnts: Residency Program Portion: Copier lease 5th floor for the period 3/25/18 to 4/24/18 INVOICE 58519793 dated 3/12/18		DB AMT: 60.42	CR AMT:
17	990-17-3225-85000-54001000-6431-000-77800-00-0000	SLID: / SLAC:		
	Descr for GL: LEASE DIRECT Cmnts: Medical Student Program Portion: Copier lease 5th floor for the period 3/25/18 to 4/24/18 INVOICE 58519793 dated 3/12/18		DB AMT: 60.42	CR AMT:
18	990-17-3225-10000-54001000-6431-000-77800-00-0000	SLID: / SLAC:		
	Descr for GL: LEASE DIRECT Cmnts: Generalist Division Portion: Copier lease 5th floor for the period 3/25/18 to 4/24/18 INVOICE 58519793 dated 3/12/18		DB AMT: 60.42	CR AMT:
19	990-17-3225-20000-54001000-6431-000-77800-00-0000	SLID: / SLAC:		
	Descr for GL: LEASE DIRECT Cmnts: Urogynecology Portion: Copier lease 5th floor for the period 3/25/18 to 4/24/18 INVOICE 58519793 dated 3/12/18		DB AMT: 60.41	CR AMT:
20	170-70-7280-12000-00000000-6199-999-00000-31-9001	SLID: / SLAC:		
	Descr for GL: AMAZON MKTPLACE PMTS Cmnts: Stickers for kids who come into the clinic		DB AMT: 9.89	CR AMT:
21	170-70-7280-12000-00000000-6199-999-00000-31-9001	SLID: / SLAC:		

	Descr for GL: AMAZON MKTPLACE PMTS Cmnts: Stickers for kids who come into the clinic		AMT: 9.50	AMT:
22	990-17-3225-11000-54001000-6199-999-00000-00-0000	SLID: / SLAC:		
	Descr for GL: WAHLTEK INC Cmnts: Dictaphone Equipment - Cradle, Power Adaptor, USB Cord		DB AMT: 144.00	CR AMT:
23	170-70-7280-12000-00000000-6199-999-00000-31-9001	SLID: / SLAC:		
	Descr for GL: AMAZON MKTPLACE PMTS Cmnts: Stickers for kids who come into the clinic		DB AMT: 28.92	CR AMT:
24	170-70-7280-12000-00000000-6199-999-00000-31-9001	SLID: / SLAC:		
	Descr for GL: AMAZON MKTPLACE PMTS Cmnts: Stickers for children who come into the clinic with their parents.		DB AMT: 44.14	CR AMT:
25	990-17-3225-40000-54001000-6212-000-77800-00-0000	SLID: / SLAC:		
	Descr for GL: MARCO INC Cmnts: Gyn Oncology Copier Service Contract for the period 3/12/18 to 4/11/18 INVOICE 5154448 dated 4/11/18		DB AMT: 36.77	CR AMT:
26	990-17-3225-11000-54001000-6212-000-77800-00-0000	SLID: / SLAC:		
	Descr for GL: MARCO INC Cmnts: MFM PORTION: Copier service contract for the period 3/12/18 to 4/11/18 INVOICE 5154447 dated 4/11/18		DB AMT: 106.64	CR AMT:
27	990-17-3225-30000-54001000-6212-000-77800-00-0000	SLID: / SLAC:		
	Descr for GL: MARCO INC Cmnts: REI PORTION: Copier service contract for the period 3/12/18 to 4/11/18 INVOICE 5154447 dated 4/11/18		DB AMT: 106.64	CR AMT:
28	990-17-3225-31000-54001000-6212-000-77800-00-0000	SLID: / SLAC:		
	Descr for GL: MARCO INC Cmnts: REI-QC OFFICE PORTION: Copier service contract for the period 3/12/18 to 4/11/18 INVOICE 5154447 dated 4/11/18		DB AMT: 106.64	CR AMT:
29	170-70-7280-12100-00000000-6212-000-00000-31-9001	SLID: / SLAC:		
	Descr for GL: MARCO INC Cmnts: IVF CLINIC PORTION: Copier service contract for the period 3/12/18 to 4/11/18 INVOICE 5154447 dated 4/11/18		DB AMT: 106.65	CR AMT:
30	170-70-7280-12000-00000000-6245-999-00000-31-9001	SLID: / SLAC:		
	Descr for GL: FEDEX 28103750 Cmnts: Fisher Scientific - return - Clinic (Heather D ordered in error)		DB AMT: 31.30	CR AMT:
31	990-17-3225-60000-54001000-6245-999-78300-00-0000	SLID: / SLAC:		
	Descr for GL: FEDEX 28103749 Cmnts: T Messlein Fed Ex to Long Li XIAN		DB AMT: 32.82	CR AMT:
32	990-17-3225-85000-54001000-6135-999-00000-00-0000	SLID: / SLAC:		
	Descr for GL: WM SUPERCENTER #1721 Cmnts: Coffee for Med Student Program		DB AMT:	CR AMT:

33	990-17-3225-60000-54001000-6135-999-00000-00-0000	SLID: / SLAC:		
	Descr for GL: WM SUPERCENTER #1721 Cmnts: Coffee for Administrative Area - OBGYN		DB AMT: 11.13	CR AMT:
34	990-17-3225-60000-54001000-6199-999-00000-00-0000	SLID: / SLAC:		
	Descr for GL: WM SUPERCENTER #1721 Cmnts: Immediate need for AA Batteries - Administrative Area and other areas.		DB AMT: 14.94	CR AMT:
35	520-17-3225-00000-84120300-6135-500-00000-40-0000	SLID: / SLAC:		
	Descr for GL: CHARLOTTES Cmnts: Family Planning Council Meeting on 4/12/18 (Des Moines will reimburse - deposit as offset expense) 9 @ $9 plus $15 delivery. Attended by Dr. Noelle Bowdler from UIHC and 8 others within state of Iowa.		DB AMT: 96.00	CR AMT:
36	170-70-7280-12000-00000000-6199-999-00000-31-9001	SLID: / SLAC:		
	Descr for GL: AMAZON MKTPLACE PMTS Cmnts: Stickers for children who come in clinic with parents.		DB AMT: 20.64	CR AMT:
37	170-70-7280-12300-00000000-6420-000-00000-31-9001	SLID: / SLAC:		
	Descr for GL: SOC OF DIAG MED SONOGRA Cmnts: Glenda Mueller, U/S Supervisor - MEMBERSHIP SDMS		DB AMT: 152.00	CR AMT:
38	660-05-0308-00000-65003740-6085-000-00000-00-6353	SLID: / SLAC:		
	Descr for GL: STAPLES DIRECT Cmnts: 4 Mesh Back Task Chairs - Flood Recovery Items		DB AMT: 479.96	CR AMT:
39	990-17-3225-60000-54001000-6135-100-73800-00-0000	SLID: / SLAC:		
	Descr for GL: HY VEE 1281 Cmnts: 4/24/18: Full sheet cake for UIHC employees (65+) and half sheet to IRL (40+) Serving 105+ = $.90 per person; employee appreciation.		DB AMT: 94.98	CR AMT:
40	990-17-3225-60000-54001000-6135-110-70000-00-0000	SLID: / SLAC:		
	Descr for GL: CRYSTAL CLEAR WATER OF IO Cmnts: Bottled water for Executive Area - OBGYN Dept. INVOICE 733230 dated 4/25/18		DB AMT: 29.25	CR AMT:
41	510-17-3225-00000-12332402-6245-999-00000-20-0000	SLID: / SLAC:		
	Descr for GL: FEDEX 28282037 Cmnts: Fed Ex Jess Janecek NRG Oncology		DB AMT: 8.08	CR AMT:

Procurement Card Total

DEBIT TOTAL	CREDIT TOTAL
3,424.50	**0.00**

STATEMENT TOTAL

3,424.50

The University of Iowa
Accounts Payable, 202 Plaza Centre One

Web

Electronic Invoice Purchase Under $10,000

10/29/2019

Special Instructions: Payment has been made for the items listed below. If you have questions or issues with the shipment, please contact 319-335-2076 or e-mail acntpay@uiowa.edu.

FISHER SCI
6722 Bickmore Avenue
Chino, CA, 91710 USA

Requestor
BIXLERD (Bixler,Dixie) (Phonebook)
PFP-31144
AMBUL CARE Obstetrics Gynecolo

Remit Vendor ID	Address
0000109029	1

Invoice Number	Inv Date	Loaded to GL	Purchase Order
Electronic	03/21/2018	03/23/2018	1001921795

PO Line #	Qty	Unit Meas	Vndr Item ID	Description	Unit Cost	Ext Cost
	1.00	EA	CNL	DIMETHYLSULFOXIDE CR	$11.6400	$11.64
	1.00	EA	CNL	VORTEX MIXER ANALOG	$250.4000	$250.40
	1.00	EA	CNL	FS MINICENTRIFUGE 11	$439.0400	$439.04

Line/Dist	MFK	PO Amount	Split Amount
/	660-05-0308-00000-65003740-6115-999-00000-00-6353	$0.00	701.08
		Balance to allocate:	$0.00

Electronic Invoice Comments:

Gross Amount: $701.08

Attachments

- No attachments for this PO

45E Invoice - Page 1 of 2

ADVANCED INSTRUMENTS
Two Technology Way / 781-320-9000
Norwood, Massachusetts 02062, USA
Fax: 781-320-8181
Web: www.aicompanies.com

Customer ID: 11640
Invoice: 318654
Routing: EMAIL
Order Number: 307749

INVOICE

Page: 1 of 1
Date: 02/26/2018

Bill To:
University of Iowa
Accounts Payable & Travel
PCO 202
125 South Dubuque Street
Iowa City IA 52242-2500

Ship To:
Obstetrics & Gynecology Lab
University of Iowa Hospital and Clinics
200 Hawkins Drive
Iowa City IA 52242-1009

Fax: 319-335-4176 **EMail:** acntpay@uiowa.edu

PO Number: 1001906719
Sales Rep: Emilio Cacho
Packing Slip: 307414
RMA No.: 0
Terms: Net 30 Days
F.O.B.: Destination Prepaid and Add
Ship Via: FedEx Ground Dom.
Ship Date: 02/26/2018

Line	Part Number/Description	Revision	Quantity	Unit Price	Ext Price
1	Osmo1 Osmometer, Single-Sample - Model Osmo1	1	1.00 EA ***PO Number:*** 1001906719	14,390.000/1	14,390.00

Warehouse Code: FG

Warranty: One Year - Instruments

Material Duration	Duration	Misc Duration
1 YEARS	1YEARS	1YEARS

Miscellaneous Charges:

Description	Amount
10.) Freight	40.38

SerialNumber 18010165A

Claim amount is $12,735.64 for like, kind replacement and shipping. Department elected to upgrade equipment and cost of upgrade is not allowed under the claim.

GROUP 227341
82852014

Sold To: *University of Iowa Hospital and Clinics / 200 Hawkins Drive / Iowa City IA 52242 /*

Remit To: Advanced Instruments, LLC
PO Box 845116
Boston, MA 02284-5116

Invoice Total: $14430.38

ARForm001:00

ADVANCED INSTRUMENTS, INC.
Two Technology Way / 781-320-9000
Norwood, Massachusetts 02062, USA
800-225-4034 Fax: 781-320-8181
www.aicompanies.com

45E Invoice - Page 2 of 2

QUOTATION

Ms. Donna Santillan
University of Iowa Hospitals and Clinics
200 Hawkins Drive
Iowa City, IA 52242
United States
P: (319) 353-8140
donna-santillan@uiowa.edu

Quotation Number: O9ZI3A000XJM
Date of Quotation: January 26, 2018
Expiration Date: May 18, 2018
Regional Manager: Emilio Cacho
Questions Call: 7814010380
Email: emilioc@aicompanies.com

Supporting documentation quote for like, kind replacement.

Qty.	Part No.	Description	Unit Price	Discount	Extended
1	3250	**Advanced Model 3250 Single-sample Osmometer**	$13,700.00	$0.00	$13,700.00
		Advanced 3250 Osmometer for determination of solute concentration by the freezing-point method. Instrument features a frost-free cold block, sample-identification capability with date and time, user-definable setup parameters for maximum utility in the range of 0 - 4000 mOsm, and interfaceability by RS232 port. Instrument is shipped complete and ready-to-use with startup supplies and a comprehensive User's Guide.			
1	Discount	**Courtesy Discount**	$0.00	$0.00	$-1,000.00
				Total:	**$12,700.00**

To place an order please contact our Customer Service department at 1-800-225-4034, e-mail a purchase order to orders@aicompanies.com or fax to 1-781-320-3669.

AP/PO PeopleSoft Web Applications

Payment details for voucher: 82852014

Voucher ID	Vendor ID	Remit LOC	Vendor Name	Gross Voucher Amt.	Payment Handling Code
82852014	0000100592	001	Advanced Instruments Incorporated	$14,430.38	RE

Payment Status	Payment Information	Invoice #	Invoice Date	Remit to	Amt From Voucher
PAID	Check:03261924 Dt: 03/28/2018 Amt: $14,430.38	318654	02/26/2018	Detail	$14,430.38

New Payment Search
AP-PO Web Applications Home Page
Self-Service

(WALTERSC) Logoff

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Please direct inquires regarding using this application to acntpay@uiowa.edu

BECKMAN COULTER
250 South Kraemer Blvd
P.O. Box 8000
Brea CA 92822- 8000
United States
Tel: 800- 526- 3821
FAX: 714- 223- 4100

FEIDN: 95- 1040600
DUNS: 00- 825- 4708

INVOICE NO.: **31079037**

Page: 1 of 1
Date: 2018/03/12

INVOICE

UNIVERSITY OF IOWA (743453)
ACCOUNTS PAYABLE
202 PLAZA CENTER ONE
IOWA CITY, IA 52242- 2500

Customer Number: 6931
Service Request: 29620697
Customer PO: 1001906693
PO Date: 2018/02/09
Technician: DIGMANN, DAVID J

Ship To: UNIVERSITY OF IOWA (225010)
MRF RM 463
375 NEWTON RD
IOWA CITY IA 52242- 0001
United States

Payment Terms: Net Due In 30 Days
Due Date: 2018/04/11
Remit To: Beckman Coulter, Inc.
Dept. CH 10164
PALATINE IL 60055- 0164
United States

Wire & ACH: ABA # 043000261 Acct # 1044460

Item	Description	Part Number	Quantity Ordered	Quantity Shipped	Unit Price / Discount %	Value	Tax Rate
	For work completed on the following item(s): Instrument: LS 6000SC- MAXI,120V S/N : 7066053 Instance: 205957 Service Date: 2018/03/09						
1	SERVICE LABOR Freight Terms: PREPAID AND ADD			2	422.00	844.00	0
2	MISCELLANEOUS SERVICE EXPENSE Freight Terms: PREPAID AND ADD	MISC- EXP		1	800.00	800.00	0
3	SERVICE TRAVEL Freight Terms: PREPAID AND ADD			1	422.00	422.00	0

GROUP 228120
82879640

Customer's Contact:
Customer's ph#:

Purchase on- line at our eStore: www.beckmancoulter.com/eStore

Net Amount	Shipping & Handling	Insurance	Other Charges	Subtotal
2,066.00	0.00		0.00	2,066.00

Tax %	Tax Amount	Total Amount
.00	.00	**USD 2,066.00**

If Customer files any cost reports or claims for reimbursement with federal or state health care programs, Customer shall fully and accurately disclose and claim the amount of any discount for any of the products sold hereto in the fiscal year in which the discount is earned or the following year, and otherwise strictly comply with any applicable federal or state statutes and regulations.

Go Paperless. Receive statements and invoices. Register at https://eipp11.com/beckman

ORIGINAL

PRINTER() US- SV

BECKMAN COULTER

CUSTOMER SUPPORT CALL

www.beckmancoulter.com

ACCOUNT	MODEL	SERIAL NUMBER	ID NUMBER
UNIVERSITY OF IOWA 375 NEWTON RD IOWA CITY IA 52242-0001	LS6000SC	7066053	205957
CUSTOMER CONTACT DONNA SANTILLAN 319-384 8667	**PURCHASE ORDER** 1001906693	**PROPERTY NUMBER**	
AGREEMENT TYPE Reimbursable	**AGREEMENT NUMBER**	**EFFECTIVE DATES**	
SERVICE REQUEST NUMBER 29620697	**REQUEST DATE** 09-FEB-2018	**CALL COMPLETE DATE** 09-MAR-2018	
PERFORMED BY DIGMANN, DAVID J T4 - Field Technical Service			

DESCRIPTION OF WORK PERFORMED

PROBLEM: SOURCE REMOVAL PO - 2066.00 FSE DAVE d

SOLUTION: 09-MAR-2018 - Symptom Reported - cust requested decommission
Problem Observed cust requested decommission
Resolution - performed swipe test on source per procedures. no leakage found. Packaged source for shipment/disposal and verified survey reading within limits. Contacted university EHS to transport source package to their lab for shipping. EZ RA# UWE27FEB18. FedEx label 4144 3532 6376. Removed lead shielding from instrument for disposal as well. Instrument is ready for decontamination/disposal.

Call was reviewed and does not meet CF criteria. No cf created.

SYSTEM VALIDATION: For Medical Devices - Regulatory requirements call for a final validation of instrument repair and system readiness. The final validation of instrument repair and system readiness can only be obtained through a successful QC run using the laboratory's quality control system. This repair record and the laboratory's quality control records comprise the quality documents associated with this instrument repair. Copies of these records may be required by Beckman Coulter or regulatory authorities to complete technical investigations or quality audits. We appreciate your cooperation if requested to provide copies of your QC data related to this repair.

DATE	DESCRIPTION	TYPE	HOURS	RATE	EXTENDED AMOUNT	CUSTOMER CHARGE
09-MAR-2018	09-De-Installation	TRAVEL	1.00	$422.00	$422.00	$422.00
09-MAR-2018	09-De-Installation	LABOR	2.00	$422.00	$844.00	$844.00
				LABOR/TRAVEL TOTAL	$1,266.00	$1,266.00

DATE	DESCRIPTION	AMOUNT	EXTENDED AMOUNT	CUSTOMER CHARGE
09-MAR-2018	MISC-EXP	$800.00	$800.00	$800.00
		EXPENSES TOTAL	$800.00	$800.00
		TOTAL CHARGE	$2,066.00	$2,066.00

CUSTOMER CALL ORIGINATOR	CUSTOMER SIGNATURE
DONNA SANTILLAN	

Total is an estimate only and does not include applicable sales tax, shipping and handling charges.

AP/PO PeopleSoft Web Applications

Payment details for voucher: 82879640

Voucher ID	Vendor ID	Remit LOC	Vendor Name	Gross Voucher Amt.	Payment Handling Code
82879640	0000103219	500	Beckman Coulter Incorporated	$2,066.00	PP

Payment Status	Payment Information	Invoice #	Invoice Date	Remit to	Amt From Voucher
PAID	PPLUS:567491 Dt: 04/11/2018 Amt: $7,476.63	31079037	03/12/2018	Detail	$2,066.00

New Payment Search
AP-PO Web Applications Home Page
Self-Service

(WALTERSC) Logoff

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The University of Iowa
Accounts Payable, 202 Plaza Centre One

Web

Electronic Invoice Purchase Under $10,000

10/29/2019

Special Instructions: Payment has been made for the items listed below. If you have questions or issues with the shipment, please contact 319-335-2076 or e-mail acntpay@uiowa.edu.

OFFICE DEP
445 Hwy 6 E
Iowa City, IA, 52240 USA

Requestor
BIXLERD (Bixler,Dixie) (Phonebook)
PFP-31144
AMBUL CARE Obstetrics Gynecolo

Remit Vendor ID	Address
0000118224	5

Invoice Number	Inv Date	Loaded to GL	Purchase Order
Electronic	03/09/2018	03/13/2018	1001920922

PO Line #	Qty	Unit Meas	Vndr Item ID	Description	Unit Cost	Ext Cost
	3.00	NMB	142087	Realspace(R) Medium-Pile Chair Mat With Beveled Edge, 45W x 53D, Standard Lip, Clear	$67.1900	$201.57

Line/Dist	MFK	PO Amount	Split Amount
/	660-05-0308-00000-65003740-6070-999-00000-00-6353	$0.00	201.57
		Balance to allocate:	$0.00

Electronic Invoice Comments:

Gross Amount: $201.57

Attachments

- No attachments for this PO

PLEASE REMIT TO:
ENV SERVICES, INC.
c/o MUNICIPAL AUTHORITY OF SOUTH HEIDELBERG
P.O. BOX 37836
BALTIMORE, MD 21297-7836

INVOICE

dba ENV Services Testing & Certification, Inc.
2880 Bergey Road, Suite K, Hatfield, PA 19440-1764
FEIN #23-3006268 1-800-345-6094

INVOICE NO.	PAGE
376804	1

INVOICE DATE
05/31/18

CUSTOMER NUMBER
IA0066-001

BILL TO
UNIVERSITY OF IOWA
ATTN: ACCOUNTS PAYABLE

acntpay@uiowa.edu
IOWA CITY, IA 52242

WORK SITE
UNIVERSITY OF IOWA
100 GRAND AVENUE

IOWA CITY, IA 52242

ISO 17025 Accredited! For Controlled Environment Testing & Calibration

DUNS 02-1240171
WE ACCEPT
VISA
MASTERCARD
AMERICAN EXPRESS

PURCHASE ORDER NUMBER	TECH#	WORK DATE(S)		JOB #
1001916482	326	03/09/18	03/16/18	6004-166202

QUANTITY	DESCRIPTION	U/M	UNIT PRICE	AMOUNT
	Per Quote: 6004-166202-2			

1.00	Hepa Supply Filter 24x48x5-7/8	EA	420.00	420.00
1.00	Hepex Bag	EA	150.00	150.00
1.00	Hepa Exhaust Filter 24x18x5-7/8	EA	310.00	310.00
1.00	Motor	EA	715.00	715.00
1.00	Capacitor & Bracket	EA	20.00	20.00
4.00	Labor-Supply/Exhaust Filter change, motor & Capacitor	HR	95.00	380.00

Customer will be assessed a finance charge of 1.5% per month (18% APR) for any purchase which remains unpaid 25 days after due date.

TAXES AS APPLICABLE SHOULD BE PAID DIRECTLY TO THE APPROPRIATE TAXING AGENCY
FORM 101

WWW.ENVSERVICES.COM

EQUAL OPPORTUNITY EMPLOYER

SUBTOTAL
S & H
TAX
TOTAL
PAYMENT TERMS NET DAYS

PLEASE DETACH THIS PORTION AND RETURN WITH YOUR PAYMENT

BILL TO

WORK SITE

GROUP 230152
82944421

REMIT TO:

ENV SERVICES, INC.
c/o MUNICIPAL AUTHORITY OF SOUTH HEIDELBERG
P.O. BOX 37836
BALTIMORE, MD 21297-7836

INVOICE #:
INVOICE AMT:
INVOICE DATE:
CUSTOMER #:

Customer will be assessed a finance charge of 1.5% per month (18% APR) for any purchase which remains unpaid 25 days after due date.

PLEASE REMIT TO:
ENV SERVICES, INC.
c/o MUNICIPAL AUTHORITY OF SOUTH HEIDELBERG
P.O. BOX 37836
BALTIMORE, MD 21297-7836

INVOICE

dba ENV Services Testing & Certification, Inc.
2880 Bergey Road, Suite K, Hatfield, PA 19440-1764
FEIN #23-3006268 1-800-345-6094

INVOICE NO.	PAGE
376804	2

INVOICE DATE
05/31/18

CUSTOMER NUMBER
IA0066-001

BILL TO
UNIVERSITY OF IOWA
ATTN: ACCOUNTS PAYABLE

acntpay@uiowa.edu
IOWA CITY, IA 52242

WORK SITE
UNIVERSITY OF IOWA
100 GRAND AVENUE

IOWA CITY, IA 52242

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AMERICAN EXPRESS

PURCHASE ORDER NUMBER	TECH#	WORK DATE(S)		JOB #
1001916482	326	03/09/18	03/16/18	6004-166202

QUANTITY	DESCRIPTION	U/M	UNIT PRICE	AMOUNT
1.00	SN: 25874XW MRF 491 Biological Cabinet Tested	EA	150.00	150.00
1.00	SN: 25874XW MRF 491 Unit Certified Hepa Supply Filter 18x48x5-7/8	EA	430.00	430.00
1.00	Hepa Exhaust Filter 18x18x11-1/2	EA	445.00	445.00
2.00	Labor-Filter Change SN: SL43127V	HR	95.00	190.00

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FORM 101

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EQUAL OPPORTUNITY EMPLOYER

SUBTOTAL
S & H
TAX
TOTAL
PAYMENT TERMS NET DAYS

PLEASE DETACH THIS PORTION AND RETURN WITH YOUR PAYMENT

BILL TO

WORK SITE

REMIT TO:

ENV SERVICES, INC.
c/o MUNICIPAL AUTHORITY OF SOUTH HEIDELBERG
P.O. BOX 37836
BALTIMORE, MD 21297-7836

INVOICE #:
INVOICE AMT:
INVOICE DATE:
CUSTOMER #:

Customer will be assessed a finance charge of 1.5% per month (18% APR) for any purchase which remains unpaid 25 days after due date.

PLEASE REMIT TO:
ENV SERVICES, INC.
c/o MUNICIPAL AUTHORITY OF SOUTH HEIDELBERG
P.O. BOX 37836
BALTIMORE, MD 21297-7836

INVOICE

dba ENV Services Testing & Certification, Inc.
2880 Bergey Road, Suite K, Hatfield, PA 19440-1764
FEIN #23-3006268 1-800-345-6094

INVOICE NO.	PAGE
376804	3

INVOICE DATE: 05/31/18

CUSTOMER NUMBER: IA0066-001

DUNS 02-1240171

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AMERICAN EXPRESS

BILL TO: UNIVERSITY OF IOWA
ATTN: ACCOUNTS PAYABLE

acntpay@uiowa.edu
IOWA CITY, IA 52242

WORK SITE: UNIVERSITY OF IOWA
100 GRAND AVENUE

IOWA CITY, IA 52242

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PURCHASE ORDER NUMBER	TECH#	WORK DATE(S)		JOB #
1001916482	326	03/09/18	03/16/18	6004-166202

QUANTITY	DESCRIPTION	U/M	UNIT PRICE	AMOUNT
1.00	MRF 587 Biological Cabinet Tested SN: SL-43128-V 587A/Clrm MRF Unit Certified	EA	150.00	150.00
1.00	Hepa Supply Filter 18x48x5-7/8	EA	430.00	430.00
1.00	Hepa Exhaust Filter 18x18x11-1/2	EA	445.00	445.00
2.00	Labor-Filter Change SN: SL43126V MRF 587	HR	95.00	190.00

Customer will be assessed a finance charge of 1.5% per month (18% APR) for any purchase which remains unpaid 25 days after due date.

TAXES AS APPLICABLE SHOULD BE PAID DIRECTLY TO THE APPROPRIATE TAXING AGENCY

FORM 161

WWW.ENVSERVICES.COM

EQUAL OPPORTUNITY EMPLOYER

SUBTOTAL
S & H
TAX
TOTAL
PAYMENT TERMS NET DAYS

PLEASE DETACH THIS PORTION AND RETURN WITH YOUR PAYMENT

BILL TO

WORK SITE

REMIT TO:

ENV SERVICES, INC.
c/o MUNICIPAL AUTHORITY OF SOUTH HEIDELBERG
P.O. BOX 37836
BALTIMORE, MD 21297-7836

INVOICE #:
INVOICE AMT:
INVOICE DATE:
CUSTOMER #:

Customer will be assessed a finance charge of 1.5% per month (18% APR) for any purchase which remains unpaid 25 days after due date.

