



**Johnson
Controls**

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

DES MOINES
11318 AURORA AVE
URBANDALE IA 50322
Phone: (515) 278-4100

Johnson Controls Fire Protection LP

INVOICE NO.

41194681

INVOICE DATE

08/31/2018

CUSTOMER PO

1001921006

TERMS

NET30

INVOICE TYPE

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



**Johnson
Controls**

REMITTANCE COPY

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

INVOICE NUMBER 41194681

SHIP TO 320-057052450 University Of Iowa Medical Res

INVOICE DATE 08/31/2018

CUSTOMER P.O. 1001921006

REMIT TO Johnson Controls Fire Protection LP
Dept. CH 10320
Palatine, IL 60055-0320

1001493835641174681



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 UI MRF System replacement	PROJECT NUMBER 605435001	APPLICATION NO. 00002	DISTRIBUTION LIST: <input type="checkbox"/> Owner <input type="checkbox"/> Architect <input type="checkbox"/> Contractor <input type="checkbox"/> _____
CUSTOMER P.O. 1001921006	INVOICE NO. 41194681	INVOICE DATE 08/31/2018	
PERIOD TO: 08/15/2018			

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	\$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

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: Kevin Baner 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

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

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.

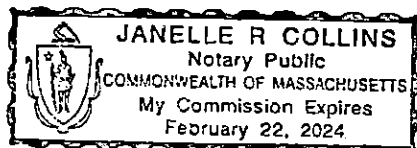
AMOUNT CERTIFIED

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.





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

[illegible]

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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

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**Johnson
Controls**

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

DES MOINES
11318 AURORA AVE
URBANDALE IA 50322
Phone: (515) 278-4100

Johnson Controls Fire Protection LP

INVOICE NO.

41218972

INVOICE DATE

11/19/2018

CUSTOMER PO

1001921006

TERMS

NET30

INVOICE TYPE

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	-	\$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.

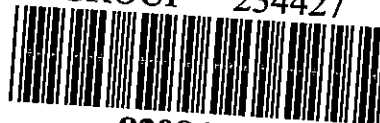
PAY THIS AMOUNT



\$3,624.01

PROGRESS BILLING FORMS FOLLOW:

GROUP 234427



83084908

Comments acctpay@uiowa.edu

REMITTANCE COPY

**Johnson
Controls**


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INVOICE AMOUNT

\$3,624.01

BILL TO 320-057052450 University of Iowa Accounts Pa

INVOICE NUMBER 41218972

SHIP TO 320-057052450 University Of Iowa Medical Res

INVOICE DATE 11/19/2018

CUSTOMER P.O. 1001921006

REMIT TO Johnson Controls Fire Protection LP
Dept. CH 10320
Palatine, IL 60055-0320

4000362401241218972



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 UI MRF System replacement	PROJECT NUMBER 605435001	APPLICATION NO. 00003	DISTRIBUTION LIST: <input type="checkbox"/> Owner <input type="checkbox"/> Architect <input type="checkbox"/> Contractor <input type="checkbox"/>
CUSTOMER P.O. 1001921006	INVOICE NO. 41218972	INVOICE DATE 11/19/2018	
PERIOD TO: 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

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.

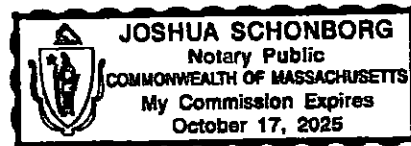
CONTRACTOR: Johnson Controls Fire Protection LP

By: John Demarais Date: 11/20/18
State of: MA County of: Worcester

Subscribed and sworn to before me this 20 Day of Nov, 2018.

Notary Public: John Schuler
My Commission expires: 10-17-25

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



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.



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
1001921006	41218972	11/19/2018
		PERIOD TO:
		11/15/2018

[illegible]

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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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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
0010	<p><i>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.</i></p> <p>MS1</p> <p>MECHANIC (SPECIAL REGULAR TIME)</p>	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

Date: 1/2/18 Notification #: N3198436
 Repair Job #: _____ Elevator ID#: #5
 Customer: MRF
 Location: IC

FM 4-3930

HOURS	ST	1.5	1.7	DT	Driving Time
Mech. Hours	<u>3</u>				
Helper Hours					
Team Hours					
Travel Time					
Total Time	<u>3</u>				



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
 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: TC #5 WATER DAMAGE OVER WEEKEND
- OPENED UP ALL BOXES, CARSTATION PANEL
DOOR OPERATOR
- CHECKED ALL FUSES IN CONTROLLER
- PIT STILL HAS 3" WATER IN IT
- PUT LOCKS ON BOTH DISCONNECTS

MATERIAL	AMOUNT

WORK DONE BY: B. LARSEN

JOB COMPLETED: ☐ YES ☒ NO
 CUSTOMER: [Signature]

Date: 1-2-2018
 Contract Type: FM
 Customer: U of E
 Location: MRF
 Customer No.: A-3930

HOURS	ST	1.5	1.7	DT
Mech. Hours	<u>2 1/2</u>			
Helper Hours				
Team Hours				
Travel Time				
Total Time	<u>2 1/2</u>			



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: STEAM PIPE BROKEN - ELEVATOR
WATER SOAKED - TROUBLE SHOOTING - EXTENT
OF DAMAGE

MATERIAL	AMOUNT

WORK DONE BY: RON COFFEY

CUSTOMER: _____

SAFETY CHECKLIST

- | | |
|--|--|
| <input type="checkbox"/> 1 Check with building personnel | <input type="checkbox"/> 5 Verify that jumpers used are removed from equipment |
| <input type="checkbox"/> 2 Check elevator door operation and door protection | <input type="checkbox"/> 6 Complete machine room logs |
| <input type="checkbox"/> 3 Check floor level accuracy | <input type="checkbox"/> 7 _____ |
| <input type="checkbox"/> 4 Visual inspection of elevator equipment in equipment room | <input type="checkbox"/> 8 _____ |

