

FINANCE COMMITTEE MEETING

July 18, 2018 - 8:30 a.m.

AGENDA

This meeting of the Metropolitan Area Planning Agency Finance Committee will be conducted in compliance with the Nebraska Statutes of the Open Meeting Act. The Open Meeting Act is available for reference upon request.

A. MONTHLY FINANCIAL STATEMENTS (May)

1. [Bank Reconciliation \(American National Bank\) and Statements on Investments](#)
2. [Receipts and Expenditures](#)
3. [Schedule of Accounts Receivable/Accounts Payable](#)
4. [Statement of Financial Position](#)
5. [Statement of Revenues and Expenditures](#)

B. FOR FINANCE COMMITTEE APPROVAL

1. Contract Payments with exceptions
 - a. [Intercultural Senior Center – PMT #2 – Not to exceed \\$3,267.54](#)
 - b. [EDR Group – PMT #2- Not to exceed \\$4,351.50](#)
2. New Contract
 - a. [Verdis Group - \\$10,000.00](#)

C. RECOMMENDATIONS TO THE BOARD

1. Final Contract Payments
 - a. [City of Council Bluffs - \\$31,547.00](#)
 - b. [Southwest Iowa Planning Council - \\$106,000.00](#)
 - c. [Pottawattamie County GIS - \\$5,420.34](#)
2. Final Contract Payments with exceptions
 - a. [Heartland Family Services – Not to exceed \\$22,000.00](#)
 - b. [City of Omaha Planning– Not to exceed \\$3,960.66](#)
3. New Contracts
 - a. [Peter Kiewit Foundation - \\$170,000.00 & 170,000.00 match](#)
4. Travel
 - a. [Heartland 2050 Site-Visit to Pittsburgh, PA – 3 Staff & 27 Others - \\$57,804.00](#)
5. [Health Insurance Renewal](#)
6. [Audit Engagement Letter](#)

D. RECOMMENDATIONS TO FOUNDATION BOARD

1. New Contracts

- a. [Nebraska DED Rural Workforce Housing \\$351.40.00](#)

E. DISCUSSION/INFORMATION

1. NARC 2019 Conference Fundraising

F. OTHER

G. ADJOURNMENT

Executive Session: We reserve the right to enter into an executive session in order to protect the public interest with respect to discussion regarding litigation and personnel.



Metropolitan Area Planning Agency
Bank Reconciliation Statement
 May 2018

AMERICAN NATIONAL BANK

Balance per bank, May 31, 2018		\$857,731.26
Less: Checks Outstanding (5/31/18)		\$3,246.43
		<u>(\$3,246.43)</u>
Cash in bank May 31, 2017		<u>\$854,484.83</u>
General Ledger Balance, April 30, 2018		\$793,071.70
Cash Receipts		\$282,962.53
Less:		
Checks (5/2018)		\$90,190.16
ACH Payroll (5/2018)		\$64,321.14
ACH Federal Payroll Taxes		\$20,144.84
Nationwide Payroll Contribution		\$11,073.40
Blue Cross Blue Shield of NE Health Ins.		\$18,633.76
Nebraska State withholding Tax		\$3,495.84
Postalia		\$100.00
Bank Charges		\$24.45
Quarterly SUTA		\$0.00
Nebraska Sales tax		\$0.00
Pay Flex (5/2018)		\$2,496.79
Capital Business Systems		\$1,440.92
Transfer to NPAIT-Capitol Reserve		\$1,200.00
ACH VISA card (5/2018)		\$8,428.10
Advertising	\$28.97	
Auto - Gas/Maintenance	\$57.53	
Contracts (5-2-1-0)	\$607.86	
Data Processing	\$168.14	
Due from Employee	\$105.00	
Forums	\$1,160.95	
Membership - Reference Materials	\$444.65	
Miscellaneous Expenses	\$97.72	
Officials Expense (NARC)	\$3,316.48	
Supplies	\$471.67	
Tech Cart	\$399.99	
Other	\$71.68	
Travel & Conferences		\$1,969.13
NARC	\$1,845.97	
Other	\$123.16	
		<u>\$221,549.40</u>
General Ledger Balances, May 31, 2018		<u>\$854,484.83</u>
Less assigned deposits		<u>(\$396,873.94)</u>
Available Cash Balance		<u>\$457,610.89</u>

STATEMENT ON INVESTMENT
Treasury Bills
 May 2018

Deferred Payroll	Money Market		Securities America	\$ 4,466.52	\$ 814.36	0.040%
Deferred Payroll	CD	9/4/2018	Securities America	\$ 99,970.00	\$ 99,185.64	1.650%
Deferred Payroll	CD	7/23/2019	Securities America	\$ 1,045.71	\$ 1,068.15	2.100%
Equity	CD	7/23/2019	Securities America	\$ 103,524.84	\$ 103,931.85	2.100%
Equity	CD	5/1/2020	Securities America	\$ 49,098.00	\$ 50,000.00	1.750%
Equity	CD	9/27/2022	Securities America	\$ 62,894.00	\$ 64,342.15	2.300%
Equity	CD	9/28/2022	Securities America	\$ 44,970.00	\$35,657.85	0.000%
Undesignated	CD	10/4/2018	Securities America	\$ 99,846.00	\$ 100,000.00	1.450%
Accrued Interest				\$ 2,484.22		
Total				<u>\$ 468,299.29</u>		

NPAIT INVESTMENTS

MAPA	General	Capitol	Ortho Quads	Sarpy Co. Revolving	Special Projects	TOTAL
	MAPA	MAPA	(Aerial Photo)	Loan Fund	MAPA	MAPA
Acct #	001	002	004	005	008	
Beginning Balance	266,357.11	63,892.30	58,564.02	46,707.87	2,999.69	438,520.99
Sponsor Fees	188.76					188.76
Interest	314.17	76.40	69.03	55.06	3.54	518.20
Transfer from General checking		1,200.00				1,200.00
Ending Balance	266,860.04	65,168.70	58,633.05	46,762.93	3,003.23	440,427.95
Less Reserve for other projects	3,889.00					
Available for the Agency	<u>262,971.04</u>					

NPAIT CD Investments

Special Project	CD	6/29/2018	NPAIT	\$ 134,936.40	\$ 134,936.40	1.05%
Accrued Interest				\$ 956.36		
Total				<u>\$ 135,892.76</u>		

MAPA Foundation	Foundation	NDO	Washington Co.	TOTAL
	MAMA		Revolving Loan Fund	MAPA Foundation
Acct #	003	006	007	
Beginning Balance	33,191.37	130,849.82	185,554.74	349,595.93
Sponsor Fees				
Interest	39.12	155.34	218.73	413.19
Transfer from Foundation checking		1,687.00		1,687.00
Ending Balance	33,230.49	132,692.16	185,773.47	351,696.12

Metropolitan Area Planning Agency
Cash Receipts Report
 May 2018

Date	Type	Payer	Receipt Number	Deposit Number	Amount
5/4/2018	Check	Pottawattamie County, Iowa	1161	644	\$15.00
5/4/2018	Check	Douglas County	1162	644	\$15.00
5/11/2018	Check	Melissa Engel	1163	645	\$45.70
5/11/2018	Check	Omaha Public Power District	1164	645	\$15.00
5/11/2018	Received EFT	ECONOMIC DEVELOPMENT ADMINISTRATION	1168	646	\$15,000.00
5/11/2018	Received EFT	ECONOMIC DEVELOPMENT ADMINISTRATION	1169	646	\$1,500.00
5/15/2018	Received EFT	ECONOMIC DEVELOPMENT ADMINISTRATION	1170	646	\$1,000.00
5/18/2018	Check	Discovery Benefits	1172	647	\$623.20
5/18/2018	Check	IOWA COG	1173	647	\$15,300.00
5/18/2018	Check	Western Iowa Development Association	1174	647	\$1,100.00
5/22/2018	Received EFT	IOWA DEPARTMENT OF TRANSPORTATION	1175	648	\$11,319.00
5/22/2018	Received EFT	IOWA DEPARTMENT OF TRANSPORTATION	1176	648	\$42,053.00
5/25/2018	Check	Metro Transit	1177	649	\$2,428.37
5/25/2018	Check	Metro Transit	1177	649	\$15.00
5/25/2018	Check	Lower Platte South NRD	1178	649	\$13,000.00
5/25/2018	Check	City of Council Bluffs	1181	649	\$30.00
5/25/2018	Check	Karna	1182	649	\$38.93
5/25/2018	Check	Village of Arlington	1183	649	\$944.00
5/25/2018	Check	Dodge County	1184	649	\$13,000.00
5/25/2018	Received EFT	City of Council Bluffs	1185	650	\$10.33
5/31/2018	Received EFT	City of Lincoln	1186	651	\$165,510.00
					<u>\$282,962.53</u>

Account Description	Amount
Contracts	\$3,528.37
Due from Employee	\$38.93
Federal Revenue	\$70,872.00
Forums	\$10.33
Forums / Annual Dinner	\$90.00
Health Insurance Payable	\$623.20
Local Revenue	\$192,454.00
State Revenue	\$15,300.00
Supplies	\$45.70
<u>\$282,962.53</u>	

Metropolitan Area Planning Agency
Cash Disbursements
 May 2018

Check #	Date	Payee	Payments
16562	5/2/2018	AFLAC	\$400.08
16563	5/2/2018	BenefitPlansInc.	\$625.00
16564	5/2/2018	City of Omaha Cashier	\$17,136.12
16565	5/2/2018	The Daily Record	\$20.30
16566	5/2/2018	DAS State Accounting - Central Finance	\$3,035.63
16567	5/2/2018	Digital Express	\$49.00
16568	5/2/2018	First Nebr. Educators Credit U	\$75.00
16569	5/2/2018	Jeff Spiehs	\$52.77
16570	5/2/2018	Kissel, Kohout, E&S Associates LLC	\$833.33
16571	5/2/2018	Metro	\$7,175.00
16572	5/2/2018	Nishna Technologies	\$2,081.16
16573	5/2/2018	One Source The Background Check Co	\$31.00
16574	5/2/2018	Payless Office Products, Inc.	\$121.71
16575	5/2/2018	PLIC-SBD Grand Island	\$1,240.98
16576	5/2/2018	Sarpy County GIS	\$15,217.97
16577	5/2/2018	Sarpy County Planning	\$12,147.16
16578	5/2/2018	United Way	\$78.00
16579	5/16/2018	Blackbaud	\$4,906.15
16580	5/16/2018	CenturyLink	\$53.68
16581	5/16/2018	The Daily Nonpareil	\$39.84
16582	5/16/2018	The Daily Record	\$51.40
16583	5/16/2018	DAS State Accounting - Central Finance	\$1,160.15
16584	5/16/2018	Douglas County Treasurer	\$256.29
16585	5/16/2018	encompas	\$17,728.00
16586	5/16/2018	First Nebr. Educators Credit U	\$75.00
16587	5/16/2018	Francotyp-Postalia, Inc.	\$108.00
16588	5/16/2018	Griff's Delivery Service	\$30.00
16589	5/16/2018	Omaha Douglas Public Bldg.Comm	\$2.75
16590	5/16/2018	Omaha World-Herald	\$134.00
16591	5/16/2018	Standard Printing Company	\$319.00
16592	5/16/2018	Steve Platt	\$112.50
16593	5/16/2018	United Way	\$78.00
16594	5/16/2018	Marquez Paining	\$2,138.00
16595	5/21/2018	encompas	\$2,677.19

\$90,190.16

**Metropolitan Area Planning Agency
Cash Disbursements**

May 2018

Check Disbursement Detail

Advertising	111.54
Auto - Gas/Maintenance	292.1
Capital Outlays	22543.19
Data Processing	1375
Due from Employee	6.43
Employee Benefits/Withholding	1947.06
Equipment Maintenance	220.5
Membership - Reference Materials	134
Miscellaneous Expenses	31
Office Rent	5800
Postage	30
Prepaid Expenses	4906.15
Printing	368
Professional Services	1458.33
Supplies	121.71
Telephone	1241.46
Travel & Conferences	3021.28
MAPA Activites Subtotal	<u>\$ 43,607.75</u>

Contracts	2081.16
Pass Through Contracts - Planning	44501.25
Contracts Subtotal	<u>\$ 46,582.41</u>

Total Disbursements	<u><u>\$ 90,190.16</u></u>
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**Metropolitan Area Planning Agency
Payroll Register
May 2018**

Pay Types/Benefits	Hours	Amount
ER H.I.	0.00	\$5,752.60
ER H.I. CH	0.00	\$1,797.72
ER H.I. FA	0.00	\$5,407.52
ER H.I. SP	0.00	\$2,099.72
Hourly	360.50	\$5,975.25
Hourly - Reg	637.00	\$13,666.58
Life & Dis	0.00	\$432.42
Salary	0.00	\$72,372.00
	Gross Pay	\$92,013.83
	Gross Benefits	\$15,489.98
	Gross Pay/Benefits	\$107,503.81

Deductions/Employee Taxes	Adj. Gross	Amount
457-\$	N/A	\$1,000.00
457-%	N/A	\$992.58
457-Roth \$	N/A	\$100.00
457-Roth%	N/A	\$551.54
AFLAC	N/A	\$157.72
AT AFLAC	N/A	\$65.28
Credit Union	N/A	\$150.00
Dental Ins	N/A	\$727.92
Flex Plan 18	N/A	\$1,538.86
Health Ins	N/A	\$1,567.64
Pension Loan	N/A	\$240.16
Pension Plan	N/A	\$3,441.55
United Way	N/A	\$156.00
VISION	N/A	\$114.52
Zoo	N/A	\$159.88
Federal	82,473.04	\$6,695.00
Medicare	87,907.17	\$1,274.67
Soc Security	87,907.17	\$5,450.25
State - NE	82,473.04	\$3,309.12
	Deductions/Employee Taxes:	\$27,692.69

Employer Expenses	Adj. Gross	Amount
ER Pension	N/A	\$4,732.18
Medicare	87,907.17	\$1,274.67
Soc Security	87,907.17	\$5,450.25
SUTA	5,975.25	\$22.71
	Additional Employer Expenses:	\$11,479.81

GRAND TOTAL NET PAY: \$64,321.14

GRAND TOTAL EXPENSE: \$118,983.62

Metropolitan Area Planning Agency
Aged Accounts Receivable Report
 May 31, 2018

Aging Balance For	Client ID	Last Paid	current	31-60	61-90	over 90	Balance
Carol Vinton							
<i>Carol Vinton</i>			\$90.00	\$0.00	\$0.00	\$0.00	\$90.00
Totals for Carol Vinton:			\$90.00	\$0.00	\$0.00	\$0.00	\$90.00
Cass County							
		6/1/2018					
<i>Cass County</i>		6/1/2018	\$0.00	\$17,687.66	\$0.00	\$0.00	\$17,687.66
Totals for Cass County:			\$0.00	\$17,687.66	\$0.00	\$0.00	\$17,687.66
City of Bellevue							
		6/1/2018					
<i>City of Bellevue</i>		6/1/2018	\$20.66	\$0.00	\$0.00	\$0.00	\$20.66
Totals for City of Bellevue:			\$20.66	\$0.00	\$0.00	\$0.00	\$20.66
City of Blair							
		6/15/2018					
<i>City of Blair</i>		6/15/2018	\$10.33	\$4,810.66	\$0.00	\$0.00	\$4,820.99
Totals for City of Blair:			\$10.33	\$4,810.66	\$0.00	\$0.00	\$4,820.99
City of Council Bluffs							
		6/1/2018					
<i>City of Council Bluffs</i>		6/1/2018	\$0.00	\$0.00	\$0.00	\$30.00	\$30.00
Totals for City of Council Bluffs:			\$0.00	\$0.00	\$0.00	\$30.00	\$30.00
City of Fremont							
		6/15/2018					
<i>City of Fremont</i>		6/15/2018	\$0.00	\$10,032.66	\$0.00	\$0.00	\$10,032.66
Totals for City of Fremont:			\$0.00	\$10,032.66	\$0.00	\$0.00	\$10,032.66
City of Glenwood							
<i>City of Glenwood</i>			\$0.00	\$0.00	\$0.00	\$11.00	\$11.00
Totals for City of Glenwood:			\$0.00	\$0.00	\$0.00	\$11.00	\$11.00
City of Gretna							
		6/15/2018					
<i>City of Gretna</i>		6/15/2018	\$10.33	\$0.00	\$0.00	\$0.00	\$10.33
Totals for City of Gretna:			\$10.33	\$0.00	\$0.00	\$0.00	\$10.33
City of Lincoln							
		5/31/2018					
<i>City of Lincoln</i>		5/31/2018	\$168,893.50	\$0.00	\$0.00	\$0.00	\$168,893.50
Totals for City of Lincoln:			\$168,893.50	\$0.00	\$0.00	\$0.00	\$168,893.50

Metropolitan Area Planning Agency Aged Accounts Receivable Report

May 31, 2018

Aging Balance For	Client ID	Last Paid	current	31-60	61-90	over 90	Balance
City of Norfolk		6/1/2018					
<i>City of Norfolk</i>		6/1/2018	\$0.00	\$17,390.66	\$0.00	\$0.00	\$17,390.66
Totals for City of Norfolk:			\$0.00	\$17,390.66	\$0.00	\$0.00	\$17,390.66
City of Omaha		6/15/2018					
<i>City of Omaha</i>		6/15/2018	\$39,727.72	\$15.00	\$0.00	\$3,000.00	\$42,742.72
Totals for City of Omaha:			\$39,727.72	\$15.00	\$0.00	\$3,000.00	\$42,742.72
City of Papillion		6/15/2018					
<i>City of Papillion</i>		6/15/2018	\$30.99	\$0.00	\$0.00	\$0.00	\$30.99
Totals for City of Papillion:			\$30.99	\$0.00	\$0.00	\$0.00	\$30.99
City of Plattsmouth		6/1/2018					
<i>City of Plattsmouth</i>		6/1/2018	\$10.33	\$0.00	\$0.00	\$0.00	\$10.33
Totals for City of Plattsmouth:			\$10.33	\$0.00	\$0.00	\$0.00	\$10.33
City of Ralston		6/29/2018					
<i>City of Ralston</i>		6/29/2018	\$10.33	\$0.00	\$0.00	\$0.00	\$10.33
Totals for City of Ralston:			\$10.33	\$0.00	\$0.00	\$0.00	\$10.33
City of Schuyler		6/1/2018					
<i>City of Schuyler</i>		6/1/2018	\$0.00	\$5,007.66	\$0.00	\$0.00	\$5,007.66
Totals for City of Schuyler:			\$0.00	\$5,007.66	\$0.00	\$0.00	\$5,007.66
City of Wahoo		6/22/2018					
<i>City of Wahoo</i>		6/22/2018	\$0.00	\$2,308.00	\$0.00	\$0.00	\$2,308.00
Totals for City of Wahoo:			\$0.00	\$2,308.00	\$0.00	\$0.00	\$2,308.00
City of Walnut		6/15/2018					
<i>City of Walnut</i>		6/15/2018	\$1,474.32	\$0.00	\$0.00	\$0.00	\$1,474.32
Totals for City of Walnut:			\$1,474.32	\$0.00	\$0.00	\$0.00	\$1,474.32
Douglas County 911		6/15/2018					
<i>Douglas County 911</i>		6/15/2018	\$4,674.00	\$0.00	\$0.00	\$0.00	\$4,674.00
Totals for Douglas County 911:			\$4,674.00	\$0.00	\$0.00	\$0.00	\$4,674.00

Metropolitan Area Planning Agency Aged Accounts Receivable Report

May 31, 2018

Aging Balance For	Client ID	Last Paid	current	31-60	61-90	over 90	Balance
Douglas County Administrative / Commissioners		6/1/2018					
<i>Douglas County Administrative / Commissioners</i>		6/1/2018	\$1,558.00	\$0.00	\$0.00	\$0.00	\$1,558.00
Totals for Douglas County Administrative / Co			\$1,558.00	\$0.00	\$0.00	\$0.00	\$1,558.00
Douglas County Assessor / Deeds							
<i>Douglas County Assessor / Deeds</i>			\$20,255.00	\$0.00	\$0.00	\$0.00	\$20,255.00
Totals for Douglas County Assessor / Deeds:			\$20,255.00	\$0.00	\$0.00	\$0.00	\$20,255.00
Douglas County Emergency Management		11/14/2014					
<i>Douglas County Emergency Management</i>		11/14/2014	\$779.00	\$0.00	\$0.00	\$0.00	\$779.00
Totals for Douglas County Emergency Manag			\$779.00	\$0.00	\$0.00	\$0.00	\$779.00
Douglas County Engineers		6/15/2018					
<i>Douglas County Engineers</i>		6/15/2018	\$12,984.00	\$0.00	\$0.00	\$0.00	\$12,984.00
Totals for Douglas County Engineers:			\$12,984.00	\$0.00	\$0.00	\$0.00	\$12,984.00
Douglas County Environmental Services							
<i>Douglas County Environmental Services</i>			\$2,337.00	\$0.00	\$0.00	\$0.00	\$2,337.00
Totals for Douglas County Environmental Ser			\$2,337.00	\$0.00	\$0.00	\$0.00	\$2,337.00
Douglas County Health Department							
<i>Douglas County Health Department</i>			\$4,674.00	\$0.00	\$0.00	\$0.00	\$4,674.00
Totals for Douglas County Health Department			\$4,674.00	\$0.00	\$0.00	\$0.00	\$4,674.00
Douglas County Sheriff							
<i>Douglas County Sheriff</i>			\$1,558.00	\$0.00	\$0.00	\$0.00	\$1,558.00
Totals for Douglas County Sheriff:			\$1,558.00	\$0.00	\$0.00	\$0.00	\$1,558.00
FEDERAL TRANSIT ADMINISTRATION		6/27/2018					
<i>FEDERAL TRANSIT ADMINISTRATION</i>		6/27/2018	\$0.00	\$134,982.72	\$0.00	\$0.00	\$134,982.72
Totals for FEDERAL TRANSIT ADMINISTRATIK			\$0.00	\$134,982.72	\$0.00	\$0.00	\$134,982.72
Greater Omaha Chamber of Commerce		4/20/2018					
<i>Greater Omaha Chamber of Commerce</i>		4/20/2018	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Totals for Greater Omaha Chamber of Comme			\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

Metropolitan Area Planning Agency Aged Accounts Receivable Report

May 31, 2018

Aging Balance For	Client ID	Last Paid	current	31-60	61-90	over 90	Balance
Greg Youell		4/27/2018					
<i>Greg Youell</i>		4/27/2018	\$15.00	\$0.00	\$0.00	\$0.00	\$15.00
Totals for Greg Youell:			\$15.00	\$0.00	\$0.00	\$0.00	\$15.00
IOWA COG		6/22/2018					
<i>IOWA COG</i>		6/22/2018	\$0.00	\$0.00	\$0.00	\$500.00	\$500.00
Totals for IOWA COG:			\$0.00	\$0.00	\$0.00	\$500.00	\$500.00
IOWA WEST FOUNDATION		8/25/2017					
<i>IOWA WEST FOUNDATION</i>		8/25/2017	\$0.00	\$0.00	\$0.00	\$16,250.00	\$16,250.00
Totals for IOWA WEST FOUNDATION:			\$0.00	\$0.00	\$0.00	\$16,250.00	\$16,250.00
Melissa Engel		5/11/2018					
<i>Melissa Engel</i>		5/11/2018	\$90.00	\$0.00	\$0.00	\$0.00	\$90.00
Totals for Melissa Engel:			\$90.00	\$0.00	\$0.00	\$0.00	\$90.00
Metropolitan Utilities District		6/15/2018					
<i>Metropolitan Utilities District</i>		6/15/2018	\$10,000.00	\$5,000.00	\$0.00	\$0.00	\$15,000.00
Totals for Metropolitan Utilities District:			\$10,000.00	\$5,000.00	\$0.00	\$0.00	\$15,000.00
Mills County Emergency Management		11/22/2013					
<i>Mills County Emergency Management</i>		11/22/2013	\$0.00	\$0.00	\$0.00	\$8,404.44	\$8,404.44
Totals for Mills County Emergency Manageme			\$0.00	\$0.00	\$0.00	\$8,404.44	\$8,404.44
Mills County		4/27/2018					
<i>Mills County</i>		4/27/2018	\$0.00	\$17,961.66	\$0.01	\$0.00	\$17,961.67
Totals for Mills County:			\$0.00	\$17,961.66	\$0.01	\$0.00	\$17,961.67
NDOT- CMAQ		6/25/2018					
<i>NDOT- CMAQ</i>		6/25/2018	\$24,466.48	\$0.00	\$39,934.20	\$0.00	\$64,400.68
Totals for NDOT- CMAQ:			\$24,466.48	\$0.00	\$39,934.20	\$0.00	\$64,400.68
NDOT		5/11/2018					
<i>NDOT</i>		5/11/2018	\$0.00	\$243,449.81	\$0.00	\$0.00	\$243,449.81
Totals for NDOT:			\$0.00	\$243,449.81	\$0.00	\$0.00	\$243,449.81

Metropolitan Area Planning Agency Aged Accounts Receivable Report

May 31, 2018

Aging Balance For	Client ID	Last Paid	current	31-60	61-90	over 90	Balance
Nebraska Ethanol Industry Coalition		6/29/2018					
<i>Nebraska Ethanol Industry Coalition</i>		6/29/2018	\$0.00	\$0.00	\$0.00	\$7,200.00	\$7,200.00
Totals for Nebraska Ethanol Industry Coalitio			\$0.00	\$0.00	\$0.00	\$7,200.00	\$7,200.00
Omaha Airport Authority		6/15/2018					
<i>Omaha Airport Authority</i>		6/15/2018	\$15,000.00	\$0.00	\$0.00	\$0.00	\$15,000.00
Totals for Omaha Airport Authority:			\$15,000.00	\$0.00	\$0.00	\$0.00	\$15,000.00
Papio-Missouri River Natural Resources District		6/22/2018					
<i>Papio-Missouri River Natural Resources District</i>		6/22/2018	\$50,000.00	\$0.00	\$0.00	\$0.00	\$50,000.00
Totals for Papio-Missouri River Natural Resou			\$50,000.00	\$0.00	\$0.00	\$0.00	\$50,000.00
Pottawattamie County, Iowa		5/4/2018					
<i>Pottawattamie County, Iowa</i>		5/4/2018	\$63,477.37	\$0.00	\$0.00	\$15.00	\$63,492.37
Totals for Pottawattamie County, Iowa:			\$63,477.37	\$0.00	\$0.00	\$15.00	\$63,492.37
Rita Sanders							
<i>Rita Sanders</i>			\$65.00	\$0.00	\$0.00	\$0.00	\$65.00
Totals for Rita Sanders:			\$65.00	\$0.00	\$0.00	\$0.00	\$65.00
Robert Blair							
<i>Robert Blair</i>			\$10.33	\$0.00	\$0.00	\$0.00	\$10.33
Totals for Robert Blair:			\$10.33	\$0.00	\$0.00	\$0.00	\$10.33
Sarpy County		6/1/2018					
<i>Sarpy County</i>		6/1/2018	\$30,900.00	\$35,000.00	\$0.00	\$0.00	\$65,900.00
Totals for Sarpy County:			\$30,900.00	\$35,000.00	\$0.00	\$0.00	\$65,900.00
Saunders County		6/1/2018					
<i>Saunders County</i>		6/1/2018	\$0.00	\$14,809.00	\$0.00	\$0.00	\$14,809.00
Totals for Saunders County:			\$0.00	\$14,809.00	\$0.00	\$0.00	\$14,809.00
Security National Trust							
<i>Security National Trust</i>			\$0.00	\$0.00	\$0.00	\$35.00	\$35.00
Totals for Security National Trust:			\$0.00	\$0.00	\$0.00	\$35.00	\$35.00

Metropolitan Area Planning Agency Aged Accounts Receivable Report

May 31, 2018

Aging Balance For	Client ID	Last Paid	current	31-60	61-90	over 90	Balance
The Lerner Company		6/15/2018					
<i>The Lerner Company</i>		6/15/2018	\$128.40	\$0.00	\$0.00	\$0.00	\$128.40
Totals for The Lerner Company:			\$128.40	\$0.00	\$0.00	\$0.00	\$128.40
Wellcom							
<i>Wellcom</i>			\$500.00	\$0.00	\$0.00	\$0.00	\$500.00
Totals for Wellcom:			\$500.00	\$0.00	\$0.00	\$0.00	\$500.00
Grand Totals:			\$453,750.09	\$508,455.49	\$39,934.21	\$35,445.44	\$1,037,585.23

Metropolitan Area Planning Agency
Aged Accounts Payable Report
 May 31, 2018

Vendor Name	Trans. No.	Description	current	31-60	61-90	over 90	Credits	Net Due
AFLAC								
AFLAC	552254	May	\$227.28	\$0.00	\$0.00	\$0.00	\$0.00	\$227.28
		<i>Totals for AFLAC:</i>	<u>\$227.28</u>	<u>\$0.00</u>	<u>\$0.00</u>	<u>\$0.00</u>	<u>\$0.00</u>	<u>\$227.28</u>
APF fbo My Staff, Inc.								
APF fbo My Staff, Inc.	10339		\$819.20	\$0.00	\$0.00	\$0.00	\$0.00	\$819.20
		<i>Totals for APF fbo My Staff, Inc.:</i>	<u>\$819.20</u>	<u>\$0.00</u>	<u>\$0.00</u>	<u>\$0.00</u>	<u>\$0.00</u>	<u>\$819.20</u>
City of Omaha Cashier								
City of Omaha Cashier	151559		\$7,856.58	\$0.00	\$0.00	\$0.00	\$0.00	\$7,856.58
		<i>Totals for City of Omaha Cashier:</i>	<u>\$7,856.58</u>	<u>\$0.00</u>	<u>\$0.00</u>	<u>\$0.00</u>	<u>\$0.00</u>	<u>\$7,856.58</u>
The Daily Record								
The Daily Record	112783		\$21.50	\$0.00	\$0.00	\$0.00	\$0.00	\$21.50
The Daily Record	113067		\$20.90	\$0.00	\$0.00	\$0.00	\$0.00	\$20.90
		<i>Totals for The Daily Record:</i>	<u>\$42.40</u>	<u>\$0.00</u>	<u>\$0.00</u>	<u>\$0.00</u>	<u>\$0.00</u>	<u>\$42.40</u>
DAS State Accounting - Central Finance								
DAS State Accounting - Central Finance	1115669		\$44.58	\$0.00	\$0.00	\$0.00	\$0.00	\$44.58
		<i>Totals for DAS State Accounting - Central Finance:</i>	<u>\$44.58</u>	<u>\$0.00</u>	<u>\$0.00</u>	<u>\$0.00</u>	<u>\$0.00</u>	<u>\$44.58</u>
DMANDZ Industrial, LLC								
DMANDZ Industrial, LLC	174691		\$214.00	\$0.00	\$0.00	\$0.00	\$0.00	\$214.00
		<i>Totals for DMANDZ Industrial, LLC:</i>	<u>\$214.00</u>	<u>\$0.00</u>	<u>\$0.00</u>	<u>\$0.00</u>	<u>\$0.00</u>	<u>\$214.00</u>
Douglas County Public School District 001								
Douglas County Public School District 001	31810	H2050 Summit Advertising	\$380.00	\$0.00	\$0.00	\$0.00	\$0.00	\$380.00
		<i>Totals for Douglas County Public School District 001:</i>	<u>\$380.00</u>	<u>\$0.00</u>	<u>\$0.00</u>	<u>\$0.00</u>	<u>\$0.00</u>	<u>\$380.00</u>
encompas								
encompas	11185		\$4,971.91	\$0.00	\$0.00	\$0.00	\$0.00	\$4,971.91
		<i>Totals for encompas:</i>	<u>\$4,971.91</u>	<u>\$0.00</u>	<u>\$0.00</u>	<u>\$0.00</u>	<u>\$0.00</u>	<u>\$4,971.91</u>
Fidelity Security Life Insurance Co. (eye med)								
Fidelity Security Life Insurance Co. (eye med)	163492507		\$123.98	\$0.00	\$0.00	\$0.00	\$0.00	\$123.98
		<i>Totals for Fidelity Security Life Insurance Co. (eye med):</i>	<u>\$123.98</u>	<u>\$0.00</u>	<u>\$0.00</u>	<u>\$0.00</u>	<u>\$0.00</u>	<u>\$123.98</u>
Firespring								
Firespring	327642	Katie Preister business cards	\$66.92	\$0.00	\$0.00	\$0.00	\$0.00	\$66.92
		<i>Totals for Firespring:</i>	<u>\$66.92</u>	<u>\$0.00</u>	<u>\$0.00</u>	<u>\$0.00</u>	<u>\$0.00</u>	<u>\$66.92</u>
First Nebr. Educators Credit U								

Metropolitan Area Planning Agency
Aged Accounts Payable Report
 May 31, 2018

Vendor Name	Trans. No.	Description	current	31-60	61-90	over 90	Credits	Net Due
First Nebr. Educators Credit U	5.19.18	5-19-18 Payroll Contribution	\$75.00	\$0.00	\$0.00	\$0.00	\$0.00	\$75.00
		<i>Totals for First Nebr. Educators Credit U:</i>	<i>\$75.00</i>	<i>\$0.00</i>	<i>\$0.00</i>	<i>\$0.00</i>	<i>\$0.00</i>	<i>\$75.00</i>
Florence Home for the Aged								
Florence Home for the Aged	3.31.18	Quarter 3	\$13,376.60	\$0.00	\$0.00	\$0.00	\$0.00	\$13,376.60
		<i>Totals for Florence Home for the Aged:</i>	<i>\$13,376.60</i>	<i>\$0.00</i>	<i>\$0.00</i>	<i>\$0.00</i>	<i>\$0.00</i>	<i>\$13,376.60</i>
Griff's Delivery Service								
Griff's Delivery Service	13894		\$15.00	\$0.00	\$0.00	\$0.00	\$0.00	\$15.00
		<i>Totals for Griff's Delivery Service:</i>	<i>\$15.00</i>	<i>\$0.00</i>	<i>\$0.00</i>	<i>\$0.00</i>	<i>\$0.00</i>	<i>\$15.00</i>
Ideal Pure Water								
Ideal Pure Water	1506080		\$42.90	\$0.00	\$0.00	\$0.00	\$0.00	\$42.90
		<i>Totals for Ideal Pure Water:</i>	<i>\$42.90</i>	<i>\$0.00</i>	<i>\$0.00</i>	<i>\$0.00</i>	<i>\$0.00</i>	<i>\$42.90</i>
Lovgren Marketing Group								
Lovgren Marketing Group	19602		\$0.00	\$8,192.50	\$0.00	\$0.00	\$0.00	\$8,192.50
		<i>Totals for Lovgren Marketing Group:</i>	<i>\$0.00</i>	<i>\$8,192.50</i>	<i>\$0.00</i>	<i>\$0.00</i>	<i>\$0.00</i>	<i>\$8,192.50</i>
Megan Walker								
Megan Walker	5.29.18	Tuition Reimbursement	\$1,064.40	\$0.00	\$0.00	\$0.00	\$0.00	\$1,064.40
		<i>Totals for Megan Walker:</i>	<i>\$1,064.40</i>	<i>\$0.00</i>	<i>\$0.00</i>	<i>\$0.00</i>	<i>\$0.00</i>	<i>\$1,064.40</i>
Metro								
Metro	34019	Quarter 3	\$0.00	\$27,456.75	\$0.00	\$0.00	\$0.00	\$27,456.75
Metro	34173	2017 FLU SHOTS	\$225.00	\$0.00	\$0.00	\$0.00	\$0.00	\$225.00
		<i>Totals for Metro:</i>	<i>\$225.00</i>	<i>\$27,456.75</i>	<i>\$0.00</i>	<i>\$0.00</i>	<i>\$0.00</i>	<i>\$27,681.75</i>
MyStaff, Inc.								
MyStaff, Inc.	50030	Direct Hire Placement	\$3,000.00	\$0.00	\$0.00	\$0.00	\$0.00	\$3,000.00
		<i>Totals for MyStaff, Inc.:</i>	<i>\$3,000.00</i>	<i>\$0.00</i>	<i>\$0.00</i>	<i>\$0.00</i>	<i>\$0.00</i>	<i>\$3,000.00</i>
Omaha's Henry Doorly Zoo and Aquarium								
Omaha's Henry Doorly Zoo and Aquarium	25732		\$946.00	\$0.00	\$0.00	\$0.00	\$0.00	\$946.00
		<i>Totals for Omaha's Henry Doorly Zoo and Aquarium:</i>	<i>\$946.00</i>	<i>\$0.00</i>	<i>\$0.00</i>	<i>\$0.00</i>	<i>\$0.00</i>	<i>\$946.00</i>
One Source The Background Check Co								
One Source The Background Check Co	3016-2018053		\$93.00	\$0.00	\$0.00	\$0.00	\$0.00	\$93.00
		<i>Totals for One Source The Background Check Co:</i>	<i>\$93.00</i>	<i>\$0.00</i>	<i>\$0.00</i>	<i>\$0.00</i>	<i>\$0.00</i>	<i>\$93.00</i>
Pleasure Your Palate Catering								
Pleasure Your Palate Catering	3512	MAMA Luncheon	\$325.01	\$0.00	\$0.00	\$0.00	\$0.00	\$325.01

Metropolitan Area Planning Agency
Aged Accounts Payable Report
 May 31, 2018

Vendor Name	Trans. No.	Description	current	31-60	61-90	over 90	Credits	Net Due
		<i>Totals for Pleasure Your Palate Catering:</i>	\$325.01	\$0.00	\$0.00	\$0.00	\$0.00	\$325.01
PLIC-SBD Grand Island								
PLIC-SBD Grand Island	5.18.18		\$1,240.98	\$0.00	\$0.00	\$0.00	\$0.00	\$1,240.98
		<i>Totals for PLIC-SBD Grand Island:</i>	\$1,240.98	\$0.00	\$0.00	\$0.00	\$0.00	\$1,240.98
Pottawattamie County GIS								
Pottawattamie County GIS	Jan1-Mar31		\$0.00	\$9,136.32	\$0.00	\$0.00	\$0.00	\$9,136.32
		<i>Totals for Pottawattamie County GIS:</i>	\$0.00	\$9,136.32	\$0.00	\$0.00	\$0.00	\$9,136.32
Praetorian Digital								
Praetorian Digital	0101340056	Grant Finder Subscription	\$1,495.00	\$0.00	\$0.00	\$0.00	\$0.00	\$1,495.00
		<i>Totals for Praetorian Digital:</i>	\$1,495.00	\$0.00	\$0.00	\$0.00	\$0.00	\$1,495.00
Smart Growth America								
Smart Growth America	18-SGA-284		\$12,500.00	\$0.00	\$0.00	\$0.00	\$0.00	\$12,500.00
		<i>Totals for Smart Growth America:</i>	\$12,500.00	\$0.00	\$0.00	\$0.00	\$0.00	\$12,500.00
The Union for Contemporary Art								
The Union for Contemporary Art	5.30.18		\$300.00	\$0.00	\$0.00	\$0.00	\$0.00	\$300.00
		<i>Totals for The Union for Contemporary Art:</i>	\$300.00	\$0.00	\$0.00	\$0.00	\$0.00	\$300.00
United Way								
United Way	5.19.18	5-19-18 Payroll Contribution	\$78.00	\$0.00	\$0.00	\$0.00	\$0.00	\$78.00
		<i>Totals for United Way:</i>	\$78.00	\$0.00	\$0.00	\$0.00	\$0.00	\$78.00
Verizon								
Verizon	9807458665		\$84.45	\$0.00	\$0.00	\$0.00	\$0.00	\$84.45
		<i>Totals for Verizon:</i>	\$84.45	\$0.00	\$0.00	\$0.00	\$0.00	\$84.45
WellCom								
WellCom	3858		\$500.00	\$0.00	\$0.00	\$0.00	\$0.00	\$500.00
		<i>Totals for WellCom:</i>	\$500.00	\$0.00	\$0.00	\$0.00	\$0.00	\$500.00
		GRAND TOTALS:	\$50,108.19	\$44,785.57	\$0.00	\$0.00	\$0.00	\$94,893.76

A total of 31 transaction(s) listed

Metropolitan Area Planning Agency
Statement of Financial Position
 May 31, 2018

		<u>Actual</u>
Assets		
10-1000	Petty Cash	\$150.37
10-1005	Paypal Account	\$30.19
10-1010	Cash - American National Bank	\$854,484.83
10-1030	Treasury Bills	\$468,299.29
10-1040	NPAIT Investments General	\$262,971.04
10-1045	NPAIT Investments Capitol Reserve	\$65,168.70
10-1050	NPAIT Investments Ortho Quads	\$58,633.05
10-1100	Accounts Receivable	\$1,037,585.23
10-1110	Due To/Due From Funds	(\$1,029,196.63)
10-1145	Employee Elected Deduction	\$519.24
10-1300	Prepaid Expenses	\$14,919.32
10-1310	Prepaid Insurance	\$1,593.75
11-1110	Due To/Due From Funds	(\$2,023.08)
12-1055	NPAIT Investments Sarpy Co. Revolving Loan	\$46,762.93
13-1200	Furniture, Fixtures & Equipment	\$173,797.79
13-1205	Vehicles	\$51,215.35
13-1220	Less: Accumulated Depreciation	\$164,227.59
15-1040	NPAIT Investments General	\$3,889.00
15-1045	NPAIT Investments Special Projects	\$3,003.23
15-1057	NPAIT CD Investments	\$135,892.76
15-1110	Due To/Due From Funds	\$1,030,886.95
20-1020	Cash - ANB Foundation	\$44,901.72
20-1060	NPAIT Investments Foundation	\$33,230.49
20-1065	NPAIT Investments FD NDO	\$132,692.16
20-1070	NPAIT Investments FD Washington County Revolving	\$185,773.47
20-1110	Due To/Due From Funds	\$332.76
20-1415	Note Receivable - Sterling Ambitions, LLC	\$29,165.00
20-1425	Note Receivable KB Quality Meats	\$12,782.00
40-1100	Accounts Receivable	\$291,356.87
Total Assets		<u><u>\$3,744,590.19</u></u>

Liabilities and Fund Balance

Liabilities

10-2000	Accounts Payable	\$94,484.30
10-2105	Nebraska Withholding	\$3,379.12
10-2115	AFLAC W/H Payable	(\$136.01)
10-2125	Dental Insurance W/H Payable	(\$1,092.38)
10-2126	Life & Disability Insurance Payable	(\$675.35)
10-2130	Flex W/H Payable	(\$431.62)
10-2132	Vision Insurance Payable	(\$44.04)
10-2135	Health Insurance Payable	(\$14,219.91)

Metropolitan Area Planning Agency

Statement of Financial Position

May 31, 2018

		<u>Actual</u>
10-2160	SUTA Tax	\$37.64
10-2170	Nebraska Sales Tax Payable	\$8.40
10-2210	Accrued Compensated Absences	\$104,954.31
10-2220	Accrued Audit Fees	\$10,800.00
20-2000	Accounts Payable	\$409.26
20-2430	Deferred Revolving Loan	\$261,801.42
40-2000	Accounts Payable	\$462,232.00
Total Liabilities		<u>\$921,507.14</u>
Fund Balance		
10-3000	Fund Balance Undesignated	\$1,117,105.15
10-3010	Fund Balance Assigned	\$65,988.77
10-3020	Fund Balance Committed	\$355,000.00
11-3000	Fund Balance Undesignated	(\$2,023.08)
12-3100	Fund Balance Restricted	\$46,762.93
13-3005	Invested in Capital Assets	\$60,785.55
15-3010	Fund Balance Assigned	\$1,173,671.94
20-3000	Fund Balance Undesignated	\$76,075.71
20-3100	Fund Balance Restricted	\$100,591.21
40-3010	Fund Balance Assigned	(\$170,875.13)
Total Fund Balance		<u>\$2,823,083.05</u>
Total Liabilities and Fund Balance		<u><u>\$3,744,590.19</u></u>

Metropolitan Area Planning Agency Statement of Revenues and Expenditures

May 31, 2018

		5/1/18 - 5/31/18		7/1/17 - 5/31/18		% to YTD Budget	Prior Year to Date	Increase/ (Dec YTD to PYTD	FY 2018 Budget
		Actual	Budget	Actual YTD	Budget YTD				
Revenues									
Federal and State Revenue									
10-4100	Federal Revenue	\$41,966.48	(\$60,800.00)	\$2,336,628.71	\$2,873,001.75	81.33 %	\$1,523,711.96	53.35 %	\$3,850,969.00
10-4200	State Revenue	\$0.00	\$0.00	\$106,789.37	\$114,432.00	93.32 %	\$146,845.33	(27.28)%	\$152,576.00
Total Federal and State Revenue		<u>\$41,966.48</u>	<u>(\$60,800.00)</u>	<u>\$2,443,418.08</u>	<u>\$2,987,433.75</u>	<u>81.79 %</u>	<u>\$1,670,557.29</u>	<u>46.26 %</u>	<u>\$4,003,545.00</u>
Local Government Revenue									
10-4300	Local Revenue	\$0.00	\$0.00	\$399,512.00	\$392,378.00	101.82 %	\$391,171.00	2.13 %	\$392,378.00
10-4350	Heartland 2050 Local Revenue	\$0.00	\$0.00	\$41,223.33	\$59,400.00	69.40 %	\$35,826.04	15.07 %	\$79,200.00
15-4300	Local Revenue	\$426,796.93	\$0.00	\$784,258.89	\$360,000.00	217.85 %	\$436,103.99	79.83 %	\$711,475.00
Total Local Government Revenue		<u>\$426,796.93</u>	<u>\$0.00</u>	<u>\$1,224,994.22</u>	<u>\$811,778.00</u>	<u>150.90 %</u>	<u>\$863,101.03</u>	<u>41.93 %</u>	<u>\$1,183,053.00</u>
Charges for Services									
10-4400	Contracts	\$5,002.69	\$10,000.00	\$77,954.97	\$110,000.00	70.87 %	\$35,405.00	120.18 %	\$120,375.00
Total Charges for Services		<u>\$5,002.69</u>	<u>\$10,000.00</u>	<u>\$77,954.97</u>	<u>\$110,000.00</u>	<u>70.87 %</u>	<u>\$35,405.00</u>	<u>120.18 %</u>	<u>\$120,375.00</u>
Forums Revenue									
10-4500	Forums/Annual Dinner	\$0.00	\$1,887.00	\$21,121.00	\$13,887.00	152.09 %	\$4,621.00	357.07 %	\$17,887.00
Total Forums Revenue		<u>\$0.00</u>	<u>\$1,887.00</u>	<u>\$21,121.00</u>	<u>\$13,887.00</u>	<u>152.09 %</u>	<u>\$4,621.00</u>	<u>357.07 %</u>	<u>\$17,887.00</u>
In-kind Revenue									
10-4510	In-Kind Revenue	\$16,743.70	(\$164,220.00)	\$463,706.67	\$461,514.00	100.48 %	\$259,463.93	78.72 %	\$670,092.00
Total In-kind Revenue		<u>\$16,743.70</u>	<u>(\$164,220.00)</u>	<u>\$463,706.67</u>	<u>\$461,514.00</u>	<u>100.48 %</u>	<u>\$259,463.93</u>	<u>78.72 %</u>	<u>\$670,092.00</u>
Investment Income									
10-4520	Investment Earnings	\$616.35	\$0.00	(\$40.65)	\$0.00	0.00 %	\$2,673.20	(101.52)%	\$0.00
15-4520	Investment Earnings	\$121.61	\$0.00	\$1,375.08	\$0.00	0.00 %	\$209.44	556.55 %	\$0.00
Total Investment Income		<u>\$737.96</u>	<u>\$0.00</u>	<u>\$1,334.43</u>	<u>\$0.00</u>	<u>0.00 %</u>	<u>\$2,882.64</u>	<u>(53.71)%</u>	<u>\$0.00</u>
Miscellaneous Revenue									
10-4310	Match Contributions	\$0.00	\$32,500.00	\$0.00	\$88,415.50	0.00 %	\$0.00	0.00 %	\$107,054.00

Metropolitan Area Planning Agency Statement of Revenues and Expenditures

May 31, 2018

		5/1/18 - 5/31/18		7/1/17 - 5/31/18		% to YTD Budget	Prior Year to Date	Increase/ (Dec YTD to PYTD	FY 2018 Budget
		Actual	Budget	Actual YTD	Budget YTD				
10-4530	Misc. Cash Sales	\$120.00	\$0.00	\$168.00	\$0.00	0.00 %	\$27.00	522.22 %	\$0.00
10-4540	Miscellaneous	\$688.76	(\$177,500.00)	\$28,636.13	\$135,625.00	21.11 %	\$24,800.35	15.47 %	\$240,000.00
15-4310	Match Contributions	\$0.00	\$0.00	\$40,500.00	\$0.00	0.00 %	\$0.00	0.00 %	\$0.00
15-4540	Miscellaneous	\$0.00	\$0.00	\$165,000.00	\$0.00	0.00 %	\$57,700.00	185.96 %	\$0.00
Total Miscellaneous Revenue		<u>\$808.76</u>	<u>(\$145,000.00)</u>	<u>\$234,304.13</u>	<u>\$224,040.50</u>	<u>104.58 %</u>	<u>\$82,527.35</u>	<u>183.91 %</u>	<u>\$347,054.00</u>
Total		<u>\$492,056.52</u>	<u>(\$358,133.00)</u>	<u>\$4,466,833.50</u>	<u>\$4,608,653.25</u>	<u>96.92 %</u>	<u>\$2,918,558.24</u>	<u>53.05 %</u>	<u>\$6,342,006.00</u>
Total Revenues		<u>\$492,056.52</u>	<u>(\$358,133.00)</u>	<u>\$4,466,833.50</u>	<u>\$4,608,653.25</u>	<u>96.92 %</u>	<u>\$2,918,558.24</u>	<u>53.05 %</u>	<u>\$6,342,006.00</u>
Expenses									
MAPA Activities									
MAPA Personnel Expenses									
Salaries									
10-5000	Salaries	\$84,929.11	\$48,330.25	\$961,232.08	\$1,184,632.75	81.14 %	\$900,443.32	6.75 %	\$1,298,263.00
10-5010	Outside Office Help	\$3,819.20	\$0.00	\$3,819.20	\$0.00	0.00 %	\$0.00	0.00 %	\$0.00
10-5125	Accrued Salaries & Compensate	\$0.00	\$7,149.25	\$172,281.71	\$175,241.75	98.31 %	\$155,707.26	10.64 %	\$192,051.00
Total Salaries		<u>\$88,748.31</u>	<u>\$55,479.50</u>	<u>\$1,137,332.99</u>	<u>\$1,359,874.50</u>	<u>83.64 %</u>	<u>\$1,056,150.58</u>	<u>7.69 %</u>	<u>\$1,490,314.00</u>
Payroll Taxes									
10-5100	FICA	\$6,724.92	\$4,056.75	\$83,114.50	\$99,424.25	83.60 %	\$77,945.72	6.63 %	\$108,961.00
10-5105	Unemployment Taxes	\$22.71	\$85.25	\$865.09	\$1,937.75	44.64 %	\$1,154.58	(25.07)%	\$2,123.00
Total Payroll Taxes		<u>\$6,747.63</u>	<u>\$4,142.00</u>	<u>\$83,979.59</u>	<u>\$101,362.00</u>	<u>82.85 %</u>	<u>\$79,100.30</u>	<u>6.17 %</u>	<u>\$111,084.00</u>
Employee Benefits									
10-5110	Health Insurance	\$15,057.56	\$8,100.17	\$180,072.42	\$198,101.83	90.90 %	\$168,169.96	7.08 %	\$217,102.00
10-5115	Life & Disability Insurance	\$432.42	\$166.67	\$5,098.81	\$4,833.33	105.49 %	\$4,114.22	23.93 %	\$5,300.00
10-5120	Retirement Contributions	\$4,732.18	\$3,174.92	\$55,888.62	\$77,654.08	71.97 %	\$47,520.40	17.61 %	\$85,102.00
Total Employee Benefits		<u>\$20,222.16</u>	<u>\$11,441.76</u>	<u>\$241,059.85</u>	<u>\$280,589.24</u>	<u>85.91 %</u>	<u>\$219,804.58</u>	<u>9.67 %</u>	<u>\$307,504.00</u>
Total MAPA Personnel Expenses		<u>\$115,718.10</u>	<u>\$71,063.26</u>	<u>\$1,462,372.43</u>	<u>\$1,741,825.74</u>	<u>83.96 %</u>	<u>\$1,355,055.46</u>	<u>7.92 %</u>	<u>\$1,908,902.00</u>

Metropolitan Area Planning Agency Statement of Revenues and Expenditures

May 31, 2018

		5/1/18 - 5/31/18		7/1/17 - 5/31/18		% to YTD Budget	Prior Year to Date	Increase/ (Dec YTD to PYTD	FY 2018 Budget
		Actual	Budget	Actual YTD	Budget YTD				
MAPA Non-personnel									
10-5200	Advertising	\$542.61	\$1,100.00	\$2,979.95	\$12,000.00	24.83 %	\$3,438.00	(13.32)%	\$13,000.00
10-5210	Membership - Reference Mater	\$1,314.14	\$3,250.00	\$20,508.73	\$20,750.00	98.84 %	\$17,187.21	19.33 %	\$22,000.00
Data Processing									
10-5310	Data Processing	\$2,987.90	\$3,750.00	\$29,318.98	\$41,250.00	71.08 %	\$29,891.11	(1.91)%	\$45,000.00
Total Data Processing		<u>\$2,987.90</u>	<u>\$3,750.00</u>	<u>\$29,318.98</u>	<u>\$41,250.00</u>	<u>71.08 %</u>	<u>\$29,891.11</u>	<u>(1.91)%</u>	<u>\$45,000.00</u>
10-5320	Professional Services	\$986.58	\$2,000.00	\$21,917.55	\$38,000.00	57.68 %	\$41,264.48	(46.89)%	\$40,000.00
10-5600	Forums	\$1,326.66	\$21,500.00	\$60,458.88	\$70,375.00	85.91 %	\$44,866.11	34.75 %	\$80,000.00
10-5650	Miscellaneous Expenses	\$415.72	\$625.00	\$3,267.02	\$1,875.00	174.24 %	\$2,055.37	58.95 %	\$2,000.00
10-5730	Bank Charges	\$24.45	\$83.34	\$343.54	\$916.66	37.48 %	\$355.04	(3.24)%	\$1,000.00
10-5800	Office Rent	\$5,800.00	\$6,250.00	\$63,800.00	\$68,750.00	92.80 %	\$63,280.80	0.82 %	\$75,000.00
Office Expense									
10-5220	Printing	\$1,636.96	\$2,916.67	\$21,641.83	\$32,083.33	67.46 %	\$25,299.59	(14.46)%	\$35,000.00
10-5300	Business Insurance Expense	\$967.37	\$333.34	\$10,449.33	\$13,666.66	76.46 %	\$10,495.06	(0.44)%	\$15,000.00
10-5500	Equipment Maintenance	\$501.90	\$250.00	\$4,876.23	\$7,750.00	62.92 %	\$6,373.97	(23.50)%	\$8,500.00
10-5700	Postage	\$229.59	\$458.34	\$1,826.10	\$5,041.66	36.22 %	\$2,611.05	(30.06)%	\$5,500.00
10-5710	Supplies	\$514.57	\$1,125.00	\$9,744.74	\$17,375.00	56.08 %	\$7,147.23	36.34 %	\$19,000.00
10-5810	Telephone	\$1,258.41	\$250.00	\$2,341.25	\$2,750.00	85.14 %	\$1,616.64	44.82 %	\$3,000.00
Total Office Expense		<u>\$5,108.80</u>	<u>\$5,333.35</u>	<u>\$50,879.48</u>	<u>\$78,666.65</u>	<u>64.68 %</u>	<u>\$53,543.54</u>	<u>(4.98)%</u>	<u>\$86,000.00</u>
Travel and Conferences									
10-5900	Travel & Conferences	\$4,492.14	\$8,333.34	\$69,067.16	\$91,666.66	75.35 %	\$69,343.87	(0.40)%	\$100,000.00
Total Travel and Conferences		<u>\$4,492.14</u>	<u>\$8,333.34</u>	<u>\$69,067.16</u>	<u>\$91,666.66</u>	<u>75.35 %</u>	<u>\$69,343.87</u>	<u>(0.40)%</u>	<u>\$100,000.00</u>
Transfers									
10-8000	Transfers	\$0.00	(\$1,866.66)	\$0.00	(\$20,533.34)	0.00 %	\$0.00	0.00 %	(\$22,400.00)
Total Transfers		<u>\$0.00</u>	<u>(\$1,866.66)</u>	<u>\$0.00</u>	<u>(\$20,533.34)</u>	<u>0.00 %</u>	<u>\$0.00</u>	<u>0.00 %</u>	<u>(\$22,400.00)</u>
10-5950	Capital Outlays	\$27,515.10	\$0.00	\$34,307.60	\$70,000.00	49.01 %	\$0.00	0.00 %	\$70,000.00
Total MAPA Non-personnel		<u>\$50,514.10</u>	<u>\$50,358.37</u>	<u>\$356,848.89</u>	<u>\$473,716.63</u>	<u>75.33 %</u>	<u>\$325,225.53</u>	<u>9.72 %</u>	<u>\$511,600.00</u>

Metropolitan Area Planning Agency Statement of Revenues and Expenditures

May 31, 2018

		5/1/18 - 5/31/18		7/1/17 - 5/31/18		% to YTD Budget	Prior Year to Date	Increase/ (Dec YTD to PYTD	FY 2018 Budget
		Actual	Budget	Actual YTD	Budget YTD				
Total MAPA Activities		\$166,232.20	\$121,421.63	\$1,819,221.32	\$2,215,542.37	82.11 %	\$1,680,280.99	8.27 %	\$2,420,502.00
Contracts and Pass-through									
10-5400	Contracts	\$13,321.86	\$63,500.00	\$152,856.96	\$698,500.00	21.88 %	\$501,391.52	(69.51)%	\$761,360.00
10-5420	Pass Through Contracts - Planni	\$7,856.58	\$0.00	\$343,901.29	\$1,088,307.75	31.60 %	\$441,377.29	(22.08)%	\$1,451,077.00
10-5430	Pass Through Contracts - STP	\$13,376.60	\$0.00	\$1,021,892.36	\$338,156.25	302.20 %	\$51,259.87	1,893.55 %	\$450,875.00
15-5400	Contracts	\$0.00	\$0.00	\$0.00	\$0.00	0.00 %	\$8,000.00	(100.00)%	\$711,475.00
10-5440	In-Kind Expense	\$16,743.70	(\$164,220.00)	\$463,706.67	\$368,982.75	125.67 %	\$259,463.93	78.72 %	\$546,717.00
Subtotal Contracts and Pass-Through		<u>\$51,298.74</u>	<u>(\$100,720.00)</u>	<u>\$1,982,357.28</u>	<u>\$2,493,946.75</u>	<u>79.49 %</u>	<u>\$1,261,492.61</u>	<u>57.14 %</u>	<u>\$3,921,504.00</u>
Total Expenses		<u>\$217,530.94</u>	<u>\$20,701.63</u>	<u>\$3,801,578.60</u>	<u>\$4,709,489.12</u>	<u>80.72 %</u>	<u>\$2,941,773.60</u>	<u>29.23 %</u>	<u>\$6,342,006.00</u>
NET SURPLUS/(DEFICIT)		<u>\$274,525.58</u>	<u>(\$378,834.63)</u>	<u>\$665,254.90</u>	<u>(\$100,835.87)</u>	<u>(659.74)%</u>	<u>(\$23,215.36)</u>	<u>(2,965.58)%</u>	<u>\$0.00</u>

Metropolitan Area Planning Agency Statement of Revenues and Expenditures

May 31, 2018

		<u>5/1/18-5/31/18</u>	<u>7/1/17 - 5/31/18</u>
		<u>Actual</u>	<u>YTD</u>
Revenues			
20-4520	Investment Earnings	\$39.34	\$274.70
20-4700	Motorist Assist Income	\$0.00	\$37,626.00
Total Revenues		<u>\$39.34</u>	<u>\$37,900.70</u>
Expenses			
20-6000	Auto - Gas/Maintenance	\$0.00	\$866.90
20-6075	Miscellaneous Foundation	\$325.01	\$3,024.23
20-6083	Insurance - Foundation	\$0.00	\$500.00
20-6088	Telephone - Foundation	\$84.45	\$927.34
20-6098	Vehicle Purchases - Foundation	\$0.00	\$28,389.40
Total Expenses		<u>\$409.46</u>	<u>\$33,707.87</u>
NET SURPLUS/(DEFICIT)		<u>(\$370.12)</u>	<u>\$4,192.83</u>



Subcontractor Payment Authorization

Contract Number: 18502300001
Contract Party: Intercultural Senior Center
Contract Description: Intercultural Senior Center
Contract Approved by Board of Directors: December 7, 2017
Contract Amount: \$15,900.00
Match Amount: \$15,900.00
Contract Period: December 1, 2017 - December 31, 2018

Payment # 2

Billed to Date: \$ 7,242.54
Less Previous Payments: \$ 3,975.00
Amount Due: \$ 3,267.54

Payment Recommended By: _____
Responsible Charge / MAPA Staff Member

Department Manager

MAPA Executive Director

Approved by MAPA Finance Committee: _____
Date

MAPA Treasurer/Finance Committee Member

Billing Summary

Project Name: Intercultural Senior Center										
Contact Name: Sarah Gilbert										
Billing Period: March 2018 - May 2018										
BUDGET DETAIL	TOTAL	TOTAL	TOTAL	March 2018- May 2018		TOTAL	Program to Date		Remaining	
	Year 1 Budget	BUDGET Federal	BUDGET Local Match	Federal Request	LOCAL MATCH	COST MONTH	Federal Request	LOCAL MATCH	Federal Request	LOCAL MATCH
A. OPERATING EXPENSES¹										
Grant NE-2016-015-04-01										
1.Driver Wages	\$ 31,800.00	\$ 15,900.00	\$ 15,900.00	\$ 3,267.54	\$ 3,267.54	\$ 6,535.08	\$ 7,242.54	\$ 7,242.54	\$ 8,657.46	\$ 8,657.46
Subtotal - Operating Expenses	\$ 31,800.00	\$ 15,900.00	\$ 15,900.00	\$ 3,267.54	\$ 3,267.54	\$ 6,535.08	\$ 7,242.54	\$ 7,242.54	\$ 8,657.46	\$ 8,657.46
B. PROGRAM TOTAL BUDGET	\$ 31,800	\$ 15,900	\$ 15,900	\$ 3,268	\$ 3,268	\$ 6,535	\$ 7,243	\$ 7,243	\$ 8,657	\$ 8,657
				21%	21%	21%	46%	46%	54%	54%

¹ 5310 funding for Operating Expenses may not exceed 50% of the total cost.



5310 Subrecipient Progress Report Form

Subrecipient Name: Intercultural Senior Center

Billing Period: March 1-May 30

Work Completed with Awarded Funds for Current Billing Period:

- Number of trips (1 person 1 way) provided:
 - Vehicle 1 (5310 small bus, full billing period): 1606
- Miles travelled:
 - Vehicle 1 (5310 small bus, full billing period): 2374.4

Anticipated Work for Next Billing Period:

- Anticipated number of trips: 1650

Percent of Work Completed to Date: 50%

Do You Need Anything from MAPA/FTA?

- No
 Yes:

Are There Any Outstanding Issues?

- No
 Yes:

Items to Include with Report

- Timesheets
- Mileage logs

Intercultural Senior Center
3010 R St

Invoice

Invoice #: 188
Invoice Date: 6/30/2018
Due Date: 6/30/2018
Project:
P.O. Number:

Bill To:
MAPA

Date	Description	Amount
	Request #2	3,267.54

Total	\$3,267.54
Payments/Credits	\$0.00
Balance Due	\$3,267.54

**Intercultural Senior Center
MAPA 2018 Expenses Request #2**

Type	Date	Num	Source Name	Account	Amount	Balance	Federal Request #2	Local Match
MAPA 2018								
Paycheck	03/14/2018	DD1763	Bachez, Alba	Salaries	1,040.00	1,040.00	1,040.00	
Paycheck	03/14/2018	DD1763	Bachez, Alba	403b Employer Match	15.60	1,055.60	15.60	
Paycheck	03/14/2018	DD1763	Bachez, Alba	Payroll Taxes	64.37	1,119.97	64.37	
Paycheck	03/14/2018	DD1763	Bachez, Alba	Payroll Taxes	15.05	1,135.02	15.05	
Paycheck	03/14/2018	DD1763	Bachez, Alba	Payroll Taxes	16.92	1,151.94	16.92	
Paycheck	03/28/2018	DD1776	Bachez, Alba	Salaries	1,040.00	2,191.94	1,040.00	
Paycheck	03/28/2018	DD1776	Bachez, Alba	403b Employer Match	15.60	2,207.54	15.60	
Paycheck	03/28/2018	DD1776	Bachez, Alba	Payroll Taxes	64.37	2,271.91	64.37	
Paycheck	03/28/2018	DD1776	Bachez, Alba	Payroll Taxes	15.06	2,286.97	15.06	
Paycheck	03/28/2018	DD1776	Bachez, Alba	Payroll Taxes	16.93	2,303.90	16.93	
Paycheck	04/11/2018	DD1789	Bachez, Alba	Salaries	1,040.00	3,343.90	963.64	76.36
Paycheck	04/11/2018	DD1789	Bachez, Alba	403b Employer Match	15.60	3,359.50		15.60
Paycheck	04/11/2018	DD1789	Bachez, Alba	Payroll Taxes	64.38	3,423.88		64.38
Paycheck	04/11/2018	DD1789	Bachez, Alba	Payroll Taxes	15.05	3,438.93		15.05
Paycheck	04/11/2018	DD1789	Bachez, Alba	Payroll Taxes	16.92	3,455.85		16.92
Paycheck	04/25/2018	DD1801	Bachez, Alba	Salaries	832.00	4,287.85		832.00
Paycheck	04/25/2018	DD1801	Bachez, Alba	403b Employer Match	12.48	4,300.33		12.48
Paycheck	04/25/2018	DD1801	Bachez, Alba	Payroll Taxes	51.47	4,351.80		51.47
Paycheck	04/25/2018	DD1801	Bachez, Alba	Payroll Taxes	12.04	4,363.84		12.04
Paycheck	04/25/2018	DD1801	Bachez, Alba	Payroll Taxes	13.53	4,377.37		13.53
Paycheck	05/09/2018	DD1814	Bachez, Alba	Salaries	936.00	5,313.37		936.00
Paycheck	05/09/2018	DD1814	Bachez, Alba	403b Employer Match	14.04	5,327.41		14.04
Paycheck	05/09/2018	DD1814	Bachez, Alba	Payroll Taxes	57.93	5,385.34		57.93
Paycheck	05/09/2018	DD1814	Bachez, Alba	Payroll Taxes	13.55	5,398.89		13.55
Paycheck	05/09/2018	DD1814	Bachez, Alba	Payroll Taxes	1.17	5,400.06		1.17
Paycheck	05/23/2018	DD1828	Bachez, Alba	Salaries	1,040.00	6,440.06		1,040.00
Paycheck	05/23/2018	DD1828	Bachez, Alba	403b Employer Match	15.60	6,455.66		15.60
Paycheck	05/23/2018	DD1828	Bachez, Alba	Payroll Taxes	64.37	6,520.03		64.37
Paycheck	05/23/2018	DD1828	Bachez, Alba	Payroll Taxes	15.05	6,535.08		15.05
Paycheck	05/23/2018	DD1828	Bachez, Alba	Payroll Taxes	0.00	6,535.08		0.00
Total MAPA 2018					<u>6,535.08</u>	<u>6,535.08</u>	<u>3,267.54</u>	<u>3,267.54</u>

Economic Development Research Group, Inc.

155 Federal Street, Suite 600
Boston, MA 02110

Invoice

BILL TO:

Omaha-Council Bluffs Metropolitan Area
Planning Agency
Attn: Travis Halm, Associate Planner
2222 Cuming Street
Omaha, NE 68102-4328

INVOICE NO: 769-03
DATE 7/10/2018
TERMS: Net 30
DUE DATE 8/9/2018

Transit Return on Investment Study (769)

	LABOR	HRS	RATE	AMOUNT
Transit Return on Investment Study Project #PL-55, Control #00978 Agreement No. VJ1801				
For the period of June 1-30, 2018				
Professional Services (all rates are fully loaded)				
Direct labor:				
Economic Analyst	Cecilia Viggiano	0	46.75	0.00
Project Manager	Naomi Stein	5	46.75	233.75
Principal	Glen Weisbrod	2	87.44	174.88
Economic Analyst	Kyle Schroeckenth...	1	46.75	46.75
Senior Advisor	Mark Sieber	0	54.81	0.00
Overhead (185.21%)	Fee	455.38	1.8521	843.41
Fee (15%)	Fee	1298.79	0.15	194.82
JEO Consulting Group, Inv. #103719 (see attached invoice for details)			2,857.89	2,857.89
Total Due				\$4,351.50



Invoice

July 5, 2018
 Project No: R171390.00
 Invoice No: 103719

Glen Weisbrod
 Economic Development Research Group, Inc.
 155 Federal Street, Suite 600
 Boston, MA 02110

Project Manager Steven Wolf
 NDOT Project Number
 Control Number
 Agreement Number

Project R171390.00 MAPA Transit Return on Investment Study

Professional Services for the Period: June 9, 2018 to June 29, 2018

Phase	104KO	Kickoff			
Billing Limits			Current	Prior	To-Date
Total Billings			0.00	1,027.70	1,027.70
Limit					1,027.70
Total this Phase					0.00

Phase	204PR	Management			
Hours this Invoice			Hours	Rate	Amount
Ray, Jeffrey		6/11/2018	1.00	57.87	57.87
Wolf, Steven		6/13/2018	1.00	61.30	61.30
Wolf, Steven		6/15/2018	1.00	61.30	61.30
Wolf, Steven		6/28/2018	1.00	61.30	61.30
Totals			4.00		241.77
Total Labor					241.77

Additional Fees					
Overhead			185.34 % of 241.77		448.10
Fixed Fees			15.00 % of 689.87		103.48
Total Additional Fees					551.58

Billing Limits	Current	Prior	To-Date
Total Billings	793.35	847.26	1,640.61
Limit			2,354.27
Remaining			713.66
Total this Phase			\$793.35

Phase	304EN	Stakeholder Engagement
-------	-------	------------------------

Hours this Invoice

		Hours	Rate	Amount	
Dittmer, Lynn	6/12/2018	2.50	38.13	95.33	
Dittmer, Lynn	6/13/2018	2.50	38.13	95.33	
Dittmer, Lynn	6/14/2018	5.00	38.13	190.65	
Dittmer, Lynn	6/19/2018	.50	38.13	19.07	
Dittmer, Lynn	6/20/2018	2.00	38.13	76.26	
Dittmer, Lynn	6/22/2018	2.00	38.13	76.26	
Dittmer, Lynn	6/28/2018	2.00	38.13	76.26	
Totals		16.50		629.16	
Total Labor					629.16

Additional Fees

Overhead	185.34 % of 629.16	1,166.09	
Fixed Fees	15.00 % of 1,795.25	269.29	
Total Additional Fees		1,435.38	1,435.38

Billing Limits

	Current	Prior	To-Date	
Total Billings	2,064.54	3,820.38	5,884.92	
Limit			41,719.17	
Remaining			35,834.25	
		Total this Phase		\$2,064.54

Total Amount Due Upon Receipt \$2,857.89

Outstanding Invoices

Number	Date	Balance
102648	5/9/2018	3,061.45
103322	6/13/2018	2,633.89
Total		5,695.34

Email Invoices to: Glen Weisbrod; gweisbrod@edrgroup.com, Naomi Stein; nstein@edrgroup.com

Economic Development Research Group, Inc.
Time by Job Detail
June 2018

<u>Date</u>	<u>Name</u>	<u>Duration</u>
Omaha - Council Bluffs MAPA:Transit Return on Investment Study (769)		
Labor:Glen Weisbrod		
06/12/2018	Weisbrod, Glen	1:00
06/21/2018	Weisbrod, Glen	1:00
Total Labor:Glen Weisbrod		2:00
Labor:Kyle Schroeckenthaler		
06/19/2018	Schroeckenthaler, Kyle	0:30
06/28/2018	Schroeckenthaler, Kyle	0:30
Total Labor:Kyle Schroeckenthaler		1:00
Labor:Naomi Stein		
06/05/2018	Stein, Naomi	0:15
06/11/2018	Stein, Naomi	0:15
06/19/2018	Stein, Naomi	0:30
06/25/2018	Stein, Naomi	0:15
06/26/2018	Stein, Naomi	1:30
06/28/2018	Stein, Naomi	0:15
06/29/2018	Stein, Naomi	2:00
Total Labor:Naomi Stein		5:00
Total Omaha - Council Bluffs MAPA:Transit Retur...		8:00
TOTAL		8:00

Cost Breakdown Form for LPA Reimbursement

Agency Name: METROPOLITAN AREA PLANNING AGENCY	
Control No.: 00978	Project No.: PL-55
Project Location: Omaha, NE	
Agreement No.: VJ1801	
Invoice No.: 769-03	Invoice Date: 07/10/18
Current Billing Period: 6/1/18 thru 06/30/18	
Maximum Not-to-Exceed Amount	\$175,609.74

	Amount		
	This Period	Previously Billed	To Date
Labor	\$1,493.61	\$24,058.86	\$25,552.47
Costs (Non-Labor)	\$0	\$2,899.11	\$2,899.11
Outside Services (Subconsultants):			
Name		Max Amount	
JEO Inc.	\$50,137.27	\$2,857.89	\$5,695.34
Metro Analytics	\$7,500.00	\$	\$0.00
Total Amount Due	\$4,351.50	\$32,653.31	\$37,004.81

Progress Report – Omaha Transit ROI Study

Month: June, 2018

Work Completed This Month:

- Completion of Round 1 interviews:

Name	Organization
Erin Porterfield, Executive Director	Heartland Workforce Solutions
Jamie Berglund, Executive Director	Spark (Former Greater Omaha Chamber and Omaha by Design)
Karen Gibler, President	Sarpy County Chamber
Paula Hazlewood, Executive Director	Advance Southwest Iowa
Mark Norman, Senior Director of Client Services	Greater Omaha Chamber (Former Council Bluffs)

Work Underway for Progress Next Month:

- In early July, we will share a summary of Round 1 interview findings with Travis and identify recommended next round interviews

Known Delays Affecting Project Work:

- MAPA is in the process of updating the Travel Demand Model, including both current and future year land use information. Per discussions with Josh Corrigan (6/25), this update will not be complete until at least mid-July. This will delay the start of the ROI analysis tasks (both for the current role of transit, and the future scenario analysis)
- Data requests to MetroTransit for necessary data were submitted by MAPA on 6/21. We are still awaiting:
 - Financial information
 - Historic ridership data

Additional Work on Hold Pending Action by MAPA and Partners:

- Convening of Stakeholder Group and scheduling of meetings pending finalization of stakeholder committee membership by MAPA (preferably in consultation Steve Wolf, JEO)
- Launch of public involvement process pending MAPA feedback and coordination with JEO (Steve Wolf)
- Definition of new schedule

Comments Regarding Schedule and Work Plan

Pending a better picture of timing of items noted above, EDR Group will need to work with MAPA to develop a new schedule for the project.

CONTRACT COVER PLATE

CONTRACT IDENTIFICATION

1. Contract Number: 19012700301
2. Project Description: Verdis Group - Employer Transportation White Paper and Heartland 2050 Speaker Series Support
3. Effective Date: July 18, 2018
4. Completion Date: September 30, 2018

CONTRACT PARTIES

5. Contractor Name and Address:

Verdis Group
950 S. 10th ST. #010
Omaha, NE 68108

6. The Planning Agency:

The Omaha-Council Bluffs Metropolitan Area Planning Agency
2222 Cuming Street
Omaha, Nebraska 68102

ACCOUNTING DATA

7. Contract – not to exceed \$10,000 FHWA

DATES OF SIGNING AND MAPA BOARD APPROVAL

8. Date of MAPA Board Approval -
9. Date of Contractor Approval
10. Legal Review -

Draft Scope of Services for Agreement

HEARTLAND 2050 SPEAKERS SERIES

Verdis Group will present at a Heartland 2050 Speakers Series event in August or September 2018. This will be the primary presentation at the event, which will communicate the opportunities and benefits of promoting commuter options and the results of the white paper based on past work with employers. Verdis will assist MAPA with planning the event and advertising to employers. The event will focus on outreach to employers to promote transportation options and alternatives that can be beneficial for employee wellness, the environment and reducing costs. The Little Steps Big Impact air quality program will be discussed at the event.

WHITE PAPER

Verdis Group will aggregate data and analysis from recent employer surveys into a white paper that depicts success stories and opportunities of promoting transportation options with local employers. The surveys examine several aspects of commuting patterns and plans, including but not limited to:

- Length of commute
- Current commute mode
- Desired commute mode
- Benefits of actively commuting
- Perceived barriers to switching to desired active commute mode
- Perspectives on interventions that could spur a switch to more active commute modes
- Demographics

This survey data is derived from 11 surveys of local Omaha employers, including 12,200 survey responses, representing a total workforce of 57,300 employees. This represents over 30 million one way trips per year, assuming employees work 50 weeks per year. The survey results show mode split, opportunities and barriers to growing non-single occupancy vehicle trips, and what interventions will help employees shift modes and at what rate, and projected financial costs and savings.

The white paper shall be approximately 2,500 words with no less than 2,000 words. The white paper, including but not limited to the text, maps, computations, electronic data, and other project documents prepared or obtained under the terms of this Agreement are the property of MAPA. Consultant shall deliver these documents to MAPA at the conclusion of the project. MAPA acknowledges that such data may not be appropriate for use on an extension of the services covered by this Agreement or on other projects. Any use of the data for any purpose other than that for which it was intended without the opportunity for Consultant to review the data and modify it if necessary for the intended purpose will be at MAPA's sole risk and without legal exposure or liability to Consultant. The Consultant shall not use their logo on the white paper. The Consultant shall use MAPA's logo and federal, state or local funders as provided by MAPA.

DATA

Verdis Group will provide MAPA with summary-level data referenced in the white paper section above. MAPA agrees to cite Verdis Group as the source of the data on materials, presentations and other venues where the information is communicated in a manner consistent with federal regulations.



