Agenda Report

2725 Judge Fran Jamieson
Way
Viera, FL 32940

Brevard
COUNTY

Consent

F.21. 3/8/2022

Subject:
District 5 Purchase Card Records

Fiscal Impact:
N/A

Dept/Office:
District 5 Commission Office

Requested Action:
Acknowledge the receipt.

Summary Explanation and Background:
District 5 Commission Office purchase card transactions, reconciliation documents and itemized receipts from February 2017.

Clerk to the Board Instructions:
Include purchase card records with the minutes for the March 8, 2022 regular meeting.

BREVARD County
BOARD OF COUNTY COMMISSIONERS

FLORIDA'S SPACE COAST

Kimberly Powell, Clerk to the Board, 400 South Street • P.O. Box 999, Titusville, Florida 32781-0999

Telephone: (321) 637-2001
Fax: (321) 264-6972
Kimberly.Powell@brevardclerk.us

March 9, 2022

MEMORANDUM

TO: Frank Abbate, County Manager

RE: Item F.21., Purchase Card Records District 5

The Board of County Commissioners, in regular session on March 8, 2022, acknowledged receipt of purchase card record from District 5 Commission Office.

Your continued cooperation is greatly appreciated.

Sincerely,

BOARD OF COUNTY COMMISSIONERS
RACHEL M. SADOFF, CLERK

Kimberly Powell

Kimberly Powell, Clerk to the Board

/ns

cc: Commissioner Zonka
Finance
Budget

F.21

EHIBIT "B"
BREVARD COUNTY PURCHASING CARD MONTHLY RECONCILIATION REPORT

Cardholder's Name: Dawn Johnson **Cardholder Phone Ext:** # 26611 **Personnel #:**

Cardholder's Department: Commission D.5 **Closing Date:** Feb. 4, 2017
(enter closing date of statement)

Date Purchased or Ordered	Date Received	Vendor Name	Description of Item Purchased	Amount Billed (indicate "Q" for quoted items)	Fund (4 digits)	Cost Center (6 digits)	GL Account # (7 digits)	Internal / Work Order # (6 or 7 digits)
01/04 2017	01/05	Gannett Kentucky	Florida Today	$91.00	0001	200050		

ADD'L PAGES SUBTOTAL ~~0~~

GRAND TOTAL (ALL PAGES) $91.00 (must agree to figure below)

SUMMARY OF FUND / COST CENTERS / G.L. ACCOUNT TO BILL

FUND	COST CTR	GL ACCT	INT. ORDER	Amount
			TOTAL	

(must agree to above figure)

I (Cardholder) have complied with the Purchase Card Administrative Order (AO-41) and have Retained all required approvals for restrictive Uses and a quote log for purchases $750 and over.

Signature of Cardholder / Date

Signature of Approving Official / Date

Bank of America

Mailed 2/22/2017

DAWN JOHNSON
FL BREVARD COUNTY BOCC
XXXX-XXXX-XXXX-3312
January 05, 2017 - February 04, 2017

Purchasing Card

Cardholder Activity

Account Information

Mail Billing Inquiries to:
BANKCARD CENTER
PO BOX 982238
EL PASO, TX 79998-2238

Customer Service:
1.888.449.2273 24 Hours

TTY Hearing Impaired:
1.800.222.7365 24 Hours

Outside the U.S.:
1.509.353.6656 24 Hours

For Lost or Stolen Card:
1.888.449.2273 24 Hours

Payment Information

Statement Date	02/04/17
Credit Limit	$1
Cash Limit	$0
Days in Billing Cycle	31
Total Activity	$91.00

THIS IS NOT A BILL - DO NOT PAY

Account Summary

Credits	$0.00
Cash	$0.00
Purchases	$91.00
Other Debits	$0.00
Cash Fees	$0.00
Other Fees	$0.00
Total Activity	$91.00

Accounting Code: 0001/200050

Clerk of the Circuit Court
Brevard County Finance Department
Attn: Mark Peterson
P.O. Box 1496
Titusville, FL 32781

February 17, 2017

Dear Mr. Peterson,

Our office has received one more statement from the Visa card ending #3312 assigned to our former employee Dawn Johnson in the District 5 Commission office. After contacting Ms. Johnson, she informed us that she had placed an order for a six month newspaper subscription to Florida Today. We were unable to find a receipt in the residual bill folder and the help desk service at Gannett indicated what seemed to be the recording of an inaccurate payment type. I was able to verify through Gannett that we do indeed have digital and paper delivery assigned to our office for the next six months. A request was placed for their accounting department to send me a receipt, but I have waited over a week and a receipt from Gannett has not been forthcoming.

I sincerely apologize for any inconvenience, but we have exerted considerable due diligence to obtain a receipt in order to reconcile this billing statement. This should be the last issue that our office may have during the employee transitional period.

Thank you for your prompt assistance and please do not hesitate to call me if you have any questions.

COPY

January 2017

F.21

EHIBIT "B"

~~BREVARD~~ COUNTY PURCHASING CARD MONTHLY RECONCILIATION REPORT

PAGE 1 of 1

Example

Cardholder's Name: Dawn Johnson Cardholder Phone Ext: #26611 Personnel #:

Cardholder's Department: Commission D.5 Closing Date: Jan. 4, 2017 (enter closing date of statement)

Date Purchased or Ordered	Date Received	Vendor Name	Description of Item Purchased	Amount Billed (indicate "Q" for quoted items)	Fund (4 digits)	Cost Center (6 digits)	GL Account # (7 digits)	Internal / Work Order # (6 or 7 digits)
12/20/16	12/28/2016	Florida Laser Engraving	personnel name tags	$32.00	0001	200050		

ADD'L PAGES SUBTOTAL ~~0~~

GRAND TOTAL (ALL PAGES) $32.00 (must agree to figure below)

SUMMARY OF FUND / COST CENTERS /G.L. ACCOUNT TO BILL

FUND	COST CTR	GL ACCT	INT. ORDER

(must agree to above figure)

Amount
TOTAL

I (Cardholder) have complied with the Purchase Card Administrative Order (AO-41) and have Retained all required approvals for restrictive Uses and a quote log for purchases $750 and over.

Dawn Johnson by MG

Signature of Cardholder / Date

X [signature] 1/24/17

Signature of Approving Official / Date

CC-223 –Word Document Revised 7/30/13

Dawn is no longer employed with D.5

Bank of America

Purchasing Card

DAWN JOHNSON
FL BREVARD COUNTY BOCC
XXXX-XXXX-XXXX-3312
December 05, 2016 - January 04, 2017

Cardholder Activity

Account Information

Mail Billing Inquiries to:
BANKCARD CENTER
PO BOX 982238
EL PASO, TX 79998-2238

Customer Service:
1.888.449.2273 24 Hours

TTY Hearing Impaired:
1.800.222.7365 24 Hours

Outside the U.S.:
1.509.353.6656 24 Hours

For Lost or Stolen Card:
1.888.449.2273 24 Hours

Payment Information

Statement Date	01/04/17
Credit Limit	$2,000
Cash Limit	$0
Days in Billing Cycle	31
Total Activity	$32.00

THIS IS NOT A BILL - DO NOT PAY

Account Summary

Credits	$0.00
Cash	$0.00
Purchases	$32.00
Other Debits	$0.00
Cash Fees	$0.00
Other Fees	$0.00
Total Activity	$32.00

Accounting Code: 0001/200050

Transactions

Posting Date	*Transaction Date*	*Description*	*Reference Number*	*MCC*	*Charge*	*Credit*
12/21	12/20	FLORIDA LASER ENGRAVING MELBOURNE FL	24755426355273551642802	5999	32.00	

— Need to call and get invoice to submit

0002790 0000000 0000000 4715290013073312

Account Number: XXXX-XXXX-XXXX-3312
December 05, 2016 - January 04, 2017

Total Activity **$32.00**

Cardholder Signature Date

Manager Signature Date

BANK OF AMERICA
PO BOX 15731
WILMINGTON, DE 19886-5731

DAWN JOHNSON **N0002717
FL BREVARD COUNTY BOCC
DIST 5 COMMISSIONERS OFFICE
1515 SARNO RD BLDG B
MELBOURNE, FL 32935-5272

:549990011:0005001307331 2"

Florida Laser Engraving

410 N Harbor City Blvd
Melbourne, FL 32935

Invoice

Date	Invoice #
12/20/2016	15

PAID 12/22/2016

Bill To
Brevard County District 5

P.O. No.	Terms	Project

Quantity	Description	Rate	Amount
4	Name Badges	8.00 0.00%	32.00 0.00

	Total	$32.00

F. 21

PAGE 1 of

EXHIBIT "B"
BREVARD COUNTY PURCHASING CARD MONTHLY RECONCILIATION REPORT

Cardholder's Name: Dawn Johnson

Cardholders Phone # 321-253-6611

Cardholders Personnel #: 11

2016 DEC 19 PM 3:48

Cardholder's Department: County Commission District 5

Closing Date: ##### 12/4/16

BREVARD COUNTY FINANCE DEPT.

Date Purchased or Ordered	Date Received	Vendor Name	Description of Item Purchased	Amount Billed (Indicate "Q" for quoted items)	Fund # (4 digits)	Cost Center # (6 digits)	General Ledger Account # (7 digits)	Internal Order (6 or 7 d
12/14/2011	11/7/2016	Culligan Water	Water for Office	9.50	0001	200050	5510000	
12/15/2011	11/29/2016	PIP Printing	Banners/Magnets for Holiday Parade	315.75	0001	200050	5510000	
12/1/2011								

$0.00 ADD'L PAGES SUBTOTAL

$325.25 GRAND TOTAL (ALL PAGES)

(MUST AGREE TO FIGURE BELOW)

ENTERED JAN 04 2016

SUMMARY OF FUND / COST CENTERS / G.L. ACCOUNT TO BILL

FUND	COST CTR	G.L. ACCT.	INT. ORDER	Amount
0001	200050	5510000		325.25

I (Cardholder) have complied with the Purchase Card Administrative Order (AO-41) and have retained all required approvals for restrictive uses and a quote log for purchases $750 and over.

Dawn Johnson

Signature of Cardholder/Date

Signature of Approving Official/Date

BCC-223-Excel Document Revised 08/26/08

(must agree to above figure) GRAND TOTAL ~~$355.87~~ 325.25

EHIBIT "B"

BREVARD COUNTY PURCHASING CARD MONTHLY RECONCILIATION REPORT

Cardholder's Name: Danielle Stern Cardholder Phone Ext: #26615 Personnel #: 11006140

Cardholder's Department: Commission D.5 Closing Date: February 4, 2017 (enter closing date of statement)

Date Purchased or Ordered	Date Received	Vendor Name	Description of Item Purchased	Amount Billed (indicate "Q" for quoted items)	Fund (4 digits)	Cost Center (6 digits)	GL Account # (7 digits)	Internal / Work Order # (6 or 7 digits)
1/30 2017	1/26	Culligan Water	1 case of water	$14.25	0001	200050		
1/30 2017	1/27 2017	U.S. Postal	1 stamp roll	$49.00				
1/31 2017	2-1 2017	Brevard Federated	luncheon tickets	$40.00				

ADD'L PAGES SUBTOTAL Ø

GRAND TOTAL (ALL PAGES) $103.25 (must agree to figure below)

SUMMARY OF FUND / COST CENTERS /G.L. ACCOUNT TO BILL

FUND	COST CTR	GL ACCT	INT. ORDER	Amount
			TOTAL	

(must agree to above figure)

I (Cardholder) have complied with the Purchase Card Administrative Order (AO-41) and have Retained all required approvals for restrictive Uses and a quote log for purchases $750 and over.

Danielle Stern 2/15/17

Signature of Cardholder / Date

Signature of Approving Official / Date

Bank of America

DANIELLE L STERN
FL BREVARD COUNTY BOC
XXXX-XXXX-XXXX-**4809**
January 05, 2017 - February 04, 2017

Purchasing Card

Cardholder Activity

Account Information

Mail Billing Inquiries to:
BANKCARD CENTER
PO BOX 982238
EL PASO, TX 79998-2238

Customer Service:
1.888.449.2273 24 Hours

TTY Hearing Impaired:
1.800.222.7365 24 Hours

Outside the U.S.:
1.509.353.6656 24 Hours

For Lost or Stolen Card:
1.888.449.2273 24 Hours

Payment Information

Statement Date	02/04/17
Credit Limit	$2,000
Cash Limit	$0
Days in Billing Cycle	31
Total Activity	$103.25

THIS IS NOT A BILL - DO NOT PAY

Account Summary

Credits	$0.00
Cash	$0.00
Purchases	$103.25
Other Debits	$0.00
Cash Fees	**$0.00**
Other Fees	$0.00
Total Activity	$103.25

Accounting Code: 0001/200050

Transactions

Posting Date	*Transaction Date*	*Description*		*Reference Number*	*MCC*	*Charge*	*Credit*
01/30	01/26	CULLIGAN DAYTON	386-2745036 FL	24071057027627144029447	5074	14.25	
01/30	01/27	USPS PO 1157930462	SATELLITE BEAFL	24445007028000771565864	9402	49.00	
02/01	01/31	PAYPAL *BREVARDFEDE	402-935-7733 CA	24492157031894211435369	8651	40.00	

0000000 0000000 0000000 4715290017764809

Account Number: XXXX-XXXX-XXXX-**4809**
January 05, 2017 - February 04, 2017

Total Activity **$103.25**

BANK OF AMERICA
PO BOX 15731
WILMINGTON, DE 19886-5731

Cardholder Signature Date

DANIELLE L STERN **N0001244
FL BREVARD COUNTY BOC
DISTRICT 5 COMMISSION OFFICE
1515 SARNO RD BLDG B
MELBOURNE, FL 32935-5272

Manager Signature Date

⑆5499900⑆⑆000500177648809⑈

of Melbourne

771 NORTH DRIVE
MELBOURNE, FL 32934
(321) 255-5562 (321) 636-1344
bmorissette@culliganmelbourne.com
www.culligancentralflorida.com