PLEASE REMIT TO:
ENV SERVICES, INC.
c/o MUNICIPAL AUTHORITY OF SOUTH HEIDELBERG
P.O. BOX 37836
BALTIMORE, MD 21297-7836

INVOICE

dba ENV Services Testing & Certification, Inc.
2880 Bergey Road, Suite K, Hatfield, PA 19440-1764
FEIN #23-3006268 1-800-345-6094

INVOICE NO.	PAGE
376804	4

INVOICE DATE
05/31/18

CUSTOMER NUMBER
IA0066-001

DUNS 02-1240171
WE ACCEPT
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MASTERCARD
AMERICAN EXPRESS

BILL TO
UNIVERSITY OF IOWA
ATTN: ACCOUNTS PAYABLE

acntpay@uiowa.edu
IOWA CITY, IA 52242

WORK SITE
UNIVERSITY OF IOWA
100 GRAND AVENUE

IOWA CITY, IA 52242

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For Controlled Environment Testing & Calibration

PURCHASE ORDER NUMBER	TECH#	WORK DATE(S)		JOB #
1001916482	326	03/09/18	03/16/18	6004-166202

QUANTITY	DESCRIPTION	U/M	UNIT PRICE	AMOUNT
1.00	Biological Cabinet Tested SN: SL43126V 587A/Clrm MRF Unit Certified	EA	150.00	150.00
1.00	Hepa Exhaust Filter 18-18-11-1/2	EA	445.00	445.00
1.00	Hepa Supply Filter 18x48x5-7/8	EA	430.00	430.00
2.00	Labor-Filter Change SN: SL43126V MRF 587	HR	95.00	190.00
1.00	Biological Cabinet Tested	EA	150.00	150.00

Customer will be assessed a finance charge of 1.5% per month (18% APR) for any purchase which remains unpaid 25 days after due date.

TAXES AS APPLICABLE SHOULD BE PAID DIRECTLY TO THE APPROPRIATE TAXING AGENCY
FORM 101

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EQUAL OPPORTUNITY EMPLOYER

SUBTOTAL
S & H
TAX
TOTAL
PAYMENT TERMS NET DAYS

PLEASE DETACH THIS PORTION AND RETURN WITH YOUR PAYMENT

BILL TO

WORK SITE

REMIT TO:

ENV SERVICES, INC.
c/o MUNICIPAL AUTHORITY OF SOUTH HEIDELBERG
P.O. BOX 37836
BALTIMORE, MD 21297-7836

INVOICE #:
INVOICE AMT:
INVOICE DATE:
CUSTOMER #:

Customer will be assessed a finance charge of 1.5% per month (18% APR) for any purchase which remains unpaid 25 days after due date.

PLEASE REMIT TO:
ENV SERVICES, INC.
c/o MUNICIPAL AUTHORITY OF SOUTH HEIDELBERG
P.O. BOX 37836
BALTIMORE, MD 21297-7836

INVOICE

dba ENV Services Testing & Certification, Inc.
2880 Bergey Road, Suite K, Hatfield, PA 19440-1764
FEIN #23-3006268 1-800-345-6094

INVOICE NO.	PAGE
376804	5

INVOICE DATE
05/31/18

CUSTOMER NUMBER
IA0066-001

DUNS 02-1240171
WE ACCEPT
VISA
MASTERCARD
AMERICAN EXPRESS

BILL TO
UNIVERSITY OF IOWA
ATTN: ACCOUNTS PAYABLE

acntpay@uiowa.edu
IOWA CITY, IA 52242

WORK SITE
UNIVERSITY OF IOWA
100 GRAND AVENUE

IOWA CITY, IA 52242

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PURCHASE ORDER NUMBER	TECH#	WORK DATE(S)		JOB #
1001916482	326	03/09/18	03/16/18	6004-166202

QUANTITY	DESCRIPTION	U/M	UNIT PRICE	AMOUNT
	SN: SL43126V 587A/Clrm MRF Unit Certified			
1.00	Hepa Filter 36x48x5-7/8	EA	520.00	520.00
2.00	Labor-Filter Change SN: 66502 MRF 467	HR	95.00	190.00
1.00	Laminar Flow Hood Tested SN: 66502 MRF 467 Unit Certified	EA	95.00	95.00

Customer will be assessed a finance charge of 1.5% per month (18% APR) for any purchase which remains unpaid 25 days after due date.

TAXES AS APPLICABLE SHOULD BE PAID DIRECTLY TO THE APPROPRIATE TAXING AGENCY

FORM 101

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EQUAL OPPORTUNITY EMPLOYER

SUBTOTAL
S & H
TAX
TOTAL
PAYMENT TERMS NET DAYS

PLEASE DETACH THIS PORTION AND RETURN WITH YOUR PAYMENT

BILL TO

WORK SITE

REMIT TO:

ENV SERVICES, INC.
c/o MUNICIPAL AUTHORITY OF SOUTH HEIDELBERG
P.O. BOX 37836
BALTIMORE, MD 21297-7836

INVOICE #:
INVOICE AMT:
INVOICE DATE:
CUSTOMER #:

Customer will be assessed a finance charge of 1.5% per month (18% APR) for any purchase which remains unpaid 25 days after due date.

PLEASE REMIT TO:
ENV SERVICES, INC.
c/o MUNICIPAL AUTHORITY OF SOUTH HEIDELBERG
P.O. BOX 37836
BALTIMORE, MD 21297-7836

INVOICE

dba ENV Services Testing & Certification, Inc.
2880 Bergey Road, Suite K, Hatfield, PA 19440-1764
FEIN #23-3006268 1-800-345-6094

INVOICE NO.	PAGE
376804	6

INVOICE DATE: 05/31/18

CUSTOMER NUMBER: IA0066-001

BILL TO
UNIVERSITY OF IOWA
ATTN: ACCOUNTS PAYABLE

acntpay@uiowa.edu
IOWA CITY, IA 52242

WORK SITE
UNIVERSITY OF IOWA
100 GRAND AVENUE

IOWA CITY, IA 52242

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DUNS 02-1240171
WE ACCEPT
VISA
MASTERCARD
AMERICAN EXPRESS

PURCHASE ORDER NUMBER	TECH#	WORK DATE(S)		JOB #
1001916482	326	03/09/18	03/16/18	6004-166202

QUANTITY	DESCRIPTION	U/M	UNIT PRICE	AMOUNT
1.00	On Site Service Fee	EA	20.00	20.00

Customer will be assessed a finance charge of 1.5% per month (18% APR) for any purchase which remains unpaid 25 days after due date.

TAXES AS APPLICABLE SHOULD BE PAID DIRECTLY TO THE APPROPRIATE TAXING AGENCY
FORM 101

WWW.ENVSERVICES.COM

EQUAL OPPORTUNITY EMPLOYER

SUBTOTAL	6,615.00
S & H	370.25
TAX	.00
TOTAL	6,985.25

PAYMENT TERMS NET 30 DAYS

PLEASE DETACH THIS PORTION AND RETURN WITH YOUR PAYMENT

BILL TO UNIVERSITY OF IOWA

WORK SITE UNIVERSITY OF IOWA

REMIT TO:

ENV SERVICES, INC.
c/o MUNICIPAL AUTHORITY OF SOUTH HEIDELBERG
P.O. BOX 37836
BALTIMORE, MD 21297-7836

INVOICE #:	376804
INVOICE AMT:	6,985.25
INVOICE DATE:	05/31/18
CUSTOMER #:	IA0066

Customer will be assessed a finance charge of 1.5% per month (18% APR) for any purchase which remains unpaid 25 days after due date.

AP/PO PeopleSoft Web Applications

Your path: Home > Payment

User options | Help

Payment details for voucher: 82944421

Voucher ID	Vendor ID	Remit LOC	Vendor Name	Gross Voucher Amt.	Payment Handling Code
82944421	0000239278	002	ENV Services Incorporated	$6,985.25	AC

Payment Status	Payment Information	Invoice #	Invoice Date	Remit to	Amt From Voucher
PAID	ACH:584827 Dt: 06/29/2018 Amt: $7,825.25	376804	05/31/2018	Detail	$6,985.25

New Payment Search
AP-PO Web Applications Home Page
Self-Service

(WALTERSC) Logoff

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OLYMPUS

Olympus America Inc.
48 Woerd Ave
Waltham MA, 02453, United States
Tel: (800) 225-8330
ordersmicro@olympus-ossa.com
http://www.olympus-lifescience.com

PLEASE REMIT USD CHECKS TO:
Olympus America Inc.
DEPT 3595
PO BOX 123595
Dallas, TX 75312-3595

GROUP 227822 82869439

Invoice

Invoice Number	IN-U159496
Date	Mar 6, 2018

Bill to:

University of Iowa
202 PCO Accounts Payable and Travel
acntpay@uiowa.edu
Iowa City, IA 52242-2500, United States

Ship to:

University of Iowa Obstetrics & Gynecology Lab
200 Hawkins Drive Code MRF-463-2
Attn Donna Santillan PO # 1001913591
Iowa City, IA 52242, United States

Terms	Due Date	PO #	Incoterms	Currency	Sales Order #
Net 30	Apr 5, 2018	1001913591	FOB-DEST	U.S. Dollar	SO-U1139686
Contact Name	**Contact Phone**	**Contact Email**	**Sales Rep**	**Sales Rep Phone**	**Sales Rep Email**
Joshua Hannan	3193843342	acntpay@uiowa.edu	Scott Carpenter	+1(319)333-8121	scott.carpenter@olympus-ossa.com
Ship Via	**Freight Terms**	**Collect Account #**	**Tracking Number**	**Additional Tracking Number**	
UPS Ground	Prepaid				

Item	P/N	Qty Ordered	Qty Shipped	B/O	Description	Tax	Unit Price	Discount	Net Unit Price	Extended Price
N4244000	IX73P2F	1	1	0	06-486796 IX73P2F; MICROSCOPE FRAME WITH 2 DECKS S/N(s): 7M45051	N	6,447.60	0%	6,447.60	6,447.60
N5145100	5-UR416-1	1	1	0	IX3-RFACS-1-2; CODED IX3FLUORESCENCE TURRET	N	1,072.80	0%	1,072.80	1,072.80
N5145400	U-IT115-1	1	1	0	IX3-CAS-1-2; MAGNIFICATION CHANGER DECK MODULE	N	1,679.40	0%	1,679.40	1,679.40
N4226900	5-UL604	1	1	0	U-LLGAD; LIGHT GUIDE ADAPTER FOR U-HGLGPS	N	284.40	0%	284.40	284.40
N4257600	2-U1007	2	2	0	WHN10X-1-7;10X EYEPIECE FOR BX,IX HI EYEPNT,RETSHELF,FN:22	N	189.00	0%	189.00	378.00
N4244200	5-UL365	1	1	0	IX3-ILL; 100W TRANSMITTED LIGHT PILLAR FOR IX83/ IX73/IX53	N	1,569.60	0%	1,569.60	1,569.60
3826400	9-U115	1	1	0	45-LBD-IF; 45MM LIGHT BALANCING DAYLIGHT FILTER	N	62.10	0%	62.10	62.10
N4265600	9-U734	1	1	0	45FR; 45MM FROSTED DIFFUSION FILTER, IX3	N	28.80	0%	28.80	28.80
N2757700	5-UL1237	1	1	0	U-LH100L-3-7;12V/100W HALOGEN LAMPHOUSE,0.8M LONG CORD,WEEE	N	584.10	0%	584.10	584.10
54251	OSS-54251	2	2	0	54251; EVA 64623 HLX, 12V 100W, Tungsten Halogen, Low Volt	N	3.80	0%	3.80	7.60
N2665300	5-UL705	1	1	0	U-RMT-1-5; EXTENSION CABLE FOR HAL LAMPHOUSE, 2M	N	107.10	0%	107.10	107.10

OLYMPUS

Olympus America Inc.
48 Woerd Ave
Waltham MA, 02453, United States
Tel: (800) 225-8330
ordersmicro@olympus-ossa.com
http://www.olympus-lifescience.com

Invoice

Invoice Number	IN-U159496
Date	Mar 6, 2018

Item	P/N	Qty Ordered	Qty Shipped	B/O	Description	Tax	Unit Price	Discount	Net Unit Price	Extended Price
N2659500	5-UT410	1	1	0	TH4-100-1-5;12V/100W POWER SUPPLY,100V INPUT, ROHS	N	531.00	0%	531.00	531.00
N4244300	4-U320	1	1	0	IX3-SVR;RIGHT HANDLE STAGE	N	1,387.80	0%	1,387.80	1,387.80
N4244600	4-U323	1	1	0	IX3-HOS;SLIDE HOLDER	N	180.90	0%	180.90	180.90
N5160800	4-U324	1	1	0	IX3-HOW-2;WELL PLATE HOLDER	N	180.90	0%	180.90	180.90
U-R380	U-R380	1	1	0	IX3-D6RES;6-POSITION IX NOSEPIECE CODED,DIC	N	722.70	0%	722.70	722.70
N4247100	U-R381	1	1	0	U-CB5S; CONTROL BOX FOR IX3 CODED NOSEPIECE	N	1,587.60	0%	1,587.60	1,587.60
N4248400	U-I120C	2	2	0	U-COCBL100;CABLE FOR CODED UNITS 100CM	N	183.60	0%	183.60	367.20
N4248300	U-R380C	1	1	0	U-NPCBL100;CABLE FOR IX3-D6RES 100CM	N	183.60	0%	183.60	183.60
403672	OCD-403672	1	1	0	403672; Straight Through RS232 DB9 Serial Cable, 10 ft	N	7.60	0%	7.60	7.60
1460500	UYCP-11	3	3	0	UYCP-11;US STYLE 3-PRONG POWER CORD	N	13.50	0%	13.50	40.50
N1479100	1-U2C522	1	1	0	UPLFLN4XPH;U PLAN FLUORITE 4X PHASE OBJ,PHL,NA 0.13 WD 17MM	N	544.50	0%	544.50	544.50
N1492900	1-U2C375	1	1	0	LUCPLFLN20XPH; LWD UPLAN FLUOR 20X PH OBJ, Ph1, NA 0.45, WD 6.6-7.8mm, W/CC	N	1,269.90	0%	1,269.90	1,269.90
N1493000	1-U2C377	1	1	0	LUCPLFLN40XPH; LWD UPLAN FLUOR 40X PH OBJ, Ph2, NA 0.6, WD 3.0-4.2, W/CC	N	1,838.70	0%	1,838.70	1,838.70
N2712100	U-M723	1	1	0	U-FUNA; BX3 UV NARROW (DAPI, HOECHST, ALEXAFLUOR405), 375/30x, 410DM, 435/30m	N	1,184.40	0%	1,184.40	1,184.40
N2712800	U-M7553	1	1	0	U-FBNA; BX3 BLUE NARROW (EGFP, FITC, ALEXAFLUOR488, JC-1, EYFP), 482/25x, 505DM, 530/40m	N	1,184.40	0%	1,184.40	1,184.40
N2713100	U-M7673	1	1	0	U-FGNA; BX3 GREEN NARROW (DsRED, ALEXAFLUOR568, mCHERRY, TRITC), 545/10x, 570DM, 600/50m	N	1,184.40	0%	1,184.40	1,184.40
7-DP74-CSS	7-DP74-CSS	1	1	0	DP74 w/ cellSens STD; DP74 Color CMOS Camera, Cooled 20.8 MP Pixel-Shift, 60 FPS, CELLSENS STD LICENSE	N	9,473.00	5%	8,999.35	8,999.35
N5667800	U-V163C28	1	1	0	U-TV0.63XC-1-8; Camera Adapter, 0.63X Lens, C-Mount Thread, Parfocality Adjustment	N	621.00	0%	621.00	621.00
N1133300	COVER020	1	1	0	COVER-020; DUST COVER, HOOD TYPE FOR IX2 MICROSCOPE	N	15.30	0%	15.30	15.30
N5669500	CKX53SF-1-2	1	1	0	CKX53SF-1-2; MICROSCOPE FRAME W/ TRI,STAGE,NOSEPC,LED ILL, EYEPIECES	N	2,708.10	0%	2,708.10	2,708.10

OLYMPUS

Olympus America Inc.
48 Woerd Ave
Waltham MA, 02453, United States
Tel: (800) 225-8330
ordersmicro@olympus-ossa.com
http://www.olympus-lifescience.com

Invoice

Invoice Number	IN-U159496
Date	Mar 6, 2018

Item	P/N	Qty Ordered	Qty Shipped	B/O	Description	Tax	Unit Price	Discount	Net Unit Price	Extended Price
					S/N(s): 7M40632					
N5229100	1-U2PC522	1	1	0	UPLFLN4XIPC; U PLAN FLUORITE 4X PHASE IPC OBJ, NA 0.13, WD 16.4MM	N	548.10	0%	548.10	548.10
N5229200	1-U2PC144	1	1	0	CACHN10XIPC; ACHROMAT 10X PHASE IPC OBJ,NA 0.25,WD 8.8MM	N	243.00	0%	243.00	243.00
N5229300	1-U2PC145	1	1	0	LCACHN20XIPC; LWD ACHROMAT 20X PHASE IPC OBJ,NA0.4,WD 3.2MM	N	477.90	0%	477.90	477.90
N5229400	1-U2PC147	1	1	0	LCACHN40XIPC; LWD ACHROMAT 40X PH IPC OBJ, NA0.55,WD 2.2MM	N	891.00	0%	891.00	891.00
N5228300	4-LC310	1	1	0	CKX3-MVR; CKX53 ATTACHABLE MECHANICAL STAGE	N	633.60	0%	633.60	633.60
N5228500	U-IL200	1	1	0	CKX3-SLP; PHASE CONTRAST SLIDER, PRE-CENTERED FOR CKX53,41,31	N	69.30	0%	69.30	69.30
N5228600	U-CD500	1	1	0	CKX3-SLPIC; INVERSION CONTRAST RING SLIT FOR CKX53	N	156.60	0%	156.60	156.60
2143100	4-LC106	1	1	0	CK2-SS;STAGE EXTENSION PLATE FOR CK2,CK30,CK40	N	25.20	0%	25.20	25.20
1460500	UYCP-11	1	1	0	UYCP-11; US STYLE 3-PRONG POWER CORD	N	13.50	0%	13.50	13.50
N1153000	COVER012	1	1	0	COVER012; DUST COVER FOR CKX MICROSCOPES	N	15.30	0%	15.30	15.30
N5670000	CX33RTFS2	1	1	0	CX33RTFS2; CX33 Upright Microscope Set, Trinocular Head, Right-Hand Stage Controller, 4x, 10x, 40x Objectives, LED Illumination S/N(s): 7G40978	N	1,836.00	10%	1,652.40	1,652.40
OMT-005	OMT-005	1	1	0	MT-005;LOGO CLOTH DUSTCOVER 22X21, ANTI-STATIC FOR CX	N	19.00	0%	19.00	19.00
1460500	UYCP-11	1	1	0	UYCP-11; US STYLE 3-PRONG POWER CORD	N	13.50	0%	13.50	13.50

Total Savings on this Invoice : **$657.25**

% of Savings on this Invoice : **1.55%**

OLYMPUS

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48 Woerd Ave
Waltham MA, 02453, United States
Tel: (800) 225-8330
ordersmicro@olympus-ossa.com
http://www.olympus-lifescience.com

Invoice

Invoice Number	IN-U159496
Date	Mar 6, 2018

Contract Name: University of Iowa
Contract Number: 3-4460
Contract Start Date: 2012-08-01 00:00:00
Contract End Date: 2018-12-31 00:00:00
Contract Shipping Term: FOB: Destination
Special Contract Term: Net 30

*** Open Market Items**

All other terms on this quotation are not applicable.

Olympus accepts Visa, Mastercard, Discover and American Express.
Please call (781) 419-3900 to make a payment by credit card.

FOR USD PAYMENTS BY US$ Fed Wire and ACH:
Beneficiary Bank: The Bank of Tokyo-Mitsubishi UFJ Ltd.
Beneficiary Bank ABA#: 026009632
Beneficiary: Olympus America Inc.
Beneficiary Account#: 810004585

FOR INTERNATIONAL PAYMENTS IN USD:
Beneficiary Bank: The Bank of Tokyo-Mitsubishi UFJ Ltd.
Beneficiary Bank SWIFT Code: BOTKUS33
Beneficiary: Olympus America Inc.
Beneficiary Account#: 810004585

- **Orders and warranty for Olympus equipment are accepted based on Olympus terms and conditions. You can view these terms at http://www.olympus-lifescience.com/en/product-terms-and-conditions/.**
- **All Returns must be authorized by Olympus. Please contact us to receive a RMA number.**
- **Orders received and confirmed for custom manufactured products may not be cancelled or returned without written authorization from Olympus.**
- **Olympus reserves the right to charge a 20% restocking fee if confirmed order is cancelled or returned.**
- **Equipment may not be resold to third party and / or exported without the explicit and written consent of Olympus. Final destination and application must be disclosed.**

Subtotal :	$41,719.75
Shipping :	0.00
Tax (0%) :	0.00
Grand Total (USD) :	**$41,719.75**

AP/PO PeopleSoft Web Applications

Payment details for voucher: 82869439

Voucher ID	Vendor ID	Remit LOC	Vendor Name	Gross Voucher Amt.	Payment Handling Code
82869439	0000467805	002	Olympus America Inc	$41,719.75	AC

Payment Status	Payment Information	Invoice #	Invoice Date	Remit to	Amt From Voucher
PAID	ACH:565656 Dt: 04/04/2018 Amt: $41,744.05	IN-UI59496	03/06/2018	Detail	$41,719.75

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OLYMPUS

Olympus America Inc.
48 Woerd Ave
Waltham MA, 02453, United States
Tel: (800) 225-8330
ordersmicro@olympus-ossa.com
http://www.olympus-lifescience.com

PLEASE REMIT USD CHECKS TO:
Olympus America Inc.
DEPT 3595
PO BOX 123595
Dallas, TX 75312-3595

Invoice

Invoice Number	IN-U165622
Date	May 17, 2018

Bill to:

University of Iowa
202 PCO Accounts Payable and Travel
acntpay@uiowa.edu
Iowa City, IA 52242-2500, United States

Ship to:

University of Iowa Obstetrics & Gynecology Lab
200 Hawkins Drive Code MRF-463-2
Attn Donna Santillan PO # 1001913591
Iowa City, IA 52242, United States

Terms	Due Date	PO #	Incoterms	Currency	Sales Order #
Net 30	Jun 16, 2018	1001913591	FOB-DEST	U.S. Dollar	SO-U1139686
Contact Name	**Contact Phone**	**Contact Email**	**Sales Rep**	**Sales Rep Phone**	**Sales Rep Email**
Joshua Hannan	3193843342	acntpay@uiowa.edu	Scott Carpenter	+1(319)333-8121	scott.carpenter@olympus-ossa.com
Ship Via	**Freight Terms**	**Collect Account #**	**Tracking Number**	**Additional Tracking Number**	
UPS Ground	Prepaid		1Z2E12380300426057		

Item	P/N	Qty Ordered	Qty Shipped	B/O	Description	Tax	Unit Price	Extended Price
N2249300	1-U2C524	1	1	0	06-500426 UPLFLN10X2PH;U PLAN FL 10X PHASE OBJ.;PH1, NA 0.3, WD 10MM	N	979.20	979.20

GROUP 229971
8293693

OLYMPUS

Olympus America Inc.
48 Woerd Ave
Waltham MA, 02453, United States
Tel: (800) 225-8330
ordersmicro@olympus-ossa.com
http://www.olympus-lifescience.com

Invoice

Invoice Number	IN-U165622
Date	May 17, 2018

Contract Name: University of Iowa
Contract Number: 3-4460
Contract Start Date: 2012-08-01 00:00:00
Contract End Date: 2018-12-31 00:00:00
Contract Shipping Term: FOB: Destination
Special Contract Term: Net 30

* Open Market Items

All other terms on this quotation are not applicable.

Olympus accepts Visa, Mastercard, Discover and American Express.
Please call (781) 419-3900 to make a payment by credit card.

FOR USD PAYMENTS BY US$ Fed Wire and ACH:
Beneficiary Bank: The Bank of Tokyo-Mitsubishi UFJ Ltd.
Beneficiary Bank ABA#: 026009632
Beneficiary: Olympus America Inc.
Beneficiary Account#: 810004585

FOR INTERNATIONAL PAYMENTS IN USD:
Beneficiary Bank: The Bank of Tokyo-Mitsubishi UFJ Ltd.
Beneficiary Bank SWIFT Code: BOTKUS33
Beneficiary: Olympus America Inc.
Beneficiary Account#: 810004585

- Orders and warranty for Olympus equipment are accepted based on Olympus terms and conditions. You can view these terms at http://www.olympus-lifescience.com/en/product-terms-and-conditions/.
- All Returns must be authorized by Olympus. Please contact us to receive a RMA number.
- Orders received and confirmed for custom manufactured products may not be cancelled or returned without written authorization from Olympus.
- Olympus reserves the right to charge a 20% restocking fee if confirmed order is cancelled or returned.
- Equipment may not be resold to third party and / or exported without the explicit and written consent of Olympus. Final destination and application must be disclosed.

Subtotal :	$979.20
Shipping :	0.00
Tax (0%) :	0.00
Grand Total (USD) :	**$979.20**

AP/PO PeopleSoft Web Applications

Payment details for voucher: 82936953

Voucher ID	Vendor ID	Remit LOC	Vendor Name	Gross Voucher Amt.	Payment Handling Code
82936953	0000467805	002	Olympus America Inc	$979.20	AC

Payment Status	Payment Information	Invoice #	Invoice Date	Remit to	Amt From Voucher
PAID	ACH:582598 Dt: 06/20/2018 Amt: $979.20	IN-U165622	05/17/2018	Detail	$979.20

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OLYMPUS

Olympus America Inc.
48 Woerd Ave
Waltham MA, 02453, United States
Tel: (800) 225-8330
ordersmicro@olympus-ossa.com
http://www.olympus-lifescience.com

PLEASE REMIT USD CHECKS TO:
Olympus America Inc.
DEPT 3595
PO BOX 123595
Dallas, TX 75312-3595

Invoice

Invoice Number	IN-U171406
Date	Jul 25, 2018

Bill to:

University of Iowa
202 PCO Accounts Payable and Travel
acntpay@uiowa.edu
Iowa City, IA 52242-2500, United States

Ship to:

University of Iowa Obstetrics & Gynecology Lab
200 Hawkins Drive Code MRF-463-2
Attn Donna Santillan PO # 1001913591
Iowa City, IA 52242, United States

Terms	Due Date	PO #	Incoterms	Currency	Sales Order #
Net 30	Aug 24, 2018	1001913591	FOB-DEST	U.S. Dollar	SO-U1139686
Contact Name	**Contact Phone**	**Contact Email**	**Sales Rep**	**Sales Rep Phone**	**Sales Rep Email**
Joshua Hannan	3193843342	acntpay@uiowa.edu	Scott Carpenter	+1(319)333-8121	scott.carpenter@olympus-ossa.com
Ship Via	**Freight Terms**	**Collect Account #**	**Tracking Number**	**Additional Tracking Number**	
UPS Ground	Prepaid				

Item	P/N	Qty Ordered	Qty Shipped	B/O	Description	Tax	Unit Price	Discount	Net Unit Price	Extended Price
010-00440R	OEX-289 Part of Line 3	1	1	0	06-513361 X-Cite Xylis 365 system with 1.5m LLG, Req Adapter Note: Item# OEX-189 has been discontinued and replaced by item# OEX-289	N	6,995.00	3%	6,785.15	6,785.15

Total Savings on this Invoice : **$209.85**

% of Savings on this Invoice : **3%**

GROUP 232660
83023743

OLYMPUS

Olympus America Inc.
48 Woerd Ave
Waltham MA, 02453, United States
Tel: (800) 225-8330
ordersmicro@olympus-ossa.com
http://www.olympus-lifescience.com

Invoice

Invoice Number	IN-U171406
Date	Jul 25, 2018

Contract Name: University of Iowa
Contract Number: 3-4460
Contract Start Date: 2012-08-01 00:00:00
Contract End Date: 2018-12-31 00:00:00
Contract Shipping Term: FOB: Destination
Special Contract Term: Net 30

*** Open Market Items**

All other terms on this quotation are not applicable.

