County of Union, Illinois
Departmental Bill List

OFFICE/DEPARTMENT: Assessor
BOARD MEETING DATE: 08/08/2014
DATE SUBMITTED: 08/05/2014

CHECK	BILL INFORMATION		AMOUNT
	INVOICE NUMBER 6141 INVOICE DATE VENDOR NAME TAMMY ROBINSON FUND LINE 01 5100 05 OFFICIALS	DESCRIPTION 47,151.00 / 26 = 1,813.50 PAYROLL ENDING 8/8/2014	1,813.50
	INVOICE NUMBER 5835 INVOICE DATE VENDOR NAME KENNY SWINK JR. FUND LINE 01 5103 05 EMPLOYEES	DESCRIPTION 70 hours X 17.55 = 1,228.50	1,228.50
	INVOICE NUMBER 5956 INVOICE DATE VENDOR NAME AMY MIDDLETON FUND LINE 01 5103 05 EMPLOYEES	DESCRIPTION 70 hours X 17.55 = 1,228.50	1,228.50
	INVOICE NUMBER 6075 INVOICE DATE VENDOR NAME LISA SULLIVAN FUND LINE 01 5103 05 EMPLOYEES	DESCRIPTION 70 hours X 17.55 = 1,228.50	1,228.50
	INVOICE NUMBER INVOICE DATE VENDOR NAME FUND LINE [Select a Fund Line]	DESCRIPTION	
	INVOICE NUMBER INVOICE DATE VENDOR NAME FUND LINE [Select a Fund Line]	DESCRIPTION	
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	INVOICE NUMBER INVOICE DATE VENDOR NAME FUND LINE [Select a Fund Line]	DESCRIPTION	
	INVOICE NUMBER INVOICE DATE VENDOR NAME FUND LINE [Select a Fund Line]	DESCRIPTION	
		TOTAL	$ 5,499.00

Consent given by the County Board

Tammy R Robinson
Official/Department Head Signature

Unless noted by circling an item on this form, board consent implies approval of all individual requests.

County of Union, Illinois
Departmental Bill List

OFFICE/DEPARTMENT: Assessor
BOARD MEETING DATE: 08/08/2014
DATE SUBMITTED: 08/05/2014

CHECK	BILL INFORMATION		AMOUNT
	INVOICE NUMBER 279487 INVOICE DATE 07/30/2014 VENDOR NAME REPPERTS'S OFFICE SUPPLY FUND LINE 01 5200 05 OFFICE SUPPLIES	DESCRIPTION LASER PRINTER CARTRIDGE	169.99
	INVOICE NUMBER INVOICE DATE 07/31/2014 VENDOR NAME KENNY SWINK JR FUND LINE 01 5205 05 TRAVEL	DESCRIPTION MILEAGE REIMBURSEMENT 568 miles X .56 =	318.08
	INVOICE NUMBER INVOICE DATE VENDOR NAME FUND LINE [Select a Fund Line]	DESCRIPTION	
	INVOICE NUMBER INVOICE DATE VENDOR NAME FUND LINE [Select a Fund Line]	DESCRIPTION	
	INVOICE NUMBER INVOICE DATE VENDOR NAME FUND LINE [Select a Fund Line]	DESCRIPTION	
	INVOICE NUMBER INVOICE DATE VENDOR NAME FUND LINE [Select a Fund Line]	DESCRIPTION	
	INVOICE NUMBER 0063292 INVOICE DATE VENDOR NAME FUND LINE [Select a Fund Line]	DESCRIPTION	
	INVOICE NUMBER INVOICE DATE VENDOR NAME FUND LINE [Select a Fund Line]	DESCRIPTION	
	INVOICE NUMBER INVOICE DATE VENDOR NAME FUND LINE [Select a Fund Line]	DESCRIPTION	
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	INVOICE NUMBER INVOICE DATE VENDOR NAME FUND LINE [Select a Fund Line]	DESCRIPTION	
		TOTAL	$ 488.07

Consent given by the County Board

Tracy N. Robinson
Official/Department Head Signature

Unless noted by circling an item on this form, board consent implies approval of all individual requests.