Subcontractor Payment Authorization

Contract Number: 18903100002
Contract Party: City of Council Bluffs
Contract Description: Council Bluffs Paratransit Services
Contract Approved by Board of Directors: January 25, 2018
Contract Amount: \$77,380.00
Match Amount: \$77,380.00
Contract Period:

Final Payment

Billed to Date: \$ 77,380.00
Less Previous Payments: \$ 45,833.00
Amount Due: \$ 31,547.00

Payment Recommended By: _____
Responsible Charge / MAPA Staff Member

Department Manager

MAPA Executive Director

Approved by MAPA Finance Committee: _____
Date

MAPA Treasurer/Finance Committee Member

Approved by MAPA Board of Directors: _____
Date

MAPA Board Chair/Member

Billing Summary

Project Name: City of Council Bluffs STS

Contact Name: Ann Grober

Billing Period: March 1, 2018 - May 31, 2018

BUDGET DETAIL	TOTAL	TOTAL	TOTAL	03-01-2018 to 05-31-2018		TOTAL	Program to Date		Remaining	
	Year 1 Budget	BUDGET Federal	BUDGET Local Match	Federal Request	LOCAL MATCH	COST MONTH	Federal Request	LOCAL MATCH	Federal Request	LOCAL MATCH
A. OPERATING EXPENSES¹										
Grant NE-2016-015-04-01										
1. Cost of Contracting	\$ 154,760.00	\$ 77,380.00	\$ 77,380.00	\$ 31,547.00	\$ 31,547.00	\$ 63,094.00	\$ 45,833.00	\$ 45,833.00	\$ 31,547.00	\$ 31,547.00
Subtotal - Operating Expenses	\$ 154,760.00	\$ 77,380.00	\$ 77,380.00	\$ 31,547.00	\$ 31,547.00	\$ 63,094.00	\$ 45,833.00	\$ 45,833.00	\$ 31,547.00	\$ 31,547.00
B. PROGRAM TOTAL BUDGET	\$ 154,760	\$ 77,380	\$ 77,380	\$ 31,547	\$ 31,547	\$ 63,094	\$ 45,833	\$ 45,833	\$ 31,547	\$ 31,547
				41%	41%	41%	59%	59%	41%	41%

¹ 5310 funding for Operating Expenses may not exceed 50% of the total cost.

Exhibit C: Project Budget

Project Name: City of Council Bluffs Special Transit Service

Contact Name: Ann Grober, Resource and Program Coordinator

Budget Detail	Total Cost 3.1.18 to 5.31.18	3.1.18 to 5.31.18		Total Cost Year 2	Year 2	
		5310 Funds	Local Match		5310 Funds	Local Match
A. OPERATING EXPENSES¹						
1. Drivers Wages	\$ -		\$ -			
2. Benefits @ 15%	\$ -		\$ -			
3. Other- Cell Exp	\$ -		\$ -			
4. Vehicle Fuel	\$ -		\$ -			
5. Vehicle Repair/Maintenance	\$ -		\$ -			
6. Cost of Contracted Services - SWITA	\$ 68,750	\$ 31,547	\$ 37,203			
7. Cost of Contracted Services - Bluffs Taxi						
Subtotal - Operating Expenses	\$ 68,750	\$ 31,547	\$ 37,203	\$ -	\$ -	\$ -
B. CAPITAL EXPENSES²						
1						
2						
3						
4						
5						
Subtotal - Capital Expenses	\$	\$	\$	\$	\$	\$
C. PROGRAM TOTAL BUDGET	\$ 68,750	\$ 31,547	\$ 37,203	\$ -	\$ -	\$ -
	Year 1 Program Total	Year 1 5310 Funds	Year 1 Local Match Total	Year 2 Program Total	Year 2 5310 Funds	Year 2 Local Match Total

¹ 5310 funding for Operating Expenses may not exceed 50% of the total cost.

² 5310 funding for Capital Expenses may not exceed 80% of the total cost.



5310 Subrecipient Progress Report Form

Subrecipient Name: City of Council Bluffs

Billing Period: March 1, 2018 through May 31, 2018

Work Completed with Awarded Funds for Current Billing Period:

- Number of trips provided: 4,386
- Miles travelled: 30,526

Anticipated Work for Next Billing Period:

- Anticipated number of trips: N/A

Percent of Work Completed to Date: 100%

Do You Need Anything from MAPA/FTA?

- No
 Yes:

Are There Any Outstanding Issues?

- No
 Yes:

Items to Include with Report

- Billing invoices



FY2017 5310 Program Scope of Work

Organization Name: City of Council Bluffs

Organization Type

- Private Non-Profit
- Governmental Authority
- Operator of Public Transportation
- Other:

Project Description

Contracted Services for the City of Council Bluffs Paratransit Service known as the Council Bluffs Special Transit Service (STS) serve the elderly and disabled citizens of Council Bluffs with transportation within the city limits of Council Bluffs and to a limited area of Omaha north to Hamilton Street, south to Woolworth Avenue and west to 42nd Street. These boundaries include the University of Nebraska Medical Center (UNMC) and the Veterans Affairs Medical Center (VA). Service is provided Monday-Saturday, mirroring the fixed route service provided by Metro. Our service provides rides to anyone living within the Council Bluffs city limits that completes the application and meets the criteria for disabled. Rides are provided not only to medical facilities but also for any daily activities for which the individual needs transportation.

Budget Information

- **Service Contract:** The Southwest Iowa Transit Agency (SWITA) provides service for the STS at a rate of \$22,916.69 per month.
- **Matching Funds:** The City's transit levy provides the local match needed for this service.
- **Program Income:** The cost of service to the individuals is \$2.50 per ride.

Deliverables

Number of Trips: STS has provided 4,386 rides in the period March 1, 2018 through May 31, 2018 and traveled 30,526 miles, with 27,080 revenue miles.

**City of Council Bluffs, Iowa request for 5310 FTA funds for the Elderly and Persons
With Disabilities**

Scope of Services

SFY17 Cost of Contracted Services for the City of Council Bluffs Paratransit Service known as the Council Bluffs Special Transit Service (STS) serving the elderly and disabled citizens of Council Bluffs with transportation within the city limits of Council Bluffs and to a limited area of Omaha north to Hamilton Street, south to Woolworth Avenue and west to 42nd Street. These boundaries include the University of Nebraska Medical Center (UNMC) and the Veterans Affairs Medical Center (VA).

STS has provided 4,386 rides in the period March 1, 2018 through May 31, 2018 and traveled 30,526 miles, with 27,080 revenue miles. These figures include the rides and miles of Bluffs Taxi, although the City is not requesting reimbursement for Bluffs Taxi expenses. Service is provided Monday-Saturday, mirroring the fixed route service provided by Metro. Our service provides rides to anyone living in Council Bluffs that completes the application and meets the criteria for disabled. Rides are provided not only to medical facilities but also for any daily activities for which the individual needs transportation. The cost of service to the individuals is \$2.50 per ride.

Budget

Operations: The 5310 \$75,380 request will be used for operations of the paratransit service. Operation of the service is contracted with the Southwest Iowa Transit Agency / Southwest Iowa Planning Council (SWITA / SWIPCO), Atlantic, IA. For overflow, Bluffs Taxi Company in Council Bluffs, IA will also transport. The call center at this location receives calls for service, a schedule is set for the following day(s) of service and their drivers pick up the City's vehicles at the Mall of the Bluffs to run the routes for the day. Currently, 2 to 4 vehicles are used each day Monday-Saturday to meet the needs of this service. Routine maintenance of the vehicles and fuel are obtained by SWITA / SWIPCO; the vehicles are owned by the City and leased by SWITA / SWIPCO for \$1.00 per vehicle per fiscal year.

Local Match

The City's transit levy provides the local match needed for this service.

MARCH 2018 STS

Southwest Iowa Planning Council

1301 SW 7th Street
Atlantic, IA 50022

712-243-4196 Phone
712-243-3458 Fax

Billing Address

City of Council Bluffs
c/o Ann Grober
209 Pearl St
Council Bluffs, IA 51503

Invoice

3/31/2018

VENDOR # _____
COST CTR A12960
ACCOUNT 641330
PROJECT _____
NOTES \$22,916.69
OK'D BY Ann Grober
DATE 04/16/18
FINANCE _____

VENDOR # _____
COST CTR A12961 1803-12
ACCOUNT 450360
PROJECT _____
NOTES <\$1,667.50>
OK'D BY Ann Grober
DATE 04/16/18
FINANCE _____

Charge Date	Charge Code	Description	Fixed Charge	Quantity	Unit Price	Amount
3/31/2018	2729-C	STS Transportation CASH received - 1667.50 tickets - 678 rides 1377 miles - 9990 Rev miles - 8499 Hours - 941.75	\$21,249...	0.00	0.00000...	\$21,249.19
			GROSS AMT: \$22,916.69 LESS CASH: <\$1,667.50> <u>\$21,249.19</u>			

Due Upon Receipt

Total:

\$21,249.19

APRIL 2018 110

Southwest Iowa Planning Council

1501 SW 7th Street
Atlantic, IA 50022

712-243-4196 Phone
712-243-3458 Fax

Invoice

4/30/2018

Billing Address

City of Council Bluffs
c/o Ann Grober
209 Pearl St
Council Bluffs, IA 51503

VENDOR # _____
COST CTR A12960
ACCOUNT 641330
PROJECT _____
AMOUNT \$22,916.69
CONTACT Ann Grober
DATE 05/16/2018

VENDOR # 1804-16
COST CTR A12961
ACCOUNT 450360
PROJECT _____
AMOUNT <\$1,666.50>
CONTACT Ann Grober
DATE 05/16/2018

FINANCE

FINANCE

Charge Date	Charge Code	Description	Fixed Charge	Quantity	Unit Price	Amount
4/30/2018	2729-C	STS Transportation tickets - 682 Rides - 1387 Miles - 10213 Rev. miles - 9191 Hours - 920.25	\$21,250...	0.00	0.00000...	\$21,250.19
			GROSS AMT: \$22,916.69 LESS CASH: <\$ 1,666.50> <u>\$21,250.19</u>			

Due Upon Receipt

Total: \$21,250.19

MAY 2018 510

Southwest Iowa Planning Council

1501 SW 7th Street
Atlantic, IA 50022

712-243-4196 Phone
712-243-3458 Fax

Billing Address

City of Council Bluffs
c/o Ann Grober
209 Pearl St
Council Bluffs, IA 51503

Invoice

VENDOR # _____
COST CTR A12960
ACCOUNT 641330
PROJECT _____
NOTES \$22,916.69
OK'D BY Ann Grober
DATE 06/15/2018

VENDOR # 5/31/2018
COST CTR A12961 1805-16
ACCOUNT 450360
PROJECT _____
NOTES <\$1,664.00>
OK'D BY Ann Grober
DATE 06/15/2018

FINANCE _____

FINANCE _____

Charge Date	Charge Code	Description	Fixed Charge	Quantity	Unit Price	Amount
5/31/2018	2729-C	STS Transportation Cash received \$1664.00 tickets - 644 Rides - 1328 Miles - 9362 Rev. miles - 8429 Hours - 872	\$21,252...	0.00	0.00000...	\$21,252.69

Due Upon Receipt

Total: \$21,252.69



Subcontractor Payment Authorization

Contract Number: 180222004
 Contract Party: Southwest Iowa Planning Council
 Contract Description: JARC - Capital Purchase
 Contract Approved by Board of Directors: July 27, 2017
 Contract Amendment Approval: February 22, 2018
 Contact Amount: \$106,000.00
 Match Amount: \$26,500.00
 Contract Period: July 1, 2017 - September 30, 2017
 Contract Period Amendment: July 1, 2017 - June 30, 2018

Final Payment

Billed to Date: \$ 106,000.00
 Less Previous Payments: \$ _____
 Amount Due: \$ 106,000.00

Payment Recommended By: _____
 Responsible Charge / MAPA Staff Member

 Department Manager

 MAPA Executive Director

Approved by MAPA Finance Committee: _____
 Date

 MAPA Treasurer/Finance Committee Member

Approved by MAPA Board of Directors: _____
 Date

 MAPA Board Chair/Member

Billing Summary

Billing Summary										
Project Name:		SWITA JARC Vehicle Purchase								
Contact Name:		Rhonda Oliphant								
Billing Period:		5/31/2018								
BUDGET DETAIL	TOTAL	TOTAL	TOTAL	5/31/2018		TOTAL	Program to Date		Remaining	
	Year 1 Budget	BUDGET Federal	BUDGET Local Match	Federal Request	LOCAL MATCH	COST MONTH	Federal Request	LOCAL MATCH	Federal Request	LOCAL MATCH
A. CAPITAL EXPENSES¹										
Grant NE-37-x008-04										
Vehicle	\$ 132,500.00	\$ 106,000.00	\$ 26,500.00	\$ 106,000.00	\$ 26,500.00	\$ 132,500.00	\$ 106,000.00	\$ 26,500.00	\$ -	\$ -
2018 Freightliner Champion- Defender Bus						\$ -			\$ -	\$ -
1FVACWFD4KHKE7373						\$ -			\$ -	\$ -
						\$ -			\$ -	\$ -
Grant 1 Subtotal	\$ 132,500.00	\$ 106,000.00	\$ 26,500.00	\$ 106,000.00	\$ 26,500.00	\$ 132,500.00			\$ 106,000.00	\$ 26,500.00
Grant 2						\$ -			\$ -	\$ -
						\$ -			\$ -	\$ -
						\$ -			\$ -	\$ -
						\$ -			\$ -	\$ -
						\$ -			\$ -	\$ -
Grant 2 Subtotal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -			\$ -	\$ -
Subtotal - Operating Expenses	\$ 132,500.00	\$ 106,000.00	\$ 26,500.00	\$ 106,000.00	\$ 26,500.00	\$ 132,500.00			\$ 106,000.00	\$ 26,500.00
B. PROGRAM TOTAL BUDGET	\$ 132,500	\$ 106,000	\$ 26,500	\$ 106,000	\$ 26,500	\$ 132,500	\$ -	\$ -	\$ 106,000	\$ 26,500
				100%	100%	100%	0%	0%	100%	100%

¹ 5316 funding for Operating Expenses may not exceed 80% of the total cost.

HOGLUND BUS CO., INC.

823 S. 19th Avenue
 Marshalltown, IA 50158
 phone: (641) 752-4733 fax: (641) 752-4547

Invoice No. 1598

Date: 23-May-2018

INVOICE

CUSTOMER

Name Southwest Iowa Transit Agency - SWIPCO
 Mark Lander
 Address 1501 SW 7th Street
 City/State/Zip Atlantic, IA 50022

SHIP TO

Our Order #	P.O. #	TERMS	SALES REP	FOB
25795i		on receipt	Evan Saxton-Williams	

Qty	Description	Unit Price	TOTAL
1	New 2018 Freightliner Champion - Defender Bus VIN# 1FVACWFD4KHKE7373		\$146,705.00
	Missing underbody insulation		-\$335.00
<p>Tax, title & license are not included.</p> <p>Customer responsible for titling & registration of vehicle(s)</p> <p>Estimated Delivery Date: 5/2018 Please pay on or before this date. Thank you</p> <p style="text-align: center;">200 1670</p>			

TOTAL \$146,370.00

Any warranties on the products sold hereby are those of the manufacturer. As between this retail seller and buyer, the product is to be sold "AS IS" and the entire risk as to the quality and performance of the product is with the buyer. The seller expressly disclaims all warranties, either express or implied, including any implied warranty of merchantability or fitness for a particular purpose, and the seller neither assumes nor authorizes any other person to assume for it any liability in connection with sale of said products. This disclaimer by this seller in no way affects the terms of the manufacturer's warranty. The buyer acknowledges being so informed prior to the sale.

We Deliver Mobility -- Thank You for your business!

INVOICE # 1598

Rhonda Oliphant

From: Mark Lander
Sent: Wednesday, May 30, 2018 6:09 PM
To: Kelly Davis; Rhonda Oliphant
Subject: Fwd: Champion Defender bus delivery paperwork 25795i Buy America, FMVSS, and invoice
Attachments: SWIPCO 25795i 1598 INVOICE.pdf; ATT00001.htm; Defender Freightliner FMVSS Letter 2018.pdf; ATT00002.htm; Domestic Content Template - SWIPCO 15238.pdf; ATT00003.htm

Mark Lander

Begin forwarded message:

From: "Evan" <evan@hoglundbus.com>
Date: May 30, 2018 at 10:18:25 PM GMT+3
To: "Mark Lander" <mark.lander@swipco.org>
Subject: Champion Defender bus delivery paperwork 25795i Buy America, FMVSS, and invoice

Mark,

Please see the attached invoice and documents for your Champion Defender bus being delivered 5/31/18 . The Glaval will be ready within a week. Thank you again for your business!

Evan

Evan Saxton-Williams
Commercial Bus Sales | Hoglund Bus Co., Inc.
P: 800.866.3105 | C: 641.750.0550 | F: 641.752.4547 | www.hoglundbus.com



CHAMPION®

REV GROUP

Federal Motor Vehicle Safety Standards

The following is a brief summary of all applicable **FMVSS Title 49 (Federal Motor Vehicle Safety Standards)** of which Champion Bus Freightliner Defender Transit Buses comply. Complete and up to date copies of the FMVSS worksheets supporting test data is available upon request by calling 1-810-724-6474 or writing to Champion Bus Inc. 331 Graham Rd. Imlay City, Mi. 48444.

Definitions: OEM Original Equipment Manufacturer
 FSM Final Stage Manufacturer

FMVSS 101 Control Location, Identification and Illumination

* This is certified by the OEM and the FSM.

FMVSS 102 Transmission Shift Lever Sequence & Starter Interlock

* This is certified by the OEM and the FSM.

FMVSS 103 Windshield Defrosting and Defogging System

* This is certified by the OEM.

FMVSS 104 Windshield Wiping and Washing System

* This is certified by the OEM.

FMVSS 105 Hydraulic Brake System

* This is certified by the OEM and the FSM does not alter their system.

FMVSS 106 Brake Hoses

* This is certified by the OEM and the FSM does not alter their hoses.

FMVSS 108 Lamps, Reflective Devices & Associated Equipment

* The devices installed by the FSM meet all requirements.

FMVSS 111 Rearview Mirrors

* The is certified by the OEM.

FMVSS 113 Hood Latch System

* This is certified by the OEM.

FMVSS 115 Vehicle Identification Number

* This is certified by the OEM and the FSM does not alter their numbers.

FMVSS 116 Hydraulic Brake Fluids

* This is certified by the OEM and the FSM does not alter their system.

FMVSS 119 New Pneumatic Tires for Motor Vehicles Other Than Passenger Cars

* This is certified by the OEM and the FSM does not alter their system.

FMVSS 120 Tire Selection and Rims for Motor Vehicles Other Than Passenger Cars

* This is certified by the OEM and the FSM does not alter their tires or rims.

FMVSS 124 Accelerator Controls

* This is certified by the OEM and the FSM does not alter their system.

FMVSS 125 Warning Devices

* This is not a requirement of the OEM or FSM. This is a requirement the end user must meet.

FMVSS 204 Steering Control Rearward Displacement

* This is certified by the OEM and the FSM does not alter their system.

FMVSS 205 Glazing Material (Windows)

* The windows supplied by the FSM meet all requirements.

FMVSS 207 Seating Systems

* The seating supplied by the FSM meet all requirements.

FMVSS 209 Seat Belt Assemblies

* The seat belts supplied by the FSM meet all requirements.

FMVSS 210 Seat Belt Assemblies Anchorages

* The seat belt assemblies' anchorages supplied by the FSM meet all requirements.

FMVSS 217 Bus Window Retention and Release

* The windows installed by the FSM meet all requirements.

FMVSS 220 School Bus Roll Over Protection

* Even though this is not a requirement for transit buses, Champion Bus Inc. has tested to this standard and meets all requirements.

FMVSS 301 Fuel System Integrity

* This is certified by the OEM and the FSM does not alter their system.

FMVSS 302 Flammability of Interior Materials


- The interior materials supplied by the FSM meet all requirements.

FMVSS 403 Platform Lift Systems for Motor Vehicles

- * The Platform Lift installed by the FSM meet all requirements.

FMVSS 404 Platform Lift Installations in Motor Vehicles

- * The Platform Lift installed by the FSM meet all requirements.

 1-31-18
Ben Cupp
Director of Engineering
Champion Bus Inc.

Buyer: Hoglund Bus Co., Inc
Vendor ID: HogluBus

Account #:

55019
5/31/2018

Invoice	Description	Discount	Amount
98	New 2018Freightliner Champion-Defender Bus 1FVACWFD...	\$0.00	\$146,370.00
Total :		\$0.00	\$146,370.00

1FVACWFD4KHKE7373

OPTIONAL DOCUMENT PRINTED ON GREENWAVE REACTIVE PAPER WITH MICROFINER BORDER

55019

SOUTHWEST IOWA PLANNING COUNCIL

PH: (712) 243-4196
1501 SW 7TH ST.
ATLANTIC, IOWA 50022



Adair • Anita • Atlantic
Casson • Casey • Griewood
Menlo • Rippey
Suzart • Walnut
(800) 539-1210
www.rollinghillsbank.com

72-591/739

55019
NUMBER

**One Hundred Forty Six Thousand Three Hundred Seventy and 00/100 Dollars

DATE	AMOUNT
5/31/2018	\$146,370.00

BY THE ORDER OF
Hoglund Bus Co., Inc
823 S 19th Ave
Marshalltown, IA 50158

SOUTHWEST IOWA PLANNING COUNCIL

[Signature]
VOID IF NOT CASHED WITHIN 60 DAYS



THIS DOCUMENT CONTAINS VERY SENSITIVE INFORMATION. YOUR OFFICIAL IDENTIFICATION IMAGE IS APPEARED WITH IT.

⑈055019⑈ ⑆073905912⑆ 800 542 3⑈

Buyer: Hoglund Bus Co., Inc
Vendor ID: HogluBus

Account #:

55019
5/31/2018

Invoice	Description	Discount	Amount
598	New 2018Freightliner Champion-Defender Bus 1FVACWFD...	\$0.00	\$146,370.00
Total :		\$0.00	\$146,370.00

1FVACWFD4KHKE7373

COPIES COPY



**BUY AMERICA
DOMESTIC CONTENT WORKSHEET**

SWIPCO - DF380M2-30803

More than 65% of the material cost of the Champion bus is U. S. domestic content:

<u>COMPONENT/MANUFACTURER</u>	<u>MANUFACTURING LOCATION</u>	<u>DOMESTIC CONTENT AS A PERCENTAGE OF TOTAL MATERIAL COST</u>
Chassis/Freightliner	U.S.	65.56%
Seats/Freedman	U.S.	3.35%
Wheelchair Lift/Braun	U.S.	2.44%
		<u>71.35%</u>

Total assembly of buses from body structure through road tests occurs at at Champion Bus, Inc. in Imlay City, MI. Cutaway chassis are delivered to Champion Bus from the chassis manufacturer and consequently all final assembly, including the installation and interconnection of the engine, transmission, axles and cooling and braking systems are performed at the chassis manufacturer's location prior to arrival in Imlay City. The following activities take place in Imlay City, MI:

- Check-in, inspection and preparation of chassis
- Fabrication of vehicle steel body structure
- Installation of vehicle body onto chassis frame
- Mounting of front and rear caps
- Installation and interconnection of heat and air conditioning equipment
- Installation of floor decking and floor covering
- Installation of electrical system and lighting
- Installation of passenger seats, stanchions and grab rails
- Installation of doors and windows
- Installation of customer selected options such as destination signs, lifts, etc.
- Water testing of completed vehicle
- Road testing of completed vehicle
- Final inspection of vehicle and preparation for shipment

The cost of final assembly is 8.8% of net sales.

February 26, 2018

Southwest Iowa Planning Council
Attn: Mark Lander
1501 SW 7th Street
Atlantic, Iowa 50022

Mr. Lander:

Enclosed are two signed copies of Amendment 1 to Contract #180222004 JARC NE-37-x008-04 – between MAPA and the Southwest Iowa Planning Council/Southwest Iowa Transit Agency. Please sign both agreements and return one fully executed to MAPA. Please retain one fully executed contract for your records. If you have any questions, please feel free to contact me.

Sincerely,

Melissa K Engel

Melissa Engel
Director of Finance and Operations
Encl.



MAPA CONTRACT COVER PLATE
(Amendment 1)

CONTRACT IDENTIFICATION

1. Contract Number: 180222004 JARC NE-37-x008-04 Capital Purchase
2. Project: MAPA-Southwest Iowa Planning Council/Southwest Iowa Transit Agency
3. Effective Date: July 5, 2017
4. Completion Date: June 30, 2018

CONTRACT PARTIES

5. Contractor Name and Address:

Southwest Iowa Planning Council (SWIPCO)
1501 SW 7th St
Atlantic, Iowa 50022

6. The Planning Agency:

The Omaha-Council Bluffs Metropolitan Area Planning Agency
2222 Cuming Street
Omaha, Nebraska 68102

ACCOUNTING DATA

7. Contract - \$106,000 of FTA Job Access Reverse Commute (CFDA 20.516) funds less independent audit and inspection fees, unless acceptable compliance with 2 CFR 200 can be substituted, plus \$26,500 in matching funds.

DATES OF SIGNING AND MAPA BOARD APPROVAL

8. Date of MAPA Board Approval –
9. Date of Contractor Approval

AMENDMENT TO THE AGREEMENT BETWEEN
THE OMAHA-COUNCIL BLUFFS METROPOLITAN AREA PLANNING AGENCY
AND
SOUTHWEST IOWA TRANSIT AGENCY

This amendatory agreement made and entered into as of this twenty-second day of February, 2018 by and between Southwest Iowa Planning Council/Southwest Iowa Transit Agency (SWIPCO/SWITA), 1501 SW 7th St, Atlantic, IA 50022, (herein called "the Contractor") and the Omaha-Council Bluffs Metropolitan Area Planning Agency, 2222 Cumling Street, Omaha, Nebraska 68102 (herein called the "Planning Agency"),

WITNESSETH:

WHEREAS, the Planning Agency and the Contractor entered into an agreement dated July 5, 2017 and,

WHEREAS, the parties to that Amendment now desire to amend the completion date as on the Contract Cover Plate of said Agreement and the Time of Performance paragraph on page 3 of said Agreement.

WHEREAS, the parties hereto do mutually agree as follows:

THAT, the Completion Date, on the Contract Cover plate of said Agreement dated July 5, 2017 be and is hereby amended to read as follows:

"Completion Date: June 30, 2018"

AND THAT, the Time of Performance paragraph on page 3 of said Agreement dated July 5, 2017 be and is hereby amended to read as follows:

"5. Time of Performance. The services of the Consultant are to commence July 5, 2017 and end June 30, 2018."

The parties hereto further agree that except as herein expressly provided the Agreement entered into by the parties on July 5, 2017 shall be unchanged and remain in full force and effect.

IN WITNESS WHEREOF the Planning Agency and the Consultant have executed this Contract as of the date first above written.

SOUTHWEST IOWA PLANNING COUNCIL/
SOUTHWEST IOWA TRANSIT AGENCY

Attest: _____ Date 2-28-18 By _____ Date: 2-28-18

Executive Director
Title

OMAHA-COUNCIL BLUFFS METROPOLITAN
AREA PLANNING AGENCY

Attest: _____ Date 2-22-18 By _____ Date: 2-22-18

Board Chair



1822

POST-DELIVERY AUDIT CERTIFICATIONS

Agency: SWITA Region 13

Final Stage Manufacturer: Champion

Procurement: Iowa DOT

Contract Award Date: 4/15/14

Bid Letting Date: 2/12/14

Federal Contract Number(s): _____

Procurement Administrator: Ryan Ward

In-Plant Production Inspection Date(s): _____

(Mandatory for purchases of ten (10) or more vehicles)

Vendor Selected For Contract Award: Hoglund Bus

Final Acceptance	Date
Fleet ID Number	

Vendor Address: 823 S 19th Ave
Marshalltown, IA 50158

1822

Vendor Contact: Evan Saxton-Williams

Vendor Phone: 800-866-3105

Vehicle Order Date: September 6, 2017

Contract Award Item(s)

1 Medium Duty bus

POST-DELIVERY PURCHASER'S REQUIREMENTS CERTIFICATION

Pursuant to Section 663.37 of 49 CFR 663, Subpart C - Post-Delivery Audits, the undersigned hereby certifies that all materials and supplemental information obtained from the manufacturer and vendor appear to satisfy the agency's solicitation requirements. In particular, this certification attests that:

A. the rolling stock item(s) being delivered by the successful vendor and manufacturer shown above were, upon delivery, carefully inspected visually, road tested, and found to operate in a manner that conforms with the terms of this agency's solicitation, and

B. all materials of the manufacturer(s) and/or vendor(s) shown above have been carefully reviewed. These materials and (if ten or more vehicles were being purchased) in-plant inspections were performed to substantiate the manufacturer's and vendor's capabilities for responsibly producing the equipment specified and providing the warranty service required. The undersigned certifies that he has concluded that the products delivered satisfy the conditions of this agency's solicitation and its vehicle specifications.



(Signature)

Mark Lander

(Name)

Transit Director

(Title)

May 29, 2018

(Date)



POST-DELIVERY BUY AMERICA CERTIFICATION

Pursuant to 49 CFR Part 663.25, Subpart B, the undersigned purchaser hereby certifies that "A" below applies or "B" below applies (Check only one):

- A. The purchaser is satisfied that the rolling stock to be received meets the requirements of Section 165(a) or (b)(3) of the Surface Transportation Assistance Act of 1982, as amended, after having reviewed itself, or through an audit prepared by someone other than the manufacturer or its agency, documentation provided by the manufacturer which lists:
 - 1. Component and subcomponent parts of the rolling stock identified by manufacturer of the parts, their country of origin, and an actual or percent of cost delineation; and
 - 2. The actual location of final assembly point for the rolling stock, including a description of activities which took place at the final assembly point, and the cost of final assembly, or

- B. There is a letter from FTA which grants a waiver to the rolling stock to be purchased from the Buy America requirements under Section 165(b), (b)(2), or (b)(4) of the Surface Transportation Assistance Act of 1982, as amended.



(Signature)

Mark Lander

(Name)

Transit Director

(Title)

May 29, 2018

(Date)

POST-DELIVERY CERTIFICATION OF FEDERAL MOTOR VEHICLE SAFETY STANDARD (FMVSS) COMPLIANCE

Pursuant to 49 CFR Part 663.41, Subpart D, the official signatory for the recipient of federal assistance for rolling stock purchased under the solicitation detailed above certifies that it received each manufacturer's FMVSS self-certification information. More specifically, at the post-delivery stage of this solicitation, an official of the recipient must certify that a copy of the manufacturer's self-certification information indicating the vehicles comply with 49 CFR Part 571 Federal Motor Vehicle Safety Standards was received and reviewed.



(Signature)

Mark Lander

(Name)

Transit Director

(Title)

May 29, 2018

(Date)

These Post-Delivery Audit Certifications must be retained in the files for this project by your transit system for at least 3 years after project close-out. After preparing this form and official signatories have made the required certifications, a copy of both pages of this document must be submitted to the Office of Public Transit. It is requested that you do so after arrangements for correcting minor delivery defects are agreed upon in writing, final vehicle acceptance has occurred, and final payment has been made for your purchase. You should submit these certifications with your application for transit bus plates and/or vehicle title.

Iowa Department of Transportation
Office of Public Transit
800 Lincoln Way
Ames, Iowa 50010
(515) 239-1875 FAX: (515) 233-7983



Subcontractor Payment Authorization

Contract Number: 18904101501
 Contract Party: Pottawattamie County
 Contract Description: GIS Activities - FY 2018
 Contract Approved by Board of Directors: June 29, 2017
 Contact Amount: \$30,000.00
 Match Amount: \$12,857.00
 Contract Period: July 1, 2017 - June 30, 2018

Final Payment

Billed to Date: \$ 30,000.00
 Less Previous Payments: \$ 24,579.66
 Amount Due: \$ 5,420.34

Payment Recommended By: _____
 Responsible Charge / MAPA Staff Member

 Department Manager

 MAPA Executive Director

Approved by MAPA Finance Committee: _____
 Date

 MAPA Treasurer/Finance Committee Member

Approved by MAPA Board of Directors: _____
 Date

 MAPA Board Chair/Member

Billing Period

April 1, 2018 to June 30, 2018

Total Requested this Period: \$5,420.34 *

Description	Employee	Hours Worked	Hourly Rate	Calculated Total	Requested Amount	In-Kind Match (30%)
Project A: Data Maintenance	Employee 1	40	\$44.25	\$1,770.00	\$1,239.00	\$531.00
	Employee 2	150	\$29.70	\$4,455.00	\$3,118.50	\$1,336.50
Project B: Website Maintenance	Employee 1	4	\$44.25	\$177.00	\$123.90	\$53.10
	Employee 2	102	\$29.70	\$3,029.40	\$2,120.58	\$908.82
Fringe Benefits	Employee 1	44	\$15.58	\$685.52	\$479.86	\$205.66
Fringe Benefits	Employee 2	252	\$8.50	\$2,142.00	\$1,499.40	\$642.60
				\$12,258.92	\$8,581.24	\$3,677.68

To-Date Received: \$ 24,579.66

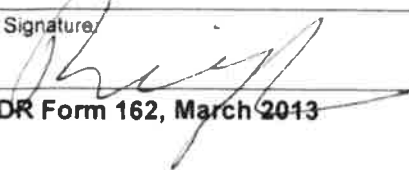
Balance available for disbursement: **\$ 5,420.34**

* The total requested matches the available for disbursement because the amount expended is actually more than what's available.

Cost Breakdown Form for Actual Cost Plus Fixed Fee Agreements

Company Name:	Pottawattamie County
Address:	227 S 6 th St, Council Bluffs, IA 51501
Employer (FEIN) No.:	42-6004433
Project No.:	18904101501
Project Location:	xxxxxxx
Control No.:	xxxxxxx
Agreement No.:	xxxxxxx
Invoice No. and Date:	20180709 & July 9, 2018
Progress Report Date:	July 9, 2018
% Work Completed:	100.00%
Current Billing Period:	4/1/2018 to 6/30/2018

Actual Cost plus Fixed Fee Amount ➤	Limiting Max. Amount \$30,000.00	Fixed Fee for Profit	Total Contract Amount \$30,000.00
Amount			
	This Period	Previously Billed	To Date
Direct Labor	\$5,420.34	\$24,579.66	\$30,000.00
Overhead @ % of Direct Labor	\$0.00		\$0.00
Fixed Fee = % of Labor and Overhead	\$0.00		\$0.00
FCCM @ % of Direct Labor	\$0.00		\$0.00
Direct Non-Labor Costs			\$0.00
Indirect Costs			\$0.00
Outside Services (Subconsultants)			\$0.00
			\$0.00
			\$0.00
			\$0.00
			\$0.00
			\$0.00
			\$0.00
Subtotal – Outside Services	\$0.00	\$0.00	\$0.00
Total Amount Due ➤	\$5,420.34	\$24,579.66	\$30,000.00

I certify that the billed amounts are actual and in agreement with the contract terms.		Balance:	\$0.00
Signature: 	Title: Chief Information Officer	Date: 7/9/2018	

Name	Salary	Fringe Benefits				Fringe Benefits per hour
		Medical Insurance	Dental Insurance	FICA	Pension	
Employee 1	\$ 92,040.00	\$ 16,580.28	\$ 680.76	\$ 7,041.06	\$ 8,219.17	\$ 15.58
Employee 2	\$ 61,776.00	\$ 7,249.68	\$ 258.96	\$ 4,725.86	\$ 5,516.60	\$ 8.50

Note: Longevity pay is built into the hourly rate and has been paid to the employee this quarter.

Progress Report Form

Work Completed for Current Billing Period:

- Road Centerline Edits
- Road Right-of-Way Edits
- Land Records Edits (see table below)
- Section Corner Edits
- Basemap Edits
- Website Maintenance both public facing and internal sites – for a list and access to all our public-facing sites please visit <https://gis.pottcounty-ia.gov>

Month	New or Modified Parcels	Subdivisions	Surveys
Apr-18	11	2	11
May-18	12	0	8
Jun-18	22	1	12

Anticipated Work for Next Billing Period: The same or similar

Information Needed from MAPA/IDOT: None anticipated

Percent of Work Completed to Date: 100.00%

Outstanding Issues: None



Expense Date	Payment Date	Payment #	Packet	Employee	Employee #	Dept.	Code	Units	Amount	
Payroll Department: 54 - GIS										
Fund: 0001 - GENERAL BASIC FUND										
Expense										
0001-54-9120-000-10035-000		SALARIES OF REG EMP-GIS SPECIALIST							14,615.85	
01/12/2018	01/12/2018	50652	PYPKT02745	Employee 2	00929	54	8	16.00	475.28	
01/12/2018	01/12/2018	50652	PYPKT02745	Employee 2	00929	54	H	64.00	1,901.12	
01/26/2018	01/26/2018	51089	PYPKT02766	Employee 2	00929	54	8	8.00	237.64	
01/26/2018	01/26/2018	51089	PYPKT02766	Employee 2	00929	54	H	56.00	1,663.48	
01/26/2018	01/26/2018	51089	PYPKT02766	Employee 2	00929	54	SI	16.00	475.28	
02/09/2018	02/09/2018	51613	PYPKT02796	Employee 2	00929	54	H	80.00	2,376.40	
02/23/2018	02/23/2018	52074	PYPKT02808	Employee 2	00929	54	H	80.00	2,376.40	
03/09/2018	03/09/2018	52562	PYPKT02833	Employee 2	00929	54	8	8.00	255.51	
03/09/2018	03/09/2018	52562	PYPKT02833	Employee 2	00929	54	H	72.00	2,299.61	
03/23/2018	03/23/2018	53038	PYPKT02856	Employee 2	00929	54	H	80.00	2,555.13	
0001-54-9120-000-10037-000		SALARIES OF REG EMP-GIS SUPERVISOR							21,239.98	
01/12/2018	01/12/2018	50651	PYPKT02745	Employee 1	00384	54	8	16.00	708.00	
01/12/2018	01/12/2018	50651	PYPKT02745	Employee 1	00384	54	H	56.00	2,478.00	
01/12/2018	01/12/2018	50651	PYPKT02745	Employee 1	00384	54	V	8.00	354.00	
01/26/2018	01/26/2018	51088	PYPKT02766	Employee 1	00384	54	8	8.00	354.00	
01/26/2018	01/26/2018	51088	PYPKT02766	Employee 1	00384	54	H	72.00	3,186.00	
02/09/2018	02/09/2018	51612	PYPKT02796	Employee 1	00384	54	H	80.00	3,539.99	
02/23/2018	02/23/2018	52073	PYPKT02808	Employee 1	00384	54	H	48.00	2,124.00	
02/23/2018	02/23/2018	52073	PYPKT02808	Employee 1	00384	54	V	32.00	1,416.00	
03/09/2018	03/09/2018	52561	PYPKT02833	Employee 1	00384	54	8	8.00	354.00	
03/09/2018	03/09/2018	52561	PYPKT02833	Employee 1	00384	54	H	72.00	3,186.00	
03/23/2018	03/23/2018	53037	PYPKT02856	Employee 1	00384	54	H	80.00	3,539.99	
Account Type Expense Total:								960.00	35,855.83	
Fund 0001 - GENERAL BASIC FUND Total:								960.00	35,855.83	
Fund: 0002 - GENERAL SUPPLEMENTAL FUND										
Expense										
0002-01-9000-000-11302-000		INSURANCE - WELLNESS-CO CONTB							180.00	
01/12/2018	01/12/2018	50651	PYPKT02745	Employee 1	00384	54	25	15.00	15.00	
01/12/2018	01/12/2018	50652	PYPKT02745	Employee 2	00929	54	25	15.00	15.00	
01/26/2018	01/26/2018	51088	PYPKT02766	Employee 1	00384	54	25	15.00	15.00	
01/26/2018	01/26/2018	51089	PYPKT02766	Employee 2	00929	54	25	15.00	15.00	
02/09/2018	02/09/2018	51612	PYPKT02796	Employee 1	00384	54	25	15.00	15.00	
02/09/2018	02/09/2018	51613	PYPKT02796	Employee 2	00929	54	25	15.00	15.00	
02/23/2018	02/23/2018	52073	PYPKT02808	Employee 1	00384	54	25	15.00	15.00	
02/23/2018	02/23/2018	52074	PYPKT02808	Employee 2	00929	54	25	15.00	15.00	
03/09/2018	03/09/2018	52561	PYPKT02833	Employee 1	00384	54	25	15.00	15.00	
03/09/2018	03/09/2018	52562	PYPKT02833	Employee 2	00929	54	25	15.00	15.00	
03/23/2018	03/23/2018	53037	PYPKT02856	Employee 1	00384	54	25	15.00	15.00	
03/23/2018	03/23/2018	53038	PYPKT02856	Employee 2	00929	54	25	15.00	15.00	
0002-01-9210-000-46501-000		LIFE INSURANCE-EMPLOYEE LIFE DISABILITY							97.71	
01/12/2018	01/12/2018	50651	PYPKT02745	Employee 1	00384	54	277	0.63	0.63	
01/12/2018	01/12/2018	50651	PYPKT02745	Employee 1	00384	54	278	2.25	2.25	
01/12/2018	01/12/2018	50651	PYPKT02745	Employee 1	00384	54	279	15.95	15.95	
01/12/2018	01/12/2018	50652	PYPKT02745	Employee 2	00929	54	277	0.63	0.63	
01/12/2018	01/12/2018	50652	PYPKT02745	Employee 2	00929	54	278	2.25	2.25	
01/12/2018	01/12/2018	50652	PYPKT02745	Employee 2	00929	54	279	10.86	10.86	
02/09/2018	02/09/2018	51612	PYPKT02796	Employee 1	00384	54	277	0.63	0.63	
02/09/2018	02/09/2018	51612	PYPKT02796	Employee 1	00384	54	278	2.25	2.25	
02/09/2018	02/09/2018	51612	PYPKT02796	Employee 1	00384	54	279	15.95	15.95	

Distribution Report

Expense Range: 01/01/2018-03/31/2018 Payment Range: -

Expense Date	Payment Date	Payment #	Packet	Employee	Employee #	Dept.	Code	Units	Amount	
02/09/2018	02/09/2018	51613	PYPKT02796	Employee 2	00929	54	277		0.63	
02/09/2018	02/09/2018	51613	PYPKT02796	Employee 2	00929	54	278		2.25	
02/09/2018	02/09/2018	51613	PYPKT02796	Employee 2	00929	54	279		10.86	
03/09/2018	03/09/2018	52561	PYPKT02833	Employee 1	00384	54	277		0.63	
03/09/2018	03/09/2018	52561	PYPKT02833	Employee 1	00384	54	278		2.25	
03/09/2018	03/09/2018	52561	PYPKT02833	Employee 1	00384	54	279		15.95	
03/09/2018	03/09/2018	52562	PYPKT02833	Employee 2	00929	54	277		0.63	
03/09/2018	03/09/2018	52562	PYPKT02833	Employee 2	00929	54	278		2.25	
03/09/2018	03/09/2018	52562	PYPKT02833	Employee 2	00929	54	279		10.86	
0002-54-9120-000-11001-000			FICA - COUNTY CONTRIBUTION							2,689.08
01/12/2018	01/12/2018	50651	PYPKT02745	Employee 1	00384	54	MC		49.91	
01/12/2018	01/12/2018	50651	PYPKT02745	Employee 1	00384	54	SS		213.41	
01/12/2018	01/12/2018	50652	PYPKT02745	Employee 2	00929	54	MC		34.17	
01/12/2018	01/12/2018	50652	PYPKT02745	Employee 2	00929	54	SS		146.13	
01/26/2018	01/26/2018	51088	PYPKT02766	Employee 1	00384	54	MC		49.91	
01/26/2018	01/26/2018	51088	PYPKT02766	Employee 1	00384	54	SS		213.41	
01/26/2018	01/26/2018	51089	PYPKT02766	Employee 2	00929	54	MC		34.17	
01/26/2018	01/26/2018	51089	PYPKT02766	Employee 2	00929	54	SS		146.13	
02/09/2018	02/09/2018	51612	PYPKT02796	Employee 1	00384	54	MC		49.91	
02/09/2018	02/09/2018	51612	PYPKT02796	Employee 1	00384	54	SS		213.41	
02/09/2018	02/09/2018	51613	PYPKT02796	Employee 2	00929	54	MC		34.17	
02/09/2018	02/09/2018	51613	PYPKT02796	Employee 2	00929	54	SS		146.13	
02/23/2018	02/23/2018	52073	PYPKT02808	Employee 1	00384	54	MC		49.91	
02/23/2018	02/23/2018	52073	PYPKT02808	Employee 1	00384	54	SS		213.41	
02/23/2018	02/23/2018	52074	PYPKT02808	Employee 2	00929	54	MC		34.17	
02/23/2018	02/23/2018	52074	PYPKT02808	Employee 2	00929	54	SS		146.13	
03/09/2018	03/09/2018	52561	PYPKT02833	Employee 1	00384	54	MC		49.91	
03/09/2018	03/09/2018	52561	PYPKT02833	Employee 1	00384	54	SS		213.41	
03/09/2018	03/09/2018	52562	PYPKT02833	Employee 2	00929	54	MC		36.77	
03/09/2018	03/09/2018	52562	PYPKT02833	Employee 2	00929	54	SS		157.21	
03/23/2018	03/23/2018	53037	PYPKT02856	Employee 1	00384	54	MC		49.91	
03/23/2018	03/23/2018	53037	PYPKT02856	Employee 1	00384	54	SS		213.41	
03/23/2018	03/23/2018	53038	PYPKT02856	Employee 2	00929	54	MC		36.77	
03/23/2018	03/23/2018	53038	PYPKT02856	Employee 2	00929	54	SS		157.21	
0002-54-9120-000-11102-000			IPERS - CO CONTRIBUTION							3,201.90
01/12/2018	01/12/2018	50651	PYPKT02745	Employee 1	00384	54	IPERS01		316.12	
01/12/2018	01/12/2018	50652	PYPKT02745	Employee 2	00929	54	IPERS01		212.21	
01/26/2018	01/26/2018	51088	PYPKT02766	Employee 1	00384	54	IPERS01		316.12	
01/26/2018	01/26/2018	51089	PYPKT02766	Employee 2	00929	54	IPERS01		212.21	
02/09/2018	02/09/2018	51612	PYPKT02796	Employee 1	00384	54	IPERS01		316.12	
02/09/2018	02/09/2018	51613	PYPKT02796	Employee 2	00929	54	IPERS01		212.21	
02/23/2018	02/23/2018	52073	PYPKT02808	Employee 1	00384	54	IPERS01		316.12	
02/23/2018	02/23/2018	52074	PYPKT02808	Employee 2	00929	54	IPERS01		212.21	
03/09/2018	03/09/2018	52561	PYPKT02833	Employee 1	00384	54	IPERS01		316.12	
03/09/2018	03/09/2018	52562	PYPKT02833	Employee 2	00929	54	IPERS01		228.17	
03/23/2018	03/23/2018	53037	PYPKT02856	Employee 1	00384	54	IPERS01		316.12	
03/23/2018	03/23/2018	53038	PYPKT02856	Employee 2	00929	54	IPERS01		228.17	
0002-54-9120-000-11301-000			INSURANCE - CO CONTRIBUTION							6,470.88
01/12/2018	01/12/2018	50651	PYPKT02745	Employee 1	00384	54	12		727.14	
01/12/2018	01/12/2018	50651	PYPKT02745	Employee 1	00384	54	82		29.46	
01/12/2018	01/12/2018	50652	PYPKT02745	Employee 2	00929	54	11		310.76	
01/12/2018	01/12/2018	50652	PYPKT02745	Employee 2	00929	54	82		11.12	
01/26/2018	01/26/2018	51088	PYPKT02766	Employee 1	00384	54	12		727.14	
01/26/2018	01/26/2018	51088	PYPKT02766	Employee 1	00384	54	82		29.46	
01/26/2018	01/26/2018	51089	PYPKT02766	Employee 2	00929	54	11		310.76	
01/26/2018	01/26/2018	51089	PYPKT02766	Employee 2	00929	54	82		11.12	
02/09/2018	02/09/2018	51612	PYPKT02796	Employee 1	00384	54	12		727.14	
02/09/2018	02/09/2018	51612	PYPKT02796	Employee 1	00384	54	82		29.46	
02/09/2018	02/09/2018	51613	PYPKT02796	Employee 2	00929	54	11		310.76	
02/09/2018	02/09/2018	51613	PYPKT02796	Employee 2	00929	54	82		11.12	

Distribution Report

Expense Range: 01/01/2018-03/31/2018 Payment Range: -

Expense Date	Payment Date	Payment #	Packet	Employee	Employee #	Dept.	Code	Units	Amount
02/23/2018	02/23/2018	52073	PYPKT02808	Employee 1	00384	54	12		727.14
02/23/2018	02/23/2018	52073	PYPKT02808	Employee 1	00384	54	82		29.46
02/23/2018	02/23/2018	52074	PYPKT02808	Employee 2	00929	54	11		310.76
02/23/2018	02/23/2018	52074	PYPKT02808	Employee 2	00929	54	82		11.12
03/09/2018	03/09/2018	52561	PYPKT02833	Employee 1	00384	54	12		727.14
03/09/2018	03/09/2018	52561	PYPKT02833	Employee 1	00384	54	82		29.46
03/09/2018	03/09/2018	52562	PYPKT02833	Employee 2	00929	54	11		310.76
03/09/2018	03/09/2018	52562	PYPKT02833	Employee 2	00929	54	82		11.12
03/23/2018	03/23/2018	53037	PYPKT02856	Employee 1	00384	54	12		727.14
03/23/2018	03/23/2018	53037	PYPKT02856	Employee 1	00384	54	82		29.46
03/23/2018	03/23/2018	53038	PYPKT02856	Employee 2	00929	54	11		310.76
03/23/2018	03/23/2018	53038	PYPKT02856	Employee 2	00929	54	82		11.12
Account Type Expense Total:									12,639.57
Fund 0002 - GENERAL SUPPLEMENTAL FUND Total:									12,639.57
Payroll Department 54 - GIS Total:								960.00	48,495.40

Fund Summary

Fund	Units	Amount
0001-GENERAL BASIC FUND	960.00	35,855.83
0002-GENERAL SUPPLEMENTAL FUND		12,639.57
Grand Total:	960.00	48,495.40



Subcontractor Payment Authorization

Contract Number: 180222002
Contract Party: Heartland Family Services
Contract Description: JARC - Ways to Work Operations
Contract Approved by Board of Directors: July 27, 2017
Contact Amount: \$22,000.00
Match Amount: \$22,000.00
Contract Period: July 1, 2017 - September 30, 2017

Final

Billed to Date: \$ 22,000.00
Less Previous Payments: \$ _____ -
Amount Due: \$ 22,000.00

Payment Recommended By: _____
Responsible Charge / MAPA Staff Member

Department Manager

MAPA Executive Director

Approved by MAPA Finance Committee: _____
Date

MAPA Treasurer/Finance Committee Member

Approved by MAPA Board of Directors: _____
Date

MAPA Board Chair/Member

MAPA JARC GRANT BILLING DOCUMENT

PART IV - Project Budget Worksheet

Project Name: __HEARTLAND FAMILY SERVICE - WAYS TO WORK__

Contact Name: __Joanie Poore, VP_____

BUDGET DETAIL	TOTAL JARC BUDGET (ORIGINAL)	1/1/2017 - 1/31/2017		TOTAL COST MONTH	Program to Date	
		JARC	LOCAL MATCH		JARC	LOCAL MATCH
A. OPERATING EXPENSES¹						
1. Salaries and Benefits	30,720	\$ 1,457.47	\$ 974.39	\$ 2,431.85	\$ 1,457.47	\$ 974.39
2. Atty, Audit, Acct, POS	2,200	\$ -	\$ 20.36	\$ 20.36	\$ -	\$ 20.36
3. Office and Meeting Supplies	400	\$ 2.01	\$ 2.01	\$ 4.01	\$ 2.01	\$ 2.01
4. Phone & Internet	400	\$ 8.52	\$ 8.52	\$ 17.03	\$ 8.52	\$ 8.52
5. Postage & Shipping	220	\$ 1.05	\$ 1.05	\$ 2.10	\$ 1.05	\$ 1.05
6. Building and Occupancy	1,240	\$ 26.63	\$ 26.63	\$ 53.25	\$ 26.63	\$ 26.63
7. Equipment & Equip rep/rent	800	\$ 13.88	\$ 13.88	\$ 27.75	\$ 13.88	\$ 13.88
8. Advertising, Printing and Pubs	840	\$ 5.94	\$ 5.94	\$ 11.88	\$ 5.94	\$ 5.94
9. Mileage, travel, conf, auto ins.	320	\$ 8.40	\$ 8.40	\$ 16.79	\$ 8.40	\$ 8.40
10. Borrower Incentives	-			\$ -	\$ -	\$ -
11. Org Dues & Misc	128		\$ -	\$ -	\$ -	\$ -
12. Administrative Costs	6,732	\$ -	\$ 462.72	\$ 462.72	\$ -	\$ 462.72
Subtotal - Operating Expenses	\$ 44,000	\$ 1,523.87	\$ 1,523.87	\$ 3,047.74	\$ 1,523.87	\$ 1,523.87

Period	Date	Journal	Comments	Beginning Balance	Debit	Credit	Net Change	Ending Balance	Salaries & Benefits	Atty. Legal, Audit, Acct, POS, Interdept
				-	14.82	-	14.82	14.82	-	-
2840-21			CARE OF BUILDINGS & GROUNDS: WTW	-						
01	1/31/2017	AJ-082157	ALLOCATION OF CARE OF BUILDING AND GROUNDS LAKIN		13.73			13.73		
01		42766 AJ-082162	ALLOCATION - CARE OF BUILDING AND GROUNDS		4.08			17.81		
					17.81		17.81	17.81	-	-
2841-21			Inter - Blds and Grn: WTW	-						
				-	-	-	0.00	0.00	-	-
2850-21			EQUIPMENT REPAIR & MAINTENANCE: WTW	-						
01	1/31/2017	AJ-082175	EQUIPMENT REPAIR LAKIN CAMPUS		3.74			3.74		
01	1/31/2017	AP-004824	BISHOP BUSINESS EQUIPMENT CO /IN: JAN-2017		3.33			7.07		
					7.07		7.07	7.07	-	-
2880-21			PROPERTY INS/TAXES: WTW	-						
01	1/31/2017	AJ-082196	PROP INS/TAXES ALLOCATION		17.65			17.65		
					17.65		17.65	17.65	-	-
3100-21			PRINTING & PUB.: WTW	-						
01	1/31/2017	AJ-082203	PRINTING LAKIN CAMPUS		3.13			3.13		
01	1/31/2017	AJ-082208	PRINTING & PUBLICATION ALLOCATION		8.75			11.88		
					11.88		11.88	11.88	-	-
3210-21			MILEAGE/EXPENSE: WTW	-						
				-	-	-	0.00	0.00	-	-
3220-21			OUT OF TOWN TRAVEL: WTW	-						
				-	-	-	0.00	0.00	-	-
3250-21			AGENCY VEHICLE OPERATE.COSTS : WTW	-						
				-	-	-	0.00	0.00	-	-
3280-21			AUTOMOBILE INSURANCE: WTW	-						
01	1/31/2017	AJ-082220	AUTO INS ALLOCATION		16.79			16.79		
					16.79		16.79	16.79	-	-
3300-21			CONFERENCE/CONVENTION/TRIPS: WTW	-						
				-	-	-	0.00	0.00	-	-
3500-21			SPECIFIC ASSISTANCE INDIVIDUAL: WTW	-						
				-	-	-	0.00	0.00	-	-
4100-21			ORGANIZATION DUES: WTW	-						
				-	-	-	0.00	0.00	-	-
4300-21			EQUIPMENT/FIXED ASSETS: WTW	-						
01	1/31/2017	AJ-082241	EQUIPMENT FIXED ASSETS		20.68			20.68		
					20.68		20.68	20.68	-	-
4900-21			MISCELLANEOUS: WTW	-						
01	1/26/2017	AP-004810	WAYS TO WORK /IN: 7410072787		2,023.07			2,023.07		
01	1/26/2017	AP-004810	WAYS TO WORK /IN: 7410082504		4,201.44			6,224.51		

Office & Mtg Supplies	Phone & Internet	Postage & shipping	Building & Occupancy (Utilities, care of bidg/grnds, bidg/grnd supp, prop ins)	Equip & Equip rent/repair	Advertising, Prntg, Pubs	Mileage, travel, conf, agency vehicle, auto ins	Borrower Incentives	Org Dues & Misc	Admin @ 17.9%	Loan Guarantee Funds (Misc)	Total
										1,000.00	1,000.00
										-	-
										-	-
										-	-
										-	-
										7,224.51	7,224.51
										-	-
										-	-
										-	-
										-	-
										-	-
										-	-
										-	-
										-	-
4.01	17.03	2.10	53.25	27.75	11.88	16.79	-	-	-	7,224.51	9,809.53
									462.72		462.72
4.01	17.03	2.10	53.25	27.75	11.88	16.79	-	-	462.72	7,224.51	10,272.25
4.01	17.03	2.10	53.25	27.75	11.88	16.79	-	-	462.72	7,224.51	10,272.25

- Check

3,047.74 Ties to MAPA
4,594.50

NOTE: Reduce Loan Guarantees by Funds received after default

Progress Report

Title: Heartland Family Service- Ways to Work

Date: 01/01/2017 -01/31/2017

Title: MAPA bill \$ 2,431.85 out of \$22,000

1. Work Completed for Current Billing Period:

- a. The Ways to Work program currently has 1 person shopping for a vehicle.

2. Anticipated Work for Next Billing Period:

- a. Same as prior month

3. Information Needed from FTA/MAPA:

- a. No information is needed.

4. Percent of Work Completed to Date:

- a. 0% of grant utilized

5. Outstanding Issues:

Data

1. Number of repossessions in the month (bought back loans)

- a. 0

2. Number of new closed loans in the month

- a. 0

3. Number of loans outstanding

- a. 12

4. Other.....

- a.

5. Narrative

- a. Program inquiries have started to increase and continuing to bring awareness to the community about the Ways to Work program..

1/31/2017

JAN-2017

INV's 366810, 367093,94,95,96,97 & 98

2,674.04

0.00

2,674.04



Check: 141395

2/6/2017

BISHOP BUSINESS EQUIPMENT CO

2,674.04

ORIGINAL DOCUMENT PRINTED ON CHEMICAL REACTIVE PAPER WITH MICROPRINTED BORDER

141395



2101 S. 42ND ST.
OMAHA, NE 68105
402-553-3000
A United Way Member Agency

AMERICAN NATIONAL BANK
OMAHA, NEBRASKA 68114

NUMBER

27-85/1040

*TWO THOUSAND SIX HUNDRED SEVENTY-FOUR AND 04 / 100⁰ATE

AMOUNT

PAY
TO THE
ORDER
OF

BISHOP BUSINESS EQUIPMENT CO
4125 S 94TH ST
OMAHA, NE 68127

2/6/2017

*****2,674.04*

BISHOPS

A SECOND SIGNATURE REQUIRED FOR CHECKS OVER 1,000 DOLLARS

THIS DOCUMENT CONTAINS HEAT SENSITIVE INK. TOUCH OR PRESS HERE - RED IMAGE DISAPPEARS WITH HEAT.

⑈ 141395⑈ ⑆ 104000854⑆ 3285463⑈

HEARTLAND FAMILY SERVICE

141395

FILE COPY

BISHOPS BUSINESS EQUIPMENT

1/31/2017

**Invoice #'s 366810, 367093, 367094, 367095, 367096,
367097, 367098**

Account Name	2850-	Total
Administration	03	\$833.21 ²⁹
Development	04	\$0.00
NE Behavioral Health	05	\$127.81
Generations Center	06	\$20.72
NE Family Works Residential	07	143.57 \$135.61
NH Emerg Svcs NOT IN USE	08	\$0.30
Better Together	09	\$21.17
Gamblers Assistance Iowa	10	\$6.87
Hardship Assistance	11	33.04 \$32.74
Child & Adult Care Food Program	12	\$26.04
Solomon Girls Center	13	\$0.49
NE HPRP/OPPORTUNITIES	14	\$51.42
Community Education	15	\$62.10
Iowa Counseling	16	\$184.61
Samaritan Housing	17	\$14.80
Domestic Abuse Program NE	18	\$31.54
Prevention DFC	19	\$3.73
Youth Links	20	\$83.41
Ways to Work	21	\$3.33
Nebraska Gamblers	22	\$3.46
Integrated Health Home	23	\$48.95
Sarpy Juvenile Justice	24	\$0.00
In Home Parenting Time	25	\$14.74
Iowa Assertive Community Trmt	26	\$23.55
H Housing Stability-Inactive	27	\$0.19
Iowa Mental Health Crt	28	\$24.80
Family Works Iowa	29	\$31.12
Therapeutic School	30	\$400.97
Nebraska Tracker-Inactive	31	\$0.00
Assessment Center	32	\$0.00
Passages	33	\$31.40
PCHL Rapid Re-housing	34	\$15.72
Fremont Childrens Shelter	35	\$47.34
Heartland Housing Solutions	36	\$3.71
Heartland Homes	37	\$0.00
ASAP	38	\$19.53
Ready in 5	39	\$55.03
Heartland Housing Beginnings	40	\$8.13
DCYC	41	\$1.14
Transitions	42	\$0.19
Family Crisis Mediation	43	\$6.13
Baby Talk	44	\$128.76
Refugee Juvenile Justice Adv	45	\$3.72

Jan

Prog. Serv. _____
 Amt. 2,674.04
 Cler. DB
 Appr. _____
 Acct. No. _____

POSTED

Prevention - Block	46	\$22.49
Metro Home Base/do not use	47	\$0.00
DRUG TESTING/do not use	48	\$0.00
In Home Support-Fremont	49	\$0.00
Prevention - TFN/MOTAC	50	\$2.32
Prevention - SPF/LiveWise	51	\$0.00
In Home Family Support	52	\$18.74
PCHL Prevention	53	\$5.53
IBH - School Based Services	54	\$41.41
Child & Family Center	55	\$55.05
NE Family Works Apts	56	\$7.96
The Coeur Group	57	\$0.37
VOCA	58	\$0.00
VAWA	59	\$0.00
SPSS	60	\$0.00
Dr Paul	57	\$4.51 Com: Dr. Paul
Dr Coy	57	\$4.83 Com: Dr. Coy
Integrated Therapy	57	\$2.27 Com: Integrated therapy

\$2,674.04



4125 S 94th St - Omaha 68127
 5253 R St - Lincoln 68504
 1.800.933.9583 / 402.537.4379 fx
 www.bbec.com

CONTRACT INVOICE

Invoice Number: 366810
 Invoice Date: 01/27/2017

REMIT TO:
 Bishop Business
 4125 S 94th Street
 Omaha, NE 68127

Bill To: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Customer: Heartland Family Services Couer Group
 900 So 74th Plaza Suite 400
 Omaha, NE 68114-4667

Account No	Payment Terms	Due Date	Invoice Total	Balance Due	
103343	Due Upon Receipt	02/11/2017	\$23.95	\$23.95	
Contract Number	Contact	Contract Amount	P.O. Number	Start Date	Exp. Date
SC5389-01	HFS Couer Group	\$22.38	HFS Couer Group	08/28/2016	
Remarks					
THIS CHARGE IS FOR BLACK, WHITE & COLOR COPIES ON BP504 - HFS Couer Group -AT COST PER COPY MONTHLY - PUT ON WORKSHEET WITH THE UNITS					

Summary:

Contract base rate charge for this billing period \$0.00
 Contract overage charge for the 12/28/2016 to 01/27/2017 overage period \$22.38 **
 **See overage details below \$22.38

Detail:

Equipment included under this contract

Toshiba/TF354C

Number	Serial Number	Base Adj.	Location						
BP504	CQF-112689	\$0.00	Heartland Family Services Couer Group 900 So 74th Plaza Suite 400 Omaha, NE 68114-4667						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B/W	B/W	240,677	242,923		2,246	0	2,246	\$0.006000	\$13.48
Color	COLOR	272,759	272,937		178	0	178	\$0.050000	\$8.90
									\$22.38

THANK YOU FOR YOUR BUSINESS!

000
 0-00G+
 23.95 +
 7.28 +
 711.03 +
 853.09 +
 85.08 +
 148.63 +
 844.98 +
 007
 2,674.04G+

Invoice SubTotal	\$22.38
Tax:	\$1.57
Invoice Total	\$23.95
Balance Due:	\$23.95



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 www.bbec.com

CONTRACT INVOICE

Invoice Number: 367093
 Invoice Date: 01/30/2017

REMIT TO:
 Bishop Business
 4125 S 94th Street
 Omaha, NE 68127

Bill To: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Customer: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Account No	Payment Terms	Due Date	Invoice Total	Balance Due	
103343	Due Upon Receipt	02/14/2017	\$7.28	\$7.28	
Contract Number	Contact	Contract Amount	P.O. Number	Start Date	Exp. Date
SC4973-01		\$6.80	BP213	09/28/2015	
Remarks					
THIS CHARGE IS FOR COPIES AT COST PER COPY - put on worksheet for Heartland Family					

Summary:

Contract base rate charge for this billing period \$0.00
 Contract overage charge for the 12/28/2016 to 01/27/2017 overage period \$6.80 **
 **See overage details below \$6.80

Detail:

Equipment included under this contract

Toshiba/T355E

Number	Serial Number	Base Adj.	Location						
BP213	CPG-912476	\$0.00	Heartland Family Service 2101 S 42nd Street Omaha, NE 68105-2909						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B\W	B/W	103,425	104,597		1,172	0	1,172	\$0.005800	\$6.80
									\$6.80

THANK YOU FOR YOUR BUSINESS!

Invoice SubTotal	\$6.80
Tax:	\$0.48
Invoice Total	\$7.28
Balance Due:	\$7.28



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 www.bbex.com

CONTRACT INVOICE

Invoice Number: 367094
 Invoice Date: 01/30/2017

REMIT TO:
 Bishop Business
 4125 S 94th Street
 Omaha, NE 68127

Bill To: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Customer: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Account No	Payment Terms	Due Date	Invoice Total	Balance Due	
103343	Due Upon Receipt	02/14/2017	\$711.03	\$711.03	
Contract Number	Contact	Contract Amount	P.O. Number	Start Date	Exp. Date
XEROX-MX4327650-01		\$669.32	DIANE BENTON	09/28/2013	
Remarks					
THIS CHARGE IS FOR ALL COPIES AT COST PER COPY - PUT ON WORKSHEET FOR CUSTOMER					

Summary:

Contract base rate charge for this billing period	\$0.00 *
Contract overage charge for the 12/28/2016 to 01/27/2017 overage period	\$669.32 **
*Sum of equipment base charges **See overage details below	<u>\$669.32</u>

Detail:

Equipment included under this contract

Xerox/X5845/APT2

Number	Serial Number	Base Charge	Location						
BL712	EX7-387139	\$0.00	Heartland Family Service 2101 S 42nd Street Omaha, NE 68105-2909						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B/W	B/W	496,759	507,456		10,697	*** See overage details below			\$0.00

Xerox/X5845/APTXF2

Number	Serial Number	Base Charge	Location						
BL853	EX7-396220	\$0.00	Heartland Family Service-Better Together 2517 Caldwell Street Omaha, NE 68131-4602						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B/W	B/W	144,312	147,927		3,615	*** See overage details below			\$0.00

Number	Serial Number	Base Charge	Location						
BL856	EX7-392695	\$0.00	Heartland Family Service 6720 N 30th Street Omaha, NE 68112-3211						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B/W	B/W	356,237	361,661		5,424	*** See overage details below			\$0.00

Number	Serial Number	Base Charge	Location						
BL860	EX7-392587	\$0.00	Heartland Family Service Bellevue, NE 68005						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B/W	B/W	110,867	113,756		2,889	*** See overage details below			\$0.00



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CONTRACT INVOICE

Invoice Number: 367094
 Invoice Date: 01/30/2017

REMIT TO:
 Bishop Business
 4125 S 94th Street
 Omaha, NE 68127

Bill To: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Customer: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Account No	Payment Terms	Due Date	Invoice Total	Balance Due
103343	Due Upon Receipt	02/14/2017	\$711.03	\$711.03

Number	Serial Number	Base Charge			Location				
BL861	EX7-392502	\$0.00			Heartland Family Services - Family Works- Day Care 4847 Sahler Street Omaha, NE 68104				
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B\W	B/W	346,987	356,356		9,369	*** See overage details below			\$0.00

Number	Serial Number	Base Charge			Location				
BL865	EX7-392702	\$0.00			Heartland Family Service - Youth Links-NOIC 4318 Fort Street - 1ST FLOOR Omaha, NE 68111-1849				
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B\W	B/W	67,099	68,023		924	*** See overage details below			\$0.00

Xerox/X5855/APTXF2

Number	Serial Number	Base Charge			Location				
BL863	EX7-392658	\$0.00			Heartland Family Service 2101 S 42nd Street Omaha, NE 68105-2909				
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B\W	B/W	603,858	615,320		11,462	*** See overage details below			\$0.00

Xerox/X7845/PTXF2

Number	Serial Number	Base Charge			Location				
BL855	MX4-327604	\$0.00			Heartland Family Service Homeless Call Center 1941 S 42nd Street - Suite 375 Omaha, NE 68105				
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B\W	B/W	780,341	796,041		15,700	*** See overage details below			\$0.00
Color	COLOR	26,215	26,433		218	*** See overage details below			

Xerox/X7855/PTXF2

Number	Serial Number	Base Charge			Location				
BL854	MX4-327458	\$0.00			Heartland Family Service 6720 N 30th Street Omaha, NE 68112-3211				
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B\W	B/W	278,670	282,978		4,308	*** See overage details below			\$0.00
Color	COLOR	270,625	273,367		2,742	*** See overage details below			



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 www.bb.ec.com

CONTRACT INVOICE

Invoice Number: 367094
 Invoice Date: 01/30/2017

REMIT TO:
 Bishop Business
 4125 S 94th Street
 Omaha, NE 68127

Bill To: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Customer: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Account No	Payment Terms	Due Date	Invoice Total	Balance Due
103343	Due Upon Receipt	02/14/2017	\$711.03	\$711.03

Number	Serial Number	Base Charge	Location						
BL858	MX4-327605	\$0.00	Heartland Family Service 302 American Parkway Papillion, NE 68046-6270						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B/W	B/W	391,316	398,546		7,230				*** See overage details below
Color	COLOR	63,670	65,022		1,352				*** See overage details below
									\$0.00

Number	Serial Number	Base Charge	Location						
BL866	MX4-327650	\$0.00	Heartland Family Service 2101 S 42nd Street Omaha, NE 68105-2909						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B/W	B/W	219,161	220,159		998				*** See overage details below
Color	COLOR	87,577	89,036		1,459				*** See overage details below
									\$0.00



4125 S 94th St - Omaha 68127
 5253 R St - Lincoln 68504
 1.800.933.9583 / 402.537.4379 fx
 www.bb.ec.com

CONTRACT INVOICE

Invoice Number: 367094
 Invoice Date: 01/30/2017

REMIT TO:
 Bishop Business
 4125 S 94th Street
 Omaha, NE 68127

Bill To: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Customer: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Account No	Payment Terms	Due Date	Invoice Total	Balance Due
103343	Due Upon Receipt	02/14/2017	\$711.03	\$711.03

Overage Details

Meter Group	Total Copies	Covered Copies	Billable	Rate	Total	
B/W	72,616	0	0	72,616	\$0.005800	\$421.17
				Base Amount:	\$0.00	\$421.17
Meter Type	Equip. Number	Serial Number	Begin	End	Copies	
B/W	BL712	EX7-387139	496,759	507,456	10,697	
B/W	BL853	EX7-396220	144,312	147,927	3,615	
B/W	BL854	MX4-327458	278,670	282,978	4,308	
B/W	BL855	MX4-327604	780,341	796,041	15,700	
B/W	BL856	EX7-392695	356,237	361,661	5,424	
B/W	BL858	MX4-327605	391,316	398,546	7,230	
B/W	BL860	EX7-392587	110,867	113,756	2,889	
B/W	BL861	EX7-392502	346,987	356,356	9,369	
B/W	BL863	EX7-392658	603,858	615,320	11,462	
B/W	BL865	EX7-392702	67,099	68,023	924	
B/W	BL866	MX4-327650	219,161	220,159	998	
Meter Group	Total Copies	Covered Copies	Billable	Rate	Total	
COLOR	5,771	0	0	5,771	\$0.043000	\$248.15
				Base Amount:	\$0.00	\$248.15
Meter Type	Equip. Number	Serial Number	Begin	End	Copies	
Color	BL854	MX4-327458	270,625	273,367	2,742	
Color	BL855	MX4-327604	26,215	26,433	218	
Color	BL858	MX4-327605	63,670	65,022	1,352	
Color	BL866	MX4-327650	87,577	89,036	1,459	
Total Grouped Overage Charges:						\$669.32
Total Grouped Base Charges:						\$0.00
Total Meter Group Charges:						\$669.32

THANK YOU FOR YOUR BUSINESS!

Invoice SubTotal	\$669.32
Tax:	\$41.71
Invoice Total	\$711.03
Balance Due:	\$711.03



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 www.bbec.com

CONTRACT INVOICE

Invoice Number: 367095
 Invoice Date: 01/30/2017

REMIT TO:
 Bishop Business
 4125 S 94th Street
 Omaha, NE 68127

Bill To: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Customer: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Account No	Payment Terms	Due Date	Invoice Total	Balance Due	
103343	Due Upon Receipt	02/14/2017	\$853.09	\$853.09	
Contract Number	Contact	Contract Amount	P.O. Number	Start Date	Exp. Date
SC4031-01		\$124.77	DIANE BENTON	09/28/2013	
Remarks					
THIS IS FOR YOUR BLACK, WHITE & COLOR COPIES AT COST PER COPY - put on worksheet for customer					

Summary:

Contract base rate charge for this billing period \$0.00
 Contract overage charge for the 12/28/2016 to 01/27/2017 overage period \$124.77 **
 **See overage details below \$124.77

Detail:

Equipment included under this contract

Toshiba/TF654CT

Number	Serial Number	Base Adj.	Location						
BK385	CCD-110160	\$0.00	Heartland Family Service 2101 S 42nd Street Omaha, NE 68105-2909						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B/W	B/W	270,733	272,753		2,020	0	2,020	\$0.006000	\$12.12
Color	COLOR	769,561	771,814		2,253	0	2,253	\$0.050000	\$112.65
									\$124.77

Contract Number	Contact	Contract Amount	P.O. Number	Start Date	Exp. Date
XEROX-E2B659739-01		\$672.51	.	10/24/2016	
Remarks					
THIS CHARGE IS FOR BLACK & WHITE AND COLOR COPIES AT COST PER COPY - MONTHLY					

Summary:

Contract base rate charge for this billing period \$0.00
 Contract overage charge for the 12/24/2016 to 01/23/2017 overage period \$672.51 **
 **See overage details below \$672.51

Detail:

Equipment included under this contract

Xerox/XC70

Number	Serial Number	Base Adj.	Location						
BR901	E2B-659739	\$0.00	Heartland Family Service 2101 S 42nd Street Omaha, NE 68105-2909						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B/W	B/W	3,105	6,391		3,286	0	3,286	\$0.008000	\$26.29
Color	COLOR	8,665	22,128		13,463	0	13,463	\$0.048000	\$646.22
									\$672.51



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www.bbec.com

CONTRACT INVOICE

Invoice Number: 367095
Invoice Date: 01/30/2017

REMIT TO:
Bishop Business
4125 S 94th Street
Omaha, NE 68127

Bill To: Heartland Family Service
2101 S 42nd Street
Omaha, NE 68105-2909

Customer: Heartland Family Service
2101 S 42nd Street
Omaha, NE 68105-2909

THANK YOU FOR YOUR BUSINESS!

Invoice SubTotal	\$797.28
Tax:	\$55.81
Invoice Total	\$853.09
Balance Due:	\$853.09



4125 S 94th St - Omaha 68127
 5253 R St - Lincoln 68504
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 www.bbec.com

CONTRACT INVOICE

Invoice Number: 367096
 Invoice Date: 01/30/2017

REMIT TO:
 Bishop Business
 4125 S 94th Street
 Omaha, NE 68127

Bill To: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Customer: Heartland Family Services - Family Works- Day Care
 4847 Sahler Street
 Omaha, NE 68104

Account No	Payment Terms	Due Date	Invoice Total	Balance Due	
103343	Due Upon Receipt	02/14/2017	\$85.08	\$85.08	
Contract Number	Contact	Contract Amount	P.O. Number	Start Date	Exp. Date
5C5390-01	HFS DAY CARE	\$85.08	HFS DAY CARE	08/28/2016	
Remarks					
THIS CHARGE IS FOR YOUR BLACK, WHITE & COLOR COPIES ON BP503 - HFS DAY CARE- AT COST PER COPY MONTHLY - PUT ON WORKSHEET WITH ALL THE OTHER UNITS					

Summary:

Contract base rate charge for this billing period	\$0.00
Contract overage charge for the 12/28/2016 to 01/27/2017 overage period	\$85.08 **
**See overage details below	<u>\$85.08</u>

Detail:

Equipment included under this contract

Toshiba/TF454C

Number	Serial Number	Base Adj.	Location						
BP503	CMG-221125	\$0.00	Heartland Family Services - Family Works- Day Care 4847 Sahler Street Omaha, NE 68104						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B/W	B/W	130,593	136,048		5,455	0	5,455	\$0.006000	\$32.73
Color	COLOR	25,491	26,538		1,047	0	1,047	\$0.050000	\$52.35
									\$85.08

THANK YOU FOR YOUR BUSINESS!