JOB COMPLETED

☐ YES ☒ NO

OFFICE COPY - WHITE
 CUSTOMER COPY - PINK

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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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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

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





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

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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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WSP

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	<u>ADDITIONS</u>	<u>DEDUCTIONS</u>	
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 Work & Stored Material)			\$ 0.00
6. TOTAL EARNED LESS RETAINAGE: (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

WSP
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 2/2/2018 The 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	= \$	<div style="border: 1px solid black; padding: 2px;">24,666.38</div>	
TOTAL WOODRUFF MATERIAL COST	= \$	<div style="border: 1px solid black; padding: 2px;">1,842.09</div>	
SUBTOTAL	= \$	<div style="border: 1px solid black; padding: 2px;">26,508.47</div>	
plus OH&P @	15% = \$	<div style="border: 1px solid black; padding: 2px;">3,976</div>	= \$ <div style="border: 1px solid black; padding: 2px;">30,484.74</div>

TOTAL SUBCONTRACT COST		= \$	7,112.97
plus OH&P @	5%	= \$	355.65
		= \$	7,468.62

<u>TOTAL PRICE FOR THE PERIOD</u>	\$ 37,953.36
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COST ANALYSIS

MRF Water Damage T&M

Pay App - 01 Period: 9-Jan-18 to 2-Feb-18

[illegible]

[illegible]

[illegible]

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
	AAA Mechanical Contractor- Water damage						\$ -	\$ -	\$ 2,164.26
	AAA Mechanical Contractor- Pipe repair						\$ -	\$ -	\$ 787.80
							\$ -	\$ -	\$ -
							\$ -	\$ -	\$ -
							\$ -	\$ -	\$ -
							\$ -	\$ -	\$ -
							\$ -	\$ -	\$ -
	SUBTOTAL						\$ 24,666.38	\$ 1,842.09	\$ 7,112.97
	PERIOD TOTAL						\$ 24,666.38	\$ 1,842.09	\$ 7,112.97

WCC Labor Hour Tickets

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 REPAIRProject Number 0744901Description of Work STAGING EQUIPMENT & OFFICE

Name	Trade	Hourly Rate	Hours			Name	Trade	Hourly Rate	Hours	
			Reg.	O.T.					Reg.	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

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 0744901Description of Work SETTING UP OFFICE / ORDERING MATERIALS
(FLOORING + BASE) INITIAL WALK THROUGH

Name	Trade	Hourly Rate	Hours		Name	Trade	Hourly Rate	Hours	
			Reg.	O.T.				Reg.	O.T.
MAKLTOTH	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

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 REPAIRProject Number #0744901Description of Work PREPPING FOR JOB / ORDERING MATERIAL / STAGING MATERIAL & EQUIP.

Name	Trade	Hourly Rate	Hours		Name	Trade	Hourly Rate	Hours	
			Reg.	O.T.				Reg.	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, 2007200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722



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 _____

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			Name	Trade	Hourly Rate	Hours	
			Reg.	O.T.					Reg.	O.T.
MARK TOTI	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

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722



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			Name	Trade	Hourly Rate	Hours	
			Reg.	O.T.					Reg.	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



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 - SUPERVISION. / LORENZO MENDOZA &

TROY McMURRAY - VINYL BASE & DRYWALL

Name	Trade	Hourly Rate	Hours		Name	Trade	Hourly Rate	Hours	
			Reg.	O.T.				Reg.	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
319-335-5500 Fax 319-335-2722



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 - SUPERVISOR / LORENZO MENDOZA +
TROY MEMURRAY - VINYL BASE & DRYWALL

Name	Trade	Hourly Rate	Hours		Name	Trade	Hourly Rate	Hours	
			Reg.	O.T.				Reg.	O.T.
TOTH	SUPT.		8	0	MENDOZA	L	8	0	
					MEMURRAY	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

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

TROY MEMURRY + LORENZO MENDOZA DRYWALL

Name	Trade	Hourly Rate	Hours	
			Reg.	O.T.
TOTL	SUPT.		8	0

Equipment and Material (attach invoices)

[illegible]

W27323/4-17

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722

FACILITIES MANAGEMENT
Design & Construction

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

Date Work Performed 1/23/18

Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number 107777

Description of Work MARK TOTAL / SUPERVISOR

Description of Work MAKER ROOM
TROY MEMORRAY / VINYL BASE LORENZO MENDOZA / DRYWALL

Name	Trade	Hourly Rate	Hours	
			Reg.	O.T.
TOTH	SUPT.		8	0

Name	Trade	Hourly Rate	Hours	
			Reg.	O.T.
MCMURRAY			8	0
MENDOZA			8	0

Equipment and Material (attach invoices)

[illegible]

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

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

Date Work Performed 1/24/18

Change Order Request No _____

Project Number #0744901

Description of work		Hourly	Hours
TROY McMURRAY / VINYL BASE			
KEVIN FARMER / VINYL BASE			
LORENZO MENDOZA / DRYWALL			

Equipment and Material (attach invoices)

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

Date Work Performed 1/25/18

Change Order Request No _____

Project Number # 0744901

Description of Work MARK 1014 / SOFTWALL
LORENZO MENDOZA / DRYWALL CESAR GALLEGOS / CEILING TILE
+ VINYL BASE

TROY McMURRAY / CEILING TILE / VINYL BASE

TROY MCMURRAY / CEILING TILE / VINYL BASE					
Name	Trade	Hourly Rate	Hours		
			Reg.	O.T.	
TOTH	JUPT.		8	0	

Name	Trade	Hourly Rate	Hours	
			Reg.	O.T.
MENDOZA			8	0
MCMURRAY			8	0
GALLEGO S			8	0

[illegible]

Owner's Representative (Required)