Olympus accepts Visa, Mastercard, Discover and American Express.
Please call (781) 419-3900 to make a payment by credit card.

FOR USD PAYMENTS BY US$ Fed Wire and ACH:
Beneficiary Bank: MUFG Bank, Ltd.
Beneficiary Bank ABA#: 026009632
Beneficiary: Olympus America Inc.
Beneficiary Account#: 810004585

FOR INTERNATIONAL PAYMENTS IN USD:
Beneficiary Bank: MUFG Bank, Ltd.
Beneficiary Bank SWIFT Code: BOTKUS33
Beneficiary: Olympus America Inc.
Beneficiary Account#: 810004585

- **Orders and warranty for Olympus equipment are accepted based on Olympus terms and conditions. You can view these terms at http://www.olympus-lifescience.com/en/product-terms-and-conditions/.**
- **All Returns must be authorized by Olympus. Please contact us to receive a RMA number.**
- **Orders received and confirmed for custom manufactured products may not be cancelled or returned without written authorization from Olympus.**
- **Olympus reserves the right to charge a 20% restocking fee if confirmed order is cancelled or returned.**
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Subtotal :	**$6,785.15**
Shipping :	0.00
Tax (0%) :	0.00
Grand Total (USD) :	**$6,785.15**

AP/PO PeopleSoft Web Applications

Payment details for voucher: 83023743

Voucher ID	Vendor ID	Remit LOC	Vendor Name	Gross Voucher Amt.	Payment Handling Code
83023743	0000467805	002	Olympus America Inc	$6,785.15	AC

Payment Status	Payment Information	Invoice #	Invoice Date	Remit to	Amt From Voucher
PAID	ACH:600901 Dt: 09/17/2018 Amt: $6,785.15	IN-U171406	07/25/2018	Detail	$6,785.15

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OLYMPUS

Olympus America Inc.
3500 Corporate Parkway
Center Valley PA, 18034, United States
Tel: (800) 225-8330
ordersmicro@olympus-ossa.com
http://www.olympus-lifescience.com

PLEASE REMIT USD CHECKS TO:
Olympus America Inc.
DEPT 3595
PO BOX 123595
Dallas, TX 75312-3595

Invoice

Invoice Number	IN-US-CV-D-1262
Date	Aug 3, 2018

Bill to:

University of Iowa
202 PCO Accounts Payable and Travel
acntpay@uiowa.edu
Iowa City, IA 52242-2500, United States

Ship to:

University of Iowa Hospitals and Clinics
Obstetrics & Gynecology Lab
200 Hawkins Dr MRF 463
Iowa City, IA 52242, United States

Terms	Due Date	PO #	Incoterms	Currency	Sales Order #
Net 30	Sep 2, 2018	1001954273	EXW-ORIGIN	U.S. Dollar	SO-US-CV-D-1137
Contact Name	**Contact Phone**	**Contact Email**	**Sales Rep**	**Sales Rep Phone**	**Sales Rep Email**
Joshua Hannan	3193843342	acntpay@uiowa.edu	Scott Carpenter	+1(319)333-8121	scott.carpenter@olympus-ossa.com
Ship Via	**Freight Terms**	**Collect Account #**	**Tracking Number**	**Additional Tracking Number**	
Invoice Only	Prepaid				

Item	P/N	Qty Ordered	Qty Shipped	B/O	Description	Tax	Unit Price	Discount	Net Unit Price	Extended Price
ZDM-N1510300	ZDM-3-U245	1	1	0	U-BI90CT-1-2;GX/IX BINOC. OBSERV. TUBE W/CENTER TELESCOPE	N	1,469.00	30%	1,028.30	1,028.30
ZDM-4016000	ZDM-6-U220	1	1	0	IX-ULWCD;IX LONG WD PHASE CONDENSER,NA 0.30,WD 73MM, 4 POSIT	N	984.00	30%	688.80	688.80
ZDM-N4245200	ZDM-5-UR403	1	1	0	IX3-RFA;STRAIGHT ILLUMINATOR	N	1,173.00	30%	821.10	821.10

Total Savings on this Invoice : **$1,087.80**

% of Savings on this Invoice : **30%**

GROUP 231891
8295834

OLYMPUS

Olympus America Inc.
3500 Corporate Parkway
Center Valley PA, 18034, United States
Tel: (800) 225-8330
ordersmicro@olympus-ossa.com
http://www.olympus-lifescience.com

Invoice

Invoice Number	IN-US-CV-D-1262
Date	Aug 3, 2018

Contract Name: University of Iowa
Contract Number: 3-4460
Contract Start Date: 2012-08-01 00:00:00
Contract End Date: 2018-12-31 00:00:00
Contract Shipping Term: FOB: Destination
Special Contract Term: Net 30

* Open Market Items

All other terms on this quotation are not applicable.

Olympus accepts Visa, Mastercard, Discover and American Express.
Please call (781) 419-3900 to make a payment by credit card.

FOR USD PAYMENTS BY US$ Fed Wire and ACH:
Beneficiary Bank: MUFG Bank, Ltd.
Beneficiary Bank ABA#: 026009632
Beneficiary: Olympus America Inc.
Beneficiary Account#: 810004585

FOR INTERNATIONAL PAYMENTS IN USD:
Beneficiary Bank: MUFG Bank, Ltd.
Beneficiary Bank SWIFT Code: BOTKUS33
Beneficiary: Olympus America Inc.
Beneficiary Account#: 810004585

- Orders and warranty for Olympus equipment are accepted based on Olympus terms and conditions. You can view these terms at http://www.olympus-lifescience.com/en/product-terms-and-conditions/.
- All Returns must be authorized by Olympus. Please contact us to receive a RMA number.
- Orders received and confirmed for custom manufactured products may not be cancelled or returned without written authorization from Olympus.
- Olympus reserves the right to charge a 20% restocking fee if confirmed order is cancelled or returned.
- Equipment may not be resold to third party and / or exported without the explicit and written consent of Olympus. Final destination and application must be disclosed.

Subtotal :	$2,538.20
Shipping :	0.00
Tax (0%) :	0.00
Grand Total (USD) :	**$2,538.20**

AP/PO PeopleSoft Web Applications

Payment details for voucher: 82995834

Voucher ID	Vendor ID	Remit LOC	Vendor Name	Gross Voucher Amt.	Payment Handling Code
82995834	0000467805	002	Olympus America Inc	$2,538.20	AC

Payment Status	Payment Information	Invoice #	Invoice Date	Remit to	Amt From Voucher
PAID	ACH:597843 Dt: 08/31/2018 Amt: $2,538.20	IN-US-CV-D-1262	08/03/2018	Detail	$2,538.20

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OFFICE OF AUDITOR OF STATE
STATE OF IOWA

Rob Sand
Auditor of State

State Capitol Building
Des Moines, Iowa 50319-0004

Telephone (515) 281-5834 Facsimile (515) 281-6518

May 20, 2022

Victoria Newton
Executive Council
L O C A L

Subject: Damages due to Pipe Burst in NW Corner of Post 9 Building
on February 18, 2021
Department of Public Safety
Claim dated April 25, 2022
AOS Claim ID: 2073

In accordance with Executive Council policy, we have examined the claim for 29C.20 funds for the above-mentioned damages. It is our conclusion that the above damage incurred by the Department of Public Safety is covered by Chapter 29C.20 of the Code of Iowa. Therefore, we recommend an Executive Council allocation and reimbursement in the amount of $5,236.04.

Sincerely,

Ernest H. Ruben, Jr., CPA
Deputy Auditor of State

cc: Lieutenant Bryan Guill, Iowa State Patrol Fleet & Supply Commander, Department of Public Safety
Colonel Nathan Fulk, Iowa State Patrol Chief, Department of Public Safety
Linda Leto, Department of Management

MEMBERS OF COUNCIL

HON. KIM REYNOLDS
GOVERNOR

HON. PAUL D. PATE
SECRETARY OF STATE

HON. ROB SAND
AUDITOR OF STATE

HON. MICHAEL L. FITZGERALD
TREASURER OF STATE

HON. MICHAEL L. NAIG
SECRETARY OF AGRICULTURE

Executive Council of Iowa

CAPITOL BUILDING
DES MOINES, IOWA 50319
PHONE: 515 281-5368

June 6, 2022

Mr. Kyle Harms
Office of the Treasurer
LOCAL

Dear Mr. Harms:

The Executive Council, in a meeting held on today's date, approved the Department of Public Safety's request for an emergency allocation and reimbursement in the amount of $5,236.04. On February 18, 2021, damages occurred after a pipe burst in the NW corner of the Post 9 Building. Request was to cover repair costs.

This represents full and final payment and this allocation will be closed.

EXECUTIVE COUNCIL OF IOWA

Victoria Newton

Victoria Newton
Executive Secretary

cc: Colonel Nathan A. Fulk, Iowa State Patrol Chief, Department of Public Safety
Lieutenant Bryan Guill, Fleet & Supply Commander, Department of Public Safety
Linda Leto, Department of Management

AOS Claim # 2073
TOS Job # ____

Lim Reynolds
Governor
Adam Gregg
Lt. Governor

IOWA STATE PATROL

Department of Public Safety

Stephan K. Bayens
Commissioner

April 25, 2022

Tammy Hollingsworth
State Executive Council
Capitol Building
Local

RE: Post 9 burst pipe and water damage from 2/18/21.

Dear Executive Council,

We are requesting reimbursement for the services provided to Post 9 to remediate a burst pipe and subsequent water issues that were caused as a result. The incident occurred on, or was discovered February 18, 2021. The sum of the reimbursement request is $5236.04.

An interior water line going to an exterior faucet near a supply closet burst from cold weather and leaked water into adjacent offices until the leak was discovered. The pipe was subsequently capped as the exterior faucet is not needed. Subsequently the water that leaked into adjacent offices was successfully remediated without significant repairs needed.

ServPro, $4990.04, and Dalton Plumbing, $246.00, services were utilized in this incident. Invoices and additional proof of payment evidential matter will be provided with this submission.

In closing, Thanks in advance for your consideration and please feel free to reach out on any concerns or questions.

Respectfully,

Nathan A. Fulk, Colonel
Iowa State Patrol Chief

Bryan C. Guill, Lieutenant
Iowa State Patrol Fleet & Supply Commander

Cc: Major David Halverson
Tina Woosley



U.S BANCORP SERVICE CENTER
P. O. Box 6343
Fargo, ND 58125-6343

STATE OF IOWA PURCHASING

ACCOUNT NUMBER XXXX-XXXX-XXXX-5524

STATEMENT DATE 03-22-21

TOTAL ACTIVITY $ 63,077.97

000035213 02 SP 106481319257508 S

HEATHER L DIXON
DPS-TAX EXEMPT
30 NE 48TH PL
DES MOINES IA 50313-2357

"MEMO STATEMENT ONLY"
DO NOT REMIT PAYMENT

NEW ACCOUNT ACTIVITY

POST DATE	TRAN DATE	TRANSACTION DESCRIPTION	REFERENCE NUMBER	MCC	AMOUNT
02-23	02-20	MENARDS ALTOONA IA ALTOONA IA PUR ID: TAX: 0.00	74137461052300629105079	5200	79.98 CR
02-23	02-22	BROWNELLS INC 641-6235401 IA PUR ID: 2065499900 TAX: 0.00	24270741053900013640007	5941	14.11
02-23	02-22	USPS STAMPS ENDICIA 888-434-0055 DC PUR ID: 376770847 TAX: 0.00	24445001054600071488145	9402	400.00
02-23	02-22	USPS STAMPS ENDICIA 888-434-0055 DC PUR ID: 376800708 TAX: 0.00	24445001054600071488228	9402	425.00
02-23	02-22	AMAZON.COM*RK9UB7783 AMZN.COM/BILL WA PUR ID: post 4 sgts TAX: 0.00	24692161053100811549028	5942	54.98
02-23	02-23	MCC*MEDIACOM 855-633-4226 NY PUR ID: 8384930090094365 TAX: 0.00	24692161054100058446507	4899	269.95
02-24	02-22	MENARDS ALTOONA IA 715-876-6378 IA PUR ID: 3153.2021-02-22.077.09629 TAX: 0.00	24137461054100168243924	5200	25.34
02-24	02-23	GALLS 859-266-7227 KY PUR ID: PO 053799630598 TAX: 0.00	24435651054762996305988	5137	1,108.48
02-24	02-23	USPS STAMPS ENDICIA 888-434-0055 DC PUR ID: 376972494 TAX: 0.00	24445001055600078626951	9402	100.00
02-24	02-23	AMAZON.COM*JL6CD5MP3 AMZN.COM/BILL WA PUR ID: POST 4 TAX: 0.00	24692161054100468785007	5942	27.49
02-24	02-22	JET AIR INC IOW 888-7671982 IA PUR ID: 8063 TAX: 5.03	24717051054160544299401	5983	88.91
02-25	02-24	STAMPS.COM 855-608-2677 CA PUR ID: PGONI7LKOD88ADUE1 TAX: 0.00	24692161055100922767285	7399	27.05
02-26	02-21	JET AIR INC IOW IOWA CITY IA	74717051056150532777057	5983	7.99 CR

Default Accounting Code: 00015955200 2299

CUSTOMER SERVICE CALL

800-344-5696

ACCOUNT NUMBER

XXXX-XXXX-XXXX-5524

STATEMENT DATE	DISPUTED AMOUNT
03-22-21	$ .00

SEND BILLING INQUIRIES TO:

C/O U.S. BANCORP SERVICE CENTER, INC
U.S. BANK NATIONAL ASSOCIATION
P.O. BOX 6335
FARGO, ND 58125-6335

AMOUNT DUE

$ 0.00

DO NOT REMIT

ACCOUNT SUMMARY

PREVIOUS BALANCE	$.00
PURCHASES & OTHER CHARGES	$63,203.88
CASH ADVANCES	$.00
CASH ADVANCE FEE	$.00
CREDITS	$125.91
TOTAL ACTIVITY	**$63,077.97**

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usbank

Account Name:	HEATHER L DIXON
Company Name:	STATE OF IOWA PURCHASING
Account Number:	XXXX-XXXX-XXXX-5524
Statement Date:	03-22-21

NEW ACCOUNT ACTIVITY

POST DATE	TRAN DATE	TRANSACTION DESCRIPTION	REFERENCE NUMBER	MCC	AMOUNT
02-26	02-25	FEDEX 99173144 800-4633339 TN PUR ID: 99173144 TAX: 0.00	24164071056741991731444	4215	47.78
02-26	02-25	STREICHER'S MO 763-546-1155 MN PUR ID: CC6195 TAX: 248.72	24232001056083711977451	5999	3,553.63
02-26	02-25	BTS*KONE 630-577-1650 IL PUR ID: 131445858 TAX: 0.64	24445001056300349321834	5046	616.20
02-26	02-24	EHRLICH 610-372-9700 PA PUR ID: 20-AD659149-9616-445D-A49 TAX: 0.00	24632691056500488927777	7342	38.00
02-26	02-25	ALLIANT ENERGY - IPL 800-255-4268 WI PUR ID: 480541207671511000 TAX: 0.00	24692161056100046589945	4900	463.94
02-26	02-25	AMAZON.COM*GW11E8CI3 AMZN.COM/BILL WA PUR ID: garage TAX: 0.00	24692161056100790259893	5942	147.72
02-26	02-24	JET AIR INC IOW 888-7671982 IA PUR ID: 8078 TAX: 0.00	24717051056160568306643	5983	1,040.60
02-26	02-24	JET AIR INC IOW 888-7671982 IA PUR ID: 8077 TAX: 0.00	24717051056160568306650	5983	793.76
02-26	02-24	JET AIR INC IOW 888-7671982 IA PUR ID: 8075 TAX: 0.00	24717051056160568306676	5983	217.56
02-26	02-25	GAMBERJOHNSON 715-3443790 WI PUR ID: 396022600080001 TAX: 0.00	24717051057120578210036	5065	3,346.97
02-26	02-25	WASTE MGMT WM EZPAY 866-834-2080 TX PUR ID: 80026134914 TAX: 0.00	24943001056700721834733	4900	894.39
03-01	02-26	AW ENTERPRISES INC 708-4588989 IL PUR ID: 172572 TAX: 0.00	24003411059900018709730	5999	1,368.31
03-01	02-26	J&S ELECTRONIC BUSINESS 319-7525603 IA	24050801057900019700015	5999	445.00
03-01	02-25	MENARDS ALTOONA IA 715-876-6378 IA PUR ID: 3153.2021-02-25.077.09884 TAX: 0.00	24137461057100190444851	5200	79.99
03-01	02-28	FACEBK BWSTN2BNH2 650-5434800 CA PUR ID: 420429000200589 TAX: 0.00	24204291059000323343730	7311	900.00
03-01	02-26	BROWNELLS INC 641-6235401 IA PUR ID: 2067540700 TAX: 0.00	24270741057900015333896	5941	395.10
03-01	02-28	AMZN MKTP US*825OY74J3 AM AMZN.COM/BILL WA PUR ID: FLEET & SUPPLY TAX: 0.00	24431061059083331095015	5942	19.98
03-01	02-26	GALLS 859-266-7227 KY PUR ID: PO 056587739755 TAX: 0.00	24435651057762877397556	5137	513.64
03-01	02-27	GALLS 859-266-7227 KY PUR ID: PO 057889736235 TAX: 0.00	24435651058762897362357	5137	90.00
03-01	02-26	IA CTY OF DVNPRT UTLTES 563-3267739 IA PUR ID: 2021-TZEHPY TAX: 0.00	24512391057007612747510	4900	75.00
03-01	02-26	AMAZON.COM*LN8P92CD3 AMZN.COM/BILL WA PUR ID: Post 15 TAX: 0.00	24692161057100664999789	5942	19.15
03-01	02-26	IN *ARROWHEAD SCIENTIFIC 913-8948388 KS PUR ID: PQ0001171959 TAX: 0.00	24692161057100775905006	7399	94.20
03-01	02-28	AMZN MKTP US*NB68G8SP3 AMZN.COM/BILL WA PUR ID: Fleet & supply TAX: 0.00	24692161059100714184950	5942	199.80
03-01	02-25	JET AIR INC IOW 888-7671982 IA PUR ID: 8079 TAX: 0.00	24717051057170571664366	5983	122.10
03-01	02-26	GRAINGER 877-2022594 IL PUR ID: PO NUMBER TAX: 0.00	24755421058730589291614	5085	60.81

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usbank

Account Name:	HEATHER L DIXON
Company Name:	STATE OF IOWA PURCHASING
Account Number:	XXXX-XXXX-XXXX-5524
Statement Date:	03-22-21

NEW ACCOUNT ACTIVITY

POST DATE	TRAN DATE	TRANSACTION DESCRIPTION	REFERENCE NUMBER	MCC	AMOUNT
03-02	03-01	BROKEN ARROW WEAR 515-2516999 IA PUR ID: 369995444 TAX: 0.00	24034551060000094046298	5699	99.93
03-02	03-01	BROKEN ARROW WEAR 515-2516999 IA PUR ID: 369984171 TAX: 0.00	24034551060000094046314	5699	4,458.50
03-02	03-01	CARTER PRINTING CO 515-2656139 IA PUR ID: 921030121010003 TAX: 0.00	24755421060260609359452	2741	3,155.00
03-03	03-02	CRYSTAL CLEAR BOTTLED WAT 515-2652324 IA PUR ID: MW170302014009 TAX: 0.00	24013391061000225155369	5999	123.50
03-03	03-02	DALTON PLUMBING HEATIN 000-0000000 IA PUR ID: 0 TAX: 0.00	24071051061939143406405	1711	246.00
03-03	03-02	THATSMYTRUCK.COM LLC 5159641636 IA PUR ID: 0000000002 TAX: 0.00	24323001061200547000026	5013	375.00
03-03	03-02	BTS*KONE 630-577-1650 IL PUR ID: 131982194 TAX: 0.05	24445001061300355424111	5046	50.00
03-03	03-02	BTS*KONE 630-577-1650 IL PUR ID: 131982206 TAX: 0.08	24445001061300355424293	5046	75.00
03-03	03-02	BTS*KONE 630-577-1650 IL PUR ID: 131982210 TAX: 0.08	24445001061300355424376	5046	75.00
03-03	03-02	BTS*KONE 630-577-1650 IL PUR ID: 131982214 TAX: 0.08	24445001061300355424459	5046	75.00
03-03	03-02	BTS*KONE 630-577-1650 IL PUR ID: 131982220 TAX: 0.13	24445001061300355424525	5046	130.00
03-03	03-02	AMAZON.COM*L985C27D3 AMZN.COM/BILL WA PUR ID: hunter pDIB TAX: 0.00	24692161062100953671803	5942	16.19
03-03	03-02	AMZN MKTP US*SJ48E6NM3 AMZN.COM/BILL WA PUR ID: post 7 TAX: 0.00	24692161062100993758222	5942	12.74
03-03	03-01	JET AIR INC IOW 888-7671982 IA PUR ID: 8111 TAX: 0.00	24717051061170616587162	5983	244.20
03-03	03-02	GRAINGER 877-2022594 IL PUR ID: PO NUMBER TAX: 0.00	24755421062730623995612	5085	38.68
03-03	03-02	ACKLEY VETERINARY CTR ACKLEY IA PUR ID: TAX: 0.00	24760621062300000744104	0742	162.00
03-04	03-02	PLUNKETTS PEST CONTROL 877-5717100 MN PUR ID: 106120481854 TAX: 0.00	24013391062000313277520	7342	95.50
03-04	03-02	ACTION TARGETS 800-7790182 MN PUR ID: W221234 TAX: 6.49	24270741062900014711558	5199	94.32
03-04	03-03	GALLS 859-266-7227 KY PUR ID: PO 561349643390 TAX: 0.00	24435651062762496433900	5137	76.50
03-04	03-02	ALLIANT ENERGY - IPL 800-255-4268 WI PUR ID: 524073469965181000 TAX: 0.00	24692161062100116875093	4900	4,012.76
03-04	03-02	JET AIR INC IOW 888-7671982 IA PUR ID: 8116 TAX: 0.00	24717051062170620233976	5983	310.39
03-04	03-03	CINTAS CORP 972-9967900 OH PUR ID: DirectAR Payment TAX: 0.00	24717051062170620381973	7399	42.48
03-04	03-02	R AND S WASTE DISPOSAL 712-7483471 IA PUR ID: 56939 TAX: 4.20	24755421062150627830949	4900	56.02
03-04	03-02	VAN GINKEL ATHLETIC CO 515-244-7718 IA PUR ID: 70357 TAX: 83.74	24988951062030032224281	5941	1,280.00

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Account Name:	HEATHER L DIXON
Company Name:	STATE OF IOWA PURCHASING
Account Number:	XXXX-XXXX-XXXX-5524
Statement Date:	03-22-21

NEW ACCOUNT ACTIVITY

POST DATE	TRAN DATE	TRANSACTION DESCRIPTION	REFERENCE NUMBER	MCC	AMOUNT
03-05	03-04	FEDEX 99364523 800-4633339 TN PUR ID: 99364523 TAX: 0.00	24164071063741993645239	4215	21.15
03-05	03-03	SECORY PLUMBING & HEATIN 641-357-3570 IA PUR ID: 18235 TAX: 0.00	24232001063200095000020	1711	71.00
03-05	03-04	AMAZON.COM*5L9EL2WS3 AMZN AMZN.COM/BILL WA PUR ID: F&S TAX: 0.00	24231061063083719293004	5942	105.27
03-05	03-04	GALLS 859-266-7227 KY PUR ID: PO 562422832072 TAX: 0.00	24435651063762228320721	5137	11.97
03-05	03-04	GALLS 859-266-7227 KY PUR ID: PO 562465832127 TAX: 0.00	24435651063762658321272	5137	41.95
03-05	03-04	AMZN MKTP US*5I85M2SZ3 AMZN.COM/BILL WA PUR ID: Fleet & supply TAX: 0.00	24692161063100034538301	5942	30.49
03-05	03-04	AMZN MKTP US*IR3BS5ZX3 AMZN.COM/BILL WA PUR ID: CC-1100 TAX: 0.00	24692161063100096188219	5942	322.99
03-05	03-03	AMZN MKTP US*SB2745Q03 AMZN.COM/BILL WA PUR ID: Fleet & supply TAX: 0.00	24692161063100773619312	5942	38.45
03-05	03-03	AMAZON.COM*SM2766UM3 AMZN.COM/BILL WA PUR ID: post 1 TAX: 0.00	24692161063100824267335	5942	129.72
03-05	03-04	AMAZON.COM*Z094N9MT3 AMZN.COM/BILL WA PUR ID: tac team TAX: 0.00	24692161064100416943102	5942	119.99
03-05	03-03	JET AIR INC IOW 888-7671982 IA PUR ID: 8123 TAX: 0.00	24717051063170631261254	5983	120.00
03-05	03-03	JET AIR INC IOW 888-7671982 IA PUR ID: 8122 TAX: 0.00	24717051063170631261262	5983	120.00
03-05	03-03	JET AIR INC IOW 888-7671982 IA PUR ID: 8119 TAX: 0.00	24717051063170631261296	5983	152.32
03-05	03-03	GRAINGER 877-2022594 IL PUR ID: 6500777743 TAX: 0.00	24755421063150634848628	5085	202.76
03-05	03-04	WASTE MGMT WM EZPAY 866-834-2080 TX PUR ID: 80026575661 TAX: 0.00	24943001063700762297080	4900	101.90
03-08	03-07	FACEBK SH9CC27PH2 650-5434800 CA PUR ID: 420429000200589 TAX: 0.00	24204291066000107297756	7311	900.00
03-08	03-07	BROWNELLS INC 641-6235401 IA PUR ID: 2071218200 TAX: 0.00	24270741066900018849475	5941	238.45
03-08	03-05	STREICHER'S MO 763-546-1155 MN PUR ID: CC6228 TAX: 24.46	24232001064083316203683	5999	349.50
03-08	03-05	GALLS 859-266-7227 KY PUR ID: PO 563308632243 TAX: 0.00	24435651064762086322438	5137	116.95
03-08	03-06	GALLS 859-266-7227 KY PUR ID: PO 064988532399 TAX: 0.00	24435651065762885323990	5137	474.70
03-08	03-05	USPS STAMPS ENDICIA 888-434-0055 DC PUR ID: 378674006 TAX: 0.00	24445001065600088885256	9402	100.00
03-08	03-05	MCVC LLC 515-462-3711 IA PUR ID: 5524 TAX: 0.00	24656271064027017025487	0742	218.00
03-08	03-05	CHEWY.COM 800-672-4399 FL PUR ID: PMT-hA5ddJiXQi TAX: 0.00	24692161064100826838256	5995	52.24
03-08	03-05	AMZN MKTP US*8H3XA5P73 AMZN.COM/BILL WA PUR ID: F&S TAX: 0.00	24692161065100333500679	5942	73.58

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usbank

Account Name:	HEATHER L DIXON
Company Name:	STATE OF IOWA PURCHASING
Account Number:	XXXX-XXXX-XXXX-5524
Statement Date:	03-22-21