Invoice SubTotal	\$85.08
Tax:	\$0.00
Invoice Total	\$85.08
Balance Due:	\$85.08



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CONTRACT INVOICE

Invoice Number: 367097
 Invoice Date: 01/30/2017

REMIT TO:
 Bishop Business
 4125 S 94th Street
 Omaha, NE 68127

Bill To: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Customer: Heartland Family Service-Jefferson House
 437 Jefferson Road
 Fremont, NE 68025

Account No	Payment Terms	Due Date	Invoice Total	Balance Due	
103343	Due Upon Receipt	02/14/2017	\$148.63	\$148.63	
Contract Number	Contact	Contract Amount	P.O. Number	Start Date	Exp. Date
SC3972-01		\$148.63	Diane Benton	09/28/2013	
Remarks					
THIS IS COST PER COPY FOR THIS UNIT - put on worksheet for Heartland Family					

Summary:

Contract base rate charge for this billing period	\$0.00
Contract overage charge for the 12/28/2016 to 01/27/2017 overage period	\$148.63 **
**See overage details below	<u>\$148.63</u>

Detail:

Equipment included under this contract

Xerox/X5845/APTXF2

Number	Serial Number	Base Adj.	Location						
BL884	EX7-394831	\$0.00	Heartland Family Service-Jefferson House 437 Jefferson Road Fremont, NE 68025						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B/W	B/W	230,671	238,826		8,155		*** See overage details below		\$0.00

Xerox/X7855/PTXF2

Number	Serial Number	Base Adj.	Location						
BL859	MX4-327661	\$0.00	Heartland Family Service - Youth Links-NOIC 4318 Fort St 2ND FLOOR YOUTH LINKS Omaha, NE 68111-1849						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B/W	B/W	482,159	488,510		6,351		*** See overage details below		
Color	COLOR	32,400	33,900		1,500	0	1,500	\$0.043000	\$64.50
									\$64.50

Overage Details

Meter Group	Total Copies	Covered Copies	Billable	Rate	Total
B/W	14,506	0	0	14,506	\$0.005800
					\$84.13
					Base Amount:
					\$0.00
					\$84.13
Meter Type	Equip. Number	Serial Number	Begin	End	Copies
B/W	BL859	MX4-327661	482,159	488,510	6,351
B/W	BL884	EX7-394831	230,671	238,826	8,155
Total Grouped Overage Charges:					\$84.13
Total Grouped Base Charges:					\$0.00
Total Meter Group Charges:					\$84.13



4125 S 94th St - Omaha 68127
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www.bbec.com

CONTRACT INVOICE

Invoice Number: 367097

Invoice Date: 01/30/2017

REMIT TO:
Bishop Business
4125 S 94th Street
Omaha, NE 68127

Bill To: Heartland Family Service
2101 S 42nd Street
Omaha, NE 68105-2909

Customer: Heartland Family Service-Jefferson House
437 Jefferson Road
Fremont, NE 68025

THANK YOU FOR YOUR BUSINESS!

Invoice SubTotal	\$148.63
Tax:	\$0.00
Invoice Total	\$148.63
Balance Due:	\$148.63



4125 S 94th St - Omaha 68127
 5253 R St - Lincoln 68504
 1.800.933.9583 / 402.537.4379 fx
 www.bb.ec.com

CONTRACT INVOICE

Invoice Number: 367098
 Invoice Date: 01/30/2017

REMIT TO:
 Bishop Business
 4125 S 94th Street
 Omaha, NE 68127

Bill To: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Customer: Heartland Family Service
 515 E Broadway
 Council Bluffs, IA 51503

Account No	Payment Terms	Due Date	Invoice Total	Balance Due	
103343	Due Upon Receipt	02/14/2017	\$844.98	\$844.98	
Contract Number	Contact	Contract Amount	P.O. Number	Start Date	Exp. Date
SC3973-01		\$789.70	.	09/28/2013	
Remarks					
THIS IS COST PER COPY ON ALL UNITS - put on worksheet for Heartland Family					

Summary:

Contract base rate charge for this billing period	\$0.00 *
Contract overage charge for the 12/28/2016 to 01/27/2017 overage period	\$789.70 **
*Sum of equipment base charges **See overage details below	<u>\$789.70</u>

Detail:

Equipment included under this contract

Xerox/X5845/APTXF2

Number	Serial Number	Base Charge	Location						
BL882	EX7-395103	\$0.00	Heartland Family Service 1515 Avenue J Council Bluffs, IA 51503						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B\W	B/W	242,203	245,520		3,317	*** See overage details below			\$0.00

Number	Serial Number	Base Charge	Location						
BL883	EX7-394726	\$0.00	Heartland Family Service 1722 Avenue C Council Bluffs, IA 51501						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B\W	B/W	329,175	334,190		5,015	*** See overage details below			\$0.00

Xerox/X5855/APTXF2

Number	Serial Number	Base Charge	Location						
BL875	EX7-392588	\$0.00	Heartland Family Service 2912 9th Avenue Council Bluffs, IA 51501						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B\W	B/W	510,188	517,878		7,690	*** See overage details below			\$0.00

Number	Serial Number	Base Charge	Location						
BL876	EX7-398699	\$0.00	Heartland Family Service 515 E Broadway Council Bluffs, IA 51503						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B\W	B/W	621,922	630,753		8,831	*** See overage details below			\$0.00

Xerox/X7845/PTXF2



4125 S 94th St - Omaha 68127
 5253 R St - Lincoln 68504
 1.800.933.9583 / 402.537.4379 fx
 www.bb.ec.com

CONTRACT INVOICE

Invoice Number: 367098
 Invoice Date: 01/30/2017

REMIT TO:
 Bishop Business
 4125 S 94th Street
 Omaha, NE 68127

Bill To: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Customer: Heartland Family Service
 515 E Broadway
 Council Bluffs, IA 51503

Account No	Payment Terms	Due Date	Invoice Total	Balance Due
103343	Due Upon Receipt	02/14/2017	\$844.98	\$844.98

Number	Serial Number	Base Charge			Location				
BL874	MX4-327593	\$0.00			Heartland Family Service 1515 Avenue J Council Bluffs, IA 51503				
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B/W	B/W	261,193	268,252		7,059		*** See overage details below		
Color	COLOR	45,443	46,174		731		*** See overage details below		
\$0.00									

Number	Serial Number	Base Charge			Location				
BL877	MX4-327602	\$0.00			Heartland Family Service 515 E Broadway Council Bluffs, IA 51503				
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B/W	B/W	580,483	596,260		15,777		*** See overage details below		
Color	COLOR	46,353	47,494		1,141		*** See overage details below		
\$0.00									

Number	Serial Number	Base Charge			Location				
BN523	MX4-740794	\$0.00			Heartland Family Service 705 N 16th Street Council Bluffs, IA 51501				
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B/W	B/W	99,329	106,487		7,158		*** See overage details below		
Color	COLOR	21,978	23,397		1,419		*** See overage details below		
\$0.00									

Xerox/X7855/PTXF2

Number	Serial Number	Base Charge			Location				
BL873	MX4-327598	\$0.00			Heartland Family Service 2912 9th Avenue Council Bluffs, IA 51501				
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B/W	B/W	405,528	414,033		8,505		*** See overage details below		
Color	COLOR	198,304	204,833		6,529		*** See overage details below		
\$0.00									



4125 S 94th St - Omaha 68127
 5253 R St - Lincoln 68504
 1.800.933.9583 / 402.537.4379 fx
 www.bbec.com

CONTRACT INVOICE

Invoice Number: 367098
 Invoice Date: 01/30/2017

REMIT TO:
 Bishop Business
 4125 S 94th Street
 Omaha, NE 68127

Bill To: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Customer: Heartland Family Service
 515 E Broadway
 Council Bluffs, IA 51503

Account No	Payment Terms	Due Date	Invoice Total	Balance Due
103343	Due Upon Receipt	02/14/2017	\$844.98	\$844.98

Overage Details

Meter Group	Total Copies	Covered Copies	Billable	Rate	Total
B/W	63,352	0	63,352	\$0.005800	\$367.44
				Base Amount:	\$0.00
					\$367.44
Meter Type	Equip. Number	Serial Number	Begin	End	Copies
B\W	BL873	MX4-327598	405,528	414,033	8,505
B\W	BL874	MX4-327593	261,193	268,252	7,059
B\W	BL875	EX7-392588	510,188	517,878	7,690
B\W	BL876	EX7-398699	621,922	630,753	8,831
B\W	BL877	MX4-327602	580,483	596,260	15,777
B\W	BL882	EX7-395103	242,203	245,520	3,317
B\W	BL883	EX7-394726	329,175	334,190	5,015
B\W	BN523	MX4-740794	99,329	106,487	7,158
Meter Group	Total Copies	Covered Copies	Billable	Rate	Total
COLOR	9,820	0	9,820	\$0.043000	\$422.26
				Base Amount:	\$0.00
					\$422.26
Meter Type	Equip. Number	Serial Number	Begin	End	Copies
Color	BL873	MX4-327598	198,304	204,833	6,529
Color	BL874	MX4-327593	45,443	46,174	731
Color	BL877	MX4-327602	46,353	47,494	1,141
Color	BN523	MX4-740794	21,978	23,397	1,419
Total Grouped Overage Charges:					\$789.70
Total Grouped Base Charges:					\$0.00
Total Meter Group Charges:					\$789.70

THANK YOU FOR YOUR BUSINESS!

Invoice SubTotal	\$789.70
Tax:	\$55.28
Invoice Total	\$844.98
Balance Due:	\$844.98

2 checks

141253

1/25/2017

7410082504

CUMMINGS, G

4,201.44

0.00

4,201.44



Check: 141253

1/26/2017

WAYS TO WORK

4,201.44

ORIGINAL DOCUMENT PRINTED ON CHEMICAL REACTIVE PAPER WITH MICROPRINTED BORDER

141253



2101 S. 42ND ST.
OMAHA, NE 68105
402-553-3000

A United Way Member Agency

AMERICAN NATIONAL BANK
OMAHA, NEBRASKA 68114

NUMBER

27-85/1040

*FOUR THOUSAND TWO HUNDRED ONE AND 44 / 100

DATE

AMOUNT

PAY
TO THE
ORDER
OF

WAYS TO WORK
11700 WEST LAKE PARK DR
Milwaukee, WI 53224

1/26/2017

*****4,201.44*



WAYSWRK

A SECOND SIGNATURE REQUIRED FOR CHECKS OVER 1,000 DOLLARS



THIS DOCUMENT CONTAINS HEAT SENSITIVE INK. TOUCH OR PRESS HERE - RED IMAGE DISAPPEARS WITH HEAT.

⑈ 141253⑈ ⑆ 104000854⑆ 3285463⑈

HEARTLAND FAMILY SERVICE

141253

FILE COPY

1/25/2017

7410072787

ELLISON, M

2,023.07

0.00

2,023.07



Check: 141252

1/26/2017

WAYS TO WORK

2,023.07

141252



2101 S. 42ND ST.
OMAHA, NE 68105
402-553-3000
A United Way Member Agency

AMERICAN NATIONAL BANK
OMAHA, NEBRASKA 68114

NUMBER

27-85/1040

*TWO THOUSAND TWENTY-THREE AND 07 / 100

DATE

AMOUNT

PAY TO THE ORDER OF

WAYS TO WORK
11700 WEST LAKE PARK DR
Milwaukee, WI 53224

1/26/2017

*****2,023.07*

WAYSWRK

A SECOND SIGNATURE REQUIRED FOR CHECKS OVER 1,000 DOLLARS



⑈ 141252⑈ ⑆ 104000854⑆ 3285463⑈

HEARTLAND FAMILY SERVICE

141252

FILE COPY



BUY BACK INVOICE

11700 West Lake Park Drive
 Milwaukee WI 53224
 414.359.1448, FAX 414.359.9548
 [e-mail]

DATE January 25, 2017
 CUSTOMER ID

Please remit the amount listed below to the address listed above
 Please enclose a copy of this invoice with each check.

Acct Number	Client Name	Payoff Amt	Daily Accrual	Days Past Due
7410082504	Cummings, Gabrielle	\$ 4,201.44	\$ 0.53	156
7410072787	Ellison, Mary	\$ 2,023.07	1.02	156
Total Due				\$ 6,224.51

Prog. Serv. _____
 Amt. 6224.51
 Cler. lam
 Appr. _____
 Acct. No. 4900-21 = 4201.44

Lisa Picker
to pick-up ✓

4900-21 = 2023.07 com: Cummings 7410082504
 Ellison - 7410072787

POSTED

Dawn Bockmann

From: Lisa Picker
Sent: Wednesday, January 25, 2017 2:06 PM
To: AccountsPayable
Subject: Defaulted Loans
Attachments: Buy Back Invoice - Ellison, Cummings.xlsx

Hello everyone

Attached is an invoice for two defaulted loans. Just let me know when the check is ready and I will swing by and pick it up.

Thanks

Lisa K Picker

Heartland Family Service

712.435.5368

lpicker@heartlandfamilyservice.org

MAPA JARC GRANT BILLING DOCUMENT

PART IV - Project Budget Worksheet

Project Name: __HEARTLAND FAMILY SERVICE - WAYS TO WORK__

Contact Name: __Joanie Poore, VP__

BUDGET DETAIL	TOTAL JARC BUDGET (ORIGINAL)	2/1/2017 - 2/28/2017		TOTAL COST MONTH	Program to Date	
		JARC	LOCAL MATCH		JARC	LOCAL MATCH
A. OPERATING EXPENSES¹						
1. Salaries and Benefits	30,720	\$ 1,458.20	\$ 943.30	\$ 2,401.50	\$ 2,915.67	\$ 1,917.69
2. Atty, Audit, Acct, POS	2,200	\$ -	\$ 20.37	\$ 20.37	\$ -	\$ 40.73
3. Office and Meeting Supplies	400	\$ 1.32	\$ 1.32	\$ 2.64	\$ 3.33	\$ 3.33
4. Phone & Internet	400	\$ 8.56	\$ 8.56	\$ 17.11	\$ 17.07	\$ 17.07
5. Postage & Shipping	220	\$ 4.17	\$ 4.17	\$ 8.34	\$ 5.22	\$ 5.22
6. Building and Occupancy	1,240	\$ 39.67	\$ 39.67	\$ 79.33	\$ 66.29	\$ 66.29
7. Equipment & Equip rep/rent	800	\$ 14.07	\$ 14.07	\$ 28.13	\$ 27.94	\$ 27.94
8. Advertising, Printing and Pubs	840	\$ 5.69	\$ 5.69	\$ 11.38	\$ 11.63	\$ 11.63
9. Mileage, travel, conf, auto ins.	320	\$ 96.98	\$ 96.98	\$ 193.96	\$ 105.38	\$ 105.38
10. Borrower Incentives	-			\$ -	\$ -	\$ -
11. Org Dues & Misc	128		\$ -	\$ -	\$ -	\$ -
12. Administrative Costs	6,732	\$ -	\$ 494.53	\$ 494.53	\$ -	\$ 957.25
Subtotal - Operating Expenses	\$ 44,000	\$ 1,628.65	\$ 1,628.65	\$ 3,257.29	\$ 3,152.52	\$ 3,152.52

Period	Date	Journal	Comments	Beginning Balance	Debit	Credit	Net Change	Ending Balance	Salaries & Benefits	Atty. Legal, Audit, Acct, POS, Interdept
				2,131.48	2,102.79	-	2,102.79	4,234.27	2,102.79	-
2210-21			GROUP HEALTH INSURANCE: WTW	12.37						
02	2/28/2017	PR-000361	HEALTH INS	12.37	12.12	-	12.12	24.49	12.12	-
					12.12	-		24.49	12.12	-
2220-21			RETIREMENT PLAN: WTW	65.89						
02	2/28/2017	PR-000361	RETIREMENT		65.88	-		131.77	65.88	-
				65.89	65.88	-	65.88	131.77	65.88	-
2290-21			OTHER BENEFITS/DIS.: WTW	8.39						
02	2/28/2017	PR-000361	LONG TERM DISABILITY		8.3	-		16.69	8.30	-
				8.39	8.30	-	8.30	16.69	8.30	-
2300-21			PAYROLL TAXES: WTW	213.72						
02	2/28/2017	AJ-082569	PR TAXES PROF LIAB		39.18	-		252.90	39.18	-
02	2/28/2017	AJ-082823	ALLOCATION OF TAXES - LAKIN		1.64	-		254.54	1.64	-
02	2/28/2017	PR-000361	PAYROLL TAXES		158.48	-		413.02	158.48	-
02	2/28/2017	PR-000361	STATE UNEMPLOYMENT		13.11	-		426.13	13.11	-
				213.72	212.41	-	212.41	426.13	212.41	-
2410-21			ATTORNEY FEES: WTW	-						
							0.00	0.00	-	-
2420-21			OTHER LEGAL COSTS: WTW	-						
							0.00	0.00	-	-
2430-21			AUDITING/ACCOUNT FEES: WTW	5.34						
02	2/28/2017	AJ-082581	AUDITING/ACCT FEES ALLOC		5.34	-		10.68	5.34	-
				5.34	5.34	-	5.34	10.68	-	5.34
2490-21			OTHER PURCHASE OF SERVICE: WTW	11.64						
02	2/28/2017	AJ-082592	PURCHASE OF SERVICE ALLOC		11.65	-		23.29	11.65	-
				11.64	11.65	-	11.65	23.29	-	11.65
2491-21			Interdepartmental: WTW	3.38						
02	2/28/2017	RJ-003736	EXPENS/INTEROFFICE DELIVERY		3.38	-		6.76	3.38	-
				3.38	3.38	-	3.38	6.76	-	3.38
2510-21			OFFICE SUPPLIES: WTW	2.32						
02	2/28/2017	AJ-082607	LAKIN CAMPUS OFFICE SUPPLIES		1.54	-		3.86	-	-
				2.32	1.54	-	1.54	3.86	-	-
2520-21			BUILDING & GROUND SUPPLIES: WTW	2.97						
02	2/28/2017	AJ-082619	BUILDING SUPPLIES - LAKIN CAMPUS		1.44	-		4.41	-	-
02	2/28/2017	AJ-082624	BUILDING & GROUND SUPPLIES		0.52	-		4.93	-	-
				2.97	1.96	-	1.96	4.93	-	-
2550-21			FOOD: WTW	1.69						
02	42794	AJ-082631	LAKIN - FOOD		1.1	-		2.79	-	-
				1.69	1.10	-	1.10	2.79	-	-
2600-21			TELEPHONE: WTW	17.03						
02	2/28/2017	AJ-082644	ALLOCATION TELEPHONE LAKIN		9.28	-		26.31	-	-
02	2/28/2017	AJ-082649	TELEPHONE		7.83	-		34.14	-	-

Period	Date	Journal	Comments	Beginning Balance	Debit	Credit	Net Change	Ending Balance	Salaries & Benefits	Atty. Legal, Audit, Acct, POS, Interdept
				17.03	17.11	-	17.11	34.14	-	-
2700-21			POSTAGE & SHIPPING: WTW	2.10						
02	2/28/2017	AJ-082656	POSTAGE - LAKIN CAMPUS		1.52			3.62		
02	2/28/2017	AJ-082661	POSTAGE ALLOCATION		2.10			5.72		
02	2/28/2017	JE-003667	POSTAGE - JAN		1.90			7.62		
02	2/28/2017	JE-003667	POSTAGE - JAN		2.82			10.44		
				2.10	8.34	-	8.34	10.44	-	-
2830-21			UTILITIES: WTW	14.82						
02	2/28/2017	AJ-082674	UTILITIES ALLOCATION		29.52			44.34		
				14.82	29.52	-	29.52	44.34	-	-
2840-21			CARE OF BUILDINGS & GROUNDS: WTW	17.81						
02	2/28/2017	AJ-082684	ALLOCATION OF CARE OF BUILDING AND GROUNDS LAKIN		25.60			43.41		
02		42794 AJ-082689	ALLOCATION - CARE OF BUILDING AND GROUNDS		4.08			47.49		
				17.81	29.68	-	29.68	47.49	-	-
2841-21			Inter - Bids and Grn: WTW	-						
				-	-	-	0.00	0.00	-	-
2850-21			EQUIPMENT REPAIR & MAINTENANCE: WTW	7.07						
02	2/28/2017	AJ-082702	EQUIPMENT REPAIR LAKIN CAMPUS		3.74			10.81		
02	2/28/2017	AP-004871	BISHOP BUSINESS EQUIPMENT CO /IN: FEB-2017		3.71			14.52		
				7.07	7.45	-	7.45	14.52	-	-
2880-21			PROPERTY INS/TAXES: WTW	17.65						
02	2/28/2017	AJ-082721	PROP INS/TAXES ALLOCATION		18.17			35.82		
				17.65	18.17	-	18.17	35.82	-	-
3100-21			PRINTING & PUB.: WTW	11.88						
02	2/28/2017	AJ-082733	PRINTING & PUBLICATION ALLOCATION		11.38			23.26		
				11.88	11.38	-	11.38	23.26	-	-
3210-21			MILEAGE/EXPENSE: WTW	-						
02	2/28/2017	PR-000361	EXP REIMBURSEMENT		176.70			176.70		
				-	176.70	-	176.70	176.70	-	-
3220-21			OUT OF TOWN TRAVEL: WTW	-						
				-	-	-	0.00	0.00	-	-
3250-21			AGENCY VEHICLE OPERATE.COSTS : WTW	-						
				-	-	-	0.00	0.00	-	-
3280-21			AUTOMOBILE INSURANCE: WTW	16.79						
02	2/28/2017	AJ-082743	AUTO INS ALLOCATION		17.26			34.05		
				16.79	17.26	-	17.26	34.05	-	-
3300-21			CONFERENCE/CONVENTION/TRIPS: WTW	-						
				-	-	-	0.00	0.00	-	-
3500-21			SPECIFIC ASSISTANCE INDIVIDUAL: WTW	-						
				-	-	-	0.00	0.00	-	-
4100-21			ORGANIZATION DUES: WTW	-						

Period	Date	Journal	Comments	Beginning Balance	Debit	Credit	Net Change	Ending Balance	Salaries & Benefits	Atty, Legal, Audit, Acct, POS, Interdept
				-	-	-	0.00	0.00	-	-
4300-21			EQUIPMENT/FIXED ASSETS: WTW	20.68						
02	2/28/2017	AJ-082761	EQUIPMENT FIXED ASSETS		20.68			41.36		
				20.68	20.68	-	20.68	41.36	-	-
4900-21			MISCELLANEOUS: WTW	7,224.51						
02	2/28/2017	JE-003663	WTW Reserve		1,000.00			8,224.51		
				7,224.51	1,000.00	-	1,000.00	8,224.51	-	-
				-	-	-	-	-	-	-
				-	4,185.46	2,083.33	2,102.13	2,102.13	2,401.50	20.37
			Calculation of Admin costs (=17.9% of expenses excluding Loan Guarantee Fur	494.53						
			Expenses inc Admin Costs						2,401.50	20.37
									2,401.50	20.37

Check

Office & Mtg Supplies	Phone & Internet	Postage & shipping	Building & Occupancy (Utilities, care of bidg/grnds, bidg/grnd supp, prop ins)	Equip & Equip rent/repair	Advertising, Prntg, Pubs	Mileage, travel, conf, agency vehicle, auto ins	Borrower Incentives	Org Dues & Misc	Admin @ 17.9%	Loan Guarantee Funds (Misc)	Total
-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	20.68	-	-	-	-	-	-	20.68
-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	20.68	-	-	-	-	-	-	20.68
-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	1,000.00	1,000.00
-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	1,000.00	1,000.00
-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-
2.64	17.11	8.34	79.33	28.13	11.38	193.96	-	-	-	278.48	3,041.24
-	-	-	-	-	-	-	-	-	494.53	-	494.53
2.64	17.11	8.34	79.33	28.13	11.38	193.96	-	-	494.53	278.48	3,535.77
-	-	-	-	-	-	-	-	-	-	-	-
2.64	17.11	8.34	79.33	28.13	11.38	193.96	-	-	494.53	278.48	3,535.77

Check

3,257.29 Ties to MAPA

NOTE: Reduce Loan Guarantees by Funds received after default

Progress Report

Title: Heartland Family Service- Ways to Work

Date: 02/01/2017 -02/28/2017

Title: MAPA bill \$ 2,571.95 out of \$22,000

1. Work Completed for Current Billing Period:

- a. The Ways to Work program currently has no one shopping for a vehicle.

2. Anticipated Work for Next Billing Period:

- a. Same as prior month

3. Information Needed from FTA/MAPA:

- a. No information is needed.

4. Percent of Work Completed to Date:

- a. 23% of grant utilized

5. Outstanding Issues:

Data

1. Number of repossessions in the month (bought back loans)

- a. 0

2. Number of new closed loans in the month

- a. 0

3. Number of loans outstanding

- a. 12

4. Other.....

- a.

5. Narrative

- a. Continuing community awareness program to increase participation in financial education and the Ways to Work program as a whole.

2/28/2017

FEB-2017

INV's 370096, 097,098,099,100,262,340

3,275.24

0.00

3,275.24



Check: 141929

3/6/2017

BISHOP BUSINESS EQUIPMENT CO

3,275.24

ORIGINAL DOCUMENT PRINTED ON CHEMICAL REACTIVE PAPER WITH MICROPRINTED BORDER



2101 S. 42ND ST.
OMAHA, NE 68105
402-553-3000
A United Way Member Agency

AMERICAN NATIONAL BANK
OMAHA, NEBRASKA 68114

NUMBER

141929

27-85/1040

*THREE THOUSAND TWO HUNDRED SEVENTY-FIVE AND 24 / 100

AMOUNT

PAY TO THE ORDER OF

BISHOP BUSINESS EQUIPMENT CO
4125 S 94TH ST
OMAHA, NE 68127

3/6/2017

*****3,275.24*



BISHOPS

A SECOND SIGNATURE REQUIRED FOR CHECKS OVER 1,000 DOLLARS



⑈ 141929 ⑈ ⑆ 104000854 ⑆ 3285463 ⑈

HEARTLAND FAMILY SERVICE

141929

FILE COPY

BISHOPS BUSINESS EQUIPMENT

2/28/2017

**Invoice #'s 370096, 370097, 370098,
370099, 370100, 370262, 370340**

Date: 2/28/17

Feb.

Account Name	2850-	Grand Total
Administration	03	\$1,195.21
Development	04	\$0.03
NE Behavioral Health	05	\$177.86
Generations Center	06	\$32.17
NE Family Works Residential	07	\$110.85
NH Emerg Svcs NOT IN USE (Move to 11)	08	\$0.00
Better Together	09	\$35.54
Gamblers Assistance Iowa	10	\$12.04
Hardship Assistance	11	\$36.26
Child & Adult Care Food Program	12	\$92.51
Solomon Girls Center	13	\$0.37
NE HPRP/OPPORTUNITIES	14	\$47.17
Community Education	15	\$27.11
Iowa Counseling	16	\$178.05
Samaritan Housing	17	\$6.67
Domestic Abuse Program NE	18	\$36.13
Prevention DFC	19	\$13.08
Youth Links	20	\$105.37
Ways to Work	21	\$3.71
Nebraska Gamblers	22	\$6.01
Integrated Health Home	23	\$31.43
Sarpy Juvenile Justice	24	\$0.46
In Home Parenting Time	25	\$18.14
Iowa Assertive CommunityTrmt	26	\$51.46
Bridges	27	\$0.00
Iowa Mental Health Crt	28	\$79.08
Family Works Iowa	29	\$40.49
Therapeutic School	30	\$517.65
Nebraksa Tracker-Inactive	31	\$0.00
Assessment Center	32	\$0.00
Passages	33	\$13.42
PCHL Rapid Re-housing	34	\$12.92
Fremont Childrens Shelter	35	\$41.06
Heartland Housing Solutions	36	\$13.23
Heartland Homes	37	\$0.80
ASAP	38	\$14.45
Ready in 5	39	\$44.43
Heartland Housing Beginnings	40	\$13.73
DCYC	41	\$0.45
Transitions	42	\$0.06
Family Crisis Mediation	43	\$6.54

Prog. Serv. _____
Amt. 3,275.24
Cler. DB
Appr. _____
Acct. No. _____

Due: 3/15/16

POSTED

Baby Talk	44	\$31.07	
Refugee Juvenile Justice Adv	45	\$3.54	
Prevention - Block	46	\$24.71	
Metro Home Base/do not use	47	\$0.00	
DRUG TESTING/do not use	48	\$0.00	
In Home Support-Fremont	49	\$0.00	
Prevention - TFN/MOTAC	50	\$37.44	
Prevention - SPF/LiveWise	51	\$0.00	
In Home Family Support	52	\$23.02	
PCHL Prevention	53	\$7.43	
IBH - School Based Services	54	\$43.10	
Child & Family Center	55	\$49.76	
NE Family Works Apts	56	\$3.00	
The Coeur Group	57	\$0.96	
VOCA	58	\$0.00	
VAWA	59	\$0.00	
SPSS	60	\$0.00	
Dr Paul	57	\$5.62	Com: Dr Paul
Dr Coy	57	\$6.80	Com: Dr Coy
Integrated Therapy	57	\$21.66	Com: Integrated Therapy
Bishop-ADMIN.	03	\$1.19	
		<u>\$3,275.24</u>	



4125 S 94th St - Omaha 68127
 5253 R St - Lincoln 68504
 1.800.933.9583 / 402.537.4379 fx
 www.bbec.com

CONTRACT INVOICE

Invoice Number: 370096
 Invoice Date: 02/28/2017

REMIT TO:
 Bishop Business
 4125 S 94th Street
 Omaha, NE 68127

Bill To: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Customer: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Account No	Payment Terms	Due Date	Invoice Total	Balance Due	
103343	Due Upon Receipt	03/15/2017	\$7.12	\$7.12	
Contract Number	Contact	Contract Amount	P.O. Number	Start Date	Exp. Date
5C4973-01		\$6.65	BP213	09/28/2015	
Remarks					
THIS CHARGE IS FOR COPIES AT COST PER COPY - put on worksheet for Heartland Family					

Summary:

Contract base rate charge for this billing period \$0.00
 Contract overage charge for the 01/28/2017 to 02/27/2017 overage period \$6.65**
 **See overage details below \$6.65

Detail:

Equipment included under this contract

Toshiba/T355E

Number	Serial Number	Base Adj.	Location						
BP213	CPG-912476	\$0.00	Heartland Family Service 2101 S 42nd Street Omaha, NE 68105-2909						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B/W	B/W	104,597	105,744		1,147	0	1,147	\$0.005800	\$6.65
									\$6.65

0 - C

7.12 +
 1,053.79 +
 34.70 +
 178.28 +
 1,036.34 +
 31.41 +
 933.60 +
 007
 3,275.24 G +

THANK YOU FOR YOUR BUSINESS!

Invoice SubTotal	\$6.65
Tax:	\$0.47
Invoice Total	\$7.12
Balance Due:	\$7.12



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 5253 R St - Lincoln 68504
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 www.bbnc.com

CONTRACT INVOICE

Invoice Number: 370097
 Invoice Date: 02/28/2017

REMIT TO:
 Bishop Business
 4125 S 94th Street
 Omaha, NE 68127

Bill To: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Customer: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Account No	Payment Terms	Due Date	Invoice Total	Balance Due	
103343	Due Upon Receipt	03/15/2017	\$1,053.79	\$1,053.79	
Contract Number	Contact	Contract Amount	P.O. Number	Start Date	Exp. Date
SC4031-01		\$207.25	DIANE BENTON	09/28/2013	
Remarks					
THIS IS FOR YOUR BLACK, WHITE & COLOR COPIES AT COST PER COPY - put on worksheet for customer					

Summary:

Contract base rate charge for this billing period	\$0.00
Contract overage charge for the 01/28/2017 to 02/27/2017 overage period	\$207.25 **
**See overage details below	\$207.25

Detail:

Equipment included under this contract

Toshiba/TF654CT

Number	Serial Number	Base Adj.	Location						
BK385	CCD-110160	\$0.00	Heartland Family Service 2101 S 42nd Street Omaha, NE 68105-2909						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B\W	B/W	272,753	275,403		2,650	0	2,650	\$0.006000	\$15.90
Color	COLOR	771,814	775,641		3,827	0	3,827	\$0.050000	\$191.35
									\$207.25

Contract Number	Contact	Contract Amount	P.O. Number	Start Date	Exp. Date
XEROX-E28659739-01		\$777.60	.	10/24/2016	
Remarks					
THIS CHARGE IS FOR BLACK & WHITE AND COLOR COPIES AT COST PER COPY - MONTHLY					

Summary:

Contract base rate charge for this billing period	\$0.00
Contract overage charge for the 01/24/2017 to 02/23/2017 overage period	\$777.60 **
**See overage details below	\$777.60

Detail:

Equipment included under this contract

Xerox/XC70

Number	Serial Number	Base Adj.	Location						
BR901	E2B-659739	\$0.00	Heartland Family Service 2101 S 42nd Street Omaha, NE 68105-2909						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B\W	B/W	6,391	14,215		7,824	0	7,824	\$0.008000	\$62.59
Color	COLOR	22,128	37,024		14,896	0	14,896	\$0.048000	\$715.01
									\$777.60



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5253 R St - Lincoln 68504
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www.bb.ec.com

REMIT TO:
Bishop Business
4125 S 94th Street
Omaha, NE 68127

CONTRACT INVOICE

Invoice Number: 370097

Invoice Date: 02/28/2017

Bill To: Heartland Family Service
2101 S 42nd Street
Omaha, NE 68105-2909

Customer: Heartland Family Service
2101 S 42nd Street
Omaha, NE 68105-2909

THANK YOU FOR YOUR BUSINESS!

Invoice SubTotal	\$984.85
Tax:	\$68.94
Invoice Total	\$1,053.79
Balance Due:	\$1,053.79



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 5253 R St - Lincoln 68504
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 www.bb.ec.com

CONTRACT INVOICE

Invoice Number: 370098
 Invoice Date: 02/28/2017

REMIT TO:
 Bishop Business
 4125 S 94th Street
 Omaha, NE 68127

Bill To: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Customer: Heartland Family Services Couer Group
 900 So 74th Plaza Suite 400
 Omaha, NE 68114-4667

Account No	Payment Terms	Due Date	Invoice Total	Balance Due	
103343	Due Upon Receipt	03/15/2017	\$34.70	\$34.70	
Contract Number	Contact	Contract Amount	P.O. Number	Start Date	Exp. Date
SC5389-01	HFS Couer Group	\$32.43	HFS Couer Group	08/28/2016	
Remarks					
THIS CHARGE IS FOR BLACK, WHITE & COLOR COPIES ON BP504 - HFS Couer Group -AT COST PER COPY MONTHLY - PUT ON WORKSHEET WITH THE UNITS					

Summary:

Contract base rate charge for this billing period \$0.00
 Contract overage charge for the 01/28/2017 to 02/27/2017 overage period \$32.43 **
 **See overage details below \$32.43

Detail:

Equipment included under this contract

Toshiba/TF354C

Number	Serial Number	Base Adj.	Location
BP504	CQF-112689	\$0.00	Heartland Family Services Couer Group 900 So 74th Plaza Suite 400 Omaha, NE 68114-4667

Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B/W	B/W	242,923	245,662		2,739	0	2,739	\$0.006000	\$16.43
Color	COLOR	272,937	273,257		320	0	320	\$0.050000	\$16.00
									\$32.43

THANK YOU FOR YOUR BUSINESS!

Invoice SubTotal	\$32.43
Tax:	\$2.27
Invoice Total	\$34.70
Balance Due:	\$34.70



4125 S 94th St - Omaha 68127
 5253 R St - Lincoln 68504
 1.800.933.9583 / 402.537.4379 fx
 www.bb.ec.com

CONTRACT INVOICE

Invoice Number: 370099
 Invoice Date: 02/28/2017

REMIT TO:
 Bishop Business
 4125 S 94th Street
 Omaha, NE 68127

Bill To: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Customer: Heartland Family Service-Jefferson House
 437 Jefferson Road
 Fremont, NE 68025

Account No	Payment Terms	Due Date	Invoice Total	Balance Due	
103343	Due Upon Receipt	03/15/2017	\$178.28	\$178.28	
Contract Number	Contact	Contract Amount	P.O. Number	Start Date	Exp. Date
SC3972-01		\$178.28	Diane Benton	09/28/2013	
Remarks					
THIS IS COST PER COPY FOR THIS UNIT - put on worksheet for Heartland Family					

Summary:

Contract base rate charge for this billing period	\$0.00
Contract overage charge for the 01/28/2017 to 02/27/2017 overage period	\$178.28 **
**See overage details below	\$178.28

Detail:

Equipment included under this contract

Xerox/X5845/APTXF2

Number	Serial Number	Base Adj.	Location						
BL884	EX7-394831	\$0.00	Heartland Family Service-Jefferson House 437 Jefferson Road Fremont, NE 68025						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B/W	B/W	238,826	245,880		7,054		*** See overage details below		\$0.00

Xerox/X7855/PTXF2

Number	Serial Number	Base Adj.	Location						
BL859	MX4-327661	\$0.00	Heartland Family Service - Youth Links-NOIC 4318 Fort St 2ND FLOOR YOUTH LINKS Omaha, NE 68111-1849						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B/W	B/W	488,510	497,099		8,589		*** See overage details below		
Color	COLOR	33,900	35,936		2,036	0	2,036	\$0.043000	\$87.55
									\$87.55

Overage Details

Meter Group	Total Copies	Covered Copies	Billable	Rate	Total
B/W	15,643	0	0	\$0.005800	\$90.73
					Base Amount:
					\$0.00
					\$90.73
Meter Type	Equip. Number	Serial Number	Begin	End	Copies
B/W	BL859	MX4-327661	488,510	497,099	8,589
B/W	BL884	EX7-394831	238,826	245,880	7,054
Total Grouped Overage Charges:					\$90.73
Total Grouped Base Charges:					\$0.00
Total Meter Group Charges:					\$90.73



4125 S 94th St - Omaha 68127
5253 R St - Lincoln 68504
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www.bbnc.com

REMIT TO:
Bishop Business
4125 S 94th Street
Omaha, NE 68127

CONTRACT INVOICE

Invoice Number: 370099
Invoice Date: 02/28/2017

Bill To: Heartland Family Service
2101 S 42nd Street
Omaha, NE 68105-2909

Customer: Heartland Family Service-Jefferson House
437 Jefferson Road
Fremont, NE 68025

THANK YOU FOR YOUR BUSINESS!

Invoice SubTotal	\$178.28
Tax:	\$0.00
Invoice Total	\$178.28
Balance Due:	\$178.28



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 5253 R St - Lincoln 68504
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CONTRACT INVOICE

Invoice Number: 370100
 Invoice Date: 02/28/2017

REMIT TO:
 Bishop Business
 4125 S 94th Street
 Omaha, NE 68127

Bill To: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Customer: Heartland Family Service
 515 E Broadway
 Council Bluffs, IA 51503

Account No	Payment Terms	Due Date	Invoice Total	Balance Due	
103343	Due Upon Receipt	03/15/2017	\$1,036.34	\$1,036.34	
Contract Number	Contact	Contract Amount	P.O. Number	Start Date	Exp. Date
SC3973-01		\$968.54	.	09/28/2013	
Remarks					
THIS IS COST PER COPY ON ALL UNITS - put on worksheet for Heartland Family					

Summary:

Contract base rate charge for this billing period	\$0.00 *
Contract overage charge for the 01/28/2017 to 02/27/2017 overage period	\$968.54 **
*Sum of equipment base charges **See overage details below	\$968.54

Detail:

Equipment included under this contract

Xerox/X5845/APTXF2

Number	Serial Number	Base Charge	Location						
BL882	EX7-395103	\$0.00	Heartland Family Service 1515 Avenue J Council Bluffs, IA 51503						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B/W	B/W	245,520	250,075		4,555	*** See overage details below			\$0.00

Number	Serial Number	Base Charge	Location						
BL883	EX7-394726	\$0.00	Heartland Family Service 1722 Avenue C Council Bluffs, IA 51501						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B/W	B/W	334,190	340,714		6,524	*** See overage details below			\$0.00

Xerox/X5855/APTXF2

Number	Serial Number	Base Charge	Location						
BL875	EX7-392588	\$0.00	Heartland Family Service 2912 9th Avenue Council Bluffs, IA 51501						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B/W	B/W	517,878	531,616		13,738	*** See overage details below			\$0.00

Number	Serial Number	Base Charge	Location						
BL876	EX7-398699	\$0.00	Heartland Family Service 515 E Broadway Council Bluffs, IA 51503						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B/W	B/W	630,753	641,267		10,514	*** See overage details below			\$0.00

Xerox/X7845/PTXF2



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CONTRACT INVOICE

Invoice Number: 370100

Invoice Date: 02/28/2017

REMIT TO:
 Bishop Business
 4125 S 94th Street
 Omaha, NE 68127

Bill To: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Customer: Heartland Family Service
 515 E Broadway
 Council Bluffs, IA 51503

Account No	Payment Terms	Due Date	Invoice Total	Balance Due
103343	Due Upon Receipt	03/15/2017	\$1,036.34	\$1,036.34

Number	Serial Number	Base Charge			Location				
BL874	MX4-327593	\$0.00			Heartland Family Service 1515 Avenue J Council Bluffs, IA 51503				
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B/W	B/W	268,252	274,808		6,556				*** See overage details below
Color	COLOR	46,174	47,132		958				*** See overage details below
\$0.00									

Number	Serial Number	Base Charge			Location				
BL877	MX4-327602	\$0.00			Heartland Family Service 515 E Broadway Council Bluffs, IA 51503				
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B/W	B/W	596,260	610,095		13,835				*** See overage details below
Color	COLOR	47,494	49,737		2,243				*** See overage details below
\$0.00									

Number	Serial Number	Base Charge			Location				
BN523	MX4-740794	\$0.00			Heartland Family Service 705 N 16th Street Council Bluffs, IA 51501				
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B/W	B/W	106,487	111,122		4,635				*** See overage details below
Color	COLOR	23,397	25,161		1,764				*** See overage details below
\$0.00									

Xerox/X7855/PTXF2

Number	Serial Number	Base Charge			Location				
BL873	MX4-327598	\$0.00			Heartland Family Service 2912 9th Avenue Council Bluffs, IA 51501				
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B/W	B/W	414,033	421,565		7,532				*** See overage details below
Color	COLOR	204,833	213,235		8,402				*** See overage details below
\$0.00									



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CONTRACT INVOICE

Invoice Number: 370100
 Invoice Date: 02/28/2017

REMIT TO:
 Bishop Business
 4125 S 94th Street
 Omaha, NE 68127

Bill To: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Customer: Heartland Family Service
 515 E Broadway
 Council Bluffs, IA 51503

Account No	Payment Terms	Due Date	Invoice Total	Balance Due
103343	Due Upon Receipt	03/15/2017	\$1,036.34	\$1,036.34

Overage Details

Meter Group	Total Copies	Covered Copies	Billable	Rate	Total	
B/W	67,889	0	0	67,889	\$0.005800	\$393.76
				Base Amount:	\$0.00	\$393.76
Meter Type	Equip. Number	Serial Number	Begin	End	Copies	
B\W	BL873	MX4-327598	414,033	421,565	7,532	
B\W	BL874	MX4-327593	268,252	274,808	6,556	
B\W	BL875	EX7-392588	517,878	531,616	13,738	
B\W	BL876	EX7-398699	630,753	641,267	10,514	
B\W	BL877	MX4-327602	596,260	610,095	13,835	
B\W	BL882	EX7-395103	245,520	250,075	4,555	
B\W	BL883	EX7-394726	334,190	340,714	6,524	
B\W	BN523	MX4-740794	106,487	111,122	4,635	
Meter Group	Total Copies	Covered Copies	Billable	Rate	Total	
COLOR	13,367	0	0	13,367	\$0.043000	\$574.78
				Base Amount:	\$0.00	\$574.78
Meter Type	Equip. Number	Serial Number	Begin	End	Copies	
Color	BL873	MX4-327598	204,833	213,235	8,402	
Color	BL874	MX4-327593	46,174	47,132	958	
Color	BL877	MX4-327602	47,494	49,737	2,243	
Color	BN523	MX4-740794	23,397	25,161	1,764	
Total Grouped Overage Charges:						\$968.54
Total Grouped Base Charges:						\$0.00
Total Meter Group Charges:						\$968.54

THANK YOU FOR YOUR BUSINESS!

Invoice SubTotal	\$968.54
Tax:	\$67.80
Invoice Total	\$1,036.34
Balance Due:	\$1,036.34



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CONTRACT INVOICE

Invoice Number: 370262
 Invoice Date: 02/28/2017

REMIT TO:
 Bishop Business
 4125 S 94th Street
 Omaha, NE 68127

Bill To: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Customer: Heartland Family Services - Family Works- Day Care
 4847 Sahler Street
 Omaha, NE 68104

Account No	Payment Terms	Due Date	Invoice Total	Balance Due	
103343	Due Upon Receipt	03/15/2017	\$31.41	\$31.41	
Contract Number	Contact	Contract Amount	P.O. Number	Start Date	Exp. Date
SC5390-01	HFS DAY CARE	\$31.41	HFS DAY CARE	08/28/2016	
Remarks					
THIS CHARGE IS FOR YOUR BLACK, WHITE & COLOR COPIES ON BP503 - HFS DAY CARE- AT COST PER COPY MONTHLY - PUT ON WORKSHEET WITH ALL THE OTHER UNITS					

Summary:

Contract base rate charge for this billing period	\$0.00
Contract overage charge for the 01/28/2017 to 02/27/2017 overage period	\$31.41 **
	\$31.41
**See overage details below	\$31.41

Detail:

Equipment included under this contract

Toshiba/TF454C

Number	Serial Number	Base Adj.	Location						
BP503	CMG-221125	\$0.00	Heartland Family Services - Family Works- Day Care 4847 Sahler Street Omaha, NE 68104						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B/W	B/W	136,048	138,600 *		2,552	0	2,552	\$0.006000	\$15.31
Color	COLOR	26,538	26,860 *		322	0	322	\$0.050000	\$16.10
* Estimated meter reading									\$31.41

THANK YOU FOR YOUR BUSINESS!

Invoice SubTotal	\$31.41
Tax:	\$0.00
Invoice Total	\$31.41
Balance Due:	\$31.41



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CONTRACT INVOICE

Invoice Number: 370340
 Invoice Date: 03/01/2017

REMIT TO:
 Bishop Business
 4125 S 94th Street
 Omaha, NE 68127

Bill To: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Customer: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Account No	Payment Terms	Due Date	Invoice Total	Balance Due	
103343	Due Upon Receipt	03/16/2017	\$933.60	\$933.60	
Contract Number	Contact	Contract Amount	P.O. Number	Start Date	Exp. Date
XEROX-MX4327650-01		\$879.45	DIANE BENTON	09/28/2013	
Remarks					
THIS CHARGE IS FOR ALL COPIES AT COST PER COPY - PUT ON WORKSHEET FOR CUSTOMER					

Summary:

Contract base rate charge for this billing period	\$0.00 *
Contract overage charge for the 01/28/2017 to 02/27/2017 overage period	\$879.45 **
*Sum of equipment base charges **See overage details below	\$879.45

Detail:

Equipment included under this contract

Xerox/X5845/APT2

Number	Serial Number	Base Charge	Location						
BL712	EX7-387139	\$0.00	Heartland Family Service 2101 S 42nd Street Omaha, NE 68105-2909						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B/W	B/W	507,456	523,766		16,310	*** See overage details below			\$0.00

Xerox/X5845/APTXF2

Number	Serial Number	Base Charge	Location						
BL853	EX7-396220	\$0.00	Heartland Family Service-Better Together 2517 Caldwell Street Omaha, NE 68131-4602						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B/W	B/W	147,927	153,215		5,288	*** See overage details below			\$0.00

Number	Serial Number	Base Charge	Location						
BL856	EX7-392695	\$0.00	Heartland Family Service 6720 N 30th Street Omaha, NE 68112-3211						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B/W	B/W	361,661	367,406		5,745	*** See overage details below			\$0.00

Number	Serial Number	Base Charge	Location						
BL860	EX7-392587	\$0.00	Heartland Family Service Bellevue, NE 68005						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B/W	B/W	113,756	116,548		2,792	*** See overage details below			\$0.00



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CONTRACT INVOICE

Invoice Number: 370340

Invoice Date: 03/01/2017

REMIT TO:
 Bishop Business
 4125 S 94th Street
 Omaha, NE 68127

Bill To: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Customer: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Account No	Payment Terms	Due Date	Invoice Total	Balance Due
103343	Due Upon Receipt	03/16/2017	\$933.60	\$933.60

Number	Serial Number	Base Charge			Location				
BL861	EX7-392502	\$0.00			Heartland Family Services - Family Works- Day Care 4847 Sahler Street Omaha, NE 68104				
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B/W	B/W	356,356	370,561		14,205	*** See overage details below			\$0.00

Number	Serial Number	Base Charge			Location				
BL865	EX7-392702	\$0.00			Heartland Family Service - Youth Links-NOIC 4318 Fort Street - 1ST FLOOR Omaha, NE 68111-1849				
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B/W	B/W	68,023	68,535		512	*** See overage details below			\$0.00

Xerox/X5855/APTXF2

Number	Serial Number	Base Charge			Location				
BL863	EX7-392658	\$0.00			Heartland Family Service 2101 S 42nd Street Omaha, NE 68105-2909				
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B/W	B/W	615,320	629,948		14,628	*** See overage details below			\$0.00

Xerox/X7845/PTXF2

Number	Serial Number	Base Charge			Location				
BL855	MX4-327604	\$0.00			Heartland Family Service Homeless Call Center 1941 S 42nd Street - Suite 375 Omaha, NE 68105				
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B/W	B/W	796,041	811,344		15,303	*** See overage details below			\$0.00
Color	COLOR	26,433	26,562		129	*** See overage details below			

Xerox/X7855/PTXF2

Number	Serial Number	Base Charge			Location				
BL854	MX4-327458	\$0.00			Heartland Family Service 6720 N 30th Street Omaha, NE 68112-3211				
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B/W	B/W	282,978	287,603		4,625	*** See overage details below			\$0.00
Color	COLOR	273,367	276,574		3,207	*** See overage details below			



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CONTRACT INVOICE

Invoice Number: 370340
 Invoice Date: 03/01/2017

REMIT TO:
 Bishop Business
 4125 S 94th Street
 Omaha, NE 68127

Bill To: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Customer: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Account No	Payment Terms	Due Date	Invoice Total	Balance Due
103343	Due Upon Receipt	03/16/2017	\$933.60	\$933.60

Number	Serial Number	Base Charge	Location						
BL858	MX4-327605	\$0.00	Heartland Family Service 302 American Parkway Papillion, NE 68046-6270						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B/W	B/W	398,546	406,895		8,349				*** See overage details below
Color	COLOR	65,022	67,188		2,166				*** See overage details below
									\$0.00

Number	Serial Number	Base Charge	Location						
BL866	MX4-327650	\$0.00	Heartland Family Service 2101 S 42nd Street Omaha, NE 68105-2909						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B/W	B/W	220,159	224,557		4,398				*** See overage details below
Color	COLOR	89,036	91,556		2,520				*** See overage details below
									\$0.00



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 5253 R St - Lincoln 68504
 1.800.933.9583 / 402.537.4377 fx
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CONTRACT INVOICE

Invoice Number: 370340
 Invoice Date: 03/01/2017

REMIT TO:
 Bishop Business
 4125 S 94th Street
 Omaha, NE 68127

Bill To: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Customer: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Account No	Payment Terms	Due Date	Invoice Total	Balance Due
103343	Due Upon Receipt	03/16/2017	\$933.60	\$933.60

Overage Details

Meter Group	Total Copies	Covered Copies	Billable	Rate	Total
B/W	92,155	0	0	92,155 \$0.005800	\$534.50
				Base Amount:	\$0.00
					\$534.50
Meter Type	Equip. Number	Serial Number	Begin	End	Copies
B/W	BL712	EX7-387139	507,456	523,766	16,310
B/W	BL853	EX7-396220	147,927	153,215	5,288
B/W	BL854	MX4-327458	282,978	287,603	4,625
B/W	BL855	MX4-327604	796,041	811,344	15,303
B/W	BL856	EX7-392695	361,661	367,406	5,745
B/W	BL858	MX4-327605	398,546	406,895	8,349
B/W	BL860	EX7-392587	113,756	116,548	2,792
B/W	BL861	EX7-392502	356,356	370,561	14,205
B/W	BL863	EX7-392658	615,320	629,948	14,628
B/W	BL865	EX7-392702	68,023	68,535	512
B/W	BL866	MX4-327650	220,159	224,557	4,398
Meter Group	Total Copies	Covered Copies	Billable	Rate	Total
COLOR	8,022	0	0	8,022 \$0.043000	\$344.95
				Base Amount:	\$0.00
					\$344.95
Meter Type	Equip. Number	Serial Number	Begin	End	Copies
Color	BL854	MX4-327458	273,367	276,574	3,207
Color	BL855	MX4-327604	26,433	26,562	129
Color	BL858	MX4-327605	65,022	67,188	2,166
Color	BL866	MX4-327650	89,036	91,556	2,520
Total Grouped Overage Charges:					\$879.45
Total Grouped Base Charges:					\$0.00
Total Meter Group Charges:					\$879.45

THANK YOU FOR YOUR BUSINESS!

Invoice SubTotal	\$879.45
Tax:	\$54.15
Invoice Total	\$933.60
Balance Due:	\$933.60

MAPA JARC GRANT BILLING DOCUMENT

PART IV - Project Budget Worksheet

Project Name: __HEARTLAND FAMILY SERVICE - WAYS TO WORK__

Contact Name: __Joanie Poore, VP__

BUDGET DETAIL	TOTAL JARC BUDGET (ORIGINAL)	3/1/2017 - 3/31/2017		TOTAL COST MONTH	Program to Date	
		JARC	LOCAL MATCH		JARC	LOCAL MATCH
A. OPERATING EXPENSES¹						
1. Salaries and Benefits	30,720	\$ 2,102.07	\$ 300.06	\$ 2,402.13	\$ 5,017.74	\$ 2,217.75
2. Atty, Audit, Acct, POS	2,200	\$ -	\$ 1,138.17	\$ 1,138.17	\$ -	\$ 1,178.90
3. Office and Meeting Supplies	400	\$ 1.68	\$ 1.68	\$ 3.36	\$ 5.01	\$ 5.01
4. Phone & Internet	400	\$ 8.58	\$ 8.58	\$ 17.15	\$ 25.65	\$ 25.65
5. Postage & Shipping	220	\$ 3.99	\$ 3.99	\$ 7.98	\$ 9.21	\$ 9.21
6. Building and Occupancy	1,240	\$ 41.70	\$ 41.70	\$ 83.40	\$ 107.99	\$ 107.99
7. Equipment & Equip rep/rent	800	\$ 15.77	\$ 15.77	\$ 31.53	\$ 43.71	\$ 43.71
8. Advertising, Printing and Pubs	840	\$ 3.81	\$ 3.81	\$ 7.61	\$ 15.44	\$ 15.44
9. Mileage, travel, conf, auto ins.	320	\$ 8.63	\$ 8.63	\$ 17.26	\$ 114.01	\$ 114.01
10. Borrower Incentives	-			\$ -	\$ -	\$ -
11. Org Dues & Misc	128		\$ -	\$ -	\$ -	\$ -
12. Administrative Costs	6,732	\$ -	\$ 663.84	\$ 663.84	\$ -	\$ 1,621.09
Subtotal - Operating Expenses	\$ 44,000	\$ 2,186.22	\$ 2,186.22	\$ 4,372.43	\$ 5,338.73	\$ 5,338.73

Period	Date	Journal	Comments	Beginning Balance	Debit	Credit	Net Change	Ending Balance	Salaries & Benefits	Atty. Legal, Audit, Acct, POS, Interdept
				4,234.27	2,103.18	-	2,103.18	6,337.45	2,103.18	-
2210-21			GROUP HEALTH INSURANCE: WTW	24.49						
03	3/31/2017	PR-000364	HEALTH INS		12.12			36.61	12.12	
				24.49	12.12	-	12.12	36.61	12.12	-
2220-21			RETIREMENT PLAN: WTW	131.77						
03	3/31/2017	PR-000364	RETIREMENT		65.88			197.65	65.88	
				131.77	65.88	-	65.88	197.65	65.88	-
2290-21			OTHER BENEFITS/DIS.: WTW	16.69						
03	3/31/2017	PR-000364	LONG TERM DISABILITY		8.3			24.99	8.30	
				16.69	8.30	-	8.30	24.99	8.30	-
2300-21			PAYROLL TAXES: WTW	426.13						
03	3/31/2017	AJ-083605	PR TAXES PROF LIAB		39.55			465.68	39.55	
03	3/31/2017	AJ-083859	ALLOCATION OF TAXES - LAKIN		1.80			467.48	1.80	
03	3/31/2017	PR-000364	PAYROLL TAXES		158.50			625.98	158.50	
03	3/31/2017	PR-000364	STATE UNEMPLOYMENT		12.8			638.78	12.80	
				426.13	212.65	-	212.65	638.78	212.65	-
2410-21			ATTORNEY FEES: WTW							
							0.00	0.00		
2410-21			ATTORNEY FEES: WTW							
03	3/16/2017	AP-004883	BAIRD HOLM LLP /IN: 201674		1,117.80			1,117.80		1,117.80
					1,117.80	-	1,117.80	1,117.80	-	1,117.80
2430-21			AUDITING/ACCOUNT FEES: WTW	10.68						
03	3/31/2017	AJ-083617	AUDITING/ACCT FEES ALLOC		5.34			16.02		5.34
				10.68	5.34	-	5.34	16.02		5.34
2490-21			OTHER PURCHASE OF SERVICE: WTW	23.29						
03	3/31/2017	AJ-083628	PURCHASE OF SERVICE ALLOC		0.80			24.09		0.80
03	3/31/2017	AJ-083887	PURCHASE OF SERVICE ALLOC		10.85			34.94		10.85
				23.29	11.65	-	11.65	34.94		11.65
2491-21			Interdepartmental: WTW	6.76						
03	3/31/2017	RJ-003749	EXPENS/INTEROFFICE DELIVERY		3.38			10.14		3.38
				6.76	3.38	-	3.38	10.14		3.38
2510-21			OFFICE SUPPLIES: WTW	3.86						
03	3/31/2017	AJ-083643	LAKIN CAMPUS OFFICE SUPPLIES		1.26			5.12		
				3.86	1.26	-	1.26	5.12		
2520-21			BUILDING & GROUND SUPPLIES: WTW	4.93						
03	3/31/2017	AJ-083655	BUILDING SUPPLIES - LAKIN CAMPUS		6.24			11.17		
03	3/31/2017	AJ-083660	BUILDING & GROUND SUPPLIES		0.05			11.22		
				4.93	6.29	-	6.29	11.22		
2550-21			FOOD: WTW	2.79						
03		42825 AJ-083667	LAKIN - FOOD		2.1			4.89		
				2.79	2.10	-	2.10	4.89		
2600-21			TELEPHONE: WTW	34.14						
03	3/31/2017	AJ-083680	ALLOCATION TELEPHONE LAKIN		9.28			43.42		
03	3/31/2017	AJ-083685	TELEPHONE		7.87			51.29		

Period	Date	Journal	Comments	Beginning Balance	Debit	Credit	Net Change	Ending Balance	Salaries & Benefits	Atty. Legal, Audit, Acct, POS, Interdept
				34.14	17.15	-	17.15	51.29	-	-
2700-21			POSTAGE & SHIPPING: WTW	10.44						
03	3/31/2017	AJ-083692	POSTAGE - LAKIN CAMPUS			0.91		9.53		
03	3/31/2017	AJ-083697	POSTAGE ALLOCATION		2.10			11.63		
03	3/31/2017	JE-003819	POSTAGE - MAR		5.88			17.51		
				10.44	7.98	0.91	7.07	17.51	-	-
2830-21			UTILITIES: WTW	44.34						
03	3/31/2017	AJ-083710	UTILITIES ALLOCATION		13.50			57.84		
				44.34	13.50	-	13.50	57.84	-	-
2840-21			CARE OF BUILDINGS & GROUNDS: WTW	47.49						
03	3/31/2017	AJ-083720	ALLOCATION OF CARE OF BUILDING AND GROUNDS LAKIN		41.36			88.85		
03		42825 AJ-083725	ALLOCATION - CARE OF BUILDING AND GROUNDS		4.08			92.93		
				47.49	45.44	-	45.44	92.93	-	-
2841-21			Inter - Blds and Grn: WTW	-						
				-	-	-	0.00	0.00	-	-
2850-21			EQUIPMENT REPAIR & MAINTENANCE: WTW	14.52						
03	3/31/2017	AJ-083738	EQUIPMENT REPAIR LAKIN CAMPUS		3.74			18.26		
03	3/31/2017	AP-004903	BISHOP BUSINESS EQUIPMENT CO IN: MAR: 2017		7.11			25.37		
				14.52	10.85	-	10.85	25.37	-	-
2880-21			PROPERTY INS/TAXES: WTW	35.82						
03	3/31/2017	AJ-083757	PROP INS/TAXES ALLOCATION		18.17			53.99		
				35.82	18.17	-	18.17	53.99	-	-
3100-21			PRINTING & PUB.: WTW	23.26						
03	3/31/2017	AJ-083769	PRINTING & PUBLICATION ALLOCATION		7.61			30.87		
				23.26	7.61	-	7.61	30.87	-	-
3210-21			MILEAGE/EXPENSE: WTW	176.70						
				176.70	-	-	0.00	176.70	-	-
3220-21			OUT OF TOWN TRAVEL: WTW	-						
				-	-	-	0.00	0.00	-	-
3250-21			AGENCY VEHICLE OPERATE.COSTS : WTW	-						
				-	-	-	0.00	0.00	-	-
3280-21			AUTOMOBILE INSURANCE: WTW	34.05						
03	3/31/2017	AJ-083779	AUTO INS ALLOCATION		17.26			51.31		
				34.05	17.26	-	17.26	51.31	-	-
3300-21			CONFERENCE/CONVENTION/TRIPS: WTW	-						
				-	-	-	0.00	0.00	-	-
3500-21			SPECIFIC ASSISTANCE INDIVIDUAL: WTW	-						
				-	-	-	0.00	0.00	-	-
4100-21			ORGANIZATION DUES: WTW	-						

Period	Date	Journal	Comments	Beginning Balance	Debit	Credit	Net Change	Ending Balance	Salaries & Benefits	Atty, Legal, Audit, Acct, POS, Interdept
				-	-	-	0.00	0.00	-	-
4300-21			EQUIPMENT/FIXED ASSETS: WTW	41.36						
03	3/31/2017	AJ-083797	EQUIPMENT FIXED ASSETS		20.68			62.04		
				41.36	20.68	-	20.68	62.04	-	-
4900-21			MISCELLANEOUS: WTW	8,224.51						
03	3/31/2017	JE-003859	True up Ways to Work Reserve			2,000.00		6,224.51		
				8,224.51	-	2,000.00	-2,000.00	6,224.51	-	-
				-	-	-	-	-	-	-
				721.52	3,969.87	4,095.09	-125.22	596.30	2,402.13	1,138.17
			Calculation of Admin costs (=17.9% of expenses excluding Loan Guarantee Fur	663.84						
			Expenses Inc Admin Costs						2,402.13	1,138.17
									2,402.13	1,138.17

Check

Office & Mtg Supplies	Phone & Internet	Postage & shipping	Building & Occupancy (Utilities, care of bldg/grnds, bldg/grnd supp, prop ins)	Equip & Equip rent/repair	Advertising, Prntg, Pubs	Mileage, travel, conf, agency vehicle, auto ins	Borrower Incentives	Org Dues & Misc	Admin @ 17.9%	Loan Guarantee Funds (Misc)	Total
-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	20.68	-	-	-	-	-	-	20.68
-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	20.68	-	-	-	-	-	-	20.68
-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	(2,000.00)	(2,000.00)
-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	(2,000.00)	(2,000.00)
-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-
3.36	17.15	7.98	83.40	31.53	7.61	17.26	-	-	-	(5,222.53)	(1,513.94)
-	-	-	-	-	-	-	-	-	663.84	-	663.84
3.36	17.15	7.98	83.40	31.53	7.61	17.26	-	-	663.84	(5,222.53)	(850.10)
3.36	17.15	7.98	83.40	31.53	7.61	17.26	-	-	663.84	(5,222.53)	(850.10)

Check

4,372.43 Ties to MAPA

NOTE: Reduce Loan Guarantees by Funds received after default



Progress Report

Title: Heartland Family Service- Ways to Work

Date: 03/01/2017 -03/31/2017

Title: MAPA bill \$ 2,486.28 out of \$22,000

1. Work Completed for Current Billing Period:

- a. The Ways to Work program currently has 1 person shopping for a vehicle.

2. Anticipated Work for Next Billing Period:

- a. Same as prior month

3. Information Needed from FTA/MAPA:

- a. No information is needed.

4. Percent of Work Completed to Date:

- a. 34% of grant utilized

5. Outstanding Issues:

Data

1. Number of repossessions in the month (bought back loans)

- a. 0

2. Number of new closed loans in the month

- a. 0

3. Number of loans outstanding

- a. 8

4. Other.....

- a.

5. Narrative

- a. 4 loans paid in full, providing increase in credit scores as well as overall financial situation to those individuals.

3/23/2017	372792	PO-25941	190.50	0.00	190.50
3/28/2017	373321	PO-25948	125.95	0.00	125.95
3/29/2017	MAR-2017	INV's 373588-373594	3,028.14	0.00	3,028.14



Check: 142478 4/6/2017 BISHOP BUSINESS EQUIPMENT CO 3,344.59

ORIGINAL DOCUMENT PRINTED ON CHEMICAL REACTIVE PAPER WITH MICROPRINTED BORDER



2101 S. 42ND ST.
OMAHA, NE 68105
402-553-3000
A United Way Member Agency

AMERICAN NATIONAL BANK
OMAHA, NEBRASKA 68114

27-85/1040

142478

NUMBER

*THREE THOUSAND THREE HUNDRED FORTY-FOUR AND 59 / 100

AMOUNT

PAY TO THE ORDER OF

BISHOP BUSINESS EQUIPMENT CO
4125 S 94TH ST
OMAHA, NE 68127

4/6/2017

*****3,344.59*

BISHOPS

A SECOND SIGNATURE REQUIRED FOR CHECKS OVER 1,000 DOLLARS

⑈ 142478 ⑈ ⑆ 104000854 ⑆ 3285463 ⑈

HEARTLAND FAMILY SERVICE

142478

FILE COPY

BISHOP BUSINESS EQUIPMENT

3/29/2017

**Invoice #'s 373588, 373589, 373590, 373591, 373592,
373593, 373594**

Corrected Invoice from BBE

Account Name	2850-	Grand
Administration	03	960.55 \$879.66
Development	04	\$0.49
NE Behavioral Health	05	91.82 \$84.31
Generations Center	06	\$12.65
NE Family Works Residential	07	\$226.08
NH Emerg Svcs NOT IN USE (Move to 11)	08	\$0.00
Better Together	09	\$18.47
Gamblers Assistance Iowa	10	\$29.74
Hardship Assistance	11	\$57.13
Child & Adult Care Food Program	12	\$65.12
Solomon Girls Center	13	\$0.29
NE HPRP/OPPORTUNITIES	14	\$57.63
Community Education	15	\$44.43
Iowa Counseling	16	\$185.14
Samaritan Housing	17	\$14.99
Domestic Abuse Program NE	18	\$50.14
Prevention DFC	19	\$15.24
Youth Links	20	\$64.22
Ways to Work	21	\$7.11
Nebraska Gamblers	22	6.43 \$6.12
Integrated Health Home	23	\$42.20
Sarpy Juvenile Justice	24	\$0.00
In Home Parenting Time	25	\$23.12
Iowa Assertive Community Trmt	26	\$26.06
Bridges	27	\$0.01 err.
Iowa Mental Health Crt	28	\$36.33
Family Works Iowa	29	\$27.46
Therapeutic School	30	\$397.35
Nebraska Tracker-Inactive	31	\$0.00
Assessment Center	32	\$0.00
Passages	33	\$27.86
PCHL Rapid Re-housing	34	\$22.60
Fremont Childrens Shelter	35	\$37.83
Heartland Housing Solutions	36	\$6.45
Heartland Homes	37	\$1.49
ASAP	38	\$26.32
Ready in 5	39	\$48.15
Heartland Housing Beginnings	40	\$7.85
DCYC	41	\$0.91
Transitions	42	\$1.41
Family Crisis Mediation	43	\$23.43
Baby Talk	44	\$143.69

Prog. Serv. _____
 Amt. 3,028.14
 Cler. DB
 Appr. _____
 Acct. No. _____

PAID

Refugee Juvenile Justice Adv	45	\$3.86	
Prevention - Block	46	\$23.92	
Metro Home Base/do not use	47	\$0.00	
DRUG TESTING/do not use	48	\$0.00	
In Home Support-Fremont	49	\$0.00	
Prevention - TFN/MOTAC	50	\$13.87	
Prevention - SPF/LiveWise	51	\$0.62	
In Home Family Support	52	\$37.26	
PCHL Prevention	53	\$9.57	
IBH - School Based Services	54	\$39.55	
Child & Family Center	55	\$56.02	
NE Family Works Apts NOT IN USE (Move to 07)	56	\$0.00	
The Coeur Group	57	\$0.70	
VOCA	58	\$0.00	
VAWA	59	\$0.00	
SPSS	60	\$0.00	
Dr Paul	57	\$7.55	Com: Dr Paul
Dr Coy	57	\$5.97	Com: Dr Coy
Integrated Therapy	57	\$21.12	Com: Integrated Therapy
		<u>\$3,028.14</u>	



4125 S 94th St - Omaha 68127
 5253 R St - Lincoln 68504
 1.800.933.9583 / 402.537.4379 fx
 www.bb.ec.com

CONTRACT INVOICE

Invoice Number: 373588
 Invoice Date: 03/29/2017

REMIT TO:
 Bishop Business
 4125 S 94th Street
 Omaha, NE 68127

Bill To: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Customer: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Account No	Payment Terms	Due Date	Invoice Total	Balance Due	
103343	Due Upon Receipt	04/13/2017	\$8.93	\$8.93	
Contract Number	Contact	Contract Amount	P.O. Number	Start Date	Exp. Date
SC4973-01		\$8.35	BP213	09/28/2015	
Remarks					
THIS CHARGE IS FOR COPIES AT COST PER COPY - put on worksheet for Heartland Family					

Summary:

Contract base rate charge for this billing period \$0.00
 Contract overage charge for the 02/28/2017 to 03/27/2017 overage period \$8.35 **
 **See overage details below \$8.35

Detail:

Equipment included under this contract

Toshiba/T355E

Number	Serial Number	Base Adj.	Location						
BP213	CPG-912476	\$0.00	Heartland Family Service 2101 S 42nd Street Omaha, NE 68105-2909						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B/W	B/W	105,744	107,183		1,439	0	1,439	\$0.005800	\$8.35
									\$8.35

000

0.000G+

8.93 +
 825.43 +
 969.00 +
 35.33 +
 180.96 +
 112.46 +
 896.03 +

007

5,028.14G+

THANK YOU FOR YOUR BUSINESS!

Invoice SubTotal	\$8.35
Tax:	\$0.58
Invoice Total	\$8.93
Balance Due:	\$8.93



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CONTRACT INVOICE

Invoice Number: 373589
 Invoice Date: 03/29/2017

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 Bishop Business
 4125 S 94th Street
 Omaha, NE 68127

Bill To: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Customer: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Account No	Payment Terms	Due Date	Invoice Total	Balance Due	
103343	Due Upon Receipt	04/13/2017	\$825.43	\$825.43	
Contract Number	Contact	Contract Amount	P.O. Number	Start Date	Exp. Date
XEROX-MX4327650-01		\$775.12	DIANE BENTON	09/28/2013	
Remarks					
THIS CHARGE IS FOR ALL COPIES AT COST PER COPY - PUT ON WORKSHEET FOR CUSTOMER					

Summary:

Contract base rate charge for this billing period	\$0.00 *
Contract overage charge for the 02/28/2017 to 03/27/2017 overage period	\$775.12 **
*Sum of equipment base charges **See overage details below	<u>\$775.12</u>

Detail:

Equipment included under this contract

Xerox/X5845/APT2

Number	Serial Number	Base Charge	Location						
BL712	EX7-387139	\$0.00	Heartland Family Service 2101 S 42nd Street Omaha, NE 68105-2909						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B/W	B/W	523,766	523,766		0	*** See overage details below			\$0.00

Xerox/X5845/APTXF2

Number	Serial Number	Base Charge	Location						
BL850(2)	EX7-396327	\$0.00	Heartland Family Service 600 9th Avenue Council Bluffs, IA 51501						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B/W	B/W	84,897	88,427		3,530	*** See overage details below			\$0.00
Overage Dates: 03/15/2017 - 03/27/2017									
Overage period from 3/15/2017 to 3/27/2017									

Number	Serial Number	Base Charge	Location						
BL853	EX7-396220	\$0.00	Heartland Family Service-Better Together 2517 Caldwell Street Omaha, NE 68131-4602						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B/W	B/W	153,215	156,360		3,145	*** See overage details below			\$0.00

Number	Serial Number	Base Charge	Location						
BL856	EX7-392695	\$0.00	Heartland Family Service 6720 N 30th Street Omaha, NE 68112-3211						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B/W	B/W	367,406	373,862		6,456	*** See overage details below			\$0.00



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CONTRACT INVOICE

Invoice Number: 373589

Invoice Date: 03/29/2017

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 Omaha, NE 68105-2909

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 Omaha, NE 68105-2909

Account No	Payment Terms	Due Date	Invoice Total	Balance Due
103343	Due Upon Receipt	04/13/2017	\$825.43	\$825.43

Number	Serial Number	Base Charge	Location						
BL860	EX7-392587	\$0.00	Heartland Family Service Bellevue, NE 68005						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B/W	B/W	116,548	118,821		2,273	*** See overage details below			\$0.00

Number	Serial Number	Base Charge	Location						
BL861	EX7-392502	\$0.00	Heartland Family Services - Family Works- Day Care 4847 Sahler Street Omaha, NE 68104						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B/W	B/W	370,561	378,289		7,728	*** See overage details below			\$0.00

Number	Serial Number	Base Charge	Location						
BL865	EX7-392702	\$0.00	Heartland Family Service - Youth Links NOIC 4318 Fort Street - 1ST FLOOR Omaha, NE 68111-1849						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B/W	B/W	68,535	69,410		875	*** See overage details below			\$0.00

Xerox/X5855/APTXF2

Number	Serial Number	Base Charge	Location						
BL863	EX7-392658	\$0.00	Heartland Family Service 2101 S 42nd Street Omaha, NE 68105 2909						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B/W	B/W	629,948	644,521		14,573	*** See overage details below			\$0.00

Xerox/X7845/PTXF2

Number	Serial Number	Base Charge	Location						
BL855	MX4-327604	\$0.00	Heartland Family Service Homeless Call Center 1941 S 42nd Street - Suite 375 Omaha, NE 68105						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B/W	B/W	811,344	828,594		17,250	*** See overage details below			
Color	COLOR	26,562	26,939		377	*** See overage details below			\$0.00

Xerox/X7855/PTXF2



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Customer: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Account No	Payment Terms	Due Date	Invoice Total	Balance Due
103343	Due Upon Receipt	04/13/2017	\$825.43	\$825.43

Number	Serial Number	Base Charge	Location
BL854	MX4-327458	\$0.00	Heartland Family Service 6720 N 30th Street Omaha, NE 68112-3211

Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B/W	B/W	287,603	292,375		4,772	*** See overage details below			
Color	COLOR	276,574	279,722		3,148	*** See overage details below			

\$0.00

Number	Serial Number	Base Charge	Location
BL858	MX4-327605	\$0.00	Heartland Family Service 302 American Parkway Papillion, NE 68046-6270

Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B/W	B/W	406,895	415,826		8,931	*** See overage details below			
Color	COLOR	67,188	69,826		2,638	*** See overage details below			

\$0.00

Number	Serial Number	Base Charge	Location
BL866	MX4-327650	\$0.00	Heartland Family Service 2101 S 42nd Street Omaha, NE 68105-2909

Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B/W	B/W	224,557	229,458		4,901	*** See overage details below			
Color	COLOR	91,556	93,379		1,823	*** See overage details below			

\$0.00



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 www.bbec.com

CONTRACT INVOICE

Invoice Number: 373589

Invoice Date: 03/29/2017

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 4125 S 94th Street
 Omaha, NE 68127

Bill To: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Customer: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Account No	Payment Terms	Due Date	Invoice Total	Balance Due
103343	Due Upon Receipt	04/13/2017	\$825.43	\$825.43

Overage Details

Meter Group	Total Copies	Covered Copies	Billable	Rate	Total
B/W	74,434	0	0	74,434 \$0.005800	\$431.72
				Base Amount:	\$0.00
					\$431.72
Meter Type	Equip. Number	Serial Number	Begin	End	Copies
B/W	BL712	EX7-387139	523,766	523,766	0
B/W	BL850(2.000000)	EX7-396327	84,897	88,427	3,530
B/W	BL853	EX7-396220	153,215	156,360	3,145
B/W	BL854	MX4-327458	287,603	292,375	4,772
B/W	BL855	MX4-327604	811,344	828,594	17,250
B/W	BL856	EX7-392695	367,406	373,862	6,456
B/W	BL858	MX4-327605	406,895	415,826	8,931
B/W	BL860	EX7-392587	116,548	118,821	2,273
B/W	BL861	EX7-392502	370,561	378,289	7,728
B/W	BL863	EX7-392658	629,948	644,521	14,573
B/W	BL865	EX7-392702	68,535	69,410	875
B/W	BL866	MX4-327650	224,557	229,458	4,901
Meter Group	Total Copies	Covered Copies	Billable	Rate	Total
COLOR	7,986	0	0	7,986 \$0.043000	\$343.40
				Base Amount:	\$0.00
					\$343.40
Meter Type	Equip. Number	Serial Number	Begin	End	Copies
Color	BL854	MX4-327458	276,574	279,722	3,148
Color	BL855	MX4-327604	26,562	26,939	377
Color	BL858	MX4-327605	67,188	69,826	2,638
Color	BL866	MX4-327650	91,556	93,379	1,823
Total Grouped Overage Charges:					\$775.12
Total Grouped Base Charges:					\$0.00
Total Meter Group Charges:					\$775.12

THANK YOU FOR YOUR BUSINESS!