☐ IN AUTOMATIC BILL PAYMENT

CARD NUMBER	V. CODE
SIGNATURE	EXP. DATE

DATE	PAY THIS AMOUNT	ACCOUNT NUMBER
12/28/2016	$14.25	268847

INVOICE NUMBER: 74786 AMOUNT PAID $

ADDRESSEE:
DISTRICT 5 COMMISSIONER
1515 SARNO RD BLDG B
MELBOURNE, FL 32935-5272

REMIT PAYMENT TO:
CULLIGAN WATER PRODUCTS
771 NORTH DR
MELBOURNE, FL 32934-9282

INVOICE
RETURN THIS TOP PORTION WITH YOUR PAYMENT

You paid **$40.00 USD**

to Brevard Federated Republican Women

Details

Danielle - postage

ayPal receipts in Messenger

```
=======================================
          SATELLITE BEACH
      1071 S PATRICK DR STE 101
          SATELLITE BEACH
               FL
            32937-3972
            1157930462
01/27/2017    (800)275-8777    1:08 PM
=======================================
=======================================
Product               Sale      Final
Description           Qty       Price
---------------------------------------
US Flag Coil/1         1        $49.00
00
    (Unit Price:$49.00)
---------------------------------------
Total                           $49.00
---------------------------------------
Credit Card Remitd              $49.00
    (Card Name:VISA)
    (Account #:XXXXXXXXXXXX4809)
    (Approval #:008518)
    (Transaction #:001)

***************************************
BRIGHTEN SOMEONE'S MAILBOX. Greeting
cards available for purchase at select
Post Offices.
***************************************

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

9 $40.00 USD

will appear on your statement as PAYPAL *BREVARDFEDE

ɔ

ern

ɔ Road Bldg B, Melbourne, FL 32935

tes

details

mber: 5109766537434826

confirmation to:

:ern@brevardfl.gov

details

.oonboarding?country.x=US&exp=guest&flow=1-P&lo... 1/31/2017

EHIBIT "B"

PAGE 1 of 1

BREVARD COUNTY PURCHASING CARD MONTHLY RECONCILIATION REPORT

Cardholder's Name: Danielle Stern Cardholder Phone Ext: #253-6611 Personnel #: 11006140

Cardholder's Department: Commission D.5 Closing Date: March 4, 2017 (enter closing date of statement)

Date Purchased or Ordered	Date Received	Vendor Name	Description of Item Purchased	Amount Billed (indicate "Q" for quoted items)	Fund (4 digits)	Cost Center (6 digits)	GL Account # (7 digits)	Internal / Work Order # (6 or 7 digits)
2/18 2017	2/20	Verizon wireless	D.5 cell phones (2)	174.86	0001	200090	5410100	
2/17 2017	2/20	Culligan water service	water: bottled	9.50	|	200050	5950400	

ADD'L PAGES SUBTOTAL

GRAND TOTAL (ALL PAGES) $184.18 (must agree to figure below)

SUMMARY OF FUND / COST CENTERS /G.L. ACCOUNT TO BILL

FUND	COST CTR	GL ACCT	INT. ORDER	Amount

(must agree to above figure) TOTAL

I (Cardholder) have complied with the Purchase Card Administrative Order (AO-41) and have Retained all required approvals for restrictive Uses and a quote log for purchases $750 and over.

3/24/17

Signature of Cardholder / Date

3/24/17

Signature of Approving Official / Date

BCC-223 –Word Document Revised 7/30/13

mailed 3/27

Bank of America

DANIELLE L STERN
FL BREVARD COUNTY BOC
XXXX-XXXX-XXXX-**4809**
February 05, 2017 - March 04, 2017

Purchasing Card

Cardholder Activity

Account Information

Mail Billing Inquiries to:
BANKCARD CENTER
PO BOX 982238
EL PASO, TX 79998-2238

Customer Service:
1.888.449.2273 24 Hours

TTY Hearing Impaired:
1.800.222.7365 24 Hours

Outside the U.S.:
1.509.353.6656 24 Hours

For Lost or Stolen Card:
1.888.449.2273 24 Hours

Payment Information

Statement Date	03/04/17
Credit Limit	$2,000
Cash Limit	$0
Days in Billing Cycle	28
Total Activity	$184.18

THIS IS NOT A BILL - DO NOT PAY

Account Summary

Credits	$0.00
Cash	$0.00
Purchases	$184.18
Other Debits	$0.00
Cash Fees	$0.00
Other Fees	$0.00
Total Activity	$184.18

Accounting Code: 0001/200050

Transactions

Posting Date	*Transaction Date*	*Description*		*Reference Number*	*MCC*	*Charge*	*Credit*
02/20	02/18	VZWRLSS*IVR VB	800-922-0204 FL	24692167049000311225588	4814	174.68	
02/20	02/17	CULLIGAN DAYTON	386-2745036 FL	24071057050627125216252	5074	9.50	

0000000 0000000 0000000 4715290017764809

Account Number: XXXX-XXXX-XXXX-**4809**
February 05, 2017 - March 04, 2017

Total Activity **$184.18**

Danielle Stern 3/20/17
Cardholder Signature Date

3/24/17
Manager Signature Date

BANK OF AMERICA
PO BOX 15731
WILMINGTON, DE 19886-5731

DANIELLE L STERN **N0001359
FL BREVARD COUNTY BOC
DISTRICT 5 COMMISSION OFFICE
1515 SARNO RD BLDG B
MELBOURNE, FL 32935-5272

:549990011:00050017764809

Culligan of Melbourne

771 NORTH DRIVE
MELBOURNE, FL 32934
(321) 255-5562 (321) 636-1344
bmorissette@culliganmelbourne.com
www.culligancentralflorida.com

IF PAYING BY CREDIT CARD, PLEASE CHECK CORRECT CARD AND FILL OUT BELOW

☐ PLEASE CHECK BOX TO ENROLL IN AUTOMATIC BILL PAYMENT

CARD NUMBER	V. CODE
SIGNATURE	EXP. DATE

DATE	PAY THIS AMOUNT	ACCOUNT NUMBER
02/23/2017	$9.50	268847

PAY BY DATE: MAR 15 AMOUNT PAID $

ADDRESSEE:

069100
DISTRICT 5 COMMISSIONER
1515 SARNO RD BLDG B
MELBOURNE, FL 32935-5272

REMIT PAYMENT TO:

CULLIGAN WATER PRODUCTS
771 NORTH DR
MELBOURNE, FL 32934-9282

BALANCE FORWARD
RETURN THIS TOP PORTION WITH YOUR PAYMENT

BRANCH ID: ME-01
CUSTOMER: DISTRICT 5 COMMISSIONER

PREVIOUS BALANCE: $23.75

DATE	QUANTITY	DESCRIPTION	REF	AMOUNT	BALANCE
01/31/2017	-1.00	Payment	EFT	-14.25	9.50
02/07/2017	2.00	1/2 LITER (CASE)	800607210	9.50	19.00
02/07/2017	1.00	SERVI	800607210	0.00	19.00
02/23/2017	-1.00	Payme	EFT	-9.50	9.50

CULLIGAN WATER PRODUCTS
771 NORTH DRIVE
MELBOURNE, FL 32934
(321)255-5562 / (321)636-1344

Ticket# 800607210
2/7/2017 1:40 PM
Driver: Rte-Day:
KEVIN HEILIG 07

Sold To: 268847
DISTRICT 5 COMMISSIONER
BLDG B
1515 SARNO ROAD
MELBOURNE, FL. 32935
P/O # 4500083054

Qty	Price	Amount
1/2 LITER (CASE)		
2	$4.75	$9.50
SERVICE FEE		
1	$0.00	$0.00

Subtotal Sales	$9.50
Tax	$0.00
TOTAL	$9.50
Prev Acct Bal	$9.50
Account Balance	$19.00

Next Delivery: 03/07/2017

Confirm # 069903

aid

Prefer payment by 15th

Pay on line at www.culligancent ... l our office at
321-255-5562 if you need any as

ACCOUNTS ARE SUBJECT TO A LATE PAYMENT FINANCE CHAR

FINANCE CHARGE SCHEDULE

OVER	PERIODIC RATE	ANNUAL RATE	PLEASE PAY BALANCE
$ 3	1.50 %	18.00 %	
TO 3	0.00 %	0.00 %	MIN CHARGE

0-30	31-60	61-90	over 90
9.50	0.00	0.00	0.00

Balance Due $9.50

4/17 05/02/17 05/30/17

T FORGET TO
!!!!
PAY YOUR BILL.
ON LINE.

CULLIGAN WATER PRODUCTS
771 NORTH DRIVE
MELBOURNE, FL 32934
(321) 255-5562 (321) 636-1344

SERVICE ADDRESS:
DISTRICT 5 COMMISSIONER
BLDG B
1515 SARNO ROAD
MELBOURNE FL 32935

R	NAME
	DISTRICT 5 COMMISSIONER

verizon

PO BOX 4001
ACWORTH, GA 30101

Manage Your Account	Account Number	Date Due
www.vzw.com/mybusinessaccount	742120929-00001	Past Due

Change your address at
http://sso.verizonenterprise.com

Invoice Number	9779259461

Quick Bill Summary

Dec 24 – Jan 23

0014410 02 AB 0.400 **AUTO T9 0 2193 32935-527274 -C07-P14424-I1

COUNTY OF BREVARD
1515 SARNO ROAD, STE B
MELBOURNE, FL 32935-5272

Previous Balance *(see back for details)*	$374.68
No Payment Received	$.00
Adjustments	-$200.00
Balance Forward Due Immediately	**$174.68**
Monthly Charges	$107.18
Usage and Purchase Charges	
Voice	$.00
Messaging	$.00
Data	$.00
Surcharges and Other Charges & Credits	$2.30
Taxes, Governmental Surcharges & Fees	$.00
Total Current Charges Due by February 18, 2017	**$109.48**

Total Amount Due **$284.16**

800-230-9800

Our records indicate your account is past due. Please send payment now to avoid service disruption.

Pay from phone	Pay on the Web	Questions:
#PMT (#768)	At vzw.com/mybusinessaccount	1.800.922.0204 or *611 from your phone

verizon

COUNTY OF BREVARD
1515 SARNO ROAD, STE B
MELBOURNE, FL 32935

Bill Date January 23, 2017
Account Number 742120929-00001
Invoice Number 9779259461

Total Amount Due

Make check payable to Verizon Wireless.
Please return this remit slip with payment.

$284.16

$ ___ . __

PO BOX 660108
DALLAS, TX 75266-0108

977925946101074212092900001000000109480000002841б3

EHIBIT "B"

PAGE 1 of 1

BREVARD COUNTY PURCHASING CARD MONTHLY RECONCILIATION REPORT

Cardholder's Name: Danielle Stern Cardholder Phone Ext: #253-6611 Personnel #: 11006140

Cardholder's Department: Commission D.5 Closing Date: April 4, 2017 (enter closing date of statement)

Date Purchased or Ordered	Date Received	Vendor Name	Description of Item Purchased	Amount Billed (indicate "Q" for quoted items)	Fund (4 digits)	Cost Center (6 digits)	GL Account # (7 digits)	Internal / Work Order # (6 or 7 digits)
3/20 2017	3/17	Wal-Mart	office supplies	$ 47.23	0001	200050	5510000	
3/21	3/20	Culligan Water	bottled water	9.50		200050	5950400	
4/3	4/1	Verizon Wireless	D.5 cell phones	328.69		200090	5410100	

ADD'L PAGES SUBTOTAL 0

GRAND TOTAL (ALL PAGES) $385.42 (must agree to figure below)

SUMMARY OF FUND / COST CENTERS / G.L. ACCOUNT TO BILL

FUND	COST CTR	GL ACCT	INT. ORDER	Amount
	200050	5510000		$ 47.23
0001	200050	5950400		9.50
	200090	5410100		328.69

(must agree to above figure) TOTAL $385.42

I (Cardholder) have complied with the Purchase Card Administrative Order (AO-41) and have Retained all required approvals for restrictive Uses and a quote log for purchases $750 and over.

[signature] 4/11/2017

Signature of Cardholder / Date

[signature] 4/11/2017

Signature of Approving Official / Date

BCC-223 –Word Document Revised 7/30/13

Bank of America

Purchasing Card

DANIELLE L STERN
FL BREVARD COUNTY BOC
XXXX-XXXX-XXXX-**4809**
March 05, 2017 - April 04, 2017

Cardholder Activity

Account Information

Mail Billing Inquiries to:
BANKCARD CENTER
PO BOX 982238
EL PASO, TX 79998-2238

Customer Service:
1.888.449.2273 24 Hours

TTY Hearing Impaired:
1.800.222.7365 24 Hours

Outside the U.S.:
1.509.353.6656 24 Hours

For Lost or Stolen Card:
1.888.449.2273 24 Hours

Payment Information

Statement Date	04/04/17
Credit Limit	$2,000
Cash Limit	$0
Days in Billing Cycle	31
Total Activity	$385.42

THIS IS NOT A BILL - DO NOT PAY

Account Summary

Credits	$0.00
Cash	$0.00
Purchases	$385.42
Other Debits	$0.00
Cash Fees	$0.00
Other Fees	$0.00
Total Activity	$385.42

Accounting Code: 0001/200050

Transactions

Posting Date	*Transaction Date*	*Description*		*Reference Number*	*MCC*	*Charge*	*Credit*
03/20	03/17	WAL-MART #956	INDN HBR BCH FL	24445007077400143253993	5310	47.23	
03/21	03/20	CULLIGAN WATER PROD 2	386-274-5036 FL	24493987079207364200047	5099	9.50	
04/03	04/01	VZWRLSS*IVR VB	800-922-0204 FL	24692167091000741015168	4814	328.69	

0000000 0000000 0000000 4715290017764809

Account Number: XXXX-XXXX-XXXX-**4809**
March 05, 2017 - April 04, 2017

Total Activity **$385.42**

BANK OF AMERICA
PO BOX 15731
WILMINGTON, DE 19886-5731

Cardholder Signature Date

DANIELLE L STERN **N0002218
FL BREVARD COUNTY BOC
DISTRICT 5 COMMISSION OFFICE
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

Manager Signature Date

⑆549990011⑆000500177648O9⑈

verizon✓

PO BOX 4001
ACWORTH GA 30101

Manage Your Account	Account Number	Date Due
www.vzw.com/mybusinessaccount	742120929-00001	Past Due

Change your address at
http://sso.verizonenterprise.com

Invoice Number	9782735959

Walmart
Save money. Live better.

(321) 777 - 5504
MANAGER WALLY ABBOUD
1001 E EAU GALLIE BLVD
INDIAN HARBOUR BEACH FL 32937
ST# 00956 OP# 000112 TE# 05 TR# 07516

WASTEBAGS	007874204835	12.52	0
DUSTERDUSTPN	007874210769	3.98	0
DISH SOAP	007874218697	1.97	0
GV GLAS CLNR	007874204960	1.98	0
PAPER TOWELS	007874204019	8.42	0
FV CAPPUCCIN	007089302862 F	5.94	0
SPONGE	005320007288	2.98	0
BATTERIES	001280051772	4.97	0
FACE TISSUE	003700035295	4.47	0
	SUBTOTAL	47.23	
	TOTAL	47.23	
	VISA TEND	47.23	

VISA CREDIT **** **** **** 4809 I 1
APPROVAL # 067160
REF # 1042000314
TRANS ID - 467076637626925
VALIDATION - CHVF
PAYMENT SERVICE - E

AID A0000000031010
TC 2F13FE5D12AB1F17
TERMINAL # 283498906
*Pin Verified

03/17/17 13:42:50
CHANGE DUE 0.00
ITEMS SOLD 9
TC# 7753 0089 2827 8391 9284

03/17/17 13:42:59
CUSTOMER COPY

Store receipts on your phone. Walmart Pay.

Quick Bill Summary

3-11

Feb 24 – Mar 23

Previous Balance *(see back for details)*	$218.96
No Payment Received	$.00
Balance Forward Due Immediately	**$218.96**
Monthly Charges	$107.18
Usage and Purchase Charges	
Voice	$.00
Messaging	$.00
Data	$.00
International	$.25
Surcharges and Other Charges & Credits	$2.30
Taxes, Governmental Surcharges & Fees	$.00
Total Current Charges Due by April 18, 2017	**$109.73**

Total Amount Due **$328.69**

+ Culligan bill in folder

nt is past due. Please send payment now to avoid service disruption.

Questions:
1.800.922.0204 or *611 from your phone

Bill Date March 23, 2017
Account Number 742120929-00001
Invoice Number 9782735959

Total Amount Due

Make check payable to Verizon Wireless.
Please return this remit slip with payment.

$328.69

$ 328.69

COUNTY OF BREVARD
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

Confirmation #
032529

PO BOX 660108
DALLAS, TX 75266-0108

9782735959010742120929000010000001097300000328693

EHIBIT "B"
BREVARD COUNTY PURCHASING CARD MONTHLY RECONCILIATION REPORT

Cardholder's Name: Danielle Stern **Cardholder Phone Ext:** 253-6611 **Personnel #:** 11006140

Cardholder's Department: Comm D.5 **Closing Date:** June 4, 2017 (enter closing date of statement)

Date Purchased or Ordered	Date Received	Vendor Name	Description of Item Purchased	Amount Billed (indicate "Q" for quoted items)	Fund (4 digits)	Cost Center (6 digits)	GL Account # (7 digits)	Internal / Work Order # (6 or 7 digits)
5/18	4/12	Culligan	3 cases of water	$23.75	0001	200050	5950400	

ADD'L PAGES SUBTOTAL 0

GRAND TOTAL (ALL PAGES) $23.75 (must agree to figure below)

SUMMARY OF FUND / COST CENTERS /G.L. ACCOUNT TO BILL

FUND	COST CTR	GL ACCT	INT. ORDER	Amount
0001	200050	5950400		$23.75

(must agree to above figure) **TOTAL** $23.75

I (Cardholder) have complied with the Purchase Card Administrative Order (AO-41) and have Retained all required approvals for restrictive Uses and a quote log for purchases $750 and over.

6/14/17

Signature of Cardholder / Date

6/14/17

Signature of Approving Official / Date

Bank of America

Purchasing Card

DANIELLE L STERN
FL BREVARD COUNTY BOC
XXXX-XXXX-XXXX-4809
May 05, 2017 - June 04, 2017

Cardholder Activity

Account Information

Mail Billing Inquiries to:
BANKCARD CENTER
PO BOX 982238
EL PASO, TX 79998-2238

Customer Service:
1.888.449.2273 24 Hours

TTY Hearing Impaired:
1.800.222.7365 24 Hours

Outside the U.S.:
1.509.353.6656 24 Hours

For Lost or Stolen Card:
1.888.449.2273 24 Hours

Payment Information

Statement Date	06/04/17
Credit Limit	$2,000
Cash Limit	$0
Days in Billing Cycle	31
Total Activity	$23.75

THIS IS NOT A BILL - DO NOT PAY

Account Summary

Credits	$0.00
Cash	$0.00
Purchases	$23.75
Other Debits	$0.00
Cash Fees	$0.00
Other Fees	$0.00
Total Activity	$23.75

Accounting Code: 0001/200050

Transactions

Posting Date	Transaction Date	Description		Reference Numb	Credit
05/18	05/17	CULLIGAN WATER PROD 2	386-274-5036 FL	2449398713720	$23.75

0000000 0000000 0000000 4715290017764809

BANK OF AMERICA
PO BOX 15731
WILMINGTON, DE 19886-5731

DANIELLE L STERN **N0001550
FL BREVARD COUNTY BOC
DISTRICT 5 COMMISSION OFFICE
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

⑆549990011⑆000500 1

CULLIGAN WATER PRODUCTS
771 NORTH DRIVE
MELBOURNE, FL 32934
(321)255-5562 / (321)636-1344

Ticket# 800612116
4/12/2017 10:53 AM
Driver: Rte-Day:
KEVIN HEILIG 13

Sold To: 268847
DISTRICT 5 COMMISSIONER
STE 175
490 CENTRE LAKE DRIVE NE
PALM BAY, FL. 32907
P/O # 4500083054

Qty	Price	Amount
1/2 LITER (CASE)		
3	$4.75	$14.25
SERVICE FEE		
1	$0.00	$0.00

Subtotal Sales	$14.25
Tax	$0.00
TOTAL	$14.25
Prev Acct Bal	$9.50
Account Balance	$23.75

Next Delivery: 05/10/2017

Mailed July 12

PAGE 1 of 1 643

EHIBIT "B"

BREVARD COUNTY PURCHASING CARD MONTHLY RECONCILIATION REPORT

Cardholder's Name: Danielle Stern **Cardholder Phone Ext:** 253 - 6611 **Personnel #:** 11006140

Cardholder's Department: Commission D. 5 **Closing Date:** July 4, 2017 (enter closing date of statement)

Date Purchased or Ordered	Date Received	Vendor Name	Description of Item Purchased	Amount Billed (indicate "Q" for quoted items)	Fund (4 digits)	Cost Center (6 digits)	GL Account # (7 digits)	Internal / Work Order # (6 or 7 digits)
6/1	6/14	PIP Printing	Brevard County Commission imprinted stationary	$296.57	0001	200050	5510000	

ADD'L PAGES SUBTOTAL ~~$~~ 0

GRAND TOTAL (ALL PAGES) $296.57 (must agree to figure below)

SUMMARY OF FUND / COST CENTERS /G.L. ACCOUNT TO BILL

FUND	COST CTR	GL ACCT	INT. ORDER	Amount
0001	200050			$296.57

(must agree to above figure) **TOTAL** $296.57

I (Cardholder) have complied with the Purchase Card Administrative Order (AO-41) and have Retained all required approvals for restrictive Uses and a quote log for purchases $750 and over.

Danielle Stern 7/11/2017
Signature of Cardholder / Date

7/11/2017
Signature of Approving Official / Date

BCC-223 –Word Document Revised 7/30/13

Bank of America

DANIELLE L STERN
FL BREVARD COUNTY BOC
XXXX-XXXX-XXXX-**4809**
June 05, 2017 - July 04, 2017

Purchasing Card

Cardholder Activity

Account Information

Mail Billing Inquiries to:
BANKCARD CENTER
PO BOX 982238
EL PASO, TX 79998-2238

Customer Service:
1.888.449.2273 24 Hours

TTY Hearing Impaired:
1.800.222.7365 24 Hours

Outside the U.S.:
1.509.353.6656 24 Hours

For Lost or Stolen Card:
1.888.449.2273 24 Hours

Payment Information

Statement Date	07/04/17
Credit Limit	$2,000
Cash Limit	$0
Days in Billing Cycle	30
Total Activity	$296.57

THIS IS NOT A BILL - DO NOT PAY

Account Summary

Credits	$0.00
Cash	$0.00
Purchases	$296.57
Other Debits	$0.00
Cash Fees	$0.00
Other Fees	$0.00
Total Activity	$296.57

Accounting Code: 0001/200050

Transactions

Posting Date	*Transaction Date*	*Description*			*Reference Number*	*MCC*	*Charge*	*Credit*
06/15	06/14	PIP PRINTING	PALM BAY	FL	24122597165030013805995	2741	296.57	

0000000 0000000 0000000 4715290017764809

Account Number: XXXX-XXXX-XXXX-**4809**
June 05, 2017 - July 04, 2017

Total Activity **$296.57**

BANK OF AMERICA
PO BOX 15731
WILMINGTON, DE 19886-5731

Cardholder Signature Date

DANIELLE L STERN **N0001387
FL BREVARD COUNTY BOC
DISTRICT 5 COMMISSION OFFICE
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

Manager Signature Date

⑆5499001 1⑆000500177648O9⑈

PIP PRINTING
1480 PALM BAY RD
PALM BAY, FL 32905
3219514354

)6/14/2017	08:58:20
1erchant ID:	***********8360
)evice ID:	0001
'erminal ID:	PPX1.

Credit Sale:

Transaction #:	1
Card Type:	Visa
Account:	************4809
Entry:	Chip
Cust. Code:	6659

Amount: $296.57

STAN:	001
Auth. Code:	025365
Response:	AUTH/TKT
ECI Code:	E
TRANS ID:	087165472257651

Mode:	Issuer
AID:	A0000000031010
TVR:	0000108000
IAD:	06010A03642002
TSI:	F800
ARC:	00

PIN Verified

MERCHANT COPY

THANK YOU!

PIP MARKETING SIGNS PRINT

1480 Palm Bay Road N.E.
Palm Bay, Florida 32905
Ph. 321.951.4354 • fax 321.724.5307
Email: info@pipcandoit.com
web: www.pipcandoit.com

INVOICE 79178

5/4/2017

) OF

8.5 x 5.5 WHITE 80# COUGAR COVER, copied on 1 side	124.89
490 CENTRE LAKE DRIVE NE, SUITE 175 PALM BAY FLORIDA 32907, 4.375 x 5.75	152.93
IVELOPE, printed 1 color front in BLACK ink	
;ES	18.75

	296.57
Sales Tax	
Shipping	
TOTAL	296.57

Received By ______________________ Date ______________

Special Instructions

Balance Paid $ ________

❒ Cash

❒ Check # ________

❒ Credit Card

Date ______________

By ______________

Mailed 8/29

EHIBIT "B"

BREVARD COUNTY PURCHASING CARD MONTHLY RECONCILIATION REPORT

Cardholder's Name: Danielle Stern Cardholder Phone Ext: 321) 253-6611 Personnel #: 11006140

Cardholder's Department: Commission D.5 Closing Date: August 4, 2017 (enter closing date of statement)

Date Purchased or Ordered	Date Received	Vendor Name	Description of Item Purchased	Amount Billed (indicate "Q" for quoted items)	Fund (4 digits)	Cost Center (6 digits)	GL Account # (7 digits)	Internal / Work Order # (6 or 7 digits)
7/12	7/13	Culligan Water	water: bottled	28.50	0001	200050	~~5950400~~	
7/14	7/13	Verizon	D.5 cell phones (2)	328.68		200090	5410100	
7/24	7/21	Brevard Cultural Alliance	BCA event	35.00		200050	5410000	

ADD'L PAGES SUBTOTAL 0

GRAND TOTAL (ALL PAGES) $392.18 (must agree to figure below)

SUMMARY OF FUND / COST CENTERS /G.L. ACCOUNT TO BILL

FUND	COST CTR	GL ACCT	INT. ORDER	Amount
0001	200050	5950400		$ 28.50
	200090	5410100		328.68
	200050	5410000		35.00

(must agree to above figure) TOTAL $392.18

I (Cardholder) have complied with the Purchase Card Administrative Order (AO-41) and have Retained all required approvals for restrictive Uses and a quote log for purchases $750 and over.

8/28/2017

Signature of Cardholder / Date

8/28/2017

Signature of Approving Official / Date

Bank of America

Purchasing Card

DANIELLE L STERN
FL BREVARD COUNTY BOC
XXXX-XXXX-XXXX-**4809**
July 05, 2017 - August 04, 2017

Cardholder Activity

Account Information

Mail Billing Inquiries to:
BANKCARD CENTER
PO BOX 982238
EL PASO, TX 79998-2238

Customer Service:
1.888.449.2273 24 Hours

TTY Hearing Impaired:
1.800.222.7365 24 Hours

Outside the U.S.:
1.509.353.6656 24 Hours

For Lost or Stolen Card:
1.888.449.2273 24 Hours

Payment Information

Statement Date	08/04/17
Credit Limit	$2,000
Cash Limit	$0
Days in Billing Cycle	31
Total Activity	$392.18

THIS IS NOT A BILL - DO NOT PAY

Account Summary

Credits	$0.00
Cash	$0.00
Purchases	$392.18
Other Debits	$0.00
Cash Fees	$0.00
Other Fees	$0.00
Total Activity	$392.18

Accounting Code: 0001/200050

Transactions

Posting Date	*Transaction Date*	*Description*	*Reference Number*	*MCC*	*Charge*	*Credit*
07/13	07/12	CULLIGAN WATER PROD 2 386-274-5036 FL	24493987193207364200089	5099	28.50	
07/14	07/13	VZWRLSS*IVR VB 800-922-0204 FL	24692167194100767296175	4814	328.68	
07/24	07/21	BREVARD CULTURAL ALLIANCE321-690-6817 FL	24828247202027015353804	5971	35.00	

Plus Verizon bill w/ confirm. code

0000000 0000000 0000000 47152900177764809

Account Number: XXXX-XXXX-XXXX-**4809**
July 05, 2017 - August 04, 2017

BANK OF AMERICA
PO BOX 15731
WILMINGTON, DE 19886-5731

DANIELLE L STERN **N0001314
FL BREVARD COUNTY BOC
DISTRICT 5 COMMISSION OFFICE
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

Total Activity **$392.18**

8/28/2017
Cardholder Signature Date

8/28/2017
Manager Signature Date

⑆5499900 11⑆000500 17764809⑈

Stern, Danielle

From: Brevard Cultural Alliance <kathy.engerran@artsbrevard.org>
Sent: Friday, July 21, 2017 12:22 PM
To: Stern, Danielle
Cc: Brezina, Lynne; Martin, Sammie; Sanz-Garcia, Sandra
Subject: Cultural Summit Registration Confirmation from Brevard Cu

CULLIGAN WATER PRODUCTS
771 NORTH DRIVE
MELBOURNE, FL 32934
(321)255-5562 / (321)636-1344

Ticket# 000616496
6/7/2017 11:12 AM
Driver: Rte-Day:
KEVIN HEILIG 13

Sold To: 268847
DISTRICT 5 COMMISSIONER
STE 175
490 CENTRL LAKE DRIVE NE
PALM BAY, FL. 32907
P/O # 4500083054

	Qty	Price	Amount
1/2 LITER (CASE)	3	$4.75	$14.25
SERVICE FEE	1	$0.00	$0.00

Subtotal Sales	$14.25
Tax	$0.00
TOTAL	$14.25
Prev Acct Bal	$14.25
Account Balance	$28.50

Next Delivery: 07/05/2017

R
Registration

Thanks for your registration, Danielle Stern! We have successfully rec registration.

Registrant Information:

E-mail Address: danielle.stern@brevardfl.gov

Billing Address:

,

Registration Grand Total: $35.00

Registration Summary:

Registration #: 343
Event Name: BCA Cultural Summit 2017
Summary: Join us for a day of workshops and networking!
Time: 07/25/2017 08:30 AM - 05:00 PM ET
Location: Kennedy Space Center Visitor Complex
Address: SR405
City: Titusville
State: FL
Zip: 32899
Country: United States

Attendee 1

Name: Danielle Stern
Email: danielle.stern@brevardfl.gov

Luncheon Only: Keynote address by Paula Wallace, Savannah College of Art and Design: Luncheon Only
Time: 07/25/2017 12:15 AM - 01:45 PM
Location: Kennedy Space Center Visitor Complex

Total for this Registration: $35.00

Payments

Amount: $35.00

Plus online event invite)

Mailed 9/22

X. 27469 PAGE 1 of 1

EHIBIT "B"

BREVARD COUNTY PURCHASING CARD MONTHLY RECONCILIATION REPORT

Cardholder's Name: Danielle Stern Cardholder Phone Ext: 321 253-6611 Personnel #: 11006140

Cardholder's Department: Commission D.5 Closing Date: September 4, 2017 (enter closing date of statement)

Date Purchased or Ordered	Date Received	Vendor Name	Description of Item Purchased	Amount Billed (indicate "Q" for quoted items)	Fund (4 digits)	Cost Center (6 digits)	GL Account # (7 digits)	Internal / Work Order # (6 or 7 digits)
8/07	8/08	Culligan Water	water: bottled	$9.50	0001	200050	5950400	
8/08	8/09	Verizon Wireless	D.5 cell phones	109.60		200090	5410100	
8/08	8/09	US Postal Service	postage	49.00		200050	5420200	

ADD'L PAGES SUBTOTAL 0

GRAND TOTAL (ALL PAGES) $168.10 (must agree to figure below)

SUMMARY OF FUND / COST CENTERS /G.L. ACCOUNT TO BILL

FUND	COST CTR	GL ACCT	INT. ORDER	Amount
0001	200050	5950400		$9.50
	200090	5410100		109.60
	200050	5420200		49.00

(must agree to above figure) TOTAL $168.10

I (Cardholder) have complied with the Purchase Card Administrative Order (AO-41) and have Retained all required approvals for restrictive Uses and a quote log for purchases $750 and over.

[signature] 9/21/17

Signature of Cardholder / Date

[signature] 9/21/17

Signature of Approving Official / Date

BCC-223 –Word Document Revised 7/30/13

Bank of America

DANIELLE L STERN
FL BREVARD COUNTY BOC
XXXX-XXXX-XXXX-**4809**
August 05, 2017 - September 04, 2017

Purchasing Card

Cardholder Activity

Account Information

Mail Billing Inquiries to:
BANKCARD CENTER
PO BOX 982238
EL PASO, TX 79998-2238

Customer Service:
1.888.449.2273 24 Hours

TTY Hearing Impaired:
1.800.222.7365 24 Hours

Outside the U.S.:
1.509.353.6656 24 Hours

For Lost or Stolen Card:
1.888.449.2273 24 Hours

Payment Information

Statement Date	09/04/17
Credit Limit	$2,000
Cash Limit	$0
Days in Billing Cycle	31
Total Activity	$168.10

THIS IS NOT A BILL - DO NOT PAY

Account Summary

Credits	$0.00
Cash	$0.00
Purchases	$168.10
Other Debits	$0.00
Cash Fees	$0.00
Other Fees	$0.00
Total Activity	$168.10

Accounting Code: 0001/200050

Transactions

Posting Date	*Transaction Date*	*Description*	*Reference Number*	*MCC*	*Charge*	*Credit*
08/08	08/07	CULLIGAN WATER PROD 2 386-274-5036 FL	24493987219207364000059	5099	9.50	
08/09	08/08	VZWRLSS*IVR VB 800-922-0204 FL	24692167220100396672612	4814	109.60	
08/09	08/08	USPS PO 1157951479 MELBOURNE FL	24445007221000910228551	9402	49.00	

0000000 0000000 0000000 4715290017764809

Account Number: XXXX-XXXX-XXXX-**4809**
August 05, 2017 - September 04, 2017

Total Activity **$168.10**

BANK OF AMERICA
PO BOX 15731
WILMINGTON, DE 19886-5731

Cardholder Signature Date

Manager Signature Date

DANIELLE L STERN **N0001677
FL BREVARD COUNTY BOC
DISTRICT 5 COMMISSION OFFICE
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

⑆5499900114⑆0005001776480 9⑈

verizon

PO BOX 4001
ACWORTH, GA 30101

Manage Your Account	Account Number	Date Due
www.vzw.com/mybusinessaccount	742120929-00001	08/18/17

Change your address at
http://sso.verizonenterprise.com

Invoice Number	9789842992

0013915 02 AB 0.400 **AUTO T2 0 3093 32907-117725 -C07-P13928-I1

COUNTY OF BREVARD
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

Quick Bill Summary

Jun 24 – Jul 23

Previous Balance *(see back for details)*	$328.68
Payment – Thank You	–$328.68
Balance Forward	**$.00**
Monthly Charges	$107.18
Usage and Purchase Charges	
Voice	$.00
Messaging	$.00
Data	$.00
Surcharges and Other Charges & Credits	$2.42
Taxes, Governmental Surcharges & Fees	$.00
Total Current Charges	**$109.60**

Total Charges Due by August 18, 2017 **$109.60**

Pay from phone	Pay on the Web	Questions:
#PMT (#768)	At vzw.com/mybusinessaccount	1.800.922.0204 or *611 from your phone

verizon

Bill Date July 23, 2017
Account Number 742120929-00001
Invoice Number 9789842992

COUNTY OF BREVARD
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

Total Amount Due by August 18, 2017

Make check payable to Verizon Wireless.
Please return this remit slip with payment.

$109.60

$109.60

Paid 8/7
confirm #
71359

PO BOX 660108
DALLAS, TX 75266-0108

9789842992010742120929000010000001096000000010960З

Mailed 10/17 652

PAGE 1 of 1

EHIBIT "B"
BREVARD COUNTY PURCHASING CARD MONTHLY RECONCILIATION REPORT

Cardholder's Name: Danielle Stern **Cardholder Phone Ext:** #26611 **Personnel #:** 11005833

Cardholder's Department: Commission D.5 **Closing Date:** October 4, 2017
(enter closing date of statement)

Date Purchased or Ordered	Date Received	Vendor Name	Description of Item Purchased	Amount Billed (indicate "Q" for quoted items)	Fund (4 digits)	Cost Center (6 digits)	GL Account # (7 digits)	Internal / Work Order # (6 or 7 digits)
9/05	9/06	Gannett Kentucky	Florida Today	$2.23	0001	200050	5540000	
9/22	9/25	Culligan Water	water: bottled	14.25	0001	200050	5950400	
9/23	9/25	Verizon	cell phone	161.81	0001	200090	5410100	
10/03	10/04	Culligan Water	bottled water delivery	14.25	0001	200050	5950400	

ADD'L PAGES SUBTOTAL $0

GRAND TOTAL (ALL PAGES) $192.54 (must agree to figure below)

SUMMARY OF FUND / COST CENTERS / G.L. ACCOUNT TO BILL

FUND	COST CTR	GL ACCT	INT. ORDER	Amount
0001	200050	5540000		$2.23
		5950400		14.25
	200090	5410100		161.81
	200050	5950400		14.25

(must agree to above figure) **TOTAL** $192.54

I (Cardholder) have complied with the Purchase Card Administrative Order (AO-41) and have Retained all required approvals for restrictive Uses and a quote log for purchases $750 and over.

10/16/17
Signature of Cardholder / Date

10/16/17
Signature of Approving Official / Date

BCC-223 –Word Document Revised 7/30/13

Mailed 10/17

Bank of America

Purchasing Card

DANIELLE L STERN
FL BREVARD COUNTY BOC
XXXX-XXXX-XXXX-**4809**
September 05, 2017 - October 04, 2017

Cardholder Activity

Account Information

Mail Billing Inquiries to:
BANKCARD CENTER
PO BOX 982238
EL PASO, TX 79998-2238

Customer Service:
1.888.449.2273 24 Hours

TTY Hearing Impaired:
1.800.222.7365 24 Hours

Outside the U.S.:
1.509.353.6656 24 Hours

For Lost or Stolen Card:
1.888.449.2273 24 Hours

Payment Information

Statement Date	10/04/17
Credit Limit	$2,000
Cash Limit	$0
Days in Billing Cycle	30
Total Activity	$192.54

THIS IS NOT A BILL - DO NOT PAY

Account Summary

Credits	$0.00
Cash	$0.00
Purchases	$192.54
Other Debits	$0.00
Cash Fees	$0.00
Other Fees	$0.00
Total Activity	$192.54

Accounting Code: 0001/200050

Transactions

Posting Date	Transaction Date	Description	Reference Number	MCC	Charge	Credit
09/06	09/05	GAN*1028FLORTODAYCIRC 888-426-0491 IN	24692167248100592973309	5968	2.23	
09/25	09/22	CULLIGAN WATER PROD 2 386-274-5036 FL	24493987265207364900129	5099	14.25	
09/25	09/23	VZWRLSS*IVR VB 800-922-0204 FL	24692167266100582709124	4814	161.81	
10/04	10/03	CULLIGAN WATER PROD 2 386-274-5036 FL	24493987276207364600080	5099	14.25	

0000000 0000000 0000000 4715290017764809

Account Number: XXXX-XXXX-XXXX-**4809**
September 05, 2017 - October 04, 2017

Total Activity **$192.54**

Cardholder Signature Date

Manager Signature Date

BANK OF AMERICA
PO BOX 15731
WILMINGTON, DE 19886-5731

DANIELLE L STERN **N0001701
FL BREVARD COUNTY BOC
DISTRICT 5 COMMISSION OFFICE
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

⑆549990011⑆00050017764809⑈

FLORIDATODAY

Account history

FLORIDA TODAY

Billing history

10/06/2017	Renewal	$4.99
09/06/2017	Renewal	$2.23

Back

Need help? Call Customer Service at 1-877-424-0156

Plus Culligan statements:
Paid 9/22 confirm # 063210 $14.25
10/3 confirm # 014044 $14.25

verizon

PO BOX 4001
ACWORTH, GA 30101

Manage Your Account	Account Number	Date Due
www.vzw.com/mybusinessaccount	742120929-00001	09/18/17

Change your address at
http://sso.verizonenterprise.com

Invoice Number	9791590132

0009066 02 AB 0.400 **AUTO T9 0 3193 32907-117725 -C08-P09075-I1

COUNTY OF BREVARD
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

New mobile
321-626-7815

Quick Bill Summary

Jul 24 – Aug 23

Previous Balance *(see back for details)*	$109.60
Payment – Thank You	-$109.60
Balance Forward	**$.00**
Monthly Charges	$158.18
Usage and Purchase Charges	
Voice	$.00
Messaging	$.00
Data	$.00
Surcharges and Other Charges & Credits	$3.63
Taxes, Governmental Surcharges & Fees	$.00
Total Current Charges	**$161.81**

Total Charges Due by September 18, 2017 **$161.81**

De 9/12

Confirm # 059199

(1-800-922-0204)

Pay from phone	Pay on the Web	Questions:
#PMT (#768)	At vzw.com/mybusinessaccount	1.800.922.0204 or *611 from your phone

verizon

Bill Date	August 23, 2017
Account Number	742120929-00001
Invoice Number	9791590132

COUNTY OF BREVARD
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

Total Amount Due by September 18, 2017

Make check payable to Verizon Wireless.
Please return this remit slip with payment.

$161.81

$ 161.81

PO BOX 660108
DALLAS, TX 75266-0108

97915901320107421209290000100000016181000000161813

— Mailed 11/16 2017

EHIBIT "B"
BREVARD COUNTY PURCHASING CARD MONTHLY RECONCILIATION REPORT

Cardholder's Name: Danielle Stern **Cardholder Phone Ext:** 253-6611 **Personnel #:** 11006140

Cardholder's Department: Commission D.5 **Closing Date:** November 4, 2017
(enter closing date of statement)

Date Purchased or Ordered	Date Received	Vendor Name	Description of Item Purchased	Amount Billed (indicate "Q" for quoted items)	Fund (4 digits)	Cost Center (6 digits)	GL Account # (7 digits)	Internal / Work Order # (6 or 7 digits)
10/5	10/6	Gannett	Online Florida Today	$4.99	0001	200050	5540000	
10/5	10/6	Konica Minolta	copy machine	70.28		200050	5450200	
10/17	10/18	Wal-Mart	office TVs	294.00		200050	5521100	

ADD'L PAGES SUBTOTAL Ø

GRAND TOTAL (ALL PAGES) (must agree to figure below)

SUMMARY OF FUND / COST CENTERS /G.L. ACCOUNT TO BILL

FUND	COST CTR	GL ACCT	INT. ORDER	Amount
0001	200050	5540000		$4.99
	200050	5450200		70.28
	200050	5521100		294.00

(must agree to above figure) **TOTAL** $369.27

I (Cardholder) have complied with the Purchase Card Administrative Order (AO-41) and have Retained all required approvals for restrictive Uses and a quote log for purchases $750 and over.

[signature] 11/16/2017
Signature of Cardholder / Date

[signature] 11/16/2017
Signature of Approving Official / Date

Bank of America

DANIELLE L STERN
FL BREVARD COUNTY BOC
XXXX-XXXX-XXXX-**4809**
October 05, 2017 - November 04, 2017

Purchasing Card

Cardholder Activity

Account Information

Mail Billing Inquiries to:
BANKCARD CENTER
PO BOX 982238
EL PASO, TX 79998-2238

Customer Service:
1.888.449.2273 24 Hours

TTY Hearing Impaired:
1.800.222.7365 24 Hours

Outside the U.S.:
1.509.353.6656 24 Hours

For Lost or Stolen Card:
1.888.449.2273 24 Hours

Payment Information

Statement Date	11/04/17
Credit Limit	$2,000
Cash Limit	$0
Days in Billing Cycle	31
Total Activity	$369.27

THIS IS NOT A BILL - DO NOT PAY

Account Summary

Credits	$0.00
Cash	$0.00
Purchases	$369.27
Other Debits	$0.00
Cash Fees	$0.00
Other Fees	$0.00
Total Activity	$369.27

Accounting Code: 0001/200050

Transactions

Posting Date	*Transaction Date*	*Description*		*Reference Number*	*MCC*	*Charge*	*Credit*
10/06	10/05	GAN*1028FLORTODAYCIRC	888-426-0491 IN	24692167278100455066970	5968	4.99	
10/06	10/05	KONICA MINOLTA BUSINESS	800-456-6422 CT	24610437278004023006599	5111	70.28	
10/18	10/17	WM SUPERCENTER #974	WEST MELBOURNFL	24445007291400123812206	5411	294.00	

0000000 0000000 0000000 4715290017764809

Account Number: XXXX-XXXX-XXXX-**4809**
October 05, 2017 - November 04, 2017

BANK OF AMERICA
PO BOX 15731
WILMINGTON, DE 19886-5731

Total Activity **$369.27**

Cardholder Signature Date 11/16/17

Manager Signature Date

DANIELLE L STERN
FL BREVARD COUNTY BOC
DISTRICT 5 COMMISSION OFFICE
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

**N0001691

⑆5L99900 1 1⑆000500177LL809⑈

Goudelock, Margaret

From:	extranet@kmbs.konicaminolta.us
Sent:	Tuesday, October 3, 2017 2:49 PM
To:	Goudelock, Margaret
Subject:	Payment Confirmation

Thank you for using MyKMBS.com!

Your payment for the following invoice(s) is being processed:

Invoice Number	Ref Number	Due Date	Open Amount
247567147	247567147	Oct 27, 2017	70.28
			Total: $70.28

If you have any questions, please call 1-800-456-5664.

See back of receipt for your chance
to win $1000

ID #: 7L2HBXBK85S

Office TVs

Walmart
Save money. Live better.

(321) 984 - 2715
MANAGER JEFF MILZ
845 PALM BAY RD NE
WEST MELBOURNE FL 32904
ST# 00974 OP# 000081 TE# 70 TR# 09524
PRODUCT SERIAL # 07B2MMB3N24032345
LED HDTV 085140100507 98.00 0
PRODUCT SERIAL # 07B2MMB3N24025463
LED HDTV 085140100507 98.00 0
PRODUCT SERIAL # 07B2MMB3N24031614
LED HDTV 085140100507 98.00 0
SUBTOTAL 294.00
TOTAL 294.00
VISA TEND 294.00
VISA CREDIT **** **** **** 4809 I 1
APPROVAL # 040863
REF # 1042000314
TRANS ID - 307290595016920
VALIDATION - 5CFB
PAYMENT SERVICE - E

AID A0000000031010
TC FCAC9E8E3160F645
TERMINAL # 283876789
*Pin Verified

10/17/17 12:31:57
CHANGE DUE 0.00
ITEMS SOLD 3
TC# 1523 4014 9148 5828 2225 4

Low Prices You Can Trust. Every Day.
10/17/17 12:32:07
CUSTOMER COPY

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ay.

658

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mailed 12/11/2017

660

PAGE 1 of 1

EHIBIT "B"

BREVARD COUNTY PURCHASING CARD MONTHLY RECONCILIATION REPORT

Cardholder's Name: Danielle Stern Cardholder Phone Ext: 321) 253-6611 Personnel #: 11006140

Cardholder's Department: Commission D-5 Closing Date: December 4, 2017 (enter closing date of statement)

Date Purchased or Ordered	Date Received	Vendor Name	Description of Item Purchased	Amount Billed (indicate "Q" for quoted items)	Fund (4 digits)	Cost Center (6 digits)	GL Account # (7 digits)	Internal / Work Order # (6 or 7 digits)
11/06	11/07	Gannett	online Florida Today	$4.99	0001	200050	5540000	
11/16	11/17	Culligan Water	bottled water delivery	14.25		200050	5950400	
11/17	11/20	Verizon Wireless	cell phones	57.60		200090	5410100	

ADD'L PAGES SUBTOTAL 0

GRAND TOTAL (ALL PAGES) $76.84 (must agree to figure below)

SUMMARY OF FUND / COST CENTERS /G.L. ACCOUNT TO BILL

FUND	COST CTR	GL ACCT	INT. ORDER	Amount
0001	200050	5540000		$4.99
		5950400		14.25
	200090	5410100		57.60

(must agree to above figure)

TOTAL $76.84

I (Cardholder) have complied with the Purchase Card Administrative Order (AO-41) and have Retained all required approvals for restrictive Uses and a quote log for purchases $750 and over.

12/11/2017

Signature of Cardholder / Date

12/11/2017

Signature of Approving Official / Date

Bank of America

DANIELLE L STERN
FL BREVARD COUNTY BOC
XXXX-XXXX-XXXX-4809
November 05, 2017 - December 04, 2017

Purchasing Card

Cardholder Activity

Account Information

Mail Billing Inquiries to:
BANKCARD CENTER
PO BOX 982238
EL PASO, TX 79998-2238

Customer Service:
1.888.449.2273 24 Hours

TTY Hearing Impaired:
1.800.222.7365 24 Hours

Outside the U.S.:
1.509.353.6656 24 Hours

For Lost or Stolen Card:
1.888.449.2273 24 Hours

Payment Information

Statement Date	12/04/17
Credit Limit	$2,000
Cash Limit	$0
Days In Billing Cycle	30
Total Activity	$76.84

THIS IS NOT A BILL - DO NOT PAY

Account Summary

Credits	$0.00
Cash	$0.00
Purchases	$76.84
Other Debits	$0.00
Cash Fees	$0.00
Other Fees	$0.00
Total Activity	$76.84

Accounting Code: 0001/200050

Transactions

Posting Date	*Transaction Date*	*Description*	*Reference Number*	*MCC*	*Charge*	*Credit*
11/07	11/06	GAN*1028FLORTODAYCIRC 888-426-0491 IN	24692167310200415570028	5968	4.99	
11/17	11/16	CULLIGAN WATER PROD 2 386-274-5036 FL	24493987320207364800066	5099	14.25	
11/20	11/17	VZWRLSS*IVR VB 800-922-0204 FL	24692167321100050539543	4814	57.60	

0000000 0000000 0000000 4715290017764809

Account Number: XXXX-XXXX-XXXX-4809
November 05, 2017 - December 04, 2017

BANK OF AMERICA
PO BOX 15731
WILMINGTON, DE 19886-5731

Total Activity $76.84

Cardholder Signature 12/11/2017 Date

Manager Signature 12/11/2017 Date

DANIELLE L STERN **N0002428
FL BREVARD COUNTY BOC
DISTRICT 5 COMMISSION OFFICE
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

⑆5499900 11⑆000500177648O9⑈

Copy

Comissioner Kristine+Isnardi

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EHIBIT "B"
BREVARD COUNTY PURCHASING CARD MONTHLY RECONCILIATION REPORT

Cardholder's Name: Danielle Stern **Cardholder Phone Ext:** 253-6611 **Personnel #:** 11006140

Cardholder's Department: Commission D5 **Closing Date:** January 4, 2018 (enter closing date of statement)

Date Purchased or Ordered	Date Received	Vendor Name	Description of Item Purchased	Amount Billed (indicate "Q" for quoted items)	Fund (4 digits)	Cost Center (6 digits)	GL Account # (7 digits)	Internal / Work Order # (6 or 7 digits)
12/04	12/05	Wal-Mart	Holiday Open House, dry goods	$120.64	0001	200050	5529000	
12/05	12/06	Gannett ~ FL Today	Online subscription	4.99		200050	5450200	
12/06	12/08	Wal-Mart	Holiday Open House	203.16		200050	5529000	
			Rolls/Ice/Food Trays					
12/06	12/08	Culligan Water	water: bottled	9.50		200050	~~5950400~~	
12/21	12/22	Verizon Wireless	cell phones	219.48		200090	~~5950400~~	

Admin

ADD'L PAGES SUBTOTAL 0

GRAND TOTAL (ALL PAGES) $557.77 (must agree to figure below)

I (Cardholder) have complied with the Purchase Card Administrative Order (AO-41) and have Retained all required approvals for restrictive Uses and a quote log for purchases $750 and over.

Danielle Stern 1/18/2018

Signature of Cardholder / Date

1/18/2018

Signature of Approving Official / Date

SUMMARY OF FUND / COST CENTERS /G.L. ACCOUNT TO BILL

FUND	COST CTR	GL ACCT	INT. ORDER	Amount
0001	200050	5529000		$120.64
	200050	5450200		4.99
	200050	5529000		203.16
	200050	~~5950400~~		9.50
	200090	~~5950400~~		219.48

(must agree to above figure) **TOTAL** $557.77

$3,900.00

phones copier 200090

BCC-223 – Word Document Revised 7/30/13

Bank of America

Purchasing Card

DANIELLE L STERN
FL BREVARD COUNTY BOC
XXXX-XXXX-XXXX-**4809**
December 05, 2017 - January 04, 2018

Cardholder Activity

Account Information

Mail Billing Inquiries to:
BANKCARD CENTER
PO BOX 982238
EL PASO, TX 79998-2238

Customer Service:
1.888.449.2273 24 Hours

TTY Hearing Impaired:
1.800.222.7365 24 Hours

Outside the U.S.:
1.509.353.6656 24 Hours

For Lost or Stolen Card:
1.888.449.2273 24 Hours

Payment Information

Statement Date	01/04/18
Credit Limit	$2,000
Cash Limit	$0
Days in Billing Cycle	31
Total Activity	$557.77

THIS IS NOT A BILL - DO NOT PAY

Account Summary

Credits	$0.00
Cash	$0.00
Purchases	$557.77
Other Debits	$0.00
Cash Fees	$0.00
Other Fees	$0.00
Total Activity	$557.77

Accounting Code: 0001/200050

Transactions

Posting Date	Transaction Date	Description	Reference Number	MCC	Charge	Credit
12/05	12/04	WM SUPERCENTER #974 WEST MELBOURNFL	24445007339400143526178	5411	120.64	
12/06	12/05	GAN*1028FLORTODAYCIRC 888-426-0491 IN	24692167339100739100493	5968	4.99	
12/08	12/06	WAL-MART #0974 MELBOURNE FL	24226387341091004615569	5411	203.16	
12/08	12/06	CULLIGAN WATER PROD 2 386-274-5036 FL	24493987340207364100059	5099	9.50	
12/22	12/21	VZWRLSS*IVR VB 800-922-0204 FL	24692167355100501413339	4814	219.48	

Mailed 1/18

0000000 0000000 0000000 4715290017764809

Account Number: XXXX-XXXX-XXXX-**4809**
December 05, 2017 - January 04, 2018

BANK OF AMERICA
PO BOX 15731
WILMINGTON, DE 19886-5731

Total Activity **$557.77**

Cardholder Signature ______ Date 1/18/2018

Manager Signature ______ Date 1/18/2018

DANIELLE L STERN **N0003328
FL BREVARD COUNTY BOC
DISTRICT 5 COMMISSION OFFICE
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

:5499900 11:000500 17764809

See back of receipt for your chance
to win $1000

ID #: 7L33YJBK039

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Save money. Live better.

(321) 984 - 2715
MANAGER JEFF MILZ
845 PALM BAY RD NE
WEST MELBOURNE FL 32904
ST# 00974 OP# 000120 TE# 06 TR# 01759

Party Food Platters

STEAK ROLL	007874298026 F	3.94	O
1/2 P CK ING	007874298063 F	2.98	O
12CN ROLL	007874299007 F	2.24	O
FRENCH BREAD	068113113619 F	1.00	O
FRENCH BREAD	068113113619 F	1.00	O
FRENCH BREAD	068113113619 F	1.00	O
FRENCH BREAD	068113113619 F	1.00	O
GV LITE MAY	007874219498 F	2.28	O
GV MUST	007874209197 F	0.72	O
10 LB ICE	004127197110 F	2.00	O
10 LB ICE	004127197110 F	2.00	O
VEG/RELISH	020583794800 F	48.00	O
CHS TRAY	020792393900 F	39.00	O
LG P MT/CHS	020567794800 F	48.00	O
LG P MT/CHS	020567794800 F	48.00	O
	SUBTOTAL	203.16	
	TOTAL	203.16	
	VISA TEND	203.16	

VISA CREDIT **** **** **** 4809 I 1
APPROVAL # 021637
REF # 734000461556
TRANS ID - 587340572566230
VALIDATION - 9JLP
PAYMENT SERVICE - E

AID A0000000031010
TC 85827FDCF848CEB8
TERMINAL # 283877010
*Pin Verified

12/06/17 10:54:44
CHANGE DUE 0.00
ITEMS SOLD 15
TC# 7357 5946 0895 6020 9258 3

Low Prices You Can Trust. Every Day.
12/06/17 10:54:52
CUSTOMER COPY

Use Walmart Pay to save your receipts.

See back of receipt for your chance
to win $1000

ID #: 7L33RBBK556

552 9000

Walmart
Save money. Live better.

(321) 984 - 2715
MANAGER JEFF MILZ
845 PALM BAY RD NE
WEST MELBOURNE FL 32904
ST# 00974 OP# 000235 TE# 14 TR# 06623
** RETRIEVED TRANSACTION 48504146622 *

SC 10OZ 15PK	068113178113 F	2.00	N
SC 10OZ 15PK	068113178113 F	2.00	N
SC 10OZ 15PK	068113178113 F	2.00	N
SC 10OZ 15PK	068113178113 F	2.00	N
RED GRAPE	081298501613 F		
3.18 lb @ 1 lb /2.48		7.89	N
RED GRAPE	000000003450KF		
3.21 lb @ 1 lb /2.48		7.96	N
RED GRAPE	081298501613 F		
2.72 lb @ 1 lb /2.48		6.75	N
GV 8 EDY BIG	007874210521	4.97	X
RITZ	004400003442 F	2.98	N
WHEAT THINS	004400000225 F	2.98	N
12.5Z TRISC	004400005169 F	2.98	N
HILTON S	060654192240 F	2.28	N
ORIGINAL	004950800600 F	2.14	N
ORIGINAL	004950800600 F	2.14	N
ORIGINAL	004950800600 F	2.14	N
COFFEE CUPS	007874215955	3.97	X
COFFEE CUPS	007874215955	3.97	X
CUTLERY	068113170247	2.84	X
PL 56Z CAN N	002900007369 F	16.96	N
LUNCH PLATES	003993844666	2.97	X
LUNCH PLATES	003993844666	2.97	X
LUNCH PLATES	003993844666	2.97	X
SPINACH DIP	068113110835 F	3.98	N
SPINACH DIP	068113110835 F	3.98	N
CLASSIC HUMM	004082201749 F	4.48	N
COKE	004900006101 F	2.50	X
DIET COKE	004900006105 F	2.50	X
COKE	004900006721 F	3.50	X
SPRITE	004900006724 F	3.50	X
DIET COKE	004900006722 F	3.50	X

crackers

Plates/Cups

Drinks

** RETRIEVED ITEMS COMPLETE *

	SUBTOTAL	117.82
TAX 1	7.000 %	2.82
	TOTAL	120.64
	VISA TEND	120.64

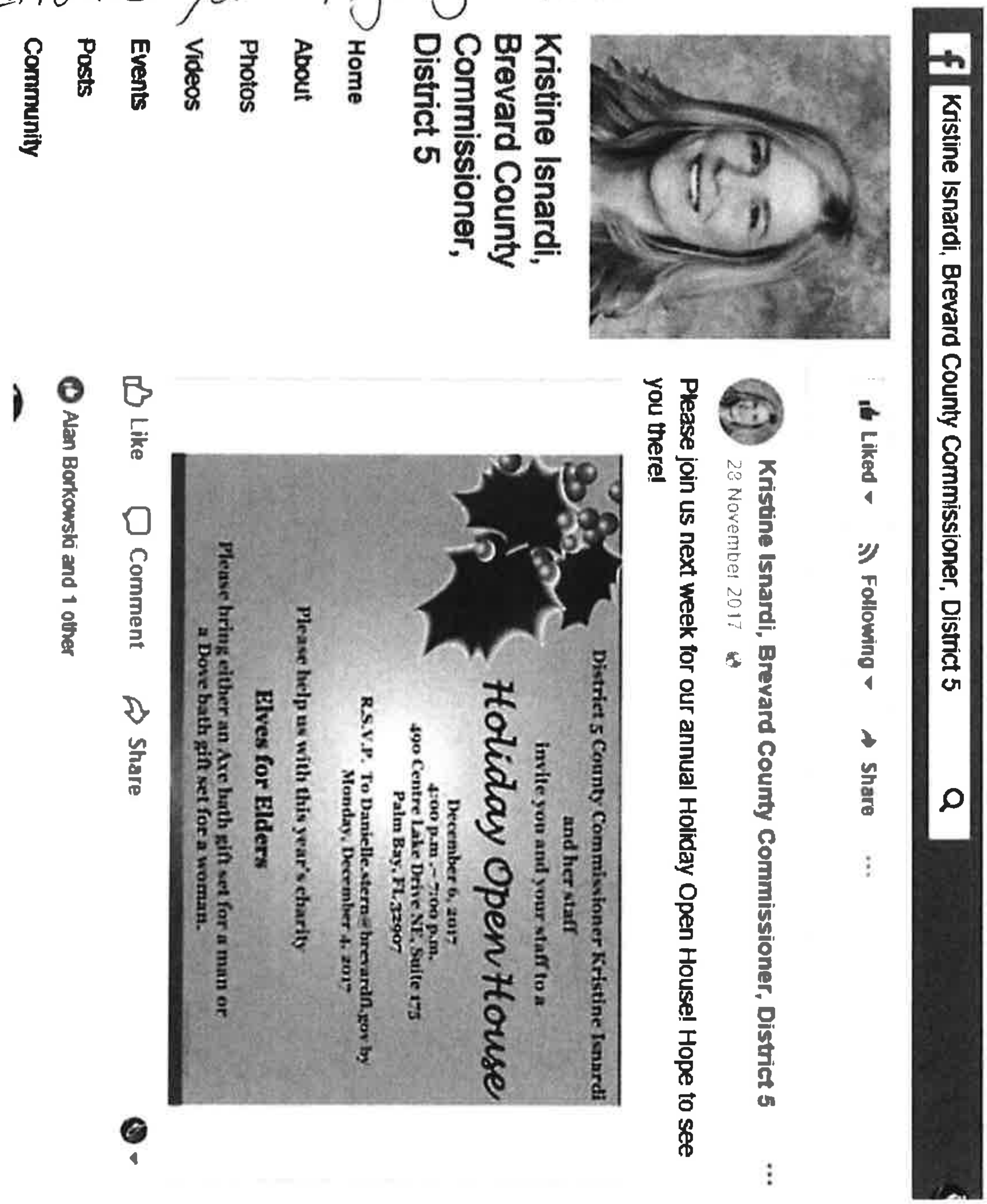
VISA CREDIT **** **** **** 4809 I 1
APPROVAL # 057190
REF # 1042000314
TRANS ID - 387338706188695
VALIDATION - FT5F
PAYMENT SERVICE - E

AID A0000000031010
TC C3564D31995AD0FD
TERMINAL # 283876722
*Pin Verified

12/04/17 14:37:22
CHANGE DUE 0.00
ITEMS SOLD 30
TC# 8459 6864 1418 2323 1277 9

Low Prices You Can Trust. Every Day.
12/04/17 14:37:22
CUSTOMER COPY

Commissioner Isnardi and staff hosted a holiday open house event on December 6th to serve light refreshments to the public and accept charitable donations for Aging Matters.



EHIBIT "B"

BREVARD COUNTY PURCHASING CARD MONTHLY RECONCILIATION REPORT

Cardholder's Name: Danielle Stern **Cardholder Phone Ext:** 321)253-6611 **Personnel #:** 11006140

Cardholder's Department: D.5 Commission **Closing Date:** February 4, 2018 (enter closing date of statement)

Date Purchased or Ordered	Date Received	Vendor Name	Description of Item Purchased	Amount Billed (indicate "Q" for quoted items)	Fund (4 digits)	Cost Center (6 digits)	GL Account # (7 digits)	Internal / Work Order # (6 or 7 digits)
1/04	1/05	Culligan Water	water : bottled	$ 9.50	0001	200050	~~5950400~~	
1/05	1/08	Gannet Media	Florida Today, online	4.99		200050	5540000	
1/05	1/08	Konica-Minolta	copy machine	19.72		200050	5450200	
1/23	1/24	Verizon	D.5 cell phones	109.74		200090	5410100	
1/31	2/01	FUBA	FL Legislative directories	12.84		200090	5540000	

ADD'L PAGES SUBTOTAL

GRAND TOTAL (ALL PAGES) $156.79 (must agree to figure below)

SUMMARY OF FUND / COST CENTERS /G.L. ACCOUNT TO BILL

FUND	COST CTR	GL ACCT	INT. ORDER	Amount
0001	200050	~~5950400~~ 5529000		$ 9.50
	200050	5540000		4.99
	200050	5450200		19.72
	200090	5410100		109.74
	200090	5540000		12.84

(must agree to above figure) **TOTAL** $156.79

I (Cardholder) have complied with the Purchase Card Administrative Order (AO-41) and have Retained all required approvals for restrictive Uses and a quote log for purchases $750 and over.

[signature] 2/13/18
Signature of Cardholder / Date

[signature] 2/13/2018
Signature of Approving Official / Date

Mailed 2/14

BCC-223 – Word Document Revised 7/30/13

Bank of America

DANIELLE L STERN
FL BREVARD COUNTY BOC
XXXX-XXXX-XXXX-4809
January 05, 2018 - February 04, 2018

Purchasing Card

Cardholder Activity

Account Information

Mail Billing Inquiries to:
BANKCARD CENTER
PO BOX 982238
EL PASO, TX 79998-2238

Customer Service:
1.888.449.2273 24 Hours

TTY Hearing Impaired:
1.800.222.7365 24 Hours

Outside the U.S.:
1.509.353.6656 24 Hours

For Lost or Stolen Card:
1.888.449.2273 24 Hours

Payment Information

Statement Date	02/04/18
Credit Limit	$2,000
Cash Limit	$0
Days in Billing Cycle	31
Total Activity	$156.79

THIS IS NOT A BILL - DO NOT PAY

Account Summary

Credits	$0.00
Cash	$0.00
Purchases	$156.79
Other Debits	$0.00
Cash Fees	$0.00
Other Fees	$0.00
Total Activity	$156.79

Accounting Code: 0001/200050

Transactions

Posting Date	Transaction Date	Description	Reference Number	MCC	Charge	Credit
01/05	01/04	CULLIGAN WATER PROD 2 386-274-5036 FL	24493988004207364000130	5099	9.50	
01/08	01/05	GAN*1028FLORTODAYCIRC 888-426-0491 IN	24692168005100928551200	5968	4.99	
01/08	01/05	KONICA MINOLTA BUSINESS RAMSEY NJ	24610438005004017003568	5111	19.72	
01/24	01/23	VZWRLSS*MY VZ VB P 800-922-0204 FL	24692168023100124313833	4814	109.74	
02/01	01/31	FUBA FUBA.ORG FL	24492158031637112225985	8699	12.84	

0000000 0000000 0000000 4715290017764809

Account Number: XXXX-XXXX-XXXX-4809
January 05, 2018 - February 04, 2018

BANK OF AMERICA
PO BOX 15731
WILMINGTON, DE 19886-5731

DANIELLE L STERN **N0002323
FL BREVARD COUNTY BOC
DISTRICT 5 COMMISSION OFFICE
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

Total Activity $156.79

Cardholder Signature Date 2/13/18

Manager Signature Date 2/13/2018

:549990011:000500177648090"

Culligan of Melbourne

771 NORTH DRIVE
MELBOURNE, FL 32934
(321) 255-5562 (321) 636-1344
bmorissette@culliganmelbourne.com
www.culligancentralflorida.com

IF PAYING BY CREDIT CARD, PLEASE CHECK CORRECT CARD AND FILL OUT BELOW

☐ VISA ☐ ☐ ☐ ☐ PLEASE CHECK BOX TO ENROLL IN AUTOMATIC BILL PAYMENT

CARD NUMBER	V. CODE
SIGNATURE	EXP. DATE

DATE	PAY THIS AMOUNT	ACCOUNT NUMBER
01/29/2018	$9.50	268847

PAY BY DATE: FEB 15 AMOUNT PAID $

ADDRESSEE:

001671
DISTRICT 5 COMMISSIONER
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

REMIT PAYMENT TO:

CULLIGAN WATER PRODUCTS
771 NORTH DR
MELBOURNE, FL 32934-9282

BALANCE FORWARD

RETURN THIS TOP PORTION WITH YOUR PAYMENT

BRANCH ID: ME-01
CUSTOMER: DISTRICT 5 COMMISSIONER

DATE	QUANTITY	DESCRIPTION	REF	AMOUNT	BALANCE
				PREVIOUS BALANCE:	$9.50
01/05/2018	-1.00	Payment	EFT	-9.50	0.00
01/17/2018	2.00	1/2 LITER (CASE)	800634187	9.50	9.50
01/17/2018	1.00	SERVICE FEE	800634187	0.00	9.50

Pay on line at www.culligancentralflorida.com Please call our office at 321-255-5562 if you need any assistance.

ACCOUNTS ARE SUBJECT TO A LATE PAYMENT FINANCE CHARGE

FINANCE CHARGE SCHEDULE

	PERIODIC RATE	ANNUAL RATE	PLEASE PAY NEW BALANCE BEFORE
OVER $ 3	1.50%	18.00 %	FEB 15
TO 3	0.00%	0.00 %	MIN CHARGE 0.50

0-30	31-60	61-90	Over 90
9.50	0.00	0.00	0.00

Balance Due $9.50

CULLIGAN WATER PRODUCTS
771 NORTH DRIVE
MELBOURNE, FL 32934

(321) 255-5562 (321) 636-1344

SERVICE ADDRESS:
DISTRICT 5 COMMISSIONER
STE 175
490 CENTRE LAKE DRIVE NE
PALM BAY FL 32907

Next Deliveries: 02/14/18 03/14/18 04/11/18 05/09/18

************HAPPY VALENTINES DAY*********
PLEASE NOTE SLIGHT PRICE ADJUSTMENT
ON SOME PRODUCTS AND SERVICES NEXT MONTH.

STATEMENT DATE	ACCOUNT NUMBER	NAME
01/29/2018	268847	DISTRICT 5 COMMISSIONER

KONICA MINOLTA

MyKMBS   Change Profile

MyKMBS > Pay Invoices

Pay Invoices

Thank you!

Your credit card ending in 4809 has been charged the total below.

Invoice	**Amount**
249221849	19.72

Total: $ 19.72

Authorization number: 022149

Please print this screen and keep a copy for your records. This confirmation serves as your receipt.

Fed Tax# 13-1921089
Corporate Duns No 00-170-7322
Federal Duns No 62-657-8041

Maintenance

KONICA MINOLTA

ORIGINAL INVOICE

Page 1 / 1

Invoice No: 249221849

Invoice Date: 12/27/2017

Payment Due Date: 01/26/2018
Payment Terms: NET 30 DAYS

Bill / Mail To: 1737818
BREVARD COUNTY
DISTRICT 5 COMMISSION OFFICE
STE 175
490 CENTRE LAKE DR NE
PALM BAY FL 32907-1177

Payer: 1708997
BREVARD COUNTY
COMMISSIONER DISTRICT 5
1515 SARNO RD
MELBOURNE FL 32935-5272

Purchase Order Number		Equipment Location 1734153
Customer Contract	Contract Coverage Dates	BREVARD COUNTY STE 175 490 CENTRE LAKE DR NE PALM BAY FL 32907-1177
	03/01/2014-02/28/2021	

Invoice Description / Comments

Quarterly invoice for Maintenance agreement covering the billing period of 09/28/2017 - 12/27/2017.
Includes labor, parts, drums, staples and supplies. Excludes paper.

Summary of Invoice Charges

							Quantity	Unit Charge	Bill Amount
**BIZHUB C280 PRINTER/COPIER			A0ED012018401				1		
Current Meter	Previous Meter	Meter Usage	Allowable	Svc. Crd	Agg Cred	Up to Tier			
15,271 Color Meter	14,947	324	0	0	0	999,999,999	324	0.04321	14.00
Current Meter	Previous Meter	Meter Usage	Allowable	Svc. Crd	Agg Cred	Up to Tier			
23,767 B&W Meter	23,325	442	0	0	0	999,999,999	442	0.01293	5.72

670

72

verizon

PO BOX 4001
ACWORTH, GA 30101

Manage Your Account	Account Number	Date Due
www.vzw.com/mybusinessaccount	742120929-00001	01/18/18

Change your address at
http://sso.verizonenterprise.com

Invoice Number	9798691486

0014288 02 AB 0.400 **AUTO T6 0 3593 32907-117725 -C07-P14302-I1

COUNTY OF BREVARD
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

Quick Bill Summary

Nov 24 – Dec 23

Previous Balance *(see back for details)*	$219.48
Payment – Thank You	–$219.48
Balance Forward	**$.00**
Monthly Charges	$107.18
Usage and Purchase Charges	
Voice	$.00
Messaging	$.00
Data	$.00
Surcharges and Other Charges & Credits	$2.56
Taxes, Governmental Surcharges & Fees	$.00
Total Current Charges	**$109.74**

Total Charges Due by January 18, 2018 **$109.74**

Pay from phone	Pay on the Web	Questions:
#PMT (#768)	At vzw.com/mybusinessaccount	1.800.922.0204 or *611 from your phone

verizon

COUNTY OF BREVARD
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907–1177

Bill Date	December 23, 2017
Account Number	742120929–00001
Invoice Number	9798691486

Total Amount Due by January 18, 2018

Make check payable to Verizon Wireless.
Please return this remit slip with payment.

$109.74

$ 109.74

PO BOX 660108
DALLAS, TX 75266–0108

671

9798691486010742120929000010000001097400000010974З

Document No	Doc. Date	User name	Reference	Reference Key	Entry Date
[redacted]	01/14/2018	NJCOPELAND	10/17-12/29/17	1900232419BD 2018	01/17/2018
[redacted]	01/13/2018	NJCOPELAND	000070X05X028	51056483242018	01/17/2018
[redacted]	[illegible]	NJCOPELAND	3234	51056483212018	01/17/2018
[redacted]	[illegible]	NJCOPELAND	3235	[illegible]	[illegible]
[redacted]	01/03/2018	NJCOPELAND	3244	51056483172018	01/17/2018
[redacted]	01/01/2018	NJCOPELAND	80423	51056483162018	01/17/2018
[redacted]	01/05/2018	NJCOPELAND	[illegible]	[illegible]	[illegible]
[redacted]	01/11/2018	NJCOPELAND	INV-00323	51056483122018	01/17/2018
[redacted]	01/05/2018	NJCOPELAND	994535918001	51056483102018	01/17/2018
[redacted]	01/11/2018	NJCOPELAND	006	51056483022018	01/17/2018
[redacted]	01/01/2018	NJCOPELAND	0400200-SE170648	51056482842018	01/17/2018
[redacted]	01/16/2018	NJCOPELAND	10C2018	51056482672018	01/17/2018
[redacted]	12/05/2017	NJCOPELAND	29	51056482642018	01/17/2018
[redacted]	01/01/2018	NJCOPELAND	2433	51056482632018	01/17/2018
[redacted]	12/30/2017	NJCOPELAND	MW1016	51056482612018	01/17/2018
[redacted]	01/16/2018	NJCOPELAND	110117.25	51056482592018	01/17/2018

[redacted], Margaret

receipts+amVQeelDlfRvyv8schmN@stripe.com on behalf of FUBA <receipts+amVQeelDlfRvyv8schmN@stripe.com>

Wednesday, January 31, 2018 2:45 PM

Margaret

Your FUBA receipt [#1921-0342]

Florida Legislature
The Advisor
booklets

$12.84 at FUBA

Danielle L Stern — **VISA** 4809

January 31, 2018	#1921-0342
Description	**Amount**
Entry ID: 1160, Products: Book Bound Copies, District & Capital Addresses Only - Free, Sales Tax	$12.84
Total	**$12.84**

Have a question or need help? Send us an email or give us a call at +1 850-681-6265.

Mailed 3/22

EHIBIT "B"

PAGE 1 of 1

BREVARD COUNTY PURCHASING CARD MONTHLY RECONCILIATION REPORT

Cardholder's Name: Danielle Stern **Cardholder Phone Ext:** 321 253-6611 **Personnel #:** 11006140

Cardholder's Department: D.5 Commission **Closing Date:** March 9, 2018
(enter closing date of statement)

Date Purchased or Ordered	Date Received	Vendor Name	Description of Item Purchased	Amount Billed (indicate "Q" for quoted items)	Fund (4 digits)	Cost Center (6 digits)	GL Account # (7 digits)	Internal / Work Order # (6 or 7 digits)
02/05	02/06	Gannett Media	FL Today online	$ 4.99	0001	200050	5540000	
02/14	02/15	Gannett Media	FL Today	9.61		200050	5540000	
02/16	02/19	Verizon	D.5 cell phones	109.84		200090	5410100	

ADD'L PAGES SUBTOTAL ______

GRAND TOTAL (ALL PAGES) ______ (must agree to figure below)

SUMMARY OF FUND / COST CENTERS /G.L. ACCOUNT TO BILL

FUND	COST CTR	GL ACCT	INT. ORDER	Amount
0001	200050	5540000		$ 4.99
	200050	5540000		9.61
	200090	5410100		109.84

(must agree to above figure) **TOTAL** $ 124.44

I (Cardholder) have complied with the Purchase Card Administrative Order (AO-41) and have Retained all required approvals for restrictive Uses and a quote log for purchases $750 and over.

3/12/18
Signature of Cardholder / Date

3/12/18
Signature of Approving Official / Date

BCC-223 –Word Document Revised 7/30/13

Bank of America

Purchasing Card

DANIELLE L STERN
FL BREVARD COUNTY BOC
XXXX-XXXX-XXXX-**4809**
February 05, 2018 - March 04, 2018

Cardholder Activity

Account Information

Mail Billing Inquiries to:
BANKCARD CENTER
PO BOX 982238
EL PASO, TX 79998-2238

Customer Service:
1.888.449.2273 24 Hours

TTY Hearing Impaired:
1.800.222.7365 24 Hours

Outside the U.S.:
1.509.353.6656 24 Hours

For Lost or Stolen Card:
1.888.449.2273 24 Hours

Payment Information

Statement Date	03/04/18
Credit Limit	$2,000
Cash Limit	$0
Days in Billing Cycle	28
Total Activity	$124.44

THIS IS NOT A BILL - DO NOT PAY

Account Summary

Credits	$0.00
Cash	$0.00
Purchases	$124.44
Other Debits	$0.00
Cash Fees	$0.00
Other Fees	$0.00
Total Activity	$124.44

Accounting Code: 0001/200050

Transactions

Posting Date	*Transaction Date*	*Description*	*Reference Number*	*MCC*	*Charge*	*Credit*
02/06	02/05	GAN*1028FLORTODAYCIRC 888-426-0491 IN	24692168036100745889141	5968	4.99	
02/15	02/14	GAN*1028FLORTODAYCIRC 888-426-0491 IN	24692168045100118499121	5968	9.61	
02/19	02/16	VZWRLSS*MY VZ VB P 800-922-0204 FL	24692168047100806404076	4814	109.84	

0000000 0000000 0000000 4715290017764809

Account Number: XXXX-XXXX-XXXX-**4809**
February 05, 2018 - March 04, 2018

BANK OF AMERICA
PO BOX 15731
WILMINGTON, DE 19886-5731

DANIELLE L STERN **N0002534
FL BREVARD COUNTY BOC
DISTRICT 5 COMMISSION OFFICE
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

Total Activity **$124.44**

Danielle Stern 3/12/18