NEW ACCOUNT ACTIVITY

POST DATE	TRAN DATE	TRANSACTION DESCRIPTION	REFERENCE NUMBER	MCC	AMOUNT
03-08	03-06	AMZN MKTP US*5D40Z2KC3 AMZN.COM/BILL WA PUR ID: DNE TAX: 0.00	24692161065100835681183	5942	452.20
03-08	03-07	ALLIANT ENERGY - IPL 800-255-4268 WI PUR ID: 568294450645161000 TAX: 0.00	24692161067100696955708	4900	239.75
03-08	03-05	SCHUMACHER ELEVATOR COMPA 800-7795438 IA PUR ID: 1008253 TAX: 0.00	24717051064270644445214	5046	195.84
03-08	03-05	JET AIR INC IOW 888-7671982 IA PUR ID: 8141 TAX: 0.00	24717051065170655481075	5983	264.89
03-08	03-06	JET AIR INC IOW 888-7671982 IA PUR ID: 8151 TAX: 0.00	24717051066160666649322	5983	58.44
03-09	03-08	RANGE SYSTEMS WWW.RANGESYST MN PUR ID: 14983279 TAX: 0.00	24492151067637149832797	5399	644.96
03-09	03-08	AUTOACCESSORIESGARAGE 800-663-1570 IL PUR ID: 78474567 TAX: 0.00	24492151067715784745670	5013	115.51
03-09	03-08	CTS*FRONTIER ONLINEPAY 800-921-8101 CT PUR ID: 6pWrdTtn TAX: 0.00	24692161067100161936811	4814	447.15
03-09	03-08	CHEWY.COM 800-672-4399 FL PUR ID: PMT-a16Uei7gPE TAX: 0.00	24692161067100178810702	5995	58.88
03-09	03-08	CHEWY.COM 800-672-4399 FL PUR ID: PMT-83d9tHKHv2 TAX: 0.00	24692161067100181818163	5995	58.88
03-09	03-08	GAN*1150DESMOINEREGCIR 888-426-0491 IN PUR ID: 00719502275DA8556800 TAX: 0.00	24692161068100392580809	5968	10.59
03-09	03-08	GAN*DESMOINES REG-CCC 417-837-8408 IN PUR ID: 65651 TAX: 0.00	24692161068100420639965	5968	76.26
03-09	03-07	JET AIR INC IOW 888-7671982 IA PUR ID: 8157 TAX: 0.00	24717051067150673258547	5983	145.14
03-10	03-09	ROYS TOWING AND RECOVERY WEST DES MOIN IA	24013391068001257505375	7549	150.00
03-10	03-09	GALLS 859-266-7227 KY PUR ID: PO 067375544041 TAX: 0.00	24435651068762755440418	5137	689.40
03-10	03-09	USPS STAMPS ENDICIA 888-434-0055 DC PUR ID: 379182371 TAX: 0.00	24445001069600078722150	9402	200.00
03-10	03-08	ALL AMERICAN PEST CONTROL 641-472-5474 IA PUR ID: 5524 TAX: 0.00	24656271068030034370882	7342	45.00
03-10	03-09	DISPLAYS2GO 401-247-0333 MA PUR ID: 00000000000000000 TAX: 0.00	24692161068100490143351	5099	536.76
03-10	03-09	AMZN MKTP US*U97F346R3 AMZN.COM/BILL WA PUR ID: K9 TAX: 0.00	24692161068100553242744	5942	59.55
03-10	03-09	CINTAS CORP 972-9967900 OH PUR ID: DirectAR Payment TAX: 0.00	24717051068160689351342	7399	697.39
03-10	03-09	SIRWA 641-7825744 IA PUR ID: US-031-185001-00S TAX: 0.00	24755421068640684815894	4900	34.50
03-10	03-09	GRAINGER 877-2022594 IL PUR ID: PO NUMBER TAX: 0.00	24755421069730693671807	5085	1,107.00
03-10	03-09	A AND M SERVICES 712-2623283 IA PUR ID: 62898707005 TAX: 0.00	24789301068380200080376	7211	102.50
03-11	03-10	CHEWY.COM 800-672-4399 FL PUR ID: PMT-v5kVUjll5C TAX: 0.00	24692161069100697702412	5995	70.45
03-11	03-10	ALLIANT ENERGY - IPL 800-255-4268 WI PUR ID: 593076709659230000 TAX: 0.00	24692161070100757078395	4900	289.52

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usbank

Account Name:	HEATHER L DIXON
Company Name:	STATE OF IOWA PURCHASING
Account Number:	XXXX-XXXX-XXXX-5524
Statement Date:	03-22-21

NEW ACCOUNT ACTIVITY

POST DATE	TRAN DATE	TRANSACTION DESCRIPTION	REFERENCE NUMBER	MCC	AMOUNT
03-11	03-10	ALLIANT ENERGY - IPL 800-255-4268 WI PUR ID: 593081117128481000 TAX: 0.00	24692161070100757085648	4900	169.44
03-11	03-09	JET AIR INC IOW 888-7671982 IA PUR ID: 8174 TAX: 0.00	24717051069160699338502	5983	295.74
03-11	03-10	CINTAS CORP 972-9967900 OH PUR ID: DirectAR Payment TAX: 0.00	24717051069160699513195	7399	328.80
03-12	03-11	RANGE SYSTEMS 7635339200 MN PUR ID: 30580092 TAX: 0.00	74492151071637305800926	5399	37.94 CR
03-12	03-11	USPS STAMPS ENDICIA 888-434-0055 DC PUR ID: 379522681 TAX: 0.00	24445001071600081226286	9402	300.00
03-12	03-11	CTS*FRONTIER ONLINEPAY 800-921-8101 CT PUR ID: 6q8tyG41 TAX: 0.00	24692161070100267291926	4814	195.95
03-12	03-11	GRAINGER 877-2022594 IL PUR ID: PO NUMBER TAX: 0.00	24755421071730715258779	5085	275.79
03-12	03-11	CUMMINS INC - J4 DES MOINES IA PUR ID: J4-77384 TAX: 0.00	24943001071286557100010	5085	378.00
03-12	03-11	CUMMINS INC - J4 DES MOINES IA PUR ID: J4-77448 TAX: 0.00	24943001071286557100028	5085	219.51
03-15	03-12	NORTH IOWA AIR SVC MASON CITY IA PUR ID: P66002516 TAX: 0.03	24015171072001768263728	5541	228.38
03-15	03-13	FACEBK W8F5H27PH2 650-5434800 CA PUR ID: 420429000200589 TAX: 0.00	24204291072000431763723	7311	900.00
03-15	03-12	ADVANCE AUTO PARTS #5256 DES MOINES IA PUR ID: 525605615101 TAX: 0.00	24326881072042000038617	5533	582.85
03-15	03-12	BATES FOOTWEAR.COM 866-699-7374 MI PUR ID: 91213441 TAX: 9.60	24431051071700912134419	5661	169.55
03-15	03-12	AMAZON.COM*QU2405P23 AMZN AMZN.COM/BILL WA PUR ID: FLEET & SUPPLY TAX: 0.00	24431061071083336870614	5942	124.18
03-15	03-12	GALLS 859-266-7227 KY PUR ID: PO 070201634754 TAX: 0.00	24435651071762016347548	5137	629.25
03-15	03-13	GALLS 859-266-7227 KY PUR ID: PO 071827632697 TAX: 0.00	24435651072762276326975	5137	491.61
03-15	03-12	IN *OWWT, LLC 515-2444646 IA PUR ID: PS0004060624 TAX: 0.00	24692161071100176921984	1520	400.00
03-15	03-12	IN *OWWT, LLC 515-2444646 IA PUR ID: PS0004074585 TAX: 0.00	24692161071100176921992	1520	625.00
03-15	03-12	STAMPS.COM 855-608-2677 CA PUR ID: E21030478 TAX: 0.00	24692161071100185587081	7399	299.88
03-15	03-12	WEATHERTECH DIRECT LLC 800-441-6287 IL PUR ID: 20029512830 TAX: 1.00	24692161071100774905793	5533	127.95
03-15	03-13	AMZN MKTP US*AC4LP3143 AMZN.COM/BILL WA PUR ID: garage TAX: 0.00	24692161072100756621565	5942	107.23
03-15	03-14	ALLIANT ENERGY - IPL 800-255-4268 WI PUR ID: 629818247858690000 TAX: 0.00	24692161073100573540906	4900	1,343.03
03-16	03-15	SP * ARCANTENNA.COM HTTPSARCANTEN NJ PUR ID: 19862594420867 TAX: 0.00	24492151074637460846567	5732	1,203.82
03-16	03-15	AMAZON.COM*9F1863RT3 AMZN.COM/BILL WA PUR ID: Interop. Communic TAX: 0.00	24692161074100115414320	5942	49.99

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Account Name:	HEATHER L DIXON
Company Name:	STATE OF IOWA PURCHASING
Account Number:	XXXX-XXXX-XXXX-5524
Statement Date:	03-22-21

NEW ACCOUNT ACTIVITY

POST DATE	TRAN DATE	TRANSACTION DESCRIPTION	REFERENCE NUMBER	MCC	AMOUNT
03-16	03-15	AMAZON.COM*TE9I415C3 AMZN.COM/BILL WA PUR ID: TRAINING TAX: 0.00	24692161074100202843589	5942	369.76
03-16	03-13	JET AIR INC IOW 888-7671982 IA PUR ID: 8224 TAX: 0.00	24717051074150745359423	5983	181.06
03-16	03-13	JET AIR INC IOW 888-7671982 IA PUR ID: 8217 TAX: 0.00	24717051074150745359472	5983	251.00
03-17	03-16	PRIMUS ELECTRONICS 815-4368945 IL PUR ID: 3348000 TAX: 0.00	24270741075900019639619	5732	115.90
03-17	03-15	EXEC 1 AVIATION II, LLC 866-720-3797 IA PUR ID: 004312 TAX: 5.10	24431051075838004312034	5983	510.10
03-17	03-15	EXEC 1 AVIATION II, LLC 866-720-3797 IA PUR ID: 004313 TAX: 9.52	24431051075838004313032	5983	952.18
03-17	03-16	GALLS 859-266-7227 KY PUR ID: PO 074114633116 TAX: 0.00	24435651075762146331160	5137	10.00
03-17	03-16	SP * ARCANTENNA.COM HTTPSARCANTEN NJ PUR ID: 19873793802371 TAX: 0.00	24492151075637491040445	5732	2,714.00
03-17	03-16	CHEWY.COM 800-672-4399 FL PUR ID: PMT-8BfqzNcFNh TAX: 0.00	24692161075100923551080	5995	58.88
03-17	03-16	CHEWY.COM 800-672-4399 FL PUR ID: PMT-sGbvPeVF49 TAX: 0.00	24692161075100988926730	5995	58.88
03-17	03-16	CHEWY.COM 800-672-4399 FL PUR ID: PMT-QNm51tQctY TAX: 0.00	24692161075100991465312	5995	58.88
03-17	03-17	AMZN MKTP US*PI3092503 AMZN.COM/BILL WA PUR ID: post 16 TAX: 0.00	24692161076100181673955	5942	30.99
03-18	03-16	MENARDS ALTOONA IA 715-876-6378 IA PUR ID: 3153.2021-03-16.078.01516 TAX: 0.00	24137461076100183706347	5200	21.39
03-18	03-16	SECORY PLUMBING & HEATIN 641-357-3570 IA PUR ID: 22685 TAX: 0.00	24323001076200095300011	1711	226.85
03-18	03-17	INTOXIMETERS INC 314-429-4000 MO PUR ID: 56720035 TAX: 121.79	24412951076207567200353	8734	1,380.00
03-18	03-17	CHEWY.COM 800-672-4399 FL PUR ID: PMT-wo2rI0wxJR TAX: 0.00	24692161076100255203093	5995	58.88
03-18	03-16	GRAINGER 877-2022594 IL PUR ID: 6502348355 TAX: 0.00	24755421076150765916769	5085	113.26
03-19	03-18	RAYALLEN.COM JJDOG.COM 719-3800404 CO PUR ID: 42565594410 TAX: 0.00	24275391077900012573614	5099	60.97
03-19	03-18	AMAZON.COM*DW5884S93 AMZN AMZN.COM/BILL WA PUR ID: POST 1 TAX: 0.00	24531061077083332111280	5942	21.95
03-19	03-18	GALLS 859-266-7227 KY PUR ID: PO 576778641126 TAX: 0.00	24435651077762786411262	5137	6.99
03-19	03-18	USPS STAMPS ENDICIA 888-434-0055 DC PUR ID: 380621227 TAX: 0.00	24445001078600087244641	9402	200.00
03-22	03-19	TRASHBILLING.COM CC 802-5603595 VT PUR ID: 417420002126 TAX: 4.83	24183101078078140435312	4900	73.90
03-22	03-19	TRASHBILLING.COM CC 802-5603595 VT PUR ID: 559020027037 TAX: 3.07	24183101078078170784167	4900	47.00
03-22	03-19	GALLS 859-266-7227 KY PUR ID: PO 077792540129 TAX: 0.00	24435651078762925401298	5137	284.48

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Account Name:	HEATHER L DIXON
Company Name:	STATE OF IOWA PURCHASING
Account Number:	XXXX-XXXX-XXXX-5524
Statement Date:	03-22-21

NEW ACCOUNT ACTIVITY

POST DATE	TRAN DATE	TRANSACTION DESCRIPTION	REFERENCE NUMBER	MCC	AMOUNT
03-22	03-20	GALLS 859-266-7227 KY PUR ID: PO 078131532289 TAX: 0.00	24435651079762315322897	5137	251.70
03-22	03-19	USPS STAMPS ENDICIA 888-434-0055 DC PUR ID: 380796856 TAX: 0.00	24445001079600129646190	9402	100.00
03-22	03-20	AMZN MKTP US*QN95D3133 AMZN.COM/BILL WA PUR ID: K9 TAX: 0.00	2469216108010020375945 5	5942	17.99
03-22	03-18	GRAHAM ANIMAL HOSPITAL 319-343-0228 IA PUR ID: 2756431951 TAX: 0.00	24707801078017040948539	0742	497.62
03-22	03-19	JET AIR INC IOW 888-7671982 IA PUR ID: 8263 TAX: 0.36	24717051079170799422252	5983	6.31
03-22	03-19	JET AIR INC IOW 888-7671982 IA PUR ID: 8262 TAX: 0.00	24717051079170799422260	5983	183.94
03-22	03-20	JET AIR INC IOW 888-7671982 IA PUR ID: 8290 TAX: 0.00	24717051080170801729741	5983	278.30
03-22	03-16	GRAINGER 877-2022594 IL PUR ID: GARAGE TAX: 0.00	24755421079150790072627	5085	361.18

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U.S BANCORP SERVICE CENTER
P. O. Box 6343
Fargo, ND 58125-6343

STATE OF IOWA PURCHASING

ACCOUNT NUMBER XXXX-XXXX-XXXX-0195

STATEMENT DATE 08-20-21

TOTAL ACTIVITY $ 149,851.42

000022017 02 SP 106481382292903 S

HEATHER L DIXON
DPS-TAX EXEMPT
30 NE 48TH PL
DES MOINES IA 50313-2357

"MEMO STATEMENT ONLY"
DO NOT REMIT PAYMENT

NEW ACCOUNT ACTIVITY

POST DATE	TRAN DATE	TRANSACTION DESCRIPTION	REFERENCE NUMBER	MCC	AMOUNT
07-21	07-19	MENARDS CLIVE IA 715-876-6378 IA PUR ID: 3045.2021-07-19.072.04985 TAX: 0.00	24137461201100256273157	5200	764.32
07-21	07-20	HOCKENBERGS 402-339-8900 NE PUR ID: 00000000000000S9K TAX: 0.00	24137461202001230933537	5046	262.91
07-21	07-20	GALLS 859-266-7227 KY PUR ID: PO 200400934672 TAX: 0.00	24435651201762009346724	5137	1,702.64
07-21	07-20	MCVC LLC 515-462-3711 IA PUR ID: 5524 TAX: 0.00	24656271201027016750808	0742	483.09
07-21	07-19	AMZN MKTP US*2E7257170 AMZN.COM/BILL WA PUR ID: Promo testing 202 TAX: 0.00	24692161201100908108978	5942	49.95
07-21	07-20	AMZN MKTP US*2E95Q2E42 AMZN.COM/BILL WA PUR ID: 5700-45 TAX: 0.00	24692161202100557030381	5942	155.70
07-21	07-20	CHEWY.COM 800-672-4399 FL PUR ID: PMT-AkkXvIypza TAX: 0.00	24692161202100575509200	5995	64.58
07-21	07-20	CHEWY.COM 800-672-4399 FL PUR ID: PMT-mtYHUsyqWv TAX: 0.00	24692161202100576124413	5995	64.58
07-21	07-19	JET AIR INC IOW 888-7671982 IA PUR ID: 9356 TAX: 0.00	24717051201172016965890	5541	132.05
07-21	07-19	JET AIR INC IOW 888-7671982 IA PUR ID: 9355 TAX: 0.00	24717051201172016965908	5541	110.88
07-22	07-19	MENARDS CLIVE IA CLIVE IA PUR ID: TAX: 0.00	74137461201100327473872	5200	50.00 CR
07-22	07-20	AMZN MKTP US*2E8DD0VL0 AMZN.COM/BILL WA PUR ID: Des Moines State TAX: 0.00	24692161202100736306272	5942	17.98

Default Accounting Code: 00015955200 2299

CUSTOMER SERVICE CALL

800-344-5696

ACCOUNT NUMBER

XXXX-XXXX-XXXX-0195

STATEMENT DATE	DISPUTED AMOUNT
08-20-21	$ .00

SEND BILLING INQUIRIES TO:

C/O U.S. BANCORP SERVICE CENTER, INC
U.S. BANK NATIONAL ASSOCIATION
P.O. BOX 6335
FARGO, ND 58125-6335

AMOUNT DUE

$ 0.00

DO NOT REMIT

ACCOUNT SUMMARY

PREVIOUS BALANCE	$.00
PURCHASES & OTHER CHARGES	$149,942.71
CASH ADVANCES	$.00
CASH ADVANCE FEE	$.00
CREDITS	$91.29
TOTAL ACTIVITY	**$149,851.42**

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Account Name:	HEATHER L DIXON
Company Name:	STATE OF IOWA PURCHASING
Account Number:	XXXX-XXXX-XXXX-0195
Statement Date:	08-20-21

NEW ACCOUNT ACTIVITY

POST DATE	TRAN DATE	TRANSACTION DESCRIPTION	REFERENCE NUMBER	MCC	AMOUNT
07-22	07-20	JET AIR INC IOW 888-7671982 IA PUR ID: 9369 TAX: 0.00	24717051202172025725425	5541	139.61
07-26	07-21	AMAZON.COM*2E1L725E0 AMZN AMZN.COM/BILL WA	74798261207083344462102	5942	167.76
07-26	07-21	AMAZON.COM*2E0LE01O2 AMZN AMZN.COM/BILL WA	74798261207083741242065	5942	122.66
07-26	07-21	AMZN MKTP US*2E8RU7MA0 AMZN.COM/BILL WA	74798261207100134304094	5942	340.00
07-26	07-21	AMZN MKTP US*2E91035W0 AMZN.COM/BILL WA	74798261207100390741229	5942	137.22
07-26	07-21	AMZN MKTP US*2E93841I2 AMZN.COM/BILL WA	74798261207100392279228	5942	179.80
07-26	07-21	GRAINGER 877-2022594 IL	74798261207122032341267	5085	284.15
07-26	07-21	GRAINGER 877-2022594 IL	74798261207122032341275	5085	227.22
07-26	07-21	CINTAS CORP 972-9967900 OH	74798261207262020150625	7399	765.61
07-26	07-21	KIRBY K9 K9IRBY.COM TX	74798261207637228168943	7372	3,285.00
07-26	07-21	PROPPER INTERNATIONAL SAL 636-685-1000 MO	74798261207743283663248	5611	8,741.95
07-26	07-21	DRY CLEANERS DEL RIO 830-7750714 TX	74798261207900014200076	7216	306.05
07-26	07-21	MODERN MECHANICAL LLC- MO DES MOINES IA	74798261207900018720970	1711	1,653.42
07-27	07-21	GRAHAM ANIMAL HOSPITAL 319-343-0228 IA	74798261208017023491007	0742	75.72
07-27	07-21	AMZN MKTP US*2E8G06U21 AMZN.COM/BILL WA	74798261208100533810187	5942	49.99
07-27	07-22	AMZN MKTP US*2E2509GA2 AMZN.COM/BILL WA	74798261208100812488812	5942	12.99
07-27	07-21	JET AIR INC IOW 888-7671982 IA	74798261208172037542673	5541	431.62
07-27	07-22	GALLS 859-266-7227 KY	74798261208762400309138	5137	363.95
07-28	07-23	AMZN MKTP US*2E4JZ4Y11 AMZN.COM/BILL WA	74798261209100019481510	5942	49.95
08-02	07-04	GOOGLE*ADS6055537339 SUPPORT.GOOGL CA	24803941186910004364501	7311	41.29 CR
08-03	08-02	GLOCK INC 770-432-1202 GA PUR ID: 1508344 TAX: 0.00	24210731215286404400246	5999	766.00
08-03	08-02	SQ *MIDWEST LOCK AND SECU GOSQ.COM IA PUR ID: 00011529215104077 TAX: 94.42	24692161214100373450678	5999	1,349.10
08-03	08-02	MOUSER ELECTRONICS INC 800-346-6873 TX PUR ID: GARAGE TAX: 0.00	24692161214100435538353	5065	168.89
08-04	08-03	FEDEX 93040391 800-4633339 TN PUR ID: 93040391 TAX: 0.00	24164071215741930403913	4215	48.21
08-04	08-03	BROKEN ARROW T SHIRT 800-810-4692 IA PUR ID: 06470303337 TAX: 0.00	24247601215300579467146	5699	1,114.00
08-04	08-02	SIOUXLAND ANIMAL HOSPITAL SIOUX CITY IA	24269791215500553567819	0742	73.49
08-04	08-03	AMZN MKTP US*2P6O66QW1 AM AMZN.COM/BILL WA PUR ID: K9 TAX: 0.00	24431061215083311937807	5942	242.91
08-04	08-03	PAYPAL *BACK DEFENS 402-935-7733 TX PUR ID: 1255360 TAX: 0.00	24492151215852012553609	5047	698.75
08-04	08-03	PAYPAL *BACK DEFENS 402-935-7733 TX PUR ID: 1267231 TAX: 0.00	24492151215852012672318	5047	236.80
08-04	08-03	PAYPAL *BACK DEFENS 402-935-7733 TX PUR ID: 1684055 TAX: 0.00	24492151215852016840556	5047	236.80
08-04	08-03	IN *ARROWHEAD SCIENTIFIC 913-8948388 KS PUR ID: 193514612387714_B TAX: 0.00	24692161215100277368819	7399	762.56
08-04	08-03	IN *MIDWEST FIDELITY PART 605-3661455 SD PUR ID: 104174 TAX: 0.00	24692161215100277417657	7542	233.87
08-04	08-03	ALLIANT ENERGY - IPL 800-255-4268 WI PUR ID: 1854645848264841000 TAX: 0.00	24692161215100292697499	4900	2,104.89
08-04	08-04	CHEWY.COM 800-672-4399 FL PUR ID: PMT-B5nVXZoUNP TAX: 0.00	24692161216100510342216	5995	64.58

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Account Name:	HEATHER L DIXON
Company Name:	STATE OF IOWA PURCHASING
Account Number:	XXXX-XXXX-XXXX-0195
Statement Date:	08-20-21

NEW ACCOUNT ACTIVITY

POST DATE	TRAN DATE	TRANSACTION DESCRIPTION	REFERENCE NUMBER	MCC	AMOUNT
08-04	08-02	JET AIR INC IOW 888-7671982 IA PUR ID: 9536 TAX: 0.00	24717051215172159234801	5541	116.93
08-04	08-02	JET AIR INC IOW 888-7671982 IA PUR ID: 9535 TAX: 0.00	24717051215172159234819	5541	305.47
08-04	08-02	JET AIR INC IOW 888-7671982 IA PUR ID: 9534 TAX: 0.00	24717051215172159234827	5541	174.38
08-04	08-02	JET AIR INC IOW 888-7671982 IA PUR ID: 9533 TAX: 0.00	24717051215172159234835	5541	253.51
08-04	08-02	JET AIR INC IOW 888-7671982 IA PUR ID: 9532 TAX: 0.00	24717051215172159234843	5541	323.57
08-04	08-02	JET AIR INC IOW 888-7671982 IA PUR ID: 9531 TAX: 0.00	24717051215172159234850	5541	149.69
08-04	08-02	JET AIR INC IOW 888-7671982 IA PUR ID: 9530 TAX: 0.00	24717051215172159234868	5541	177.91
08-04	08-02	JET AIR INC IOW 888-7671982 IA PUR ID: 9529 TAX: 0.00	24717051215172159234876	5541	126.00
08-04	08-02	JET AIR INC IOW 888-7671982 IA PUR ID: 9528 TAX: 0.00	24717051215172159234884	5541	120.96
08-04	08-02	JET AIR INC IOW 888-7671982 IA PUR ID: 9527 TAX: 0.00	24717051215172159234892	5541	100.80
08-04	08-03	A AND M LAUNDRY 712-2623283 IA	24789301215067702573360	7210	108.75
08-05	08-03	PLUNKETTS PEST CONTROL 877-5717100 MN PUR ID: 121544939042 TAX: 0.00	24013391216000543786279	7342	170.50
08-05	08-04	BTS*KONE 630-577-1650 IL PUR ID: 146994823 TAX: 0.00	24445001216300397809000	5046	51.35
08-05	08-04	BTS*KONE 630-577-1650 IL PUR ID: 146994827 TAX: 0.08	24445001216300397809182	5046	77.02
08-05	08-04	BTS*KONE 630-577-1650 IL PUR ID: 146994833 TAX: 0.08	24445001216300397809265	5046	77.02
08-05	08-04	BTS*KONE 630-577-1650 IL PUR ID: 146994843 TAX: 0.08	24445001216300397809349	5046	77.02
08-05	08-04	BTS*KONE 630-577-1650 IL PUR ID: 146994849 TAX: 0.00	24445001216300397809422	5046	133.51
08-05	08-04	RENTOKIL NORTH AMERICA, I 610-372-9700 PA PUR ID: PRODUSA1887836961 TAX: 0.00	24492151216717599293557	7342	38.00
08-05	08-04	ORKIN LLC 002 877-620-8282 GA PUR ID: 36626476 TAX: 0.00	24632691217000872807723	7342	189.00
08-05	08-04	AMAZON.COM*2P16B7EC2 AMZN.COM/BILL WA PUR ID: RSC TAX: 0.00	24692161216100018783846	5942	19.99
08-05	08-04	AMZN MKTP US*2P9FC4EP2 AMZN.COM/BILL WA PUR ID: Fleet & supply TAX: 0.00	24692161216100027458588	5942	289.50
08-05	08-04	ALLIANT ENERGY - IPL 800-255-4268 WI PUR ID: 1864089624448611000 TAX: 0.00	24692161216100087975182	4900	813.57
08-05	08-04	AMZN MKTP US*2P4CJ3A02 AMZN.COM/BILL WA PUR ID: Fleet & supply TAX: 0.00	24692161216100760225434	5942	86.22
08-05	08-04	AMAZON.COM*2P8LS7D81 AMZN.COM/BILL WA PUR ID: Jasmine-POR-4120 TAX: 0.00	24692161216100807443164	5942	257.99
08-05	08-04	AMZN MKTP US*2P1PW8HI0 AMZN.COM/BILL WA PUR ID: Fleet & supply TAX: 0.00	24692161217100143936516	5942	59.80

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usbank

Account Name:	HEATHER L DIXON
Company Name:	STATE OF IOWA PURCHASING
Account Number:	XXXX-XXXX-XXXX-0195
Statement Date:	08-20-21