Invoice SubTotal	\$775.12
Tax:	\$50.31
Invoice Total	\$825.43
Balance Due:	\$825.43



4125 S 94th St - Omaha 68127
 5253 R St - Lincoln 68504
 1.800.933.9583 / 402.537.4379 fx
 www.bb.ec.com

CONTRACT INVOICE

Invoice Number: 373590
 Invoice Date: 03/29/2017

REMIT TO:
 Bishop Business
 4125 S 94th Street
 Omaha, NE 68127

Bill To: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Customer: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Account No	Payment Terms	Due Date	Invoice Total	Balance Due	
103343	Due Upon Receipt	04/13/2017	\$969.00	\$969.00	
Contract Number	Contact	Contract Amount	P.O. Number	Start Date	Exp. Date
SC4031-01		\$155.36	DIANE BENTON	09/28/2013	
Remarks					
THIS IS FOR YOUR BLACK, WHITE & COLOR COPIES AT COST PER COPY - put on worksheet for customer					

Summary:

Contract base rate charge for this billing period \$0.00
 Contract overage charge for the 02/28/2017 to 03/27/2017 overage period \$155.36 **
 **See overage details below \$155.36

Detail:

Equipment included under this contract

Toshiba/TF654CT

Number	Serial Number	Base Adj.	Location						
BK385	CCD-110160	\$0.00	Heartland Family Service 2101 S 42nd Street Omaha, NE 68105-2909						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B/W	B/W	275,403	277,605		2,202	0	2,202	\$0.006000	\$13.21
Color	COLOR	775,641	778,484		2,843	0	2,843	\$0.050000	\$142.15
									\$155.36

Contract Number	Contact	Contract Amount	P.O. Number	Start Date	Exp. Date
XEROX-E2B659739-01		\$750.25	.	10/24/2016	
Remarks					
THIS CHARGE IS FOR BLACK & WHITE AND COLOR COPIES AT COST PER COPY - MONTHLY					

Summary:

Contract base rate charge for this billing period \$0.00
 Contract overage charge for the 02/24/2017 to 03/23/2017 overage period \$750.25 **
 **See overage details below \$750.25

Detail:

Equipment included under this contract

Xerox/XC70

Number	Serial Number	Base Adj.	Location						
BR901	E2B-659739	\$0.00	Heartland Family Service 2101 S 42nd Street Omaha, NE 68105-2909						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B/W	B/W	14,215	16,239		2,024	0	2,024	\$0.008000	\$16.19
Color	COLOR	37,024	52,317		15,293	0	15,293	\$0.048000	\$734.06
									\$750.25



4125 S 94th St - Omaha 68127
5253 R St - Lincoln 68504
1.800.933.9583 / 402.537.4379 fx
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CONTRACT INVOICE

Invoice Number: 373590

Invoice Date: 03/29/2017

REMIT TO:
Bishop Business
4125 S 94th Street
Omaha, NE 68127

Bill To: Heartland Family Service
2101 S 42nd Street
Omaha, NE 68105-2909

Customer: Heartland Family Service
2101 S 42nd Street
Omaha, NE 68105-2909

THANK YOU FOR YOUR BUSINESS!

Invoice SubTotal	\$905.61
Tax:	\$63.39
Invoice Total	\$969.00
Balance Due:	\$969.00



4125 S 94th St - Omaha 68127
 5253 R St - Lincoln 68504
 1.800.933.9583 / 402.537.4379 fx
 www.bbec.com

CONTRACT INVOICE

Invoice Number: 373591
 Invoice Date: 03/29/2017

REMIT TO:
 Bishop Business
 4125 S 94th Street
 Omaha, NE 68127

Bill To: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Customer: Heartland Family Services Couer Group
 900 So 74th Plaza Suite 400
 Omaha, NE 68114-4667

Account No	Payment Terms	Due Date	Invoice Total	Balance Due	
103343	Due Upon Receipt	04/13/2017	\$35.33	\$35.33	
Contract Number	Contact	Contract Amount	P.O. Number	Start Date	Exp. Date
SC5389-01	HFS Couer Group	\$33.02	HFS Couer Group	08/28/2016	
Remarks					
THIS CHARGE IS FOR BLACK, WHITE & COLOR COPIES ON BP504 - HFS Couer Group -AT COST PER COPY MONTHLY - PUT ON WORKSHEET WITH THE UNITS					

Summary:

Contract base rate charge for this billing period	\$0.00
Contract overage charge for the 02/28/2017 to 03/27/2017 overage period	\$33.02 **
**See overage details below	\$33.02

Detail:

Equipment included under this contract

Toshiba/TF354C

Number	Serial Number	Base Adj.	Location
BP504	CQF-112689	\$0.00	Heartland Family Services Couer Group 900 So 74th Plaza Suite 400 Omaha, NE 68114-4667

Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B/W	B/W	245,662	248,457		2,795	0	2,795	\$0.006000	\$16.77
Color	COLOR	273,257	273,582		325	0	325	\$0.050000	\$16.25
									\$33.02

THANK YOU FOR YOUR BUSINESS!

Invoice SubTotal	\$33.02
Tax:	\$2.31
Invoice Total	\$35.33
Balance Due:	\$35.33



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 5253 R St - Lincoln 68504
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CONTRACT INVOICE

Invoice Number: 373592
 Invoice Date: 03/29/2017

REMIT TO:
 Bishop Business
 4125 S 94th Street
 Omaha, NE 68127

Bill To: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Customer: Heartland Family Services - Family Works- Day Care
 4847 Sahler Street
 Omaha, NE 68104

Account No	Payment Terms	Due Date	Invoice Total	Balance Due	
103343	Due Upon Receipt	04/13/2017	\$180.96	\$180.96	
Contract Number	Contact	Contract Amount	P.O. Number	Start Date	Exp. Date
SC5390-01	HFS DAY CARE	\$180.96	HFS DAY CARE	08/28/2016	
Remarks					
THIS CHARGE IS FOR YOUR BLACK, WHITE & COLOR COPIES ON BP503 - HFS DAY CARE- AT COST PER COPY MONTHLY - PUT ON WORKSHEET WITH ALL THE OTHER UNITS					

Summary:

Contract base rate charge for this billing period	\$0.00
Contract overage charge for the 02/28/2017 to 03/27/2017 overage period	\$180.96 **
**See overage details below	\$180.96

Detail:

Equipment included under this contract

Toshiba/TF454C

Number	Serial Number	Base Adj.	Location						
BP503	CMG-221125	\$0.00	Heartland Family Services - Family Works- Day Care 4847 Sahler Street Omaha, NE 68104						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B/W	B/W	138,600 *	146,718		8,118	0	8,118	\$0.006000	\$48.71
Color	COLOR	26,860 *	29,505		2,645	0	2,645	\$0.050000	\$132.25
* Estimated meter reading									\$180.96

THANK YOU FOR YOUR BUSINESS!

Invoice SubTotal	\$180.96
Tax:	\$0.00
Invoice Total	\$180.96
Balance Due:	\$180.96



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 5253 R St - Lincoln 68504
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CONTRACT INVOICE

Invoice Number: 373593
 Invoice Date: 03/29/2017

REMIT TO:
 Bishop Business
 4125 S 94th Street
 Omaha, NE 68127

Bill To: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Customer: Heartland Family Service-Jefferson House
 437 Jefferson Road
 Fremont, NE 68025

Account No	Payment Terms	Due Date	Invoice Total	Balance Due	
103343	Due Upon Receipt	04/13/2017	\$112.46	\$112.46	
Contract Number	Contact	Contract Amount	P.O. Number	Start Date	Exp. Date
SC3972-01		\$112.46	Diane Benton	09/28/2013	
Remarks					
THIS IS COST PER COPY FOR THIS UNIT - put on worksheet for Heartland Family					

Summary:

Contract base rate charge for this billing period	\$0.00
Contract overage charge for the 02/28/2017 to 03/27/2017 overage period	<u>\$112.46 **</u>
**See overage details below	\$112.46

Detail:

Equipment included under this contract

Xerox/X5845/APTXF2

Number	Serial Number	Base Adj.	Location						
BL884	EX7-394831	\$0.00	Heartland Family Service-Jefferson House 437 Jefferson Road Fremont, NE 68025						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B\W	B\W	245,880	252,402		6,522				*** See overage details below
									\$0.00

Xerox/X7855/PTXF2

Number	Serial Number	Base Adj.	Location						
BL859	MX4-327661	\$0.00	Heartland Family Service - Youth Links-NOIC 4318 Fort St 2ND FLOOR YOUTH LINKS Omaha, NE 68111-1849						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B\W	B\W	497,099	502,569		5,470				*** See overage details below
Color	COLOR	35,936	36,934		998	0	998	\$0.043000	\$42.91
									\$42.91

Overage Details						
Meter Group	Total Copies	Covered Copies	Billable	Rate	Total	
B/W	11,992	0	0	11,992	\$0.005800	\$69.55
						Base Amount: \$0.00
						<u>\$69.55</u>
Meter Type	Equip. Number	Serial Number	Begin	End	Copies	
B\W	BL859	MX4-327661	497,099	502,569	5,470	
B\W	BL884	EX7-394831	245,880	252,402	6,522	
Total Grouped Overage Charges:						\$69.55
Total Grouped Base Charges:						\$0.00
Total Meter Group Charges:						<u>\$69.55</u>



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5253 R St - Lincoln 68504
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REMIT TO:
Bishop Business
4125 S 94th Street
Omaha, NE 68127

CONTRACT INVOICE

Invoice Number: 373593
Invoice Date: 03/29/2017

Bill To: Heartland Family Service
2101 S 42nd Street
Omaha, NE 68105-2909

Customer: Heartland Family Service-Jefferson House
437 Jefferson Road
Fremont, NE 68025

THANK YOU FOR YOUR BUSINESS!

Invoice SubTotal	\$112.46
Tax:	\$0.00
Invoice Total	\$112.46
Balance Due:	\$112.46



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CONTRACT INVOICE

Invoice Number: 373594
 Invoice Date: 03/29/2017

REMIT TO:
 Bishop Business
 4125 S 94th Street
 Omaha, NE 68127

Bill To: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Customer: Heartland Family Service
 515 E Broadway
 Council Bluffs, IA 51503

Account No	Payment Terms	Due Date	Invoice Total	Balance Due	
103343	Due Upon Receipt	04/13/2017	\$896.03	\$896.03	
Contract Number	Contact	Contract Amount	P.O. Number	Start Date	Exp. Date
SC3973-01		\$837.41	.	09/28/2013	
Remarks					
THIS IS COST PER COPY ON ALL UNITS - put on worksheet for Heartland Family					

Summary:

Contract base rate charge for this billing period	\$0.00 *
Contract overage charge for the 02/28/2017 to 03/27/2017 overage period	\$837.41 **
*Sum of equipment base charges **See overage details below	\$837.41

Detail:

Equipment included under this contract

Xerox/X5845/APTXF2

Number	Serial Number	Base Charge	Location						
BL882	EX7-395103	\$0.00	Heartland Family Service 1515 Avenue J Council Bluffs, IA 51503						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B/W	B/W	250,075	253,483		3,408	*** See overage details below			\$0.00

Number	Serial Number	Base Charge	Location						
BL883	EX7-394726	\$0.00	Heartland Family Service 1722 Avenue C Council Bluffs, IA 51501						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B/W	B/W	340,714	345,138		4,424	*** See overage details below			\$0.00

Xerox/X5855/APTXF2

Number	Serial Number	Base Charge	Location						
BL875	EX7-392588	\$0.00	Heartland Family Service 2912 9th Avenue Council Bluffs, IA 51501						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B/W	B/W	531,616	541,209		9,593	*** See overage details below			\$0.00

Number	Serial Number	Base Charge	Location						
BL876	EX7-398699	\$0.00	Heartland Family Service 515 E Broadway Council Bluffs, IA 51503						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B/W	B/W	641,267	654,421		13,154	*** See overage details below			\$0.00

Xerox/X7845/PTXF2



4125 S 94th St - Omaha 68127
 5253 R St - Lincoln 68504
 1.800.933.9583 / 402.537.4379 fx
 www.bb.ec.com

CONTRACT INVOICE

Invoice Number: 373594
 Invoice Date: 03/29/2017

REMIT TO:
 Bishop Business
 4125 S 94th Street
 Omaha, NE 68127

Bill To: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Customer: Heartland Family Service
 515 E Broadway
 Council Bluffs, IA 51503

Account No	Payment Terms	Due Date	Invoice Total	Balance Due
103343	Due Upon Receipt	04/13/2017	\$896.03	\$896.03

Number	Serial Number	Base Charge			Location					
BL874	MX4-327593	\$0.00			Heartland Family Service 1515 Avenue J Council Bluffs, IA 51503					
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage	
B/W	B/W	274,808	282,714		7,906	***	See overage details below			
Color	COLOR	47,132	47,944		812	***	See overage details below			
\$0.00										

Number	Serial Number	Base Charge			Location					
BL877	MX4-327602	\$0.00			Heartland Family Service 515 E Broadway Council Bluffs, IA 51503					
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage	
B/W	B/W	610,095	625,911		15,816	***	See overage details below			
Color	COLOR	49,737	51,360		1,623	***	See overage details below			
\$0.00										

Number	Serial Number	Base Charge			Location					
BN523	MX4-740794	\$0.00			Heartland Family Service 705 N 16th Street Council Bluffs, IA 51501					
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage	
B/W	B/W	111,122	115,944		4,822	***	See overage details below			
Color	COLOR	25,161	26,925		1,764	***	See overage details below			
\$0.00										

Xerox/X7855/PTXF2

Number	Serial Number	Base Charge			Location					
BL873	MX4-327598	\$0.00			Heartland Family Service 2912 9th Avenue Council Bluffs, IA 51501					
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage	
B/W	B/W	421,565	429,081		7,516	***	See overage details below			
Color	COLOR	213,235	219,522		6,287	***	See overage details below			
\$0.00										

MAPA JARC GRANT BILLING DOCUMENT

PART IV - Project Budget Worksheet

Project Name: __HEARTLAND FAMILY SERVICE - WAYS TO WORK__

Contact Name: __Joanie Poore, VP__

BUDGET DETAIL	TOTAL JARC BUDGET (ORIGINAL)	4/1/2017 - 4/30/2017		TOTAL COST MONTH	Program to Date	
		JARC	LOCAL MATCH		JARC	LOCAL MATCH
A. OPERATING EXPENSES¹						
1. Salaries and Benefits	30,720	\$ 1,540.33	\$ 917.99	\$ 2,458.31	\$ 6,558.06	\$ 3,135.73
2. Atty, Audit, Acct, POS	2,200	\$ -	\$ 89.56	\$ 89.56	\$ -	\$ 1,268.46
3. Office and Meeting Supplies	400	\$ 4.07	\$ 4.07	\$ 8.14	\$ 9.08	\$ 9.08
4. Phone & Internet	400	\$ 8.87	\$ 8.87	\$ 17.74	\$ 34.52	\$ 34.52
5. Postage & Shipping	220	\$ 2.85	\$ 2.85	\$ 5.70	\$ 12.06	\$ 12.06
6. Building and Occupancy	1,240	\$ 29.16	\$ 29.16	\$ 58.32	\$ 137.15	\$ 137.15
7. Equipment & Equip rep/rent	800	\$ 14.16	\$ 14.16	\$ 28.31	\$ 57.86	\$ 57.86
8. Advertising, Printing and Pubs	840	\$ 4.66	\$ 4.66	\$ 9.32	\$ 20.10	\$ 20.10
9. Mileage, travel, conf, auto ins.	320	\$ 150.52	\$ 150.52	\$ 301.04	\$ 264.53	\$ 264.53
10. Borrower Incentives	-			\$ -	\$ -	\$ -
11. Org Dues & Misc	128		\$ -	\$ -	\$ -	\$ -
12. Administrative Costs	6,732	\$ -	\$ 532.78	\$ 532.78	\$ -	\$ 2,153.87
Subtotal - Operating Expenses	\$ 44,000	\$ 1,754.61	\$ 1,754.61	\$ 3,509.22	\$ 7,093.34	\$ 7,093.34

Period	Date	Journal	Comments	Beginning Balance	Debit	Credit	Net Change	Ending Balance	Salaries & Benefits	Atty. Legal, Audit, Acct, POS, Interdept
				6,337.45	2,157.92	-	2,157.92	8,495.37	2,157.92	-
2210-21			GROUP HEALTH INSURANCE: WTW	36.61						
04	4/30/2017	PR-000366	HEALTH INS	36.61	12.62		12.62	49.23	12.62	-
					12.62	-		49.23	12.62	-
2220-21			RETIREMENT PLAN: WTW	197.65						
04	4/30/2017	PR-000366	RETIREMENT		65.88			263.53	65.88	-
				197.65	65.88	-	65.88	263.53	65.88	-
2290-21			OTHER BENEFITS/DIS.: WTW	24.99						
04	4/30/2017	PR-000366	LONG TERM DISABILITY		8.5			33.49	8.50	-
				24.99	8.50	-	8.50	33.49	8.50	-
2300-21			PAYROLL TAXES: WTW	638.78						
04	4/30/2017	AJ-084123	PR TAXES PROF LIAB		39.18			677.96	39.18	-
04	4/30/2017	AJ-084377	ALLOCATION OF TAXES - LAKIN		0.84			678.80	0.84	-
04	4/30/2017	PR-000366	PAYROLL TAXES		162.86			841.66	162.86	-
04	4/30/2017	PR-000366	STATE UNEMPLOYMENT		10.51			852.17	10.51	-
				638.78	213.39	-	213.39	852.17	213.39	-
2410-21			ATTORNEY FEES: WTW							
							0.00	0.00		
2410-21			ATTORNEY FEES: WTW	1,117.80				1,117.80		
				1,117.80			0.00	1,117.80		
2430-21			AUDITING/ACCOUNT FEES: WTW	16.02						
04	4/30/2017	AJ-084135	AUDITING/ACCT FEES ALLOC		5.34			21.36		5.34
				16.02	5.34	-	5.34	21.36		5.34
2490-21			OTHER PURCHASE OF SERVICE: WTW	34.94						
04	4/13/2017	AP-004915	CORELOGIC CREDCO, LLC /IN: 10124860		19.80			54.74		19.80
04	4/30/2017	AJ-084146	PURCHASE OF SERVICE ALLOC		11.54			66.28		11.54
04	4/30/2017	AP-004936	CORELOGIC CREDCO, LLC /IN: 10156352		49.50			115.78		49.50
				34.94	80.84	-	80.84	115.78		80.84
2491-21			Interdepartmental: WTW	10.14						
04	4/30/2017	RJ-003762	EXPENS/INTEROFFICE DELIVERY		3.38			13.52		3.38
				10.14	3.38	-	3.38	13.52		3.38
2510-21			OFFICE SUPPLIES: WTW	5.12						
04	4/30/2017	AJ-084161	LAKIN CAMPUS OFFICE SUPPLIES		5.14			10.26		
				5.12	5.14	-	5.14	10.26		
2520-21			BUILDING & GROUND SUPPLIES: WTW	11.22						
04	4/30/2017	AJ-084173	BUILDING SUPPLIES - LAKIN CAMPUS		3.38			14.60		
04	4/30/2017	AJ-084178	BUILDING & GROUND SUPPLIES		0.13			14.73		
				11.22	3.51	-	3.51	14.73		
2550-21			FOOD: WTW	4.89						
04		42855 AJ-084185	LAKIN - FOOD		3			7.89		
				4.89	3.00	-	3.00	7.89		
2600-21			TELEPHONE: WTW	51.29						
04	4/30/2017	AJ-084198	ALLOCATION TELEPHONE LAKIN		9.28			60.57		
04	4/30/2017	AJ-084203	TELEPHONE		8.46			69.03		

Period	Date	Journal	Comments	Beginning Balance	Debit	Credit	Net Change	Ending Balance	Salaries & Benefits	Atty. Legal, Audit, Acct, POS, Interdept
				51.29	17.74	-	17.74	69.03	-	-
2700-21			POSTAGE & SHIPPING: WTW	17.51						
04	4/30/2017	AJ-084210	POSTAGE - LAKIN CAMPUS		1.15			18.66		
04	4/30/2017	AJ-084215	POSTAGE ALLOCATION		2.10			20.76		
04	4/30/2017	JE-003881	POSTAGE - APR		2.45			23.21		
				17.51	5.70	-	5.70	23.21	-	-
2830-21			UTILITIES: WTW	57.84						
04	4/30/2017	AJ-084228	UTILITIES ALLOCATION		14.18			72.02		
				57.84	14.18	-	14.18	72.02	-	-
2840-21			CARE OF BUILDINGS & GROUNDS: WTW	92.93						
04	4/30/2017	AJ-084238	ALLOCATION OF CARE OF BUILDING AND GROUNDS LAKIN		17.14			110.07		
04	4/30/2017	42855 AJ-084243	ALLOCATION - CARE OF BUILDING AND GROUNDS		5.32			115.39		
				92.93	22.46	-	22.46	115.39	-	-
2841-21			Inter - Blds and Grn. WTW	-						
				-	-	-	0.00	0.00	-	-
2850-21			EQUIPMENT REPAIR & MAINTENANCE: WTW	25.37						
04	4/30/2017	AJ-084256	EQUIPMENT REPAIR LAKIN CAMPUS		3.74			29.11		
04	4/30/2017	AP-004933	BISHOP BUSINESS EQUIPMENT CO /IN: APR-2017		3.89			33.00		
				25.37	7.63	-	7.63	33.00	-	-
2880-21			PROPERTY INS/TAXES: WTW	53.99						
04	4/30/2017	AJ-084275	PROP INS/TAXES ALLOCATION		18.17			72.16		
				53.99	18.17	-	18.17	72.16	-	-
3100-21			PRINTING & PUB.: WTW	30.87						
04	4/30/2017	AJ-084287	PRINTING & PUBLICATION ALLOCATION		9.32			40.19		
				30.87	9.32	-	9.32	40.19	-	-
3210-21			MILEAGE/EXPENSE: WTW	176.70						
04	4/30/2017	PR-000366	EXP REIMBURSEMENT		229.63			406.33		
				176.70	229.63	-	229.63	406.33	-	-
3220-21			OUT OF TOWN TRAVEL: WTW	-						
04	4/30/2017	PR-000366	EXP REIMBURSEMENT		54.15			54.15		
				-	54.15	-	54.15	54.15	-	-
3250-21			AGENCY VEHICLE OPERATE.COSTS : WTW	-						
				-	-	-	0.00	0.00	-	-
3280-21			AUTOMOBILE INSURANCE: WTW	51.31						
04	4/30/2017	AJ-084297	AUTO INS ALLOCATION		17.26			68.57		
				51.31	17.26	-	17.26	68.57	-	-
3300-21			CONFERENCE/CONVENTION/TRIPS: WTW	-						
				-	-	-	0.00	0.00	-	-
3500-21			SPECIFIC ASSISTANCE INDIVIDUAL: WTW	-						
				-	-	-	0.00	0.00	-	-
4100-21			ORGANIZATION DUES: WTW	-						

Office & Mtg Supplies	Phone & Internet	Postage & shipping	Building & Occupancy (Utilities, care of bidg/grnds, bidg/grnd supp, prop ins)	Equip & Equip rent/repair	Advertising, Prntg, Pubs	Mileage, travel, conf, agency vehicle, auto ins	Borrower Incentives	Org Dues & Misc	Admin @ 17.9%	Loan Guarantee Funds (Misc)	Total
-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	20.68	-	-	-	-	-	-	20.68
-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	20.68	-	-	-	-	-	-	20.68
-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	3,885.60	3,885.60
-	-	-	-	-	-	-	-	-	-	4,776.58	4,776.58
-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	8,662.18	8,662.18
-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-
8.14	17.74	5.70	58.32	28.31	9.32	301.04	-	-	-	8,440.61	11,417.05
-	-	-	-	-	-	-	-	-	532.78	-	532.78
8.14	17.74	5.70	58.32	28.31	9.32	301.04	-	-	532.78	8,440.61	11,949.83
-	-	-	-	-	-	-	-	-	-	-	-
8.14	17.74	5.70	58.32	28.31	9.32	301.04	-	-	532.78	8,440.61	11,949.83

Check

3,509.22 Ties to MAPA

NOTE: Reduce Loan Guarantees by Funds received after default



Progress Report

Title: Heartland Family Service- Ways to Work

Date: 04/01/2017 -04/30/2017

Title: MAPA bill \$ 2,672.60 out of \$22,000

1. Work Completed for Current Billing Period:

- a. The Ways to Work program currently has 1 person shopping for a vehicle.

2. Anticipated Work for Next Billing Period:

- a. Same as prior month

3. Information Needed from FTA/MAPA:

- a. No information is needed.

4. Percent of Work Completed to Date:

- a. 46% of grant utilized

5. Outstanding Issues:

Data

1. Number of repossessions in the month (bought back loans)

- a. 0

2. Number of new closed loans in the month

- a. 1

3. Number of loans outstanding

- a. 9

4. Other.....

- a.

5. Narrative

- a. Closed first loan with new lender. Process went smoothly. Starting to see an increase in program inquiries and financial education attendance.

4/27/2017

APR-2017

INV'S 376680 - 376687

2,748.28

0.00

2,748.28

HEARTLAND
family Service
Good works.

Check: 143469

5/30/2017

BISHOP BUSINESS EQUIPMENT CO

2,748.28

ORIGINAL DOCUMENT PRINTED ON CHEMICAL REACTIVE PAPER WITH MICROPRINTED BORDER

143469



2101 S. 42ND ST.
 OMAHA, NE 68105
 402-553-3000
 A United Way Member Agency

AMERICAN NATIONAL BANK
 OMAHA, NEBRASKA 68114

NUMBER

27-85/1040

*TWO THOUSAND SEVEN HUNDRED FORTY-EIGHT AND 28 / 100^E

AMOUNT

PAY TO THE ORDER OF

BISHOP BUSINESS EQUIPMENT CO
 4125 S 94TH ST
 OMAHA, NE 68127

5/30/2017

*****2,748.28*

BISHOPS

A SECOND SIGNATURE REQUIRED FOR CHECKS OVER 1,000 DOLLARS

⑈ 143469 ⑆ ⑆ 104000854 ⑆ 3285463 ⑆

HEARTLAND FAMILY SERVICE

143469

FILE COPY

Apr.

Prog. Serv. _____
Amt. 2,748.28
Cler. 283
Appr. _____
Acct. No. _____

BISHOPS BUSINESS EQUIPMENT		
4/27/2017		
Invoice #'s 376680, 376681, 376682, 376683, 376683, 376684, 376685, 376686, 376687		
Account Name	2850-	Grand Total
Administration	03	\$898.42
Development	04	\$5.80
NE Behavioral Health	05	\$145.08
Generations Center	06	\$28.36
NE Family Works Residential	07	\$160.87
NH Emerg Svcs NOT IN USE (Move to 11)	08	\$0.00
Better Together	09	\$27.66
Gamblers Assistance Iowa	10	\$3.45
Hardship Assistance	11	\$53.20
Child & Adult Care Food Program	12	\$54.83
Solomon Girls Center	13	\$21.60
NE HPRP/OPPORTUNITIES	14	\$53.43
Community Education	15	\$31.29
Iowa Counseling	16	\$228.72
Samaritan Housing	17	\$12.62
Domestic Abuse Program NE	18	\$48.17
Prevention DFC	19	\$4.42
Youth Links	20	\$78.93
Ways to Work	21	\$3.89
Nebraska Gamblers	22	\$8.00
Integrated Health Home	23	\$31.39
Sarpy Juvenile Justice	24	\$0.50
In Home Parenting Time	25	\$16.85
Iowa Assertive CommunityTrmt	26	\$24.83
Bridges	27	\$0.01
Iowa Mental Health Crt	28	\$43.06
Family Works Iowa	29	\$44.12
Therapeutic School	30	\$257.00
Nebraksa Tracker-Inactive	31	\$0.00
Assessment Center	32	\$0.00
Passages	33	\$31.23
PCHL Rapid Re-housing	34	\$34.31
Fremont Childrens Shelter	35	\$45.88
Heartland Housing Solutions	36	\$17.19
Heartland Homes	37	\$2.72
ASAP	38	\$14.66
Ready in 5	39	\$72.63
Heartland Housing Beginnings	40	\$10.54
DCYC	41	\$0.53
Transitions	42	\$2.72
Family Crisis Mediation	43	\$10.10
Baby Talk	44	\$13.18

Refugee Juvenile Justice Adv	45	\$4.22	
Prevention - Block	46	\$19.31	
Metro Home Base/do not use	47	\$0.00	
DRUG TESTING/do not use	48	\$0.00	
In Home Support-Fremont	49	\$0.00	
Prevention - TFN/MOTAC	50	\$20.89	
Prevention - SPF/LiveWise	51	\$0.78	
In Home Family Support	52	\$19.94	
PCHL Prevention	53	\$14.63	
IBH - School Based Services	54	\$31.57	
Child & Family Center	55	\$59.96	
NE Family Works Apts NOT IN USE (Move to 07)	56	\$0.00	
The Coeur Group	57	\$1.91	
VOCA	58	\$0.00	
VAWA	59	\$0.00	
SPSS	60	\$0.00	
Dr Paul	57	\$5.56	Com: Dr. Paul
Dr Coy	57	\$6.85	Com: Dr. Coy
Integrated Therapy	57	\$20.47	Com: Integrated
		\$2,748.28	



4125 S 94th St - Omaha 68127
 5253 R St - Lincoln 68504
 1.800.933.7583 / 402.537.4379 fx
 www.bbec.com

CONTRACT INVOICE

Invoice Number: 376680
 Invoice Date: 04/26/2017

REMIT TO:
 Bishop Business
 4125 S 94th Street
 Omaha, NE 68127

Bill To: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Customer: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Account No	Payment Terms	Due Date	Invoice Total	Balance Due	
103343	Due Upon Receipt	05/11/2017	\$99.03	\$99.03	
Contract Number	Contact	Contract Amount	P.O. Number	Start Date	Exp. Date
SC4031-01		\$92.55	DIANE BENTON	09/28/2013	
Remarks					
THIS IS FOR YOUR BLACK, WHITE & COLOR COPIES AT COST PER COPY - put on worksheet for customer					

Summary:

Contract base rate charge for this billing period \$0.00
 Contract overage charge for the 03/28/2017 to 04/27/2017 overage period \$92.55 **
 **See overage details below \$92.55

Detail:

Equipment included under this contract

Toshiba/TF654CT

Number	Serial Number	Base Adj.	Location
BK385	CCD-110160	\$0.00	Heartland Family Service 2101 S 42nd Street Omaha, NE 68105-2909

Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B/W	B/W	277,605	280,639		3,034	0	3,034	\$0.006000	\$18.20
Color	COLOR	778,484	779,971		1,487	0	1,487	\$0.050000	\$74.35
									\$92.55

99.03 +
 12.35 +
 603.83 +
 965.56 +
 34.59 +
 112.28 +
 143.73 +
 777.18 +

008

2,718.556
 - Credits

000

THANK YOU FOR YOUR BUSINESS!

Invoice SubTotal	\$92.55
Tax:	\$6.48
Invoice Total	\$99.03
Balance Due:	\$99.03



4125 S 94th St - Omaha 68127
 5253 R St - Lincoln 68504
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 www.bbec.com

CONTRACT INVOICE

Invoice Number: 376681
 Invoice Date: 04/26/2017

REMIT TO:
 Bishop Business
 4125 S 94th Street
 Omaha, NE 68127

Bill To: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Customer: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Account No	Payment Terms	Due Date	Invoice Total	Balance Due	
103343	Due Upon Receipt	05/11/2017	\$12.35	\$12.35	
Contract Number	Contact	Contract Amount	P.O. Number	Start Date	Exp. Date
SC4973-01		\$11.54	BP213	09/28/2015	
Remarks					
THIS CHARGE IS FOR COPIES AT COST PER COPY - put on worksheet for Heartland Family					

Summary:

Contract base rate charge for this billing period	\$0.00
Contract overage charge for the 03/28/2017 to 04/27/2017 overage period	\$11.54**
	\$11.54

**See overage details below

Detail:

Equipment included under this contract

Toshiba/T355E

Number	Serial Number	Base Adj.	Location						
BP213	CPG-912476	\$0.00	Heartland Family Service 2101 S 42nd Street Omaha, NE 68105-2909						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B/W	B/W	107,183	109,173		1,990	0	1,990	\$0.005800	\$11.54
									\$11.54

THANK YOU FOR YOUR BUSINESS!

Invoice SubTotal	\$11.54
Tax:	\$0.81
Invoice Total	\$12.35
Balance Due:	\$12.35



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CONTRACT INVOICE

Invoice Number: 376682
 Invoice Date: 04/26/2017

REMIT TO:
 Bishop Business
 4125 S 94th Street
 Omaha, NE 68127

Bill To: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Customer: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Account No	Payment Terms	Due Date	Invoice Total	Balance Due	
103343	Due Upon Receipt	05/11/2017	\$603.83	\$603.83	
Contract Number	Contact	Contract Amount	P.O. Number	Start Date	Exp. Date
XEROX-E2B659739-01		\$564.33	.	10/24/2016	
Remarks					
THIS CHARGE IS FOR BLACK & WHITE AND COLOR COPIES AT COST PER COPY - MONTHLY					

Summary:

Contract base rate charge for this billing period	\$0.00
Contract overage charge for the 03/24/2017 to 04/23/2017 overage period	\$564.33 **
	\$564.33

**See overage details below

Detail:

Equipment included under this contract

Xerox/XC70

Number	Serial Number	Base Adj.	Location						
BR901	E2B-659739	\$0.00	Heartland Family Service 2101 S 42nd Street Omaha, NE 68105-2909						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B/W	B/W	16,239	20,313		4,074	0	4,074	\$0.008000	\$32.59
Color	COLOR	52,317	63,395		11,078	0	11,078	\$0.048000	\$531.74
									\$564.33

THANK YOU FOR YOUR BUSINESS!

Invoice SubTotal	\$564.33
Tax:	\$39.50
Invoice Total	\$603.83
Balance Due:	\$603.83



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CONTRACT INVOICE

Invoice Number: 376683
 Invoice Date: 04/26/2017

REMIT TO:
 Bishop Business
 4125 S 94th Street
 Omaha, NE 68127

Bill To: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Customer: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Account No	Payment Terms	Due Date	Invoice Total	Balance Due	
103343	Due Upon Receipt	05/11/2017	\$965.56	\$965.56	
Contract Number	Contact	Contract Amount	P.O. Number	Start Date	Exp. Date
XEROX-MX4327650-01		\$907.22	DIANE BENTON	09/28/2013	
Remarks					
THIS CHARGE IS FOR ALL COPIES AT COST PER COPY - PUT ON WORKSHEET FOR CUSTOMER					

Summary:

Contract base rate charge for this billing period	\$0.00 *
Contract overage charge for the 03/28/2017 to 04/27/2017 overage period	\$907.22 **
*Sum of equipment base charges **See overage details below	<u>\$907.22</u>

Detail:

Equipment included under this contract

Xerox/X5845/APT2

Number	Serial Number	Base Charge	Location						
BL712	EX7-387139	\$0.00	Heartland Family Service 2101 S 42nd Street Omaha, NE 68105-2909						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B/W	B/W	523,766	70,522		16,290	*** See overage details below			\$0.00

Xerox/X5845/APTXF2

Number	Serial Number	Base Charge	Location						
BL850(2)	EX7-396327	\$0.00	Heartland Family Service 600 9th Avenue Council Bluffs, IA 51501						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B/W	B/W	88,427	90,048		1,621	*** See overage details below			\$0.00

Number	Serial Number	Base Charge	Location						
BL853	EX7-396220	\$0.00	Heartland Family Service Better Together 2517 Caldwell Street Omaha, NE 68131-4602						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B/W	B/W	156,360	160,896		4,536	*** See overage details below			\$0.00

Number	Serial Number	Base Charge	Location						
BL856	EX7-392695	\$0.00	Heartland Family Service 6720 N 30th Street Omaha, NE 68112-3211						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B/W	B/W	373,862	378,512		4,650	*** See overage details below			\$0.00



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CONTRACT INVOICE

Invoice Number: 376683
 Invoice Date: 04/26/2017

REMIT TO:
 Bishop Business
 4125 S 94th Street
 Omaha, NE 68127

Bill To: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Customer: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Account No	Payment Terms	Due Date	Invoice Total	Balance Due
103343	Due Upon Receipt	05/11/2017	\$965.56	\$965.56

Number	Serial Number	Base Charge	Location
BL860	EX7-392587	\$0.00	Heartland Family Service Bellevue, NE 68005

Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B\W	B/W	118,821	121,289		2,468				*** See overage details below
									\$0.00

Number	Serial Number	Base Charge	Location
BL861	EX7-392502	\$0.00	Heartland Family Services - Family Works- Day Care 4847 Sahler Street Omaha, NE 68104

Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B\W	B/W	378,289	387,566	760	8,517				*** See overage details below
									\$0.00

Number	Serial Number	Base Charge	Location
BL865	EX7-392702	\$0.00	Heartland Family Service - Youth Links-NOIC 4318 Fort Street - 1ST FLOOR Omaha, NE 68111-1849

Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B\W	B/W	69,410	70,994		1,584				*** See overage details below
									\$0.00

Xerox/X5855/APTXF2

Number	Serial Number	Base Charge	Location
BL863	EX7-392658	\$0.00	Heartland Family Service 2101 S 42nd Street Omaha, NE 68105-2909

Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B\W	B/W	644,521	657,676		13,155				*** See overage details below
									\$0.00

Xerox/X7845/PTXF2

Number	Serial Number	Base Charge	Location
BL855	MX4-327604	\$0.00	Heartland Family Service Homeless Call Center 1941 S 42nd Street - Suite 375 Omaha, NE 68105

Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B\W	B/W	828,594	844,845		16,251				*** See overage details below
Color	COLOR	26,939	27,800		861				*** See overage details below
									\$0.00

Xerox/X7855/PTXF2



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CONTRACT INVOICE

Invoice Number: 376683
 Invoice Date: 04/26/2017

REMIT TO:
 Bishop Business
 4125 S 94th Street
 Omaha, NE 68127

Bill To: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Customer: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Account No	Payment Terms	Due Date	Invoice Total	Balance Due
103343	Due Upon Receipt	05/11/2017	\$965.56	\$965.56

Number	Serial Number	Base Charge			Location				
BL854	MX4-327458	\$0.00			Heartland Family Service 6720 N 30th Street Omaha, NE 68112-3211				
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B/W	B/W	292,375	297,497		5,122				*** See overage details below
Color	COLOR	279,722	283,160		3,438				*** See overage details below
\$0.00									

Number	Serial Number	Base Charge			Location				
BL858	MX4-327605	\$0.00			Heartland Family Service 302 American Parkway Papillion, NE 68046-6270				
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B/W	B/W	415,826	426,115		10,289				*** See overage details below
Color	COLOR	69,826	72,050		2,224				*** See overage details below
\$0.00									

Number	Serial Number	Base Charge			Location				
BL866	MX4-327650	\$0.00			Heartland Family Service 2101 S 42nd Street Omaha, NE 68105-2909				
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B/W	B/W	229,458	234,090		4,632				*** See overage details below
Color	COLOR	93,379	95,934		2,555				*** See overage details below
\$0.00									



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 5253 R St - Lincoln 68504
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CONTRACT INVOICE

Invoice Number: 376683
 Invoice Date: 04/26/2017

REMIT TO:
 Bishop Business
 4125 S 94th Street
 Omaha, NE 68127

Bill To: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Customer: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Account No	Payment Terms	Due Date	Invoice Total	Balance Due
103343	Due Upon Receipt	05/11/2017	\$965.56	\$965.56

Overage Details

Meter Group	Total Copies	Covered Copies	Credits	Billable	Rate	Total
B/W	89,875	0	760	89,115	\$0.005800	\$516.87
					Base Amount:	\$0.00
						\$516.87
Meter Type	Equip. Number	Serial Number	Begin	End	Copies	
B/W	BL712	EX7-387139	523,766	70,522	16,290	
B/W	BL850(2.000000)	EX7-396327	88,427	90,048	1,621	
B/W	BL853	EX7-396220	156,360	160,896	4,536	
B/W	BL854	MX4-327458	292,375	297,497	5,122	
B/W	BL855	MX4-327604	828,594	844,845	16,251	
B/W	BL856	EX7-392695	373,862	378,512	4,650	
B/W	BL858	MX4-327605	415,826	426,115	10,289	
B/W	BL860	EX7-392587	118,821	121,289	2,468	
B/W	BL861	EX7-392502	378,289	387,566	9,277	
B/W	BL863	EX7-392658	644,521	657,676	13,155	
B/W	BL865	EX7-392702	69,410	70,994	1,584	
B/W	BL866	MX4-327650	229,458	234,090	4,632	
Meter Group	Total Copies	Covered Copies	Billable	Rate	Total	
COLOR	9,078	0	0	9,078	\$0.043000	\$390.35
					Base Amount:	\$0.00
						\$390.35
Meter Type	Equip. Number	Serial Number	Begin	End	Copies	
Color	BL854	MX4-327458	279,722	283,160	3,438	
Color	BL855	MX4-327604	26,939	27,800	861	
Color	BL858	MX4-327605	69,826	72,050	2,224	
Color	BL866	MX4-327650	93,379	95,934	2,555	
Total Grouped Overage Charges:						\$907.22
Total Grouped Base Charges:						\$0.00
Total Meter Group Charges:						\$907.22

THANK YOU FOR YOUR BUSINESS!

Invoice SubTotal	\$907.22
Tax:	\$58.34
Invoice Total	\$965.56
Balance Due:	\$965.56



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 5253 R St - Lincoln 68504
 1.800.933.9583 / 402.537.4379 fx
 www.bbec.com

CONTRACT INVOICE

Invoice Number: 376684
 Invoice Date: 04/26/2017

REMIT TO:
 Bishop Business
 4125 S 94th Street
 Omaha, NE 68127

Bill To: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Customer: Heartland Family Services Couer Group
 900 So 74th Plaza Suite 400
 Omaha, NE 68114-4667

Account No	Payment Terms	Due Date	Invoice Total	Balance Due	
103343	Due Upon Receipt	05/11/2017	\$34.59	\$34.59	
Contract Number	Contact	Contract Amount	P.O. Number	Start Date	Exp. Date
SC5389-01	HFS Couer Group	\$32.33	HFS Couer Group	08/28/2016	
Remarks					
THIS CHARGE IS FOR BLACK, WHITE & COLOR COPIES ON BP504 - HFS Couer Group -AT COST PER COPY MONTHLY - PUT ON WORKSHEET WITH THE UNITS					

Summary:

Contract base rate charge for this billing period	\$0.00
Contract overage charge for the 03/28/2017 to 04/27/2017 overage period	\$32.33 **
	\$32.33

**See overage details below

Detail:

Equipment included under this contract

Toshiba/TF354C

Number	Serial Number	Base Adj.	Location
BP504	CQF-112689	\$0.00	Heartland Family Services Couer Group 900 So 74th Plaza Suite 400 Omaha, NE 68114-4667

Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B/W	B/W	248,457	251,437		2,980	0	2,980	\$0.006000	\$17.88
Color	COLOR	273,582	273,871		289	0	289	\$0.050000	\$14.45
									\$32.33

THANK YOU FOR YOUR BUSINESS!

Invoice SubTotal	\$32.33
Tax:	\$2.26
Invoice Total	\$34.59
Balance Due:	\$34.59



4125 S 94th St - Omaha 68127
 5253 R St - Lincoln 68504
 1.800.933.9583 / 402.537.4379 fx
 www.bbec.com

CONTRACT INVOICE

Invoice Number: 376685
 Invoice Date: 04/26/2017

REMIT TO:
 Bishop Business
 4125 S 94th Street
 Omaha, NE 68127

Bill To: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Customer: Heartland Family Services - Family Works- Day Care
 4847 Sahler Street
 Omaha, NE 68104

Account No	Payment Terms	Due Date	Invoice Total	Balance Due	
103343	Due Upon Receipt	05/11/2017	\$112.28	\$112.28	
Contract Number	Contact	Contract Amount	P.O. Number	Start Date	Exp. Date
SC5390-01	HFS DAY CARE	\$112.28	HFS DAY CARE	08/28/2016	
Remarks					
THIS CHARGE IS FOR YOUR BLACK, WHITE & COLOR COPIES ON BP503 - HFS DAY CARE- AT COST PER COPY MONTHLY - PUT ON WORKSHEET WITH ALL THE OTHER UNITS					

Summary:

Contract base rate charge for this billing period \$0.00
 Contract overage charge for the 03/28/2017 to 04/27/2017 overage period \$112.28 **
 **See overage details below \$112.28

Detail:

Equipment included under this contract

Toshiba/TF454C

Number	Serial Number	Base Adj.	Location
BP503	CMG-221125	\$0.00	Heartland Family Services - Family Works- Day Care 4847 Sahler Street Omaha, NE 68104

Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B/W	B/W	146,718	149,490		2,772	0	2,772	\$0.006000	\$16.63
Color	COLOR	29,505	31,418		1,913	0	1,913	\$0.050000	\$95.65
									\$112.28

THANK YOU FOR YOUR BUSINESS!

Invoice SubTotal	\$112.28
Tax:	\$0.00
Invoice Total	\$112.28
Balance Due:	\$112.28



4125 S 94th St - Omaha 68127
 5253 R St - Lincoln 68504
 1.800.933.9583 / 402.537.4379 fx
 www.bb.ec.com

CONTRACT INVOICE

Invoice Number: 376686
 Invoice Date: 04/26/2017

REMIT TO:
 Bishop Business
 4125 S 94th Street
 Omaha, NE 68127

Bill To: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Customer: Heartland Family Service-Jefferson House
 437 Jefferson Road
 Fremont, NE 68025

Account No	Payment Terms	Due Date	Invoice Total	Balance Due	
103343	Due Upon Receipt	05/11/2017	\$143.73	\$143.73	
Contract Number	Contact	Contract Amount	P.O. Number	Start Date	Exp. Date
SC3972-01		\$143.73	Diane Benton	09/28/2013	
Remarks					
THIS IS COST PER COPY FOR THIS UNIT - put on worksheet for Heartland Family					

Summary:

Contract base rate charge for this billing period	\$0.00
Contract overage charge for the 03/28/2017 to 04/27/2017 overage period	\$143.73 **
	\$143.73

** See overage details below

Detail:

Equipment included under this contract

Xerox/X5845/APTXF2

Number	Serial Number	Base Adj.	Location						
BL884	EX7-394831	\$0.00	Heartland Family Service-Jefferson House 437 Jefferson Road Fremont, NE 68025						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B/W	B/W	252,402	260,279		7,877		*** See overage details below		\$0.00

Xerox/X7855/PTXF2

Number	Serial Number	Base Adj.	Location						
BL859	MX4-327661	\$0.00	Heartland Family Service - Youth Links-NOIC 4318 Fort St 2ND FLOOR YOUTH LINKS Omaha, NE 68111-1849						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B/W	B/W	502,569	510,265		7,696		*** See overage details below		
Color	COLOR	36,934	38,176		1,242	0	1,242	\$0.043000	\$53.41
									\$53.41

Overage Details

Meter Group	Total Copies	Covered Copies	Billable	Rate	Total
B/W	15,573	0	0	\$0.005800	\$90.32
				Base Amount:	\$0.00
					\$90.32
Meter Type	Equip. Number	Serial Number	Begin	End	Copies
B/W	BL859	MX4-327661	502,569	510,265	7,696
B/W	BL884	EX7-394831	252,402	260,279	7,877
Total Grouped Overage Charges:					\$90.32
Total Grouped Base Charges:					\$0.00
Total Meter Group Charges:					\$90.32



4125 S 94th St - Omaha 68127
5253 R St - Lincoln 68504
1.800.933.9583 / 402.537.4379 fx
www.bb.ec.com

CONTRACT INVOICE

Invoice Number: 376686

Invoice Date: 04/26/2017

REMIT TO:
Bishop Business
4125 S 94th Street
Omaha, NE 68127

Bill To: Heartland Family Service
2101 S 42nd Street
Omaha, NE 68105-2909

Customer: Heartland Family Service-Jefferson House
437 Jefferson Road
Fremont, NE 68025

THANK YOU FOR YOUR BUSINESS!

Invoice SubTotal	\$143.73
Tax:	\$0.00
Invoice Total	\$143.73
Balance Due:	\$143.73



4125 S 94th St - Omaha 68127
 5253 R St - Lincoln 68504
 1.800.933.9583 / 402.537.4379 fx
 www.bb.ec.com

CONTRACT INVOICE

Invoice Number: 376687
 Invoice Date: 04/26/2017

REMIT TO:
 Bishop Business
 4125 S 94th Street
 Omaha, NE 68127

Bill To: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Customer: Heartland Family Service
 515 E Broadway
 Council Bluffs, IA 51503

Account No	Payment Terms	Due Date	Invoice Total	Balance Due	
103343	Due Upon Receipt	05/11/2017	\$777.18	\$777.18	
Contract Number	Contact	Contract Amount	P.O. Number	Start Date	Exp. Date
SC3973-01		\$726.34		09/28/2013	
Remarks					
THIS IS COST PER COPY ON ALL UNITS - put on worksheet for Heartland Family					

Summary:

Contract base rate charge for this billing period	\$0.00 *
Contract overage charge for the 03/28/2017 to 04/27/2017 overage period	\$726.34 **
*Sum of equipment base charges **See overage details below	<u>\$726.34</u>

Detail:

Equipment included under this contract

Xerox/X5845/APTXF2

Number	Serial Number	Base Charge	Location						
BL882	EX7-395103	\$0.00	Heartland Family Service 1515 Avenue J Council Bluffs, IA 51503						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B/W	B/W	253,483	258,706		5,223	*** See overage details below			\$0.00

Number	Serial Number	Base Charge	Location						
BL883	EX7-394726	\$0.00	Heartland Family Service 1722 Avenue C Council Bluffs, IA 51501						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B/W	B/W	345,138	352,248		7,110	*** See overage details below			\$0.00

Xerox/X5855/APTXF2

Number	Serial Number	Base Charge	Location						
BL875	EX7-392588	\$0.00	Heartland Family Service 2912 9th Avenue Council Bluffs, IA 51501						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B/W	B/W	541,209	554,976		13,767	*** See overage details below			\$0.00

Number	Serial Number	Base Charge	Location						
BL876	EX7-398699	\$0.00	Heartland Family Service 515 E Broadway Council Bluffs, IA 51503						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B/W	B/W	654,421	667,439		13,018	*** See overage details below			\$0.00

Xerox/X7845/PTXF2



4125 S 94th St - Omaha 68127
 5253 R St - Lincoln 68504
 1.800.933.9583 / 402.537.4379 fx
 www.bb.ec.com

CONTRACT INVOICE

Invoice Number: 376687
 Invoice Date: 04/26/2017

REMIT TO:
 Bishop Business
 4125 S 94th Street
 Omaha, NE 68127

Bill To: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Customer: Heartland Family Service
 515 E Broadway
 Council Bluffs, IA 51503

Account No	Payment Terms	Due Date	Invoice Total	Balance Due
103343	Due Upon Receipt	05/11/2017	\$777.18	\$777.18

Number	Serial Number	Base Charge			Location				
BL874	MX4-327593	\$0.00			Heartland Family Service 1515 Avenue J Council Bluffs, IA 51503				
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B\W	B/W	282,711	289,154		6,440				*** See overage details below
Color	COLOR	47,944	48,598		654				*** See overage details below
\$0.00									

Number	Serial Number	Base Charge			Location				
BL877	MX4-327602	\$0.00			Heartland Family Service 515 E Broadway Council Bluffs, IA 51503				
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B\W	B/W	625,911	645,650		19,739				*** See overage details below
Color	COLOR	51,360	52,568		1,208				*** See overage details below
\$0.00									

Number	Serial Number	Base Charge			Location				
BN523	MX4-740794	\$0.00			Heartland Family Service 705 N 16th Street Council Bluffs, IA 51501				
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B\W	B/W	115,944	122,302		6,358				*** See overage details below
Color	COLOR	26,925	28,587		1,662				*** See overage details below
\$0.00									

Xerox/X7855/PTXF2

Number	Serial Number	Base Charge			Location				
BL873	MX4-327598	\$0.00			Heartland Family Service 2912 9th Avenue Council Bluffs, IA 51501				
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B\W	B/W	429,081	434,112		5,031				*** See overage details below
Color	COLOR	219,522	222,546		3,024				*** See overage details below
\$0.00									



4125 S 94th St - Omaha 68127
 5253 R St - Lincoln 68504
 1.800.933.9583 / 402.537.4379 fx
 www.bbec.com

CONTRACT INVOICE

Invoice Number: 376687
 Invoice Date: 04/26/2017

REMIT TO:
 Bishop Business
 4125 S 94th Street
 Omaha, NE 68127

Bill To: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Customer: Heartland Family Service
 515 E Broadway
 Council Bluffs, IA 51503

Account No	Payment Terms	Due Date	Invoice Total	Balance Due
103343	Due Upon Receipt	05/11/2017	\$777.18	\$777.18

Overage Details

Meter Group	Total Copies	Covered Copies	Billable	Rate	Total	
B/W	76,686	0	0	76,686	\$0.005800	\$444.78
					Base Amount:	\$0.00
						\$444.78
Meter Type	Equip. Number	Serial Number	Begin	End	Copies	
B/W	BL873	MX4-327598	429,081	434,112	5,031	
B/W	BL874	MX4-327593	282,714	289,154	6,440	
B/W	BL875	EX7-392588	541,209	554,976	13,767	
B/W	BL876	EX7-398699	654,421	667,439	13,018	
B/W	BL877	MX4-327602	625,911	645,650	19,739	
B/W	BL882	EX7-395103	253,483	258,706	5,223	
B/W	BL883	EX7-394726	345,138	352,248	7,110	
B/W	BN523	MX4-740794	115,944	122,302	6,358	
Meter Group	Total Copies	Covered Copies	Billable	Rate	Total	
COLOR	6,548	0	0	6,548	\$0.043000	\$281.56
					Base Amount:	\$0.00
						\$281.56
Meter Type	Equip. Number	Serial Number	Begin	End	Copies	
Color	BL873	MX4-327598	219,522	222,546	3,024	
Color	BL874	MX4-327593	47,944	48,598	654	
Color	BL877	MX4-327602	51,360	52,568	1,208	
Color	BN523	MX4-740794	26,925	28,587	1,662	
Total Grouped Overage Charges:						\$726.34
Total Grouped Base Charges:						\$0.00
Total Meter Group Charges:						\$726.34

THANK YOU FOR YOUR BUSINESS!

Invoice SubTotal	\$726.34
Tax:	\$50.84
Invoice Total	\$777.18
Balance Due:	\$777.18

4/3/2017 2017-04-03 8,662.18 0.00 8,662.18

HEARTLAND family Service

Good works.

Check: 142531 4/6/2017 WAYS TO WORK 8,662.18

ORIGINAL DOCUMENT PRINTED ON CHEMICAL REACTIVE PAPER WITH MICROPRINTED BORDER



2101 S. 42ND ST.
OMAHA, NE 68105
402-553-3000
A United Way Member Agency

AMERICAN NATIONAL BANK
OMAHA, NEBRASKA 68114

142531

NUMBER

27-85/1040

*EIGHT THOUSAND SIX HUNDRED SIXTY-TWO AND 18 / 100

DATE

AMOUNT

4/6/2017

*****8,662.18*

PAY TO THE ORDER OF

WAYS TO WORK
11700 WEST LAKE PARK DR
Milwaukee, WI 53224

WAYSWRK

A SECOND SIGNATURE REQUIRED FOR CHECKS OVER 1,000 DOLLARS

THIS DOCUMENT CONTAINS HEAT-SENSITIVE INK. TOUCH OR PRESS HERE. RED IMAGE DISAPPEARS WITH HEAT.

⑈ 142531⑈ ⑆ 104000854⑆ 3285463⑈

HEARTLAND FAMILY SERVICE

142531

FILE COPY



BUY BACK INVOICE

648 N Plankinton Ave, Ste 425
Milwaukee WI 53203-2926
414.359.1448, FAX 414.359.9548

DATE April 3, 2017
CUSTOMER ID

Please remit the amount listed below to the address listed above
Please enclose a copy of this invoice with each check.

Acct Number	Client Name	Payoff Amt	Daily Accrual	Days Past Due
7410081952	Barrientos, Tina	\$ 3,885.60		144
7410082760	Cummings-Flowers, Memoire	\$ 4,776.58		181
Total Due				\$ 8,662.18

POSTED

apu

Prog. Serv. _____
 Ami. 8662.18
 Cler. Jern
 Appr. _____
 Acct. No. 4900-21 = 3885.60 Acct 7410081952 Barrientos
4900-21 = 4776.58 Acct 7410082760 Cummings-Flowers

Karla McKay

From: Lisa Picker
Sent: Monday, April 03, 2017 4:33 PM
To: AccountsPayable
Subject: Invoice
Attachments: Blank Buy Back Invoice - Barrientos, Cummings-Flowers.xlsx

Hello everyone

I hope everyone had a great weekend. Attached is an invoice for defaulted loans. If you would let me know when the check is ready I will swing by and pick it up.

Thanks
Lisa

Lisa K Picker

Heartland Family Service

712.435.5368

lpicker@heartlandfamilyservice.org

4/4/2017

10124860

19.80

0.00

19.80

HEARTLAND family Service

Good works.

Check: 142582

4/13/2017 CORELOGIC CREDCO, LLC

19.80

142582



2101 S. 42ND ST.
OMAHA, NE 68105
402-553-3000
A United Way Member Agency

AMERICAN NATIONAL BANK
OMAHA, NEBRASKA 68114

NUMBER

27-85/1040

*NINETEEN AND 80 / 100

DATE

AMOUNT

PAY TO THE ORDER OF

CORELOGIC CREDCO, LLC
PO BOX 847070
DALLAS, TX 75284-8470

4/13/2017

*****19.80*

CORELOG

A SECOND SIGNATURE REQUIRED FOR CHECKS OVER 1,000 DOLLARS



⑈ 14 258 2⑈ ⑆ 104000854⑆ 3 285463⑈

HEARTLAND FAMILY SERVICE

142582

FILE COPY

CoreLogic Credco LLC
 10277 Scripps Ranch Blvd.
 San Diego , California 92131
 www.CredcoServices.com



STATEMENT FOR :

JENNY SCHULTE
 HEARTLAND FAMILY SERVICES
 2101 S. 42ND STREET
 OMAHA, NE 68105



Prog. Serv. _____
 Amt. 19.80
 Cler. bm
 Appr. _____
 Acct. No. 2490-21

APR.

For questions regarding this statement, please e-mail us at credco.billing@corelogic.com, call (800) 294-5566 or fax to (800) 998-4747.

Account Number	Statement Number	Statement Date	Service Period
4255199	10124860	04/04/17	03/01/17 - 03/31/17

Balance Forward Previous Month	\$0.00
Adjustments	\$0.00
Payments	\$0.00
Current Charges	\$19.24
Third Party Fees	\$0.00
Surcharges	\$0.56
Sales Tax	\$0.00
Total Due by 04/25/17	\$19.80

AGED BALANCE SUMMARY

Current	30 Days	60 Days	90 Days	120+ Days	Total
\$19.80	\$0.00	\$0.00	\$0.00	\$0.00	\$19.80

Remittance Portion - To ensure proper credit, please enclose this portion with your remittance.

Credit Card Authorization Form

Account Number : 4255199

Statement Number : 10124860

HEARTLAND FAMILY SERVICES

I would like to pay on my Credco account by charging the following credit card:

VISA

MasterCard

American Express

Discover Card

Amount to Charge : _____

Card Number : _____

Card Verification
Number : _____

Expiration Date : _____

(Necessary to charge your account)

Name as it appears on card : _____

Signature : _____

(Necessary to charge your account)

Cardholder's Address : _____

City : _____ State : _____ Zip Code : _____

Phone Number : _____

I understand that this is not retained for future use.

Fax Credit Card payments directly to
the Accounts Receivable Department at 800-998-4747.

To ensure accuracy, please print neatly.

Address changes may be faxed directly to the Account Set Up Department at 800-494-2580.

Account Number : 4255199

HEARTLAND FAMILY SERVICES

New Address Change (check all that apply) : Billing address Branch / Location address Corporate address

New Street Address : _____

City : _____ State : _____ Zip Code : _____

Telephone Number : _____ Fax Number : _____

Attention : _____

Change Requested By : _____ Title : _____

Summary Of Usage

	0-Bureau	1-Bureau	2-Bureau	3-Bureau	Total
IND	0	0	2	0	2
IND ID SCORE ORIG	2	0	0	0	2
IND PS OFAC ORIG	2	0	0	0	2
SCOREDISCLOSURE	0	0	2	0	2
Totals :	4	0	4	0	8

Account Num : 4255199
Statement Num : 10124860

TRANSACTIONS

Name	Time Stamp	Reference Num	Product / Access Type	Type	Bureaus	Charge	Tax	Total *
BillFlag - Notes								
JORDAN, PRINCESS 2017-03-03T11:20:43.135-07:00	03/03/17	111955714140000	INSTANT MERGE/ORIGINAL	IND	EFX,XPN	\$9.90	\$0.00	\$9.90 /
HOSFORD, WENDY 2017-03-22T08:58:56.939-07:00	03/22/17	111979575300000	INSTANT MERGE/ORIGINAL	IND	EFX,XPN	\$9.90	\$0.00	\$9.90 /

GRAND TOTALS

Totals : **\$19.80** **\$0.00** **\$19.80**

* Surcharge included in price.

† Includes secondary use charges

Karla McKay

From: Lisa Picker
Sent: Monday, April 10, 2017 2:08 PM
To: Karla McKay
Subject: FW: CoreLogic Credco invoice Mar 2017
Attachments: HFS 4255199 Mar 17.pdf

Okay to pay 😊

Thanks Karla

Lisa

From: Karla McKay
Sent: Monday, April 10, 2017 2:03 PM
To: Lisa Picker
Subject: CoreLogic Credco invoice Mar 2017

Hi Lisa,

Please see the attached invoice for your approval.

Thanks,

Karla McKay
Accounts Payable Clerk
Heartland Family Service
402-552-7452
kmckay@heartlandfamilyservice.org

5/2/2017

10156352

49.50

0.00

49.50

HEARTLAND family Service

Good works.

Check: 143033

5/4/2017

CORELOGIC CREDCO, LLC

49.50

HEARTLAND family Service
Good works.
A United Way Member Agency

2101 S. 42ND ST.
OMAHA, NE 68105
402-553-3000

AMERICAN NATIONAL BANK
OMAHA, NEBRASKA 68114

143033

NUMBER

27-85/1040

*FORTY-NINE AND 50 / 100

DATE

AMOUNT

PAY TO THE ORDER OF

CORELOGIC CREDCO, LLC
PO BOX 847070
DALLAS, TX 75284-8470

5/4/2017

*****49.50*

CORELOG

A SECOND SIGNATURE REQUIRED FOR CHECKS OVER 1,000 DOLLARS

⑈ 143033⑈ ⑆ 104000854⑆ 3285463⑈

HEARTLAND FAMILY SERVICE

143033

FILE COPY

CoreLogic Credco LLC
 10277 Scripps Ranch Blvd.
 San Diego , California 92131
 www.CredcoServices.com



Prog. Serv. _____
 Amt. 49.50
 Cler. lam
 Appr. _____
 Acct. No. 2490-21

STATEMENT FOR :

JENNY SCHULTE
 HEARTLAND FAMILY SERVICES
 2101 S. 42ND STREET
 OMAHA, NE 68105

APR

POSTED

For questions regarding this statement, please e-mail us at credco.billing@corelogic.com, call (800) 294-5566 or fax to (800) 998-4747.

Account Number	Statement Number	Statement Date	Service Period
4255199	10156352	05/02/17	04/01/17 - 04/30/17

Balance Forward Previous Month	\$19.80
Adjustments	\$0.00
Payments	(\$19.80)
Current Charges	\$48.10
Third Party Fees	\$0.00
Surcharges	\$1.40
Sales Tax	\$0.00
Total Due by 05/25/17	\$49.50

AGED BALANCE SUMMARY

Current	30 Days	60 Days	90 Days	120+ Days	Total
\$49.50	\$0.00	\$0.00	\$0.00	\$0.00	\$49.50

Summary Of Usage

	0-Bureau	1-Bureau	2-Bureau	3-Bureau	Total
IND	0	0	5	0	5
IND ID SCORE ORIG	5	0	0	0	5
IND PS OFAC ORIG	5	0	0	0	5
SCOREDISCLOSURE	0	0	5	0	5
Totals :	10	0	10	0	20

ADJUSTMENTS

Time Stamp	Reference Num	Notes	Type	Check #	Adjustment	Tax	Total
04/20/17			Payment	142582	(\$19.80)	\$0.00	(\$19.80)
				Totals :	(\$19.80)	\$0.00	(\$19.80)

* Surcharge included in price

† Includes secondary use charges

Account Num : 4255199
Statement Num : 10156352

TRANSACTIONS

Name	Time Stamp	Reference Num	Product / Access Type	Type	Bureaus	Charge	Tax	Total *
BillFlag - Notes								
CLEMENT, KARA	04/03/17	111994312490000	INSTANT MERGE/ORIGINAL	IND	EFX,XPN	\$9.90	\$0.00	\$9.90 /
ROSALES, LATANARAE	04/17/17	112011012120000	INSTANT MERGE/ORIGINAL	IND	EFX,XPN	\$9.90	\$0.00	\$9.90 /
TODD, MARLA	04/26/17	112022672740000	INSTANT MERGE/ORIGINAL	IND	EFX,XPN	\$9.90	\$0.00	\$9.90 /
MORRIS, BRIANNA	04/26/17	112022891010000	INSTANT MERGE/ORIGINAL	IND	EFX,XPN	\$9.90	\$0.00	\$9.90 /
KRAMER, EMILY	04/28/17	112025426200000	INSTANT MERGE/ORIGINAL	IND	EFX,XPN	\$9.90	\$0.00	\$9.90 /

GRAND TOTALS

Totals : \$49.50 \$0.00 \$49.50

* Surcharge included in price.
† Includes secondary use charges.

Karla McKay

From: Lisa Picker
Sent: Wednesday, May 03, 2017 9:06 AM
To: Karla McKay
Subject: FW: CoreLogic Credco invoice
Attachments: HFS 4255199 Apr 17.pdf

Good morning Karla

Okay to pay the attached invoice.

Thanks
Lisa

From: Karla McKay
Sent: Wednesday, May 03, 2017 8:29 AM
To: Lisa Picker
Subject: CoreLogic Credco invoice

Hi LISA,

Here is the invoice for April for your approval please. Thanks.

Karla McKay
Accounts Payable Clerk
Heartland Family Service
402.552.7452
402.553.3133 fax
kmckay@heartlandfamilyservice.org

MAPA JARC GRANT BILLING DOCUMENT

PART IV - Project Budget Worksheet

Project Name: __HEARTLAND FAMILY SERVICE - WAYS TO WORK__

Contact Name: __Joanie Poore, VP_____

BUDGET DETAIL	TOTAL JARC BUDGET (ORIGINAL)	5/1/2017 - 5/31/2017		TOTAL COST MONTH	Program to Date	
		JARC	LOCAL MATCH		JARC	LOCAL MATCH
A. OPERATING EXPENSES¹						
1. Salaries and Benefits	30,720	\$ 1,483.78	\$ 967.66	\$ 2,451.44	\$ 8,041.84	\$ 4,103.39
2. Atty, Audit, Acct, POS	2,200	\$ -	\$ 37.05	\$ 37.05	\$ -	\$ 1,305.51
3. Office and Meeting Supplies	400	\$ 27.08	\$ 27.08	\$ 54.16	\$ 36.16	\$ 36.16
4. Phone & Internet	400	\$ 8.68	\$ 8.68	\$ 17.35	\$ 43.19	\$ 43.19
5. Postage & Shipping	220	\$ 3.50	\$ 3.50	\$ 7.00	\$ 15.56	\$ 15.56
6. Building and Occupancy	1,240	\$ 27.27	\$ 27.27	\$ 54.54	\$ 164.42	\$ 164.42
7. Equipment & Equip rep/rent	800	\$ 14.17	\$ 14.17	\$ 28.34	\$ 72.03	\$ 72.03
8. Advertising, Printing and Pubs	840	\$ 4.62	\$ 4.62	\$ 9.24	\$ 24.72	\$ 24.72
9. Mileage, travel, conf, auto ins.	320	\$ 8.63	\$ 8.63	\$ 17.26	\$ 273.16	\$ 273.16
10. Borrower Incentives	-			\$ -	\$ -	\$ -
11. Org Dues & Misc	128		\$ -	\$ -	\$ -	\$ -
12. Administrative Costs	6,732	\$ -	\$ 479.07	\$ 479.07	\$ -	\$ 2,632.94
Subtotal - Operating Expenses	\$ 44,000	\$ 1,577.73	\$ 1,577.73	\$ 3,155.45	\$ 8,671.07	\$ 8,671.07

Period	Date	Journal	Comments	Beginning Balance	Debit	Credit	Net Change	Ending Balance	Salaries & Benefits	Atty. Legal, Audit, Acct, POS, Interdept
				8,495.37	2,153.51	-	2,153.51	10,648.88	2,153.51	-
2210-21			GROUP HEALTH INSURANCE: WTW	49.23						
05	5/31/2017	PR-000368	HEALTH INS	49.23	12.62		12.62	61.85	12.62	-
					12.62	-		61.85	12.62	-
2220-21			RETIREMENT PLAN: WTW	263.53						
05	5/31/2017	PR-000368	RETIREMENT		65.88			329.41	65.88	-
				263.53	65.88	-	65.88	329.41	65.88	-
2290-21			OTHER BENEFITS/DIS.: WTW	33.49						
05	5/31/2017	PR-000368	LONG TERM DISABILITY		8.5			41.99	8.50	-
				33.49	8.50	-	8.50	41.99	8.50	-
2300-21			PAYROLL TAXES: WTW	852.17						
05	5/31/2017	AJ-084641	PR TAXES PROF LIAB		33.43			885.60	33.43	-
05	5/31/2017	AJ-084895	ALLOCATION OF TAXES - LAKIN		2.74			888.34	2.74	-
05	5/31/2017	PR-000368	PAYROLL TAXES		162.17			1,050.51	162.17	-
05	5/31/2017	PR-000368	STATE UNEMPLOYMENT		12.59			1,063.10	12.59	-
				852.17	210.93	-	210.93	1,063.10	210.93	-
2410-21			ATTORNEY FEES: WTW							
							0.00	0.00		
2410-21			ATTORNEY FEES: WTW	1,117.80				1,117.80		
				1,117.80	-	-	0.00	1,117.80		
2430-21			AUDITING/ACCOUNT FEES: WTW	21.36						
05	5/31/2017	AJ-084653	AUDITING/ACCT FEES ALLOC		5.34			26.70		5.34
				21.36	5.34	-	5.34	26.70		5.34
2490-21			OTHER PURCHASE OF SERVICE: WTW	115.78						
05	5/31/2017	AJ-084664	PURCHASE OF SERVICE ALLOC		8.53			124.31		8.53
05	5/31/2017	AP-004967	CORELOGIC CREDCO, LLC /IN: 10187546		19.80			144.11		19.80
				115.78	28.33	-	28.33	144.11		28.33
2491-21			Interdepartmental: WTW	13.52						
05	5/31/2017	RJ-003776	EXPENS/INTEROFFICE DELIVERY		3.38			16.90		3.38
				13.52	3.38	-	3.38	16.90		3.38
2510-21			OFFICE SUPPLIES: WTW	10.26						
05	5/31/2017	AJ-084679	LAKIN CAMPUS OFFICE SUPPLIES		2.48			12.74		
				10.26	2.48	-	2.48	12.74		
2520-21			BUILDING & GROUND SUPPLIES: WTW	14.73						
05	5/31/2017	AJ-084691	BUILDING SUPPLIES - LAKIN CAMPUS		5.38			20.11		
05	5/31/2017	AJ-084696	BUILDING & GROUND SUPPLIES		0.48			20.59		
				14.73	5.86	-	5.86	20.59		
2550-21			FOOD: WTW	7.89						
05		42886 AJ-084703	LAKIN - FOOD		3.08			10.97		
05	5/31/2017	MC-004001	AMERICAN NATIONAL BANK VISA 061119		48.60			59.57		
				7.89	51.68	-	51.68	59.57		
2600-21			TELEPHONE: WTW	69.03						
05	5/31/2017	AJ-084716	ALLOCATION TELEPHONE LAKIN		9.28			78.31		
05	5/31/2017	AJ-084721	TELEPHONE		8.07			86.38		

Period	Date	Journal	Comments	Beginning Balance	Debit	Credit	Net Change	Ending Balance	Salaries & Benefits	Atty. Legal, Audit, Acct, POS, Interdept
				69.03	17.35	-	17.35	86.38	-	-
2700-21			POSTAGE & SHIPPING: WTW	23.21						
05	5/31/2017	AJ-084728	POSTAGE - LAKIN CAMPUS			0.77		22.44		
05	5/31/2017	AJ-084733	POSTAGE ALLOCATION		2.10			24.54		
05	5/31/2017	JE-003931	POSTAGE - MAY		4.90			29.44		
				23.21	7.00	0.77	6.23	29.44	-	-
2830-21			UTILITIES: WTW	72.02						
05	5/31/2017	AJ-084746	UTILITIES ALLOCATION		12.61			84.63		
				72.02	12.61	-	12.61	84.63	-	-
2840-21			CARE OF BUILDINGS & GROUNDS: WTW	115.39						
05	5/31/2017	AJ-084756	ALLOCATION OF CARE OF BUILDING AND GROUNDS LAKIN		13.82			129.21		
05		42886 AJ-084761	ALLOCATION - CARE OF BUILDING AND GROUNDS		4.08			133.29		
				115.39	17.90	-	17.90	133.29	-	-
2841-21			Inter - Blds and Grn: WTW	-						
				-	-	-	0.00	0.00	-	-
2850-21			EQUIPMENT REPAIR & MAINTENANCE: WTW	33.00						
05	5/31/2017	AJ-084774	EQUIPMENT REPAIR LAKIN CAMPUS		3.74			36.74		
05	5/31/2017	AP-004969	BISHOP BUSINESS EQUIPMENT CO IN: MAY 2017		3.92			40.66		
				33.00	7.66	-	7.66	40.66	-	-
2880-21			PROPERTY INS/TAXES: WTW	72.16						
05	5/31/2017	AJ-084793	PROP INS/TAXES ALLOCATION		18.17			90.33		
				72.16	18.17	-	18.17	90.33	-	-
3100-21			PRINTING & PUB.: WTW	40.19						
05	5/31/2017	AJ-084805	PRINTING & PUBLICATION ALLOCATION		9.24			49.43		
				40.19	9.24	-	9.24	49.43	-	-
3210-21			MILEAGE/EXPENSE: WTW	406.33						
				406.33	-	-	0.00	406.33	-	-
3220-21			OUT OF TOWN TRAVEL: WTW	54.15						
				54.15	-	-	0.00	54.15	-	-
3250-21			AGENCY VEHICLE OPERATE.COSTS : WTW	-						
				-	-	-	0.00	0.00	-	-
3280-21			AUTOMOBILE INSURANCE: WTW	68.57						
05	5/31/2017	AJ-084815	AUTO INS ALLOCATION		17.26			85.83		
				68.57	17.26	-	17.26	85.83	-	-
3300-21			CONFERENCE/CONVENTION/TRIPS: WTW	-						
				-	-	-	0.00	0.00	-	-
3500-21			SPECIFIC ASSISTANCE INDIVIDUAL: WTW	-						
				-	-	-	0.00	0.00	-	-
4100-21			ORGANIZATION DUES: WTW	-						

Office & Mtg Supplies	Phone & Internet	Postage & shipping	Building & Occupancy (Utilities, care of bldg/grnds, bldg/grnd supp, prop ins)	Equip & Equip rent/repair	Advertising, Prntg, Pubs	Mileage, travel, conf, agency vehicle, auto ins	Borrower Incentives	Org Dues & Misc	Admin @ 17.9%	Loan Guarantee Funds (Misc)	Total
				20.68							20.68
				20.68							20.68
										0.59	0.59
										0.59	0.59
54.16	17.35	7.00	54.54	28.34	9.24	17.26	-	-	-	(2,425.75)	250.63
									479.07		479.07
54.16	17.35	7.00	54.54	28.34	9.24	17.26	-	-	479.07	(2,425.75)	729.70
54.16	17.35	7.00	54.54	28.34	9.24	17.26	-	-	479.07	(2,425.75)	729.70

Check

3,155.45 Ties to MAPA

NOTE: Reduce Loan Guarantees by Funds received after default



Progress Report

Title: Heartland Family Service- Ways to Work

Date: 05/01/2017 -05/31/2017

Title: MAPA bill \$ 2,545.39 out of \$22,000

1. Work Completed for Current Billing Period:

- a. The Ways to Work program currently has 3 people shopping for a vehicle.

2. Anticipated Work for Next Billing Period:

- a. Same as prior month

3. Information Needed from FTA/MAPA:

- a. No information is needed.

4. Percent of Work Completed to Date:

- a. 58% of grant utilized

5. Outstanding Issues:

Data

1. Number of repossessions in the month (bought back loans)

- a. 0

2. Number of new closed loans in the month

- a. 1

3. Number of loans outstanding

- a. 10

4. Other.....

- a.

5. Narrative

- a. Continuing to see consistency in program inquiries as well as improved financial situation for those individuals paying their loans in full. Client who had previously gone through the program was able to purchase and finance a home.

5/31/2017

MAY 2017

INV's 380147-380154

2,708.94

0.00

2,708.94



Check: 144037

6/29/2017

BISHOP BUSINESS EQUIPMENT CO

2,708.94

ORIGINAL DOCUMENT PRINTED ON CHEMICAL REACTIVE PAPER WITH MICROPRINTED BORDER

144037



2101 S. 42ND ST.
OMAHA, NE 68105
402-553-3000
A United Way Member Agency

AMERICAN NATIONAL BANK
OMAHA, NEBRASKA 68114

NUMBER

27-85/1040

*TWO THOUSAND SEVEN HUNDRED EIGHT AND 94 / 100

DATE

AMOUNT

6/29/2017

*****2,708.94*

PAY
TO THE
ORDER
OF

BISHOP BUSINESS EQUIPMENT CO
4125 S 94TH ST
OMAHA, NE 68127

BISHOPS

A SECOND SIGNATURE REQUIRED FOR CHECKS OVER 1,000 DOLLARS

⑈ 144037⑈ ⑆ 104000854⑆ 3285463⑈

HEARTLAND FAMILY SERVICE

144037

FILE COPY

BISHOP BUSINESS EQUIPMENT

5/31/2017

**Invoice #'s 380147, 380148, 380149, 380150, 380151,
380152, 380153 & 380154**

May
2740.49
2708.94
\$
AP
Acc.