Cardholder Signature Date

3/12/18
Manager Signature Date

⑆5499900 11⑆000500 17764809⑈

Access eNewspaper

Member Guide

Customer Support

YOUR SUBSCRIPTION IS INACTIVE

FULL ACCESS: DIGITAL ONLY

Billing info

Monthly rate: $4.99

Need help? Call Customer Service at 1-877-424-0156
Or email them at floridatoday@gannett.com

Come Back for All the Right Reasons

Yes, restart my subscription

- 24/7 access on your desktop, tablet or mobile device included with all subscriptions.
- Alerts and top news delivered to your inbox.
- Never miss a story, a score, fun things to do and more!

florida today

Edit email newsletter sett

Access eNewspaper

Member Guide

Customer Support

YOUR SUBSCRIPTION IS INACTIVE

FULL ACCESS: DIGITAL ONLY

Billing info

Monthly rate: $0.83

Need help? Call Customer Service at 1-877-424-0156
Or email them at floridatoday@gannett.com

Online statement showing double billing for account

* **Exp. Month** * **Exp. Year**

01 / 2020

* **Billing Address Line 1**

490 Centre Lake Drive Suite 175

Billing Address Line 2

Apt. / Suite

* **City**

Palm Bay

* **State** * **Zip code**

FL 32907

* **Phone Number**

(321) 253-6611

2. Subscription Summary

UNLIMITED DIGITAL ACCESS

UNLIMITED DIGITAL ACCESS	$9.99
YEARLY TOTAL *(excluding tax)*	**$9.99**

SUBSCRIBE

2/14 charge for discounted subscription

verizon

PO BOX 4001
ACWORTH, GA 30101

Manage Your Account	Account Number	Date Due
www.vzw.com/mybusinessaccount	742120929-00001	03/15/18

Change your address at
http://sso.verizonenterprise.com

Invoice Number	9802301936

0014388 02 AB 0.405 **AUTO T4 0 2293 32907-117725 -C07-P14402-I1

COUNTY OF BREVARD
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

Quick Bill Summary

Jan 24 – Feb 23

Previous Balance *(see back for details)*	$109.84
Payment – Thank You	–$109.84
Balance Forward	**$.00**
Monthly Charges	$107.18
Usage and Purchase Charges	
Voice	$.00
Messaging	$.00
Data	$.00
Surcharges and Other Charges & Credits	$2.66
Taxes, Governmental Surcharges & Fees	$.00
Total Current Charges	**$109.84**

Total Charges Due by March 15, 2018 **$109.84**

Paid 3/6

Pay from phone	Pay on the Web	Questions:
#PMT (#768)	At vzw.com/mybusinessaccount	1.800.922.0204 or *611 from your phone

verizon

Bill Date	February 23, 2018
Account Number	742120929-00001
Invoice Number	9802301936

COUNTY OF BREVARD
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

Total Amount Due by March 15, 2018

Make check payable to Verizon Wireless.
Please return this remit slip with payment.

$109.84

$ 109.84

PO BOX 660108
DALLAS, TX 75266-0108

980230193601074212092900001000000109840000000109843

Goudelock, Margaret

From: customerserviceb2b@verizonwireless.com
Sent: Tuesday, March 6, 2018 2:07 PM
To: Goudelock, Margaret
Subject: Thank You for Your Payment

Dear Customer,

Thank you for your payment. Here are the details of your payment confirmation.

Account Number: 742120929-00001
Date: March 6, 2018
Payment Amount: $109.84
Payment Method: Visa ending in 4809

You can manage your account online in My Business Account (https://b2b.verizonwireless.com).

COPY

March 19, 2018

Danielle Stern
District 5 Commission Office
490 Centre Lake Drive NE Suite 175
Palm Bay, FL 32907

Dear Bank of America Customer Service:

Our office will be disputing a charge on our credit card account due to over-billing.

Florida Today circulation and Gannett services used this credit card number to open an additional account when our office tried to take advantage of a promotional sale for service event last month. Instead of honoring the sales price on the promotion for the District 5 Commission office, the name on the credit card Danielle Stern, was used instead to issue a second charge. The charge I am disputing occurred on February 14th, and I am requesting that the amount of $9.61 be declined. I have already informed Gannett via online customer service messaging to discontinue the second account and Danielle Stern confirmed that online access is no longer available.

Gannett has questionable policies for their media delivery services, both for home delivery and for online services. Once a subscription expires, Gannett continues to deliver newspapers to the door and bill for 60 days afterwards instead of letting subscriptions just expire. When you call their customer service center via phone, you are on perpetual hold or are requested to leave a number for a call back. Call backs often occur after normal business hours and their repeat billing services are automatic if you are foolish enough to enter a credit card. Gannett was paid via credit card last summer in order to resolve just such a daily paper delivery dispute.

Thank you for your prompt attention in this matter.

Sincerely,

Margaret Goudelock
for Danielle Stern

EHIBIT "B"
BREVARD COUNTY PURCHASING CARD MONTHLY RECONCILIATION REPORT

Cardholder's Name: Danielle Stern Cardholder Phone Ext: 321 253-6611 Personnel #: 11006140

Cardholder's Department: D.5 Commission Closing Date: April 4, 2018
(enter closing date of statement)

Date Purchased or Ordered	Date Received	Vendor Name	Description of Item Purchased	Amount Billed (indicate "Q" for quoted items)	Fund (4 digits)	Cost Center (6 digits)	GL Account # (7 digits)	Internal / Work Order # (6 or 7 digits)
03/05	03/06	Gannett Media	FL Today online	$ 4.99	0001	200050	5540000	
03/06	03/07	Culligan Water	water delivery	9.50		200050	5529000	
03/07	03/08	Verizon Wireless	D.5 cell phones	109.84		200090	5410100	

ADD'L PAGES SUBTOTAL ______

GRAND TOTAL (ALL PAGES) ______ (must agree to figure below)

SUMMARY OF FUND / COST CENTERS /G.L. ACCOUNT TO BILL

FUND	COST CTR	GL ACCT	INT. ORDER	Amount
0001	200050	5540000		$ 4.99
	200050	5529000		9.50
	200090	5410100		109.84

(must agree to above figure) TOTAL $124.33

I (Cardholder) have complied with the Purchase Card Administrative Order (AO-41) and have Retained all required approvals for restrictive Uses and a quote log for purchases $750 and over.

[signature] 4/13/18
Signature of Cardholder / Date

[signature] 4/13/18
Signature of Approving Official / Date

Bank of America

DANIELLE L STERN
FL BREVARD COUNTY BOC
XXXX-XXXX-XXXX-**4809**
March 05, 2018 - April 04, 2018

Purchasing Card

Cardholder Activity

Account Information

Mail Billing Inquiries to:
BANKCARD CENTER
PO BOX 982238
EL PASO, TX 79998-2238

Customer Service:
1.888.449.2273 24 Hours

TTY Hearing Impaired:
1.800.222.7365 24 Hours

Outside the U.S.:
1.509.353.6656 24 Hours

For Lost or Stolen Card:
1.888.449.2273 24 Hours

Payment Information

Statement Date	04/04/18
Credit Limit	$2,000
Cash Limit	$0
Days in Billing Cycle	31
Total Activity	$124.33

THIS IS NOT A BILL - DO NOT PAY

Account Summary

Credits	$0.00
Cash	$0.00
Purchases	$124.33
Other Debits	$0.00
Cash Fees	$0.00
Other Fees	$0.00
Total Activity	$124.33

Accounting Code: 0001/200050

Transactions

Posting Date	*Transaction Date*	*Description*		*Reference Number*	*MCC*	*Charge*	*Credit*
03/06	03/05	GAN*1028FLORTODAYCIRC	888-426-0491 IN	24692168064100015334252	5968	4.99	
03/07	03/06	CULLIGAN WATER PROD 2	386-274-5036 FL	24493988065207364200074	5099	9.50	
03/08	03/07	VZWRLSS*MY VZ VB P	800-922-0204 FL	24692168066100698264832	4814	109.84	

0000000 0000000 0000000 4715290017764809

Account Number: XXXX-XXXX-XXXX-**4809**
March 05, 2018 - April 04, 2018

BANK OF AMERICA
PO BOX 15731
WILMINGTON, DE 19886-5731

DANIELLE L STERN **N0002210
FL BREVARD COUNTY BOC
DISTRICT 5 COMMISSION OFFICE
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

Total Activity **$124.33**

Danielle Stern 4/13/18
Cardholder Signature Date

[illegible] 4/13/18
Manager Signature Date

:5499900 11:000500 17764809"

verizon

PO BOX 4001
ACWORTH, GA 30101

Manage Your Account	Account Number	Date Due
www.vzw.com/mybusinessaccount	742120929-00001	04/15/18

Change your address at
http://sso.verizonenterprise.com

Invoice Number	9804144916

0013307 02 AB 0.405 **AUTO T1 0 2393 32907-117725 -C07-P13320-I1

COUNTY OF BREVARD
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

Quick Bill Summary

Feb 24 – Mar 23

Previous Balance *(see back for details)*	$109.84
Payment – Thank You	–$109.84
Balance Forward	**$.00**
Monthly Charges	$107.18
Usage and Purchase Charges	
Voice	$.00
Messaging	$.00
Data	$.00
Surcharges and Other Charges & Credits	$2.66
Taxes, Governmental Surcharges & Fees	$.00
Total Current Charges	**$109.84**

Total Charges Due by April 15, 2018 **$109.84**

Pay from phone	Pay on the Web	Questions:
#PMT (#768)	At vzw.com/mybusinessaccount	1.800.922.0204 or *611 from your phone

verizon

COUNTY OF BREVARD
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907–1177

Bill Date	March 23, 2018
Account Number	742120929-00001
Invoice Number	9804144916

Total Amount Due by April 15, 2018

Make check payable to Verizon Wireless.
Please return this remit slip with payment.

$109.84

$ ☐☐☐.☐☐

PO BOX 660108
DALLAS, TX 75266–0108

9804144916010742120929000010000000109840000000109843

Culligan of Melbourne

771 NORTH DRIVE
MELBOURNE, FL 32934
(321) 255-5562 (321) 636-1344
bmorissette@culliganmelbourne.com
www.culligancentralflorida.com

IF PAYING BY CREDIT CARD, PLEASE CHECK CORRECT CARD AND FILL OUT BELOW

[ ] PLEASE CHECK BOX TO ENROLL IN AUTOMATIC BILL PAYMENT

CARD NUMBER	V. CODE
SIGNATURE	EXP. DATE

DATE	PAY THIS AMOUNT	ACCOUNT NUMBER
02/26/2018	$9.50	268847

INVOICE NUMBER: 78956

AMOUNT PAID $

ADDRESSEE:
DISTRICT 5 COMMISSIONER
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

REMIT PAYMENT TO:
CULLIGAN WATER PRODUCTS
771 NORTH DR
MELBOURNE, FL 32934-9282

INVOICE
RETURN THIS TOP PORTION WITH YOUR PAYMENT

ACCOUNT NUMBER	SALES ID	ORDER NUMBER	PURCHASE ORDER NUMBER	SHIP VIA	TERMS	NET DUE IN 10 DAYS
268847	EM		4500083054	COMPANY TRUCK	INVOICE NUMBER 78956	INVOICE DATE 02/26/2018

DATE SHIPPED	QUANTITY ORDERED	QUANTITY SHIPPED	ITEM NUMBER	DESCRIPTION	UNIT PRICE	DISCOUNT	NET AMOUNT
				Tick 800636406 Date 02/14/2018			
				P/O Number: 4500083054			
02/14	2.00	2.00		1/2 LITER (CASE)	4.750		9.50
02/14	1.00	1.00		SERVICE FEE	0.000		
				End of Ticket 800636406			

Pay on line at www.culligancentralflorida.com Please call our office at 321-255-5562 if you need any assistance.

A LATE PAYMENT FINANCE CHARGE OF PER MONTH MAY BE APPLIED ON BALANCES AFTER DAYS

DELIVER TO

TOTAL	9.50
SALES TAX	
FREIGHT/DELIVERY CHARGES	
AMOUNT DUE	$9.50

683

ORIGINAL INVOICE RETAIN BOTTOM PORTION FOR YOUR RECORDS

26884

EHIBIT "B"
BREVARD COUNTY PURCHASING CARD MONTHLY RECONCILIATION REPORT

Cardholder's Name: Danielle Stern **Cardholder Phone Ext:** 321-253-6611 **Personnel #:** 11006140

Cardholder's Department: D5 Commissioner **Closing Date:** May 4, 2018

(enter closing date of statement)

Date Purchased or Ordered	Date Received	Vendor Name	Description of Item Purchased	Amount Billed (indicate "Q" for quoted items)	Fund (4 digits)	Cost Center (6 digits)	GL Account # (7 digits)	Internal / Work Order # (6 or 7 digits)
4/11	4/12	Culligan Water	Water Delivery	$23.75	0001	200050	5529000	

ADD'L PAGES SUBTOTAL ______

GRAND TOTAL (ALL PAGES) ______ (must agree to figure below)

SUMMARY OF FUND / COST CENTERS /G.L. ACCOUNT TO BILL

FUND	COST CTR	GL ACCT	INT. ORDER	Amount
0001	200050	5529000		$23.75

(must agree to above figure) **TOTAL** $23.75

I (Cardholder) have complied with the Purchase Card Administrative Order (AO-41) and have retained all required approvals for restrictive uses and quote log for purchases with a value in excess of $1000 and an expected life of more than one -Year such as automobiles and furniture; and computer equipment valued in excess of $750.

Danielle Stern 5/16/18

Signature of Cardholder / Date

Signature of Approving Official / Date

Bank of America

DANIELLE L STERN
FL BREVARD COUNTY BOC
XXXX-XXXX-XXXX-**4809**
April 05, 2018 - May 04, 2018

Purchasing Card

Cardholder Activity

Account Information

Mail Billing Inquiries to:
BANKCARD CENTER
PO BOX 982238
EL PASO, TX 79998-2238

Customer Service:
1.888.449.2273 24 Hours

TTY Hearing Impaired:
1.800.222.7365 24 Hours

Outside the U.S.:
1.509.353.6656 24 Hours

For Lost or Stolen Card:
1.888.449.2273 24 Hours

Payment Information

Statement Date	05/04/18
Credit Limit	$2,000
Cash Limit	$0
Days in Billing Cycle	30
Total Activity	$23.75

THIS IS NOT A BILL - DO NOT PAY

Account Summary

Credits	$0.00
Cash	$0.00
Purchases	$23.75
Other Debits	$0.00
Cash Fees	$0.00
Other Fees	$0.00
Total Activity	$23.75

Accounting Code: 0001/200050

Important Messages

** ATTENTION ** Your account is in dispute for $9.50.

Transactions

Posting Date	Transaction Date	Description	Reference Number	MCC	Charge	Credit
04/12	04/11	CULLIGAN WATER PROD 2 386-274-5036 FL	24493988101207364800069	5099	23.75	

Disputed Transactions

Posting Date	Transaction Date	Description	Reference Number	Amount
03/07	03/06	CULLIGAN WATER PROD 2 386-274-5036 FL US 386-274-5036	24493988065207364200074	9.50

0000000 0000000 0000000 4715290017764809

Account Number: XXXX-XXXX-XXXX-**4809**
April 05, 2018 - May 04, 2018

Total Activity **$23.75**

BANK OF AMERICA
PO BOX 15731
WILMINGTON, DE 19886-5731

Cardholder Signature Date 5/16/18

Manager Signature Date

DANIELLE L STERN **N0001635
FL BREVARD COUNTY BOC
DISTRICT 5 COMMISSION OFFICE
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

⑆5499900116⑆00050017764809⑈

989

Culligan
of Melbourne

771 NORTH DRIVE
MELBOURNE, FL 32934
(321) 255-5562 (321) 636-1344
bmorissette@culliganmelbourne.com
www.culligancentralflorida.com

IF PAYING BY CREDIT CARD, PLEASE CHECK CORRECT CARD AND FILL OUT BELOW

VISA | MasterCard | American Express | Discover

PLEASE CHECK BOX TO ENROLL IN AUTOMATIC BILL PAYMENT

CARD NUMBER	V. CODE
SIGNATURE	EXP. DATE

DATE	PAY THIS AMOUNT	ACCOUNT NUMBER
03/28/2018	$23.75	268847

PAY BY DATE: APR 15

AMOUNT PAID $ 23.75

ADDRESSEE:

00179
DISTRICT 5 COMMISSIONER
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

REMIT PAYMENT TO:

CULLIGAN WATER PRODUCTS
771 NORTH DR
MELBOURNE, FL 32934-9282

Just a reminder your account is past due, if payment has been made we thank you.

BALANCE FORWARD

RETURN THIS TOP PORTION WITH YOUR PAYMENT

BRANCH ID: ME-01
CUSTOMER: DISTRICT 5 COMMISSIONER

DATE	QUANTITY	DESCRIPTION	REF	AMOUNT	BALANCE
				PREVIOUS BALANCE:	$19.00
03/07/2018	-1.00	Payment	EFT	-9.50	9.50
03/14/2018	3.00	1/2 LITER (CASE)	800638644	14.25	23.75
03/14/2018	1.00	SERVICE FEE	800638644	0.00	23.75

confirm #
04941O

Paid 4/11/2018 $23.75

Pay on line at www.culligancentralflorida.com Please call our office at 321-255-5562 if you need any assistance.

Balance Due $23.75

ACCOUNTS ARE SUBJECT TO A LATE PAYMENT FINANCE CHARGE

FINANCE CHARGE SCHEDULE

OVER $	PERIODIC RATE	ANNUAL RATE	PLEASE PAY NEW BALANCE BEFORE
3	1.50%	18.00 %	APR 15
TO 3	0.00%	0.00 %	MIN CHARGE 0.50

0-30	31-60	61-90	Over 90
14.25	9.50	0.00	0.00

CULLIGAN WATER PRODUCTS
771 NORTH DRIVE
MELBOURNE, FL 32934

(321) 255-5562 (321) 636-1344

SERVICE ADDRESS:
DISTRICT 5 COMMISSIONER
STE 175
490 CENTRE LAKE DRIVE NE
PALM BAY FL 32907

Next Deliveries: 04/11/18 05/09/18 06/06/18 07/04/18

HAVE A HAPPY EASTER
REVERSE OSMOSIS RENTAL SPECIAL
FIRST THREE MONTHS $9.95
CALL OFFICE FOR DETAILS

STATEMENT DATE	ACCOUNT NUMBER	NAME
03/28/2018	268847	DISTRICT 5 COMMISSIONER

268847

March 19, 2018

Danielle Stern
District 5 Commission Office
490 Centre Lake Drive NE Suite 175
Palm Bay, FL 32907

Dear Bank of America Customer Service:

Our office will be disputing a charge on our credit card account due to over-billing.

Florida Today circulation and Gannett services used this credit card number to open an additional account when our office tried to take advantage of a promotional sale for service event last month. Instead of honoring the sales price on the promotion for the District 5 Commission office, the name on the credit card Danielle Stern, was used instead to issue a second charge. The charge I am disputing occurred on February 14th, and I am requesting that the amount of $9.61 be declined. I have already informed Gannett via online customer service messaging to discontinue the second account and Danielle Stern confirmed that online access is no longer available.

Gannett has questionable policies for their media delivery services, both for home delivery and for online services. Once a subscription expires, Gannett continues to deliver newspapers to the door and bill for 60 days afterwards instead of letting subscriptions just expire. When you call their customer service center via phone, you are on perpetual hold or are requested to leave a number for a call back. Call backs often occur after normal business hours and their repeat billing services are automatic if you are foolish enough to enter a credit card. Gannett was paid via credit card last summer in order to resolve just such a daily paper delivery dispute.

Thank you for your prompt attention in this matter.

Sincerely,

Margaret Goudelock
for Danielle Stern

EHIBIT "B"
BREVARD COUNTY PURCHASING CARD MONTHLY RECONCILIATION REPORT

PAGE ___ of ___

Cardholder's Name: Danielle Stern **Cardholder Phone Ext:** 321-253-6611 **Personnel #:** 11006140

Cardholder's Department: D5 Commissioner **Closing Date:** June 4th, 2018
(enter closing date of statement)

Date Purchased or Ordered	Date Received	Vendor Name	Description of Item Purchased	Amount Billed (indicate "Q"for quoted items)	Fund (4 digits)	Cost Center (6 digits)	GL Account # (7 digits)	Internal / Work Order # (6 or 7 digits)
05/04	05/07	Culligan Water	Water Delivery	$9.50	0001	200050	5529000	
05/05	05/07	Verizon Wireless	Cell Service	$109.74	0001	200050	5410100	
05/25	05/28	Office Depot	Office Furniture/Chairs	$264.92	0001	200050	5511400	
02/14	05/31	Florida Today	Item was in dispute. Amount credited	(-$9.61)	0001	200050	5540000	
05/25	05/28	Office Depot	Office Supplies	$45.77	0001	200050	5510000	

ADD'L PAGES SUBTOTAL ______

(must agree to figure below)

GRAND TOTAL (ALL PAGES) $420.32

SUMMARY OF FUND / COST CENTERS /G.L. ACCOUNT TO BILL

FUND	COST CTR	GL ACCT	INT. ORDER	Amount
0001	200050	5529000		$9.50
0001	200050	5410100		$109.74
0001	200050	5510000		$45.77
0001	200050	5511400		$264.92
0001	200050	5540000		-$9.61

(must agree to above figure) **TOTAL** $420.32

I (Cardholder) have complied with the Purchase Card Administrative Order (AO-41) and have retained all required approvals for restrictive uses and quote log for purchases with a value in excess of $1000 and an expected life of more than one -Year such as automobiles and furniture, and computer equipment valued in excess of $750.

Danielle Stern 6/27/18
Signature of Cardholder / Date

6/27/18
Signature of Approving Official / Date

EHIBIT "B"
BREVARD COUNTY PURCHASING CARD MONTHLY RECONCILIATION REPORT

PAGE ___ of ___

Cardholder's Name: Danielle Stern **Cardholder Phone Ext:** 321-253-6611 **Personnel #:** 11006140

Cardholder's Department: D5 Commissioner **Closing Date:** June 4th, 2018

(enter closing date of statement)

Date Purchased or Ordered	Date Received	Vendor Name	Description of Item Purchased	Amount Billed (indicate "Q" for quoted items)	Fund (4 digits)	Cost Center (6 digits)	GL Account # (7 digits)	Internal / Work Order # (6 or 7 digits)
05/04	05/07	Culligan Water	Water Delivery	$9.50	0001	200050	5529000	
05/05	05/07	Verizon Wireless	Cell Service	$109.74	0001	200050	5410100	
05/25	05/28	Office Depot	Office Supplies	$310.69	0001	200050	5510000	
02/14	05/31	Florida Today	Item was in dispute. Amount credited	(-$9.61)	0001	200050	5540000	

ADD'L PAGES SUBTOTAL ______

GRAND TOTAL (ALL PAGES) $420.32

(must agree to figure below)

SUMMARY OF FUND / COST CENTERS /G.L. ACCOUNT TO BILL

FUND	COST CTR	GL ACCT	INT. ORDER	Amount
0001	200050	5529000		$420.32
0001	200050	5410100		
0001	200050	5510000		
0001	200050	5540000 (Credit)		

(must agree to above figure) **TOTAL** $420.32

I (Cardholder) have complied with the Purchase Card Administrative Order (AO-41) and have retained all required approvals for restrictive uses and quote log for purchases with a value in excess of $1000 and an expected life of more than one -Year such as automobiles and furniture; and computer ~~equipment~~ valued in excess of $750.

Signature of Cardholder / Date

Signature of Approving Official / Date

Bank of America
Commercial Claims Department
PO Box 53101
Phoenix, AZ 85072-3101

Bank of America

Danielle L Stern 0002007
District 5 Commission Office
490 Centre Lake Dr Ne Ste 175
Palm Bay, FL 32907-1177

May 31, 2018

Account number ending in: XXXX-XXXX-XXXX-4809
Case number: 9765652

Danielle L Stern:

We've completed our review of your claim and have credited your account for $9.61 for the disputed charge(s).

What you need to know

- This credit is permanent and we'll also be reversing any finance charges and fees you incurred as a result of the claim(s).
- The adjustment(s) will appear on your monthly statement.
- We now consider your dispute resolved and no further action is required from you at this time.
- Please note, if we receive additional information that would cause us to reopen this case, you may be contacted again.

Questions?

We appreciate the opportunity to serve your financial needs. If you have any questions, please call us at 866.601.9490, Monday through Friday, 9 a.m. to 7 p.m. Eastern.

/6040/0002007/001000/001407/BK5J51/000/1861/BOA/BOACBP

EHIBIT "B"

PAGE ___ of ___

BREVARD COUNTY PURCHASING CARD MONTHLY RECONCILIATION REPORT

Cardholder's Name: Danielle Stern **Cardholder Phone Ext:** 321-253-6611 **Personnel #:** 11006140

Cardholder's Department: D5 Commissioner **Closing Date:** June 4th, 2018

(enter closing date of statement)

Date Purchased or Ordered	Date Received	Vendor Name	Description of Item Purchased	Amount Billed (indicate "Q" for quoted items)	Fund (4 digits)	Cost Center (6 digits)	GL Account # (7 digits)	Internal / Work Order # (6 or 7 digits)
05/04	05/07	Culligan Water	Water Delivery	$9.50	0001	200050	5529000	
05/05	05/07	Verizon Wireless	Cell Service	$109.74	0001	200050	5410100	
05/25	05/28	Office Depot	Office Supplies	$310.69	0001	200050	5521100	

ADD'L PAGES SUBTOTAL ______

GRAND TOTAL (ALL PAGES) $420.32

(must agree to figure below)

SUMMARY OF FUND / COST CENTERS /G.L. ACCOUNT TO BILL

FUND	COST CTR	GL ACCT	INT. ORDER	Amount
0001	200050	5529000		$420.32
0001	200050	5410100		
0001	200050	5521100		

(must agree to above figure) **TOTAL** $420.32

I (Cardholder) have complied with the Purchase Card Administrative Order (AO-41) and have retained all required approvals for restrictive uses and quote log for purchases with a value in excess of $1000 and an expected life of more than one -Year such as automobiles and furniture; and computer equipment valued in excess of $750.

Danielle Stern 6/13/18
Signature of Cardholder / Date

6/13/18
Signature of Approving Official / Date

Bank of America

DANIELLE L STERN
FL BREVARD COUNTY BOC
XXXX-XXXX-XXXX-4809
May 05, 2018 - June 04, 2018

Purchasing Card — Cardholder Activity

Account Information

Mail Billing Inquiries to:
BANKCARD CENTER
PO BOX 982238
EL PASO, TX 79998-2238

Customer Service:
1.888.449.2273 24 Hours

TTY Hearing Impaired:
1.800.222.7365 24 Hours

Outside the U.S.:
1.509.353.6656 24 Hours

For Lost or Stolen Card:
1.888.449.2273 24 Hours

Payment Information

Statement Date	06/04/18
Credit Limit	$2,000
Cash Limit	$0
Days in Billing Cycle	31
Total Activity	$420.32

THIS IS NOT A BILL - DO NOT PAY

Account Summary

Credits	-$9.61
Cash	$0.00
Purchases	$429.93
Other Debits	$0.00
Cash Fees	$0.00
Other Fees	$0.00
Total Activity	$420.32

Accounting Code: 0001/200050

Transactions

Posting Date	Transaction Date	Description	Reference Number	MCC	Charge	Credit
05/07	05/05	VZWRLSS*MY VZ VB P 800-922-0204 FL	24692168125100290876545	4814	109.74	
05/07	05/04	CULLIGAN DAYTON 386-2745036 FL	24071058125627196351631	5074	9.50	
05/28	05/25	OFFICE DEPOT #2703 PALM BAY FL	24445748146100253879852	5943	310.69	
05/31	02/14	Claim ADJ/GAN*1028FLORTODAYCIRC	74024418151887151000161	5968		9.61

Resolved Disputed Transactions

Posting Date	Transaction Date	Description	Resolution Identifier	Reference Number	Amount
03/07	03/06	CULLIGAN WATER PROD 2 386-274-5036 FL US 386-274-5036	M	24493988065207364200074	9.50

0000000 0000000 0000000 4715290017764809

Account Number: XXXX-XXXX-XXXX-4809
May 05, 2018 - June 04, 2018

Total Activity **$420.32**

Cardholder Signature   Date 6/12/18

Manager Signature   Date 6/13/18

BANK OF AMERICA
PO BOX 15731
WILMINGTON, DE 19886-5731

DANIELLE L STERN **N0005947
FL BREVARD COUNTY BOC
DISTRICT 5 COMMISSION OFFICE
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

⑆549990011⑆000500177648094⑈

Bank of America

DANIELLE L STERN
FL BREVARD COUNTY BOC
XXXX-XXXX-XXXX-4809
May 05, 2018 - June 04, 2018

Resolved Disputed Transactions

Posting Date	*Transaction Date*	*Description*	*Resolution Identifier*	*Reference Number*	*Amount*
02/15	02/14	GAN*1028FLORTODAYCIRC 888-426-0491 IN US	C	24692168045100118499121	9.61

Resolution Identifier: C = Resolved In favor of Client M = Resolved In favor of Merchant

694

Verizon

Print Close

Print Date : 5/4/2018

Thank you for your payment

Transaction Id - 283460157

Billing Account	**Payment amount**	**Payment method**
742120929-00001	$109.74	VISA

569 verizon

PO BOX 4001
ACWORTH, GA 30101

Manage Your Account	Account Number	Date Due
www.vzw.com/mybusinessaccount	742120929-00001	Past Due

Change your address at
http://sso.verizonenterprise.com

Invoice Number	9805991806

0013406 02 AB 0.405 **AUTO T1 0 2493 32907-117725 -C07-P13419-I1

COUNTY OF BREVARD
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

Quick Bill Summary

Mar 24 – Apr 23

Previous Balance *(see back for details)*	$109.84
No Payment Received	$.00
Balance Forward Due Immediately	**$109.84**
Monthly Charges	$107.18
Usage and Purchase Charges	
Voice	$.00
Messaging	$.00
Data	$.00
Surcharges and Other Charges & Credits	$2.56
Taxes, Governmental Surcharges & Fees	$.00
Total Current Charges Due by May 15, 2018	**$109.74**

Total Amount Due **$219.58**

paid 5/4/18 109.74

Our records indicate your account is past due. Please send payment now to avoid service disruption.

Pay from phone	Pay on the Web	Questions:
#PMT (#768)	At vzw.com/mybusinessaccount	1.800.922.0204 or *611 from your phone

verizon

Bill Date	April 23, 2018
Account Number	742120929-00001
Invoice Number	9805991806

COUNTY OF BREVARD
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

Total Amount Due

Make check payable to Verizon Wireless.
Please return this remit slip with payment.

$219.58

$___.__

PO BOX 660108
DALLAS, TX 75266-0108

980599180601074212092900001000000109740000002195 83

969

Online Bill Pay For Culligan of Melbourne

Account Selection **Account Detail** **Log Out**

Thank You For Your Payment.

Payments usually post within two business days.
Please Print This Page For Your Records.

Transaction Details	
Date	5/4/2018 7:56:44 AM
Visa Card	...4809
Total Amount	$9.50
Applied To Account	268847
Result	APPROVED
Authorization Code	075773

697

Culligan of Melbourne

771 NORTH DRIVE
MELBOURNE, FL 32934
(321) 255-5562 (321) 636-1344
bmorissette@culliganmelbourne.com
www.culligancentralflorida.com

IF PAYING BY CREDIT CARD, PLEASE CHECK CORRECT CARD AND FILL OUT BELOW

☐ VISA ☐ MasterCard ☐ American Express ☐ Discover ☐ PLEASE CHECK BOX TO ENROLL IN AUTOMATIC BILL PAYMENT

CARD NUMBER	V. CODE
SIGNATURE	EXP. DATE

DATE	PAY THIS AMOUNT	ACCOUNT NUMBER
04/26/2018	$9.50	268847

PAY BY DATE: MAY 15 AMOUNT PAID $

ADDRESSEE:

001670
DISTRICT 5 COMMISSIONER
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

REMIT PAYMENT TO:

CULLIGAN WATER PRODUCTS
771 NORTH DR
MELBOURNE, FL 32934-9282

BALANCE FORWARD

RETURN THIS TOP PORTION WITH YOUR PAYMENT

BRANCH ID: ME-01
CUSTOMER: DISTRICT 5 COMMISSIONER

PREVIOUS BALANCE: $23.75

DATE	QUANTITY	DESCRIPTION	REF	AMOUNT	BALANCE
04/11/2018	2.00	1/2 LITER (CASE)	800640882	9.50	33.25
04/11/2018	1.00	SERVICE FEE	800640882	0.00	33.25
04/12/2018	-1.00	Payment	EFT	-23.75	9.50

Paid 5/14 #9.50

Pay on line at www.culligancentralflorida.com Please call our office at 321-255-5562 if you need any assistance.

Balance Due $9.50

ACCOUNTS ARE SUBJECT TO A LATE PAYMENT FINANCE CHARGE

FINANCE CHARGE SCHEDULE

OVER / TO $	PERIODIC RATE	ANNUAL RATE	PLEASE PAY NEW BALANCE BEFORE
OVER $ 3	1.50 %	18.00 %	MAY 15
TO 5	0.00 %	0.00 %	MIN CHARGE 0.50

0-30	31-60	61-90	Over 90
9.50	0.00	0.00	0.00

CULLIGAN WATER PRODUCTS
771 NORTH DRIVE
MELBOURNE, FL 32934

(321) 255-5562 (321) 636-1344

SERVICE ADDRESS:

DISTRICT 5 COMMISSIONER
STE 175
490 CENTRE LAKE DRIVE NE
PALM BAY FL 32907

Next Deliveries: 05/09/18 06/06/18 07/04/18 08/01/18

STAY HYDRATED DRINK CULLIGAN WATER PICK UP AT OUR DRIVE
THRU WINDOW 1/2 LITERS $4.25 PER CASE
5-GALLON DRINKING WATER $4.95 PURIFIED WATER $5.20
SPRING WATER $6.45 3-GALLON DRINKING WATER $4.45

STATEMENT DATE	ACCOUNT NUMBER	NAME
04/26/2018	268847	DISTRICT 5 COMMISSIONER

268847

Office DEPOT
OfficeMax

PALM BAY - (321) 723-7079
05/25/2018 1:43 PM

2TVTA53PAU55E6B8F

SALE		2703-1-6408-527997-18.5.2
231009 CHR,CALDWELL,B	229.99S	
Clearance	-115.06	
You Pay		**114.93S**
494065 CHAIR, EC620,	249.99S	
Instant Savings	-100.00	
You Pay		**149.99S**
723832 NOTE,POSTIT,SS		
2 @ 16.39	32.78	
You Pay		**32.78S**
508869 WRSTRST,FOAM,B		12.99 S
Subtotal:		310.69
Total:		310.69
Visa 4809:		310.69

AUTH CODE 083951
TDS Chip Read
AID A0000000031010 VISA CREDIT
TVR 0080088000
CVS No Signature Required

GARY STERN 1468112915
Get 2% back in rewards on your
favorite supplies & more - including
furniture and technology. Plus
next-day rewards on select offers,
rewards for recycling and more
Visit officedepot.com/rewards
Tax Exemption Number 27327334
Total Savings:
$215.06

****

WE WANT TO HEAR FROM YOU!

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

Visit www.officedepot.com/feedback
and enter the survey code below:
Q560 YZYG 9ERZ

****

****

Introducing
our BizBox services
with the team and tools to help you
business succeed. Our specialists will

698

EHIBIT "B"
BREVARD COUNTY PURCHASING CARD MONTHLY RECONCILIATION REPORT

Cardholder's Name: Danielle Stern **Cardholder Phone Ext:** 321-253-6611 **Personnel #:** 11006140

Cardholder's Department: D5 Commissioner **Closing Date:** June 4th, 2018 (enter closing date of statement)

2018 JUN 22 PM 1:30

BREVARD CO. FINANCE DEPT

Date Purchased or Ordered	Date Received	Vendor Name	Description of Item Purchased	Amount Billed (indicate "Q" for quoted items)	Fund (4 digits)	Cost Center (6 digits)	GL Account # (7 digits)	Internal / Work Order # (6 or 7 digits)
05/04	05/07	Culligan Water	Water Delivery	$9.50 ✓	0001	200050	5529000	
05/05	05/07	Verizon Wireless	Cell Service	$109.74 ✓	0001	200050	5410100	
05/25	05/28	Office Depot	Office Supplies	$310.69 ✓	0001	200050	~~5521100~~ 5510000 5511400	

ADD'L PAGES SUBTOTAL ______

GRAND TOTAL (ALL PAGES) $420.32 (must agree to figure below)

I (Cardholder) have complied with the Purchase Card Administrative Order (AO-41) and have retained all required approvals for restrictive uses and quote log for purchases with a value in excess of $1000 and an expected life of more than one -Year such as automobiles and furniture; and computer equipment valued in excess of $750.

SUMMARY OF FUND / COST CENTERS /G.L. ACCOUNT TO BILL

FUND	COST CTR	GL ACCT	INT. ORDER	Amount
0001	200050	5529000		$420.32
0001	200050	5410100		
0001	200050	~~5521100~~ BP 5510000	45.77	
0001	200050	5511400	264.92	

(must agree to above figure) **TOTAL** $420.32

BP 6/25/18

Danielle Stern 6/13/18
Signature of Cardholder / Date

6/13 ✓
Signature of Approving Official / Date

EHIBIT "B"
BREVARD COUNTY PURCHASING CARD MONTHLY RECONCILIATION REPORT

PAGE ___ of ___

Cardholder's Name: Danielle Stern **Cardholder Phone Ext:** 321-253-6611 **Personnel #:** 11006140

Cardholder's Department: D5 Commissioner **Closing Date:** June 4th, 2018
(enter closing date of statement)

Date Purchased or Ordered	Date Received	Vendor Name	Description of Item Purchased	Amount Billed (indicate "Q" for quoted items)	Fund (4 digits)	Cost Center (6 digits)	GL Account # (7 digits)	Internal / Work Order # (6 or 7 digits)
05/04	05/07	Culligan Water	Water Delivery	$9.50	0001	200050	5529000	
05/05	05/07	Verizon Wireless	Cell Service	$109.74	0001	200050	5410100	
05/25	05/28	Office Depot	Office Supplies	$310.69	0001	200050	5510000	
02/14	05/31	Florida Today	Item was in dispute. Amount credited	(-$9.61)	0001	200050	5540000	

ADD'L PAGES SUBTOTAL ________

GRAND TOTAL (ALL PAGES) $420.32

(must agree to figure below)

I (Cardholder) have complied with the Purchase Card Administrative Order (AO-41) and have retained all required approvals for restrictive uses and quote log for purchases with a value in excess of $1000 and an expected life of more than one -Year such as automobiles and furniture; and computer equipment valued in excess of $750.

SUMMARY OF FUND / COST CENTERS /G.L. ACCOUNT TO BILL

FUND	COST CTR	GL ACCT	INT. ORDER	Amount
0001	2C0050	5529000		~~$420.32~~ 9.50
0001	2C0050	5410100		109.74
~~0001~~	~~2C0050~~	~~5510000~~		45.77
~~0001~~	~~2C0050~~	~~5540000 (Credit)~~		264.92
0001	200050	5510000		-9.61
0001	200050	5511400		
0001	200050	5540000		

(must agree to above figure)

TOTAL ~~$420.32~~ 420.32

Signature of Cardholder / Date

Signature of Approving Official / Date

EHIBIT "B"
BREVARD COUNTY PURCHASING CARD MONTHLY RECONCILIATION REPORT

PAGE ___ of ___

Cardholder's Name: Danielle Stern **Cardholder Phone Ext:** 321-253-6611 **Personnel #:** 11006140

Cardholder's Department: D5 Commissioner **Closing Date:** July 4th, 2018

(enter closing date of statement)

Date Purchased or Ordered	Date Received	Vendor Name	Description of Item Purchased	Amount Billed (indicate "Q" for quoted items)	Fund (4 digits)	Cost Center (6 digits)	GL Account # (7 digits)	Internal / Work Order # (6 or 7 digits)
06/05	06/07	Culligan Water	Water Delivery	$19.00	0001	200050	5529000	
06/14	06/15	Verizon Wireless	Cell Service	$219.58	0001	200050	5410100	
06/11	06/13	Office Depot	Office Supplies/ Garbage bags	$16.29	0001	200050	5510000	

ADD'L PAGES SUBTOTAL ______

GRAND TOTAL (ALL PAGES) $254.87 (must agree to figure below)

I (Cardholder) have complied with the Purchase Card Administrative Order (AO-41) and have retained all required approvals for restrictive uses and quote log for purchases with a value in excess of $1000 and an expected life of more than one -Year such as automobiles and furniture; and computer equipment valued in excess of $750

SUMMARY OF FUND / COST CENTERS /G.L. ACCOUNT TO BILL

FUND	COST CTR	GL ACCT	INT. ORDER	Amount
0001	200050	5529000		$19.00
0001	200050	5410100		$219.58
0001	200050	5510000		$16.29

(must agree to above figure) **TOTAL** $254.87

7/10/18
Signature of Cardholder / Date

7/10/18
Signature of Approving Official / Date

BCC-223 –Word Document Revised 8/18/2017

mailed 7/10/18 gr

702 Office DEPOT
OfficeMax

PALM BAY - (321) 723-7079
06/11/2018 1:48 PM

2TVTQ55PAU35X64CF

SALE		2703-1-7602-648257-18.5.2
40544	BAG,OD,33GAL,B	16.29 S
	Subtotal:	16.29
	Total:	16.29
	Visa 4809:	16.29

AUTH CODE 001501
TDS Chip Read
AID A0000000031010 VISA CREDIT
TVR 0080088000
CVS No Signature Required

GARY STERN 1468112915
Get 2% back in rewards on your favorite supplies & more - including furniture and technology. Plus, next-day rewards on select offers, rewards for recycling and more
Visit officedepot.com/rewards

Tax Exemption Number 27327334
Shop online at www.officedepot.com
****

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

Visit www.officedepot.com/feedback
and enter the survey code below:
5555 XAB4 KM2V
****

****

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our BizBox services
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BizBox.com

703

Bank of America

DANIELLE L STERN
FL BREVARD COUNTY BOC
XXXX-XXXX-XXXX-**4809**
June 05, 2018 - July 04, 2018

Purchasing Card

Cardholder Activity

Account Information

Mail Billing Inquiries to:
BANKCARD CENTER
PO BOX 982238
EL PASO, TX 79998-2238

Customer Service:
1.888.449.2273 24 Hours

TTY Hearing Impaired:
1.800.222.7365 24 Hours

Outside the U.S.:
1.509.353.6656 24 Hours

For Lost or Stolen Card:
1.888.449.2273 24 Hours

Payment Information

Statement Date	07/04/18
Credit Limit	$2,000
Cash Limit	$0
Days in Billing Cycle	30
Total Activity	$254.87

THIS IS NOT A BILL - DO NOT PAY

Account Summary

Credits	$0.00
Cash	$0.00
Purchases	$254.87
Other Debits	$0.00
Cash Fees	$0.00
Other Fees	$0.00
Total Activity	$254.87

Accounting Code: 0001/200050

Transactions

Posting Date	Transaction Date	Description		Reference Number	MCC	Charge	Credit
06/07	06/05	CULLIGAN DAYTON	386-2745036 FL	24071058157627156357702	5074	19.00	
06/13	06/11	OFFICE DEPOT #2703	PALM BAY FL	24445748163500471310788	5943	16.29	
06/15	06/14	VZWRLSS*MY VZ VB P	800-922-0204 FL	24692168165100896472807	4814	219.58	

0000000 0000000 0000000 4715290017764809

Account Number: XXXX-XXXX-XXXX-**4809**
June 05, 2018 - July 04, 2018

Total Activity $254.87

Cardholder Signature ______ Date 7/18/18

Manager Signature ______ Date 7/18/18

BANK OF AMERICA
PO BOX 15731
WILMINGTON, DE 19886-5731

DANIELLE L STERN **N0002303
FL BREVARD COUNTY BOC
DISTRICT 5 COMMISSION OFFICE
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

⑆549900 11⑆000500 17764809⑈

704

Culligan of Melbourne

771 NORTH DRIVE
MELBOURNE, FL 32934
(321) 255-5562 (321) 636-1344
bmorissette@culliganmelbourne.com
www.culligancentralflorida.com

IF PAYING BY CREDIT CARD, PLEASE CHECK CORRECT CARD AND FILL OUT BELOW

☐ VISA ☐ ☐ ☐ ☐ PLEASE CHECK BOX TO ENROLL IN AUTOMATIC BILL PAYMENT

CARD NUMBER	V. CODE
SIGNATURE	EXP. DATE

DATE	PAY THIS AMOUNT	ACCOUNT NUMBER
05/29/2018	$19.00	268847

PAY BY DATE: JUN 15 AMOUNT PAID $

ADDRESSEE:

001668
DISTRICT 5 COMMISSIONER
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

REMIT PAYMENT TO:

CULLIGAN WATER PRODUCTS
771 NORTH DR
MELBOURNE, FL 32934-9282

BALANCE FORWARD

RETURN THIS TOP PORTION WITH YOUR PAYMENT

BRANCH ID: ME-01
CUSTOMER: DISTRICT 5 COMMISSIONER

PREVIOUS BALANCE: **$9.50**

DATE	QUANTITY	DESCRIPTION	REF	AMOUNT	BALANCE
05/09/2018	-1.00	Payment	EFT	-9.50	0.00
05/09/2018	4.00	1/2 LITER (CASE)	800643137	19.00	19.00
05/09/2018	1.00	SERVICE FEE	800643137	0.00	19.00

Pay on line at www.culligancentralflorida.com Please call our office at 321-255-5562 if you need any assistance.

Balance Due **$19.00**

ACCOUNTS ARE SUBJECT TO A LATE PAYMENT FINANCE CHARGE

FINANCE CHARGE SCHEDULE

		PERIODIC RATE	ANNUAL RATE	PLEASE PAY NEW BALANCE BEFORE	
OVER $	5	1.50%	18.00 %	JUN 15	
TO	5	0.00%	0.00 %	MIN CHARGE	0.50

0-30	31-60	61-90	Over 90
19.00	0.00	0.00	0.00

CULLIGAN WATER PRODUCTS
771 NORTH DRIVE
MELBOURNE, FL 32934

(321) 255-5562 (321) 636-1344

SERVICE ADDRESS:

DISTRICT 5 COMMISSIONER
STE 175
490 CENTRE LAKE DRIVE NE
PALM BAY FL 32907

Next Deliveries: 06/06/18 07/04/18 08/01/18 08/29/18

HURRICANE SEASON IS HERE STOCK UP ON WATER
WE HAVE 1/2 LITERS 24 PER CASE FOR $4.25 EACH
DRINKING WATER $4.95, 3-GALLON $4.45, SPRING WATER $7.00
PURIFIED $5.20 PICKED UP AT OUR OFFICE

STATEMENT DATE	ACCOUNT NUMBER	NAME
05/29/2018	268847	DISTRICT 5 COMMISSIONER

Paid 6/15/18 CR

268847

Thank You For Your Payment.

Payments usually post within two business days.
Please Print This Page For Your Records.

Transaction Details	
Date	6/5/2018 8:05:09 AM
Visa Card	...4809
Total Amount	$19.00
Applied To Account	268847
Result	APPROVED
Authorization Code	082352

706 **verizon**

PO BOX 4001
ACWORTH, GA 30101

Manage Your Account	Account Number	Date Due
www.vzw.com/mybusinessaccount	742120929-00001	Past Due

Change your address at
http://sso.verizonenterprise.com

Invoice Number	9807845533

0013220 02 AB 0.405 **AUTO T0 0 2893 32907-117725 -C07-P13233-I1

COUNTY OF BREVARD
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

Quick Bill Summary

Apr 24 – May 23

Previous Balance *(see back for details)*	$219.58
Payment – Thank You	–$109.74
Balance Forward Due Immediately	**$109.84**
Monthly Charges	$107.18
Usage and Purchase Charges	
Voice	$.00
Messaging	$.00
Data	$.00
Surcharges and Other Charges & Credits	$2.56
Taxes, Governmental Surcharges & Fees	$.00
Total Current Charges Due by June 15, 2018	**$109.74**

Total Amount Due **$219.58**

paid 6/13/18

Our records indicate your account is past due. Please send payment now to avoid service disruption.

Pay from phone	Pay on the Web	Questions:
#PMT (#768)	At vzw.com/mybusinessaccount	1.800.922.0204 or *611 from your phone

verizon

Bill Date May 23, 2018
Account Number 742120929-00001
Invoice Number 9807845533

COUNTY OF BREVARD
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

Total Amount Due

Make check payable to Verizon Wireless.
Please return this remit slip with payment.

$219.58

$ 219.58

PO BOX 660108
DALLAS, TX 75266-0108

980784553301074212092900001000000109740000000219583

Print Close

Print Date : 6/13/2018

Thank you for your payment

Transaction Id - 741141292

Billing Account	**Payment amount**	**Payment method**
742120929-00001	$219.58	Danielle

Mailed 8/14/18 [initials]

EHIBIT "B"
BREVARD COUNTY PURCHASING CARD MONTHLY RECONCILIATION REPORT

PAGE ___ of ___

Cardholder's Name: Danielle Stern **Cardholder Phone Ext:** 321-253-6611 **Personnel #:** 11006140

Cardholder's Department: D5 Commissioner **Closing Date:** August 4th, 2018
(enter closing date of statement)

Date Purchased or Ordered	Date Received	Vendor Name	Description of Item Purchased	Amount Billed (indicate "Q" for quoted items)	Fund (4 digits)	Cost Center (6 digits)	GL Account # (7 digits)	Internal / Work Order # (6 or 7 digits)
07/09	07/10	Culligan Water	Water Delivery	$14.25	0001	200050	5529000	
07/10	07/11	Verizon Wireless	Cell Service	$109.74	0001	200090	5410100	
07/12	07/13	National Notary Association	(Professional Services) New Notary for office D5	$211.00	0001	200050	5310000	

ADD'L PAGES SUBTOTAL ______

GRAND TOTAL (ALL PAGES) $334.99

(must agree to figure below)

SUMMARY OF FUND / COST CENTERS /G.L. ACCOUNT TO BILL

FUND	COST CTR	GL ACCT	INT. ORDER	Amount
0001	200050	5529000		$14.25
0001	200050	5410100		$109.74
0001	200050	5310000		$211.00

(must agree to above figure) **TOTAL** $334.99

I (Cardholder) have complied with the Purchase Card Administrative Order (AO-41) and have retained all required approvals for restrictive uses and quote log for purchases with a value in excess of $1000 and an expected life of more than one -Year such as automobiles and furniture; and computer equipment valued in excess of $750

[signature] 8/10/18
Signature of Cardholder / Date

[signature] 8/10/18
Signature of Approving Official / Date

BCC-223 –Word Document Revised 8/18/2017

709

Bank of America

DANIELLE L STERN
FL BREVARD COUNTY BOC
XXXX-XXXX-XXXX-**4809**
July 05, 2018 - August 04, 2018

Purchasing Card

Cardholder Activity

Account Information

Mail Billing Inquiries to:
BANKCARD CENTER
PO BOX 982238
EL PASO, TX 79998-2238

Customer Service:
1.888.449.2273 24 Hours

TTY Hearing Impaired:
1.800.222.7365 24 Hours

Outside the U.S.:
1.509.353.6656 24 Hours

For Lost or Stolen Card:
1.888.449.2273 24 Hours

Payment Information

Statement Date	08/04/18
Credit Limit	$2,000
Cash Limit	$0
Days in Billing Cycle	31
Total Activity	$334.99

THIS IS NOT A BILL - DO NOT PAY

Account Summary

Credits	$0.00
Cash	$0.00
Purchases	$334.99
Other Debits	$0.00
Cash Fees	$0.00
Other Fees	$0.00
Total Activity	$334.99

Accounting Code: 0001/200050

Transactions

Posting Date	Transaction Date	Description		Reference Number	MCC	Charge	Credit
07/11	07/10	VZWRLSS*MY VZ VB P	800-922-0204 FL	24692168191100589019079	4814	109.74	
07/11	07/09	CULLIGAN DAYTON	386-2745036 FL	24071058191627124655995	5074	14.25	
07/13	07/12	NNA SERVICES LLC	800-876-6827 CA	24692168193100999805859	7399	211.00	

0000000 0000000 0000000 4715290017764809

Account Number: XXXX-XXXX-XXXX-**4809**
July 05, 2018 - August 04, 2018

Total Activity $334.99

Danielle Stern 8/10/18
Cardholder Signature Date

Manager Signature Date 8/10/18

BANK OF AMERICA
PO BOX 15731
WILMINGTON, DE 19886-5731

DANIELLE L STERN **N0001165
FL BREVARD COUNTY BOC
DISTRICT 5 COMMISSION OFFICE
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

:5499001 1:000500177648091"

National Notary Association
1 800 876-6827

Thank You for Your Purchase!

7/12/2018 9:42 AM

Your order number is #6445384. You should receive a confirmation email shortly.

If you are taking a live Notary seminar, please be aware of the check-in procedures and punctuality policy.

- Complete your training?(if purchased through us) and print your Certificate of Completion.
- Complete the Florida Notary Application, if you haven't already done so.
- Send your completed, signed application and training Certificate of Completion to:
  ???National Notary Association
  ???9350 DeSoto Ave
  ???Chatsworth, CA 91311-4926
- Download a commissioning checklist to follow your progress toward becoming a Notary.

Order Summary

Item	Price	Quantity	Item Total
FL Become Standard Package (18FL2N1) (Item #18FL2N1) ***Includes:*** *4 Year Hotline Subscription, Florida Bond $7,500 for 4 years, Florida Notary Primer, Florida State Fee, Florida State-Required Training Online, Florida $25,000 1-Year E&O Insurance, Florida Pink Style Stamp*	$180.00	1	$192.00
• **Deluxe Watercolor Journal with Privacy Guard** (Item #07229B)	+ $12.00	1	
Florida Individual Acknowledgment (Item #05181)	$14.00	1	$14.00

Order Subtotal	**$206.00**
Taxes	**$0.00**
Shipping (Standard)	**$5.00**
Order Total	**$211.00**

Notary Info Summary

Commission Status:

Notary Address:
Janette Roig
828 Emden Ave NW
Palm Bay, FL 32907
County: Brevard

I am not a notary

Shipping Info Summary

Shipping Address:
Janette Roig
828 Emden Ave NW
Palm Bay, FL 32907

Shipping Method:
Standard
5 Business Days

Billing Info Summary

Billing Address:
Janette Roig
828 Emden Ave NW
Palm Bay, FL 32907

Billing Method:
Visa
Ending in 4809
Expires: 01/2020

Have questions about your order? Contact Customer Service toll free at 1-800-876-6827.

verizon

712 PO BOX 4001
ACWORTH, GA 30101

Manage Your Account	Account Number	Date Due
www.vzw.com/mybusinessaccount	742120929-00001	07/15/18

Change your address at
http://sso.verizonenterprise.com

Invoice Number	9809694167

0013286 02 AB 0.405 **AUTO T1 0 2993 32907-117725 -C07-P13299-I1

COUNTY OF BREVARD
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

Quick Bill Summary

May 24 – Jun 23

Previous Balance *(see back for details)*	$219.58
Payment – Thank You	–$219.58
Balance Forward	**$.00**
Monthly Charges	$107.18
Usage and Purchase Charges	
Voice	$.00
Messaging	$.00
Data	$.00
Surcharges and Other Charges & Credits	$2.56
Taxes, Governmental Surcharges & Fees	$.00
Total Current Charges	**$109.74**

Total Charges Due by July 15, 2018 **$109.74**

paid 7/9/18
9R

Pay from phone	Pay on the Web	Questions:
#PMT (#768)	At vzw.com/mybusinessaccount	1.800.922.0204 or *611 from your phone

verizon

Bill Date	June 23, 2018
Account Number	742120929-00001
Invoice Number	9809694167

COUNTY OF BREVARD
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

Total Amount Due by July 15, 2018

Make check payable to Verizon Wireless.
Please return this remit slip with payment.

$109.74

$ ☐☐☐.☐☐

PO BOX 660108
DALLAS, TX 75266-0108

980969416701074212092900001000000109740000001097436

713

Print Close

Print Date : 7/9/2018

Thank you for your payment!

Transaction Id MB743846867

Billing Account	Payment amount	Payment method
742120929-00001	$109.74	Danielle

714

Culligan of Melbourne

771 NORTH DRIVE
MELBOURNE, FL 32934
(321) 255-5562 (321) 636-1344
bmorissette@culliganmelbourne.com
www.culligancentralflorida.com

☐ VISA ☐ MasterCard ☐ American Express ☐ Discover

☐ PLEASE CHECK BOX TO ENROLL IN AUTOMATIC BILL PAYMENT

CARD NUMBER	V. CODE
SIGNATURE	EXP. DATE

DATE	PAY THIS AMOUNT	ACCOUNT NUMBER
06/27/2018	$14.25	268847

INVOICE NUMBER: 80150

AMOUNT PAID $

ADDRESSEE:
DISTRICT 5 COMMISSIONER
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

REMIT PAYMENT TO:
CULLIGAN WATER PRODUCTS
771 NORTH DR
MELBOURNE, FL 32934-9282

INVOICE
RETURN THIS TOP PORTION WITH YOUR PAYMENT

ACCOUNT NUMBER	SALES ID	SALES ORDER NUMBER	PURCHASE ORDER NUMBER	SHIP VIA	TERMS
268847	EM		4500083054	COMPANY TRUCK	NET DUE IN 10 DAYS; INVOICE NUMBER 80150; INVOICE DATE 06/27/2018

DATE SHIPPED	QUANTITY ORDERED	QUANTITY SHIPPED	ITEM NUMBER	DESCRIPTION	UNIT PRICE	DISCOUNT	NET AMOUNT
				Tick 800645372 Date 06/06/2018			
				P/O Number: 4500083054			
06/06	3.00	3.00		1/2 LITER (CASE)	4.750		14.25
06/06	1.00	1.00		SERVICE FEE	0.000		
				End of Ticket 800645372			

Pay on line at www.culligancentralflorida.com Please call our office at 321-255-5562 if you need any assistance.

Paid 7/9/18
JL

A LATE PAYMENT FINANCE CHARGE OF 1.5 % PER MONTH MAY BE APPLIED ON BALANCES AFTER 30 DAYS

CULLIGAN WATER PRODUCTS
771 NORTH DRIVE
MELBOURNE, FL 32934
(321) 255-5562 (321) 636-1344

DELIVER TO:
DISTRICT 5 COMMISSIONER
STE 175
490 CENTRE LAKE DRIVE NE
PALM BAY FL 32907

TOTAL	14.25
SALES TAX	
FREIGHT/DELIVERY CHARGES	
AMOUNT DUE	**$14.25**

ORIGINAL INVOICE RETAIN BOTTOM PORTION FOR YOUR RECORDS

268847

Online Bill Pay For
Culligan of Melbourne

Account Selection **Account Detail** **Log Out**

Thank You For Your Payment.

Payments usually post within two business days.
Please Print This Page For Your Records.

Transaction Details	
Date	7/9/2018 9:58:34 AM
Visa Card	...4809
Total Amount	$14.25
Applied To Account	268847
Result	APPROVED
Authorization Code	094601

EHIBIT "B"
BREVARD COUNTY PURCHASING CARD MONTHLY RECONCILIATION REPORT

PAGE ___ of ___

Cardholder's Name: Danielle Stern **Cardholder Phone Ext:** 321-253-6611 **Personnel #:** 11006140

Cardholder's Department: D5 Commissioner **Closing Date:** September 10th, 2018
(enter closing date of statement)

Date Purchased or Ordered	Date Received	Vendor Name	Description of Item Purchased	Amount Billed (indicate "Q" for quoted items)	Fund (4 digits)	Cost Center (6 digits)	GL Account # (7 digits)	Internal / Work Order # (6 or 7 digits)
08/03	08/06	Culligan Water	Water Delivery	$19.00	0001	200050	5529000	
08/04	08/06	Verizon Wireless	Cell Service	$109.60	0001	200090	5410100	

ADD'L PAGES SUBTOTAL ________

GRAND TOTAL (ALL PAGES) $128.60

(must agree to figure below)

SUMMARY OF FUND / COST CENTERS /G.L. ACCOUNT TO BILL

FUND	COST CTR	GL ACCT	INT. ORDER	Amount
0001	200050	5529000		$19.00
0001	200050	5410100		$109.60
			TOTAL	$128.60

(must agree to above figure)

I (Cardholder) have complied with the Purchase Card Administrative Order (AO-41) and have retained all required approvals for restrictive uses and quote log for purchases with a value in excess of $1000 and an expected life of more than one -Year such as automobiles and furniture; and computer equipment valued in excess of $750.

Danielle Stern 9/10/18
Signature of Cardholder / Date

9/10/18
Signature of Approving Official / Date

Bank of America

DANIELLE L STERN
FL BREVARD COUNTY BOC
XXXX-XXXX-XXXX-**4809**
August 05, 2018 - September 04, 2018

Purchasing Card

Cardholder Activity

Account Information

Mail Billing Inquiries to:
BANKCARD CENTER
PO BOX 982238
EL PASO, TX 79998-2238

Customer Service:
1.888.449.2273 24 Hours

TTY Hearing Impaired:
1.800.222.7365 24 Hours

Outside the U.S.:
1.509.353.6656 24 Hours

For Lost or Stolen Card:
1.888.449.2273 24 Hours

Payment Information

Statement Date	09/04/18
Credit Limit	$2,000
Cash Limit	$0
Days in Billing Cycle	31
Total Activity	$128.60

THIS IS NOT A BILL - DO NOT PAY

Account Summary

Credits	$0.00
Cash	$0.00
Purchases	$128.60
Other Debits	$0.00
Cash Fees	$0.00
Other Fees	$0.00
Total Activity	$128.60

Accounting Code: 0001/200050

Transactions

Posting Date	*Transaction Date*	*Description*		*Reference Number*	*MCC*	*Charge*	*Credit*
08/06	08/04	VZWRLSS*MY VZ VB P	800-922-0204 FL	24692168216100161905944	4814	109.60	
08/06	08/03	CULLIGAN DAYTON	386-2745036 FL	24071058216627119253245	5074	19.00	

0000000 0000000 0000000 471529001776 4809

Account Number: XXXX-XXXX-XXXX-**4809**
August 05, 2018 - September 04, 2018

BANK OF AMERICA
PO BOX 15731
WILMINGTON, DE 19886-5731

Total Activity **$128.60**

Cardholder Signature 9/10/18 Date

Manager Signature 9/10/18 Date

DANIELLE L STERN **N0002772
FL BREVARD COUNTY BOC
DISTRICT 5 COMMISSION OFFICE
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

mailed 9/10/18

⑆54999001⑆⑆000500177 64809⑈

717

verizon

PO BOX 4001
ACWORTH, GA 30101

Manage Your Account	Account Number	Date Due
www.vzw.com/mybusinessaccount	742120929-00001	08/15/18

Change your address at
http://sso.verizonenterprise.com

Invoice Number	9811551820

COUNTY OF BREVARD
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

000519439
M107

Quick Bill Summary

Jun 24 – Jul 23

Previous Balance *(see back for details)*	$109.74
Payment – Thank You	–$109.74
Balance Forward	**$.00**
Monthly Charges	$107.18
Usage and Purchase Charges	
Voice	$.00
Messaging	$.00
Data	$.00
Surcharges and Other Charges & Credits	$2.42
Taxes, Governmental Surcharges & Fees	$.00
Total Current Charges	**$109.60**

Total Charges Due by August 15, 2018 **$109.60**

Pay from phone	Pay on the Web	Questions:
#PMT (#768)	At vzw.com/mybusinessaccount	1.800.922.0204 or *611 from your phone

verizon

COUNTY OF BREVARD
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

Bill Date	July 23, 2018
Account Number	742120929-00001
Invoice Number	9811551820

Total Amount Due by August 15, 2018

Make check payable to Verizon Wireless.
Please return this remit slip with payment.

$109.60

$ ___ . __

Paid 8/13/18
gn

PO BOX 660108
DALLAS, TX 75266-0108

98115518200107421209290000100000010960000000109603

Print Close

Print Date : 8/3/2018

Thank you for your payment!

Transaction Id 746886677

Billing Account	Payment amount	Payment method	Payment date
742120929-00001	$109.60	Danielle	Fri Aug 03 2018 09:10:55 GMT-0400 (Eastern Daylight Time)

Culligan
of Melbourne

771 NORTH DRIVE
MELBOURNE, FL 32934
(321) 255-5562 (321) 636-1344
bmorissette@culliganmelbourne.com
www.culligancentralflorida.com

IF PAYING BY CREDIT CARD, PLEASE CHECK CORRECT CARD AND FILL OUT BELOW

☐ PLEASE CHECK BOX TO ENROLL IN AUTOMATIC BILL PAYMENT

CARD NUMBER	V. CODE
SIGNATURE	EXP. DATE

DATE	PAY THIS AMOUNT	ACCOUNT NUMBER
07/26/2018	$19.00	268847

INVOICE NUMBER: 80458 AMOUNT PAID $

ADDRESSEE:
DISTRICT 5 COMMISSIONER
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

REMIT PAYMENT TO:
CULLIGAN WATER PRODUCTS
771 NORTH DR
MELBOURNE, FL 32934-9282

INVOICE
RETURN THIS TOP PORTION WITH YOUR PAYMENT

ACCOUNT NUMBER	SALES ID	SALES ORDER NUMBER	PURCHASE ORDER NUMBER	SHIP VIA	TERMS	
268847	BAM		4500083054	COMPANY TRUCK	INVOICE NUMBER 80458	INVOICE DATE 07/26/2018
					NET DUE IN 10 DAYS	

DATE SHIPPED	QUANTITY ORDERED	QUANTITY SHIPPED	ITEM NUMBER	DESCRIPTION	UNIT PRICE	DISCOUNT	NET AMOUNT
				Tick 800647621 Date 07/03/2018			
				P/O Number: 4500083054			
07/03	4.00	4.00		1/2 LITER (CASE)	4.750		19.00
07/03	1.00	1.00		SERVICE FEE	0.000		
				End of Ticket 800647621			

Pay on line at www.culligancentralflorida.com Please call our office at 321-255-5562 if you need any assistance.

Paid 8/13/18
JL

A LATE PAYMENT FINANCE CHARGE OF 1.5 % PER MONTH MAY BE APPLIED ON BALANCES AFTER 30 DAYS
CULLIGAN WATER PRODUCTS
771 NORTH DRIVE
MELBOURNE, FL 32934
(321) 255-5562 (321) 636-1344

DELIVER TO
DISTRICT 5 COMMISSIONER
STE 175
490 CENTRE LAKE DRIVE NE
PALM BAY FL 32907

TOTAL	19.00
SALES TAX	
FREIGHT/DELIVERY CHARGES	
AMOUNT DUE	**$19.00**

ORIGINAL INVOICE RETAIN BOTTOM PORTION FOR YOUR RECORDS

268847 720

Online Bill Pay For
Culligan of Melbourne

Thank You For Your Payment.

Payments usually post within two business days.
Please Print This Page For Your Records.

Transaction Details	
Date	8/3/2018 6:08:49 AM
Visa Card	...4809
Total Amount	$19.00
Applied To Account	268847
Result	APPROVED
Authorization Code	013139

EHIBIT "B"
BREVARD COUNTY PURCHASING CARD MONTHLY RECONCILIATION REPORT

PAGE ___ of ___

Cardholder's Name: Danielle Stern **Cardholder Phone Ext:** 321-253-6611 **Personnel #:** 11006140

Cardholder's Department: D5 Commissioner **Closing Date:** October 4th, 2018

(enter closing date of statement)

Date Purchased or Ordered	Date Received	Vendor Name	Description of Item Purchased	Amount Billed (indicate "Q" for quoted items)	Fund (4 digits)	Cost Center (6 digits)	GL Account # (7 digits)	Internal / Work Order # (6 or 7 digits)
09/05	09/07	Culligan Water	Water Delivery	$28 50	0001	200050	5529000	
09/06	09/07	Verizon Wireless	Cell Service	$109.60	0001	200050	5410100	
09/06	09/07	Wiggins LLC	Staff Business Cards	$49 00	0001	200050	5490000	
09/26	09/28	North American Office Solutions	Printer usage	$4.72	0001	200050	5490000	
10/03	10/04	Verizon Wireless	Cell Service	$109.60	0001	200050	5410100	
10/02	10/04	Culligan Water	Water Delivery	$9.50	0001	200050	5529000	

ADD'L PAGES SUBTOTAL ______

GRAND TOTAL (ALL PAGES) $310.92

(must agree to figure below)

SUMMARY OF FUND / COST CENTERS /G.L. ACCOUNT TO BILL

FUND	COST CTR	GL ACCT	INT. ORDER	Amount
0001	200050	5529000		$28.50
0001	200050	5410100		$109.60
0001	200050	5490000		$49.00
0001	200050	5490000		$4.72
0001	200050	5410100		$109.60
0001	200050	5529000		$9.50

(must agree to above figure)

TOTAL $310.92

I (Cardholder) have complied with the Purchase Card Administrative Order (AO-41) and have retained all required approvals for restrictive uses and quote log for purchases with a value in excess of $1000 and an expected life of more than one -Year such as automobiles and furniture, and computer equipment valued in excess of $750.

10/11/18

Signature of Cardholder / Date

10/11/18

Signature of Approving Official / Date

mailed 10/11/18

BCC-223 –Word Document Revised 8/18/2017

Bank of America

DANIELLE L STERN
FL BREVARD COUNTY BOC
XXXX-XXXX-XXXX-**4809**
September 05, 2018 - October 04, 2018

Purchasing Card

Cardholder Activity

Account Information

Mail Billing Inquiries to:
BANKCARD CENTER
PO BOX 982238
EL PASO, TX 79998-2238

Customer Service:
1.888.449.2273 24 Hours

TTY Hearing Impaired:
1.800.222.7365 24 Hours

Outside the U.S.:
1.509.353.6656 24 Hours

For Lost or Stolen Card:
1.888.449.2273 24 Hours

Payment Information

Statement Date	10/04/18
Credit Limit	$2,000
Cash Limit	$0
Days In Billing Cycle	30
Total Activity	$310.92

THIS IS NOT A BILL - DO NOT PAY

Account Summary

Credits	$0.00
Cash	$0.00
Purchases	$310.92
Other Debits	$0.00
Cash Fees	$0.00
Other Fees	$0.00
Total Activity	$310.92

Accounting Code: 0001/200050

Transactions

Posting Date	*Transaction Date*	*Description*	*Reference Number*	*MCC*	*Charge*	*Credit*
09/07	09/06	VZWRLSS*MY VZ VB P 800-922-0204 FL	24692168249100024742998	4814	109.60	
09/07	09/05	CULLIGAN DAYTON 386-2745036 FL	24071058249627138304723	5074	28.50	
09/07	09/06	WIGGINS LLC PALM BAY FL	24039648249200155300039	2741	49.00	
09/28	09/26	NORTH AMERICAN OFFICE SOL407-2640283 FL	24639238270900012700133	5044	4.72	
10/04	10/03	VZWRLSS*MY VZ VB P 800-922-0204 FL	24692168276100186130681	4814	109.60	