NEW ACCOUNT ACTIVITY

POST DATE	TRAN DATE	TRANSACTION DESCRIPTION	REFERENCE NUMBER	MCC	AMOUNT
08-05	08-05	MCC*MEDIACOM 855-633-4226 NY PUR ID: 8384930090094365 TAX: 0.00	24692161217100210941431	4899	269.95
08-05	08-05	ULINE *SHIP SUPPLIES 800-295-5510 WI PUR ID: HEATHER TAX: 0.00	24692161217100292483823	5964	991.38
08-05	08-05	AMZN MKTP US*2P15D12V1 AMZN.COM/BILL WA PUR ID: meeker-VTO TAX: 0.00	24692161217100327510525	5942	103.31
08-05	08-03	JET AIR INC IOW 888-7671982 IA PUR ID: 9543 TAX: 0.00	24717051216262160164011	5541	48.38
08-05	08-03	JET AIR INC IOW 888-7671982 IA PUR ID: 9542 TAX: 0.00	24717051216262160164029	5541	255.53
08-05	08-04	GRAINGER 877-2022594 IL PUR ID: PO NUMBER TAX: 0.00	24755421217122172278729	5085	5.34
08-05	08-04	GRAINGER 877-2022594 IL PUR ID: 6518048787 TAX: 0.00	24755421217122172351229	5085	348.84
08-05	08-04	R J NELSON CO INC 712-3250900 IA PUR ID: 21-1310 TAX: 0.00	24755421217132179503037	1711	148.63
08-05	08-04	ACKLEY VETERINARY CTR ACKLEY IA PUR ID: TAX: 0.00	24760621217300000772984	0742	51.00
08-05	08-04	WASTE MGMT WM EZPAY 866-834-2080 TX PUR ID: 80034121699 TAX: 0.00	24943001216700878574543	4900	716.01
08-05	08-04	SP * BODTRACK CHRISTCHURCH	74481311216000001219397	5734	101.96
08-06	08-05	SP * CRASH DATA GROUP CRASHDATAGROU CA PUR ID: opsntz3x22428o TAX: 0.00	24011341217000033860499	5533	120.03
08-06	08-05	REVISION MILITARY ESSEX JUNCTIO VT PUR ID: 1 TAX: 0.00	24013391217000794071594	5699	4,512.60
08-06	08-05	STREICHER'S MO 763-546-1155 MN PUR ID: CC6972 TAX: 173.71	24323001217083349235526	5999	2,481.93
08-06	08-05	VELOCITY SYSTEMS LLC 703-707-6280 VA PUR ID: 61525 TAX: 7.58	24388951217027012666663	7399	133.83
08-06	08-04	LIVINGSTON AVIATION 866-720-3797 IA PUR ID: 003749 TAX: 9.41	24431051217838003749045	5983	940.80
08-06	08-05	GALLS 859-266-7227 KY PUR ID: PO 216560544894 TAX: 0.00	24435651217762605448942	5137	4,297.67
08-06	08-04	DES MOINES STAMP MFG CO 515-288-2841 IA PUR ID: 0195 TAX: 0.00	24656271217030042689091	5099	403.56
08-06	08-05	AMZN MKTP US*2P8FM6781 AMZN.COM/BILL WA PUR ID: TI TAX: 0.00	24692161218100921061817	5942	1,827.98
08-06	08-04	JET AIR INC IOW 888-7671982 IA PUR ID: 9556 TAX: 0.00	24717051217172178213271	5541	270.14
08-06	08-04	JET AIR INC IOW 888-7671982 IA PUR ID: 9551 TAX: 0.00	24717051217172178213321	5541	120.00
08-06	08-04	JET AIR INC IOW 888-7671982 IA PUR ID: 9550 TAX: 0.00	24717051217172178213339	5541	120.00
08-06	08-04	R AND S WASTE DISPOSAL 712-7483471 IA PUR ID: 56939 TAX: 4.20	24755421217162174659658	4900	56.02
08-06	08-05	WASTE MGMT WM EZPAY 866-834-2080 TX PUR ID: 80034182909 TAX: 0.00	24943001217700885096794	4900	104.18
08-06	08-04	GRINNELL VETERINARY CLINI GRINNELL IA	24988951217017021669190	0742	172.32

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Account Name:	HEATHER L DIXON
Company Name:	STATE OF IOWA PURCHASING
Account Number:	XXXX-XXXX-XXXX-0195
Statement Date:	08-20-21

NEW ACCOUNT ACTIVITY

POST DATE	TRAN DATE	TRANSACTION DESCRIPTION	REFERENCE NUMBER	MCC	AMOUNT
08-09	08-06	FRONTIER COMM CORP WEB 800-921-8101 CT PUR ID: 51597246950330217 TAX: 3.08	24055231218083712436079	4899	51.52
08-09	08-07	HY-VEE JOHNSTON 1318 JOHNSTON IA PUR ID: TAX: 0.00	24137461220001234482687	5411	4,940.00
08-09	08-07	HY-VEE JOHNSTON 1318 JOHNSTON IA PUR ID: TAX: 0.00	24137461220001234482760	5411	149.90
08-09	08-07	HY-VEE JOHNSTON 1318 JOHNSTON IA PUR ID: TAX: 0.00	24137461220001234482844	5411	990.00
08-09	08-05	SECORY PLUMBING & HEATIN 641-357-3570 IA PUR ID: 18724 TAX: 0.00	24232001218200095100014	1711	71.00
08-09	08-06	GALLS 859-266-7227 KY PUR ID: PO 217159932323 TAX: 0.00	24435651218762599323233	5137	4,696.26
08-09	08-06	AMZN MKTP US*2P32S36D0 AMZN.COM/BILL WA PUR ID: Fleet & supply TAX: 0.00	24692161218100424591906	5942	359.64
08-09	08-06	IN *ARROWHEAD SCIENTIFIC 913-8948388 KS PUR ID: 193514612387714_B TAX: 0.00	24692161218100602570904	7399	120.66
08-09	08-05	JET AIR INC IOW 888-7671982 IA PUR ID: 9575 TAX: 0.00	24717051218262181941601	5541	458.03
08-09	08-06	JET AIR INC IOW 888-7671982 IA PUR ID: 9579 TAX: 0.00	24717051219262194261863	5541	188.50
08-09	08-07	JET AIR INC IOW 888-7671982 IA PUR ID: 9597 TAX: 0.00	24717051220172202900161	5541	109.87
08-09	08-06	SIRWA 641-7825744 IA PUR ID: US-031-185001-00S TAX: 0.00	24755421218642186542926	4900	34.50
08-09	08-06	GRAINGER 877-2022594 IL PUR ID: TT NOMEX TAX: 0.00	24755421219152190642208	5085	258.41
08-09	08-06	GRAINGER 877-2022594 IL PUR ID: 6518381362 TAX: 0.00	24755421219152190653049	5085	444.15
08-10	08-09	SPORTY'S CATALOGS 513-735-9000 OH PUR ID: 09321094 TAX: 0.00	24492151221743093210940	5965	79.13
08-10	08-09	ALLIANT ENERGY - IPL 800-255-4268 WI PUR ID: 1905247295320651000 TAX: 0.00	24692161221100849328095	4900	32.41
08-10	08-09	GAN*1150DESMOINEREGCIR 888-426-0491 IN PUR ID: 00697202340DA8556800 TAX: 0.00	24692161221100862020025	5968	10.59
08-10	08-08	JET AIR INC IOW 888-7671982 IA PUR ID: 9603 TAX: 0.00	24717051221162212809444	5541	234.86
08-11	08-10	COUNTY TREASURER INTERNET 888-3045989 IA PUR ID: 122231226754 TAX: 0.00	24013391222001620204907	9311	11.00
08-11	08-10	COUNTY TREASURER INTERNET 888-3045989 IA PUR ID: 122217336978 TAX: 0.00	24013391222001624147722	9399	0.25
08-11	08-10	BROKEN ARROW T SHIRT 800-810-4692 IA PUR ID: 06489080795 TAX: 0.00	24247601222300567221571	5699	1,621.79
08-11	08-10	BESTBUYCOM806481168529 888BESTBUY MN PUR ID: 00000000000000000 TAX: 28.95	24399001222503670023565	5732	449.99
08-11	08-10	GALLS 859-266-7227 KY PUR ID: PO 721486646006 TAX: 0.00	24435651222762866460068	5137	98.91
08-11	08-10	MISTER CAR WASH 520-615-4000 AZ PUR ID: MCWREC000008351 TAX: 0.00	24692161222100223405013	7542	386.59

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Account Name:	HEATHER L DIXON
Company Name:	STATE OF IOWA PURCHASING
Account Number:	XXXX-XXXX-XXXX-0195
Statement Date:	08-20-21

NEW ACCOUNT ACTIVITY

POST DATE	TRAN DATE	TRANSACTION DESCRIPTION	REFERENCE NUMBER	MCC	AMOUNT
08-11	08-10	ALLIANT ENERGY - IPL 800-255-4268 WI PUR ID: 191422357224799100 TAX: 0.00	24692161222100626025566	4900	38.23
08-11	08-10	ALLIANT ENERGY - IPL 800-255-4268 WI PUR ID: 1914230828938540000 TAX: 0.00	24692161222100626026440	4900	206.69
08-11	08-10	GRAINGER 877-2022594 IL PUR ID: PO NUMBER TAX: 0.00	24755421223122232373603	5085	19.46
08-12	08-11	FRONTIER COMM CORP WEB 800-921-8101 CT PUR ID: 71226346210131627 TAX: 11.70	24055231223083709276119	4899	195.95
08-12	08-11	DALTON PLUMBING HEATIN 000-0000000 IA PUR ID: 0 TAX: 0.00	24071051223939100427597	1711	360.75
08-12	08-10	SPRINGER PEST CONTROL - M 515-262-9229 IA PUR ID: 115486 TAX: 0.00	24269791223500520590407	7342	61.00
08-12	08-11	AMZN MKTP US*2P20G7602 AMZN.COM/BILL WA PUR ID: garage TAX: 0.00	24692161223100113223822	5942	242.50
08-12	08-11	AMZN MKTP US*2D1J95OI0 AMZN.COM/BILL WA PUR ID: garage TAX: 0.00	24692161223100120580529	5942	7.99
08-12	08-11	AMZN MKTP US*2D0QH2341 AMZN.COM/BILL WA PUR ID: Jasmine-POR-4120 TAX: 0.00	24692161223100140841166	5942	37.99
08-12	08-11	AMZN MKTP US*2D66853Y1 AMZN.COM/BILL WA PUR ID: TI TAX: 0.00	24692161223100920231273	5942	78.40
08-12	08-11	MCKESSON MEDICAL SURGICAL 800-2341464 VA PUR ID: 0 TAX: 0.00	24717051224642240244661	5047	333.39
08-13	08-12	HY-VEE JOHNSTON 1318 JOHNSTON IA PUR ID: TAX: 0.00	24137461225001268639504	5411	4,940.00
08-13	08-12	GALLS 859-266-7227 KY PUR ID: PO 223010539761 TAX: 0.00	24435651224762105397616	5137	45.90
08-13	08-12	WELDON, WILLIAMS & LIC 479-783-4113 AR PUR ID: 9090 TAX: 0.00	24638181224017031439138	2741	3,889.60
08-13	08-12	WELDON, WILLIAMS & LIC 479-783-4113 AR PUR ID: 9090 TAX: 0.00	24638181224017031439146	2741	45.76
08-13	08-12	WELDON, WILLIAMS & LIC 479-783-4113 AR PUR ID: 9090 TAX: 0.00	24638181224017031439153	2741	640.64
08-13	08-12	WELDON, WILLIAMS & LIC 479-783-4113 AR PUR ID: 9090 TAX: 0.00	24638181224017031439161	2741	4,496.50
08-13	08-12	WELDON, WILLIAMS & LIC 479-783-4113 AR PUR ID: 9090 TAX: 0.00	24638181224017031439179	2741	740.60
08-13	08-12	WELDON, WILLIAMS & LIC 479-783-4113 AR PUR ID: 9090 TAX: 0.00	24638181224017031439187	2741	52.90
08-13	08-12	FREEMAN 515-265-5601 IA PUR ID: 499205 TAX: 0.00	24692161224100645259889	1799	1,659.00
08-13	08-12	AMZN MKTP US*2D5J19A51 AMZN.COM/BILL WA PUR ID: RSC TAX: 0.00	24692161224100868182032	5942	39.96
08-13	08-12	CARTER PRINTING CO 515-2656139 IA PUR ID: 007081221000003 TAX: 0.00	24755421224282246536204	2741	622.00
08-13	08-11	BELL BROTHERS HEATING AND 515-208-3543 IA PUR ID: 2878764366 TAX: 0.00	24988951224018013398039	1711	1,213.45
08-16	08-15	HY-VEE JOHNSTON 1318 JOHNSTON IA PUR ID: TAX: 0.00	24137461228001093237174	5411	4,940.00

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Account Name:	HEATHER L DIXON
Company Name:	STATE OF IOWA PURCHASING
Account Number:	XXXX-XXXX-XXXX-0195
Statement Date:	08-20-21

NEW ACCOUNT ACTIVITY

POST DATE	TRAN DATE	TRANSACTION DESCRIPTION	REFERENCE NUMBER	MCC	AMOUNT
08-16	08-13	STREICHER'S MO 763-546-1155 MN PUR ID: CC7006 TAX: 195.50	24323001225083324647034	5999	2,793.25
08-16	08-13	GALLS 859-266-7227 KY PUR ID: PO 224278531346 TAX: 0.00	24435651225762785313460	5137	2,698.55
08-16	08-14	GALLS 859-266-7227 KY PUR ID: PO 225907534561 TAX: 0.00	24435651226762075345619	5137	3,807.70
08-16	08-13	NEBRASKA DENTISTRY AND OR 531-999-3230 NE PUR ID: 92MVSQBG TAX: 30.11	24460081227030045794952	0742	460.28
08-16	08-13	BRILLIANTPROMOS 855-386-7924 AZ PUR ID: 51349862 TAX: 0.00	24492151225852513498625	7392	2,620.79
08-16	08-13	MCVC LLC 515-462-3711 IA PUR ID: 0195 TAX: 0.00	24656271225027017375029	0742	506.30
08-16	08-13	ALL AMERICAN PEST CONTROL 641-472-5474 IA PUR ID: 0195 TAX: 0.00	24656271227030092750718	7342	45.00
08-16	08-13	AMZN MKTP US*2P9OB1U02 AMZN.COM/BILL WA PUR ID: Academy TAX: 0.00	24692161225100872137625	5942	49.01
08-16	08-13	ALLIANT ENERGY - IPL 800-255-4268 WI PUR ID: 1940114695532310000 TAX: 0.00	24692161225100931727606	4900	2,204.67
08-16	08-14	AMZN MKTP US*2P67Q5IG2 AMZN.COM/BILL WA PUR ID: Academy TAX: 0.00	24692161226100358652203	5942	928.40
08-16	08-14	TRUGREEN *LOCKBOX 800-878-4733 TN PUR ID: 1479773175 TAX: 0.00	24692161226100368659248	0780	99.00
08-16	08-14	AMZN MKTP US*2D7XE2TP0 AMZN.COM/BILL WA PUR ID: garage TAX: 0.00	24692161226100533074679	5942	29.95
08-16	08-14	AMZN MKTP US*2P6R50RG2 AMZN.COM/BILL WA PUR ID: Stock TAX: 0.00	24692161226100713501798	5942	199.80
08-16	08-15	AMZN MKTP US*2D1MT9XV1 AMZN.COM/BILL WA PUR ID: Fleet & supply TAX: 0.00	24692161227100895367579	5942	19.99
08-16	08-13	CARTER PRINTING CO 515-2656139 IA PUR ID: 008081321000003 TAX: 0.00	24755421225292251263817	2741	65.00
08-17	08-15	EXEC 1 AVIATION II, LLC 866-720-3797 IA PUR ID: 005403 TAX: 68.92	24431051228838005403036	5983	6,892.36
08-17	08-16	USPS STAMPS ENDICIA 888-434-0055 DC PUR ID: 400446997 TAX: 0.00	24445001229600095453711	9402	200.00
08-17	08-16	USPS STAMPS ENDICIA 888-434-0055 DC PUR ID: 400497590 TAX: 0.00	24445001229600095453893	9402	100.00
08-17	08-16	CRYSTAL CLEAR WATER CO 515-2652324 IA PUR ID: 1191877 TAX: 0.00	24755421228172284032453	5999	91.90
08-17	08-16	GRAINGER 877-2022594 IL PUR ID: PO NUMBER TAX: 0.00	24755421229122292632686	5085	42.60
08-17	08-16	GRAINGER 877-2022594 IL PUR ID: PO NUMBER TAX: 0.00	24755421229122292632702	5085	6.78
08-17	08-16	DAPPER DANS ABSOLUT DRY C 515-965-0596 IA PUR ID: 0195 TAX: 19.61	24988951228027015854507	7216	346.50
08-18	08-17	TRASHBILLING.COM CC 802-5603595 VT PUR ID: 417420002126 TAX: 5.40	24183101229229160619024	4900	82.60
08-18	08-17	STREICHER'S MO 763-546-1155 MN PUR ID: CC7019 TAX: 346.59	24323001229083749710959	5999	4,951.95

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Account Name:	HEATHER L DIXON
Company Name:	STATE OF IOWA PURCHASING
Account Number:	XXXX-XXXX-XXXX-0195
Statement Date:	08-20-21

NEW ACCOUNT ACTIVITY

POST DATE	TRAN DATE	TRANSACTION DESCRIPTION	REFERENCE NUMBER	MCC	AMOUNT
08-18	08-17	GALLS 859-266-7227 KY PUR ID: PO 228959536949 TAX: 0.00	2443565122976259536949 2	5137	472.84
08-18	08-17	TOMMYS EXPRESS HTTPSWWW.TOMM MI PUR ID: 62744771 TAX: 0.00	24492151229637627447717	7542	19.99
08-18	08-17	TOMMYS EXPRESS HTTPSWWW.TOMM MI PUR ID: 62748242 TAX: 0.00	24492151229637627482425	7542	19.99
08-18	08-17	TOMMYS EXPRESS HTTPSWWW.TOMM MI PUR ID: 62748875 TAX: 0.00	24492151229637627488752	7542	19.99
08-18	08-17	TOMMYS EXPRESS HTTPSWWW.TOMM MI PUR ID: 62749583 TAX: 0.00	24492151229637627495831	7542	19.99
08-18	08-17	TOMMYS EXPRESS HTTPSWWW.TOMM MI PUR ID: 62750952 TAX: 0.00	24492151229637627509524	7542	19.99
08-18	08-17	TOMMYS EXPRESS HTTPSWWW.TOMM MI PUR ID: 62752942 TAX: 0.00	24492151229637627529423	7542	19.99
08-18	08-17	TOMMYS EXPRESS HTTPSWWW.TOMM MI PUR ID: 62754376 TAX: 0.00	24492151229637627543762	7542	19.99
08-18	08-17	TOMMYS EXPRESS HTTPSWWW.TOMM MI PUR ID: opsnt3e0m1e6 TAX: 0.00	24492161229000022201503	7542	19.99
08-18	08-17	TOMMYS EXPRESS HTTPSWWW.TOMM MI PUR ID: opsnt3egh4b7a0q TAX: 0.00	24492161229000022221451	7542	19.99
08-18	08-17	TOMMYS EXPRESS HTTPSWWW.TOMM MI PUR ID: opsnt3ea TAX: 0.00	24492161229000022311823	7542	19.99
08-18	08-17	TOMMYS EXPRESS HTTPSWWW.TOMM MI PUR ID: opsnt3ebmbyjgauxm TAX: 0.00	24492161229000022348148	7542	19.99
08-18	08-17	TOMMYS EXPRESS HTTPSWWW.TOMM MI PUR ID: opsnt3ec92ck TAX: 0.00	24492161229000022370415	7542	19.99
08-18	08-17	IN *DEMUTH CLEANING SERVI 319-2681521 IA PUR ID: 4909922 TAX: 0.00	24692161229100920507981	1520	4,990.04
08-18	08-17	GRAINGER 877-2022594 IL PUR ID: PO NUMBER TAX: 0.00	24755421230122302591390	5085	372.70
08-19	08-18	INTOXIMETERS INC 314-429-4000 MO PUR ID: 56790015 TAX: 132.38	24412951230207567900153	8734	1,500.00
08-20	08-19	FEDEX 93452021 800-4633339 TN PUR ID: 93452021 TAX: 0.00	24164071231741934520217	4215	33.32
08-20	08-18	SPRINGER PEST CONTROL - M 515-262-9229 IA PUR ID: 144427 TAX: 0.00	24269791231500571249069	7342	183.00
08-20	08-18	EXEC 1 AVIATION II, LLC 866-720-3797 IA PUR ID: 005419 TAX: 111.49	24431051231838005419037	5983	11,148.88
08-20	08-19	NORTH AMERICAN RESCUE LL GREER SC PUR ID: EC2166248 TAX: 504.34	24941661231083316185105	5047	8,909.00

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dalton Since 1959
Plumbing | Heating | Cooling | Electric | Fireplaces
Your comfort is our promise.

Invoice

Dalton Plumbing, Heating, Cooling,
Electric & Fireplaces Inc.
5536 Nordic Dr.
Cedar Falls IA 50613
319-266-3513 FAX: 319-266-3515
85-2031117

RECEIVED
FEB 23 REC'D
POST 9

Account # 103542

Invoice # 445080
Date: 2/18/2021
Page # 1 of 1

IOWA STATE PATROL
1510 W. 1st St.
Cedar Falls IA 50613

Service At:
IOWA STATE PATROL
1510 W. 1st St.
Cedar Falls IA 50613

Service Date 2/18/2021 PO # Job # 348316 Contract # Claim #

Found out side faucet line come apart and line is expanded so fittings will not work located line down stairs and shut off capped it so it could not be used . Wp 2-18-21 please send bill as it is state property thank you

Description Of Service	Quantity	Unit Price	Extended Price	Tax
Plumbing Diagnostic Analysis	1	$87.00	$87.00	
(.25) Cap & Check	1	$159.00	$159.00	

Balance Due **$246.00**

LIKE US ON FACEBOOK. NOW OFFERING ELECTRICAL SERVICES. PLEASE VISIT OUR FIREPLACE SHOWROOM

Terms: Due Upon Receipt **Please pay from this Invoice**

Please Detach and Return with Remittance

Check Enclosed [ ] Method of Payment
Master Card [ ] Visa [ ] AmExp [ ] Discover [ ]
Acct #_____ Exp Date_____
Name on Card_____
Signature_____

Invoice # 445080
Date : 2/18/2021
Account # 103542
IOWA STATE PATROL

Remit To:
Dalton Plumbing, Heating, Cooling,
5536 Nordic Drive
Cedar Falls IA 50613

Amount Due **$246.00**
Amount Paid

G. Bm. B #46

SERVPRO
Fire & Water - Cleanup & Restoration™

SERVPRO of Black Hawk County
P.O. Box 896
Waterloo, IA 50704
Phone: (319) 268-1521

6/21

INVOICE

4909922

DATE: 06/04/2021
TERMS: Due upon receipt

BILL TO

Mark Sigwarth
Iowa State Patrol
1510 W 1st St
Cedar Falls, IA 50613

SERVICE ADDRESS

Mark Sigwarth
Iowa State Patrol
1510 W 1st St
Cedar Falls, IA 50613

PROJECT MANAGER: Keith Romans

INSURANCE CO:

SERVICE TYPE	DESCRIPTION	AMOUNT
Water Remed	Water Restoration	3,818.87
Other	Subcontracted work - other.	97.93
Floor Covering	Floor covering subcontracted.	1,073.24

SALES TAX	
TOTAL	4,990.04
PAYMENT	
TOTAL DUE	**$4,990.04**

REVIEW US!
Your feedback is important to us. Please take a moment to review us online. Thank you for choosing SERVPRO.

For your payment convenience, we accept Visa, MasterCard, American Express and Discover. If you would like to pay by credit card, please call our office at (319) 268-1521

Independently Owned and Operated by:
Demuth Cleaning Services
Tax ID: 45-4661131

CONTRACT

4999

This contract is effective on March 31, 2021, and is made by and between the Iowa Department of Public Safety, hereinafter referred to as Department, an agency of the State of Iowa, and SERVPRO, hereinafter referred to as Contractor.

In consideration of the mutual covenants contained in this Contract, the sufficiency of which is acknowledged, it is agreed as follows:

SECTION 1. IDENTITY OF THE PARTIES.

1.1 The Iowa Department of Public Safety is a department of the State of Iowa government authorized by Iowa Code Chapter 80 to conduct a Law Enforcement and Criminal Justice programs. The Iowa Department of Public Safety address is:

215 E 7th St.
Des Moines, Iowa 50319

1.2 The Contractor is engaged in the business of, among other things, The address of the Contractor is:

3165 W AIRLINE HWY

P. O. BOX 896

WATERLOO, IA 50704

319-268-1521

SECTION 2. PURPOSE.

2.1 The parties have entered into this Contract for the purpose of retaining the Contractor to: CLEAN UP THE WATER DAMAGE AND SUBCONTRACT FLOORING AND DRYWALL IN OFFICE AT DISTRICT 9.

SECTION 3. PROJECT DESCRIPTION.

3.1 The Contractor will CLEAN UP THE WATER DAMAGE AND SUBCONTRACT FLOORING AND DRYWALL AT THE DISTRICT 9 OFFICE.

SECTION 4. COMPENSATION. The Contractor will be paid for the work described in Section 3 a fee not to exceed $4,990.04 dollars.

SECTION 5. DURATION. This Contract shall become effective on the date of execution and will remain in effect until the project is completed on, or before 12/31/2021, unless terminated in accordance with Section 6 of this Contract.

SECTION 6. DEFAULT AND TERMINATION.

6.1 For Cause by the Department. The occurrence of any one or more of the following events shall constitute cause for the Department to declare the Contractor in default of its obligations under this Contract.

6.1.1 Failure to observe and perform any covenant, condition or obligation created by the Contract; or

6.1.2 Failure to make substantial and timely progress toward performance of the Contract; or

6.1.3 Failure of the Contractor work product and services to conform with any specifications noted herein.

6.2 Notice of Default. If there is a default event, the Department shall provide written notice to the Contractor requesting that the breach or noncompliance be immediately remedied. In the event that the breach or noncompliance continues to be evidenced fifteen (15) days beyond the date of the written notice, the Department may either:

6.2.1 Immediately terminate the Contract without additional written notice; or,

6.2.2 Enforce the terms and conditions of the Contract and seek any legal or equitable remedies.

In either event, the Department may seek damages and payment of reasonable attorney fees and costs as a result of the breach or failure to comply with the terms of the Contract.

6.3 For Cause by the Contractor. The occurrence of any one or more of the following events shall constitute cause for the Contractor to declare the Department in default of its obligations under this Contract.

6.3.1 Failure to observe and perform any covenant, condition or obligation created by the Contract; or

6.3.2 Failure to make timely payment for the work performed on the project.

6.4 Notice of Default. If there is a default event, the Contractor shall provide written notice to the Department requesting that the breach or noncompliance be immediately remedied. In the event that the breach or noncompliance continues to be evidenced fifteen (15) days beyond the date of the written notice, the Contractor may either:

6.4.1 Immediately terminate the Contract without additional written notice; or,

6.4.2 Enforce the terms and conditions of the Contract and seek any legal or equitable remedies.

In either event, the Contractor may seek damages and payment of reasonable attorney fees and costs as a result of the breach or failure to comply with the terms of the Contract.

6.5 Termination Due to Lack of Funds or Change in Law. Notwithstanding anything in this Contract to the contrary, and subject to the limitations, conditions, and procedures set forth below, the Department shall have the right to terminate this Contract without penalty by giving sixty (60) days written notice to the Contractor as a result of any of the following:

6.5.1 The legislature or governor fail to appropriate funds sufficient to allow the Department to operate as required and to fulfill its obligations under this Contract;

6.5.2 Funds are de-appropriated or not allocated;

6.5.3 The Department authorization to conduct its business is withdrawn or there is a material alteration in the programs the Department administers.

6.5.4 If Department duties are substantially modified.

The Department agrees to make a reasonable request for the necessary funds. If any appropriation to cover the costs of this Contract becomes available within sixty (60) days subsequent to termination under this clause, the Department agrees to re-enter the Contract with the Contractor under the same provisions, terms and conditions as the original Contract.