Account Name	2850-	Grand Total
Administration	03	\$739.70
Development	04	\$0.21
NE Behavioral Health	05	\$144.33
Generations Center	06	\$23.72
NE Family Works Residential	07	\$197.82
NH Emerg Svcs NOT IN USE (Move to 11)	08	\$0.00
Better Together	09	\$22.26
Gamblers Assistance Iowa	10	\$12.71
Hardship Assistance	11	\$41.61
Child & Adult Care Food Program	12	\$14.28
Solomon Girls Center	13	\$44.02
NE HPRP/OPPORTUNITIES	14	\$107.77
Community Education	15	\$39.50
Iowa Counseling	16	\$215.13
Samaritan Housing	17	\$33.56
Domestic Abuse Program NE	18	\$43.48
Prevention DFC	19	\$4.04
Youth Links	20	\$122.78
Ways to Work	21	\$3.92
Nebraska Gamblers	22	\$5.11
Integrated Health Home	23	\$39.63
Sarpy Juvenile Justice	24	\$0.47
In Home Parenting Time	25	\$8.76
Iowa Assertive Community Trmt	26	\$42.42
Bridges	27	\$0.00
Iowa Mental Health Crt	28	\$18.94
Family Works Iowa	29	\$41.56
Therapeutic School	30	\$303.18
Nebraska Tracker-Inactive	31	\$0.00
Assessment Center	32	\$0.00
Passages	33	\$47.98
PCHL Rapid Re-housing	34	\$31.03
Fremont Childrens Shelter	35	\$43.90
Heartland Housing Solutions	36	\$16.39
Heartland Homes	37	\$1.66
ASAP	38	\$16.03
Ready in 5	39	\$15.52
Heartland Housing Beginnings	40	\$25.19
DCYC	41	\$1.53
Transitions	42	\$0.82
Family Crisis Mediation	43	\$8.22

Baby Talk	44	\$44.10
Refugee Juvenile Justice Adv	45	\$3.19
Prevention - Block	46	\$21.46
Metro Home Base/do not use	47	\$0.00
DRUG TESTING/do not use	48	\$0.00
In Home Support-Fremont	49	\$0.00
Prevention - TFN/MOTAC	50	\$17.88
Prevention - SPF/LiveWise	51	\$15.58
In Home Family Support	52	\$8.21
PCHL Prevention	53	\$20.03
IBH - School Based Services	54	\$13.47
Child & Family Center	55	\$50.94
NE Family Works Apts NOT IN USE (Move to 07)	56	\$0.00
The Coeur Group	57	\$1.27
VOCA	58	\$0.00
VAWA	59	\$0.00
SPSS	60	\$0.00
Dr Paul	97	\$7.29
Dr Coy	98	\$5.47
Integrated Therapy	99	\$20.87
Xerox Administrative Group		\$0.00

\$2,710.47

2708.94



4125 S 94th St - Omaha 68127
 5253 R St - Lincoln 68504
 1.800.933.9583 / 402.537.4379 fx
 www.bbec.com

CONTRACT INVOICE

Invoice Number: 380147
 Invoice Date: 05/31/2017

REMIT TO:
 Bishop Business
 4125 S 94th Street
 Omaha, NE 68127

Bill To: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Customer: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Account No	Payment Terms	Due Date	Invoice Total	Balance Due	
103343	Due Upon Receipt	06/15/2017	\$ 159.83	\$ 159.83	
Contract Number	Contact	Contract Amount	P.O. Number	Start Date	Exp. Date
SC4031-01		\$ 149.37	DIANE BENTON	09/28/2013	
Remarks					
THIS IS FOR YOUR BLACK, WHITE & COLOR COPIES AT COST PER COPY - put on worksheet for customer					

Summary:

Contract base rate charge for this billing period \$0.00
 Contract overage charge for the 04/28/2017 to 05/27/2017 overage period \$149.37 **
 **See overage details below \$149.37

Detail:

Equipment included under this contract

Toshiba/TF654CT

Number	Serial Number	Base Adj.	Location						
BK385	CCD-110160	\$0.00	Heartland Family Service 2101 S 42nd Street Omaha, NE 68105-2909						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B/W	B/W	280,639	287,523	173	6,711	0	6,711	\$0.006000	\$40.27
Color	COLOR	779,971	782,160	7	2,182	0	2,182	\$0.050000	\$109.10
									\$149.37

159.83 +
 16.77 +
 468.34 +
 900.04 +
 41.08 +
 145.16 +
 185.95 +
 793.30 +

008

2,710.476 +

THANK YOU FOR YOUR BUSINESS!

2708.94

Invoice SubTotal	\$149.37
Tax	\$10.46
Invoice Total	\$159.83
Balance Due:	\$159.83



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 www.bbec.com

CONTRACT INVOICE

Invoice Number: 380148
 Invoice Date: 05/31/2017

REMIT TO:
 Bishop Business
 4125 S 94th Street
 Omaha, NE 68127

Bill To: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Customer: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Account No	Payment Terms	Due Date	Invoice Total	Balance Due	
103343	Due Upon Receipt	06/15/2017	\$ 16.77	\$ 16.77	
Contract Number	Contact	Contract Amount	P.O. Number	Start Date	Exp. Date
SC4973-01		\$ 15.67	BP213	09/28/2015	
Remarks					
THIS CHARGE IS FOR COPIES AT COST PER COPY - put on worksheet for Heartland Family					

Summary:

Contract base rate charge for this billing period	\$0.00
Contract overage charge for the 04/28/2017 to 05/27/2017 overage period	\$15.67 **
**See overage details below	\$15.67

Detail:

Equipment included under this contract

Toshiba/T355E

Number	Serial Number	Base Adj.	Location						
BP213	CPG-912476	\$0.00	Heartland Family Service 2101 S 42nd Street Omaha, NE 68105-2909						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B\W	B/W	109,173	111,874		2,701	0	2,701	\$0.005800	\$15.67 \$15.67

THANK YOU FOR YOUR BUSINESS!

Invoice SubTotal	\$15.67
Tax	\$1.10
Invoice Total	\$16.77
Balance Due:	\$16.77



4125 S 94th St - Omaha 68127
 5253 R St - Lincoln 68504
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 www.bbec.com

CONTRACT INVOICE

Invoice Number: 380149
 Invoice Date: 05/31/2017

REMIT TO:
 Bishop Business
 4125 S 94th Street
 Omaha, NE 68127

Bill To: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Customer: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Account No	Payment Terms	Due Date	Invoice Total	Balance Due	
103343	Due Upon Receipt	06/15/2017	\$ 468.34	\$ 468.34	
Contract Number	Contact	Contract Amount	P.O. Number	Start Date	Exp. Date
XEROX-E2B659739-01		\$ 437.70	.	10/24/2016	
Remarks					
THIS CHARGE IS FOR BLACK & WHITE AND COLOR COPIES AT COST PER COPY - MONTHLY					

Summary:

Contract base rate charge for this billing period \$0.00
 Contract overage charge for the 04/24/2017 to 05/23/2017 overage period \$437.70 **
 **See overage details below \$437.70

Detail:

Equipment included under this contract

Xerox/XC70

Number	Serial Number	Base Adj.	Location						
BR901	E2B-659739	\$0.00	Heartland Family Service 2101 S 42nd Street Omaha, NE 68105-2909						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B/W	B/W	20,313	22,412		2,099	0	2,099	\$0.008000	\$16.79
Color	COLOR	63,395	72,164		8,769	0	8,769	\$0.048000	\$420.91
									\$437.70

THANK YOU FOR YOUR BUSINESS!

Invoice SubTotal	\$437.70
Tax:	\$30.64
Invoice Total	\$468.34
Balance Due:	\$468.34



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 5253 R St - Lincoln 68504
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 www.bb.ec.com

CONTRACT INVOICE

Invoice Number: 380150
 Invoice Date: 05/31/2017

REMIT TO:
 Bishop Business
 4125 S 94th Street
 Omaha, NE 68127

Bill To: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Customer: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Account No	Payment Terms	Due Date	Invoice Total	Balance Due	
103343	Due Upon Receipt	06/15/2017	\$ 900.04	\$ 900.04	
Contract Number	Contact	Contract Amount	P.O. Number	Start Date	Exp. Date
XEROX-MX4327650-01		\$ 845.61	DIANE BENTON	09/28/2013	
Remarks					
THIS CHARGE IS FOR ALL COPIES AT COST PER COPY - PUT ON WORKSHEET FOR CUSTOMER					

Summary:

Contract base rate charge for this billing period \$0.00 *
 Contract overage charge for the 04/28/2017 to 05/27/2017 overage period \$845.61 **
 *Sum of equipment base charges **See overage details below \$845.61

Detail:

Equipment included under this contract

Xerox/X5845/APT2

Number	Serial Number	Base Charge	Location						
BL712	EX7-387139	\$0.00	Heartland Family Service 2101 S 42nd Street Omaha, NE 68105-2909						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B\W	B/W	70,522	84,221		13,699	*** See overage details below			\$0.00

Xerox/X5845/APTXF2

Number	Serial Number	Base Charge	Location						
BL850(2)	EX7-396327	\$0.00	Heartland Family Service 600 9th Avenue Council Bluffs, IA 51501						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B\W	B/W	90,048	92,430		2,382	*** See overage details below			\$0.00

Number	Serial Number	Base Charge	Location						
BL853	EX7-396220	\$0.00	Heartland Family Service-Better Together 2517 Caldwell Street Omaha, NE 68131-4602						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B\W	B/W	160,896	164,682		3,786	*** See overage details below			\$0.00

Number	Serial Number	Base Charge	Location						
BL856	EX7-392695	\$0.00	Heartland Family Service 6720 N 30th Street Omaha, NE 68112-3211						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B\W	B/W	378,512	383,456		4,944	*** See overage details below			\$0.00



4125 S 94th St - Omaha 68127
 5253 R St - Lincoln 68504
 1.800.933.9583 / 402.537.4379 fx
 www.bb.ec.com

CONTRACT INVOICE

Invoice Number: 380150
 Invoice Date: 05/31/2017

REMIT TO:
 Bishop Business
 4125 S 94th Street
 Omaha, NE 68127

Bill To: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Customer: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Account No	Payment Terms	Due Date	Invoice Total	Balance Due
103343	Due Upon Receipt	06/15/2017	\$ 900.04	\$ 900.04

Number	Serial Number	Base Charge	Location						
BL860	EX7-392587	\$0.00	Heartland Family Service Bellevue, NE 68005						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B\W	B\W	121,289	123,984		2,695	*** See overage details below			\$0.00

Number	Serial Number	Base Charge	Location						
BL861	EX7-392502	\$0.00	Heartland Family Services - Family Works- Day Care 4847 Sahler Street Omaha, NE 68104						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B\W	B\W	387,566	396,473		8,907	*** See overage details below			\$0.00

Number	Serial Number	Base Charge	Location						
BL865	EX7-392702	\$0.00	Heartland Family Service - Youth Links-NOIC 4318 Fort Street - 1ST FLOOR Omaha, NE 68111-1849						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B\W	B\W	70,994	71,793		799	*** See overage details below			\$0.00

Xerox/X5855/APTXF2

Number	Serial Number	Base Charge	Location						
BL863	EX7-392658	\$0.00	Heartland Family Service 2101 S 42nd Street Omaha, NE 68105-2909						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B\W	B\W	657,676	674,601		16,925	*** See overage details below			\$0.00

Xerox/X7845/PTXF2

Number	Serial Number	Base Charge	Location						
BL855	MX4-327604	\$0.00	Heartland Family Service Homeless Call Center 1941 S 42nd Street - Suite 375 Omaha, NE 68105						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B\W	B\W	844,845	858,287		13,442	*** See overage details below			
Color	COLOR	27,800	31,201		3,401	*** See overage details below			\$0.00

Xerox/X7855/PTXF2



4125 S 94th St - Omaha 68127
 5253 R St - Lincoln 68504
 1.800.933.9583 / 402.537.4379 tx
 www.bb.ec.com

CONTRACT INVOICE

Invoice Number: 380150
 Invoice Date: 05/31/2017

REMIT TO:
 Bishop Business
 4125 S 94th Street
 Omaha, NE 68127

Bill To: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Customer: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Account No	Payment Terms	Due Date	Invoice Total	Balance Due
103343	Due Upon Receipt	06/15/2017	\$ 900.04	\$ 900.04

Number	Serial Number	Base Charge	Location						
BL854	MX4-327458	\$0.00	Heartland Family Service 6720 N 30th Street Omaha, NE 68112-3211						
<u>Meter Type</u>	<u>Meter Group</u>	<u>Begin Meter</u>	<u>End Meter</u>	<u>Credits</u>	<u>Total</u>	<u>Covered</u>	<u>Billable</u>	<u>Rate</u>	<u>Overage</u>
B\W	B/W	297,497	303,162		5,665	***	See overage details below		
Color	COLOR	283,160	283,340		180	***	See overage details below		
									\$0.00

Number	Serial Number	Base Charge	Location						
BL858	MX4-327605	\$0.00	Heartland Family Service 302 American Parkway Papillion, NE 68046-6270						
<u>Meter Type</u>	<u>Meter Group</u>	<u>Begin Meter</u>	<u>End Meter</u>	<u>Credits</u>	<u>Total</u>	<u>Covered</u>	<u>Billable</u>	<u>Rate</u>	<u>Overage</u>
B\W	B/W	426,115	434,457		8,342	***	See overage details below		
Color	COLOR	72,050	74,255		2,205	***	See overage details below		
									\$0.00

Number	Serial Number	Base Charge	Location						
BL866	MX4-327650	\$0.00	Heartland Family Service 2101 S 42nd Street Omaha, NE 68105-2909						
<u>Meter Type</u>	<u>Meter Group</u>	<u>Begin Meter</u>	<u>End Meter</u>	<u>Credits</u>	<u>Total</u>	<u>Covered</u>	<u>Billable</u>	<u>Rate</u>	<u>Overage</u>
B\W	B/W	234,090	238,573		4,483	***	See overage details below		
Color	COLOR	95,934	98,204		2,270	***	See overage details below		
									\$0.00



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 5253 R St - Lincoln 68504
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CONTRACT INVOICE

Invoice Number: 380150
 Invoice Date: 05/31/2017

REMIT TO:
 Bishop Business
 4125 S 94th Street
 Omaha, NE 68127

Bill To: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Customer: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Account No	Payment Terms	Due Date	Invoice Total	Balance Due
103343	Due Upon Receipt	06/15/2017	\$ 900.04	\$ 900.04

Overage Details

Meter Group	Total Copies	Covered Copies	Billable	Rate	Total
B/W	86,069	0	0	86,069 \$0.005800	\$499.20
				Base Amount:	\$0.00
					<u>\$499.20</u>
Meter Type	Equip. Number	Serial Number	Begin	End	Copies
B/W	BL712	EX7-387139	70,522	84,221	13,699
B/W	BL850(2.000000)	EX7-396327	90,048	92,430	2,382
B/W	BL853	EX7-396220	160,896	164,682	3,786
B/W	BL854	MX4-327458	297,497	303,162	5,665
B/W	BL855	MX4-327604	844,845	858,287	13,442
B/W	BL856	EX7-392695	378,512	383,456	4,944
B/W	BL858	MX4-327605	426,115	434,457	8,342
B/W	BL860	EX7-392587	121,289	123,984	2,695
B/W	BL861	EX7-392502	387,566	396,473	8,907
B/W	BL863	EX7-392658	657,676	674,601	16,925
B/W	BL865	EX7-392702	70,994	71,793	799
B/W	BL866	MX4-327650	234,090	238,573	4,483
Meter Group	Total Copies	Covered Copies	Billable	Rate	Total
COLOR	8,056	0	0	8,056 \$0.043000	\$346.41
				Base Amount:	\$0.00
					<u>\$346.41</u>
Meter Type	Equip. Number	Serial Number	Begin	End	Copies
Color	BL854	MX4-327458	283,160	283,340	180
Color	BL855	MX4-327604	27,800	31,201	3,401
Color	BL858	MX4-327605	72,050	74,255	2,205
Color	BL866	MX4-327650	95,934	98,204	2,270
Total Grouped Overage Charges:					\$845.61
Total Grouped Base Charges:					\$0.00
Total Meter Group Charges:					\$845.61

THANK YOU FOR YOUR BUSINESS!

Invoice SubTotal	\$845.61
Tax:	\$54.43
Invoice Total	\$900.04
Balance Due:	\$900.04



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CONTRACT INVOICE

Invoice Number: 380151
 Invoice Date: 05/31/2017

REMIT TO:
 Bishop Business
 4125 S 94th Street
 Omaha, NE 68127

Bill To: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Customer: Heartland Family Services Couer Group
 900 So 74th Plaza Suite 400
 Omaha, NE 68114-4667

Account No	Payment Terms	Due Date	Invoice Total	Balance Due	
103343	Due Upon Receipt	06/15/2017	\$ 41.08	\$ 41.08	
Contract Number	Contact	Contract Amount	P.O. Number	Start Date	Exp. Date
SC5389-01	HFS Couer Group	\$ 38.39	HFS Couer Group	08/28/2016	
Remarks					
THIS CHARGE IS FOR BLACK, WHITE & COLOR COPIES ON BP504 - HFS Couer Group -AT COST PER COPY MONTHLY - PUT ON WORKSHEET WITH THE UNITS					

Summary:

Contract base rate charge for this billing period	\$0.00
Contract overage charge for the 04/28/2017 to 05/27/2017 overage period	\$38.39 **
**See overage details below	\$38.39

Detail:

Equipment included under this contract

Toshiba/TF354C

Number	Serial Number	Base Adj.	Location
BP504	CQF-112689	\$0.00	Heartland Family Services Couer Group 900 So 74th Plaza Suite 400 Omaha, NE 68114-4667

Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B/W	B/W	251,437	254,244		2,807	0	2,807	\$0.006000	\$16.84
Color	COLOR	273,871	274,302		431	0	431	\$0.050000	\$21.55
									\$38.39

THANK YOU FOR YOUR BUSINESS!

Invoice SubTotal	\$38.39
Tax	\$2.69
Invoice Total	\$41.08
Balance Due:	\$41.08



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CONTRACT INVOICE

Invoice Number: 380152
 Invoice Date: 05/31/2017

REMIT TO:
 Bishop Business
 4125 S 94th Street
 Omaha, NE 68127

Bill To: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Customer: Heartland Family Services - Family Works- Day Care
 4847 Sahler Street
 Omaha, NE 68104

Account No	Payment Terms	Due Date	Invoice Total	Balance Due	
103343	Due Upon Receipt	06/15/2017	\$ 145.16	\$ 145.16	
Contract Number	Contact	Contract Amount	P.O. Number	Start Date	Exp. Date
SC5390-01	HFS DAY CARE	\$ 145.16	HFS DAY CARE	08/28/2016	
Remarks					
THIS CHARGE IS FOR YOUR BLACK, WHITE & COLOR COPIES ON BP503 - HFS DAY CARE- AT COST PER COPY MONTHLY - PUT ON WORKSHEET WITH ALL THE OTHER UNITS					

Summary:

Contract base rate charge for this billing period	\$0.00
Contract overage charge for the 04/28/2017 to 05/27/2017 overage period	\$145.16 **
**See overage details below	<u>\$145.16</u>

Detail:

Equipment included under this contract

Toshiba/TF454C

Number	Serial Number	Base Adj.	Location
BP503	CMG-221125	\$0.00	Heartland Family Services - Family Works- Day Care 4847 Sahler Street Omaha, NE 68104

Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B\W	B/W	149,490	154,309		4,819	0	4,819	\$0.006000	\$28.91
Color	COLOR	31,418	33,743		2,325	0	2,325	\$0.050000	\$116.25
									\$145.16

THANK YOU FOR YOUR BUSINESS!

Invoice SubTotal	\$145.16
Tax:	\$0.00
Invoice Total	\$145.16
Balance Due:	\$145.16



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CONTRACT INVOICE

Invoice Number: 380153
 Invoice Date: 05/31/2017

REMIT TO:
 Bishop Business
 4125 S 94th Street
 Omaha, NE 68127

Bill To: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Customer: Heartland Family Service-Jefferson House
 437 Jefferson Road
 Fremont, NE 68025

Account No	Payment Terms	Due Date	Invoice Total	Balance Due	
103343	Due Upon Receipt	06/15/2017	\$ 185.95	\$ 185.95	
Contract Number	Contact	Contract Amount	P.O. Number	Start Date	Exp. Date
SC3972-01		\$ 185.95	Diane Benton	09/28/2013	
Remarks					
THIS IS COST PER COPY FOR THIS UNIT - put on worksheet for Heartland Family					

Summary:

Contract base rate charge for this billing period	\$0.00
Contract overage charge for the 04/28/2017 to 05/27/2017 overage period	\$185.95 **
**See overage details below	\$185.95

Detail:

Equipment included under this contract

Xerox/X5845/APTXF2

Number	Serial Number	Base Adj.	Location						
BL884	EX7-394831	\$0.00	Heartland Family Service-Jefferson House 437 Jefferson Road Fremont, NE 68025						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B\W	B/W	260,279	267,842		7,563		*** See overage details below		\$0.00

Xerox/X7855/PTXF2

Number	Serial Number	Base Adj.	Location						
BL859	MX4-327661	\$0.00	Heartland Family Service - Youth Links-NOIC 4318 Fort St 2ND FLOOR YOUTH LINKS Omaha, NE 68111-1849						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B\W	B/W	510,265	518,829		8,564		*** See overage details below		
Color	COLOR	38,176	40,325		2,149	0	2,149	\$0.043000	\$92.41
									\$92.41

Overage Details

Meter Group	Total Copies	Covered Copies	Billable	Rate	Total
B/W	16,127	0	0	16,127	\$0.005800
					Base Amount:
					\$0.00
					\$93.54
Meter Type	Equip. Number	Serial Number	Begin	End	Copies
B\W	BL859	MX4-327661	510,265	518,829	8,564
B\W	BL884	EX7-394831	260,279	267,842	7,563
Total Grouped Overage Charges:					\$93.54
Total Grouped Base Charges:					\$0.00
Total Meter Group Charges:					\$93.54



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5253 R St - Lincoln 68504
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www.bbec.com

REMIT TO:
Bishop Business
4125 S 94th Street
Omaha, NE 68127

CONTRACT INVOICE

Invoice Number: 380153

Invoice Date: 05/31/2017

Bill To: Heartland Family Service
2101 S 42nd Street
Omaha, NE 68105-2909

Customer: Heartland Family Service-Jefferson House
437 Jefferson Road
Fremont, NE 68025

THANK YOU FOR YOUR BUSINESS!

Invoice SubTotal	\$185.95
Tax:	\$0.00
Invoice Total	\$185.95
Balance Due:	\$185.95



4125 S 94th St - Omaha 68127
 5253 R St - Lincoln 68504
 1.800.933.9583 / 402.537.4379 tx
 www.bbec.com

CONTRACT INVOICE

Invoice Number: 380154
 Invoice Date: 05/31/2017

REMIT TO:
 Bishop Business
 4125 S 94th Street
 Omaha, NE 68127

Bill To: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Customer: Heartland Family Service
 515 E Broadway
 Council Bluffs, IA 51503

Account No	Payment Terms	Due Date	Invoice Total	Balance Due	
103343	Due Upon Receipt	06/15/2017	\$ 793.30	\$ 793.30	
Contract Number	Contact	Contract Amount	P.O. Number	Start Date	Exp. Date
SC3973-01		\$ 741.40		09/28/2013	
Remarks					
THIS IS COST PER COPY ON ALL UNITS - put on worksheet for Heartland Family					

Summary:

Contract base rate charge for this billing period \$0.00 *
 Contract overage charge for the 04/28/2017 to 05/27/2017 overage period \$741.40 **
 *Sum of equipment base charges **See overage details below \$741.40

Detail:

Equipment included under this contract

Xerox/X5845/APTXF2

Number	Serial Number	Base Charge	Location						
BL882	EX7-395103	\$0.00	Heartland Family Service 1515 Avenue J Council Bluffs, IA 51503						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B\W	B/W	258,706	263,984		5,278	*** See overage details below			\$0.00

Number	Serial Number	Base Charge	Location						
BL883	EX7-394726	\$0.00	Heartland Family Service 1722 Avenue C Council Bluffs, IA 51501						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B\W	B/W	352,248	358,945		6,697	*** See overage details below			\$0.00

Xerox/X5855/APTXF2

Number	Serial Number	Base Charge	Location						
BL875	EX7-392588	\$0.00	Heartland Family Service 2912 9th Avenue Council Bluffs, IA 51501						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B\W	B/W	554,976	568,380		13,404	*** See overage details below			\$0.00

Number	Serial Number	Base Charge	Location						
BL876	EX7-398699	\$0.00	Heartland Family Service 515 E Broadway Council Bluffs, IA 51503						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B\W	B/W	667,439	683,120		15,681	*** See overage details below			\$0.00

Xerox/X7845/PTXF2



4125 S 94th St - Omaha 68127
 5253 R St - Lincoln 68504
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 www.bb.ec.com

CONTRACT INVOICE

Invoice Number: 380154
 Invoice Date: 05/31/2017

REMIT TO:
 Bishop Business
 4125 S 94th Street
 Omaha, NE 68127

Bill To: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Customer: Heartland Family Service
 515 E Broadway
 Council Bluffs, IA 51503

Account No	Payment Terms	Due Date	Invoice Total	Balance Due
103343	Due Upon Receipt	06/15/2017	\$ 793.30	\$ 793.30

Number	Serial Number	Base Charge			Location				
BL874	MX4-327593	\$0.00			Heartland Family Service 1515 Avenue J Council Bluffs, IA 51503				
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B\W	B/W	289,154	296,384		7,230	***	See overage details below		
Color	COLOR	48,598	49,648		1,050	***	See overage details below		
									\$0.00

Number	Serial Number	Base Charge			Location				
BL877	MX4-327602	\$0.00			Heartland Family Service 515 E Broadway Council Bluffs, IA 51503				
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B\W	B/W	645,650	665,002		19,352	***	See overage details below		
Color	COLOR	52,568	53,393		825	***	See overage details below		
									\$0.00

Number	Serial Number	Base Charge			Location				
BN523	MX4-740794	\$0.00			Heartland Family Service 705 N 16th Street Council Bluffs, IA 51501				
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B\W	B/W	122,302	127,011		4,709	***	See overage details below		
Color	COLOR	28,587	29,411		824	***	See overage details below		
									\$0.00

Xerox/X7855/PTXF2

Number	Serial Number	Base Charge			Location				
BL873	MX4-327598	\$0.00			Heartland Family Service 2912 9th Avenue Council Bluffs, IA 51501				
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B\W	B/W	434,112	441,222		7,110	***	See overage details below		
Color	COLOR	222,546	226,371		3,825	***	See overage details below		
									\$0.00



4125 S 94th St - Omaha 68127
 5253 R St - Lincoln 68504
 1.800.933.9583 / 402.537.4379 fx
 www.bbca.com

CONTRACT INVOICE

Invoice Number: 380154
 Invoice Date: 05/31/2017

REMIT TO:
 Bishop Business
 4125 S 94th Street
 Omaha, NE 68127

Bill To: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Customer: Heartland Family Service
 515 E Broadway
 Council Bluffs, IA 51503

Account No	Payment Terms	Due Date	Invoice Total	Balance Due
103343	Due Upon Receipt	06/15/2017	\$ 793.30	\$ 793.30

Overage Details

Meter Group	Total Copies	Covered Copies	Billable	Rate	Total
B/W	79,461	0	0	79,461 \$0.005800	\$460.87
				Base Amount:	\$0.00
					\$460.87
Meter Type	Equip. Number	Serial Number	Begin	End	Copies
B/W	BL873	MX4-327598	434,112	441,222	7,110
B/W	BL874	MX4-327593	289,154	296,384	7,230
B/W	BL875	EX7-392588	554,976	568,380	13,404
B/W	BL876	EX7-398699	667,439	683,120	15,681
B/W	BL877	MX4-327602	645,650	665,002	19,352
B/W	BL882	EX7-395103	258,706	263,984	5,278
B/W	BL883	EX7-394726	352,248	358,945	6,697
B/W	BN523	MX4-740794	122,302	127,011	4,709
Meter Group	Total Copies	Covered Copies	Billable	Rate	Total
COLOR	6,524	0	0	6,524 \$0.043000	\$280.53
				Base Amount:	\$0.00
					\$280.53
Meter Type	Equip. Number	Serial Number	Begin	End	Copies
Color	BL873	MX4-327598	222,546	226,371	3,825
Color	BL874	MX4-327593	48,598	49,648	1,050
Color	BL877	MX4-327602	52,568	53,393	825
Color	BN523	MX4-740794	28,587	29,411	824
Total Grouped Overage Charges:					\$741.40
Total Grouped Base Charges:					\$0.00
Total Meter Group Charges:					\$741.40

THANK YOU FOR YOUR BUSINESS!

Invoice SubTotal	\$741.40
Tax:	\$51.90
Invoice Total	\$793.30
Balance Due:	\$793.30

1262 PICKER, LISA - Send to Mary if Couer, Joanie if wtw				
Integrated Therapy Planning Session	2550-57	04/05/17	WAL-MART	49.47
Loan committee	2550-21	04/28/17	PANERA BREAD 601506	48.60
				98.07

Way to
Work

Loan
Committee

Panera Bread
Cafe 1506
Council Bluffs, IA 51501
Phone: 712-366-8944

Accuracy Matters,

Your order should be correct every time.
If it's not, we'll fix it right away, and
give you a free treat for your trouble.
Just let any associate know.

4/28/2017 7:49:37 AM
Check Number: 466525 Cashier: Lisa

- 1 Bagel Pack 13.99
 - 4 Cinnamon Crunch Bgl
 - 2 Cln Swirl Raisin Bgl
 - 2 Plain Bagel
 - 2 Whole Grain Bagel
 - 1 French Toast Bagel
 - 1 Chocolate Chip Bagel
 - 1 Asiago Bagel
 - 1 Plain Cream Chs Tub
 - 1 Veg M-dley CC Tub
- 4 Cinnamon Roll 11.96
- 1 Four Cheese Souffle 4.59
- 1 Ham & Swiss Souffle 4.59
- 1 Spinach Art Souffle 4.59
- 1 Spinach Bacon Souffle 4.59
- SubTotal 44.31
- Tax 1.29
- Gratuity 3.00
- Total 48.60
- Visa 48.60
- Acct:XXXXXXXX1262
- AuthCode:708294
- Trans#:1229
- Visa 48.60

Sign up for emails to get bonus rewards.
Log in at PaneraBread.com.
You received a reward
Received 1 Free Coffee or Hot Tea or Soda

MyPanera Member: xxxxxxxxxxxx57581
MyPanera Offers Earned:
Free Coffee or Hot Tea or Soda: 1 (Exp
Date: 06/27/17)
Visits to Next Reward: 4

MAPA JARC GRANT BILLING DOCUMENT

PART IV - Project Budget Worksheet

Project Name: __HEARTLAND FAMILY SERVICE - WAYS TO WORK__

Contact Name: __Joanie Poore, VP_____

BUDGET DETAIL	TOTAL JARC BUDGET (ORIGINAL)	6/1/2017 - 6/30/2017		TOTAL COST MONTH	Program to Date	
		JARC	LOCAL MATCH		JARC	LOCAL MATCH
A. OPERATING EXPENSES¹						
1. Salaries and Benefits	30,720	\$ 1,589.25	\$ 865.97	\$ 2,455.21	\$ 9,631.09	\$ 4,969.36
2. Atty, Audit, Acct, POS	2,200	\$ -	\$ 219.47	\$ 219.47	\$ -	\$ 1,524.98
3. Office and Meeting Supplies	400	\$ 0.88	\$ 0.88	\$ 1.75	\$ 37.03	\$ 37.03
4. Phone & Internet	400	\$ 8.87	\$ 8.87	\$ 17.74	\$ 52.06	\$ 52.06
5. Postage & Shipping	220	\$ 1.05	\$ 1.05	\$ 2.10	\$ 16.61	\$ 16.61
6. Building and Occupancy	1,240	\$ 32.71	\$ 32.71	\$ 65.41	\$ 197.13	\$ 197.13
7. Equipment & Equip rep/rent	800	\$ 13.39	\$ 13.39	\$ 26.78	\$ 85.42	\$ 85.42
8. Advertising, Printing and Pubs	840	\$ 4.44	\$ 4.44	\$ 8.88	\$ 29.16	\$ 29.16
9. Mileage, travel, conf, auto ins.	320	\$ 8.63	\$ 8.63	\$ 17.26	\$ 281.79	\$ 281.79
10. Borrower Incentives	-			\$ -	\$ -	\$ -
11. Org Dues & Misc	128		\$ -	\$ -	\$ -	\$ -
12. Administrative Costs	6,732	\$ -	\$ 503.81	\$ 503.81	\$ -	\$ 3,136.75
Subtotal - Operating Expenses	\$ 44,000	\$ 1,659.21	\$ 1,659.21	\$ 3,318.41	\$ 10,330.27	\$ 10,330.27

Period	Date	Journal	Comments	Beginning Balance	Debit	Credit	Net Change	Ending Balance	Salaries & Benefits	Atty. Legal, Audit, Acct, POS, Interdept
				10,648.88	2,152.18	-	2,152.18	12,801.06	2,152.18	-
2210-21			GROUP HEALTH INSURANCE: WTW	61.85						
06	6/30/2017	PR-000369	HEALTH INS	61.85	12.62		12.62	74.47	12.62	
					12.62	-	12.62	74.47	12.62	-
2220-21			RETIREMENT PLAN: WTW	329.41						
06	6/30/2017	PR-000369	RETIREMENT		65.88			395.29	65.88	
				329.41	65.88	-	65.88	395.29	65.88	-
2290-21			OTHER BENEFITS/DIS.: WTW	41.99						
06	6/30/2017	PR-000369	LONG TERM DISABILITY		8.5			50.49	8.50	
				41.99	8.50	-	8.50	50.49	8.50	-
2300-21			PAYROLL TAXES: WTW	1,063.10						
06	6/1/2017	AU-000341	Reversal: AJE #13-To record accrual of workers' compensation audit fee.			18.61		1,044.49	(18.61)	
06	6/30/2017	AJ-085418	PR TAXES PROF LIAB		39.18			1,083.67	39.18	
06	6/30/2017	AJ-085931	ALLOCATION OF TAXES - LAKIN		2.28			1,085.95	2.28	
06	6/30/2017	JE-004037	Reversal: AJE #13-To record accrual of workers' compensation audit fee.		18.61			1,104.56	18.61	
06	6/30/2017	PR-000369	PAYROLL TAXES		162.12			1,266.68	162.12	
06	6/30/2017	PR-000369	STATE UNEMPLOYMENT		12.45			1,279.13	12.45	
				1,063.10	234.64	18.61	216.03	1,279.13	216.03	-
2410-21			ATTORNEY FEES: WTW							
							0.00	0.00		
2410-21			ATTORNEY FEES: WTW	1,117.80				1,117.80		
				1,117.80	-	-	0.00	1,117.80	-	-
2430-21			AUDITING/ACCOUNT FEES: WTW	26.70						
06	6/30/2017	AJ-085430	AUDITING/ACCT FEES ALLOC		5.34			32.04		5.34
				26.70	5.34	-	5.34	32.04		5.34
2490-21			OTHER PURCHASE OF SERVICE: WTW	144.11						
06	6/8/2017	AP-004970	CHARLES E. LAKIN CAMPUS /IN: JUN2017		200.00			344.11		200.00
06	6/30/2017	AJ-085441	PURCHASE OF SERVICE ALLOC		10.75			354.86		10.75
				144.11	210.75	-	210.75	354.86		210.75
2491-21			Interdepartmental: WTW	16.90						
06	6/30/2017	RJ-003790	EXPENS/INTEROFFICE DELIVERY		3.38			20.28		3.38
				16.90	3.38	-	3.38	20.28		3.38
2510-21			OFFICE SUPPLIES: WTW	12.74						
								12.74		
				12.74	-	-	0.00	12.74	-	-
2520-21			BUILDING & GROUND SUPPLIES: WTW	20.59						
06	6/30/2017	AJ-085468	BUILDING SUPPLIES - LAKIN CAMPUS		0.73			21.32		
06	6/30/2017	AJ-085473	BUILDING & GROUND SUPPLIES		0.16			21.48		
				20.59	0.89	-	0.89	21.48		
2550-21			FOOD: WTW	59.57						
06		42916 AJ-085480	LAKIN - FOOD		1.75			61.32		
				59.57	1.75	-	1.75	61.32		
2600-21			TELEPHONE: WTW	86.38						
06	6/30/2017	AJ-085493	ALLOCATION TELEPHONE LAKIN		9.28			95.66		
06	6/30/2017	AJ-085498	TELEPHONE		8.46			104.12		

Period	Date	Journal	Comments	Beginning Balance	Debit	Credit	Net Change	Ending Balance	Salaries & Benefits	Atty. Legal, Audit, Acct, POS, Interdept
				86.38	17.74	-	17.74	104.12	-	-
2700-21			POSTAGE & SHIPPING: WTW	29.44						
06	6/30/2017	AJ-085510	POSTAGE ALLOCATION		2.10			31.54		
				29.44	2.10	-	2.10	31.54	-	-
2830-21			UTILITIES: WTW	84.63						
06	6/30/2017	AJ-085523	UTILITIES ALLOCATION		18.28			102.91		
				84.63	18.28	-	18.28	102.91	-	-
2840-21			CARE OF BUILDINGS & GROUNDS: WTW	133.29						
06	6/30/2017	AJ-085533	ALLOCATION OF CARE OF BUILDING AND GROUNDS LAKIN		24.56			157.85		
06		42916 AJ-085538	ALLOCATION - CARE OF BUILDING AND GROUNDS		4.08			161.93		
				133.29	28.64	-	28.64	161.93	-	-
2841-21			Inter - Blds and Grn: WTW	-						
				-	-	-	0.00	0.00	-	-
2850-21			EQUIPMENT REPAIR & MAINTENANCE: WTW	40.66						
06	6/30/2017	AJ-085551	EQUIPMENT REPAIR LAKIN CAMPUS		3.74			44.40		
06	6/30/2017	AP-005003	BISHOP BUSINESS EQUIPMENT CO IN: JUNE-2017		2.36			46.76		
				40.66	6.10	-	6.10	46.76	-	-
2880-21			PROPERTY INS/TAXES: WTW	90.33						
06	6/30/2017	AJ-085570	PROP INS/TAXES ALLOCATION		17.60			107.93		
				90.33	17.60	-	17.60	107.93	-	-
3100-21			PRINTING & PUB.: WTW	49.43						
06	6/30/2017	AJ-085582	PRINTING & PUBLICATION ALLOCATION		8.88			58.31		
				49.43	8.88	-	8.88	58.31	-	-
3210-21			MILEAGE/EXPENSE: WTW	406.33						
				406.33	-	-	0.00	406.33	-	-
3220-21			OUT OF TOWN TRAVEL: WTW	54.15						
				54.15	-	-	0.00	54.15	-	-
3250-21			AGENCY VEHICLE OPERATE.COSTS : WTW	-						
				-	-	-	0.00	0.00	-	-
3280-21			AUTOMOBILE INSURANCE: WTW	85.83						
06	6/30/2017	AJ-085592	AUTO INS ALLOCATION		17.26			103.09		
				85.83	17.26	-	17.26	103.09	-	-
3300-21			CONFERENCE/CONVENTION/TRIPS: WTW	-						
				-	-	-	0.00	0.00	-	-
3500-21			SPECIFIC ASSISTANCE INDIVIDUAL: WTW	-						
				-	-	-	0.00	0.00	-	-
4100-21			ORGANIZATION DUES: WTW	-						

Period	Date	Journal	Comments	Beginning Balance	Debit	Credit	Net Change	Ending Balance	Salaries & Benefits	Atty, Legal, Audit, Acct, POS, Interdept
				-	-	-	0.00	0.00	-	-
4300-21			EQUIPMENT/FIXED ASSETS: WTW	103.40						
06	6/30/2017	AJ-085610	EQUIPMENT FIXED ASSETS		20.68			124.08		
				103.40	20.68	-	20.68	124.08	-	-
4900-21			MISCELLANEOUS: WTW	14,887.28				14,887.28		
				14,887.28	-	-	0.00	14,887.28	-	-
				-	-	-	-	-	-	-
				0.00	3,263.84	3,263.84	0.00	0.00	2,455.21	219.47
			Calculation of Admin costs (=17.9% of expenses excluding Loan Guarantee Fur	503.81						
			Expenses Inc Admin Costs						2,455.21	219.47
									2,455.21	219.47

Check

#REF!

Office & Mtg Supplies	Phone & Internet	Postage & shipping	Building & Occupancy (Utilities, care of bidg/grnds, bidg/grnd supp, prop ins)	Equip & Equip rent/repair	Advertising, Prntg, Pubs	Mileage, travel, conf, agency vehicle, auto ins	Borrower Incentives	Org Dues & Misc	Admin @ 17.9%	Loan Guarantee Funds (Misc)	Total		
								-			-		
								-			-		
								-			-		
								-			-		
				20.68								20.68	
												-	
												-	
												-	
				20.68								20.68	
												-	
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												-	
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												-	
												-	
												-	
												-	
												-	
												-	
1.75	17.74	2.10	65.41	26.78	8.88	17.26	-	-	-	(250.00)	2,564.60		Check
									503.81		503.81		
1.75	17.74	2.10	65.41	26.78	8.88	17.26	-	-	503.81	(250.00)	3,068.41	3,318.41	Ties to MAPA
1.75	17.74	2.10	65.41	26.78	8.88	17.26	-	-	503.81	(250.00)	3,068.41		

NOTE: Reduce Loan Guarantees by Funds received after default

Progress Report

Title: Heartland Family Service- Ways to Work

Date: 06/01/2017 -06/30/2017

Title: MAPA bill \$ 2,525.17 out of \$22,000

1. Work Completed for Current Billing Period:

- a. The Ways to Work program currently has 1 person shopping for a vehicle.

2. Anticipated Work for Next Billing Period:

- a. Same as prior month

3. Information Needed from FTA/MAPA:

- a. No information is needed.

4. Percent of Work Completed to Date:

- a. 66% of grant utilized

5. Outstanding Issues:

Data

1. Number of repossessions in the month (bought back loans)

- a. 0

2. Number of new closed loans in the month

- a. 1

3. Number of loans outstanding

- a. 8

4. Other.....

- a.

5. Narrative

- a. Positive impacts from loans paid in full are continuing to be seen. Consistency in increase in credit score as well as improved employment.

6/30/2017

JUNE-2017

382417,382758,759,760,761,762,763,764

3,353.17

0.00

3,353.17



Check: 144085

7/6/2017

BISHOP BUSINESS EQUIPMENT CO

3,353.17

ORIGINAL DOCUMENT PRINTED ON CHEMICAL REACTIVE PAPER WITH MICROPRINTED BORDER

144085



2101 S. 42ND ST.
OMAHA, NE 68105
402-553-3000
A United Way Member Agency

AMERICAN NATIONAL BANK
OMAHA, NEBRASKA 68114

NUMBER

27-85/1040

*THREE THOUSAND THREE HUNDRED FIFTY-THREE AND 17/100

AMOUNT

PAY
TO THE
ORDER
OF

BISHOP BUSINESS EQUIPMENT CO
4125 S 94TH ST
OMAHA, NE 68127

7/6/2017

*****3,353.17*

BISHOPS

A SECOND SIGNATURE REQUIRED FOR CHECKS OVER 1,000 DOLLARS



⑈ 144085 ⑈ ⑆ 104000854⑆ 3 28 54 6 3 ⑈

HEARTLAND FAMILY SERVICE

144085

FILE COPY

Jun.

BISHOPS BUSINESS EQUIPMENT

6/30/2017
Invoice #'s 382417, 382758, 382759, 382760, 382761,
382762, 382763 & 382764

Prog. Serv. _____
Amt. 3,353.17
Cler. JB
Appr. _____
Acct. No. _____

Account Name	2850-	Grand Total
Administration	03	\$1,058.51
Development	04	\$0.04
NE Behavioral Health	05	\$120.75
Generations Center	06	\$17.28
NE Family Works Residential	07	\$197.60
NH Emerg Svcs NOT IN USE (Move to 11)	08	\$0.00
Better Together	09	\$15.29
Gamblers Assistance Iowa	10	\$13.42
Hardship Assistance	11	\$39.32
Child & Adult Care Food Program	12	\$685.00
Solomon Girls Center	13	\$37.11
NE HPRP/OPPORTUNITIES	14	\$105.58
Community Education	15	\$55.86
Iowa Counseling	16	\$161.54
Samaritan Housing	17	\$14.70
Domestic Abuse Program NE	18	\$27.90
Prevention DFC	19	\$12.13
Youth Links	20	\$59.77
Ways to Work	21	\$2.36
Nebraska Gamblers	22	\$13.17
Integrated Health Home	23	\$25.56
Sarpy Juvenile Justice	24	\$0.50
In Home Parenting Time	25	\$14.72
Iowa Assertive CommunityTrmt	26	\$14.55
Bridges	27	\$0.00
Iowa Mental Health Crt	28	\$36.94
Family Works Iowa	29	\$34.79
Therapeutic School	30	\$128.65
Nebraska Tracker-Inactive	31	\$0.00
Assessment Center	32	\$0.00
Passages	33	\$38.59
PCHL Rapid Re-housing	34	\$15.95
Fremont Childrens Shelter	35	\$47.03
Heartland Housing Solutions	36	\$9.83
Heartland Homes	37	\$10.13
ASAP	38	\$4.94
Ready in 5	39	\$30.23
Heartland Housing Beginnings	40	\$16.47
DCYC	41	\$0.50
Transitions	42	\$0.69
Family Crisis Mediation	43	\$26.48
Baby Talk	44	\$116.16
Refugee Juvenile Justice Adv	45	\$3.28

POSTED

Prevention - Block	46	\$15.96	
Metro Home Base/do not use	47	\$0.00	
DRUG TESTING/do not use	48	\$0.00	
In Home Support-Fremont	49	\$0.55	
Prevention - TFN/MOTAC	50	\$26.58	
Prevention - SPF/LiveWise	51	\$0.18	
In Home Family Support	52	\$4.13	
PCHL Prevention	53	\$11.37	
IBH - School Based Services	54	\$7.42	
Child & Family Center	55	\$36.70	
NE Family Works Apts NOT IN USE (Move to 07)	56	\$0.00	
The Coeur Group	57	\$2.05	
VOCA	58	\$0.00	
VAWA	59	\$0.00	
SPSS	60	\$0.00	
Dr Paul	97 51	\$6.66	Com: Dr Paul
Dr Coy	98 51	\$8.05	Com: Dr Coy
Integrated Therapy	99 51	\$20.19	Com: Integrated Therapy
		<u>\$3,353.17</u>	



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CONTRACT INVOICE

Invoice Number: 382417
 Invoice Date: 06/23/2017

REMIT TO:
 Bishop Business
 4125 S 94th Street
 Omaha, NE 68127

Bill To: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Customer: Heartland Family Services Couer Group
 900 So 74th Plaza Suite 400
 Omaha, NE 68114-4667

Account No	Payment Terms	Due Date	Invoice Total	Balance Due	
103343	Due Upon Receipt	07/08/2017	\$ 38.36	\$ 38.36	
Contract Number	Contact	Contract Amount	P.O. Number	Start Date	Exp. Date
SC5389-01	HFS Couer Group	\$ 35.85	HFS Couer Group	08/28/2016	
Remarks					
THIS CHARGE IS FOR BLACK, WHITE & COLOR COPIES ON BP504 - HFS Couer Group -AT COST PER COPY MONTHLY - PUT ON WORKSHEET WITH THE UNITS					

Summary:

Contract base rate charge for this billing period \$0.00
 Contract overage charge for the 05/28/2017 to 06/27/2017 overage period \$35.85 **
 **See overage details below \$35.85

Detail:

Equipment included under this contract

Toshiba/TF354C

Number	Serial Number	Base Adj.	Location
BP504	CQF-112689	\$0.00	Heartland Family Services Couer Group 900 So 74th Plaza Suite 400 Omaha, NE 68114-4667

Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B/W	B/W	254,244	257,528		3,284	0	3,284	\$0.006000	\$19.70
Color	COLOR	274,302	274,625		323	0	323	\$0.050000	\$16.15
									\$35.85

38.36 +
 180.89 +
 10.27 +
 871.55 +
 1,488.68 +
 146.89 +
 117.79 +
 498.74 +

THANK YOU FOR YOUR BUSINESS!

008

3,353.176

Invoice SubTotal	\$35.85
Tax:	\$2.51
Invoice Total	\$38.36
Balance Due:	\$38.36



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CONTRACT INVOICE

Invoice Number: 382758
 Invoice Date: 06/27/2017

REMIT TO:
 Bishop Business
 4125 S 94th Street
 Omaha, NE 68127

Bill To: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Customer: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Account No	Payment Terms	Due Date	Invoice Total	Balance Due	
103343	Due Upon Receipt	07/12/2017	\$ 180.89	\$ 180.89	
Contract Number	Contact	Contract Amount	P.O. Number	Start Date	Exp. Date
SC4031-01		\$ 169.06	DIANE BENTON	09/28/2013	
Remarks					
THIS IS FOR YOUR BLACK, WHITE & COLOR COPIES AT COST PER COPY - put on worksheet for customer					

Summary:

Contract base rate charge for this billing period	\$0.00
Contract overage charge for the 05/28/2017 to 06/27/2017 overage period	\$169.06 **
	\$169.06

**See overage details below

Detail:

Equipment included under this contract

Toshiba/TF654CT

Number	Serial Number	Base Adj.	Location						
BK385	CCD-110160	\$0.00	Heartland Family Service 2101 S 42nd Street Omaha, NE 68105-2909						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B\W	B/W	287,523	290,808		3,285	0	3,285	\$0.006000	\$19.71
Color	COLOR	782,160	785,147		2,987	0	2,987	\$0.050000	\$149.35
									\$169.06

THANK YOU FOR YOUR BUSINESS!

Invoice SubTotal	\$169.06
Tax:	\$11.83
Invoice Total	\$180.89
Balance Due:	\$180.89



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CONTRACT INVOICE

Invoice Number: 382759
 Invoice Date: 06/27/2017

REMIT TO:
 Bishop Business
 4125 S 94th Street
 Omaha, NE 68127

Bill To: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Customer: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Account No	Payment Terms	Due Date	Invoice Total	Balance Due	
103343	Due Upon Receipt	07/12/2017	\$ 10.27	\$ 10.27	
Contract Number	Contact	Contract Amount	P.O. Number	Start Date	Exp. Date
SC4973-01		\$ 9.60	BP213	09/28/2015	
Remarks					
THIS CHARGE IS FOR COPIES AT COST PER COPY - put on worksheet for Heartland Family					

Summary:

Contract base rate charge for this billing period	\$0.00
Contract overage charge for the 05/28/2017 to 06/27/2017 overage period	\$9.60 **
**See overage details below	\$9.60

Detail:

Equipment included under this contract

Toshiba/T355E

Number	Serial Number	Base Adj.	Location						
BP213	CPG-912476	\$0.00	Heartland Family Service 2101 S 42nd Street Omaha, NE 68105-2909						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B\W	B/W	111,874	113,529		1,655	0	1,655	\$0.005800	\$9.60
									\$9.60

THANK YOU FOR YOUR BUSINESS!

Invoice SubTotal	\$9.60
Tax:	\$0.67
Invoice Total	\$10.27
Balance Due:	\$10.27



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CONTRACT INVOICE

Invoice Number: 382760
 Invoice Date: 06/27/2017

REMIT TO:
 Bishop Business
 4125 S 94th Street
 Omaha, NE 68127

Bill To: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Customer: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Account No	Payment Terms	Due Date	Invoice Total	Balance Due	
103343	Due Upon Receipt	07/12/2017	\$ 871.55	\$ 871.55	
Contract Number	Contact	Contract Amount	P.O. Number	Start Date	Exp. Date
XEROX-E2B659739-01		\$ 814.53	.	10/24/2016	
Remarks					
THIS CHARGE IS FOR BLACK & WHITE AND COLOR COPIES AT COST PER COPY - MONTHLY					

Summary:

Contract base rate charge for this billing period	\$0.00
Contract overage charge for the 05/24/2017 to 06/23/2017 overage period	\$814.53 **
	\$814.53

**See overage details below

Detail:

Equipment included under this contract

Xerox/XC70

Number	Serial Number	Base Adj.	Location						
BR901	E2B-659739	\$0.00	Heartland Family Service 2101 S 42nd Street Omaha, NE 68105-2909						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B/W	B/W	22,412	28,564		6,152	0	6,152	\$0.008000	\$49.22
Color	COLOR	72,164	88,108		15,944	0	15,944	\$0.048000	\$765.31
									\$814.53

THANK YOU FOR YOUR BUSINESS!

Invoice SubTotal	\$814.53
Tax	\$57.02
Invoice Total	\$871.55
Balance Due:	\$871.55



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CONTRACT INVOICE

Invoice Number: 382761
 Invoice Date: 06/27/2017

REMIT TO:
 Bishop Business
 4125 S 94th Street
 Omaha, NE 68127

Bill To: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Customer: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Account No	Payment Terms	Due Date	Invoice Total	Balance Due	
103343	Due Upon Receipt	07/12/2017	\$ 1,488.68	\$ 1,488.68	
Contract Number	Contact	Contract Amount	P.O. Number	Start Date	Exp. Date
XEROX-MX4327650-01		\$ 1,395.21	DIANE BENTON	09/28/2013	
Remarks					
THIS CHARGE IS FOR ALL COPIES AT COST PER COPY - PUT ON WORKSHEET FOR CUSTOMER					

Summary:

Contract base rate charge for this billing period	\$0.00 *
Contract overage charge for the 05/28/2017 to 06/27/2017 overage period	\$1,395.21 **
*Sum of equipment base charges **See overage details below	\$1,395.21

Detail:

Equipment included under this contract

Xerox/X5845/APT2

Number	Serial Number	Base Charge	Location						
BL712	EX7-387139	\$0.00	Heartland Family Service 2101 S 42nd Street Omaha, NE 68105-2909						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B\W	B/W	84,221	96,933		12,712	*** See overage details below			\$0.00

Xerox/X5845/APTXF2

Number	Serial Number	Base Charge	Location						
BL850(2)	EX7-396327	\$0.00	Heartland Family Service 600 9th Avenue Council Bluffs, IA 51501						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B\W	B/W	92,430	94,061		1,631	*** See overage details below			\$0.00

Number	Serial Number	Base Charge	Location						
BL853	EX7-396220	\$0.00	Heartland Family Service-Better Together 2517 Caldwell Street Omaha, NE 68131-4602						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B\W	B/W	164,682	167,114		2,432	*** See overage details below			\$0.00

Number	Serial Number	Base Charge	Location						
BL856	EX7-392695	\$0.00	Heartland Family Service 6720 N 30th Street Omaha, NE 68112-3211						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B\W	B/W	383,456	392,415		8,959	*** See overage details below			\$0.00



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 5253 R St - Lincoln 68504
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 www.bbec.com

CONTRACT INVOICE

Invoice Number: 382761
 Invoice Date: 06/27/2017

REMIT TO:
 Bishop Business
 4125 S 94th Street
 Omaha, NE 68127

Bill To: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Customer: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Account No	Payment Terms	Due Date	Invoice Total	Balance Due
103343	Due Upon Receipt	07/12/2017	\$ 1,488.68	\$ 1,488.68

Number	Serial Number	Base Charge	Location
BL860	EX7-392587	\$0.00	Heartland Family Service Bellevue, NE 68005

Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B\W	B/W	123,984	126,360		2,376	*** See overage details below			\$0.00

Number	Serial Number	Base Charge	Location
BL861	EX7-392502	\$0.00	Heartland Family Services - Family Works- Day Care 4847 Sahler Street Omaha, NE 68104

Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B\W	B/W	396,473	404,910		8,437	*** See overage details below			\$0.00

Number	Serial Number	Base Charge	Location
BL865	EX7-392702	\$0.00	Heartland Family Service - Youth Links-NOIC 4318 Fort Street - 1ST FLOOR Omaha, NE 68111-1849

Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B\W	B/W	71,793	72,691		898	*** See overage details below			\$0.00

Xerox/X5855/APTXF2

Number	Serial Number	Base Charge	Location
BL863	EX7-392658	\$0.00	Heartland Family Service 2101 S 42nd Street Omaha, NE 68105-2909

Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B\W	B/W	674,601	684,736		10,135	*** See overage details below			\$0.00

Xerox/X7845/PTXF2

Number	Serial Number	Base Charge	Location
BL855	MX4-327604	\$0.00	Heartland Family Service Homeless Call Center 1941 S 42nd Street - Suite 375 Omaha, NE 68105

Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B\W	B/W	858,287	867,069		8,782	*** See overage details below			\$0.00
Color	COLOR	31,201	34,397		3,196	*** See overage details below			

Xerox/X7855/PTXF2



4125 S 94th St - Omaha 68127
 5253 R St - Lincoln 68504
 1.800.933.9583 / 402.537.4379 fx
 www.bbec.com

CONTRACT INVOICE

Invoice Number: 382761
 Invoice Date: 06/27/2017

REMIT TO:
 Bishop Business
 4125 S 94th Street
 Omaha, NE 68127

Bill To: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Customer: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Account No	Payment Terms	Due Date	Invoice Total	Balance Due
103343	Due Upon Receipt	07/12/2017	\$ 1,488.68	\$ 1,488.68

Number	Serial Number	Base Charge	Location
BL854	MX4-327458	\$0.00	Heartland Family Service 6720 N 30th Street Omaha, NE 68112-3211
<u>Meter Type</u>	<u>Meter Group</u>	<u>Begin Meter</u>	<u>End Meter</u>
B\W	B/W	303,162	309,800
Color	COLOR	283,340	298,407
			15,067 *** See overage details below
			\$0.00

Number	Serial Number	Base Charge	Location
BL858	MX4-327605	\$0.00	Heartland Family Service 302 American Parkway Papillion, NE 68046-6270
<u>Meter Type</u>	<u>Meter Group</u>	<u>Begin Meter</u>	<u>End Meter</u>
B\W	B/W	434,457	440,165
Color	COLOR	74,255	76,231
			1,976 *** See overage details below
			\$0.00

Number	Serial Number	Base Charge	Location
BL866	MX4-327650	\$0.00	Heartland Family Service 2101 S 42nd Street Omaha, NE 68105-2909
<u>Meter Type</u>	<u>Meter Group</u>	<u>Begin Meter</u>	<u>End Meter</u>
B\W	B/W	238,573	243,557
Color	COLOR	98,204	100,472
			4,984 *** See overage details below
			2,268 *** See overage details below
			\$0.00



4125 S 94th St - Omaha 68127
 5253 R St - Lincoln 68504
 1.800.933.9583 / 402.537.4379 fx
 www.bb.ec.com

CONTRACT INVOICE

Invoice Number: 382761

Invoice Date: 06/27/2017

REMIT TO:
 Bishop Business
 4125 S 94th Street
 Omaha, NE 68127

Bill To: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Customer: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Account No	Payment Terms	Due Date	Invoice Total	Balance Due
103343	Due Upon Receipt	07/12/2017	\$ 1,488.68	\$ 1,488.68

Overage Details

Meter Group	Total Copies	Covered Copies	Billable	Rate	Total
B/W	73,692	0	0	73,692 \$0.005800	\$427.41
Base Amount:					\$0.00
					\$427.41
Meter Type	Equip. Number	Serial Number	Begin	End	Copies
B\W	BL712	EX7-387139	84,221	96,933	12,712
B\W	BL850(2.000000)	EX7-396327	92,430	94,061	1,631
B\W	BL853	EX7-396220	164,682	167,114	2,432
B\W	BL854	MX4-327458	303,162	309,800	6,638
B\W	BL855	MX4-327604	858,287	867,069	8,782
B\W	BL856	EX7-392695	383,456	392,415	8,959
B\W	BL858	MX4-327605	434,457	440,165	5,708
B\W	BL860	EX7-392587	123,984	126,360	2,376
B\W	BL861	EX7-392502	396,473	404,910	8,437
B\W	BL863	EX7-392658	674,601	684,736	10,135
B\W	BL865	EX7-392702	71,793	72,691	898
B\W	BL866	MX4-327650	238,573	243,557	4,984
Meter Group	Total Copies	Covered Copies	Billable	Rate	Total
COLOR	22,507	0	0	22,507 \$0.043000	\$967.80
Base Amount:					\$0.00
					\$967.80
Meter Type	Equip. Number	Serial Number	Begin	End	Copies
Color	BL854	MX4-327458	283,340	298,407	15,067
Color	BL855	MX4-327604	31,201	34,397	3,196
Color	BL858	MX4-327605	74,255	76,231	1,976
Color	BL866	MX4-327650	98,204	100,472	2,268
Total Grouped Overage Charges:					\$1,395.21
Total Grouped Base Charges:					\$0.00
Total Meter Group Charges:					\$1,395.21

THANK YOU FOR YOUR BUSINESS!

Invoice SubTotal	\$1,395.21
Tax:	\$93.47
Invoice Total	\$1,488.68
Balance Due:	\$1,488.68



4125 S 94th St - Omaha 68127
 5253 R St - Lincoln 68504
 1.800.933.9583 / 402.537.4379 fx
 www.bb.ec.com

CONTRACT INVOICE

Invoice Number: 382762
 Invoice Date: 06/27/2017

REMIT TO:
 Bishop Business
 4125 S 94th Street
 Omaha, NE 68127

Bill To: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Customer: Heartland Family Services - Family Works- Day Care
 4847 Sahler Street
 Omaha, NE 68104

Account No	Payment Terms	Due Date	Invoice Total	Balance Due	
103343	Due Upon Receipt	07/12/2017	\$ 146.89	\$ 146.89	
Contract Number	Contact	Contract Amount	P.O. Number	Start Date	Exp. Date
SC5390-01	HFS DAY CARE	\$ 146.89	HFS DAY CARE	08/28/2016	
Remarks					
THIS CHARGE IS FOR YOUR BLACK, WHITE & COLOR COPIES ON BP503 - HFS DAY CARE- AT COST PER COPY MONTHLY - PUT ON WORKSHEET WITH ALL THE OTHER UNITS					

Summary:

Contract base rate charge for this billing period	\$0.00
Contract overage charge for the 05/28/2017 to 06/27/2017 overage period	\$146.89 **
	\$146.89

**See overage details below

Detail:

Equipment included under this contract

Toshiba/TF454C

Number	Serial Number	Base Adj.	Location
BP503	CMG-221125	\$0.00	Heartland Family Services - Family Works- Day Care 4847 Sahler Street Omaha, NE 68104

Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B/W	B/W	154,309	156,674		2,365	0	2,365	\$0.006000	\$14.19
Color	COLOR	33,743	36,397		2,654	0	2,654	\$0.050000	\$132.70
									\$146.89

THANK YOU FOR YOUR BUSINESS!

Invoice SubTotal	\$146.89
Tax:	\$0.00
Invoice Total	\$146.89
Balance Due:	\$146.89



4125 S 94th St - Omaha 68127
 5253 R St - Lincoln 68504
 1.800.933.9583 / 402.537.4379 fx
 www.bb.ec.com

CONTRACT INVOICE

Invoice Number: 382763
 Invoice Date: 06/27/2017

REMIT TO:
 Bishop Business
 4125 S 94th Street
 Omaha, NE 68127

Bill To: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Customer: Heartland Family Service-Jefferson House
 437 Jefferson Road
 Fremont, NE 68025

Account No	Payment Terms	Due Date	Invoice Total	Balance Due	
103343	Due Upon Receipt	07/12/2017	\$ 117.79	\$ 117.79	
Contract Number	Contact	Contract Amount	P.O. Number	Start Date	Exp. Date
SC3972-01		\$ 117.79	Diane Benton	09/28/2013	
Remarks					
THIS IS COST PER COPY FOR THIS UNIT - put on worksheet for Heartland Family					

Summary:

Contract base rate charge for this billing period	\$0.00
Contract overage charge for the 05/28/2017 to 06/27/2017 overage period	\$117.79 **
	\$117.79

**See overage details below

Detail:

Equipment included under this contract

Xerox/X5845/APTXF2

Number	Serial Number	Base Adj.	Location
BL884	EX7-394831	\$0.00	Heartland Family Service-Jefferson House 437 Jefferson Road Fremont, NE 68025

Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B\W	B/W	267,842	275,949		8,107	*** See overage details below			\$0.00

Xerox/X7855/PTXF2

Number	Serial Number	Base Adj.	Location
BL859	MX4-327661	\$0.00	Heartland Family Service - Youth Links-NOIC 4318 Fort St 2ND FLOOR YOUTH LINKS Omaha, NE 68111-1849

Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B\W	B/W	518,829	524,417		5,588	*** See overage details below			
Color	COLOR	40,325	41,217		892	0	892	\$0.043000	\$38.36
									\$38.36

Overage Details

Meter Group	Total Copies	Covered Copies	Billable	Rate	Total
B/W	13,695	0	0	13,695	\$0.005800
					Base Amount:
					\$0.00
					\$79.43
Meter Type	Equip. Number	Serial Number	Begin	End	Copies
B\W	BL859	MX4-327661	518,829	524,417	5,588
B\W	BL884	EX7-394831	267,842	275,949	8,107
Total Grouped Overage Charges:					\$79.43
Total Grouped Base Charges:					\$0.00
Total Meter Group Charges:					\$79.43



4125 S 94th St - Omaha 68127
5253 R St - Lincoln 68504
1.800.933.9583 / 402.537.4379 fx
www.bbac.com

REMIT TO:
Bishop Business
4125 S 94th Street
Omaha, NE 68127

CONTRACT INVOICE

Invoice Number: 382763
Invoice Date: 06/27/2017

Bill To: Heartland Family Service
2101 S 42nd Street
Omaha, NE 68105-2909

Customer: Heartland Family Service-Jefferson House
437 Jefferson Road
Fremont, NE 68025

THANK YOU FOR YOUR BUSINESS!

Invoice SubTotal	\$117.79
Tax:	\$0.00
Invoice Total	\$117.79
Balance Due:	\$117.79



4125 S 94th St - Omaha 68127
 5253 R St - Lincoln 68504
 1.800.933.9583 / 402.537.4379 fx
 www.bbec.com

CONTRACT INVOICE

Invoice Number: 382764
 Invoice Date: 06/27/2017

REMIT TO:
 Bishop Business
 4125 S 94th Street
 Omaha, NE 68127

Bill To: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Customer: Heartland Family Service
 515 E Broadway
 Council Bluffs, IA 51503

Account No	Payment Terms	Due Date	Invoice Total	Balance Due	
103343	Due Upon Receipt	07/12/2017	\$ 498.74	\$ 498.74	
Contract Number	Contact	Contract Amount	P.O. Number	Start Date	Exp. Date
SC3973-01		\$ 466.11		09/28/2013	
Remarks					
THIS IS COST PER COPY ON ALL UNITS - put on worksheet for Heartland Family					

Summary:

Contract base rate charge for this billing period	\$0.00 *
Contract overage charge for the 05/28/2017 to 06/27/2017 overage period	\$466.11 **
*Sum of equipment base charges **See overage details below	\$466.11

Detail:

Equipment included under this contract

Xerox/X5845/APTXF2

Number	Serial Number	Base Charge	Location						
BL882	EX7-395103	\$0.00	Heartland Family Service 1515 Avenue J Council Bluffs, IA 51503						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B/W	B/W	263,984	266,885		2,901	*** See overage details below			\$0.00

Number	Serial Number	Base Charge	Location						
BL883	EX7-394726	\$0.00	Heartland Family Service 1722 Avenue C Council Bluffs, IA 51501						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B/W	B/W	358,945	364,542		5,597	*** See overage details below			\$0.00

Xerox/X5855/APTXF2

Number	Serial Number	Base Charge	Location						
BL875	EX7-392588	\$0.00	Heartland Family Service 2912 9th Avenue Council Bluffs, IA 51501						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B/W	B/W	568,380	570,410		2,030	*** See overage details below			\$0.00

Number	Serial Number	Base Charge	Location						
BL876	EX7-398699	\$0.00	Heartland Family Service 515 E Broadway Council Bluffs, IA 51503						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B/W	B/W	683,120	695,214		12,094	*** See overage details below			\$0.00

Xerox/X7845/PTXF2



4125 S 94th St - Omaha 68127
 5253 R St - Lincoln 68504
 1.800.933.9583 / 402.537.4379 fx
 www.bbec.com

CONTRACT INVOICE

Invoice Number: 382764
 Invoice Date: 06/27/2017

REMIT TO:
 Bishop Business
 4125 S 94th Street
 Omaha, NE 68127

Bill To: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Customer: Heartland Family Service
 515 E Broadway
 Council Bluffs, IA 51503

Account No	Payment Terms	Due Date	Invoice Total	Balance Due
103343	Due Upon Receipt	07/12/2017	\$ 498.74	\$ 498.74

Number	Serial Number	Base Charge			Location				
BL874	MX4-327593	\$0.00			Heartland Family Service 1515 Avenue J Council Bluffs, IA 51503				
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B\W	B/W	296,384	301,777		5,393	***	See overage details below		
Color	COLOR	49,648	50,248		600	***	See overage details below		
									\$0.00

Number	Serial Number	Base Charge			Location				
BL877	MX4-327602	\$0.00			Heartland Family Service 515 E Broadway Council Bluffs, IA 51503				
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B\W	B/W	665,002	680,259		15,257	***	See overage details below		
Color	COLOR	53,393	54,176		783	***	See overage details below		
									\$0.00

Number	Serial Number	Base Charge			Location				
BN523	MX4-740794	\$0.00			Heartland Family Service 705 N 16th Street Council Bluffs, IA 51501				
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B\W	B/W	127,011	130,037		3,026	***	See overage details below		
Color	COLOR	29,411	30,099		688	***	See overage details below		
									\$0.00

Xerox/X7855/PTXF2

Number	Serial Number	Base Charge			Location				
BL873	MX4-327598	\$0.00			Heartland Family Service 2912 9th Avenue Council Bluffs, IA 51501				
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B\W	B/W	441,222	444,801		3,579	***	See overage details below		
Color	COLOR	226,371	228,412		2,041	***	See overage details below		
									\$0.00



4125 S 94th St - Omaha 68127
 5253 R St - Lincoln 68504
 1.800.933.9583 / 402.537.4379 fx
 www.bbhc.com

CONTRACT INVOICE

Invoice Number: 382764
 Invoice Date: 06/27/2017

REMIT TO:
 Bishop Business
 4125 S 94th Street
 Omaha, NE 68127

Bill To: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Customer: Heartland Family Service
 515 E Broadway
 Council Bluffs, IA 51503

Account No	Payment Terms	Due Date	Invoice Total	Balance Due
103343	Due Upon Receipt	07/12/2017	\$ 498.74	\$ 498.74

Overage Details						
Meter Group	Total Copies	Covered Copies	Billable	Rate	Total	
B/W	49,877	0	0	49,877	\$0.005800	\$289.29
					Base Amount:	\$0.00
						\$289.29
Meter Type	Equip. Number	Serial Number	Begin	End	Copies	
B\W	BL873	MX4-327598	441,222	444,801	3,579	
B\W	BL874	MX4-327593	296,384	301,777	5,393	
B\W	BL875	EX7-392588	568,380	570,410	2,030	
B\W	BL876	EX7-398699	683,120	695,214	12,094	
B\W	BL877	MX4-327602	665,002	680,259	15,257	
B\W	BL882	EX7-395103	263,984	266,885	2,901	
B\W	BL883	EX7-394726	358,945	364,542	5,597	
B\W	BN523	MX4-740794	127,011	130,037	3,026	
Meter Group	Total Copies	Covered Copies	Billable	Rate	Total	
COLOR	4,112	0	0	4,112	\$0.043000	\$176.82
					Base Amount:	\$0.00
						\$176.82
Meter Type	Equip. Number	Serial Number	Begin	End	Copies	
Color	BL873	MX4-327598	226,371	228,412	2,041	
Color	BL874	MX4-327593	49,648	50,248	600	
Color	BL877	MX4-327602	53,393	54,176	783	
Color	BN523	MX4-740794	29,411	30,099	688	
Total Grouped Overage Charges:						\$466.11
Total Grouped Base Charges:						\$0.00
Total Meter Group Charges:						\$466.11

THANK YOU FOR YOUR BUSINESS!

Invoice SubTotal	\$466.11
Tax:	\$32.63
Invoice Total	\$498.74
Balance Due:	\$498.74

6/1/2017

JUN2017

2017 OPERATIONAL ASSESSMENT

10,000.00

0.00

10,000.00



Check: 143713

6/15/2017 - CHARLES E. LAKIN CAMPUS

10,000.00

ORIGINAL DOCUMENT PRINTED ON CHEMICAL REACTIVE PAPER WITH MICROPRINTED BORDER



2101 S. 42ND ST.
OMAHA, NE 68105
402-553-3000
A United Way Member Agency

AMERICAN NATIONAL BANK
OMAHA, NEBRASKA 68114

143713

NUMBER

27-85/1040

*TEN THOUSAND AND XX / 100

DATE

AMOUNT

PAY TO THE ORDER OF

CHARLES E. LAKIN CAMPUS
HUMAN SERVICES CAMPUS FUND
2101 S 42ND ST
OMAHA, NE 68105
LAKIN

6/15/2017

*****10,000.00*

A SECOND SIGNATURE REQUIRED FOR CHECKS OVER 1,000 DOLLARS



THIS DOCUMENT CONTAINS HEAT SENSITIVE INK. TOUCH OR PRESS HERE. RED IMAGE DISAPPEARS WITH HEAT.

⑈ 143713 ⑆ ⑆ 104000854 ⑆ 3285463 ⑆

HEARTLAND FAMILY SERVICE

143713

FILE COPY

INVOICE

Date: 6/1/17

Date: November 15, 2016

**CHARLES E LAKIN HUMAN SERVICES CAMPUS
2101 SOUTH 42 STREET
OMAHA, NE 68105**

**TO: American Red Cross
Boys & Girls Club
Heartland Family Service
MICAH House
The Salvation Army**

POSTED

DESCRIPTION	AMOUNT
Assessment for Legacy Campus Operational Expenses for 2017	\$10,000.00 Per Agency
Due Date: June 30, 2017	

			10,000.00
ACT	0.40	2490-26	4,000.00
IHH	0.32	2490-23	3,200.00
HH	0.14	2490-37	1,400.00
PCHL RRH	0.08	2490-34	800.00
PCHL PREV	0.04	2490-53	400.00
W2W	0.02	2490-21	<u>200.00</u>
			10,000.00

Prog. Serv. _____ *Jun*
 Amt. 10,000
 Cler. BS
 Appr. _____
 ← Acct. No. _____

using allocation %'s

Dawn Bockmann

From: Amy Carolus
Sent: Thursday, April 13, 2017 11:58 AM
To: AccountsPayable
Cc: Joanie Poore; Mary O'Neill; Jessica Gerken
Subject: FW: Agency Assessment for Lakin Campus
Attachments: Nov 2016 Assessment TO COVER EXPENSES for 2017.docx

Hello! Please see the attached invoice, to be paid in June.

Can you please let us know when the invoice is coded into the GL? (see Joanie's request highlighted below)

Thanks,
Amy

From: Joanie Poore
Sent: Thursday, March 09, 2017 1:36 PM
To: Jessica Gerken; Amy Carolus
Cc: Mary O'Neill
Subject: FW: Agency Assessment for Lakin Campus

Good afternoon!

Mary and I had previously talked with Kristine regarding this assessment for each of the Lakin Campus Agencies. But, since we didn't fully re-budget in December I don't think this has been accounted for yet. Please note that HFS needs to pay the Legacy Family Campus (Lakin Campus Operations) \$10,000 by June of this year. This expense should be billed to the following programs:

- ACT
- IHH
- Heartland Homes
- PCHL RRH
- PCHL Prevention
- Ways to Work

I assume the cost should be split based upon FTEs in the same way our allocations are billed. But, if you all think it needs to be different please let me know. And, please let me know when this expense will hit the programs so I can let the PDs know.

Thanks!
-Joanie

From: Clarrissa Newman [<mailto:clarrissa.newman@lakincampus.org>]
Sent: Tuesday, January 31, 2017 11:17 AM
To: Jill Orton; Wingert, Ann; Donna Miller; Chris Peterson; Meegan Schulte; Joanie Poore; Jaymes Sime
Subject: Fwd: Agency Assessment for Lakin Campus

For anyone who may need the invoice for the assessment.

Dawn Bockmann

From: Mary O'Neill
Sent: Monday, June 12, 2017 4:15 PM
To: AccountsPayable
Subject: Re: Agency Assessment for Lakin Campus - FYI

This is ok....thanks for the follow up.

Sent from my Verizon Wireless 4G LTE smartphone

----- Original message -----

From: AccountsPayable <AccountsPayable@heartlandfamilyservice.org>
Date: 6/12/17 4:07 PM (GMT-06:00)
To: Mary O'Neill <moneill@heartlandfamilyservice.org>
Subject: RE: Agency Assessment for Lakin Campus - FYI

Mary, FYI:

This is the way I have always been told to charge out something for a location. I used the Allocation percentages of the Lakin "L" code and adjusted accordingly to divide this charge with only the programs requested to be charged. I did adjust slightly to get even dollars for each. I sent the email before paying to get responses, so if the HH FTE is actually higher than the numbers I have, we can easily make that adjustment. Joanie did agree with this breakdown, but I can make changes if you prefer. HH is lower because they have less staff, but more square footage, and SQ. Ft. isn't used in the FTE calc.

ACT	26	0.40	\$4,000.00
IHH	23	0.32	\$3,200.00
Heartland Homes	37	0.14	\$1,400.00
PCHL RRH	34	0.08	\$800.00
PCHL Prevention	53	0.04	\$400.00
Ways to Work	21	<u>0.02</u>	<u>\$200.00</u>
		1.00	\$10,000.00

Dawn Bockmann

Accounts Payable Accountant
Heartland Family Service
2101 S. 42nd Street
Omaha, NE 68105
402-552-7412 phone
402-553-3133 fax

From: Mary O'Neill
Sent: Thursday, June 08, 2017 8:15 PM
To: AccountsPayable; Amy Carolus; Joanie Poore; Jessica Gerken
Subject: RE: Agency Assessment for Lakin Campus - FYI

Do we base this assessment on staff? I would've expected HH to be higher since it is a whole building on the program but I don't have the history here.

From: AccountsPayable
Sent: Thursday, June 08, 2017 12:33 PM
To: Amy Carolus; Joanie Poore; Mary O'Neill; Jessica Gerken
Subject: FW: Agency Assessment for Lakin Campus - FYI

I have entered this assessment expense into June for payment coded in 2490-
The dollar amounts based on the Allocations from the current budget are below:

ACT	\$4,000
IHH	\$3,200
Heartland Homes	\$1,400
PCHL RRH	\$800
PCHL Prevention	\$400
Ways to Work	\$200

Thanks

Dawn Bockmann

Accounts Payable Accountant
Heartland Family Service
2101 S. 42nd Street
Omaha, NE 68105
402-552-7412 phone
402-553-3133 fax

From: Amy Carolus
Sent: Thursday, April 13, 2017 11:58 AM
To: AccountsPayable
Cc: Joanie Poore; Mary O'Neill; Jessica Gerken
Subject: FW: Agency Assessment for Lakin Campus

Hello! Please see the attached invoice, to be paid in June.