10/04	10/02	CULLIGAN DAYTON 386-2745036 FL	24071058276627136018834	5074	9.50	

0000000 0000000 0000000 4715290017764809

Account Number: XXXX-XXXX-XXXX-**4809**
September 05, 2018 - October 04, 2018

Total Activity **$310.92**

Cardholder Signature 10/11/18 Date

Manager Signature 10/4/18 Date

BANK OF AMERICA
PO BOX 15731
WILMINGTON, DE 19886-5731

DANIELLE L STERN **N0002592
FL BREVARD COUNTY BOC
DISTRICT 5 COMMISSION OFFICE
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

⑆549990011⑆000500177648O9⑈

verizon

PO BOX 408
NEWARK, NJ 07101-0408

Manage Your Account	Account Number	Date Due
www.vzw.com/mybusinessaccount	742120929-00001	09/15/18

Change your address at
http://sso.verizonenterprise.com

Invoice Number	9813403574

COUNTY OF BREVARD
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

000069846
M108

Quick Bill Summary

Jul 24 – Aug 23

Previous Balance *(see back for details)*	$109.60
Payment – Thank You	-$109.60
Balance Forward	**$.00**
Monthly Charges	$107.18
Usage and Purchase Charges	
Voice	$.00
Messaging	$.00
Data	$.00
Surcharges and Other Charges & Credits	$2.42
Taxes, Governmental Surcharges & Fees	$.00
Total Current Charges	**$109.60**

Total Charges Due by September 15, 2018 **$109.60**

Pay from phone	Pay on the Web	Questions:
#PMT (#768)	At vzw.com/mybusinessaccount	1.800.922.0204 or *611 from your phone

verizon

COUNTY OF BREVARD
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

Bill Date	August 23, 2018
Account Number	742120929-00001
Invoice Number	9813403574

Total Amount Due by September 15, 2018

Make check payable to Verizon Wireless.
Please return this remit slip with payment.

$109.60

$ ___ . __

Paid 9/5/18
JR

PO BOX 660108
DALLAS, TX 75266-0108

98134035740107421209290000100000010960000000109603

Print Close

Print Date : 9/5/2018

Thank you for your payment!

Transaction Id 750345102

Billing Account	Payment amount	Payment method	Payment date
742120929-00001	$109.60	Danielle	Wed Sep 05 2018 09:33:55 GMT-0400 (Eastern Daylight Time)

verizon✓

PO BOX 408
NEWARK, NJ 07101-0408

Manage Your Account	Account Number	Date Due
www.vzw.com/mybusinessaccount	742120929-00001	10/15/18

Change your address at
http://sso.verizonenterprise.com

Invoice Number	9815262232

Quick Bill Summary

Aug 24 – Sep 23

COUNTY OF BREVARD
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

000077490
M108

Previous Balance *(see back for details)*	$109.60
Payment – Thank You	–$109.60
Balance Forward	**$.00**
Monthly Charges	$107.18
Usage and Purchase Charges	
Voice	$.00
Messaging	$.00
Data	$.00
Surcharges and Other Charges & Credits	$2.42
Taxes, Governmental Surcharges & Fees	$.00
Total Current Charges	**$109.60**

Total Charges Due by October 15, 2018 **$109.60**

Pay from phone	Pay on the Web	Questions:
#PMT (#768)	At vzw.com/mybusinessaccount	1.800.922.0204 or *611 from your phone

verizon✓

Bill Date	September 23, 2018
Account Number	742120929-00001
Invoice Number	9815262232

COUNTY OF BREVARD
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

Total Amount Due by October 15, 2018

Make check payable to Verizon Wireless.
Please return this remit slip with payment.

$109.60

$ ☐☐☐.☐☐

Paid 10/2/18
ssr

PO BOX 660108
DALLAS, TX 75266-0108

98152622320107421209290000100000010960000000109603

Notifications DANIELLE STERN

verizon✓ Manage Account Support
(https://b2b.verizonwireless.com/sms/amsecure/landing/overview.go#/overview)

Location: Choose Location (https://b2b.verizonwireless.com/b2b/commerce/amsecure/chooseZip.go?purchasePath=&isChangeZip=true&isCommerce=true)

Cart Empty

Back to billing

Make a payment

Thank you for your payment!

Transaction Id 324100585

(https://b2b.verizonwireless.com/content/my-business-portal/PublicSafety/publicsafetygridwall1.html)

Payment details

Billing Account	Payment amount	Payment method	Payment date
742120929-00001	$109.60	Danielle	Oct 2, 2018

Want to do more?

Continue working with this account

742120929-00001

Or

Work on another account

Enter account number

Continue

Manage another payment

Set up Auto Pay

View payment history **(/sms/amsecure/payment/activity/show.go)**

Terms and Conditions (https://b2b.verizonwireless.com/sms/login/terms.go)

Click for Review
(https://businessportals.verizonwireless.com/support/misc/hosted/bbb_vz_review.html)

Culligan
of Melbourne

771 NORTH DRIVE
MELBOURNE, FL 32934
(321) 255-5562 (321) 636-1344
bmorissette@culliganmelbourne.com
www.culligancentralflorida.com

IF PAYING BY CREDIT CARD, PLEASE CHECK CORRECT CARD AND FILL OUT BELOW

☐ VISA ☐ MasterCard ☐ ☐ ☐ PLEASE CHECK BOX TO ENROLL IN AUTOMATIC BILL PAYMENT

CARD NUMBER	V. CODE
SIGNATURE	EXP. DATE

DATE	PAY THIS AMOUNT	ACCOUNT NUMBER
08/29/2018	$28.50	268847

PAY BY DATE: SEP 15 AMOUNT PAID $

ADDRESSEE:

001704
DISTRICT 5 COMMISSIONER
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

REMIT PAYMENT TO:

CULLIGAN WATER PRODUCTS
771 NORTH DR
MELBOURNE, FL 32934-9282

BALANCE FORWARD
RETURN THIS TOP PORTION WITH YOUR PAYMENT

BRANCH ID: ME-01
CUSTOMER: DISTRICT 5 COMMISSIONER

PREVIOUS BALANCE: $19.00

DATE	QUANTITY	DESCRIPTION	REF	AMOUNT	BALANCE
08/01/2018	3.00	1/2 LITER (CASE)	800649929	14.25	33.25
08/01/2018	1.00	SERVICE FEE	800649929	0.00	33.25
08/08/2018	-1.00	Payment	EFT	-19.00	14.25
08/29/2018	3.00	1/2 LITER (CASE)	800652221	14.25	28.50
08/29/2018	1.00	SERVICE FEE	800652221	0.00	28.50

paid 9/5/18
JR

Pay on line at www.culligancentralflorida.com Please call our office at 321-255-5562 if you need any assistance.

ACCOUNTS ARE SUBJECT TO A LATE PAYMENT FINANCE CHARGE

FINANCE CHARGE SCHEDULE

	PERIODIC RATE	ANNUAL RATE	PLEASE PAY NEW BALANCE BEFORE
OVER $ 3	1.50 %	18.00 %	SEP 15
TO 3	0.00 %	0.00 %	MIN CHARGE 0.50

0-30	31-60	61-90	Over 90
28.50	0.00	0.00	0.00

Balance Due $28.50

CULLIGAN WATER PRODUCTS
771 NORTH DRIVE
MELBOURNE, FL 32934

(321) 255-5562 (321) 636-1344

SERVICE ADDRESS:
DISTRICT 5 COMMISSIONER
STE 175
490 CENTRE LAKE DRIVE NE
PALM BAY FL 32907

Next Deliveries: 09/26/18 10/24/18 11/21/18 12/19/18

HAVE A SAFE AND HAPPY LABOR DAY WEEKEND!!!!!
HURRICANE SEASON IS HERE ** STOCK UP *******
WE HAVE 1/2 LITER CASES AND BOTTLED WATER AVAILABLE
PICK UP AT OUR OFFICE OR DELIVERED TO YOUR HOME / OFFICE

STATEMENT DATE	ACCOUNT NUMBER	NAME
08/29/2018	268847	DISTRICT 5 COMMISSIONER

Online Bill Pay For
Culligan of Melbourne

Account Selection   Account Detail   Log Out

Thank You For Your Payment.

Payments usually post within two business days.
Please Print This Page For Your Records.

Transaction Details	
Date	10/2/2018 6:09:05 AM
Visa Card	...4809
Total Amount	$9.50
Applied To Account	268847
Result	APPROVED
Authorization Code	004629

CONTRACT INVOICE

Office Solutions
North American Office Solutions

6314 Kingspointe Pkwy
Suite 7 Orlando, FL 32819
P: 407-264-0283 F: 407-264-0230

Invoice Number: 649720
Invoice Date: 09/24/2018

Bill To: Brevard County
Accounts Payable
2725 Judge Fran Jamieson Way
Bldg C Rm 203
Viera, FL 32940

Customer: Brevard County
2725 Judge Fran Jamieson
Way
Bldg C Rm 203
Viera, FL 32940

Account No	Payment Terms	Due Date	Invoice Total	Balance Due
BC18	Net 60	11/23/2018	$4.72	**$4.72**
		Invoice Remarks		

Contract Number	Contact	Contract Amount	P.O. Number	Start Date	Exp. Date
4500097791Lease-01		$4.72	4500097791	04/27/2018	06/01/2023
		Contract Remarks			
Contract Lease Charge is the Quarterly billing for Lease.					

Summary:

Contract base rate charge for this billing period	$0.00
Contract overage charge for the 08/27/2018 to 09/26/2018 overage period	$4.72**
**See overage details below	$4.72

Detail:

Equipment included under this contract

Canon/Canon IR C3525I

Number	Serial Number	Base Adj.	Location
25485	XTK02920	$0.00	Brevard County - Dist V Commission Office 490 Centre Lake Drive Ste 175 Palm Bay, FL 32907 District 5 Commission Office

Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B\W	black meter	828	909		81	0	81	$0.011590	$0.94
Color	color meter	513	608		95	0	95	$0.039830	$3.78
									$4.72

paid 9/26/18
JH

Please make all checks payable to North American Office Solutions and remit payments to: 6314 Kingspointe Pkwy, Unit 7 Orlando FL 32819

Invoice SubTotal	$4.72
Tax:	$0.00
Invoice Total	$4.72
Balance Due:	**$4.72**

Roig, Janette

From:	Linda Williamson <lwilliamson@naofficesolutions.com>
Sent:	Wednesday, September 26, 2018 11:54 AM
To:	Roig, Janette
Subject:	FW: Bankcard Order Confirmation

-----Original Message-----
From: North American Office Solutions [mailto:ar@naos.us]
Sent: Wednesday, September 26, 2018 11:50 AM
To: Accounts Receivable <AR@naofficesolutions.com>
Cc: Accounts Receivable <AR@naofficesolutions.com>
Subject: Bankcard Order Confirmation

CAUTION: This email originated from outside of the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Dear Danielle Stern, This is a confirmation of an online transaction placed with North American Office Solutions . The Sale transaction totaled $4.72 and will be processed to your account. Order Number : ID9QIBoeEL Approval Code : 011463

WIGGINS LLC
1480 PALM BAY ROAD NE#8
PALM BAY, FL 32905

09/06/2018 08:45:05

CREDIT CARD

VISA SALE

Card #	XXXXXXXXXXXX4809
Chip Card:	VISA CREDIT
AID:	A0000000031010
ATC:	000D
TC:	B8C04DB0BDDEC124
SEQ #:	1
Batch #:	123
INVOICE	2
Approval Code:	032193
Entry Method:	Chip Read
Mode:	Issuer - PIN Bypassed
Tax Amount:	$0.00
Cust Code:	82632

SALE AMOUNT $49.00

CUSTOMER COPY

MARKETING SIGNS PRINT

1480 Palm Bay Road N.E.
Palm Bay, Florida 32905
Ph. 321.951.4354 • fax 321.724.5307
Email: info@pipcandoit.com
web: www.pipcandoit.com

INVOICE 82632

8/21/2018

D OF

ARDS - 4/0 - JANETTE ROIG, 2 x 3.5 white 14pt C2S, copied on 1 side 49.00

	49.00
Sales Tax	
Shipping	
TOTAL	49.00

Received By ____________ Date 9/6/18

Special Instructions

Balance Paid $ 49.00

☐ Cash

☐ Check # ____________

☒ Credit Card

Date 9/6

By ____________

EHIBIT "B"
BREVARD COUNTY PURCHASING CARD MONTHLY RECONCILIATION REPORT

PAGE ___ of ___

Cardholder's Name: Danielle Stern **Cardholder Phone Ext:** 321-253-6611 **Personnel #:** 11006140

Cardholder's Department: D5 Commissioner **Closing Date:** November 4th, 2018

(enter closing date of statement)

Date Purchased or Ordered	Date Received	Vendor Name	Description of Item Purchased	Amount Billed (indicate "Q" for quoted items)	Fund (4 digits)	Cost Center (6 digits)	GL Account # (7 digits)	Internal / Work Order # (6 or 7 digits)
10/16	10/18	North American Office Solutions	Printer usage	$10.84	0001	200050	5490000	
10/16	10/18	North American Office Solutions	Printer usage	$6.72	0001	200050	5490000	
10/16	10/18	North American Office Solutions	Printer Lease	$151.80	0001	200050	5490000	
10/16	10/18	North American Office Solutions	Printer usage	$3.52	0001	200050	5490000	
10/16	10/18	North American Office Solutions	Printer Lease	$151.80	0001	200050	5490000	
10/25	10/29	North American Office Solutions	Printer usage	$2.57	0001	200050	5490000	

ADD'L PAGES SUBTOTAL ________

GRAND TOTAL (ALL PAGES) $327.25 (must agree to figure below)

SUMMARY OF FUND / COST CENTERS /G.L. ACCOUNT TO BILL

FUND	COST CTR	GL ACCT	INT. ORDER	Amount
0001	200050	5490000	$10.84	
0001	200050	5490000	$6.72	
0001	200050	5490000	$151.80	
0001	200050	5490000	$3.52	
0001	200050	5490000	$151.80	
0001	200050	5490000	$2.57	

(must agree to above figure) **TOTAL** $327.25

I (Cardholder) have complied with the Purchase Card Administrative Order (AO-41) and have retained all required approvals for restrictive uses and quote log for purchases with a value in excess of $1000 and an expected life of more than one -Year such as automobiles and furniture; and computer equipment valued in excess of $750

11/15/18
Signature of Cardholder / Date

11/16/18
Signature of Approving Official / Date

mailed 11/21/18

Bank of America

Purchasing Card

DANIELLE L STERN
FL BREVARD COUNTY BOC
XXXX-XXXX-XXXX-**4809**
October 05, 2018 - November 04, 2018

Cardholder Activity

Account Information

Mail Billing Inquiries to:
BANKCARD CENTER
PO BOX 982238
EL PASO, TX 79998-2238

Customer Service:
1.888.449.2273 24 Hours

TTY Hearing Impaired:
1.800.222.7365 24 Hours

Outside the U.S.:
1.509.353.6656 24 Hours

For Lost or Stolen Card:
1.888.449.2273 24 Hours

Payment Information

Statement Date	11/04/18
Credit Limit	$2,000
Cash Limit	$0
Days in Billing Cycle	31
Total Activity	$327.25

THIS IS NOT A BILL - DO NOT PAY

Account Summary

Credits	$0.00
Cash	$0.00
Purchases	$327.25
Other Debits	$0.00
Cash Fees	$0.00
Other Fees	$0.00
Total Activity	$327.25

Accounting Code: 0001/200050

Transactions

Posting Date	Transaction Date	Description	Reference Number	MCC	Charge	Credit
10/18	10/16	NORTH AMERICAN OFFICE SOL407-2640283 FL	24639238290900014100064	5044	10.84	
10/18	10/16	NORTH AMERICAN OFFICE SOL407-2640283 FL	24639238290900014100072	5044	6.72	
10/18	10/16	NORTH AMERICAN OFFICE SOL407-2640283 FL	24639238290900014100098	5044	151.80	
10/18	10/16	NORTH AMERICAN OFFICE SOL407-2640283 FL	24639238290900014100106	5044	3.52	
10/18	10/16	NORTH AMERICAN OFFICE SOL407-2640283 FL	24639238290900014100114	5044	151.80	
10/29	10/25	NORTH AMERICAN OFFICE SOL407-2640283 FL	24639238299900014800086	5044	2.57	

0000000 0000000 0000000 4715290017764809

Account Number: XXXX-XXXX-XXXX-**4809**
October 05, 2018 - November 04, 2018

Total Activity **$327.25**

Cardholder Signature Date 11/15/18

Manager Signature Date 11/14/18

BANK OF AMERICA
PO BOX 15731
WILMINGTON, DE 19886-5731

DANIELLE L STERN **N0002501
FL BREVARD COUNTY BOC
DISTRICT 5 COMMISSION OFFICE
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

⑆549990011⑆000500177648094⑈

Office Solutions
North American Office Solutions

6314 Kingspointe Pkwy
Suite 7 Orlando, FL 32819
P: 407-264-0283 F: 407-264-0230

CONTRACT INVOICE

Invoice Number: 656540
Invoice Date: 10/23/2018

Bill To: Brevard County
Accounts Payable
2725 Judge Fran Jamieson Way
Bldg C Rm 203
Viera, FL 32940

Customer: Brevard County
2725 Judge Fran Jamieson
Way
Bldg C Rm 203
Viera, FL 32940

Account No	Payment Terms	Due Date	Invoice Total	Balance Due
BC18	Net 60	12/22/2018	$2.57	**$2.57**

Invoice Remarks

Contract Number	Contact	Contract Amount	P.O. Number	Start Date	Exp. Date
4500097791Lease-01		$2.57	4500097791	04/27/2018	06/01/2023

Contract Remarks
Contract Lease Charge is the Quarterly billing for Lease.

Summary:

Contract base rate charge for this billing period	$0.00
Contract overage charge for the 09/27/2018 to 10/26/2018 overage period	$2.57 **
**See overage details below	$2.57

Detail:

Equipment included under this contract

Canon/Canon IR C3525I

Number	Serial Number	Base Adj.	Location
25485	XTK02920	$0.00	Brevard County - Dist V Commission Office 490 Centre Lake Drive Ste 175 Palm Bay, FL 32907 District 5 Commission Office

Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B\W	black meter	909	1,031		122	0	122	$0.011590	$1.41
Color	color meter	508	637		29	0	29	$0.039830	$1.16
									$2.57

Please make all checks payable to North American Office Solutions and remit payments to: 6314 Kingspointe Pkwy, Unit 7 Orlando FL 32819

Invoice SubTotal	$2.57
Tax:	$0.00
Invoice Total	$2.57
Balance Due:	**$2.57**

Roig, Janette

From:	Linda Williamson <lwilliamson@naofficesolutions.com>
Sent:	Thursday, October 25, 2018 3:28 PM
To:	Roig, Janette
Subject:	FW: Bankcard Order Confirmation

----Original Message-----
From: North American Office Solutions [mailto:ar@naos.us]
Sent: Thursday, October 25, 2018 11:39 AM
To: Accounts Receivable <AR@naofficesolutions.com>
Cc: Accounts Receivable <AR@naofficesolutions.com>
Subject: Bankcard Order Confirmation

CAUTION: This email originated from outside of the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Dear Danielle Stern, This is a confirmation of an online transaction placed with North American Office Solutions . The Sale transaction totaled $2.57 and will be processed to your account. Order Number : IDAPIBdNJI Approval Code : 059134

CONTRACT INVOICE

Office Solutions
North American Office Solutions

Invoice Number:	635860
Invoice Date:	07/23/2018

6314 Kingspointe Pkwy
Suite 7 Orlando, FL 32819
P: 407-264-0283 F: 407-264-0230

Bill To: Brevard County
Accounts Payable
2725 Judge Fran Jamieson Way
Bldg C Rm 203
Viera, FL 32940

Customer: Brevard County
2725 Judge Fran Jamieson
Way
Bldg C Rm 203
Viera, FL 32940

Account No	Payment Terms	Due Date	Invoice Total	Balance Due
BC18	Net 60	09/21/2018	$6.72	**$6.72**

Invoice Remarks

Contract Number	Contact	Contract Amount	P.O. Number	Start Date	Exp. Date
4500097791Lease-01		$6.72	4500097791	04/27/2018	06/01/2023

Contract Remarks

Contract Lease Charge is the Quarterly billing for Lease.

Summary:

Contract base rate charge for this billing period	$0.00
Contract overage charge for the 06/27/2018 to 07/26/2018 overage period	$6.72 **
**See overage details below	$6.72

Detail:

Equipment included under this contract

Canon/Canon IR C3525I

Number	Serial Number	Base Adj.	Location
25485	XTK02920	$0.00	Brevard County - Dist V Commission Office 490 Centre Lake Drive Ste 175 Palm Bay, FL 32907 District 5 Commission Office

Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B\W	black meter	477	724		247	0	247	$0.011590	$2.86
Color	color meter	358	455		97	0	97	$0.039830	$3.86
									$6.72

Please make all checks payable to North American Office Solutions and remit payments to: 6314 Kingspointe Pkwy, Unit 7 Orlando FL 32819

Invoice SubTotal	$6.72
Tax:	$0.00
Invoice Total	$6.72
Balance Due:	**$6.72**

Roig, Janette

From: Accounts Receivable <AR@naofficesolutions.com>
Sent: Tuesday, October 16, 2018 11:37 AM
To: Accounts Receivable
Cc: Accounts Receivable
Subject: Bankcard Order Confirmation

CAUTION: This email originated from outside of the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Dear Danielle Stern,   This is a confirmation of an online transaction placed with North American Office Solutions . The Sale transaction totaled $6.72 and will be processed to your account.   Order Number : IDAGIBbthh   Approval Code : 054053

Office Solutions
North American Office Solutions

6314 Kingspointe Pkwy
Suite 7 Orlando, FL 32819
P: 407-264-0283 F: 407-264-0230

CONTRACT INVOICE

Invoice Number: 631018
Invoice Date: 06/29/2018

Bill To: Brevard County
Accounts Payable
2725 Judge Fran Jamieson Way
Bldg C Rm 203
Viera, FL 32940

Customer: Brevard County
2725 Judge Fran Jamieson
Way
Bldg C Rm 203
Viera, FL 32940

Account No	Payment Terms	Due Date	Invoice Total	Balance Due
BC18	Net 60	08/28/2018	$10.84	**$10.84**

Invoice Remarks

Contract Number	Contact	Contract Amount	P.O. Number	Start Date	Exp. Date
4500097791Lease-01		$10.84	4500097791	04/27/2018	06/01/2023

Contract Remarks

Contract Lease Charge is the Quarterly billing for Lease.

Summary:

Contract base rate charge for this billing period	$0.00
Contract overage charge for the 05/27/2018 to 06/26/2018 overage period	$10.84 **
**See overage details below	$10.84

Detail:

Equipment included under this contract

Canon/Canon IR C3525I

Number	Serial Number	Base Adj.	Location
25485	XTK02920	$0.00	Brevard County - Dist V Commission Office 490 Centre Lake Drive Ste 175 Palm Bay, FL 32907 District 5 Commission Office

Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B\W	black meter	212	477		265	0	265	$0.011590	$3.07
Color	color meter	163	358		195	0	195	$0.039830	$7.77
									$10.84

Please make all checks payable to North American Office Solutions and remit payments to: 6314 Kingspointe Pkwy, Unit 7 Orlando FL 32819

Invoice SubTotal	$10.84
Tax:	$0.00
Invoice Total	$10.84
Balance Due:	**$10.84**

Roig, Janette

From:	Accounts Receivable <AR@naofficesolutions.com>
Sent:	Tuesday, October 16, 2018 11:37 AM
To:	Accounts Receivable
Cc:	Accounts Receivable
Subject:	Bankcard Order Confirmation

CAUTION: This email originated from outside of the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Dear Danielle Stern, This is a confirmation of an online transaction placed with North American Office Solutions . The Sale transaction totaled $10.84 and will be processed to your account. Order Number : IDAGIBbWR1 Approval Code : 034298

Office Solutions
North American Office Solutions

6314 Kingspointe Pkwy
Suite 7 Orlando, FL 32819
P: 407-264-0283 F: 407-264-0230

CONTRACT INVOICE

Invoice Number: 624571
Invoice Date: 05/31/2018

Bill To: Brevard County
Accounts Payable
2725 Judge Fran Jamieson Way
Bldg C Rm 203
Viera, FL 32940

Customer: Brevard County
2725 Judge Fran Jamieson
Way
Bldg C Rm 203
Viera, FL 32940

Account No	Payment Terms	Due Date	Invoice Total	Balance Due
BC18	Net 60	07/30/2018	$ 151.80	**$ 151.80**

Invoice Remarks

Contract Number	Contact	Contract Amount	P.O. Number	Start Date	Exp. Date
4500097791Lease-01		$ 151.80	4500097791	04/27/2018	06/01/2023

Contract Remarks
Quarterly Invoice June - August 2018 Contract Lease Charge is the Quarterly billing for Lease.

Summary:

Contract base rate charge for the 06/01/2018 to 08/31/2018 billing period	$0.00
Contract overage charge for this overage period	$0.00 **
Contract Lease Charge:	$151.80
**See overage details below	$151.80

Detail:

Equipment included under this contract

Canon/Canon IR C3525I

Number	Serial Number	Base Adj.	Location	Lease
25485	XTK02920	$0.00	Brevard County - Dist V Commission Office 490 Centre Lake Drive Ste 175 Palm Bay, FL 32907 District 5 Commission Office	$151.80

Please make all checks payable to North American Office Solutions and remit payments to: 6314 Kingspointe Pkwy, Unit 7 Orlando FL 32819

Invoice SubTotal	$151.80
Tax:	$0.00
Invoice Total	$151.80
Balance Due:	**$151.80**

Roig, Janette

From: Accounts Receivable <AR@naofficesolutions.com>
Sent: Tuesday, October 16, 2018 1:54 PM
To: Accounts Receivable
Cc: Accounts Receivable
Subject: Bankcard Order Confirmation

CAUTION: This email originated from outside of the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Dear Danielle Stern,   This is a confirmation of an online transaction placed with North American Office Solutions . The Sale transaction totaled $151.80 and will be processed to your account.   Order Number : IDAGIDtOD2   Approval Code : 070098

Office Solutions
North American Office Solutions

6314 Kingspointe Pkwy
Suite 7 Orlando, FL 32819
P: 407-264-0283 F: 407-264-0230

CONTRACT INVOICE

Invoice Number: 642974
Invoice Date: 08/23/2018

Bill To: Brevard County
Accounts Payable
2725 Judge Fran Jamieson Way
Bldg C Rm 203
Viera, FL 32940

Customer: Brevard County
2725 Judge Fran Jamieson Way
Bldg C Rm 203
Viera, FL 32940

Account No	Payment Terms	Due Date	Invoice Total	Balance Due
BC18	Net 60	10/22/2018	$ 3.52	**$ 3.52**
Invoice Remarks				

Contract Number	Contact	Contract Amount	P.O. Number	Start Date	Exp. Date
4500097791Lease-01		$ 3.52	4500097791	04/27/2018	06/01/2023
Contract Remarks					
Contract Lease Charge is the Quarterly billing for Lease.					

Summary:

Contract base rate charge for this billing period	$0.00
Contract overage charge for the 07/27/2018 to 08/26/2018 overage period	$3.52 **
**See overage details below	
	$3.52

Detail:

Equipment included under this contract

Canon/Canon IR C3525I

Number	Serial Number	Base Adj.	Location
25485	XTK02920	$0.00	Brevard County - Dist V Commission Office 490 Centre Lake Drive Ste 175 Palm Bay, FL 32907 District 5 Commission Office

Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B\W	black meter	724	828		104	0	104	$0.011590	$1.21
Color	color meter	455	513		58	0	58	$0.039830	$2.31
									$3.52

Please make all checks payable to North American Office Solutions and remit payments to: 6314 Kingspointe Pkwy, Unit 7 Orlando FL 32819

Invoice SubTotal	$3.52
Tax:	$0.00
Invoice Total	$3.52
Balance Due:	**$3.52**

Roig, Janette

From:	Accounts Receivable <AR@naofficesolutions.com>
Sent:	Tuesday, October 16, 2018 1:54 PM
To:	Accounts Receivable
Cc:	Accounts Receivable
Subject:	Bankcard Order Confirmation

CAUTION: This email originated from outside of the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Dear Danielle Stern,   This is a confirmation of an online transaction placed with North American Office Solutions . The Sale transaction totaled $3.52 and will be processed to your account.   Order Number : IDAGIDseCo   Approval Code : 063535

Office Solutions

North American Office Solutions

6314 Kingspointe Pkwy
Suite 7 Orlando, FL 32819
P: 407-264-0283 F: 407-264-0230

CONTRACT INVOICE

Invoice Number: 644981
Invoice Date: 09/01/2018

Bill To: Brevard County
Accounts Payable
2725 Judge Fran Jamieson Way
Bldg C Rm 203
Viera, FL 32940

Customer: Brevard County
2725 Judge Fran Jamieson Way
Bldg C Rm 203
Viera, FL 32940

Account No	Payment Terms	Due Date	Invoice Total	Balance Due
BC18	Net 60	10/31/2018	$ 151.80	**$ 151.80**
Invoice Remarks				

Contract Number	Contact	Contract Amount	P.O. Number	Start Date	Exp. Date
4500097791Lease-01		$ 151.80	4500097791	04/27/2018	06/01/2023
Contract Remarks					
Contract Lease Charge is the Quarterly billing for Lease.					

Summary:

Contract base rate charge for the 09/01/2018 to 11/30/2018 billing period	$0.00
Contract overage charge for this overage period	$0.00 **
Contract Lease Charge:	$151.80
**See overage details below	$151.80

Detail:

Equipment included under this contract

Canon/Canon IR C3525I

Number	Serial Number	Base Adj.	Location	Lease
25485	XTK02920	$0.00	Brevard County - Dist V Commission Office 490 Centre Lake Drive Ste 175 Palm Bay, FL 32907 District 5 Commission Office	$151.80

Please make all checks payable to North American Office Solutions and remit payments to: 6314 Kingspointe Pkwy, Unit 7 Orlando FL 32819

Invoice SubTotal	$151.80
Tax:	$0.00
Invoice Total	$151.80
Balance Due:	**$151.80**

Roig, Janette

From:	Accounts Receivable <AR@naofficesolutions.com>
Sent:	Tuesday, October 16, 2018 1:53 PM
To:	Accounts Receivable
Cc:	Accounts Receivable
Subject:	Bankcard Order Confirmation

CAUTION: This email originated from outside of the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Dear Danielle Stern,   This is a confirmation of an online transaction placed with North American Office Solutions . The Sale transaction totaled $151.80 and will be processed to your account.   Order Number : IDAGIDsGCg   Approval Code : 008280

EHIBIT "B"
BREVARD COUNTY PURCHASING CARD MONTHLY RECONCILIATION REPORT

PAGE ___ of ___

Cardholder's Name: Danielle Stern **Cardholder Phone Ext:** 321-253-6611 **Personnel #:** 11006140

Cardholder's Department: D5 Commissioner **Closing Date:** December 4^{th},2018

(enter closing date of statement)

Date Purchased or Ordered	Date Received	Vendor Name	Description of Item Purchased	Amount Billed (indicate "Q" for quoted items)	Fund (4 digits)	Cost Center (6 digits)	GL Account # (7 digits)	Internal / Work Order # (6 or 7 digits)
11/08	11/09	Culligan Water	Water Delivery	$19.00	0001	200050	5529000	
11/08	11/09	Verizon Wireless	Cell Service	$109.84	0001	200050	5410100	
11/14	11/16	North American Office Solutions	Printer Usage	$5.41	0001	200050	5490000	

ADD'L PAGES SUBTOTAL ______

GRAND TOTAL (ALL PAGES) $134.25

(must agree to figure below)

I (Cardholder) have complied with the Purchase Card Administrative Order (AO-41) and have retained all required approvals for restrictive uses and quote log for purchases with a value in excess of $1000 and an expected life of more than one -Year such as automobiles and furniture; and computer equipment valued in excess of $750.

SUMMARY OF FUND / COST CENTERS /G.L. ACCOUNT TO BILL

FUND	COST CTR	GL ACCT	INT. ORDER	Amount
0001	200050	5529000		$19.00
0001	200050	5410100		$109.84
0001	200050	5490000		$5.41
0001	200050			
0001	200050			
0001	200050			

(must agree to above figure)

TOTAL $134.25

Danielle Stern 12/11/18
Signature of Cardholder / Date

12/12/18
Signature of Approving Official / Date

mailed 12/13/18

BCC-223 –Word Document Revised 8/18/2017

Bank of America

DANIELLE L STERN
FL BREVARD COUNTY BOC
XXXX-XXXX-XXXX-**4809**
November 05, 2018 - December 04, 2018

Purchasing Card

Cardholder Activity

Account Information

Mail Billing Inquiries to:
BANKCARD CENTER
PO BOX 982238
EL PASO, TX 79998-2238

Customer Service:
1.888.449.2273 24 Hours

TTY Hearing Impaired:
1.800.222.7365 24 Hours

Outside the U.S.:
1.509.353.6656 24 Hours

For Lost or Stolen Card:
1.888.449.2273 24 Hours

Payment Information

Statement Date	12/04/18
Credit Limit	$2,000
Cash Limit	$0
Days in Billing Cycle	30
Total Activity	$134.25

THIS IS NOT A BILL - DO NOT PAY

Account Summary

Credits	$0.00
Cash	$0.00
Purchases	$134.25
Other Debits	$0.00
Cash Fees	$0.00
Other Fees	$0.00
Total Activity	$134.25

Accounting Code: 0001/200050

Transactions

Posting Date	*Transaction Date*	*Description*	*Reference Number*	*MCC*	*Charge*	*Credit*
11/09	11/08	VZWRLSS*MY VZ VB P 800-922-0204 FL	24692168312100340878346	4814	109.84	
11/09	11/08	4TE*CULLIGAN DAYTONA 321-255-5562 FL	24445008312200107659968	5074	19.00	
11/16	11/14	NORTH AMERICAN OFFICE SOL407-2640283 FL	24639238319900016300032	5044	5.41	

0000000 0000000 0000000 4715290017764809

Account Number: XXXX-XXXX-XXXX-**4809**
November 05, 2018 - December 04, 2018

BANK OF AMERICA
PO BOX 15731
WILMINGTON, DE 19886-5731

DANIELLE L STERN **N0002561
FL BREVARD COUNTY BOC
DISTRICT 5 COMMISSION OFFICE
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

Total Activity **$134.25**

Cardholder Signature Date 12/11/18

Manager Signature Date 12/12/18

⑆5499900⑆⑆000500177648094⑈

verizon✓
PO BOX 408
NEWARK, NJ 07101-0408

Manage Your Account	Account Number	Date Due
www.vzw.com/mybusinessaccount	742120929-00001	11/15/18

Change your address at
http://sso.verizonenterprise.com

Invoice Number	9817134583

COUNTY OF BREVARD
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

000116650
M110

Quick Bill Summary

Sep 24 – Oct 23

Previous Balance *(see back for details)*	$109.60
Payment – Thank You	–$109.60
Balance Forward	**$.00**
Monthly Charges	$107.18
Usage and Purchase Charges	
Voice	$.00
Messaging	$.00
Data	$.00
Surcharges and Other Charges & Credits	$2.66
Taxes, Governmental Surcharges & Fees	$.00
Total Current Charges	**$109.84**

Total Charges Due by November 15, 2018 **$109.84**

paid 11/7/18
JM

Pay from phone	Pay on the Web	Questions:
#PMT (#768)	At vzw.com/mybusinessaccount	1.800.922.0204 or *611 from your phone

verizon✓

COUNTY OF BREVARD
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

Bill Date	October 23, 2018
Account Number	742120929-00001
Invoice Number	9817134583

Total Amount Due by November 15, 2018

Make check payable to Verizon Wireless.
Please return this remit slip with payment.

$109.84

$ ☐☐☐.☐☐

PO BOX 660108
DALLAS, TX 75266-0108

981713458301074212092900001000000109840000001098 43

Notifications DANIELLE STERN

verizon✓ Manage Account Support
(https://b2b.verizonwireless.com/sms/amsecure/landing/overview.go#/overview)

Location: Choose Location (https://b2b.verizonwireless.com/b2b/commerce/amsecure/chooseZip.go?purchasePath=&isChangeZip=true&isCommerce=true)

Cart Empty
Search

Back to billing

Make a payment

Thank you for your payment!

Transaction Id 334334231

(https://b2b.verizonwireless.com/content/my-business-portal/PublicSafety/publicsafetygridwall1.html?intcmp=INT_B2B-TID5)

Payment details

Billing Account	Payment amount	Payment method	Payment date
742120929-00001	$109.84	Danielle	Nov 7, 2018

Want to do more?

Continue working with this account

742120929-00001

Or

Work on another account

Enter account number

Continue

Manage another payment

Set up Auto Pay

View payment history **(/sms/amsecure/payment/activity/show.go)**

Terms and Conditions (https://b2b.verizonwireless.com/sms/login/terms.go)

Click for Review
(https://businessportals.verizonwireless.com/support/misc/hosted/bbb_vz_review.html)

Culligan
of Melbourne

771 NORTH DRIVE
MELBOURNE, FL 32934
(321) 255-5562 (321) 636-1344
bmorissette@culliganmelbourne.com
www.culligancentralflorida.com

IF PAYING BY CREDIT CARD, PLEASE CHECK CORRECT CARD AND FILL OUT BELOW

☐ VISA ☐ ☐ ☐ ☐ PLEASE CHECK BOX TO ENROLL IN AUTOMATIC BILL PAYMENT

CARD NUMBER	V. CODE
SIGNATURE	EXP. DATE

DATE	PAY THIS AMOUNT	ACCOUNT NUMBER
10/29/2018	$19.00	268847

INVOICE NUMBER: 82027 AMOUNT PAID $

ADDRESSEE:
DISTRICT 5 COMMISSIONER
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

REMIT PAYMENT TO:
CULLIGAN WATER PRODUCTS
771 NORTH DR
MELBOURNE, FL 32934-9282

INVOICE
RETURN THIS TOP PORTION WITH YOUR PAYMENT

ACCOUNT NUMBER	SALES ID	SALES ORDER NUMBER	PURCHASE ORDER NUMBER	SHIP VIA	TERMS	INVOICE NUMBER	INVOICE DATE
268847	JH		4500083054	COMPANY TRUCK	NET DUE IN 10 DAYS	82027	10/29/2018

DATE SHIPPED	QUANTITY ORDERED	QUANTITY SHIPPED	ITEM NUMBER	DESCRIPTION	UNIT PRICE	DISCOUNT	NET AMOUNT
				Tick 800656865 Date 10/24/2018			
				P/O Number: 4500083054			
10/24	4.00	4.00		1/2 LITER (CASE)	4.750		19.00
10/24	1.00	1.00		SERVICE FEE	0.000		
				End of Ticket 800656865			

Pay on line at www.culligancentralflorida.com Please call our office at 321-255-5562 if you need any assistance.

paid 11/1/18
SL

A LATE PAYMENT FINANCE CHARGE OF [illegible] PER MONTH MAY BE APPLIED ON BALANCES AFTER [illegible] DAYS

CULLIGAN WATER PRODUCTS
771 NORTH DRIVE
MELBOURNE, FL 32934
(321) 255-5562 (321) 636-1344

DELIVER TO
DISTRICT 5 COMMISSIONER
STE 175
490 CENTRE LAKE DRIVE NE
PALM BAY FL 32907

TOTAL	19.00
SALES TAX	
FREIGHT/DELIVERY CHARGES	
AMOUNT DUE	$19.00

ORIGINAL INVOICE RETAIN BOTTOM PORTION FOR YOUR RECORDS

268847 751

Online Bill Pay For
Culligan of Melbourne

Thank You For Your Payment.

Payments usually post within two business days.
Please Print This Page For Your Records.

Transaction Details	
Date	11/7/2018 9:06:03 AM
Visa Card	...4809
Total Amount	$19.00
Applied To Account	268847
Result	APPROVED
Authorization Code	007714

NA Office Solutions
North American Office Solutions

6314 Kingspointe Pkwy
Suite 7 Orlando, FL 32819
P: 407-264-0283 F: 407-264-0230

CONTRACT INVOICE

Invoice Number: 622396
Invoice Date: 05/23/2018

2018 NOV 13 P 2:29

BREVARD CO. FL
FINANCE DEPT.

Bill To: Brevard County
Accounts Payable
2725 Judge Fran Jamieson Way
Bldg C Rm 203
Viera, FL 32940

Customer: Brevard County
2725 Judge Fran Jamieson Way
Bldg C Rm 203
Viera, FL 32940

Account No	Payment Terms	Due Date	Invoice Total	Balance Due
BC18	Net 60	07/22/2018	$ 5.41	**$ 5.41**

Invoice Remarks

Contract Number	Contact	Contract Amount	P.O. Number	Start Date	Exp. Date
4500097791Lease-01		$ 5.41	4500097791	04/27/2018	06/01/2023

Contract Remarks

Summary:

Contract base rate charge for this billing period	$0.00
Contract overage charge for the 04/27/2018 to 05/26/2018 overage period	$5.41 **
**See overage details below	$5.41

Detail:

Equipment included under this contract

Canon/Canon IR C3525I

Number	Serial Number	Base Adj.	Location
25485	XTK02920	$0.00	Brevard County - Dist V Commission Office 490 Centre Lake Drive Ste 175 Palm Bay, FL 32907 District 5 Commission Office

Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B\W	black meter	113	212		99	0	99	$0.011590	$1.15
Color	color meter	56	163		107	0	107	$0.039830	$4.26
									$5.41

Paid 11/14/18
gr

Please make all checks payable to North American Office Solutions and remit payments to: 6314 Kingspointe Pkwy, Unit 7 Orlando FL 32819

Invoice SubTotal	$5.41
Tax:	$0.00
Invoice Total	$5.41
Balance Due:	**$5.41**

Roig, Janette

From: Accounts Receivable <AR@naofficesolutions.com>
Sent: Wednesday, November 14, 2018 9:32 AM
To: Accounts Receivable
Cc: Accounts Receivable
Subject: Bankcard Order Confirmation

CAUTION: This email originated from outside of the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Dear Danielle Stern, This is a confirmation of an online transaction placed with North American Office Solutions . The Sale transaction totaled $5.41 and will be processed to your account. Order Number : IDBEI9VuKD Approval Code : 056530

EHIBIT "B"
BREVARD COUNTY PURCHASING CARD MONTHLY RECONCILIATION REPORT

Cardholder's Name: Danielle Stern **Cardholder Phone Ext:** 321-253-6611 **Personnel #:** 11006140

Cardholder's Department: D5 Commissioner **Closing Date:** January 4th, 2019
(enter closing date of statement)

Date Purchased or Ordered	Date Received	Vendor Name	Description of Item Purchased	Amount Billed (indicate "Q" for quoted items)	Fund (4 digits)	Cost Center (6 digits)	GL Account # (7 digits)	Internal / Work Order # (6 or 7 digits)
12/08	12/10	Culligan Water	Water Delivery	$19.00	0001	200050	5529000	
12/08	12/10	Verizon Wireless	Cell Service	$109.84	0001	200050	5410100	
12/12	12/16	Walmart	Items for open house	$49.90	0001	200050	5490000	
12/13	12/14	Publix	Items for open house	$52.36	0001	200050	5490000	
12/14	12/17	Dunkin Donuts	Items for open house	$140.46	0001	200050	5490000	

ADD'L PAGES SUBTOTAL ______

GRAND TOTAL (ALL PAGES) $371.56 (must agree to figure below)

SUMMARY OF FUND / COST CENTERS /G.L. ACCOUNT TO BILL

FUND	COST CTR	GL ACCT	INT. ORDER	Amount
0001	200050	5529000		$19.00
0001	200050	5410100		$109.84
0001	200050	5490000		$49.90
0001	200050	5490000		$52.36
0001	200050	5490000		$140.46
0001	200050			

(must agree to above figure) **TOTAL** $371.56

I (Cardholder) have complied with the Purchase Card Administrative Order (AO-41) and have retained all required approvals for restrictive uses and quote log for purchases with a value in excess of $1000 and an expected life of more than one -Year such as automobiles and furniture; and computer equipment valued in excess of $750.

1/10/19
Signature of Cardholder / Date

1/11/19
Signature of Approving Official / Date

Bank of America

Purchasing Card

DANIELLE L STERN
FL BREVARD COUNTY BOC
XXXX-XXXX-XXXX-**4809**
December 05, 2018 - January 04, 2019

Cardholder Activity

Account Information

Mail Billing Inquiries to:
BANKCARD CENTER
PO BOX 982238
EL PASO, TX 79998-2238

Customer Service:
1.888.449.2273 24 Hours

TTY Hearing Impaired:
1.800.222.7365 24 Hours

Outside the U.S.:
1.509.353.6656 24 Hours

For Lost or Stolen Card:
1.888.449.2273 24 Hours

Payment Information

Statement Date	01/04/19
Credit Limit	$2,000
Cash Limit	$0
Days in Billing Cycle	31
Total Activity	$371.56

THIS IS NOT A BILL - DO NOT PAY

Account Summary

Credits	$0.00
Cash	$0.00
Purchases	$371.56
Other Debits	$0.00
Cash Fees	$0.00
Other Fees	$0.00
Total Activity	$371.56

Accounting Code: 0001/200050

Transactions

Posting Date	Transaction Date	Description	Reference Number	MCC	Charge	Credit
12/10	12/08	VZWRLSS*MY VZ VB P 800-922-0204 FL	24692168342100434584747	4814	109.84	
12/10	12/08	4TE*CULLIGAN DAYTONA 321-255-5562 FL	24445008342200134228500	5074	19.00	
12/13	12/12	WAL-MART #0974 MELBOURNE FL	24226388347091005224215	5411	49.90	
12/14	12/13	PUBLIX #695 WEST MELBOURNFL	24445008348001182229422	5411	52.36	
12/17	12/14	DUNKIN #335674 Q35 PALM BAY FL	24431068349838000236926	5814	140.46	

0000000 0000000 0000000 4715290017764809

Account Number: XXXX-XXXX-XXXX-**4809**
December 05, 2018 - January 04, 2019

BANK OF AMERICA
PO BOX 15731
WILMINGTON, DE 19886-5731

Total Activity $371.56

Cardholder Signature Date 1/10/19

DANIELLE L STERN **N0002789
FL BREVARD COUNTY BOC
DISTRICT 5 COMMISSION OFFICE
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

Manager Signature Date 1/11/19

:5499900 1 1:000500 17764809"

Culligan of Melbourne

771 NORTH DRIVE
MELBOURNE, FL 32934
(321) 255-5562 (321) 636-1344
bmorissette@culliganmelbourne.com
www.culligancentralflorida.com

IF PAYING BY CREDIT CARD, PLEASE CHECK CORRECT CARD AND FILL OUT BELOW

☐ VISA ☐ ☐ ☐ ☐ PLEASE CHECK BOX TO ENROLL IN AUTOMATIC BILL PAYMENT

CARD NUMBER		V. CODE
SIGNATURE		EXP. DATE
DATE	PAY THIS AMOUNT	ACCOUNT NUMBER
11/28/2018	$19.00	268847

INVOICE NUMBER: 82472 AMOUNT PAID $

ADDRESSEE:
DISTRICT 5 COMMISSIONER
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

REMIT PAYMENT TO:
CULLIGAN WATER PRODUCTS
771 NORTH DR
MELBOURNE, FL 32934-9282

INVOICE
RETURN THIS TOP PORTION WITH YOUR PAYMENT

ACCOUNT NUMBER	SALES ID	SALES ORDER NUMBER	PURCHASE ORDER NUMBER	SHIP VIA	TERMS	NET DUE IN 10 DAYS
268847	JH		4500083054	COMPANY TRUCK	INVOICE NUMBER 82472	INVOICE DATE 11/28/2018

DATE SHIPPED	QUANTITY ORDERED	QUANTITY SHIPPED	ITEM NUMBER	DESCRIPTION	UNIT PRICE	DISCOUNT	NET AMOUNT
				Tick 800659193 Date 11/20/2018			
				P/O Number: 4500083054			
11/20	4.00	4.00		1/2 LITER (CASE)	4.750		19.00
11/20	1.00	1.00		SERVICE FEE	0.000		
				End of Ticket 800659193			

paid 12/7/18 82

Pay on line at www.culligancentralflorida.com Please call our office at 321-255-5562 if you need any assistance.

A LATE PAYMENT FINANCE CHARGE OF 1.5 % PER MONTH MAY BE APPLIED ON BALANCES AFTER 30 DAYS

CULLIGAN WATER PRODUCTS
771 NORTH DRIVE
MELBOURNE, FL 32934

(321) 255-5562 (321) 636-1344

DELIVER TO
DISTRICT 5 COMMISSIONER
STE 175
490 CENTRE LAKE DRIVE NE
PALM BAY FL 32907

TOTAL	19.00
SALES TAX	
FREIGHT/DELIVERY CHARGES	
AMOUNT DUE	$19.00

ORIGINAL INVOICE RETAIN BOTTOM PORTION FOR YOUR RECORDS

26884 757

Online Bill Pay For
Culligan of Melbourne

Account Selection Account Detail Log Out

Thank You For Your Payment.

Payments usually post within two business days.
Please Print This Page For Your Records.

Transaction Details	
Date	12/7/2018 10:06:57 AM
Visa Card	...4809
Total Amount	$19.00
Applied To Account	268847
Result	APPROVED
Authorization Code	023340

verizon

PO BOX 489
NEWARK, NJ 07101-0489

Manage Your Account	Account Number	Date Due
www.vzw.com/mybusinessaccount	742120929-00001	12/15/18

Change your address at
http://sso.verizonenterprise.com

Invoice Number	9819030444

COUNTY OF BREVARD
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

000128070
M111

Quick Bill Summary

Oct 24 – Nov 23

Previous Balance *(see back for details)*	$109.84
Payment – Thank You	-$109.84
Balance Forward	**$.00**
Monthly Charges	$107.18
Usage and Purchase Charges	
Voice	$.00
Messaging	$.00
Data	$.00
Surcharges and Other Charges & Credits	$2.66
Taxes, Governmental Surcharges & Fees	$.00
Total Current Charges	**$109.84**

Total Charges Due by December 15, 2018 **$109.84**

Paid 12/7/18
JK

Pay from phone	Pay on the Web	Questions:
#PMT (#768)	At vzw.com/mybusinessaccount	1.800.922.0204 or *611 from your phone

verizon

Bill Date	November 23, 2018
Account Number	742120929-00001
Invoice Number	9819030444

COUNTY OF BREVARD
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

Total Amount Due by December 15, 2018

Make check payable to Verizon Wireless.
Please return this remit slip with payment.

$109.84

$ ___ . __

PO BOX 660108
DALLAS, TX 75266-0108

981903044401074212092900001000000109840000001098434

Notifications DANIELLE STERN

verizon Manage Account Support
(https://b2b.verizonwireless.com/sms/amsecure/landing/overview.go#/overview)

Location: Choose Location (https://b2b.verizonwireless.com/b2b/commerce/amsecure/chooseZip.go?purchasePath=&isChangeZip=true&isCommerce=true)

Cart Empty
Search

Back to billing

Make a payment

Thank you for your payment!

Transaction Id 760823046

(https://b2b.verizonwireless.com/content/my-business-portal/PublicSafety/publicsafetygridwall1.html?intcmp=INT_B2B-TID5)

Payment details

Billing Account	Payment amount	Payment method	Payment date
742120929-00001	$109.84	Danielle	Dec 7, 2018

Want to do more?

Continue working with this account

742120929-00001

Or

Work on another account

Enter account number

Continue

Manage another payment

Set up Auto Pay

View payment history (/sms/amsecure/payment/activity/show.go)

Welcome to Dunkin' Donuts PC # 335674
Palm Bay, FL 32906
(321) 723-7170
12/14/2018 7:56:44 AM

Eat In
Order: 418

Tax Exempt ID: 858012621

Register:2 Tran Seq No: 1070418
Cashier:Mariann K.
*****SALE*****

3	12 Bagels	38.97
3	12 Donuts	29.97
4	Bx Joe Orig Blnd	63.96
5	8oz Veg CC	14.95
1	Senior 5%	(7.39)

Sub. Total:	$140.46
Tax:	$0.00
Total:	$140.46
Discount Total:	($7.39)
Change	$0.00
Visa:	$140.46

VISA
Card Num : ************4809
Terminal : 2
Approval : 081741
AID : A0000000031010
TVR : 0000001000
IAD : 06010A03A08002
TSI : E800
AR : Y3
TC : E028C8

USD$ 140.46

I agree to pay the above Total Amount according to Card Issuer Agreement.

Signature: ____________

Thank You Come Back Again!
If you have any questions or concerns,
Please call us at 407-930-0920
Or email us at telldunkin@yahoo.com

Publix

Palm Crossings
145 NE Palm Bay Rd
W Melbourne, FL 32904
Store Manager: Glen Williams
321-722-0022

ICE 10 LB	1.99 T F
ICE 20 LB	3.69 T F
PUB HD SPOONS	1.69 T
FRESH FRUIT PLTR L	44.99 T F

TAX EXEMPT #

Order Total		52.36
Grand Total		52.36
Credit	Payment	52.36
Change		0.00
TAX FORGIVEN		3.67

PRESTO!
Trace #: 524202
Reference #: 1232378127
Acct #: XXXXXXXXXXXX4809
Purchase VISA
Amount: $52.36
Auth #: 098495

CREDIT CARD	PURCHASE
A0000000031010	VISA CREDIT
Entry Method:	Chip Read
Mode:	Issuer-PIN Verified

Your cashier was Briana

12/13/2018 12:12 S0695 R152 5962 C0465

Publix Super Markets, Inc.

See back of receipt for your chance
to win $1000 ID #:7M5Q54BK2RT

Walmart

321-984-2715 Mgr:JEFF MILZ
845 PALM BAY RD NE
WEST MELBOURNE FL 32904
ST# 00974 OP# 000062 TE# 12 TR# 04317

SC 10OZ 15PK	068113178113	F	2.00	0
SC 10OZ 15PK	068113178113	F	2.00	0
TPP 52OZ	004850020274	F	3.28	0
TPP 52OZ	004850020274	F	3.28	0
MUFFIN MIX	001600045602	F	2.48	0
MUFFIN MIX	001600045609	F	2.48	0
SPREADS	002740010307	F	2.00	0
CRISCO OIL	005150024392	F	1.94	0
NV PROT GRAN	001600043779	F	3.77	0
JELLY	005150001229	F	2.84	0
55CT 9 PLT	001117999555		2.47	0
BAKING CUPS	007874219830		1.00	0
YOP YOGURT	007047040389	F	3.98	0
YOP YOGURT	007047040391	F	3.98	0
YP FP8 BL/MB	007047014171	F	3.98	0
GV 6 ULT DBL	007874209763		8.42	0
		SUBTOTAL	49.90	

VOIDED BANKCARD TRANSACTION
VISA CREDIT **** **** **** 4809 I 1
AID A0000000031010
TERMINAL # 285330217
TRANSACTION NOT COMPLETE
12/12/18 13:52:57

TOTAL 49.90
VISA TEND 49.90

VISA CREDIT- 4809 I 1 APPR#051031
REF # 834600522421
TRANS ID - 468346679961298
VALIDATION - BDP6
PAYMENT SERVICE - E
AID A0000000031010
TC F5617D610D8ACA20
TERMINAL # 285330217
*Pin Verified
12/12/18 13:53:22

CHANGE DUE 0.00
ITEMS SOLD 16
TC# 0267 9968 8696 1503 7533

12/12/18 13:53:35
CUSTOMER COPY
Scan with Walmart app to save receipts

EHIBIT "B"
BREVARD COUNTY PURCHASING CARD MONTHLY RECONCILIATION REPORT

PAGE __ of __

Cardholder's Name: Danielle Stern **Cardholder Phone Ext:** 321-253-6611 **Personnel #:** 11006140

Cardholder's Department: D5 Commissioner **Closing Date:** February 4th, 2019

(enter closing date of statement)

Date Purchased or Ordered	Date Received	Vendor Name	Description of Item Purchased	Amount Billed (indicate "Q" for quoted items)	Fund (4 digits)	Cost Center (6 digits)	GL Account # (7 digits)	Internal / Work Order # (6 or 7 digits)
01/09	01/10	Culligan Water	Water Delivery	$14.25	0001	200050	5529000	
01/08	01/09	Verizon Wireless	Cell Service	$109.84	0001	200090	5410100	
01/08	01/10	North American Office Solutions	Printer Lease	$151.80	0001	200090	5490000	
01/08	01/10	North American Office Solutions	Printer usage	$4.34	0001	200090	5490000	
01/08	01/10	North American Office Solutions	Printer usage	$3.98	0001	200090	5490000	

ADD'L PAGES SUBTOTAL ________ (must agree to figure below)

GRAND TOTAL (ALL PAGES) $284.21

SUMMARY OF FUND / COST CENTERS /G.L. ACCOUNT TO BILL

FUND	COST CTR	GL ACCT	INT. ORDER	Amount
0001	200050	5529000		$14.25
0001	200090	5410100		$109.84
0001	200090	5490000		$151.80
0001	200090	5490000		$4.34
0001	200090	5490000		$3.98
0001	200050	5529000		

(must agree to above figure)

TOTAL $284.21

I (Cardholder) have complied with the Purchase Card Administrative Order (AO-41) and have retained all required approvals for restrictive uses and quote log for purchases with a value in excess of $1000 and an expected life of more than one -Year such as automobiles and furniture; and computer equipment valued in excess of $750.

2/12/19
Signature of Cardholder / Date

2/12/19
Signature of Approving Official / Date

mailed 2/19/19 dr

764

Bank of America

DANIELLE L STERN
FL BREVARD COUNTY BOC
XXXX-XXXX-XXXX-**4809**
January 05, 2019 - February 04, 2019

Purchasing Card

Cardholder Activity

Account Information

Mail Billing Inquiries to:
BANKCARD CENTER
PO BOX 982238
EL PASO, TX 79998-2238

Customer Service:
1.888.449.2273 24 Hours

TTY Hearing Impaired:
1.800.222.7365 24 Hours

Outside the U.S.:
1.509.353.6656 24 Hours

For Lost or Stolen Card:
1.888.449.2273 24 Hours

Payment Information

Statement Date	02/04/19
Credit Limit	$2,000
Cash Limit	$0
Days in Billing Cycle	31
Total Activity	$284.21

THIS IS NOT A BILL - DO NOT PAY

Account Summary

Credits	$0.00
Cash	$0.00
Purchases	$284.21
Other Debits	$0.00
Cash Fees	$0.00
Other Fees	$0.00
Total Activity	$284.21

Accounting Code: 0001/200050

Transactions

Posting Date	Transaction Date	Description	Reference Number	MCC	Charge	Credit
01/09	01/08	VZWRLSS*MY VZ VB P 800-922-0204 FL	24692169008100184485429	4814	109.84	
01/10	01/08	NORTH AMERICAN OFFICE SOL407-2640283 FL	24639239009900019600050	5044	4.34	
01/10	01/08	NORTH AMERICAN OFFICE SOL407-2640283 FL	24639239009900019600068	5044	151.80	
01/10	01/08	NORTH AMERICAN OFFICE SOL407-2640283 FL	24639239009900019600076	5044	3.98	
01/10	01/09	4TE*CULLIGAN DAYTONA 321-255-5562 FL	24445009009200095652823	5074	14.25	

0000000 0000000 0000000 4715290017764809

Account Number: XXXX-XXXX-XXXX-**4809**
January 05, 2019 - February 04, 2019

Total Activity **$284.21**

Cardholder Signature 2/12/19 Date

Manager Signature 2/12/19 Date

BANK OF AMERICA
PO BOX 15731
WILMINGTON, DE 19886-5731

DANIELLE L STERN **N0001538
FL BREVARD COUNTY BOC
DISTRICT 5 COMMISSION OFFICE
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

⑆5499001 1⑆000500177648O9⑈

765

verizon

PO BOX 489
NEWARK, NJ 07101-0489

Manage Your Account	Account Number	Date Due
www.vzw.com/mybusinessaccount	742120929-00001	01/15/19

Change your address at
http://sso.verizonenterprise.com

Invoice Number	9820959036

COUNTY OF BREVARD
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

000128794
M112

Quick Bill Summary

Nov 24 – Dec 23

Previous Balance *(see back for details)*	$109.84
Payment – Thank You	–$109.84
Balance Forward	**$.00**
Monthly Charges	$107.18
Usage and Purchase Charges	
Voice	$.00
Messaging	$.00
Data	$.00
Surcharges and Other Charges & Credits	$2.66
Taxes, Governmental Surcharges & Fees	$.00
Total Current Charges	**$109.84**

Total Charges Due by January 15, 2019 **$109.84**

Pay from phone	Pay on the Web	Questions:
#PMT (#768)	At vzw.com/mybusinessaccount	1.800.922.0204 or *611 from your phone

verizon

COUNTY OF BREVARD
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

Bill Date	December 23, 2018
Account Number	742120929-00001
Invoice Number	9820959036

Total Amount Due by January 15, 2019

Make check payable to Verizon Wireless.
Please return this remit slip with payment.

$109.84

$ ☐☐☐.☐☐

Paid 1/7/19
AR

PO BOX 660108
DALLAS, TX 75266-0108

98209590360107421209290000100000010984000000109843

766

Print Close

Print Date : 1/7/2019

Thank you for your payment!

Transaction Id 763520545

Billing Account	**Payment amount**	**Payment method**	**Payment date**
742120929-00001	$109.84	Danielle	Mon Jan 07 2019 13:45:52 GMT-0500 (Eastern Standard Time)

767

Culligan of Melbourne

771 NORTH DRIVE
MELBOURNE, FL 32934
(321) 255-5562 (321) 636-1344
bmorissette@culliganmelbourne.com
www.culligancentralflorida.com

IF PAYING BY CREDIT CARD, PLEASE CHECK CORRECT CARD AND FILL OUT BELOW

☐ VISA ☐ MasterCard ☐ ☐ ☐ PLEASE CHECK BOX TO ENROLL IN AUTOMATIC BILL PAYMENT

CARD NUMBER	V. CODE
SIGNATURE	EXP. DATE

DATE	PAY THIS AMOUNT	ACCOUNT NUMBER
12/27/2018	$14.25	268847

PAY BY DATE: JAN 15 AMOUNT PAID $

ADDRESSEE:

001663
DISTRICT 5 COMMISSIONER
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

REMIT PAYMENT TO:

CULLIGAN WATER PRODUCTS
771 NORTH DR
MELBOURNE, FL 32934-9282

BALANCE FORWARD

RETURN THIS TOP PORTION WITH YOUR PAYMENT

BRANCH ID: ME-01
CUSTOMER: DISTRICT 5 COMMISSIONER

PREVIOUS BALANCE: $19.00

DATE	QUANTITY	DESCRIPTION	REF	AMOUNT	BALANCE
12/10/2018	-1.00	Payment	EFT	-19.00	0.00
12/19/2018	3.00	1/2 LITER (CASE)	800661538	14.25	14.25
12/19/2018	1.00	SERVICE FEE	800661538	0.00	14.25

Pay on line at www.culligancentralflorida.com Please call our office at 321-255-5562 if you need any assistance.

Paid 1/8/19 dr

ACCOUNTS ARE SUBJECT TO A LATE PAYMENT FINANCE CHARGE

FINANCE CHARGE SCHEDULE

	PERIODIC RATE	ANNUAL RATE	PLEASE PAY NEW BALANCE BEFORE
OVER $ 3	1.50%	18.00 %	JAN 15
TO 3	0.00%	0.00 %	MIN CHARGE 0.50

0-30	31-60	61-90	Over 90
14.25	0.00	0.00	0.00

Balance Due $14.25

CULLIGAN WATER PRODUCTS
771 NORTH DRIVE
MELBOURNE, FL 32934

(321) 255-5562 (321) 636-1344

SERVICE ADDRESS:
DISTRICT 5 COMMISSIONER
STE 175
490 CENTRE LAKE DRIVE NE
PALM BAY FL 32907

Next Deliveries: 01/16/19 02/13/19 03/13/19 04/10/19

HAVE A SAFE AND PROSPEROUS NEW YEAR!!!

STATEMENT DATE	ACCOUNT NUMBER	NAME
12/27/2018	268847	DISTRICT 5 COMMISSIONER

268847

Online Bill Pay For
Culligan of Melbourne

Account Selection | Account Detail | Log Out

Thank You For Your Payment.

Payments usually post within two business days.
Please Print This Page For Your Records.

Transaction Details	
Date	1/8/2019 6:24:48 AM
Visa Card	...4809
Total Amount	$14.25
Applied To Account	268847
Result	APPROVED
Authorization Code	092999

769

CONTRACT INVOICE

Office Solutions
North American Office Solutions

6314 Kingspointe Pkwy
Suite 7 Orlando, FL 32819
P: 407-264-0283 F: 407-264-0230

Invoice Number: 669800
Invoice Date: 12/21/2018

Bill To: Brevard County
Accounts Payable
2725 Judge Fran Jamieson Way
Bldg C Rm 203
Viera, FL 32940

Customer: Brevard County
2725 Judge Fran Jamieson
Way
Bldg C Rm 203
Viera, FL 32940

Account No	Payment Terms	Due Date	Invoice Total	Balance Due
BC18	Net 60	02/19/2019	$3.98	**$3.98**

Invoice Remarks

Contract Number	Contact	Contract Amount	P.O. Number	Start Date	Exp. Date
4500097791Lease-01		$3.98	4500097791	04/27/2018	06/01/2023

Contract Remarks

Contract Lease Charge is the Quarterly billing for Lease.

Summary:

Contract base rate charge for this billing period	$0.00
Contract overage charge for the 11/27/2018 to 12/26/2018 overage period	$3.98 **
**See overage details below	$3.98

Detail:

Equipment included under this contract

Canon/Canon IR C3525I

Number	Serial Number	Base Adj.	Location
25485	XTK02920	$0.00	Brevard County - Dist V Commission Office 490 Centre Lake Drive Ste 175 Palm Bay, FL 32907 District 5 Commission Office

Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B\W	black meter	1,258	1,519		261	0	261	$0.011590	$3.02
Color	color meter	680	704		24	0	24	$0.039830	$0.96
									$3.98

paid 1/8/19
[illegible]

Please make all checks payable to North American Office Solutions and remit payments to: 6314 Kingspointe Pkwy, Unit 7 Orlando FL 32819

Invoice SubTotal	$3.98
Tax:	$0.00
Invoice Total	$3.98
Balance Due:	**$3.98**

770

Roig, Janette

From:	Accounts Receivable <AR@naofficesolutions.com>
Sent:	Tuesday, January 8, 2019 1:38 PM
To:	Accounts Receivable
Cc:	Accounts Receivable
Subject:	Bankcard Order Confirmation

CAUTION: This email originated from outside of the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Dear Danielle Stern, This is a confirmation of an online transaction placed with North American Office Solutions . The Sale transaction totaled $3.98 and will be processed to your account. Order Number : ID18JDckGs Approval Code : 077686

771

CONTRACT INVOICE

Office Solutions
North American Office Solutions

6314 Kingspointe Pkwy
Suite 7 Orlando, FL 32819
P: 407-264-0283 F: 407-264-0230

Invoice Number: 663533
Invoice Date: 11/26/2018

Bill To: Brevard County
Accounts Payable
2725 Judge Fran Jamieson Way
Bldg C Rm 203
Viera, FL 32940

Customer: Brevard County
2725 Judge Fran Jamieson
Way
Bldg C Rm 203
Viera, FL 32940

Account No	Payment Terms	Due Date	Invoice Total	Balance Due
BC18	Net 60	01/25/2019	$4.34	**$4.34**

Invoice Remarks

Contract Number	Contact	Contract Amount	P.O. Number	Start Date	Exp. Date
4500097791Lease-01		$4.34	4500097791	04/27/2018	06/01/2023

Contract Remarks

Contract Lease Charge is the Quarterly billing for Lease.

Summary:

Contract base rate charge for this billing period	$0.00
Contract overage charge for the 10/27/2018 to 11/26/2018 overage period	$4.34 **
**See overage details below	$4.34

Detail:

Equipment included under this contract

Canon/Canon IR C3525I

Number	Serial Number	Base Adj.	Location
25485	XTK02920	$0.00	Brevard County - Dist V Commission Office 490 Centre Lake Drive Ste 175 Palm Bay, FL 32907 District 5 Commission Office

Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B\W	black meter	1,031	1,258		227	0	227	$0.011590	$2.63
Color	color meter	637	680		43	0	43	$0.039830	$1.71
									$4.34

paid 1/8/19
BR

Please make all checks payable to North American Office Solutions and remit payments to: 6314 Kingspointe Pkwy, Unit 7 Orlando FL 32819

Invoice SubTotal	$4.34
Tax:	$0.00
Invoice Total	$4.34
Balance Due:	**$4.34**

Roig, Janette

From:	Accounts Receivable <AR@naofficesolutions.com>
Sent:	Tuesday, January 8, 2019 1:37 PM
To:	Accounts Receivable
Cc:	Accounts Receivable
Subject:	Bankcard Order Confirmation

CAUTION: This email originated from outside of the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Dear Danielle Stern,   This is a confirmation of an online transaction placed with North American Office Solutions . The Sale transaction totaled $4.34 and will be processed to your account.   Order Number : ID18JDbmGL   Approval Code : 019947

773

CONTRACT INVOICE

Office Solutions
North American Office Solutions

6314 Kingspointe Pkwy
Suite 7 Orlando, FL 32819
P: 407-264-0283 F: 407-264-0230

Invoice Number:	663993
Invoice Date:	12/02/2018

Bill To: Brevard County
Accounts Payable
2725 Judge Fran Jamieson Way
Bldg C Rm 203
Viera, FL 32940

Customer: Brevard County
2725 Judge Fran Jamieson
Way
Bldg C Rm 203
Viera, FL 32940

Account No	Payment Terms	Due Date	Invoice Total	Balance Due
BC18	Net 60	01/31/2019	$151.80	**$151.80**

Invoice Remarks

Contract Number	Contact	Contract Amount	P.O. Number	Start Date	Exp. Date
4500097791Lease-01		$151.80	4500097791	04/27/2018	06/01/2023

Contract Remarks

Contract Lease Charge is the Quarterly billing for Lease.

Summary:

Contract base rate charge for the 12/01/2018 to 02/28/2019 billing period	$0.00
Contract overage charge for this overage period	$0.00 **
Contract Lease Charge:	$151.80
**See overage details below	$151.80

Detail:

Equipment included under this contract

Canon/Canon IR C3525I

Number	Serial Number	Base Adj.	Location	Lease
25485	XTK02920	$0.00	Brevard County - Dist V Commission Office 490 Centre Lake Drive Ste 175 Palm Bay, FL 32907 District 5 Commission Office	$151.80

Paid 1/8/19 grr

Please make all checks payable to North American Office Solutions and remit payments to: 6314 Kingspointe Pkwy, Unit 7 Orlando FL 32819

Invoice SubTotal	$151.80
Tax:	$0.00
Invoice Total	$151.80
Balance Due:	**$151.80**

Roig, Janette

From:	Accounts Receivable <AR@naofficesolutions.com>
Sent:	Tuesday, January 8, 2019 1:37 PM
To:	Accounts Receivable
Cc:	Accounts Receivable
Subject:	Bankcard Order Confirmation