6.6 Remedies of the Contractor In The Event of Non-Appropriation. In the event of termination of this Contract due to non-appropriation, the exclusive, sole and complete remedy of the Contractor shall be payment for services completed for services completed prior to termination.

6.7 Mutual Agreement. With the mutual consent of both parties upon receipt and acceptance of written notice, the Contract may be terminated on an agreed upon date prior to the end of the end of the term of this Contract without penalty to either party. The agreed termination date shall not be less than thirty (30) days from the first of the month following the date of notification. The Contractor shall be paid for services completed prior to termination. Upon notification and acceptance of termination, no further work will be performed on the project.

6.8 Delay or Impossibility of Performance. The Contractor shall not be considered to be in default under this Contract if performance is delayed or made impossible by an act of God, flood, dire, strike or similar events. In each such case, the delay or impossibility must be beyond the control and without the fault or negligence of the Contractor. If delay results from a subcontractor's conduct, negligence or failure to perform, the Contractor shall not be excused from compliance with the terms and obligations of this Contract.

6.9 Set Off. Should the Department obtain a money judgment against the Contractor as a result of a default under this Contract, the Contractor shall consent to such judgment being set off from moneys owed the Contractor by the State of Iowa or any other agency of the State of Iowa under any other Contract.

SECTION 7. INDEMNIFICATION.

7.1 The Contractor agrees to defend, indemnify and hold the State of Iowa and the Department harmless from any and all liabilities, damages, settlements, judgments, costs and expenses, including reasonable attorney's fees of the Attorney General's Office, and the costs and expenses and attorney fees of other counsel required to defend the Department related to or arising from:

7.1.1 Any violation of this Contract; or

7.1.2 Any negligent acts or omissions of the Contractor, its officers, employees, agents, board members, contractors or subcontractors or any other person in connection with the project; or

7.1.3 Claims for infringement of patents, trademarks, trade dress, trade secrets, or copyrights arising from the design of the project; or

7.1.4 The Contractor's performance or attempted performance of this Contract.

7.1.5 Any failure by the Contractor to comply with all local, state and federal laws and regulations.

7.1.6 Any failure by the Contractor to make all reports, payments and withholdings required by Federal and State law with respect to social security, employee income and other taxes, fees or costs required by the Contractor to conduct business in the State of Iowa.

SECTION 8. CONTRACT ADMINISTRATION.

8.1 Independent Contractor. The status of the Contractor shall be that of an independent Contractor. The Department shall not provide the Contractor with office space, support staff, equipment or tools, or supervision beyond the terms of this Contract. Neither the Contractor nor its employees are eligible for any State employee benefits, including but not limited to, retirement benefits, insurance coverage or paid leave. Neither the Contractor nor its employees shall be considered employees of the Department or the State of Iowa for federal or state tax purposes. The Department shall not withhold taxes on behalf of the Contractor (unless required by law). The Contractor shall be responsible for payment of all taxes in connection with any income earned from this project.

8.2 Compliance With Equal Employment And Affirmative Action Provisions. The Contractor shall comply with all provisions of federal, state and local laws, rules and executive orders to insure that no employee or applicant for employment is discriminated against because of race, religion, color, age, sex, national origin, or disability. The Contractor, if requested, shall provide state or federal agencies with appropriate reports as required to ensure compliance with equal opportunity laws and regulations. The Contractor shall insure that all authorized subcontractors assigned to the project comply with the provisions of this clause.

8.3 Choice of Law and Forum. The terms and provisions of this Contract shall be construed in accordance with the laws of the State of Iowa. Any and all litigation or actions commenced in connection with this Contract shall be brought in Des Moines, Iowa, in Polk County District Court for the State of Iowa. If, however, jurisdiction is not proper in the Polk County District Court, the action shall only be brought in the United States District Court for the Southern District of Iowa, Central Division, provided that jurisdiction is proper in that forum. This

provision shall not be construed as waiving any immunity to suit or liability which may be available to the Department or the State of Iowa.

8.4 Assignment and Delegation. This Contract may not be assigned, transferred or conveyed in whole or in part without the prior written consent of the other party. For purposes of construing this clause, a transfer of a controlling interest in the Contractor shall be considered an assignment.

8.5 Integration. This Contract represents the entire Contract between the parties and neither party is relying on any representation that may have been made which is not included in this Contract.

8.6 Severability. If any provision of this Contract is determined by a court of competent jurisdiction to be invalid or unenforceable, such determination shall not affect the validity or enforceability of any other part of provision of this Contract.

8.7 Compliance with Laws and Regulations. The Contractor shall comply with all applicable state and federal laws, rules, ordinances, regulations and orders. The Contractor declares that it has complied with all federal, state and local laws regarding business permits and licenses that may be required to carry out the work to be performed under this Contract.

8.8 The Department reserves the right to require the Contractor to replace the Contractor's personnel or sub-vendor's personnel whom Department finds to be unsuitable for work in the Department's environment.

SECTION 9. DEBARRED, SUSPENDED, AND INELIGIBLE STATUS.

Contractor certifies that the Contractor and/or any of it subcontractors have not been debarred, suspended, or declared ineligible by any agency of the State of Iowa or as defined in the Federal Acquisition Regulation (FAR) 48 C.F.R. Ch.1 Subpart 9.4. Contractor will immediately notify the State if Contractor is debarred by the State or placed on the Consolidated List of Debarred, Suspended, and Ineligible Contractors by a federal entity.

SECTION 10. EXECUTION.

IN WITNESS WHEREOF, in consideration of the mutual covenants set forth above and for other goods and valuable consideration, the receipt, adequacy and legal sufficiency of which are hereby acknowledged, the parties have entered into the above Contract and have caused their duly authorized representatives to execute this Contract.

Contractor:

Signature: _____ Date: 3/31/2021

Name: Nicole Pickett Title: Office Manager

State of Iowa, Iowa Department of Public Safety

Signature: Lt. BN. B #66 Date: 3/31/2021

Name: Brian Beenen Title: District Commander

MEMBERS OF COUNCIL

HON. KIM REYNOLDS
GOVERNOR

HON. PAUL D. PATE
SECRETARY OF STATE

HON. ROB SAND
AUDITOR OF STATE

HON. MICHAEL L. FITZGERALD
TREASURER OF STATE

HON. MICHAEL L. NAIG
SECRETARY OF AGRICULTURE

Executive Council of Iowa

CAPITOL BUILDING
DES MOINES, IOWA 50319
PHONE: 515 281-5368

June 6, 2022

Mr. Kyle Harms
Office of the Treasurer
LOCAL

Dear Mr. Harms:

The Executive Council, in a meeting held on this date, approved payment of the following cost item:

Board of Regents - University of Iowa ……...…….....$6,233.78
On May 29, 2020, a drain backed up causing water damages at the Pomerantz Center. Request was to cover repair costs.

This represents full and final payment.

EXECUTIVE COUNCIL OF IOWA

Victoria Newton

Victoria Newton
Executive Secretary

cc: John Nash, Director of Facilities, Board of Regents
Camille Walters, Risk Management Administrator, University of Iowa
Andrea Anania, Board of Regents
Aimee Claeys, Board of Regents
Linda Leto, Department of Management

AOS Claim ID 1943
TOS Job # 2272

OFFICE OF AUDITOR OF STATE
STATE OF IOWA

Rob Sand
Auditor of State

State Capitol Building
Des Moines, Iowa 50319-0004

Telephone (515) 281-5834 Facsimile (515) 281-6518

May 20, 2022

Victoria Newton
Executive Council
L O C A L

Subject: Water Damages due to Drain Back-up at Pomerantz Center on May 29, 2020
University of Iowa – Board of Regents
Claim dated November 18, 2021
AOS Claim ID: 1943

In accordance with Executive Council policy, we have examined the invoices for final payment related to this damage and have found the items to be in order as shown below:

Documented request		$ 6,233.78
Executive Council Allocation		$ 6,233.78
Less:		
Previous payments	$ 0.00	
This payment	6,233.78	
Total		$ 6,233.78
Remaining Executive Council allocation		$ 0.00

We recommend reimbursement be made in the amount of $6,233.78. This represents full and final payment of the loss.

Sincerely,

Ernest H. Ruben, Jr., CPA
Deputy Auditor of State

cc: Camille Walters, Risk Management Administrator, University of Iowa
John Nash, Director of Facilities, Board of Regents

Business Services

Risk Management, Insurance and Loss Prevention

University of Iowa
202 Plaza Centre One
Iowa City, Iowa 52242-2501
319-335-0010
Fax 319-353-1893

May 3, 2022

Executive Council of Iowa
Office of Treasurer of State
State Capitol Building
Des Moines, IA 50319

Re: Formal Loss Report - University of Iowa – Pomerantz Center Drain Back-up (5/29/2020)

Dear Executive Council,

On May 29, 2020, a floor drain backed up at the Pomerantz Center, located at 213 North Clinton Street, Iowa City, Iowa. The original loss notice was provided to the Executive Council, State Auditors and Board of Regents on June 1, 2020 and a Preliminary Loss Report was submitted on November 18, 2021.

The purpose of this letter is to provide the final expense details for this claim which are:

- **Remediation and Repair for the Drain Back-up: $6,233.78.**

Please see the attached summary of claim expenses and copies of all invoices and proof of payments. Based on the information provided herein, The University of Iowa respectfully requests an award of **$6,233.78** from the State of Iowa Executive Council, pursuant to Chapter 29C:20, Contingent Fund, Code of Iowa.

We appreciate your review and look forward to your response. Please feel free to contact me with any questions.

Sincerely,

Camille Walters
Risk Management Manager

cc: Tammy Hollingsworth
John Nash
Debby Zumbach
Josey Bathke

Walters, Camille

Subject: University of Iowa Pomerantz Center - Property Loss Notice
Attachments: Pomerantz Water Photos.pdf

From: Walters, Camille <camille-walters@uiowa.edu>
Sent: Monday, June 1, 2020 7:56 AM
To: executivecouncil@tos.iowa.gov; Tammy Hollingsworth <Tammy.Hollingsworth@AOS.IOWA.GOV>; John Nash (john.nash@iowaregents.edu) <john.nash@iowaregents.edu>
Cc: Debby Zumbach (deborah-zumbach@uiowa.edu) <deborah-zumbach@uiowa.edu>; Josey Bathke <josephine-bathke@uiowa.edu>
Subject: University of Iowa Pomerantz Center - Property Loss Notice

Hello,

Risk Management was notified of an incident at the Pomerantz Center, located at 213 North Clinton Street, Iowa City, IA. On 5/29/2020, water backed up into the building from floor drains. We are investigating the incident at this time but the estimated damages are expected to exceed $5,000. Attached are photos of the incident.

We will submit a preliminary loss report once we have a better estimate.

Please feel free to contact me with any questions or concerns.

Thank you

Camille

Fdp lodh#Z dowhuv

University of Iowa, Risk Management

430 Plaza Centre One, 125 S Dubuque St, Iowa City, IA 52242

Phone 319-335-5357

Business Services

Risk Management, Insurance and Loss Prevention

University of Iowa
430 Plaza Centre One
Iowa City, Iowa 52242-2501
319-335-0010
Fax 319-353-1893

November 18, 2021

Executive Council of Iowa
Office of Treasurer of State
State Capitol Building
Des Moines, IA 50319

Re: University of Iowa – Pomerantz Center Drain Back-up – Preliminary Loss Report (5/29/2020)

Dear Executive Council,

On May 29, 2020, a floor drain backed up at the Pomerantz Center located at 213 North Clinton Street, Iowa City, Iowa. There was minor water damage to the building that required remediation and minor repair.

The purpose of this Preliminary Loss Report is to notify you of our current damage estimate and to request allocation of funds for remediation and repair of the damaged building components. Our estimated damage is approximately **$6,233.78**. We will provide a Formal Loss Report and supporting documentation after we receive a funding allocation.

Please feel free to contact me with any questions or concerns.

Sincerely,

Camille Walters

Camille Walters
Risk Management Administrator

cc: Tammy Hollingsworth
John Nash
Debby Zumbach
Josey Bathke

Department of Risk Management
Insurance & Loss Prevention
202 Plaza Centre One (PCO)
Iowa City, IA 52242-2500
Phone 319-335-0010
Fax 319-353-1893

General Fund 29C:20 Property Claim Costs - Pomerantz Center Drain Backed up

Building:	Pomerantz Center	**Date of Loss:**	5/29/2020
Department:	Facilities Management	**Completed by:**	Camille Walters
		UI Claim #:	PR-21239-SUI

Category	Reference #	Vendor	PO	Voucher	29C:20 Claim Costs
Building	1B	Servpro - Job 20-665637	1002298269	83550995	$ 5,501.88
Building	2B	HD Supply Construction - Job 20-665637	C000568954	83552096	$ 365.95
Building	3B	HD Supply Construction - Job 20-665637	C000568954	83553082	$ 365.95
				Building Total	**$ 6,233.78**
Equipment		None			$ -
Equipment		None			$ -
				Equipment Total	**$ -**
				GRAND TOTAL	**$ 6,233.78**

Team Meyer

Iowa Franchises: #9784 / 10071 / 10618 / 10619 / 11087
Missouri Franchises: #11148 / 11149 / 11150
615 Hwy 1 West
Iowa City, IA 52246
844-965-0001
Tax ID #27-0863347

Client:	U of I - Pomerantz Career Center
Property:	213 N Clinton Street Iowa City, IA 52245
Operator:	JANE

Estimator:	Mike Raffensperger	Business:	(844) 965-0001
Position:	Project Manager	E-mail:	mraffensperger@servpro.me
Company:	Team Meyer		
Business:	615 Hwy 1 West Iowa City , IA 52246		

Type of Estimate:	Water Damage		
Date Entered:	5/29/2020	Date Assigned:	

Price List:	IACR8X_MAY20
Labor Efficiency:	Restoration/Service/Remodel
Estimate:	UOFI_PC_MITIGATION

Dear U of I - Pomerantz Career Center,

Attached you will find the total bill associated with the mitigation at your property. The total of the bill is $5,501.88. Please feel free to contact me with any questions or concerns.

Building Code: PC
DOL: 5/29/20
PO#: 1002298269

Regards,
Mike Raffensperger
(844) 965-0001
mraffensperger@servpro.me

Team Meyer

Iowa Franchises: #9784 / 10071 / 10618 / 10619 / 11087
Missouri Franchises: #11148 / 11149 / 11150
615 Hwy 1 West
Iowa City, IA 52246
844-965-0001
Tax ID #27-0863347

UOFI_PC_MITIGATION

Labor

DESCRIPTION	QTY	REMOVE	REPLACE	TAX	TOTAL
1. Project Manager	4.75 HR	0.00	82.50	0.00	391.88
5/29/20 - 1 PM for 3.25 hours *6/2/20 - 1 PM for 1.5 hours*					
2. Restoration Technician	16.50 HR	0.00	45.00	0.00	742.50
5/29/20 - 1 RT for 2.5 hours *6/1/20 - 2 RTs for 1.67 hours each* *6/2/20 - 2 RTs for 1.75 hours each, 3 RTs for 1.5 hours each* *6/3/20 - 2 RTs for 1.33 hours each*					
3. Project Administration/Clerical	3.00 HR	0.00	37.00	0.00	111.00
5/29/20 - 1 PA/C for 1 hour *6/1/20 - 1 PA/C for 30 mins* *6/2/20 - 1 PA/C for 30 mins* *6/3/20 - 1 PA/C for 1 hour*					
Totals: Labor				0.00	1,245.38

Equipment

DESCRIPTION	QTY	REMOVE	REPLACE	TAX	TOTAL
4. Air Mover	67.00 DA	0.00	32.50	0.00	2,177.50
5/29/20 - 19 *5/30/20 - 19* *5/31/20 - 19* *6/1/20 - 6* *6/2/20 - 4*					
5. Company Owned Vehicle	2.00 DA	0.00	95.00	0.00	190.00
5/29/20 - 1 *6/2/20 - 1*					
6. Dehumidifier	8.00 DA	0.00	75.50	0.00	604.00
5/29/20 - 2 *5/30/20 - 2* *5/31/20 - 2* *6/1/20 - 1* *6/2/20 - 1*					
7. Extraction Unit (Portable)	1.00 DA	0.00	125.00	0.00	125.00
5/29/20 - 1					
8. Air Scrubber	5.00 DA	0.00	140.00	0.00	700.00

Team Meyer

Iowa Franchises: #9784 / 10071 / 10618 / 10619 / 11087
Missouri Franchises: #11148 / 11149 / 11150
615 Hwy 1 West
Iowa City, IA 52246
844-965-0001
Tax ID #27-0863347

CONTINUED - Equipment

DESCRIPTION	QTY	REMOVE	REPLACE	TAX	TOTAL
5/29/20 - 1 *5/30/20 - 1* *5/31/20 - 1* *6/1/20 - 1* *6/2/20 - 1*					
9. Vehicle - Cargo Van	4.00 DA	0.00	115.00	0.00	460.00
5/29/20 - 1 *6/1/20 - 1* *6/2/20 - 1* *6/3/20 - 1*					
Totals: Equipment				0.00	4,256.50
Line Item Totals: UOFI_PC_MITIGATION				**0.00**	**5,501.88**

Team Meyer

Iowa Franchises: #9784 / 10071 / 10618 / 10619 / 11087
Missouri Franchises: #11148 / 11149 / 11150
615 Hwy 1 West
Iowa City, IA 52246
844-965-0001
Tax ID #27-0863347

Summary for Dwelling

Line Item Total	5,501.88
Replacement Cost Value	**$5,501.88**
Net Claim	**$5,501.88**

Mike Raffensperger
Project Manager

AP/PO PeopleSoft Web Applications

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Payment details for voucher: 83550995

Voucher ID	Vendor ID	Remit LOC	Vendor Name	Gross Voucher Amt.	Payment Handling Code
83550995	0000639859	002	Servpro	$5,501.88	AC

Payment Status	Payment Information	Invoice #	Invoice Date	Remit to	Amt From Voucher
PAID	ACH:738735 Dt: 07/08/2020 Amt: $7,716.09	20193006	06/08/2020	Detail	$5,501.88

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HD SUPPLY
CONSTRUCTION & INDUSTRIAL
WHITE CAP

HD Supply Construction Supply, Ltd.
501 W. Church Street, Orlando, FL 32805-2247

BRANCH ADDRESS
105 - IOWA CITY
(319) 337-4681
2003 S. GILBERT STREET
IOWA CITY IA 52240

INVOICE

INVOICE NUMBER
50013186428
INVOICE DATE
06/08/2020
CUSTOMER PO NUMBER
C000568954

ENROLLMENT TOKEN:	GHQ QRW QRV

SOLD TO: 44792000

UNIVERSITY OF IOWA
640 SOUTH MADISON STREET
IOWA CITY IA 52242-2500

TERRITORY:

SHIP TO: 44792003

UNIVERSITY OF IOWA
PO#C000568954 FAC SCV
2222 OLD HIGHWAY 218 S
IOWA CITY IA 52242

PLEASE REMIT PAYMENT TO:
HD SUPPLY CONSTRUCTION AND INDUSTRIAL - WHITE CAP P.O. Box 4852 ORLANDO,FL 32802-4852

ORDER DATE	ORDER NO.	ORDERED BY	ACCOUNT MANAGER	TAKEN BY
06/01/2020	38023399	OWEN OGDEN	HARTNETT, SHANE T	MILLER, JESS D

BRANCH	ACCT JOB NO.	TERMS	SHIP VIA / ROUTING	CUSTOMER JOB NO.
105	44792003	NET 30 DAYS	0. WILL CALL	UNIVERSITY OF IOWA

LINE	PART NUMBER	DESCRIPTION	QTY ORD	UNIT PRICE	QTY BKO	QTY SHP	EXTENDED PRICE	TAX AMT
0	HDRDESC	********** DELIVERY TAG#: 14944400 SHIPPING NOTES: CALL OWEN 319 430 6138 JOB# 20-665-637 **********	1	0	0	1	0.00	
1	SP/03449007-1	DRAIN CABLE,5/16X100	1	365.95 EA	0	1	365.95	0.00

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RECEIVED BY: OWEN SIGNATURE COPY ON FILE

TOTAL GROSS	365.95
TOTAL TAX	0.00
TOTAL SHIPPING AND HANDLING	0.00
TOTAL INVOICE	365.95

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AP/PO PeopleSoft Web Applications

Payment details for voucher: 83552096

Voucher ID	Vendor ID	Remit LOC	Vendor Name	Gross Voucher Amt.	Payment Handling Code
83552096	0000353202	002	HD Supply Construction Supply Ltd	$365.95	AC

Payment Status	Payment Information	Invoice #	Invoice Date	Remit to	Amt From Voucher
PAID	ACH:738630 Dt: 07/08/2020 Amt: $1,588.11	50013186428	06/08/2020	Detail	$365.95

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HD SUPPLY
CONSTRUCTION & INDUSTRIAL
WHITE CAP

HD Supply Construction Supply, Ltd.
501 W. Church Street, Orlando, FL 32805-2247

BRANCH ADDRESS
105 - IOWA CITY
(319) 337-4681
2003 S. GILBERT STREET
IOWA CITY IA 52240

INVOICE NUMBER
50013209391
INVOICE DATE
06/10/2020
CUSTOMER PO NUMBER
C000568954

ENROLLMENT TOKEN:	GHQ QRW QRV

SOLD TO: 44792000

UNIVERSITY OF IOWA
640 SOUTH MADISON STREET
IOWA CITY IA 52242-2500

TERRITORY:

SHIP TO: 44792003

UNIVERSITY OF IOWA
PO#C000568954 FAC SCV
2222 OLD HIGHWAY 218 S
IOWA CITY IA 52242

PLEASE REMIT PAYMENT TO:
HD SUPPLY CONSTRUCTION AND INDUSTRIAL - WHITE CAP P.O. Box 4852 ORLANDO,FL 32802-4852

ORDER DATE	ORDER NO.	ORDERED BY	ACCOUNT MANAGER	TAKEN BY
06/08/2020	38176872	OWEN OGDEN	HARTNETT, SHANE T	SEDLACEK, MICHAEL A

BRANCH	ACCT JOB NO.	TERMS	SHIP VIA / ROUTING	CUSTOMER JOB NO.
105	44792003	NET 30 DAYS	0. WILL CALL	UNIVERSITY OF IOWA

LINE	PART NUMBER	DESCRIPTION	QTY ORD	UNIT PRICE	QTY BKO	QTY SHP	EXTENDED PRICE	TAX AMT
0	HDRDESC	********** DELIVERY TAG#: 14973996 SHIPPING NOTES: CALL OWEN 319 430 6138 JOB# 20-665-637 **********	1	0	0	1	0.00	
1	SP/03449007-1	DRAIN CABLE,5/16X100	1	365.95 EA	0	1	365.95	0.00

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For questions regarding this invoice please call 1-866-857-0295.

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RECEIVED BY: OWEN OGDEN SIGNATURE COPY ON FILE

TOTAL GROSS	365.95
TOTAL TAX	0.00
TOTAL SHIPPING AND HANDLING	0.00
TOTAL INVOICE	365.95

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Payment details for voucher: 83553082

Voucher ID	Vendor ID	Remit LOC	Vendor Name	Gross Voucher Amt.	Payment Handling Code
83553082	0000353202	002	HD Supply Construction Supply Ltd	$365.95	AC

Payment Status	Payment Information	Invoice #	Invoice Date	Remit to	Amt From Voucher
PAID	ACH:738630 Dt: 07/08/2020 Amt: $1,588.11	50013209391	06/10/2020	Detail	$365.95

New Payment Search
AP-PO Web Applications Home Page
Self-Service

(WALTERSC) Logoff

Accounts Payable / Purchasing is a department in the Finance and Operations organization.
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Please direct inquires regarding using this application to acntpay@uiowa.edu

MEMBERS OF COUNCIL

HON. KIM REYNOLDS
GOVERNOR

HON. PAUL D. PATE
SECRETARY OF STATE

HON. ROB SAND
AUDITOR OF STATE

HON. MICHAEL L. FITZGERALD
TREASURER OF STATE

HON. MICHAEL L. NAIG
SECRETARY OF AGRICULTURE

Executive Council of Iowa

CAPITOL BUILDING
DES MOINES, IOWA 50319
PHONE: 515 281-5368

June 6, 2022

Mr. Kyle Harms
Office of the Treasurer
LOCAL

Dear Mr. Harms:

The Executive Council, in a meeting held on this date, approved payment of the following cost item:

Board of Regents - University of Iowa……...…….....$25,081.00
On February 23, 2021, the weight of snow and ice caused damages to the maintenance building at MacBride Nature Recreation Area. Request was to cover repair costs.

This represents full and final payment.

EXECUTIVE COUNCIL OF IOWA

Victoria Newton
Executive Secretary

cc: John Nash, Director of Facilities, Board of Regents
Camille Walters, Risk Management Administrator, University of Iowa
Andrea Anania, Board of Regents
Aimee Claeys, Board of Regents
Linda Leto, Department of Management

AOS Claim ID 2080
TOS Job # 22BK

OFFICE OF AUDITOR OF STATE
STATE OF IOWA

Rob Sand
Auditor of State

State Capitol Building
Des Moines, Iowa 50319-0004

Telephone (515) 281-5834 Facsimile (515) 281-6518

May 20, 2022

Victoria Newton
Executive Council
L O C A L

Subject: Damages to Maintenance Building at MacBride Nature Recreation Area due to Weight of Snow/Ice on February 23, 2021
University of Iowa – Board of Regents
Claim dated March 24, 2022
AOS Claim ID: 2080

In accordance with Executive Council policy, we have examined the invoices and supporting documentation for final payment related to the loss and have found the items to be in order as shown below:

Documented request		$ 25,081.00
Executive Council Allocation		$ 25,081.00
Less:		
Previous payments	$ 0.00	
This payment	25,081.00	
Total		$ 25,081.00
Remaining Executive Council allocation		$ 0.00

We recommend reimbursement be made in the amount of $25,081.00. This represents full and final payment of the loss.

Sincerely,

Ernest H. Ruben, Jr., CPA
Deputy Auditor of State

cc: Camille Walters, Risk Management Manager, University of Iowa
John Nash, Director of Facilities, Board of Regents

Business Services

Risk Management, Insurance and Loss Prevention

University of Iowa
430 Plaza Centre One
Iowa City, Iowa 52242-2501
319-335-0010
Fax 319-353-1893

April 21, 2022

Executive Council of Iowa
Office of Treasurer of State
State Capitol Building
Des Moines, IA 50319

Re: Formal Loss Report - University of Iowa – MacBride Nature Recreation Area Maintenance Building Snow/Ice Damage (2/23/2021)

Dear Executive Council,

On February 23, 2021, the weight of snow/ice caused damage to the Maintenance Building at the MacBride Nature Recreation Area located at 2095 Mehaffey Bridge Road, Solon, Iowa. The original loss notice was provided to the Executive Council, State Auditors and Board of Regents on February 23, 2021 and a Preliminary Loss Report was submitted on March 24, 2022.

The purpose of this letter is to provide the final expense details for this claim which are:

- **Repair of the Damaged Building Structure, Overhead Door and Exterior Electrical Fixtures: $25,081.00.**

Please see the attached summary of claim expenses and copies of all invoices and proof of payments. Based on the information provided herein, The University of Iowa respectfully requests an award of **$25,081.00** from the State of Iowa Executive Council, pursuant to Chapter 29C:20, Contingent Fund, Code of Iowa.

We appreciate your review and look forward to your response. Please feel free to contact me with any questions.