Can you please let us know when the invoice is coded into the GL? (see Joanie's request highlighted below)

Thanks,
Amy

From: Joanie Poore
Sent: Thursday, March 09, 2017 1:36 PM
To: Jessica Gerken; Amy Carolus
Cc: Mary O'Neill
Subject: FW: Agency Assessment for Lakin Campus

Good afternoon!

Mary and I had previously talked with Kristine regarding this assessment for each of the Lakin Campus Agencies. But, since we didn't fully re-budget in December I don't think this has been accounted for yet. Please note that HFS needs to pay the Legacy Family Campus (Lakin Campus Operations) \$10,000 by June of this year. This expense should be billed to the following programs:

- ACT
- IHH
- Heartland Homes
- PCHL RRH
- PCHL Prevention
- Ways to Work

I assume the cost should be split based upon FTEs in the same way our allocations are billed. But, if you all think it needs to be different please let me know. And, please let me know when this expense will hit the programs so I can let the PDs know.

Thanks!
-Joanie

From: Clarrissa Newman [<mailto:clarrissa.newman@lakincampus.org>]

Sent: Tuesday, January 31, 2017 11:17 AM

To: Jill Orton; Wingert, Ann; Donna Miller; Chris Peterson; Meegan Schulte; Joanie Poore; Jaymes Sime

Subject: Fwd: Agency Assessment for Lakin Campus

For anyone who may need the invoice for the assessment.

MAPA JARC GRANT BILLING DOCUMENT

PART IV - Project Budget Worksheet

Project Name: __HEARTLAND FAMILY SERVICE - WAYS TO WORK__

Contact Name: __Joanie Poore, VP__

BUDGET DETAIL	TOTAL JARC BUDGET (ORIGINAL)	7/1/2017 - 7/31/2017		TOTAL COST MONTH	Program to Date	
		JARC	LOCAL MATCH		JARC	LOCAL MATCH
A. OPERATING EXPENSES¹						
1. Salaries and Benefits	30,720	\$ 1,522.88	\$ 979.12	\$ 2,501.99	\$ 11,153.96	\$ 5,948.47
2. Atty, Audit, Acct, POS	2,200	\$ -	\$ 33.37	\$ 33.37	\$ -	\$ 1,558.35
3. Office and Meeting Supplies	400	\$ 0.32	\$ 0.32	\$ 0.63	\$ 37.35	\$ 37.35
4. Phone & Internet	400	\$ 4.53	\$ 4.53	\$ 9.06	\$ 56.59	\$ 56.59
5. Postage & Shipping	220	\$ 3.72	\$ 3.72	\$ 7.43	\$ 20.33	\$ 20.33
6. Building and Occupancy	1,240	\$ 13.93	\$ 13.93	\$ 27.85	\$ 211.05	\$ 211.05
7. Equipment & Equip rep/rent	800	\$ 10.41	\$ 10.41	\$ 20.82	\$ 95.83	\$ 95.83
8. Advertising, Printing and Pubs	840	\$ 4.15	\$ 4.15	\$ 8.30	\$ 33.31	\$ 33.31
9. Mileage, travel, conf, auto ins.	320	\$ 120.95	\$ 120.95	\$ 241.89	\$ 402.73	\$ 402.73
10. Borrower Incentives	-			\$ -	\$ -	\$ -
11. Org Dues & Misc	128		\$ -	\$ -	\$ -	\$ -
12. Administrative Costs	6,732	\$ -	\$ 510.39	\$ 510.39	\$ -	\$ 3,647.14
Subtotal - Operating Expenses	\$ 44,000	\$ 1,680.87	\$ 1,680.87	\$ 3,361.73	\$ 12,011.14	\$ 12,011.14

General Ledger Detail Report
HEARTLAND FAMILY SERVICE (002)
DEPARTMENT 21 - WAYS TO WORK
Detail Postings for Period 07 for July 01-July 31, 2017
Account Number/Description

Period	Date	Journal	Comments	Beginning Balance	Debit	Credit	Net Change	Ending Balance	Salaries & Benefits	Atty, Legal, Audit, Acct, POS, Interdept
1010-21			INCOME FROM SERVICES	(180.00)				(180.00)		
				(180.00)	-	-	-	(180.00)		
1111-21			CONTRIBUTIONS RESTRICTED: WTW	(16,587.45)						
07	7/31/2017	AJ-086146	CONTRIBUTIONS RESTRICTED ALLOCATION			9.22		(16,596.67)		
07	7/31/2017	JE-004098	WTW CLOSING ENTRY			970.04		(17,566.71)		
				(16,587.45)	-	979.26	(979.26)	(17,566.71)		
1334-21			Service Fees - Ways to Work	-						
07		42947 CR-021395	Doc: CO 7/31 07/31/17			25.00		(25.00)		
				-	-	25.00	(25.00)	(25.00)		
1700-21			MISCELLANEOUS: WTW	(0.29)						
07	7/31/2017	AJ-086155	MISC INCOME - L CODE			0.01		(0.30)		
				(0.29)	-	0.01	(0.01)	(0.30)		
1701-21			MISCELLANEOUS WTW COLLECTIONS ON DEFAULTED LOANS	(6,841.96)						
07	7/5/2017	CR-021400	Doc: CR 7/5 07/05/17 NICOLETTE OLIVER			150.00		(6,991.96)		
07	7/11/2017	CR-021390	Doc: 20170711-9 07/11/17 WAYS TO WORK			50.00		(7,041.96)		
				(6,841.96)	-	200.00	(200.00)	(7,041.96)		
1750-21			SPECIAL EVENTS: WTW	-						
				-	-	-	-	-		
1900-21			UNITED WAY ALLOCAT: WTW	(12,499.98)						
07		42947 AR-000427	UNITED WAY			2,083.33		(14,583.31)		
				(12,499.98)	-	2,083.33	(2,083.33)	(14,583.31)		
1999-21			INDIRECT REV (EXP): OPEN	3,700.29						
07	7/31/2017	JE-004098	WTW INDIRECT CLOSING ENTRY		436.26			4,136.55		
				3,700.29	436.26	-	436.26	4,136.55		
2100-21			SALARIES: DIS. FAM.	12,801.06						
07	7/31/2017	AJ-086171	SALARIES GRANT MANAGERS		25.78			12,826.84	25.78	
07	7/31/2017	AJ-086389	ALLOCATION OF SALARY - LAKIN		0.79			12,827.63	0.79	
07	7/31/2017	PR-000372	SALARIES		2,172.70			15,000.33	2,172.70	
				12,801.06	2,199.27	-	2,199.27	15,000.33	2,199.27	-
2210-21			GROUP HEALTH INSURANCE: WTW	74.47						
07	7/31/2017	PR-000372	HEALTH INS		12.62			87.09	12.62	
				74.47	12.62	-	12.62	87.09	12.62	-
2220-21			RETIREMENT PLAN: WTW	395.29						
07	7/31/2017	PR-000372	RETIREMENT		67.08			462.37	67.08	
				395.29	67.08	-	67.08	462.37	67.08	-
2290-21			OTHER BENEFITS/DIS: WTW	50.49						
07	7/31/2017	PR-000372	LONG TERM DISABILITY		8.66			59.15	8.66	
				50.49	8.66	-	8.66	59.15	8.66	-
2300-21			PAYROLL TAXES: WTW	1,279.13						
07	7/31/2017	AJ-086190	PR TAXES PROF LIAB		36.38			1,315.51	36.38	
07	7/31/2017	AJ-086408	ALLOCATION OF TAXES - LAKIN		0.30			1,315.81	0.30	
07	7/31/2017	PR-000372	PAYROLL TAXES		166.22			1,482.03	166.22	
07	7/31/2017	PR-000372	STATE UNEMPLOYMENT		11.46			1,493.49	11.46	
				1,279.13	214.36	-	214.36	1,493.49	214.36	-
2410-21			ATTORNEY FEES: WTW	1,117.80						
								1,117.80		-
				1,117.80	-	-	-	1,117.80	-	-
2430-21			AUDITING/ACCOUNT FEES: WTW	32.04						
07	7/31/2017	AJ-086202	AUDITING/ACCT FEES ALLOC		4.96			37.00		4.96
				32.04	4.96	-	4.96	37.00	-	4.96
2490-21			OTHER PURCHASE OF SERVICE: WTW	354.86						

Period	Date	Journal	Comments	Beginning Balance	Debit	Credit	Net Change	Ending Balance	Salaries & Benefits	Atty. Legal, Audit, Acct, POS, Interdept
07	7/31/2017	AJ-086212	PURCHASE OF SERVICE ALLOC		10.00			364.86		10.00
07	7/31/2017	AP-005033	CORELOGIC CREDCO, LLC /IN: 10249384		19.80			384.66		19.80
				354.86	29.80	-	29.80	384.66	-	29.80
2491-21			Interdepartmental: WTW	20.28						
07	7/31/2017	AJ-086220	Interdepartmental:Universal			1.39		18.89		(1.39)
				20.28	-	1.39	(1.39)	18.89	-	(1.39)
2510-21			OFFICE SUPPLIES: WTW	12.74						
07	7/31/2017	AJ-086226	LAKIN CAMPUS OFFICE SUPPLIES		0.41			13.15		
				12.74	0.41	-	0.41	13.15	-	-
2520-21			BUILDING & GROUND SUPPLIES: WTW	21.48						
07	7/31/2017	AJ-086238	BUILDING SUPPLIES - LAKIN CAMPUS		0.92			22.40		
07	7/31/2017	AJ-086243	BUILDING & GROUND SUPPLIES		0.23			22.63		
				21.48	1.15	-	1.15	22.63	-	-
2550-21			FOOD: WTW	61.32						
07	42947	AJ-086250	LAKIN - FOOD		0.22			61.54		
				61.32	0.22	-	0.22	61.54	-	-
2600-21			TELEPHONE: WTW	104.12						
07	7/31/2017	AJ-086262	ALLOCATION TELEPHONE LAKIN		1.67			105.79		
07	7/31/2017	AJ-086267	TELEPHONE		7.39			113.18		
				104.12	9.06	-	9.06	113.18	-	-
2700-21			POSTAGE & SHIPPING: WTW	31.54						
07	7/31/2017	AJ-086274	POSTAGE - LAKIN CAMPUS		0.09			31.63		
07	7/31/2017	AJ-086279	POSTAGE ALLOCATION		1.95			33.58		
07	7/31/2017	JE-004056	POSTAGE - JUN		3.43			37.01		
07	7/31/2017	JE-004056	POSTAGE - JULY		1.96			38.97		
				31.54	7.43	-	7.43	38.97	-	-
2830-21			UTILITIES: WTW	102.91						
07	7/31/2017	AJ-086289	UTILITIES ALLOCATION		3.67			106.58		
				102.91	3.67	-	3.67	106.58	-	-
2840-21			CARE OF BUILDINGS & GROUNDS: WTW	161.93						
07	7/31/2017	AJ-086299	ALLOCATION OF CARE OF BUILDING AND GROUNDS LAKIN		2.90			164.83		
07	42947	AJ-086304	ALLOCATION - CARE OF BUILDING AND GROUNDS		3.79			168.62		
				161.93	6.69	-	6.69	168.62	-	-
2841-21			Inter - Bldgs and Grn: WTW	-						
				-	-	-	-	-	-	-
2850-21			EQUIPMENT REPAIR & MAINTENANCE: WTW	46.76						
07	7/31/2017	AJ-086317	EQUIPMENT REPAIR LAKIN CAMPUS		0.67			47.43		
07	7/31/2017	AP-005031	BISHOP BUSINESS EQUIPMENT CO /IN: JULY-2017		0.94			48.37		
				46.76	1.61	-	1.61	48.37	-	-
2880-21			PROPERTY INS/TAXES: WTW	107.93						
07	7/31/2017	AJ-086328	PROP INS/TAXES ALLOCATION		16.34			124.27		
				107.93	16.34	-	16.34	124.27	-	-
3100-21			PRINTING & PUB.: WTW	58.31						
07	7/31/2017	AJ-086339	PRINTING & PUBLICATION ALLOCATION		8.30			66.61		
				58.31	8.30	-	8.30	66.61	-	-
3210-21			MILEAGE/EXPENSE: WTW	406.33						
07	7/31/2017	PR-000372	EXP REIMBURSEMENT		224.69			631.02		
				406.33	224.69	-	224.69	631.02	-	-
3220-21			OUT OF TOWN TRAVEL: WTW	54.15						
				54.15	-	-	-	54.15	-	-
3250-21			AGENCY VEHICLE OPERATE.COSTS : WTW	-						
				-	-	-	-	-	-	-
3280-21			AUTOMOBILE INSURANCE: WTW	103.09						
07	7/31/2017	AJ-086345	AUTO INS ALLOCATION		17.20			120.29		
				103.09	17.20	-	17.20	120.29	-	-

Period	Date	Journal	Comments	Beginning Balance	Debit	Credit	Net Change	Ending Balance	Salaries & Benefits	Atty, Legal, Audit, Acct, POS, Interdept
3300-21			CONFERENCE/CONVENTION/TRIPS: WTW	-						
				-	-	-	-	-	-	-
3500-21			SPECIFIC ASSISTANCE INDIVIDUAL: WTW	-						
				-	-	-	-	-	-	-
4100-21			ORGANIZATION DUES: WTW	-						
				-	-	-	-	-	-	-
4300-21			EQUIPMENT/FIXED ASSETS: WTW	124.08						
07	7/31/2017	AJ-086352	EQUIPMENT FIXED ASSETS		19.21			143.29		
				124.08	19.21	-	19.21	143.29	-	-
4900-21			MISCELLANEOUS: WTW	14,887.28						
								14,887.28		
				14,887.28	-	-	-	14,887.28	-	-
				-	-	-	-	-	-	-
				0.00	3,288.99	3,288.99	-	0.00	2,501.99	33.37
			Calculation of Admin costs (=17.9% of expenses excluding Loan Guarantee Fur	510.39						
			Expenses inc Admin Costs						2,501.99	33.37
									2,501.99	33.37

Check

Progress Report

Title: Heartland Family Service- Ways to Work

Date: 07/01/2017 -07/31/2017

Title: MAPA bill \$ 2,659.98 out of \$22,000

1. Work Completed for Current Billing Period:

- a. The Ways to Work program currently has 2 people shopping for a vehicle.

2. Anticipated Work for Next Billing Period:

- a. Same as prior month

3. Information Needed from FTA/MAPA:

- a. No information is needed.

4. Percent of Work Completed to Date:

- a. 78% of grant utilized

5. Outstanding Issues:

Data

1. Number of repossessions in the month (bought back loans)

- a. 0

2. Number of new closed loans in the month

- a. 0

3. Number of loans outstanding

- a. 8

4. Other.....

- a.

5. Narrative

- a. Program inquiries and financial education attendance continue to be consistent. Continuing efforts of community awareness.

7/31/2017

JULY-2017

INV's 385291, 385719 & 385725

2,701.50

0.00

2,701.50



Check: 144593

8/3/2017

BISHOP BUSINESS EQUIPMENT CO

2,701.50

144593



2101 S. 42ND ST.
OMAHA, NE 68105
402-553-3000
A United Way Member Agency

AMERICAN NATIONAL BANK
OMAHA, NEBRASKA 68114

NUMBER

27-85/1040

*TWO THOUSAND SEVEN HUNDRED ONE AND 50 / 100

DATE

AMOUNT

PAY
TO THE
ORDER
OF

BISHOP BUSINESS EQUIPMENT CO
4125 S 94TH ST
OMAHA, NE 68127

8/3/2017

*****2,701.50*

BISHOPS

A SECOND SIGNATURE REQUIRED FOR CHECKS OVER 1,000 DOLLARS



⑈ 144593 ⑈ ⑆ 104000854⑆ 3285463 ⑈

HEARTLAND FAMILY SERVICE

144593

FILE COPY

July

Prog. Serv. _____
Amt. 2,701.50
Ckr. DB
Appr. _____
Acct. No. _____

BISHOPS BUSINESS EQUIPMENT

7/31/2017

Invoice #'s 385291, 385719 - 385725

Account Name	2850-	Total
Administration	03	\$689.24
Development	04	\$0.00
NE Behavioral Health	05	\$170.00
Generations Center	06	\$26.67
NE Family Works Residential	07	\$328.20
Heartland Housing Connections	08	\$0.00
Better Together	09	\$13.91
Gamblers Assistance Iowa	10	\$8.11
Hardship Assistance	11	\$73.34
Child & Adult Care Food Program	12	\$66.69
Solomon Girls Center	13	\$11.43
NE HPRP/OPPORTUNITIES	14	\$106.34
Community Education	15	\$89.89
Iowa Counseling	16	\$202.23
Samaritan Housing	17	\$27.43
Domestic Abuse Program NE	18	\$34.05
Prevention DFC	19	\$3.62
Youth Links	20	\$108.72
Ways to Work	21	\$0.94
Nebraska Gamblers	22	\$9.05
Integrated Health Home	23	\$39.90
Sarpy Juvenile Justice	24	\$0.12
In Home Parenting Time	25	\$15.32
Iowa Assertive Community Trmt	26	\$32.72
Bridges	27	\$0.00
Iowa Mental Health Crt	28	\$30.14
Family Works Iowa	29	\$36.98
Therapeutic School	30	\$48.70
Nebraksa Tracker-Inactive	31	\$0.00
Assessment Center	32	\$0.00
Passages	33	\$49.04
PCHL Rapid Re-housing	34	\$87.51
Fremont Childrens Shelter	35	\$48.77
Heartland Housing Solutions	36	\$18.01
Heartland Homes	37	\$6.76
ASAP	38	\$65.70
Ready in 5	39	\$1.99
Heartland Housing Beginnings	40	\$25.32
DCYC	41	\$0.00
Transitions	42	\$1.88
Family Crisis Mediation	43	\$8.28
Baby Talk	44	\$36.84
Refugee Juvenile Justice Adv	45	\$3.17

POSTED

Prevention - Block	46	\$16.18	
Metro Home Base/do not use	47	\$0.00	
Heartland Housing Navigation	48	\$0.00	
In Home Support-Fremont	49	\$0.00	
Prevention - TFN/MOTAC	50	\$11.07	
Prevention - SPF/LiveWise	51	\$0.18	
In Home Family Support	52	\$27.86	
PCHL Prevention	53	\$22.88	
IBH - School Based Services	54	\$8.48	
Child & Family Center	55	\$54.35	
NE Family Works Apts NOT IN USE (Move to 07)	56	\$0.00	
The Coeur Group	57	\$1.50	
VOCA - Nebraska	58	\$0.02	
VAWA	59	\$0.00	
SPSS	60	\$0.00	
VOCA - Iowa	61	\$0.00	
Dr Paul	57	\$3.73	Com: Dr Paul
Dr Coy	57	\$6.55	Com: Dr Coy
Integrated Therapy	57	\$21.67	Com: Integrated Therapy
		<u>\$2,701.50</u>	



4125 S 94th St - Omaha 68127
 5253 R St - Lincoln 68504
 1.800.933.9583 / 402.537.4379 fx
 www.bbec.com

CONTRACT INVOICE

Invoice Number: 385291
 Invoice Date: 07/25/2017

REMIT TO:
 Bishop Business
 4125 S 94th Street
 Omaha, NE 68127

Bill To: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Customer: Heartland Family Services Couer Group
 900 So 74th Plaza Suite 400
 Omaha, NE 68114-4667

Account No	Payment Terms	Due Date	Invoice Total	Balance Due	
103343	Due Upon Receipt	08/09/2017	\$ 33.48	\$ 33.48	
Contract Number	Contact	Contract Amount	P.O. Number	Start Date	Exp. Date
SC5389-01	HFS Couer Group	\$ 31.29	HFS Couer Group	08/28/2016	
Remarks					
THIS CHARGE IS FOR BLACK, WHITE & COLOR COPIES ON BP504 - HFS Couer Group -AT COST PER COPY MONTHLY - PUT ON WORKSHEET WITH THE UNITS					

Summary:

Contract base rate charge for this billing period \$0.00
 Contract overage charge for the 06/28/2017 to 07/27/2017 overage period \$31.29 **
 **See overage details below \$31.29

Detail:

Equipment included under this contract

Toshiba/TF354C

Number	Serial Number	Base Adj.	Location
BP504	CQF-112689	\$0.00	Heartland Family Services Couer Group 900 So 74th Plaza Suite 400 Omaha, NE 68114-4667

Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B/W	B/W	257,528	260,509		2,981	0	2,981	\$0.006000	\$17.89
Color	COLOR	274,625	274,893		268	0	268	\$0.050000	\$13.40
									\$31.29

33.48 +
 80.08 +
 14.92 +
 421.14 +
 1,218.61 +
 265.92 +
 179.71 +
 487.64 +

008

THANK YOU FOR YOUR BUSINESS!

2,701.506 +

Invoice SubTotal	\$31.29
Tax	\$2.19
Invoice Total	\$33.48
Balance Due:	\$33.48



4125 S 94th St - Omaha 68127
 5253 R St - Lincoln 68504
 1.800.933.9583 / 402.537.4379 fx
 www.bbec.com

CONTRACT INVOICE

Invoice Number: 385719
 Invoice Date: 07/31/2017

REMIT TO:
 Bishop Business
 4125 S 94th Street
 Omaha, NE 68127

Bill To: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Customer: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Account No	Payment Terms	Due Date	Invoice Total	Balance Due	
103343	Due Upon Receipt	08/15/2017	\$ 80.08	\$ 80.08	
Contract Number	Contact	Contract Amount	P.O. Number	Start Date	Exp. Date
SC4031-01		\$ 74.84	DIANE BENTON	09/28/2013	
Remarks					
THIS IS FOR YOUR BLACK, WHITE & COLOR COPIES AT COST PER COPY - put on worksheet for customer					

Summary:

Contract base rate charge for this billing period	\$0.00
Contract overage charge for the 06/28/2017 to 07/27/2017 overage period	\$74.84 **
**See overage details below	\$74.84

Detail:

Equipment included under this contract

Toshiba/TF654CT

Number	Serial Number	Base Adj.	Location						
BK385	CCD-110160	\$0.00	Heartland Family Service 2101 S 42nd Street Omaha, NE 68105-2909						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B/W	B/W	290,808	291,565		757	0	757	\$0.006000	\$4.54
Color	COLOR	785,147	786,553		1,406	0	1,406	\$0.050000	\$70.30
									\$74.84

THANK YOU FOR YOUR BUSINESS!

Invoice SubTotal	\$74.84
Tax	\$5.24
Invoice Total	\$80.08
Balance Due:	\$80.08



4125 S 94th St - Omaha 68127
 5253 R St - Lincoln 68504
 1.800.933.9583 / 402.537.4379 fx
 www.bbec.com

CONTRACT INVOICE

Invoice Number: 385720
 Invoice Date: 07/31/2017

REMIT TO:
 Bishop Business
 4125 S 94th Street
 Omaha, NE 68127

Bill To: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Customer: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Account No	Payment Terms	Due Date	Invoice Total	Balance Due	
103343	Due Upon Receipt	08/15/2017	\$ 14.92	\$ 14.92	
Contract Number	Contact	Contract Amount	P.O. Number	Start Date	Exp. Date
SC4973-01		\$ 13.94	BP213	09/28/2015	
Remarks					
THIS CHARGE IS FOR COPIES AT COST PER COPY - put on worksheet for Heartland Family					

Summary:

Contract base rate charge for this billing period	\$0.00
Contract overage charge for the 06/28/2017 to 07/27/2017 overage period	\$13.94 **
**See overage details below	\$13.94

Detail:

Equipment included under this contract

Toshiba/T355E

Number	Serial Number	Base Adj.	Location						
BP213	CPG-912476	\$0.00	Heartland Family Service 2101 S 42nd Street Omaha, NE 68105-2909						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B\W	B/W	113,529	115,932		2,403	0	2,403	\$0.005800	\$13.94 \$13.94

THANK YOU FOR YOUR BUSINESS!

Invoice SubTotal	\$13.94
Tax:	\$0.98
Invoice Total	\$14.92
Balance Due:	\$14.92



4125 S 94th St - Omaha 68127
 5253 R St - Lincoln 68504
 1.800.933.9583 / 402.537.4379 tx
 www.bbec.com

CONTRACT INVOICE

Invoice Number: 385721
 Invoice Date: 07/31/2017

REMIT TO:
 Bishop Business
 4125 S 94th Street
 Omaha, NE 68127

Bill To: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Customer: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Account No	Payment Terms	Due Date	Invoice Total	Balance Due	
103343	Due Upon Receipt	08/15/2017	\$ 421.14	\$ 421.14	
Contract Number	Contact	Contract Amount	P.O. Number	Start Date	Exp. Date
XEROX-E2B659739-01		\$ 393.59	.	10/24/2016	
Remarks					
THIS CHARGE IS FOR BLACK & WHITE AND COLOR COPIES AT COST PER COPY - MONTHLY					

Summary:

Contract base rate charge for this billing period \$0.00
 Contract overage charge for the 06/24/2017 to 07/23/2017 overage period \$393.59 **
 **See overage details below \$393.59

Detail:

Equipment included under this contract

Xerox/XC70

Number	Serial Number	Base Adj.	Location						
BR901	E2B-659739	\$0.00	Heartland Family Service 2101 S 42nd Street Omaha, NE 68105-2909						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B/W	B/W	28,564	31,455		2,891	0	2,891	\$0.008000	\$23.13
Color	COLOR	88,108	95,826		7,718	0	7,718	\$0.048000	\$370.46
									\$393.59

THANK YOU FOR YOUR BUSINESS!

Invoice SubTotal	\$393.59
Tax:	\$27.55
Invoice Total	\$421.14
Balance Due:	\$421.14



4125 S 94th St - Omaha 68127
 5253 R St - Lincoln 68504
 1.800.933.9583 / 402.537.4379 fx
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CONTRACT INVOICE

Invoice Number: 385722
 Invoice Date: 07/31/2017

REMIT TO:
 Bishop Business
 4125 S 94th Street
 Omaha, NE 68127

Bill To: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Customer: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Account No	Payment Terms	Due Date	Invoice Total	Balance Due	
103343	Due Upon Receipt	08/15/2017	\$ 1,218.61	\$ 1,218.61	
Contract Number	Contact	Contract Amount	P.O. Number	Start Date	Exp. Date
XEROX-MX4327650-01		\$ 1,143.34	DIANE BENTON	09/28/2013	
Remarks					
THIS CHARGE IS FOR ALL COPIES AT COST PER COPY - PUT ON WORKSHEET FOR CUSTOMER					

Summary:

Contract base rate charge for this billing period \$0.00 *
 Contract overage charge for the 06/28/2017 to 07/27/2017 overage period \$1,143.34 **
 *Sum of equipment base charges **See overage details below \$1,143.34

Detail:

Equipment included under this contract

Xerox/X5845/APT2

Number	Serial Number	Base Charge	Location						
BL712	EX7-387139	\$0.00	Heartland Family Service 2101 S 42nd Street Omaha, NE 68105-2909						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B\W	B/W	96,933	108,058		11,125	*** See overage details below			\$0.00

Xerox/X5845/APTXF2

Number	Serial Number	Base Charge	Location						
BL850(2)	EX7-396327	\$0.00	Heartland Family Service 600 9th Avenue Council Bluffs, IA 51501						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B\W	B/W	94,061	96,863		2,802	*** See overage details below			\$0.00

Number	Serial Number	Base Charge	Location						
BL853	EX7-396220	\$0.00	Heartland Family Service-Better Together 2517 Caldwell Street Omaha, NE 68131-4602						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B\W	B/W	167,114	169,497		2,383	*** See overage details below			\$0.00

Number	Serial Number	Base Charge	Location						
BL856	EX7-392695	\$0.00	Heartland Family Service 6720 N 30th Street Omaha, NE 68112-3211						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B\W	B/W	392,415	400,944		8,529	*** See overage details below			\$0.00



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 5253 R St - Lincoln 68504
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CONTRACT INVOICE

Invoice Number: 385722
 Invoice Date: 07/31/2017

REMIT TO:
 Bishop Business
 4125 S 94th Street
 Omaha, NE 68127

Bill To: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Customer: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Account No	Payment Terms	Due Date	Invoice Total	Balance Due
103343	Due Upon Receipt	08/15/2017	\$ 1,218.61	\$ 1,218.61

Number	Serial Number	Base Charge	Location						
BL860	EX7-392587	\$0.00	Heartland Family Service Bellevue, NE 68005						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B\W	B/W	126,360	129,247		2,887	*** See overage details below			\$0.00

Number	Serial Number	Base Charge	Location						
BL861	EX7-392502	\$0.00	Heartland Family Services - Family Works- Day Care 4847 Sahler Street Omaha, NE 68104						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B\W	B/W	404,910	415,600		10,690	*** See overage details below			\$0.00

Number	Serial Number	Base Charge	Location						
BL865	EX7-392702	\$0.00	Heartland Family Service - Youth Links-NOIC 4318 Fort Street - 1ST FLOOR Omaha, NE 68111-1849						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B\W	B/W	72,691	73,658		967	*** See overage details below			\$0.00

Xerox/X5855/APTXF2

Number	Serial Number	Base Charge	Location						
BL863	EX7-392658	\$0.00	Heartland Family Service 2101 S 42nd Street Omaha, NE 68105-2909						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B\W	B/W	684,736	697,313		12,577	*** See overage details below			\$0.00

Xerox/X7845/PTXF2

Number	Serial Number	Base Charge	Location						
BL855	MX4-327604	\$0.00	Heartland Family Service Homeless Call Center 1941 S 42nd Street - Suite 375 Omaha, NE 68105						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B\W	B/W	867,069	880,609		13,540	*** See overage details below			
Color	COLOR	34,397	39,300		4,903	*** See overage details below			\$0.00

Xerox/X7855/PTXF2



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CONTRACT INVOICE

Invoice Number: 385722
 Invoice Date: 07/31/2017

REMIT TO:
 Bishop Business
 4125 S 94th Street
 Omaha, NE 68127

Bill To: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Customer: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Account No	Payment Terms	Due Date	Invoice Total	Balance Due
103343	Due Upon Receipt	08/15/2017	\$ 1,218.61	\$ 1,218.61

Number	Serial Number	Base Charge	Location
BL854	MX4-327458	\$0.00	Heartland Family Service 6720 N 30th Street Omaha, NE 68112-3211
<u>Meter Type</u>	<u>Meter Group</u>	<u>Begin Meter</u>	<u>End Meter</u>
B\W	B/W	309,800	313,787
Color	COLOR	298,407	301,049
			Credits
			Total
			Covered
			Billable
			Rate
			Overage
			*** See overage details below
			*** See overage details below
			\$0.00

Number	Serial Number	Base Charge	Location
BL858	MX4-327605	\$0.00	Heartland Family Service 302 American Parkway Papillion, NE 68046-6270
<u>Meter Type</u>	<u>Meter Group</u>	<u>Begin Meter</u>	<u>End Meter</u>
B\W	B/W	440,165	447,464
Color	COLOR	76,231	79,588
			Credits
			Total
			Covered
			Billable
			Rate
			Overage
			*** See overage details below
			*** See overage details below
			\$0.00

Number	Serial Number	Base Charge	Location
BL866	MX4-327650	\$0.00	Heartland Family Service 2101 S 42nd Street Omaha, NE 68105-2909
<u>Meter Type</u>	<u>Meter Group</u>	<u>Begin Meter</u>	<u>End Meter</u>
B\W	B/W	243,557	250,706
Color	COLOR	100,472	104,838
			Credits
			Total
			Covered
			Billable
			Rate
			Overage
			*** See overage details below
			*** See overage details below
			\$0.00



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CONTRACT INVOICE

Invoice Number: 385722
 Invoice Date: 07/31/2017

REMIT TO:
 Bishop Business
 4125 S 94th Street
 Omaha, NE 68127

Bill To: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Customer: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Account No	Payment Terms	Due Date	Invoice Total	Balance Due
103343	Due Upon Receipt	08/15/2017	\$ 1,218.61	\$ 1,218.61

Overage Details

Meter Group	Total Copies	Covered Copies	Billable	Rate	Total
B/W	83,935	0	0	83,935 \$0.005800	\$486.82
				Base Amount:	\$0.00
					\$486.82
Meter Type	Equip. Number	Serial Number	Begin	End	Copies
B/W	BL712	EX7-387139	96,933	108,058	11,125
B/W	BL850(2.000000)	EX7-396327	94,061	96,863	2,802
B/W	BL853	EX7-396220	167,114	169,497	2,383
B/W	BL854	MX4-327458	309,800	313,787	3,987
B/W	BL855	MX4-327604	867,069	880,609	13,540
B/W	BL856	EX7-392695	392,415	400,944	8,529
B/W	BL858	MX4-327605	440,165	447,464	7,299
B/W	BL860	EX7-392587	126,360	129,247	2,887
B/W	BL861	EX7-392502	404,910	415,600	10,690
B/W	BL863	EX7-392658	684,736	697,313	12,577
B/W	BL865	EX7-392702	72,691	73,658	967
B/W	BL866	MX4-327650	243,557	250,706	7,149
Meter Group	Total Copies	Covered Copies	Billable	Rate	Total
COLOR	15,268	0	0	15,268 \$0.043000	\$656.52
				Base Amount:	\$0.00
					\$656.52
Meter Type	Equip. Number	Serial Number	Begin	End	Copies
Color	BL854	MX4-327458	298,407	301,049	2,642
Color	BL855	MX4-327604	34,397	39,300	4,903
Color	BL858	MX4-327605	76,231	79,588	3,357
Color	BL866	MX4-327650	100,472	104,838	4,366
Total Grouped Overage Charges:					\$1,143.34
Total Grouped Base Charges:					\$0.00
Total Meter Group Charges:					\$1,143.34

THANK YOU FOR YOUR BUSINESS!

Invoice SubTotal	\$1,143.34
Tax:	\$75.27
Invoice Total	\$1,218.61
Balance Due:	\$1,218.61



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CONTRACT INVOICE

Invoice Number: 385723
 Invoice Date: 07/31/2017

REMIT TO:
 Bishop Business
 4125 S 94th Street
 Omaha, NE 68127

Bill To: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Customer: Heartland Family Services - Family Works- Day Care
 4847 Sahler Street
 Omaha, NE 68104

Account No	Payment Terms	Due Date	Invoice Total	Balance Due	
103343	Due Upon Receipt	08/15/2017	\$ 265.92	\$ 265.92	
Contract Number	Contact	Contract Amount	P.O. Number	Start Date	Exp. Date
SC5390-01	HFS DAY CARE	\$ 265.92	HFS DAY CARE	08/28/2016	
Remarks					
THIS CHARGE IS FOR YOUR BLACK, WHITE & COLOR COPIES ON BP503 - HFS DAY CARE- AT COST PER COPY MONTHLY - PUT ON WORKSHEET WITH ALL THE OTHER UNITS					

Summary:

Contract base rate charge for this billing period	\$0.00
Contract overage charge for the 06/28/2017 to 07/27/2017 overage period	\$265.92 **
**See overage details below	\$265.92

Detail:

Equipment included under this contract

Toshiba/TF454C

Number	Serial Number	Base Adj.	Location
BP503	CMG-221125	\$0.00	Heartland Family Services - Family Works- Day Care 4847 Sahler Street Omaha, NE 68104

Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B\W	B/W	156,674	161,578 *		4,904	0	4,904	\$0.006000	\$29.42
Color	COLOR	36,397	41,127 *		4,730	0	4,730	\$0.050000	\$236.50
* Estimated meter reading									\$265.92

THANK YOU FOR YOUR BUSINESS!

Invoice SubTotal	\$265.92
Tax:	\$0.00
Invoice Total	\$265.92
Balance Due:	\$265.92



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CONTRACT INVOICE

Invoice Number: 385724
 Invoice Date: 07/31/2017

REMIT TO:
 Bishop Business
 4125 S 94th Street
 Omaha, NE 68127

Bill To: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Customer: Heartland Family Service-Jefferson House
 437 Jefferson Road
 Fremont, NE 68025

Account No	Payment Terms	Due Date	Invoice Total	Balance Due	
103343	Due Upon Receipt	08/15/2017	\$ 179.71	\$ 179.71	
Contract Number	Contact	Contract Amount	P.O. Number	Start Date	Exp. Date
SC3972-01		\$ 179.71	Diane Benton	09/28/2013	
Remarks					
THIS IS COST PER COPY FOR THIS UNIT - put on worksheet for Heartland Family					

Summary:

Contract base rate charge for this billing period \$0.00
 Contract overage charge for the 06/28/2017 to 07/27/2017 overage period \$179.71 **
 **See overage details below \$179.71

Detail:

Equipment included under this contract

Xerox/X5845/APTXF2

Number	Serial Number	Base Adj.	Location						
BL884	EX7-394831	\$0.00	Heartland Family Service-Jefferson House 437 Jefferson Road Fremont, NE 68025						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B\W	B/W	275,949	284,355		8,406	*** See overage details below			\$0.00

Xerox/X7855/PTXF2

Number	Serial Number	Base Adj.	Location						
BL859	MX4-327661	\$0.00	Heartland Family Service - Youth Links-NOIC 4318 Fort St 2ND FLOOR YOUTH LINKS Omaha, NE 68111-1849						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B\W	B/W	524,417	530,560		6,143	*** See overage details below			
Color	COLOR	41,217	43,434		2,217	0	2,217	\$0.043000	\$95.33
									\$95.33

Overage Details

Meter Group	Total Copies	Covered Copies	Billable	Rate	Total
B/W	14,549	0	0	14,549 \$0.005800	\$84.38
				Base Amount:	\$0.00
					\$84.38
Meter Type	Equip. Number	Serial Number	Begin	End	Copies
B\W	BL859	MX4-327661	524,417	530,560	6,143
B\W	BL884	EX7-394831	275,949	284,355	8,406
Total Grouped Overage Charges:					\$84.38
Total Grouped Base Charges:					\$0.00
Total Meter Group Charges:					\$84.38



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5253 R St - Lincoln 68504
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REMIT TO:
Bishop Business
4125 S 94th Street
Omaha, NE 68127

CONTRACT INVOICE

Invoice Number: 385724
Invoice Date: 07/31/2017

Bill To: Heartland Family Service
2101 S 42nd Street
Omaha, NE 68105-2909

Customer: Heartland Family Service-Jefferson House
437 Jefferson Road
Fremont, NE 68025

THANK YOU FOR YOUR BUSINESS!

Invoice SubTotal	\$179.71
Tax	\$0.00
Invoice Total	\$179.71
Balance Due:	\$179.71



4125 S 94th St - Omaha 68127
 5253 R St - Lincoln 68504
 1.800.933.9583 / 402.537.4379 fx
 www.bbec.com

CONTRACT INVOICE

Invoice Number: 385725
 Invoice Date: 07/31/2017

REMIT TO:
 Bishop Business
 4125 S 94th Street
 Omaha, NE 68127

Bill To: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Customer: Heartland Family Service
 515 E Broadway
 Council Bluffs, IA 51503

Account No	Payment Terms	Due Date	Invoice Total	Balance Due	
103343	Due Upon Receipt	08/15/2017	\$ 487.64	\$ 487.64	
Contract Number	Contact	Contract Amount	P.O. Number	Start Date	Exp. Date
SC3973-01		\$ 455.74	.	09/28/2013	
Remarks					
THIS IS COST PER COPY ON ALL UNITS - put on worksheet for Heartland Family					

Summary:

Contract base rate charge for this billing period \$0.00 *
 Contract overage charge for the 06/28/2017 to 07/27/2017 overage period \$455.74 **
 *Sum of equipment base charges **See overage details below \$455.74

Detail:

Equipment included under this contract

Xerox/X5845/APTXF2

Number	Serial Number	Base Charge	Location						
BL882	EX7-395103	\$0.00	Heartland Family Service 1515 Avenue J Council Bluffs, IA 51503						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B\W	B/W	266,885	272,653		5,768	*** See overage details below			\$0.00

Number	Serial Number	Base Charge	Location						
BL883	EX7-394726	\$0.00	Heartland Family Service 1722 Avenue C Council Bluffs, IA 51501						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B\W	B/W	364,542	370,501		5,959	*** See overage details below			\$0.00

Xerox/X5855/APTXF2

Number	Serial Number	Base Charge	Location						
BL875	EX7-392588	\$0.00	Heartland Family Service 2912 9th Avenue Council Bluffs, IA 51501						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B\W	B/W	570,410	570,455		45	*** See overage details below			\$0.00

Number	Serial Number	Base Charge	Location						
BL876	EX7-398699	\$0.00	Heartland Family Service 515 E Broadway Council Bluffs, IA 51503						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B\W	B/W	695,214	708,911		13,697	*** See overage details below			\$0.00

Xerox/X7845/PTXF2



4125 S 94th St - Omaha 68127
 5253 R St - Lincoln 68504
 1.800.933.9583 / 402.537.4379 fx
 www.bbec.com

CONTRACT INVOICE

Invoice Number: 385725

Invoice Date: 07/31/2017

REMIT TO:
 Bishop Business
 4125 S 94th Street
 Omaha, NE 68127

Bill To: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Customer: Heartland Family Service
 515 E Broadway
 Council Bluffs, IA 51503

Account No	Payment Terms	Due Date	Invoice Total	Balance Due
103343	Due Upon Receipt	08/15/2017	\$ 487.64	\$ 487.64

Number	Serial Number	Base Charge	Location						
BL874	MX4-327593	\$0.00	Heartland Family Service 1515 Avenue J Council Bluffs, IA 51503						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B\W	B/W	301,777	309,733		7,956	*** See overage details below			
Color	COLOR	50,248	50,773		525	*** See overage details below			
									\$0.00

Number	Serial Number	Base Charge	Location						
BL877	MX4-327602	\$0.00	Heartland Family Service 515 E Broadway Council Bluffs, IA 51503						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B\W	B/W	680,259	698,964		18,705	*** See overage details below			
Color	COLOR	54,176	54,635		459	*** See overage details below			
									\$0.00

Number	Serial Number	Base Charge	Location						
BN523	MX4-740794	\$0.00	Heartland Family Service 705 N 16th Street Council Bluffs, IA 51501						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B\W	B/W	130,037	136,664		6,627	*** See overage details below			
Color	COLOR	30,099	30,737		638	*** See overage details below			
									\$0.00

Xerox/X7855/PTXF2

Number	Serial Number	Base Charge	Location						
BL873	MX4-327598	\$0.00	Heartland Family Service 2912 9th Avenue Council Bluffs, IA 51501						
Meter Type	Meter Group	Begin Meter	End Meter	Credits	Total	Covered	Billable	Rate	Overage
B\W	B/W	444,801	445,314		513	*** See overage details below			
Color	COLOR	228,412	229,394		982	*** See overage details below			
									\$0.00



4125 S 94th St - Omaha 68127
 5253 R St - Lincoln 68504
 1.800.933.9583 / 402.537.4379 fx
 www.bb.ec.com

CONTRACT INVOICE

Invoice Number: 385725
 Invoice Date: 07/31/2017

REMIT TO:
 Bishop Business
 4125 S 94th Street
 Omaha, NE 68127

Bill To: Heartland Family Service
 2101 S 42nd Street
 Omaha, NE 68105-2909

Customer: Heartland Family Service
 515 E Broadway
 Council Bluffs, IA 51503

Account No	Payment Terms	Due Date	Invoice Total	Balance Due
103343	Due Upon Receipt	08/15/2017	\$ 487.64	\$ 487.64

Overage Details

Meter Group	Total Copies	Covered Copies	Billable	Rate	Total
B/W	59,270	0	59,270	\$0.005800	\$343.77
				Base Amount:	\$0.00
					\$343.77
Meter Type	Equip. Number	Serial Number	Begin	End	Copies
B\W	BL873	MX4-327598	444,801	445,314	513
B\W	BL874	MX4-327593	301,777	309,733	7,956
B\W	BL875	EX7-392588	570,410	570,455	45
B\W	BL876	EX7-398699	695,214	708,911	13,697
B\W	BL877	MX4-327602	680,259	698,964	18,705
B\W	BL882	EX7-395103	266,885	272,653	5,768
B\W	BL883	EX7-394726	364,542	370,501	5,959
B\W	BN523	MX4-740794	130,037	136,664	6,627
Meter Group	Total Copies	Covered Copies	Billable	Rate	Total
COLOR	2,604	0	2,604	\$0.043000	\$111.97
				Base Amount:	\$0.00
					\$111.97
Meter Type	Equip. Number	Serial Number	Begin	End	Copies
Color	BL873	MX4-327598	228,412	229,394	982
Color	BL874	MX4-327593	50,248	50,773	525
Color	BL877	MX4-327602	54,176	54,635	459
Color	BN523	MX4-740794	30,099	30,737	638
Total Grouped Overage Charges:					\$455.74
Total Grouped Base Charges:					\$0.00
Total Meter Group Charges:					\$455.74

THANK YOU FOR YOUR BUSINESS!

Invoice SubTotal	\$455.74
Tax:	\$31.90
Invoice Total	\$487.64
Balance Due:	\$487.64

7/31/2017

10249384

19.80

0.00

19.80



Check: 144599

8/3/2017

CORELOGIC CREDCO, LLC

19.80

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OMAHA, NE 68105
402-553-3000
A United Way Member Agency

AMERICAN NATIONAL BANK
OMAHA, NEBRASKA 68114

144599

NUMBER

27-85/1040

*NINETEEN AND 80 / 100

DATE

AMOUNT

PAY TO THE ORDER OF

CORELOGIC CREDCO, LLC
PO BOX 847070
DALLAS, TX 75284-8470

8/3/2017

*****19.80*

CORELOG

A SECOND SIGNATURE REQUIRED FOR CHECKS OVER 1,000 DOLLARS



⑈ 144599 ⑈ ⑆ 104000854 ⑆ 3285463 ⑈

HEARTLAND FAMILY SERVICE

144599

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 10277 Scripps Ranch Blvd.
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 www.CredcoServices.com



POSTED

STATEMENT FOR :

JENNY SCHULTE
 HEARTLAND FAMILY SERVICES
 2101 S. 42ND STREET
 OMAHA, NE 68105

Prog. Serv. _____
 Amt. 19.80
 Cler. jam
 Appr. _____
 Acct. No. 2490-21

JUL

For questions regarding this statement, please e-mail us at credco.billing@corelogic.com, call (800) 294-5566 or fax to (800) 998-4747.

Account Number	Statement Number	Statement Date	Service Period
4255199	10249384	08/01/17	07/01/17 - 07/31/17

Balance Forward Previous Month	\$0.00
Adjustments	\$0.00
Payments	\$0.00
Current Charges	\$19.24
Third Party Fees	\$0.00
Surcharges	\$0.56
Sales Tax	\$0.00
Total Due by 08/25/17	\$19.80

AGED BALANCE SUMMARY

Current	30 Days	60 Days	90 Days	120+ Days	Total
\$19.80	\$0.00	\$0.00	\$0.00	\$0.00	\$19.80

Credit Card Authorization Form

Account Number : 4255199

Statement Number : 10249384

HEARTLAND FAMILY SERVICES

I would like to pay on my Credco account by charging the following credit card:

VISA MasterCard American Express Discover Card

Amount to Charge : _____

Card Number : _____

Card Verification
Number : _____

Expiration Date : _____

(Necessary to charge your account)

Name as it appears on card : _____

Signature : _____

(Necessary to charge your account)

Cardholder's Address : _____

City : _____ State : _____ Zip Code : _____

Phone Number : _____

I understand that this is not retained for future use.

Fax Credit Card payments directly to
the Accounts Receivable Department at 800-998-4747.

To ensure accuracy, please print neatly.

Address changes may be faxed directly to the Account Set Up Department at 800-494-2580.

Account Number : 4255199

HEARTLAND FAMILY SERVICES

New Address Change (check all that apply) : Billing address Branch / Location address Corporate address

New Street Address : _____

City : _____ State : _____ Zip Code : _____

Telephone Number : _____ Fax Number : _____

Attention : _____

Change Requested By : _____ Title : _____

Summary Of Usage

	0-Bureau	1-Bureau	2-Bureau	3-Bureau	Total
IND	0	0	2	0	2
IND ID SCORE ORIG	2	0	0	0	2
IND PS OFAC ORIG	2	0	0	0	2
SCOREDISCLOSURE	0	0	2	0	2
Totals :	4	0	4	0	8

Account Num : 4255199
Statement Num : 10249384

TRANSACTIONS

Name	Time Stamp	Reference Num	Product / Access Type	Type	Bureaus	Charge	Tax	Total *
BillFlag - Notes								
SANDERS, SHEENA 2017-07-18T15:05:26.566-07:00	07/18/17	112132122310000	INSTANT MERGE/ORIGINAL	IND	EFX,XPN	\$9.90	\$0.00	\$9.90 /
FOSTER, ANGELIQUE 2017-07-25T11:16:58.906-07:00	07/25/17	112139639050000	INSTANT MERGE/ORIGINAL	IND	EFX,XPN	\$9.90	\$0.00	\$9.90 /

GRAND TOTALS

Totals : **\$19.80 \$0.00 \$19.80**

* Surcharge included in price
† Includes secondary use charges

Karla McKay

From: Lisa Picker
Sent: Wednesday, August 02, 2017 9:03 AM
To: Karla McKay
Subject: FW: CoreLogic Credco invoice for July 10249384
Attachments: HFS 4255199 Jul 17.pdf

Good morning Karla

This is okay to pay 😊

Thanks
Lisa

From: Karla McKay
Sent: Wednesday, August 02, 2017 8:48 AM
To: Lisa Picker
Subject: CoreLogic Credco invoice for July 10249384

Hi Lisa,

Please see attached invoice for your approval. Thanks.

Karla McKay
Accounts Payable Clerk
Heartland Family Service
402.552.7452
402.553.3133 fax
kmckay@heartlandfamilyservice.org

MAPA JARC GRANT BILLING DOCUMENT

PART IV - Project Budget Worksheet

Project Name: __HEARTLAND FAMILY SERVICE - WAYS TO WORK__

Contact Name: __Joanie Poore, VP__

BUDGET DETAIL	TOTAL JARC BUDGET (ORIGINAL)	8/1/2017 - 8/31/2017		TOTAL COST MONTH	Program to Date	
		JARC	LOCAL MATCH		JARC	LOCAL MATCH
A. OPERATING EXPENSES¹						
1. Salaries and Benefits	30,720	\$ 1,511.00	\$ 978.91	\$ 2,489.90	\$ 12,664.96	\$ 6,927.38
2. Atty, Audit, Acct, POS	2,200	\$ -	\$ 38.80	\$ 38.80	\$ -	\$ 1,597.15
3. Office and Meeting Supplies	400	\$ 0.65	\$ 0.65	\$ 1.30	\$ 38.00	\$ 38.00
4. Phone & Internet	400	\$ 4.51	\$ 4.51	\$ 9.02	\$ 61.10	\$ 61.10
5. Postage & Shipping	220	\$ 2.05	\$ 2.05	\$ 4.10	\$ 22.38	\$ 22.38
6. Building and Occupancy	1,240	\$ 13.41	\$ 13.41	\$ 26.82	\$ 224.46	\$ 224.46
7. Equipment & Equip rep/rent	800	\$ 12.34	\$ 12.34	\$ 24.68	\$ 108.17	\$ 108.17
8. Advertising, Printing and Pubs	840	\$ 72.00	\$ 72.00	\$ 143.99	\$ 105.30	\$ 105.30
9. Mileage, travel, conf, auto ins.	320	\$ 8.60	\$ 8.60	\$ 17.20	\$ 411.33	\$ 411.33
10. Borrower Incentives	-			\$ -	\$ -	\$ -
11. Org Dues & Misc	128		\$ -	\$ -	\$ -	\$ -
12. Administrative Costs	6,732	\$ -	\$ 493.29	\$ 493.29	\$ -	\$ 4,140.43
Subtotal - Operating Expenses	\$ 44,000	\$ 1,624.55	\$ 1,624.55	\$ 3,249.10	\$ 13,635.69	\$ 13,635.69

General Ledger Detail Report
HEARTLAND FAMILY SERVICE (002)
DEPARTMENT 21 - WAYS TO WORK
Detail Postings for Period 08 for August 01-August 31, 2017
Account Number/Description

Period	Date	Journal	Comments	Beginning Balance	Debit	Credit	Net Change	Ending Balance	Salaries & Benefits	Atty, Legal, Audit, Acct, POS, Interdept
1010-21			INCOME FROM SERVICES	(180.00)				(180.00)		
				(180.00)	-	-	-	(180.00)		
1111-21			CONTRIBUTIONS RESTRICTED: WTW	(17,566.71)						
08	8/31/2017	AJ-086815	CONTRIBUTIONS RESTRICTED ALLOCATION			9.22		(17,575.93)		
08	8/31/2017	JE-004163	WTW CLOSING ENTRY			1,034.89		(18,610.82)		
				(17,566.71)	-	1,044.11	(1,044.11)	(18,610.82)		
1334-21			Service Fees - Ways to Work	(25.00)				(25.00)		
				(25.00)	-	-	-	(25.00)		
1700-21			MISCELLANEOUS: WTW	(0.30)						
08	8/31/2017	AJ-086824	MISC INCOME - L CODE			0.01		(0.31)		
				(0.30)	-	0.01	(0.01)	(0.31)		
1701-21			MISCELLANEOUS WTW COLLECTIONS ON DEFAULTED LOANS	(7,041.96)						
08	8/25/2017	CR-021700	Doc: CR 8/25 08/25/17 WAYS TO WORK			50.00		(7,091.96)		
				(7,041.96)	-	50.00	(50.00)	(7,091.96)		
1750-21			SPECIAL EVENTS: WTW	-						
1900-21			UNITED WAY ALLOCAT: WTW	(14,583.31)						
08	42978	AR-000438	UNITED WAY			2,083.33		(16,666.64)		
				(14,583.31)	-	2,083.33	(2,083.33)	(16,666.64)		
1999-21			INDIRECT REV (EXP): OPEN	4,136.55						
08	8/31/2017	JE-004163	WTW INDIRECT CLOSING ENTRY		421.64			4,558.19		
				4,136.55	421.64	-	421.64	4,558.19		
2100-21			SALARIES: DIS. FAM.	15,000.33						
08	8/31/2017	AJ-086840	SALARIES GRANT MANAGERS		25.78			15,026.11	25.78	
08	8/31/2017	AJ-087058	ALLOCATION OF SALARY - LAKIN		0.93			15,027.04	0.93	
08	8/31/2017	PR-000375	SALARIES		2,160.34			17,187.38	2,160.34	
				15,000.33	2,187.05	-	2,187.05	17,187.38	2,187.05	-
2210-21			GROUP HEALTH INSURANCE: WTW	87.09						
08	8/31/2017	PR-000375	HEALTH INS		12.62			99.71	12.62	
				87.09	12.62	-	12.62	99.71	12.62	-
2220-21			RETIREMENT PLAN: WTW	462.37						
08	8/31/2017	PR-000375	RETIREMENT		67.08			529.45	67.08	
				462.37	67.08	-	67.08	529.45	67.08	-
2290-21			OTHER BENEFITS/DIS: WTW	59.15						
08	8/31/2017	PR-000375	LONG TERM DISABILITY		8.66			67.81	8.66	
				59.15	8.66	-	8.66	67.81	8.66	-
2300-21			PAYROLL TAXES: WTW	1,493.49						
08	8/31/2017	AJ-086859	PR TAXES PROF LIAB		36.38			1,529.87	36.38	
08	8/31/2017	AJ-087077	ALLOCATION OF TAXES - LAKIN		0.33			1,530.20	0.33	
08	8/31/2017	PR-000375	PAYROLL TAXES		165.27			1,695.47	165.27	
08	8/31/2017	PR-000375	STATE UNEMPLOYMENT		12.51			1,707.98	12.51	
				1,493.49	214.49	-	214.49	1,707.98	214.49	-
2410-21			ATTORNEY FEES: WTW	1,117.80						
				1,117.80	-	-	-	1,117.80	-	-
2430-21			AUDITING/ACCOUNT FEES: WTW	37.00						
08	8/31/2017	AJ-086871	AUDITING/ACCT FEES ALLOC		4.96			41.96		4.96
				37.00	4.96	-	4.96	41.96	-	4.96
2490-21			OTHER PURCHASE OF SERVICE: WTW	384.66						

Period	Date	Journal	Comments	Beginning Balance	Debit	Credit	Net Change	Ending Balance	Salaries & Benefits	Atty. Legal, Audit, Acct, POS, Interdept
08	8/31/2017	AJ-086881	PURCHASE OF SERVICE ALLOC		9.86			394.52		9.86
08	8/31/2017	AP-005074	CORELOGIC CREDCO, LLC /IN. 10279946		19.80			414.32		19.80
				384.66	29.66	-	29.66	414.32	-	29.66
2491-21			Interdepartmental: WTW	18.89						
08	8/31/2017	AJ-086889	Interdepartmental:Universal		4.18			23.07		4.18
				18.89	4.18	-	4.18	23.07	-	4.18
2510-21			OFFICE SUPPLIES: WTW	13.15						
08	8/31/2017	AJ-086895	LAKIN CAMPUS OFFICE SUPPLIES		1.00			14.15		
				13.15	1.00	-	1.00	14.15	-	-
2520-21			BUILDING & GROUND SUPPLIES: WTW	22.63						
08	8/31/2017	AJ-086907	BUILDING SUPPLIES - LAKIN CAMPUS		0.48			23.11		
08	8/31/2017	AJ-086912	BUILDING & GROUND SUPPLIES		0.23			23.34		
				22.63	0.71	-	0.71	23.34	-	-
2550-21			FOOD: WTW	61.54						
08	42978	AJ-086919	LAKIN - FOOD		0.30			61.84		
				61.54	0.30	-	0.30	61.84	-	-
2600-21			TELEPHONE: WTW	113.18						
08	8/31/2017	AJ-086931	ALLOCATION TELEPHONE LAKIN		1.68			114.86		
08	8/31/2017	AJ-086936	TELEPHONE		7.34			122.20		
				113.18	9.02	-	9.02	122.20	-	-
2700-21			POSTAGE & SHIPPING: WTW	38.97						
08	8/31/2017	AJ-086943	POSTAGE - LAKIN CAMPUS		0.19			39.16		
08	8/31/2017	AJ-086948	POSTAGE ALLOCATION		1.95			41.11		
08	8/31/2017	JE-004116	POSTAGE - AUG		1.96			43.07		
				38.97	4.10	-	4.10	43.07	-	-
2830-21			UTILITIES: WTW	106.58						
08	8/31/2017	AJ-086958	UTILITIES ALLOCATION		3.51			110.09		
				106.58	3.51	-	3.51	110.09	-	-
2840-21			CARE OF BUILDINGS & GROUNDS: WTW	168.62						
08	8/31/2017	AJ-086968	ALLOCATION OF CARE OF BUILDING AND GROUNDS LAKIN		2.47			171.09		
08	42978	AJ-086973	ALLOCATION - CARE OF BUILDING AND GROUNDS		3.79			174.88		
				168.62	6.26	-	6.26	174.88	-	-
2841-21			Inter - Blds and Grn: WTW	-						
				-	-	-	-	-	-	-
2850-21			EQUIPMENT REPAIR & MAINTENANCE: WTW	48.37						
08	8/31/2017	AJ-086986	EQUIPMENT REPAIR LAKIN CAMPUS		5.47			53.84		
				48.37	5.47	-	5.47	53.84	-	-
2880-21			PROPERTY INS/TAXES: WTW	124.27						
08	8/31/2017	AJ-086997	PROP INS/TAXES ALLOCATION		16.34			140.61		
				124.27	16.34	-	16.34	140.61	-	-
3100-21			PRINTING & PUB.: WTW	66.61						
08	8/23/2017	AP-005055	PHYSICIANS MUTUAL /IN: 11494		128.40			195.01		
08	42978	AJ-087008	PRINTING & PUBLICATION ALLOCATION		15.59			210.60		
				66.61	143.99	-	143.99	210.60	-	-
3210-21			MILEAGE/EXPENSE: WTW	631.02						
				-				631.02		
				631.02	-	-	-	631.02	-	-
3220-21			OUT OF TOWN TRAVEL: WTW	54.15						
				-				54.15		
				54.15	-	-	-	54.15	-	-
3250-21			AGENCY VEHICLE OPERATE.COSTS : WTW	-						
				-	-	-	-	-	-	-
3280-21			AUTOMOBILE INSURANCE: WTW	120.29						
08	8/31/2017	AJ-087014	AUTO INS ALLOCATION		17.20			137.49		
				120.29	17.20	-	17.20	137.49	-	-

Period	Date	Journal	Comments	Beginning Balance	Debit	Credit	Net Change	Ending Balance	Salaries & Benefits	Atty, Legal, Audit, Acct, POS, Interdept
3300-21			CONFERENCE/CONVENTION/TRIPS: WTW	-						
				-	-	-	-	-	-	-
3500-21			SPECIFIC ASSISTANCE INDIVIDUAL: WTW	-						
				-	-	-	-	-	-	-
4100-21			ORGANIZATION DUES: WTW	-						
				-	-	-	-	-	-	-
4300-21			EQUIPMENT/FIXED ASSETS: WTW	143.29						
08	8/31/2017	AJ-087021	EQUIPMENT FIXED ASSETS		19.21			162.50		
				143.29	19.21	-	19.21	162.50	-	-
4900-21			MISCELLANEOUS: WTW	14,887.28						
								14,887.28		
				14,887.28	-	-	-	14,887.28	-	-
				-	-	-	-	-	-	-
				0.00	3,177.45	3,177.45	-	0.00	2,489.90	38.80
			Calculation of Admin costs (=17.9% of expenses excluding Loan Guarantee Fur	493.29						
			Expenses inc Admin Costs						2,489.90	38.80
									2,489.90	38.80

Check -

MAPA JARC GRANT BILLING DOCUMENT

PART IV - Project Budget Worksheet

Project Name: __HEARTLAND FAMILY SERVICE - WAYS TO WORK__

Contact Name: __Joanie Poore, VP__

BUDGET DETAIL	TOTAL JARC BUDGET (ORIGINAL)	9/1/2017 - 9/30/2017		TOTAL COST MONTH	Program to Date	
		JARC	LOCAL MATCH		JARC	LOCAL MATCH
A. OPERATING EXPENSES¹						
1. Salaries and Benefits	30,720	\$ 1,517.20	\$ 999.25	\$ 2,516.45	\$ 14,182.16	\$ 7,926.63
2. Atty, Audit, Acct, POS	2,200	\$ -	\$ 34.29	\$ 34.29	\$ -	\$ 1,631.44
3. Office and Meeting Supplies	400	\$ 26.65	\$ 26.65	\$ 53.29	\$ 64.64	\$ 64.64
4. Phone & Internet	400	\$ 4.53	\$ 4.53	\$ 9.05	\$ 65.63	\$ 65.63
5. Postage & Shipping	220	\$ 1.46	\$ 1.46	\$ 2.91	\$ 23.83	\$ 23.83
6. Building and Occupancy	1,240	\$ 15.54	\$ 15.54	\$ 31.07	\$ 240.00	\$ 240.00
7. Equipment & Equip rep/rent	800	\$ 11.99	\$ 11.99	\$ 23.98	\$ 120.16	\$ 120.16
8. Advertising, Printing and Pubs	840	\$ 4.07	\$ 4.07	\$ 8.13	\$ 109.37	\$ 109.37
9. Mileage, travel, conf, auto ins.	320	\$ 11.43	\$ 11.43	\$ 22.86	\$ 422.76	\$ 422.76
10. Borrower Incentives	-			\$ -	\$ -	\$ -
11. Org Dues & Misc	128		\$ -	\$ -	\$ -	\$ -
12. Administrative Costs	6,732	\$ -	\$ 483.66	\$ 483.66	\$ -	\$ 4,624.09
Subtotal - Operating Expenses	\$ 44,000	\$ 1,592.85	\$ 1,592.85	\$ 3,185.69	\$ 15,228.53	\$ 15,228.53

General Ledger Detail Report
HEARTLAND FAMILY SERVICE (002)
DEPARTMENT 21 - WAYS TO WORK
Detail Postings for Period 09 for September 01-September 30, 2017
Account Number/Description

Period	Date	Journal	Comments	Beginning Balance	Debit	Credit	Net Change	Ending Balance	Salaries & Benefits	Atty, Legal, Audit, Acct, POS, Interdept
1010-21			INCOME FROM SERVICES	(180.00)				(180.00)		
								(180.00)		
				(180.00)	-	-	-	(180.00)		
1111-21			CONTRIBUTIONS RESTRICTED: WTW	(18,610.82)						
09	9/30/2017	AJ-087261	CONTRIBUTIONS RESTRICTED ALLOCATION			9.22		(18,620.04)		
09	9/30/2017	JE-004217	WTW CLOSING ENTRY			1,022.88				
				(18,610.82)	-	1,032.10	(1,032.10)	(19,642.92)		
1334-21			Service Fees - Ways to Work	(25.00)				(25.00)		
								(25.00)		
				(25.00)	-	-	-	(25.00)		
1700-21			MISCELLANEOUS: WTW	(0.31)						
09	9/30/2017	AJ-087270	MISC INCOME - L CODE			0.01		(0.32)		
				(0.31)	-	0.01	(0.01)	(0.32)		
1701-21			MISCELLANEOUS WTW COLLECTIONS ON DEFAULTED LOANS	(7,091.96)				(7,091.96)		
								(7,091.96)		
				(7,091.96)	-	-	-	(7,091.96)		
1750-21			SPECIAL EVENTS: WTW	-				-		
								-		
1900-21			UNITED WAY ALLOCAT: WTW	(16,666.64)						
09		43008 AR-000444	UNITED WAY			2,083.33		(18,749.97)		
				(16,666.64)	-	2,083.33	(2,083.33)	(18,749.97)		
1999-21			INDIRECT REV (EXP): OPEN	4,558.19						
			WTW INDIRECT CLOSING ENTRY		413.41			4,558.19		
				4,558.19	413.41	-	413.41	4,971.60		
2100-21			SALARIES: DIS. FAM.	17,187.38						
09	9/30/2017	AJ-087286	SALARIES GRANT MANAGERS		25.78			17,213.16	25.78	
09	9/30/2017	AJ-087504	ALLOCATION OF SALARY - LAKIN		0.57			17,213.73	0.57	
09	9/30/2017	PR-000378	SALARIES		2,180.21			19,393.94	2,180.21	
				17,187.38	2,206.56	-	2,206.56	19,393.94	2,206.56	-
2210-21			GROUP HEALTH INSURANCE: WTW	99.71						
09	9/30/2017	PR-000378	HEALTH INS		12.82			112.53	12.82	
				99.71	12.82	-	12.82	112.53	12.82	-
2220-21			RETIREMENT PLAN: WTW	529.45						
09	9/30/2017	PR-000378	RETIREMENT		67.08			596.53	67.08	
				529.45	67.08	-	67.08	596.53	67.08	-
2290-21			OTHER BENEFITS/DIS: WTW	67.81						
09	9/30/2017	PR-000378	LONG TERM DISABILITY		8.76			76.57	8.76	
				67.81	8.76	-	8.76	76.57	8.76	-
2300-21			PAYROLL TAXES: WTW	1,707.98						
09	9/30/2017	AJ-087305	PR TAXES PROF LIAB		41.76			1,749.74	41.76	
09	9/30/2017	AJ-087523	ALLOCATION OF TAXES - LAKIN		0.21			1,749.95	0.21	
09	9/30/2017	PR-000378	PAYROLL TAXES		166.80			1,916.75	166.80	
09	9/30/2017	PR-000378	STATE UNEMPLOYMENT		12.46			1,929.21	12.46	
				1,707.98	221.23	-	221.23	1,929.21	221.23	-
2410-21			ATTORNEY FEES: WTW	1,117.80						
								1,117.80		
				1,117.80	-	-	-	1,117.80		
2430-21			AUDITING/ACCOUNT FEES: WTW	41.96						
09	9/30/2017	AJ-087317	AUDITING/ACCT FEES ALLOC		4.96			46.92		4.96
				41.96	4.96	-	4.96	46.92		4.96
2490-21			OTHER PURCHASE OF SERVICE: WTW	414.32						

Period	Date	Journal	Comments	Beginning Balance	Debit	Credit	Net Change	Ending Balance	Salaries & Benefits	Atty. Legal, Audit, Acct, POS, Interdept
09	9/29/2017	AP-005103	CORELOGIC CREDCO, LLC /IN: 10310924		9.90			424.22		9.90
09	9/30/2017	AJ-087327	PURCHASE OF SERVICE ALLOC		18.04			442.26		18.04
				414.32	27.94	-	27.94	442.26	-	27.94
2491-21			Interdepartmental: WTW	23.07						
09	9/30/2017	AJ-087335	Interdepartmental:Universal		1.39			24.46		1.39
				23.07	1.39	-	1.39	24.46	-	1.39
2510-21			OFFICE SUPPLIES: WTW	14.15						
09	9/30/2017	AJ-087341	LAKIN CAMPUS OFFICE SUPPLIES		0.30			14.45		
				14.15	0.30	-	0.30	14.45	-	-
2520-21			BUILDING & GROUND SUPPLIES: WTW	23.34						
09	9/30/2017	AJ-087353	BUILDING SUPPLIES - LAKIN CAMPUS		0.56			23.90		
09	9/30/2017	AJ-087358	BUILDING & GROUND SUPPLIES		0.24			24.14		
				23.34	0.80	-	0.80	24.14	-	-
2550-21			FOOD: WTW	61.84						
09		43008 AJ-087365	LAKIN - FOOD		0.44			62.28		
09		43008 MC-004118	AMERICAN NATIONAL BANK VISA 061173		52.55			114.83		
				61.84	52.99	-	52.99	114.83	-	-
2600-21			TELEPHONE: WTW	122.20						
09	9/30/2017	AJ-087377	ALLOCATION TELEPHONE LAKIN		1.70			123.90		
09	9/30/2017	AJ-087382	TELEPHONE		7.35			131.25		
				122.20	9.05	-	9.05	131.25	-	-
2700-21			POSTAGE & SHIPPING: WTW	43.07						
09	9/30/2017	AJ-087389	POSTAGE - LAKIN CAMPUS			0.02		43.05		
09	9/30/2017	AJ-087394	POSTAGE ALLOCATION		1.95			45.00		
09	9/30/2017	JE-004175	POSTAGE - SEP		0.98			45.98		
				43.07	2.93	0.02	2.91	45.98	-	-
2830-21			UTILITIES: WTW	110.09						
09	9/30/2017	AJ-087404	UTILITIES ALLOCATION		3.30			113.39		
				110.09	3.30	-	3.30	113.39	-	-
2840-21			CARE OF BUILDINGS & GROUNDS: WTW	174.88						
09	9/30/2017	AJ-087414	ALLOCATION OF CARE OF BUILDING AND GROUNDS LAKIN		3.92			178.80		
09		43008 AJ-087419	ALLOCATION - CARE OF BUILDING AND GROUNDS		3.79			182.59		
				174.88	7.71	-	7.71	182.59	-	-
2841-21			Inter - Blds and Grn: WTW	-						
				-	-	-	-	-	-	-
2850-21			EQUIPMENT REPAIR & MAINTENANCE: WTW	53.84						
09	9/20/2017	AP-005085	BISHOP BUSINESS EQUIPMENT CO /IN: AUG-2017		2.11			55.95		
09	9/29/2017	AP-005105	BISHOP BUSINESS EQUIPMENT CO /IN: SEP-2017		1.31			57.26		
09	9/30/2017	AJ-087432	EQUIPMENT REPAIR LAKIN CAMPUS		1.35			58.61		
				53.84	4.77	-	4.77	58.61	-	-
2880-21			PROPERTY INS/TAXES: WTW	140.61						
09	9/30/2017	AJ-087443	PROP INS/TAXES ALLOCATION		19.26			159.87		
				140.61	19.26	-	19.26	159.87	-	-
3100-21			PRINTING & PUB.: WTW	210.60						
09	9/30/2017	AJ-087454	PRINTING & PUBLICATION ALLOCATION		8.13			218.73		
				210.60	8.13	-	8.13	218.73	-	-
3210-21			MILEAGE/EXPENSE: WTW	631.02						
				631.02	-	-	-	631.02	-	-
3220-21			OUT OF TOWN TRAVEL: WTW	54.15						
				54.15	-	-	-	54.15	-	-
3250-21			AGENCY VEHICLE OPERATE.COSTS : WTW	-						
				-	-	-	-	-	-	-
3280-21			AUTOMOBILE INSURANCE: WTW	137.49						
09	9/30/2017	AJ-087460	AUTO INS ALLOCATION		22.86			160.35		
				137.49	22.86	-	22.86	160.35	-	-

Office & Mtg Supplies	Phone & Internet	Postage & shipping	Building & Occupancy (Utilities, care of bidg/grnds, bidg/grnd supp, prop ins)	Equip & Equip rent/repair	Advertising, Prntg, Pubs	Mileage, travel, conf, agency, auto ins	Borrower Incentives	Org Dues & Misc	Admin @ 17.9%	Loan Guarantee Funds (Misc)	Total
											9.90
											18.04
											-
											-
											27.94
											-
											1.39
											-
											1.39
											-
	0.30										0.30
											-
	0.30										0.30
											-
											0.56
											0.24
											-
											-
											0.80
											-
											0.44
	52.55										52.55
	52.99										52.99
											-
											1.70
											7.35
											-
											9.05
											-
											(0.02)
											1.95
											0.98
											-
											-
											2.91
											-
											3.30
											3.30
											-
											3.92
											3.79
											-
											-
											7.71
											-
											-
											-
											-
											2.11
											1.31
											1.35
											-
											4.77
											-
											19.26
											-
											19.26
											-
											-
											8.13
											8.13
											-
											-
											-
											-
											-
											-
											-
											-
											-
											-
											-
											22.86
											-
											22.86

0.00

Period	Date	Journal	Comments	Beginning Balance	Debit	Credit	Net Change	Ending Balance	Salaries & Benefits	Atty, Legal, Audit, Acct, POS, Interdept
3300-21			CONFERENCE/CONVENTION/TRIPS: WTW	-						
				-	-	-	-	-	-	-
3500-21			SPECIFIC ASSISTANCE INDIVIDUAL: WTW	-						
				-	-	-	-	-	-	-
4100-21			ORGANIZATION DUES: WTW	-						
				-	-	-	-	-	-	-
4300-21			EQUIPMENT/FIXED ASSETS: WTW	162.50						
09	9/30/2017	AJ-087467	EQUIPMENT FIXED ASSETS		19.21			181.71		
				162.50	19.21	-	19.21	181.71	-	-
4900-21			MISCELLANEOUS: WTW	14,887.28						
								14,887.28		
				14,887.28	-	-	-	14,887.28	-	-
				-	-	-	-	-	-	-
				0.00	3,115.46	3,115.46	-	0.00	2,516.45	34.29
			Calculation of Admin costs (=17.9% of expenses excluding Loan Guarantee Fur	483.66						
			Expenses inc Admin Costs						2,516.45	34.29
									2,516.45	34.29

Check -

Office & Mtg Supplies	Phone & Internet	Postage & shipping	Building & Occupancy (Utilities, care of bldg/grnds, bldg/grnd supp, prop ins)	Equip & Equip rent/repair	Advertising, Prntg, Pubs	Mileage, travel, conf, agency vehicle, auto ins	Borrower Incentives	Org Dues & Misc	Admin @ 17.9%	Loan Guarantee Funds (Misc)	Total	
-	-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-	-
53.29	9.05	2.91	31.07	23.98	8.13	22.86	-	-	-	-	2,702.03	-
									483.66		483.66	-
53.29	9.05	2.91	31.07	23.98	8.13	22.86	-	-	483.66	-	3,185.69	3,185.69
53.29	9.05	2.91	31.07	23.98	8.13	22.86	-	-	483.66	-	3,185.69	Ties to MAPA I

MAPA JARC GRANT BILLING DOCUMENT

PART IV - Project Budget Worksheet

Project Name: __HEARTLAND FAMILY SERVICE - WAYS TO WORK__

Contact Name: __Joanie Poore, VP__

BUDGET DETAIL	TOTAL JARC BUDGET (ORIGINAL)	10/1/2017 - 10/31/2017		TOTAL COST MONTH	Program to Date	
		JARC	LOCAL MATCH		JARC	LOCAL MATCH
A. OPERATING EXPENSES¹						
1. Salaries and Benefits	30,720	\$ 1,569.87	\$ 974.12	\$ 2,543.98	\$ 15,752.02	\$ 8,900.74
2. Atty, Audit, Acct, POS	2,200	\$ -	\$ 56.05	\$ 56.05	\$ -	\$ 1,687.49
3. Office and Meeting Supplies	400	\$ 0.32	\$ 0.32	\$ 0.63	\$ 64.96	\$ 64.96
4. Phone & Internet	400	\$ 64.49	\$ 64.49	\$ 128.98	\$ 130.12	\$ 130.12
5. Postage & Shipping	220	\$ 0.98	\$ 0.98	\$ 1.95	\$ 24.81	\$ 24.81
6. Building and Occupancy	1,240	\$ 16.39	\$ 16.39	\$ 32.78	\$ 256.39	\$ 256.39
7. Equipment & Equip rep/rent	800	\$ 13.66	\$ 13.66	\$ 27.32	\$ 133.82	\$ 133.82
8. Advertising, Printing and Pubs	840	\$ 4.16	\$ 4.16	\$ 8.32	\$ 113.53	\$ 113.53
9. Mileage, travel, conf, auto ins.	320	\$ 107.53	\$ 107.53	\$ 215.05	\$ 530.29	\$ 530.29
10. Borrower Incentives	-			\$ -	\$ -	\$ -
11. Org Dues & Misc	128		\$ -	\$ -	\$ -	\$ -
12. Administrative Costs	6,732	\$ -	\$ 539.70	\$ 539.70	\$ -	\$ 5,163.79
Subtotal - Operating Expenses	\$ 44,000	\$ 1,777.38	\$ 1,777.38	\$ 3,554.76	\$ 17,005.91	\$ 17,005.91

General Ledger Detail Report
HEARTLAND FAMILY SERVICE (002)
DEPARTMENT 21 - WAYS TO WORK
Detail Postings for Period 10 for October 01-October 31, 2017
Account Number/Description