CAUTION: This email originated from outside of the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Dear Danielle Stern, This is a confirmation of an online transaction placed with North American Office Solutions . The Sale transaction totaled $151.80 and will be processed to your account. Order Number : ID18JDcDah Approval Code : 021851

EHIBIT "B"
BREVARD COUNTY PURCHASING CARD MONTHLY RECONCILIATION REPORT

Cardholder's Name: Danielle Stern **Cardholder Phone Ext:** 321-253-6611 **Personnel #:** 11006140

Cardholder's Department: D5 Commissioner **Closing Date:** March 4th, 2019
(enter closing date of statement)

Date Purchased or Ordered	Date Received	Vendor Name	Description of Item Purchased	Amount Billed (indicate "Q" for quoted items)	Fund (4 digits)	Cost Center (6 digits)	GL Account # (7 digits)	Internal / Work Order # (6 or 7 digits)
02/08	02/11	Verizon Wireless	Cell Service	$109.94	0001	200090	5410100	
02/07	02/11	Culligan Water	Water Delivery	$9.50	0001	200050	5529000	
02/07	02/11	North American Office Solutions	Printer Usage	$7.69	0001	200090	5490000	
02/28	03/11	Palm Bay Finance Web	Fire Inspection Fee	$50.00	0001	200090	5310000	

ADD'L PAGES SUBTOTAL ______

GRAND TOTAL (ALL PAGES) $177.13 (must agree to figure below)

SUMMARY OF FUND / COST CENTERS /G.L. ACCOUNT TO BILL

FUND	COST CTR	GL ACCT	INT. ORDER	Amount
0001	200090	5410100		$109.94
0001	200050	5529000		$9.50
0001	200090	5490000		$7.69
0001	200090	5310000		$50.00
			TOTAL	$177.13

(must agree to above figure)

I (Cardholder) have complied with the Purchase Card Administrative Order (AO-41) and have retained all required approvals for restrictive uses and quote log for purchases with a value in excess of $1000 and an expected life of more than one -Year such as automobiles and furniture; and computer Equipment valued in excess of $750.

Danielle Stern 3/12/19
Signature of Cardholder / Date

3/12/19
Signature of Approving Official / Date

Bank of America

DANIELLE L STERN
FL BREVARD COUNTY BOC
XXXX-XXXX-XXXX-**4809**
February 05, 2019 - March 04, 2019

Purchasing Card

Cardholder Activity

Account Information

Mail Billing Inquiries to:
BANKCARD CENTER
PO BOX 982238
EL PASO, TX 79998-2238

Customer Service:
1.888.449.2273 24 Hours

TTY Hearing Impaired:
1.800.222.7365 24 Hours

Outside the U.S.:
1.509.353.6656 24 Hours

For Lost or Stolen Card:
1.888.449.2273 24 Hours

Payment Information

Statement Date	03/04/19
Credit Limit	$2,000
Cash Limit	$0
Days in Billing Cycle	28
Total Activity	$177.13

THIS IS NOT A BILL - DO NOT PAY

Account Summary

Credits	$0.00
Cash	$0.00
Purchases	$177.13
Other Debits	$0.00
Cash Fees	$0.00
Other Fees	$0.00
Total Activity	$177.13

Accounting Code: 0001/200050

Transactions

Posting Date	Transaction Date	Description	Reference Number	MCC	Charge	Credit
02/11	02/08	VZWRLSS*MY VZ VB P 800-922-0204 FL	24692169039100527615982	4814	109.94	
02/11	02/07	NORTH AMERICAN OFFICE SOL407-2640283 FL	24639239039900011800033	5044	7.69	
02/11	02/08	4TE*CULLIGAN DAYTONA 321-255-5562 FL	24445009039200115334927	5074	9.50	
03/01	02/28	PALM BAY FINANCE WEB 321-9523419 FL	24343119059900019903587	9399	50.00	

0000000 0000000 0000000 4715290017764809

Account Number: XXXX-XXXX-XXXX-**4809**
February 05, 2019 - March 04, 2019

BANK OF AMERICA
PO BOX 15731
WILMINGTON, DE 19886-5731

DANIELLE L STERN
FL BREVARD COUNTY BOC
DISTRICT 5 COMMISSION OFFICE
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

**N0002350

Total Activity $177.13

Cardholder Signature ________ Date 3/12/19

Manager Signature ________ Date 3/12/19

⑆5499001⑆⑈000500177648O9⑈

776

NA Office Solutions
North American Office Solutions

6314 Kingspointe Pkwy
Suite 7 Orlando, FL 32819
P: 407-264-0283 F: 407-264-0230

CONTRACT INVOICE

Invoice Number: 676463
Invoice Date: 01/24/2019

Bill To: Brevard County
Accounts Payable
2725 Judge Fran Jamieson Way
Bldg C Rm 203
Viera, FL 32940

Customer: Brevard County
2725 Judge Fran Jamieson
Way
Bldg C Rm 203
Viera, FL 32940

Account No	Payment Terms	Due Date	Invoice Total	Balance Due
BC18	Net 60	03/25/2019	$7.69	**$7.69**

Invoice Remarks

Contract Number	Contact	Contract Amount	P.O. Number	Start Date	Exp. Date
4500097791Lease-01		$7.69	4500097791	04/27/2018	06/01/2023

Contract Remarks

Contract Lease Charge is the Quarterly billing for Lease.

Summary:

Contract base rate charge for this billing period	$0.00
Contract overage charge for the 12/27/2018 to 01/26/2019 overage period	$7.69 **
**See overage details below	$7.69

Detail:

Equipment included under this contract

Canon/Canon IR C3525I

Number	Serial Number	Base Adj.	Location
25485	XTK02920	$0.00	Brevard County - Dist V Commission Office 490 Centre Lake Drive Ste 175 Palm Bay, FL 32907 District 5 Commission Office

Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B\W	black meter	1,519	1,732		213	0	213	$0.011590	$2.47
Color	color meter	704	835		131	0	131	$0.039830	$5.22
									$7.69

paid 2/7/19
OR

Please make all checks payable to North American Office Solutions and remit payments to: 6314 Kingspointe Pkwy, Unit 7 Orlando FL 32819

Invoice SubTotal	$7.69
Tax:	$0.00
Invoice Total	$7.69
Balance Due:	**$7.69**

Roig, Janette

From:	Karen Allie <KALLIE@naofficesolutions.com>
Sent:	Wednesday, February 13, 2019 11:18 AM
To:	Roig, Janette
Subject:	FW: Bankcard Order Confirmation

Thank you,

Karen Allie
Administration Manager
North American Office Solutions
6314 Kingspointe Parkway, Unit 7
Orlando FL 32819
407-264-0283
407-377-0380 - Direct
kallie@naos.us
www.naofficesolutions.com

-----Original Message-----
From: North American Office Solutions [mailto:ar@naos.us]
Sent: Thursday, February 7, 2019 10:40 AM
To: Accounts Receivable <AR@naofficesolutions.com>
Cc: Accounts Receivable <AR@naofficesolutions.com>
Subject: Bankcard Order Confirmation

Dear Danielle Stern, This is a confirmation of an online transaction placed with North American Office Solutions . The Sale transaction totaled $7.69 and will be processed to your account. Order Number : ID27JAeqXF Approval Code : 035829

Palm Bay Fire Rescue
120 Malabar Rd SE
Palm Bay, FL 32907

Invoice #	1812281273020
Invoice Date	12/28/2018
Balance Due	**$50.00**
Due Date	1/27/2019

This invoice is 25 day(s) overdue.

This invoice is past due.

Remit payment to: City of Palm Bay
ATTN: Fire Prevention
120 Malabar Rd SE
Palm Bay, FL 32907

Or, pay online at
https://pay.palmbayflorida.org

Brevard County District 5 Commissions Office
490 Centre Lake Road Northeast STE 175
Palm Bay FL 32905

Brevard County District 5 Commissions Office
490 Centre Lake Road Northeast STE 175
Palm Bay FL 32905

Invoice #1812281273020
12/28/2018

Description	Amount Owed	Amount Paid
FD - Business Occupancies: Initial Inspection	$45.00	
LATE FEE	$5.00	
Subtotal:	$50.00	$0.00
Balance Due:	**$50.00**	

* Late fee due to verifying if we were responsible for payment or landlord. —Janette R.

In accordance with the City of Palm Bay Code of Ordinances, Title III, Administration, Chapter 33, Resolution No. 2016-36, the following fees shall be applied to inspection(s) service(s) as listed. Payment must be made within thirty (30) days of receipt of this notice. Detach bottom portion and return with payment. Make payable to: **City of Palm Bay.**

Or, pay online at https://pay.palmbayflorida.org

Late Fees: A $5 or 5% (whichever is greater) fee will apply to all unpaid invoices after 30 days.
Failure to pay fees and fines: All costs and legal fees incurred by the City to collect fees and fines shall be paid by the person or entities that fail to make timely payments.

Please detach and return this portion of the invoice of the invoice with your check, payable to **City of Palm Bay.**
Be sure to include your fire inspection **Invoice Number** on your remittance.

Company/Entity Name:______________________________ **Store/Unit #:**_______________

Acct. #:___________________ **Invoice #:**____________________ **AMOUNT:$**____________

Inspector: Signature valid only in mobile-eyes documents
Mayra Leakakos 12/28/2018

PALM BAY FIRE RESCUE

120 Malabar Rd SE
Palm Bay, FL 32907
Fire Marshal's Office
Tel (321) 953-8929   Fax (321) 733-3073
www.palmbayflorida.org

Occupant Name:	Brevard County District 5 Commissions Office	**Inspection Date:**	12/28/2018
Address:	490 Centre Lake Road Northeast	**InspectionType:**	Reinspection
Suite:	175	**Inspected By:**	Mayra Leakakos
Occupant Number:		**Complex Name:**	490 Centre Lake

#	Insp. Result	Location	Code Set	Code
1	**Fail - Cleared**		FL NFPA 01 2015 Chapter 13 Fire Protection Systems	13.6.1.1 - Scope.
	✔ ***Cleared on 12/28/2018***			
2	**Fail - Cleared**		City Ordinance Business Tax Receipt	110.17 - Unlawful to operate business without business tax receipt.
	✔ ***Cleared on 12/28/2018***			

Comment: BTR not needed for this office.

Thank you for keeping your business and our community safe!

Inspector: *Signature on file*
Mayra Leakakos
12/28/2018

Palm Bay Finance Web

Secure Payment Form

Payment Approved

Thank you, your payment has been accepted. Please retain this receipt for your records.

Payment Date:	02/28/19
Payment Amount:	50.00
Order Number:	
Ref Number:	100358
Auth Code:	058591

Roig, Janette

From: support@usaepay.com
Sent: Thursday, February 28, 2019 9:15 AM
To: Roig, Janette
Subject: Palm Bay Finance Receipt Customer Receipt

Your credit card payment has been received by Palm Bay Finance Web. Below is your receipt of payment.

Transaction Details

Date: 02/28/19 06:15:12
Merchant: Palm Bay Finance Web
Type: Credit Card Sale
Invoice #:
Amount: 50.00
Description:
Card Holder: Danielle Stern
Card Number: xxxxxxxxxxxxxx4809

v8.2-ue-g-c

verizon

PO BOX 489
NEWARK, NJ 07101-0489

Manage Your Account	Account Number	Date Due
www.vzw.com/mybusinessaccount	742120929-00001	02/15/19

Change your address at
http://sso.verizonenterprise.com

Invoice Number	9822899285

Quick Bill Summary

Dec 24 – Jan 23

COUNTY OF BREVARD
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

000133893
M101

Previous Balance *(see back for details)*	$109.84
Payment – Thank You	-$109.84
Balance Forward	**$.00**
Monthly Charges	$107.18
Usage and Purchase Charges	
Voice	$.00
Messaging	$.00
Data	$.00
Surcharges and Other Charges & Credits	$2.76
Taxes, Governmental Surcharges & Fees	$.00
Total Current Charges	**$109.94**

Total Charges Due by February 15, 2019 **$109.94**

Verizon Wireless News

Now It's Easier To Get Help Online

Our new online support experience saves you time by giving you access to the help you need when you need it. Sign in to get personalized help that's specific to your bill, plan and devices. Visit go.vzw.com/support.

Pay from phone	Pay on the Web	Questions:
#PMT (#768)	At vzw.com/mybusinessaccount	1.800.922.0204 or *611 from your phone

verizon

Bill Date	January 23, 2019
Account Number	742120929-00001
Invoice Number	9822899285

COUNTY OF BREVARD
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

Total Amount Due by February 15, 2019

Make check payable to Verizon Wireless.
Please return this remit slip with payment.

$109.94

$ ☐☐☐.☐☐

Paid 2/7/19
JR

PO BOX 660108
DALLAS, TX 75266-0108

98228992850107421209290000100000010994000000109943

Make a payment

Thank you for your payment!

Transaction Id 355779591

Print

Payment details

Billing Account	Payment amount	Payment method	Payment date
742120929-00001	$109.94	Danielle	Feb 7, 2019

Want to do more?

Continue working with this account

742120929-00001

Or

Work on another account

Enter account number

Continue

Manage another payment

Set up Auto Pay

View payment history **(/sms/amsecure/payment/activity/show.go)**

of Melbourne

771 NORTH DRIVE
MELBOURNE, FL 32934
(321) 255-5562 (321) 636-1344
bmorissette@culliganmelbourne.com
www.culligancentralflorida.com

IF PAYING BY CREDIT CARD, PLEASE CHECK CORRECT CARD AND FILL OUT BELOW

☐ VISA ☐ MasterCard ☐ ☐ ☐ PLEASE CHECK BOX TO ENROLL IN AUTOMATIC BILL PAYMENT

CARD NUMBER	V. CODE
SIGNATURE	EXP. DATE

DATE	PAY THIS AMOUNT	ACCOUNT NUMBER
01/28/2019	$9.50	268847

INVOICE NUMBER: 83257 AMOUNT PAID $

ADDRESSEE:
DISTRICT 5 COMMISSIONER
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

REMIT PAYMENT TO:
CULLIGAN WATER PRODUCTS
771 NORTH DR
MELBOURNE, FL 32934-9282

INVOICE
RETURN THIS TOP PORTION WITH YOUR PAYMENT

ACCOUNT NUMBER	SALES ID	SALES ORDER NUMBER	PURCHASE ORDER NUMBER	SHIP VIA	TERMS NET DUE IN 10 DAYS	
268847	KM		4500083054	COMPANY TRUCK	INVOICE NUMBER 83257	INVOICE DATE 01/28/2019

DATE SHIPPED	QUANTITY ORDERED	QUANTITY SHIPPED	ITEM NUMBER	DESCRIPTION	UNIT PRICE	DISCOUNT	NET AMOUNT
				Tick 800663877 Date 01/16/2019			
				P/O Number: 4500083054			
01/16	2.00	2.00		1/2 LITER (CASE)	4.750		9.50
01/16	1.00	1.00		SERVICE FEE	0.000		
				End of Ticket 800663877			

paid 2/7/19 JR

Pay on line at www.culligancentralflorida.com Please call our office at 321-255-5562 if you need any assistance.

A LATE PAYMENT FINANCE CHARGE OF 1.5 % PER MONTH MAY BE APPLIED ON BALANCES AFTER 30 DAYS

CULLIGAN WATER PRODUCTS
771 NORTH DRIVE
MELBOURNE, FL 32934
(321) 255-5562 (321) 636-1344

DELIVER TO:
DISTRICT 5 COMMISSIONER
STE 175
490 CENTRE LAKE DRIVE NE
PALM BAY FL 32907

TOTAL	9.50
SALES TAX	
FREIGHT/DELIVERY CHARGES	
AMOUNT DUE	**$9.50**

785

ORIGINAL INVOICE RETAIN BOTTOM PORTION FOR YOUR RECORDS

268847

Thank You For Your Payment.

Payments usually post within two business days.
Please Print This Page For Your Records.

Transaction Details	
Date	2/7/2019 12:16:55 PM
Visa Card	...4809
Total Amount	$9.50
Applied To Account	268847
Result	APPROVED
Authorization Code	014826

EHIBIT "B"
BREVARD COUNTY PURCHASING CARD MONTHLY RECONCILIATION REPORT

PAGE ___ of ___

Cardholder's Name: Danielle Stern **Cardholder Phone Ext:** 321-253-6611 **Personnel #:** 11006140

Cardholder's Department: D5 Commissioner **Closing Date:** April 4th, 2019

(enter closing date of statement)

Date Purchased or Ordered	Date Received	Vendor Name	Description of Item Purchased	Amount Billed (indicate "Q"for quoted items)	Fund (4 digits)	Cost Center (6 digits)	GL Account # (7 digits)	Internal / Work Order # (6 or 7 digits)
03/09	03/11	Verizon Wireless	Cell Service	$109.94	0001	200090	5410100	
03/12	03/13	Culligan Water	Water Delivery	$19.00	0001	200050	5529000	
03/08	03/11	USPS Post Office	Postal Stamps	$60.19	0001	200090	5510000	
03/08	03/11	Office Depot	Office Supplies	$137.79	0001	200090	5510000	
03/08	03/11	Office Depot	Office Supplies	$25.99	0001	200090	5510000	

ADD'L PAGES SUBTOTAL ______

GRAND TOTAL (ALL PAGES) $352.91 (must agree to figure below)

SUMMARY OF FUND / COST CENTERS /G.L. ACCOUNT TO BILL

FUND	COST CTR	GL ACCT	INT. ORDER	Amount
0001	200090	5410100		$109.94
0001	200050	5529000		$19.00
0001	200090	5510000		$60.19
0001	200090	5510000		$137.79
0001	200090	5510000		$25.99

(must agree to above figure) **TOTAL** $352.91

I (Cardholder) have complied with the Purchase Card Administrative Order (AO-41) and have retained all required approvals for restrictive uses and quote log for purchases with a value in excess of $1000 and an expected life of more than one -Year such as automobiles and furniture; and computer Equipment valued in excess of $750.

Danielle Stern 4/16/2019

Signature of Cardholder / Date

Signature of Approving Official / Date

Bank of America

Purchasing Card

DANIELLE L STERN
FL BREVARD COUNTY BOC
XXXX-XXXX-XXXX-**4809**
March 05, 2019 - April 04, 2019

Cardholder Activity

Account Information

Mail Billing Inquiries to:
BANKCARD CENTER
PO BOX 982238
EL PASO, TX 79998-2238

Customer Service:
1.888.449.2273 24 Hours

TTY Hearing Impaired:
1.800.222.7365 24 Hours

Outside the U.S.:
1.509.353.6656 24 Hours

For Lost or Stolen Card:
1.888.449.2273 24 Hours

Payment Information

Statement Date	04/04/19
Credit Limit	$2,000
Cash Limit	$0
Days in Billing Cycle	31
Total Activity	$352.91

THIS IS NOT A BILL - DO NOT PAY

Account Summary

Credits	$0.00
Cash	$0.00
Purchases	$352.91
Other Debits	$0.00
Cash Fees	$0.00
Other Fees	$0.00
Total Activity	$352.91

Accounting Code: 0001/200050

Transactions

Posting Date	Transaction Date	Description		Reference Number	MCC	Charge	Credit
03/11	03/08	USPS PO 1157990461	MELBOURNE FL	24445009068001053744745	9402	60.19	
03/11	03/09	VZWRLSS*MY VZ VB P	800-922-0204 FL	24692169068100720242414	4814	109.94	
03/11	03/08	OFFICE DEPOT #2653	INDN HBR BCH FL	24445749068200125481689	5943	137.79	
03/13	03/12	4TE*CULLIGAN DAYTONA	321-255-5562 FL	24445009071200110690009	5074	19.00	
03/14	03/12	OFFICE DEPOT #2703	PALM BAY FL	24445749072100184751937	5943	25.99	

0000000 0000000 0000000 4715290017764809

Account Number: XXXX-XXXX-XXXX-**4809**
March 05, 2019 - April 04, 2019

BANK OF AMERICA
PO BOX 15731
WILMINGTON, DE 19886-5731

DANIELLE L STERN **N0002359
FL BREVARD COUNTY BOC
DISTRICT 5 COMMISSION OFFICE
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

Total Activity **$352.91**

Cardholder Signature Date 4/16/2019

Manager Signature Date 4/16/19

⑆5499900 11⑆000500 17764809⑈

Culligan® of Melbourne

771 NORTH DRIVE
MELBOURNE, FL 32934
(321) 255-5562 (321) 636-1344
bmorissette@culliganmelbourne.com
www.culligancentralflorida.com

IF PAYING BY CREDIT CARD, PLEASE CHECK CORRECT CARD AND FILL OUT BELOW

☐ VISA ☐ MasterCard ☐ ☐ ☐ PLEASE CHECK BOX TO ENROLL IN AUTOMATIC BILL PAYMENT

CARD NUMBER	V. CODE
SIGNATURE	EXP. DATE

DATE	PAY THIS AMOUNT	ACCOUNT NUMBER
02/25/2019	$19.00	268847

INVOICE NUMBER: 83591 AMOUNT PAID $

ADDRESSEE:
DISTRICT 5 COMMISSIONER
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

REMIT PAYMENT TO:
CULLIGAN WATER PRODUCTS
771 NORTH DR
MELBOURNE, FL 32934-9282

INVOICE
RETURN THIS TOP PORTION WITH YOUR PAYMENT

ACCOUNT NUMBER	SALES ID	SALES ORDER NUMBER	PURCHASE ORDER NUMBER	SHIP VIA	TERMS	NET DUE IN 10 DAYS
268847	KM		4500083054	COMPANY TRUCK	INVOICE NUMBER 83591	INVOICE DATE 02/25/2019

DATE SHIPPED	QUANTITY ORDERED	QUANTITY SHIPPED	ITEM NUMBER	DESCRIPTION	UNIT PRICE	DISCOUNT	NET AMOUNT
				Tick 800666310 Date 02/13/2019			
				P/O Number: 4500083054			
02/13	4.00	4.00		1/2 LITER (CASE)	4.750		19.00
02/13	1.00	1.00		SERVICE FEE	0.000		
				End of Ticket 800666310			

Pay on line at www.culligancentralflorida.com Please call our office at 321-255-5562 if you need any assistance.

Paid 3/11/19 912

A LATE PAYMENT FINANCE CHARGE OF 1.5 % PER MONTH
MAY BE APPLIED ON BALANCES AFTER 30 DAYS

CULLIGAN WATER PRODUCTS
771 NORTH DRIVE
MELBOURNE, FL 32934
(321) 255-5562 (321) 636-1344

DELIVER TO:
DISTRICT 5 COMMISSIONER
STE 175
490 CENTRE LAKE DRIVE NE
PALM BAY FL 32907

TOTAL	19.00
SALES TAX	
FREIGHT/DELIVERY CHARGES	
AMOUNT DUE	**$19.00**

ORIGINAL INVOICE RETAIN BOTTOM PORTION FOR YOUR RECORDS

Online Bill Pay For
Culligan of Melbourne

Account Selection Account Detail Log Out

Thank You For Your Payment.

Payments usually post within two business days.
Please Print This Page For Your Records.

Transaction Details	
Date	3/11/2019 6:51:02 AM
Visa Card	...4809
Total Amount	$19.00
Applied To Account	268847
Result	APPROVED
Authorization Code	019264

verizon

PO BOX 489
NEWARK, NJ 07101-0489

Manage Your Account	Account Number	Date Due
www.vzw.com/mybusinessaccount	742120929-00001	03/15/19

Change your address at
http://sso.verizonenterprise.com

Invoice Number	9824848875

Quick Bill Summary

Jan 24 – Feb 23

COUNTY OF BREVARD
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

000071537
M102

Previous Balance *(see back for details)*	$109.94
Payment – Thank You	–$109.94
Balance Forward	**$.00**
Monthly Charges	$107.18
Usage and Purchase Charges	
Voice	$.00
Messaging	$.00
Data	$.00
Surcharges and Other Charges & Credits	$2.76
Taxes, Governmental Surcharges & Fees	$.00
Total Current Charges	**$109.94**

Total Charges Due by March 15, 2019 **$109.94**

Pay from phone	Pay on the Web	Questions:
#PMT (#768)	At vzw.com/mybusinessaccount	1.800.922.0204 or *611 from your phone

verizon

Bill Date	February 23, 2019
Account Number	742120929-00001
Invoice Number	9824848875

COUNTY OF BREVARD
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

Total Amount Due by March 15, 2019

Make check payable to Verizon Wireless.
Please return this remit slip with payment.

$109.94

$ ☐☐☐.☐☐

PO BOX 660108
DALLAS, TX 75266-0108

Paid 3/8/19
791

982484887501074212092900001000000109940000001099943

Print Close

Print Date : 3/8/2019

Thank you for your payment!

Transaction Id 773308469

Billing Account	Payment amount	Payment method	Payment date
742120929-00001	$109.94	Danielle	Fri Mar 08 2019 10:19:13 GMT-0500 (Eastern Standard Time)

Office DEPOT
OfficeMax

PALM BAY - (321) 723-7079
03/12/2019 8:43 AM

2TVT75UPXU3XM66FH

SALE	2703-3-9065-881806-19.2.2	
421062 DTR,SELR-INK,R		25.99 S
	Subtotal:	25.99
	Total:	25.99
	Visa 4809:	25.99

AUTH CODE 077578
TDS Chip Read
AID A0000000031010 VISA CREDIT
TVR 0080088000
CVS No Signature Required

Tax Exemption Number 27327334
Shop online at www.officedepot.com
****
WE WANT TO HEAR FROM YOU!

Visit survey.officedepot.com
and enter the survey code below:
15DE F1EP DJS6
****

Office DEPOT
OfficeMax

INDIAN HARBOUR BEACH - (321) 777-7075
03/08/2019 12:50 PM

2TVT53UPAXQ6M6C8H

SALE	2653-5-6805-940972-19.2.2	
208562	TOWEL,BNTY,12M	19.99
	You Pay	**19.99**S
625502	PdLgl,Can,50Sh	13.99S
	Instant Savings	-5.99
	You Pay	**8.00**S
625529	PdLgl,Wh,50Sh,	13.99S
	Instant Savings	-5.99
	You Pay	**8.00**S
574566	LABEL,8160,750	14.49 S
207811	BNDR,ODP,RR,2"	8.99S
	Clearance	-4.55
	You Pay	**4.44**S
207613	BNDR,ODP,RR,2"	8.99S
	Clearance	-4.55
	You Pay	**4.44**S
985848	BAG,TRASH,FLEX	22.99S
	Instant Savings	-8.00
	You Pay	**14.99**S
800332	LETTER OPENR,S	2.49 S
973321	NOTES,SS,MIAMI	17.39S
	Instant Savings	-7.40
	You Pay	**9.99**S
581985	TAPE,CORRECTIO	8.99S
	Instant Savings	-2.99
	You Pay	**6.00**S
504792	NTE,SS,4X4,6PK	15.29S
	Instant Savings	-5.30
	You Pay	**9.99**S
778677	PEN,IJ,550RT,4	
	3 @ 7.99	23.97
	Instant Savings	-8.97
	You Pay	**15.00**S
183899	PN,GEL,VELO,RD	4.99 S
134000	MRKR,SHARPIE,5	5.69S
	Instant Savings	-0.70
	You Pay	**4.99**S
208562	TOWEL,BNTY,12M	19.99
	Promotion	-10.00
	You Pay	**9.99**S
	Subtotal:	137.79
	Total:	137.79
	Visa 4809:	137.79

AUTH CODE 070485
TDS Chip Read
AID A0000000031010 VISA CREDIT
TVR 0080088000
CVS No Signature Required

Tax Exemption Number 27327334
Total Savings:
$64.44

794

EAU GALLIE
681 SAINT CLAIR ST
MELBOURNE
FL
32935-9998
1157990461
03/08/2019 (800)275-8777 12:09 PM

Product Description	Sale Qty	Final Price
US Flag Coil/100 (Unit Price:$55.00)	1	$55.00
First-Class Package Service - Retail 2 Days (Domestic) (CAPE CANAVERAL, FL 32920) (Weight:0 Lb 9.80 Oz) (Estimated Delivery Date) (Monday 03/11/2019) (USPS Tracking #) (9500 1132 4989 9067 4270 19)	1	$5.19
Total		$60.19
Credit Card Remitd (Card Name:VISA) (Account #:XXXXXXXXXXXX4809) (Approval #:083020) (Transaction #:749) (AID:A0000000031010 Chip) (AL:VISA CREDIT) (PIN:Not Required)		$60.19

In a hurry? Self-service kiosks offer quick and easy check-out. Any Retail Associate can show you how.

Text your tracking number to 28777 (2USPS) to get the latest status. Standard Message and Data rates may apply. You may also visit www.usps.com USPS Tracking or call 1-800-222-1811.

Preview your Mail
Track your Packages
Sign up for FREE @
www.informeddelivery.com

All sales final on stamps and postage.
Refunds for guaranteed services only.
Thank you for your business.

HELP US SERVE YOU BETTER

TELL US ABOUT YOUR RECENT
POSTAL EXPERIENCE

Go to:
https://postalexperience.com/Pos

840-5327-0075-004-00036-30618-01

or scan this code with
your mobile device:

PAGE ___ of ___

EHIBIT "B"
BREVARD COUNTY PURCHASING CARD MONTHLY RECONCILIATION REPORT

Cardholder's Name: Danielle Stern **Cardholder Phone Ext:** 321-253-6611 **Personnel #:** 11006140

Cardholder's Department: D5 Commissioner **Closing Date:** May 4th, 2019

(enter closing date of statement)

Date Purchased or Ordered	Date Received	Vendor Name	Description of Item Purchased	Amount Billed (indicate "Q"for quoted items)	Fund (4 digits)	Cost Center (6 digits)	GL Account # (7 digits)	Internal / Work Order # (6 or 7 digits)
04/06	04/08	Verizon Wireless	Cell Service	$109.94	0001	200090	5410100	
04/06	04/08	Culligan Water	Water Delivery	$9.50	0001	200050	5529000	
04/24	04/25	USPS Post Office	Letters for Space Coast Honor Flight	$5.19	0001	200050	5510000	
05/01	05/03	Delta Airlines	EDC Space coast delegation trip plane ticket	$550.00	0001	200090	5400150	

ADD'L PAGES SUBTOTAL ______

GRAND TOTAL (ALL PAGES) $674.63

(must agree to figure below)

SUMMARY OF FUND / COST CENTERS /G.L. ACCOUNT TO BILL

FUND	COST CTR	GL ACCT	INT. ORDER	Amount
0001	200090	5410100		$109.94
0001	200050	5529000		$9.50
0001	200050	5510000		$5.19
0001	200090	5400150		$550.00

(must agree to above figure)

TOTAL $674.63

I (Cardholder) have complied with the Purchase Card Administrative Order (AO-41) and have retained all required approvals for restrictive uses and quote log for purchases with a value in excess of $1000 and an expected life of more than one -Year such as automobiles and furniture; and computer Equipment valued in excess of $750.

Danielle Stern 5/16/19

Signature of Cardholder / Date

5/16/19

Signature of Approving Official / Date

BCC-223 –Word Document Revised 8/18/2017

797

Bank of America

DANIELLE L STERN
FL BREVARD COUNTY BOC
XXXX-XXXX-XXXX-**4809**
April 05, 2019 - May 04, 2019

Purchasing Card

Cardholder Activity

Account Information

Mail Billing Inquiries to:
BANKCARD CENTER
PO BOX 982238
EL PASO, TX 79998-2238

Customer Service:
1.888.449.2273 24 Hours

TTY Hearing Impaired:
1.800.222.7365 24 Hours

Outside the U.S.:
1.509.353.6656 24 Hours

For Lost or Stolen Card:
1.888.449.2273 24 Hours

Payment Information

Statement Date	05/04/19
Credit Limit	$2,000
Cash Limit	$0
Days in Billing Cycle	30
Total Activity	$674.63

THIS IS NOT A BILL - DO NOT PAY

Account Summary

Credits	$0.00
Cash	$0.00
Purchases	$674.63
Other Debits	$0.00
Cash Fees	$0.00
Other Fees	$0.00
Total Activity	$674.63

Accounting Code: 0001/200050

Transactions

Posting Date	Transaction Date	Description	Reference Number	MCC	Charge	Credit
04/08	04/06	VZWRLSS*MY VZ VB P 800-922-0204 FL	24692169096100289800509	4814	109.94	
04/08	04/06	4TE*CULLIGAN DAYTONA 321-255-5562 FL	24445009096200115799665	5074	9.50	
04/25	04/24	USPS PO 1158000460 MELBOURNE FL	24445009115000915934836	9402	5.19	
05/03	05/01	DELTA AIR 0062369898774DELTA.COM CA ISNARDI/KRISTIN 0062369898774 Departure Date: 05/12/19 Airport Code: MLB DL H ATL Departure Date: 05/12/19 Airport Code: ATL DL H DCA Departure Date: 05/12/19 Airport Code: DCA DL KX ATL Departure Date: 05/12/19 Airport Code: ATL DL KO MLB	24717059122871220909482	3058	550.00	

0000000 0000000 0000000 4715290017764809

Account Number: XXXX-XXXX-XXXX-**4809**
April 05, 2019 - May 04, 2019

Total Activity **$674.63**

Cardholder Signature Date 5/16/19

Manager Signature Date 5/16/19

BANK OF AMERICA
PO BOX 15731
WILMINGTON, DE 19886-5731

DANIELLE L STERN **N0002271
FL BREVARD COUNTY BOC
DISTRICT 5 COMMISSION OFFICE
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

:549990011:00050017764809

798

verizon

PO BOX 489
NEWARK, NJ 07101-0489

Manage Your Account	Account Number	Date Due
www.vzw.com/mybusinessaccount	742120929-00001	04/15/19

Change your address at
http://sso.verizonenterprise.com

Invoice Number	9826841003

COUNTY OF BREVARD 000068409
490 CENTRE LAKE DR NE STE 175 M105
PALM BAY, FL 32907-1177

Quick Bill Summary

Feb 24 – Mar 23

Previous Balance *(see back for details)*	$109.94
Payment – Thank You	–$109.94
Balance Forward	**$.00**
Monthly Charges	$107.18
Usage and Purchase Charges	
Voice	$.00
Messaging	$.00
Data	$.00
Surcharges and Other Charges & Credits	$2.76
Taxes, Governmental Surcharges & Fees	$.00
Total Current Charges	**$109.94**

Total Charges Due by April 15, 2019 **$109.94**

Paid 4/5/19
JR

Pay from phone	Pay on the Web	Questions:
#PMT (#768)	At vzw.com/mybusinessaccount	1.800.922.0204 or *611 from your phone

verizon

Bill Date	March 23, 2019
Account Number	742120929-00001
Invoice Number	9826841003

COUNTY OF BREVARD
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

Total Amount Due by April 15, 2019

Make check payable to Verizon Wireless.
Please return this remit slip with payment.

$109.94

$☐☐☐.☐☐

PO BOX 660108
DALLAS, TX 75266-0108

98268410030107421209290000100000010994000000109943

799

Print Close

Print Date : 4/5/2019

Thank you for your payment!

Transaction Id 367701188

Billing Account	Payment amount	Payment method	Payment date
742120929-00001	$109.94	Danielle	Fri Apr 05 2019 11:47:24 GMT-0400 (Eastern Daylight Time)

008

Culligan of Melbourne

771 NORTH DRIVE
MELBOURNE, FL 32934
(321) 255-5562 (321) 636-1344
bmorissette@culliganmelbourne.com
www.culligancentralflorida.com

IF PAYING BY CREDIT CARD, PLEASE CHECK CORRECT CARD AND FILL OUT BELOW

☐ PLEASE CHECK BOX TO ENROLL IN AUTOMATIC BILL PAYMENT

CARD NUMBER		V. CODE
SIGNATURE		EXP. DATE
DATE	PAY THIS AMOUNT	ACCOUNT NUMBER
03/27/2019	$9.50	268847

INVOICE NUMBER: 83929 AMOUNT PAID $

ADDRESSEE:
DISTRICT 5 COMMISSIONER
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

REMIT PAYMENT TO:
CULLIGAN WATER PRODUCTS
771 NORTH DR
MELBOURNE, FL 32934-9282

INVOICE
RETURN THIS TOP PORTION WITH YOUR PAYMENT

ACCOUNT NUMBER	SALES ID	SALES ORDER NUMBER	PURCHASE ORDER NUMBER	SHIP VIA	TERMS	NET DUE IN 10 DAYS
268847	KM		4500083054	COMPANY TRUCK	INVOICE NUMBER 83929	INVOICE DATE 03/27/2019

DATE SHIPPED	QUANTITY ORDERED	QUANTITY SHIPPED	ITEM NUMBER	DESCRIPTION	UNIT PRICE	DISCOUNT	NET AMOUNT
				Tick 800668696 Date 03/13/2019			
				P/O Number: 4500083054			
03/13	2.00	2.00		1/2 LITER (CASE)	4.750		9.50
03/13	1.00	1.00		SERVICE FEE	0.000		
				End of Ticket 800668696			

paid 4/5/19 SR

Pay on line at www.culligancentralflorida.com Please call our office at 321-255-5562 if you need any assistance.

A LATE PAYMENT FINANCE CHARGE OF 1.5 % PER MONTH MAY BE APPLIED ON BALANCES AFTER 30 DAYS

CULLIGAN WATER PRODUCTS
771 NORTH DRIVE
MELBOURNE, FL 32934
(321) 255-5562 (321) 636-1344

DELIVER TO:
DISTRICT 5 COMMISSIONER
STE 175
490 CENTRE LAKE DRIVE NE
PALM BAY FL 32907

TOTAL	9.50
SALES TAX	
FREIGHT/DELIVERY CHARGES	
AMOUNT DUE	$9.50

ORIGINAL INVOICE RETAIN BOTTOM PORTION FOR YOUR RECORDS

268847

Online Bill Pay For
Culligan of Melbourne

Account Selection **Account Detail** **Log Out**

Thank You For Your Payment.

Payments usually post within two business days.
Please Print This Page For Your Records.

Transaction Details	
Date	4/5/2019 8:48:14 AM
Visa Card	...4809
Total Amount	$9.50
Applied To Account	268847
Result	APPROVED
Authorization Code	016459

802

Stern, Danielle

From:	Isnardi, Kristine
Sent:	Tuesday, May 14, 2019 10:29 AM
To:	Stern, Danielle
Subject:	Fwd: Your Flight Receipt - KRISTINE ISNARDI 12MAY19

Get Outlook for Android

From: Delta Air Lines <DeltaAirLines@e.delta.com>
Sent: Wednesday, May 1, 2019 1:47:52 PM
To: Isnardi, Kristine
Subject: Your Flight Receipt - KRISTINE ISNARDI 12MAY19

DELTA

Hello, KRISTINE

Your Trip Confirmation #: GJWM7Z **MANAGE MY TRIP >**

You're all set. If you need to adjust your itinerary, you can make standard changes to your flight on delta.com including time, date and destination. Explore all of your options here.

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DOWNLOAD THE FLY DELTA APP – receive flight status notifications, upgrade or change your seats, speed through security, track your bags and more.
Download now >>

Sun, 12MAY	**DEPART**	**ARRIVE**
DELTA 2728 Main Cabin (H)	MELBOURNE, FL 11:38am	ATLANTA 1:17pm
DELTA 2238 Main Cabin (H)	ATLANTA 2:40pm	WASHINGTON-REAGAN 4:34pm
Tue, 14MAY	**DEPART**	**ARRIVE**
DELTA 1425	WASHINGTON-REAGAN	ATLANTA

Main Cabin (K)	5:32pm	7:32pm
DELTA 958	ATLANTA	MELBOURNE, FL
Main Cabin (K)	9:26pm	10:58pm

TSA CHANGES - ARRIVE EARLY

Please be aware of the recent changes to TSA screening procedures, including the requirement to place powder-like substances over 12oz./350ml in your checked bag when traveling on an international flight to the United States. For more information on powder restrictions, visit delta.com.

In addition to these changes, many airports are experiencing a high volume of travelers, resulting in long check-in, baggage drop and security checkpoint lines. Please plan to arrive at the airport at least 2 hours prior to your departure when traveling domestically (within the U.S) and at least 3 hours prior to your departure when traveling internationally. We also encourage passengers to check-in online at delta.com or via the Fly Delta app to help avoid delays.

NEW BRANDED BOARDING ORDER

Effective January 23, 2019, boarding order will be based on the branded fare you purchased in an effort to bring consistency and clarity to the gate and boarding experience. Please note your branded fare group before boarding. SkyMiles® Medallion® Members and eligible Credit Card Members will continue to receive priority boarding. Learn more here.

RESTRICTED HAZARDOUS ITEMS

To ensure the safety of our customers and employees, **Delta will no longer accept smart bags starting January 15, 2018. Smart bags with non-removable lithium-ion batteries** will not be permitted as carry-on or checked baggage on any Delta mainline or Delta Connection flight. For more information, please visit our News Hub.

Hoverboards or any lithium battery powered self-balancing personal transportation devices are also not permitted as both carry-on and checked baggage.

Spare batteries for other devices, fuel cells, and e-cigarettes are permitted in carry-on baggage only. If your carry-on bag contains these items and is gate checked, they must be removed and carried in the cabin. Further information and specific guidelines regarding restricted items can be found here.

Passenger Info

NAME	FLIGHT	SEAT
KRISTINE ISNARDI	DELTA 2728	22A
	DELTA 2238	30A
	DELTA 1425	29A
	DELTA 958	29A

Visit delta.com or use the Fly Delta app to view, select or change your seat.
If you purchased a Delta Comfort+™ seat or a Trip Extra, please visit My Trips to access a receipt of your purchase.

Flight Receipt

Ticket #: 0062369898774

Place of Issue: Delta.com

Ticket Issue Date: 01MAY19

Ticket Expiration Date: 01MAY20

METHOD OF PAYMENT

VI************4809	**$550.00 USD**

Air Transportation Charges

Base Fare	$468.84 USD

Taxes, Fees and Charges

United States - September 11th Security Fee(Passenger Civil Aviation Security Service Fee) (AY)	$11.20 USD
United States - Transportation Tax (US)	$35.16 USD
United States - Passenger Facility Charge (XF)	$18.00 USD
United States - Flight Segment Tax (ZP)	$16.80 USD

CHARGES

TICKET AMOUNT	**$550.00 USD**

NONREF/PENALTY APPLIES

This ticket is non-refundable unless the original ticket was issued at a fully refundable fare. Some fares may not allow changes. If allowed, any change to your itinerary may require payment of a change fee and increased fare. Failure to appear for any flight without notice to Delta will result in cancellation of your remaining reservation.

Note: When using certain vouchers to purchase tickets, remaining credits may not be refunded. Additional charges and/or credits may apply.

Fare Details: MLB DL X/ATL DL WAS284.65HR7NA0MQ DL X/ATL DL MLB184.19KA0NA0MQ USD468.84END ZP MLBATLDCAATL XF MLB4.5ATL4.5DCA4.5ATL4.5

Checked Bag Allowance

The fees below are based on your original ticket purchase. **If you qualify for free or discounted checked baggage,** this will be taken into account when you check in.

Sun 12 May 2019	DELTA: MLB ›ATL	
CARRY ON	FIRST	SECOND
FREE	$30 USD	$40 USD

Sun 12 May 2019	DELTA: ATL ›DCA

CARRY ON	FIRST	SECOND
INCLUDED	INCLUDED	INCLUDED

Visit delta.com for details on baggage embargos that may apply to your itinerary.

Tue 14 May 2019 — DELTA: DCA ▸ATL

CARRY ON	FIRST	SECOND
FREE	$30 USD	$40 USD

Tue 14 May 2019 — DELTA: ATL ▸MLB

CARRY ON	FIRST	SECOND
INCLUDED	INCLUDED	INCLUDED

Visit delta.com for details on baggage embargos that may apply to your itinerary.

Transportation of Hazardous Materials

Federal law forbids the carriage of hazardous materials aboard aircraft in your luggage or on your person. A violation can result in civil penalties. Examples include: Paints, aerosols, lighter fluid, fireworks, torch lighters, tear gases and compressed gas cartridges.

There are special exceptions for small quantities (up to 70 ounces total). For further information visit delta.com Restricted Items Section.

We have partnered with The Nature Conservancy to allow you to offset your carbon emissions from this trip. Go to delta.com/sustainability to calculate your CO2 emissions and learn more about offsetting.

Terms & Conditions

This ticket is non-refundable unless the original ticket was issued at a fully refundable fare. Some fares may not allow changes. If allowed, any change to your itinerary may require payment of a change fee and increased fare. Failure to appear for any flight without notice to Delta will result in cancellation of your remaining reservation.

Note: When using certain vouchers to purchase tickets, remaining credits may not be refunded. Additional charges and/or credits may apply.

†All SkyMiles® program rules apply. To review the rules, see Membership Guide & Program Rules. Taxes and fees for Award Travel are the responsibility of the passenger and must be paid at the time the ticket is booked. Award Travel seats are limited and may not be available on all flights or in all markets. Offers void where prohibited by law. Other restrictions may apply.

Checked Bag Allowance

*On Delta operated flights, you may carry on one bag and a small personal item at no charge.

Delta One™/First/Business Class weight allowance reverts to 50 lbs for all checked bags beyond regular free allowance.

At the time of check in with Delta, SkyMiles Medallion members, SkyTeam Elite & Elite Plus and active US Military personnel are eligible for fee waivers and other benefits. For more details, visit delta.com/baggage. Basic Cardmembers with a Gold, Platinum, or Reserve Delta SkyMiles Credit Card from American Express are eligible for the first bag fee waiver. More details on the program can be found at delta.com/firstbagfree.

A standard checked bag with Delta may be up to 50 lbs and 62 linear inches (per piece). Additional fees apply for oversize, overweight, and/or additional pieces of checked baggage. Please review Delta's baggage guidelines for details. Weight and size restrictions may vary when checking baggage on carriers other than Delta. Contact with the operating carrier for detailed checked baggage allowances. You must be checked in at the gate by the applicable check-in deadlines or your reservation may be cancelled. Please review Delta's check-in requirement guidelines for details. Check-in requirements vary by airline, so if your ticket includes travel on other airlines, please check with the operating carrier on your ticket.

Do you have comments about our service? Please email us to share them.

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Air transportation on Delta and the Delta Connection® carriers is subject to Delta's conditions of carriage. They include terms governing for example:

- Limits on our liability for personal injury or death of passengers, and for loss, damage of delay of goods and baggage.
- Claim restrictions including time periods within which you must file a claim or bring action against us.
- Our right to change terms of the contract.
- Check-in requirements and other rules established when we may refuse carriage.
- Our rights and limits of our liability for delay or failure to perform service including schedule change, substitution of alternative air carriers or aircraft, and rerouting.
- Our policy on overbooking flights, and your rights if we deny you boarding due to an oversold flight.

These terms are incorporated by reference into our contract with you. You may view these conditions of carriage on delta.com, or by requesting a copy from Delta.

You have received this email because you elected to receive your Electronic Ticket receipt sent to you via email. If you would like to take advantage of other Delta email programs featuring special fares, promotions, information and flight updates, please visit: delta.com/emailprograms or delta.com/notifications.

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MELBOURNE
640 E NEW HAVEN AVE
MELBOURNE
FL
32901-9998
1158000460
04/24/2019 (800)275-8777 12:34 PM

Product Description	Sale Qty	Final Price
First-Class Package Service 2 Days	1	$5.19

(Domestic)
(CAPE CANAVERAL, FL 32920)
(Weight:0 Lb 9.80 Oz)
(Estimated Delivery Date)
(Friday 04/26/2019)
(USPS Tracking #)
(9500 1132 4968 9114 0039 72)

Total $5.19

Credit Card Remitd $5.19
(Card Name:VISA)
(Account #:XXXXXXXXXXXX4809)
(Approval #:017617)
(Transaction #:323)
(AID:A0000000031010 Chip)
(AL:VISA CREDIT)
(PIN:Not Required)

Text your tracking number to 28777 (2USPS) to get the latest status. Standard Message and Data rates may apply. You may also visit www.usps.com USPS Tracking or call 1-800-222-1811.

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840-5327-0065-003-00005-09542-02

or scan this code with
your mobile device:

or call 1-800-410-7420.

YOUR OPINION COUNTS

EHIBIT "B"

BREVARD COUNTY PURCHASING CARD MONTHLY RECONCILIATION REPORT

PAGE ___ of ___

Cardholder's Name: Danielle Stern **Cardholder Phone Ext:** 321-253-6611 **Personnel #:** 11006140

Cardholder's Department: D5 Commissioner **Closing Date:** June 4th, 2019

(enter closing date of statement)

Date Purchased or Ordered	Date Received	Vendor Name	Description of Item Purchased	Amount Billed (indicate "Q" for quoted items)	Fund (4 digits)	Cost Center (6 digits)	GL Account # (7 digits)	Internal / Work Order # (6 or 7 digits)
05/14	05/15	Verizon Wireless	Cell Service	$109.78	0001	200090	5410100	
05/14	05/15	Culligan Water	Water Delivery	$14.25	0001	200050	5529000	
05/10	05/13	Delta Airlines	~~EDC Space~~ coast delegation trip plane ticket REFUND/ Item disputed	-$550.00	0001	200090	5400150	

ADD'L PAGES SUBTOTAL ______

GRAND TOTAL (ALL PAGES) $-425.97

(must agree to figure below)

SUMMARY OF FUND / COST CENTERS /G.L. ACCOUNT TO BILL

FUND	COST CTR	GL ACCT	INT. ORDER	Amount
0001	200090	5410100		$109.78
0001	200050	5529000		$14.25
0001	200090	5400150		-$550.00

(must agree to above figure) **TOTAL** $-425.97

I (Cardholder) have complied with the Purchase Card Administrative Order (AO-41) and have retained all required approvals for restrictive uses and quote log for purchases with a value in excess of $1000 and an expected life of more than one -Year such as automobiles and furniture; and computer Equipment valued in excess of $750.

6/11/19

Signature of Cardholder / Date

Signature of Approving Official / Date

mailed 6/13

BCC-223 –Word Document Revised 8/18/2017

Bank of America

DANIELLE L STERN
FL BREVARD COUNTY BOC
XXXX-XXXX-XXXX-**4809**
May 05, 2019 - June 04, 2019

Purchasing Card

Cardholder Activity

Account Information

Mail Billing Inquiries to:
BANKCARD CENTER
PO BOX 982238
EL PASO, TX 79998-2238

Customer Service:
1.888.449.2273 24 Hours

TTY Hearing Impaired:
1.800.222 7365 24 Hours

Outside the U.S.:
1.509.353.6656 24 Hours

For Lost or Stolen Card:
1.888.449.2273 24 Hours

Payment Information

Statement Date	06/04/19
Credit Limit	$1,575
Cash Limit	$0
Days In Billing Cycle	31
Total Activity	-$425.97

THIS IS NOT A BILL - DO NOT PAY

Account Summary

Credits	-$550.00
Cash	$0.00
Purchases	$124.03
Other Debits	$0.00
Cash Fees	$0.00
Other Fees	$0.00
Total Activity	-$425.97

Accounting Code: 0001/200050

Transactions

Posting Date	Transaction Date	Description	Reference Number	MCC	Charge	Credit
05/13	05/10	DELTA AIR 0062369898774SALT LAKE CTYUT ISNARDI/KRISTIN 0062369898774 Airport Code: SLC DL X SLC Airport Code: SLC	74717059131871311451166	3058		550.00
05/15	05/14	VZWRLSS*MY VZ VB P 800-922-0204 FL	24692169134100650987806	4814	109.78	
05/15	05/14	4TE*CULLIGAN DAYTONA 321-255-5562 FL	24445009134200121198799	5074	14.25	

0000000 0000000 0000000 4715290017764809

Account Number: XXXX-XXXX-XXXX-**4809**
May 05, 2019 - June 04, 2019

BANK OF AMERICA
PO BOX 15731
WILMINGTON, DE 19886-5731

DANIELLE L STERN **N0001842
FL BREVARD COUNTY BOC
DISTRICT 5 COMMISSION OFFICE
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

Total Activity .... **-$425.97**

Cardholder Signature 6/11/19 Date

Manager Signature 6/12/19 Date

⑆5499900 1 1⑆000500 17764809⑈

118

verizon

PO BOX 489
NEWARK, NJ 07101-0489

Manage Your Account	Account Number	Date Due
www.vzw.com/mybusinessaccount	742120929-00001	05/15/19

Change your address at
http://sso.verizonenterprise.com

Invoice Number	9828820138

Quick Bill Summary

Mar 24 – Apr 23

COUNTY OF BREVARD
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

000112276
M104

Previous Balance *(see back for details)*	$109.94
Payment – Thank You	–$109.94
Balance Forward	**$.00**
Monthly Charges	$107.18
Usage and Purchase Charges	
Voice	$.00
Messaging	$.00
Data	$.00
Surcharges and Other Charges & Credits	$2.60
Taxes, Governmental Surcharges & Fees	$.00
Total Current Charges	**$109.78**

Total Charges Due by May 15, 2019 **$109.78**

Verizon Wireless News

Important Notice For Customers With 407 and 321 Area Codes

The New 689 Area Code is coming.
See last page of bill for more details.

paid 5/13/19
JR

Pay from phone	Pay on the Web	Questions:
#PMT (#768)	At vzw.com/mybusinessaccount	1.800.922.0204 or *611 from your phone

verizon

Bill Date	April 23, 2019
Account Number	742120929-00001
Invoice Number	9828820138

COUNTY OF BREVARD
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

Total Amount Due by May 15, 2019

Make check payable to Verizon Wireless.
Please return this remit slip with payment.

$109.78

$ ☐☐☐.☐☐

PO BOX 660108
DALLAS, TX 75266-0108

982882013801074212092900001000000109780000001097 83

Print Close

Print Date : 5/13/2019

Thank you for your payment!

Transaction Id 785759707

Billing Account	Payment amount	Payment method	Payment date
742120929-00001	$109.78	Danielle	Mon May 13 2019 10:01:27 GMT-0400 (Eastern Daylight Time)

813

Culligan of Melbourne

771 NORTH DRIVE
MELBOURNE, FL 32934
(321) 255-5562 (321) 636-1344
bmorissette@culliganmelbourne.com
www.culligancentralflorida.com

IF PAYING BY CREDIT CARD, PLEASE CHECK CORRECT CARD AND FILL OUT BELOW

☐ VISA ☐ MasterCard ☐ American Express ☐ Discover ☐ PLEASE CHECK BOX TO ENROLL IN AUTOMATIC BILL PAYMENT

CARD NUMBER		V. CODE
SIGNATURE		EXP. DATE
DATE	PAY THIS AMOUNT	ACCOUNT NUMBER
04/25/2019	$14.25	268847

INVOICE NUMBER: 84242 AMOUNT PAID $

ADDRESSEE:
DISTRICT 5 COMMISSIONER
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

REMIT PAYMENT TO:
CULLIGAN WATER PRODUCTS
771 NORTH DR
MELBOURNE, FL 32934-9282

INVOICE

RETURN THIS TOP PORTION WITH YOUR PAYMENT

ACCOUNT NUMBER	SALES ID	SALES ORDER NUMBER	PURCHASE ORDER NUMBER	SHIP VIA	TERMS	NET DUE IN 10 DAYS
268847	KM		4500083054	COMPANY TRUCK	INVOICE NUMBER 84242	INVOICE DATE 04/25/2019

DATE SHIPPED	QUANTITY ORDERED	QUANTITY SHIPPED	ITEM NUMBER	DESCRIPTION	UNIT PRICE	DISCOUNT	NET AMOUNT
				Tick 800671070 Date 04/10/2019			
				P/O Number: 4500083054			
04/10	3.00	3.00		1/2 LITER (CASE)	4.750		14.25
04/10	1.00	1.00		SERVICE FEE	0.000		
				End of Ticket 800671070			

Pay on line at www.culligancentralflorida.com Please call our office at 321-255-5562 if you need any assistance.

Paid 5/13/19 dn

A LATE PAYMENT FINANCE CHARGE OF 1.5 % PER MONTH MAY BE APPLIED ON BALANCES AFTER 30 DAYS
CULLIGAN WATER PRODUCTS
771 NORTH DRIVE
MELBOURNE, FL 32934
(321) 255-5562 (321) 636-1344

DELIVER TO
DISTRICT 5 COMMISSIONER
STE 175
490 CENTRE LAKE DRIVE NE
PALM BAY FL 32907

TOTAL	14.25
SALES TAX	
FREIGHT/DELIVERY CHARGES	
AMOUNT DUE	$14.25

ORIGINAL INVOICE RETAIN BOTTOM PORTION FOR YOUR RECORDS

268847

Online Bill Pay For
Culligan of Melbourne

Account Selection **Account Detail** **Log Out**

Thank You For Your Payment.

Payments usually post within two business days.
Please Print This Page For Your Records.

Transaction Details	
Date	5/13/2019 7:02:40 AM
Visa Card	...4809
Total Amount	$14.25
Applied To Account	268847
Result	APPROVED
Authorization Code	054069

EHIBIT "B"
BREVARD COUNTY PURCHASING CARD MONTHLY RECONCILIATION REPORT

PAGE ___ of ___

Cardholder's Name: Danielle Stern **Cardholder Phone Ext:** 321-253-6611 **Personnel #:** 11006140

Cardholder's Department: D5 Commissioner **Closing Date:** July 4th, 2019

(enter closing date of statement)

Date Purchased or Ordered	Date Received	Vendor Name	Description of Item Purchased	Amount Billed (indicate "Q" for quoted items)	Fund (4 digits)	Cost Center (6 digits)	GL Account # (7 digits)	Internal / Work Order # (6 or 7 digits)
06/07	06/10	Verizon Wireless	Cell Service	$109.78	0001	200090	5410100	
06/07	06/10	Culligan Water	Water Delivery	$14.25	0001	200050	5529000	

ADD'L PAGES SUBTOTAL ______

GRAND TOTAL (ALL PAGES) $124.03

(must agree to figure below)

SUMMARY OF FUND / COST CENTERS /G.L. ACCOUNT TO BILL

FUND	COST CTR	GL ACCT	INT. ORDER	Amount
0001	200090	5410100		$109.78
0001	200050	5529000		$14.25
(must agree to above figure)			**TOTAL**	$124.03

I (Cardholder) have complied with the Purchase Card Administrative Order (AO-41) and have retained all required approvals for restrictive uses and quote log for purchases with a value in excess of $1000 and an expected life of more than one -Year such as automobiles and furniture; and computer Equipment valued in excess of $750

Danielle Stern 7/11/19

Signature of Cardholder / Date

7/11/19

Signature of Approving Official / Date

7/18/19

Bank of America

DANIELLE L STERN
FL BREVARD COUNTY BOC
XXXX-XXXX-XXXX-**4809**
June 05, 2019 - July 04, 2019

Purchasing Card

Cardholder Activity

Account Information

Mail Billing Inquiries to:
BANKCARD CENTER
PO BOX 982238
EL PASO, TX 79998-2238

Customer Service:
1.888.449.2273 24 Hours

TTY Hearing Impaired:
1.800.222.7365 24 Hours

Outside the U.S.:
1.509.353.6656 24 Hours

For Lost or Stolen Card:
1.888.449.2273 24 Hours

Payment Information

Statement Date	07/04/19
Credit Limit	$2,000
Cash Limit	$0
Days in Billing Cycle	30
Total Activity	$124.03

THIS IS NOT A BILL - DO NOT PAY

Account Summary

Credits	$0.00
Cash	$0.00
Purchases	$124.03
Other Debits	$0.00
Cash Fees	$0.00
Other Fees	$0.00
Total Activity	$124.03

Accounting Code: 0001/200050

Transactions

Posting Date	*Transaction Date*	*Description*		*Reference Number*	*MCC*	*Charge*	*Credit*
06/10	06/07	VZWRLSS*MY VZ VB P	800-922-0204 FL	24692169158100694125976	4814	109.78	
06/10	06/07	4TE*CULLIGAN DAYTONA	321-255-5562 FL	24445009158200125120162	5074	14.25	

0000000 0000000 0000000 4715290017764809

Account Number: XXXX-XXXX-XXXX-**4809**
June 05, 2019 - July 04, 2019

Total Activity **$124.03**

Cardholder Signature Date 7/11/19

Manager Signature Date 7/4/19

BANK OF AMERICA
PO BOX 15731
WILMINGTON, DE 19886-5731

DANIELLE L STERN **N0001731
FL BREVARD COUNTY BOC
DISTRICT 5 COMMISSION OFFICE
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

⑆5499900 11⑆000500 17764809⑈

verizon

PO BOX 489
NEWARK, NJ 07101-0489

Manage Your Account	Account Number	Date Due
www.vzw.com/mybusinessaccount	742120929-00001	06/15/19

Change your address at
http://sso.verizonenterprise.com

Invoice Number	9830798063

Quick Bill Summary

Apr 24 – May 23

COUNTY OF BREVARD
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

000082751
M105

Previous Balance *(see back for details)*	$109.78
Payment – Thank You	-$109.78
Balance Forward	**$.00**
Monthly Charges	$107.18
Usage and Purchase Charges	
Voice	$.00
Messaging	$.00
Data	$.00
Surcharges and Other Charges & Credits	$2.60
Taxes, Governmental Surcharges & Fees	$.00
Total Current Charges	**$109.78**

Total Charges Due by June 15, 2019 **$109.78**

Verizon Wireless News

Important Notice For Customers With 407 and 321 Area Codes

The New 689 Area Code is coming.
See last page of bill for more details.

Paid 6/6/19
JR

Pay from phone	Pay on the Web	Questions:
#PMT (#768)	At vzw.com/mybusinessaccount	1.800.922.0204 or *611 from your phone

verizon

Bill Date	May 23, 2019
Account Number	742120929-00001
Invoice Number	9830798063

COUNTY OF BREVARD
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

Total Amount Due by June 15, 2019

Make check payable to Verizon Wireless.
Please return this remit slip with payment.

$109.78

$ □□□.□□

PO BOX 660108
DALLAS, TX 75266-0108

983079806301074212092900001000000109780000001097837

Print Close

Print Date : 6/6/2019

Thank you for your payment!

Transaction Id 790094922

Billing Account	Payment amount	Payment method	Payment date
742120929-00001	$109.78	Danielle	Thu Jun 06 2019 09:05:21 GMT-0400 (Eastern Daylight Time)

Culligan of Melbourne

771 NORTH DRIVE
MELBOURNE, FL 32934
(321) 255-5562 (321) 636-1344
bmorissette@culliganmelbourne.com
www.culligancentralflorida.com

IF PAYING BY CREDIT CARD, PLEASE CHECK CORRECT CARD AND FILL OUT BELOW		
☐ VISA ☐ MasterCard ☐ American Express ☐ Discover	☐ PLEASE CHECK BOX TO ENROLL IN AUTOMATIC BILL PAYMENT	
CARD NUMBER		V. CODE
SIGNATURE		EXP. DATE
DATE 05/29/2019	PAY THIS AMOUNT $14.25	ACCOUNT NUMBER 268847

INVOICE NUMBER: 84535 AMOUNT PAID $

ADDRESSEE:
DISTRICT 5 COMMISSIONER
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

REMIT PAYMENT TO:
CULLIGAN WATER PRODUCTS
771 NORTH DR
MELBOURNE, FL 32934-9282

INVOICE
RETURN THIS TOP PORTION WITH YOUR PAYMENT

ACCOUNT NUMBER	SALES ID	SALES ORDER NUMBER	PURCHASE ORDER NUMBER	SHIP VIA	TERMS	NET DUE IN 10 DAYS
268847	KM		4500083054	COMPANY TRUCK	INVOICE NUMBER 84535	INVOICE DATE 05/29/2019

DATE SHIPPED	QUANTITY ORDERED	QUANTITY SHIPPED	ITEM NUMBER	DESCRIPTION	UNIT PRICE	DISCOUNT	NET AMOUNT
				Tick 800673449 Date 05/08/2019			
				P/O Number: 4500083054			
05/08	3.00	3.00		1/2 LITER (CASE)	4.750		14.25
05/08	1.00	1.00		SERVICE FEE	0.000		
				End of Ticket 800673449			

paid 6/6/19 ON

Pay on line at www.culligancentralflorida.com Please call our office at 321-255-5562 if you need any assistance.

A LATE PAYMENT FINANCE CHARGE OF 1.5 % PER MONTH MAY BE APPLIED ON BALANCES AFTER 30 DAYS

CULLIGAN WATER PRODUCTS
771 NORTH DRIVE
MELBOURNE, FL 32934
(321) 255-5562 (321) 636-1344

DELIVER TO:
DISTRICT 5 COMMISSIONER
STE 175
490 CENTRE LAKE DRIVE NE
PALM BAY FL 32907

TOTAL	14.25
SALES TAX	
FREIGHT/DELIVERY CHARGES	
AMOUNT DUE	$14.25

819
268847

ORIGINAL INVOICE RETAIN BOTTOM PORTION FOR YOUR RECORDS

Online Bill Pay For
Culligan of Melbourne

Account Selection Account Detail Log Out

Thank You For Your Payment.

Payments usually post within two business days.
Please Print This Page For Your Records.

Transaction Details	
Date	6/6/2019 6:06:29 AM
Visa Card	...4809
Total Amount	$14.25
Applied To Account	268847
Result	APPROVED
Authorization Code	093144

EHIBIT "B"
BREVARD COUNTY PURCHASING CARD MONTHLY RECONCILIATION REPORT

Cardholder's Name: Danielle Stern **Cardholder Phone Ext:** 321-253-6611 **Personnel #:** 11006140

Cardholder's Department: D5 Commissioner **Closing Date:** August 4th, 2019
(enter closing date of statement)

Date Purchased or Ordered	Date Received	Vendor Name	Description of Item Purchased	Amount Billed (indicate "Q"for quoted items)	Fund (4 digits)	Cost Center (6 digits)	GL Account # (7 digits)	Internal / Work Order # (6 or 7 digits)
07/10	07/11	Verizon Wireless	Cell Service	$109.78	0001	200090	5410100	
07/10	07/11	Culligan Water	Water Delivery	$14.25	0001	200050	5529000	

ADD'L PAGES SUBTOTAL ________

GRAND TOTAL (ALL PAGES) $124.03 (must agree to figure below)

SUMMARY OF FUND / COST CENTERS /G.L. ACCOUNT TO BILL

FUND	COST CTR	GL ACCT	INT. ORDER	Amount
0001	200090	5410100		$109.78
0001	200050	5529000		$14.25
(must agree to above figure)			**TOTAL**	$124.03

I (Cardholder) have complied with the Purchase Card Administrative Order (AO-41) and have retained all required approvals for restrictive uses and quote log for purchases with a value in excess of $1000 and an expected life of more than one -Year such as automobiles and furniture; and computer Equipment valued in excess of $750.

8/10/19
Signature of Cardholder / Date

8/14/19
Signature of Approving Official / Date

8/19/19

BCC-223 –Word Document Revised 8/18/2017

822

Bank of America

DANIELLE L STERN
FL BREVARD COUNTY BOC
XXXX-XXXX-XXXX-**4809**
July 05, 2019 - August 04, 2019

Purchasing Card

Cardholder Activity

Account Information

Mail Billing Inquiries to:
BANKCARD CENTER
PO BOX 982238
EL PASO, TX 79998-2238

Customer Service:
1.888.449.2273 24 Hours

TTY Hearing Impaired:
1.800.222.7365 24 Hours

Outside the U.S.:
1.509.353.6656 24 Hours

For Lost or Stolen Card:
1.888.449.2273 24 Hours

Payment Information

Statement Date	08/04/19
Credit Limit	$2,000
Cash Limit	$0
Days in Billing Cycle	31
Total Activity	$124.03

THIS IS NOT A BILL - DO NOT PAY

Account Summary

Credits	$0.00
Cash	$0.00
Purchases	$124.03
Other Debits	$0.00
Cash Fees	$0.00
Other Fees	$0.00
Total Activity	$124.03

Accounting Code: 0001/200050

Transactions

Posting Date	Transaction Date	Description		Reference Number	MCC	Charge	Credit
07/11	07/10	VZWRLSS*MY VZ VB P	800-922-0204 FL	24692169191100738414955	4814	109.78	
07/11	07/10	4TE*CULLIGAN DAYTONA	321-255-5562 FL	24445009191200113143076	5074	14.25	

0000000 0000000 0000000 4715290017764809

Account Number: XXXX-XXXX-XXXX-**4809**
July 05, 2019 - August 04, 2019

BANK OF AMERICA
PO BOX 15731
WILMINGTON, DE 19886-5731

Total Activity $124.03

Danielle Stern 8/12/19
Cardholder Signature Date

8/12/19
Manager Signature Date

DANIELLE L STERN **N0001594
FL BREVARD COUNTY BOC
DISTRICT 5 COMMISSION OFFICE
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

:5499001 1:00050017764809"

823

Culligan of Melbourne

771 NORTH DRIVE
MELBOURNE, FL 32934
(321) 255-5562 (321) 636-1344
bmorissette@culliganmelbourne.com
www.culligancentralflorida.com

IF PAYING BY CREDIT CARD, PLEASE CHECK CORRECT CARD AND FILL OUT BELOW

☐ PLEASE CHECK BOX TO ENROLL IN AUTOMATIC BILL PAYMENT

CARD NUMBER	V. CODE
SIGNATURE	EXP. DATE

DATE	PAY THIS AMOUNT	ACCOUNT NUMBER
06/26/2019	$14.25	268847

INVOICE NUMBER: 84785 AMOUNT PAID $

ADDRESSEE:
DISTRICT 5 COMMISSIONER
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

REMIT PAYMENT TO:
CULLIGAN WATER PRODUCTS
771 NORTH DR
MELBOURNE, FL 32934-9282

INVOICE
RETURN THIS TOP PORTION WITH YOUR PAYMENT

ACCOUNT NUMBER	SALES ID	SALES ORDER NUMBER	PURCHASE ORDER NUMBER	SHIP VIA	TERMS	NET DUE IN 10 DAYS
268847	KM		4500083054	COMPANY TRUCK	INVOICE NUMBER 84785	INVOICE DATE 06/26/2019

DATE SHIPPED	QUANTITY ORDERED	QUANTITY SHIPPED	ITEM NUMBER	DESCRIPTION	UNIT PRICE	DISCOUNT	NET AMOUNT
				Tick 800675800 Date 06/05/2019			
				P/O Number: 4500083054			
06/05	3.00	3.00		1/2 LITER (CASE)	4.750		14.25
06/05	1.00	1.00		SERVICE FEE	0.000		
				End of Ticket 800675800			

Pay on line at www.culligancentralflorida.com Please call our office at 321-255-5562 if you need any assistance.

paid 7/9/19 KR

A LATE PAYMENT FINANCE CHARGE OF 1.5 % PER MONTH MAY BE APPLIED ON BALANCES AFTER 30 DAYS
CULLIGAN WATER PRODUCTS
771 NORTH DRIVE
MELBOURNE, FL 32934
(321) 255-5562 (321) 636-1344

DELIVER TO:
DISTRICT 5 COMMISSIONER
STE 175
490 CENTRE LAKE DRIVE NE
PALM BAY FL 32907

TOTAL	14.25
SALES TAX	
FREIGHT/DELIVERY CHARGES	
AMOUNT DUE	$14.25