Sincerely,

Camille Walters

Camille Walters
Risk Management Manager

cc: Tammy Hollingsworth
John Nash
Debby Zumbach
Josey Bathke

Business Services

Risk Management, Insurance and Loss Prevention

University of Iowa
430 Plaza Centre One
Iowa City, Iowa 52242-2501
319-335-0010
Fax 319-353-1893

March 24, 2022

Executive Council of Iowa
Office of Treasurer of State
State Capitol Building
Des Moines, IA 50319

Re: University of Iowa – MacBride Nature Recreation Area Maintenance Building Snow/Ice Damage – Preliminary Loss Report (2/23/2021)

Dear Executive Council,

On February 23, 2021, the weight of snow/ice caused damage to the Maintenance Building at the MacBride Nature Recreation Area located at 2095 Mehaffey Bridge Road, Solon, Iowa. The snow/ice caused damage to the rafters, overhead door, exterior lighting and an exterior electrical outlet.

The purpose of this Preliminary Loss Report is to notify you of our current damage estimate and to request allocation of funds for repairing the damage to the building. Based on the information we have at this time our estimated damage is approximately **$25,081.00**. We will provide a Formal Loss Report and supporting documentation for the final costs and payments.

Please feel free to contact me with any questions or concerns.

Sincerely,

Camille Walters

Camille Walters
Risk Management Manager

cc: Tammy Hollingsworth
John Nash
Debby Zumbach
Josey Bathke

Walters, Camille

Subject: FW: University of Iowa MacBride Nature Recreation Area - Property Loss Notice
Attachments: MNRA Maint Bldg Damage Photos.pdf

From: Walters, Camille
Sent: Tuesday, March 30, 2021 12:46 PM
To: executivecouncil@tos.iowa.gov; John Nash (john.nash@iowaregents.edu) <john.nash@iowaregents.edu>; Tammy Hollingsworth <Tammy.Hollingsworth@AOS.IOWA.GOV>
Cc: Josey Bathke <josephine-bathke@uiowa.edu>; Debby Zumbach (deborah-zumbach@uiowa.edu) <deborah-zumbach@uiowa.edu>
Subject: FW: University of Iowa MacBride Nature Recreation Area - Property Loss Notice

Hello,

Attached are photos of the damage to the Maintenance Building at MacBride Nature Recreation Area.

Thank you

Camille Walters
Administrator, Risk Management Insurance and Loss Prevention
430 Plaza Centre One, 125 S Dubuque St, Iowa City, Iowa 52242
Office: 319-335-5357

https://riskmanagement.fo.uiowa.edu/

$

From: Walters, Camille <camille-walters@uiowa.edu>
Sent: Tuesday, February 23, 2021 1:46 PM
To: executivecouncil@tos.iowa.gov; 'Tammy Hollingsworth' <Tammy.Hollingsworth@AOS.IOWA.GOV>; John Nash (john.nash@iowaregents.edu) <john.nash@iowaregents.edu>
Cc: Josey Bathke <josephine-bathke@uiowa.edu>; Debby Zumbach (deborah-zumbach@uiowa.edu) <deborah-zumbach@uiowa.edu>
Subject: University of Iowa MacBride Nature Recreation Area - Property Loss Notice

Hello,

Risk Management was notified on 2/23/2021 of an incident at MacBride Nature Recreation Area, located at 2095 Mehaffey Bridge RD, Solon, IA. On 2/23/2021, the weight of the snow and ice caused a rafter to break on the Maintenance Building. We are investigating the incident at this time but the estimated damages could potentially exceed $5,000. Photos of the damage have been requested and will be sent once received.

We will submit a preliminary loss report once we have a better estimate.

Please feel free to contact me with any questions or concerns.

Thank you

Department of Risk Management
Insurance & Loss Prevention
430 Plaza Centre One (PCO)
Iowa City, IA 52242-2500
Phone 319-335-0010
Fax 319-353-1893

General Fund Property 29C:20 Claim Costs - MNRA Maintenance Garage Snow/Ice Damage

Building: MacBride Nature Recreation Area Maintenance Garage
Department: Recreational Services
Date of Loss: 2/23/2021
Completed by: Camille Walters
UI Claim #: PR-21407-SUI

Category	Reference #	Vendor	PO	Voucher	29C:20 Claim Costs
Building	1B	Dan's Overhead Doors	N/A	P0439352	$ 85.00
Building	2B	RoCon Construction	1002511391	83977531	$ 8,000.00
Building	5B	RoCon Construction	1002511391	84013241	$ 16,996.00
				Building Total	**$ 25,081.00**
Equipment		None			$ -
Equipment		None			$ -
				Equipment Total	**$ -**
				GRAND TOTAL	**$ 25,081.00**

Invoice

Dan's Overhead Doors 1

Date: 2/24/2021
Invoice No.: 516147

1810 Dan's Drive NW
North Liberty, IA 52317

(319) 626-3667 (319) 626-3070 (fax)

Bill to: Mac Bride Nature Area
2095 Mehaffey Bridge Rd NE
Solon, IA 52333

Service at: University of Iowa
Recreation Services
Rm 216E
Iowa City, IA 52242

Customer ID: 12821

Description: Work Order 445737 Mcbride Nature

Reference: Work Order 445737

Terms:

PO Number:

Item	Description	Quantity	Unit Price	Amount
Labor				
	0010 Service Door (1Hr Minimum) 2/22/21 Richard Dautremont $85 p/hr, p/man, (1) hr minimum 2095 Maheffy Bridge Rd - Solon Structural Problem With Building Ceiling is Sagging on Drum Customer to Have Building Repaired and Call us Once Completed	1.00	85.00	$85.00
			Labor Subtotal:	**$85.00**

NET10 DAYS: A finance Charge of 1-1/2% per month (18% per year) will be charged on unpaid balances. A 3% convenience fee will be added on all credit card payments.

Subtotal:	$85.00
Sales Tax:	$0.00
Payments:	$85.00
Total Due:	**$0.00**

From: USS Recreational Services
To: USS Recreational Services
Subject: 2095 Maheffy Bridge Rd NE
Date: Friday, May 14, 2021 2:18:53 PM

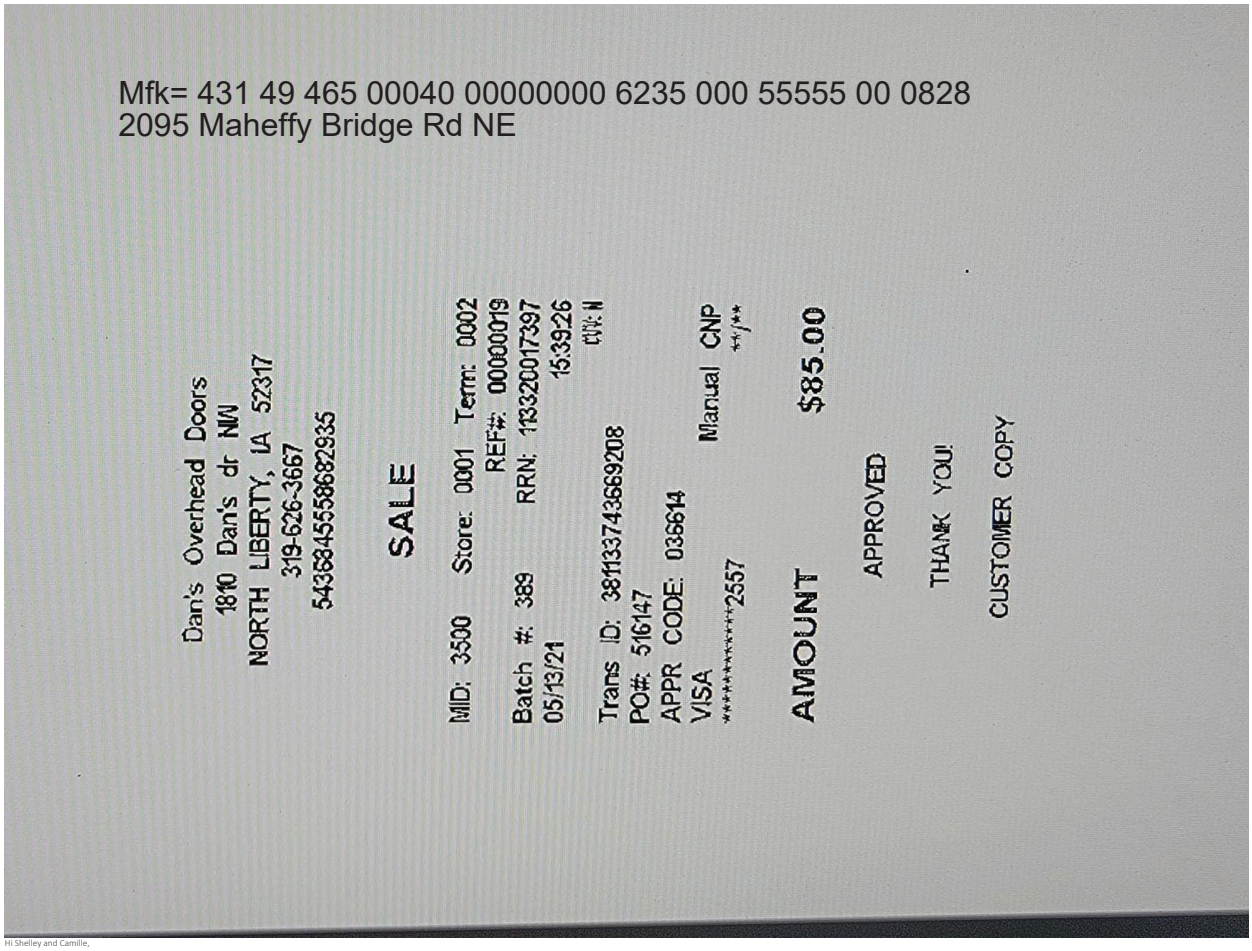
From: Squier, Shelley M <shelley-squier@uiowa.edu>
Sent: Friday, May 14, 2021 12:07 PM
To: Elliott, Tamra A <tamra-lewis@uiowa.edu>; Walters, Camille <camille-walters@uiowa.edu>
Cc: Conrads, David J <david-conrads@uiowa.edu>; Baxter, Brian R <brian-baxter@uiowa.edu>
Subject: RE: [External] 2095 Maheffy Bridge Rd NE

Hi Tamra,

Mfk= 431 49 465 00040 00000000 6235 000 55555 00 0828

Thanks,
Shelley

From: Elliott, Tamra A <tamra-lewis@uiowa.edu>
Sent: Friday, May 14, 2021 11:56 AM
To: Squier, Shelley M <shelley-squier@uiowa.edu>; Walters, Camille <camille-walters@uiowa.edu>
Cc: Conrads, David J <david-conrads@uiowa.edu>; Baxter, Brian R <brian-baxter@uiowa.edu>
Subject: Fwd: [External] 2095 Maheffy Bridge Rd NE



Hi Shelley and Camille,
This is for when we tried to have the garage door repaired and discovered the ice damage.

I believe it should go under the ice damage claim mfk as it is related to that.

Thanks
Tamra Elliott
Land Manager - Macbride Nature Recreation Area

RECREATIONAL SERVICES
University of Iowa | Division of Student Life
http://recserv.uiowa.edu/

This message was sent from my cell phone. Please forgive any typing errors.

From: Aubrey Sarchett <asarchett@dansdoors.com>
Sent: Friday, May 14, 2021, 11:34 AM
To: Elliott, Tamra A
Subject: [External] 2095 Maheffy Bridge Rd NE

Hi,

Please see attached invoice. Let me know if there is anything else I can help you with.

Dan's Overhead Doors & More
Aubrey Sarchett | Accounts Receivable
1810 Dan's Drive | North Liberty, Iowa 52317
Phone: 319.626.3667 | Fax: 319.626.3070
Email: asarchett@dansdoors.com
Visit us @ : www.dansdoors.com

THE UNIVERSITY OF IOWA
Accounts Payable
202 PCO (Plaza Centre One)
Iowa City, IA 52242

1B Proof of Pay - Page 2 of 2

Procurement Card Voucher

Voucher ID: P0439352

Please print in LANDSCAPE mode

Cardholder Name: TAMRA ELLIOTT
Department: SLIF-REC SERVICES
Phone: 319-624-3205

Account Number: 014611
Card Billing Period: 04/28/2021 - 05/23/2021
Date Prepared: 03/11/2022

1	431-49-4685-00040-00000000-6199-000-00000-00-0828	SLID: / SLAC:		
	Descr for GL: MENARDS IOWA CITY IA Cmnts: String and stakes to close down spring seeded areas from public. Last item was for stain needed to seal some wood structures.		DB AMT: 90.89	CR AMT:
2	431-49-4685-00040-00000000-6260-000-00000-00-0828	SLID: / SLAC:		
	Descr for GL: DAN'S OVERHEAD DOORS Cmnts: Repair needed for MNRA front gate.		DB AMT: 180.20	CR AMT:
3	431-49-4685-00040-00000000-6235-000-55555-00-0828	SLID: / SLAC:		
	Descr for GL: DAN'S OVERHEAD DOORS Cmnts: Ice Damage to the garage door @ 2095 Maheffy Bridge Rd. NE.		DB AMT: 85.00	CR AMT:
4	431-49-4685-00040-00000000-6265-000-00000-00-0828	SLID: / SLAC:		
	Descr for GL: ACE ELECTRIC Cmnts: Electrical Repairs - MCBRIDE NATURE RECREATION CENTER.		DB AMT: 677.61	CR AMT:

Procurement Card Total

DEBIT TOTAL	CREDIT TOTAL
1,033.70	**0.00**

STATEMENT TOTAL
1,033.70

Invoice

RoCon Construction LLC

PO Box 2204
Iowa City, IA 52244

Date	Invoice #
11/7/2021	2211

Bill To
University of Iowa Accounts Payable and Travel 202 PCO Iowa City, IA 52242

P.O. No.	Terms	Project
1002511391	Net 30	

Quantity	Description	Rate	Amount
	0896101 - MNRA - Storage Building Repair Ice Damage to Buildings Mobilization, scaffolding, demo and discovery, temp enclosure	8,000.00	8,000.00
		Total	$8,000.00

AP/PO PeopleSoft Web Applications

Payment details for voucher: 83977531

Voucher ID	Vendor ID	Remit LOC	Vendor Name	Gross Voucher Amt.	Payment Handling Code
83977531	0000717459	002	RoCon Construction LLC	$8,000.00	AC

Payment Status	Payment Information	Invoice #	Invoice Date	Remit to	Amt From Voucher
PAID	ACH:832344 Dt: 11/11/2021 Amt: $20,000.00	2211	11/07/2021	Detail	$8,000.00

New Payment Search
AP-PO Web Applications Home Page
Self-Service

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Invoice

RoCon Construction LLC

PO Box 2204
Iowa City, IA 52244

Date	Invoice #
12/2/2021	2220

Bill To
University of Iowa Accounts Payable and Travel 202 PCO Iowa City, IA 52242

P.O. No.	Terms	Project
1002511391	Net 30	

Quantity	Description	Rate	Amount
	0896101 - MNRA - Storage Building Repair Ice Damage to Buildings Final Invoice	16,996.00	16,996.00
		Total	$16,996.00

AP/PO PeopleSoft Web Applications

Payment details for voucher: 84013241

Voucher ID	Vendor ID	Remit LOC	Vendor Name	Gross Voucher Amt.	Payment Handling Code
84013241	0000717459	002	RoCon Construction LLC	$16,996.00	AC

Payment Status	Payment Information	Invoice #	Invoice Date	Remit to	Amt From Voucher
PAID	ACH:842216 Dt: 12/29/2021 Amt: $23,805.03	2220	12/02/2021	Detail	$16,996.00

New Payment Search
AP-PO Web Applications Home Page
Self-Service

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Please direct inquires regarding using this application to acntpay@uiowa.edu

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SECRETARY OF STATE

HON. ROB SAND
AUDITOR OF STATE

HON. MICHAEL L. FITZGERALD
TREASURER OF STATE

HON. MICHAEL L. NAIG
SECRETARY OF AGRICULTURE

Executive Council of Iowa

CAPITOL BUILDING
DES MOINES, IOWA 50319
PHONE: 515 281-5368
FAX: 515 281-7562

June 6, 2022

Ms. Karen Schaeffer
Iowa PBS
LOCAL

Dear Ms. Schaeffer:

The Executive Council, in a meeting held on this date, approved payment of the following cost item:

Gray Miller Persh, LLP……..…….....$699.20
2233 Wisconsin Avenue NW
Suite 226
Washington, D.C. 20007
Iowa Public Television

EXECUTIVE COUNCIL OF IOWA

Victoria Newton

Victoria Newton
Executive Secretary

THOMAS J. MILLER
ATTORNEY GENERAL

JEFFREY S. THOMPSON
SOLICITOR GENERAL

IOWA DEPARTMENT OF JUSTICE
OFFICE OF THE ATTORNEY GENERAL

1305 E. WALNUT ST.
DES MOINES, IA 50319
Main: 515-281-5164 • Direct: 515-281-4419
Email: Jeffrey.Thompson@iowa.gov
www.iowaattorneygeneral.gov

May 19, 2022

Victoria Newton
Executive Secretary
Executive Council
State Capitol
L O C A L

Re: Payment of Claims for Fees by Outside Counsel

Dear Victoria:

Our office is forwarding to the Executive Council approval for payment of attorney fees and costs in the amount of $699.20 from Gray Miller Persh, LLP to represent Iowa PBS in matters relating to Federal Communications Commission (FCC) for which the firm was appointed as special counsel.

The amount of the claim appears to be reasonable. We have reviewed both the billing and the Services Agreement and recommend payment. Pursuant to our terms of agreement, payment should be made from the funds of Iowa PBS.

Sincerely,

Jeffrey Thompson (gw)

JEFFREY S. THOMPSON
Solicitor General

MEMBERS OF COUNCIL

HON. KIM REYNOLDS
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TREASURER OF STATE

HON. MICHAEL L. NAIG
SECRETARY OF AGRICULTURE

Executive Council of Iowa

CAPITOL BUILDING
DES MOINES, IOWA 50319
PHONE: 515 281-5368
FAX: 515 281-7562

May 18, 2022

Mr. Jeffrey Thompson
Solicitor General
Attorney General Office-Hoover Bldg.
L O C A L

Re: Approval of attorney fees

Dear Mr. Thompson:

I received the enclosed statement from Gray Miller Persh, LLP for the following fees:

Iowa PBS

Current balance	$699.20
Waiting for AG recommendation	$0.00
Pending EC Approval	$0.00
Claims in Process	$0.00
Warrant sent	$0.00
Outstanding Total	$699.20

May I please have your recommendation of this payment request?

EXECUTIVE COUNCIL OF IOWA

Victoria Newton

Victoria Newton
Executive Secretary

Gray Miller Persh LLP
2233 Wisconsin Avenue NW
Suite 226
Washington, DC 20007
Tax ID 46-4381194

Iowa PBS
6450 Corporate Drive
Johnston, IA 50131-6450

Invoice 36758

Date	May 17, 2022
Service Thru	Apr 30, 2022

In Reference To: General (Fees)

Date	By	Services	Hours	Rates	Amount
04/07/2022	T.Gray	Prepare for and phone conference with M. Phillips and A. Batt re 2022 political criteria and inclusion of candidate Finkenhauer in Senatorial primary debate.	0.90	$ 437.00/hr	$ 393.30
04/07/2022	J.Turiel	Send correspondence to client regarding status of C-Band relocation lump sum payment.	0.10	$ 437.00/hr	$ 43.70
04/12/2022	J.Turiel	Update records and draft correspondence to client regarding status of C-Band relocation lump sum payment.	0.10	$ 437.00/hr	$ 43.70
04/18/2022	B.Persh	Analysis, review and respond to email from M. Wendel re FCC EEO documentation retention requirements.	0.20	$ 437.00/hr	$ 87.40
04/20/2022	T.Gray	Review underwriting issues (AllSpice Culinarium); emails wtih B. Ryan re same.	0.30	$ 437.00/hr	$ 131.10

Total Hours	1.60 hrs
Total Fees	$ 699.20
Total Invoice Amount	$ 699.20
Previous Balance	**$ 4,250.60**
Balance (Amount Due)	**$ 4,949.80**

Remittances - please make checks payable to Gray Miller Persh LLP, include the Invoice Number, and send to:

Gray Miller Persh LLP
PO Box 716330
Philadelphia, PA 19171-6330

MEMBERS OF COUNCIL

HON. KIM REYNOLDS
GOVERNOR

HON. PAUL D. PATE
SECRETARY OF STATE

HON. ROB SAND
AUDITOR OF STATE

HON. MICHAEL L. FITZGERALD
TREASURER OF STATE

HON. MICHAEL L. NAIG
SECRETARY OF AGRICULTURE

Executive Council of Iowa

CAPITOL BUILDING
DES MOINES, IOWA 50319
PHONE: 515 281-5368
FAX: 515 281-7562

June 6, 2022

Mr. Dustin McNulty
Unclaimed Property Manager
Treasurer of State

Dear Mr. McNulty:

The Executive Council, in a meeting held on this date, approved payment of the following cost item:

Denton Davis Brown PC……..….....$841.00
215 10th Street, Suite 1300
Des Moines, IA 50309-3993
Special Counsel Dentons Davis Brown Employee Retirement Income Security Act (ERISA)

EXECUTIVE COUNCIL OF IOWA

Victoria Newton
Executive Secretary

Enclosure

cc: Kyle Harms, Accounting, Treasurer of State
Karen Austin, Chief of Staff, Treasurer of State

THOMAS J. MILLER
ATTORNEY GENERAL

JEFFREY S. THOMPSON
SOLICITOR GENERAL

IOWA DEPARTMENT OF JUSTICE
OFFICE OF THE ATTORNEY GENERAL

1305 E. WALNUT ST.
DES MOINES, IA 50319
Main: 515-281-5164 • Direct: 515-281-4419
Email: Jeffrey.Thompson@iowa.gov
www.iowaattorneygeneral.gov

May 19, 2022

Victoria Newton
Executive Secretary
Executive Council
State Capitol
L O C A L

Re: Payment of Claims for Fees by Special Counsel

Dear Victoria:

Our office is forwarding to the Executive Council approval for payment of attorney fees in the amount of $841.00 from the Davis Brown Law Firm for services as special counsel to advise the Treasurer's Office on issues that arise under the Employee Retirement Income Security Act (ERISA) in connection with the disposition of unclaimed property.

The amount of the claim appears to be reasonable. We have reviewed both the billing and the Services Agreement and recommend payment. Pursuant to the terms of our agreement, payment should be made from the Unclaimed Property Fund.

Sincerely,

Jeffrey Thompson (RW)

JEFFREY S. THOMPSON
Solicitor General

MEMBERS OF COUNCIL

HON. KIM REYNOLDS
GOVERNOR

HON. PAUL D. PATE
SECRETARY OF STATE

HON. ROB SAND
AUDITOR OF STATE

HON. MICHAEL L. FITZGERALD
TREASURER OF STATE

HON. MICHAEL L. NAIG
SECRETARY OF AGRICULTURE

Executive Council of Iowa

CAPITOL BUILDING
DES MOINES, IOWA 50319
PHONE: 515 281-5368
FAX: 515 281-7562

May 18, 2022

Mr. Jeffrey Thompson
Solicitor General
Attorney General Office-Hoover Bldg.
L O C A L

Re: Approval of attorney fees

Dear Mr. Thompson:

I received the enclosed statement from Dentons Davis Brown for the following fees:

Special Counsel Dentons Davis Brown Employee Retirement Income Security Act (ERISA)

Current balance	$841.00
Waiting for AG recommendation	$0.00
Pending EC Approval	$0.00
Claims in Process	$0.00
Warrant sent	$0.00
Outstanding Total	$841.00

May I please have your recommendation of this payment request?

EXECUTIVE COUNCIL OF IOWA

Victoria Newton

Victoria Newton
Executive Secretary

大成DENTONS DAVIS BROWN

In Account With

DENTONS DAVIS BROWN PC
Attorneys and Counselors at Law
215 10th Street, Suite 1300
Des Moines, IA 50309-3993
(515) 288-2500
Federal I.D. No. 42-1343884

Treasurer - State of Iowa
Unclaimed Property Division
Attn: Ms Karen Austin, Chief of Staff
Lucas State Office Bld 321 E 12th St Fl 1
Des Moines, IA 50319

Statement: 1504877
Date: 5/12/2022

Re: 8025040-79351 - ERISA

For Professional Services Rendered

Professional Fees			Hours	Amount
04/07/2022	JWEI	Judge Oldsmobile: Attention to correspondence from Mr. Engelman regarding documents and request for "new" information. Transmitting claim documents to Mr. Engelman again. Correspondence to Dustin with update.	0.70	203.00
04/07/2022	JWEI	Claim 951320: Review of claim documents submitted by United Community Bank.	1.00	290.00
04/20/2022	JWEI	Claim 951320: Finalize claim summary for United Community Bank and correspondence with Dustin McNulty regarding request for full purchase agreement.	0.90	261.00
04/20/2022	JWEI	Judge Oldsmobile Claim: Attention to correspondence from Mr. Engelman regarding materials provided and additional request for copy of our file. Response to Mr. Engelman regarding not having any additional materials to provide. Correspondence with Dustin McNulty regarding same.	0.30	87.00
			Sub-total Fees:	$841.00

Rate Summary

Jana M. Weiler	2.90 hours at $290.00/hr	841.00	
Total hours:	2.90		

Total Current Billing: $841.00

Effective March 29, 2021, Davis Brown Law Firm formally combined with Dentons to become Dentons Davis Brown PC. Visit www.dentons.com/BusinessTerms to find our Terms of Business, which will apply to our relationship to the extent that it is not inconsistent with the material terms and conditions of any existing engagement agreement. Please contact your lawyer or other professional if you have questions about the Terms of Business or with any respect of your representation.

Current statement due within 30 days of statement date. Please disregard any previously paid amounts. Contact us at 515-246-7812 with any questions. Please include the statement number on your check.

When you provide a check as payment, you authorize us either to use information from your check to make a one-time electronic fund transfer from your account or process the payment as a check transaction. When we use information from your check to make an electronic fund transfer, funds may be withdrawn from your account as soon as the same day we receive your payment, and you will not receive your check back from your financial institution.

MEMBERS OF COUNCIL

HON. KIM REYNOLDS
GOVERNOR

HON. PAUL D. PATE
SECRETARY OF STATE

HON. ROB SAND
AUDITOR OF STATE

HON. MICHAEL L. FITZGERALD
TREASURER OF STATE

HON. MICHAEL L. NAIG
SECRETARY OF AGRICULTURE

Executive Council of Iowa

CAPITOL BUILDING
DES MOINES, IOWA 50319
PHONE: 515 281-5368

June 6, 2022

Mr. Kyle Harms
Office of the Treasurer
LOCAL

Dear Mr. Harms:

The Executive Council, in a meeting held on this date, approved payment of the following cost items:

Michael Marquess……..…….....$5,000.00
2183 Docks Drive
Garwin, IA 50632
Tribal cases when the offenses are committed by non-natives against non-natives (or without a victim) on the Sac and Fox Indian Settlement in Tama County

EXECUTIVE COUNCIL OF IOWA

Victoria Newton

Victoria Newton
Executive Secretary

THOMAS J. MILLER
ATTORNEY GENERAL

JEFFREY S. THOMPSON
SOLICITOR GENERAL

IOWA DEPARTMENT OF JUSTICE
OFFICE OF THE ATTORNEY GENERAL

1305 E. WALNUT ST.
DES MOINES, IA 50319
Main: 515-281-5164 • Direct: 515-281-4419
Email: Jeffrey.Thompson@iowa.gov
www.iowaattorneygeneral.gov

May 17, 2022

Victoria Newton
Executive Secretary
Executive Council
State Capitol
L O C A L

Re: Payment of Claims for Fees by Special Counsel

Dear Victoria:

Our office is forwarding to the Executive Council approval for payment of costs in the amount of $5,000 from Michael Marquess Law Office P.C., who was retained to represent the State of Iowa in criminal cases when the offenses are committed by non-natives against nonnatives (or without a victim) on the Sac and Fox Indian Settlement in Tama County.