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722

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 1/26/18

Subcontractor _____

Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIRProject Number #0744901Description of Work MARK TOTH / SUPERVISOR LORENZO MENDOZA / DRY WALL
KEVIN FARMER, CESAR GALLEGOS, TROY McMURRAY / VINYL BASE
CEILING TILE

Name	Trade	Hourly Rate	Hours		Name	Trade	Hourly Rate	Hours	
			Reg.	O.T.				Reg.	O.T.
MARK TOTH	SUPT.		8	0	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) _____

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

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 REPAIRProject Number #0744901Description of Work MARK TOTH / SUPERVISOR LORENZO MENDOZA / DRYWALLTROY MCMURRAY, KEVIN FARMER / VINYL BASECESAR GALLEGOS / CEILING TILE

Name	Trade	Hourly Rate	Hours		Name	Trade	Hourly Rate	Hours	
			Reg.	O.T.				Reg.	O.T.
TOTH	SUPT.		8	0	MENDOZA			8	0
					MCMURRAY			8	0
					FARMER			8	0
					GALLEGOS			8	0

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, 2007200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722

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 REPAIRProject Number #0744901Description of Work MAK TOTH / SUPERVISOR KEVIN FARMER / DRYWALL
TROY McMURRAY / VINYL BASE CESAR GALLEGOS / CEILING TILE

Name	Trade	Hourly Rate	Hours		Name	Trade	Hourly Rate	Hours	
			Reg.	O.T.				Reg.	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, 2007200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722

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 REPAIRProject Number #0744901Description of Work MARK TOTH / SUPERVISOR CESAR GALLEGOS / CEILING TILE
TROY McMURRAY / VINYL BASE

Name	Trade	Hourly Rate	Hours		Name	Trade	Hourly Rate	Hours	
			Reg.	O.T.				Reg.	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
Yellow=Owner Copy
April, 2007200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722

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 REPAIRProject Number # 0744901Description of Work MAK TOTH / SUPERVISORCESAR GALLEGOS / CEILING TILE

Name	Trade	Hourly Rate	Hours		Name	Trade	Hourly Rate	Hours	
			Reg.	O.T.				Reg.	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
Yellow=Owner Copy
April, 2007200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722

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 REPAIRProject Number #0744901Description of Work MARK TOTH / SUPERVISOR CESAR GALLEGOS / CEILING TILE
KEVIN FARMER / DRYWALL TROY MCMURRAY / VINYL BASE

Name	Trade	Hourly Rate	Hours		Name	Trade	Hourly Rate	Hours	
			Reg.	O.T.				Reg.	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

The University of Iowa
University of Iowa Parking and Transportation
Hospital Ramp 1
(319) 335-8312

F/C #52 A Payment No. 00232960
T/D #01 Ticket No. 085893
Cashier ID #312
Entry Time 1/31/2018 (Wed) 6:51
Paid Time 1/31/2018 (Wed) 15:28
Parking Time 8:37
Parking Fee Rate B \$20.00

Cash Amount \$20.00

Total \$20.00

Thank You

The University of Iowa
University of Iowa Parking and Transportation
Hospital Ramp 1
(319) 335-8312

F/C #02 A Payment No. 00075530
T/D #01 Ticket No. 084143
Cashier ID #313
Entry Time 1/26/2018 (Fri) 12:47
Paid Time 1/26/2018 (Fri) 15:37
Parking Time 2:50
Parking Fee 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

The University of Iowa
University of Iowa Parking and Transportation
Hospital Ramp 1
(319) 335-8312

F/C #52 A Payment No. 00233308
T/D #01 Ticket No. 086417
Cashier ID #117
Entry Time 2/1/2018 (Thu) 6:48
Paid Time 2/1/2018 (Thu) 15:50
Parking Time 9:02
Parking Fee Rate B \$20.00

Cash Amount \$20.00

Total \$20.00

Thank You

The University of Iowa
University of Iowa Parking and Transportation
Hospital Ramp 1
(319) 335-8312

F/C #02 A Payment No. 00075334
T/D #03 Ticket No. 083280
Cashier ID #301
Entry Time 1/25/2018 (Thu) 6:33
Paid Time 1/25/2018 (Thu) 15:32
Parking Time 8:59
Parking Fee Rate B \$20.00

Cash Amount \$20.00

Total \$20.00

Thank You

KEVIN
FARMER
The University of Iowa
University of Iowa Parking and Transportation
Hospital Ramp 2
(319) 335-8312

F/C #52 A Payment No. 00061164
T/D #11 Ticket No. 076132
Cashier ID #281
Entry Time 1/30/2018 (Tue) 6:55
Paid Time 1/30/2018 (Tue) 15:28
Parking Time 8:33
Parking Fee 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

The University of Iowa
University of Iowa Parking and Transportation
Hospital Ramp 1
(319) 335-8312

F/C #02 A Payment No. 00075432
T/D #01 Ticket No. 083606
Cashier ID #59
Entry Time 1/26/2018 (Fri) 6:51
Paid Time 1/26/2018 (Fri) 11:38
Parking Time 4:47
Parking Fee 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.
9300 James Avenue South
Bloomington, MN 55431
Tel: (952) 888-5556
Fax: (952) 888-4030



SOLD TO:
4184 1 MB 0.423 E0252X 10569 03237425483 S2 P5016985 0001:0002

WOODRUFF CONSTRUCTION
1890 KOUNTRY LN
FORT DODGE IA 50501-8722

- 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

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
11885	4.00	EA	SANDSPONGE DUAL ANGLETRIM-MED TRIM	EA	4.00	1.94	7.76
KRAST135	2.00	EAG	HYDRA-GROUT-GPONGE7-5/8"X5-1/2"VE	EAG	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				SUBTOTAL			
STATE : Iowa							
CITY : Iowa City				TAX			
COUNTY : Johnson - County							
THANK YOU FOR YOUR BUSINESS!				ADD'L CHARGES			
				TOTAL			
TERMS: NET 20TH. OR AS OTHERWISE ARRANGED. INTEREST RATE OF 1 1/2% 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, STOE/IFS, 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) 888-5558
Fax: (952) 888-4030