268847

ORIGINAL INVOICE RETAIN BOTTOM PORTION FOR YOUR RECORDS

Online Bill Pay For
Culligan of Melbourne

Account Selection Account Detail Log Out

Thank You For Your Payment.

Payments usually post within two business days.
Please Print This Page For Your Records.

Transaction Details	
Date	7/9/2019 9:05:58 AM
Visa Card	...4809
Total Amount	$14.25
Applied To Account	268847
Result	APPROVED
Authorization Code	016010

825

verizon

PO BOX 489
NEWARK, NJ 07101-0489

Manage Your Account	Account Number	Date Due
www.vzw.com/mybusinessaccount	742120929-00001	07/15/19

Change your address at
http://sso.verizonenterprise.com

Invoice Number	9832771457

COUNTY OF BREVARD
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

000087653
M106

Quick Bill Summary

May 24 – Jun 23

Previous Balance *(see back for details)*	$109.78
Payment – Thank You	–$109.78
Balance Forward	**$.00**
Monthly Charges	$107.18
Usage and Purchase Charges	
Voice	$.00
Messaging	$.00
Data	$.00
Surcharges and Other Charges & Credits	$2.60
Taxes, Governmental Surcharges & Fees	$.00
Total Current Charges	**$109.78**

Total Charges Due by July 15, 2019 **$109.78**

Pay from phone	Pay on the Web	Questions:
#PMT (#768)	At vzw.com/mybusinessaccount	1.800.922.0204 or *611 from your phone

verizon

COUNTY OF BREVARD
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

Bill Date	June 23, 2019
Account Number	742120929-00001
Invoice Number	9832771457

Paid 7/9/19 drc

Total Amount Due by July 15, 2019 **$109.78**

Make check payable to Verizon Wireless.
Please return this remit slip with payment.

$ ☐☐☐.☐☐

PO BOX 660108
DALLAS, TX 75266-0108

9832771457010742120929000010000001097800000010978З

Notifications DANIELLE STERN

verizon Manage Account Support
(https://b2b.verizonwireless.com/sms/amsecure/landing/overview.go#/overview)

Location: Choose Location (https://b2b.verizonwireless.com/b2b/commerce/amsecure/chooseZip.go?purchasePath=&isChangeZip=true&isCommerce=true)

Cart Empty
Search

Back to billing

Make a payment

Thank you for your payment!

Transaction Id 796503391

Payment details

Billing Account	Payment amount	Payment method	Payment date
742120929-00001	$109.78	Danielle	Jul 9, 2019

Want to do more?

Continue working with this account

742120929-00001

Or

Work on another account

Enter account number

Continue

Manage another payment

Set up Auto Pay

View payment history **(/sms/amsecure/payment/activity/show.go)**

Terms and Conditions (https://b2b.verizonwireless.com/sms/login/terms.go)

ACCREDITED BUSINESS
Click for Review
(https://businessportals.verizonwireless.com/support/misc/hosted/bbb_vz_review.html)

EHIBIT "B"

BREVARD COUNTY PURCHASING CARD MONTHLY RECONCILIATION REPORT

Cardholder's Name: Danielle Stern **Cardholder Phone Ext:** 321-253-6611 **Personnel #:** 11006140

Cardholder's Department: D5 Commissioner **Closing Date:** September 4th, 2019

(enter closing date of statement)

Date Purchased or Ordered	Date Received	Vendor Name	Description of Item Purchased	Amount Billed (indicate "Q" for quoted items)	Fund (4 digits)	Cost Center (6 digits)	GL Account # (7 digits)	Internal / Work Order # (6 or 7 digits)
08/06	08/07	Verizon Wireless	Cell Service	$110.54	0001	200090	5410100	
08/07	08/07	Culligan Water	Water Delivery	$9.50	0001	200050	5529000	
08/16	08/19	USPS Post Office	Letters for Space Coast Honor Flight	$5.19	0001	200050	5510000	

ADD'L PAGES SUBTOTAL ______

GRAND TOTAL (ALL PAGES) $125.23

(must agree to figure below)

SUMMARY OF FUND / COST CENTERS /G.L. ACCOUNT TO BILL

FUND	COST CTR	GL ACCT	INT. ORDER	Amount
0001	200090	5410100		$109.78
0001	200050	5529000		$14.25
0001	200050	5510000		$5.19
			TOTAL	$125.23

(must agree to above figure)

I (Cardholder) have complied with the Purchase Card Administrative Order (AO-41) and have retained all required approvals for restrictive uses and quote log for purchases with a value in excess of $1000 and an expected life of more than one -Year such as automobiles and furniture; and computer Equipment valued in excess of $750.

9/11/19

Signature of Cardholder / Date

9/11/19

Signature of Approving Official / Date

Bank of America

DANIELLE L STERN
FL BREVARD COUNTY BOC
XXXX-XXXX-XXXX-**4809**
August 05, 2019 - September 04, 2019

Purchasing Card

Cardholder Activity

Account Information

Mail Billing Inquiries to:
BANKCARD CENTER
PO BOX 982238
EL PASO, TX 79998-2238

Customer Service:
1.888.449.2273 24 Hours

TTY Hearing Impaired:
1.800.222.7365 24 Hours

Outside the U.S.:
1.509.353.6656 24 Hours

For Lost or Stolen Card:
1.888.449.2273 24 Hours

Payment Information

Statement Date	09/04/19
Credit Limit	$2,000
Cash Limit	$0
Days in Billing Cycle	31
Total Activity	$125.23

THIS IS NOT A BILL - DO NOT PAY

Account Summary

Credits	$0.00
Cash	$0.00
Purchases	$125.23
Other Debits	$0.00
Cash Fees	$0.00
Other Fees	$0.00
Total Activity	$125.23

Accounting Code: 0001/200050

Transactions

Posting Date	*Transaction Date*	*Description*	*Reference Number*	*MCC*	*Charge*	*Credit*
08/07	08/06	VERIZONWRLSS*RTCCR VB 800-922-0204 FL	24692169218100531418715	4814	110.54	
08/07	08/06	4TE*CULLIGAN DAYTONA 321-255-5562 FL	24445009218200113324659	5074	9.50	
08/19	08/16	USPS PO 1157951479 MELBOURNE FL	24137469229001537373256	9402	5.19	

0000000 0000000 0000000 471529001776 4809

Account Number: XXXX-XXXX-XXXX-**4809**
August 05, 2019 - September 04, 2019

Total Activity $125.23

Cardholder Signature — Date 9/11/19

Manager Signature — Date 9/11/19

BANK OF AMERICA
PO BOX 15731
WILMINGTON, DE 19886-5731

DANIELLE L STERN **N0001654
FL BREVARD COUNTY BOC
DISTRICT 5 COMMISSION OFFICE
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

⑆5499900 11⑆000500 17764809⑈

829

Culligan of Melbourne

771 NORTH DRIVE
MELBOURNE, FL 32934
(321) 255-5562 (321) 636-1344
bmorissette@culliganmelbourne.com
www.culligancentralflorida.com

IF PAYING BY CREDIT CARD, PLEASE CHECK CORRECT CARD AND FILL OUT BELOW

☐ VISA ☐ MasterCard ☐ American Express ☐ Discover ☐ PLEASE CHECK BOX TO ENROLL IN AUTOMATIC BILL PAYMENT

CARD NUMBER	V. CODE
SIGNATURE	EXP. DATE

DATE	PAY THIS AMOUNT	ACCOUNT NUMBER
07/29/2019	$9.50	268847

INVOICE NUMBER: 85089 AMOUNT PAID $

ADDRESSEE:
DISTRICT 5 COMMISSIONER
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

REMIT PAYMENT TO:
CULLIGAN WATER PRODUCTS
771 NORTH DR
MELBOURNE, FL 32934-9282

INVOICE
RETURN THIS TOP PORTION WITH YOUR PAYMENT

ACCOUNT NUMBER	SALES ID	SALES ORDER NUMBER	PURCHASE ORDER NUMBER	SHIP VIA	TERMS	NET DUE IN 10 DAYS
268847	KM		4500083054	COMPANY TRUCK	INVOICE NUMBER 85089	INVOICE DATE 07/29/2019

DATE SHIPPED	QUANTITY ORDERED	QUANTITY SHIPPED	ITEM NUMBER	DESCRIPTION	UNIT PRICE	DISCOUNT	NET AMOUNT
				Tick 800678279 Date 07/02/2019			
				P/O Number: 4500083054			
07/02	2.00	2.00		1/2 LITER (CASE)	4.750		9.50
07/02	1.00	1.00		SERVICE FEE	0.000		
				End of Ticket 800678279			

Pay on line at www.culligancentralflorida.com Please call our office at 321-255-5562 if you need any assistance.

- Paid 8/5/19 JR

A LATE PAYMENT FINANCE CHARGE OF 1.5 % PER MONTH MAY BE APPLIED ON BALANCES AFTER 30 DAYS	DELIVER TO	TOTAL 9.50
CULLIGAN WATER PRODUCTS 771 NORTH DRIVE MELBOURNE, FL 32934 (321) 255-5562 (321) 636-1344	DISTRICT 5 COMMISSIONER STE 175 490 CENTRE LAKE DRIVE NE PALM BAY FL 32907	SALES TAX FREIGHT/DELIVERY CHARGES **AMOUNT DUE** $9.50

ORIGINAL INVOICE RETAIN BOTTOM PORTION FOR YOUR RECORDS

268847

Online Bill Pay For
Culligan of Melbourne

Thank You For Your Payment.

Payments usually post within two business days.
Please Print This Page For Your Records.

Transaction Details	
Date	8/5/2019 12:57:20 PM
Visa Card	...4809
Total Amount	$9.50
Applied To Account	268847
Result	APPROVED
Authorization Code	075767

831

verizon

PO BOX 489
NEWARK, NJ 07101-0489

Manage Your Account	Account Number	Date Due
www.vzw.com/mybusinessaccount	742120929-00001	08/15/19

Change your address at
http://sso.verizonenterprise.com

Invoice Number	9834753792

Quick Bill Summary

Jun 24 – Jul 23

Previous Balance *(see back for details)*	$109.78
Payment – Thank You	-$109.78
Balance Forward	**$.00**
Monthly Charges	$107.18
Usage and Purchase Charges	
Voice	$.00
Messaging	$.00
Data	$.00
Surcharges and Other Charges & Credits	$3.36
Taxes, Governmental Surcharges & Fees	$.00
Total Current Charges	**$110.54**

Total Charges Due by August 15, 2019 **$110.54**

COUNTY OF BREVARD
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

000141295
N107

Verizon Wireless News

Now It's Easier To Get Help Online

Our new online support experience saves you time by giving you access to the help you need when you need it. Sign in to get personalized help that's specific to your bill, plan and devices. Visit go.vzw.com/support.

Pay from phone	Pay on the Web	Questions:
#PMT (#768)	At vzw.com/mybusinessaccount	1.800.922.0204 or *611 from your phone

verizon

COUNTY OF BREVARD
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

Bill Date	July 23, 2019
Account Number	742120929-00001
Invoice Number	9834753792

Total Amount Due by August 15, 2019

Make check payable to Verizon Wireless.
Please return this remit slip with payment.

$110.54

$ ___ . __

paid 8/5/19
gr

PO BOX 660108
DALLAS, TX 75266-0108

98347537920107421209290000100000011054000000110543

Make a payment

Thank you for your payment!

Transaction Id 400984767

Payment details

Billing Account:	Payment amount	Payment method	Payment date
742120929-00001	$110.54	Danielle	Aug 5, 2019

Want to do more?

Continue working with this account

742120929-00001

Or

Work on another account

Enter account number

Continue

Manage another payment
Set up Auto Pay
View payment history (/sms/amsecure/payment/activity/show.go)

==
WEST MELBOURNE
2305 MINTON RD
MELBOURNE, FL 32904-9998
115795-1479
(800)275-8777
08/16/2019 08:48 AM
==
==

Product	Qty	Unit Price	Price
First-Class Package Service 2 Days	1	$5.19	$5.19

(Domestic)
(CAPE CANAVERAL, FL 32920)
(Weight:0 Lb 10.50 Oz)
(Estimated Delivery Date)
(Monday 08/19/2019)
(USPS Tracking #)
(9500 1141 9918 9228 5756 15)

Total: $5.19

Credit Card Remitd $5.19
(Card Name:VISA)
(Account #:XXXXXXXXXXXX4809)
(Approval #:099631)
(Transaction #:257)
(AID:A0000000031010 Chip)
(AL:VISA CREDIT)
(PIN:Not Required)

In a hurry? Self-service kiosks offer quick and easy check-out. Any Retail Associate can show you how.

Text your tracking number to 28777 (2USPS) to get the latest status. Standard Message and Data rates may apply. You may also visit www.usps.com USPS Tracking or call 1-800-222-1811.

Preview your Mail

EHIBIT "B"
BREVARD COUNTY PURCHASING CARD MONTHLY RECONCILIATION REPORT

PAGE ___ of ___

Cardholder's Name: Danielle Stern **Cardholder Phone Ext:** 321-253-6611 **Personnel #:** 11006140

Cardholder's Department: D5 Commissioner **Closing Date:** October 4th,2019

(enter closing date of statement)

Date Purchased or Ordered	Date Received	Vendor Name	Description of Item Purchased	Amount Billed (indicate "Q"for quoted items)	Fund (4 digits)	Cost Center (6 digits)	GL Account # (7 digits)	Internal / Work Order # (6 or 7 digits)
09/10	09/10	Verizon Wireless	Cell Service	$110.54	0001	200090	5410100	
09/10	09/11	Culligan Water	Water Delivery	$47.50	0001	200050	5529000	
09/19	09/20	USPS Post Office	Letters for Space Coast Honor Flight	$5.19	0001	200050	5510000	

ADD'L PAGES SUBTOTAL ________

(must agree to figure below)

GRAND TOTAL (ALL PAGES) $163.23

SUMMARY OF FUND / COST CENTERS /G.L. ACCOUNT TO BILL

FUND	COST CTR	GL ACCT	INT. ORDER	Amount
0001	200090	5410100		$110.54
0001	200050	5529000		$47.50
0001	200050	5510000		$5.19

(must agree to above figure)

TOTAL $163.23

I (Cardholder) have complied with the Purchase Card Administrative Order (AO-41) and have retained all required approvals for restrictive uses and quote log for purchases with a value in excess of $1000 and an expected life of more than one -Year such as automobiles and furniture; and computer Equipment valued in excess of $750.

10/15/19

Signature of Cardholder / Date

Signature of Approving Official / Date

10/16/19

BCC-223 –Word Document Revised 8/18/2017

Bank of America

DANIELLE L STERN
FL BREVARD COUNTY BOC
XXXX-XXXX-XXXX-**4809**
September 05, 2019 - October 04, 2019

Purchasing Card

Cardholder Activity

Account Information

Mail Billing Inquiries to:
BANKCARD CENTER
PO BOX 982238
EL PASO, TX 79998-2238

Customer Service:
1.888.449.2273 24 Hours

TTY Hearing Impaired:
1.800.222.7365 24 Hours

Outside the U.S.:
1.509.353.6656 24 Hours

For Lost or Stolen Card:
1.888.449.2273 24 Hours

Payment Information

Statement Date	10/04/19
Credit Limit	$2,000
Cash Limit	$0
Days in Billing Cycle	30
Total Activity	$163.23

THIS IS NOT A BILL - DO NOT PAY

Account Summary

Credits	$0.00
Cash	$0.00
Purchases	$163.23
Other Debits	$0.00
Cash Fees	$0.00
Other Fees	$0.00
Total Activity	$163.23

Accounting Code: 0001/200050

Transactions

Posting Date	Transaction Date	Description	Reference Number	MCC	Charge	Credit
09/10	09/10	VERIZONWRLSS*RTCCR VB 800-922-0204 FL	24692169253100875832527	4814	110.54	
09/11	09/10	4TE*CULLIGAN DAYTONA 321-255-5562 FL	24445009253200172823910	5074	47.50	
09/20	09/19	USPS PO 1157951479 MELBOURNE FL	24137469263001359959759	9402	5.19	

0000000 0000000 0000000 47152900177764809

Account Number: XXXX-XXXX-XXXX-**4809**
September 05, 2019 - October 04, 2019

BANK OF AMERICA
PO BOX 15731
WILMINGTON, DE 19886-5731

Total Activity **$163.23**

Cardholder Signature Date 10/15/19

Manager Signature Date 10/15/19

DANIELLE L STERN **N0001539
FL BREVARD COUNTY BOC
DISTRICT 5 COMMISSION OFFICE
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

⑆549900111⑆000500177764809⑈

836

verizon

PO BOX 489
NEWARK, NJ 07101-0489

Manage Your Account	Account Number	Date Due
www.vzw.com/mybusinessaccount	742120929-00001	09/15/19

Change your address at
http://sso.verizonenterprise.com

Invoice Number	9836746703

COUNTY OF BREVARD
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

000122282
M108

Quick Bill Summary

Jul 24 – Aug 23

Previous Balance *(see back for details)*	$110.54
Payment – Thank You	-$110.54
Balance Forward	**$.00**
Monthly Charges	$107.18
Usage and Purchase Charges	
Voice	$.00
Messaging	$.00
Data	$.00
Surcharges and Other Charges & Credits	$3.36
Taxes, Governmental Surcharges & Fees	$.00
Total Current Charges	**$110.54**

Total Charges Due by September 15, 2019 $110.54

Pay from phone	Pay on the Web	Questions:
#PMT (#768)	At vzw.com/mybusinessaccount	1.800.922.0204 or *611 from your phone

verizon

COUNTY OF BREVARD
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

Bill Date	August 23, 2019
Account Number	742120929-00001
Invoice Number	9836746703

paid 9/9/19 GL

Total Amount Due by September 15, 2019

Make check payable to Verizon Wireless.
Please return this remit slip with payment.

$110.54

$.

PO BOX 660108
DALLAS, TX 75266-0108

983674670301074212092900001000000110540000000110543

837

Print Close

Print Date : 9/9/2019

Thank you for your payment!

Transaction Id 823472167

Billing Account	Payment amount	Payment method	Payment date
742120929-00001	$110.54	Danielle	Mon Sep 09 2019 09:17:09 GMT-0400 (Eastern Daylight Time)

838

Culligan of Melbourne

771 NORTH DRIVE
MELBOURNE, FL 32934
(321) 255-5562 (321) 636-1344
bmorissette@culliganmelbourne.com
www.culligancentralflorida.com

IF PAYING BY CREDIT CARD, PLEASE CHECK CORRECT CARD AND FILL OUT BELOW

☐ VISA ☐ MasterCard ☐ American Express ☐ Discover ☐ PLEASE CHECK BOX TO ENROLL IN AUTOMATIC BILL PAYMENT

CARD NUMBER	V. CODE
SIGNATURE	EXP. DATE

DATE	PAY THIS AMOUNT	ACCOUNT NUMBER
08/28/2019	$47.50	268847

INVOICE NUMBER: 85356 AMOUNT PAID $

ADDRESSEE:
DISTRICT 5 COMMISSIONER
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

REMIT PAYMENT TO:
CULLIGAN WATER PRODUCTS
771 NORTH DR
MELBOURNE, FL 32934-9282

INVOICE

RETURN THIS TOP PORTION WITH YOUR PAYMENT

ACCOUNT NUMBER	SALES ID	SALES ORDER NUMBER	PURCHASE ORDER NUMBER	SHIP VIA	TERMS	NET DUE IN 10 DAYS
268847	KM		4500083054	COMPANY TRUCK	INVOICE NUMBER 85356	INVOICE DATE 08/28/2019

DATE SHIPPED	QUANTITY ORDERED	QUANTITY SHIPPED	ITEM NUMBER	DESCRIPTION	UNIT PRICE	DISCOUNT	NET AMOUNT
				Tick 800680588 Date 07/31/2019			
				P/O Number: 4500083054			
07/31	4.00	4.00		1/2 LITER (CASE)	4.750		19.00
07/31	1.00	1.00		SERVICE FEE	0.000		
				End of Ticket 800680588			
08/26	2.00	2.00		1/2 LITER (CASE)	4.750		9.50
				Tick 800683012 Date 08/28/2019			
				P/O Number: 4500083054			
08/28	4.00	4.00		1/2 LITER (CASE)	4.750		19.00
08/28	1.00	1.00		SERVICE FEE	0.000		
				End of Ticket 800683012			

paid 9/4/19
ℊℓ

Pay on line at www.culligancentralflorida.com Please call our office at 321-255-5562 if you need any assistance.

A LATE PAYMENT FINANCE CHARGE OF 1.5 % PER MONTH MAY BE APPLIED ON BALANCES AFTER 30 DAYS
CULLIGAN WATER PRODUCTS
771 NORTH DRIVE
MELBOURNE, FL 32934
(321) 255-5562 (321) 636-1344

DELIVER TO:
DISTRICT 5 COMMISSIONER
STE 175
490 CENTRE LAKE DRIVE NE
PALM BAY FL 32907

TOTAL	47.50
SALES TAX	
FREIGHT/DELIVERY CHARGES	
AMOUNT DUE	**$47.50**

ORIGINAL INVOICE RETAIN BOTTOM PORTION FOR YOUR RECORDS

268847

Online Bill Pay For
Culligan of Melbourne

Account Selection **Account Detail** **Log Out**

Thank You For Your Payment.

Payments usually post within two business days.
Please Print This Page For Your Records.

Transaction Details	
Date	9/9/2019 6:22:08 AM
Visa Card	...4809
Total Amount	$47.50
Applied To Account	268847
Result	APPROVED
Authorization Code	075495

WEST MELBOURNE
2305 MINTON RD
MELBOURNE, FL 32904-9998
115795-1479
(800)275-8777
09/19/2019 11:36 AM

Product	Qty	Unit Price	Price
First-Class Package Service 2 Days	1	$5.19	$5.19

(Domestic)
(CAPE CANAVERAL, FL 32920)
(Weight:0 Lb 9.60 Oz)
(Estimated Delivery Date)
(Saturday 09/21/2019)
(USPS Tracking #)
(9500 1141 9918 9262 5925 93)

Total: $5.19

Credit Card Remitd $5.19
(Card Name:VISA)
(Account #:XXXXXXXXXXXX4809)
(Approval #:061545)
(Transaction #:909)
(AID:A0000000031010 Chip)
(AL:VISA CREDIT)
(PIN:Not Required)

In a hurry? Self-service kiosks offer quick and easy check-out. Any Retail Associate can show you how.

Text your tracking number to 28777 (2USPS) to get the latest status. Standard Message and Data rates may apply. You may also visit www.usps.com USPS Tracking or call 1-800-222-1811.

All sales final on stamps and postage.
Refunds for guaranteed services only.
Thank you for your business.

HELP US SERVE YOU BETTER

TELL US ABOUT YOUR RECENT
POSTAL EXPERIENCE

Go to:
https://postalexperience.com/Pos

840-5327-0302-003-00047-90234-02

EHIBIT "B"

BREVARD COUNTY PURCHASING CARD MONTHLY RECONCILIATION REPORT

Cardholder's Name: Danielle Stern **Cardholder Phone Ext:** 321-253-6611 **Personnel #:** 11006140

Cardholder's Department: D5 Commissioner **Closing Date:** November 4th,2019

(enter closing date of statement)

Date Purchased or Ordered	Date Received	Vendor Name	Description of Item Purchased	Amount Billed (indicate "Q" for quoted items)	Fund (4 digits)	Cost Center (6 digits)	GL Account # (7 digits)	Internal / Work Order # (6 or 7 digits)
10/08	10/08	Verizon Wireless	Cell Service	$110.54	0001	200090	5410100	
10/08	10/09	Culligan Water	Water Delivery	$19.96	0001	200050	5529000	
10/09	10/11	Office Depot	Office supplies	$107.64	0001	200050	5510000	
10/18	10/21	USPS Post Office	Letters for Space Coast Honor Flight	$5.19	0001	200050	5420200	

ADD'L PAGES SUBTOTAL ______

(must agree to figure below)

GRAND TOTAL (ALL PAGES) $243.33

SUMMARY OF FUND / COST CENTERS /G.L. ACCOUNT TO BILL

FUND	COST CTR	GL ACCT	INT. ORDER	Amount
0001	200090	5410100		$110.54
0001	200050	5529000		$19.96
0001	200050	5510000		$107.64
0001	200050	5420200		$5.19

(must agree to above figure)

TOTAL $243.33

I (Cardholder) have complied with the Purchase Card Administrative Order (AO-41) and have retained all required approvals for restrictive uses and quote log for purchases with a value in excess of $1000 and an expected life of more than one -Year such as automobiles and furniture; and computer Equipment valued in excess of $750

11/14/19

Signature of Cardholder / Date

11/14/19

Signature of Approving Official / Date

11/13/19

Bank of America

DANIELLE L STERN
FL BREVARD COUNTY BOC
XXXX-XXXX-XXXX-**4809**
October 05, 2019 - November 04, 2019

Purchasing Card

Cardholder Activity

Account Information

Mail Billing Inquiries to:
BANKCARD CENTER
PO BOX 982238
EL PASO, TX 79998-2238

Customer Service:
1.888.449.2273 24 Hours

TTY Hearing Impaired:
1.800.222.7365 24 Hours

Outside the U.S.:
1.509.353.6656 24 Hours

For Lost or Stolen Card:
1.888.449.2273 24 Hours

Payment Information

Statement Date	11/04/19
Credit Limit	$2,000
Cash Limit	$0
Days in Billing Cycle	31
Total Activity	$243.33

THIS IS NOT A BILL - DO NOT PAY

Account Summary

Credits	$0.00
Cash	$0.00
Purchases	$243.33
Other Debits	$0.00
Cash Fees	$0.00
Other Fees	$0.00
Total Activity	$243.33

Accounting Code: 0001/200050

Transactions

Posting Date	Transaction Date	Description	Reference Number	MCC	Charge	Credit
10/08	10/08	VERIZONWRLSS*RTCCR VB 800-922-0204 FL	24692169281100213492626	4814	110.54	
10/09	10/08	4TE*CULLIGAN DAYTONA 321-255-5562 FL	24445009281200110288081	5074	19.96	
10/11	10/09	OFFICE DEPOT #2703 PALM BAY FL	24137469283100221221384	5943	107.64	
10/21	10/18	USPS PO 1157951479 MELBOURNE FL	24137469292001582505309	9402	5.19	

0000000 0000000 0000000 47152900177648O9

Account Number: XXXX-XXXX-XXXX-**4809**
October 05, 2019 - November 04, 2019

Total Activity **$243.33**

Cardholder Signature — Date 11/14/19

Manager Signature — Date 11/4/19

BANK OF AMERICA
PO BOX 15731
WILMINGTON, DE 19886-5731

DANIELLE L STERN
FL BREVARD COUNTY BOC
DISTRICT 5 COMMISSION OFFICE
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

**N0001222

⑆549990011⑆000500177648O9⑈

843 verizon

PO BOX 489
NEWARK, NJ 07101-0489

Manage Your Account	Account Number	Date Due
www.vzw.com/mybusinessaccount	742120929-00001	10/15/19

Change your address at
http://sso.verizonenterprise.com

Invoice Number	9838757393

COUNTY OF BREVARD 000089572
490 CENTRE LAKE DR NE STE 175 M109
PALM BAY, FL 32907-1177

Quick Bill Summary

Aug 24 – Sep 23

Previous Balance *(see back for details)*	$110.54
Payment – Thank You	–$110.54
Balance Forward	**$.00**
Monthly Charges	$107.18
Usage and Purchase Charges	
Voice	$.00
Messaging	$.00
Data	$.00
Surcharges and Other Charges & Credits	$3.36
Taxes, Governmental Surcharges & Fees	$.00
Total Current Charges	**$110.54**

Total Charges Due by October 15, 2019 **$110.54**

Pay from phone	Pay on the Web	Questions:
#PMT (#768)	At vzw.com/mybusinessaccount	1.800.922.0204 or *611 from your phone

verizon

COUNTY OF BREVARD
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

Bill Date	September 23, 2019
Account Number	742120929-00001
Invoice Number	9838757393

paid 10/7/19 9R

Total Amount Due by October 15, 2019

Make check payable to Verizon Wireless.
Please return this remit slip with payment.

$110.54

$ ☐☐☐.☐☐

PO BOX 660108
DALLAS, TX 75266-0108

983875739301074212092900001000000110540000000110543

844

Notifications DANIELLE STERN

verizon Manage Account Support
(https://b2b.verizonwireless.com/sms/amsecure/landing/overview.go#/overview)

Location: Choose Location (https://b2b.verizonwireless.com/b2b/commerce/amsecure/chooseZip.go?purchasePath=&isChangeZip=true&isCommerce=true)

Cart Empty
Search

Back to billing

Make a payment

Thank you for your payment!

Transaction Id 816220701

Payment details

Billing Account	Payment amount	Payment method	Payment date
742120929-00001	$110.54	Danielle	Oct 7, 2019

Want to do more?

Continue working with this account

742120929-00001

Or

Work on another account

Enter account number

Continue

Manage another payment

Set up Auto Pay

View payment history (/sms/amsecure/payment/activity/show.go)

845

Culligan of Melbourne

771 NORTH DRIVE
MELBOURNE, FL 32934
(321) 255-5562 (321) 636-1344
bmorissette@culliganmelbourne.com
www.culligancentralflorida.com

IF PAYING BY CREDIT CARD, PLEASE CHECK CORRECT CARD AND FILL OUT BELOW

☐ VISA ☐ MasterCard ☐ American Express ☐ Discover ☐ PLEASE CHECK BOX TO ENROLL IN AUTOMATIC BILL PAYMENT

CARD NUMBER	V. CODE
SIGNATURE	EXP. DATE

DATE	PAY THIS AMOUNT	ACCOUNT NUMBER
09/26/2019	$19.96	268847

INVOICE NUMBER: 85962 AMOUNT PAID $

ADDRESSEE:

DISTRICT 5 COMMISSIONER
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

REMIT PAYMENT TO:

CULLIGAN WATER PRODUCTS
771 NORTH DR
MELBOURNE, FL 32934-9282

INVOICE

RETURN THIS TOP PORTION WITH YOUR PAYMENT

ACCOUNT NUMBER	SALES ID	SALES ORDER NUMBER	PURCHASE ORDER NUMBER	SHIP VIA	TERMS	NET DUE IN 10 DAYS
268847	KM		4500083054	COMPANY TRUCK	INVOICE NUMBER 85962	INVOICE DATE 09/26/2019

DATE SHIPPED	QUANTITY ORDERED	QUANTITY SHIPPED	ITEM NUMBER	DESCRIPTION	UNIT PRICE	DISCOUNT	NET AMOUNT
				Tick 800685540 Date 09/25/2019			
				P/O Number: 4500083054			
09/25	4.00	4.00		1/2 LITER (CASE)	4.990		19.96
09/25	1.00	1.00		SERVICE FEE	0.000		
				End of Ticket 800685540			

Pay on line at www.culligancentralflorida.com Please call our office at 321-255-5562 if you need any assistance.

paid 10/7/19 [illegible]

A LATE PAYMENT FINANCE CHARGE OF 1.5 % PER MONTH MAY BE APPLIED ON BALANCES AFTER 30 DAYS

CULLIGAN WATER PRODUCTS
771 NORTH DRIVE
MELBOURNE, FL 32934
(321) 255-5562 (321) 636-1344

DELIVER TO:
DISTRICT 5 COMMISSIONER
STE 175
490 CENTRE LAKE DRIVE NE
PALM BAY FL 32907

TOTAL	19.96
SALES TAX	
FREIGHT/DELIVERY CHARGES	
AMOUNT DUE	**$19.96**

ORIGINAL INVOICE RETAIN BOTTOM PORTION FOR YOUR RECORDS

268847

846

Online Bill Pay For
Culligan of Melbourne

Account Selection **Account Detail** **Log Out**

Thank You For Your Payment.

Payments usually post within two business days.
Please Print This Page For Your Records.

Transaction Details	
Date	10/7/2019 8:10:37 AM
Visa Card	...4809
Total Amount	$19.96
Applied To Account	268847
Result	APPROVED
Authorization Code	008256

Office DEPOT
OfficeMax

PALM BAY - (321) 723-7079
10/09/2019 8:46 AM

2TTT759P6UQX86WEH

SALE	2703-3-5089-762083-19.9.2	
683244 ENV,100BX,9X12		26.29 S
633888 ENV,#10,PLN,50		21.99 S
505096 NOTE,4X4,6PK,A		
3 @ 17.79	53.37	
You Pay		**53.37**S
6787397 LIQD,DWN,DWAS,		5.99 S
Subtotal:		107.64
Total:		107.64
Visa 4809:		107.64

AUTH CODE 093169
TDS Chip Read
AID A0000000031010 VISA CREDIT
TVR 0080088000
CVS No Signature Required

GARY STERN 1468112915
Get 2% back in rewards on your
favorite supplies & more - including
furniture and technology. Plus,
next-day rewards on select offers,
rewards for recycling and more
Visit officedepot.com/rewards

Tax Exemption Number 22330108
Shop online at www.officedepot.com
****
WE WANT TO HEAR FROM YOU!
Visit survey.officedepot.com
and enter the survey code below:
15FB W4BG 4PH4
****

WEST MELBOURNE
2305 MINTON RD
MELBOURNE, FL 32904-9998
115795-1479
(800)275-8777
10/18/2019 08:41 AM

Product	Qty	Unit Price	Price
First-Class Package Service 2 Days	1	$5.19	$5.19

(Domestic)
(CAPE CANAVERAL, FL 32920)
(Weight:0 Lb 10.30 Oz)
(Estimated Delivery Date)
(Monday 10/21/2019)
(USPS Tracking #)
(9500 1141 9918 9291 6063 77)

Total: $5.19

Credit Card Remitd $5.19
(Card Name:VISA)
(Account #:XXXXXXXXXXXX4809)
(Approval #:040068)
(Transaction #:506)
(AID:A0000000031010 Chip)
(AL:VISA CREDIT)
(PIN:Not Required)

In a hurry? Self-service kiosks offer quick and easy check-out. Any Retail Associate can show you how.

Text your tracking number to 28777 (2USPS) to get the latest status. Standard Message and Data rates may apply. You may also visit www.usps.com USPS Tracking or call 1-800-222-1811.

All sales final on stamps and postage.
Refunds for guaranteed services only.
Thank you for your business.

HELP US SERVE YOU BETTER

TELL US ABOUT YOUR RECENT
POSTAL EXPERIENCE

Go to:
https://postalexperience.com/Pos

840-5327-0302-003-00048-88185-02

or scan this code with
your mobile device:

848

EHIBIT "B"
BREVARD COUNTY PURCHASING CARD MONTHLY RECONCILIATION REPORT

PAGE ___ of ___

Cardholder's Name: Danielle Stern **Cardholder Phone Ext:** 321-253-6611 **Personnel #:** 11006140

Cardholder's Department: D5 Commissioner **Closing Date:** December 4th,2019

(enter closing date of statement)

Date Purchased or Ordered	Date Received	Vendor Name	Description of Item Purchased	Amount Billed (indicate "Q"for quoted items)	Fund (4 digits)	Cost Center (6 digits)	GL Account # (7 digits)	Internal / Work Order # (6 or 7 digits)
11/06	11/06	Verizon Wireless	Cell Service	$110.62	0001	200090	5410100	

ADD'L PAGES SUBTOTAL ________

GRAND TOTAL (ALL PAGES) $110.62 (must agree to figure below)

SUMMARY OF FUND / COST CENTERS /G.L. ACCOUNT TO BILL

FUND	COST CTR	GL ACCT	INT. ORDER	Amount
0001	200090	5410100		$110.62

(must agree to above figure) **TOTAL** $110.62

I (Cardholder) have complied with the Purchase Card Administrative Order (AO-41) and have retained all required approvals for restrictive uses and quote log for purchases with a value in excess of $1000 and an expected life of more than one -Year such as automobiles and furniture; and computer Equipment valued in excess of $750

12/10/19

Signature of Cardholder / Date

12/10/19

Signature of Approving Official / Date

Bank of America

DANIELLE L STERN
FL BREVARD COUNTY BOC
XXXX-XXXX-XXXX-**4809**
November 05, 2019 - December 04, 2019

Purchasing Card

Cardholder Activity

Account Information

Mail Billing Inquiries to:
BANKCARD CENTER
PO BOX 982238
EL PASO, TX 79998-2238

Customer Service:
1.888.449.2273 24 Hours

TTY Hearing Impaired:
1.800.222.7365 24 Hours

Outside the U.S.:
1.509.353.6656 24 Hours

For Lost or Stolen Card:
1.888.449.2273 24 Hours

Payment Information

Statement Date	12/04/19
Credit Limit	$2,000
Cash Limit	$0
Days in Billing Cycle	30
Total Activity	$110.62

THIS IS NOT A BILL - DO NOT PAY

Account Summary

Credits	$0.00
Cash	$0.00
Purchases	$110.62
Other Debits	$0.00
Cash Fees	$0.00
Other Fees	$0.00
Total Activity	$110.62

Accounting Code: 0001/200050

Transactions

Posting Date	*Transaction Date*	*Description*	*Reference Number*	*MCC*	*Charge*	*Credit*
11/06	11/06	VERIZONWRLSS*RTCCR VB 800-922-0204 FL	24692169310100224959006	4814	110.62	

0000000 0000000 0000000 471529001776480 9

Account Number: XXXX-XXXX-XXXX-**4809**
November 05, 2019 - December 04, 2019

BANK OF AMERICA
PO BOX 15731
WILMINGTON, DE 19886-5731

Total Activity **$110.62**

Cardholder Signature — Date 12/10/19

DANIELLE L STERN **N0000816
FL BREVARD COUNTY BOC
DISTRICT 5 COMMISSION OFFICE
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

Manager Signature — Date 12/12/19

:5499900 11:000500 1776480 9

verizon

PO BOX 489
NEWARK, NJ 07101-0489

Manage Your Account	Account Number	Date Due
www.vzw.com/mybusinessaccount	742120929-00001	11/15/19

Change your address at
http://sso.verizonenterprise.com

Invoice Number	9840790706

COUNTY OF BREVARD
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

00124926
M110

Quick Bill Summary

Sep 24 – Oct 23

Previous Balance *(see back for details)*	$110.54
Payment – Thank You	-$110.54
Balance Forward	**$0.00**
Monthly Charges	$107.18
Usage and Purchase Charges	
Voice	$.00
Messaging	$.00
Data	$.00
Surcharges and Other Charges & Credits	$3.44
Taxes, Governmental Surcharges & Fees	$.00
Total Current Charges	**$110.62**

Total Charges Due by November 15, 2019 **$110.62**

Pay from phone	Pay on the Web	Questions:
#PMT (#768)	At vzw.com/mybusinessaccount	1.800.922.0204 or *611 from your phone

verizon

Bill Date	October 23, 2019
Account Number	742120929-00001
Invoice Number	9840790706

paid 11/5/19
JK

COUNTY OF BREVARD
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

Total Amount Due by November 15, 2019

Make check payable to Verizon Wireless.
Please return this remit slip with payment.

$110.62

$ ☐☐☐.☐☐

PO BOX 660108
DALLAS, TX 75266-0108

984079070601074212092900001000000110620000001106 23

Notifications DANIELLE STERN

verizon Manage Account (https://b2b.verizonwireless.com/sms/amsecure/landing/overview.go#/overview) Support

Location: Choose Location (https://b2b.verizonwireless.com/b2b/commerce/amsecure/chooseZip.go?purchasePath=&isChangeZip=true&isCommerce=true)

Cart Empty
Search

Back to billing

Make a payment

Thank you for your payment!

Transaction Id 856660348

Payment details

Billing Account	Payment amount	Payment method	Payment date
742120929-00001	$110.62	Danielle	Nov 5, 2019

Want to do more?

Continue working with this account

742120929-00001

Or

Work on another account

Enter account number

Continue

Manage another payment

Set up Auto Pay

View payment history (/sms/amsecure/payment/activity/show.go)

Terms and Conditions (https://b2b.verizonwireless.com/sms/login/terms.go)

ACCREDITED BUSINESS
BBB.
Click for Review
(https://businessportals.verizonwireless.com/support/misc/hosted/bbb_vz_review.html)

EHIBIT "B"
BREVARD COUNTY PURCHASING CARD MONTHLY RECONCILIATION REPORT

PAGE ___ of ___

Cardholder's Name: Danielle Stern **Cardholder Phone Ext:** 321-253-6611 **Personnel #:** 11006140

Cardholder's Department: D5 Commissioner **Closing Date:** January 4th, 2020
(enter closing date of statement)

Date Purchased or Ordered	Date Received	Vendor Name	Description of Item Purchased	Amount Billed (indicate "Q"for quoted items)	Fund (4 digits)	Cost Center (6 digits)	GL Account # (7 digits)	Internal / Work Order # (6 or 7 digits)
12/06	12/09	Verizon Wireless	Cell Service	$110.62	0001	200090	5410100	
12/10	12/11	Walmart	Items for open house	$73.32	0001	200050	5490000	
12/11	12/12	Publix	Items for open house	$46.98	0001	200050	5490000	
12/12	12/13	Dunkin Donuts	Items for open house	$118.88	0001	200050	5490000	
12/12	12/13	Dunkin Donuts	Items for open house	$25.98	0001	200050	5490000	

ADD'L PAGES SUBTOTAL ______

GRAND TOTAL (ALL PAGES) $375.78 (must agree to figure below)

SUMMARY OF FUND / COST CENTERS /G.L. ACCOUNT TO BILL

FUND	COST CTR	GL ACCT	INT. ORDER	Amount
0001	200090	5410100		$110.62
0001	200050	5490000		$73.32
0001	200050	5490000		$46.98
0001	200050	5490000		$118.88
0001	200050	5490000		$25.98

(must agree to above figure) **TOTAL** $375.78

I (Cardholder) have complied with the Purchase Card Administrative Order (AO-41) and have retained all required approvals for restrictive uses and quote log for purchases with a value in excess of $1000 and an expected life of more than one -Year such as automobiles and furniture, and computer Equipment valued in excess of $750.

1/10/2020
Signature of Cardholder / Date

1/10/2020
Signature of Approving Official / Date

Bank of America

Purchasing Card

DANIELLE L STERN
FL BREVARD COUNTY BOC
XXXX-XXXX-XXXX-**4809**
December 05, 2019 - January 04, 2020

Cardholder Activity

Account Information

Mail Billing Inquiries to:
BANKCARD CENTER
PO BOX 982238
EL PASO, TX 79998-2238

Customer Service:
1.888.449.2273 24 Hours

TTY Hearing Impaired:
1.800.222.7365 24 Hours

Outside the U.S.:
1.509.353.6656 24 Hours

For Lost or Stolen Card:
1.888.449.2273 24 Hours

Payment Information

Statement Date	01/04/20
Credit Limit	$2,000
Cash Limit	$0
Days in Billing Cycle	31
Total Activity	$375.78

THIS IS NOT A BILL - DO NOT PAY

Account Summary

Credits	$0.00
Cash	$0.00
Purchases	$375.78
Other Debits	$0.00
Cash Fees	$0.00
Other Fees	$0.00
Total Activity	$375.78

Accounting Code: 0001/200050

Transactions

Posting Date	Transaction Date	Description	Reference Number	MCC	Charge	Credit
12/09	12/06	VERIZONWRLSS*RTCCR VB 800-922-0204 FL	24692169340100203418986	4814	110.62	
12/11	12/10	WM SUPERCENTER #974 WEST MELBOURNFL	24445009345400211491543	5411	73.32	
12/12	12/11	PUBLIX #695 WEST MELBOURNFL	24137469346600327745504	5411	46.98	
12/13	12/12	DUNKIN #335674 Q35 PALM BAY FL	24431069347838000229442	5814	118.88	
12/13	12/12	DUNKIN #335674 Q35 PALM BAY FL	24431069347838000229467	5814	25.98	

0000000 0000000 0000000 4715290017764809

Account Number: XXXX-XXXX-XXXX-**4809**
December 05, 2019 - January 04, 2020

BANK OF AMERICA
PO BOX 15731
WILMINGTON, DE 19886-5731

DANIELLE L STERN
FL BREVARD COUNTY BOC
DISTRICT 5 COMMISSION OFFICE
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

**N0001259

Total Activity **$375.78**

Cardholder Signature 1/10/2020
Date

Manager Signature 1/10/2020
Date

⑆549900111⑆00050017764809⑈

verizon

PO BOX 489
NEWARK, NJ 07101-0489

Manage Your Account	Account Number	Date Due
www.vzw.com/mybusinessaccount	742120929-00001	12/15/19

Change your address at
http://sso.verizonenterprise.com

Invoice Number	9842843470

Quick Bill Summary

Oct 24 – Nov 23

COUNTY OF BREVARD 00090965
490 CENTRE LAKE DR NE STE 175 M111
PALM BAY, FL 32907-1177

Previous Balance *(see back for details)*	$110.62
Payment – Thank You	–$110.62
Balance Forward	**$.00**
Monthly Charges	$107.18
Usage and Purchase Charges	
Voice	$.00
Messaging	$.00
Data	$.00
Surcharges and Other Charges & Credits	$3.44
Taxes, Governmental Surcharges & Fees	$.00
Total Current Charges	**$110.62**

Total Charges Due by December 15, 2019 **$110.62**

Pay from phone	Pay on the Web	Questions:
#PMT (#768)	At vzw.com/mybusinessaccount	1.800.922.0204 or *611 from your phone

verizon

Bill Date November 23, 2019
Account Number 742120929-00001
Invoice Number 9842843470

COUNTY OF BREVARD
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

Total Amount Due by December 15, 2019

Make check payable to Verizon Wireless.
Please return this remit slip with payment.

$110.62

$ ☐☐☐.☐☐

paid 12/5/19
ftl

PO BOX 660108
DALLAS, TX 75266-0108

984284347001074212092900001000000110620000000110623

Print Close

Print Date : 12/5/2019

Thank you for your payment!

Transaction Id 874105039

Billing Account	Payment amount	Payment method	Payment date
742120929-00001	$110.62	Danielle	Thu Dec 05 2019 09:14:04 GMT-0500 (Eastern Standard Time)

See back of receipt for your chance
to win $1000 ID #:7N88JFBK015

Walmart

321-984-2715 Mgr:JEFFREY MILZ
845 PALM BAY RD NE
WEST MELBOURNE FL 32904
STN 00974 OP# 000185 TE# 02 TR# 01693

30IN OPP FL	001869735937		0.97	0
LN MRRYBRGHT	003993865254		2.96	0
CUTLERY	007874215947		8.26	0
LN MRRYBRGHT	003993865254		2.96	0
DP MRRYBRGHT	003993866238		2.96	0
DP MRRYBRGHT	003993866238		2.98	0
DP MRRYBRGHT	003993866238		2.98	0
DP MRRYBRGHT	003993866238		2.96	0
CRISCO OIL	005150024392	F	1.94	0
SPREADS	002740010907	F	1.98	0
MUFFIN MIX	001600045602	F	2.48	0
MUFFIN MIX	001600045604	F	2.40	0
BAKING CUPS	007874219830		1.00	0
BAKING CUPS	007874219830		1.00	0
JELLY	005150001229	F	2.84	0
** VOIDED ENTRY **				
BAKING CUPS	007874219830		1.00-	0
1LB ROLL SSG	007790011553	F	3.53	0
1LB ROLL SSG	007790011553	F	3.53	0
TPP 52OZ	004850020274	F	3.28	0
TPP 52OZ	004850020274	F	3.28	0
2 MILK	007874235187	F	2.77	0
SC 10OZ 15PK	068113178113	F	2.00	0
SC 10OZ 15PK	068113178113	F	2.00	0
SC 10OZ 15PK	068113178113	F	2.00	0
PLASTIC CUPS	004116500140		3.96	0
GRBTRBISCUIT	001800000183	F	1.76	0
GRBTRBISCUIT	001800000183	F	1.78	0
GRBTRBISCUIT	001800000183	F	1.76	0
GRBTRBISCUIT	001800000183	F	1.76	0
		SUBTOTAL	73.32	
		TOTAL	73.32	
		VISA TEND	73.32	

VISA CREDIT **** **** **** 4809 I 1
APPROVAL # 042004
REF # 1042000314
TRANS ID - 589344620654675
VALIDATION - 03HD
PAYMENT SERVICE - E
AID A0000000031010
TC 2BF6E6CE70295B00
TERMINAL # 283731989
*Pin Verified
12/10/19 12:14:30
CHANGE DUE 0.00
ITEMS SOLD 27
TC# 5964 1298 5109 2365 3052

12/10/19 12:14:38
CUSTOMER COPY
Scan with Walmart app to save receipts

Publix

Palm Crossings
145 NE Palm Bay Rd
W Melbourne, FL 32904
Store Manager: Glen Williams
321-722-0022

ICE 10 LB	1.99	T F
FRESH FRUIT PLTR L	44.99	T F

TAX EXEMPT

Order Total		46.98
Grand Total		46.98
Credit	Payment	46.98
Change		0.00
TAX FORGIVEN		3.29

PRESTO!
Trace #: 529028
Reference #: 1636174231
Acct #: XXXXXXXXXXXX4809
Purchase VISA
Amount: $46.98
Auth #: 056687

CREDIT CARD	PURCHASE
A0000000031010	VISA CREDIT
Entry Method:	Chip Read
Mode:	Issuer-PIN Verified

Your cashier was Stephanie

12/11/2019 12:09 S0695 R152 7543 C0426

Explore the many ways to save at Publix.
View bargains at publix.com/savingstyle

Publix Super Markets, Inc.

Welcome to Dunkin' Donuts PC # 335674
Palm Bay, FL 32906
(321) 723-7170
12/12/2019 7:59:00 AM

Eat In
Order: 714

Tax Exempt ID: 858012621

Register:1 Tran Seq No: 1452714
Cashier:Christa C.

*****SALE*****

2	12 Bagels	25.98
	Sub. Total:	$25.98
	Tax:	$0.00
	Total:	$25.98
	Discount Total:	$0.00
	Change	$0.00
	Visa:	$25.98

VISA
Card Num : ************4809
Terminal : 1
Approval : 013426
AID : A0000000031010
TVR : 0000001000
IAD : 06010A03A0A002
TSI : E800
AR : Y3
TC : E028C8

USD$ 25.98

I agree to pay the above Total Amount
according to Card Issuer Agreement.

Signature: ____________________

****
Tell us about today's visit at
www.telldunkin.com within 3 days

RECEIVE A FREE CLASSIC DONUT
on your next visit when you
purchase a Medium or Larger Beverage
Survey Code: 71401-35674-0712-1291

Enter Validation Code: ______________
See restrictions on dunkindonuts.com
****
Visit DunkinNation.com for product
offers and news. Enter Code DD2957
****
Thank You Come Back Again!
If you have any questions or concerns,
Please call us at 407-930-0920
Or email us at telldunkin@yahoo.com

Welcome to Dunkin' Donuts PC # 335674
Palm Bay, FL 32906
(321) 723-7170
12/12/2019 7:55:34 AM

Eat In
Order: 698

Tax Exempt ID: 858012627

Register:1 Tran Seq No: 1452698
Cashier:Christa C.

*****SALE*****

3	Bx Joe Orig Blnd	47.97
3	12 Donuts	29.97
1	12 Bagels	12.99
4	8oz Veg CC	11.96
1	Bx Joe Hot Chocolate	15.99
	Sub. Total:	$118.88
	Tax:	$0.00
	Total:	$118.88
	Discount Total:	$0.00
	Change	$0.00
	Visa:	$118.88

VISA
Card Num : ************4809
Terminal : 1
Approval : 027309
AID : A0000000031010
TVR : 0000001000
IAD : 06010A03A08002
TSI : E800
AR : Y3
TC : E028C8

USD$ 118.88

I agree to pay the above Total Amount
according to Card Issuer Agreement.

Signature: ____________________

****
Tell us about today's visit at
www.telldunkin.com within 3 days

RECEIVE A FREE CLASSIC DONUT
on your next visit when you
purchase a Medium or Larger Beverage
Survey Code: 69801-35674-0712-1296

Enter Validation Code: ______________
See restrictions on dunkindonuts.com
****
Visit DunkinNation.com for product
offers and news. Enter Code DD2957
****
Thank You Come Back Again!
If you have any questions or concerns,
Please call us at 407-930-0920
Or email us at telldunkin@yahoo.com

With Commissioner Kristine Isnardi

Please join the District Five Commission Office for a continental breakfast at our annual Holiday Open House

December 12, 2019

9:00 a.m.– 12:00 p.m.

490 Centre Lake Drive NE, Suite 175

Palm Bay, FL 32907

Please help us with this year's charity, Elves for Elders.

Please bring either an Axe bath gift set for a man or a Dove bath gift set for a woman.

R.S.V.P. to Danielle.stern@brevardfl.gov by Friday, December 6, 2019

EHIBIT "B"

BREVARD COUNTY PURCHASING CARD MONTHLY RECONCILIATION REPORT

Cardholder's Name: Danielle Stern **Cardholder Phone Ext:** 321-253-6611 **Personnel #:** 11006140

Cardholder's Department: D5 Commissioner **Closing Date:** February 4th, 2020
(enter closing date of statement)

Date Purchased or Ordered	Date Received	Vendor Name	Description of Item Purchased	Amount Billed (indicate "Q"for quoted items)	Fund (4 digits)	Cost Center (6 digits)	GL Account # (7 digits)	Internal / Work Order # (6 or 7 digits)
01/07	01/08	Verizon Wireless	Cell service	$110.62	0001	200090	5410100	

ADD'L PAGES SUBTOTAL ____

GRAND TOTAL (ALL PAGES) ____ (must agree to figure below)

I (Cardholder) have complied with the Purchase Card Administrative Order (AO-41) and have retained all required approvals for restrictive uses and quote log for purchases with a value in excess of $1000 and an expected life of more than one -Year such as automobiles and furniture; and computer equipment valued in excess of $750.

2/17/2020

Signature of Cardholder / Date

Signature of Approving Official / Date

SUMMARY OF FUND / COST CENTERS /G.L. ACCOUNT TO BILL

FUND	COST CTR	GL ACCT	INT. ORDER	Amount
0001	200090	5410100		$110.62

(must agree to above figure) **TOTAL** $110.62

Bank of America

DANIELLE L STERN
FL BREVARD COUNTY BOC
XXXX-XXXX-XXXX-4809
January 05, 2020 - February 04, 2020

Purchasing Card

Cardholder Activity

Account Information

Mail Billing Inquiries to:
BANKCARD CENTER
PO BOX 982238
EL PASO, TX 79998-2238

Customer Service:
1.888.449.2273 24 Hours

TTY Hearing Impaired:
1.800.222.7365 24 Hours

Outside the U.S.:
1.509.353.6656 24 Hours

For Lost or Stolen Card:
1.888.449.2273 24 Hours

Payment Information

Statement Date	02/04/20
Credit Limit	$2,000
Cash Limit	$0
Days in Billing Cycle	31
Total Activity	$110.62

THIS IS NOT A BILL - DO NOT PAY

Account Summary

Credits	$0.00
Cash	$0.00
Purchases	$110.62
Other Debits	$0.00
Cash Fees	$0.00
Other Fees	$0.00
Total Activity	$110.62

Accounting Code: 0001/200050

Transactions

Posting Date	*Transaction Date*	*Description*	*Reference Number*	*MCC*	*Charge*	*Credit*
01/08	01/07	VERIZONWRLSS*RTCCR VB 800-922-0204 FL	24692160007100685934743	4814	110.62	

0000000 0000000 0000000 4715290017764809

Account Number: XXXX-XXXX-XXXX-4809
January 05, 2020 - February 04, 2020

BANK OF AMERICA
PO BOX 15731
WILMINGTON, DE 19886-5731

Total Activity **$110.62**

Cardholder Signature Date 2/17/2020

Manager Signature Date

DANIELLE L STERN **N0001016
FL BREVARD COUNTY BOC
DISTRICT 5 COMMISSION OFFICE
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

⑆549990011⑆00050017764809⑈

862

verizon

PO BOX 489
NEWARK, NJ 07101-0489

Manage Your Account	Account Number	Date Due
www.vzw.com/mybusinessaccount	742120929-00001	01/15/20

Change your address at
http://sso.verizonenterprise.com

Invoice Number	9844921327

COUNTY OF BREVARD
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

00046696
M112

Quick Bill Summary

Nov 24 – Dec 23

Previous Balance *(see back for details)*	$110.62
Payment – Thank You	–$110.62
Balance Forward	**$.00**
Monthly Charges	$107.18
Usage and Purchase Charges	
Voice	$.00
Messaging	$.00
Data	$.00
Surcharges and Other Charges & Credits	$3.44
Taxes, Governmental Surcharges & Fees	$.00
Total Current Charges	**$110.62**

Total Charges Due by January 15, 2020 **$110.62**

Pay from phone	Pay on the Web	Questions:
#PMT (#768)	At vzw.com/mybusinessaccount	1.800.922.0204 or *611 from your phone

verizon

Bill Date	December 23, 2019
Account Number	742120929-00001
Invoice Number	9844921327

COUNTY OF BREVARD
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

Total Amount Due by January 15, 2020

Make check payable to Verizon Wireless.
Please return this remit slip with payment.

$110.62

$ ☐☐☐.☐☐

Paid 1/6/20
JR

PO BOX 660108
DALLAS, TX 75266-0108

98449213270107421209290000100000011062000000110623

Notifications DANIELLE STERN

verizon Manage Account (https://b2b.verizonwireless.com/sms/amsecure/landing/overview.go#/overview) Support

Location: Choose Location (https://b2b.verizonwireless.com/b2b/commerce/amsecure/chooseZip.go?purchasePath=&isChangeZip=true&isCommerce=true)

Cart Empty
Search

Back to billing

Make a payment

Thank you for your payment!

Transaction Id 888700832

Print

Payment details

Billing Account	Payment amount	Payment method	Payment date
742120929-00001	$110.62	Danielle	Jan 6, 2020

Want to do more?

Continue working with this account

742120929-00001

Or

Work on another account

Enter account number

Continue

Manage another payment

Set up Auto Pay

View payment history **(/sms/amsecure/payment/activity/show.go)**

EHIBIT "B"
BREVARD COUNTY PURCHASING CARD MONTHLY RECONCILIATION REPORT

PAGE ___ of ___

Cardholder's Name: Danielle Stern **Cardholder Phone Ext:** 321-253-6611 **Personnel #:** 11006140

Cardholder's Department: D5 Commissioner **Closing Date:** March 4, 2020
(enter closing date of statement)

Date Purchased or Ordered	Date Received	Vendor Name	Description of Item Purchased	Amount Billed (indicate "Q"for quoted items)	Fund (4 digits)	Cost Center (6 digits)	GL Account # (7 digits)	Internal / Work Order # (6 or 7 digits)
2/18	2/19	Culligan Water	Water Delivery	$14.97	0001	200050	5529000	
2/07	2/10	Verizon	Cell service	$110.20	0001	200090	5410100	

ADD'L PAGES SUBTOTAL ________ (must agree to figure below)

GRAND TOTAL (ALL PAGES) ________

SUMMARY OF FUND / COST CENTERS /G.L. ACCOUNT TO BILL

FUND	COST CTR	GL ACCT	INT. ORDER	Amount
0001	200050	5529000		$14.97
0001	200090	5410100		110.20
(must agree to above figure)			**TOTAL**	$125.17

I (Cardholder) have complied with the Purchase Card Administrative Order (AO-41) and have retained all required approvals for restrictive uses and quote log for purchases with a value in excess of $1000 and an expected life of more than one -Year such as automobiles and furniture; and computer equipment valued in excess of $750

3/09/2020
Signature of Cardholder / Date

3/9/20
Signature of Approving Official / Date

Bank of America

DANIELLE L STERN
FL BREVARD COUNTY BOC
XXXX-XXXX-XXXX-4809
February 05, 2020 - March 04, 2020

Purchasing Card

Cardholder Activity

Account Information

Mail Billing Inquiries to:
BANKCARD CENTER
PO BOX 982238
EL PASO, TX 79998-2238

Customer Service:
1.888.449.2273 24 Hours

TTY Hearing Impaired:
1.800.222.7365 24 Hours

Outside the U.S.:
1.509.353.6656 24 Hours

For Lost or Stolen Card:
1.888.449.2273 24 Hours

Payment Information

Statement Date	03/04/20
Credit Limit	$2,000
Cash Limit	$0
Days in Billing Cycle	29
Total Activity	$125.17

THIS IS NOT A BILL - DO NOT PAY

Account Summary

Credits	$0.00
Cash	$0.00
Purchases	$125.17
Other Debits	$0.00
Cash Fees	$0.00
Other Fees	$0.00
Total Activity	$125.17

Accounting Code: 0001/200050

Transactions

Posting Date	Transaction Date	Description	Reference Number	MCC	Charge	Credit
02/10	02/07	VERIZONWRLSS*RTCCR VB 800-922-0204 FL	24692160038100335025705	4814	110.20	
02/19	02/18	4TE*CULLIGAN OF MELBOURNE352-732-3553 FL	24445000049200126826298	5074	14.97	

0000000 0000000 0000000 4715290017764809

Account Number: XXXX-XXXX-XXXX-4809
February 05, 2020 - March 04, 2020

BANK OF AMERICA
PO BOX 15731
WILMINGTON, DE 19886-5731

DANIELLE L STERN **N0001448
FL BREVARD COUNTY BOC
DISTRICT 5 COMMISSION OFFICE
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

Total Activity $125.17

Cardholder Signature Date 3/9/2020

Manager Signature Date 3/9/20

⑆549990011⑆000500177648090⑈

998

Culligan of Melbourne

771 NORTH DRIVE
MELBOURNE, FL 32934
(321) 255-5562 (321) 636-1344
www.culligancentralflorida.com

IF PAYING BY CREDIT CARD, PLEASE CHECK CORRECT CARD AND FILL OUT BELOW

VISA ☐ ☐ ☐ PLEASE CHECK BOX TO ENROLL IN AUTOMATIC BILL PAYMENT

CARD NUMBER	V. CODE
SIGNATURE	EXP. DATE

DATE	PAY THIS AMOUNT	ACCOUNT NUMBER
01/31/2020	$14.97	268847

PAY BY DATE: FEB 15

AMOUNT PAID $

ADDRESSEE:

001756
DISTRICT 5 COMMISSIONER
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

REMIT PAYMENT TO:

15
771 NORTH DR
MELBOURNE, FL 32934-9282

BALANCE FORWARD

RETURN THIS TOP PORTION WITH YOUR PAYMENT

BRANCH ID: ME-01
CUSTOMER: DISTRICT 5 COMMISSIONER

PREVIOUS BALANCE: **$4.99**

DATE	QUANTITY	DESCRIPTION	REF	AMOUNT	BALANCE
01/15/2020	3.00	1/2 LITER CULLIGAN CASE	800695296	14.97	19.96
01/15/2020	1.00	SERVICE CHARGE	800695296	0.00	19.96
01/22/2020	-1.00	PAYMENT CHECKS/CASH	1084612	-4.99	14.97

Paid 2/11/2020 DS

Pay on line at www.culligancentralflorida.com Please call our office at 321-255-5562 if you need any assistance.

Balance Due **$14.97**

ACCOUNTS ARE SUBJECT TO A LATE PAYMENT FINANCE CHARGE

FINANCE CHARGE SCHEDULE

		PERIODIC RATE	ANNUAL RATE	PLEASE PAY NEW BALANCE BEFORE
OVER $	3	1.50%	18.00 %	FEB 15
TO	3	0.00%	0.00 %	MIN CHARGE 0.50

0-30	31-60	61-90	Over 90
14.97	0.00	0.00	0.00

15
771 NORTH DRIVE
MELBOURNE, FL 32934

(321) 255-5562 (321) 636-1344

SERVICE ADDRESS:
DISTRICT 5 COMMISSIONER
STE 175
490 CENTRE LAKE DRIVE NE
PALM BAY FL 32907

Next Deliveries: 02/12/20 03/11/20 04/08/20 05/06/20

WE APPRECIATE YOUR BUSINESS!
YOU ARE OUR BUSINESS!!!
PAY YOUR BILLS ON LINE GO PAPERLESS.

STATEMENT DATE	ACCOUNT NUMBER	NAME
01/31/2020	268847	DISTRICT 5 COMMISSIONER

268847

867

Online Bill Pay For
Culligan of Melbourne

Account Selection   Account Detail   Log Out

Thank You For Your Payment.

Payments usually post within two business days.
Please Print This Page For Your Records.

Transaction Details	
Date	2/17/2020 7:45:35 AM
Visa Card	...4809
Total Amount	$14.97
Applied To Account	268847
Result	APPROVED
Authorization Code	014370

898

Print Close

Print Date : 2/6/2020

Thank you for your payment!

Transaction Id 910285166

Billing Account	Payment amount	Payment method	Payment date
742120929-00001	$110.20	VISA	Thu Feb 06 2020 11:26:53 GMT-0500 (Eastern Standard Time)

698 **verizon**

PO BOX 489
NEWARK, NJ 07101-0489

Manage Your Account	Account Number	Date Due
www.vzw.com/mybusinessaccount	742120929-00001	02/15/20

Change your address at
http://sso.verizonenterprise.com

Invoice Number	9846992599

Quick Bill Summary

Dec 24 – Jan 23

COUNTY OF BREVARD
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

00044561
M101

Previous Balance *(see back for details)*	$110.62
Payment – Thank You	–$110.62
Balance Forward	**$.00**
Monthly Charges	$107.18
Usage and Purchase Charges	
Voice	$.00
Messaging	$.00
Data	$.00
Surcharges and Other Charges & Credits	$3.02
Taxes, Governmental Surcharges & Fees	$.00
Total Current Charges	**$110.20**

Total Charges Due by February 15, 2020 **$110.20**

Pay from phone	Pay on the Web	Questions:
#PMT (#768)	At vzw.com/mybusinessaccount	1.800.922.0204 or *611 from your phone

verizon

Bill Date	January 23, 2020
Account Number	742120929-00001
Invoice Number	9846992599

COUNTY OF BREVARD
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

Total Amount Due by February 15, 2020

Make check payable to Verizon Wireless.
Please return this remit slip with payment.

$110.20

$ ☐☐☐.☐☐

PO BOX 660108
DALLAS, TX 75266-0108

PD 2/6/20

98469925990107421209290000100000011020000000110203

PAGE ___ of ___

EHIBIT "B"
BREVARD COUNTY PURCHASING CARD MONTHLY RECONCILIATION REPORT

Cardholder's Name: Danielle Stern **Cardholder Phone Ext:** 321-253-6611 **Personnel #:** 11006140

Cardholder's Department: D5 Commissioner **Closing Date:** April ~~March~~ 4, 2020
(enter closing date of statement)

Date Purchased or Ordered	Date Received	Vendor Name	Description of Item Purchased	Amount Billed (indicate "Q" for quoted items)	Fund (4 digits)	Cost Center (6 digits)	GL Account # (7 digits)	Internal / Work Order # (6 or 7 digits)
3/07	3/09	Verizon	Cell Service	$110.20	0001	200090	5410100	

ADD'L PAGES SUBTOTAL ______

GRAND TOTAL (ALL PAGES) ______ (must agree to figure below)

I (Cardholder) have complied with the Purchase Card Administrative Order (AO-41) and have retained all required approvals for restrictive uses and quote log for purchases with a value in excess of $1000 and an expected life of more than one -Year such as automobiles and furniture; and computer equipment valued in excess of $750

SUMMARY OF FUND / COST CENTERS /G.L. ACCOUNT TO BILL

FUND	COST CTR	GL ACCT	INT. ORDER	Amount
0001	200090	5410100		$110.20
			TOTAL	$110.20

(must agree to above figure)

4/14/2020
Signature of Cardholder / Date

4/14/20
Signature of Approving Official / Date

Bank of America

DANIELLE L STERN
FL BREVARD COUNTY BOC
XXXX-XXXX-XXXX-4809
March 05, 2020 - April 04, 2020

Purchasing Card

Cardholder Activity

Account Information

Mail Billing Inquiries to:
BANKCARD CENTER
PO BOX 982238
EL PASO, TX 79998-2238

Customer Service:
1.888.449.2273 24 Hours

TTY Hearing Impaired:
1.800.222.7365 24 Hours

Outside the U.S.:
1.509.353.6656 24 Hours

For Lost or Stolen Card:
1.888.449.2273 24 Hours

Payment Information

Statement Date	04/04/20
Credit Limit	$2,000
Cash Limit	$0
Days in Billing Cycle	31
Total Activity	$110.20

THIS IS NOT A BILL - DO NOT PAY

Account Summary

Credits	$0.00
Cash	$0.00
Purchases	$110.20
Other Debits	$0.00
Cash Fees	$0.00
Other Fees	$0.00
Total Activity	$110.20

Accounting Code: 0001/200050

Transactions

Posting Date	*Transaction Date*	*Description*	*Reference Number*	*MCC*	*Charge*	*Credit*
03/09	03/07	VERIZONWRLSS*RTCCR VB 800-922-0204 FL	24692160067100603498331	4814	110.20	

0000000 0000000 0000000 4715290017764809

Account Number: XXXX-XXXX-XXXX-4809
March 05, 2020 - April 04, 2020

Total Activity **$110.20**

Cardholder Signature 4/14/2020 Date

Manager Signature 4/14/20 Date

BANK OF AMERICA
PO BOX 15731
WILMINGTON, DE 19886-5731

DANIELLE L STERN
FL BREVARD COUNTY BOC
DISTRICT 5 COMMISSION OFFICE
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

**N0001052

:5499900 11:000500 17764809"

verizon

PO BOX 489
NEWARK, NJ 07101-0489

Manage Your Account	Account Number	Date Due
www.vzw.com/mybusinessaccount	742120929-00001	03/15/20

Change your address at
http://sso.verizonenterprise.com

Invoice Number	9849064235

COUNTY OF BREVARD
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

00043450
M102

Quick Bill Summary

Jan 24 – Feb 23

Previous Balance *(see back for details)*	$110.20
Payment – Thank You	-$110.20
Balance Forward	**$.00**
Monthly Charges	$107.18
Usage and Purchase Charges	
Voice	$.00
Messaging	$.00
Data	$.00
Surcharges and Other Charges & Credits	$3.02
Taxes, Governmental Surcharges & Fees	$.00
Total Current Charges	**$110.20**

Total Charges Due by March 15, 2020 **$110.20**

Pay from phone	Pay on the Web	Questions:
#PMT (#768)	At vzw.com/mybusinessaccount	1.800.922.0204 or *611 from your phone

verizon

Bill Date	February 23, 2020
Account Number	742120929-00001
Invoice Number	9849064235

COUNTY OF BREVARD
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

Total Amount Due by March 15, 2020

Make check payable to Verizon Wireless.
Please return this remit slip with payment.

$110.20

$ 110.20

PD 3/10/20

PO BOX 660108
DALLAS, TX 75266-0108

98490642350107421209290000100000011020000000110203

872

verizon

Invoice Number	Account Number	Date Due	Page
9849064235	742120929-00001	03/15/20	3 of 6

Overview of Lines

Lines Charges	Page Number	Monthly Charges	Usage and Purchase Charges	Equipment Charges	Surcharges and Other Charges and Credits	Taxes, Governmental Surcharges and Fees	Third-Party Charges (includes Tax)	Total Charges	Voice Plan Usage	Messaging Usage	Data Usage	Voice Roaming	Messaging Roaming	Data Roaming
321-522-8361 Vic Luebker	4	$56.18	—	—	$1.51	$.00	—	$57.69	91	997	13,702.118MB	—	—	—
321-626-7815 Commissioner Kristin Isnardi	5	$51.00	—	—	$1.51	$.00	—	$52.51	—	—	453.465MB	—	—	—
Total Current Charges		$107.18	$.00	$.00	$3.02	$.00	$.00	$110.20						

verizon

Invoice Number	Account Number	Date Due	Page
9849064235	742120929-00001	03/15/20	4 of 6

Summary for Vic Luebker: 321-522-8361

Your Plan

Nationwide Unlimited
$51.00 monthly charge
Unlimited monthly minutes

Email & Data EVDO Unlimited
Unlimited monthly megabyte

M2M National Unlimited
Unlimited monthly Mobile to Mobile

UNL Night & Weekend Min
Unlimited monthly OFFPEAK

UNL Picture/Video MSG
Unlimited monthly Picture & Video

UNL Text Messaging
Unlimited monthly M2M Text
Unlimited monthly Text Message

Have more questions about your charges?
Get details for usage charges at
www.vzw.com/mybusinessaccount.

Monthly Charges

Nationwide Unlimited	02/24 – 03/23	51.00
Wireless Phone Protection – **Asurion**	02/24 – 03/23	5.18
		$56.18