Period	Date	Journal	Comments	Beginning Balance	Debit	Credit	Net Change	Ending Balance	Salaries & Benefits	Atty, Legal, Audit, Acct, POS, Interdept
1010-21			INCOME FROM SERVICES	(180.00)				(180.00)		
				(180.00)	-	-	-	(180.00)		
1111-21			CONTRIBUTIONS RESTRICTED- WTW	(19,642.92)						
10	10/31/2017	AJ-087707	CONTRIBUTIONS RESTRICTED ALLOCATION			9.30		(19,652.22)		
10	10/31/2017	JE-004266	WTW CLOSING ENTRY			1,018.37		(20,670.59)		
				(19,642.92)	-	1,027.67	(1,027.67)	(20,670.59)		
1334-21			Service Fees - Ways to Work	(25.00)						
								(25.00)		
				(25.00)	-	-	-	(25.00)		
1700-21			MISCELLANEOUS- WTW	(0.32)						
								(0.32)		
				(0.32)	-	-	-	(0.32)		
1701-21			MISCELLANEOUS WTW COLLECTIONS ON DEFAULTED LOANS	(7,091.96)						
10	10/3/2017	CR-022122	Doc: CR 10/3 10/03/17 WAYS TO WORK			200.00		(7,291.96)		
10	10/3/2017	CR-022122	Doc: CR 10/3 10/03/17 WAYS TO WORK			50.00		(7,341.96)		
10		43021 CR-022109	Doc: CO 10/13 10/13/17			115.36		(7,457.32)		
				(7,091.96)	-	365.36	(365.36)	(7,457.32)		
1750-21			SPECIAL EVENTS: WTW	-						
				-	-	-	-	-		
1900-21			UNITED WAY ALLOCAT: WTW	(18,749.97)						
10		43039 AR-000455	UNITED WAY			2,083.33		(20,833.30)		
				(18,749.97)	-	2,083.33	(2,083.33)	(20,833.30)		
1999-21			INDIRECT REV (EXP)-OPEN	4,971.60						
10	10/31/2017	JE-004266	WTW INDIRECT CLOSING ENTRY		461.30			5,432.90		
				4,971.60	461.30	-	461.30	5,432.90		
2100-21			SALARIES: DIS. FAM.	19,393.94						
10	10/31/2017	AJ-087732	SALARIES GRANT MANAGERS		25.78			19,419.72	25.78	
10	10/31/2017	AJ-087952	ALLOCATION OF SALARY - LAKIN		0.82			19,420.54	0.82	
10	10/31/2017	PR-000379	SALARIES		2,201.88			21,622.42	2,201.88	
				19,393.94	2,228.48	-	2,228.48	21,622.42	2,228.48	-
2210-21			GROUP HEALTH INSURANCE: WTW	112.53						
10	10/31/2017	PR-000379	HEALTH INS		12.82			125.35	12.82	
				112.53	12.82	-	12.82	125.35	12.82	-
2220-21			RETIREMENT PLAN: WTW	596.53						
10	10/31/2017	PR-000379	RETIREMENT		67.40			663.93	67.40	
				596.53	67.40	-	67.40	663.93	67.40	-
2290-21			OTHER BENEFITS/DIS.: WTW	76.57						
10	10/31/2017	PR-000379	LONG TERM DISABILITY		8.78			85.35	8.78	
				76.57	8.78	-	8.78	85.35	8.78	-
2300-21			PAYROLL TAXES: WTW	1,929.21						
10	10/31/2017	AJ-087751	PR TAXES PROF LIAB		46.75			1,975.96	46.75	
10	10/31/2017	AJ-087971	ALLOCATION OF TAXES - LAKIN		0.30			1,976.26	0.30	
10	10/31/2017	PR-000379	PAYROLL TAXES		168.45			2,144.71	168.45	
10	10/31/2017	PR-000379	STATE UNEMPLOYMENT		11.00			2,155.71	11.00	
				1,929.21	226.50	-	226.50	2,155.71	226.50	-
2410-21			ATTORNEY FEES: WTW	1,117.80						
								1,117.80		
				1,117.80	-	-	-	1,117.80		
2430-21			AUDITING/ACCOUNT FEES: WTW	46.92						
10	10/31/2017	AJ-087763	AUDITING/ACCT FEES ALLOC		4.96			51.88		4.96
				46.92	4.96	-	4.96	51.88		4.96
2490-21			OTHER PURCHASE OF SERVICE: WTW	442.26						

Period	Date	Journal	Comments	Beginning Balance	Debit	Credit	Net Change	Ending Balance	Salaries & Benefits	Atty. Legal, Audit, Acct, POS, Interdept
10	10/31/2017	AJ-087773	PURCHASE OF SERVICE ALLOC		10.10			452.36		10.10
10	10/31/2017	AP-005146	CORELOGIC CREDCO, LLC /IN. 10341844		39.60			491.96		39.60
				442.26	49.70	-	49.70	491.96	-	49.70
2491-21			Interdepartmental: WTW	24.46						
10	10/31/2017	AJ-087781	Interdepartmental:Universal		1.39			25.85		1.39
				24.46	1.39	-	1.39	25.85	-	1.39
2510-21			OFFICE SUPPLIES: WTW	14.45						
10	10/31/2017	AJ-087787	LAKIN CAMPUS OFFICE SUPPLIES		0.29			14.74		
				14.45	0.29	-	0.29	14.74	-	
2520-21			BUILDING & GROUND SUPPLIES: WTW	24.14						
10	10/31/2017	AJ-087799	BUILDING SUPPLIES - LAKIN CAMPUS		0.57			24.71		
10	10/31/2017	AJ-087804	BUILDING & GROUND SUPPLIES		0.19			24.90		
10	10/31/2017	AJ-088029	BUILDING & GROUND SUPPLIES		0.28			25.18		
				24.14	1.04	-	1.04	25.18	-	
2550-21			FOOD: WTW	114.83						
10		43039 AJ-087811	LAKIN - FOOD		0.34			115.17		
				114.83	0.34	-	0.34	115.17	-	
2600-21			TELEPHONE: WTW	131.25						
10	10/31/2017	AJ-087823	ALLOCATION TELEPHONE LAKIN		1.68			132.93		
10	10/31/2017	AJ-087828	TELEPHONE		7.30			140.23		
10		43039 PR-000379	EXP REIMBURSEMENT		120.00			260.23		
				131.25	128.98	-	128.98	260.23	-	
2700-21			POSTAGE & SHIPPING: WTW	45.98						
10	10/31/2017	AJ-087840	POSTAGE ALLOCATION		1.95			47.93		
				45.98	1.95	-	1.95	47.93	-	
2830-21			UTILITIES: WTW	113.39						
10	10/31/2017	AJ-087851	UTILITIES ALLOCATION		2.65			116.04		
				113.39	2.65	-	2.65	116.04	-	
2840-21			CARE OF BUILDINGS & GROUNDS: WTW	182.59						
10	10/31/2017	AJ-087862	ALLOCATION OF CARE OF BUILDING AND GROUNDS LAKIN		6.04			188.63		
10		43039 AJ-087867	ALLOCATION - CARE OF BUILDING AND GROUNDS		3.79			192.42		
				182.59	9.83	-	9.83	192.42	-	
2841-21			Inter - Blds and Grn: WTW	-						
				-	-	-	-	-	-	-
2850-21			EQUIPMENT REPAIR & MAINTENANCE: WTW	58.61						
10	10/31/2017	AP-005144	BISHOP BUSINESS EQUIPMENT CO /IN: OCT-2017		8.11			66.72		
				58.61	8.11	-	8.11	66.72	-	
2880-21			PROPERTY INS/TAXES: WTW	159.87						
10	10/31/2017	AJ-087891	PROP INS/TAXES ALLOCATION		19.26			179.13		
				159.87	19.26	-	19.26	179.13	-	
3100-21			PRINTING & PUB.: WTW	218.73						
10	10/31/2017	AJ-087902	PRINTING & PUBLICATION ALLOCATION		8.32			227.05		
				218.73	8.32	-	8.32	227.05	-	
3210-21			MILEAGE/EXPENSE: WTW	631.02						
10	10/31/2017	PR-000379	EXP REIMBURSEMENT		192.19			823.21		
				631.02	192.19	-	192.19	823.21	-	
3220-21			OUT OF TOWN TRAVEL: WTW	54.15						
				54.15	-	-	-	54.15	-	
3250-21			AGENCY VEHICLE OPERATE.COSTS : WTW	-						
				-	-	-	-	-	-	-
3280-21			AUTOMOBILE INSURANCE: WTW	160.35						
10	10/31/2017	AJ-087908	AUTO INS ALLOCATION		22.86			183.21		
				160.35	22.86	-	22.86	183.21	-	

Period	Date	Journal	Comments	Beginning Balance	Debit	Credit	Net Change	Ending Balance	Salaries & Benefits	Atty, Legal, Audit, Acct, POS, Interdept
3300-21			CONFERENCE/CONVENTION/TRIPS: WTW	-						
				-	-	-	-	-	-	-
3500-21			SPECIFIC ASSISTANCE INDIVIDUAL: WTW	-						
				-	-	-	-	-	-	-
4100-21			ORGANIZATION DUES: WTW	-						
				-	-	-	-	-	-	-
4300-21			EQUIPMENT/FIXED ASSETS: WTW	181.71						
10	10/31/2017	AJ-087915	EQUIPMENT FIXED ASSETS		19.21			200.92		
				181.71	19.21	-	19.21	200.92	-	-
4900-21			MISCELLANEOUS: WTW	14,887.28						
								14,887.28		
				14,887.28	-	-	-	14,887.28	-	-
				-	-	-	-	-	-	-
				(0.00)	3,476.36	3,476.36	-	(0.00)	2,543.98	56.05
			Calculation of Admin costs (=17.9% of expenses excluding Loan Guarantee Fur	539.70						
			Expenses inc Admin Costs						2,543.98	56.05
									2,543.98	56.05

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1,271.99

MAPA JARC GRANT BILLING DOCUMENT

PART IV - Project Budget Worksheet

Project Name: __HEARTLAND FAMILY SERVICE - WAYS TO WORK__

Contact Name: __Joanie Poore, VP__

BUDGET DETAIL	TOTAL JARC BUDGET (ORIGINAL)	11/1/2017 - 11/30/2017		TOTAL COST MONTH	Program to Date	
		JARC	LOCAL MATCH		JARC	LOCAL MATCH
A. OPERATING EXPENSES¹						
1. Salaries and Benefits	30,720	\$ 1,526.53	\$ 987.84	\$ 2,514.36	\$ 17,278.55	\$ 9,888.58
2. Atty, Audit, Acct, POS	2,200	\$ -	\$ 27.30	\$ 27.30	\$ -	\$ 1,714.79
3. Office and Meeting Supplies	400	\$ 25.54	\$ 25.54	\$ 51.07	\$ 90.49	\$ 90.49
4. Phone & Internet	400	\$ 31.51	\$ 31.51	\$ 63.01	\$ 161.62	\$ 161.62
5. Postage & Shipping	220	\$ 3.80	\$ 3.80	\$ 7.60	\$ 28.61	\$ 28.61
6. Building and Occupancy	1,240	\$ 11.92	\$ 11.92	\$ 23.83	\$ 268.30	\$ 268.30
7. Equipment & Equip rep/rent	800	\$ 11.72	\$ 11.72	\$ 23.43	\$ 145.54	\$ 145.54
8. Advertising, Printing and Pubs	840	\$ 4.07	\$ 4.07	\$ 8.13	\$ 117.59	\$ 117.59
9. Mileage, travel, conf, auto ins.	320	\$ 6.61	\$ 6.61	\$ 13.21	\$ 536.89	\$ 536.89
10. Borrower Incentives	-			\$ -	\$ -	\$ -
11. Org Dues & Misc	128	\$ 62.50	\$ 62.50	\$ 125.00	\$ 62.50	\$ 62.50
12. Administrative Costs	6,732	\$ -	\$ 511.39	\$ 511.39	\$ -	\$ 5,675.18
Subtotal - Operating Expenses	\$ 44,000	\$ 1,684.17	\$ 1,684.17	\$ 3,368.33	\$ 18,690.08	\$ 18,690.08

General Ledger Detail Report
HEARTLAND FAMILY SERVICE (002)
DEPARTMENT 21 - WAYS TO WORK
Detail Postings for Period 11 for November 01-November 30, 2017
Account Number/Description

Period	Date	Journal	Comments	Beginning Balance	Debit	Credit	Net Change	Ending Balance	Salaries & Benefits	Atty, Legal, Audit, Acct, POS, Interdept
1010-21			INCOME FROM SERVICES	(180.00)				(180.00)		
				(180.00)	-	-	-	(180.00)		
1111-21			CONTRIBUTIONS RESTRICTED- WTW	(20,670.59)						
11	11/30/2017	AJ-088157	CONTRIBUTIONS RESTRICTED ALLOCATION			9.30		(20,679.89)		
11	11/30/2017	JE-004322	WTW CLOSING ENTRY			789.55		(21,469.44)		
				(20,670.59)	-	798.85	(798.85)	(21,469.44)		
1334-21			Service Fees - Ways to Work	(25.00)				(25.00)		
				(25.00)	-	-	-	(25.00)		
1700-21			MISCELLANEOUS- WTW	(0.32)						
11	11/30/2017	AJ-088166	MISC INCOME - L CODE			0.01		(0.33)		
				(0.32)	-	0.01	(0.01)	(0.33)		
1701-21			MISCELLANEOUS WTW COLLECTIONS ON DEFAULTED LOANS	(7,457.32)						
11	11/21/2017	CR-022505	Doc: CR 11/21 11/21/17 MARY ELLISON			386.86		(7,844.18)		
11	11/30/2017	CR-022555	Doc: CO 11/30 11/30/17			25.00		(7,869.18)		
				(7,457.32)	-	411.86	(411.86)	(7,869.18)		
1750-21			SPECIAL EVENTS: WTW	-						
				-	-	-	-	-		
1900-21			UNITED WAY ALLOCAT: WTW	(20,833.30)						
11		43069 AR-000465	UNITED WAY			2,083.33		(22,916.63)		
				(20,833.30)	-	2,083.33	(2,083.33)	(22,916.63)		
1999-21			INDIRECT REV (EXP)-OPEN	5,432.90						
11	11/30/2017	JE-004322	WTW INDIRECT CLOSING ENTRY		437.11			5,870.01		
				5,432.90	437.11	-	437.11	5,870.01		
2100-21			SALARIES: DIS. FAM.	21,622.42						
11	11/30/2017	AJ-088182	SALARIES GRANT MANAGERS		25.78			21,648.20	25.78	
11	11/30/2017	AJ-088402	ALLOCATION OF SALARY - LAKIN		0.46			21,648.66	0.46	
11	11/30/2017	PR-000382	SALARIES		2,190.04			23,838.70	2,190.04	
				21,622.42	2,216.28	-	2,216.28	23,838.70	2,216.28	-
2210-21			GROUP HEALTH INSURANCE: WTW	125.35						
11	11/30/2017	PR-000382	HEALTH INS		12.82			138.17	12.82	
				125.35	12.82	-	12.82	138.17	12.82	-
2220-21			RETIREMENT PLAN: WTW	663.93						
11	11/30/2017	PR-000382	RETIREMENT		67.72			731.65	67.72	
				663.93	67.72	-	67.72	731.65	67.72	-
2290-21			OTHER BENEFITS/DIS.: WTW	85.35						
11	11/30/2017	PR-000382	LONG TERM DISABILITY		8.80			94.15	8.80	
				85.35	8.80	-	8.80	94.15	8.80	-
2300-21			PAYROLL TAXES: WTW	2,155.71						
11	11/30/2017	AJ-088201	PR TAXES PROF LIAB		28.82			2,184.53	28.82	
11	11/30/2017	AJ-088421	ALLOCATION OF TAXES - LAKIN		0.14			2,184.67	0.14	
11	11/30/2017	PR-000382	PAYROLL TAXES		167.55			2,352.22	167.55	
11	11/30/2017	PR-000382	STATE UNEMPLOYMENT		12.23			2,364.45	12.23	
				2,155.71	208.74	-	208.74	2,364.45	208.74	-
2410-21			ATTORNEY FEES: WTW	1,117.80						
				1,117.80	-	-	-	1,117.80	-	-
2430-21			AUDITING/ACCOUNT FEES: WTW	51.88						
11	11/30/2017	AJ-088213	AUDITING/ACCT FEES ALLOC		4.58			56.46		4.58
				51.88	4.58	-	4.58	56.46		4.58
2490-21			OTHER PURCHASE OF SERVICE: WTW	491.96						

Period	Date	Journal	Comments	Beginning Balance	Debit	Credit	Net Change	Ending Balance	Salaries & Benefits	Atty. Legal, Audit, Acct, POS, Interdept
11	11/30/2017	AJ-088223	PURCHASE OF SERVICE ALLOC		11.43			503.39		11.43
11	11/30/2017	AP-005183	CORELOGIC CREDCO, LLC /IN. 10372332		9.90			513.29		9.90
				491.96	21.33	-	21.33	513.29	-	21.33
2491-21			Interdepartmental: WTW	25.85						
11	11/30/2017	AJ-088231	Interdepartmental:Universal		1.39			27.24		1.39
				25.85	1.39	-	1.39	27.24	-	1.39
2510-21			OFFICE SUPPLIES: WTW	14.74						
11	11/30/2017	AJ-088237	LAKIN CAMPUS OFFICE SUPPLIES		0.24			14.98		
				14.74	0.24	-	0.24	14.98	-	
2520-21			BUILDING & GROUND SUPPLIES: WTW	25.18						
11	11/30/2017	AJ-088249	BUILDING SUPPLIES - LAKIN CAMPUS		1.07			26.25		
11	11/30/2017	AJ-088254	BUILDING & GROUND SUPPLIES		0.75			27.00		
				25.18	1.82	-	1.82	27.00	-	
2550-21			FOOD: WTW	115.17						
11		43069 AJ-088261	LAKIN - FOOD		0.36			115.53		
11		43069 MC-004185	AMERICAN NATIONAL BANK VISA 061201		50.47			166.00		
			Panera Bread-breakfast for WTW loan committee	115.17	50.83	-	50.83	166.00	-	
2600-21			TELEPHONE: WTW	260.23						
11	11/30/2017	AJ-088273	ALLOCATION TELEPHONE LAKIN		1.68			261.91		
11	11/30/2017	AJ-088278	TELEPHONE		7.33			269.24		
11		43069 PR-000382	PHONE REIMBURSEMENT		54.00			323.24		
				260.23	63.01	-	63.01	323.24	-	
2700-21			POSTAGE & SHIPPING: WTW	47.93						
11	11/30/2017	AJ-088285	POSTAGE - LAKIN CAMPUS		0.75			48.68		
11	11/30/2017	AJ-088290	POSTAGE ALLOCATION		1.95			50.63		
11	11/30/2017	JE-004276	POSTAGE - OCT		1.47			52.10		
11	11/30/2017	JE-004276	POSTAGE - NOV		3.43			55.53		
				47.93	7.60	-	7.60	55.53	-	
2830-21			UTILITIES: WTW	116.04						
11	11/30/2017	AJ-088301	UTILITIES ALLOCATION		2.32			118.36		
				116.04	2.32	-	2.32	118.36	-	
2840-21			CARE OF BUILDINGS & GROUNDS: WTW	192.42						
11	11/30/2017	AJ-088312	ALLOCATION OF CARE OF BUILDING AND GROUNDS LAKIN		2.48			194.90		
11		43069 AJ-088317	ALLOCATION - CARE OF BUILDING AND GROUNDS		3.79			198.69		
				192.42	6.27	-	6.27	198.69	-	
2841-21			Inter - Bldg and Grn: WTW	-						
				-	-	-	-	-	-	-
2850-21			EQUIPMENT REPAIR & MAINTENANCE: WTW	66.72						
11	11/30/2017	AJ-088330	EQUIPMENT REPAIR LAKIN CAMPUS		0.67			67.39		
11	11/30/2017	AP-005177	BISHOP BUSINESS EQUIPMENT CO /IN: NOV-2017		3.55			70.94		
				66.72	4.22	-	4.22	70.94	-	
2880-21			PROPERTY INS/TAXES: WTW	179.13						
11	11/30/2017	AJ-088341	PROP INS/TAXES ALLOCATION		13.42			192.55		
				179.13	13.42	-	13.42	192.55	-	
3100-21			PRINTING & PUB.: WTW	227.05						
11	11/30/2017	AJ-088352	PRINTING & PUBLICATION ALLOCATION		8.13			235.18		
				227.05	8.13	-	8.13	235.18	-	
3210-21			MILEAGE/EXPENSE: WTW	823.21						
				823.21	-	-	-	823.21	-	
3220-21			OUT OF TOWN TRAVEL: WTW	54.15						
				54.15	-	-	-	54.15	-	
3250-21			AGENCY VEHICLE OPERATE.COSTS : WTW	-						
				-	-	-	-	-	-	-
3280-21			AUTOMOBILE INSURANCE: WTW	183.21						
11	11/30/2017	AJ-088358	AUTO INS ALLOCATION		13.21			196.42		
				183.21	13.21	-	13.21	196.42	-	

Period	Date	Journal	Comments	Beginning Balance	Debit	Credit	Net Change	Ending Balance	Salaries & Benefits	Atty, Legal, Audit, Acct, POS, Interdept
3300-21			CONFERENCE/CONVENTION/TRIPS: WTW	-						
				-	-	-	-	-	-	-
3500-21			SPECIFIC ASSISTANCE INDIVIDUAL: WTW	-						
				-	-	-	-	-	-	-
4100-21			ORGANIZATION DUES: WTW	-						
11	11/30/2017	MC-004185	AMERICAN NATIONAL BANK VISA 061201		125.00			125.00		
			Membership to AFCPE		125.00		125.00	125.00		
				-					-	-
4300-21			EQUIPMENT/FIXED ASSETS: WTW	200.92						
11	11/30/2017	AJ-088365	EQUIPMENT FIXED ASSETS		19.21			220.13		
				200.92	19.21		19.21	220.13		
									-	-
4900-21			MISCELLANEOUS: WTW	14,887.28						
								14,887.28		
				14,887.28	-	-	-	14,887.28		
									-	-
									-	-
				(0.00)	3,294.05	3,294.05	-	(0.00)	2,514.36	27.30
			Calculation of Admin costs (=17.9% of expenses excluding Loan Guarantee Fur	511.39						
			Expenses inc Admin Costs						2,514.36	27.30
									2,514.36	27.30

Check

1,257.18

Office & Mtg Supplies	Phone & Internet	Postage & shipping	Building & Occupancy (Utilities, care of bidg/grnds, bidg/grnd supp, prop ins)	Equip & Equip rent/repair	Advertising, Prntg, Pubs	Mileage, travel, conf, agency vehicle, auto ins	Borrower Incentives	Org Dues & Misc	Admin @ 17.9%	Loan Guarantee Funds (Misc)	Total	
-	-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-	-
								125.00			125.00	-
								125.00	-	-	125.00	-
					19.21						19.21	-
												-
					19.21						19.21	-
												-
												-
												-
												-
												-
												-
												-
												-
												-
51.07	63.01	7.60	23.83	23.43	8.13	13.21	-	125.00		(411.86)	2,445.08	- Check
									511.39		511.39	
51.07	63.01	7.60	23.83	23.43	8.13	13.21	-	125.00	511.39	(411.86)	2,956.47	3,368.33 Ties to MAPA I
51.07	63.01	7.60	23.83	23.43	8.13	13.21	-	125.00	511.39	(411.86)	2,956.47	

MAPA JARC GRANT BILLING DOCUMENT

PART IV - Project Budget Worksheet

Project Name: __HEARTLAND FAMILY SERVICE - WAYS TO WORK__

Contact Name: __Joanie Poore, VP__

BUDGET DETAIL	TOTAL JARC BUDGET (ORIGINAL)	12/1/2017 - 12/31/2017		TOTAL COST MONTH	Program to Date	
		JARC	LOCAL MATCH		JARC	LOCAL MATCH
A. OPERATING EXPENSES¹						
1. Salaries and Benefits	30,720	\$ 1,824.53	\$ 889.41	\$ 2,713.93	\$ 19,103.07	\$ 10,777.98
2. Atty, Audit, Acct, POS	2,200	\$ -	\$ 313.25	\$ 313.25	\$ -	\$ 2,028.04
3. Office and Meeting Supplies	400	\$ 0.67	\$ 0.67	\$ 1.34	\$ 91.16	\$ 91.16
4. Phone & Internet	400	\$ 34.27	\$ 34.27	\$ 68.53	\$ 195.89	\$ 195.89
5. Postage & Shipping	220	\$ 1.41	\$ 1.41	\$ 2.82	\$ 30.02	\$ 30.02
6. Building and Occupancy	1,240	\$ 12.71	\$ 12.71	\$ 25.41	\$ 281.01	\$ 281.01
7. Equipment & Equip rep/rent	800	\$ 11.65	\$ 11.65	\$ 23.30	\$ 157.19	\$ 157.19
8. Advertising, Printing and Pubs	840	\$ 3.30	\$ 3.30	\$ 6.60	\$ 120.89	\$ 120.89
9. Mileage, travel, conf, auto ins.	320	\$ 159.49	\$ 159.49	\$ 318.98	\$ 696.38	\$ 696.38
10. Borrower Incentives	-			\$ -	\$ -	\$ -
11. Org Dues & Misc	128	\$ -	\$ -	\$ -	\$ 62.50	\$ 62.50
12. Administrative Costs	6,732	\$ -	\$ 621.87	\$ 621.87	\$ -	\$ 6,297.05
Subtotal - Operating Expenses	\$ 44,000	\$ 2,048.02	\$ 2,048.02	\$ 4,096.03	\$ 20,738.09	\$ 20,738.09

General Ledger Detail Report
HEARTLAND FAMILY SERVICE (002)
DEPARTMENT 21 - WAYS TO WORK
Detail Postings for Period 12 for December 01-December 31, 2017
Account Number/Description

Period	Date	Journal	Comments	Beginning Balance	Debit	Credit	Net Change	Ending Balance	Salaries & Benefits	Atty, Legal, Audit, Acct, POS, Interdept
1010-21			INCOME FROM SERVICES	(180.00)				(180.00)		
								(180.00)		
				(180.00)	-	-	-	(180.00)		
1111-21			CONTRIBUTIONS RESTRICTED- WTW	(21,469.44)						
12	12/31/2017	AJ-088607	CONTRIBUTIONS RESTRICTED ALLOCATION			9.30		(21,478.74)		
12	12/31/2017	JE-004377	WTW CLOSING ENTRY			1,913.07		(23,391.81)		
				(21,469.44)	-	1,922.37	(1,922.37)	(23,391.81)		
1334-21			Service Fees - Ways to Work	(25.00)						
								(25.00)		
				(25.00)	-	-	-	(25.00)		
1700-21			MISCELLANEOUS- WTW	(0.33)						
12	12/31/2017	AJ-088616	MISC INCOME - L CODE			0.01		(0.34)		
				(0.33)	-	0.01	(0.01)	(0.34)		
1701-21			MISCELLANEOUS WTW COLLECTIONS ON DEFAULTED LOANS	(7,869.18)						
								(7,869.18)		
								(7,869.18)		
				(7,869.18)	-	-	-	(7,869.18)		
1750-21			SPECIAL EVENTS: WTW	-						
				-	-	-	-	-		
1900-21			UNITED WAY ALLOCAT: WTW	(22,916.63)						
12		43100 AR-000473	UNITED WAY			2,083.33		(24,999.96)		
				(22,916.63)	-	2,083.33	(2,083.33)	(24,999.96)		
1999-21			INDIRECT REV (EXP)-OPEN	5,870.01						
12	12/31/2017	JE-004377	WTW INDIRECT CLOSING ENTRY		531.55			6,401.56		
				5,870.01	531.55	-	531.55	6,401.56		
2100-21			SALARIES: DIS. FAM.	23,838.70						
12	12/31/2017	AJ-088632	SALARIES GRANT MANAGERS		25.78			23,864.48	25.78	
12	12/31/2017	AJ-088852	ALLOCATION OF SALARY - LAKIN		0.46			23,864.94	0.46	
12	12/31/2017	PR-000385	SALARIES		2,189.71			26,054.65	2,189.71	
				23,838.70	2,215.95	-	2,215.95	26,054.65	2,215.95	-
2210-21			GROUP HEALTH INSURANCE: WTW	138.17						
12	12/31/2017	PR-000385	HEALTH INS		227.54			365.71	227.54	
				138.17	227.54	-	227.54	365.71	227.54	-
2220-21			RETIREMENT PLAN: WTW	731.65						
12	12/31/2017	PR-000385	RETIREMENT		67.72			799.37	67.72	
				731.65	67.72	-	67.72	799.37	67.72	-
2290-21			OTHER BENEFITS/DIS.: WTW	94.15						
12	12/31/2017	PR-000385	LONG TERM DISABILITY		8.80			102.95	8.80	
				94.15	8.80	-	8.80	102.95	8.80	-
2300-21			PAYROLL TAXES: WTW	2,364.45						
12	12/31/2017	AJ-088651	PR TAXES PROF LIAB		28.82			2,393.27	28.82	
12	12/31/2017	AJ-088871	ALLOCATION OF TAXES - LAKIN		0.16			2,393.43	0.16	
12	12/31/2017	PR-000385	PAYROLL TAXES		163.39			2,556.82	163.39	
12	12/31/2017	PR-000385	STATE UNEMPLOYMENT		1.55			2,558.37	1.55	
				2,364.45	193.92	-	193.92	2,558.37	193.92	-
2410-21			ATTORNEY FEES: WTW	1,117.80						
								1,117.80		
				1,117.80	-	-	-	1,117.80		
2430-21			AUDITING/ACCOUNT FEES: WTW	56.46						
12	12/31/2017	AJ-088663	AUDITING/ACCT FEES ALLOC		9.18			65.64		9.18
				56.46	9.18	-	9.18	65.64		9.18
2490-21			OTHER PURCHASE OF SERVICE: WTW	513.29						

Period	Date	Journal	Comments	Beginning Balance	Debit	Credit	Net Change	Ending Balance	Salaries & Benefits	Atty. Legal, Audit, Acct, POS, Interdept
12	12/29/2017	AP-005217	CORELOGIC CREDCO, LLC /IN: 10401514		21.60			534.89		21.60
12	12/29/2017	AP-005222	MINUTE MENU SYSTEMS, LLC /IN: INV-042271		271.00			805.89		271.00
12	12/31/2017	AJ-088673	PURCHASE OF SERVICE ALLOC		10.08			815.97		10.08
				513.29	302.68	-	302.68	815.97	-	302.68
2491-21			Interdepartmental: WTW	27.24						
12	12/31/2017	AJ-088681	Interdepartmental:Universal		1.39			28.63		1.39
				27.24	1.39	-	1.39	28.63	-	1.39
2510-21			OFFICE SUPPLIES: WTW	14.98						
12	12/31/2017	AJ-088687	LAKIN CAMPUS OFFICE SUPPLIES		0.95			15.93		
				14.98	0.95	-	0.95	15.93	-	
2520-21			BUILDING & GROUND SUPPLIES: WTW	27.00						
12	12/31/2017	AJ-088699	BUILDING SUPPLIES - LAKIN CAMPUS		0.53			27.53		
12	12/31/2017	AJ-088704	BUILDING & GROUND SUPPLIES		0.50			28.03		
12	12/31/2017	AJ-088925	BUILDING SUPPLIES - LAKIN CAMPUS		0.35			28.38		
12		43100 AJ-088930	BUILDING & GROUND SUPPLIES		0.18			28.56		
				27.00	1.56	-	1.56	28.56	-	
2550-21			FOOD: WTW	166.00						
12		43100 AJ-088711	LAKIN - FOOD		0.39			166.39		
				166.00	0.39	-	0.39	166.00	-	
				166.00	0.39	-	0.39	166.39	-	
2600-21			TELEPHONE: WTW	323.24						
12	12/31/2017	AJ-088723	ALLOCATION TELEPHONE LAKIN		1.68			324.92		
12	12/31/2017	AJ-088728	TELEPHONE		7.27			332.19		
12		43100 PR-000385	PHONE REIMBURSEMENT		59.58			391.77		
				323.24	68.53	-	68.53	391.77	-	
2700-21			POSTAGE & SHIPPING: WTW	55.53						
12	12/31/2017	AJ-088740	POSTAGE ALLOCATION		1.95			57.48		
12	12/31/2017	AJ-088961	POSTAGE - LAKIN CAMPUS			0.11		57.37		
12	12/31/2017	JE-004355	POSTAGE - DEC		0.98			58.35		
				55.53	2.93	0.11	2.82	58.35	-	
2830-21			UTILITIES: WTW	118.36						
12	12/31/2017	AJ-088751	UTILITIES ALLOCATION		2.71			121.07		
				118.36	2.71	-	2.71	121.07	-	
2840-21			CARE OF BUILDINGS & GROUNDS: WTW	198.69						
12	12/31/2017	AJ-088762	ALLOCATION OF CARE OF BUILDING AND GROUNDS LAKIN		3.93			202.62		
12		43100 AJ-088767	ALLOCATION - CARE OF BUILDING AND GROUNDS		3.79			206.41		
				198.69	7.72	-	7.72	206.41	-	
2841-21			Inter - Blds and Grn: WTW	-						
				-	-	-	-	-	-	-
2850-21			EQUIPMENT REPAIR & MAINTENANCE: WTW	70.94						
12	12/29/2017	AP-005228	BISHOP BUSINESS EQUIPMENT CO /IN: DEC-2017		1.71			72.65		
12	12/31/2017	AJ-088780	EQUIPMENT REPAIR LAKIN CAMPUS		0.67			73.32		
				70.94	2.38	-	2.38	73.32	-	
2880-21			PROPERTY INS/TAXES: WTW	192.55						
12	12/31/2017	AJ-088791	PROP INS/TAXES ALLOCATION		13.42			205.97		
				192.55	13.42	-	13.42	205.97	-	
3100-21			PRINTING & PUB.: WTW	235.18						
12	12/31/2017	AJ-088802	PRINTING & PUBLICATION ALLOCATION		8.27			243.45		
12		43100 AJ-089482	PRINTING & PUBLICATION ALLOCATION			1.67		241.78		
				235.18	8.27	1.67	6.60	241.78	-	
3210-21			MILEAGE/EXPENSE: WTW	823.21						
12	12/31/2017	PR-000385	EXP REIMBURSEMENT		305.77			1,128.98		
				823.21	305.77	-	305.77	1,128.98	-	
3220-21			OUT OF TOWN TRAVEL: WTW	54.15						
				54.15	-	-	-	54.15	-	
3250-21			AGENCY VEHICLE OPERATE.COSTS : WTW	-						
				-	-	-	-	-	-	-
3280-21			AUTOMOBILE INSURANCE: WTW	196.42						
12	12/31/2017	AJ-088808	AUTO INS ALLOCATION		13.21			209.63		
				196.42	13.21	-	13.21	209.63	-	

Office & Mtg Supplies	Phone & Internet	Postage & shipping	Building & Occupancy (Utilities, care of bidg/grnds, bidg/grnd supp, prop ins)	Equip & Equip rent/repair	Advertising, Prntg, Pubs	Mileage, travel, conf, agency vehicle, auto ins	Borrower Incentives	Org Dues & Misc	Admin @ 17.9%	Loan Guarantee Funds (Misc)	Total
											21.60
											271.00
											10.08
											-
											302.68
											-
											1.39
											-
											1.39
											-
											0.95
											-
											0.95
											-
											0.53
											0.50
											0.35
											0.18
											1.56
											-
											0.39
											-
											0.39
											-
											1.68
											7.27
											59.58
											68.53
											-
											1.95
											(0.11)
											0.98
											-
											-
											2.82
											-
											2.71
											2.71
											-
											3.93
											3.79
											-
											7.72
											-
											-
											-
											1.71
											0.67
											-
											-
											2.38
											-
											13.42
											-
											13.42
											-
											8.27
											(1.67)
											6.60
											-
											305.77
											-
											305.77
											-
											-
											-
											-
											-
											-
											13.21
											-
											13.21

0.00

Period	Date	Journal	Comments	Beginning Balance	Debit	Credit	Net Change	Ending Balance	Salaries & Benefits	Atty, Legal, Audit, Acct, POS, Interdept
3300-21			CONFERENCE/CONVENTION/TRIPS: WTW	-						
				-	-	-	-	-	-	-
3500-21			SPECIFIC ASSISTANCE INDIVIDUAL: WTW	-						
				-	-	-	-	-	-	-
4100-21			ORGANIZATION DUES: WTW	125.00						
								125.00		
				125.00	-	-	-	125.00	-	-
4300-21			EQUIPMENT/FIXED ASSETS: WTW	220.13						
12	12/31/2017	AJ-088815	EQUIPMENT FIXED ASSETS		19.21			239.34		
12	12/31/2017	AJ-089495	EQUIPMENT FIXED ASSETS		1.71			241.05		
				220.13	20.92	-	20.92	241.05	-	-
4900-21			MISCELLANEOUS: WTW	14,887.28						
								14,887.28		
				14,887.28	-	-	-	14,887.28	-	-
				-	-	-	-	-	-	-
				-	4,007.49	4,007.49	-	-	2,713.93	313.25
			Calculation of Admin costs (=17.9% of expenses excluding Loan Guarantee Fur	621.87						
			Expenses inc Admin Costs						2,713.93	313.25
									2,713.93	313.25

Check

MAPA JARC GRANT BILLING DOCUMENT

PART IV - Project Budget Worksheet

Project Name: __HEARTLAND FAMILY SERVICE - WAYS TO WORK__

Contact Name: __Joanie Poore, VP__

BUDGET DETAIL	TOTAL JARC BUDGET (ORIGINAL)	1/1/2018 - 1/31/2018		TOTAL COST MONTH	Program to Date	
		JARC	LOCAL MATCH		JARC	LOCAL MATCH
A. OPERATING EXPENSES¹						
1. Salaries and Benefits	30,720	\$ 1,161.60	\$ 711.27	\$ 1,872.87	\$ 20,264.67	\$ 11,489.25
2. Atty, Audit, Acct, POS	2,200	\$ -	\$ 24.42	\$ 24.42	\$ -	\$ 2,052.46
3. Office and Meeting Supplies	400	\$ 2.34	\$ 2.34	\$ 4.68	\$ 93.50	\$ 93.50
4. Phone & Internet	400	\$ 37.86	\$ 37.86	\$ 75.72	\$ 233.75	\$ 233.75
5. Postage & Shipping	220	\$ 0.98	\$ 0.98	\$ 1.95	\$ 30.99	\$ 30.99
6. Building and Occupancy	1,240	\$ 30.40	\$ 30.40	\$ 60.80	\$ 311.41	\$ 311.41
7. Equipment & Equip rep/rent	800	\$ 13.46	\$ 13.46	\$ 26.92	\$ 170.65	\$ 170.65
8. Advertising, Printing and Pubs	840	\$ 6.14	\$ 6.14	\$ 12.27	\$ 127.03	\$ 127.03
9. Mileage, travel, conf, auto ins.	320	\$ 9.14	\$ 9.14	\$ 18.27	\$ 705.52	\$ 705.52
10. Borrower Incentives	-			\$ -	\$ -	\$ -
11. Org Dues & Misc	128	\$ -	\$ -	\$ -	\$ 62.50	\$ 62.50
12. Administrative Costs	6,732	\$ -	\$ 425.91	\$ 425.91	\$ -	\$ 6,722.96
Subtotal - Operating Expenses	\$ 44,000	\$ 1,261.91	\$ 1,261.91	\$ 2,523.81	\$ 22,000.00	\$ 22,000.00

General Ledger Detail Report
HEARTLAND FAMILY SERVICE (002)
DEPARTMENT 21 - WAYS TO WORK
Detail Postings for Period 12 for December 01-December 31, 2017
Account Number/Description

Period	Date	Journal	Comments	Beginning Balance	Debit	Credit	Net Change	Ending Balance	Salaries & Benefits	Atty, Legal, Audit, Acct, POS, Interdept
1010-21			INCOME FROM SERVICES							
				-	-	-	-	-		
1111-21			CONTRIBUTIONS RESTRICTED- WTW							
01	1/31/2018	AJ-089512	CONTRIBUTIONS RESTRICTED ALLOCATION			8.41		(8.41)		
12										
				-	-	8.41	(8.41)	(8.41)		
1334-21			Service Fees - Ways to Work							
01		43131 CR-022983	Doc: CR 013118 01/31/18 FINANCIAL ED & CREDIT REPORT FEE			50.00		(50.00)		
				-	-	50.00	(50.00)	(50.00)		
1700-21			MISCELLANEOUS- WTW							
01	1/31/2018	AJ-090202	MISC INCOME - L CODE			0.03		(0.03)		
				-	-	0.03	(0.03)	(0.03)		
1701-21			MISCELLANEOUS WTW COLLECTIONS ON DEFAULTED LOANS	(7,869.18)				(7,869.18)		
								(7,869.18)		
				(7,869.18)	-	-	-	(7,869.18)		
1750-21			SPECIAL EVENTS: WTW							
				-	-	-	-	-		
1900-21			UNITED WAY ALLOCAT: WTW							
01		43131 AR-000478	UNITED WAY			2,083.33		(2,083.33)		
				-	-	2,083.33	(2,083.33)	(2,083.33)		
1999-21			INDIRECT REV (EXP)-OPEN							
				-	-	-	-	-		
2100-21			SALARIES: DIS. FAM.							
01	1/31/2018	AJ-089537	SALARIES GRANT MANAGERS		26.82			26.82	26.82	
01	1/31/2018	AJ-090218	SALARIES GRANT MANAGERS		23.66			50.48	23.66	
01	1/31/2018	PR-000387	SALARIES		2,199.24			2,249.72	2,199.24	
01	1/31/2018	PR-000389	PAYROLL ADJ - SCHULTE			6.66		2,243.06	(6.66)	
				-	2,249.72	6.66	2,243.06	2,243.06	2,243.06	
2210-21			GROUP HEALTH INSURANCE: WTW							
01	43131	PR-000387	HEALTH INS		261.13			261.13	261.13	
01	1/31/2018	PR-000389	PAYROLL ADJ - SCHULTE			0.03		261.10	(0.03)	
				-	261.13	0.03	261.10	261.10	261.10	
2220-21			RETIREMENT PLAN: WTW							
01	1/31/2018	PR-000387	RETIREMENT		67.25			67.25	67.25	
01	1/31/2018	PR-000389	PAYROLL ADJ - SCHULTE			0.47		66.78	(0.47)	
				-	67.25	0.47	66.78	66.78	66.78	
2290-21			OTHER BENEFITS/DIS.: WTW							
01	43131	PR-000387	LONG TERM DISABILITY		8.77			8.77	8.77	
01	1/31/2018	PR-000389	PAYROLL ADJ - SCHULTE			0.03		8.74	(0.03)	
				-	8.77	0.03	8.74	8.74	8.74	
2300-21			PAYROLL TAXES: WTW							
01	1/31/2018	AJ-089556	PR TAXES PROF LIAB		34.73			34.73	34.73	
01	1/31/2018	PR-000387	PAYROLL TAXES		164.13			198.86	164.13	
01	1/31/2018	PR-000387	STATE UNEMPLOYMENT		11.16			210.02	11.16	
01	1/31/2018	PR-000389	PAYROLL ADJ - SCHULTE			0.51		209.51	(0.51)	
				-	210.02	0.51	209.51	209.51	209.51	
2410-21			ATTORNEY FEES: WTW							
				-	-	-	-	-	-	
2430-21			AUDITING/ACCOUNT FEES: WTW							
01	1/31/2018	AJ-089568	AUDITING/ACCT FEES ALLOC		5.29			5.29		5.29
				-	5.29	-	5.29	5.29	-	5.29
2490-21			OTHER PURCHASE OF SERVICE: WTW							

Period	Date	Journal	Comments	Beginning Balance	Debit	Credit	Net Change	Ending Balance	Salaries & Benefits	Atty. Legal, Audit, Acct, POS, Interdept
01	1/31/2018	AJ-089579	PURCHASE OF SERVICE ALLOC		9.23			9.23		9.23
01	1/31/2018	AP-005262	CORELOGIC CREDCO, LLC /IN. 10430432		9.90			19.13		9.90
					19.13		19.13	19.13		19.13
2491-21			Interdepartmental: WTW							
2510-21			OFFICE SUPPLIES: WTW							
01	1/31/2018	AJ-089593	LAKIN CAMPUS OFFICE SUPPLIES		2.79			2.79		
					2.79		2.79	2.79		
2520-21			BUILDING & GROUND SUPPLIES: WTW							
01	1/31/2018	AJ-089606	BUILDING SUPPLIES - LAKIN CAMPUS		0.55			0.55		
01	1/31/2018	AJ-089611	BUILDING & GROUND SUPPLIES		0.13			0.68		
					0.68		0.68	0.68		
2550-21			FOOD: WTW							
01		43131 AJ-089618	LAKIN - FOOD		1.89			1.89		
								166.00		
					1.89		1.89	1.89		
2600-21			TELEPHONE: WTW							
01	1/31/2018	AJ-089630	ALLOCATION TELEPHONE LAKIN		8.81			8.81		
01	1/31/2018	AJ-089635	TELEPHONE		7.33			16.14		
01		43131 PR-000387	PHONE REIMBURSEMENT		59.58			75.72		
					75.72		75.72	75.72		
2700-21			POSTAGE & SHIPPING: WTW							
01	1/31/2018	AJ-089647	POSTAGE ALLOCATION		1.95			1.95		
					1.95		1.95	1.95		
2830-21			UTILITIES: WTW							
01	1/31/2018	AJ-089658	UTILITIES ALLOCATION		19.68			19.68		
					19.68		19.68	19.68		
2840-21			CARE OF BUILDINGS & GROUNDS: WTW							
01	1/31/2018	AJ-089669	ALLOCATION OF CARE OF BUILDING AND GROUNDS LAKIN		18.26			18.26		
01		43131 AJ-089674	ALLOCATION - CARE OF BUILDING AND GROUNDS		3.79			22.05		
					22.05		22.05	22.05		
2841-21			Inter - Blds and Grn: WTW							
2850-21			EQUIPMENT REPAIR & MAINTENANCE: WTW							
2880-21			PROPERTY INS/TAXES: WTW							
01	1/31/2018	AJ-089698	PROP INS/TAXES ALLOCATION		18.39			18.39		
					18.39		18.39	18.39		
3100-21			PRINTING & PUB.: WTW							
01	1/31/2018	AJ-089704	PRINTING LAKIN CAMPUS		3.68			3.68		
01		43131 AJ-089709	PRINTING & PUBLICATION ALLOCATION		8.59			12.27		
					12.27		12.27	12.27		
3210-21			MILEAGE/EXPENSE: WTW							
3220-21			OUT OF TOWN TRAVEL: WTW					54.15		
3250-21			AGENCY VEHICLE OPERATE.COSTS : WTW							
3280-21			AUTOMOBILE INSURANCE: WTW							
01	1/31/2018	AJ-089715	AUTO INS ALLOCATION		18.27			18.27		
					18.27		18.27	18.27		

Period	Date	Journal	Comments	Beginning Balance	Debit	Credit	Net Change	Ending Balance	Salaries & Benefits	Atty, Legal, Audit, Acct, POS, Interdept
3300-21			CONFERENCE/CONVENTION/TRIPS: WTW	-						
				-	-	-	-	-	-	-
3500-21			SPECIFIC ASSISTANCE INDIVIDUAL: WTW	-						
				-	-	-	-	-	-	-
4100-21			ORGANIZATION DUES: WTW					125.00		
				-	-	-	-	-	-	-
4300-21			EQUIPMENT/FIXED ASSETS: WTW	-						
01	1/31/2018	AJ-089722	EQUIPMENT FIXED ASSETS		26.92			26.92		
				-	26.92	-	26.92	26.92	-	-
4900-21			MISCELLANEOUS: WTW	-						
01	1/31/2018	JE-004428	WTW Reserve		625.00			625.00		
				-	625.00	-	625.00	625.00	-	-
				-	-	-	-	-	-	-
				(7,869.18)	3,646.92	2,149.47	1,497.45	(6,371.73)	2,789.19	24.42
			Calculation of Admin costs (=17.9% of expenses excluding Loan Guarantee Fur	425.91						
			Expenses inc Admin Costs						2,789.19	24.42
									2,789.19	24.42

Check (991.49)



Subcontractor Payment Authorization

Contract Number: 1850410201
 Contract Party: City of Omaha
 Contract Description: FY 2018 Planning
 Contract Approved by Board of Directors: June 29, 2017
 Contact Amount: \$55,000.00
 Match Amount: \$23,571.00
 Contract Period: July 1, 2017 - June 30, 2018

Payment # 3

Billed to Date: \$ 55,000.00
 Less Previous Payments: \$ 51,039.34
 Amount Due: \$ 3,960.66

Payment Recommended By: _____
 Responsible Charge / MAPA Staff Member

 Department Manager

 MAPA Executive Director

Approved by MAPA Finance Committee: _____
 Date

 MAPA Treasurer/Finance Committee Member

Approved by MAPA Board of Directors: _____
 Date

 MAPA Board Chair/Member

City of Omaha

Date: 03-JUL-18

Page 1 of 1

1819 Farnam St. Billing Div.
Omaha NE 68183
Contact : (402) 444-5453

Remit To :

City of Omaha Cashier
RM H10
1819 Farnam St.
Omaha NE 68183

Bill To :

MAPA
GREG YOUELL, DIRECTOR
2222 CUMING ST
OMAHA NE 68102

Ship To :

Customer Number : 28392

Invoice Number : 153685

Terms : 30 NET

Transaction Type : PLANNING

Total due : \$ 3,960.66

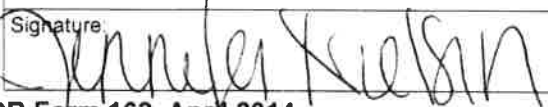
PLEASE RETURN TOP PORTION WITH REMITTANCE

Item No	Description	Qty Invoiced	Unit Price	Extended Price
1	WAGES APRIL - JUN 2018	1	3102.45	3102.45
2	TRAVEL APRIL - JUNE 2018	1	560.53	560.53
3	SEMINARS APRIL - JUNE 2018	1	297.68	297.68
	SPECIAL INSTRUCTIONS	DUE DATE		TOTAL DUE
	Invoice Number : 153685	02-AUG-18		\$3,960.66

Cost Breakdown Form for Actual Cost Plus Fixed Fee Agreements

Company Name:	City of Omaha
Address:	1819 Farnam Street, Suite 1100
Project No.:	410.12 Omaha Planning - FY 2018
Project Location:	OMAHA, NE
Control No.:	
Agreement No.:	MAPA contract #
Invoice No. and Date:	153685 6/30/2018
Progress Report Date:	06/30/2018
% Work Completed:	SEE ATTACHED SUMMARY
Current Billing Period:	April-June 2018

Actual Cost plus Fixed Fee Amount >	Limiting Max. Amount \$55,000.00	Fixed Fee for Profit	Total Contract Amount \$55,000.00
	Amount		
	This Period	Previously Billed	To Date
Direct Labor	\$14,603.00	\$28,067.04	\$42,670.04
Overhead @ % of Direct Labor	\$0.00		\$0.00
Fixed Fee = % of Labor and Overhead	\$0.00		\$0.00
FCCM @ % of Direct Labor	\$0.00		\$0.00
Direct Non-Labor Costs			\$0.00
Indirect Costs	\$2,129.12	\$4,092.18	\$6,221.30
Outside Services (Subconsultants)			
Travel & Training	\$404.00	\$1,744.00	\$2,148.00
			\$0.00
			\$0.00
			\$0.00
			\$0.00
			\$0.00
			\$0.00
Subtotal – Outside Services	\$404.00	\$1,744.00	\$2,148.00
Total Amount Due >	\$17,136.12	\$33,903.22	\$51,039.34

<i>I certify that the billed amounts are actual and in agreement with the contract terms.</i>		Balance:	\$3,960.66
Signature: 	Title: Operations Manager	Date: 7/9/18	

City of Omaha Invoice
Q4 2017-2018 April-June

MAPA
Grag Youell, Director
2222 Curling st
Omaha Ne 68102

Direct Personnel Costs

Project	Name	Hourly Rate	Description	Hours	Total	Federal 70%	Local 30%
Project 1	Derek Miller	\$72.46 Effective Rate		24	1,739.04	1,217.33	521.71
Project 1	Kellie Johnston-Dorsey	\$47.76 Effective Rate		46.5	2,220.84	1,554.59	666.25
Project 1	Kevin Carder	\$49.16 Effective Rate		0	-	-	-
Project 1	Stephen Osberg	\$50.66 Effective Rate		89	4,508.74	3,156.12	1,352.62
Project 1	Tim Fries	\$52.08 Effective Rate		0	-	-	-
Project 1	Manual Cook	\$12.92 Effective Rate		0	-	-	-

Project 1 Subtotal	159.5	\$	8,468.62	\$	5,928.04	\$	2,540.58
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Project 2	Derek Miller	\$72.46 Effective Rate		42.5	3,079.55	2,155.69	923.86
Project 2	Kellie Johnston-Dorsey	\$47.76 Effective Rate		54.5	2,602.92	1,822.04	780.88
Project 2	Kevin Carder	\$49.16 Effective Rate		0	-	-	-
Project 2	Stephen Osberg	\$50.66 Effective Rate		79	4,002.14	2,801.50	1,200.64
Project 2	Tim Fries	\$52.08 Effective Rate		0	-	-	-
Project 2	Manual Cook	\$12.92 Effective Rate		0	-	-	-

Project 2 Subtotal	176	\$	9,884.61	\$	6,779.23	\$	2,905.38
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Subtotal Direct Personnel Costs	335.5		18,153.23		12,707.27		5,445.96
Indirect cost rate (14.58%)			2,646.75		1,852.72		794.03

Other Direct Costs

Training			1,299.00		909.30		389.70
Travel			560.53		393.00		167.53
Services							
EXTRA MATCH PROVIDED			(17,002.39)		(11,901.63)		(5,100.70)
			(15,142.80)		(10,599.33)		(4,543.47)
Total			5,657.18		3,960.66		1,896.52

Budget

	Current	Previous	Total	Budget	Balance
Staff time	18,153.23	60,957.22	79,110.45	64,278.00	\$(14,832.45)
Travel, Training, Service	1,859.53	3,068.98	4,928.51	4,295.00	\$(633.51)
Indirect cost rate (14.58%)	2,646.75	8,887.57	11,534.32	9,998.00	\$(1,536.32)

Total	22,659.51	72,914.00	95,573.28	78,571.00	(17,002.28)
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Training & Travel

Stephen Osberg Washington	560.53
Derek Miller APA	249
David Fanslau APA registration	1050

Billing:	Description: July - September, 2017
2018.11111.109031.0000.41199.0000	\$ 3,102.45
2018.11111.109031.0000.42121.0000	\$ 560.53
2018.21217.109011.0000.42854.0000	\$ 297.68
Bill effective date	\$ 3,960.66 TOTAL
Customer # 28392	

2017-2018 Budget

Item	Total	Federal (70%)	Local (30%)	JULY - SEPT 2017	Oct- Dec 2017	Jan-Mar 2018	Apr-Jun 2018	Total Spent	Amount left
<i>Direct Costs</i>									
Training, Travel, Services	\$4,295.00	\$3,007.00	\$1,288.00	-	2,491.86	577.12	1,859.53	4,928.51	(633.51)
<i>Personnel Costs</i>									
Effective Rate									
<i>Hours</i>	1178								
	\$64,278.00	\$44,994.00	\$19,284.00	20,384.17	19,711.63	20,861.42	18,153.23	79,110.45	(14,832.45)
<i>2017 Indirect cost rate (14.58%)</i>									
	\$9,998.00	\$6,999.00	\$2,999.00	2,972.01	2,873.96	3,041.60	2,646.75	11,534.32	(1,536.32)
Total	\$78,571.00	\$55,000.00	\$23,571.00	23,356.18	25,077.45	24,480.14	22,659.51	95,573.28	(17,002.28)

*

Derek Miller	April - 2018																														Monthly Total				
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30					
Project #1 - Short Range Planning Projects				4							2									1				1		1								9.0	
Develop and refine the short range transportation planning process; including project reviews, collect and maintain data to analyze transportation, housing and land use trends; utilize and coordinate geographic Information Systems (GIS) and aerial photography to develop project plans and proposals; assist in the development of Transportation Improvement Program (TIP); assist in setting the Capital Improvement Plan (CIP); assist in programming, funding and delivery of transportation improvement projects; develop and maintain performance measures to track progress toward regional goals.																																			
Project #2 - Long Range Planning Projects			2.0	2.0	2.0				1.0	2.0		2.0	1.0				2.0		1.0					2.0										17.0	
Develop and refine the long range transportation planning efforts; including participation and coordination in external working groups to develop long range transportation plans including but not limited to updates and creation of elements that are part of the Long Range Transportation Plan.																																			
Daily Total	0.0	0.0	2.0	6.0	2.0	0.0	0.0	0.0	1.0	2.0	2.0	2.0	1.0	0.0	0.0	0.0	2.0	0.0	1.0	1.0	0.0	0.0	0.0	3.0	0.0	1.0	0.0	0.0	0.0	0.0	0.0	26.0			
Non-work days																																			
																															Grand Total				

Derek Miller	May - 2018																															Monthly Total	
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31		
Project #1 - Short Range Planning Projects		4							1		1															1						1.5	8.5
Develop and refine the short range transportation planning process; including project reviews, collect and maintain data to analyze transportation, housing and land use trends; utilize and coordinate geographic Information Systems (GIS) and aerial photography to develop project plans and proposals; assist in the development of Transportation Improvement Program (TIP); assist in setting the Capital Improvement Plan (CIP); assist in programming, funding and delivery of transportation improvement projects; develop and maintain performance measures to track progress toward regional goals.																																	
Project #2 - Long Range Planning Projects			2.0					2.0		2.0				1.0	2.0		1.0														1.5	2.0	15.5
Develop and refine the long range transportation planning efforts; including participation and coordination in external working groups to develop long range transportation plans including but not limited to updates and creation of elements that are part of the Long Range Transportation Plan.																																	
Daily Total	0.0	4.0	2.0	0.0	0.0	0.0	0.0	2.0	1.0	2.0	1.0	0.0	0.0	1.0	2.0	0.0	1.0	0.0	0.0	0.0	0.0	2.0	0.0	0.0	1.0	0.0	0.0	0.0	0.0	1.5	3.5	24.0	
Non-work days																																	
																																Grand Total	

Derek Miller

June - 2018

Monthly Total

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	Monthly Total
Project #1 - Short Range Planning Projects		2			2			1																	1.5						6.5
Develop and refine the short range transportation planning process; including project reviews, collect and maintain data to analyze transportation, housing and land use trends; utilize and coordinate geographic Information Systems (GIS) and aerial photography to develop project plans and proposals; assist in the development of Transportation Improvement Program (TIP); assist in setting the Capital Improvement Plan (CIP); assist in programming, funding and delivery of transportation improvement projects; develop and maintain performance measures to track progress toward regional goals																															
Project #2 - Long Range Planning Projects											3.0	2.0		2.0							2.0	1.0									10.0
Develop and refine the long range transportation planning efforts; including participation and coordination in external working groups to develop long range transportation plans including but not limited to updates and creation of elements that are part of the Long Range Transportation Plan																															
Daily Total	2.0	0.0	0.0	0.0	2.0	0.0	0.0	1.0	0.0	0.0	3.0	2.0	0.0	2.0	0.0	0.0	0.0	0.0	0.0	0.0	2.0	1.0	0.0	0.0	1.5	0.0	0.0	0.0	0.0	16.5	
Non-work days																															
																															Grand Total

Kellie Johnston Dorsey	April - 2018																														Monthly Total	
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30		
Project #1 - Short Range Planning Projects									3		2	2.5						2.5		2					2.5							14.5
Develop and refine the short range transportation planning process; including project reviews, collect and maintain data to analyze transportation, housing and land use trends; utilize and coordinate geographic Information Systems (GIS) and aerial photography to develop project plans and proposals; assist in the development of Transportation Improvement Program (TIP); assist in setting the Capital Improvement Plan (CIP); assist in programming, funding and delivery of transportation improvement projects; develop and maintain performance measures to track progress toward regional goals.																																
Project #2 - Long Range Planning Projects			1.0		2.0				1.0											1.0												5.0
Develop and refine the long range transportation planning efforts; including participation and coordination in external working groups to develop long range transportation plans including but not limited to updates and creation of elements that are part of the Long Range Transportation Plan.																																
Daily Total	0.0	0.0	1.0	0.0	2.0	0.0	0.0	0.0	1.0	3.0	0.0	2.0	2.5	0.0	0.0	0.0	0.0	2.5	0.0	3.0	0.0	0.0	0.0	0.0	2.5	0.0	0.0	0.0	0.0	0.0	19.5	
Non-work days																															Grand Total	

Kellie Johnston Dorsey

June - 2018

Monthly Total

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	
Project #1 - Short Range Planning Projects											4	2	2	2	2.5			1									2.5				16.0
Develop and refine the short range transportation planning process; including project reviews, collect and maintain data to analyze transportation, housing and land use trends; utilize and coordinate geographic Information Systems (GIS) and aerial photography to develop project plans and proposals; assist in the development of Transportation Improvement Program (TIP); assist in setting the Capital Improvement Plan (CIP); assist in programming, funding and delivery of transportation improvement projects; develop and maintain performance measures to track progress toward regional goals.																															
Project #2 - Long Range Planning Projects				3.0	2.0		2.0	1.0			4.0	4.0						2.0								2.0	1.0		4.0	4.0	29.0
Develop and refine the long range transportation planning efforts; including participation and coordination in external working groups to develop long range transportation plans including but not limited to updates and creation of elements that are part of the Long Range Transportation Plan																															
Daily Total	0.0	0.0	0.0	3.0	2.0	0.0	2.0	1.0	0.0	0.0	8.0	6.0	2.0	2.0	2.5	0.0	0.0	3.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	2.0	1.0	2.5	4.0	4.0	45.0
Non-work days:																															Grand Total

Stephen Osberg	April - 2018																														Monthly Total		
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30			
Project #1 - Short Range Planning Projects		3	3						4				3			2	6	4						4	4	4							37.0
Develop and refine the short range transportation planning process; including project reviews, collect and maintain data to analyze transportation, housing and land use trends; utilize and coordinate geographic Information Systems (GIS) and aerial photography to develop project plans and proposals; assist in the development of Transportation Improvement Program (TIP); assist in setting the Capital Improvement Plan (CIP); assist in programming, funding and delivery of transportation improvement projects; develop and maintain performance measures to track progress toward regional goals																																	
Project #2 - Long Range Planning Projects				4.0	2.0	2.0			1.0		4.0	3.0						3.0						4.0	4.0	4.0							31.0
Develop and refine the long range transportation planning efforts; including participation and coordination in external working groups to develop long range transportation plans including but not limited to updates and creation of elements that are part of the Long Range Transportation Plan																																	
Daily Total	0.0	3.0	3.0	4.0	2.0	2.0	0.0	0.0	5.0	0.0	4.0	3.0	3.0	0.0	0.0	2.0	6.0	7.0	0.0	0.0	0.0	0.0	8.0	8.0	8.0	0.0	0.0	0.0	0.0	0.0	0.0	68.0	
Non-work days																																	Grand Total

CITY OF OMAHA

DATE (mo/day/year)	PREPARED BY	REQUESTING ORGANIZATION NAME	TOTAL DOCUMENT COST
5/9/2018	Janie McCarthy-Cheney	PLANNING	\$ 560.53

Stephen Osberg
5144 Franklin St
Omaha, NE 68104

SEPARATE CHECK
YES or NO

INVOICE	DESCRIPTION	BUDGET FISCAL YEAR	FUND	ORGN	PROJECT	ACCOUNT NUMBER	AMOUNT
Stephen Travel	TOD/LOCUS Conference. 4/22 to 4/25. Washington, DC	2018	11111	109031	0000	42121	560.53

Did you contact Purchasing first for a PO? Yes No **x**

Reason for Payment Voucher No PO-Travel

Acceptable Reasons For Payment using Voucher

- Books, Periodicals, Subscriptions and Publications
- Accreditation fees or license fees
- Utilities
- Judgments
- Public Works Right of Way
- Refunds/ Reimbursements
- Travel
- Registrations
- Petty Cash
- Some Grants (where no "buying" occurs)
- Medical bills (health insurance, worker's comp, etc)
- Credit cards
- Background checks/Credit checks

Authorized
Signature

 Date 5/9/18

Authorized
Signature

 Date 5/10/18

* If you will repeatedly be making purchases from the same vendor using the same account string, please request a funded PO.*
If the product or service is greater than \$5,000 please contact Purchasing for a PO, as three quotes are required before purchasing.

City of Omaha

Routing

Combined Subsistence and Transportation Authorization and Expense Report

Your Supervisor

Jennie Nielsen

Aut
Be

Name: Stephen Osberg

Department: Planning

Division: Urban Plannlog

Classification: City Planner

Itinerary: April 22nd - 25th 2018

Purpose: TOD Convening / LOCUS Conference

City Council Resolution Number and Date (if applicable):

NOTE: One day auto trips that do not include overnight stay should be coded as mileage (42111)

for private vehicles, and as gasoline (43244) for City-owned vehicles. Meals will not be

reimbursed for travel that does not include an overnight stay.

Grant Funds/Reimbursed

(Y) N

MAPA

Estimated Costs:		Funding Source Information	
Transportation		Must be completed	
Airfare	\$ 0.00	Budget Year	2018
Auto/City (gasoline)	\$ 0.00	Fund	1111
Auto/Private (mileage)	\$ 0.00 [1]	Organization	1124031
(0 Miles X 1.53 Rate		Project	
Lodging - includes tax	\$ 556.37	Travel Account	42121
Meals	\$ 241.50	Registration Account	42854
Other	\$ 0.00	Task	
Subtotal	\$ 797.87	Award	
Registration Fees (Acct. 428	\$ 0.00	Finance Department	5/21/18
Total	\$ 797.87	Approval for Funding	

Chris Raskwell

Jennie Nielsen 3.21.18

Juan Stottak 3/22/18

Expenses Paid

Expense Report	Sun.	Mon.	Tues	Wed.	Thurs.	Fri	Sat.	Totals
Date	4/22	4/23	4/24	4/25				
Transportation								
Lodging				424.00				424.00
Meals	114.05	58.80	63.68					136.53
Registration								
Other								

Total Reimbursable Expenses Claimed \$ 560.53

I certify that the above statement and itemization of expenses are true and correct, are supported by the attached obtainable receipts, and were properly incurred on behalf of the City of Omaha and are in accordance with Chapter 10, Article VIII of the Omaha Municipal Code.

Stephen Osberg 5/7/2018
Payee/Date

I have examined this itemization of expenses and approve the above expenses as properly incurred on behalf of the City of Omaha.

Jennie Nielsen 5/8/2018
Department Director/Date

For Finance Use Only:

Transportation	
Meals, Lodging, and Other	
Actual Cost Incurred	
Total Estimated Cost	
Actual Over Estimate	

Mayor's Approval: If total expenses exceed total estimated cost.

Mayor of the City of Omaha



U.S. General Services Administration

FY 2018 Per Diem Rates for District of Columbia

(October 2017 - September 2018)

Cities not appearing below may be located within a county for which rates are listed.

To determine what county a city is located in, visit the National Association of Counties (NACO) website (a non-federal website).

October 2017 - September 2018 You searched for: District of Columbia Max lodging by month (excluding taxes.) The last column is the Meals and Incidental Expense (M&IE) rate.

Primary Destination (1, 2)	County (3, 4)	2017			2018									M&IE (5)	
		Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep		
Standard Rate	Applies for all locations without specified rates	\$93	\$93	\$93	\$93	\$93	\$93	\$93	\$93	\$93	\$93	\$93	\$93	\$93	\$51
District of Columbia	Washington DC (also the cities of Alexandria, Falls Church and Fairfax, and the counties of Arlington and Fairfax, in Virginia; and the counties of Montgomery and Prince George's in Maryland)	\$250	\$201	\$201	\$201	\$201	\$253	\$253	\$253	\$253	\$175	\$175	\$250	\$69	

Footnotes

1. Traveler reimbursement is based on the location of the work activities and not the accommodations, unless lodging is not available at the work activity, then the agency may authorize the rate where lodging is obtained.
2. Unless otherwise specified, the per diem locality is defined as "all locations within, or entirely surrounded by, the corporate limits of the key city, including independent entities located within those boundaries."
3. Per diem localities with county definitions shall include "all locations within, or entirely surrounded by, the corporate limits of the key city as well as the boundaries of the listed counties, including independent entities located within the boundaries of the key city and the listed counties (unless otherwise listed separately)."
4. When a military installation or Government-related facility (whether or not specifically named) is located partially within more than one city or county boundary, the applicable per diem rate for the entire installation or facility is the higher of the rates which apply to the cities and/or counties, even though part(s) of such activities may be located outside the defined per diem locality.
5. *Meals and Incidental Expenses*, see Breakdown of M&IE Expenses for important information on first and last days of travel.



THE BEACON HOTEL
 AND CORPORATE QUARTERS

OSBERG, STEPHEN
 5144 FRANKLIN ST OMAHA NE

Confirmation Number: 27736039-1
 Room Number: 517
 Room Type: DD
 No. of Guests: 1

TAX ID	ARRIVAL	DEPARTURE	RATE PLAN	ACCOUNT
	04/22/2018	04/25/2018	ASSNG	123642

DATE	CODE	DESCRIPTION	COMMENT	AMOUNT (USD)
04/23/2018	RM	Room Charge		219.00
04/24/2018	RM	Room Charge		259.00
04/25/2018	VI	VISA-2 *****0405		(478.00)

TOTAL DUE: 0.00

TERMS: DUE AND PAYABLE PRESENTATION. I AGREE THAT MY LIABILITY FOR THIS BILL IS NOT WAIVED AND I AGREE TO BE HELD PERSONALLY LIABLE IN THE EVENT THAT THE INDICATED PERSON, COMPANY OR ASSOCIATION FAILS TO PAY PART OR THE FULL AMOUNT OF THESE CHARGES. I HAVE READ AND UNDERSTAND ALL POLICIES AND PROCEDURES LISTED ABOVE AND AGREE TO ABIDE BY THE POLICIES OF THE HOTEL.

SIGNATURE: X _____ DATE: _____

Smart Growth America covered \$54 of this.
 Requested for reimbursement: \$424

4-22-18
Osberg

Food: \$14.05

SHAKE SHACK
1216 18th St NW
Washington DC, 20036

Host: Rozine 04/22/2018
65 STEVE 1:01 PM
20036

Smoke Shack	7.29
french fries	2.99
Shack 2 0 Water	2.49

Subtotal	12.77
Tax	1.28

To Stay Total 14.05

Visa #XXXXXXXXXXXX0405 14.05
Auth:03859D

We wanna hear ya! Take our survey
for \$5 off your next \$20 App order.
<http://bit.ly/shack-survey-1106>

--- Check Closed ---

1/27/2010
Osberg

SUCCOTASH

915 F Street NW
Washington DC 20004
Ph. 202.849.6933
Facebook/Instagram
@SUCCOTASHrestaurant

The Smith
901 F Street NW
Washington, DC 20004
(202) 868-4900

430 Dalonte

Chk 2369 B14 Gst 0
 Apr23'18 12:58PM

1 Salmon	22.00
1 Collards	6.00
Subtotal	28.00
Sales Tax	2.80
12:58PM Total	30.80
Sales Tax	2.80

110 Wallace

Chk 2644 S21 Gst 0
 Apr23'18 07:16PM

Bar	
1 Mid Manhattan	13.50
1 Cotuit Bay	3.00
1 Moondancer	3.00
1 Oyster O.T.D	3.00
1 Tangier	3.00
1 Pork Chop	28.00
Food	40.90
Beverage	13.50
Tax	5.35
07:31PM Total Due	58.85

For your convenience we are providing the following

gratuity calculations:
 18% is \$5.54
 20% is \$6.16
 22% is \$6.78

Happy Hour Mon-Fri 4-7pm
 Lunch Mon-Fri 1130am-4pm
 Brunch Sat-Sun 10am-3pm
www.SUCCOTASHrestaurant.com

Thank you for dining with us!

Succotash : \$30.80
 The Smith : \$28.00

 Total : **\$58.80**



DAIKAYA
705 6th St NW
Wash, DC 20001
202-589-1600

Le Diplomate
1601 14th St NW
Washington, DC 20009
(202) 332-3333

Order# 630556
Seat Count=1
Server: Jesse F
Table: B10
Date: 4/24/18, 11:23 AM

Server: Sean
Table 335/1
Guests: 1

04/24/2018
9:28 PM

#80062

Shoyu \$14.25
Shiitake Mushroom
Wakame
Subtotal: \$14.25
Total Tax: \$1.43
Total: \$15.68

Asst Oyster 18.50
Steak Frites 29.50
Grande Dame 16.00

5 Items

Subtotal 64.00
Tax 6.40

Total 70.40

Order Balance due: \$15.68

Balance Due 70.40

Gratuity has not been added to your check.
Recommended gratuity is as follows:
\$11.52 18% | \$12.80 20%

%	Suggested Gratuity	Tip	Total
18.00%	of sale:	\$2.56 =	\$18.25
20.00%	of sale:	\$2.85 =	\$18.53
22.00%	of sale:	\$3.14 =	\$18.82

DAIKAYA - RAMEN IZAKAYA
www.daikaya.com

Daikaya: \$15.68
Le Diplomate: \$48.00
Total: \$63.68

MAPA Unified Work Program Funding Request

Omaha City Planning

Fiscal year: 2018

Project #1

Progress Report Q4

Project Name:

Short Range Planning Projects

Current Period Activities:

- North Downtown Pedestrian Bridge Approval and Design
 - 30% plans approved
 - CE-3 document approved June 22
 - Advertised for Final Design Consultants, received two proposals,
 - Interviewed consultants and hired HNTB
 - Finalized SOS
 - Coordinated with Riverfront Development project (This project is apart of the overall redevelopment of the riverfront.)
- Transit Oriented Development Policy and Zoning Amendment Development
 - BRT (Dodge Corridor) –
 - TOD technical assistance grant was awarded to the City of Omaha by Smart Growth America in late 2016.
 - Zoning and Master Plan amendments planned for 2018, with public engagement.
 - Internal kickoff meeting held in March of 2018. Internal Action Team now meeting monthly.
 - Currently assembling Stakeholder Group and planning first public meeting.
- Development Review
 - Ongoing
- 24th Street Road Diet Project
 - The public engagement plan was approved by NDOT
 - We are a part of a multi department / agency team developing the specific engagement with stakeholders and the general public.
 - Stakeholder meetings were held July 27.

- Public open house was held on September 19.
- PIH meeting held October 20.
- Stakeholder open house held October 26.
- Will use this process to help inform future street improvement projects.
- Environmental review ongoing.
- 30th Street Road Diet Project
 - A consultant has been selected and scoped for the project.
 - Public open house was held on September 20.
 - PIH meeting held December 20.
 - Environmental review ongoing.
- B-Cycle Implementation
 - CMAQ Grant was approved by City Council.
 - Sole source justification was approved June 22.
 - NEPA environmental review complete. NTP received in November.
 - ROW phase ongoing.
 - License Agreements with partners and Declaration of Use for stations on City-opened property outside the ROW were approved by City Council on March 27, 2018.
 - Had to re-NEPA due to slight changes in station locations. ROW Certificate anticipated shortly.
 - Planned ribbon cutting in August/September.
- Parking Regulation Reform
 - Ongoing
 - Downtown parking and mobility study has been restarted
 - This will be developed in conjunction with the TOD Study.
 - Working on proposed draft bicycle parking requirements based on Mayor's Active Living Advisory Committee recommendation
- Bicycle and Pedestrian Automatic Counters
 - 2 of the 6 counters were purchased and installed in late 2016.
 - The remaining permanent counters will be installed in Summer 2018. Installation ordered this quarter.
- 20 Mile Loop Implementation
 - Standard Wayfinding Manual – Final draft complete
 - Work orders created to fabricate and install sign assemblies throughout system.
 - Wayfinding materials will be ordered imminently. Installation likely to occur in late 2018/early 2019.
 - Working with partners on how to expand the system.

- Complete Streets Design Manual
 - Public Meetings started in October, 2016.
 - Multiple internal Project Team meetings were held last quarter.
 - A third stakeholder committee and public meeting were held on June 21st and 22nd.
 - Received initial drafts of document chapters.
 - Currently reviewing and revising internally before sharing with project partners. Significant progress being made.
 - Testing concepts on ongoing projects.
- Landscape Handbook and Code Update
 - Developed list of acceptable trees and shrubs for omahaplants.org
 - Examined landscape code for areas that need clarification and simplification
 - Begin writing text for new landscape handbook.
- 13th Street Corridor Walkability Study
 - H2050 mini-grant project
 - Consultant selected.
 - Project underway. Multiple stakeholder meetings held.