SOLD TO:

8628 1 MB 0.424 E0020X I0033 D3254839595 \$275024069 0001:0001



WOODRUFF CONSTRUCTION
1890 KOUNTRY LN
FORT DODGE IA 50501-8722

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

SHIP TO:

WOODRUFF CONSTRUCTION
OF 1 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
1188	12.00	PCS	USG B1 SUPERWIDE BEAD® 5D/CTN 400		MLF	96.00	368.00	35.33
1188	10.00	EA	SANDSPONGE DUAL ANGLE FINE MED TRIM		EA	10.00	1.00	10.40

1/2" WALLBOARD, PLASTER, STUCCO, STAPLES, JOINT COMPOUND, INSULATION, METAL STUDS, METAL LATH, METAL ACCESS DOORS, DRYWALL SCREWS, DRYWALL TOOLS, CEILING TILE AND GRID, FRP REGLET TRIMS, FRP SCAFFOLDING, SAFETY EQUIPMENT AND MORE

0001



Branch: Iowa City
PO BOX 230
1201 South Gilbert St.
Iowa City, Iowa 52240

Phone 319-338-1113

Fax 319-338-8309

Pickup Now Order

Order No 7262680
Order Date 01/18/2018
Invoice No 1466595

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



Page 1 of 1

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	15.00	ea	15.00
2	6979090	ADHESIVE SPREADER 11 BEAD HD COVE BASE	1 ea	4.50	ea	4.50

Total Amount	\$20.58
Sales Tax	\$1.23
Order Total	\$21.81

Use Your  2%
BIG CARD 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	
5625088	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	23.88
ZW 10'STEEL POLES 4/PK	
5625088	129.00
TOTAL	204.84
TAX STATE OF IA 6%	12.29
TOTAL SALE	217.13
Menard Commercial Card 6897	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 DASHIER, Beth

38638 03 9782 01/18/18 04:20PM 3091



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	11.06
12.48 DISCOUNT EACH	-0.62
12322 2-CT 10-14 GAL DRYWALL FT	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:XXXXXXXXXX7939 AMOUNT:45.16 AUTHCD:000857

KEYED REFID:435776 01/19/18 13:31:20

LAR PD: 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: ANAHDA SERMULKA-GEORGE

LOWE'S PRICE MATCH GUARANTEE

FOR MORE DETAILS, VISIT LOWES.COM/PRICEMATCH

Use Your  2%
BIG CARD REBATE
MENARDS®

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

KEEP YOUR RECEIPT
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charges on your receipt, please
email us at:
IOWAfrontend@menards.com



Sale Transaction

390Z 409 ALL PURPOSE CLN	
6472111	2.89
2 GAL MENARD PAINT	
6482815	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  2%
BIG CARD 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
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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 *	
5525086	128.00
SUPER GLOE BRUSH ON 12 0	
2511084	5.97
TOTAL	134.97
TAX STATE OF IA 6%	8.10
TOTAL SALE	143.07
Menard Commercial Card 8697	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

TAMARACKMATERIALS, INC.
www.tamarackmaterials.com9300 James Ave. S.
Bloomington, MN 55431
(952) 888-5556
(952) 888-4030Bloomington 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) 337-3033Tamarack Materials, Inc.
SDS 12-1200
P.O. Box 86
Minneapolis, MN 55486-1200

REMIT TO

Customer No.		Date		Order Number	
10421				6527644-00	
Order Date	Customer P.O. Number	Customer Job No.	Ordered By	Entered By	Reqd Ship Date
01/19/18	55 south grand ave	WOODRUFF CONSTRUCTION	mark	atl	01/19/18
Special Instructions					Page No.
					1 of 1
MRF Building?					

S
O
L
D

WOODRUFF CONSTRUCTION
1890 KOUNTRY LANE
FT. DODGE, IA 50501

S
H
I
P

WOODRUFF CONSTRUCTION
55 grand ave
Mark 319 383 1616
iowa city, IA

Product No.	Quantity	Units	Description	U/M	Extension	Unit price	Amount
2BITR	12	EA	BIT 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 9029-0

Tax Details		Received By	Delivered By	Totals
Taxable: Yes			IOWA CITY YARD	SUBTOTAL
Iowa				TAX
Johnson -				ADD'L CHARGES
Iowa City				TOTAL
<p>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.</p> <p>25% RETURN CHARGE ON STOCK MERCHANDISE. SPECIAL ORDERS ARE NOT RETURNABLE.</p> <p>TAMARACK MATERIALS INC. HEREBY REQUESTS PURSUANT TO MINNESOTA STATUTES SECTION 614.011 (9) THAT YOU SUPPLY TO IT, WITHIN TEN (10) DAYS OF THE DATE OF THIS INVOICE, THE NAME AND ADDRESS OF THE OWNER WHOSE PROPERTY IS BEING IMPROVED BY THE MATERIALS YOU HAVE ORDERED.</p>				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



Tamarack Materials, Inc.
9300 James Avenue South
Bloomington, MN 55431
Tel: (952) 888-5558
Fax: (952) 888-4030

**SOLD TO:**

9964 1 MB 0.424 E0188X 1039B D3266401876 SZ P5035823 0001:0002



WOODRUFF CONSTRUCTION
1890 KOUNTRY LN
FORT DODGE IA 50501-8722

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

SHIP TO:

WOODRUFF CONSTRUCTION
55 grand ave
Mark 319 383 1616
iowa city, IA

[illegible]

GYP-SUM WALLBOARD, PLASTER, STUCCO, STOVE/IFS, 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

00001-0002



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-PAID-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
D16856
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 2958 01/22/18 03:47PM 3091



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

160Z 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



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 04/26/18

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 3008 ULTRA WHITE
5634308 1 @13.89 13.89