Usage and Purchase Charges

Voice		Allowance	Used	Billable	Cost
Calling Plan	*minutes*	unlimited	91	--	--
Mobile to Mobile	*minutes*	unlimited	52	--	--
Night/Weekend	*minutes*	unlimited	3	--	--
Total Voice					$.00

Messaging		Allowance	Used	Billable	Cost
Text	*messages*	unlimited	763	--	--
Unlimited M2M Text	*messages*	unlimited	172	--	--
Picture & Video – Sent	*messages*	unlimited	41	--	--
Picture & Video – Rcv'd	*messages*	unlimited	21	--	--
Total Messaging					$.00

Data		Allowance	Used	Billable	Cost
Megabyte Usage	*megabytes*	unlimited	13,702.118	--	--
Total Data					$.00

Total Usage and Purchase Charges	**$.00**

Surcharges

Fed Universal Service Charge	1.36
Regulatory Charge	.15
	$1.51

Total Current Charges for 321-522-8361	**$57.69**

verizon✓

Invoice Number	Account Number	Date Due	Page
9849064235	742120929-00001	03/15/20	5 of 6

Summary for Commissioner Kristin Isnardi: 321-626-7815

Your Plan

Nationwide Unlimited
$51.00 monthly charge
Unlimited monthly minutes

Email & Data EVDO Unlimited
Unlimited monthly megabyte

M2M National Unlimited
Unlimited monthly Mobile to Mobile

UNL Night & Weekend Min
Unlimited monthly OFFPEAK

UNL Picture/Video MSG
Unlimited monthly Picture & Video

UNL Text Messaging
Unlimited monthly M2M Text
Unlimited monthly Text Message

Have more questions about your charges?
Get details for usage charges at
www.vzw.com/mybusinessaccount.

Monthly Charges

Nationwide Unlimited	02/24 – 03/23	51.00
		$51.00

Usage and Purchase Charges

Voice		Allowance	Used	Billable	Cost
Night/Weekend	*minutes*	unlimited	8	--	--
Total Voice					$.00

Data		Allowance	Used	Billable	Cost
Megabyte Usage	*megabytes*	unlimited	453.465	--	--
Total Data					$.00
Total Usage and Purchase Charges					**$.00**

Surcharges

Fed Universal Service Charge	1.36
Regulatory Charge	.15
	$1.51

Total Current Charges for 321-626-7815 **$52.51**

Need-to-Know Information

Explanation of Surcharges
Surcharges include (i) a Regulatory Charge (which helps defray various government charges we pay including government number administration and license fees); (ii) a Federal Universal Service Charge (and, if applicable, a State Universal Service Charge) to recover charges imposed on us by the government to support universal service; and (iii) an Administrative Charge, which helps defray certain expenses we incur, including: charges we, or our agents, pay local telephone companies for delivering calls from our customers to their customers; fees and assessments on our network facilities and services; property taxes; and the costs we incur responding to regulatory obligations. **Please note that these are Verizon Wireless charges, not taxes. These charges, and what's included, are subject to change from time to time.**

Bankruptcy Information
If you are or were in bankruptcy, this bill may include amounts for pre-bankruptcy charges. You should not pay pre-bankruptcy amounts; they are for your information only. In the event Verizon receives notice of a bankruptcy filing, pre-bankruptcy charges will be adjusted in future invoices. Mail bankruptcy-related correspondence to 500 Technology Drive, Suite 550, Weldon Spring, MO 63304.

Late Payment Information
A late payment applies for unpaid balances. The charge is the greater of $5 or 1.5% per month, or as permitted by law. Failure to pay bills on time may result in negative credit reporting.

Print Close

Print Date : 3/6/2020

Thank you for your payment!

Transaction Id 926219041

Billing Account	Payment amount	Payment method	Payment date
742120929-00001	$110.20	VISA	Fri Mar 06 2020 11:11:08 GMT-0500 (Eastern Standard Time)

EHIBIT "B"
BREVARD COUNTY PURCHASING CARD MONTHLY RECONCILIATION REPORT

PAGE ___ of ___

Cardholder's Name: Danielle Stern **Cardholder Phone Ext:** 321-253-6611 **Personnel #:** 11006140

Cardholder's Department: D5 Commissioner **Closing Date:** May 4, 2020

(enter closing date of statement)

Date Purchased or Ordered	Date Received	Vendor Name	Description of Item Purchased	Amount Billed (indicate "Q"for quoted items)	Fund (4 digits)	Cost Center (6 digits)	GL Account # (7 digits)	Internal / Work Order # (6 or 7 digits)
4/08	4/09	Verizon	Cell Service	$110.20	0001	200090	5410100	
4/29	4/30	Verizon	Cell Service	$110.00	0001	200090	5410100	

ADD'L PAGES SUBTOTAL ________

GRAND TOTAL (ALL PAGES) ________ (must agree to figure below)

SUMMARY OF FUND / COST CENTERS /G.L. ACCOUNT TO BILL

FUND	COST CTR	GL ACCT	INT. ORDER	Amount
0001	200090	5410100		$110.20
0001	200090	5410100		$110.00
(must agree to above figure)			**TOTAL**	$220.20

I (Cardholder) have complied with the Purchase Card Administrative Order (AO-41) and have retained all required approvals for restrictive uses and quote log for purchases with a value in excess of $1000 and an expected life of more than one -Year such as automobiles and furniture; and computer equipment valued in excess of $750.

5/11/2020

Signature of Cardholder / Date

Signature of Approving Official / Date

Bank of America

Purchasing Card

DANIELLE L STERN
FL BREVARD COUNTY BOC
XXXX-XXXX-XXXX-4809
April 05, 2020 - May 04, 2020

Cardholder Activity

Account Information

Mail Billing Inquiries to:
BANKCARD CENTER
PO BOX 982238
EL PASO, TX 79998-2238

Customer Service:
1.888.449.2273 24 Hours

TTY Hearing Impaired:
1.800.222.7365 24 Hours

Outside the U.S.:
1.509.353.6656 24 Hours

For Lost or Stolen Card:
1.888.449.2273 24 Hours

Payment Information

Statement Date	05/04/20
Credit Limit	$2,000
Cash Limit	$0
Days in Billing Cycle	30
Total Activity	$220.20

THIS IS NOT A BILL - DO NOT PAY

Account Summary

Credits	$0.00
Cash	$0.00
Purchases	$220.20
Other Debits	$0.00
Cash Fees	$0.00
Other Fees	$0.00
Total Activity	$220.20

Accounting Code: 0001/200050

Transactions

Posting Date	Transaction Date	Description		Reference Number	MCC	Charge	Credit
04/09	04/08	VERIZONWRLSS*RTCCR VB	800-922-0204 FL	24692160099100402739960	4814	110.20	
04/30	04/29	VERIZONWRLSS*RTCCR VB	800-922-0204 FL	24692160120100594272989	4814	110.00	

0000000 0000000 0000000 4715290017764809

Account Number: XXXX-XXXX-XXXX-4809
April 05, 2020 - May 04, 2020

BANK OF AMERICA
PO BOX 15731
WILMINGTON, DE 19886-5731

DANIELLE L STERN
FL BREVARD COUNTY BOC
DISTRICT 5 COMMISSION OFFICE
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

**N0001330

Total Activity **$220.20**

Cardholder Signature — Date 5/11/2020

Manager Signature — Date 5/11/20

:5499900 11:000500 17764809"

Stern, Danielle

From:	Verizon <VZWMail@ecrmemail.verizonwireless.com>
Sent:	Tuesday, April 07, 2020 12:10 PM
To:	Stern, Danielle
Subject:	Your payment has been processed.

[EXTERNAL EMAIL] DO NOT CLICK links or attachments unless you recognize the sender and know the content is safe.

Hi, DANIELLE

Thank you for your payment.

Your payment details are as follows:

Payment details

Account number ending in:	0929-00001
Payment Date:	04.07.2020
Payment amount:	$110.20
Payment method:	Credit Card ending in 4809

Sign in at any time to view account details and transactions.

Thanks for choosing Verizon.

Download My Verizon for Business app

Explore My Business training

880

verizon

PO BOX 489
NEWARK, NJ 07101-0489

Manage Your Account	Account Number	Date Due
www.vzw.com/mybusinessaccount	742120929-00001	04/15/20

Change your address at
http://sso.verizonenterprise.com

Invoice Number	9851163170

COUNTY OF BREVARD
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

00042788
M1 03

Quick Bill Summary

Feb 24 – Mar 23

Previous Balance *(see back for details)*	$110.20
Payment – Thank You	–$110.20
Balance Forward	**$.00**
Monthly Charges	$107.18
Usage and Purchase Charges	
Voice	$.00
Messaging	$.00
Data	$.00
Surcharges and Other Charges & Credits	$3.02
Taxes, Governmental Surcharges & Fees	$.00
Total Current Charges	**$110.20**

Total Charges Due by April 15, 2020 **$110.20**

Pay from phone	Pay on the Web	Questions:
#PMT (#768)	At vzw.com/mybusinessaccount	1.800.922.0204 or *611 from your phone

verizon

Bill Date	March 23, 2020
Account Number	742120929-00001
Invoice Number	9851163170

COUNTY OF BREVARD
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

Total Amount Due by April 15, 2020

Make check payable to Verizon Wireless.
Please return this remit slip with payment.

$110.20

$ 110.20

PO BOX 660108
DALLAS, TX 75266-0108

PD 4/7/20

985116317001074212092900001000000110200000000110203

Stern, Danielle

From:	Verizon <VZWMail@ecrmemail.verizonwireless.com>
Sent:	Tuesday, April 28, 2020 1:49 PM
To:	Stern, Danielle
Subject:	Your payment has been processed.

[EXTERNAL EMAIL] DO NOT CLICK links or attachments unless you recognize the sender and know the content is safe.

Hi, DANIELLE

Thank you for your payment.

Your payment details are as follows:

Payment details

Account number ending in:	0929-00001
Payment Date:	04.28.2020
Payment amount:	$110.00
Payment method:	Credit Card ending in 4809

Sign in at any time to view account details and transactions.

Thanks for choosing Verizon.

Download My Verizon for Business app **Explore My Business training**

verizon✓

PO BOX 489
NEWARK, NJ 07101-0489

Manage Your Account	Account Number	Date Due
www.vzw.com/mybusinessaccount	742120929-00001	05/15/20

Change your address at
http://sso.verizonenterprise.com

Invoice Number	9853231610

Quick Bill Summary

Mar 24 – Apr 23

COUNTY OF BREVARD
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

00041764
M104

Previous Balance *(see back for details)*	$110.20
Payment – Thank You	–$110.20
Balance Forward	**$.00**
Monthly Charges	$107.18
Usage and Purchase Charges	
Voice	$.00
Messaging	$.00
Data	$.00
Surcharges and Other Charges & Credits	$2.82
Taxes, Governmental Surcharges & Fees	$.00
Total Current Charges	**$110.00**

Total Charges Due by May 15, 2020 **$110.00**

Pay from phone	Pay on the Web	Questions:
#PMT (#768)	At vzw.com/mybusinessaccount	1.800.922.0204 or *611 from your phone

verizon✓

Bill Date	April 23, 2020
Account Number	742120929-00001
Invoice Number	9853231610

COUNTY OF BREVARD
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

Total Amount Due by May 15, 2020

Make check payable to Verizon Wireless.
Please return this remit slip with payment.

$110.00

$ 110.00

Paid 4/28/20

PO BOX 660108
DALLAS, TX 75266-0108

985323161001074212092900001000000011000000000110003

EHIBIT "B"
BREVARD COUNTY PURCHASING CARD MONTHLY RECONCILIATION REPORT

Cardholder's Name: Danielle Stern **Cardholder Phone Ext:** 321-253-6611 **Personnel #:** 11006140

Cardholder's Department: D5 Commissioner **Closing Date:** June 4th, 2020

(enter closing date of statement)

Date Purchased or Ordered	Date Received	Vendor Name	Description of Item Purchased	Amount Billed (indicate "Q" for quoted items)	Fund (4 digits)	Cost Center (6 digits)	GL Account # (7 digits)	Internal / Work Order # (6 or 7 digits)
05/11	05/13	Office Depot	Office supplies for letters sent to graduates in our district	$108.96	0001	200050	5510000	
05/12	05/13	USPS Post Office	Stamps	$110.00	001	200050	5420200	
05/12	05/13	USPS Post Office	Stamps	$715.00	0001	200050	5420200	
05/27	05/29	Office Depot	Office supplies for letters sent to graduates in our district	$88.78	0001	200050	5510000	
05/28	06/01	Office Depot	Office supplies for letters sent to graduates in our district	$59.02	0001	200050	5510000	

ADD'L PAGES SUBTOTAL ______

(must agree to figure below)

GRAND TOTAL (ALL PAGES) $1081.76

SUMMARY OF FUND / COST CENTERS /G.L. ACCOUNT TO BILL

FUND	COST CTR	GL ACCT	INT. ORDER	Amount
0001	200050	5510000		$108.96
0001	200050	5420200		$110.00
0001	200050	5420200		$715.00
0001	200050	5510000		$88.78
0001	200050	5510000		$59.02

(must agree to above figure) **TOTAL** $1081.76

I (Cardholder) have complied with the Purchase Card Administrative Order (AO-41) and have retained all required approvals for restrictive uses and quote log for purchases with a value in excess of $1000 and an expected life of more than one -Year such as automobiles and furniture; and computer Equipment valued in excess of $750.

6/22/20
Signature of Cardholder / Date

6/2/2
Signature of Approving Official / Date

885

Bank of America

Purchasing Card

DANIELLE L STERN
FL BREVARD COUNTY BOC
XXXX-XXXX-XXXX-4809
May 05, 2020 - June 04, 2020

Cardholder Activity

Account Information

Mail Billing Inquiries to:
BANKCARD CENTER
PO BOX 982238
EL PASO, TX 79998-2238

Customer Service:
1.888.449.2273 24 Hours

TTY Hearing Impaired:
1.800.222.7365 24 Hours

Outside the U.S.:
1.509.353.6656 24 Hours

For Lost or Stolen Card:
1.888.449.2273 24 Hours

Payment Information

Statement Date	06/04/20
Credit Limit	$2,000
Cash Limit	$0
Days in Billing Cycle	31
Total Activity	$1,081.76

THIS IS NOT A BILL - DO NOT PAY

Account Summary

Credits	$0.00
Cash	$0.00
Purchases	$1,081.76
Other Debits	$0.00
Cash Fees	$0.00
Other Fees	$0.00
Total Activity	$1,081.76

Accounting Code: 0001/200050

Transactions

Posting Date	Transaction Date	Description		Reference Number	MCC	Charge	Credit
05/13	05/11	OFFICE DEPOT #2703	PALM BAY FL	24137460133500550491543	5943	108.96	
05/13	05/12	USPS PO 1157951479	MELBOURNE FL	24137460134001005433882	9402	110.00	
05/13	05/12	USPS PO 1157951479	MELBOURNE FL	24137460134001005433700	9402	715.00	
05/29	05/27	OFFICE DEPOT #2653	INDN HBR BCH FL	24137460149500676771093	5943	88.78	
06/01	05/28	OFFICE DEPOT #2703	PALM BAY FL	24137460150500694960377	5943	59.02	

0000000 0000000 0000000 4715290017764809

Account Number: XXXX-XXXX-XXXX-4809
May 05, 2020 - June 04, 2020

BANK OF AMERICA
PO BOX 15731
WILMINGTON, DE 19886-5731

Total Activity $1,081.76

Cardholder Signature ______ Date 6/22/20

Manager Signature ______ Date 6/22/20

DANIELLE L STERN
FL BREVARD COUNTY BOC
DISTRICT 5 COMMISSION OFFICE
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

**N0000748

⑆549990011⑆000500177648O9⑈

988

Office DEPOT
OfficeMax

INDIAN HARBOUR BEACH - (321) 777-7075
05/27/2020 1:08 PM
VTVTG33PAX54E68F6

SALE		2653-4-9108-911086-20.5.2
962113 SEALS,GOLD EX,		
5 @ 7.69	38.45	
	You Pay	**38.45**S
169293 SEAL,AWRD,GD/S		
7 @ 7.19	50.33	
	You Pay	**50.33**S
	Subtotal:	88.78
	Total:	88.78
	Visa 4809:	88.78

AUTH CODE 054181
TDS Chip Read
AID A0000000031010 VISA CREDIT
TVR 0880088000
CVS No Signature Required

Tax Exemption Number 27327334
Shop online at www.officedepot.com
****
WE WANT TO HEAR FROM YOU!
Visit survey.officedepot.com
and enter the survey code below:
M5Q7 XAZD 88MW
****

Office DEPOT
OfficeMax

PALM BAY - (321) 723-7079
05/11/2020 4:32 PM
VTVT953P4U3586446

SALE		2703-1-279-972316-20.4.2
633888 ENV,#10,PLN,50		
3 @ 22.59		67.77
	You Pay	**67.77**S
364364 LABEL,5160 300		41.19 S
	Subtotal:	108.96
	Total:	108.96
	Visa 4809:	108.96

AUTH CODE 025212
TDS Chip Read
AID A0000000031010 VISA CREDIT
TVR 0880088000
CVS No Signature Required

Tax Exemption Number 27327334
Shop online at www.officedepot.com
****
WE WANT TO HEAR FROM YOU!
Visit survey.officedepot.com
and enter the survey code below:
15Q3 8C35 EF7J
****

Thu May 28 03:45:24 EDT 2020

Office DEPOT
OfficeMax

PALM BAY - (321) 723-7079
05/28/2020 9:03 AM
VTVT953P6U5Y86C86

SALE		2703-2-6289-762083-20.5.2
169293 SEAL,AWRD,GD/S		
5 @ 7.19	35.95	
	You Pay	**35.95**S
962113 SEALS,GOLD EX,		
3 @ 7.69	23.07	
	You Pay	**23.07**S
	Subtotal:	59.02
	Total:	59.02
	Visa 4809:	59.02

AUTH CODE 004712
TDS Chip Read
AID A0000000031010 VISA CREDIT
TVR 0880088000
CVS No Signature Required

Tax Exemption Number 27327334
Shop online at www.officedepot.com
****
WE WANT TO HEAR FROM YOU!
Visit survey.officedepot.com
and enter the survey code below:
15Q8 6PFT 73HE
****

887

WEST MELBOURNE
2305 MINTON RD
MELBOURNE, FL 32904-9998
115795-1479
(800)275-8777
05/12/2020 01:29 PM

Product	Qty	Unit Price	Price
US Flag Coil/100	13	$55.00	$715.00
Total:			$715.00

Credit Card Remitd $715.00
(Card Name:VISA)
(Account #:XXXXXXXXXXXX4809)
(Approval #:036670)
(Transaction #:156)
(AID:A0000000031010 Chip)
(AL:VISA CREDIT)
(PIN:Not Required)

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https://postalexperience.com/Pos

840-5327-0302-005-00058-34574-02

or scan this code with
your mobile device:

or call 1-800-410-7420.

YOUR OPINION COUNTS

Receipt #: 840-53270302-5-5834574-2
Clerk: 14

WEST MELBOURNE
2305 MINTON RD
MELBOURNE, FL 32904-9998
115795-1479
(800)275-8777
05/12/2020 01:30 PM

Product	Qty	Unit Price	Price
US Flag Coil/100	2	$55.00	$110.00
Total:			$110.00

Credit Card Remitd $110.00
(Card Name:VISA)
(Account #:XXXXXXXXXXXX4809)
(Approval #:069953)
(Transaction #:157)
(AID:A0000000031010 Chip)
(AL:VISA CREDIT)
(PIN:Not Required)

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or scan this code with
your mobile device:

or call 1-800-410-7420.

YOUR OPINION COUNTS

Receipt #: 840-53270302-5-5834600-1
Clerk: 14

Brevard COUNTY

BOARD OF COUNTY COMMISSIONERS

KRISTINE ISNARDI, COMMISSIONER, DISTRICT 5
490 Centre Lake Dr. NE
Suite 175
Palm Bay, FL 32907
Phone: 321.253.6611
Fax: 321.253.6620
D5.Commissioner@brevardfl.gov

Danielle Stern, Chief of Staff
Vic Luebker, Community Affairs Director
Janette Roig, Legislative Aide

May 11, 2020

Recipient Address

Dear Name of Senior,

As the mom of a graduating high school senior, I have witnessed firsthand the upsetting impacts that COVID-19 has had on the Class of 2020. I understand that it has been disappointing to end the school year without being able to celebrate your traditional senior year milestones with friends and family.

However, I have also seen a generation of young people whose accomplishments started long before the last few months. Your parents have been celebrating your successes since the day you were born and they will continue to do so long after the end of this school year. The Class of 2020 is made up of strong young adults who have persevered during one of the most challenging moments in history. You have overcome obstacles and embraced change with grace and dignity. You deserve to be rewarded for weathering the storm and I know just the way to do it!

I spoke with Les Hatter, Operating Partner at Five Guys and fellow parent of a 2020 graduate, and he has graciously teamed up with my office to help honor the Class of 2020. When you present this letter at the West Melbourne location of Five Guys (225 Palm Bay Rd. NE), you will receive one free milkshake to celebrate your graduation and start your summer off right!

CONGRATULATIONS on your graduation from West Shore Jr./Sr. High School! You have already proven that you can handle anything this world throws at you! Your future is bright and I wish you much happiness as you start this next chapter of your life.

Sincerely,

Kristine Isnardi
Brevard County Commissioner
District 5

EHIBIT "B"
BREVARD COUNTY PURCHASING CARD MONTHLY RECONCILIATION REPORT

Cardholder's Name: Danielle Stern **Cardholder Phone Ext:** 321-253-6611 **Personnel #:** 11006140

Cardholder's Department: D5 Commissioner **Closing Date:** July 4th, 2020
(enter closing date of statement)

Date Purchased or Ordered	Date Received	Vendor Name	Description of Item Purchased	Amount Billed (indicate "Q" for quoted items)	Fund (4 digits)	Cost Center (6 digits)	GL Account # (7 digits)	Internal / Work Order # (6 or 7 digits)
06/11	06/12	Verizon Wireless	Cell Service	$110.00	0001	200090	5410100	

ADD'L PAGES SUBTOTAL ______

GRAND TOTAL (ALL PAGES) $110.00

(must agree to figure below)

SUMMARY OF FUND / COST CENTERS /G.L. ACCOUNT TO BILL

FUND	COST CTR	GL ACCT	INT. ORDER	Amount
0001	200090	5410100		$110.00

(must agree to above figure)

TOTAL $110.00

I (Cardholder) have complied with the Purchase Card Administrative Order (AO-41) and have retained all required approvals for restrictive uses and quote log for purchases with a value in excess of $1000 and an expected life of more than one - Year such as automobiles and furniture; and computer equipment valued in excess of $750.

Danielle Stern 7/16/20
Signature of Cardholder / Date

7/16/20
Signature of Approving Official / Date

BCC-223 –Word Document Revised 8/18/2017

Bank of America

DANIELLE L STERN
FL BREVARD COUNTY BOC
XXXX-XXXX-XXXX-4809
June 05, 2020 - July 04, 2020

Purchasing Card

Cardholder Activity

Account Information

Mail Billing Inquiries to:
BANKCARD CENTER
PO BOX 982238
EL PASO, TX 79998-2238

Customer Service:
1.888.449.2273 24 Hours

TTY Hearing Impaired:
1.800.222.7365 24 Hours

Outside the U.S.:
1.509.353.6656 24 Hours

For Lost or Stolen Card:
1.888.449.2273 24 Hours

Payment Information

Statement Date	07/04/20
Credit Limit	$2,000
Cash Limit	$0
Days in Billing Cycle	30
Total Activity	$110.00

THIS IS NOT A BILL - DO NOT PAY

Account Summary

Credits	$0.00
Cash	$0.00
Purchases	$110.00
Other Debits	$0.00
Cash Fees	$0.00
Other Fees	$0.00
Total Activity	$110.00

Accounting Code: 0001/200050

Transactions

Posting Date	*Transaction Date*	*Description*	*Reference Number*	*MCC*	*Charge*	*Credit*
06/12	06/11	VERIZONWRLSS*RTCCR VB 800-922-0204 FL	24692160163100578468262	4814	110.00	

0000000 0000000 0000000 4715290017764809

Account Number: XXXX-XXXX-XXXX-4809
June 05, 2020 - July 04, 2020

BANK OF AMERICA
PO BOX 15731
WILMINGTON, DE 19886-5731

Total Activity **$110.00**

Cardholder Signature 7/16/20 Date

DANIELLE L STERN
FL BREVARD COUNTY BOC
DISTRICT 5 COMMISSION OFFICE
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

**N0002943

Manager Signature 7/16/20 Date

⑆549990011⑆00050017764809⑈

PAGE ___ of ___

EHIBIT "B"
BREVARD COUNTY PURCHASING CARD MONTHLY RECONCILIATION REPORT

Cardholder's Name: Danielle Stern **Cardholder Phone Ext:** 321-253-6611 **Personnel #:** 11006140

Cardholder's Department: D5 Commissioner **Closing Date:** August 4th, 2020
(enter closing date of statement)

Date Purchased or Ordered	Date Received	Vendor Name	Description of Item Purchased	Amount Billed (indicate "Q" for quoted items)	Fund (4 digits)	Cost Center (6 digits)	GL Account # (7 digits)	Internal / Work Order # (6 or 7 digits)
07/07	07/08	Office Depot	Office supplies for letters sent to graduates in our district	$59.84	0001	200050	5510000	
07/21	07/22	USPS Post Office	Stamps	$165.00	001	200050	5420200	
07/07	07/08	Verizon Wireless	Cell Service	$110.00	0001	200090	5410100	
07/31	08/03	Print Depot	Name badges	$52.00	0001	200050	5490000	

ADD'L PAGES SUBTOTAL ________ (must agree to figure below)

GRAND TOTAL (ALL PAGES) $386.84

SUMMARY OF FUND / COST CENTERS /G.L. ACCOUNT TO BILL

FUND	COST CTR	GL ACCT	INT. ORDER	Amount
0001	200050	5510000		$59.84
0001	200050	5420200		$165.00
0001	200090	5410100		$110.00
0001	200050	5490000		$52.00
(must agree to above figure)			**TOTAL**	$386.84

I (Cardholder) have complied with the Purchase Card Administrative Order (AO-41) and have retained all required approvals for restrictive uses and quote log for purchases with a value in excess of $1000 and an expected life of more than one -Year such as automobiles and furniture; and computer Equipment valued in excess of $750.

Danielle Stern 8/10/2020
Signature of Cardholder / Date

8/10/20
Signature of Approving Official / Date

Bank of America

DANIELLE L STERN
FL BREVARD COUNTY BOC
XXXX-XXXX-XXXX-**4809**
July 05, 2020 - August 04, 2020

Purchasing Card

Cardholder Activity

Account Information

Mail Billing Inquiries to:
BANKCARD CENTER
PO BOX 982238
EL PASO, TX 79998-2238

Customer Service:
1.888.449.2273 24 Hours

TTY Hearing Impaired:
1.800.222.7365 24 Hours

Outside the U.S.:
1.509.353.6656 24 Hours

For Lost or Stolen Card:
1.888.449.2273 24 Hours

Payment Information

Statement Date	08/04/20
Credit Limit	$2,000
Cash Limit	$0
Days in Billing Cycle	31
Total Activity	$386.84

THIS IS NOT A BILL - DO NOT PAY

Account Summary

Credits	$0.00
Cash	$0.00
Purchases	$386.84
Other Debits	$0.00
Cash Fees	$0.00
Other Fees	$0.00
Total Activity	$386.84

Accounting Code: 0001/200050

Transactions

Posting Date	*Transaction Date*	*Description*	*Reference Number*	*MCC*	*Charge*	*Credit*
07/08	07/07	VERIZONWRLSS*RTCCR VB 800-922-0204 FL	24692160189100240669875	4814	110.00	
07/22	07/21	USPS PO 1157951479 MELBOURNE FL	24137460204001202861252	9402	165.00	
07/23	07/21	OFFICE DEPOT #2703 PALM BAY FL	24137460204500722306540	5943	59.84	
08/03	07/31	PRINT DEPOT 321-951-4354 FL	24039640213207877500027	2741	52.00	

0000000 0000000 0000000 4715290017764809

Account Number: XXXX-XXXX-XXXX- **4809**
July 05, 2020 - August 04, 2020

Total Activity **$386.84**

Danielle Stern 8/20/2020
Cardholder Signature Date

8/20/20
Manager Signature Date

BANK OF AMERICA
PO BOX 15731
WILMINGTON, DE 19886-5731

DANIELLE L STERN
FL BREVARD COUNTY BOC
DISTRICT 5 COMMISSION OFFICE
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

PRINT DEPOT

1480 Palm Bay Road N.E. • Palm Bay, Florida 32905
(321) 951-4354 • Fax: (321) 724-5307
info@print-depot.net • www.print-depot.net

INVOICE 86154

6/26/2020

BREVARD COUNTY BOARD OF
COMMISIONERS
490 CENTRE LAKE DRIVE
SUITE 175
PALM BAY FL 32907

KRISTINE ISNARDI

1	NAME BADGE - 3" X 1.5" - Kristine Isnardi - Commissioner - District 5 Team	13.00
1	NAME BADGE - 3" X 1.5" - Danielle Stern - Chief Of Staff -District 5 Team	13.00
1	NAME BADGE - 3" X 1.5" -	13.00
1	NAME BADGE - 3" X 1.5" -	13.00

X Danielle Stern

Danielle Stern

52.00

Sales Tax

Shipping

TOTAL 52.00

On next page

eceived By Kristine Isnardi

Date

PRINT DEPOT
1480 PALM BAY RD NE
PALM BAY, FL 32905
07/31/2020 10:46:43
MID: XXXXXXXXXXXX4413 TID: XXXXX877
CREDIT CARD
VISA SALE

Card # Token	XXXXXXXXXXXX4809
SEQ #:	2
Batch #:	365
INVOICE	2
Approval Code:	037451
Entry Method:	Manual
Mode:	Online
Tax Amount:	$0.00
Cust Code:	86154
Avs Code:	NYZ
Card Code:	M

SALE AMOUNT $52.00

I agree to pay above total amount according to card issuer agreement. (Merchant agreement if Credit Voucher)

X

MERCHANT COPY

$

'ard

PRINT DEPOT

1480 Palm Bay Road N.E. • Palm Bay, Florida 32905
(321) **951-4354** • Fax: (321) 724-5307
info@print-depot.net • www.print-depot.net

INVOICE 86154

6/26/2020

BREVARD COUNTY BOARD OF
COMMISIONERS
490 CENTRE LAKE DRIVE
SUITE 175
PALM BAY FL 32907

KRISTINE ISNARDI

1	NAME BADGE - 3" X 1.5" -	13.00
1	NAME BADGE - 3" X 1.5" -	13.00
1	NAME BADGE - 3" X 1.5" -	13.00
1	NAME BADGE - 3" X 1.5" -	13.00

52.00

Sales Tax

Shipping

TOTAL 52.00

Received By ______________________ Date 7/22/20

Special Instructions

Balance Paid $ ________

☐ Cash

☐ Check # ________

☐ Credit Card

Date ________

By ________

verizon

895 PO BOX 489
NEWARK, NJ 07101-0489

Manage Your Account	Account Number	Date Due
www.vzw.com/mybusinessaccount	742120929-00001	07/15/20

Change your address at
http://sso.verizonenterprise.com

Invoice Number	9857324438

COUNTY OF BREVARD 00053404
490 CENTRE LAKE DR NE STE 175 S106
PALM BAY, FL 32907-1177

Quick Bill Summary

May 24 – Jun 23

Previous Balance *(see back for details)*	$110.00
Payment – Thank You	–$110.00
Balance Forward	**$.00**
Monthly Charges	$107.18
Usage and Purchase Charges	
Voice	$.00
Messaging	$.00
Data	$.00
Surcharges and Other Charges & Credits	$2.82
Taxes, Governmental Surcharges & Fees	$.00
Total Current Charges	**$110.00**

Total Charges Due by July 15, 2020 **$110.00**

Pay from phone	Pay on the Web	Questions:
#PMT (#768)	At vzw.com/mybusinessaccount	1.800.922.0204 or *611 from your phone

verizon

COUNTY OF BREVARD
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

Bill Date	June 23, 2020
Account Number	742120929-00001
Invoice Number	9857324438

Total Amount Due by July 15, 2020

Make check payable to Verizon Wireless.
Please return this remit slip with payment.

$110.00

$ ___ . __

PO BOX 660108
DALLAS, TX 75266-0108

985732443801074212092900001000000110000000000110003

Notifications DANIELLE STERN

verizon Manage Account Support
(https://b2b.verizonwireless.com/sms/amsecure/landing/overview.go#/overview)

Location: Choose Location (https://b2b.verizonwireless.com/b2b/commerce/amsecure/chooseZip.go?purchasePath=&isChangeZip=true&isCommerce=true)

Cart Empty
Search

Back to billing

Make a payment

Thank you for your payment!

Transaction Id 1013746265

Print

Payment details

Billing Account	Payment amount	Payment method	Payment date
742120929-00001	$110.00	VISA	Jul 6, 2020

Want to do more?

Continue working with this account

742120929-00001

Or

Work on another account

Enter account number

Continue

Manage another payment

Set up Auto Pay

View payment history (/sms/amsecure/payment/activity/show.go)

Terms and Conditions (https://b2b.verizonwireless.com/sms/login/terms.go)

ACCREDITED BUSINESS
Click for Review
(https://businessportals.verizonwireless.com/support/misc/hosted/bbb_vz_review.html)

Office DEPOT
OfficeMax

PALM BAY - (321) 723-7079
07/21/2020 9:14 AM

VTVTU5YP5U5YX6446

SALE	2703-2-542-527997-20.7.2	
140504 BG,TRSH,10GL,1		13.39 S
708265 PEN,GEL,RLR,4P		
2 @ 8.29	16.58	
You Pay		**16.58**S
962113 SEALS,GOLD EX,		
2 @ 7.69	15.38	
You Pay		**15.38**S
574566 LABEL,8160,750		14.49 S
Subtotal:		59.84
Sales Tax:		0.00
Total:		59.84
Visa 4809:		59.84

AUTH CODE 077310
TDS Chip Read
AID A0000000031010 VISA CREDIT
TVR 0080088000
CVS No Signature Required

Tax Exemption Number 27327334
Shop online at www.officedepot.com
****
WE WANT TO HEAR FROM YOU!
Visit survey.officedepot.com
and enter the survey code below:
15QQ XKQY 7FYD
****

==
WEST MELBOURNE
2305 MINTON RD
MELBOURNE, FL 32904-9998
115795-1479
(800)275-8777
07/21/2020 08:45 AM
==

Product	Qty	Unit Price	Price
US Flag Coil/100	3	$55.00	$165.00
Total:			$165.00

Credit Card Remitd $165.00
Card Name:VISA
Account #:XXXXXXXXXXXX4809
Approval #:041683
Transaction #:974
AID:A0000000031010 Chip
AL:VISA CREDIT
PIN:Not Required

In a hurry? Self-service kiosks offer quick and easy check-out. Any Retail Associate can show you how.

Preview your Mail
Track your Packages
Sign up for FREE @
www.informeddelivery.com

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Refunds for guaranteed services only.
Thank you for your business.

HELP US SERVE YOU BETTER

TELL US ABOUT YOUR RECENT
POSTAL EXPERIENCE

Go to:
https://postalexperience.com/Pos

840-5327-0302-004-00057-59958-01

or scan this code with
your mobile device:

or call 1-800-410-7420.

YOUR OPINION COUNTS

Receipt #: 840-53270302-4-5759958-1
Clerk: 15

EHIBIT "B"
BREVARD COUNTY PURCHASING CARD MONTHLY RECONCILIATION REPORT

PAGE ___ of ___

Cardholder's Name: Danielle Stern **Cardholder Phone Ext:** 321-253-6611 **Personnel #:** 11006140

Cardholder's Department: D5 Commissioner **Closing Date:** September 4th, 2020
(enter closing date of statement)

Date Purchased or Ordered	Date Received	Vendor Name	Description of Item Purchased	Amount Billed (indicate "Q" for quoted items)	Fund (4 digits)	Cost Center (6 digits)	GL Account # (7 digits)	Internal / Work Order # (6 or 7 digits)
08/22	08/24	Office Depot	Office supplies for letters sent to teachers in D5	$196.83	0001	200050	5510000	
08/24	08/25	USPS Post Office	Stamps	$660.00	001	200050	5420200	
08/04	08/05	Verizon Wireless	Cell Service	$111.16	0001	200090	5410100	
09/03	09/04	Verizon Wireless	Cell Service	$108.16	0001	2000090	5410100	

ADD'L PAGES SUBTOTAL ________

GRAND TOTAL (ALL PAGES) $1076.15 (must agree to figure below)

SUMMARY OF FUND / COST CENTERS /G.L. ACCOUNT TO BILL

FUND	COST CTR	GL ACCT	INT. ORDER	Amount
0001	200050	5510000		$196.83
0001	200050	5420200		$660.00
0001	200090	5410100		$110.00
0001	200090	5410100		$108.16

(must agree to above figure) **TOTAL** $1076.15

I (Cardholder) have complied with the Purchase Card Administrative Order (AO-41) and have retained all required approvals for restrictive uses and quote log for purchases with a value in excess of $1000 and an expected life of more than one -Year such as automobiles and furniture; and computer Equipment valued in excess of $750

9/14/2020
Signature of Cardholder / Date

9/14/20
Signature of Approving Official / Date

Bank of America

DANIELLE L STERN
FL BREVARD COUNTY BOC
XXXX-XXXX-XXXX-4809
August 05, 2020 - September 04, 2020

Purchasing Card

Cardholder Activity

Account Information

Mail Billing Inquiries to:
BANKCARD CENTER
PO BOX 982238
EL PASO, TX 79998-2238

Customer Service:
1.888.449.2273 24 Hours

TTY Hearing Impaired:
1.800.222.7365 24 Hours

Outside the U.S.:
1.509.353.6656 24 Hours

For Lost or Stolen Card:
1.888.449.2273 24 Hours

Payment Information

Statement Date	09/04/20
Credit Limit	$2,000
Cash Limit	$0
Days in Billing Cycle	31
Total Activity	$1,076.15

THIS IS NOT A BILL - DO NOT PAY

Account Summary

Credits	$0.00
Cash	$0.00
Purchases	$1,076.15
Other Debits	$0.00
Cash Fees	$0.00
Other Fees	$0.00
Total Activity	$1,076.15

Accounting Code: 0001/200050

Transactions

Posting Date	*Transaction Date*	*Description*	*Reference Number*	*MCC*	*Charge*	*Credit*
08/05	08/04	VERIZONWRLSS*RTCCR VB 800-922-0204 FL	24692160217100418511749	4814	111.16	
08/24	08/22	OFFICE DEPOT #2653 INDN HBR BCH FL	24137460236100529001485	5943	196.83	
08/25	08/24	USPS PO 1157951479 MELBOURNE FL	24137460238001227322827	9402	660.00	
09/04	09/03	VERIZONWRLSS*RTCCR VB 800-922-0204 FL	24692160247100301305278	4814	108.16	

0000000 0000000 0000000 4715290017764809

Account Number: XXXX-XXXX-XXXX-4809
August 05, 2020 - September 04, 2020

Total Activity **$1,076.15**

Cardholder Signature: Danielle Stern Date: 9/14/2020

Manager Signature: Date: 9/14/20

BANK OF AMERICA
PO BOX 15731
WILMINGTON, DE 19886-5731

DANIELLE L STERN
FL BREVARD COUNTY BOC
DISTRICT 5 COMMISSION OFFICE
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

**N0003007

:549990011:0005001776480 9"

verizon

PO BOX 489
NEWARK, NJ 07101-0489

Manage Your Account	Account Number	Date Due
www.vzw.com/mybusinessaccount	742120929-00001	08/15/20

Change your address at
http://sso.verizonenterprise.com

Invoice Number	9859377821

COUNTY OF BREVARD
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

00043748
M107

Quick Bill Summary

Jun 24 – Jul 23

Previous Balance *(see back for details)*	$110.00
Payment – Thank You	–$110.00
Balance Forward	**$.00**
Monthly Charges	$107.18
Usage and Purchase Charges	
Voice	$.00
Messaging	$.00
Data	$.00
Surcharges and Other Charges & Credits	$3.98
Taxes, Governmental Surcharges & Fees	$.00
Total Current Charges	**$111.16**

Total Charges Due by August 15, 2020 **$111.16**

Pay from phone	Pay on the Web	Questions:
#PMT (#768)	At vzw.com/mybusinessaccount	1.800.922.0204 or *611 from your phone

verizon

Bill Date	July 23, 2020
Account Number	742120929-00001
Invoice Number	9859377821

COUNTY OF BREVARD
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

Total Amount Due by August 15, 2020

Make check payable to Verizon Wireless.
Please return this remit slip with payment.

$111.16

$ ☐☐☐.☐☐

Paid 8/3/20 JK

PO BOX 660108
DALLAS, TX 75266-0108

985937782101074212092900001000000111160000001111163

900

Print Close

Print Date : 8/3/2020

Thank you for your payment!

Transaction Id 1018955671

Billing Account	Payment amount	Payment method	Payment date
742120929-00001	$111.16	VISA	Mon Aug 03 2020 09:45:38 GMT-0400 (Eastern Daylight Time)

verizon

PO BOX 489
NEWARK, NJ 07101-0489

Manage Your Account	Account Number	Date Due
www.vzw.com/mybusinessaccount	742120929-00001	09/15/20

Change your address at
http://sso.verizonenterprise.com

Invoice Number	9861437004

COUNTY OF BREVARD
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

00883641
M106

Quick Bill Summary

Jul 24 – Aug 23

Previous Balance *(see back for details)*	$111.16
Payment – Thank You	-$111.16
Balance Forward	**$.00**
Monthly Charges	$107.18
Usage and Purchase Charges	
Voice	$.00
Messaging	$.00
Data	$.00
Surcharges and Other Charges & Credits	$.98
Taxes, Governmental Surcharges & Fees	$.00
Total Current Charges	**$108.16**

Total Charges Due by September 15, 2020 **$108.16**

Pay from phone	Pay on the Web	Questions:
#PMT (#768)	At vzw.com/mybusinessaccount	1.800.922.0204 or *611 from your phone

verizon

Bill Date	August 23, 2020
Account Number	742120929-00001
Invoice Number	9861437004

COUNTY OF BREVARD
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

Paid 9/2/20
JR

Total Amount Due by September 15, 2020

Make check payable to Verizon Wireless.
Please return this remit slip with payment.

$108.16

$ □□□.□□

PO BOX 660108
DALLAS, TX 75266-0108

986143700401074212092900001000000108160000000108163

902

Print Close

Print Date : 9/2/2020

Thank you for your payment!

Transaction Id 1036283392

Billing Account	Payment amount	Payment method	Payment date
742120929-00001	$108.16	VISA	Wed Sep 02 2020 11:17:50 GMT-0400 (Eastern Daylight Time)

Office DEPOT
OfficeMax

INDIAN HARBOUR BEACH - (321) 777-7075
08/22/2020 3:08 PM

VTVTG3XPQX55R6666

SALE 2653-1-1126-950808-20.7.2
633984 ENVELOPE,#10,S
3 @ 46.29 138.87
You Pay **138.87**S
574566 LABEL,8160,750
4 @ 14.49 57.96
You Pay **57.96**S
Subtotal: 196.83
Sales Tax: 0.00
Total: 196.83
Visa 4809: 196.83

AUTH CODE 057623
TDS Chip Read
AID A0000000031010 VISA CREDIT
TVR 0080088000
CVS No Signature Required

Tax Exemption Number 27327334
Shop online at www.officedepot.com
****
WE WANT TO HEAR FROM YOU!
Visit survey.officedepot.com
and enter the survey code below:
15R1 7K01 25PV
****

UNITED STATES POSTAL SERVICE.

WEST MELBOURNE
2305 MINTON RD
MELBOURNE, FL 32904-9998
(800)275-8777
08/24/2020 08:34 AM

Product	Qty	Unit Price	Price
US Flag Coil/100	12	$55.00	$660.00
Total			$660.00

Grand Total: $660.00

Credit Card Remitd $660.00
Card Name:VISA
Account #:XXXXXXXXXXXX4809
Approval #:097995
Transaction #:759
AID:A0000000031010 Chip
AL:VISA CREDIT
PIN:Not Required

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https://postalexperience.com/Pos

840-5327-0302-004-00058-87595-02

or scan this code with
your mobile device:

or call 1-800-410-7420.

YOUR OPINION COUNTS

UFN: 115795-1479
Receipt #: 840-53270302-4-5887595-2
Clerk: 15

EHIBIT "B"

PAGE __ of __

BREVARD COUNTY PURCHASING CARD MONTHLY RECONCILIATION REPORT

Cardholder's Name: Danielle Stern **Cardholder Phone Ext:** 321-253-6611 **Personnel #:** 11006140

Cardholder's Department: D5 Commissioner **Closing Date:** November 4th, 2020

(enter closing date of statement)

Date Purchased or Ordered	Date Received	Vendor Name	Description of Item Purchased	Amount Billed (indicate "Q" for quoted items)	Fund (4 digits)	Cost Center (6 digits)	GL Account # (7 digits)	Internal / Work Order # (6 or 7 digits)
10/06	10/07	Verizon Wireless	Cell Service	$108.16	0001	200090	5410100	

ADD'L PAGES SUBTOTAL ______

(must agree to figure below)

GRAND TOTAL (ALL PAGES) $108.16

SUMMARY OF FUND / COST CENTERS /G.L. ACCOUNT TO BILL

FUND	COST CTR	GL ACCT	INT. ORDER	Amount
0001	200090	5410100		$108.16

(must agree to above figure) **TOTAL** $108.16

I (Cardholder) have complied with the Purchase Card Administrative Order (AO-41) and have retained all required approvals for restrictive uses and quote log for purchases with a value in excess of $1000 and an expected life of more than one -Year such as automobiles and furniture; and computer equipment valued in excess of $750

11/10/2020

Signature of Cardholder / Date

11/10/20

Signature of Approving Official / Date

BANK OF AMERICA

DANIELLE L STERN
FL BREVARD COUNTY BOC
XXXX-XXXX-XXXX-4809
October 05, 2020 - November 04, 2020

Purchasing Card

Cardholder Activity

Account Information

Mail Billing Inquiries to:
BANKCARD CENTER
PO BOX 982238
EL PASO, TX 79998-2238

TTY Hearing Impaired:
Dial "711"

Outside the U.S.:
1.509.353.6656 24 Hours

For Lost or Stolen Card:
1.888.449.2273 24 Hours

Payment Information

Statement Date	11/04/20
Credit Limit	$2,000
Cash Limit	$0
Days in Billing Cycle	31
Total Activity	$108.16

THIS IS NOT A BILL - DO NOT PAY

Account Summary

Credits	$0.00
Cash	$0.00
Purchases	$108.16
Other Debits	$0.00
Cash Fees	$0.00
Other Fees	$0.00
Total Activity	$108.16

Accounting Code: 0001/200050

Important Messages

Global Card Access – your card information whenever, wherever and however you need it. From the dashboard, you can quickly check your credit limit, balance, available credit and recent card activity. Other features like View PIN, Change PIN, Lock card and Alerts help you keep your card secure. For added convenience, you can easily view or download your current statement and 12 months of past statements. Visit www.bofa.com/globalcardaccess to register your card and start using Global Card Access today.

Transactions

Posting Date	Transaction Date	Description	Reference Number	MCC	Charge	Credit
10/07	10/06	VERIZONWRLSS*RTCCR VB 800-922-0204 FL	24692160280100884787791	4814	108.16	

0000000 0000000 0000000 4715290017764809

Account Number: XXXX-XXXX-XXXX-4809
October 05, 2020 - November 04, 2020

BANK OF AMERICA
PO BOX 15731
WILMINGTON, DE 19886-5731

Total Activity $108.16

Cardholder Signature Date 11/10/2020

[redacted]

Manager Signature Date 11/10/20

DANIELLE L STERN
FL BREVARD COUNTY BOC
DISTRICT 5 COMMISSION OFFICE
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

⑆5499900 11⑆000500 17764809⑈

verizon

PO BOX 489
NEWARK, NJ 07101-0489

Manage Your Account	Account Number	Date Due
www.vzw.com/mybusinessaccount	742120929-00001	10/15/20

Change your address at
http://sso.verizonenterprise.com

Invoice Number	9863517660

COUNTY OF BREVARD 00049952
490 CENTRE LAKE DR NE STE 175 M109
PALM BAY, FL 32907-1177

Quick Bill Summary

Aug 24 – Sep 23

Previous Balance *(see back for details)*	$108.16
Payment – Thank You	–$108.16
Balance Forward	**$.00**
Monthly Charges	$107.18
Usage and Purchase Charges	
Voice	$.00
Messaging	$.00
Data	$.00
Surcharges and Other Charges & Credits	$.98
Taxes, Governmental Surcharges & Fees	$.00
Total Current Charges	**$108.16**

Total Charges Due by October 15, 2020 **$108.16**

Pay from phone	Pay on the Web	Questions:
#PMT (#768)	At vzw.com/mybusinessaccount	1.800.922.0204 or *611 from your phone

verizon

COUNTY OF BREVARD
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

Bill Date	September 23, 2020
Account Number	742120929-00001
Invoice Number	9863517660

Total Amount Due by October 15, 2020

Make check payable to Verizon Wireless.
Please return this remit slip with payment.

$108.16

$ ___ . __

paid 10/5/20
ofn

PO BOX 660108
DALLAS, TX 75266-0108

986351766001074212092900001000000108160000000108163

907

Notifications DANIELLE STERN

verizon Manage Account Support
(https://b2b.verizonwireless.com/sms/amsecure/landing/overview.go#/overview)

Location: Choose Location (https://b2b.verizonwireless.com/b2b/commerce/amsecure/chooseZip.go?purchasePath=&isChangeZip=true&isCommerce=true)

Cart Empty
Search

Back to billing

Make a payment

Thank you for your payment!

Transaction Id 1093735211

Print

Payment details

Billing Account	Payment amount	Payment method	Payment date
742120929-00001	$108.16	VISA	Oct 5, 2020

Want to do more?

Continue working with this account

742120929-00001

Or

Work on another account

Enter account number

Continue

Manage another payment

Set up Auto Pay

View payment history **(/sms/amsecure/payment/activity/show.go)**

Terms and Conditions (https://b2b.verizonwireless.com/sms/login/terms.go)

EHIBIT "B"

PAGE ___ of ___

BREVARD COUNTY PURCHASING CARD MONTHLY RECONCILIATION REPORT

Cardholder's Name: Danielle Stern **Cardholder Phone Ext:** 321-253-6611 **Personnel #:** 11006140

Cardholder's Department: D5 Commissioner **Closing Date:** December 4th, 2020
(enter closing date of statement)

Date Purchased or Ordered	Date Received	Vendor Name	Description of Item Purchased	Amount Billed (indicate "Q" for quoted items)	Fund (4 digits)	Cost Center (6 digits)	GL Account # (7 digits)	Internal / Work Order # (6 or 7 digits)
11/06	11/09	Verizon Wireless	Cell Service	$108.18	0001	200090	5410100	
11/18	11/23	Office Depot	Business Cards	$21.25	0001	200050	5510000	

ADD'L PAGES SUBTOTAL ________

(must agree to figure below)

GRAND TOTAL (ALL PAGES) $129.43

SUMMARY OF FUND / COST CENTERS /G.L. ACCOUNT TO BILL

FUND	COST CTR	GL ACCT	INT. ORDER	Amount
0001	200090	5410100		$108.18
0001	200050	5510000		$21.25

(must agree to above figure) **TOTAL** $129.43

I (Cardholder) have complied with the Purchase Card Administrative Order (AO-41) and have retained all required approvals for restrictive uses and quote log for purchases with a value in excess of $1000 and an expected life of more than one-Year such as automobiles and furniture; and computer equipment valued in excess of $750.

Danielle Stern 12/14/20
Signature of Cardholder / Date

12/14/20
Signature of Approving Official / Date

12/16/20
on

910

BANK OF AMERICA

DANIELLE L STERN
FL BREVARD COUNTY BOC
XXXX-XXXX-XXXX-**4809**
November 05, 2020 - December 04, 2020

Purchasing Card

Cardholder Activity

Account Information

Mail Billing Inquiries to:
BANKCARD CENTER
PO BOX 982238
EL PASO, TX 79998-2238

TTY Hearing Impaired:
Dial "711"

Outside the U.S.:
1.509.353.6656 24 Hours

For Lost or Stolen Card:
1.888.449.2273 24 Hours

Payment Information

Statement Date	12/04/20
Credit Limit	$2,000
Cash Limit	$0
Days in Billing Cycle	30
Total Activity	$129.43

THIS IS NOT A BILL - DO NOT PAY

Account Summary

Credits	$0.00
Cash	$0.00
Purchases	$129.43
Other Debits	$0.00
Cash Fees	$0.00
Other Fees	$0.00
Total Activity	$129.43

Accounting Code: 0001/200050

Important Messages

Global Card Access – your card information whenever, wherever and however you need it. From the dashboard, you can quickly check your credit limit, balance, available credit and recent card activity. Other features like View PIN, Change PIN, Lock card and Alerts help you keep your card secure. For added convenience, you can easily view or download your current statement and 12 months of past statements. Visit www.bofa.com/globalcardaccess to register your card and start using Global Card Access today.

Transactions

Posting Date	Transaction Date	Description	Reference Number	MCC	Charge	Credit
11/09	11/06	VERIZONWRLSS*RTCCR VB 800-922-0204 FL	24692160311100421308682	4814	108.18	
11/23	11/18	OFFICE DEPOT #2703 PALM BAY FL	24137460325500761237568	5943	21.25	

0000000 0000000 0000000 471529001776 4809

Account Number: XXXX-XXXX-XXXX-**4809**
November 05, 2020 - December 04, 2020

Total Activity **$129.43**

Danielle Stern 12/14/20
Cardholder Signature Date

Manager Signature 12/14/20
Date

BANK OF AMERICA
PO BOX 15731
WILMINGTON, DE 19886-5731

**M002436

DANIELLE L STERN
FL BREVARD COUNTY BOC
DISTRICT 5 COMMISSION OFFICE
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

⑆549900011⑆000500177648092⑈

Order Number: 137414338-001
Order is modifiable
This order has NOT been invoiced

Order Information:
Order Date: Wednesday, November 18, 2020
CSR ID: 2703
Store Employee ID: 0000762083
Order Source: JMillennia in Stores

Delivery Information:
Estimated Date: Thursday, November 19, 2020 08:30 AM - 05:00 PM
Status: Held for Deposit , Deliver to Store
Pick-Up Date: Thursday, November 19, 2020 08:30 AM - 05:00 PM
Pickup Location: Store Number 2703
Pickup Proxy Information:

Customer Information:

Payment Information:
Cash
Amount $20.00

Billing Address:
2725 JUDGE FRAN JAMIESON
BLDG A VIERA, FL 32940-6605
USA

Shipping Address:
820 PALM BAY ROAD SUITE 1
PALM BAY, FL 32905
USA

+ 166878
27327334 tax ID

Currency: U.S Dollars
Contact Information:
PURCHASER
(000) 000- 0000

Delivery Location:
2703-PALM BAY FL

BLK PO: N/A

#	Qty	BkOrd Qty	Qty Ship	Item Number	Description	Unit	Unit Price	Ext-Price	Orig Price	Action	Reason	Comments
1	4	0	0	746243	SAME DAY,BUSINESS CARD	BX	$5.000	$20.00	$0.00	Order		outputFile-1605728873

Sub Total:	$20.00
Delivery Charge:	$0.00
Tax Percent:	0.000 %
Tax:	$0
Order Total:	$20.00
Amount Due:	$20.00

1374143380010

To check the status of your order, 24 hours a day, 7 days a week, please visit https://www.officedepot.com/orderhistory and enter your order number and phone number.
Or, call our Customer Service Center at 1-800-GO-DEPOT (1-800-463-3768).

912

Office DEPOT
OfficeMax

PALM BAY - (321) 723-7079
11/18/2020 4:01 PM

VTTTG5PP3U3X66C86

SALE	2703-3-6134-762083-20.11.2	
166878 File Manipulat		1.25 SS
6432023 Full Service M		0.00 E
Override - Fee Bypass		
Subtotal:		1.25
Sales Tax:		0.00

Order Management Invoice # 1374143380010
Approval Code: 023050

114318 JDA GMILL ORDE		20.00 E
Total:		21.25
Visa 4809:		21.25

AUTH CODE 013881
TDS Chip Read
AID A0000000031010 VISA CREDIT
TVR 0080088000
CVS No Signature Required

Tax Exemption Number 27327334
Total Savings:
$1.25

****

WE WANT TO HEAR FROM YOU!
Visit survey.officedepot.com
and enter the survey code below:
V6RT V6H4 EQ6B

****

913

Culligan of Melbourne

771 NORTH DRIVE
MELBOURNE, FL 32934
(321) 255-5562 (321) 636-1344
www.culligancentralflorida.com

IF PAYING BY CREDIT CARD, PLEASE CHE[...] ND FILL OUT BELOW

VISA / MasterCard / American Express

PLEASE CHECK BOX TO ENROLL IN AUTOMATIC BILL PAYMENT

CARD NUMBER		V. CODE
SIGNATURE		EXP. DATE
DATE	AMOUNT	ACCOUNT NUMBER
11/30/2020	$14.97	268847

INVOICE NUMBER: 90999 AMOUNT PAID $

ADDRESSEE:
DISTRICT 5 COMMISSIONER
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

RECEIVED
DEC 08 2020
D5 Commissions
BY: office

REMIT PAYMENT TO:
CULLIGAN -MELBOURNE
771 NORTH DR
MELBOURNE, FL 32934-9282

INVOICE
RETURN THIS TOP PORTION WITH YOUR PAYMENT

ACCOUNT NUMBER	SALES ID	SALES ORDER NUMBER	PURCHASE ORDER NUMBER	SHIP VIA	TERMS	INVOICE DATE
268847	KM		4500083054	COMPANY TRUCK	NET DUE IN 10 DAYS; INVOICE NUMBER 90999	11/30/2020

DATE SHIPPED	QUANTITY ORDERED	QUANTITY SHIPPED	ITEM NUMBER	DESCRIPTION	UNIT PRICE	DISCOUNT	NET AMOUNT
				Tick 800751658 Date 11/17/2020			
				P/O Number: 4500083054			
11/17	3.00	3.00		1/2 LITER CULLIGAN CASE	4.990		14.97
11/17	1.00	1.00		SERVICE CHARGE	0.000		
				End of Ticket 800751658			

PO: 4500107776
Vendor: 3311
Doc: 5105687907

Kristine Zonka

Pay on line at www.culligancentralflorida.com Please call our office at 321-255-5562 if you need any assistance.

A LATE PAYMENT FINANCE CHARGE OF 1.5 % PER MONTH MAY BE APPLIED ON BALANCES AFTER 30 DAYS

CULLIGAN -MELBOURNE
771 NORTH DRIVE
MELBOURNE, FL 32934
(321) 255-5562 (321) 636-1344

DELIVER TO:
DISTRICT 5 COMMISSIONER
STE 175
490 CENTRE LAKE DRIVE NE
PALM BAY FL 32907

TOTAL	14.97
SALES TAX	
FREIGHT/DELIVERY CHARGES	
AMOUNT DUE	$14.97

268847

ORIGINAL INVOICE RETAIN BOTTOM PORTION FOR YOUR RECORDS

EHIBIT "B"

PAGE ___ of ___

BREVARD COUNTY PURCHASING CARD MONTHLY RECONCILIATION REPORT

Cardholder's Name: Danielle Stern **Cardholder Phone Ext:** 321-253-6611 **Personnel #:** 11006140

Cardholder's Department: D5 Commissioner **Closing Date:** January 4th, 2021

(enter closing date of statement)

Date Purchased or Ordered	Date Received	Vendor Name	Description of Item Purchased	Amount Billed (indicate "Q"for quoted items)	Fund (4 digits)	Cost Center (6 digits)	GL Account # (7 digits)	Internal / Work Order # (6 or 7 digits)
12/05	12/07	Verizon Wireless	Cell Service	$108.18	0001	200090	5410100	

ADD'L PAGES SUBTOTAL ______

GRAND TOTAL (ALL PAGES) $108.18

(must agree to figure below)

SUMMARY OF FUND / COST CENTERS /G.L. ACCOUNT TO BILL

FUND	COST CTR	GL ACCT	INT. ORDER	Amount
0001	200090	5410100		$108.18
			TOTAL	$108.18

(must agree to above figure)

I (Cardholder) have complied with the Purchase Card Administrative Order (AO-41) and have retained all required approvals for restrictive uses and quote log for purchases with a value in excess of $1000 and an expected life of more than one -Year such as automobiles and furniture; and computer equipment valued in excess of $750.

1/13/21

Signature of Cardholder / Date

1-13-21

Signature of Approving Official / Date

BANK OF AMERICA

DANIELLE L STERN
FL BREVARD COUNTY BOC
XXXX-XXXX-XXXX-**4809**
December 05, 2020 - January 04, 2021

Purchasing Card

Cardholder Activity

Account Information

Mail Billing Inquiries to:
BANKCARD CENTER
PO BOX 982238
EL PASO, TX 79998-2238

TTY Hearing Impaired:
Dial "711"

Outside the U.S.:
1.509.353.6656 24 Hours

For Lost or Stolen Card:
1.888.449.2273 24 Hours

Payment Information

Statement Date	01/04/21
Credit Limit	$2,000
Cash Limit	$0
Days in Billing Cycle	31
Total Activity	$108.18

THIS IS NOT A BILL - DO NOT PAY

Account Summary

Credits	$0.00
Cash	$0.00
Purchases	$108.18
Other Debits	$0.00
Cash Fees	$0.00
Other Fees	$0.00
Total Activity	$108.18

Accounting Code: 0001/200050

Important Messages

Global Card Access – your card information whenever, wherever and however you need it. From the dashboard, you can quickly check your credit limit, balance, available credit and recent card activity. Other features like View PIN, Change PIN, Lock card and Alerts help you keep your card secure. For added convenience, you can easily view or download your current statement and 12 months of past statements. Visit www.bofa.com/globalcardaccess to register your card and start using Global Card Access today.

Transactions

Posting Date	Transaction Date	Description	Reference Number	MCC	Charge	Credit
12/07	12/05	VERIZONWRLSS*RTCCR VB 800-922-0204 FL	24692160340100744507488	4814	108.18	

0000000 0000000 0000000 47152900177764809

Account Number: XXXX-XXXX-XXXX-**4809**
December 05, 2020 - January 04, 2021

BANK OF AMERICA
PO BOX 15731
WILMINGTON, DE 19886-5731

**N0002147

DANIELLE L STERN
FL BREVARD COUNTY BOC
DISTRICT 5 COMMISSION OFFICE
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

Total Activity **$108.18**

Cardholder Signature 1/13/21 Date

Manager Signature 1/13/2 Date

915

916

EHIBIT "B"
BREVARD COUNTY PURCHASING CARD MONTHLY RECONCILIATION REPORT

PAGE ___ of ___

Cardholder's Name: Danielle Stern **Cardholder Phone Ext:** 321-253-6611 **Personnel #:** 11006140

Cardholder's Department: D5 Commissioner **Closing Date:** February 4th, 2021

(enter closing date of statement)

Date Purchased or Ordered	Date Received	Vendor Name	Description of Item Purchased	Amount Billed (indicate "Q"for quoted items)	Fund (4 digits)	Cost Center (6 digits)	GL Account # (7 digits)	Internal / Work Order # (6 or 7 digits)
01/09	01/11	Verizon Wireless	Cell Service	$108.18	0001	200090	5410100	

ADD'L PAGES SUBTOTAL ______

GRAND TOTAL (ALL PAGES) $108.18

(must agree to figure below)

I (Cardholder) have complied with the Purchase Card Administrative Order (AO-41) and have retained all required approvals for restrictive uses and quote log for purchases with a value in excess of $1000 and an expected life of more than one -Year such as automobiles and furniture, and computer equipment valued in excess of $750.

2/15/2021

Signature of Cardholder / Date

2/1/21

Signature of Approving Official / Date

SUMMARY OF FUND / COST CENTERS /G.L. ACCOUNT TO BILL

FUND	COST CTR	GL ACCT	INT. ORDER	Amount
0001	200090	5410100		$108.18

(must agree to above figure)

TOTAL $108.18

8/10/21

BCC-223 –Word Document Revised 8/18/2017

917

BANK OF AMERICA

DANIELLE L STERN
FL BREVARD COUNTY BOC
XXXX-XXXX-XXXX-**4809**
January 05, 2021 - February 04, 2021

Purchasing Card

Cardholder Activity

Account Information

Mail Billing Inquiries to:
BANKCARD CENTER
PO BOX 982238
EL PASO, TX 79998-2238

TTY Hearing Impaired:
Dial "711"

Outside the U.S.:
1.509.353.6656 24 Hours

For Lost or Stolen Card:
1.888.449.2273 24 Hours

Payment Information

Statement Date	02/04/21
Credit Limit	$2,000
Cash Limit	$0
Days in Billing Cycle	31
Total Activity	$108.18

THIS IS NOT A BILL - DO NOT PAY

Account Summary

Credits	$0.00
Cash	$0.00
Purchases	$108.18
Other Debits	$0.00
Cash Fees	$0.00
Other Fees	$0.00
Total Activity	$108.18

Accounting Code: 0001/200050

Important Messages

Global Card Access – your card information whenever, wherever and however you need it. From the dashboard, you can quickly check your credit limit, balance, available credit and recent card activity. Other features like View PIN, Change PIN, Lock card and Alerts help you keep your card secure. For added convenience, you can easily view or download your current statement and 12 months of past statements. Visit www.bofa.com/globalcardaccess to register your card and start using Global Card Access today.

Transactions

Posting Date	*Transaction Date*	*Description*	*Reference Number*	*MCC*	*Charge*	*Credit*
01/11	01/09	VERIZONWRLSS*RTCCR VB 800-922-0204 FL	24692161009100468604386	4814	108.18	

0000000 0000000 0000000 4715290017764809

Account Number: XXXX-XXXX-XXXX-**4809**
January 05, 2021 - February 04, 2021

BANK OF AMERICA
PO BOX 15731
WILMINGTON, DE 19886-5731

Total Activity **$108.18**

Cardholder Signature — Date 2/25/2021

Manager Signature — Date 2/1/21

**N0000445

DANIELLE L STERN
FL BREVARD COUNTY BOC
DISTRICT 5 COMMISSION OFFICE
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

:5499900 11:000500 17764809"

816

verizon

PO BOX 489
NEWARK, NJ 07101-0489

Manage Your Account	Account Number	Date Due
www.vzw.com/mybusinessaccount	742120929-00001	01/15/21

Change your address at
http://sso.verizonenterprise.com

Invoice Number	9869837228

COUNTY OF BREVARD
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

00032481
M112

Quick Bill Summary

Nov 24 – Dec 23

Previous Balance *(see back for details)*	$108.18
Payment – Thank You	-$108.18
Balance Forward	**$.00**
Monthly Charges	$107.18
Usage and Purchase Charges	
Voice	$.00
Messaging	$.00
Data	$.00
Surcharges and Other Charges & Credits	$1.00
Taxes, Governmental Surcharges & Fees	$.00
Total Current Charges	**$108.18**

Total Charges Due by January 15, 2021 **$108.18**

Pay from phone	Pay on the Web	Questions:
#PMT (#768)	At vzw.com/mybusinessaccount	1.800.922.0204 or *611 from your phone

verizon

Bill Date	December 23, 2020
Account Number	742120929-00001
Invoice Number	9869837228

COUNTY OF BREVARD
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

Paid 1/8/21 gn

Total Amount Due by January 15, 2021

Make check payable to Verizon Wireless.
Please return this remit slip with payment.

$108.18

$ ☐☐☐.☐☐

PO BOX 660108
DALLAS, TX 75266-0108

9869837228010742120929000010000001081800000010818 3

919

Notifications DANIELLE STERN

verizon Manage Account Support
(https://b2b.verizonwireless.com/sms/amsecure/landing/overview.go#/overview)

Location: Choose Location (https://b2b.verizonwireless.com/b2b/commerce/amsecure/chooseZip.go?purchasePath=&isChangeZip=true&isCommerce=true)

Cart Empty
Search

Back to billing

Make a payment

Thank you for your payment!

Transaction Id 1088119189

Print

Payment details

Billing Account	Payment amount	Payment method	Payment date
742120929-00001	$108.18	VISA	Jan 8, 2021

Want to do more?

Continue working with this account

742120929-00001

Or

Work on another account

Enter account number

Continue

Manage another payment

Set up Auto Pay

View payment history **(/sms/amsecure/payment/activity/show.go)**

EHIBIT "B"
BREVARD COUNTY PURCHASING CARD MONTHLY RECONCILIATION REPORT

Cardholder's Name: Danielle Stern **Cardholder Phone Ext:** 321-253-6611 **Personnel #:** 11006140

Cardholder's Department: D5 Commissioner **Closing Date:** March 4th, 2021

(enter closing date of statement)

Date Purchased or Ordered	Date Received	Vendor Name	Description of Item Purchased	Amount Billed (indicate "Q"for quoted items)	Fund (4 digits)	Cost Center (6 digits)	GL Account # (7 digits)	Internal / Work Order # (6 or 7 digits)
02/06	02/08	Verizon Wireless	Cell Service	$108.30	0001	200090	5410100	
02/25	03/01	Office Depot	Office supplies	$78.97	0001	200050	5510000	