Union County
Mileage Reimbursement

Department/Office ASSESSOR

Date	Odometer Reading Beginning	Odometer Reading Ending	Destination To and From	Purpose	Miles Driven
7-9-14	177719	177789		12-1-W	70
7-15-14	177800	177872		13-1-W	72
7-16-14	177875	177940		13-1-W	105
7-17-14	177945	178010		13-1-W	65
7-22-14	178012	178103		12-1-W, 12-1-E, 13-1-E&W	91
7-23-14	178105	178156		13-1-W	51
7-30-14	178170	178242		12-2-W	42
				12-2-W	72

Total Business Miles 568

Rate .56

Amount Reimbursed 318.08

I hereby certify that the above mileage was driven using my vehicle for Union County business purposes.

Kenney Swink Jr. 7-31-14

Employee Signature/Date

Tammy Robinson

Approval/Signature

REPPERT'S
OFFICE SUPPLIES & FURNITURE
More than ink pens and paper clips

112 LAFAYETTE STREET
ANNA, ILLINOIS 62906

PHONE: 618-833-2150
TOLL FREE: 1-800-524-7911
FAX: 618-833-5813

Please Detach Stub and
Remit To:
Reppert's Office Supplies
P.O. Box 529
Anna, IL 62906

STATEMENT

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UNION COUNTY SUPERVISOR
OF ASSESSMENTS
309 W MARKET
JONESBORO, IL 62952

DATE:	07/31/14
PAGE:	1
ACCOUNT:	2161

ACCOUNT NAME
UNION COUNTY SUPERVISOR

DATE:	07/31/14
PAGE:	1
ACCOUNT:	2161

CDE	INVOICE	DATE	REFERENCE	DUE DATE	AMOUNT
	I 279487	07/30/14	INVOICE	08/01/14	169.99

INVOICE	AMOUNT	✓
279487	169.99	

CDE: I = INVOICE P = PAYMENT C = CREDIT
O = OPEN CREDIT L = LATE CHARGE M = MISC. DEBIT

TOTAL BALANCE	169.99

TOTAL BALANCE	169.99

CURRENT	PAST DUE 1-30	PAST DUE 31-60	PAST DUE>60
169.99	0.00	0.00	0.00

REPPERT'S OFFICE SUPPLY
REPPERTSALES.COM
P.O. BOX 529 ANNA IL. 62906
Tel:(618)833-2150 FAX:(618)833-5813 Toll Free(800)524-7911

DATE OF INVOICE : 07/30/14

SOLD TO: 2161 / RON
UNION COUNTY SUPERVISOR
OF ASSESSMENTS
309 W MARKET
JONESBORO, IL. 62952

INVOICE NO: 279487
REF/PO#: INVOICE
FROM INV: 279487

FAX: (618)

SHIP TO:
UNION COUNTY SUPERVISOR
OF ASSESSMENTS
309 W MARKET
JONESBORO IL 62952
PHONE: (618)833-8051 RTE: CAPE-0

Item -No-	Part Number	Mfr.	Stock Number	ITEM DESCRIPTION	UOM	Qty Ordered	Qty Shipped	Qty to Follow	Unit Price	Discount Percent	Extended Price	St
1	Q5942A	HEW	69066	CRTDG,LSR,S PRT,LJ4250/4350	Ea	1	1	0	169.99	SPECIAL	169.99	US

RECEIVED BY:_____
CARRIER..: REPPERT'S TRUCK
FOB POINT: SAID OFFICE
TERMS....: Due on day 1 of next month
jmw001 2161 / 279487 LATE CHRG: 1.50%

THIS INVOICE DUE ON OR BEFORE 08/01/14

SUB-TOTAL-->> 169.99
SALES TAX-->> 0.00
INV. TOTAL->> $169.99

** Email us at reppert@midwest.net **