TOTAL 22.86
STATE OF IA 6% 0.77
TOTAL SALE 13.83
Menard Commercial Card 6697 13.83
028806
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



Foundation Building Materials
RETURN SERVICE REQUESTED

BRANCH 0043
5543RD AVE SW
CEDAR RAPIDS IA 52404-4908
(319) 362-4033 PH
(319) 247-2599 FX

Founded on Principle • Built with Purpose

PACKING SLIP

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

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		<p>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.</p>					



Foundation Building Materials
RETURN SERVICE REQUESTED

BRANCH 0043
55 41RD AVE SW
CEDAR RAPIDS IA 52404-4808
(515) 352-4033 PH
(515) 247-2599 FX

Founded on Principle • Built with Purpose

BILL TO CUSTOMER NUMBER: 94357 PH: 5155761118

WOODRUFF CONSTRUCTION CO.
1890 KOUNTRY LN
FORT DODGE, IA 50501-6722
UNITED STATES

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
<div>➔ PLEASE REMIT ALL PAYMENTS TO: ➔</div> <div>FOUNDATION BUILDING MATERIALS</div> <div>1125 HARRISON AVE</div> <div>ROCKFORD IL 61104-7239</div>	

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	UNIT QTY	UNIT PRICE	PRICE UOM	AMOUNT DUE
17.00	17.00	CTN	CTA815A	0.816	\$1,445.000	MSF	\$1,179.12
ARM FISSURED 2X2 TEG 15/16" (48/CTN) WHITE							
<div>Email & Fax Invoicing Now Available !!</div> <div>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!</div>							

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 PSS

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



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

KEEP YOUR RECEIPT
RETURN POLICY VARIES BY PRODUCT TYPE

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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 7.66
FATMAX POCKET KNIFE
2373236 14.99

TOTAL 22.67
TAX STATE OF IA 6% 1.36
TG SALE 24.03
Menard Commercial Card 6897 24.03
010156
Swiped
PO # 18011

TOTAL NUMBER OF ITEMS = 2

GUEST COPY

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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

CHARGE 4:04pm
Tran # 8091-4 01/30/18
ET3/13746 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 DOUGLASS, IA 50501 8722
(515) 232-4535

~~172-2297 137202 EACH
CP66SW-48MM MASKTAPE
*Sale Price 1.00 2.75 2.75
482-8133 PG29..24R 2 INCH
PG29 PREMIES-48MM
1.00 9.19 9.19
Discount (X15.00) -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

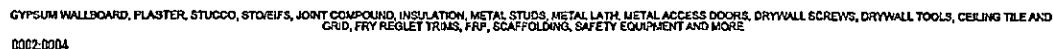
SUNDAY 10:00 AM - 6:00 PM
MONDAY - FRIDAY 7:00 AM - 7:00 PM
SATURDAY 8:00 AM - 6:00 PM

Thank You
receipt required for refund



13746/80914-01-30-2018

Customer Copy



Use Your  2%
BIG CARD 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	13.94
AL	37.91
TAX STATE OF IA 6%	2.27
TOTAL SALE	40.18
Menard Commercial Card 6697	40.18
010474	
Swiped	
PQ # 18 011	
TOTAL NUMBER OF ITEMS = 4	

GUEST COPY

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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 HOME CENTERS, LLC
2701 2ND STREET
CORALVILLE, IA 52241 (319) 545-8300

- SALE -

SALES#: S168BJK1 2274240 TRANS#: 9610269 02-02-18

549713 SHOP-VAC 12-BAL 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:XXXXXXXXXXXX7939 AMOUNT:100.70 AUTHCD:000927

KEYED REFID:427894 02/02/18 16:24:52

LAR PD: 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 S&S 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 BERNOLKA-GEORGE

LOWE'S PRICE MATCH GUARANTEE
FOR MORE DETAILS, VISIT LOWES.COM/PRICEWATCH

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 1688 033

NO PURCHASE
NECESSARY
VOID WHERE PROHIBITED
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 ra-

Use Your 2%
BIG CARD 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

PD # 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 DIED)

MENARDS

GLUE GUN

GLUE

(TO ATTACH
VINYL BASE)

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intentionally**

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

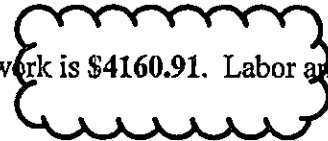
Monday, February 12, 2018

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

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. CHANGED OUTLET 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

Page 1

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:
CUST. NO.

WOODRUFF CONSTRUCTION
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

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

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470.91

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Labor / Work Description**Charge**

Labor Provided

3,690.00

Labor Total

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Page 1

PAY THIS
AMOUNT ▶

\$

4,160.91

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Advanced Electrical Services, Inc.
1233 Gilbert Court
Iowa City, IA 52240

CUSTOMER:
CUST. NO.

WOODRUFF CONSTRUCTION
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



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:

AES - #27446- UI STEAM UTILITY SYS
1233 GILBERT COURT
ATTN: JAKE MOORE
IOWA CITY IA 52240-4510

ENROLLMENT TOKEN
SPZ LMS QFF

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		44.118/E	176.47
12	12	3LAMP 32W/T8 TROFFER (120/277V) 453753 PHIL F32T8/HL741/ALTO 30PK		1.535/E	18.42



WANT TO SAVE TIME?