ADD'L PAGES SUBTOTAL ______

GRAND TOTAL (ALL PAGES) $187.27 (must agree to figure below)

SUMMARY OF FUND / COST CENTERS /G.L. ACCOUNT TO BILL

FUND	COST CTR	GL ACCT	INT. ORDER	Amount
0001	200090	5410100		$108.30
0001	200050	5510000		$78.97

(must agree to above figure)

TOTAL $187.27

I (Cardholder) have complied with the Purchase Card Administrative Order (AO-41) and have retained all required approvals for restrictive uses and quote log for purchases with a value in excess of $1000 and an expected life of more than one -Year such as automobiles and furniture; and computer equipment valued in excess of $750.

3/22/21

Signature of Cardholder / Date

Signature of Approving Official / Date

3/22/21

BCC-223 – Word Document Revised 8/18/2017

921
BANK OF AMERICA

DANIELLE L STERN
FL BREVARD COUNTY BOC
XXXX-XXXX-XXXX-**4809**
February 05, 2021 - March 04, 2021

Purchasing Card

Cardholder Activity

Account Information

Mail Billing Inquiries to:
BANKCARD CENTER
PO BOX 982238
EL PASO, TX 79998-2238

TTY Hearing Impaired:
Dial "711"

Outside the U.S.:
1.509.353.6656 24 Hours

For Lost or Stolen Card:
1.888.449.2273 24 Hours

Payment Information

Statement Date	03/04/21
Credit Limit	$2,000
Cash Limit	$0
Days in Billing Cycle	28
Total Activity	$187.27

THIS IS NOT A BILL - DO NOT PAY

Account Summary

Credits	$0.00
Cash	$0.00
Purchases	$187.27
Other Debits	$0.00
Cash Fees	$0.00
Other Fees	$0.00
Total Activity	$187.27

Accounting Code: 0001/200050

Important Messages

Global Card Access – your card information whenever, wherever and however you need it. From the dashboard, you can quickly check your credit limit, balance, available credit and recent card activity. Other features like View PIN, Change PIN, Lock card and Alerts help you keep your card secure. For added convenience, you can easily view or download your current statement and 12 months of past statements. Visit www.bofa.com/globalcardaccess to register your card and start using Global Card Access today.

Transactions

Posting Date	*Transaction Date*	*Description*	*Reference Number*	*MCC*	*Charge*	*Credit*
02/08	02/06	VERIZONWRLSS*RTCCR VB 800-922-0204 FL	24692161037100823992431	4814	108.30	
03/01	02/25	OFFICE DEPOT #2703 PALM BAY FL	24137461057500795311043	5943	78.97	

0000000 0000000 0000000 4715290017764809

Account Number: XXXX-XXXX-XXXX-**4809**
February 05, 2021 - March 04, 2021

BANK OF AMERICA
PO BOX 15731
WILMINGTON, DE 19886-5731

Total Activity **$187.27**

Cardholder Signature 5/22/21 Date

DANIELLE L STERN
FL BREVARD COUNTY BOC
DISTRICT 5 COMMISSION OFFICE
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

**X0000396

Manager Signature Date

⑆549900111⑆00050017764809⑈

922

verizon

PO BOX 489
NEWARK, NJ 07101-0489

Manage Your Account	Account Number	Date Due
b2b.verizonwireless.com	742120929-00001	02/15/21

Change your address at
http://sso.verizonenterprise.com

Invoice Number	9871948307

Quick Bill Summary

Dec 24 – Jan 23

COUNTY OF BREVARD
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

00040460
M101

Previous Balance *(see back for details)*	$108.18
Payment – Thank You	–$108.18
Balance Forward	**$.00**
Monthly Charges	$107.18
Usage and Purchase Charges	
Voice	$.00
Messaging	$.00
Data	$.00
Surcharges and Other Charges & Credits	$1.12
Taxes, Governmental Surcharges & Fees	$.00
Total Current Charges	**$108.30**

Total Charges Due by February 15, 2021 **$108.30**

Pay from phone	Pay on the Web	Questions:
#PMT (#768)	At b2b.verizonwireless.com	1.800.922.0204 or *611 from your phone

verizon

COUNTY OF BREVARD
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

Bill Date	January 23, 2021
Account Number	742120929-00001
Invoice Number	9871948307

Total Amount Due by February 15, 2021

Make check payable to Verizon Wireless.
Please return this remit slip with payment.

$108.30

$ ___ . __

paid 2/5/21

PO BOX 660108
DALLAS, TX 75266-0108

9871948307010742120929000010000001083000000000108303

Notifications DANIELLE STERN

verizon✓ Manage Account Support
(https://b2b.verizonwireless.com/sms/amsecure/landing/overview.go#/overview)

Location: Choose Location (https://b2b.verizonwireless.com/b2b/commerce/amsecure/chooseZip.go?purchasePath=&isChangeZip=true&isCommerce=true)

Cart Empty
Search

Back to billing

Make a payment

Thank you for your payment!

Transaction Id 1098604807

Print

Payment details

Billing Account	Payment amount	Payment method	Payment date
742120929-00001	$108.30	VISA	Feb 5, 2021

Want to do more?

Continue working with this account

742120929-00001

Or

Work on another account

Enter account number

Continue

Manage another payment

Set up Auto Pay

View payment history **(/sms/amsecure/payment/activity/show.go)**

Terms and Conditions (https://b2b.verizonwireless.com/sms/login/terms.go)

BBB OnLine Reliability Program
(https://businessportals.verizonwireless.com/support/misc/hosted/bbb_vz_review.html)

Office DEPOT
OfficeMax

PALM BAY - (321) 723-7079
02/25/2021 9:12 AM

VTVTG6AP5U5XR6BBM

SALE	2703-3-4146-762083-21.2.2	
963822	PEN,GEL,BOLD,G	18.99 SS
4054114	G2 Gel Pen Fin	18.99 SS
927079	DETERGENT,DAWN	13.39SS
	Instant Savings	-3.39
	You Pay	**10.00**SS
134000	MRKR,SHARPIE,5	5.99 SS
7635137	TOWELS,BOUTY,1	25.00 SS
	Subtotal:	78.97
	Sales Tax:	0.00
	Total:	78.97
	Visa 4809:	78.97

AUTH CODE 077354
TDS Chip Read
AID A0000000031010 VISA CREDIT
TVR 0080088000
CVS No Signature Required

Tax Exemption Number 27327334
Total Savings:
$3.39

****

WE WANT TO HEAR FROM YOU!
Visit survey.officedepot.com
and enter the survey code below:
X5ZG 6SHW 1S23

****

EHIBIT "B"
BREVARD COUNTY PURCHASING CARD MONTHLY RECONCILIATION REPORT

PAGE ___ of ___

Cardholder's Name: Danielle Stern **Cardholder Phone Ext:** 321-253-6611 **Personnel #:** 11006140

Cardholder's Department: D5 Commissioner **Closing Date:** April 4th. 2021 (enter closing date of statement)

Date Purchased or Ordered	Date Received	Vendor Name	Description of Item Purchased	Amount Billed (indicate "Q"for quoted items)	Fund (4 digits)	Cost Center (6 digits)	GL Account # (7 digits)	Internal / Work Order # (6 or 7 digits)
03/10	03/11	Verizon Wireless	Cell Service	$108.30	0001	200090	5410100	

ADD'L PAGES SUBTOTAL ______

GRAND TOTAL (ALL PAGES) $108.30 (must agree to figure below)

SUMMARY OF FUND / COST CENTERS /G.L. ACCOUNT TO BILL

FUND	COST CTR	GL ACCT	INT. ORDER	Amount
0001	200090	5410100		$108.30
TOTAL				$108.30

(must agree to above figure)

I (Cardholder) have complied with the Purchase Card Administrative Order (AO-41) and have retained all required approvals for restrictive uses and quote log for purchases with a value in excess of $1000 and an expected life of more than one -Year such as automobiles and furniture; and computer equipment valued in excess of $750.

4/9/2021

Signature of Cardholder / Date

4/9/21

Signature of Approving Official / Date

4/12/21

BANK OF AMERICA

DANIELLE L STERN
FL BREVARD COUNTY BOC
XXXX-XXXX-XXXX-**4809**
March 05, 2021 - April 04, 2021

Purchasing Card

Cardholder Activity

Account Information

Mail Billing Inquiries to:
BANKCARD CENTER
PO BOX 982238
EL PASO, TX 79998-2238

TTY Hearing Impaired:
Dial "711"

Outside the U.S.:
1.509.353.6656 24 Hours

For Lost or Stolen Card:
1.888.449.2273 24 Hours

Payment Information

Statement Date	04/04/21
Credit Limit	$2,000
Cash Limit	$0
Days in Billing Cycle	31
Total Activity	$108.30

THIS IS NOT A BILL - DO NOT PAY

Account Summary

Credits	$0.00
Cash	$0.00
Purchases	$108.30
Other Debits	$0.00
Cash Fees	$0.00
Other Fees	$0.00
Total Activity	$108.30

Accounting Code: 0001/200050

Important Messages

Global Card Access – your card information whenever, wherever and however you need it. From the dashboard, you can quickly check your credit limit, balance, available credit and recent card activity. Other features like View PIN, Change PIN, Lock card and Alerts help you keep your card secure. For added convenience, you can easily view or download your current statement and 12 months of past statements. Visit www.bofa.com/globalcardaccess to register your card and start using Global Card Access today.

Transactions

Posting Date	Transaction Date	Description	Reference Number	MCC	Charge	Credit
03/11	03/10	VERIZONWRLSS*RTCCR VB 800-922-0204 FL	24692161069100313009309	4814	108.30	

0000000 0000000 0000000 47152900177648O9

Account Number: XXXX-XXXX-XXXX-**4809**
March 05, 2021 - April 04, 2021

Total Activity $108.30

Cardholder Signature Date 4/9/2021

Manager Signature Date 4/9/21

BANK OF AMERICA
PO BOX 15731
WILMINGTON, DE 19886-5731

DANIELLE L STERN **N0001977
FL BREVARD COUNTY BOC
DISTRICT 5 COMMISSION OFFICE
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

⑆5499900⑆1⑆000500177648O9⑈

927

verizon

PO BOX 489
NEWARK, NJ 07101-0489

Manage Your Account	Account Number	Date Due
b2b.verizonwireless.com	742120929-00001	03/15/21

Change your address at
http://sso.verizonenterprise.com

Invoice Number	9874061435

COUNTY OF BREVARD
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

00040021
M102

Quick Bill Summary

Jan 24 – Feb 23

Previous Balance *(see back for details)*	$108.30
Payment – Thank You	–$108.30
Balance Forward	**$.00**
Monthly Charges	$107.18
Usage and Purchase Charges	
Voice	$.00
Messaging	$.00
Data	$.00
Surcharges and Other Charges & Credits	$1.12
Taxes, Governmental Surcharges & Fees	$.00
Total Current Charges	**$108.30**

Total Charges Due by March 15, 2021 **$108.30**

Pay from phone	Pay on the Web	Questions:
#PMT (#768)	At b2b.verizonwireless.com	1.800.922.0204 or *611 from your phone

verizon

COUNTY OF BREVARD
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

paid 3/9/21
Xx

Bill Date	February 23, 2021
Account Number	742120929-00001
Invoice Number	9874061435

Total Amount Due by March 15, 2021

Make check payable to Verizon Wireless.
Please return this remit slip with payment.

$108.30

$ ☐☐☐.☐☐

PO BOX 660108
DALLAS, TX 75266-0108

98740614350107421209290000100000010830000000108303

928

Notifications DANIELLE STERN

verizon Manage Account Support
(https://b2b.verizonwireless.com/sms/amsecure/landing/overview.go#/overview)

Location: Choose Location (https://b2b.verizonwireless.com/b2b/commerce/amsecure/chooseZip.go?purchasePath=&isChangeZip=true&isCommerce=true)

Cart Empty
Search

Back to billing

Make a payment

Thank you for your payment!

Transaction Id 1284062117

Print

Payment details

Billing Account	Payment amount	Payment method	Payment date
742120929-00001	$108.30	VISA	Mar 9, 2021

Want to do more?

Continue working with this account

742120929-00001

Or

Work on another account

Enter account number

Continue

Manage another payment

Set up Auto Pay

View payment history **(/sms/amsecure/payment/activity/show.go)**

PAGE ___ of ___

EHIBIT "B"
BREVARD COUNTY PURCHASING CARD MONTHLY RECONCILIATION REPORT

Cardholder's Name: Danielle Stern **Cardholder Phone Ext:** 321-253-6611 **Personnel #:** 11006140

Cardholder's Department: D5 Commissioner **Closing Date:** May 4th, 2021

(enter closing date of statement)

Date Purchased or Ordered	Date Received	Vendor Name	Description of Item Purchased	Amount Billed (indicate "Q" for quoted items)	Fund (4 digits)	Cost Center (6 digits)	GL Account # (7 digits)	Internal / Work Order # (6 or 7 digits)
04/06	04/07	Verizon Wireless	Cell Service	$21.91	0001	200090	5410100	
04/05	04/06	Florida First Responder Apparel	Office Shirts	$699.90 6 - was corrected	0001	200050	5510000	

ADD'L PAGES SUBTOTAL ________

GRAND TOTAL (ALL PAGES) $725.51

(must agree to figure below)

SUMMARY OF FUND / COST CENTERS /G.L. ACCOUNT TO BILL

FUND	COST CTR	GL ACCT	INT. ORDER	Amount
0001	200090	5410100		$21.91
0001	200050	5510000		$699.60

(must agree to above figure) **TOTAL** $721.51

I (Cardholder) have complied with the Purchase Card Administrative Order (AO-41) and have retained all required approvals for restrictive uses and quote log for purchases with a value in excess of $1000 and an expected life of more than one -Year such as automobiles and furniture; and computer equipment valued in excess of $750.

5/10/21
Signature of Cardholder / Date

5/11/21
Signature of Approving Official / Date

5/20/21

BCC-223 –Word Document Revised 8/18/2017

BANK OF AMERICA

DANIELLE L STERN
FL BREVARD COUNTY BOC
XXXX-XXXX-XXXX-**4809**
April 05, 2021 - May 04, 2021

Purchasing Card

Cardholder Activity

Account Information

Mail Billing Inquiries to:
BANKCARD CENTER
PO Box 660441
Dallas, TX 75266-0441

TTY Hearing Impaired:
Dial "711"

Outside the U.S.:
1.509.353.6656 24 Hours

For Lost or Stolen Card:
1.888.449.2273 24 Hours

Payment Information

Statement Date	05/04/21
Credit Limit	$2,000
Cash Limit	$0
Days in Billing Cycle	30
Total Activity	$721.51

THIS IS NOT A BILL - DO NOT PAY

Account Summary

Credits	$0.00
Cash	$0.00
Purchases	$721.51
Other Debits	$0.00
Cash Fees	$0.00
Other Fees	$0.00
Total Activity	$721.51

Accounting Code: 0001/200050

Important Messages

Global Card Access – your card information whenever, wherever and however you need it. From the dashboard, you can quickly check your credit limit, balance, available credit and recent card activity. Other features like View PIN, Change PIN, Lock Card and Alerts help you keep your card secure. For added convenience, you can easily view or download your current statement up to 12 months of past statements. Visit www.bofa.com/globalcardaccess to register your card and start using Global Card Access today.

Transactions

Posting Date	*Transaction Date*	*Description*	*Reference Number*	*MCC*	*Charge*	*Credit*
04/06	04/05	SQ *FLORIDA FIRST R SATELLITE BEAFL	24492151095855437335929	5691	699.60	
04/07	04/06	VERIZONWRLSS*RTCCR VB 800-922-0204 FL	24692161096100417928112	4814	21.91	

0000000 0000000 0000000 4715290017764809

Account Number: XXXX-XXXX-XXXX-**4809**
April 05, 2021 - May 04, 2021

BANK OF AMERICA
PO BOX 15731
WILMINGTON, DE 19886-5731

Total Activity **$721.51**

Cardholder Signature Date 5/12/21

DANIELLE L STERN
FL BREVARD COUNTY BOC
DISTRICT 5 COMMISSION OFFICE
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

**N0000451

Manager Signature Date 5/12/21

⑆5499001⑆000500177648090⑈

verizon

PO BOX 489
NEWARK, NJ 07101–0489

Manage Your Account	Account Number	Date Due
b2b.verizonwireless.com	742120929–00001	04/15/21

Change your address at
http://sso.verizonenterprise.com

Invoice Number	9876206284

COUNTY OF BREVARD
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907–1177

00041525
M103

Quick Bill Summary

Feb 24 – Mar 23

Previous Balance *(see back for details)*	$108.30
Payment – Thank You	–$108.30
Balance Forward	**$.00**
Monthly Charges	$21.57
Usage and Purchase Charges	
Voice	$.00
Messaging	$.00
Data	$.00
Surcharges and Other Charges & Credits	$.34
Taxes, Governmental Surcharges & Fees	$.00
Total Current Charges	**$21.91**

Total Charges Due by April 15, 2021 **$21.91**

Verizon Wireless News

10–Digit Dialing Coming

Start using an area code for all calls.
See last page of bill for more details.

Pay from phone	Pay on the Web	Questions:
#PMT (#768)	At b2b.verizonwireless.com	1.800.922.0204 or *611 from your phone

verizon

Bill Date	March 23, 2021
Account Number	742120929–00001
Invoice Number	9876206284

COUNTY OF BREVARD
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907–1177

Total Amount Due by April 15, 2021

Make check payable to Verizon Wireless.
Please return this remit slip with payment.

$21.91

$ ☐☐.☐☐

4/15/21
fn

PO BOX 660108
DALLAS, TX 75266–0108

98762062840107421209290000100000002191000000021913

931

Notifications DANIELLE STERN

verizon Manage Account Support
(https://b2b.verizonwireless.com/sms/amsecure/landing/overview.go#/overview)

Location: Choose Location (https://b2b.verizonwireless.com/b2b/commerce/amsecure/chooseZip.go?purchasePath=&isChangeZip=true&isCommerce=true)

Cart Empty
Search

Back to billing

Make a payment

Thank you for your payment!

Transaction Id 1110251635

Print

Payment details

Billing Account	Payment amount	Payment method	Payment date
742120929-00001	$21.91	VISA	Apr 5, 2021

Want to do more?

Continue working with this account

742120929-00001

Or

Work on another account

Enter account number

Continue

Manage another payment

Set up Auto Pay

View payment history (/sms/amsecure/payment/activity/show.go)

Roig, Janette

From:	Florida First Responder Apparel <quickbooks@notification.intuit.com>
Sent:	Tuesday, May 11, 2021 10:47 AM
To:	Roig, Janette
Subject:	Invoice 2020637 from Florida First Responder Apparel
Attachments:	Invoice_2020637_from_Florida_First_Responder_Apparel.pdf

[EXTERNAL EMAIL] **DO NOT CLICK links or attachments unless you recognize the sender and know the content is safe.**

INVOICE 2020637 DETAILS

FLORIDA
FIRST RESPONDER
Apparel

Florida First Responder Apparel

DUE 04/29/2021

$0.00

Print or save

Powered by QuickBooks

Dear Janette Roig,

Here's your receipt. Hope this helps.

Thanks for your business!
Florida First Responder Apparel

Bill to

~~Janette Roig~~ Danielle Stern
Brevard County Commissioner District 5 Team
490 Centre Lake Drive Suite 175
Palm Bay, FL 32907

Ship to

~~Janette Roig~~ Danielle Stern
Brevard County Commissioner District 5 Team
490 Centre Lake Drive Suite 175
Palm Bay, FL 32907

Terms Net 30

Polo $659.60

Port Authority Silk Touch Performance (L540 & K540) with custom embroidery

20 X $32.98

General Merchandise $40.00

One time Art & Set-up Fee

1 X $40.00

Payment	$699.60
Balance due	$0.00

Paid by Danielle Stern
Card #4809

Print or save

Florida First Responder Apparel

1361 Highway A1A Satellite Beach, FL 32937 US

(321) 586-9889

FloridaFirstResponderApparel@gmail.com

If you receive an email that seems fraudulent, please check with the business owner before paying.

intuit quickbooks

Florida First Responder Apparel
1361 Highway A1A
Satellite Beach, FL 32937 US
(321) 586-9889
FloridaFirstResponderApparel@gmail.com

FLORIDA
FIRST RESPONDER
Apparel

INVOICE

BILL TO	SHIP TO		
Janette Roig	Janette Roig	INVOICE	2020637
Brevard County Commissioner District 5 Team	Brevard County Commissioner District 5 Team	DATE	03/30/2021
490 Centre Lake Drive Suite 175	490 Centre Lake Drive Suite 175	TERMS	Net 30
Palm Bay, FL 32907	Palm Bay, FL 32907	DUE DATE	04/29/2021

DATE		DESCRIPTION	QTY	RATE	AMOUNT
	Polo	Port Authority Silk Touch Performance (L540 & K540) with custom embroidery	20	32.98	659.60
	General Merchandise	One time Art & Set-up Fee	1	40.00	40.00

PAYMENT 699.60

BALANCE DUE **$0.00**

PAID

Thank you,
Rachael Wooldridge

938

Culligan of Melbourne

771 NORTH DRIVE
MELBOURNE, FL 32934
(321) 255-5562 (321) 636-1344
www.culligancentralflorida.com

IF PAYING BY CREDIT CARD, PLEASE CHECK CORRECT CARD AND FILL OUT BELOW

☐ VISA ☐ MasterCard ☐ American Express ☐ Discover ☐ PLEASE CHECK BOX TO ENROLL IN AUTOMATIC BILL PAYMENT

CARD NUMBER	V. CODE
SIGNATURE	EXP. DATE

DATE	PAY THIS AMOUNT	ACCOUNT NUMBER
04/30/2021	$19.96	268847

INVOICE NUMBER: 92792 AMOUNT PAID $

ADDRESSEE:
000096
DISTRICT 5 COMMISSIONER
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

RECEIVED
MAY 10 2021
DS Commissioner
BY: Office

REMIT PAYMENT TO:
CULLIGAN -MELBOURNE
771 NORTH DR
MELBOURNE, FL 32934-9282

INVOICE
RETURN THIS TOP PORTION WITH YOUR PAYMENT

ACCOUNT NUMBER	SALES ID	SALES ORDER NUMBER	PURCHASE ORDER NUMBER	SHIP VIA	TERMS	NET DUE IN 10 DAYS
268847	KM		4500083054	COMPANY TRUCK	INVOICE NUMBER 92792	INVOICE DATE 04/30/2021

DATE SHIPPED	QUANTITY ORDERED	QUANTITY SHIPPED	ITEM NUMBER	DESCRIPTION	UNIT PRICE	DISCOUNT	NET AMOUNT
				Tick 800764202 Date 04/12/2021			
				P/O Number: 4500083054			
04/12	4.00	4.00		1/2 LITER CULLIGAN CASE	4.990		19.96
04/12	1.00	1.00		SERVICE CHARGE	0.000		
				End of Ticket 800764202			

Po: 4500107776
Vendor: 3311
Doc: 5105609417

X
Kristine Zonka

Pay on line at www.culligancentralflorida.com Please call our office at 321-255-5562 if you need any assistance.

A LATE PAYMENT FINANCE CHARGE OF 1.5 % PER MONTH MAY BE APPLIED ON BALANCES AFTER 30 DAYS
CULLIGAN -MELBOURNE
771 NORTH DRIVE
MELBOURNE, FL 32934
(321) 255-5562 (321) 636-1344

DELIVER TO:
DISTRICT 5 COMMISSIONER
STE 175
490 CENTRE LAKE DRIVE NE
PALM BAY FL 32907

TOTAL	19.96
SALES TAX	
FREIGHT/DELIVERY CHARGES	
AMOUNT DUE	**$19.96**

ORIGINAL INVOICE RETAIN BOTTOM PORTION FOR YOUR RECORDS 268847

EHIBIT "B"
BREVARD COUNTY PURCHASING CARD MONTHLY RECONCILIATION REPORT

Cardholder's Name: Danielle Stern **Cardholder Phone Ext:** 321-253-6611 **Personnel #:** 11006140

Cardholder's Department: D5 Commissioner **Closing Date:** June 4th, 2021
(enter closing date of statement)

Date Purchased or Ordered	Date Received	Vendor Name	Description of Item Purchased	Amount Billed (indicate "Q" for quoted items)	Fund (4 digits)	Cost Center (6 digits)	GL Account # (7 digits)	Internal / Work Order # (6 or 7 digits)
05/07	05/10	Verizon Wireless	Cell Service	$56.75	0001	200090	5410100	

ADD'L PAGES SUBTOTAL ______

GRAND TOTAL (ALL PAGES) $56.75 (must agree to figure below)

SUMMARY OF FUND / COST CENTERS /G.L. ACCOUNT TO BILL

FUND	COST CTR	GL ACCT	INT. ORDER	Amount
0001	200090	5410100		$56.75

(must agree to above figure) **TOTAL** $56.75

I (Cardholder) have complied with the Purchase Card Administrative Order (AO-41) and have retained all required approvals for restrictive uses and quote log for purchases with a value in excess of $1000 and an expected life of more than one -Year such as automobiles and furniture; and computer equipment valued in excess of $750

6/14/2021
Signature of Cardholder / Date

6/14/21
Signature of Approving Official / Date

BANK OF AMERICA

DANIELLE L STERN
FL BREVARD COUNTY BOC
XXXX-XXXX-XXXX-**4809**
May 05, 2021 - June 04, 2021

Purchasing Card

Cardholder Activity

Account Information

Mail Billing Inquiries to:
BANKCARD CENTER
PO Box 660441
Dallas, TX 75266-0441

TTY Hearing Impaired:
Dial "711"

Outside the U.S.:
1.509.353.6656 24 Hours

For Lost or Stolen Card:
1.888.449.2273 24 Hours

Payment Information

Statement Date	06/04/21
Credit Limit	$2,000
Cash Limit	$0
Days in Billing Cycle	31
Total Activity	$56.75

THIS IS NOT A BILL - DO NOT PAY

Account Summary

Credits	$0.00
Cash	$0.00
Purchases	$56.75
Other Debits	$0.00
Cash Fees	$0.00
Other Fees	$0.00
Total Activity	$56.75

Accounting Code: 0001/200050

Important Messages

Global Card Access – your card information whenever, wherever and however you need it. From the dashboard, you can quickly check your credit limit, balance, available credit and recent card activity. Other features like View PIN, Change PIN, Lock Card and Alerts help you keep your card secure. For added convenience, you can easily view or download your current statement up to 12 months of past statements. Visit www.bofa.com/globalcardaccess to register your card and start using Global Card Access today.

Transactions

Posting Date	*Transaction Date*	*Description*	*Reference Number*	*MCC*	*Charge*	*Credit*
05/10	05/07	VERIZONWRLSS*RTCCR VB 800-922-0204 FL	24692161127100452354409	4814	56.75	

0000000 0000000 0000000 4715290017764809

Account Number: XXXX-XXXX-XXXX-**4809**
May 05, 2021 - June 04, 2021

BANK OF AMERICA
PO BOX 15731
WILMINGTON, DE 19886-5731

Total Activity **$56.75**

Cardholder Signature ______ Date 6/14/2021

Manager Signature ______ Date 6/14/21

DANIELLE L STERN **N0000738
FL BREVARD COUNTY BOC
DISTRICT 5 COMMISSION OFFICE
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

⑆549990011⑆00050017764809⑈

verizon

PO BOX 489
NEWARK, NJ 07101-0489

Manage Your Account	Account Number	Date Due
b2b.verizonwireless.com	742120929-00001	05/15/21

Change your address at
http://sso.verizonenterprise.com

Invoice Number	9878342466

COUNTY OF BREVARD
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

00161366
M104

Quick Bill Summary

Mar 24 - Apr 23

Previous Balance *(see back for details)*	$21.91
Payment - Thank You	-$21.91
Balance Forward	**$.00**
Monthly Charges	$56.18
Usage and Purchase Charges	
Voice	$.00
Messaging	$.00
Data	$.00
Surcharges and Other Charges & Credits	$.57
Taxes, Governmental Surcharges & Fees	$.00
Total Current Charges	**$56.75**

Total Charges Due by May 15, 2021 **$56.75**

Verizon Wireless News

10-Digit Dialing Coming
Start using an area code for all calls.
See last page of bill for more details.

Pay from phone	Pay on the Web	Questions:
#PMT (#768)	At b2b.verizonwireless.com	1.800.922.0204 or *611 from your phone

verizon

Bill Date	April 23, 2021
Account Number	742120929-00001
Invoice Number	9878342466

COUNTY OF BREVARD
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

Total Amount Due by May 15, 2021

Make check payable to Verizon Wireless.
Please return this remit slip with payment.

$56.75

$ ☐☐.☐☐

PO BOX 660108
DALLAS, TX 75266-0108

paid 5/6/21
CJK

987834246601074212092900001000000056750000000056753

941

Notifications DANIELLE STERN

verizon Manage Account Support
(https://b2b.verizonwireless.com/sms/amsecure/landing/overview.go#/overview)

Location: Choose Location (https://b2b.verizonwireless.com/b2b/commerce/amsecure/chooseZip.go?purchasePath=&isChangeZip=true&isCommerce=true)

Cart Empty
Search

Back to billing

Make a payment

Thank you for your payment!

Transaction Id 1119234235

Print

Payment details

Billing Account	Payment amount	Payment method	Payment date
742120929-00001	$56.75	VISA	May 6, 2021

Want to do more?

Continue working with this account

742120929-00001

Or

Work on another account

Enter account number

Continue

Manage another payment

Set up Auto Pay

View payment history **(/sms/amsecure/payment/activity/show.go)**

EHIBIT "B"
BREVARD COUNTY PURCHASING CARD MONTHLY RECONCILIATION REPORT

Cardholder's Name: Danielle Stern **Cardholder Phone Ext:** 321-253-6611 **Personnel #:** 11006140

Cardholder's Department: D5 Commissioner **Closing Date:** July 4th, 2021
(enter closing date of statement)

Date Purchased or Ordered	Date Received	Vendor Name	Description of Item Purchased	Amount Billed (indicate "Q" for quoted items)	Fund (4 digits)	Cost Center (6 digits)	GL Account # (7 digits)	Internal / Work Order # (6 or 7 digits)
06/08	06/09	Verizon Wireless	Cell Service	$56.75	0001	200090	5410100	
06/14	06/15	Brevard HBA	Government Affairs Luncheon/ Kristine Zonka	$40.00	0001	200050	5310000	

ADD'L PAGES SUBTOTAL ______ (must agree to figure below)

GRAND TOTAL (ALL PAGES) $96.75

SUMMARY OF FUND / COST CENTERS /G.L. ACCOUNT TO BILL

FUND	COST CTR	GL ACCT	INT. ORDER	Amount
0001	20009C	5410100		$56.75
0001	200050	5310000		$40.00
(must agree to above figure)			TOTAL	$96.75

I (Cardholder) have complied with the Purchase Card Administrative Order (AO-41) and have retained all required approvals for restrictive uses and quote log for purchases with a value in excess of $1000 and an expected life of more than one -Year such as automobiles and furniture; and computer equipment valued in excess of $750.

Danielle Stern 7/12/21
Signature of Cardholder / Date

7/12/21
Signature of Approving Official / Date

BCC-223 –Word Document Revised 8/18/2017

mailed 7/13/21 JL

BANK OF AMERICA

DANIELLE L STERN
FL BREVARD COUNTY BOC
XXXX-XXXX-XXXX-**4809**
June 05, 2021 - July 04, 2021

Purchasing Card

Cardholder Activity

Account Information

Mail Billing Inquiries to:
BANKCARD CENTER
PO Box 660441
Dallas, TX 75266-0441

TTY Hearing Impaired:
Dial "711"

Outside the U.S.:
1.509.353.6656 24 Hours

For Lost or Stolen Card:
1.888.449.2273 24 Hours

Payment Information

Statement Date	07/04/21
Credit Limit	$2,000
Cash Limit	$0
Days in Billing Cycle	30
Total Activity	$96.75

THIS IS NOT A BILL - DO NOT PAY

Account Summary

Credits	$0.00
Cash	$0.00
Purchases	$96.75
Other Debits	$0.00
Cash Fees	$0.00
Other Fees	$0.00
Total Activity	$96.75

Accounting Code: 0001/200050

Important Messages

Global Card Access – your card information whenever, wherever and however you need it. From the dashboard, you can quickly check your credit limit, balance, available credit and recent card activity. Other features like View PIN, Change PIN, Lock Card and Alerts help you keep your card secure. For added convenience, you can easily view or download your current statement up to 12 months of past statements. Visit www.bofa.com/globalcardaccess to register your card and start using Global Card Access today.

Transactions

Posting Date	Transaction Date	Description	Reference Number	MCC	Charge	Credit
06/09	06/08	VERIZONWRLSS*RTCCR VB 800-922-0204 FL	24692161159100814579520	4814	56.75	
06/15	06/14	BREVARD HBA 321-2543700 FL	24207851165179300626199	8699	40.00	

0000000 0000000 0000000 47152900177648O9

Account Number: XXXX-XXXX-XXXX-**4809**
June 05, 2021 - July 04, 2021

BANK OF AMERICA
PO BOX 15731
WILMINGTON, DE 19886-5731

DANIELLE L STERN **N0001782
FL BREVARD COUNTY BOC
DISTRICT 5 COMMISSION OFFICE
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

Total Activity **$96.75**

Cardholder Signature Date 7/12/21

Manager Signature Date 7/12/21

⑆549990011⑆000500177648O9⑈

HBCA
HOME BUILDERS & CONTRACTORS ASSOCIATION OF BREVARD

Government Affairs Luncheon

June 17, 2021 @ 12:00 PM - 2:00 PM (EDT (Eastern Daylight Time))

Checkout Successful

Registration - Government Affairs Luncheon Count: 1
$40.00

Transaction ID: 42740610642
Last 4 of Acct Number: 4809
Amount: $40.00

A copy of this receipt has been emailed to Kristine.Zonka@brevardfl.gov
Thank you,
HBCA of Brevard

Continue

EHIBIT "B"
BREVARD COUNTY PURCHASING CARD MONTHLY RECONCILIATION REPORT

PAGE ___ of ___

Cardholder's Name: Danielle Stern **Cardholder Phone Ext:** 321-253-6611 **Personnel #:** 11006140

Cardholder's Department: D5 Commissioner **Closing Date:** August 4th, 2021
(enter closing date of statement)

Date Purchased or Ordered	Date Received	Vendor Name	Description of Item Purchased	Amount Billed (indicate "Q" for quoted items)	Fund (4 digits)	Cost Center (6 digits)	GL Account # (7 digits)	Internal / Work Order # (6 or 7 digits)
07/08	07/09	Verizon Wireless	Cell Service	$56.75	0001	200090	5410100	
07/08	07/09	Palm Bay Finance Web	Palm Bay Fire Rescue Fire Inspection	$45.00	0001	200090	5310000	
07/21	07/23	Office Depot	Business Cards	$40.00	0001	200050	5510000	
07/26	07/27	EDC Board of Directors Meeting	August 4th Meeting Registration/Ticket	$25.00	0001	200050	5490000	

ADD'L PAGES SUBTOTAL ______

GRAND TOTAL (ALL PAGES) $166.75 (must agree to figure below)

SUMMARY OF FUND / COST CENTERS /G.L. ACCOUNT TO BILL

FUND	COST CTR	GL ACCT	INT. ORDER	Amount
0001	200090	5410100		$56.75
0001	200090	5310000		$45.00
0001	200050	5510000		$40.00
0001	200050	5490000		$25.00

(must agree to above figure) **TOTAL** $166.75

I (Cardholder) have complied with the Purchase Card Administrative Order (AO-41) and have retained all required approvals for restrictive uses and quote log for purchases with a value in excess of $1000 and an expected life of more than one -Year such as automobiles and furniture; and computer equipment valued in excess of $750.

8/23/21
Signature of Cardholder / Date

8/27/21
Signature of Approving Official / Date

mailed 8/24/21

BANK OF AMERICA

DANIELLE L STERN
FL BREVARD COUNTY BOC
XXXX-XXXX-XXXX-**4809**
July 05, 2021 - August 04, 2021

Purchasing Card

Cardholder Activity

Account Information

Mail Billing Inquiries to:
BANKCARD CENTER
PO Box 660441
Dallas, TX 75266-0441

TTY Hearing Impaired:
Dial "711"

Outside the U.S.:
1.509.353.6656 24 Hours

For Lost or Stolen Card:
1.888.449.2273 24 Hours

Payment Information

Statement Date	08/04/21
Credit Limit	$2,000
Cash Limit	$0
Days in Billing Cycle	31
Total Activity	$166.75

THIS IS NOT A BILL - DO NOT PAY

Account Summary

Credits	$0.00
Cash	$0.00
Purchases	$166.75
Other Debits	$0.00
Cash Fees	$0.00
Other Fees	$0.00
Total Activity	$166.75

Accounting Code: 0001/200050

Important Messages

Global Card Access – your card information whenever, wherever and however you need it. From the dashboard, you can quickly check your credit limit, balance, available credit and recent card activity. Other features like View PIN, Change PIN, Lock Card and Alerts help you keep your card secure. For added convenience, you can easily view or download your current statement up to 12 months of past statements. Visit www.bofa.com/globalcardaccess to register your card and start using Global Card Access today.

Transactions

Posting Date	*Transaction Date*	*Description*	*Reference Number*	*MCC*	*Charge*	*Credit*
07/09	07/08	VERIZONWRLSS*RTCCR VB 800-922-0204 FL	24692161189100177338484	4814	56.75	
07/09	07/08	PALM BAY FINANCE WEB 321-9523419 FL	24343111189900011040289	9399	45.00	
07/23	07/21	OFFICE DEPOT #2703 PALM BAY FL	24137461203500799633981	5943	40.00	
07/27	07/26	EB EDC AUGUST 4 BOARD 801-413-7200 CA	24492151207717744890654	7399	25.00	

0000000 0000000 0000000 4715290017764809

Account Number: XXXX-XXXX-XXXX-**4809**
July 05, 2021 - August 04, 2021

BANK OF AMERICA
PO BOX 15731
WILMINGTON, DE 19886-5731

Total Activity **$166.75**

Cardholder Signature Date 8/23/21

Manager Signature Date 8/23/21

DANIELLE L STERN
FL BREVARD COUNTY BOC
DISTRICT 5 COMMISSION OFFICE
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

**N0000385

:549900111:000500177648O9"

EDC August 4 Board of Directors Meeting & Investor Update

1 x Registration
Order total: $25.00

Wednesday, August 4, 2021 from 4:30 PM to 7:00 PM (EDT)
Add to Google · Outlook · iCal · Yahoo

City of Cocoa Civic Center
430 Delannoy Avenue
Cocoa, FL 32922
(View on map)

View event details

EDC of Florida's Space Coast

Follow

Questions about this event?

Contact the organizer

Order Summary

Order #1801964633 - July 26, 2021

$25.00 paid by Visa
Last 4 digits: 4809
Appears on your card statement as EB *EDC August 4 Board

Kristine Zonka	1 x **General Admission (Discounted $15.00 - Board)**	$25.00
		$25.00

View and manage your order online
Contact the organizer for any questions related to this purchase.
This order is subject to Eventbrite Terms of Service, Privacy Policy, and Cookie Policy

Your registrations

1 eRegistration

The organizer will follow up with instructions on how to redeem your registration and access the event.

Additional Information

The event organizer has provided the following information:

On behalf of the EDC of Florida's Space Coast, thank you for your registration to attend our:

August 4, Board of Directors Meeting & Investor Update

Wednesday, August 4 at 4:30 pm – 7:00 pm

Location: Cocoa Civic Center

Attire: Business casual

Palm Bay Finance Web

Secure Payment Form

Payment Approved

Thank you, your payment has been accepted. Please retain this receipt for your records.

Payment Date:	07/08/21
Payment Amount:	45.00
Order Number:	
Ref Number:	104028
Auth Code:	097796

Palm Bay Fire Rescue
899 Carlyle Ave. SE
Palm Bay, FL 32909

Invoice #	2106241273002
Invoice Date	6/24/2021
Balance Due	**$45.00**
Due Date	7/24/2021

Remit payment to: City of Palm Bay
ATTN: Revenue Division (FI)
120 Malabar Rd SE
Palm Bay, FL 32907

Or, pay online at
https://pay.palmbayflorida.org

Brevard County District 5 Commissions Office
490 Centre Lake Drive Northeast STE 175
Palm Bay FL 32907

FIRE INSPECTION INVOICE

Brevard County District 5 Commissions Office
490 Centre Lake Drive Northeast STE 175
Palm Bay FL 32907

Invoice #2106241273002
6/24/2021

Description	Amount Owed	Amount Paid
FD - Business Occupancies: Initial Inspection	$45.00	
Subtotal:	$45.00	$0.00
Balance Due:	**$45.00**	

In accordance with the City of Palm Bay Code of Ordinances, Title III, Administration, Chapter 33, Resolution No. 2016-36, the following fees shall be applied to inspection(s) service(s) as listed. **Payment must be made within thirty (30) days of receipt of this notice.**

Late Fees: A $5 or 5% (whichever is greater) fee will apply to all unpaid invoices after 30 days.

Failure to pay fees and fines: All costs and legal fees incurred by the City to collect fees and fines shall be paid by the person or entities that fail to make timely payments.

Please return a copy of this invoice with payment to insure credit to proper account. Make checks payable to: City of Palm Bay.

Or, pay online at https://pay.palmbayflorida.org. Please be sure to include invoice number.

Company Representative:

Janette Roig
3726
6/24/2021 11:17:10 AM

Signature valid only in mobile-eyes documents
Janette Roig
6/24/2021

Inspector:

Signature valid only in mobile-eyes documents
Mayra Leakakos
6/24/2021

Print | Export To PDF

PALM BAY FIRE RESCUE

899 Carlyle Ave. SE
Palm Bay, FL 32909
Fire Marshal's Office
Tel (321) 953-8929 Fax (321) 409-6374
www.palmbayflorida.org
email - fdinspections@palmbayflorida.org

Occupant Name:	Brevard County District 5 Commissions Office	**Inspection Date:**	6/24/2021
Address:	490 Centre Lake Drive Northeast	**InspectionType:**	Business Occupancies (B)
Suite:	175	**Inspected By:**	Mayra Leakakos
Occupant Number:	4980876	**Complex Name:**	490 Centre Lake

#	Insp. Result	Location	Code Set	Code
	Pass		FL NFPA 01 2018 Chapter 10 General Safety Requirements	10.11.1.2 - Address numerals shall be not less than six inches in height

Thank you for keeping your business and our community safe!

You have passed your inspection. If you have any questions, please call our office. **No violations have been noted at this time.**

Company Representative:

Janette Roig
7066
6/24/2021 11:17:10 AM

Signature valid only in mobile-eyes documents
Janette Roig
6/24/2021

Inspector:

Signature valid only in mobile-eyes documents
Mayra Leakakos
6/24/2021

Ref: 7066

Office DEPOT
OfficeMax

PALM BAY - (321) 723-7079
07/21/2021 3:30 PM

VTVTA5YP3U5XM648M

SALE	2703-3-6435-907828-21.7.2
677252 Same Day Matte	
8 @ 9.99	79.92
Instant Savings	-39.92
You Pay	**40.00SS**
Subtotal:	40.00
Sales Tax:	0.00
Total:	40.00
Visa 4809:	40.00

AUTH CODE 055220
TDS Chip Read
AID A0000000031010 VISA CREDIT
TVR 0080088000
CVS No Signature Required

GARY STERN 14*****915

Tax Exemption Number 27327334
Total Savings:
$39.92

****
WE WANT TO HEAR FROM YOU!
Visit survey.officedepot.com
and enter the survey code below:
D60T NGYC 60KB
****

BREVARD COUNTY
DISTRICT 5 COMMISSION OFFICE

Brevard COUNTY

CHARLENE BROWN
DIRECTOR OF COMMUNITY AFFAIRS

490 Centre Lake Dr. NE
Suite 175
Palm Bay, FL 32907
TEL: 321-253-6611

charlene.brown@brevardfl.gov

BREVARD COUNTY
DISTRICT 5 COMMISSION OFFICE

Brevard COUNTY

JANETTE ROIG
LEGISLATIVE AFFAIRS DIRECTOR

490 Centre Lake Dr. NE
Suite 175
Palm Bay, FL 32907
TEL: 321-253-6611

janette.roig@brevardfl.gov

EHIBIT "B"
BREVARD COUNTY PURCHASING CARD MONTHLY RECONCILIATION REPORT

PAGE ___ of ___

Cardholder's Name: Danielle Stern **Cardholder Phone Ext:** 321-253-6611 **Personnel #:** 11006140

Cardholder's Department: D5 Commissioner **Closing Date:** September 4th, 2021
(enter closing date of statement)

Date Purchased or Ordered	Date Received	Vendor Name	Description of Item Purchased	Amount Billed (indicate "Q" for quoted items)	Fund (4 digits)	Cost Center (6 digits)	GL Account # (7 digits)	Internal / Work Order # (6 or 7 digits)
08/04	08/05	Verizon Wireless	Cell Service	$58.94	0001	200090	5410100	
08/03	08/05	Print Depot	Name badges	$45.00	0001	200050	5490000	
08/05	08/06	Florida First Responder Apparel	Employee Shirts	$189.90	0001	200050	5490000	
08/31	09/01	USPS PO	Postages for Space Coast Honor Flight Letters	$7.70	0001	200050	5420200	

ADD'L PAGES SUBTOTAL ______

GRAND TOTAL (ALL PAGES) $301.54

(must agree to figure below)

SUMMARY OF FUND / COST CENTERS /G.L. ACCOUNT TO BILL

FUND	COST CTR	GL ACCT	INT. ORDER	Amount
0001	200090	5410100		$58.94
0001	200050	5490000		$45.00
0001	200050	5490000		$189.90
00021	200050	5420200		$7.70

(must agree to above figure)

TOTAL $301.54

I (Cardholder) have complied with the Purchase Card Administrative Order (AO-41) and have retained all required approvals for restrictive uses and quote log for purchases with a value in excess of $1000 and an expected life of more than one -Year such as automobiles and furniture; and computer equipment valued in excess of $750.

9/17/2021
Signature of Cardholder / Date

9/17/21
Signature of Approving Official / Date

mailed 9/23/21

BCC-223 –Word Document Revised 8/18/2017

BANK OF AMERICA

DANIELLE L STERN
FL BREVARD COUNTY BOC
XXXX-XXXX-XXXX-4809
August 05, 2021 - September 04, 2021

Purchasing Card

Cardholder Activity

Account Information

Mail Billing Inquiries to:
BANKCARD CENTER
PO Box 660441
Dallas, TX 75266-0441

TTY Hearing Impaired:
Dial "711"

Outside the U.S.:
1.509.353.6656 24 Hours

For Lost or Stolen Card:
1.888.449.2273 24 Hours

Payment Information

Statement Date	09/04/21
Credit Limit	$2,000
Cash Limit	$0
Days in Billing Cycle	31
Total Activity	$301.54

THIS IS NOT A BILL - DO NOT PAY

Account Summary

Credits	$0.00
Cash	$0.00
Purchases	$301.54
Other Debits	$0.00
Cash Fees	$0.00
Other Fees	$0.00
Total Activity	$301.54

Accounting Code: 0001/200050

Important Messages

Global Card Access – your card information whenever, wherever and however you need it. From the dashboard, you can quickly check your credit limit, balance, available credit and recent card activity. Other features like View PIN, Change PIN, Lock Card and Alerts help you keep your card secure. For added convenience, you can easily view or download your current statement up to 12 months of past statements. Visit www.bofa.com/globalcardaccess to register your card and start using Global Card Access today.

Transactions

Posting Date	*Transaction Date*	*Description*	*Reference Number*	*MCC*	*Charge*	*Credit*
08/05	08/04	VERIZONWRLSS*RTCCR VB 800-922-0204 FL	24692161216100693173347	4814	58.94	
08/05	08/03	PRINT DEPOT PALM BAY FL	24039641216207877800018	2741	45.00	
08/06	08/05	SQ *FLORIDA FIRST RESPONDSatellite BeaFL	24692161217100763641073	5691	189.90	
09/01	08/31	USPS PO 1157951479 MELBOURNE FL	24137461244001393009901	9402	7.70	

0000000 0000000 0000000 4715290017764809

Account Number: XXXX-XXXX-XXXX-4809
August 05, 2021 - September 04, 2021

BANK OF AMERICA
PO BOX 15731
WILMINGTON, DE 19886-5731

Total Activity $301.54

Danielle 9/17/2021
Cardholder Signature Date

DANIELLE L STERN
FL BREVARD COUNTY BOC
DISTRICT 5 COMMISSION OFFICE
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

**N0001939

Manager Signature 9/17/2021 Date

⑆549990011⑆0005001776480⑈

verizon✓

PO BOX 489
NEWARK, NJ 07101-0489

Manage Your Account	Account Number	Date Due
b2b.verizonwireless.com	742120929-00001	08/15/21

Change your address at
http://sso.verizonenterprise.com

Invoice Number	9884802648

COUNTY OF BREVARD
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

00166888
M107

Quick Bill Summary

Jun 24 – Jul 23

Previous Balance *(see back for details)*	$56.75
Payment – Thank You	–$56.75
Balance Forward	**$.00**
Monthly Charges	$58.38
Usage and Purchase Charges	
Voice	$.00
Messaging	$.00
Data	$.00
Surcharges and Other Charges & Credits	$.56
Taxes, Governmental Surcharges & Fees	$.00
Total Current Charges	**$58.94**

Total Charges Due by August 15, 2021 **$58.94**

Pay from phone	Pay on the Web	Questions:
#PMT (#768)	At b2b.verizonwireless.com	1.800.922.0204 or *611 from your phone

verizon✓

COUNTY OF BREVARD
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

Bill Date July 23, 2021
Account Number 742120929-00001
Invoice Number 9884802648

Total Amount Due by August 15, 2021

Make check payable to Verizon Wireless.
Please return this remit slip with payment.

$58.94

$ __ __ . __ __

paid 8/3/21
JR

PO BOX 660108
DALLAS, TX 75266-0108

9884802648010742120929000010000000589400000000058943

956

Notifications DANIELLE STERN

verizon Manage Account Support
(https://b2b.verizonwireless.com/sms/amsecure/landing/overview.go#/overview)

Location: Choose Location (https://b2b.verizonwireless.com/b2b/commerce/amsecure/chooseZip.go?purchasePath=&isChangeZip=true&isCommerce=true)

Cart Empty
Search

Back to billing

Make a payment

Thank you for your payment!

Transaction Id 1189874545

Print

Payment details

Billing Account	Payment amount	Payment method	Payment date
742120929-00001	$58.94	VISA	Aug 3, 2021

Want to do more?

Continue working with this account

742120929-00001

Or

Work on another account

Enter account number

Continue

Manage another payment

Set up Auto Pay

View payment history **(/sms/amsecure/payment/activity/show.go)**

(https://businessportals.verizonwireless.com/support/misc/hosted/bbb_vz_review.html)

Terms and Conditions (https://b2b.verizonwireless.com/sms/login/terms.go)

957

Roig, Janette

From:	Florida First Responder Apparel <floridafirstresponderapparel@gmail.com>
Sent:	Friday, September 17, 2021 10:33 AM
To:	Roig, Janette
Subject:	Invoice 2021114 from Florida First Responder Apparel- Paid in full 8/5/21 with Visa CC # ending 4809
Attachments:	Invoice_2021114_from_Florida_First_Responder_Apparel.pdf

[EXTERNAL EMAIL] DO NOT CLICK links or attachments unless you recognize the sender and know the content is safe.

INVOICE 2021114 DETAILS

FLORIDA FIRST RESPONDER Apparel

Florida First Responder Apparel

DUE 09/03/2021

$0.00

Print or save

Powered by QuickBooks

Dear Janette Roig,

Paid in full 8/5/21 with Visa CC # ending 4809

Thanks for your business!
Florida First Responder Apparel

Bill to Janette Roig
Brevard County Commissioner District 5 Team
490 Centre Lake Drive Suite 175
Palm Bay, FL 32907

Ship to Janette Roig
Brevard County Commissioner District 5 Team
490 Centre Lake Drive Suite 175
Palm Bay, FL 32907

Terms Net 30

Embroidery $25.00

Re-Embroidery- Janette Roig

5 X $5.00

Polo $164.90

Port Authority Silk Touch Performance w/custom embroidery- (4 for Charlene & 1 for Kristine)

5 X $32.98

Payment $189.90

Balance due $0.00

Paid in full 8/5/21 with Visa CC # ending 4809

Print or save

Florida First Responder Apparel

1361 Highway A1A Satellite Beach, FL 32937 US

(321) 586-9889

FloridaFirstResponderApparel@gmail.com

If you receive an email that seems fraudulent, please check with the business owner before paying.

intuit quickbooks

UNITED STATES POSTAL SERVICE.

WEST MELBOURNE
2305 MINTON RD
MELBOURNE, FL 32904-9998
(800)275-8777

08/31/2021 09:03 AM

Product	Qty	Unit Price	Price
Priority Mail® 2-Day	1		$7.70
Cape Canaveral, FL 32920			
Weight: 0 lb 11.20 oz			
Expected Delivery Date			
Fri 09/03/2021			
Tracking #:			
9505 5141 9918 1243 9601 58			
Insurance			$0.00
Up to $50.00 included			
Total			$7.70

Grand Total: $7.70

Credit Card Remitted $7.70
Card Name: VISA
Account #: XXXXXXXXXXXX4809
Approval #: 092897
Transaction #: 205
AID: A0000000031010 Chip
AL: VISA CREDIT
PIN: Not Required

****
USPS is experiencing unprecedented volume increases and limited employee availability due to the impacts of COVID-19. We appreciate your patience.
****

Text your tracking number to 28777 (2USPS) to get the latest status. Standard Message and Data rates may apply. You may also visit www.usps.com USPS Tracking or call 1-800-222-1811.

In a hurry? Self-service kiosks offer quick and easy check-out. Any Retail Associate can show you how.

Save this receipt as evidence of insurance. For information on filing an insurance claim go to https://www.usps.com/help/claims.htm

Preview your Mail
Track your Packages
Sign up for FREE @
https://informeddelivery.usps.com

Earn rewards on your business account purchases of Priority Mail labels with the USPS Loyalty program by using Click and Ship. Visit www.usps.com/smallbizloyalty for more info.

United States Postal Service
NOW HIRING NATIONWIDE
Career Path Positions with Benefits
Apply online at
www.usps.com/careers

All sales final on stamps and postage.
Refunds for guaranteed services only.
Thank you for your business

P

1480 I

info

BREVAF
COMMIS
490 CEN
SUITE 1
PALM B

KRISTIN

PRINT DEPOT
1480 PALM BAY RD NE
PALM BAY, FL 32905

08/03/2021 12:36:39

CREDIT CARD
VISA SALE

Card #	XXXXXXXXXXXX4809
Chip Card:	VISA CREDIT
AID:	A0000000031010
ATC:	000E
ARQC:	91F5007560896E49
SEQ #:	1
Batch #:	588
INVOICE	1
Approval Code:	013661
Entry Method:	Chip Read
Mode:	Issuer - PIN Bypassed
Tax Amount:	$0.00
Cust Code:	87438

SALE AMOUNT $45.00

CUSTOMER COPY

OT

Florida 32905
-5307
t-depot.net

INVOICE 87438

7/13/2021

1	e Roig - Commissioner - District 5 Team	15.00
1	ne Brown - Commissioner - District 5 Team	15.00

	30.00
Sales Tax	
Shipping	15.00
TOTAL	**45.00**

Received By ______________________ Date ______________

Special Instructions

Balance
Paid $ ________

☐ Cash
☐ Check # ________
☐ Credit Card

Date ______________

By ______________

962

EHIBIT "B"
BREVARD COUNTY PURCHASING CARD MONTHLY RECONCILIATION REPORT

Cardholder's Name: Danielle Stern **Cardholder Phone Ext:** 321-253-6611 **Personnel #:** 11006140

Cardholder's Department: D5 Commissioner **Closing Date:** November 4th, 2021
(enter closing date of statement)

Date Purchased or Ordered	Date Received	Vendor Name	Description of Item Purchased	Amount Billed (indicate "Q" for quoted items)	Fund (4 digits)	Cost Center (6 digits)	GL Account # (7 digits)	Internal / Work Order # (6 or 7 digits)
11/04	11/04	Verizon Wireless	Cell Service	$-52.91	0001	200090	5410100	
11/04	11/04	United States Postal Service	Letters for Space Coast Honor Flight	$5.80	0001	200050	5420200	

ADD'L PAGES SUBTOTAL ______

GRAND TOTAL (ALL PAGES) - $47.11 (must agree to figure below)

SUMMARY OF FUND / COST CENTERS /G.L. ACCOUNT TO BILL

FUND	COST CTR	GL ACCT	INT. ORDER	Amount
0001	200090	5410100		$-52.91
0001	200050	5420200		$5.80

(must agree to above figure) **TOTAL** - $47.11

I (Cardholder) have complied with the Purchase Card Administrative Order (AO-41) and have retained all required approvals for restrictive uses and quote log for purchases with a value in excess of $1000 and an expected life of more than one -Year such as automobiles and furniture; and computer equipment valued in excess of $750.

10/15/21

Signature of Cardholder / Date

Signature of Approving Official / Date

verizon

PO BOX 489
NEWARK, NJ 07101-0489

Manage Your Account	Account Number	Date Due
b2b.verizonwireless.com	742120929-00001	Do Not Pay

Change your address at
http://sso.verizonenterprise.com

Invoice Number	9886972028

COUNTY OF BREVARD
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

00172071
M108

Toder

Quick Bill Summary

Jul 24 – Aug 23

Previous Balance *(see back for details)*	$58.94
Payment – Thank You	–$58.94
Balance Forward	**$.00**
Monthly Charges	–$52.61
Usage and Purchase Charges	
Messaging	$.00
Data	$.00
Surcharges and Other Charges & Credits	–$.30
Taxes, Governmental Surcharges & Fees	$.00
Total Current Charges	**–$52.91**

Total Amount **–$52.91**

#321-522-8361

Pay from phone	Pay on the Web	Questions:
#PMT (#768)	At b2b.verizonwireless.com	1.800.922.0204 or *611 from your phone

verizon

COUNTY OF BREVARD
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

Bill Date	August 23, 2021
Account Number	742120929-00001
Invoice Number	9886972028

Credit Balance

DO NOT PAY

–$52.91

PO BOX 660108
DALLAS, TX 75266-0108

98869720280107421209290000100000005291000000052913

verizon

PO BOX 489
NEWARK, NJ 07101-0489

Manage Your Account	Account Number	Date Due
b2b.verizonwireless.com	742120929-00001	Do Not Pay

Change your address at http://sso.verizonenterprise.com

Invoice Number	9891346448

COUNTY OF BREVARD
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

00166197
M110

Quick Bill Summary

Sep 24 – Oct 23

Previous Balance *(see back for details)*	-$52.91
Payment	$52.91
Balance Forward	**$.00**
Taxes, Governmental Surcharges & Fees	$.00
Total Current Charges	**$.00**

Total Amount **$.00**

Pay from phone	Pay on the Web	Questions:
#PMT (#768)	At b2b.verizonwireless.com	1.800.922.0204 or *611 from your phone

verizon

COUNTY OF BREVARD
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

Bill Date	October 23, 2021
Account Number	742120929-00001
Invoice Number	9891346448

Courtesy Bill

DO NOT PAY **$.00**

PO BOX 660108
DALLAS, TX 75266-0108

989134644801074212092900001000000000000000000000003

UNITED STATES POSTAL SERVICE.

WEST MELBOURNE
2305 MINTON RD
MELBOURNE, FL 32904-9998
(800)275-8777

11/01/2021 09:04 AM

Product	Qty	Unit Price	Price
First-Class Mail® Package	1		$5.80

Cape Canaveral, FL 32920
Weight: 0 lb 11.70 oz
Estimated Delivery Date
Thu 11/04/2021
Tracking #:
9500 1141 9919 1305 9752 87

Grand Total: $5.80

Credit Card Remitted $5.80
Card Name: VISA
Account #: XXXXXXXXXXXX4809
Approval #: 072560
Transaction #: 437
AID: A0000000031010 Chip
AL: VISA CREDIT
PIN: Not Required

****
USPS is experiencing unprecedented volume increases and limited employee availability due to the impacts of COVID-19. We appreciate your patience.
****

Text your tracking number to 28777 (2USPS) to get the latest status. Standard Message and Data rates may apply. You may also visit www.usps.com USPS Tracking or call 1-800-222-1811.

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www.usps.com/careers

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Tell us about your experience.
Go to: https://postalexperience.com/Pos
or scan this code with your mobile dev

966

EHIBIT "B"
BREVARD COUNTY PURCHASING CARD MONTHLY RECONCILIATION REPORT

PAGE __ of __

Cardholder's Name: Danielle Stern **Cardholder Phone Ext:** 321-253-6611 **Personnel #:** 11006140

Cardholder's Department: D5 Commissioner **Closing Date:** January 4th, 2022

(enter closing date of statement)

Date Purchased or Ordered	Date Received	Vendor Name	Description of Item Purchased	Amount Billed (indicate "Q" for quoted items)	Fund (4 digits)	Cost Center (6 digits)	GL Account # (7 digits)	Internal / Work Order # (6 or 7 digits)
12/15	12/15	Panera	Items for open house	$75.36	0001	200050	5490000	
12/14	12/15	Publix	Items for open house	$170.11	0001	200050	5490000	

ADD'L PAGES SUBTOTAL ______

GRAND TOTAL (ALL PAGES) $245.97

(must agree to figure below)

SUMMARY OF FUND / COST CENTERS /G.L. ACCOUNT TO BILL

FUND	COST CTR	GL ACCT	INT. ORDER	Amount
0001	200050	5490000		~~$56.75~~ 75.86
0001	200050	5490000		$170.11

(must agree to above figure)

TOTAL $245.97

I (Cardholder) have complied with the Purchase Card Administrative Order (AO-41) and have retained all required approvals for restrictive uses and quote log for purchases with a value in excess of $1000 and an expected life of more than one -Year such as automobiles and furniture; and computer equipment valued in excess of $750

1/13/22

Signature of Cardholder / Date

1/21/22

Signature of Approving Official / Date

mailed 1/21/22

BANK OF AMERICA

DANIELLE L STERN
FL BREVARD COUNTY BOC
XXXX-XXXX-XXXX-**4809**
December 05, 2021 - January 04, 2022

Purchasing Card

Cardholder Activity

Account Information

Mail Billing Inquiries to:
BANKCARD CENTER
PO Box 660441
Dallas, TX 75266-0441

TTY Hearing Impaired:
Dial "711"

Outside the U.S.:
1.509.353.6656 24 Hours

For Lost or Stolen Card:
1.888.449.2273 24 Hours

Payment Information

Statement Date	01/04/22
Credit Limit	$2,000
Cash Limit	$0
Days in Billing Cycle	31
Total Activity	$245.97

THIS IS NOT A BILL - DO NOT PAY

Account Summary

Credits	$0.00
Cash	$0.00
Purchases	$245.97
Other Debits	$0.00
Cash Fees	$0.00
Other Fees	$0.00
Total Activity	$245.97

Accounting Code: 0001/200050

Important Messages

Global Card Access – your card information whenever, wherever and however you need it. From the dashboard, you can quickly check your credit limit, balance, available credit and recent card activity. Other features like View PIN, Change PIN, Lock Card and Alerts help you keep your card secure. For added convenience, you can easily view or download your current statement up to 12 months of past statements. Visit www.bofa.com/globalcardaccess to register your card and start using Global Card Access today.

Transactions

Posting Date	*Transaction Date*	*Description*	*Reference Number*	*MCC*	*Charge*	*Credit*
12/15	12/15	PANERA BREAD #202789 O 321-215-2500 FL	24692161349100341943521	5814	75.86	
12/15	12/14	PUBLIX #1688 INDIALANTIC FL	24137461349001683699993	5411	170.11	

0000000 0000000 0000000 4715290017764809

Account Number: XXXX-XXXX-XXXX-**4809**
December 05, 2021 - January 04, 2022

BANK OF AMERICA
PO BOX 15731
WILMINGTON, DE 19886-5731

Total Activity **$245.97**

Cardholder Signature 1/13/22 Date

Manager Signature 1/21/2 Date

DANIELLE L STERN
FL BREVARD COUNTY BOC
DISTRICT 5 COMMISSION OFFICE
490 CENTRE LAKE DR NE STE 175
PALM BAY, FL 32907-1177

**N0000388

:5499900 1 1:000500 17764809

Panera Bread Ordering Detail

Customer Copy

Thanks for your order!

Order Number
305807

Business
Catering

Order Type
Rapid Pickup

Fulfillment Time
12/14/2021@8:15 AM

Date Received
Dec.13@8:49 AM

If you need assistance with your order, please contact:

West Melbourne, FL - Palm Bay Road
Cafe #202789
245 Palm Bay Rd NE
West Melbourne, FL 32904
(321)215-2500

Customer Information

Ordered By
Danielle Stern
daniestern@gmail.com

Phone Number
321-508-7145

MyPanera #
703170416647

Order Summary

Pickup/Delivery
Rapid Pickup

People Served
40

Contact Name
Danielle Stern

Pickup Address
245 Palm Bay Rd NE
West Melbourne, FL 32904

Cafe Phone
(321)215-2500

Payment Information

Subtotal	$75.86
Discount	$0.00
Tax	$0.00
Tip	$0.00
Total	**$75.86**
Price Per Person	$1.90

Type	Card Number	Name	Amount
VISA	xxxx-xxxx-xxxx-4809	Danielle	$75.86

Color Tag/Dot ______

Bag/Box Count ______

Sandwich Production Time ______

Salad Production Time ______

Order Out of Cooler ______

Cafe Into Cooler ______

Tip ______

Signature ______ **Total** ______

Please consume, or refrigerate promptly

Order Checked By ______ **Bag** ______ **Of** ______

Order Details

	Qty	Description	Price
☐	3	Lt Rst Coffee Tote	$56.97
☐	1	Hot Chocolate Tote	$18.89

Included in your order: Napkins, utensils and plates for 40 people.

Subtotal $75.86

HAVE A CUP OF cheer

With Commissioner Kristine Zonka

Please join the District Five Commission Office for a continental breakfast at our annual Holiday Open House

December 14, 2021

9:00 a.m.– 12:00 p.m.

490 Centre Lake Drive NE, Suite 175

Palm Bay, FL 32907

Please help us with this year's charity, Elves for Elders.

Please bring either an Axe bath gift set for a man or a Dove bath gift set for a woman.

Publix

Publix at Indialantic
700 N. Miramar Ave
Indialantic, FL 32903
Store Manager: Bryan Johnson
321-953-6709

****
RECALL TRANSACTION
TERMINAL: 152
TRANS-NO: 2701
****

VIVA 8R DBL SIGN		13.99	T
TROP PURE OJ			
1 @ 3 FOR	10.00	3.34	F
You Saved	**1.05**		
TROP PURE OJ			
1 @ 3 FOR	10.00	3.33	F
You Saved	**1.05**		
TROP PURE OJ			
1 @ 3 FOR	10.00	3.33	F
You Saved	**1.05**		
FRESH FRUIT PLTR L		44.99	T F
BAKED GOODS		76.96	F
LOL SPRD CANOLA OI			
1 @ 2 FOR	5.12	2.56	F
DIXIE ED PLATES		3.83	T
DIXIE ED PLATES		3.83	T
ZIPLOC FREEZER BAG		6.71	T
PUB ED FORKS			
1 @ 2 FOR	5.19	2.60	T
PUB ED FORKS			
1 @ 2 FOR	5.19	2.59	T
ICE 10 LB		2.05	T F

TAX EXEMPT

Order Total 170.11
Grand Total 170.11
Credit Payment 170.11
Change 0.00

TAX FORGIVEN 5.64

Savings Summary
Special Price Savings 3.15

****
* **Your Savings at Publix** *
* **3.15** *
****

Receipt ID: 2412 0216 9075 1297 896

PRESTO!
Trace #: 520786
Reference #: 0074844923
Acct #: XXXXXXXXXXXX4809
Purchase VISA
Amount: $170.11
Auth #: 082762

CREDIT CARD PURCHASE