MAPA Unified Work Program Funding Request

Omaha City Planning

Fiscal year: 2018

Project #2

Progress Report Q4

Project Name:

Long Range Planning Projects

Project Period Activities:

- Master Plan updates and implementation
 - Reviewing all elements and prioritizing incomplete projects.
 - Begun overall evaluation of all elements of the Master Plan
 - Investigating potential steps in an overall update
- Annexation Study
 - Began the 2018 annexation process
- Creation and adoption of 2019-2024 Capital Improvement Plan (CIP)
 - Began the 2019-2024 CIP process
 - Will continue to adapt the CIP to make it more user friendly and interactive.
 - Will continue to collaborate with outside agencies to create a better process and outcome
 - Proposed CIP will be made public next month
- Public Engagement Process Development
 - Received approval by directors and mayor's office to start to develop a city PE guide.
 - City council briefing / input sessions were held April 25th.
 - Planning department interviews took place in May.
 - Public Works interviews held last quarter.
 - Parks interviews completed last quarter.
 - A draft guide was completed in fourth quarter of 2018.
 - Guide is currently being formatted for final review and publication.
- Internal and External Agency Coordination
 - MAPA 2050, Bike Ped Plan, etc.
 - H2050 Infrastructure Committee Meetings
 - H2050 Summit

- MTIS
- Metro Transit
 - BRT Stakeholder Committee Meetings
- Omaha Public Works
- Papio Missouri River NRD Meetings
- UNO Sustainability Transportation Sub-Committee
- Other municipal and county jurisdictions
- Greater Omaha Chamber
 - Very close coordination anticipated...
- Existing Land Use Database Creation
 - Met with MAPA to discuss project, process, and proposed land use categories
 - Met with all sections of the Omaha Urban Planning Division to discuss project, process, and proposed land use categories
 - Met with Douglas County Assessor's office to discuss project, available data, and proposed land use categories
 - Assigned a land use category to all parcels in City Council District 1, including field verification
 - Assigning a land use category to all parcels in City Council District 7, field verification pending

Budget:

Item	Total	Federal (70%)	Local (30%)
<i>Non Personnel</i>			
Training, Travel, Services	\$4,295	\$3,006.5	\$1,288.50
<i>Staff time (hrs)</i>			
1126.5			
Salary & wages	\$37,688.94	\$26,382.25	\$11,306.68
Fringe benefits	\$26,589.16	\$18,612.41	\$7,976.75
<i>Indirect cost rate (14.58%)*</i>	\$9,997.76	\$6,998.57	\$2,999.39
Total	\$78,571.05	\$54,999.73	\$23,571.31

CITY OF OMAHA

DATE (mo/day/year)	PREPARED BY	REQUESTING ORGANIZATION NAME	TOTAL DOCUMENT COST
3/23/2018	Janie McCarthy-Cheney	PLANNING	\$ 1,050.00

DAVE FANSLAU
2114 LIBERTY LN
PAPILLION, NE 68133

SEPARATE CHECK
YES or NO

INVOICE	DESCRIPTION	BUDGET FISCAL YEAR	FUND	ORGN	PROJECT	ACCOUNT NUMBER	AMOUNT
Order 172389	National Planning Conference 2018. APA. David F.	2018	21217	109011	0000	42854	\$ 1,050.00

Did you contact Purchasing first for a PO? Yes No **x**

Reason for Payment Voucher **No PO-Regis**

Acceptable Reasons For Payment using Voucher

- Books, Periodicals, Subscriptions and Publications
- Accreditation fees or license fees
- Utilities
- Judgments
- Public Works Right of Way
- Refunds/ Reimbursements
- Travel
- Registrations
- Petty Cash
- Some Grants (where no "buying" occurs)
- Medical bills (health insurance, worker's comp, etc)
- Credit cards
- Background checks/Credit checks

Authorized Signature

[Signature] Date 3/23/18

Authorized Signature

[Signature] Date 3/23/18

* If you will repeatedly be making purchases from the same vendor using the same account string, please request a funded PO.*
If the product or service is greater than \$5,000 please contact Purchasing for a PO, as three quotes are required before purchasing.

Receipt for Order #172389

Dave Fanslau
2114 Liberty Ln
Papillon NE 68133

Thank you for your order!

2018-21217-109011-0000-42854

Tweet to your followers and let them know you're heading to New Orleans for NPC18!



ORDER PLACED: 03/14/2018

311470 | Dave Fanslau | APA ID: #311470

Items	Price	Qty	Total
2018 National Planning Conference	\$1050.00	1.00	\$1050.00
	Total Purchased:		\$1050.00

PAYMENT:

			Total
Credit Card			\$1050.00
	Balance:		\$0.00

CITY OF OMAHA

DATE (mo/day/year)	PREPARED BY	REQUESTING ORGANIZATION NAME	TOTAL DOCUMENT COST
6/20/2018	Janie McCarthy-Cheney	PLANNING DEPT	\$ 249.00

Derek Miller
3705 S 116th St
Richmond, VA 68144

SEPARATE CHECK
YES or NO

INVOICE	DESCRIPTION	BUDGET FISCAL YEAR	FUND	ORGN	PROJECT	ACCOUNT NUMBER	AMOUNT
123442-1841	APA Membership- E; Nebraska Chapter; AICP Membership-E @ 50%	2018	11111	109031 10931	0000	42854	\$ 249.00

Did you contact Purchasing first for a PO? Yes No x

Reason for Payment Voucher No PO- Grant

Acceptable Reasons For Payment using Voucher

- Books, Periodicals, Subscriptions and Publications
- Accreditation fees or license fees
- Utilities
- Judgments
- Public Works Right of Way
- Refunds/ Reimbursements
- Travel
- Registrations
- Petty Cash
- Some Grants (where no "buying" occurs)
- Medical bills (health insurance, worker's comp, etc)
- Credit cards
- Background checks/Credit checks

Authorized Signature

[Handwritten Signature]

Date 6/19/18

Authorized Signature

[Handwritten Signature]

Date 6/21/18

* If you will repeatedly be making purchases from the same vendor using the same account string, please request a funded PO.*
If the product or service is greater than \$5,000 please contact Purchasing for a PO, as three quotes are required before purchasing.



Derek Miller (Plng) <derek.miller@cityofomaha.org>

American Planning Association - Thank you for your order

1 message

customerservice@planning.org <customerservice@planning.org>
To: derek.miller@cityofomaha.org

Tue, Jun 19, 2018 at 2:55 PM

Dear Derek Miller,

Thank you for ordering from APA. Your order confirmation number is 182718.
Your APA ID is 123442.

\$498.00 will be charged to your form of payment. You may see and download or print your receipt in the "Invoices & Receipts" section of My APA.

If you have any questions about your order, please email APA at customerservice@planning.org, including your order confirmation number.

\$249

Derek Miller
3705 S 116th St
68114

2018 1111-109031-0000-42854

American Planning Association

Making Great Communities Happen
205 N. Michigan Avenue Suite 1200
Chicago, IL 60601-5927

Invoice

ID Number **123442**
Type **MEM**
Invoice **123442-1841**
Date **06/05/2018**
Period **07/01/2018-06/30/2019**
Due **06/01/2018**
Page **1 of 1**

Work Phone: (402) 444-5210
Fax:
E-mail:

101844-1.3 1 722-1.2 1oz

DEREK L. MILLER, AICP
CITY OF OMAHA PLANNING DEPT.
1819 FARNAM ST
SUITE #1110
OMAHA NE 68131



Get Certified!

Is your eye on AICP certification?
Take the traditional route to reach
your goal or enroll in the new
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Code	Description	Cost	Qty	Total
Memberships				
APA	APA Membership Category E *	\$270.00	1	\$270.00
CHAPT/NE	Nebraska Chapter	\$68.00	1	\$68.00
AICP	AICP Membership Category E *	\$135.00	1	\$135.00
TRANS	Transportation Planning Division	\$25.00	1	\$25.00

Payment(s) or Credit(s) received. *Thank You!*

Total Amount Billed \$498.00
Payment(s) or Credit(s) (\$0.00)
Balance Due \$498.00

PLEASE VERIFY YOUR INCOME CATEGORY AND DUES ABOVE

* See back for additional information.

Detach and return with payment. Disclosure in accordance with postal regulations: \$30 of APA membership dues support *Planning* magazine.



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Your Order:

Period 07/01/2018-06/30/2019
Derek L. Miller, Aicp
APA 1 \$270.00
CHAPT/NE 1 \$68.00
AICP 1 \$135.00
TRANS 1 \$25.00
Total Amount Billed: \$498.00
Payment(s) or Credit(s): (\$0.00)
Balance Due: \$498.00

Tax-deductible contribution
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For donation information,
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123442049800

Membership basics

APA is an outspoken advocate for planning. Members share a dedication to building communities of lasting value. Our APA membership supports our policy efforts, education programs, and outreach.

If APA memberships belong to the individual member, not an organization, even when an organization pays a member's dues, and are not transferrable.

You retain your membership when you change employers and keep the same ID number throughout your membership. Dues paid for one member may not be transferred to cover services for another.

Memberships are renewed annually. The membership period covered by this invoice is at the top right corner of the opposite side of this page. Membership is renewed when dues are paid in full.

Dues are not tax-deductible as a charitable contribution. Dues may be considered a business expense, except for 17 percent of California chapter dues, which are allocated to chapter lobbying costs.

National and AICP dues

You may pay up to four types of dues. National dues pay for basic APA membership. AICP dues cover your earned membership in the American Institute of Certified Planners. AICP members must be APA members. Both types of dues are based on current annual salary and other professional income to ensure that dues are fair to all members. Members also may elect not to disclose their income levels. APA audits members who operate with integrity. Our salary-based dues structure depends on that integrity. Records are kept confidential.

If your annual salary or other professional income has changed, your dues may have also changed. Find the correct income at www.planning.org/join/dues/ and note the category and amount on the form below. If your chapter dues are a percentage of your national dues, note

your new chapter dues on the form below, as well.

Retired/Life Members

APA offers special reduced rates for retired and life members. Members must meet all requirements and request life membership status or retired membership status. For more details go to www.planning.org/membership/faq/.

To request reduced dues, contact customerservice@planning.org. Or call 312-431-9100.

Unemployed/In Transition Members

APA offers special reduced rates for current members who are not working on a temporary or permanent basis, but who do not meet the requirements of life or retired membership status. Members may qualify for one year of reduced dues for every three years of continuous membership, up to a maximum of five years (for those who have been members for 15 years or longer). Members must request this reduced rate annually.

To request reduced rates, contact customerservice@planning.org.

Chapter dues

Chapter dues cover membership in one or more chapters. Membership in a primary chapter, based on your preferred mailing address, is required for members with U.S. mailing addresses. Members in U.S. territories or foreign military bases are exempted from this requirement. Additional chapter memberships are optional.

Indicate a change in your primary chapter or add an optional chapter on the form below. Note the name(s) and price(s). To find chapters and dues, go to planning.org/join/dues.

Division dues

Membership in one or more special-interest divisions is optional. For dues rates go to www.planning.org/join/dues. For details about APA's divisions, go to www.planning.org/divisions. Add divisions to your membership on the form below.

Publications

Add an APA publication to your order on the form below. More information about these publications go to www.planning.org/publications.

The quarterly *Journal of the American Planning Association* has published research, commentaries, and book review useful to practicing planners, policy makers, scholars, students, and citizens of urban, suburban, and rural areas. For details go to www.planning.org/japa/.

Zoning Practice monitors all the latest trends in local land-use controls and delivers practical guidance for code drafters and administrators. For details go to www.planning.org/zoningpractice/.

Additional opportunities

The Planning Foundation of APA funds an array of philanthropic activities. It is an independent 501(c)(3) subsidiary of APA. To donate, indicate the amount you wish to give on the front of the payment coupon or go to planning.org/foundation.

Direct Debit Program

You may pay for your membership and other APA services electronically through monthly deductions from your U.S. bank account. Through APA's direct debit program, you may qualify to pay your annual fees in up to a maximum of 9 equal installments. For details go to www.planning.org/membership/faq.

Certification Maintenance (CM)

Beginning January 1, 2008, AICP members must meet Certification Maintenance requirements. Most AICP members must earn a total of 32 CM credits (1 hour = 1 CM credit) every two years, including 1.5 credits on ethics and 1.5 credits on current planning law. Exemptions from CM requirements may be granted for a variety of personal or professional reasons.

If your CM status is "Active," you must earn and log the required credits by April 30 - the end of the four-month grace period that follows your reporting period - to retain your AICP designation. APA will not refund dues paid for AICP membership beyond the reporting period for members who fail to meet CM requirements. Upon reinstatement to AICP membership, APA will apply a credit toward the required back dues payment.

Learn more about CM requirements, including exemptions, at www.planning.org/cm. To check your CM status, view your CM log at planning.org/cm or e-mail AICPCM@planning.org.

All dues and prices are subject to change. Payments received for dues and services are nonrefundable. Services will end automatically if payment is not received in full by the end of the service period on the front of this invoice. If you want to stop services immediately, please contact renew@planning.org or (312)431-9100.

Need to change your contact information?

Note any changes below or go to www.planning.org/myapa. If your address has changed, you may need to change your primary chapter. Find out which chapter corresponds to your new address at www.planning.org/chapters and note any dues change at right. If you would like to maintain your membership in your current chapter as well, add that chapter at right.

NAME _____

ORGANIZATION _____

ADDRESS LINE 1 _____

ADDRESS LINE 2 _____

CITY _____

STATE/ZIP _____

PHONE _____

FAX _____

Need to change your order?

Note any changes below. Note: Cancellations made after invoices are paid in full are subject to a \$25 processing fee. Refunds will be prorated.

Item	Change	Amount
	<input type="checkbox"/> ADD	
	<input type="checkbox"/> REMOVE	\$
	<input type="checkbox"/> ADD	
	<input type="checkbox"/> REMOVE	\$
	<input type="checkbox"/> ADD	
	<input type="checkbox"/> REMOVE	\$
	<input type="checkbox"/> ADD	
	<input type="checkbox"/> REMOVE	\$
If your dues category has changed, note the new category and dues here.		
	\$	\$
CATEGORY	APA DUES	AICP DUES
		CHAPTER DUES (if a % of national)

Fringe Benefit Calculation for Responsible Charge

DEREK MILLER

Annual Salary	Estimated hours worked/year	Effective Wage rate
\$ 88,734.62	2080	\$ 42.66

*Shaded areas to be completed by the LPA

~The City of Omaha is self insured, therefore the "quarterly Average per Month/Hour" cost will fluctuate.

Workman's Compensation Insurance - rate = \$.265 per \$100 of wages (rate + \$100 x Wage Rate = \$.09 per hr.)

Health/Dental/Life	Average	Months	Total
Health/Dental/Life	1231.42	12	\$ 14,777.00
Life	8.33	12	\$ 100.00
Dental	73.33	12	\$ 880.00

Derek Miller Accumulations:

Annual	7.50 per pay period	0.09	Per hour
Sick	4.7 per pay period	0.06	Per hour
Holidays	8 hours per holiday day	0.1	Per Hour
Annual Totals			
Annual	195		
Sick	122.2		
Holiday	104		
Annual Total Accumulated	421.2		

Insurance Cost (Per Year)

Health~	\$ 14,777.00
Dental~	\$ 880.00
Accidental Death and Dismemberment (AD&D)	
Life~	\$ 100.00
Vision	
Other Insurance Benefits	
Insurance Cost/Year	\$ 15,757.00
Insurance Cost/Hr	\$ 7.58

Workmen's Compensation

Rate per \$100 of coverage	\$ 0.27
Effective Hourly Effective Wage Rate	\$ 42.66
Workman's Compensation Insurance Cost	\$ 0.11

FICA/Medicare (7.65 %)

FICA (6.2 Percent of Effective Hourly Wage Rate)	\$ 2.64
Medicare (1.45 Percent of Effective Hourly Wage Rate)	\$ 0.62

Holiday/Vacation/Sick Leave/Personal/Admin Time Off

Vacation days	24.4
Sick Days	15.3
Pers/Adm. Days	1.0
Holidays	12.0
Leave days/year	52.7
Leave hours/year	421.3

Normal Working Hours/day	8.0
Normal Hours/year	2,080.0
Adjusted Working Hours/year	1,658.7
Effective Hourly Wage Rate	\$ 42.66

Holiday/Vacation/Sick Leave/Personal/Admin Time Off Cost \$ 10.83

Pension

Percent of Effective Wage Rate	18.8%
Pension/Retirement Cost	\$ 8.01

Insurance Cost	Work Comp	6.2% FICA	1.45% Medicare	Holiday Vac Sick	Pension/Retirement	Total fringe/hour
\$7.58	\$0.11	\$2.64	\$0.62	\$10.83	\$8.01	\$29.80

Other typical expenses may be submitted for reimbursement as allowed under the RC Reimbursement guidelines

Effective hourly rate	\$ 42.66
Fringe benefits per hour	\$ 29.80
Total hourly rate	\$ 72.46

Fringe Benefit Calculation for Responsible Charge

STEPHEN OSBERG

Annual Salary	Estimated hours worked/year	Effective Wage rate
\$ 61,786.66	2080	\$ 29.71

*Shaded areas to be completed by the LPA

~The City of Omaha is self insured, therefore the "quarterly Average per Month/Hour" cost will fluctuate.

Workman's Compensation Insurance - rate = \$.265 per \$100 of wages (rate + \$100 x Wage Rate = \$.09 per hr.) \$ 0.08

Health/Dental/Life	Average	Months	Total
Health/Dental/Life	1231.42	12	\$ 14,777.00
Life	8.33	12	\$ 100.00
Dental	73.33	12	\$ 880.00

Stephen Osberg Accumulations:			
Annual	3.7 per pay period	0.05	Per hour
Sick	4.7 per pay period	0.06	Per hour
Holidays	8 hours per holiday day	0.1	Per Hour
Annual Totals			
Annual	96.2		
Sick	122.2		
Holiday	104		
Annual Total Accumulated	322.4		

Insurance Cost (Per Year)

Health~	\$ 14,777.00
Dental~	\$ 880.00
Accidental Death and Dismemberment (AD&D)	
Life~	\$ 100.00
Vision	
Other Insurance Benefits	
Insurance Cost/Year	\$ 15,757.00
Insurance Cost/Hr	\$ 7.58

Workmen's Compensation

Rate per \$100 of coverage	\$ 0.27
Effective Hourly Effective Wage Rate	\$ 29.71
Workman's Compensation Insurance Cost	\$ 0.08

FICA/Medicare (7.65 %)

FICA (6.2 Percent of Effective Hourly Wage Rate)	\$ 1.84
Medicare (1.45 Percent of Effective Hourly Wage Rate)	\$ 0.43

Holiday/Vacation/Sick Leave/Personal/Admin Time Off

Vacation days	12.0
Sick Days	15.3
Pers/Adm. Days	1.0
Holidays	12.0
Leave days/year	40.3
Leave hours/year	322.5

Normal Working Hours/day	8.0
Normal Hours/year	2,080.0
Adjusted Working Hours/year	1,757.5
Effective Hourly Wage Rate	\$ 29.71

Holiday/Vacation/Sick Leave/Personal/Admin Time Off Cost \$ 5.45

Pension

Percent of Effective Wage Rate	18.8%
Pension/Retirement Cost	\$ 5.58

Insurance Cost	Work Comp	6.2% FICA	1.45% Medicare	Holiday Vac Sick	Pension/Retirement	Total fringe/hour
\$7.58	\$0.08	\$1.84	\$0.43	\$5.45	\$5.58	\$20.95

Other typical expenses may be submitted for reimbursement as allowed under the RC Reimbursement guidelines

Effective hourly rate	\$ 29.71
Fringe benefits per hour	\$ 20.95
Total hourly rate	\$ 50.66

Fringe Benefit Calculation for Responsible Charge

Kellie Johnston-Dorsey

Annual Salary	Estimated hours worked/year	Effective Wage rate
\$ 57,627.96	2080	\$ 27.71

*Shaded areas to be completed by the LPA

~The City of Omaha is self insured, therefore the "quarterly Average per Month/Hour" cost will fluctuate.

Workman's Compensation Insurance - rate = \$.265 per \$100 of wages (rate + \$100 x Wage Rate = \$.09 per hr.)

Health/Dental/Life	Average	Months	Total
Health/Dental/Life	1231.42	12	\$ 14,777.00
Life	8.33	12	\$ 100.00
Dental	73.33	12	\$ 880.00

Stephen Osberg Accumulations:

Annual	3.7 per pay period	0.05	Per hour
Sick	4.7 per pay period	0.06	Per hour
Holidays	8 hours per holiday day	0.1	Per Hour
Annual Totals			
Annual	96.2		
Sick	122.2		
Holiday	104		
Annual Total Accumulated	322.4		

Insurance Cost (Per Year)

Health~	\$	14,777.00
Dental~	\$	880.00
Accidental Death and Dismemberment (AD&D)		
Life~	\$	100.00
Vision		
Other Insurance Benefits		
Insurance Cost/Year	\$	15,757.00
Insurance Cost/Hr	\$	7.58

Workmen's Compensation

Rate per \$100 of coverage	\$	0.27
Effective Hourly Effective Wage Rate	\$	27.71
Workman's Compensation Insurance Cost	\$	0.07

FICA/Medicare (7.65 %)

FICA (6.2 Percent of Effective Hourly Wage Rate)	\$	1.72
Medicare (1.45 Percent of Effective Hourly Wage Rate)	\$	0.40

Holiday/Vacation/Sick Leave/Personal/Admin Time Off

Vacation days	12.0
Sick Days	15.3
Pers/Adm. Days	1.0
Holidays	12.0
Leave days/year	40.3
Leave hours/year	322.5

Normal Working Hours/day	8.0
Normal Hours/year	2,080.0
Adjusted Working Hours/year	1,757.5
Effective Hourly Wage Rate	\$ 27.71

Holiday/Vacation/Sick Leave/Personal/Admin Time Off Cost \$ 5.08

Pension

Percent of Effective Wage Rate	18.8%
Pension/Retirement Cost	\$ 5.20

Insurance Cost	Work Comp	6.2% FICA	1.45% Medicare	Holiday Vac Sick	Pension/Retirement	Total fringe/hour
\$7.58	\$0.07	\$1.72	\$0.40	\$5.08	\$5.20	\$20.05

Other typical expenses may be submitted for reimbursement as allowed under the RC Reimbursement guidelines

Effective hourly rate	\$	27.71
Fringe benefits per hour	\$	20.05
Total hourly rate	\$	47.76

June 29, 2018

Board of Trustees
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1125 South 103rd Street
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Omaha, Nebraska 68124
P: 402-344-7890
F: 402-344-8099
peterkiewitfoundation.org

Mr. Greg Youell
Executive Director
Omaha Council Bluffs Metropolitan Area Planning Agency
2222 Cuming Street
Omaha, NE 68102

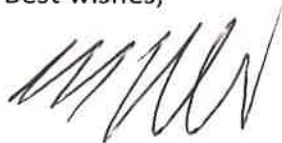
Dear Mr. Youell:

It is a pleasure to notify you that Peter Kiewit Foundation has approved a \$170,000 grant to provide three years of program support for the Heartland 2050 Close the Gap Initiative, as more fully described in your grant application. You are welcome to release news of this grant to the press in any way that is helpful for your organization.

Please find attached a Letter of Understanding, which you should review carefully because it includes the terms and conditions of the grant. If you wish to accept the grant, please sign and date the Letter of Understanding, scan it, and upload it to your grant account by **July 29, 2018**. To do so, navigate to https://www.GrantRequest.com/SID_2024?SA=AM, select the "Requirements" tab at the top of your account page, click on "Letter of Understanding Requirement Form," and follow the instructions. In an effort to provide convenience to our grantees and move toward a paperless process, we have transitioned all grant reporting requirements to our online portal. Therefore, the submission of grant reports is the same as it is for our signed Letter of Understanding. Grant reports are no longer accepted via email or mail.

I encourage you and your colleagues to contact Jen Olds, the program officer assigned to your grant, at any time should you have questions about the grant or any update you would like to share about the work and its results. Jen's card is attached. Peter Kiewit Foundation is excited to partner with you in this important program and we will follow your progress with great interest.

Best wishes,



Jeff Kutash
Executive Director

Enclosures
Grant ID 103425

cc: Karna Loewenstein



PETER KIEWIT FOUNDATION

LETTER OF UNDERSTANDING - APPROVED GRANT

GRANTEE: Omaha Council Bluffs Metropolitan Area Planning Agency

PROJECT TITLE: To provide three years of program support for the Heartland 2050 Close the Gap Initiative.

Set forth below are the conditions of the grant awarded to your organization by Peter Kiewit Foundation. If you wish to accept the grant, please sign and date this Letter of Understanding and upload it to your grant account by **July 29, 2018**.

-
1. **KIND AND AMOUNT OF GRANT.** A challenge grant in the total amount of \$170,000.
 2. **USE OF GRANT FUNDS.**
 - a. This grant is to be used to provide three years of program support for the Heartland 2050 Close the Gap Initiative, as more fully described in the grant application. Grantee shall repay the foundation any portion of the amount granted which is not used for this purpose.
 - b. Peter Kiewit Foundation grant funds cannot be applied toward fundraising, campaign expenses, debt service, or endowment.
 - c. Grantee shall not use any of the grant funds to carry on propaganda or otherwise attempt to influence legislation within the meaning of section 4945(d)(1) of the Internal Revenue Code (IRC); to influence the outcome of any specific public election, or to carry on, directly or indirectly, any voter registration drive within section 4945(d)(2) of the IRC; to undertake activity for any purpose other than one specified in section 170(c)(2)(B) of the IRC.
 - d. Grantee shall maintain records of all receipts and expenditures on this program and make its books and records available to Peter Kiewit Foundation if requested.
 3. **MATCHING FUNDS.** Funds disclosed in the application (\$622,030) will be recognized as a partial qualified match for Peter Kiewit Foundation funding. The Grantee shall develop the balance of the funds needed to meet a 1:1 fundraising challenge as follows:
 - a. Year 1 (01/01/18 – 12/31/18): \$55,000 in new cash contributions or firm written pledges by 12/31/18;
 - b. Year 2 (01/01/19 – 12/31/19): \$57,000 in new cash contributions or firm written pledges by 12/31/19; and

PETER KIEWIT FOUNDATION

LETTER OF UNDERSTANDING - APPROVED GRANT

- c. Year 3 (01/01/20 – 12/31/20): \$58,000 in new cash contributions or firm written pledges by 12/31/20.
- d. In-kind contributions, or their assessed dollar value, will not be recognized as qualified matching funds without the prior written consent of Peter Kiewit Foundation.

4. REPORTING REQUIREMENTS.

- a. Written progress reports are due to Peter Kiewit Foundation by January 31, 2019 and 2020. These reports shall include:
 - Program update (including goals, achievements, challenges, indicators/measures of success, evaluation results, lessons learned, and any changes to the program as it was described in the application);
 - Budget Update (side-by-side comparison of proposed program budget versus actual program budget, including explanations of variances greater than 10 percent); and
 - Fundraising Summary (including sources, amounts, and dates received/pledged).
- b. A final report is due by January 31, 2021 and shall include all items in 4a.

5. COMMUNICATION WITH PETER KIEWIT FOUNDATION. Grantee shall promptly notify Peter Kiewit Foundation of any significant changes to the program (budget, scope of program, timeline, fundraising, etc.) or within the organization throughout the grant period.

6. DISBURSEMENT OF GRANT FUNDS. Grant funds will be disbursed as follows:

- a. \$55,000 payable within 15 business days following receipt of this executed grant document;
- b. \$57,000 payable within 15 business days following successful completion of the Year 1 fundraising challenge and approval of the January 31, 2019 Progress Report; and
- c. \$58,000 payable within 15 business days following successful completion of the Year 2 fundraising challenge and approval of the January 31, 2020 Progress Report.

PETER KIEWIT FOUNDATION

LETTER OF UNDERSTANDING - APPROVED GRANT

7. **FAILURE TO COMPLY.** Failure by Grantee to comply with the terms listed above may result in the reduction or cancellation of this grant by Peter Kiewit Foundation.
-

GRANT ACCEPTANCE

By signing this document, you agree to the terms and conditions of the grant as set forth above.

OMAHA COUNCIL BLUFFS METROPOLITAN AREA PLANNING AGENCY, GRANTEE

By: _____ Title: _____ Date: _____



TRAVEL AUTHORIZATION FORM

Person Traveling :	Karna Loewenstein, Greg Youell, Jeff Spiels & 27 Team Members		
Dates of Travel:	October 21-24		
Departure Time:	10:00a.m.	Return Time:	2:30p.m.
Traveling to :	Pittsburgh, PA		
Purpose:	Heartland 2050 Learning Site-Visit/ RailVolution Conference		
Coding:	27008-04		
Block Rate Deadline:	Sept 21 or until sold out		
# Traveling:	30		

Estimated Travel Expenses:

Registration	\$21,000.00	\$700.00	Transp. Fares	\$180.00	\$6.00	Parking	
Flights	\$15,000.00	\$500.00	Auto Rental			Other	\$2,271.00

MAPA Vehicle Miles		Personal Vehicle Miles			
MAPA Vehicle Mileage	\$0.00	Personal Vehicle Mileage	\$0.00	Rate	\$0.545

Per Diem:	Start Day	Between Days	x	# of days	End Day
Day's Max.	\$40.50	\$54.00			\$40.50
Breakfast		\$12 x 3	x	2	\$12 x 3
Lunch	\$13 x 3	\$13 x 33	x	1	\$13 x 3
Dinner	\$22 x 3	\$24 x 33	x	1	
Incidental	\$5 x 3	\$5 x 3	x	2	\$5 x 3
Meals & Incidental Total			x	2	
Lodging	\$165 x 30	\$165 x 30	x	2	
Taxes & Fees on Lodging	\$33 x 30	\$33 x 30	x	2	

Deduction for Meals Provided at Conferences \$0.00

Total Lodging \$17,820.00

Total Meals and Incidentals \$1,533.00

Total Estimated Travel Expenses \$57,804.00

Date Submitted: 7/6/18 by Karna Loewenstein
 Employee Traveling
 Date Approved: 11 by 11
 Department Director
 Date Approved: _____ by _____
 Executive Director
 Date Approved: _____ by _____
 Finance Committee Chair/Member (if amount is over \$1000)
 Date Approved: _____ by _____
 Board of Directors Chair/Member (if amount is over \$2000)

* See Notes on Page 2



Metropolitan Area Planning Agency Premium Breakdown

Renewal Date: September 1, 2018

		BlueCross/BlueShield BluePride Option 3		BlueCross/BlueShield BluePride Option 4	BlueCross/BlueShield Gold Option 101	UnitedHealthcare Platinum AU-QE Rx 639	Aetna AFA Choice POS II 500 100/70	AllSavers P5003060
Calendar Year Deductible		PPO / NON-PPO		PPO / NON-PPO	PPO / NON-PPO	PPO / NON-PPO	PPO / NON-PPO	PPO / NON-PPO
Individual		\$500 / \$1,000		\$750 / \$1,500	\$500 / \$1,000	\$1,000 / \$5,000	\$500 / \$2,000	\$500 / \$1,000
Family		\$1,000 / \$2,000		\$1,500 / \$3,000	\$1,000 / \$2,000	\$2,000 / \$10,000	\$1,000 / \$6,000	\$1,000 / \$2,000
Coinsurance		80% / 60%		80% / 60%	70% / 50%	100% / 70%	100% / 70%	80% / 50%
Out of Pocket Maximum								
Individual		\$2,000 / \$5,500		\$3,250 / \$9,000	\$5,000 / \$10,000	\$2,000 / \$10,000	\$3,000 / \$10,000	\$3,000 / \$6,000
Family		\$4,000 / \$11,000		\$6,500 / \$18,000	\$10,000 / \$20,000	\$4,000 / \$20,000	\$6,000 / \$30,000	\$6,000 / \$12,000
Physician Office Visit (PCP)		\$25 copay / 60%		\$25 copay / 60%	\$30 copay / 50%	\$25 copay / 70%	\$20 copay / 70%	\$30 copay / 50%
Premium by Tier		Current Rates	Renewal Rates	Alternate Option	ACA Option	ACA Option	Final Rates	Quoted Rates
Employee	10	\$623.20	\$654.35	\$612.89	See Age Rated Premium Breakdown	\$760.06	\$551.43	\$604.50
Employee & Spouse	2	\$1,308.73	\$1,374.14	\$1,287.07		\$1,520.12	\$1,261.72	\$1,236.46
Employee & Child(ren)	2	\$1,090.61	\$1,145.12	\$1,072.56		\$1,406.11	\$1,146.20	\$1,121.55
Family	4	\$1,744.97	\$1,832.19	\$1,716.09		\$2,166.17	\$1,816.05	\$1,724.79
	18							
Monthly Total		\$18,010.56	\$18,910.78	\$17,712.52	\$20,687.88	\$22,117.74	\$17,594.34	\$17,660.18
Annual Total		\$216,126.72	\$226,929.36	\$212,550.24	\$248,254.56	\$265,412.88	\$211,132.08	\$211,922.16
Percent Change from Current			5.0%	-1.7%	14.9%	22.8%	-2.3%	-1.9%

*Individual health applications required to determine final rates

NOTES:

1) Final rates are subject to change based on actual enrollment and age on the effective date. For all carriers (current and bidding), an underwriting process, in accordance with State Law, must be completed to determine final rates.



**Metropolitan Area Planning Agency
Premium Breakdown**

Renewal Date: September 1, 2018

	BlueCross/BlueShield BluePride Option 3		BlueCross/BlueShield Gold Option 101
Calendar Year Deductible	PPO / NON-PPO		PPO / NON-PPO
Individual	\$500 / \$1,000		\$500 / \$1,000
Family	\$1,000 / \$2,000		\$1,000 / \$2,000
Coinsurance	80% / 60%		70% / 50%
Out of Pocket Maximum			
Individual	\$2,000 / \$5,500		\$5,000 / \$10,000
Family	\$4,000 / \$11,000		\$10,000 / \$20,000
Physician Office Visit (PCP)	\$25 copay / 60%		\$30 copay / 50%
Employees	Current Rates	Renewal Rates	ACA Option
Anderson, Grant (EE)	\$623.20	\$654.35	\$535.99
Barber, Courtney (EE)	\$623.20	\$654.35	\$497.83
Barrett, Natasha (EE)	\$623.20	\$654.35	\$525.47
Brownell, Christina (ESC-2)	\$1,744.97	\$1,832.19	\$1,732.54
Corrigan, Joshua (ESC-2)	\$1,744.97	\$1,832.19	\$1,743.06
Cutsforth, Susan (EE)	\$623.20	\$654.35	\$818.02
Engel, Melissa (EC-2)	\$1,090.61	\$1,145.12	\$1,334.28
Gross, Donald (ES)	\$1,308.73	\$1,374.14	\$2,119.85
Halm, Travis (EE)	\$623.20	\$654.35	\$476.78
Helgerson, Michael (EE)	\$623.20	\$654.35	\$508.36
Loewenstein, Karna (ES)	\$1,308.73	\$1,374.14	\$2,576.01
Morales, Amanda (ESC-3)	\$1,744.97	\$1,832.19	\$2,180.37
Pigaga, Anne (EE)	\$623.20	\$654.35	\$449.15
Roth, Matthew (EE)	\$623.20	\$654.35	\$525.47
Spiehs, Jeff (EC-3)	\$1,090.61	\$1,145.12	\$1,549.63
Stuckey, Owen (EE)	\$623.20	\$654.35	\$497.83
Walker, Megan (EE)	\$623.20	\$654.35	\$459.67
Youell, Gregory (ESC-7)	\$1,744.97	\$1,832.19	\$2,157.57
Monthly Total	\$18,010.56	\$18,910.78	\$20,687.88
Annual Total	\$216,126.72	\$226,929.36	\$248,254.56
Percent Change from Current		5.0%	14.9%

NOTES:

1) Final rates are subject to change based on actual enrollment and age on the effective date. For all carriers (current and bidding), an underwriting process, in accordance with State Law, must be completed to determine final rates.



Metropolitan Area Planning Agency Medical Market Analysis

Renewal Date: September 1, 2018

Carrier	BlueCross/BlueShield BluePride Option 3		BlueCross/BlueShield BluePride Option 4	
	PPO	Non-PPO	PPO	Non-PPO
	Current & Renewal		Alternate Option	
Calendar Year Deductible	Embedded		Embedded	
Individual	\$500	\$1,000	\$750	\$1,500
Family	\$1,000	\$2,000	\$1,500	\$3,000
PPO & Non-PPO Accumulation	Combined		Combined	
Coinsurance (after deductible is met)	80%	60%	80%	60%
Out-of-Pocket Maximum				
Individual	\$2,000	\$5,500	\$3,250	\$9,000
Family	\$4,000	\$11,000	\$6,500	\$18,000
<i>w/ ded, coinsurance, copays for med / Rx</i>				
Physician Office Services				
Primary Care Physician (PCP)	\$25 copay	60%	\$25 copay	60%
Specialist	\$40 copay	60%	\$40 copay	60%
Telemedicine	\$10 copay	n/a	\$10 copay	n/a
Preventive Services	100% (ded/coins waived)	60%	100% (ded/coins waived)	60%
Pediatric Vision	Not covered	Not covered	Not covered	Not covered
Pediatric Dental	Not covered	Not covered	Not covered	Not covered
Lab / X-ray Services				
Physician Office	Included in copay	60%	Included in copay	60%
Outpatient	80%	60%	80%	60%
Advanced Imaging / Major Diagnostics	80%	60%	80%	60%
Hospital Services				
Physician Charges	80%	60%	80%	60%
Facility Charges	80%	60%	80%	60%
Prescription Drugs	Generic: \$10 copay Formulary: \$30 copay Non-Formulary: \$50 copay Specialty: \$70 copay	Generic, Formulary, Non-formulary: In-network benefits + 25% penalty Specialty: \$300 copay	Generic: \$10 copay Formulary: 25% of charge (\$30 min/\$45 max) Non-formulary: 50% of charge (\$50 min/\$75 max) Specialty: \$80 copay	Generic, Formulary, Non-formulary: In-network benefits + 25% penalty Specialty: \$300 copay
Mental/Nervous & Alcohol/Drug				
Inpatient	80%	60%	80%	60%
Outpatient - Office Services	\$25 copay	60%	\$25 copay	60%
Outpatient - All other Services	80%		80%	
Emergency Facility	\$100 copay	Valid Emergency - Same as In-Network	\$100 copay	Valid Emergency - Same as In-Network
Urgent Care Center	\$40 copay	60%	\$40 copay	60%

This schedule is provided for convenience in comparing proposed coverage.
In the event of inconsistency between the schedule and the policy, the policy governs.

	Existing			Option 3 (Current Plan) Monthly Premium			Option 4 Monthly Premium		
	Employee	Employer	Total	Employee	Employer	Total	Employee	Employer	Total
10 Single	-	623.20	623.20	-	654.35	654.35	-	612.89	612.89
2 E+Child	116.85	973.76	1,090.61	122.69	1,022.43	1,145.12	114.92	957.64	1,072.56
2 Spouse	171.38	1,137.35	1,308.73	179.95	1,194.19	1,374.14	168.55	1,118.52	1,287.07
4 Family	280.44	1,464.53	1,744.97	294.46	1,537.73	1,832.19	275.80	1,440.29	1,716.09
Annual Increase/(Decrease)									
	Option 3 Compared to Current Premium			Option 4 Compared to Option 3 Premium					
	Employee	Employer	Total	Employee	Employer	Total	Employee	Employer	Total
Single	-	373.80	373.80	-	(497.52)	(497.52)	-	(497.52)	(497.52)
E+Child	70.08	584.04	654.12	(93.24)	(777.48)	(870.72)	(93.24)	(777.48)	(870.72)
Spouse	102.84	682.08	784.92	(136.80)	(908.04)	(1,044.84)	(136.80)	(908.04)	(1,044.84)
Family	168.24	878.40	1,046.64	(223.92)	(1,169.28)	(1,393.20)	(223.92)	(1,169.28)	(1,393.20)
Total Annual Increase/(Decrease) for all employees	1,018.80	9,783.84	10,802.64	(1,355.76)	(13,023.36)	(14,379.12)	(1,355.76)	(13,023.36)	(14,379.12)

July 10, 2018

Board of Directors
Executive Director
Metropolitan Area Planning Agency
2222 Cuming Street
Omaha, NE 68102

Attention: Gregory Youell

The Objective and Scope of the Audit of the Financial Statements

You have requested that we audit the financial statements of the Metropolitan Area Planning Agency (“MAPA”), which comprise governmental activities, business-type activities, each major fund, and aggregate remaining fund information as of and for the year-ended June 30, 2018 which collectively comprise the basic financial statements. We will also perform the audit of MAPA in order to report on whether required supplementary information is fairly stated, in all material respects, in relation to the financial statements as a whole. We are pleased to confirm our acceptance and our understanding of this audit engagement by means of this letter.

Our audit will be conducted with the objective of our expressing an opinion on the financial statements.

We will also perform the audit of MAPA as of June 30, 2018, so as to satisfy the audit requirements imposed by the Single Audit Act and Subpart F of Title 2 U.S. Code of Federal Regulations (CFR) Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards* (Uniform Guidance).

The Responsibilities of the Auditor

We will conduct our audit in accordance with auditing standards generally accepted in the United States of America (GAAS); “Government Auditing Standards” issued by the Comptroller General of the United States; the provisions of the Single Audit Act, Subpart F of Title 2 U.S. CFR Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards*; and the U.S. Office of Management and Budget’s (OMB) Compliance Supplement. Those standards, circulars, or supplements require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement. An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor’s judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

Our audit approach places a strong emphasis on obtaining an understanding of how MAPA functions. This enables us to identify key audit components and tailor our procedures to the unique aspects of your business. The development of a specific audit plan will begin by performing inquiries of the board of directors and management to obtain an understanding of MAPA's business objectives, strategies, risks, and performance.

We apply the concept of materiality both in planning and performing the audit, evaluating the effect of identified misstatements on the audit, and the effect of uncorrected misstatements, if any, on the financial statements, in forming the opinion in our report on the financial statements, and in determining or reporting in accordance with Government Auditing Standards and other compliance reporting requirements. Our determination of materiality is a matter of professional judgment and is affected by our perception of the financial information needs of users of the financial statements. We establish performance materiality at an amount less than materiality for the financial statements as a whole to allow for the risk of misstatements that may not be detected by the audit. We use performance materiality for purposes of assessing the risks of material misstatement and determining the nature, timing and extent of further audit procedures. Our assessment of materiality throughout the audit will be based on both quantitative and qualitative considerations. Because of the interaction of quantitative and qualitative considerations, misstatements of a relatively small amount could have a material effect on the current financial statements as well as financial statements of future periods. We will accumulate misstatements identified during the audit, other than those that are clearly trivial. At the end of the audit, we will inform the board of directors and management of all individual unrecorded misstatements aggregated by us in connection with our evaluation of our audit test results.

Additionally, the board of directors' insights may assist us in understanding MAPA and its environment, in identifying appropriate sources of audit evidence, and in providing information about specific transactions or events. We will discuss with the board of directors its oversight of the effectiveness of internal control and any areas where the board of directors may request additional procedures to be undertaken.

Because of the inherent limitations of an audit, together with the inherent limitations of internal control, an unavoidable risk that some material misstatements may not be detected exists, even though the audit is properly planned and performed in accordance with GAAS. Also, an audit is not designed to detect errors or fraud that are immaterial to the financial statements. The determination of abuse is subjective; therefore, Government Auditing Standards do not expect us to provide reasonable assurance of detecting abuse.

In making our risk assessments, we consider internal control relevant to MAPA's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. However, we will communicate to you in writing concerning any significant deficiencies or material weaknesses in internal control relevant to the audit of the financial statements that we have identified during the audit.

We will also communicate to the board of directors (a) any fraud involving senior management and fraud (whether caused by senior management or other employees) that causes a material misstatement of the financial statements that becomes known to us during the audit, (b) any instances of noncompliance with laws and regulations, illegal acts, or abuse that we become aware of during the audit (unless they are clearly inconsequential), (c) any disagreements with management or other serious difficulties encountered in performing the audit, and (d) other matters arising from the audit that are, in our professional judgment, significant and relevant to the board of directors in its oversight of the financial reporting process.

The funds that you have told us are maintained by MAPA and that are to be included as part of our audit is listed here.

- General Fund
- Special Revenue Funds
- Proprietary Fund
- Fiduciary Fund

Our report(s) on internal control will include any significant deficiencies and material weaknesses in controls of which we become aware as a result of obtaining an understanding of internal control and performing tests of internal control consistent with requirements of the standards and circulars identified above. Our report(s) on compliance matters will address material errors, fraud, abuse, violations of compliance obligations, and other responsibilities imposed by state and federal statutes and regulations or assumed by contracts, and any state or federal grant, entitlement, or loan program questioned costs of which we become aware, consistent with requirements of the standards and circulars identified above.

Independence

Our independence policies and procedures are designed to provide reasonable assurance that our Firm and its personnel comply with applicable professional independence standards. Our policies address financial interests, business and family relationships, and non-audit services that may be thought to bear on independence. In addition, our policies restrict certain non-audit services that may be provided by Hamilton Associates, P.C. and require audit clients to accept certain responsibilities in connection with the provision of permitted non-attest services.

The Responsibilities of Management and Identification of the Applicable Financial Reporting Framework

Our audit will be conducted on the basis that management and when appropriate, those charged with governance, acknowledge and understand that they have responsibility:

- a. For the preparation and fair presentation of the financial statements in accordance with accounting principles generally accepted in the United States of America;
- b. For the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error;
- c. For establishing and maintaining effective internal control over financial reporting and for informing us of all significant deficiencies and material weaknesses in the design or operation of such controls of which it has knowledge;
- d. For (a) making us aware of significant vendor relationships where the vendor is responsible for program compliance, (b) following up and taking corrective action on audit findings, including the preparation of a summary schedule of prior audit findings, and a corrective action plan, and (c) report distribution including submitting the reporting package(s); and
- e. To provide us with:
 - (1) Access to all information of which management is aware that is relevant to the preparation and fair presentation of the financial statements such as records, documentation, and other matters;
 - (2) Additional information that we may request from management for the purpose of the audit;
 - (3) Unrestricted access to persons within the entity from whom we determine it necessary to obtain audit evidence;
 - (4) When applicable, a summary schedule of prior audit findings for inclusion in the single audit reporting package; and

- (5) If applicable, responses to any findings reported on the schedule of findings and questioned costs.

As part of our audit process, we will request from management and when appropriate, those charged with governance, written confirmation concerning representations made to us in connection with the audit including among other items:

- a. That management has fulfilled its responsibilities as set out in the terms of this letter; and
- b. That it believes the effects of any uncorrected misstatements aggregated by us during the current engagement and pertaining to the latest period presented are immaterial, both individually and in the aggregate, to the financial statements taken as a whole.

Management is responsible for identifying and ensuring that MAPA complies with the laws and regulations applicable to its activities, and for informing us about all known material violations of such laws or regulations. In addition, management is responsible for the design and implementation of programs and controls to prevent and detect fraud or abuse, and for informing us about all known or suspected fraud or abuse affecting the entity involving management, employees who have significant roles in internal control, and others where the fraud or abuse could have a material effect on the financial statements or compliance. Management is also responsible for informing us of its knowledge of any allegations of fraud or abuse or suspected fraud or abuse affecting the entity received in communications from employees, former employees, analysts, regulators, or others.

Management is responsible for the preparation of the required supplementary information and supplementary information presented in relation to the financial statements as a whole in accordance with accounting principles generally accepted in the United States of America, Single Audit Act and Subpart F of Title 2 U.S. Code of Federal Regulations (CFR) Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards* (Uniform Guidance), and statutory requirements of the State of Nebraska. Management agrees to include the auditor's report on the RSI and supplementary information in any document that contains the supplementary information and that indicates that the auditor has reported on such RSI and supplementary information. Management also agrees to present the supplementary information with the audited financial statements or, if the supplementary information will not be presented with audited financial statements, to make the audited financial statements readily available to the intended users of the supplementary information no later than the date of issuance of the supplementary information and the auditor's report thereon.

The board of directors is responsible for informing us of its views about the risks of fraud or abuse within the entity, and its knowledge of any fraud or abuse or suspected fraud or abuse affecting the entity. Additionally, we expect that the board of directors will timely communicate with us any matters it considers relevant to the audit. Such matters might include strategic decisions that may significantly affect the nature, timing, and extent of audit procedures, or suspicions or detections of fraud or abuse.

Because Hamilton Associates, P.C. will rely on MAPA and its management and board of directors to discharge the foregoing responsibilities, MAPA holds harmless and releases Hamilton Associates, P.C., its partners, and employees from all claims, liabilities, losses, and costs arising in circumstances where there has been a knowing misrepresentation by a member of MAPA's management which has caused, in any respect, Hamilton Associates, P.C.'s breach of contract or negligence. This provision shall survive the termination of this arrangement for services.

MAPA'S Records and Assistance

If circumstances arise relating to the condition of MAPA's records, the availability of appropriate audit evidence, or indications of a significant risk of material misstatement of the financial statements because of error, fraudulent financial reporting, or misappropriation of assets, which in our professional judgment, prevent us from completing the audit or forming an opinion, we retain the unilateral right to take any

course of action permitted by professional standards, including declining to express an opinion, issue a report, or withdraw from the engagement.

During the course of our engagement, we may accumulate records containing data that should be reflected in MAPA's books and records. MAPA will determine that all such data, if necessary, will be so reflected. Accordingly, MAPA will not expect us to maintain copies of such records in our possession.

The assistance to be supplied by MAPA personnel, including the preparation of schedules and analyses of accounts, has been discussed and coordinated with Melissa Engel, Administrative Services Director. The timely and accurate completion of this work is an essential condition to our completion of the audit and issuance of our audit report.

In connection with our audit, you may request us to perform certain nonaudit services necessary for the preparation of the draft financial statements. The independence standards of the "Government Auditing Standards" issued by the Comptroller General of the United States, GAS, require that the auditor maintain independence so that opinions, findings, conclusions, judgments, and recommendations will be impartial and viewed as impartial by reasonable and informed third parties. Before we agree to provide a nonaudit service to MAPA, we determine whether providing such a service would create a significant threat to our independence for GAS audit purposes, either by itself or in aggregate with other nonaudit services provided. A critical component of our determination is consideration of management's ability to effectively oversee the nonaudit service to be performed. MAPA has agreed that Melissa Engel, Administrative Services Director possesses suitable skill, knowledge, or experience and that the individual understands any possible services to be performed sufficiently to oversee them. Accordingly, the management of MAPA agrees to the following:

1. MAPA has designated Melissa Engel a senior member of management, who possesses suitable skill, knowledge, and experience to oversee any nonaudit services.
2. Melissa Engel will assume all management responsibilities for subject matter and scope of any possible nonaudit services.
3. MAPA will evaluate the adequacy and results of possible services performed.
4. MAPA accepts responsibility for the results and ultimate use of possible services.

GAS further requires we establish an understanding with the management and those charged with governance of MAPA of the objectives of nonaudit services, the services to be performed, the entity's acceptance of its responsibilities, the auditor's responsibilities, and any limitations of the nonaudit services. We believe this letter documents that understanding.

Other Relevant Information

In accordance with Government Auditing Standards, a copy of our most recent peer review report is enclosed, for your information.

Fees, Costs, and Access to Workpapers

Our fees for the audit and accounting services described above are based upon the value of the services performed and the time required by the individuals assigned to the engagement, plus direct expenses. Our fees for the services described in this letter will not exceed \$11,000. Our fee estimate and completion of our work is based upon the following criteria:

- a. Anticipated cooperation from MAPA personnel
- b. Timely responses to our inquiries
- c. Timely completion and delivery of client assistance requests

- d. Timely communication of all significant accounting and financial reporting matters
- e. The assumption that unexpected circumstances will not be encountered during the engagement

If any of the aforementioned criteria are not met, then fees may increase. Interim billings will be submitted as work progresses and as expenses are incurred. Billings are due upon submission.

Our professional standards require that we perform certain additional procedures, on current and previous years' engagements, whenever a partner or professional employee leaves the firm and is subsequently employed by or associated with a client in a key position. Accordingly, MAPA agrees it will compensate Hamilton Associates, P.C. for any additional costs incurred as a result of MAPA's employment of a partner or professional employee of Hamilton Associates, P.C.

In the event we are requested or authorized by MAPA or are required by government regulation, subpoena, or other legal process to produce our documents or our personnel as witnesses with respect to our engagement for MAPA, MAPA will, so long as we are not a party to the proceeding in which the information is sought, reimburse us for our professional time and expenses, as well as the fees and expenses of our counsel, incurred in responding to such requests.

The documentation for this engagement is the property of Hamilton Associates, P.C. However, you acknowledge and grant your assent that representatives of the cognizant or oversight agency or their designee, other government audit staffs, and the U.S. Government Accountability Office shall have access to the audit documentation upon their request and that we shall maintain the audit documentation for a period of at least three years after the date of the report, or for a longer period if we are requested to do so by the cognizant or oversight agency. Access to requested documentation will be provided under the supervision of Hamilton Associates, P.C. audit personnel and at a location designated by our Firm.

Claim Resolution

MAPA and Hamilton Associates, P.C. agree that no claim arising out of services rendered pursuant to this agreement shall be filed more than two years after the date of the audit report issued by Hamilton Associates, P.C. or the date of this arrangement letter if no report has been issued. MAPA waives any claim for punitive damages. Hamilton Associates, P.C.'s liability for all claims, damages and costs of MAPA arising from this engagement is limited to the amount of fees paid by MAPA to Hamilton Associates, P.C. for the services rendered under this arrangement letter.

If any term or provision of this Agreement is determined to be invalid or unenforceable, such term or provision will be deemed stricken, and all other terms and provisions will remain in full force and effect.

Information Security - Miscellaneous Terms

Hamilton Associates, P.C. is committed to the safe and confidential treatment of MAPA's proprietary information. Hamilton Associates, P.C. is required to maintain the confidential treatment of client information in accordance with relevant industry professional standards which govern the provision of services described herein. MAPA agrees that it will not provide Hamilton Associates, P.C. with any unencrypted electronic confidential or proprietary information, and the parties agree to utilize commercially reasonable measures to maintain the confidentiality of MAPA's information, including the use of collaborate sites to ensure the safe transfer of data between the parties.

Hamilton Associates, P.C. may terminate this relationship immediately in its sole discretion if Hamilton Associates, P.C. determines that continued performance would result in a violation of law, regulatory requirements, applicable professional standards or Hamilton Associates, P.C.'s client acceptance or retention standards, or if MAPA is placed on a verified sanctioned entity list or if any director or executive of, or other person closely associated with, MAPA or its affiliates is placed on a verified sanctioned person list, in each case, including but not limited to lists promulgated by the Office of Foreign Assets

Control of the U.S. Department of the Treasury, the U.S. State Department, the United Nations Security Council, the European Union or any other relevant sanctioning authority.

If any term or provision of this arrangement letter is determined to be invalid or unenforceable, such term or provision will be deemed stricken and all other terms and provisions will remain in full force and effect.

Reporting

We will issue a written report upon completion of our audit of MAPA's financial statements. Our report will be addressed to the board of directors of MAPA. We cannot provide assurance that an unmodified opinion will be expressed. Circumstances may arise in which it is necessary for us to modify our opinion, add an emphasis-of-matter or other-matter paragraph(s), or withdraw from the engagement.

In addition to our report on MAPA's financial statements, we will also issue the following types of reports:

- A report on the fairness of the presentation of MAPA's schedule of expenditures of federal awards for the year ending June 30, 2018.
- A report which disclaims an opinion on management's discussion and analysis for the year ending June 30, 2018.
- A report which disclaims an opinion on MAPA's comparison of revenues, expenditures and changes in fund balances – general fund for the year ending June 30, 2018.
- A report on the fairness of the presentation of MAPA's schedule of State of Iowa financial assistance for the year ending June 30, 2018.
- Reports on internal control related to the financial statements, and major programs. These reports will describe the scope of testing of internal control and the results of our tests of internal controls.
- Reports on compliance with laws, regulations, and the provisions of contracts or grant agreements. We will report on any noncompliance that could have a material effect on the financial statements and any noncompliance that could have a material effect, as defined by Subpart F of Title 2 U.S. CFR Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards*, on each major program.
- A schedule of findings and questioned costs.

This letter constitutes the complete and exclusive statement of agreement between Hamilton Associates, P.C. and MAPA, superseding all proposals, oral or written, and all other communications, with respect to the terms of the engagement between the parties.

Electronic Signatures and Counterparts

Each party hereto agrees that any electronic signature of a party to this agreement or any electronic signature to a document contemplated hereby (including any representation letter) is intended to authenticate such writing and shall be as valid, and have the same force and effect, as a manual signature. Any such electronically signed document shall be deemed (i) to be "written" or "in writing," (ii) to have been signed and (iii) to constitute a record established and maintained in the ordinary course of business and an original written record when printed from electronic files. Each party hereto also agrees that electronic delivery of a signature to any such document (via email or otherwise) shall be as effective as manual delivery of a manual signature. For purposes hereof, "electronic signature" includes, but is not limited to, (i) a scanned copy (as a "pdf" (portable document format) or other replicating image) of a manual ink signature, (ii) an electronic copy of a traditional signature affixed to a document, (iii) a signature incorporated into a document utilizing touchscreen capabilities or (iv) a digital signature. This agreement may be executed in one or more counterparts, each of which shall be considered an original instrument, but all of which shall be considered one and the same agreement. Paper copies or "printouts,"

of such documents if introduced as evidence in any judicial, arbitral, mediation or administrative proceeding, will be admissible as between the parties to the same extent and under the same conditions as other original business records created and maintained in documentary form. Neither party shall contest the admissibility of true and accurate copies of electronically signed documents on the basis of the best evidence rule or as not satisfying the business records exception to the hearsay rule.

Please sign and return the attached copy of this letter to indicate your acknowledgment of, and agreement with, the arrangements for our audit of the financial statements including our respective responsibilities.

Hamilton Associates, P.C.

A handwritten signature in black ink, appearing to read "Paul E. Hamilton". The signature is fluid and cursive, with the first name "Paul" and last name "Hamilton" clearly legible.

Paul Hamilton, CPA

Confirmed on behalf of Metropolitan Area Planning Agency:

Board Member

Executive Director



MARTENS & COMPANY, CPA, LLP

CERTIFIED PUBLIC ACCOUNTANTS

4949 Pleasant Street, Suite 104

West Des Moines, Iowa 50266

(515)-223-4841

FAX: (515)-223-0851

System Review Report

November 4, 2015

To The Shareholder
Hamilton Associates, P.C.
and the Peer Review Committee of the Illinois CPA Society

We have reviewed the system of quality control for the accounting and auditing practice of Hamilton Associates, P.C. in effect for the year ended March 31, 2015. Our peer review was conducted in accordance with the Standards for Performing and Reporting on Peer Reviews established by the Peer Review Board of the American Institute of Certified Public Accountants. As part of our peer review, we considered reviews by regulatory entities, if applicable, in determining the nature and extent of our procedures. The firm is responsible for designing a system of quality control and complying with it to provide the firm with reasonable assurance of performing and reporting in conformity with applicable professional standards in all material respects. Our responsibility is to express an opinion on the design of the system of quality control and the firm's compliance therewith based on our review. The nature, objectives, scope, limitations of, and the procedures performed in a System Review are described in the standards at www.aicpa.org/summary.

As required by the standards, engagements selected for review included an engagement performed under *Government Auditing Standards* and an audit of an employee benefit plan.

In our opinion the system of quality control for the accounting and auditing practice of Hamilton Associates, P.C. in effect for the year ended March 31, 2015, has been suitably designed and complied with to provide the firm with reasonable assurance of performing and reporting in conformity with applicable professional standards in all material respects. Firms can receive a rating of pass, pass with deficiency(ies), or fail. Hamilton Associates, P.C. has received a peer review rating of *pass*.

Martens & Company, CPA, LLP

Martens & Company, CPA, LLP



AICPA Peer Review Program
Administered in Illinois by the
Illinois CPA Society



ILLINOIS CPA SOCIETY.
Illinois Peer Review Program
Administered in Illinois by the
Illinois CPA Society



ISCPA
IOWA SOCIETY OF CPAs
Iowa Peer Review Program
Administered in Illinois by the
Illinois CPA Society

February 25, 2016

Paul E Hamilton
Hamilton Associates, P. C.
20 Pearl St
Council Bluffs, IA 51503

Dear Mr. Hamilton:

It is my pleasure to notify you that on February 25, 2016 the Illinois Peer Review Report Acceptance Committee accepted the report on the most recent system peer review of your firm. The due date for your next review is September 30, 2018. This is the date by which all review documents should be completed and submitted to the administering entity.

As you know, the report had a peer review rating of pass. The Committee asked me to convey its congratulations to the firm.

Sincerely,

Paul Pierson, CPA
Director, Professional Standards and Peer Review
piersonp@icpas.org 312 517-7610

cc: Richard D Atterbury

Firm Number: 10105446

Review Number 373554

**STATE OF NEBRASKA DEPARTMENT OF ECONOMIC DEVELOPMENT
RURAL WORKFORCE HOUSING INVESTMENT PROGRAM
CONTRACT NO. 17-RWHF-012**

This contract is entered into between the State of Nebraska Department of Economic Development ("Department") and MAPA Foundation ("Recipient") upon the date of signature by both parties.

RECITALS:

A. Pursuant to the Rural Workforce Housing Investment Act ("Act"), found in Neb. Rev. Stat. §81-1226 through § 81-1234, the Department is directed to administer the Rural Workforce Housing Investment Fund ("Investment Fund") and make the funds on deposit therein available to qualified recipients ("Act Funds").

B. The Department has been designated and empowered to receive, administer, and disburse Act Funds to address the limited availability of modern housing units in Nebraska's rural communities. The Department's and the Recipient's use of Act Funds is governed by the Act and the Rural Workforce Housing Fund Application Guidelines ("Guidelines") created by the Department. The Act and the Guidelines are incorporated herein by this reference (collectively referred to as the "Program").

C. The Recipient submitted an application ("Application") to the Department setting forth a local/regional investment fund that will be used to finance housing projects in accordance with the Act. The Application has been approved and is incorporated herein by this reference. The grant of assistance to the Recipient is considered finally approved, and this agreement is intended to govern the Department's administration of Act Funds disbursed to the Recipient.

AGREEMENT:

Premised on the Recitals above and in consideration of the mutual promises and understandings of the parties set forth below, the parties agree as follows:

PART I: TERMS AND CONDITIONS.

§1.01 Amount of Act Funds; Matching Funds.

The Department will disburse Act Funds to the Recipient in a total amount not to exceed: **Three Hundred Fifty-One Thousand Four Hundred Fifty Dollars (\$351,450).**

Matching funds from local sources (as required by the Act) must be contributed prior to disbursement of Act Funds and within sixty (60) days after the effective date of this contract. Under no circumstances may the amount of matching funds be less than 100% of the amount of Act Funds provided by the Department.

In addition to satisfying the minimum matching funds contribution requirement (or otherwise ensuring the matching funds requirement is met), the Recipient is responsible for ensuring that funds are available for any and all costs incurred in completion of projects that exceed the amount of Act Funds provided, that any and all such costs are paid, and that the projects are completed.

Requirements regarding the form, manner, and timing of requests for disbursement are specified in Part IV of this contract.

§1.02 Contract Term.

The term of this contract will be from July 1, 2018 to June 30, 2022 (“Contract Term”). All of the Recipient’s performance obligations under this contract must be completed within the Contract Term.

§1.03 Use of Act Funds.

The Act Funds must be used for the purposes set forth in the Application and as allowed and restricted by the Act and this agreement. If the Recipient fails to engage in an initial qualified activity within twenty-four (24) months after receiving Act Funds, all funds must be returned to the Department. If the Recipient fails to allocate any remaining Act Funds on qualified activities within twenty-four (24) months after engaging in an initial qualified activity, all unallocated funds must be returned to the Department.

The Recipient may begin incurring expenses immediately after receiving a Notice of Award from the Department.

§1.04 Annual Audit.

The Recipient must have an annual audit of all of its financial records conducted by an independent certified public accountant at the Recipient’s cost.

§1.05 Annual Reports.

To assist the Department in obtaining information on the outcome/impact of grant funded projects, the Recipient must prepare and submit to the Department (in a form and manner acceptable to the Department) annual status reports on projects financed through the Recipient’s local/regional investment fund and, if the Recipient ceases administration of an investment fund, a final status report. The reports must include, but are not limited to:

- (a) The name and geographical location of the Recipient;
- (b) The number, amount, and type of workforce housing investment funds invested in qualified activities;
- (c) The number, geographical location, type, and amount of investments made;

- (d) A summary of matching funds and where such matching funds were generated; and,
- (e) The results of the Recipient's annual audit.

All annual reports are due before each February 15th that occurs during the Contract Term. If the Recipient fails to file a complete annual report by the deadline, the Department may impose a civil penalty of up to five thousand dollars (\$5,000).

If requested by the Department, the Recipient will also submit interim status reports during the Contract Term subject to reasonable requirements and due dates as determined by the Department.

All status reports must be submitted to the Department via mail to the Nebraska Department of Economic Development, 301 Centennial Mall South, PO Box 94666, Lincoln, NE 68509-4666 or via such other method as may be designated by the Department.

§1.06 Other Special Conditions.

The Recipient must submit a completed Program Grantee Information Sheet and a completed Authorization to Request Funds form prior to any disbursement of Act Funds.

§1.07 Incorporation of RECITALS.

All provisions of the Recitals above are incorporated as agreed provisions of the contract.

PART II: [RESERVED].

PART III: SOURCES AND USES OF FUNDS.

§3.01 Sources and Uses of Funds.

Sources and Uses of Funds for the Project are shown in the table below.

SOURCES→	RWHF	RECIPIENT MATCHING	TOTAL
USES (Activities)↓			
0583 RWHF Investment Fund	\$351,450	\$351,450	\$702,900
TOTAL	\$351,450	\$351,450	\$702,900

The Recipient is responsible for ensuring that funds are available for any and all costs incurred in completion of the workforce housing projects that exceed the amount of Act Funds provided, that any and all such costs are paid, and that the projects are completed.

PART IV: OTHER CONTRACTUAL CONDITIONS.

§4.01 Designation of Officials to Execute Contract; Amendments.

The Director of the Department or their designee is the official authorized to execute this contract and any amendments to this contract on behalf of the Department.

The Executive Officer of the Recipient or their designee is the official authorized to execute this contract and any amendments to this contract on behalf of the Recipient. By signing this contract, the Recipient certifies that it possesses the legal authority to accept Act Funds under the Program.

Either party may request amendments to this contract; however, amendments will not take effect until mutually agreed to in writing by both parties.

§4.02 Form, Manner, and Timing for Disbursements of Act Funds; Related Requirements.

Disbursement of Act Funds will be made to the Recipient in accordance with the requirements in Part I of this contract and in the form and manner determined by the Department.

Prior to disbursement, the Recipient must submit all of the following to the Department:

- 1) The State of Nebraska ACH Enrollment Form (provided by the Department);
- 2) An IRS Form W-9; and,
- 3) Any other required state or federal tax documentation required by the Department.

All requests for disbursement must be submitted to the Department in the form and manner specified by the Department and must include any supplemental documentation the Department may require. Requests must be made via mail to the Nebraska Department of Economic Development, 301 Centennial Mall South, PO Box 94666, Lincoln, NE 68509-4666 or via such other method as may be designated by the Department. The requests will be reviewed by the Department to determine compliance with the requirements of the Act, the Application Guidelines, and this contract. If authorized, payments will be processed through the Department's office in Lincoln, Nebraska and will be made by electronic deposit to the account designated by the Recipient on the State of Nebraska ACH Enrollment Form (or by such other method as deemed appropriate by the Department).

§4.03 Accounting For Funds by the Recipient.

A separate bank account for the Act Funds is required, and the Act Funds must be accounted for separately in the books and records of the Recipient in such a manner as to allow funds tracing and a current status review of the Act Funds at all times.

Upon request, the Recipient must provide evidence to the Department that other sources of funding for the Project have been contributed pursuant to the Application and the Sources and Uses of Funds Table contained in §3.01.

The Recipient must keep all records concerning the Act Funds in a manner which is consistent with generally accepted accounting principles. Payments from Act Funds will be obligations incurred in the performance of this contract and must be supported by contracts, invoices, brochures, and other data, as appropriate, evidencing the necessity for such expenditures.

§4.04 Early Termination.

The Department may terminate this contract for any reason upon sixty (60) days written notice to the Recipient. This contract may also be terminated, in whole or in part, prior to the end of the contract term when both parties agree that continuation is not feasible or would not produce beneficial results commensurate with the further expenditure of funds. In the event of mutual termination, the parties must agree on the termination conditions, including effective date and the portion to be terminated.

The Recipient may not incur new obligations for the terminated portion after the effective date and must cancel as many outstanding obligations as possible. If a release of funds has been achieved, the Department will make funds available to the Recipient to pay for allowable expenses incurred before the effective date of termination.

§4.05 Suspension or Termination of Contract for Material Breach.

In the event of a material breach of the terms of this contract by the Recipient, the Department may take the following actions:

- (a) Suspend the contract, withhold further payments, and prohibit the Recipient from incurring additional obligations pending corrective action by the Recipient.
- (b) Terminate the contract, in whole or in part, at any time before contract completion. The Department will notify the Recipient in writing of the determination of, the reasons for, and the effective date of the termination. Payments made to the Recipient or recoveries by the Department will be in accord with the legal rights and liabilities of the parties. The Recipient will return to the Department all unencumbered funds. Any costs previously paid by the Department which are subsequently determined to be unallowable through audit and close-out procedures may be recovered from present Act Funds or deducted from future awards to the Recipient, if any.

§4.06 Termination of Contract Due to Loss of Funding to Department.

This contract may terminate in full or in part, at the discretion of the Department, in the event the Department suffers a loss of funding which permits it to fund the Recipient.

In the event the Department suffers such a loss of funding, the Department will give the Recipient written notice which will set forth the effective date of full or partial termination or, if a change in funding is required, setting forth the change in funding and the changes in the approved budget.

§4.07 Force Majeure.

Neither party shall be liable for any costs or damages resulting from its inability to perform any of its obligations under the contract due to a natural disaster or other similar event outside the control of and not the fault of the affected party ("Force Majeure Event"). A Force Majeure Event shall not constitute a breach of the contract. The party so affected shall immediately give notice to the other party of the Force Majeure Event. The Department may grant relief from performance of the contract if the Recipient is prevented from performance by a Force Majeure Event. The burden of proof for the need for such relief shall rest upon the Recipient. To obtain release based on a Force Majeure Event, the Recipient must file a written request for such relief with the Department.

Labor disputes with the impacted party's own employees will not be considered a Force Majeure Event and will not suspend performance requirements under the contract.

§4.08 Waiver in Writing/Non-Waiver; Assignment of Interest; Severability.

No conditions or provisions of this contract can be waived unless approved by the Department in writing. The Department's failure to insist upon the strict performance of any provision of this contract or to exercise any right based upon breach will not constitute a waiver of any rights under this contract.

The Recipient may not assign any interest in this contract without the written consent of the Department. Any unauthorized assignment will be deemed a material breach of this contract.

If any provision under this contract or its application to any person or circumstance is held invalid by any court of competent jurisdiction, such invalidity will not affect other provisions of this contract.

§4.09 Recordkeeping; Records Access.

All records relating to this contract must be retained for at least three (3) years after the end of the contract term. If any claim, litigation, or audit is started before the expiration of the three (3) year period, the records must be retained until all claims, litigation, or audit findings are resolved.

The Department and any other duly authorized official of the State of Nebraska must have full access to and the right to examine, audit, excerpt or transcribe any of the Recipient's records pertaining to this contract.

The Department may conduct performance review monitoring visits and may audit the Recipient's records, including records that pertain to the required matching contribution, for compliance with this contract. In addition, a cost certification audit may either be conducted by the Department or requested by the Department to be done by independent accountants at the Recipient's expense.

§4.10 Conflicts of Interest.

No officer, employee, or agent of the Recipient will participate in the selection or the award or administration of a contract supported by Act Funds if a conflict of interest, real or perceived, would be involved. Such a conflict would arise when the officer, employee, or agent; any member of the immediate family of the officer, employee, or agent; any partner of the officer, employee, or agent; or any organization which employs or is about to employ any of the above has a financial or other interest in the firm selected for award.

The Recipient's officers, employees, or agents will neither solicit nor accept gratuities, favors, or anything of monetary value from contractors, potential contractors, or parties to sub-agreements during office tenure or for one year after the closeout of any project financed with Act Funds. This stipulation must be included in all other contracts and subcontracts related to projects financed with Act Funds.

In the event a prohibited conflict of interest arises, the Recipient must immediately inform the Department. Upon written request, exceptions may be granted by the Department on a case-by-case basis when it is determined that such an exception will serve to further the purposes of the Program.

§4.11 Applicability to Subrecipients and Contractors; Registration Requirements.

All provisions of this contract and the requirements of the Program will be made binding on any subrecipient or contractor of the Recipient, and the Recipient will, nonetheless, remain fully obligated under the provisions of this contract.

Any such subrecipient or contractor of the Recipient must be authorized to transact business in the State of Nebraska. All subrecipients and contractors are expected to comply with all Nebraska Secretary of State and Department of Revenue registration requirements, including any registration requirements pertaining to types of business entities (e.g. person, partnership, foreign/domestic limited liability company, association, or foreign/domestic corporation). Construction contractors are expected to meet all applicable requirements of the Nebraska Contractor Registration Act and provide a current, valid certificate of registration to the Recipient for the Recipient's records.

Upon request, the Recipient must submit copies of written agreements executed between the Recipient and any subrecipients or contractors relating to any projects financed with Act Funds.

§4.12 State Non-Liability/Hold Harmless.

The Recipient must hold the State of Nebraska and the Department harmless from any and all claims, demands, and actions based upon or arising out of any services performed by the Recipient or its associates, employees, contractors, or subcontractors under this contract.

§4.13 Relationship of the Parties.

Nothing in this contract should be construed in any manner as creating or establishing the relationship of partners between the parties, nor shall either party have the right, power, or authority to create any obligations or duty, express or implied, on behalf of the other party.

Any and all claims on behalf of any person arising out of employment or alleged employment (including, but not limited to, claims of discrimination) against the Recipient, its officers, or its agents will in no way be the responsibility of the Department. The Recipient must hold the Department harmless from any and all such claims.

§4.14 Verification of Lawful Presence for Public Benefits Eligibility.

The Department of Economic Development is prohibited by state law (Neb. Rev. Stat. §4-108) from providing public benefits to persons not lawfully present in the United States. Public benefits are statutorily defined broadly (see Neb. Rev. Stat. §4-109); however, some exemptions from the verification of lawful presence requirement are set forth in Neb. Rev. Stat. §4-110.

In administering its local/regional investment fund, the Recipient may be providing public benefits to individuals or households under the statutory definition of public benefits. Consequently, pursuant to Neb. Rev. Stat. §§4-108 through 4-114, the Recipient may be required to have each individual who receives a public benefit complete the United States Citizenship Attestation Form found on the State of Nebraska Department of Administrative Services website at www.das.state.ne.us. The Attestation Form serves as the individual's attestation that he or she is a U.S. citizen or a qualified alien under the federal Immigration and Nationality Act (8 U.S.C. 1101 et seq.). If the individual attests they are a qualified alien, the Recipient must verify the applicant's lawful presence in the United States using the Systematic Alien Verification for Entitlements (SAVE) Program.

If applicable, the Recipient must:

1. retain the attestation form and any additional verification documentation required because an individual attested they were a qualified alien;
2. provide such attestation form and other documentation (or copies thereof) to the Department upon request;

3. maintain aggregate records for the duration of the contract showing: (a) the number of individuals who received public benefits and (b) the number of individuals rejected pursuant to the lawful presence requirement; and,
4. provide a summary report to the Department no later than December 31st each calendar year reflecting data for such calendar year (or portion of such year when there is not a full calendar year of activity under this contract) so that the Department can fulfill its annual reporting obligation to the Nebraska Legislature concerning these lawful presence requirements.

§4.15 Verification of Work Eligibility Status for New Employees.

The Recipient is required and hereby agrees to use a federal immigration verification system to determine the work eligibility status of new employees physically performing services within the State of Nebraska.

In this context, "new employees" means employees hired on or after the effective date of this contract. A "federal immigration verification system" means the electronic verification of the work authorization program authorized by the Illegal Immigration Reform and Immigrant Responsibility Act of 1996 (8 U.S.C. 1324a), commonly known as the E-Verify Program, or an equivalent federal program designated by the United States Department of Homeland Security or other federal agency authorized to verify the work eligibility status of a newly hired employee.

This contractual obligation to verify work eligibility status for new employees physically performing services within the State of Nebraska also applies to any and all subcontractors utilized by the Recipient in performing this contract. The Recipient will be responsible to the Department for enforcing this requirement with its subcontractors.

A failure by the Recipient to adhere to these requirements violates the statutory requirements in Neb. Rev. Stat. §4-114 and, as such, will be deemed a substantial breach of this contract which could result in the Department declaring the Recipient to be in default on the contract.

§4.16 Authorization of Project Publicity; Information Sharing; Project Photographs.

Prior to announcing or referring to projects or project activities financed with Act Funds in news releases, press conferences, or other media, the Recipient must inform the Department and, if requested, include an acknowledgement or reference to the funding made available for the projects or project activities under this contract.

The Recipient agrees to allow the Department to issue news releases and otherwise share information and/or make announcements about projects financed with Act Funds. The Department is not required to obtain any approval, written or otherwise, from the Recipient prior to releasing information.

The Recipient agrees to provide the Department with before and after photographs of projects financed with Act Funds whenever possible and agrees to obtain written consent from the homebuyers, renters, or owner-occupiers when necessary.

§4.17 Notification of Staff Changes.

The Recipient must make reasonable efforts to keep the Department informed of changes in key staff members that relate to any projects financed with Act Funds.

§4.18 Notice.

Except as otherwise expressly specified herein, all notices, requests, or other communications shall be in writing and shall be deemed to have been given if delivered personally or mailed by U.S. Mail, postage prepaid and return receipt requested, to the parties at their respective addresses set forth in the Application, in this contract, or at such other addresses as may be specified in writing by either of the parties. All notices, requests, or communications shall be deemed effective upon personal delivery or four (4) calendar days following deposit in the mail.

§4.19 Entire Agreement, Binding Effect, Counterparts; Governing Law.

This contract, along with any attachments, the approved Application, and those items incorporated by reference, contain the entire agreement between the parties. Any statements, inducements, or promises not contained therein are not binding upon the parties.

This agreement will be binding upon and will inure to the benefit of the successors, assigns, and legal representatives of the parties.

This agreement and any amendment of this agreement may be signed in any number of counterparts; each of which will be considered an original, and all of which taken together will constitute one agreement or amendment, as the case may be.

This agreement shall be governed by, construed according to the laws and regulations of, and subject to the jurisdiction of the State of Nebraska.

PART V: SPECIAL REQUIREMENTS AND ASSURANCES.

§5.01 Americans with Disabilities Act (ADA).

The Recipient agrees to comply with all provisions of the Americans with Disabilities Act (ADA) with respect to hiring, training, and employment practices, including reasonable accommodation of persons with disabilities in hiring, training, and employment practices; and in assuring access by persons with disabilities to facilities and services provided by the Recipient to the general public.

§5.02 Civil Rights Law and Equal Opportunity Employment.

The Recipient agrees to comply with all applicable local, state, and federal statutes and regulations regarding civil rights law and equal opportunity employment. The Recipient shall not discriminate against any employee or applicant for employment with respect to the employee’s or applicant’s hire, tenure, terms, conditions, or privileges of employment because of his or her race, color, religion, sex, disability, or national origin.

§5.03 Drug Free Workplace Policy.

The Recipient acknowledges the State of Nebraska requires a Drug Free Workplace Policy on the part of the Recipient as a term and condition of contracting with the Department.

ACCEPTANCE PROVISIONS.

The parties acknowledge they have read and understand this contract, they agree to its provisions, and that it will be effective on the date when both parties have signed.

NEBRASKA DEPARTMENT OF ECONOMIC DEVELOPMENT	RECIPIENT → MAPA Foundation
By: _____ (Director or Designee)	By: _____ (Authorized Official)
_____ (Typed or Printed Name/Title)	_____ (Typed or Printed Name/Title)
_____ (Date)	_____ (Date)