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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

Jan 12, 2018 6:49:54 AM M000295699

Signature: *Crang*
Multiple Orders

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>

Confirmation of Delivery

Permit Info (14 of 99999 Issued)		Permit Vehicles		Locations (Sold: 3, Cap: 1)																	
new Permit	Agency: Main	Plate: <input type="text"/>	State: <input type="text"/>	Location																	
pred	Account #: AIM1082453	Type: <input type="text"/>	Year: <input type="text"/>																		
id	Permit Type: Hooded Meter	Make: <input type="text"/>	Model: <input type="text"/>	GTHM-Pharmacy																	
oded Meter	Permit #: HM01882	Color: <input type="text"/>	Weight: <input type="text"/>																		
FILED	Status: Issued	VIN: <input type="text"/>	Reg. Exp: <input type="text"/>																		
mp Employee...	Active Date: 1/18/2018 00:00	Reg. Date: <input type="text"/>	Reg. Time: <input type="text"/>																		
IA1235	Exp. Date: 1/19/2018 23:59																				
intractor Ac...	Amount: \$44.00																				
112																					
135																					
14																					
intractor Te...	<div> <div>Contacts</div> <div>Tracker</div> <div>Invoicing</div> <div>Attributes</div> <div>Delivery</div> <div>Comments</div> <div>Attachments</div> <div>Categories</div> </div>																				
IA5234	Custom Attributes																				
IA6407	<table border="1"> <thead> <tr> <th>Attribute</th> <th>Value</th> </tr> </thead> <tbody> <tr> <td>Payroll Code</td> <td></td> </tr> <tr> <td>Omit From Payroll</td> <td></td> </tr> <tr> <td>1st Hangtag Special Field</td> <td>PH7</td> </tr> <tr> <td>2nd Hangtag Special Field</td> <td></td> </tr> <tr> <td>Contractor Access Card #</td> <td></td> </tr> <tr> <td>Contractor Job #</td> <td></td> </tr> <tr> <td>Contractor Name</td> <td></td> </tr> </tbody> </table>					Attribute	Value	Payroll Code		Omit From Payroll		1st Hangtag Special Field	PH7	2nd Hangtag Special Field		Contractor Access Card #		Contractor Job #		Contractor Name	
Attribute	Value																				
Payroll Code																					
Omit From Payroll																					
1st Hangtag Special Field	PH7																				
2nd Hangtag Special Field																					
Contractor Access Card #																					
Contractor Job #																					
Contractor Name																					
IA6408																					
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intractor Ac...																					
195																					
155																					
177																					
136																					

MRS
29306



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	
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:

ADVANCED ELECTRICAL SERVICES
1233 GILBERT CT
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
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

T/2001

TREVOR

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.

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Confirmation of Delivery



VAN METER INC.
470 Ruppert Road
IOWA CITY IA 52246
319-339-0000 Fax 319-339-1816

www.vanmeterinc.com



CREDIT MEMO

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:

AES - #29306- UI MRF
1233 GILBERT CT
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		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



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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

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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



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:

ADVANCED ELECTRICAL SERVICES
1233 GILBERT CT
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		**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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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

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

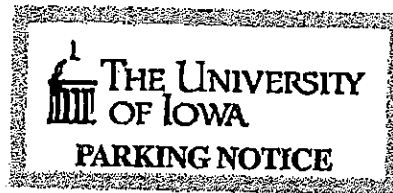
CORRESPONDENCE TO:

Electrical Engineering & Equipment Co.
P.O. Box 310365
Des Moines, IA 50331-0365

BILL TO: ADVANCED ELECTRICAL SERVICE
1233 GILBERT CT.
IOWA CITY, IA 52240

INSTRUCTIONS	REFERENCE	CASH DISCOUNT:
		0.06
SHIP POINT	SHIP VIA	SHIPPED
3E - IOWA CITY	WAIT COUNTER	01/19/18
		IF PAID BY:
		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



TRANSACTION #: 182000874

LIC: KINICK 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





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	
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:

AES - #29306- UI MRF
1233 GILBERT CT
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		**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		22.052/E	22.05
		SJEOW YEL			
1	1	P&S SS13 1G STN-STL BLNK PLT		1.040/E	1.04



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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

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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Confirmation of Delivery



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	
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:

AES - #29306- UI MRF
1233 GILBERT CT
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		**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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Invoice Questions?
Call Carter Valentine at
319-339-0000

01-18-2018 10:44:35 AM
S010097067.001

TREVOR

TREVOR

Confirmation of Delivery

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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29306

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Iowa City, IA 52240
319-351-1121

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Family Values

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QTY	ITEM	PRICE	TOTAL
1	101359177 CONCRETE VINYL PATCHER	\$9.99	\$9.99

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 Res 2/02/18 13:23

ENJOY \$5 OFF
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Visit tellofh.sma.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: _____

Account #ATM1082453(Advanced Electrical Services 3) (Permit #CT1SA6664)									
if 9999 Issued		Permit Vehicles		Locations (Sold: 92, Cap: 1)				Financial Summary	
In	Class	Model	Year	Location	Section	Space	Description	Balance	
1/10/2018	Tractor Temp Sur...	Other		Click here to add a new row				ONCE (1/29/2018)	
3A6664	Used								
10/20/13	00:00	PAC. Exp.							
10/20/18	23:59	Renewal							
00									
Vehicle 0 of 0									
Ser Invoicing Attributes Delivery Comments Attachments Categories									
Services 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									
4510 City: Iowa City State: IA									
Email									
Phone Numbers									
Type Phone Number									
Account Balance \$565.00									
Balance Owning: \$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									