We have reviewed both the billing and the Services Agreement and recommend payment. Pursuant to the terms of our agreement, payment should be made from the funds of the General Fund.

Sincerely,

Jeffrey Thompson (FM)

JEFFREY S. THOMPSON
Solicitor General

MEMBERS OF COUNCIL

HON. KIM REYNOLDS
GOVERNOR

HON. PAUL D. PATE
SECRETARY OF STATE

HON. ROB SAND
AUDITOR OF STATE

HON. MICHAEL L. FITZGERALD
TREASURER OF STATE

HON. MICHAEL L. NAIG
SECRETARY OF AGRICULTURE

Executive Council of Iowa

CAPITOL BUILDING
DES MOINES, IOWA 50319
PHONE: 515 281-5368
FAX: 515 281-7562

May 16, 2022

Mr. Jeffrey Thompson
Solicitor General
Attorney General Office-Hoover Bldg.
L O C A L

Re: Approval of attorney fees

Dear Mr. Thompson:

I received the enclosed statement from Marquess Law Firm for the following fees:

Tribal cases when the offenses are committed by non-natives against non-natives (or without a victim) on the Sac and Fox Indian Settlement in Tama County

Current balance	$5,000.00
Waiting for AG recommendation	$0.00
Pending EC Approval	$0.00
Claims in Process	$0.00
Warrant sent	$0.00
Outstanding Total	$5,000.00

May I please have your recommendation of this payment request?

EXECUTIVE COUNCIL OF IOWA

Victoria Newton

Victoria Newton
Executive Secretary

MARQUESS LAW OFFICE, P.C

203 W. HIGH STREET
P.O. BOX 51
TOLEDO, IA 52342
641-484-1001
mike@tamalaw.com

May 16, 2022

Victoria Newton
Executive Council
Room 114
State Capitol
Des Moines, IA 50319

Re: Special Counsel Update, April – May 2022

Dear Honorable Council Members:

I write to update you on my work as Special Counsel representing the State of Iowa in criminal prosecutions of non-native offenders for offenses occurring on the Meskwaki Settlement. We have seen steady numbers of narcotics, driving and theft offenses during this reporting period. I have continued to work closely with the Meskwaki Nation Police Department and plan to participate in an upcoming joint training with federal, state and tribal officials.

I have enclosed an invoice containing a detailed accounting of my time broken down by each particluar case. Should you have any questions or concerns, please do not hesistate to contact me. I look forward to continuing to serve the State of Iowa.

Sincerely,

Michael Marquess
Enc.
Cc: Office of the Attorney General for the State of Iowa

Marquess Law PC

203 W. High St., P.O. Box 51
Toledo, Iowa 52342

SCAN TO PAY!

Invoice # 1710
Date: 05/16/2022
Due On: 06/15/2022

Iowa Executive Council
Room 114
State Capitol
Des Moines, IA 50319

iowa-

Criminal Prosecution for Meskwaki Settlement Matters

Type	Date	Notes	Quantity	Rate	Total
Service	04/18/2022	BOEDING: Pulled Pleadings and Drafted and Filed an Appearance.	0.30	$0.00	$0.00
Service	04/18/2022	BARRIENTOS, SEAANA: Pulled Pleadings and Drafted and Filed an Appearance.	0.30	$0.00	$0.00
Service	04/18/2022	REH: Pulled Pleadings and Drafted and Filed and Appearance.	0.30	$0.00	$0.00
Service	04/19/2022	KROEGER: Telephone call from public defender.	0.20	$0.00	$0.00
Service	04/19/2022	HILL: Telephone call from public defender.	0.20	$0.00	$0.00
Service	04/20/2022	RUIZ-ROMERO: Email to opposing counsel.	0.20	$0.00	$0.00
Service	04/21/2022	CAM: Pulled Pleadings and Drafted and Filed Appearances in all cases.	0.30	$0.00	$0.00
Service	04/21/2022	OCASIO-RIVERA: Case management conference.	0.50	$0.00	$0.00
Service	04/21/2022	LEOTHI: Arraignment (defendant failed to appear).	0.50	$0.00	$0.00
Service	04/21/2022	MASON: Initial appearance on probation violation.	0.50	$0.00	$0.00
Service	04/21/2022	BLY: Case management conference.	0.50	$0.00	$0.00

Service	04/22/2022	OCASIO: Pulled pleadings for all cases; Closed file	0.40	$0.00	$0.00
Service	04/26/2022	LIZARDE: Pretrial conference.	0.50	$0.00	$0.00
Service	04/26/2022	CASTORENA: Pulled Pleadings and Drafted and Filed Appearances in all cases.	0.30	$0.00	$0.00
Service	04/27/2022	CAM: Received email correspondence from Officer Simcox; Downloaded & saved attached documents	0.20	$0.00	$0.00
Service	04/28/2022	LEOTHI: Arraignment.	0.50	$0.00	$0.00
Service	04/28/2022	BLY: Guilty plea hearing.	0.50	$0.00	$0.00
Service	04/28/2022	WILLIAMS: Case management conference.	0.50	$0.00	$0.00
Service	04/28/2022	WIN: Case management conference.	0.50	$0.00	$0.00
Service	04/28/2022	CAM: Drafted and filed Trial Information, Minutes of Testimony and proposed Order Setting Arraignment.	1.00	$0.00	$0.00
Service	04/28/2022	KELSO: Drafted and filed Trial Information, Minutes of Testimony, and proposed Order Setting Arraignment.	1.00	$0.00	$0.00
Service	05/02/2022	CAM: Email correspondence from Tama County re criminal records; Downloaded and save	0.20	$0.00	$0.00
Service	05/02/2022	WILKENING: Pulled Pleadings and Drafted and Filed an Appearance in the case.	0.30	$0.00	$0.00
Service	05/02/2022	SOLIS: Pulled Pleadings and Drafted and Filed Appearances in both cases.	0.30	$0.00	$0.00
Service	05/06/2022	REH: Drafted and filed Trial Information, Minutes of Testimony and proposed Order Setting Arraignment.	1.00	$0.00	$0.00
Service	05/06/2022	PATTERSON: Drafted and filed Trial Information, Minutes of Testimony and proposed Order Setting Arraignment.	1.00	$0.00	$0.00
Service	05/09/2022	BLEDSOE: Pulled Pleadings and Drafted and Filed an Appearance.	0.30	$0.00	$0.00
Expense	05/16/2022	Reimbursable expenses: Prosecution Services April - May 2022	1.00	$5,000.00	$5,000.00
				Total	**$5,000.00**

Detailed Statement of Account

Current Invoice

Invoice Number	Due On	Amount Due	Payments Received	Balance Due
1710	06/15/2022	$5,000.00	$0.00	$5,000.00
			Outstanding Balance	**$5,000.00**
			Total Amount Outstanding	**$5,000.00**

To pay your invoice, please feel free to use the QR code in the top rigtht corner of this invoice!

Please make all amounts payable to: Marquess Law PC

Please pay within 30 days.

MEMBERS OF COUNCIL

HON. KIM REYNOLDS
GOVERNOR

HON. PAUL D. PATE
SECRETARY OF STATE

HON. ROB SAND
AUDITOR OF STATE

HON. MICHAEL L. FITZGERALD
TREASURER OF STATE

HON. MICHAEL L. NAIG
SECRETARY OF AGRICULTURE

Executive Council of Iowa

CAPITOL BUILDING
DES MOINES, IOWA 50319
PHONE: 515 281-5368

June 6, 2022

Mr. Kyle Harms
Office of the Treasurer
LOCAL

Dear Mr. Harms:

The Executive Council, in a meeting held on this date, approved payment of the following cost items:

Patterson Law Firm L.L.P…….……..…….....$1,872.00
729 Insurance Exchange Building
505 Fifth Avenue
Des Moines, IA 50309-2390
Debra J. Breckenridge v. Iowa Judicial Branch, State of Iowa and Second Injury Fund of Iowa

EXECUTIVE COUNCIL OF IOWA

Victoria Newton

Victoria Newton
Executive Secretary

THOMAS J. MILLER
ATTORNEY GENERAL

JEFFREY S. THOMPSON
SOLICITOR GENERAL



IOWA DEPARTMENT OF JUSTICE
OFFICE OF THE ATTORNEY GENERAL

1305 E. WALNUT ST.
DES MOINES, IA 50319
Main: 515-281-5164 • Direct: 515-281-4419
Email: Jeffrey.Thompson@iowa.gov
www.iowaattorneygeneral.gov

June 1, 2022

Victoria Newton
Executive Secretary
Executive Council
State Capitol
L O C A L

Re: Payment of Claims for Fees by Outside Counsel

Dear Victoria:

Our office is forwarding to the Executive Council for payment of attorney fees and costs in the amount of $1,872.00 in *Debra J Breckenridge, Iowa Judicial Branch and Second Injury Fund of Iowa*, a workers' compensation case filed by a state employee in which Ryan Clark, of The Patterson Law Firm, L.L.P., in Des Moines has been retained to represent the State of Iowa.

The amount of the claim appears to be reasonable and our office recommends payment.

Sincerely,

JEFFREY S. THOMPSON
Solicitor General

MEMBERS OF COUNCIL

HON. KIM REYNOLDS
GOVERNOR

HON. PAUL D. PATE
SECRETARY OF STATE

HON. ROB SAND
AUDITOR OF STATE

HON. MICHAEL L. FITZGERALD
TREASURER OF STATE

HON. MICHAEL L. NAIG
SECRETARY OF AGRICULTURE

Executive Council of Iowa

CAPITOL BUILDING
DES MOINES, IOWA 50319
PHONE: 515 281-5368
FAX: 515 281-7562

May 31, 2022

Mr. Jeffrey Thompson
Solicitor General
Attorney General Office-Hoover Bldg.
L O C A L

Re: Approval of attorney fees

Dear Mr. Thompson:

I received the enclosed statement from Patterson Law Firm for the following fees:

Debra J. Breckenridge v. Iowa Judicial Branch, State of Iowa and Second Injury Fund of Iowa

Current balance	$1,872.00
Waiting for AG recommendation	$0.00
Pending EC Approval	$0.00
Claims in Process	$0.00
Warrant sent	$0.00
Outstanding Total	$1,872.00

May I please have your recommendation of this payment request?

EXECUTIVE COUNCIL OF IOWA

Victoria Newton

Victoria Newton
Executive Secretary

PATTERSON LAW FIRM, L.L.P.

505 Fifth Avenue, Suite 729
Des Moines, IA 50309-2390
515-283-2147

Executive Council of Iowa
Victoria Newton, Executive Council
1st Floor South, State Capitol
1007 E. Grand Ave
Des Moines, IA 50319

Attn: Jonathan Bergman

Invoice Date: May 31, 2022
Invoice #: 194792
Account #: IA.0138
RMC
Federal Tax I.D.: 42-0894999

RE: Breckenridge v. Iowa Judicial Branch
Claimant: Debra Breckenridge
Employer: Iowa Judicial Branch
D/I: 10/06/2015

FINAL BILL

Fees

			Hours	
05/09/2022	RMC	Correspondence to Jon Bergman reminding of 5/16/22 mediation.	0.10	16.00
	RMC	Receipt and review of correspondence from Jon Bergman confirming telephone conference to discuss claim on 5/12/22, in advance of upcoming mediation.	0.10	16.00
05/10/2022	RMC	Correspondence to Meredith Cooney requesting claimant's deposition.	0.10	16.00
	RMC	Cursory review of relevant file materials, including notes from claimant's deposition, rating reports and discovery responses in preparation for telephone conference with Jon Bergman to discuss claim and settlement authority.	0.70	112.00
	RMC	Correspondence to Jon Bergman regarding transcript of claimant's deposition.	0.10	16.00
	BNS	Review of claimant's deposition transcript in preparation for upcoming mediation.	1.30	156.00
05/11/2022	RMC	Receipt and review of correspondence from Erik Bair setting forth claimant's initial settlement demand (15 pages).	0.20	32.00
	RMC	Correspondence to Jon Bergman regarding claimant's initial settlement demand.	0.10	16.00
	RMC	Receipt and review of correspondence from Jon Bergman requesting copy of claimant's IME report, Answers to Interrogatories and printout of indemnity benefits paid.	0.10	16.00

Executive Council of Iowa
Breckenridge v. Iowa Judicial Branch

Invoice Date: 05/31/2022
Invoice #: 194792
Account #: IA.0138

			Hours	
	RMC	Correspondence to Jon Bergman regarding IME report from Dr. Kuhnlein, Claimant's Answers to Interrogatories and printout of indemnity paid by the State.	0.10	16.00
	RMC	Receipt and review of 5/10/22 report from Dr. Chen, served by Meredith Cooney.	0.10	16.00
	RMC	Correspondence to Jon Bergman regarding 5/10/22 report from Dr. Chen.	0.10	16.00
	BNS	Mediation preparation, including review of claimant's demand letter, report of Dr. Kuhnlein, Claimant's discovery responses, indemnity payment history, and calculation of potential exposure for purposes of settlement.	1.90	228.00
	BNS	Review of report of Dr. Chen in preparation for upcoming mediation.	0.20	24.00
05/12/2022	RMC	Telephone conference with Jon Bergman discussing issues in the case, potential exposure and settlement value in preparation for upcoming mediation.	0.30	48.00
05/13/2022	RMC	Receipt and review of 5/10/22 vocational evaluation report from Phil Davis, served by Erik Bair.	0.30	48.00
	RMC	Correspondence to Jon Bergman regarding vocational report from Phil Davis, obtained on behalf of the claimant.	0.10	16.00
	BNS	Review of report of Phil Davis, Claimant's vocational expert, finding permanent total disability (100% disability), and consideration of the same in preparation for upcoming mediation.	0.20	24.00
	BNS	Preparation for upcoming mediation, including review of exposure analysis prepared by RMC.	0.50	60.00
05/16/2022	BNS	Prepare for Mediation, including review of medical chronology and personnel file materials, job description, and termination/resignation letters.	2.00	240.00
	BNS	Attend and participate in Mediation with Jon Bergman for the Second Injury Fund (Zoom Mediation-no travel time included).	3.30	396.00
	BNS	Correspondence to and from Jon Bergman regarding confirmation of mediation agreement/settlement terms.	0.10	12.00
	BNS	Correspondence to and from mediator and opposing counsel, confirming mediation agreement/settlement terms.	0.10	12.00
05/17/2022	RMC	Receipt and review of proposed social security offset language for settlement documents, forwarded by Erik Bair.	0.10	16.00
	RMC	Preparation of proposed Compromise Settlement agreement and		

Executive Council of Iowa
Breckenridge v. Iowa Judicial Branch

Invoice Date: 05/31/2022
Invoice #: 194792
Account #: IA.0138

			Hours	
		Addendum thereto.	0.60	96.00
	RMC	Correspondence to Erik Bair requesting execution and return of settlement documents.	0.10	16.00
	RMC	Correspondence to Jon Bergman confirming preparation of settlement documents and regarding settlement check.	0.10	16.00
05/18/2022	RMC	Preparation of Notice of Settlement as required for filing by the Division of Workers' Compensation.	0.20	32.00
05/24/2022	RMC	Receipt and review of executed settlement documents from claimant's attorney, Erik Bair.	0.10	16.00
	RMC	Correspondence to the Division of Workers' Compensation requesting review and approval of Compromise Settlement agreement.	0.10	16.00
05/25/2022	RMC	Receipt and review of notice from Deputy Andrew Philips regarding required changes to settlement documents between claimant and the State prior to approval.	0.10	16.00
	RMC	Receipt and review of notice from Deputy Philips requesting 2013 date of injury be included in settlement documents.	0.10	16.00
	RMC	Revisions to Compromise Settlement agreement and Addendum to include 2013 date of injury per request of Deputy Philips.	0.10	16.00
	RMC	Correspondence to Erik Bair advising of changes to settlement documents per Deputy Philips.	0.10	16.00
05/26/2022	RMC	Receipt and review of approved settlement documents from the Division of Workers' Compensation.	0.10	16.00
	RMC	Correspondence to Erik Bair regarding approved settlement documents and settlement check coming from the State.	0.10	16.00
	RMC	Correspondence to Jon Bergman regarding approved settlement documents and settlement check.	0.10	16.00
		TOTAL FEES	14.10	1,872.00

Recapitulation

Timekeeper	Title	Hours	Rate	Total
Ryan M. Clark	Partner	4.50	$160.00	$720.00
Brittany N. Salyars	Associate	9.60	120.00	1,152.00

TOTAL THIS STATEMENT	1,872.00
Previous Balance	$592.00

Executive Council of Iowa
Breckenridge v. Iowa Judicial Branch

Invoice Date: 05/31/2022
Invoice #: 194792
Account #: IA.0138

Payments

05/20/2022	Payment on Account - Thank you!	-592.00
	TOTAL BALANCE DUE	$1,872.00

MEMBERS OF COUNCIL

HON. KIM REYNOLDS
GOVERNOR

HON. PAUL D. PATE
SECRETARY OF STATE

HON. ROB SAND
AUDITOR OF STATE

HON. MICHAEL L. FITZGERALD
TREASURER OF STATE

HON. MICHAEL L. NAIG
SECRETARY OF AGRICULTURE

Executive Council of Iowa

CAPITOL BUILDING
DES MOINES, IOWA 50319
PHONE: 515 281-5368

June 6, 2022

Mr. Joseph B Clamon
Associate Vice President for Legal Affairs
University of Iowa Health Care

Dear Mr. Clamon:

The Executive Council, in a meeting held on this date, approved payment of the following cost items:

Hall Render Killian Health & Lyman P.C. (Baker) …….....….$351.37
PO BOX 771910
Detroit, MI 48277-1910
University of Iowa Hospitals and Clinics (UIHC)

Hall Render Killian Health & Lyman P.C. (Baker) …….....….$532.00
PO BOX 771910
Detroit, MI 48277-1910
University of Iowa Hospitals and Clinics (UIHC)

EXECUTIVE COUNCIL OF IOWA

Victoria Newton

Victoria Newton
Executive Secretary

REMIT TO:

Invoice

Baker Healthcare Consulting, Inc.
Federal ID#: 35-1812687
PO Box 771910
Detroit, MI 48277-1910

Provider #	Invoice Date:	Invoice #:
160058	5/24/2022	524450

Bill To:

University of Iowa Hospitals and Clinics
c/o Iowa Executive Council-State Capitol
Attn: Victoria Newton
1007 E. Grand Ave., 1st Floor
Des Moines, IA 50319

Medicare Advantage Days	Class	Amount
Medicare Advantage Days Appeal This invoice is for work done from January 1, 2022 – March 31, 2022 on the DSH-2 Medicare Advantage (MA) Days Group Appeal. For an update on the status of this Appeal and the work performed this period, please refer to the Status Reports which are sent periodically via email correspondence. Cost/Benefit: Fees for this billing represent 0.02% of the Total AIC for this Appeal. Wage Index Reporting Instructions: For Hall Render, 98.75% of the billed fee is wages and wage related costs; compute paid hours by dividing 98.75% of your fees by $398.20 (average hourly billed rate). Your Hospital's prorated portion of fees and costs based on your Hospital's estimated Amount in Controversy (AIC) as a percent of the Total estimated AIC for this Appeal:	Rohead 5	351.37

For Billing Inquiries, please contact:
Hall Render Finance Department
Attn: Rhonda Dorton
(317) 429-3655
rdorton@hallrender.com

Total	$351.37
Payments/Credits	$0.00
Balance Due	$351.37

MEMBERS OF COUNCIL

HON. KIM REYNOLDS
GOVERNOR

HON. PAUL D. PATE
SECRETARY OF STATE

HON. ROB SAND
AUDITOR OF STATE

HON. MICHAEL L. FITZGERALD
TREASURER OF STATE

HON. MICHAEL L. NAIG
SECRETARY OF AGRICULTURE

Executive Council of Iowa

CAPITOL BUILDING
DES MOINES, IOWA 50319
PHONE: 515 281-5368
FAX: 515 281-7562

May 26, 2022

Mr. Jeffrey Thompson
Solicitor General
Attorney General Office-Hoover Bldg.
L O C A L

Re: Approval of attorney fees

Dear Mr. Thompson:

I received the enclosed statement from Hall Render Killian Health & Lyman P.C. (Baker)for the following fees:

University of Iowa Hospitals and Clinics (UIHC)

Current balance	$351.37
Waiting for AG recommendation	$0.00
Pending EC Approval	$0.00
Claims in Process	$0.00
Warrant sent	$0.00
Outstanding Total	$351.37

May I please have your recommendation of this payment request?

EXECUTIVE COUNCIL OF IOWA

Victoria Newton

Victoria Newton
Executive Secretary

MEMBERS OF COUNCIL

HON. KIM REYNOLDS
GOVERNOR

HON. PAUL D. PATE
SECRETARY OF STATE

HON. ROB SAND
AUDITOR OF STATE

HON. MICHAEL L. FITZGERALD
TREASURER OF STATE

HON. MICHAEL L. NAIG
SECRETARY OF AGRICULTURE

Executive Council of Iowa

CAPITOL BUILDING
DES MOINES, IOWA 50319
PHONE: 515 281-5368

June 6, 2022

Mr. Joseph B Clamon
Associate Vice President for Legal Affairs
University of Iowa Health Care

Dear Mr. Clamon:

The Executive Council, in a meeting held on this date, approved payment of the following cost items:

Hall Render Killian Health & Lyman P.C. (Baker) …….....….$351.37
PO BOX 771910
Detroit, MI 48277-1910
University of Iowa Hospitals and Clinics (UIHC)

Hall Render Killian Health & Lyman P.C. (Baker) …….....….$532.00
PO BOX 771910
Detroit, MI 48277-1910
University of Iowa Hospitals and Clinics (UIHC)

EXECUTIVE COUNCIL OF IOWA

Victoria Newton

Victoria Newton
Executive Secretary

THOMAS J. MILLER
ATTORNEY GENERAL

JEFFREY S. THOMPSON
SOLICITOR GENERAL



IOWA DEPARTMENT OF JUSTICE
OFFICE OF THE ATTORNEY GENERAL

1305 E. WALNUT ST.
DES MOINES, IA 50319
Main: 515-281-5164 • Direct: 515-281-4419
Email: Jeffrey.Thompson@iowa.gov
www.iowaattorneygeneral.gov

June 1, 2022

Victoria Newton
Executive Secretary
Executive Council
State Capitol
L O C A L

Re: Payment of Claims for Fees by Outside Counsel

Dear Victoria:

Our office is forwarding to the Executive Council approval for payment of attorney fees and costs in the amount of $532.00 from Hall Render Killian Heath & Lyman to represent the University of Iowa Hospitals and Clinics in the DSH II appeal.

The amount of the claim appears to be reasonable. We have reviewed both the billing and the Services Agreement and recommend payment. Pursuant to the terms of the contract, payment should be made from the funds of the University of Iowa Hospitals and Clinics.

Sincerely,

JEFFREY THOMPSON
Solicitor General

MEMBERS OF COUNCIL

HON. KIM REYNOLDS
GOVERNOR

HON. PAUL D. PATE
SECRETARY OF STATE

HON. ROB SAND
AUDITOR OF STATE

HON. MICHAEL L. FITZGERALD
TREASURER OF STATE

HON. MICHAEL L. NAIG
SECRETARY OF AGRICULTURE

Executive Council of Iowa

CAPITOL BUILDING
DES MOINES, IOWA 50319
PHONE: 515 281-5368
FAX: 515 281-7562

June 1, 2022

Mr. Jeffrey Thompson
Solicitor General
Attorney General Office-Hoover Bldg.
L O C A L

Re: Approval of attorney fees

Dear Mr. Thompson:

I received the enclosed statement from Hall Render Killian Health & Lyman P.C. (Baker) for the following fees:

University of Iowa Hospitals and Clinics (UIHC)

Current balance	$532.00
Waiting for AG recommendation	$0.00
Pending EC Approval	$0.00
Claims in Process	$0.00
Warrant sent	$0.00
Outstanding Total	$532.00

May I please have your recommendation of this payment request?

EXECUTIVE COUNCIL OF IOWA

Victoria Newton

Victoria Newton
Executive Secretary

REMIT TO:

Invoice

Baker Healthcare Consulting, Inc.
Federal ID#: 35-1812687
PO Box 771910
Detroit, MI 48277-1910

Provider #	Invoice Date:	Invoice #:
160058	5/31/2022	524666

Bill To:

University of Iowa Hospitals and Clinics
c/o Iowa Executive Council-State Capitol
Attn: Victoria Newton
1007 E. Grand Ave., 1st Floor
Des Moines, IA 50319

Dual Eligible	Class	Amount
This invoice is for work done from January 1, 2022 – March 31, 2022 on the DSH-2 Data Match (DM) Group Appeal. For an update on the status of this Appeal and the work performed this period, please refer to the Status Reports which are sent periodically via email correspondence. Cost/Benefit: Fees for this billing represent 0.21% of the Total AIC for this Appeal. Wage Index Reporting Instructions: For Hall Render, 99.61% of the billed fee is wages and wage elated costs; compute paid hours by dividing 99.61% of your fees by $338.42 (average hourly billed rate). Your Hospital's prorated portion of fees and costs based on your Hospital's estimated Amount in Controversy (AIC) as a percent of the Total estimated AIC for this Appeal:	Rohead 11	532.00

For Billing Inquiries, please contact:
Hall Render Finance Department
Attn: Rhonda Dorton
(317) 429-3655
rdorton@hallrender.com

Total	$532.00
Payments/Credits	$0.00
Balance Due	$532.00

MEMBERS OF COUNCIL

HON. KIM REYNOLDS
GOVERNOR

HON. PAUL D. PATE
SECRETARY OF STATE

HON. ROB SAND
AUDITOR OF STATE

HON. MICHAEL L. FITZGERALD
TREASURER OF STATE

HON. MICHAEL L. NAIG
SECRETARY OF AGRICULTURE

Executive Council of Iowa

CAPITOL BUILDING
DES MOINES, IOWA 50319
PHONE: 515 281-5368
FAX: 515 281-7562

June 6, 2022

Barbara L. Stinson
President
The World Food Prize®
100 Locust Street
Des Moines, IA 50309

RE: The World Food Prize® - Iowa Code §7D.16

Dear Ms. Stinson:

The Executive Council, in today's meeting approved your request for to serve wine at the reception which it will host at the Iowa State Capitol on October 20, 2022, as part of its annual Laureate Award Ceremony.

If you have questions on this matter, please advise.

EXECUTIVE COUNCIL OF IOWA

Victoria Newton

Victoria Newton
Executive Secretary

cc: Suzy Trotter, Capitol Complex Events Coordinator, Department of Administrative Services
Glen Dickinson, Secretary, Legislative Council
Adam Steen, Director, Department of Administrative Services
Ashton Lindsey, World Food Prize

WORLD FOOD PRIZE FOUNDATION
Barbara L. Stinson, President

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May 19, 2022

Office of Treasurer of State
Iowa State Capitol
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Executive Council, State of Iowa:

In accordance with action by the state legislature, this memorandum is to officially request permission for the World Food Prize Foundation to serve wine at the reception which it will host at the Iowa State Capitol on October 20, 2022, as part of its annual Laureate Award Ceremony.

Ever since permission was first given in 2000 for the World Food Prize Foundation to hold its Laureate Award Ceremony and Dinner at the State Capitol, the legislature has each year voted a joint resolution authorizing the serving of wine at the reception / dinner immediately following the ceremony in the Rotunda (with the exception of 2001 and 2002 when the ceremony took place at other locations, due to restoration work being done on the Capitol building).

During the 2009 legislative session, the legislature included language in a bill (Senate File 478) indicating that henceforth this decision should be directed to the Executive Council. That bill became law on July 1, 2009. In accordance with that legislation, we are now forwarding this request to serve wine at our 2022 Ceremony on October 20, to the Executive Council for its consideration and, hopefully, its approval.

Kind regards,

Barbara L. Stinson
President

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