60452
25408

Permit Info (35 of 9234 Issued)		Permit Vehicles		Locations (Sole 37, Cap 1)		Financial Summary	
				Location	Section	Space	Description
Create New Permit <input type="checkbox"/> (1) Active <input checked="" type="checkbox"/> (1) Contractor Te... <input type="checkbox"/> (1) Expired <input type="checkbox"/> (7) Inactive <input type="checkbox"/> (7) Contractor Ac...		Agency: San Account #: 3111032153 Permit Type: Temp-Low Temp... Permit #: CTSA6651 Status: Active Active Dates: 7/29/2018 00:00 Exp. Date: 1/29/2019 23:59 Amount: \$6.00		Location: Other Section: Space:		Financial Summary Description: ONCE (1/29/2018) Balance:	
<input type="checkbox"/> 14395 <input type="checkbox"/> 22955 <input type="checkbox"/> 24277 <input type="checkbox"/> 25356 <input type="checkbox"/> 27484 <input type="checkbox"/> 27495 <input type="checkbox"/> 33433		Vehicle Info Contacts: Tredler Invoicing: Attributes: Delivery: Comments: Attachments: Categories: Custom Attributes:					
<input type="checkbox"/> (1) Lost <input type="checkbox"/> (1) Contractor Ac... <input type="checkbox"/> 18170 <input checked="" type="checkbox"/> (7) CANCELLED <input type="checkbox"/> (1) Temp Emplon... <input type="checkbox"/> EYSA1235 <input type="checkbox"/> (3) Contractor Ac... <input type="checkbox"/> 24912 <input type="checkbox"/> 25335 <input type="checkbox"/> 2584 <input type="checkbox"/> (3) Contractor Te... <input type="checkbox"/> CTSAS224 <input type="checkbox"/> CTS46407 <input type="checkbox"/> CTS46408		Attribute: Value Payroll Code: Onst From Payroll: 1st Hanging Special Field: SV119 2nd Hanging Special Field: Contractor Access Card #: UI # HRS29306 Contractor Job #: TREVOR BERTELLI Contractor Name: 319-930-7528 Contractor Phone #: GIVE M Sticker IC Permit #: CTSA5224 PPK DEPT: PREPAY: Bike Make: Bike Model: Bike Serial: Bike Color: Online Requestion Process:					
						Account Balance: \$555.00 Balance Owning: \$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

02/20/2018

Page: 1

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 S010095552.001 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		ORSCHL'S 02/02/18	1.00	10.59	10.59	.150000	12.18	12.18			
1	2018 01/31	55623		AP CTS6667 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			

AE labor cost summary

02/12/2018
Page: 1

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
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



FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODLUFF 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		Name	Trade	Hourly Rate	Hours	
			Reg.	O.T.				Reg.	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

W27323/4-17

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722



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			Name	Trade	Hourly Rate	Hours	
			Reg.	O.T.					Reg.	O.T.
TREVOR BERTELLI	ELEC.		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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TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

Description of Work REPAIR & CHANGE OUT OUTLETS. CHANGED OUT
1 LIGHT FIXTURE

Name	Trade	Hourly Rate	Hours	
			Reg.	O.T.
BERTELL I	ELEC.		8	0

[illegible]

Owner's Representative (Required)

W27323/4-17



FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODROFF CONST. CO.

Date Work Performed 1/19/18

Subcontractor ADVANCED ELECTRICAL

Change Order Request No.

Project Name MRF WATER DAMAGE REPAIR

Project Number #0744901

Description of Work FIXTURES ON 4TH & 5TH. BLANKED OFF BOXES
ABOVE CEILING. CHECKED ABOVE CEILING FOR OTHER DAMAGE.

Name	Trade	Hourly Rate	Hours		Name	Trade	Hourly Rate	Hours	
			Reg.	O.T.				Reg.	O.T.
BERTELLI	ELEC.		8	0					

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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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		Name	Trade	Hourly Rate	Hours	
			Reg.	O.T.				Reg.	O.T.
BEUTELL, J.	ELEC		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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TIME AND MATERIAL FORM

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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 BELTELLI / WORK W/ WOODRUFF ON CEILING FIXTURES
TO REPLACE CEILING TILES, ALSO WORKING IN ELEVATOR
PIT, PREPPING FOR TOMORROW.

Name	Trade	Hourly Rate	Hours		Name	Trade	Hourly Rate	Hours	
			Reg.	O.T.				Reg.	O.T.
BELTELLI			7	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
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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 2/1/18

Subcontractor ADVANCED ELECTRICAL

Change Order Request No. _____

Project Name MILF WATER DAMAGE REPAIR Project Number #0744901

Description of Work BELTELLI / Pick up Material, Start LL Elevator Pathway, Drilled hole thru shaft, lay out brackets =

Name	Trade	Hourly Rate	Hours		Name	Trade	Hourly Rate	Hours	
			Reg.	O.T.				Reg.	O.T.
BELTELLI	ELEC.		8	0					

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) _____

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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 2/2/18

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		Name	Trade	Hourly Rate	Hours	
			Reg.	O.T.				Reg.	O.T.
BERTELLI	ELEC		8	0					

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

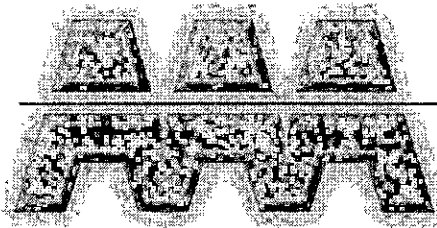
Owner's Representative (Required) _____

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200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722

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intentionally**



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,

A handwritten signature in black ink, appearing to read 'Jeff Koeppel'. The signature is fluid and cursive, with a long horizontal stroke extending to the right.

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



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		Name	Trade	Hourly Rate	Hours	
			Reg.	O.T.				Reg.	O.T.
Greg Murphy	Plumber		7						

Equipment and Material (attach invoices)

Quantity	Description
	PLEASE PROVIDE DRINKING FOUNTAIN INVOICES AS BACK UP
	off

Subcontractor's Representative (if applicable) Greg D Murphy

General Contractor's Representative [Signature]

Owner's Representative (Required) [Signature]

White=Contractor Copy
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April, 2007

W27023/4-17

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Iowa City, Iowa 52242
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FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM
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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 WHELE IT
ORIGINALLY FAILED & CAUSED ALL WATER DAMAGE, REQUIRED
HEATING HOT WATER SHUTDOWN

Name	Trade	Hourly Rate	Hours		Name	Trade	Hourly Rate	Hours	
			Reg.	O.T.				Reg.	O.T.
GREG MURPHY	PIPEF		34.5	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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200 University Services Building
Iowa City, Iowa 52242
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EMPLOYEE NAME Greg Murphy TM JOB NO. 1112163
EMPLOYEE I.D. 3440 JOB NAME MRF
(OFFICE USE)

THURSDAY		FRIDAY		SATURDAY		SUNDAY		MONDAY		TUESDAY		WEDNESDAY		WEEK ENDING	CLASS TOTAL		
REGULAR	O.T.	REGULAR	O.T.	O.T.	O.T.	O.T.	O.T.	REGULAR	O.T.	REGULAR	O.T.	REGULAR	O.T.	1-31-18	REGULAR	O.T.	O.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		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		

Notes:

15.5

Material receipt for water damage project



4625 6TH ST SW
CEDAR RAPIDS, IA 52404-0000

Please contact with Questions: 319-393-5660

RECEIVED JAN 25 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

SHIP TO:

AAA MECHANICAL CONTRACTORS INC
PO BOX 805
CORALVILLE, IA 52241

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	TM11283	520	Upfl ERF BUILDING	01/18/18	187513
ORDERED	SHIPPED	ITEM NUMBER	DESCRIPTION	UNIT PRICE	QTY	AMOUNT	
2	2	HHAC8SSNF Serial # Serial #	LF BG CHILD ADA WTR COLR 170745840 171128468	541.800	EA	1083.60	
INVOICE SUB-TOTAL						1083.60	
FREIGHT						75.00	
TOTAL						1158.60	
<p>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.</p>							
<p>ENTERED JAN 29 2018</p> <p>TOR NO. <u>TM11283</u> CODE NO. <u>OK</u></p>							

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TERMS: NET 10TH PROX

ORIGINAL INVOICE

TOTAL DUE

\$1,223.92

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://wolseley.com/terms_conditionsSale.html and are incorporated by reference. Seller may convert checks to ACH.

Material receipt for
Alt #1

RECEIVED JAN 24 2018

INVOICE

**SCHIMBERG CO.**

1106 Shayer Road NE
Cedar Rapids, IA 52402
Ph: 319-365-9421 Toll Free: 800-728-9421
www.schimberg.com

Remit To: 1106 Shayer 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

Invoice Date	Invoice Date	Invoice #
01/19/18	01/23/18	7695863-00
Invoice #	Invoice #	Invoice #
118		TM11263
Customer Name	Customer Name	Customer Name
GREG M		Russ Blood

B To ATTN	AAA MECHANICAL CONTRACTORS INC PO BOX 805 IOWA CITY, IA 52240
-----------------	---

Ship To ATTN	AAA MECHANICAL CONTRACTORS 832 QUARRY RD ATTN GREG MURPHY CORALVILLE, IA 52241
--------------------	---

EMAIL: khutchins@aaamech.com

Terms	Ship Point	Ship Via	Ship Date	Tax 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 HEMI CPLG 2-1/2"	1	1	0	EACH	9.67	9.67
2	31100001001 NTP S80 BLK 2-1/2XCLOSE	1	1	0	EACH	9.26	9.26
3	31100000901 NTP S80 BLK 2XCLOSE	2	2	0	EACH	3.03	6.06
4	31100000904 NTP 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, TEFLO 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

This amount is
charged

Total → 107.90
Taxes 6.47
Invoice Total 114.37

SALESPERSON CONTACT INFORMATION
Russ Blood
rblood@schimberg.com

INV NO TM11263
CODE NO OK

ENTERED JAN 29 2018

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

Page 1 of 1

Material receipt for
Alt #1

RECEIVED JAN 30 2018



Two Great Traditions Combined

PLUMB SUPPLY COMPANY - IC PO Box 310578 DES MOINES, IA 50331-0578
--

PLUMB SUPPLY COMPANY - IC 1925 BOYRUM STREET IOWA CITY, IA 52240 Telephone: 319-351-1004
--

PAGE NO.	1
INVOICE NO.	5045053
INVOICE DATE	1/30/18
PACKING SLIP NO.	5045053
CUSTOMER NO.	204094
WAREHOUSE	017

AAA MECHANICAL CONTRACTORS INC P O BOX 805 IOWA CITY, IA 52244

Customer Pickup

CUSTOMER P.O. NUMBER	JOB NAME	JOB NO.	SLS	DUPLICATE	SHIP DATE	SHIPPING METHOD
TM11263	MURPH		PTY	2/20/18	1/26/18	Pickup

LINE	PRODUCT NO/DESCRIPTION	QTY	UNIT PRICE	EXTENDED AMOUNT
1	DB791BD1 791BD-1 1-1/4X16 22GA DBL SJ EXT- EA DEARBORN (791BD-1) WATTS (759253)	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
<div style="text-align: center;"> </div>				

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	11.81
DUE	

This amount is charged



FACILITIES MANAGEMENT
Planning, Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor Woodruff

Date Work Performed 2/6/18

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		Name	Trade	Hourly Rate	Hours	
			Reg.	O.T.				Reg.	O.T.
Gabe Meyers	Insul	F	4						

Equipment and Material (attach invoices)

Quantity	Description
3'	2 1/2" x 1" ASS FSC Fiberglass
3'	3" x 1" S S
3'	4" x 1" S S
1	#10 90'
1	Foil Tape
1	1/2" # Ductwrap

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

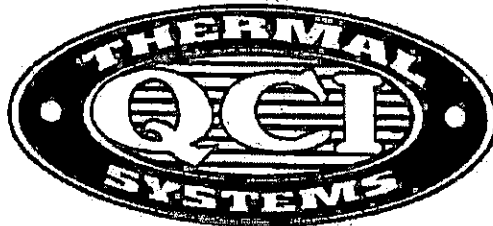
Owner's Representative (Required) _____

White=Contractor Copy
Yellow=Owner Copy
April, 2007

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722

ITC #1	Chilled Water
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[illegible]



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				=	\$ 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

non-taxable

- 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

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[Self-Service](#)[\(WALTERSC\) Logoff](#)

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